

23092001

ASS. REC. BY:

REF: CS/SMD 1906/30/ And 3-17

Special Instruction:

Surveyor: Adrian

ASSIGNMENT (Office)

From (Person): Agnes Chan Chu Hui of SMO

Date/Time: 10/06/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SLS 7994E

Insured: SLW 4299R

at Workshop m/s DC Automotive

Tel:

of 1 Kaki Bukit Ave 6 #02-39

Policy No. DQMTPV01002240

Claim No. CMTD1901702

Sum Insured:

Excess:

Make of Veh.
(Client's Record)

D.O.A. 4.4.2019

CA / REV / REP. / REV 24 HRS

"W P"

Date/Time: 8.4.19 10.30am

Person Contacted:

Donald

H.O.D. Endorsement

Vehicle: IN / OUT

Date/Time	Action/Instruction (X) Estimate
	SLS 7994E - X
	SLW 4299R - X
	Dismantle: 9/4/2019
	After repair: 15/4/2019
17/6/19	Submit LS \$13,900 (Rad 3680, 2190), 14 days

Note: MV: \$59K (Est) PV: \$51800 NV: \$7.2K

RECEIVED 17 JUN 2019

150-220 =

ASS. REC BY

REF

Adrian

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

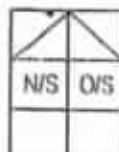
Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Party Condition)

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

Bal. or Market Value: _____

IDAC Accident Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

days

Res: _____

Yes or No

Lum Sum: _____

%

3 Val: _____

Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKS7994EYr Regn: 2015MayType: M.Cat / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Kia Forte K3c.c. 1591Colour: Silver

A/C: Insured / Std / NI / NA

Sp. Reading: 62418

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

KNAF241MF5376640Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / SR / STD A/Rim or

Tyre Size: F: _____

225/45R17

R: _____

225/45R17

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

TOYO / YOKO or

Continental

Front

Rear

R/Bal. _____

mm

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

D.O.I. _____

08/04/19

Survey held at _____

DLDes. of Damages: Fr / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

TP Sample PRS.Repair Cost: \$11K - \$13K14 DaysMV: 59KPV: 51.8KNett: 7.2K

RECEIVED 17 APR 2019

Date/Time, File Pass to?

Date/Time, File Return to?

1)

2)

3)

4)

5)

6)

Prel. Report:

Final Report:

Part Prices Check:

IN

OUT

Survey Fee:

Basic & Adt.

S + RS, SI

Photos

Others

TOTAL

Date:

100606010230

Nivitha (LKK Auto)

From: Chan, Shu Hui Agnes <agnes.chan@sompo.com.sg>
Sent: Monday, 10 June 2019 1:07 PM
To: 'sur@lkkauto.com'
Cc: 'assignments' (assignments@lkkauto.com)
Subject: ACC INL SLW4299R/ IV / SKS7994E/ SGK6263C/ SHF1521E ON 04.04.2019; OUR REF: CMTD1901702; YOUR REF: CS3/SMO19006130/ACD3E2
Attachments: SAS2579867.pdf; SAS2579844.pdf; SAS2579620.pdf; SAS2579595.pdf; repair bill.pdf; Scene photo from TP.pdf

Dear LKK

We refer to the above matter.

We herewith enclosed GIA reports, the repair bill for your attention.

Please prepare the paper resurvey of SKS7994E.

Please forward the report with the market value status within 5 days.

Thank you.

Best Regards

Agnes Chan

Claims Division

D: 6329 5327 | T: 6461 6555 | F: 6221 3147



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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle & Owner Information	
Owner ID Type:	Singapore NRIC
Owner ID:	9531Z
Vehicle Details	
Vehicle No:	SK57994E
Vehicle to be Exported:	Yes
Intended Deregistration Date:	08 Apr 2019
Vehicle Make:	KIA
Vehicle Model:	FORTE K3 1.6A
Primary Colour:	Silver
Manufacturing Year:	2014
Engine No.:	G4FGEH757360
Chassis No.:	KNAFZ411MF5376640
Maximum Power Output:	95.3 kW (127 bhp)
Open Market Value:	\$18,418.00
Original Registration Date:	08 May 2015
First Registration Date:	08 May 2015
Transfer Count:	1
Actual ARF Paid:	\$13,418.00
PARF Eligibility	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 May 2025
PARF Rebate Amount:	\$10,063.00
COE Details	
COE Expiry Date:	07 May 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$68,589.00
COE Rebate Amount:	\$41,701.00
Total Rebate Amount:	\$51,764.00

The information contained herein is correct as at 08 Apr 2019

OK

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Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

Search Selection	k3	Any	Any	2015	Any	Any	Any	Available
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<input type="checkbox"/> Kia Forte K3 1.6A SX	\$58,800	\$8,590 /yr	30-Apr-2015	1,591 cc	-	Sedan	Available
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5 Years Warranty And 10 Years Engine Warranty by C&C. Extremely Well Maintain By Meticulous Owner, Bank/In House Loan Available. Subject To Approval/ Buy With A Peace Of Mind. Trade In Welcome. Come V...

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<input type="checkbox"/> Kia Forte K3 1.6A SX	\$58,800	\$8,450 /yr	30-Jun-2015	1,591 cc	53,080 km	Sedan	Available
---	----------	-------------	-------------	----------	-----------	-------	-----------

Elegant "SX" Model, With High Specifications, With Keyless And Sunroof Prestige Condition, Low Mileage Done, Very Well Maintained, Flexible In House Loan Available. Consignment Unit. Call Us Now To A.

Cat Search

Accepted: 20 May 2021 | Published: 2024. <https://doi.org/10.1002/for.2572>



<input type="checkbox"/> Kia Forte K3 1.6A EX	\$57,800	\$7,760 /yr	23-Oct-2015	1,591 cc	41,789 km	Sedan	Available
---	----------	-------------	-------------	----------	-----------	-------	-----------

Sporty Pearl White Color, Low Depreciation Of \$7K Plus, 1 Careful Owner, 5 Years Warranty And 10 Years Engine Warranty By C&C. Extremely Well Maintain By Meticulous Owner. Bank/In House Loan Available.

AL Autotech Pty Ltd

Accepted: 05-Apr-2019 | DOI: 10.1111/ajhp.12315 | Published online: 15-May-2019

<input type="checkbox"/> Kia Forte K3 1.6A EX	\$57,800	\$7,560 /yr	08-Dec-2015	1,591 cc	44,603 km	Sedan	Available
---	----------	-------------	-------------	----------	-----------	-------	-----------

Very Low Depreciation And Low Mileage Done Simply Marvellous Condition! Day 1 Paintwork. Well Maintained By Ex Owner. Buy With A Peace Of Mind With Full Servicing Done By Cycle And Carriage. Comes With.....

Received 16-Apr-2014; accepted 20-May-2014; first published online 20-May-2014



Complete Bodykit
SLK R172 Wald black bison complete bodykit.
More info about this product

<input type="checkbox"/> Kia Forte K3 1.6A EX	\$57,800	\$7,550 /yr	11-Dec-2015	1,591 cc	\$3,800 km	Sedan	Available
---	----------	-------------	-------------	----------	------------	-------	-----------

Well Maintained By Previous Owner Who Up-Sized To MPV. Agent Serviced And Still Under 5yrs Warranty. The Forte K3 Packs Good Looks, Drivability, Low Maintenance And Well Thought Of Features All Into O...

Revised: 04-Apr-2010 Trace: 2015-M4-Flora, 2015-M4-Flora, 04-Apr-2010, 04-Apr-2010, 04-Apr-2010, 04-Apr-2010, 04-Apr-2010

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 Save Search

Make ▼ Model ▼ Price ▼ Depreciation ▼ Reg Date ▼ Eng Cap ▼ Mileage ▼ Veh Type ▼ Rating ▼

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PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers

Correspondence Address: 1 Simei St.3 #02-24 S(529890)

Mobile: 9295 2204 Fax: 6722 8508 Email: pasvcs@hotmail.com

Business Reg. 2014044340

VEHICLE INSPECTION REPORT

Report No. : PAS/TP/0140419	Date of Report : 24/04/2019
To : Mr Yam Jun Xuan Gervais	Date of Assignment : 05/04/2019
C/o. 1 Kaki Bukit Ave 6	Report requested by : Mr Yam Jun Xuan Gervais
#01-23 Autobay	Date of Accident : 04/04/2019
Singapore 417883	Date of Inspection : 05/04/2019
	Claim No. : Third Party Claim
	Policy No. : -

PARTICULARS OF DAMAGED VEHICLE

Vehicle Registration No. : SKS7994E	Engine Capacity (cc) : 1591cc
Make & Model : KIA Cerato K3 (A) SX	Mileage (km) : 62418km
Date of Registration : 08/05/2015	Chassis / Frame No. : KNAFZ411MF5376640
Colour : Met. Silver	Engine No. : G4FGEH757360

TYRE CONDITION

Front LH : 6 mm	Front RH : 6 mm
Make : Continental	Make : Continental
Rear LH : 6 mm	Rear RH : 6 mm
Make : Continental	Make : Continental

Road wheels Type : Alloy

(The above represents the approximate remaining life of tyre treads)

PRE-ACCIDENT CONDITION OF DAMAGED VEHICLE (Static tests only)

General Bodywork	: Good
Paintwork	: Good
Handbrake	: Serviceable
Footbrake	: Serviceable
Steering	: Serviceable
Apparent Engine Modification	: Nil

PLACE OF REPAIRER OFFICE/WORKSHOP

Location : M/s. DC's Automotive Pte Ltd
1, Kaki Bukit Ave 6, #01-23, Autobay, Singapore 417883

ASSESSMENT

Repairer's Estimate	: S 24,997.30
Revised Amount	: S 21,981.90
Less Excess	: S -
Recommended Reserve	: S 17,580.00 (Lump Sum)

Estimated Normal Period of Repairs : 14 Working Days

Disclaimer: This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle involved. No liability or responsibility whatsoever shall be held by PROMINENT APPRAISER SERVICES PTE LTD for any reliance on this report by any third party.



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Correspondence Address: 1 Simei St. 3 #02-24 S(529890)

Mobile: 9295 2204 Fax: 6722 8508 Email: pasvcs@hotmail.com

Business Reg. 201404434D

Vehicle No : SKS7994E

Report No. : PAS/TP/0140419

GENERAL REMARKS

WITHOUT PREJUDICE

THE ASSIGNMENT

The survey was conducted at M/s. DC's Automotive Pte Ltd, 1, Kaki Bukit Ave 6, #01-23, Autobay, Singapore 417883.

(Subsequent inspections have been conducted)

POINT OF IMPACT

At the front and rear portions.

DAMAGES

The bonnet, front bumper, front support panel, front chassis members, front fenders, headlamps, front grille, boot lid, rear bumper, rear end panel, rear floor panel, rear chassis members, rear fenders, rear exhaust silencer, taillamps, rear reflectors, etc.

Other parts were also found damaged. (See schedule for details)

ADJUSTMENT / RECOMMENDATION

We have inspected thoroughly each and every item on the repairer's estimate against the actual damaged found on the vehicle. We list the breakdown of our findings and our recommendation as per schedule attached.

Our adjusted amount for the cost of repairs is SGD \$21,981.90.

CONCLUSION

The repairer has agreed to undertake the repairs at a lump sum of SGD \$17,580.00.


This inspection was conducted entirely on a 'Without Prejudice' basis. We have not given an authorization and/or instruction to the repairer to proceed with the repairs.

We hereby reverting the matter to you for your discretion on repairs.

Assuring you of our best services always.

Yours Truly,

Prominent Appraiser Services Pte Ltd


Andrew How
Automobile Appraiser
MSAAA
Licensed Appraiser



PROMINENT APPRAISER SERVICES PTE LTD

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Business Reg. 2014044340

Vehicle No. : SKS7994E

Report No. : PAS/TP/0140419

APPRAISEMENT SCHEDULE

S/No.	Qty	Parts Descriptions	Condition		Repairer's Estimate (\$)	Our Assessment (\$)	
1	1 pc	Bonnet <i>Repair</i>	Dented/Distorted		\$ 1,408.00	\$ 1,408.00	X
2	2 pcs	Headlamp R/L	Cracked	\$ 1,865.00	\$ 3,730.00	\$ 3,730.00	✓
3	1 pc	Frt grille assy	Dented/Cracked		\$ 301.00	\$ 301.00	✓
4	1 pc	Frt grille emblem (Logo)	Necessary		\$ 57.00	\$ 57.00	✓
5	1 pc	Frt bumper	Dented		\$ 756.00	\$ 756.00	✓
6	1 pc	Frt bumper tow cover <i>Not New</i>	Dented/Cracked		\$ 28.00	\$ 28.00	X
7	1 pc	Frt bumper no.plate garnish	Dented/Cracked		\$ 85.00	\$ 85.00	✓
8	1 pc	Frt bumper top seal <i>Not New</i>	Necessary		\$ 67.00	\$ 67.00	X
9	1 pc	Frt bumper center grille	Refit		\$ 89.00	\$ -	X
10	8 pcs	Frt bumper clip	Necessary	\$ 3.00	\$ 24.00	\$ 24.00	✓
11	2 pcs	Frt bumper retainer R/L	Cracked/Necessary	\$ 32.00	\$ 64.00	\$ 64.00	✓
12	1 pc	Frt bumper absorber	Dented/Cracked		\$ 108.00	\$ 108.00	✓
13	1 pc	Frt bumper beam	Dented		\$ 105.00	\$ 105.00	✓
14	1 pc	Frt bumper reinforcement	Dented		\$ 459.00	\$ 459.00	✓
15	1 pc	Frt support top cover	Refit		\$ 269.00	\$ -	X
16	1 pc	Frt support assy	Realign		\$ 798.00	\$ -	X
17	1 pc	Boot lid	Dented		\$ 1,298.00	\$ 1,298.00	✓
18	2 pcs	Boot lid hinge R/L <i>Not New</i>	Bent	\$ 44.00	\$ 88.00	\$ 88.00	X
19	1 pc	Boot lid emblem (Logo)	Necessary		\$ 37.00	\$ 37.00	✓
20	1 pc	Boot lid emblem (Forte)	Necessary		\$ 40.00	\$ 40.00	✓
21	1 pc	Boot lid emblem (K3)	Necessary		\$ 38.00	\$ 38.00	✓
22	1 pc	Boot lid reverse camera <i>Not New</i>	Dented/Damaged		\$ 584.00	\$ 584.00	X
23	2 pcs	Boot lid no.plate lamp R/L <i>Not New</i>	Cracked	\$ 28.00	\$ 56.00	\$ 56.00	X
24	2 pcs	Boot lid reflector lamp R/L	Cracked	\$ 726.00	\$ 1,452.00	\$ 1,452.00	✓
25	1 pc	Boot lid inner trim <i>Not New</i>	Torn/Deformed		\$ 118.00	\$ 118.00	X
26	14 pcs	Boot lid inner trim clip	Necessary	\$ 3.00	\$ 42.00	\$ 42.00	✓
27	1 pc	Boot lid lock	Bent/Jammed		\$ 132.00	\$ 132.00	✓
28	1 pc	Boot lid lock striker	Bent		\$ 22.00	\$ 22.00	✓
29	1 pc	Boot lid weatherstrip	Torn		\$ 137.00	\$ 137.00	✓
30	2 pcs	Taillamp R/L	Cracked/Broken	\$ 792.00	\$ 1,584.00	\$ 1,584.00	✓
31	1 pc	Rr bumper	Dented		\$ 688.00	\$ 688.00	✓
32	4 pcs	Rr bumper reverse sensor	Dented/Damaged	\$ 204.00	\$ 816.00	3pcs \$ 612.00	✓
33	1 pc	Rr bumper lower trim	Dented/Cracked		\$ 365.00	\$ 365.00	✓
34	2 pcs	Rr bumper reflector R/L	Broken/Cracked	\$ 48.00	\$ 96.00	\$ 96.00	✓
35	6 pcs	Rr bumper clip	Necessary	\$ 3.00	\$ 18.00	\$ 18.00	✓
36	2 pcs	Rr bumper retainer R/L	Cracked/Necessary	\$ 38.00	\$ 76.00	\$ 76.00	✓
37	3 pcs	Rr bumper side bracket R/L	Bent/Cracked	\$ 34.00	\$ 102.00	\$ 102.00	✓
38	2 pcs	Rr bumper arm R/L	Dented	\$ 127.00	\$ 254.00	\$ 254.00	✓
39	1 pc	Rr bumper reinforcement	Dented/Cracked		\$ 318.00	\$ 318.00	✓
40	2 pcs	Rr bumper under cover R/L	LH Torn/Cracked	\$ 73.00	\$ 146.00	\$ 73.00	✓
41	2 pcs	Rr taillamp panel R/L <i>Repair</i>	Dented/Distorted	\$ 227.00	\$ 454.00	\$ 454.00	X
42	2 pcs	Rr fender air vent R/L <i>Not New</i>	LH Cracked	\$ 67.00	\$ 134.00	\$ 67.00	X
43	2 pcs	Rr fender trim R/L <i>Not New</i>	Torn/Deformed	\$ 162.00	\$ 324.00	\$ 324.00	X
44	12 pcs	Rr fender trim clip R/L	Necessary	\$ 3.00	\$ 36.00	\$ 36.00	✓
45	1 pc	Rr end panel	Dented		\$ 652.00	\$ 652.00	✓
					\$ 18,455.00	\$ 16,955.00	



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Business Reg. 201404434D

Vehicle No.: SKS7994E

Report No.: PAS/TP/0140419

S/No.	Qty	Parts Descriptions	Condition	Repairer's Estimate (S\$)	Our Assessment (S\$)
				\$ 18,455.00	\$ 16,955.00
46	1 pc	Rr end panel garnish	Cracked/Deformed	\$ 202.00	\$ 202.00 ✓
47	1 pc	Rr compartment lid	Dented/Deformed	\$ 287.00	\$ 287.00 ✓
48	1 pc	Rr floor panel	Dented/Buckled	\$ 635.00	\$ 635.00 ✓
49	1 pc	Rr lock antenna	Dented/Cracked	\$ 162.00	\$ 162.00 ✓
50	1 pc	Rr exhaust silencer	Bent/Repair	\$ 656.00	\$ - X
51	1 pc	Frt support assy	Dented/Repair		(Refer labour no. 4 & 5)
52	1 pc	Frt chassis member R/L	Dented/Repair		(Refer labour no. 4, 5 & 11)
53	1 pc	Rr fender R/L	Dented/Repair		(Refer labour no. 7, 12 & 13)
54	1 pc	Rr chassis member R/L	Dented/Repair		(Refer labour no. 7, 11, 12 & 13)
				\$ 20,397.00	\$ 18,241.00
			Less Discount: 10%	\$ 2,039.70	10% \$ 1,824.10
			List Parts Sub-Total:	\$ 18,357.30	\$ 16,416.90
1	1 set	Frt no.plate (w/bracket)	Dented/Cracked	S/N \$ 50.00	\$ 50.00 ✓
2	1 bot	Radiator coolant	Necessary	S/N \$ 80.00	\$ 60.00 X
3	1 set	Rr no.plate (w/bracket)	Dented/Cracked	S/N \$ 50.00	\$ 50.00 ✓
4	1 pc	Rr end panel sealant	Necessary	S/N \$ 50.00	\$ 40.00 ✓
5	1 pc	Rr floor panel sealant	Necessary	S/N \$ 50.00	\$ 40.00 ✓
6	1 pc	Rr floor panel insulator	Affected/Necessary	S/N \$ 150.00	\$ 120.00 ✓
			Special Nett Sub-Total:	\$ 430.00	\$ 360.00
			Parts Total:	\$ 18,787.30	\$ 16,776.90



PROMINENT APPRAISER SERVICES PTE LTD

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Mobile: 9295 2204 Fax: 6722 8508 Email: pasvcs@hotmail.com

Business Reg. 201404434D

Vehicle No. : SKS7994E

Report No. : PAS/TP/0140419

S/No.	Labour Descriptions	Repairer's Estimate (S\$)	Our Assessment (S\$)
1	Towing.	\$ 100.00	\$ 85.00 60
2	To check front electrical system and focus headlamp.	\$ 60.00	\$ 50.00 30
3	To remove, reinstall radiator, a/c condenser and pipings for necessary repairs. (Include pressure test cooling system and vacuum, recharge a/c gas)	\$ 220.00	\$ 200.00 X
4	To straighten, repair, realign on front affected area and replace damaged parts.	\$ 1,000.00	\$ 650.00 401
5	To spray painting, blending on front affected and adjacent area.	\$ 1,000.00	\$ 800.00 400
6	To check rear electrical wiring system.	\$ 60.00	\$ 50.00 30
7	To remove and reinstall rear interior trims, garnishes, seats, etc. for necessary repairs.	\$ 140.00	\$ 120.00 100
8	To transfer boot component parts to new boot.	\$ 100.00	\$ 80.00 ✓
9	To remove and reinstall exhaust silencer for necessary repairs. To straighten, repair and realign rear exhaust silencer.	\$ 80.00	\$ 60.00 X
10	To remove, replace and/or transfer rear reverse sensors & reset control unit.	\$ 180.00	\$ 160.00 50
11	To conduct chassis alignments.	\$ 320.00	\$ 300.00 X
12	To straighten, repair, realign on rear affected area and replace damaged parts.	\$ 1,400.00	\$ 1,320.00 1201
13	To spray painting, blending on rear affected and adjacent area.	\$ 1,400.00	\$ 1,200.00 ✓
14	To spray anti-rust coating on new and affected panels.	\$ 150.00	\$ 120.00 80
Labour Total :		\$ 6,210.00	\$ 5,205.00
Total (Parts & Labour) :		\$ 24,997.30	\$ 21,981.90

For Lump Sum Repairs

The final adjusted Lump Sum contract amount is \$ 17,580.00

Under normal circumstances, the repairs should be completed within a reasonable period of 14 Working Days. (Exclude waiting days of PRI, Sunday, Public Holiday and awaiting of shipment for spare parts)

196 Photographs were taken at the time of inspection.

N.B: By accepting to carry out the repairs on a contract Lump Sum basis, the repairer shall has the prerogative and discretion to replace the damaged parts with new, used, OEM or reconditioned parts and/or to repair the vehicle on a roadworthy condition to the entire satisfaction of owner.

Note: The revised estimate has been adjusted from a visual inspection. Any discrepancies or unseen damages should be notified to the company within 7 days from the date hereof. Otherwise this revised amount shall be deemed as valid.

DC's AUTOMOTIVE PTE LTD

1 KAKI BUKIT AVENUE 6, #01-23 AUTOBAY@KAKI BUKIT
SINGAPORE 417883

H/P: 97677794 FAX: 63850687

Registration No: 201537030H

Date: 25/04/2019

Mr Yam Jun Xuan Gervais
C/o. 1, Kaki Bukit Avenue 6
#01-23 Autobay@Kaki Bukit
Singapore 417883

FINAL REPAIR BILL

Vehicle No: SKS7994E
Date of Accident: 04/04/2019

To contract lump sum repair cost: \$ 17,580.00

Seventeen Thousand Five Hundred Eighty Dollars Only.



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 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. This 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.

ACCIDENT STATEMENT

Date Of Report	05/04/2019 12:28
Date Of Accident	04/04/2019 19:30
Exact Location Of Accident	CLEMENTI ROAD NEARBY SUNSET WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS7994E
Insured/Policyholder	
Name Of Registered Owner	YAM JUN XUAN GERVAIS
NRIC No	S8839531Z
Email Address	GERVAIS.YAM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83328599
Alternative Phone No	OTHERS-83328599

Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3 1.6A
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5103597178
Cover Note Number	

Driver

Name of Driver	YAM JUN XUAN GERVAIS
NRIC No	S8839531Z
Date Of Birth	13/10/1988
Occupation	INDOOR
Date Of Driving Pass	14/06/2007
Driving Experience	11 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83328599
Fax Number	
Contact Number	OTHERS-83328599
EEmail Address	GERVAIS.YAM@GMAIL.COM

Address	BLK 101 #02-153 CLEMENTI STREET 14
Postcode	120101
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

REFER TO BELOW STATEMENT/SKETCH PLAN;

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLW4299R
Vehicle Make/Model/Colour	TOYOTA YARIS E AUTO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGK6263C
-----------------------------	----------

Vehicle Make/Model/Colour	NISSAN LATIO 1.5LSR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SHF1521E
Vehicle Make/Model/Colour	BYD E6H
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	YAM JUN XUAN GERVAIS
Approximate Age	
Injuries Sustain	1 DAY MC
Injured person in which vehicle?	SKS7994E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	BLK 101 #02-153 CLEMENTI STREET 14
Postcode	120101

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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
 - (ii) for complying with requirements under any regulations, laws or court orders.

05 APR 2019



[Signature]



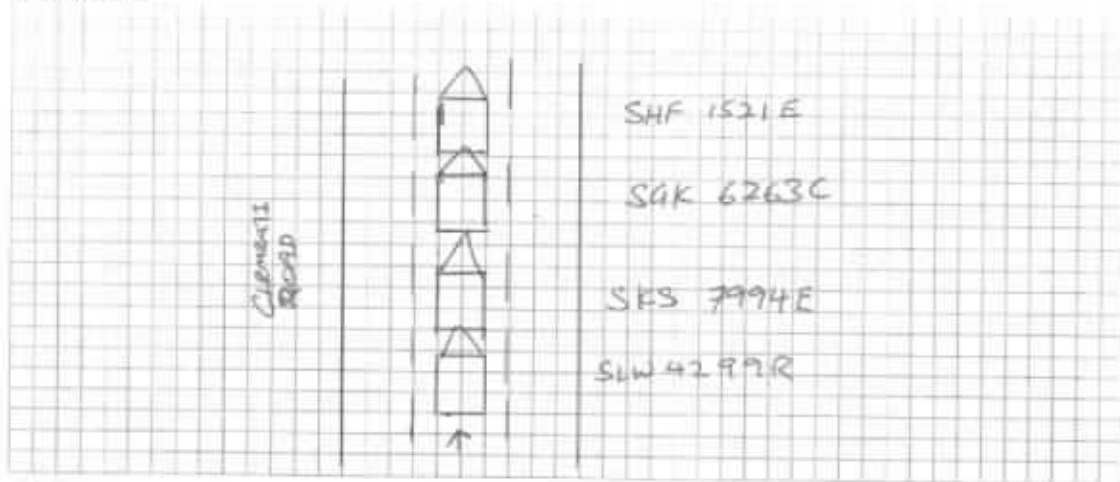
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

IDAC KAKI BUKIT (VAC)

Reporting Centre
Name: **23 Kaki Bukit Ave 4**
Singapore 415933
Tel: **67416697** Fax: **67492305**
Email: **vackb@singnet.com.sg**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was traveling along Clementi Road on 4 April 2019. I saw that the car in front of me came to a complete stop. Therefore, I slowed down and came to a complete stop, while maintaining a safe distance between my car and the car in front. Suddenly, the car behind me crashed into the rear of my car, and the impact caused my car to hit the car in front of me.

DECLARATION

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

05 APR 2019

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Reporting Centre, Personnel's Office

Name:

NRIC/PR No.:

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

Accident Sketch Plan

Ng Teng Fong General Hospital

A member of the NPHS

MEDICAL CERTIFICATE (Ref:53346450)

ORIGINAL

NAME: YAM JUN XUAN, GERVAIS

NRIC: S8838531Z

Type of Medical Leave granted: OUTPATIENT SICK LEAVE

The above named is unfit for duty from 5/4/2019 to 5/4/2019 inclusive

The certificate is not valid for absence from court attendance.

The above named was in Emergency Department from 04/04/2019 23:16 to 05/04/2019 03:00.

05/04/2019
Date

Dr. Khanijow KAAJAL (18184F)
Issued by

Signature

Location: NTFGH EMERGENCY

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 8 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours: Monday to Friday, 09:00 – 17:00
 UEN: S681500200 / GST Reg. No.: M400617735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: 8W799UE
 Name (as shown in NRIC) : Yam Jun Xuan NRIC/FIN/Passport No : SP8 395312
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : _____ Singapore ()
 Contact (Tel) : _____ Mobile No.: 833 28999
 Email Address : _____
 Date of Accident : 04-04-2019 Time of Accident : 19:30'
 Place of Accident : Clementi Rd
 Insurance Company: Life

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Update injury

(The remaining lines in this section are crossed out with a large diagonal line.)

[Signature]
 Policyholder / Driver's Signature
 Date: _____

05 APR 2019

IDAC KAKI BUKIT (VAC)
 Reporting Centre: 29 Kaki Bukit Ave 4
 Name: Singapore 415933
 NRIC/TEL: 67416697 Fax: 67492305
 Date: _____ Email: vackb@singnet.com.sg

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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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	05/04/2019 10:29
Date Of Accident	04/04/2019 19:30
Exact Location Of Accident	ALONG CLEMENTI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW4299R
Insured/Policyholder	
Name Of Registered Owner	WONG CHUN YING, ELEANOR GRACE
NRIC No	S9109104F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93383997
Alternative Phone No	OFFICE-93383997

Vehicle Particulars

Manufacturer	TOYOTA
Model	YARIS-1.5 E (A)

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
------------------	-------------

Insurance Company

Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01002240
Cover Note Number	09/03/2019-08/03/2020

Driver

Name of Driver	WONG CHUN YING, ELEANOR GRACE
NRIC No	S9109104F
Date Of Birth	13/03/1991
Occupation	INDOOR
Date Of Driving Pass	29/08/2011
Driving Experience	7 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93383997
Fax Number	
Contact Number	OFFICE-93383997
Email Address	NOEMAIL

Address	BLK 341 UPPER BUKIT TIMAH ROAD 08-11
Postcode	588195
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

REFER TO THE SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NO ACCIDENT FOOTAGE RECORDED
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKS7994E
Vehicle Make/Model/Colour	B
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGK6263C
Vehicle Make/Model/Colour	C
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SHF1521E
Vehicle Make/Model/Colour	D
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

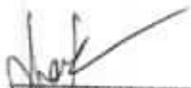
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I understand, acknowledge, agree and consent that:

- (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
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Facilitator's Signature
Name: Kenneth
NRIC/IN No.:

SKETCH PLAN

A	B	C	D
A - SLN 4299R	B - SKS 7994E	C - SKK 6283C	D - SKF 1521E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Travelling along Clementi Road at 7:30pm, where I was driving on the 3rd lane where the car in front of me braked suddenly and my car was unable to stop in time. Upon checking after the hit, there were 4 cars involved in this accident. This is a chained car collision where the first car emergency braked and led to this hit.


Important:


You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.

<input type="checkbox"/>	- Reporting Only
<input checked="" type="checkbox"/>	- Claim OD
<input type="checkbox"/>	- Claim TP
<input type="checkbox"/>	- Claim OD/ TP at other workshop

DECLARATION

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


 Policyholder's signature
 Date & Time


 Driver's Signature
 (If driver not the policyholder)
 Date & Time


 Reporting Centre Personnel's Signature
 Name: **Kenneth**
 Nric/Fin No.



Class SA Motor cars without clutch pedals (Auto) <= 2000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles without clutch pedals <= 2500kg 29 Aug 2011

MP 425A



Date of issue 27-10-2017

Address 341 UPPER BUKIT TIMAH ROAD #08-11 SINGAPORE 588195

3820197



SOMPO

Sompo Insurance Singapore Pte. Ltd.

30 Raffles Place, 40th Floor, Singapore Land Tower, Singapore 048623
 Tel: 6463 8588 | Fax: 6221 2822 | Website: www.sompo.com.sg
 CR. Reg. No. 148300180E | GST Reg. No. S405039366

Certificate of Insurance

**MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 185)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1998 (MALAYSIA)**

Cert No./Policy No. : D18MTPV01002240
 Insured : WONG CHUN YING ELEANOR GRACE
 Motor Car (Registration No.) : SLW4298R
 Cover : Comprehensive - ExcelDrive FOCUS
 Policy Commencement Date : 09 MARCH 2019 00:00
 Policy Expiry Date : 08 MARCH 2020 23:59
 Maximum Liability (Section I) : Market value at time of loss
 Excess* : \$500 - Section I
 (Waived up to 50% or maximum S\$600 whichever is lower if accident repair is done at ExcelDrive Workshops for the first claim per policy year)
 Voluntary Excess* : N.A.
 Windscreen Excess* : S\$100.00 - Waived if Repair at ExcelDrive Workshop
 Loss of Use : N.A.
 * Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
 - a. any member of the insured's family, or a paid driver who has been driving the Motor Car during the life of the insured and permission to drive had not been withdrawn prior to the death of the insured; and
 - b. any other person who has been given permission to drive the Motor Car prior to the death and such permission had not been withdrawn by the Insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Car. And provided further that the Motor Car is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 185) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exclusions of the Private Car Policy ref MTP-27

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of Issue : 23 JANUARY 2019 10:30

IMPORTANT NOTICE

- a. Keep the Certificate in your Motor Car;
- b. Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 185), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
- c. On the sale of the Motor Car or if for any reason the Insured is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 185);
- d. This Policy will cease to be valid once the Motor Car has been sold to another person. The Policy is not transferable to the new owner of the Motor Car.

Intermediary Code & Name : 11P11003 & PACIFIC PRIME INSURANCE BROKERS SINGAPORE PTE. LTD. CI Code : 22A X0DP5V46BMSKAA

> Back to OneMotoring

Enquire Transfer Fee

Vehicle No.:	SLW4299R
Vehicle Type:	P10 - Passenger Motor Car
Vehicle Attachment 1:	No Attachment
Vehicle Scheme:	Normal
Vehicle Make:	TOYOTA
Vehicle Model:	YARIS E AUTO
Chassis No.:	MR054HY9104054560
Propellant:	Petrol
Engine No.:	1NZY040222
Engine Capacity:	1497 cc
Maximum Power Output:	80.0 kW (107 bhp)
Maximum Laden Weight:	1490 kg
Unladen Weight:	1080 kg
Year Of Manufacture:	2010
Original Registration Date:	28 Jan 2010
Lifespan Expiry Date:	-
COE Category:	A - Car (1600cc & below)
Quota Premium:	\$18,150.00
COE Expiry Date:	27 Jan 2020
Road Tax Expiry Date:	27 Jan 2020
PARF Eligibility Expiry Date:	27 Jan 2020
Inspection Due Date:	27 Jan 2021
Intended Transfer Date:	05 Apr 2019
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

You may print this page for reference.

OK

Print

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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 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. This 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.

ACCIDENT STATEMENT

Date Of Report	05/04/2019 10:48
Date Of Accident	04/04/2019 19:40
Exact Location Of Accident	CLEMENTI ROAD (AFTER MAJU CAMP)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK6263C
Insured/Policyholder	
Name Of Registered Owner	YEO LAI HENG
NRIC No	S1154539D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93893320
Alternative Phone No	OFFICE-93893320

Vehicle Particulars

Manufacturer	NISSAN
Model	LATIO 1.5LSR

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 PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	SI18V09193/VPE/R02 (TPFT)
Cover Note Number	

Driver

Name of Driver	YEO JUN HAO
NRIC No	S9606287G
Date Of Birth	26/02/1996
Occupation	OUTDOOR
Date Of Driving Pass	10/10/2016
Driving Experience	2 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97237607
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 689A CHOA CHU KANG DRIVE #03-314
Postcode	681689
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	SLIGHT DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

REFER TO SKETCH PLAN ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKS7994E
Vehicle Make/Model/Colour	KIA FORTE K3 1.6A
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLW4299R
-----------------------------	----------

Vehicle Make/Model/Colour	TOYOTA YARIS E AUTO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SHF1521E
Vehicle Make/Model/Colour	BYD E6H
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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 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
 - (ii) for complying with requirements under any regulations, laws or court orders.

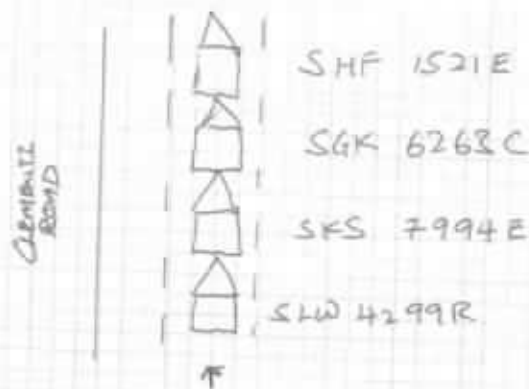
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

- 5 APR 2019

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: feedback@idac.com.sg
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

have
 Lat SHF 1521E Jam brake, I managed to brake in time and on check on
 my rear mirror and saw the third car SLW 4299R at brake in time as well.
 Within seconds, I feel an impact from the back and my car lashed
 forward and knotted onto the first car SHF 1521E.

DECLARATION

(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

- 5 APR 2019

IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4
 Singapore 415933
 Tel: 67416697 Fax: 67492305
 Email: yackb@singnet.com.sg

Reporting Centre Personnel's Signature
 Name:
 NDC/PIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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.
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6. This 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.

ACCIDENT STATEMENT	
Date Of Report	05/04/2019 14:37
Date Of Accident	04/04/2019 19:30
Exact Location Of Accident	CLEMENTI RD TOWARDS COMMONWEALTH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHF1521E
Insured/Policyholder	
Name Of Registered Owner	HDT SINGAPORE TAXI PTE LTD
Co Reg No	201609494H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86547472
Alternative Phone No	OFFICE-86547472
Vehicle Particulars	
Manufacturer	BYD
Model	E6H-(A)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	D-18091940MFSH/19
Cover Note Number	
Driver	
Name of Driver	YEO HWEE BENG
NRIC No	S7115243Z
Date Of Birth	01/05/1971
Occupation	OUTDOOR
Date Of Driving Pass	09/10/1991
Driving Experience	27 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82344579
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 90 REDHILL CLOSE #11-446
Postcode	150090
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	5
Passenger 1	NAME: : UNKNOWN GENDER: : MALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 3	NAME: : UNKNOWN GENDER: : MALE
Passenger 4	NAME: : UNKNOWN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE ATTACHMENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGK6263C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKS7994E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLW4299R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	YEO HWEE BENG
Approximate Age	47
Injuries Sustain	
Injured person in which vehicle?	SHF1521E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 90 REDHILL CLOSE #11-446
Postcode	150090

SKETCH PLAN

IMPORTANT NOTICE

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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
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

[Signature]
Driver's Signature
(If driver is not the policyholder)

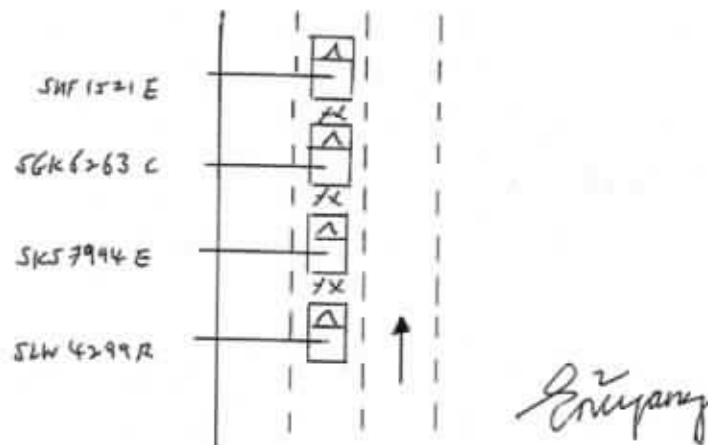
Date & Time: 05/04/19 14:10pm



Reporting Centre Personnel's Signature
Name: *Chia J Lim*
NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SEE POLICE REPORT

DECLARATION

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: 05/04/19 14:06h

Reporting Centre Personnel's Signature

Name: CHAI LIM

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20190405/2098

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

1 of 3

Report No. T/20190405/2098

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/04/2019 13:45		Vide Report No.:		Station Diary No.: 64	
Informant's Particulars					
Name of Informant: YEO HWEE BENG		Address: APT BLK 90 REDHILL CLOSE #11-446 SINGAPORE 150090			
ID Type / ID No.: NRIC NO / S7115243Z		Contact No.: Home/Office: Mobile: 82344579			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 47	Date of Birth: 01/05/1971	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: HDT Taxi Driver		Driving Licence Information: Class: 3 Date of Expiry:			

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/04/2019 19:30	Type of Location:
Location: Along Road 1 CLEMENTI ROAD Towards Commonwealth				
Weather: Clear		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Stationary Vehicle at Red light and Moving Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Colour	Condition	No. of Passenger
SGK6263C	Car				Slightly Damaged	0
SHF1521E	Car				Slightly Damaged	4
SKS7994E	Car				Slightly Damaged	0
SLW4299R	Car				Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20190405/2098

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

2 of 3

Report No. T/20190405/2098

CONTINUATION OF REPORT

Brief Details.

On 4/4/2019 at around 1930hrs, I was driving along clementi road towards commonwealth. At this moment the lights turned red, thus I stopped my car and when I looked at the rear mirror I saw the car (SGK6263C) also stopped. Suddenly I heard collision sounds and then the car behind of me collided to the rear of my car too. I then realized that it was a chain collision involving 4 cars. There are cars in front of me however I did not collide to the car in front of me. Police attended to this accident but no ambulance required.

On 5/4/2019 I felt pain at my neck and back area thus I went to Mount Alvernia Hospital and was given 5 days of MC. I am lodging this report for my record and my company record purposes. I wish to state that I have front and rear in-built camera and may have captured this accident.



**SINGAPORE
POLICE FORCE**



T/20190405/2098

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

3 of 3

Report No. T/20190405/2098

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 2 LIM ZHI CONG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN

Contact No.: 65476185

Signature Of Informant:

Date/Time:

05/04/2019 13:45

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo



Accident Photo

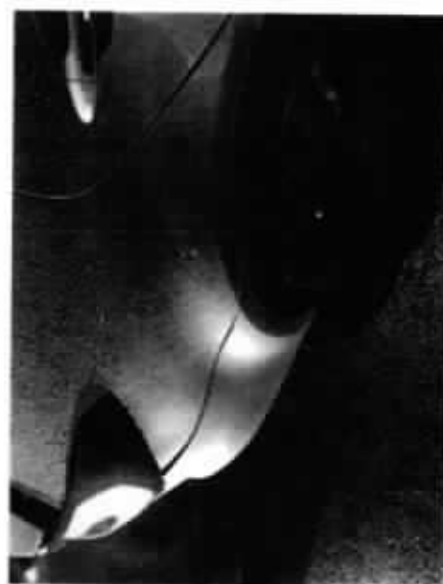






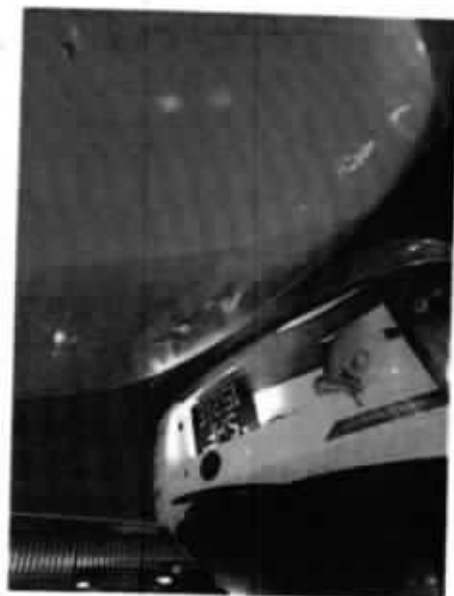
















LKK Auto Consultants Pte Ltd

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				
SOMPO INSURANCE SINGAPORE PL			Ref : CS3/SMO19006130/Avd3e2-1	
50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWERSINGAPORE 048623			<div style="text-align: right;">Date : 17-06-2019</div> <div style="text-align: right;">Code : SMO</div>	
1. Policy Particulars :- THIRD PARTY CLAIM				
	Insured Veh.	SLW 4299R	Veh. Inspected	SKS 7994E
	Policy No.	D19MTPV01002240	Coverage (\$)	0.00
	Claim No.	CMTD1901702	Excess (\$)	0.00
	Assign From	AGNES CHAN SHU HUI	Assign Date	10/06/2019
2. Vehicle Particulars & Condition				
	Make & Model	KIA FORTE K3	c.c	1591
	Engine No.	HIDDEN	Year of Reg.	2015
	Chassis No.	KNAFZ411MF5376640	Colour	SILVER
	Odometer	62418	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3. Conditions of Tyres				
		Size	Make	Balance
	R/H Front Tyre	225/45 R17	CONTINENTAL	6 mm
	L/H Front Tyre	225/45 R17	CONTINENTAL	6 mm
	R/H Rear Tyre	225/45 R17	CONTINENTAL	6 mm
	L/H Rear Tyre	225/45 R17	CONTINENTAL	6 mm
4. Description of Damages				
	THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information				
	Accident Date	04/04/2019	Inspection Date	08/04/2019
	Survey held at	I KAKI BUKIT AVE 6#02-39		
	Repairer	DC'S AUTOMOTIVE PTE LTD		
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:		14 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. 19-9607196-R

Page No.:1 of 4

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKS 7994E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BONNET	TO REPAIR SEE LABOUR	1,408.00	-
2	HEADLAMP R/L @\$1865.00	CRACKED	3,730.00	3,730.00
1	FRT GRILLE ASSY	DENTED / CRACKED	301.00	301.00
1	FRT GRILLE EMBLEM (LOGO)	NECESSARY	57.00	57.00
1	FRT BUMPER	DENTED	756.00	756.00
1	FRT BUMPER TOW COVER	NOT NECESSARY	28.00	-
1	FRT BUMPER NO. PLATE GARNISH	DENTED / CRACKED	85.00	85.00
1	FRT BUMPER TOP SEAL	NOT NECESSARY	67.00	-
1	FRT BUMPER CENTER GRILLE	REFIT	89.00	-
8	FRT BUMPER CLIP @\$3.00	NECESSARY	24.00	24.00
2	FRT BUMPER RETAINER R/L @\$32.00	CRACKED / NECESSARY	64.00	64.00
1	FRT BUMPER ABSORBER	DENTED / CRACKED	108.00	108.00
1	FRT BUMPER BEAM	DENTED	105.00	105.00
1	FRT BUMPER REINFORCEMENT	DENTED	459.00	459.00
1	FRT SUPPORT TOP COVER	REFIT	269.00	-
1	FRT SUPPORT ASSY	REALIGN	798.00	-
1	BOOT LID	DENTED	1,298.00	1,298.00
2	BOOT LID HINGE R/L @\$44.00	NOT NECESSARY	88.00	-
1	BOOT LID EMBLEM (LOGO)	NECESSARY	37.00	37.00
1	BOOT LID EMBLEM (FORTE)	NECESSARY	40.00	40.00
1	BOOT LID EMBLEM (K3)	NECESSARY	38.00	38.00
1	BOOT LID REVERSE CAMERA	NOT NECESSARY	584.00	-
2	BOOT LID NO. PLATE LAMP R/L @\$28.00	NOT NECESSARY	56.00	-
2	BOOT LID REFLECTOR LAMP R/L @\$726.00	CRACKED	1,452.00	1,452.00
1	BOOT LID INNER TRIM	NOT NECESSARY	118.00	-
14	BOOT LID INNER TRIM CLIP @\$3.00	NECESSARY	42.00	42.00
1	BOOT LID LOCK	BENT / JAMMED	132.00	132.00

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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	BOOT LID LOCK STRIKER	BENT	22.00	22.00
1	BOOT LID WEATHERSTRIP	TORN	137.00	137.00
2	TAILLAMP R/L @\$792.00	CRACKED / BROKEN	1,584.00	1,584.00
1	RR BUMPER	DENTED	688.00	688.00
4	RR BUMPER REVERSE SENSOR @\$204.00	DENTED / DAMAGED-3PCS ONLY	816.00	612.00
1	RR BUMPER LOWER TRIM	DENTED / CRACKED	365.00	365.00
2	RR BUMPER REFLECTOR R/L @\$48.00	BROKEN / CRACKED	96.00	96.00
6	RR BUMPER CLIP @\$3.00	NECESSARY	18.00	18.00
2	RR BUMPER RETAINER R/L @\$38.00	CRACKED / NECESSARY	76.00	76.00
3	RR BUMPER SIDE BRACKET R/L @\$34.00	BENT / CRACKED	102.00	102.00
2	RR BUMPER ARM R/L @\$127.00	DENTED	254.00	254.00
1	RR BUMPER REINFORCEMENT	DENTED / CRACKED	318.00	318.00
2	RR BUMPER UNDER COVER R/L @\$73.00	N/S TORN / CRACKED	146.00	73.00
2	RR TAILLAMP PANEL R/L @\$227.00	TO REPAIR SEE LABOUR	454.00	-
2	RR FENDER AIR VENT R/L @\$67.00	NOT NECESSARY	134.00	-
2	RR FENDER TRIM R/L @\$162.00	NOT NECESSARY	324.00	-
12	RR FENDER TRIM CLIP R/L @\$3.00	NECESSARY	36.00	36.00
1	RR END PANEL	DENTED	652.00	652.00
1	RR END PANEL GARNISH	CRACKED / DEFORMED	202.00	202.00
1	RR COMPARTMENT LID	DENTED / DEFORMED	287.00	287.00
1	RR FLOOR PANEL	DENTED / BUCKLED	635.00	635.00
1	RR LOCK ANTENNA	DENTED / CRACKED	162.00	162.00
1	RR EXHAUST SILENCER	TO REPAIR SEE LABOUR	656.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	FRT SUPPORT ASSY (NPA)	TO REPAIR SEE LABOUR	-	-
1	FRT CHASSIS MEMBER R/L (NPA)	TO REPAIR SEE LABOUR	-	-
1	RR FENDER R/L (NPA)	TO REPAIR SEE LABOUR	-	-
1	RR CHASSIS MEMBER R/L (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 10% DISCOUNT		-2,039.70	-1,504.70
			18,357.30	13,542.30
	<u>SPECIAL NETT ITEMS</u>			
1	SET FRT NO PLATE (W/BACKET) (SN)	DENTED / CRACKED	50.00	50.00
1	BOT RADIATOR COOLANT (SN)	NOT NECESSARY	80.00	-
1	SET RR NO. PLATE (W/BACKET) (SN)	NOT NECESSARY	50.00	-
1	RR END PANEL SEALANT (SN)	NECESSARY	50.00	40.00
1	RR FLOOR PANEL SEALANT (SN)	NECESSARY	50.00	40.00
1	RR FLOOR PANEL INSULATOR (SN)	AFFECTED / NECESSARY	150.00	120.00
			430.00	250.00
	<u>LABOUR</u>			
	TOWING.		100.00	60.00
	TO CHECK FRONT ELECTRICAL SYSTEM AND FOCUS HEADLAMP.		60.00	30.00
	TO REMOVE, REINSTALL RADIATOR, A/C CONDENSER AND PIPINGS FOR NECESSARY REPAIRS. (INCLUDE PRESSURE TEST COOLING SYSTEM AND VACUUM, RECHARGE A/C GAS)	NOT NECESSARY	220.00	-
	TO STRAIGHTEN, REPAIR, REALIGN ON FRONT AFFECTED AREA AND REPLACE DAMAGED PARTS.		1,000.00	400.00
	TO SPRAY PAINTING, BLEEDING ON FRONT AFFECTED AND ADJACENT AREA.		1,000.00	400.00
	TO CHECK REAR ELECTRICAL WIRING SYSTEM.		60.00	30.00
	TO REMOVE AND REINSTALL REAR INTERIOR TRIMS, GARNISHES, SEATS, ETC. FOR NECESSARY REPAIRS.		140.00	100.00
	TO TRANSFER BOOT COMPONENT PARTS TO NEW BOOT.		100.00	80.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE AND REINSTALL EXHAUST SILENCER FOR NECESSARY REPAIRS. TO STRAIGHTEN, REPAIR AND REALIGN REAR EXHAUST SILENCER.	NOT NECESSARY	80.00	-
	TO REMOVE, REPLACE AND / OR TRANSFER REAR REVERSE SENSORS & RESET CONTROL UNIT.		180.00	50.00
	TO CONDUCT CHASSIS ALIGNMENTS.	NOT NECESSARY	320.00	-
	TO STRAIGHTEN, REPAIR, REALIGN ON REAR AFFECTED AREA AND REPLACE DAMAGED PARTS.		1,400.00	1,200.00
	TO SPRAY PAINTING, BLENDING ON REAR AFFECTED AND ADJACENT AREA.		1,400.00	1,200.00
	TO SPRAY ANTI-RUST COATING ON NEW AND AFFECTED PANELS.		150.00	80.00
			6,210.00	3,630.00
GRAND TOTAL			24,997.30	17,422.30

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			13,900.00
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MARKET VALUE: \$59,000.00(EST)-LTA REIMBURSEMENT VALUE: \$51,800.00=NETT VALUE: \$7,200.00

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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