

ASS. REC. BY:

REF:

CS/ADCA19011926/AN302

Special Instruction:

Surveyor: Adrian

ASSIGNMENT (Office)

From (Person): Stella Goh of AWA Date/Time: 5/7/2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SMG1419D Insured: SLT614J

at Workshop m/s CAS Garage Tel:

or No. 1 Kaki Bukit Ave 6 #02-22

Policy No: AVPPSB05H5T51802 Claim No: NEV1900331/KW

Sum Insured: Excess:

Make of Veh: D.O.A. 2/7/2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 5/7 Person Contacted: Allan Vehicle: IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SMG1419D-X
	SLT614J-X
24/7/19	Adrian confirmed LS \$ 5450 (Red 7694, 5870)

AWA

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SMG 1419D

at Workshop w/s CAS

of 1 Kaki Bukit Ave 6 #02-22

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res:

Yes or No

Turn Sum:

%

3 Val:

Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SMG 1419D

Yr Regn:

2018 DEC

Type:

M.Cas / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Hyundai Elantra

cc 1591

Colour:

Blue

A/C:

Insured / Std / NI / NA

Sp Reading

6211

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KMH P841CMJU766468

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195/65R15

R:

195/65R15

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

TOYO / YOKO or

Nexen

Front

Rear

R/Bal.

06

mm

R/Bal.

06

mm

L/Bal.

06

mm

L/Bal.

06

mm

D.O.A.

D.O.I.

05/07/19

Survey held at

CAS

Des. of Damages: Frt / 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 AWA

RECEIVED 21 JUL 2019

Date/Time, File Pass to?

☐

Prel. Report

i)

☐

Final Report

Date/Time, File Return to?

24/7 - typist

Paper Format:

Data Com/PLT:

TP
LS \$5450/2

Days Of Repair: 6

Resurvey No. of Trip: 1

Arid Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Insp (\$

☐

Photo (\$

Survey Fee:

Transportation

S + RS \$

Fringe

Total

Total

250

Nivitha (LKK Auto)

From: Goh, Stella <stella.goh@awac.com> on behalf of Motorsurvey
<Motorsurvey@awac.com>
Sent: Friday, 5 July 2019 10:03 AM
To: assignments@lkkauto.com
Cc: Nicole Chong; sur@lkkauto.com
Subject: TP Survey assignment for SMG1419D DOA: 02.07.2019 Our ref: NSV1900331/KW

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us **do** have consensus in the appointment of **LKK Auto Consultants Pte Ltd** as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	SMG 1419 D
Insured Vehicle	:	SLJ 614 J
Policy Number	:	AVPPSB0545751802
Name of Workshop	:	CAS Garage Pte Ltd
Contact Number	:	8782 7171
Person to Contact	:	Mr Allan Goh
Estimated Cost of repairs	:	NA

Regards,
Claims Division

Copy to CAS Garage Pte Ltd (Your Ref: SMG1419D) via Email.

Note -

- (X)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards
Motor Claims
Claims Group

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

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	02/07/2019 16:18
Date Of Accident	02/07/2019 09:30
Exact Location Of Accident	PIE NEAR EXIT 26A
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG1419D
Insured/Policyholder	
Name Of Registered Owner	CHUI MEI HOONG
NRIC No	S6803877D
Email Address	CMEIHOONG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96857080
Alternative Phone No	OFFICE-92237430

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 (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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P2271596
Cover Note Number	

Driver

Name of Driver	DAWN NG
NRIC No	S9713011F
Date Of Birth	11/04/1997
Occupation	INDOOR
Date Of Driving Pass	31/12/2016
Driving Experience	2 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92237430
Fax Number	
Contact Number	
Email Address	DAWNNG97@GMAIL.COM

Address	806 THOMSON ROAD #06-12 SINGAPORE
Postcode	298189
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	COLLISION - HEAD TO REAR
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?	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

SEE ATTACH SKETCH PLAN & STATEMENT

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	SLJ614J
Vehicle Make/Model/Colour	TOYOTA WISH
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

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to rescind policy benefits.
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 files respecting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)
I understand, acknowledge, agree and consent that:
(i) 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' law firms/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' law firms/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/are be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

[Signature]

Policyholder's Signature / Date & Time

[Signature] 02/07/2019 4:17pm

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Sketch Plan

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Sketch Plan #2

Describe Circumstances of the Accident

I was driving along the PLE on the morning (9:30 am) of 2 July 2019 (Tuesday).

As I was heading ~~the~~ exit 269, the car ~~in front of me~~ suddenly ~~was~~ braked (I think he almost hit the car in front of him), causing me to ~~also~~ brake as well. Then the car behind me hit the rear of my car. Traffic conditions normal.

Declaration

We declare the foregoing particulars are true in every respect.

<p></p> <p>Policyholder's Signature / Date & Time 2/7/19 4:30pm</p>	<p></p> <p>Driver's Signature (If driver is not the policyholder) / Date & Time 02/07/2019 4:50pm</p>	<p>Witnessed by Reporting Centre Personnel</p>
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**CAS GARAGE PTE LTD**

(Reg No: 201828067M)

1 KAKI BUKIT AVENUE 6, #02-22 AUTOBAY, SINGAPORE 417883

VEHICLE REPAIR ESTIMATE

Insurance Company: ALLIED WORLD ASSURANCE COMPANY LIMITED

Address: NO 60, ANSON ROAD, #08-01
MAPLETREE ANSON, S(079914)

Veron.

Telephone: 64230888 Fax: 64230798
62201188Email: singleong.see@awac.com
kin.wong@awac.com

Make/ Model : HYUNDAI ELANTRA

Date: 04.07.2019

Chassis No : KMHD841CMHU199484

Vehicle No: SMG1419D

Date/Time of Accide: 02.07.2019/0930

Year of Reg: 05.12.2018

Materials Cost/ Spare Parts Cost**TO BE COMPLETED BY SERVICE ADVISOR**

ITEMS	PARTS DESCRIPTION	QTY	LIST PRICE \$		FINAL PRICE \$
1	BOOTLID <i>Dented</i>	1	\$ 1,620.40		\$ ✓ 1,620.40
2	BOOTLID SMART KEY ANTENNA <i>Cracked</i>	1	\$ 236.50		\$ ✓ 236.50
3	BOOT RELEASE ANTENNA <i>Cracked</i>	1	\$ 245.80		\$ ✓ 245.80
4	BOOTLID INNER TRIM <i>new</i>	1	\$ 356.20		\$ ✓ 356.20
5	BOOTLID REFLECTORS <i>new</i>	2	\$ 352.80		\$ ✓ 705.60
6	BOOTLID EMBLEM "ELANTRA" ?	1	\$ 90.30		\$ ✓ 90.30
7	BOOTLID EMBLEM "S" <i>new</i>	1	\$ 55.60		\$ ✓ 55.60
8	BOOTLID LOGO	1	\$ 60.50		\$ ✓ 60.50
9	BOOTLID TOP LOCK <i>Dented</i>	1	\$ 223.60		\$ ✓ 223.60
10	BOOTLID LOWER CATCH <i>new</i>	1	\$ 35.80		\$ X 35.80
11	BOOTLID WEATHERSTRIP <i>new</i>	1	\$ 202.90		\$ ✓ 202.90
12	REAR BUMPER <i>Cracked</i>	1	\$ 558.20		\$ ✓ 558.20
13	REAR BUMPER RETAINERS <i>new</i>	2	\$ 58.60		\$ ✓ 117.20
14	REAR BUMPER REFLECTORS <i>Cracked</i>	2	\$ 86.50		\$ ✓ 173.00
15	REAR BUMPER BRACKETS <i>get</i>	2	\$ 85.60		\$ ✓ 171.20
16	REAR BUMPER BOTTOM <i>Cracked</i>	1	\$ 360.80		\$ ✓ 360.80
17	REAR BUMPER REINFORCEMENT <i>Best</i>	1	\$ 378.10		\$ ✓ 378.10
18	REAR REINFORCEMENT BRACKETS <i>new</i>	3	\$ 126.40		\$ X 379.20
19	TAILAMPS <i>Cracked</i>	2	\$ 498.60		\$ ✓ 997.20
20	TAILAMPS PANEL <i>not new</i>	2	\$ 854.60		\$ X 1,709.20
21	REAR FENDER INNER COWLING <i>new</i>	2	\$ 289.20		\$ ✓ 578.40
22	REAR FENDER INNER TRIM <i>new</i>	2	\$ 302.80		\$ ✓ 605.60
23	REAR END PANEL <i>Dented</i>	1	\$ 423.10		\$ ✓ 423.10
24	REAR END PANEL TOP GARNISH <i>Cracked</i>	1	\$ 145.60		\$ ✓ 145.60
Total List Price Cost					\$ 10,430.00
				PARTS DISCOUNT 20%	\$ 8,344.00

585710

468568

SPECIAL NETT	PARTS DESCRIPTION	QTY	PRICE \$		FINAL PRICE \$
1	REAR NUMBER PLATE WITH CASING <i>new</i>	1 SET	\$ 50.00		\$ 50.00
2	REAR BUMPER CLIPS <i>new</i>	1 SET	\$ 30.00		\$ 30.00
3	REAR END PANEL TOP GARNISH CLIPS <i>new</i>	1 SET	\$ 30.00		\$ 30.00
4	REVERSE SENSOR <i>new</i>	1 SET	\$ 250.00		\$ 250.00
5	REAR FENDER COWLING SET <i>new</i>	2 SET	\$ 60.00		\$ 60.00
6	REAR FENDER INNER TRIM SET <i>new</i>	2 SET	\$ 60.00		\$ 60.00
7	END PANEL SEALANT <i>new</i>	2	\$ 80.00		\$ 80.00
Total Special Nett Items					\$ 560.00
300					

Labour Works/ Panel Beating Related Works	
Job Scope	Quotation
TO RENEW DAMAGED PARTS, REPLACE, BEAT, WELD, REALIGN AND ALIGN ALL PARTS	\$ 820,600.00
Spray Painting	
Job Scope	Quotation
TO RESPRAY AFFECTED AREAS	\$ 1,600.00
Others Cost (Accident Repair Related Expenses)	
Job Scope	Quotation
TO TUFFCOAT AFFECTED AREA	\$ 200.00
TO REMOVE/ REFIT INTERIOR UPHOLSTERY	\$ 150.00
TO APPLY SEALANT TO THE AFFECTED AREAS	\$ 150.00
TO REMOVE/ REFIT WIRING CHECKS	\$ 120.00
TO CONDUCT WATER LEAKAGE TEST	\$ 150.00
TO REMOVE/ REPLACE REVERSE SENSORS AND DISTANCE SETTLING	\$ 150.00
TO REMOVE AND REPLACE BOOTLID MECHANISM	\$ 120.00
Total Others Cost	\$ 1,040.00
GRAND TOTAL	
	\$ 13,144.00

CAS GARAGE PTE LTD
 UEN 201828067M
 1 KAKI BUKIT AVENUE 6, #02-22 AUTOBAY,
 SINGAPORE 417883

CAS GARAGE PTE LTD

Person Incharge: Allan
 Direct Contact: +65 8782 7171
 Email: allangoh.cas@gmail.com
 Fax: +65 6509 9501

LKK Auto Consultants hence notify the Repairer of the following:

- 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

Acknowledged by Repairer
 Signature:
 Date:

Adrian L
 4/s 05/07/19

06 Rp

Total: 6843.68

4/s 5450




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				
ALLIED WORLD ASSURANCE COMPANY LTD		Ref : CS/AWA19011926/Avf3n2		
(SINGAPORE BRANCH) 60 ANSON ROAD #08-01 (8th FLOOR) MAPLETREE ANSON SINGAPORE 079914		Date : 25-07-2019		
		Code : AWA		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLJ 614J	Veh. Inspected	SMG 1419D	
Policy No.	AVPPSB0545751802	Coverage (\$)	0.00	
Claim No.	NSV1900331/KW	Excess (\$)	0.00	
Assign From	STELLA GOH	Assign Date	05/07/2019	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI ELANTRA	c.c	1591	
Engine No.	HIDDEN	Year of Reg.	2018	
Chassis No.	KMHD841CMJU766468	Colour	BLUE	
Odometer	6211	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	NEXEN	6 mm	
L/H Front Tyre	195/65 R15	NEXEN	6 mm	
R/H Rear Tyre	195/65 R15	NEXEN	6 mm	
L/H Rear Tyre	195/65 R15	NEXEN	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	02/07/2019	Inspection Date	05/07/2019	
Survey held at	CAS GARAGE PTE LTD NO. 1 KAKI BUKIT AVE 6, #02-22 AUTOBAY 417883 KAKI BUKIT			
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:		6 Working Days		



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.: 1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMG 1419D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOTLID	DENTED	1,620.40	1,620.40
1	BOOTLID SMART KEY ANTENNA	CRACKED	236.50	236.50
1	BOOT RELEASE ANTENNA	CRACKED	245.80	245.80
1	BOOTLID INNER TRIM	NOT NECESSARY	356.20	-
2	BOOTLID REFLECTORS @\$352.80	NOT NECESSARY	705.60	-
1	BOOTLID EMBLEM "ELANTRA"	NECESSARY	90.30	90.30
1	BOOTLID EMBLEM "S"	NECESSARY	55.60	55.60
1	BOOTLID LOGO	NECESSARY	60.50	60.50
1	BOOTLID TOP LOCK	DAMAGED	223.60	223.60
1	BOOTLID LOWER CATCH	NOT NECESSARY	35.80	-
1	BOOTLID WEATHERSTRIP	NOT NECESSARY	202.90	-
1	REAR BUMPER	DEFORMED	558.20	558.20
2	REAR BUMPER RETAINERS @\$58.60	NECESSARY	117.20	117.20
2	REAR BUMPER REFLECTORS @\$86.50	CRACKED	173.00	173.00
2	REAR BUMPER BRACKETS @\$85.60	BENT	171.20	171.20
1	REAR BUMPER BOTTOM	DEFORMED	360.80	360.80
1	REAR BUMPER REINFORCEMENT	BENT	378.10	378.10
3	REAR REINFORCEMENT BRACKETS @\$126.40	NOT NECESSARY	379.20	-
2	TAILLAMPS @\$498.60	CRACKED	997.20	997.20
2	TAILLAMPS PANEL @\$854.60	NOT NECESSARY	1,709.20	-
2	REAR FENDER INNER COWLING @\$289.20	NOT NECESSARY	578.40	-
2	REAR FENDER INNER TRIM @\$302.80	NOT NECESSARY	605.60	-
1	REAR END PANEL	DENTED	423.10	423.10
1	REAR END PANEL TOP GARNISH	DEFORMED	145.60	145.60
	LESS 20% DISCOUNT		-2,086.00	-1,171.42
			8,344.00	4,685.68
<u>SPECIAL NETT ITEMS</u>				
1	SET REAR NUMBER PLATE WITH CASING (SN)	NOT NECESSARY	50.00	-
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	30.00	30.00
1	SET REAR END PANEL TOP GARNISH CLIPS (SN)	NECESSARY	30.00	10.00
1	SET REVERSE SENSOR (SN)	DAMAGED	250.00	200.00
2	SET REAR FENDER COWLING (SN)	NOT NECESSARY	60.00	-
2	SET REAR FENDER INNER TRIM (SN)	NOT NECESSARY	60.00	-

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LKK Auto Consultants Pte Ltd

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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	END PANEL SEALANT (SN)	NECESSARY	80.00	60.00
			560.00	300.00
	LABOUR			
	TO RENEW DAMAGED PARTS, REPLACE, BEAT, WELD, REALIGN AND ALIGN ALL PARTS.		1,600.00	800.00
	TO RESPRAY AFFECTED AREAS.		1,600.00	800.00
	TO TUFFCOAT AFFECTED AREA.		200.00	60.00
	TO REMOVE/REFIT INTERIOR UPHOLSTERY.		150.00	60.00
	TO APPLY SEALANT TO THE AFFECTED AREAS.		150.00	60.00
	TO REMOVE/REFIT WIRING CHECKS.		120.00	30.00
	TO CONDUCT WATER LEAKAGE TEST.	NOT NECESSARY	150.00	-
	TO REMOVE/REPLACE REVERSE SENSORS AND DISTANCE SETTLING.		150.00	50.00
	TO REMOVE AND REPLACE BOOTLID MECHANISM.	NOT NECESSARY	120.00	-
			4,240.00	1,860.00
GRAND TOTAL			13,144.00	6,845.68
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				5,450.00

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ADRIAN LING WAI PING

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

Licensed Appraiser

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