

ASSIGNMENT

Kenneth

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____ Trans Cob

of _____

Insured: _____

Policy No. _____

Claims No. _____

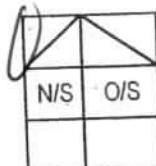
Sum Insured: _____ Excess: _____

(Client's Record) _____

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: S/HO 9290D Yr Regn: 12 / 2011

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Chevrolet Ignite c.c. 199

Colour: White/Red A/C: Insured / Std / NI / NA

Sp.Reading: 310321 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KLIA69RJBB058883

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/65R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Fail/ln

Front 8 mm Rear 8 mm

R/Bal. 8 mm R/Bal. 8 mm

L/Bal. 8 mm L/Bal. 8 mm

D.O.A. 7/12/13 D.O.I. 1/1/12/13

Survey held at ✓

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

A/S 1st

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	lump sum \$1400/- (Red: 7045.50, 83%)
	NO Resurvey
	RECEIVED 14 JUN 2019
	14/6/2019

Date/Time, File Pass to?

1) 14/6 Typist

3) _____

5) _____

Final Report

Final Report

Date/Time, File Return to?

2) _____

4) _____

6) _____

TOTAL
LOSS

KIV FOR
LOD

Survey Fee:

Basic & Add.

— S + RS, — SI

Photos

Others

TOTAL

Date:

160

50 + 90

14

80

354

Denise Tay (LKKAUTO)

From: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Sent: Thursday, 6 June 2019 6:26 PM
To: Denise Tay (LKKAUTO)
Subject: RE: Purchase Survey Report - 5 cases -- AAD1312-091
Attachments: SHD9290D 07.12.2013 - GIA.pdf

Hi Denise

Kenneth survey on 11.12.2013 @ 3pm.

I can't find the estimate marking.

Trans-Cab Auto Services Pte Ltd
No. 42 Sungei Kadut Street 1
Singapore 729346
Co./ GST Reg. No.: 201019626G

Case Handle by: Andrea
A&D No.: 1312-091

SCAN & Attach

Notification of Accident

☐ TOYOTA CROWN ☐ TOYOTA WISH 1.8 ☐ TOYOTA WISH 2.0 ☐ MERCEDES BENZ ☒ CHEVROLET EPICA ☐ RENAULT LATITUDE

Taxi Registration Number : SHB/ C/D 9290D **Claim Against:** III

Third Party Vehicle Number : UGZ 58049R

Date and Time of Accident : 07/12/13 1410hrs **Surveyor:** Kenneth 11 DEC 2013

Location : Guillemard Road 1500

Accident by Hired / Relief : Abdul Rahim Bin Kassim

NRIC No. : S1312746H **Reported on:** 09 DEC 2013

Thank You
Best Regards,
Ng Wai Yin
Finance Department
TEL: 6603 1265 Ext.308

*** Please be reminded that all claims correspondence to be send to claims@transcab.com.sg



TRANS-CAB SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63, Singapore 569111
Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764
Website: www.transcab.com.sg

This message is confidential. It may also be privileged or otherwise protected by work product immunity or other legal rules. If you have received it by mistake, please let us know by e-mail reply and delete it from your system; you may not copy this message or disclose its contents to anyone. Please send us by fax any message containing deadlines as incoming e-mails are not screened for response deadlines. The integrity and security of this message cannot be guaranteed on the Internet.

From: Denise Tay (LKKAUTO) [mailto:denisetay@lkkauto.com]
Sent: Thursday, 6 June, 2019 5:59 PM
To: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Subject: RE: Purchase Survey Report - 5 cases -- AAD1312-091

Dear Wai Yin,

Denise Tay (LKKAUTO)

From: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Sent: Thursday, 6 June 2019 4:06 PM
To: Denise Tay (LKKAUTO)
Cc: SUR
Subject: RE: Purchase Survey Report - 5 cases -- AAD1312-091

Hi Denise

Sorry for the delay.

Chassis no : KL1LA69RJB058883
Reg. no : 16.12.2011

Thank You
Best Regards,
Ng Wai Yin
Finance Department
TEL: 6603 1265 Ext.308

***** Please be reminded that all claims correspondence to be send to claims@transcab.com.sg**



TRANS-CAB SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63, Singapore 569111
Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764
Website: www.transcab.com.sg

This message is confidential. It may also be privileged or otherwise protected by work product immunity or other legal rules. If you have received it by mistake, please let us know by e-mail reply and delete it from your system; you may not copy this message or disclose its contents to anyone. Please send us by fax any message containing deadlines as incoming e-mails are not screened for response deadlines. The integrity and security of this message cannot be guaranteed on the Internet.

From: Denise Tay (LKKAUTO) [mailto:denisetay@lkkauto.com]
Sent: Monday, 29 April, 2019 10:27 AM
To: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Purchase Survey Report - 5 cases

AAD1312-091 -- ACCIDENT INVOLVING SHD9290D & SGZ5849R ON 07.12.13

Additional information:

DOA : 07.12.2013
Location : GUILLEMARD ROAD
Manufacturer : CHEVROLET
Model : EPICA-2.0 DSL TURBO (A)

Please provide the above documents, estimate & GIA.

Additional information
Chassis No.
Register Date/Year.

Denise Tay (LKKAuto)

From: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Sent: Thursday, 13 June 2019 5:39 PM
To: Denise Tay (LKKAuto)
Subject: FW: Purchase Survey Report - 5 cases -- AAD1312-091
Attachments: image003.wmz; SHD 9290D EST.pdf

Hi Denise

We confirm COR amount \$ 1,400.00 (b4 GST).

Kindly proceed to send us the survey invoice to prepare the payment.

Thank You
Best Regards,
Ng Wai Yin
Finance Department
TEL: 6603 1265 Ext.308

***** Please be reminded that all claims correspondence to be send to claims@transcab.com.sg**



TRANS-CAB SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63, Singapore 569111
Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764
Website: www.transcab.com.sg

This message is confidential. It may also be privileged or otherwise protected by work product immunity or other legal rules. If you have received it by mistake, please let us know by e-mail reply and delete it from your system; you may not copy this message or disclose its contents to anyone. Please send us by fax any message containing deadlines as incoming e-mails are not screened for response deadlines. The integrity and security of this message cannot be guaranteed on the Internet.

From: Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]
Sent: Thursday, 13 June, 2019 10:44 AM
To: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Subject: RE: Purchase Survey Report - 5 cases -- AAD1312-091

Dear Wai Yin,

Offer Lump sum \$1400,2days

Please check and confirm

Best Regards,
Denise Tay | Case Handler
LKK Auto Consultants Pte Ltd
Phone: 6256-3561 | email: denisetay@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ng Wai Yin <waiyin.ng@transcab.com.sg>
Sent: Wednesday, 12 June 2019 4:53 PM

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 withholding of material facts may allow insurance companies to repudiate policy ability
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. This report will be forwarded by the insurers of 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 lodgement 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.

ACCIDENT STATEMENT

Date Of Report	09/12/2013 11:38
Date Of Accident	07/12/2013 14:10
Exact Location Of Accident	GUILLEMARD ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD9290D
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K

Vehicle Particulars

Manufacturer	CHEVROLET
Model	EPICA-2.0 DSL TURBO (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	First Capital Insurance Ltd
Type Of Coverage	Third Party
Fleet Policy	Yes
Policy Number	D-12047359MFSH/02
Cover Note Number	

Driver

Name of Driver	ABDUL RAHIM BIN KASSIM
NRIC No	S1312746H
Date Of Birth	28/05/1958
Occupation	Outdoor
Date Of Driving Pass	26/04/1995
Driving Experience	18 Years And 7 Months
Gender	Male
Mobile Number	(Local) +65-83724195
Fax Number	
Contact Number	
EEmail Address	NOEMAIL
Address	BLK 726 YISHUN STREET 71 #03-75
Postcode	760726

Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Other - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Collision- Chain Collision
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No

Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

ON 07.12.2013 AT ABOUT 1410HRS, I WAS AT A STATIONARY POSITION AT THE 2ND LANE OF GUILLEMARD ROAD WAITING FOR THE TRAFFIC LIGHT TO TURN GREEN BEFORE TURNING RIGHT TO SIMS WAY. WHEN THE TRAFFIC LIGHT TURNED GREEN, I PROCEEDED TO DRIVE TOWARDS SIMS WAY. AS I WAS SLOWLY PICKING-UP SPEED, VEHICLE B - SGZ5849R WHICH WAS TRAVELING ON MY LEFT SUDDENLY CAME SWERVED TOWARDS MY TAXI AND COLLIDED ONTO THE LEFT FRONT PORTION OF MY TAXI. VEHICLE A - 1 PASSENGER VEHICLE B - 1 PASSENGER

Are accident photos available for attachment?	Yes
---	-----

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGZ5849R
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	MRS. TOE
NRIC/Passport Number	
Contact Number	94560804
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

SKETCH PLAN

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 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 lodgement 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.

Sketch Plan




Mountbatten Road

Gulleymore Road

A: SHD 9290D
B: GFZ 5849R

Refer to GIA Report.

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

Policyholder's Signature / Date & Time 	Driver's Signature (If driver is not the policyholder) / Date & Time 	Witnessed by Reporting Centre Personnel 
---	---	---

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



TRANS-CAB AUTO SERVICES PTE LTD
 NO.42 SUNGEI KADUT ST 1 SINGAPORE 729346
 TEL NO.6287 6666 FAX NO.6366 8862
 CO/GST REG NO.201019626G
SHD 9290D - III

Andrea

Not Noted -
21 Aug 8?

Vehicle No.:	SHD 9290D - Andrea
Chassis No.:	LK1LA69RJBB058883*
Vehicle Make:	CHEVROLET
Vehicle Model:	CHEVROLET EPICA 2.0
Date of Accident :	07.12.2013
Third Party Insurer :	III

		PART		LIST	
1	1	Front Bumper	\$	1,202.00	X
2	1	Front Bumper Retainer LH	\$	102.00	X
3	1	Front Bumper Lower Absorber	\$	180.00	X
4	1	Front Bumper Reinforcement	\$	356.00	X
5	1	Front Bumper Fog Lamp Outer Cover LH (Cov	\$	32.40	X
6	1	Front Headlamp LH	\$	816.00	X
7	1	Front Fender LH	\$	837.60	X
8	1	Front Fender Liner LH	\$	47.00	X
9	1	Front Door LH	\$	1,133.00	X
10	1	Front Side View Mirror LH	\$	939.00	X

TOTAL	\$	5,645.00
10%	\$	564.50
	\$	5,080.50

Specical Nett

1 Set	Front Bumper Fastener Clip(Necessary)	\$	24.00	X
1 Set	Front Fender Liner Clip(Necessary)	\$	20.00	X
1	Front Tyre LH	\$	180.00	X
1	Front Tyre Rim LH	\$	126.00	X
1	Tyre hub cap LH	\$	35.00	X

TOTAL	\$	385.00
--------------	----	---------------

TOTAL PARTS	\$	5,465.50
--------------------	----	-----------------

TRANS-CAB AUTO SERVICES PTE LTD
NO.42 SUNGEI KADUT ST 1 SINGAPORE 729346
TEL NO.6287 6666 FAX NO.6366 8862
CO/GST REG NO.201019626G
SHD 9290D - III

Andrea

<i>Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same</i>	\$	1,120.00	30d
<i>To Rust-Proofing Of The Affected Areas.</i>	\$	220.00	3d
<i>Putty and Spray Painting Of The Affected Portion.</i>	\$	1,080.00	6d
<i>To check steering geometry and computer wheel alignment</i>	\$	220.00	X
<i>To transfer of tire, rim and on wheel balancing.</i>	\$	170.00	X
<i>To Check Electrical Lighting Concerned.</i>	\$	170.00	1d

TOTAL \$ 2,980.00

Over All Total \$ 8,445.50

REPAIR DAYS

4 DAYS

2 days




LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
TRANS-CAB AUTO SERVICES PTE LTD			Ref : CS/TP19010455/Ktd3e2	
NO.2 ANG MO KIO STREET 63SINGAPORE 569111			Date : 19-06-2019	
			Code : TP378	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SGZ 5849R	Veh. Inspected	SHD 9290D	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	11/12/2013	
2. Vehicle Particulars & Condition				
Make & Model	CHEVROLET EPICA (A)	c.c	1991	
Engine No.	HIDDEN	Year of Reg.	2011	
Chassis No.	KL1LA69RJBB058883	Colour	WHITE / RED	
Odometer	310321	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	FALKEN	8 mm	
L/H Front Tyre	195/65 R15	FALKEN	8 mm	
R/H Rear Tyre	195/65 R15	FALKEN	8 mm	
L/H Rear Tyre	195/65 R15	FALKEN	8 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	07/12/2013	Inspection Date	11/12/2013	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 9290D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	TO REPAIR SEE LABOUR	1,202.00	-
1	FRONT BUMPER RETAINER LH	SERVICEABLE	102.00	-
1	FRONT BUMPER LOWER ABSORBER	SERVICEABLE	180.00	-
1	FRONT BUMPER REINFORCEMENT	TO REPAIR SEE LABOUR	356.00	-
1	FRONT BUMPER FOG LAMP OUTER COVER LH (COVER)	SERVICEABLE	32.40	-
1	FRONT HEADLAMP LH	SERVICEABLE	816.00	-
1	FRONT FENDER LH	BENT	837.60	837.60
1	FRONT FENDER LINER LH	DISTORTED	47.00	47.00
1	FRONT DOOR LH	TO REPAIR SEE LABOUR	1,133.00	-
1	FRONT SIDE VIEW MIRROR LH	SERVICEABLE	939.00	-
	LESS 10% DISCOUNT		-564.50	-88.46
			5,080.50	796.14
<u>SPECIAL NETT ITEMS</u>				
1	SET FRONT BUMPER FASTENER CLIP (NECESSARY) (SN)	NOT NECESSARY	24.00	-
1	SET FRONT FENDER LINER CLIP (NECESSARY) (SN)	NECESSARY	20.00	20.00
1	FRONT TYRE LH (SN)	SERVICEABLE	180.00	-
1	FRONT TYRE RIM LH (SN)	SERVICEABLE	126.00	-
1	TYRE HUB CAP LH (SN)	SERVICEABLE	35.00	-
			385.00	20.00
<u>LABOUR</u>				
	PANEL BEATING ,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS ,ADJUST AND REALIGN THE SAME.INCLUSIVE OF THE REPAIR OF FRONT BUMPER,FRONT BUMPER REINFORCEMENT AND FRONT DOOR LH .		1,120.00	300.00
	TO RUST-PROOFING OF THE AFFECTED AREAS.		220.00	30.00
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		1,080.00	600.00
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	-
	TO TRANSFER OF TIRE ,RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	-

Report Ref No. CS/TP19010455/Ktd3e2



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	10.00
			2,980.00	940.00
GRAND TOTAL			8,445.50	1,756.14
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,400.00

Report Ref No. CS/TP19010455/Ktd3e2

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.