

ASS. REC. BY:

REF:

7M1/CC3/7M19013405/KS43N2

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WWS / 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:

(Policy Condition)

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

Bal. or Market Value:

R41,300

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

05 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHF 6334

Yr Regn:

06, 14

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

Truck / Trailer or

Make:

Renault Latitude

c.c

1995

Colour:

M. White / Red

A/C:

Insured / Std / NI / NA

Sp. Reading

713836

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

VF1A9215AUC 278283

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: 215/60R16

R: Citi

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

Rear

R/Bal.

9

mm

R/Bal.

8

mm

L/Bal.

9

mm

L/Bal.

8

mm

D.O.A.

27/7/19

D.O.I.

30/7/19

Survey held at

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

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

Date / Time

Action / Instruction

1

File pass to

SHF 6334 - CC4 / M3M19003441 / 10/13

SML 52934 - X

2017 - 06/05/2019

15/10 C/Lng B 71501 to limit.

C\$ 33,735.67 Red - 83%)

Date/Time. File Pass to?

30/03/19

1) Type: 1

Date/Time. File Return to?

2)



: Prel. Report



: Final Report

Days Of Repair:

5

Resurvey No. of Trip:

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

Fees:

Others:

TOTAL

250

11

261

Report Format :

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

7,150/- L/S

FW: TCS REF: AAD1907-258--Accident involving SHF 633Y & SML 5293X on 27/07/2019

Ng Wai Yin <waiyin.ng@transcab.com.sg>

Fri 30/8/2019 3:19 PM

To: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Cc: SUR <sur@lkkauto.com>

📎 5 attachments (12 MB)

image001.wmz; ESTIMATE MARKED .pdf; DSCF3038.JPG; DSCF3039.JPG; DSCF3033.JPG;

Hi Shirley

Amount confirmed \$ 7,150 (before GST).

Thank You

Best Regards,

Ng Wai Yin

Finance Department

TEL: 6603 1265 Ext.308

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

TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63, Singapore 569111

Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764

Website: www.transcab.com.sg



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

From: Shirley Hiew (LKK Auto) [mailto:ShirleyHiew@lkkauto.com]

Sent: Friday, 30 August, 2019 12:10 PM

To: Ng Wai Yin <waiyin.ng@transcab.com.sg>

Cc: SUR <sur@lkkauto.com>

Subject: TCS REF: AAD1907-258--Accident involving SHF 633Y & SML 5293X on 27/07/2019

Dear Wai Yin,

Please confirm final fig \$ 7,150.00 (lump sum) @ 5 days of repairs before GST.

Kindly provide us after paint photo.

Thank you.

· Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



This email has been checked for viruses by AVG antivirus software.
www.avg.com

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Wednesday, 31 July 2019 4:47 PM
To: 'Motor Claims'
Cc: SUR
Subject: DIRECT SURVEY INSPECTION ON WORKSHOP - TRANS-CAB AUTO SERVICES PTE LTD, DOA: 27/07/2019 , SHF 633Y (TP Vehicle), SML 5293X (OI Vehicle)
Attachments: TP GIA REPORT.pdf, ESTIMATE.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SHF 633Y at M/s: TRANS-CAB AUTO SERVICES PTE LTD, NO.2 ANG MO KIO ST 63 SINGAPORE 569111 on 30/07/2019

Enclosed herewith a copy of TP's GIA report and estimated cost of repair .

Meanwhile, kindly create claim in merimen for our necessary action.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
1	1
2	2
3	3
4	4
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99	99
100	100

Owner ID: 878K

Vehicle No.: SHF633Y

Vehicle to be Exported: Yes

Intended Deregistration Date: 29 Jul 2019

Vehicle Make: RENAULT

Vehicle Model: LATITUDE 2.0L DCI AUTO D/AB 4DR

Primary Colour: Red

Manufacturing Year: 2014

Engine No.: M9R8839C001599

Chassis No.: VF1ABL15AUC278283

Maximum Power Output:	127.0 kW (170 bhp)
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Open Market Value:	\$19,998.00
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Original Registration Date: 27 Jun 2014

First Registration Date: 27 Jun 2014

Transfer Count: 0

Actual ARF Paid:	\$12,498.00
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PARF Eligibility:	Yes
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PARF Eligibility Expiry Date: 26 Jun 2022

PARF Rebate Amount:	\$8,748.00
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COE Expiry Date: 26 Jun 2022

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):

PQP Paid:	\$57,338.00
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COE Rebate Amount:	\$20,863.00
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Total Rebate Amount:	\$29,611.00
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Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 29 Jul 2019

OK

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	29/07/2019 14:39
Date Of Accident	27/07/2019 18:30
Exact Location Of Accident	HOLLAND ROAD T-X HOLLAND AVENUE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHF633Y
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	RENAULT
Model	LATITUDE-2.0 D DCI (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VFX/P1680520
Cover Note Number	
Driver	
Name of Driver	TAN CHOON HI
NRIC No	S1178820C
Date Of Birth	18/12/1956
Occupation	OUTDOOR
Date Of Driving Pass	11/10/1982
Driving Experience	36 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81269933
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 521A EDGEFIELD WALK #08-21
Postcode	821621
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF 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 - 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)	3
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE

Details of Police Action

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

Circumstances of Accident

ON 27/07/2019 AT ABOUT 1830HRS, I WAS STATIONARY ON THE FIRST LANE OF HOLLAND ROAD, JUNCTION TO HOLLAND AVENUE DUE TO RED TRAFFIC LIGHT, WHEN THE LIGHT TURNS GREEN I PROCEEDED TO MOVE ON, JUST WHEN I WAS ABOUT TO MOVE OFF, I FELT AN IMPACT ON THE REAR OF MY TAXI. VEHICLE B(SML5293X) HAS FAILED TO STOP IN TIME AND COLLIDED ONTO THE REAR OF MY TAXI.

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	SML5293X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Sketch Plan Pg. 1

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:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN

Holland Rd. T-X Holland Avenue.

A: SHF 633Y

B: SML 5273X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to GIA Report.

DECLARATION

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

Policyholder's Signature _____

Date & Time:

©2004 Scott/Pharm/own. U.S.

Simon

Driver's Signature _____

(if driver is not the policyholder)

Date & Time:

Zwei

Reporting Centre Personnel's Signature

Name: _____

NR/C/FIN No.:

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHF 633Y**AAD1907-258**

Not Authorised
61 Sep 8 7150h

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration :

30 JUL 2019

SHF 633Y

VF1ABL15AUC278283

RENAULT

LATITUDE

27.7.19

TOKIO MARINE

27/6/2014

		PART	LIST
1	1	BUMPER COVER REAR	\$ Bu 1,108.46 ✓
2	1	BUMPER LOWER REAR	\$ Bu/n 768.84 ✓
3	1	BUMPER BRACKET CTR REAR	\$ D, 113.47 ✓
4	1	BUMPER BRACKET SIDE RH REAR	\$ S, 135.97 X
5	1	BUMPER RETAINER RH REAR	\$ S, 44.99 X
6	1	BUMPER REFLECTOR RH	\$ S, 43.61 X
7	1	BUMPER BRACKET SIDE LH REAR	\$ S, 135.97 X
8	1	BUMPER RETAINER LH REAR	\$ S, 44.99 X
9	1	BUMPER REFLECTOR LH	\$ S, 43.61 X
10	1	BUMPER BEAM REAR	\$ B, 777.52 ✓
11	1	BUMPER BEAM BRACKET LH REAR	\$ R 225.95 X
12	1	BUMPER BEAM BRACKET RH REAR	\$ R 225.95 X
13	1	OUTER PANEL REAR (End Panel)	\$ B, 1,471.77 ✓
14	1	OUTER PANEL REAR (End Panel)TRIM	\$ CM 404.56 ✓
15	1	TAILLAMP RH	\$ S, 552.55 X
16	1	TAILLAMP PANEL RH	\$ R 986.70 X
17	1	TAILLAMP LH	\$ S, 552.55 X
18	1	TAILLAMP PANEL LH	\$ R 986.70 X
19	1	BOOT REAR	\$ Bu 2,872.68 ✓
20	1	BOOT FINISHER	\$ S, 470.06 X
21	1	BOOT WHEATERSTRIP	\$ S, 323.05 X
22	1	BOOT REFLECTOR LAMP LH	\$ S, 493.35 X
23	1	BOOT REFLECTOR LAMP RH	\$ S, 493.35 X
24	1	BOOT BADGE 'RENAULT'	\$ R, 225.36 ✓
25	1	BOOT BADGE	\$ R, 225.36 ✓
26	1	BOOT STRUT LH	\$ S, 276.08 X
27	1	BOOT STRUT RH	\$ S, 276.08 X

Trans-cab Auto Services Pte Ltd

AAD1907-258

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHF 633Y

28	1	BOOT HINGE LH	\$	367.84	}	X
29	1	BOOT HINGE RH	\$	367.84		
30	1	BOOT INNER TRIM	\$	586.45		
31	1	BOOT SWITCH	\$	168.13		
32	1	BOOT LOCK	\$	202.67		
33	1	BOOT LOCK CATCH	\$	74.40		
34	1	SPARE WHEEL PANEL (Luggage Floor Panel)	\$	2,189.88		
35	1	SPARE WHEEL PANEL TRIM	\$	612.21		
36	1	EXHAUST REAR	\$	7,489.05		
37	1	EXHAUST CAP REAR	\$	230.49		
TOTAL			\$	26,568.51		
10%			\$	2,656.85		
			\$	23,911.65		

Special Nett

Special Net					
1	1SET	PARKING AID	\$	700.00	X
2	1SET	REAR BUMPER CLIP	\$	66.00	—
3	1SET	BUMPER BRACKET CTR CLIP	\$	33.00	—
4	1SET	BUMPER BRACKET SIDE CLIP RH RR	\$	10.00	X
5	1SET	BUMPER RETAINER RH CLIP RR	\$	20.00	X
6	1SET	BUMPER BRACKET SIDE CLIP LH RR	\$	10.00	X
7	1SET	BUMPER RETAINER CLIP LH RR	\$	20.00	X
8	1SET	BUMPER LOWER REAR RIVET	\$	22.00	X
9	1SET	BUMPER LOWER REAR CLIP	\$	66.00	✓
10	1	BOOT STICKER "Trans-cab"	\$	30.00	—
11	1	BOOT STICKER "6555-3333"	\$	30.00	—
12	1	EXHAUST MOUNTING REAR	\$	17.82	} X
13	2	REAR WINDSCREEN SEALANT	\$	80.00	
14	1	WINDSCREEN MOULDING	\$	100.00	
15	1	REAR WINDSCREEN INNER SPONGE SEAL	\$	100.00	
16	1	BOOT INNER TRIM CLIP	\$	45.00	
17	1SET	BOOT FINISHER CLIP	\$	24.20	
18	1	TAILLAMP CLIP LH	\$	5.00	}
19	1	TAILLAMP CLIP RH	\$	5.00	
TOTAL			\$	1,384.02	

Trans-cab Auto Services Pte Ltd

AAD1907-258

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHF 633Y

TOTAL PARTS	\$	25,295.67
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LABOUR

To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	380.00	601
To transfer of bootlid fittings, attachments and perform water seepage test.	\$	170.00	601
To Check Electrical Lighting Concerned.	\$	170.00	201
To Rust-Proofing Of The Affected Areas.	\$	170.00	601
To transfer of tire, rim and on wheel balancing.	\$	nn 170.00	X
To reinstall rear bumper parking sensor.	\$	170.00	601
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	6,000.00	6001
Putty And Spray Painting Of The Affected Portion.	\$	6,000.00	6601
To repair and realign rear exhaust pipe.	\$	nn 170.00	X
To drop rear exhaust box, renew the same, to repair and realign centre exhaust pipe.	\$	5 170.00	X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	4 170.00	X
To transfer of rear windscreen fittings and conduct water seepage test.	\$	4 170.00	X
To check steering geometry and computer wheel alignment	\$	4 220.00	X

Trans-cab Auto Services Pte Ltd

AAD1907-258

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHF 633Y

To transfer of rear bumper fittings, attachment and perform water seepage test.	\$	na 380.00 X
Labour charge to mount and dismount vehicle on jig bench, to facilitate repair.	\$	na 380.00 X
To supply and re-do rear luggage floor panel insulation padding.	\$	na 380.00 X
To transfer of rear luggage floor panel fittings, attachment and perform water seepage test.	\$	na 170.00 X
Towing Fees	\$	na 150.00 X
TOTAL	\$	15,590.00
Over All Total	\$	40,885.67

LUMP SUM (REPAIR DAY)~~20 DAYS~~

5 days

LDC Auto Consultant: Hence notify the Repairs of the following:

- To inspect before and after any painting
- To inspect damaged parts during assembly
- Parts should be subject to confirmation
- The vehicle survey is on a "Without Prejudice" basis
- No recommendations allowed
- Recommendations should not be accepted and to subject to final approval from Insurance Company

Accepted by Repairs:

Signature:

Date:

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: CC3/TMI19013405/KSF3N2

Date: 04/09/2019

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MS006965
Claimant Vehicle No :	SHF633Y	Insured Vehicle No :	SML5293X
Date of Loss:	27/07/2019	Nature of Claim:	TP
		Claim No:	M1905800

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHF633Y	Engine No:	M9R8839C001599
Make & Model:	RENAULT LATITUDE, 2.0 D dCi (A)	Chassis No:	VF1ABL15AUC278283
Reg. Date:	27/06/2014 (Man. Year: 2014)	Odometer:	713836 km
Colour:	Metallic White/Red		
Engine Capacity:	1995 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:	Touring 9 mm	Rear Left Side:	Giti 8 mm
Front Right Side:	Touring 9 mm	Rear Right Side:	Giti 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	25,295.66	7,396.22	17,899.44	70.76
Miscellaneous Items	0.00	0.00	0.00	
Labour	15,590.00	1,520.00	14,070.00	90.25
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	40,885.66	8,916.22	31,969.44	78.19
Approved Total (Overridden) (S\$)		7,150.00		
(S\$)	40,885.66	7,150.00	33,735.66	82.51
+ GST 7.00/7.00% (S\$)	2,862.00	500.50	2,361.50	82.51
Nett Amount (S\$)	43,747.66	7,650.50	36,097.16	82.51

INSPECTION

Date of Assignment:	01/08/2019		
Date Inspected:	30/07/2019	Inspected At:	Trans-Cab Services Pte Ltd (HQ) 2 Ang Mo Kio Street 63 Singapore 569111
Estimated Period of Repair:	5.0 days		

Adjuster: KENNETH KONG

Manager: Hiew May Fung

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: 04 Sep 2019)
Parts:	143	RENAULT LATITUDE 2.0 D dCi (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHF633Y)	
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	*BUMPER COVER REAR	Buckled	1,108.46 FL	*1,108.46 FL
2	1	*BUMPER LOWER REAR	Buckled/Dented	768.84 FL	*768.84 FL
3	1	*BUMPER BRACKET CTR REAR	Distorted	113.47 FL	*113.47 FL
4	1	*BUMPER BRACKET SIDE RH REAR	Serviceable	135.97 FL	*- FL
5	1	*BUMPER RETAINER RH REAR	Serviceable	44.99 FL	*- FL
6	1	*BUMPER REFLECTOR RH	Serviceable	43.61 FL	*- FL
7	1	*BUMPER BRACKET SIDE LH REAR	Serviceable	135.97 FL	*- FL
8	1	*BUMPER RETAINER LH REAR	Serviceable	44.99 FL	*- FL
9	1	*BUMPER REFLECTOR LH	Serviceable	43.61 FL	*- FL
10	1	*BUMPER BEAM REAR	Bent	777.52 FL	*777.52 FL
11	1	*BUMPER BEAM BRACKET LH REAR	Repair	225.95 FL	*- FL
12	1	*BUMPER BEAM BRACKET RH REAR	Repair	225.95 FL	*- FL
13	1	*OUTER PANEL REAR (END PANEL)	Bent	1,471.77 FL	*1,471.77 FL
14	1	*OUTER PANEL REAR (END PANEL) TRIM	Cracked	404.56 FL	*404.56 FL
15	1	*TAILLAMP RH	Serviceable	552.55 FL	*- FL
16	1	*TAILLAMP PANEL RH	Repair	986.70 FL	*- FL
17	1	*TAILLAMP LH	Serviceable	552.55 FL	*- FL
18	1	*TAILLAMP PANEL LH	Repair	986.70 FL	*- FL
19	1	*BOOT REAR	Buckled	2,872.68 FL	*2,872.68 FL
20	1	*BOOT WEATHERSTRIP	Serviceable	323.05 FL	*- FL
21	1	*BOOT REFLECTOR LAMP LH	Serviceable	493.35 FL	*- FL
22	1	*BOOT REFLECTOR LAMP RH	Serviceable	493.35 FL	*- FL
23	1	*BOOT BADGE RENAULT	Necessary	225.36 FL	*225.36 FL
24	1	*BOOT BADGE	Necessary	225.36 FL	*225.36 FL
25	1	*BOOT STRUT LH	Serviceable	276.08 FL	*- FL
26	1	*BOOT STRUT RH	Serviceable	276.08 FL	*- FL
27	1	*BOOT HINGE LH	Repair	367.84 FL	*- FL
28	1	*BOOT HINGE RH	Repair	367.84 FL	*- FL
29	1	*BOOT INNER TRIM	Serviceable	586.45 FL	*- FL
30	1	*BOOT SWITCH	Serviceable	168.13 FL	*- FL
31	1	*BOOT LOCK	Repair	202.67 FL	*- FL
32	1	*BOOT LOCK CATCH	Repair	74.40 FL	*- FL
33	1	*SPARE WHEEL PANEL (LUGGAGE FLOOR PANEL)	Repair	2,189.88 FL	*- FL
34	1	*SPARE WHEEL PANEL TRIM	Serviceable	612.21 FL	*- FL
35	1	*EXHAUST REAR	Repair	7,489.05 FL	*- FL
36	1	*EXHAUST CAP REAR	Repair	230.49 FL	*- FL
37	1	*SET PARKING AID	Serviceable	700.00 FS	*- FS
38	1	*SET REAR BUMPER CLIP	Necessary	66.00 FS	*66.00 FS
39	1	*SET BUMPER BRACKET CTR CLIP	Necessary	33.00 FS	*33.00 FS
40	1	*SET BUMPER BRACKET SIDE CLIP RH RR	Not Necessary	10.00 FS	*- FS
41	1	*SET BUMPER RETAINER RH CLIP RR	Not Necessary	20.00 FS	*- FS
42	1	*SET BUMPER BRACKET SIDE CLIP LH RR	Not Necessary	10.00 FS	*- FS
43	1	*SET BUMPER RETAINER CLIP LH RR	Not Necessary	20.00 FS	*- FS
44	1	*SET BUMPER LOWER REAR RIVET	Not Necessary	22.00 FS	*- FS

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No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
45	1	*SET BUMPER LOWER REAR CLIP	Necessary	66.00 FS	*66.00 FS
46	1	*BOOT STICKER TRANS-CAB	Necessary	30.00 FS	*30.00 FS
47	1	*BOOT STICKER 6555-3333	Necessary	30.00 FS	*30.00 FS
48	1	*EXHAUST MOUNTING REAR	Serviceable	17.82 FS	*- FS
49	2	*REAR WINDSCREEN SEALANT	Not Necessary	80.00 FS	*- FS
50	1	*WINDSCREEN MOULDING	Not Necessary	100.00 FS	*- FS
51	1	*REAR WINDSCREEN INNER SPONGE SEAL	Not Necessary	100.00 FS	*- FS
52	1	*BOOT INNER TRIM CLIP	Not Necessary	45.00 FS	*- FS
53	1	*SET BOOT FINISHER CLIP	Not Necessary	24.20 FS	*- FS
54	1	*TAILLAMP CLIP LH	Not Necessary	5.00 FS	*- FS
55	1	*TAILLAMP CLIP RH	Not Necessary	5.00 FS	*- FS
56	1	*BOOT FINISHER	Serviceable	470.06 FL	*- FL

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

Sub Total (\$\$)	27,952.51	8,193.02
- List Item Discount on L Items 10.00/10.00% (\$\$)	2,656.85	796.80
Total Parts (\$\$)	25,295.66	7,396.22

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Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH,FITTINGS AND OTHER,TO ENABLE REPAIR	New	380.00	60.00
2	TO TRANSFER OF BOOTLID FITTINGS,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST	New	170.00	60.00
3	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	20.00
4	TO RUST-PROOFING OF THE AFFECTED AREAS	New	170.00	60.00
5	TO TRANSFER OF TIRE,RIM AND ON WHEEL BALANCING	New	170.00	0.00
6	TO REINSTALL REAR BUMPER PARKING SENSOR	New	170.00	60.00
7	PANEL BEATING,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS,ADJUST AND REALIGN THE SAME	New	6,000.00	600.00
8	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	6,000.00	660.00
9	TO REPAIR AND REALIGN REAR EXHAUST PIPE	New	170.00	0.00
10	TO DROP REAR EXHAUST BOX,RENEW THE SAME,TO REPAIR AND REALIGN CENTRE EXHAUST PIPE	New	170.00	0.00
11	TO TRANSFER OF REAR END PANEL FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST	New	170.00	0.00
12	TO TRANSFER OF REAR WINDSCREEN FITTINGS AND CONDUCT WATER SEEPAGE TEST	New	170.00	0.00
13	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	0.00
14	TO TRANSFER OF REAR BUMPER FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST	New	380.00	0.00
15	LABOUR CHARGE TO MOUNT AND DISMOUNT VEHICLE ON JIG BENCH,TO FACILITATE REPAIR	New	380.00	0.00
16	TO SUPPLY AND RE-DO REAR LUGGAGE FLOOR PANEL INSULATION PADDING	New	380.00	0.00
17	TO TRANSFER OF REAR LUGGAGE FLOOR PANEL FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST	New	170.00	0.00
18	TOWING FEES	New	150.00	0.00
Gross Labour Cost (S\$)			15,590.00	1,520.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >