

ASS. REC. BY:

REF: CS/MSG19011662/D+2372

Special Instruction:

Surveyor: Bryan ASSIGNMENT (Office)From (Person): David Foo wing do of MSIG Date/Time: 1.7.2019 16.40pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SHB 3227M Insured: SGM 3859Tat Workshop m/s Soon Hock Motor Tel: 64236016of BK 10 Amc Industrial Park 21, #01-05Policy No: 27675995QMX Claim No: 597601

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 22-6-19
(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 27.19 10.59am Person Contacted: Wilson H.O.D. Endorsement: _____Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SGM 3859T: CFIA1G04026238/kmj D.O.A. 05/06/2009
	SHB 3227M: CS31FC212013608/Gvn D.O.A. 07/07/2012
	4/7@ revised wa preli advise email.

REF:

AWA

ASSIGNMENT

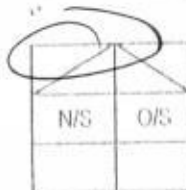
COE Sept 2020

Sept 2012

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop in/s: _____
 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 Report: _____ Consistent? : Yes or No
 GIA / PR Secu: _____ Consistent? : Yes or No
 Est. Repairs: 10 days Res: Yes or No
 Loss Sum: 20 % 3 Val: Yes or No
 CA / REV / REP: / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: **SHB 3227M** V/Type: **Sept 2012**
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: **Hyundai Sonata** C.C. **1991**
 Colour: **Yellow** A/C: Insured / Std / Nil / NA
 Sp. Reading: **509294** T/Radio: Insured / Std / Nil / NA
 Eng/No: **D4EAC197796**
 C/No: **KMHEI41VMCA830654**
 Gen. Cond: **Good** / Fair / Poor / Burnt
 Steering: **Insured** / Jammed / Leaked / Burnt or
 Brake: **Insured** / Jammed / Leaked / Burnt or
 Modi: **Nil** S/Rim / STD A/Rim or
 Tyre Size F: **215/60 R16**
 R: **— 11 —**
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Hankook**
 Front: _____ Rear: _____
 P/Bal: **S** mm R/Bal: **S** mm
 L/Bal: **S** mm L/Bal: **S** mm
 D.O.A: **22/06/2019** D.O.I: **02/07/2019**
 Survey held at **Chunni AMC**
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Front
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

MSIG **SGM 3859T**

Vehicle balance abt 14 months at time of loss

BV 16.7K

PARF at end of lifespan 7.1K

LTA 17.1K

08/08/19

Insured 2/3 10000/- with 10 days of run
 (Red: 13,717) 57%

14/8/2019

Date/Time, File Pass to?



Prof. Report

1) **M/2 Typist**

Final Report

Date/Time, File Return to?

2)

Days Of Repair: **10**Resurvey No. of Trip: **2**

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Insp (\$)



Weekend (\$)

Report Format:

Lump Sum / L.B.I: (\$)

TP

10,000/-

Survey Fee:

Transportation:

3 x 100, 30

Photo:

Other:

TOTAL

200
11

211

RECEIVED 15 AUG 2019

Note: This document has not been finalised.
LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Fievel Foo Wen Yao

Date: 04 Jul 2019

Preliminary Advice

Insured Vehicle No	: SGM3859T	Accident Date	: 22/06/2019
TP Vehicle No	: SHB3227M	Assignment Date	: 01/07/2019
Make	: HYUNDAI SONATA NF	Est. Duration of Repair	: 7.00
Date of Inspection	: 22/06/2019		
Inspection At	: SOON HOCK MOTOR PTE LTD (HQ) BLK 10 ANG MO KIO INDUSTRIAL PARK 2A, #01-05/06 AMK AUTOPOINT SINGAPORE 568047		

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	23,717.00
Revised Amount	:S\$	16,242.76
Check Items (Estimated)	:S\$	0.00
Total	:S\$	16,242.76

Lump Sum Repair	:S\$
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Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

- () The vehicle is economical/not economical for repair.
- (x) The above survey was conducted on a 'without prejudice' basis.

MCD619081091-01 / ComfortDelGro Engineering Pte Ltd - Loyang
 ENTRY DATE & TIME: 24/06/2019 14:44
 SUBMITTED BY: Catherine Por Moy Juan

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 24/06/2019 14:44
 Date Of Accident 22/06/2019 00:35
 Exact Location Of Accident LOR CHUAN X SERANGOON AVE 2
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB3227M
 Insured/Policyholder
 Name Of Registered Owner CITYCAB PTE LTD
 Co Reg No 199502839G
 Email Address FLEETSAFETY@CDGTAXI.COM.SG
 Mobile Phone No
 Alternative Phone No OFFICE-65508768
 Vehicle Particulars
 Manufacturer HYUNDAI
 Model SSONATA
 Exact Purpose for which vehicle was being used at time of accident
 Are you claiming under your own insurance policy for repair to your vehicle? NO
 If No, Please state action to be taken THIRD PARTY
 Vehicle Category TAXI
 Insurance Company
 Name of Insurance Company MS FIRST CAPITAL INSURANCE LTD
 Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
 Fleet Policy YES
 Policy Number D-18088937MFSH
 Cover Note Number
 Driver
 Name of Driver YUNOS BIN WAREN
 NRIC No S1712372F
 Date Of Birth 07/08/1965
 Occupation OUTDOOR
 Date Of Driving Pass 21/02/1998
 Driving Experience 21 YEARS AND 4 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-98586061
 Fax Number
 Contact Number
 EMail Address IRFHANROCKERS.CCSS.EAGLES@GMAIL.COM

Address	453A 08-509 FERNVALE ROAD
Postcode	791453
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	SENGKANG NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE POLICE REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGM3859T
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	LEFT CENTRE
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	YUNOS BIN WAREN
Approximate Age	53
Injuries Sustain	LEFT SHOULDER
Injured person in which vehicle?	SHB3227M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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 reputate 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.

CITYCAB PTE LTD
CO. REG. NO. 199502839G

Policyholder's Signature
Date & Time:

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

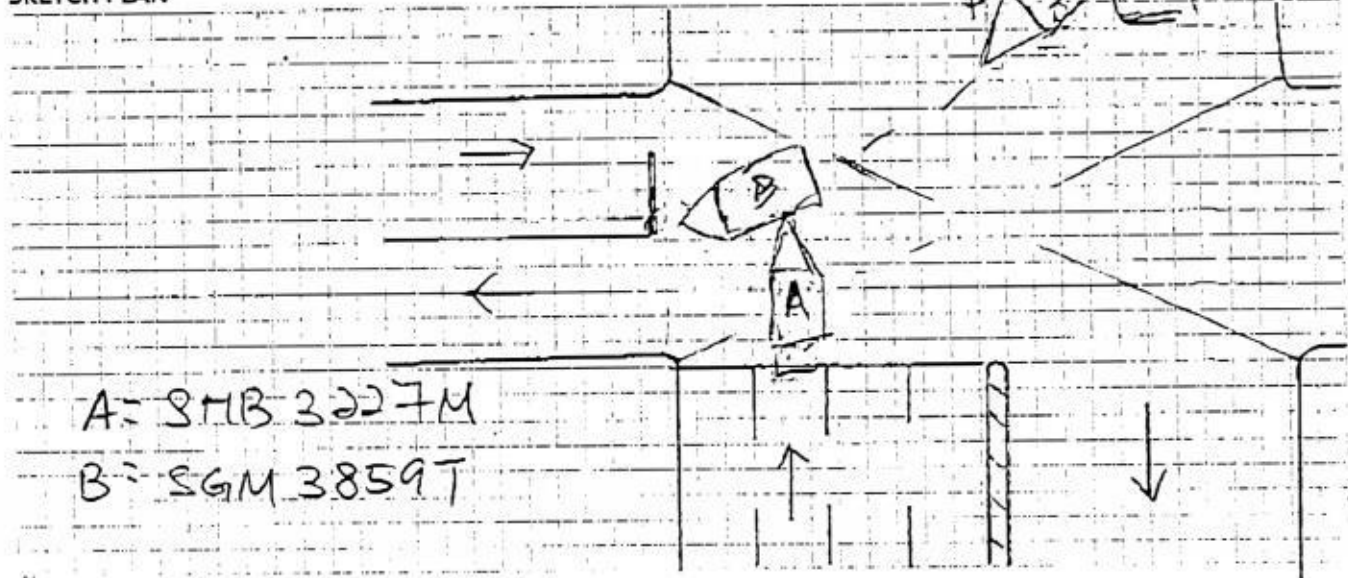
Reporting Centre Personnel's Signature
Name:

NRIC/FIN No.:

Loke Wei Yieng

24/6/19

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Attached police report

T/20190622 / 2107.

DECLARATION

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

CITYCAB PTE LTD
DO. REG. NO. 199502839Policyholder's Signature
Date & Time:Driver's Signature
(If driver is not the policyholder)
Date & Time:Reporting Centre Personnel's Signature
Name: Loke Wei Yieng
NRIC/FIN No.:

24/6/19



**SINGAPORE
POLICE FORCE**



T/20190622/2107

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20190622/2107

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/06/2019 18:46	Vide Report No.: F/20190622/0017	Station Diary No.: 121
--------------------------------------------	-------------------------------------	---------------------------

Informant's Particulars			
Name of Informant: YUNOS BIN WAREN		Address: APT BLK 453A FERNVALE ROAD #08-509 SINGAPORE 791453	
ID Type / ID No.: NRIC NO / S1712372F		Contact No.: Home/Office: Mobile: 98586061	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 53	Date of Birth: 07/08/1965	Type of Informant: Driver
Race: Boyanese		Language:	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/06/2019 00:35	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 SERANGOON AVENUE 2 LORONG CHUAN				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGM3859T	Car	TOYOTA	Corolla Altis	White	Seriously Damaged	0
SHB3227M	Car	HYUNDAI	SONATA	Yellow	Seriously Damaged	1

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



**SINGAPORE
POLICE FORCE**



T/20190622/2107

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 3

Report No. T/20190622/2107

CONTINUATION OF REPORT

Driver			
Name	YUNOS BIN WAREN	ID No.	S1712372F
Related Vehicle	SHB3227M (Car)	Contact No.	98586061
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	22/06/2019	Date Discharge	22/06/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 22/06/2019 at about 0035hrs, I was driving along Lorong Chuan towards Ang Mo Kio Avenue One when I had an traffic accident with one car bearing SGM3859T. I was driving my vehicle bearing SHB3227M. I was driving my vehicle straight to Ang Mo Kio Avenue One when suddenly, the vehicle which was driving from the other direction from Lorong Chuan towards Serangoon Avenue 2. However, at the point of time, the traffic light was green and I have the right of way to drive forward. The driver opposite was supposed to stop such that I am able to drive forward but he did not and even drove at a very fast speed towards my direction.

The accident happened at the junction of Lorong Chuan and Serangoon Avenue 2. The front of my vehicle collided into the side of his vehicle and causing his vehicle to moved a distance away. I applied Emergency brake on my vehicle but to no avail as his vehicle speed is too fast. There is one passenger inside my vehicle but after the accident he left the scene. After the collision, the impact causes my left shoulder to be extremely painful. the impact of the collision causes the vehicle to knock against one of the traffic light. The traffic light is damage from the accident. After hitting the traffic light, the driver reverse his vehicle which he was not supposed to do so.

Ambulance and traffic police was called to the scene. Traffic Police SGT(2) T180096 SHIVASURIA seized one Samsung 64GB Micro SD Card. I was subsequently conveyed to Tan Tock Seng Hospital. I was given five days of medical certificate from 22/06/2019 to 26/06/2019 inclusively. I did not manage to get his particulars as I was conveyed to the hospital.

**SINGAPORE
POLICE FORCE**

T/20190622/2107

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3

Report No. T/20190622/2107

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 TAN BING REN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

22/06/2019 18:46

Officer In Charge Of Case:

TP / GIT /

Sgt 2 PHUA TIAK YEE

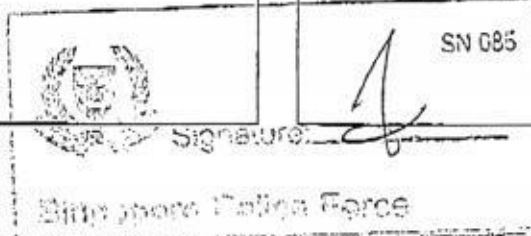
Contact No.: 65472077

Classification Of Case:

SN 085

Authentication Stamp

NP168



CHUNNI MOTOR WORK PTE LTD**REPAIR ESTIMATE***

VEHICLE NO : SHB 3227M

DATE : 28.06.2019

MAKE :

TEL : 6542 5119

MODEL : HYUNDAI SONATA

FAX : 6542 6039

MP16

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Bonnet <i>BT</i>			\$ 2,265.90	✓
	Bonnet Insulator Clips <i>NH</i>			\$ 10.00	X
	Radiator Grille <i>broken</i>			\$ 282.10	✓
	Radiator Grille U Moulding <i>broken</i>			\$ 108.90	✓
	Front Bumper Cover <i>broken</i>			\$ 544.50	✓
	Front Bumper Sponge <i>turn</i>			\$ 136.30	✓
	Front Bumper Reinforcement <i>Decker</i>			\$ 504.10	✓
	Front Bumper Grille (LH/RH) <i>N/S dislodged o/s NH</i>	\$	41.60	\$ 83.20	✓
	Front Bumper Centre Grille <i>dislodged / broken</i>			\$ 178.60	✓
	Front Bumper Lip <i>S/L</i>			\$ 59.90	X
	Front Bumper Bracket Top (LH/RH) <i>NH</i>	\$	22.40	\$ 44.80	X
	Front Bumper Protector (LH/RH) <i>N/S NH o/s NH</i>	\$	29.20	\$ 58.40	✓
	Front Bumper Bracket (LH/RH) <i>NH</i>	\$	24.60	\$ 49.20	X
	Front Bumper Side Bracket <i>NH</i>	\$	14.30	\$ 28.60	X
	Headlamp Support Panel Assy <i>Decker</i>			\$ 1,023.00	✓
	Headlamp (LH/RH) <i>N/S broken o/s NH broken</i>	\$	1,388.00	\$ 2,776.00	✓
	Radiator <i>BT</i>			\$ 814.80	✓
	Radiator Fan Blade, Cowling, Motor Assy <i>NH</i>			\$ 792.95	X
	Front Fender (LH) <i>Decker</i>			\$ 593.00	✓
	Front Fender Shield (LH/RH) <i>S/L</i>	\$	174.90	\$ 349.80	X
	Aircon Condenser <i>BT / punctured</i>			\$ 1,089.90	✓
	Front Chasis Member <i>NH</i>			\$ 1,219.80	X
	Inter Cooler <i>BT</i>			\$ 1,032.50	✓
	Pipe To Inter Cooler <i>NH</i>			\$ 167.05	X
	Wiring-Engine <i>N/S housing broken</i>			\$ 3,326.00	✓
	Wiring-Front <i>N/S housing broken</i>			\$ 1,960.80	✓
	Wiring-ECM <i>NH</i>			\$ 3,243.00	X
			16707.20		
			13365.76		
	SUB TOTAL			\$ 22,743.10	
	LESS 20%			\$ 4,548.62	
	DISCOUNTED TOTAL			\$ 18,194.48	
	Front Number Plate <i>dislodged</i>			\$ 25.00	Nett ✓
	Front No Plate Trim Cover <i>dislodged / broken</i>			\$ 30.00	Nett ✓
			45		
			46.00	\$ 55.00	

SHB 3227M

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Labour Charge			
	Panel Beating			\$ 1,200.00 300/-
	Spray Painting Charge			\$ 800.00 600/-
	Wiring Charge			\$ 50.00 30/-
	Tuff Kote			\$ 80.00 40/-
	Towing Charge			\$ 50.00 NH
	Front Chassis Alignment Charge			\$ 120.00 NH
	Remove/Refix Aircon & Refill Gas		1680.00	\$ 80.00 ✓
	Remove/Refix Dashboard			\$ 150.00 2780/-
	Remove/Refix Fuse Box			\$ 80.00 250/-
	TOTAL LABOUR			\$ 2,610.00
	ESTIMATE TOTAL			\$ 20,859.48
	<p>22/07/2019 @ 1400hrs</p> <p>NA Actual</p> <p>2/5mm 10 days</p> <p><u>P Ryan</u></p> <p>LKK Auto</p> <p><u>To provide Book Value</u></p>		<p>15090.76</p> <p>Supp 793.60</p> <hr/> <p>15884.36</p> <p>2/3 10000/-</p>	
	<p><u>LKK Auto Consultants</u> hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • To resurvey before/after spray painting • To display damaged part(s) during resurvey • Parts prices are subject to confirmation • Third party survey is on a "Without Prejudice" basis • No illegal modification(s) is allowed • Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company <p>Acknowledged by Repairer</p> <p>Signature:</p>			

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

CHUNNI MOTOR WORK PTE LTD**REPAIR ESTIMATE***

VEHICLE NO : SHB 3227M (Supplementary)

DATE : 2.07.2019

MAKE :

TEL : 6542 5119

MODEL : HYUNDAI SONATA

FAX : 6542 6039

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Cushion Seat (LH) <i>broken</i>			\$ 3,019.90
	Gearbox Oil <i>new</i>			\$ 280.00
	Oil Cooles Assy-Gearbox <i>Pinchwa 1st</i>			\$ 272.00
			992.00	
			793.60	
	SUB TOTAL			\$ 3,571.90
	LESS 20%			\$ 714.38
	DISCOUNTED TOTAL			\$ 2,857.52
	<i>2KE Auto</i>			
	<i>02/07/2019</i>			
				23,717.
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				

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

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

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG19011662/DTD3N2

Date: 15/08/2019

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	27675995QMX
Claimant Vehicle No :	SHB3227M	Insured Vehicle No :	SGM3859T
Date of Loss:	22/06/2019	Nature of Claim:	TP
		Claim No:	597601

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHB3227M		Engine No:	D4EAC197796
Make & Model:	HYUNDAI SONATA NF, 2.0 CRDI AT ABS 2WD 4DR TURBO (A)		Chassis No:	KMHET41VMCA830654
Reg. Date:	28/09/2012 (Man. Year: 2012)		Odometer:	509294 km
Colour:	Yellow			
Engine Capacity:	1991 cc			
Market Value/New Car Price:	N/A			
Sum Insured (S\$):	Market Value/New Car Price			

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	215/60R16	Rear Tyre Size:	215/60R16
Front Left Side:	Hankook 5 mm	Rear Left Side:	Hankook 5 mm
Front Right Side:	Hankook 5 mm	Rear Right Side:	Hankook 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	21,107.00	14,204.36	6,902.64	32.70
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,610.00	1,680.00	930.00	35.63
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	23,717.00	15,884.36	7,832.64	33.03
Approved Total (Overridden) (S\$)		10,000.00		
(S\$)	23,717.00	10,000.00	13,717.00	57.84
+ GST 7.00/7.00% (S\$)	1,660.19	700.00	960.19	57.84
Nett Amount (S\$)	25,377.19	10,700.00	14,677.19	57.84

INSPECTION

Date of Assignment:	01/07/2019
Date Inspected:	02/07/2019 Inspected At:

CHUNNI MOTOR WORK PTE LTD
BLK 10 ANG MO KIO IND. PARK 2A,
#03-19 AMK AUTOPOINT
SINGAPORE 568047

Estimated Period of Repair: 10.0 days

Adjuster: BRYAN TANI

Manager: DENISE TAY KWEE CHENG

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

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 15 Aug 2019)

Parts: 143 HYUNDAI SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: (Unsubmitted, no print-code for SHB3227M)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

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

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BONNET	Bent	2,265.90 FL	*2,265.90 FL
2	1		*BONNET INSULATOR CLIPS	Not Necessary	10.00 FL	*- FL
3	1		*RADIATOR GRILLE	Broken	282.10 FL	*282.10 FL
4	1		*RADIATOR GRILLE U MOULDING	Broken	108.90 FL	*108.90 FL
5	1		*FRONT BUMPER COVER	Broken	544.50 FL	*544.50 FL
6	1		*FRONT BUMPER SPONGE	Torn	136.30 FL	*136.30 FL
7	1		*FRONT BUMPER REINFORCEMENT	Dented	504.10 FL	*504.10 FL
8	1		*FRONT BUMPER GRILLE (LH/RH)	Ns Dislodged/Os Not Necessary	83.20 FL	*41.60 FL
9	1		*FRONT BUMPER CENTRE GRILLE	Dislodged/Broken	178.60 FL	*178.60 FL
10	1		*FRONT BUMPER LIP	Serviceable	59.90 FL	*- FL
11	2		*FRONT BUMPER BRACKET TOP (LH/RH)	Not Necessary	44.80 FL	*- FL
12	1		*FRONT BUMPER PROTECTOR (LH/RH)	N/s Bent/O/s Not Necessary	58.40 FL	*29.20 FL
13	2		*FRONT BUMPER BRACKET (LH/RH)	Not Necessary	49.20 FL	*- FL
14	2		*FRONT BUMPER SIDE BRACKET	Not Necessary	28.60 FL	*- FL
15	1		*HEADLAMP SUPPORT PANEL ASSY	Dented	1,023.00 FL	*1,023.00 FL
16	2		*HEADLAMP (LH/RH)	N/s Broken/O/s Mounting Broken	2,776.00 FL	*2,776.00 FL
17	1		*RADIATOR	Bent	814.80 FL	*814.80 FL
18	1		*RADIATOR FAN BLADE,COWLING,MOTOR ASSY	Not Necessary	792.95 FL	*- FL
19	1		*FRONT FENDER (LH)	Dented	593.00 FL	*593.00 FL
20	2		*FRONT FENDER SHIELD (LH/RH)	Serviceable	349.80 FL	*- FL
21	1		*AIRCON CONDENSER	Bent/Punctured	1,089.90 FL	*1,089.90 FL
22	1		*FRONT CHASIS MEMBER	Not Necessary	1,219.80 FL	*- FL
23	1		*INTER COOLER	Bent	1,032.50 FL	*1,032.50 FL
24	1		*PIPE TO INTER COOLER	Not Necessary	167.05 FL	*- FL
25	1		*WIRING-ENGINE	Housing Broken	3,326.00 FL	*3,326.00 FL
26	1		*WIRING-FRONT	Housing Broken	1,960.80 FL	*1,960.80 FL
27	1		*WIRING-ECM	Not Necessary	3,243.00 FL	*- FL
28	1		*FRONT CUSHION SEAT (LH)	Broken	3,019.90 FL	*600.00 FL
29	1		*GEARBOX OIL	Necessary	280.00 FL	*120.00 FL
30	1		*OIL COOLES ASSY-GEARBOX	Punctured/Bent	272.00 FL	*272.00 FL
31	1		*FRONT NO PLATE TRIM COVER }	Dislodged/Broken	30.00 FS	*45.00 FS
32	1		*FRONT NUMBER PLATE }	Dislodged	25.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$) 26,370.00 17,744.20
 - List Item Discount on L Items 20.00/20.00% (S\$) 5,263.00 3,539.84

Total Parts (S\$) 21,107.00 14,204.36

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	1,200.00	800.00
2	SPRAY PAINTING CHARGE	New	800.00	600.00
3	WIRING CHARGE	New	50.00	30.00
4	TUFF KOTE	New	80.00	40.00
5	TOWING CHARGE	New	50.00	0.00
6	FRONT CHASSIS ALIGNMENT CHARGE	New	120.00	0.00
7	REMOVE/REFIX AIRCON & REFILL GAS	New	80.00	80.00
8	REMOVE/REFIX DASHBOARD	New	150.00	80.00
9	REMOVE/REFIX FUSE BOX	New	80.00	50.00
Gross Labour Cost (\$\$)			2,610.00	1,680.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >