30.	ASS, REC, BY:		REP CS MSG1	9010419/D	vd3 Preside	- Initroclina:
-	Buryeupr : P	U.		MENT (Office)		724
	From (Person)	Org zi Hui	of	Msig	The	12/6/19/3 10.43cm
A. Prov		STTP RES / OD RE	0.10011.10001.000	Bill to:		
	To Inspect Ve		SHA	1498	Inspeed:	SMDGASIE
	at Workshop i			Motor	Tel:	65425119
	of	1	tok Antonio	+ #01-05	106	
-	Policy No.	A8046500	RIAMX	Chim No:	. 59:	5975
	Sum housed:			Excess:		
vc.	Make of Veh:				D.	0.A 7/6/19
		REP. / REV 24 H 11:0321m312/6/11		od: Lynn-		H.O.D. Endossement
	Date/Time	Action/Instruction	Lishmald 1	1		
			- NAVINCTOU			BOA: 18/9/16
	19/6/19	Send preli	revised via	merimen		

AS	SIGNMENT COE May 2024
Paratra Existen	Vehille SHA 21498 VILLEY 2016 May
Lalimated Cost	Type: M.Car J M.Cycle J Hun / Van J Lorry J Carl Prime Mover J
OD LIP / WS / IF RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Respect Vehicle No.	Make Hyundai I40 1685
.d Workshop mb.	Gulenn Blue A)C Innured / Std / NE / NA
of	Sp.Reading 456207 Titladic traured / Std / MI / NA
Insured:	Eng/No D4FDGU624279
Policy No.	KMHLB41UMGU089707
Clames No.	Gen. Cond. 69d1Fair / Poor / Burnt
Sum historic Excess:	Sleering Ino (d) / Januared / Leaked / Durat or
(Client's Record)	Brake: Inode / Jammed / Leaked / Burnt or
Make of Volu	Modi S/Rim / STD A/Rim or
	Tyro Slan F: 205 60 716
(Policy Condition)	R: — 11 —
Remark. The veh had commenced its. N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYOTYOKO OF Henkook
Bal: or Mirket Value.	Eront Beac
IDAC Accident Rport Consistent? Yes or No	PATRICE S mm RATRICE S mm
GIA / PR Seem: 16 Consistent? Yes or No	LATAL S mm LATAL S mm
Est Ropairs 1413 days Res: Yes or No	DOA 07/06/249 1101 12/06/249
Lum Sum. 20 % 3 Val. Yes or No	Survey hold at Chunni AMK
CA / REV / REP. / 24 HRS	Des. of Danuages: Frt. / Rear. / O/S / N/S / U/C / Rooftop or
Vehicle, IN J OUT Date: Person Contacted:	H 3 Pront
The state of the s	The U/C / Chassis frame / Body Structure affected due to collision.
MSIG SMD 6481E	***
12/07/19 Junepa 4/5 20,000/itu	. 16 days of red 17,460.90,
	45%
RECEIVE	D 1 7 JUL 2019 .
1120211	
Dolerlano, Fite Pars to? : Preli. Report	Days Of Repair: 16
Fide/Time, File Birthan 167	Resurvey No. of Trip: Survey For:
16/1 - typist Add Fee	
	Interview (\$ press. 11
Report Format : Merumen	Tests Invs (\$) (then
.ump Sum / LB.1: (3 20,000 2)	Westernot (\$
	1010 261

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933 Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

From: LKK Auto Consultants Pte Ltd MSIG Insurance (Singapore) Pte. Ltd. To: 51 Ubi Ave 1 #01-25 4 Shenton Way #21-01 SGX Centre 2 Paya Ubi Industrial Park Singapore 408933 Singapore 068807 19 Jun 2019 Date: Attn: Jowyn Tay Mei Ling

Preliminary Advice

Insured Vehicle No	: SMD6481E		
TP Vehicle No	: SHA2149S	Accident Date	: 07/06/2019
Make	: HYUNDAI 140	Assignment Date	: 13/06/2019
Date of Inspection	: 12/06/2019	Est. Duration of Repair	: 12.00
Inspection At	: BLK 10 ANG MO KIO INDUSTRIA SINGAPORE 568047 REPAIRER: CHUNNI MOTOR W	AL PARK 2A, #01-05/06 AMK AUTOP ORK PTE LTD	OINT

Point of Impact / General Description of Damages

Salvage Value

Margin for Repair

The vehicle sustained impact / damages n/s front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	38,460.92	
Revised Amount	:5\$	19,409.24	
Check Items (Estimated)	:S\$	0.00	
Total	:S\$	19,409.24	
Lump Sum Repair	:S\$		
Total Loss Consideration			
New for Old Value	:S\$		
Pre-Accident Value	:5\$		
COE / PARF Rebate	:S\$		

:S\$

:8\$

Re	mari	rks		
()	The vehicle is economical/not economical for repair.		
(2	()	The above survey was conducted on a 'without prejudice' basis.		

...CLAIM SUBFOLDER...(Pending for Survey Report)

Case 1	votified	Est Submitted	Adt Assigned	Adj Rpt	Arti Sub	mitted	Ins Authled	Status		
	11 Jun 2019		13 Jun 2019 09:10 Edit Adj Rpt					Pending Report Cancel C	STATE OF THE PARTY	vey
М	ain.	Ret	ference		Claim Details		Documer	nts	5	how All
CLAIM SUB	FOLDER DE	TAILS				[Creat	ed by insurer]			
Insured:	WONG TA	K CHOY, ID: 52	018309H, Tel:	+65967529	87, Email: miki	olosky19	50@gmail.com			
Main Claimant:	COMFORT	TRANSPORTATI	ON PTE LTD,	Co. Reg. N	o.: 199303821R					
Vehicle Reg. No.:	SHA214	SHA21495					2019 10:00 ~ :59 oths and 20 Days	From LTA Reg	Date (N	fan Yr)]
Claim Type:	TP / 595	975		Policy/Cover Note No.:		091QMX (Comprel ge: 07/12/2018 - 0				
Vehicle Reg. No. (Insured):	SMD6481	E			Policy No. (Claimant):					
					Excess:	5\$500.				
Repairer:	Soon Hoc 64836016	k Motor Pte Ltd (HQ) Blk 10 Ang	Mo Kio Ind	ustrial Park 2A, 4	01-05/0	6 AMK Autopoint,	568047 Ang 1	Mo Kio -	Tel:
Handling Insurer:		urance (Singapo								
Adjuster:		Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Handled by I	BRYAN T	ANI] [Imm.	dvice due	14/06	2019]
Driver/Custo dian (Insured):	WONG TAI	CHOY (68 / Male) , NRIC: \$20	18309Н, Т	el: +6596752987	Email: r	nikolosky1950@gr	nail.com		
Adj Asg. Remarks:	(MANUAL	(MANUAL ASSIGNED), on WP. LIAB:DISPUTE. IRENE 6542 5119/6542 7162								
ASSOCIAT	ED MAIL RE	CEIVED						View All	Compose	Case Ma
There are no	mail for this	case,								
ALL ASSO	CIATED TAS	SKS ⁼				View	All Search Tasks	Create Ne	w Task	Comple

Nivitha (LKK Auto)

From:

Ong Zi Hui <zihui_ong@sq.msiq-asia.com>

Sent:

Wednesday, 12 June 2019 10:43 AM

To:

assignments@lkkauto.com; admin-d@lkkauto.com

Cc:

Crystal Lee

Subject:

FW: Accident involving veh no: SHA2149S & SMD6481E on 07.06.19 (CAR IN

12/6/19) AMK AUTOPOINT

Attachments:

11062019091008.pdf

Accident involving veh no: SHA2149S & SMD6481E on 07.06.19 (CAR IN 12/6/19) AMK AUTOPOINT

Manual Assigned

Dear LKK.

Refer to the email below, please survey the vehicle.

We'll assign via Merimen once we receive the assignment from Motor Team.

Please contact us ASAP if you cannot attend this assignment.

Thank you.

Ong Zi Hui

Admin Officer, Claims Serivces

D: +65 6643 1320 | F: +65 6225 7402 | zihui_ong@sg.msig-asia.com



MSIG

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220

9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg







A Member of MS&AD INSURANCE GROUP

From: Chunni Motor [mailto:chunnimotor@gmail.com]

Sent: Tuesday, 11 June 2019 3:30 PM

To: Motor Survey <motorsurvey@sg.msig-asia.com> Cc: Nabilah Rasol <nabilah rasol@sg.msig-asia.com>

Subject: Fwd: Accident involving veh no: SHA 2149S & SMD 6481E on 07.06.19

EXTERNAL EMAIL: Be careful when you click any links or open any attachment(s).

----- Forwarded message ------

From: Chunni Motor < chunnimotor@gmail.com>

Date: Tue, Jun 11, 2019 at 10:48 AM

Subject: Fwd: Accident involving veh no: SHA 2149S & SMD 6481E on 07.06.19

To: <motorsurvey@sg.msig-asia.com>

Cc: Nabilah Rasol <nabilah rasol@sg.msig-asia.com>

----- Forwarded message -----

From: Chunni Motor < chunnimotor@gmail.com>

Date: Tue, Jun 11, 2019 at 9:20 AM

Subject: Accident involving veh no: SHA 2149S & SMD 6481E on 07.06.19

To: <motorsurvey@sg.msig-asia.com>

Dear Sir/Mdm.

We refer the above mentioned matter.

We enclosed herewith the relevant documents for your necessary action.

In line with the new protocol, kindly provide us with the list of surveyors on your panel for assessment of the damaged accident taxi involved.

Kindly survey at AMK Autopoint, Soon Hock Motor,#01-05/06.

Please appoint your In house surveyors.

Should you have any queries, please do not hesitate to contact Ms Lynn or Ms Irene at 65425119 or 6542 7162

Thank you for your kind assistance.

CONFIDENTIALITY NOTICE

This e-mail (including any attachments) may contain information that is privileged or confidential. The sending of this e-mail to any person other than the intended recipient is not a waiver of the privilege or confidentiality that attaches to it. If you are not the intended recipient, please notify the sender immediately, delete the email and do not copy, distribute or disclose its contents.

MCD619074693 / ComfortDelGra Engineering Pte Ltd - Layeng ENTRY DATE & TIME: 08/00/2019 12:12 SUBMITTED BY: Calherine Por May Juan

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 11/06/2019 07:09

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an edmission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 5. This report will be ferworded by the insurers of the GIA Records Management Centre established by the General insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the ledgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

sforesaid.	1990 17 90 W 18
	ACCIDENT STATEMENT
Date Of Report	08/06/2019 12:12
Date Of Accident	07/06/2019 10:45
Exact Location Of Accident	WEST COAST RD X JUNCTION OF PASIR PANJANG.
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHA2149S
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	140
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088935MFSH
Cover Note Number	
Driver	
Name of Driver	ONG CHIN PENG
NRIC No	\$1171812D
Date Of Birth	18/09/1956
Occupation	OUTDOOR
Date Of Driving Pass	11/10/1976
Driving Experience	42 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92386955
Describe and the reserve	

NOEMAIL

Soon Hock

Address

129 08-1545 ANG MO KIO AVENUE 3

Postcode

560129

NO Was driver an employee of the Insured's Company

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - TAXI DRIVER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CROSS JUNCTION

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

Passenger 1

YES NO

2

NAME:

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

NO

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

TECK GHEE NPP

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

SEE POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMD6481E

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

WONG TAK CHOY

NRIC/Passport Number

S2018309H

Contact Number

96752987

Address

Postcode

Insurance Company Name

Nature Of Damago

FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1				
Name	ONG CHIN PENG			
Approximate Age	63			
Injurios Sustain	BACK,LEG			
Injured person in which vehicle?	SHA2149S			
Were seat belts worn?	YES			
Was this injured conveyed to hospital by ambulance?	YES			
Address				
Postcode				

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

> Policyholder's Signature Date & Time: 08/06/2019

Driver's Signature

(If driver is not the policyholder) Date & Time: 08/06/2019@10:45hrs

Name: -

Reporting Centre Personnel's Signature

NRIC/FIN No .:

SIM Victor Silvelow C.

I/We declare the foregoing particulars are true in every respect.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

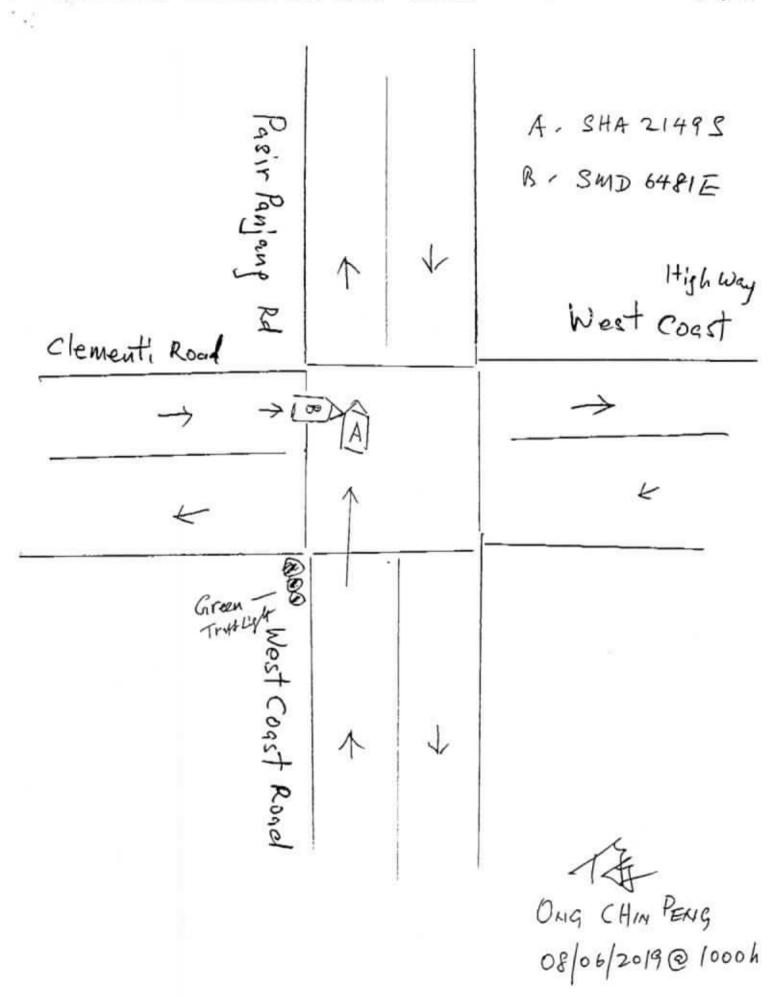
> Policyholder's Signature Date & Time:08/06/2019

DESERTE SANCERSON FROM AN

Oriver's Signature (If driver is not the policyholder) Date & Time: 08/06/2019@ 10:45hrs Lisa Diong

Reporting Centre Personnel's Signature Name: *

NRIC/FIN No.:







Report No. T/20190607/2138

Police Station Of Origin:

Teck Ghee NPP

321 Ang Mo Kio Street 31 SINGAPORE

560321

Tel No: 1800-4599999

REPORT OF A TRAFFIC ACCIDENT

1 of 3

Date/Time Report Made: 07/06/2019 17:00			Vide Report No.:	Station Diary No.:		
Informa	nts Partici	lacs	Market Market Street			
Name of Informant: ONG CHIN PENG			Address: APT BLK 129 ANG MO KIO AVENUE 3 #08-1545 SINGAPORE 560129			
ID Type / ID No.: NRIC NO / S1171812D			Contact No.: Home/Office: Mobile: 92386955			
National SINGAP	ity: ORE CITIZ	EN .	Email:			
Sex: Age: Date of Birth: Male 62 18/09/1956			Type of Informant: Driver			
Race: Chinese			Language: Institution / School Name			
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:			

GeneralInform	ation of the Acciden	the X	10 m	一个人,大型的人的	CHARLES AND A COLUMN
Type of Accident:	Injury Conveyed By Amb		Drink Drive: No	Date/Time of Accident: 07/06/2019 10:4	Type of Location: Cross Junction
Location: Along Road 1 WEST COAST Towards Pasir	-1 555	8			FC 2
Weather: Drizzling	D)	Road Wet	Surface:	Di .	Road Speed Limit:
Traffic Flow: Two Way	9 2 3		c Control: c Light - Wo	king	Traffic Volume: No Traffic
Type of Collision Between Movin	on: ng Vehicles - Head To	Side			Anyone conveyed by ambulance:

Details of Vehicle Involved						
Vehicle No.	Tiype	Make	Model	Color	Condition	No of Passentier
SHA2149S	Car				Seriously Damaged	(17)
SMD6481E	Car				Seriously Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

2 of 3

Report No. T/20190607/2138





Police Station Of Origin: Teck Ghee NPP 321 Ang Mo Kio Street 31 SINGAPORE 560321

2

Tel No: 1800-4599999

CONTINUATION OF REPORT

DRIVER						
Name	ONG CHIN PENG			ID No.		S1171812D
Related Vehicle	SHA2149S (Car)		16	Conta	ct No.	92386955
Hospital/Clinic	NATIONAL UNIVER	SITY HOS	PITAL	Class Driving Licence Expiry	e &	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	07/06/2019		Date Dis	charge	07/06	/2019
	ted Medical Leave	04	Degree o	of Injury	Slight	
Dinvair					-	
Name	WONG TAK CHOY			ID No.		S2018309H
Related Vehicle	SMD6481E (Car)			Conta	ct No.	96752987
Hospital/Clinic	NIL .	*	-	Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL .		Date Dis		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree	of Injury	NIL	

Brief Details.

On 07/06/2019 at about 1045hrs, I was driving vehicle bearing SHA2149S along West Coast Road towards Pasir Panjang.

At that point of time, my vehicle was stationary as the traffic light was red. Subsequently, when the traffic light turned green I proceeded to move off. Suddenly, another vehicle bearing SMD6481E came from Clementi road toward West Coast rammed onto the front left side of my vehicle.

After which, I was conveyed by Ambulance to NUH.





Police Station Of Origin: Teck Ghee NPP 321 Ang Mo Kio Street 31 SINGAPORE 560321 Tel No: 1800-4599999 . 3 of 3 Report No. T/20190607/2138

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 1 YEE JIA WEI JONATHAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/06/2019 17:00
Officer In Charge Of Case: TP / GIT / SI MOHAMMAD ABDILLAH BIN PALIL Contact No.: 65476246	Classification Of Case:
Authentication Stamp NP168 Sin	gapore Police Force

CHUNNI MOTOR WORK PTE LTD

REPAIR ESTIMATE*

MAKE

VEHICLE NO: SHA 2149S :

DATE : 10.06.2019

TEL : 6542 5119 4

: HYUNDAI i40 MODEL FAX : 6542 6039 MSIG

ODEL	: HYUNDAI i40		: 6542 6039	MS	_	i
Qty	Parts Description/ Labour	Type	Unit Price	-	Amount	
	Front Bumper Cover Broken			S	1,052.20	
	Front Bumper Grille (LH) NA			S	93.60	X
	Front Bumper Grille Airduct (LH) braken			3	26.20	_
	Front Bumper Bracket (LH) broken			S	24.60	
	Headlamp Support Top Cover NN			S	222.60	
	Headlamp Support Panel Assy 164 broke			\$	907.40	-
	Headlamp (LH) briken			S	1,388.00	7
	Headlamp Halogen Bulb (LH) HA			S	14.40	×
	Front Fender (LH) Buc			\$	663.00	_
	Front Fender Apron Panel (LH) Deutel			S	637.00	1775
	Front Fender Shield (LH) old med			S	174.90	l .
	Air Cleaner Bottom Assy long Kee			S	325.00	- C
	Front Door (LH) Dendand			S	2,256.40	l .
	Front Door Rubber NAL			\$	290.50	12/07
	Front Door Gear / Regulator (LH) Ha			S	250.60	1.15.15.15
	Front Door Power Motor, LH		200	5	172.70	1×
	Rocker Panel Outer Garnish 44		1	S	341.40	_
	Front Pillar Upper Cover/Garnish M-1			S	83.50	×
	Front Windscreen Pillar Outer(LH) A Ded A			\$	1,745.50	2
	Front Windscreen Moulding 🥕 🛶 ८			\$	113.30	7-
	Front Wheel Rim (LH) 🝣 🖐			\$	325.30	-
	Front Wheel Hub Cap (LH)			S	107.10	_
	Front Wheel Bearing 7 D. w			5	540.50	20
	Front Shock Absorber (Assy) (LH) 2 184			S	342.20	2-
	Front Shock Absorber Mounting (LH)			S	108.80	×
	Front Drive Shaft (LH) * Dem			S	1,030.80	2 -
	Rack & Pinion Assy & Dow			S	1,191.30	2 4
	STG Tie End & dustrible			5	62.60	2-
	Stabilizer Bar 2 ohshuhu			\$	252.30	2-
	Stabilizer Bar Bush (LH) Ha		}	S	16.40	×
	Stabilizer Bar Link 2 154			S	61.10	7
	Stabilizer Bracket HH			S	24.00	×
	Front Suspension Lower Arm (LH) 2 144			5	529.30	3-
	Knuckle Arm (LH) Z dastoni			s	552.00	2.
	Engine Under Cover Ha			S	334.60	X
	Engine Crossmember 2 dustons			S	2,094.40	7L
	Gearbox HA Profest Dom		6000.0	DS	14,808.00	* L
	Gearbox Mounting 44		SH	S		10000
	ABS Sensor (LH) HH			- 5		100
	Wiring-Engine Z nowing broken		1	S		200
	Electric Power Steering			S		
	The state of the s		2 - 2/2 3 -			×
	SUB TOTAL		20360:30	S	40,579.90	1
	LESS 20%		11-09311	5	8,115.98	
			16280.4	6	32,463.92	1
	DISCOUNTED TOTAL		1 20	3	32,403.72	+

				SHA 2149S	
Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Front Fender Advertisement Logo (LH) Hec			\$ 100.00	Nett -
	Front Door Comfort Logo (LH) LLC			\$ 75.00	Nett —
	Front Door Advertisement Logo (LH) Hec			\$ 100.00	Nett -
	Front Tyre (LH) 3VL			\$ 216.00	Nett X
1	Front Windscreen Sealant > > Lc		1	\$ 46.00	Nett -
	(1)		6321.80		
			0.	\$ 537.00	
					1
	Labour Charge				
	Panel Beating			\$ 1,500.00	1000
1	Spray Painting Charge			\$ 1,000.00	800-
1	Wiring Charge			S -50:00	301-
1	Tuff Kote			S 1 00:00	401-
	Towing Charge			\$ 50.00	
	Transfer of Door			S 120.00	601-
	Remove/Refix Undercarriage (FRT)			\$ 200.00	
	FRT Wheel Alignment			\$ 120.00	601-
	Remove/Refix Aircon & Refill Gas			\$ 150.00	
1	Remove/Refix Gearbox Engine		2800.00	S 450.00	HAL 200
	Remove/Refix Dashboard		2800	\$ 450.00	- 1801 -
	Remove/Refix Fuse Box			S 180.00	a 501-
	Remove/Refix Front Windscreen Glass			\$ 120.00	1
1	Remove/Refix Cushion & Upholstery Front			\$ 90.00	MA
	Re-set Frt ABS System			\$ 200.00	2
	Re-set Frt Power Window System			\$ 200.00	(150/-
	Diagnostic & Resetting To Erase Fault Code			\$ 480.00	7.001.
	>				
	TOTAL LABOUR			\$ 5,460.00	1
	My The				1
	ESTIMATE TOTAL			\$ 38,460.92	
			75479 211		1
	12/06/2019 @ 1100ms		00101.14		
		Ho	25409.24	1	
	Not student	45	00000	}	
	LISHU IX WE	l			
	_	LIVE	Auto Consultants henc	notify.	1
	(Tyan) 1/2/3.		epairer of the following		ı
	16	. To se	survey before/after spray pa	nting	ı
	LKK ANDO		solay damaged part(s) during prices are subject to confir		1
	25		party survey is on a "Witho		1
	<	+ No it	legal modification(s) is allow	d	1
		* Supp	dementary item(s) must be a bect to final approval from t	surveyed and surance Company	1
		190000	and the second		
	This is an initial estimate based on a visual inspection of the	above ve	thicle. The final renai	r quantum will	1
	be prepared after the vehicle is surveyed by a motor Survey		The second secon		1
	The bredance area and remote is surveyed by a motor survey	от аррони	ed of the institute t	ompany.	4

LKK Auto Consultants Pte Ltd (Co.Reg. No: 199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/MSG19010419/DVD3N2

Date:

22/07/2019

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

A80465091QMX

Claimant Vehicle No:

SHA2149S

Insured Vehicle No:

SMD6481E

Date of Loss:

07/06/2019

Nature of Claim:

TP

Claim No: 595975

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHA2149S

Make & Model:

HYUNDAI 140, 1.7 D (A)

Engine No:

D4FDGU624279

Reg. Date: Colour:

19/05/2016 (Man. Year: 2016) Blue

Chassis No: Odometer:

KMHLB41UMGU089707 456207 km

Engine Capacity:

1685 cc

Market Value/New Car

N/A

Price: Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

205/60R16

Rear Tyre Size:

205/60R16

Front Left Side: Front Right Side: Hankook 5 mm Hankook 5 mm Rear Left Side: Rear Right Side: Hankook 5 mm Hankook 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIM	S	Repairer's	Adjuster's	Difference	Diff %
Parts		33,000.92	22,609.24	10,391.68	31.49
Miscellaneous Iten	ns	0.00	0.00	0.00	
Labour		5,460.00	2,800.00	2,660.00	48.72
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	38,460.92	25,409.24	13,051.68	33.93
	Approved Total (Overridden) (S\$)		20,000.00		
	(S\$)	38,460.92	20,000.00	18,460.92	48.00
	+ GST 7.00/7.00% (S\$)	2,692.26	1,400.00	1,292.26	48.00
	Nett Amount (S\$)	41,153.18	21,400.00	19,753.18	48.00

INSPECTION

Date of Assignment:

13/06/2019

Date Inspected:

12/06/2019 Inspected At:

Chunni Motor Work Pte Ltd - Amk (HQ)

Blk 10 #01-05/06, AMK Autopoint

Singapore 568047

Estimated Period of Repair:

16.0 days

Adjuster: BRYAN TANI

Manager: VERON CHEN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 22 Jul 2019)

Parts: 143 HYUNDAI I40 1.7 D (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SHA2149S)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

No.	Qty Part N	o. Particulars	Condition	Repairer's	Amount
1	1	*FRONT BUMPER COVER	Broken	1,052.20 FL	*1,052.20 FL
2	1	*FRONT BUMPER GRILLE (LH)	Not Necessary	93.60 FL	*-FL
3	1	*FRONT BUMPER GRILLE AIRDUCT (LH)	Broken	26.20 FL	*26.20 FL
4	1	*FRONT BUMPER BRACKET (LH)	Broken	24.60 FL	*24.60 FL
5	1	*HEADLAMP SUPPORT TOP COVER	Not Necessary	222.60 FL	*-FL
6	1	*HEADLAMP SUPPORT PANEL ASSY	Bent/Broken	907.40 FL	*907.40 FL
7	1	*HEADLAMP (LH)	Broken	1,388.00 FL	*1,388.00 FL
8	1	*HEADLAMP HALOGEN BULB (LH)	Not Necessary	14.40 FL	*-FL
9	1	*FRONT FENDER (LH)	Buckled	663.00 FL	*663.00 FL
10	1	*FRONT FENDER APRON PANEL (LH)	Dented	637.00 FL	*637.00 FL
11	1	*FRONT FENDER SHIELD (LH)	Deformed	174.90 FL	*174.90 FL
12	1	*AIR CLEANER BOTTOM ASSY	Broken	325.00 FL	*325.00 FL
13	1	*FRONT DOOR (LH)	Dented	2,256.40 FL	*2,256.40 FL
14	1	*FRONT DOOR RUBBER	Necessary	290.50 FL	The second second second second
15	1	*FRONT DOOR GEAR/REGULATOR (LH)	Not Necessary	250.60 FL	*-FL
16	1	*FRONT DOOR POWER MOTOR,LH	Not Necessary	172.70 FL	*-FL
17	1	*ROCKER PANEL OUTER GARNISH	Bent	341.40 FL	*341.40 FL
18	1	*FRONT PILLAR UPPER COVER/GARNISH	Not Necessary	83.50 FL	*-FL
19	1	*FRONT WINDSCREEN PILLAR OUTER (LH)	Dented	1,745.50 FL	*1,745.50 FL
20	1	*FRONT WINDSCREEN MOULDING	Necessary	113.30 FL	*113.30 FL
21	1	*FRONT WHEEL RIM (LH)	Bent	325.30 FL	*325.30 FL
22	1	FRONT WHEEL HUB CAP (LH)	Bent	107.10 FL	*107.10 FL
23	1	*FRONT WHEEL BEARING	Damaged	540.50 FL	*540.50 FL
24	1	*FRONT SHOCK ABSORBER (ASSY)(LH)	Bent	342.20 FL	*342.20 FL
25	1	*FRONT SHOCK ABSORBER MOUNTING (LH)	Not Necessary	108.80 FL	*-FL
26	1	*FRONT DRIVE SHAFT (LH)	Damaged	1,030.80 FL	*1,030.80 FL
27	1	*RACK & PINION ASSY	Damaged	1,191.30 FL	*1,191.30 FL
28	1	*STG TIE END	Distorted	62.60 FL	*62.60 FL
29	1	*STABILIZER BAR	Distorted	252.30 FL	*252.30 FL
30	1	*STABILIZER BAR BUSH (LH)	Not Necessary	16.40 FL	*-FL
31	1	*STABILIZER BAR LINK	Bent	61.10FL	*61.10 FL
32	1	*STABILIZER BRACKET	Not Necessary	24.00 FL	*-FL
33	1	*FRONT SUSPENSION LOWER ARM (LH)	Bent	529.30 FL	*529.30 FL
34	1	*KNUCKLE ARM (LH)	Distorted	552.00 FL	*552.00 FL
35	1	*ENGINE UNDER COVER	Not Necessary	334.60 FL	*-FL
36	1	*ENGINE CROSSMEMBER	Distorted	2,094.40 FL	*2,094.40 FL
37	1	*GEARBOX MOUNTING	Not Necessary	215.40 FL	*-FL
38	1	*ABS SENSOR (LH)	Not Necessary	234.00 FL	*-FL
39	1	*WIRING-ENGINE	Mounting Broken	3,326.00 FL	*3,326.00 FL
40	1	*ELECTRIC POWER STEERING	Not Necessary	3,641.00 FL	*-FL
41	1	*GEARBOX	Damaged	11,846.40 FS	*6,000.00 FS
42	1	*FRONT FENDER ADVERTISEMENT LOGO (LH)	Necessary	100.00 FS	*100.00 FS
43	1	*FRONT DOOR COMFORT LOGO (LH)	Necessary	75.00 FS	*75.00 FS
44	1	*FRONT DOOR ADVERTISEMENT LOGO (LH)	Necessary	100,00 FS	*100.00 FS

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
45	1	*FRONT TYRE (LH)	Serviceable	216.00 FS	*-FS
46	1	*FRONT WINDSCREEN SEALANT	Necessary	46.00 FS	*46.00 FS
F=Fra	nchise	part. S=SpcNett. L=ListItemDisc. - List Item Discount on L Ite	Sub Total (S\$) ems 20.00/20.00% (S\$)		26,681.30 4,072.06
			Total Parts (S\$)	33,000.92	22,609.24
		Report was unsubmitted during	g this print-out.		

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items			
1	PANEL BEATING	New	1,500.00	1,000.00
2	SPRAY PAINTING CHARGE	New	1,000.00	800.00
3	WIRING CHARGE	New	50.00	30.00
4	TUFF KOTE	New	100.00	40.00
5	TOWING CHARGE	New	50.00	0.00
6	TRANSFER OF DOOR	New	120.00	60.00
7	REMOVE/REFIX UNDERCARRIAGE (FRT)	New	200.00	150.00
8	FRT WHEEL ALIGNMENT	New	120.00	60.00
9	REMOVE/REFIX AIRCON & REFILL GAS	New	150.00	0.00
10	REMOVE/REFIX GEARBOX/ENGINE	New	450.00	200.00
11	REMOVE/REFIX DASHBOARD	New	450.00	180.00
12	REMOVE/REFIX FUSE BOX	New	180.00	50.00
13	REMOVE/REFIX FRONT WINDSCREEN GLASS	New	120.00	80.00
14	REMOVE/REFIX CUSHION & UPHOLSTERY FRONT	New	90.00	0.00
15	DIAGNOSTIC & RESETTING TO ERASE FAULT CODE }	New	480.00	150.00
16	RE-SET FRT POWER WINDOW SYSTEM)	New	200.00	0.00
17	RE-SET FRT ABS SYSTEM }	New	200.00	0.00
	Gross Labo	ur Cost (S\$)	5,460.00	2,800.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >