Sunvajor R	Irme Tay this Ping	ASSIGNMENT (Of C12	Date/Time: 20.8.19 16-44
Estimated Cost OD TP WS To Inspect Vel at Workshop n	TP RES / OD RES / EV nicle No: XD 735 n/s Huakong Cond	Bill to: A/INV/MV/CS 7U Wach	Insured: XO 4654 G Tel: 63665005
Policy No: D Sum Insured: Make of Veh: (Client's Record CA / REV	101 Cresunt MCVSN18 618319011	Clair Ex	D.O.A. D. G. 2019  SOOS His Win  H.O.D. Endorsement:  Vehicle IN JOUT
Date/Time	Action/Instruction (		2 ho4-19/4/213

ASSI	GNM	E	N	Г
		-		_

	and the second s
From Date:	Veh No: XO 73574 Yr Regn: 2013 Jun
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: XO 7357 U	Make: MERCEDES BENZ MB ACTROSS C.C. 11946
at Workshop m/s HWATIBUL CONRACTOR	Colour AMI A/C: Insured / Std / NI / NA
of 9, Sewo1 crescent	Sp.Reading 464049 T/Radio: Insured / Std / NI / NA
Insured: CT \	Eng/No:
Policy No.	C/No: WOB9321612L718819
Claims No.	Gen. Cond: Good /Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inforder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: norder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NA / S/Rim / STD A/Rim or
Hui Wer 9768 5005	Tyre Size: F: 248 80R 22.5
(Policy Condition)	R: 207 60K 22 3
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or WASTLAKE
Bal, or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal, 8 mm R/Bal. 8/8 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 8 mm L/Bal. 8/8 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 02/08/19 D.O.I. 21/08/19
Lum Sum: % 3 Val.: Yes or No	Survey held at HUATIONA
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	D(S FRET
Date / Time   Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
years and dedon	
Contract and of \$20 (Rec	\$57. TE / (dey monto)
	Days Of Repair:
) : Final Report Relation to?	Resurvey No. of Trip: Survey Fee:
	Transportation:
19/9/19 - Typist Add Fee:	: Site Insp (\$)s+R\$si
eport Formet :	: Interview (\$ ) Photos
ump Sum / LE I: ()	: Tech, Invs (3 ) other:
	Weel and 18
P/P = \$2657-58	FORE

# ...CLAIM SUBFOLDER...(New Assignment)

Case	Notified	Est Subm	nitted	Adj Assigned	Adj Rpi	Advent	- No. 1					
Main	20 Aug 2019			20 Aug 2019 16:44 Assign	Aug Rep	Adj Sub	mitted	Ins Auth'ed	New Ass			
	Main		Refe	rence		Claim Details		Docum	-	Show All		
	UBFOLDER DET	AILS			WANTED STREET		100000000000000000000000000000000000000	Marine States on Visite	NAME AND ADDRESS OF THE OWNER,	MATERIAL PROPERTY.		
Insured:								[Cre	eated by in	surer]		
Main Clain		H	IOITAU	NG CONTRACTO	R PTE LTI	•						
Vehicle Re		X	(D735)	70		Date of Loss:		P. S. CO.	00.00			
Claim Type				M19D2036860	02	Policy/Cover No	te No :		02/08/2019 20:00 - :59 DMCVSN18018319011			
venicle Re	g. No. (Insured):		D46540		-	Policy No. (Clain		DMC	VSN1801831	SN18018319011		
Repairer:						Fyress:		S\$0.	00			
		Н	Huationg Contractor Pte Ltd (HQ) 9 Benoi Crescent, 629972 Pioneer - Tel: 63665005  China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 [Handled by Irene									
Handling I	nsurer:	Pi	ing - 63	ping Insurance 8986192]	(Singapo	re) Pte. Ltd. (I	HQ) - Tel:	6389 6111 [	Handled by 1	rene Tay U		
Adjuster:		LI	KK Auto	Consultante D	to 144 (110					rene ray Hui		
Adj Asg. Re	emarks:	PL	EASE SU	Consultants Pt JRVEY AND REVE	RT	) - Tel: 6256-35	61 [Fi	nal Rpt due :	29/08/201	9]		
ASSOCIA	TED MAIL RECE											
								View All	1			
mere are n	no mail for this ca	se.						TICH All	1 Comp	oose Case Mail		
В												
	CIATED TASKS											
Due Date						View All	Search T	asks   Crea	ate New Task	I committee I		
No results.	e Priority	Гуре Та	sk Grou	p Subject	Handle	Assigned	By (	Completed On				
o results.								preced On	Create	d On Done?		

## Yvonne Wong (LKK Auto)

From:

Huiwen <huiwen.chong@huationg.com.sg>

Sent:

Wednesday, September 18, 2019 4:05 PM

To:

Yvonne Wong (LKK Auto); SUR

Cc:

'Douglas Ng'; yeejou.lee@huationg.com.sg; sookkwan.au@huationg.com.sg; 'Serene

Subject:

RE: OUR REF: SNM19D203686-XD4654G-OCK - FW: 3rd Party Claim on XD4654G

Hi Yvonne,

We confirm with the repair cost.

Best Regards, Chong Hui Wen Workshop Admin Executive

HUATIONG CONTRACTOR PTE LTD (A subsidiary of Huationg Global Limited) No. 9 Benoi Crescent Singapore 629972 Hp: (65) 9768 5005 Tel: (65) 6431 0849 Fax: (65) 6264 0870

Email: huiwen.chong@huationg.com.sg Website: www.huationg.com.sg

From: Yvonne Wong (LKK Auto) [mailto:yvonnewong@lkkauto.com]

Sent: Wednesday, 18 September, 2019 3:39 PM

To: Huiwen <huiwen.chong@huationg.com.sg>; SUR <sur@lkkauto.com>

Subject: OUR REF: SNM19D203686-XD4654G-OCK - FW: 3rd Party Claim on XD4654G

Dear Hui Wen

## WITHOUT PREJUDICE

Confirm repair cost of \$2,657.58 before GST @ 1 working days.

Kindly send Final invoice and all supporting documents directly to CHINA TAIPING.

Thank you.

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <a href="mailto:vvonnewong@lkkauto.com">vvonnewong@lkkauto.com</a> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Huiwen [mailto:huiwen.chong@huationg.com.sg]

Sent: Wednesday, September 18, 2019 3:31 PM

To: SUR < sur@lkkauto.com>

Subject: RE: OUR REF: SNM19D203686-XD4654G-OCK - FW: 3rd Party Claim on XD4654G

Hi Yvonne,

File attach as perusal.

Best Regards, Chong Hui Wen Workshop Admin Executive

HUATIONG CONTRACTOR PTE LTD (A subsidiary of Huationg Global Limited) No. 9 Benoi Crescent Singapore 629972 Hp: (65) 9768 5005

Tel: (65) 6431 0849 Fax: (65) 6264 0870

Email: huiwen.chong@huationg.com.sg Website: www.huationg.com.sg

From: Huiwen [mailto:huiwen.chong@huationg.com.sg]

Sent: Wednesday, 18 September, 2019 3:13 PM

To: 'SUR' <sur@lkkauto.com>

Subject: FW: OUR REF: SNM19D203686-XD4654G-OCK - FW: 3rd Party Claim on XD4654G

Hi Yvonne,

File attach as perusal.

Best Regards, Chong Hui Wen Workshop Admin Executive

HUATIONG CONTRACTOR PTE LTD (A subsidiary of Huationg Global Limited) No. 9 Benoi Crescent Singapore 629972

Hp: (65) 9768 5005 Tel: (65) 6431 0849 Fax: (65) 6264 0870

Email: huiwen.chong@huationg.com.sg Website: www.huationg.com.sg

From: Huiwen [mailto:huiwen.chong@huationg.com.sg]

Sent: Tuesday, 27 August, 2019 11:31 AM To: 'rasul@lkkauto.com' <rasul@lkkauto.com>

Cc: 'douglas.ng@huationg.com.sg' < douglas.ng@huationg.com.sg>; 'yeejou.lee@huationg.com.sg' <yeejou.lee@huationg.com.sg>; 'sookkwan.au@huationg.com.sg' <sookkwan.au@huationg.com.sg>

Subject: FW: OUR REF: SNM19D203686-XD4654G-OCK - FW: 3rd Party Claim on XD4654G

Hi Rasul,

Photos attach as perusal.

Best Regards, Chong Hui Wen Workshop Admin Executive

HUATIONG CONTRACTOR PTE LTD (A subsidiary of Huationg Global Limited) No. 9 Benoi Crescent Singapore 629972

Hp: (65) 9768 5005 Tel: (65) 6431 0849 Fax: (65) 6264 0870

Email: huiwen.chong@huationg.com.sg Website: www.huationg.com.sg

From: Claims Dept of CTI [mailto:claimsdept@sg.cntaiping.com]

Sent: Monday, 19 August, 2019 4:50 PM

To: Ong Chin Kiat <chinkiat.ong@sg.cntaiping.com>; Alfred Toh <a href="mailto:alfred.toh@sg.cntaiping.com">alfred.toh@sg.cntaiping.com</a>; Chee So Chow

<sochow.chee@sg.cntaiping.com>; huiwen.chong@huationg.com.sg

Subject: OUR REF: SNM19D203686-XD4654G-OCK - FW: 3rd Party Claim on XD4654G

Dear Chin Kiat,

Please conduct PRS for XD7357U.

Note: officer in charge - Chin Kiat 63896174.

Regards,

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

T: (65) 63896116 | F: (65) 62247175

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平狮城 Taiping SG

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From: Huiwen [mailto:huiwen.chong@huationg.com.sg]

Sent: Monday, 19 August, 2019 10:11 AM

To: Claims Dept of CTI < claimsdept@sg.cntaiping.com>

Cc: Douglas Ng HTC <douglas.ng@huationg.com.sg>; Serene Toh <serenetoh@hte.com.sg>;

sookkwan.au@huationg.com.sg; yeejou.lee@huationg.com.sg

Subject: 3rd Party Claim on XD4654G

Dear Sir,

We refer to the attached GIA report filed on 5th Aug 2019.

We are the authorised workshop to conduct repair on the vehicle bearing XD7357U.

Attached herewith the repair estimate.

Please advise when a surveyor can be appointed to inspect and proceed for repair of our vehicle.

Please contact me @ 9768 5005.

Thank you.

Best Regards, \*Chong Hut Wen Workshop Admin Executive

HUATIONG CONTRACTOR PTE LTD (A subsidiary of Huationg Global Limited) No. 9 Benoi Crescent Singapore 629972 Hp: (65) 9768 5005

Tel: (65) 6431 0849 Fax: (65) 6264 0870

Email: huiwen.chong@huationg.com.sg Website: www.huationg.com.sg

This email has been scanned by the Symantec Email Security.cloud service. For more information please visit <a href="http://www.symanteccloud.com">http://www.symanteccloud.com</a>

## 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 witholding of material facts may allow insurance companies to
- 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.
- 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

	ACCIDENT STATEMENT	
Date Of Report	05/08/2019 17:27	THE REAL PROPERTY.
Date Of Accident	02/08/2019 20:00	
Exact Location Of Accident	TANAH MERAH COAST ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	XD7357U	THE REAL PROPERTY.
Insured/Policyholder		
Name Of Registered Owner	HUATIONG CONTRACTOR BTE LTD	

HUATIONG CONTRACTOR PTE LTD Co Reg No 198304322E Email Address NOEMAIL

Mobile Phone No.

Alternative Phone No OFFICE-63665005

Vehicle Particulars

Manufacturer MERCEDES-BENZ

Model MB ACTROS-11.9 3336K 6X4 3300 ABS (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?

If No, Please state action to be taken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

**Insurance Company** 

Name of Insurance Company GREAT EASTERN GENERAL INSURANCE LIMITED

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number 2019-V0097273-VCG-R003

Cover Note Number 0058

Driver

Name of Driver MUTHU SELVAKUMAR

Passport No/FIN G7760555Q Date Of Birth 01/03/1986 Occupation OUTDOOR Date Of Driving Pass 22/04/2016

Driving Experience 3 YEARS AND 3 MONTHS

Gender MALE

Mobile Number +65-81649531

Fax Number

Contact Number

EMail Address NOEMAIL Address

9 BENOI CRESCENT

Postcode

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

COLLISION - CHANGE/CROSS LANE

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

NO

ambulance?

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Was the accident reported to the police?

**Details of Police Action** 

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

FILE TOO LARGE

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

XD4654G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

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 Authorised Driver
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)
  - 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:
  - 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 Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

8164 9531

Or

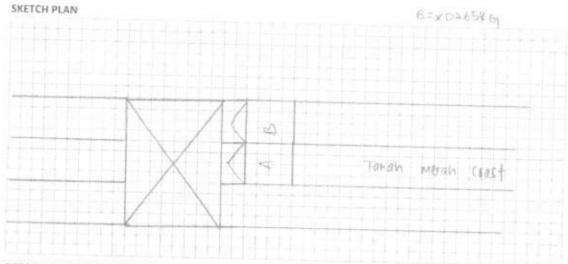
Reporting Centre Personnel's Signature

Name: My Seot Cwan

NRIC/FIN No.

#### Sketch Plan #2

A- x078590



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

			On	03.08	.19 8	+ absy-l	1000		) pe	s dn	lang
my	(вирону	truck	FQX	357D	along	Tanah	Meral	faces	÷ .		
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teaffi	e light	Super	red	and	1 5	topped.	Sudd	enty	-her	. We.	5 9
THICK	x 04	65461	SP.	My	right	Side	lut	nıy	(Jahr	Side	muse.
There	NAS	NO I	Gery	) le	He S	20ida	et,				

DECLARATION

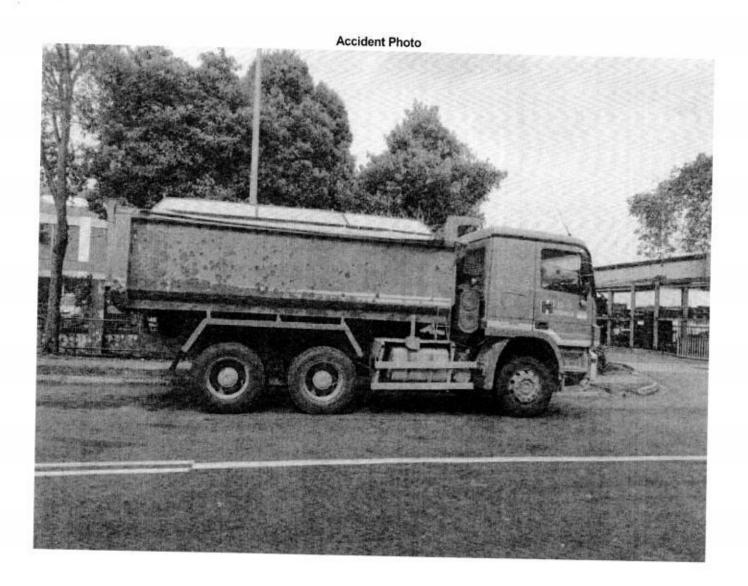
I/We declare the foregoing particulars are true in every respect.

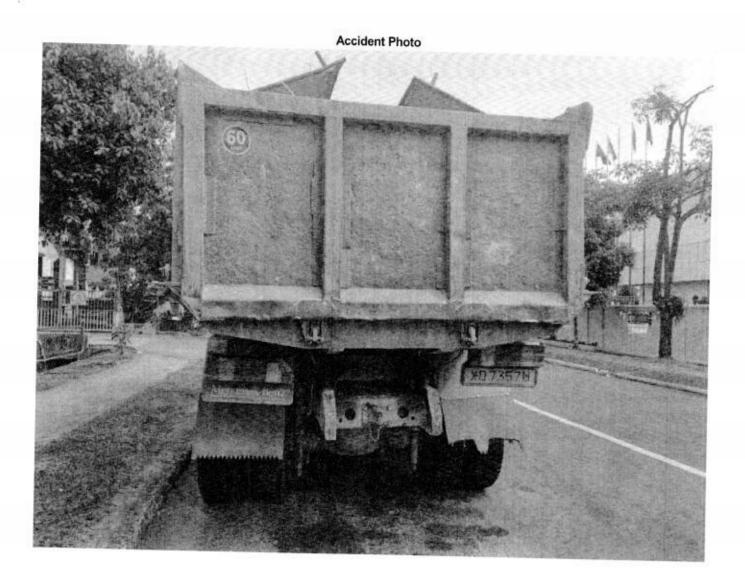
Policyholder's Signature of

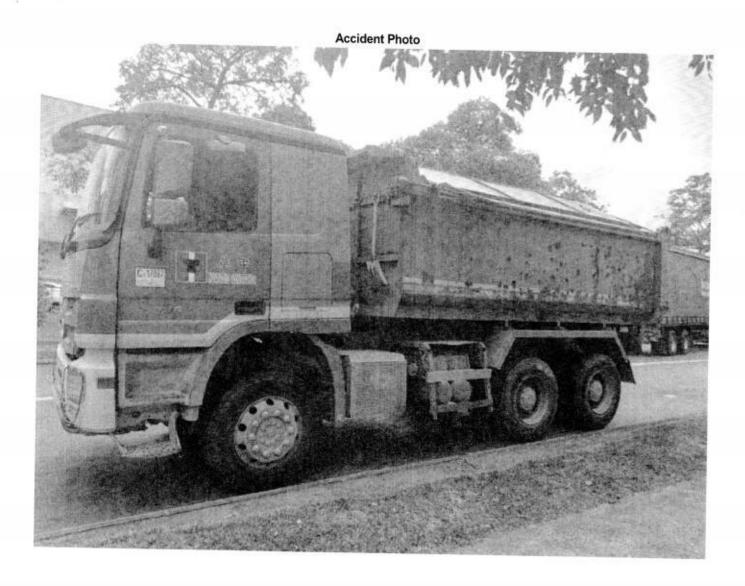
Driver's Signature

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

Reporting Centre Personnel's Signature Name: Att Seo & Yourst NRIC/FIN No.:



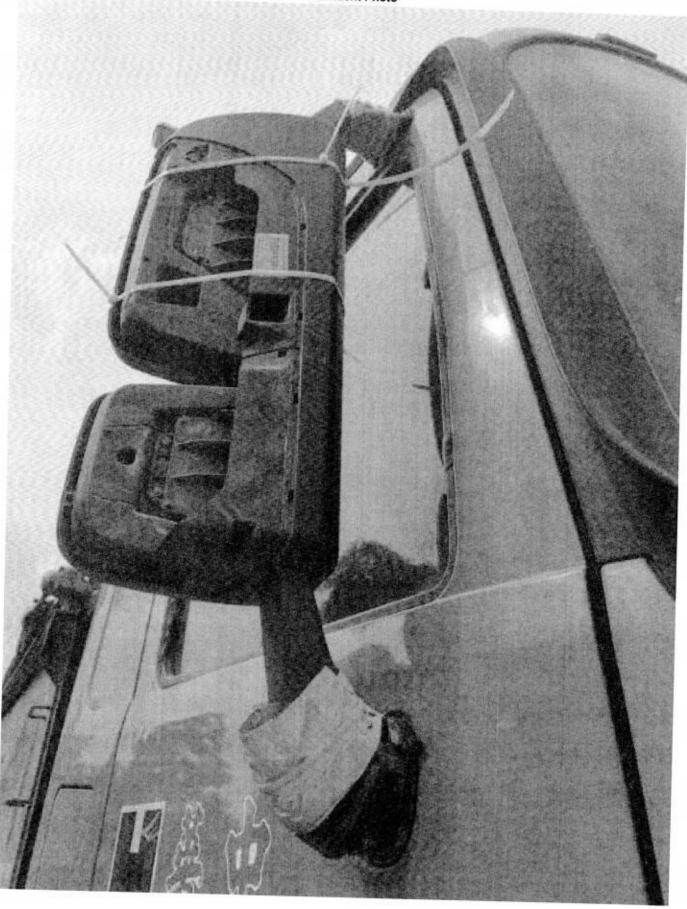


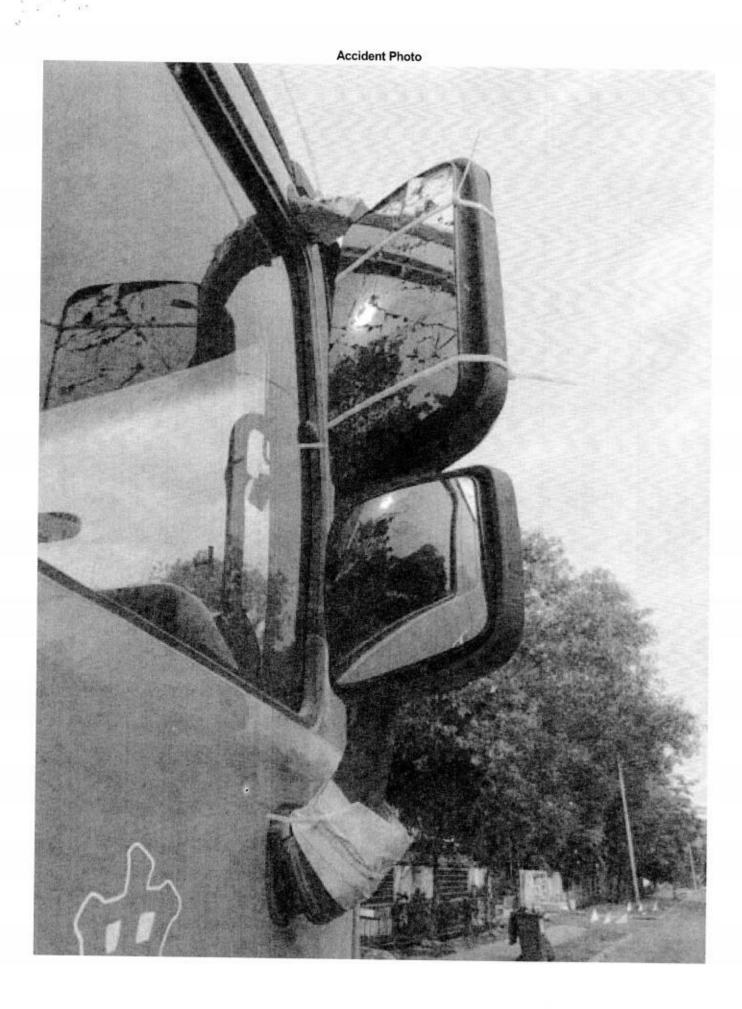


## **Accident Photo**



# Accident Photo



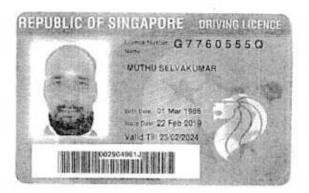


#### **Identification Card**





#### **Driving License**



## YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 4

Motorcycins =< 200 oc 24 Feb 2009
Motor cars with unladen weight >< 3000kg with =< 7 24 Feb 2009
passengers, exclusive of driver; and other motor
vehicles with unladen weight =< 2500kg
Motor vehicles without are constituted to carry toad
are passengers and the unladen weight = 2500kg
Motor vehicles without are not constituted to carry
load or possengers and the unladen weight =< 7230kg

NF 428A

Licence No:077605550

### Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580

100	INSURANCE ASSOCIATION CORDS MANAGEMENT CENTRE	Tel (65) 6224 0010 Operating Hours : N UEN: 566550020G / G	Monday to Friday,	09:00-17:	00		
IM	PORTANT NOTE: Ple	ase submit the th whom you su	completed A bmitted the	ddendu Original	m form to t Report.	he <u>same</u> Autho	rised Reporting Centre
			ADD	ENDU	M		
(A)	PARTICULARS OF PE	RSONMAKING	THEAMEND	MENTS			
	Original Report No	MHTC MI	02702		_Vehicle Re	egistration No:	VFZEFOX
							198308327
	(*venicle Driver / Ve	hicle Owner) (*	) Please dele	te as app	ropriate		
	Address	a Beno	i Circ	cent			Singapore(62477
	Contact (Tel)	63665	205		Mobile No	0.:	
	Email Address						
	Date of Accident	02.08.	2019		Time of Ac	cident: 20	70 Hrs
	Place of Accident :	Tanah	Mach	(0	ast 1	Rond	
	Insurance Company:	GREAT to	Eastern	G	intral 1	UN SUPERCA	Linutar
(B)	ADDITIONALINFOR	MATION / AME	NDMENTS:				
	I have made a report make the following a	on the above m mendments:	entioned acc				ditional information or
	To Ch	angs c	Netails	o.f	other	vahieta	, x0465367
	+o ×0	H654G					

JONG O		
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		
	Cr	
310	20	

Policyholder / Driver's Signature Date:

Reporting Centre Personnel's Signature Name: AM Soot Eways NRIC/FIN No.: Date:



#### **Huationg Contractor Pte Ltd**

VG. W. Brend Circumst. Mangapore 629 TRL: 6368 1985 FAX: 6368 1393 Co. September No. 198086553

-	-	-	_		_	_
Re	pai	r	Est	im	at	e

Damage Assessed by:	Huiwen
Classification:	Claim 3rd party
Owner:	HUATIONG CONTRACTOR PTE LTD
Date:	15/08/2019
Vehicle Type:	B33-Goods (Open) Tipper/Dumper T
Registration Number:	
Chassis No:	WD89321612L718819
Engine No:	54197200868764
Year of Make:	2012
Date of Registration:	06/06/2013

		Line Item	Part Type			1
Labour Type	Operation	Description	Part Number	Dollar Amount	Labour Units	1

BODY

	Cabin Assy	
Remove/Replace	RHS Side Mirror Assy	\$2,786.20 6 hours
		\$2,786.20

BOOY

Additional Costs and Materials					
Additional Costs	Paint	\$0.00			
		30.00			

	Estimate Tota	ds		
Labour Subtotal	Hours		Rate	Total
Body		- 6	30	\$188.00
Mechanical	(	0	30	\$0.00
Additional Costs				
Paint	6			\$0.00
Parts Replacement Summary				\$2,786.20
				\$2,700.20
Total Labour Costs				\$180.00
Total Parts Replacement Costs				The second second second second
Total Additional Costs				\$2,786.20
Gross Total				50.00
				\$2,966.20

the Repairer of the following:

• To resurvey before after spray painting

- To display damaged part(s) dump resurvey
- Parts prices are subject to confirmation.
- . Third party survey is an artificiant Projudice" basis.
- No illegal medification(s) is a house.
- Supplementary item(a) must be requirelyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Signature:

Date:

Pasul
Hp 90010068

I day

21/18/18 @ 1455

Reag new mirror

envil: rasul@lkkante. um

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

Case	Notified	Est Submitted	Adj Assigned	Adi Rot	Ac	li Sub	mitted	Ins Auth'ed	Status	
Main	20 Aug 2019		20 Aug 2019 16:44 Edit Adj Rpt	S\$2,657.58 Edit Estimat	S	<b>2,65</b> /lew R	7.58	11071001100		for Survey
M	lain	Re	ference	C	laim Det	ails		Docume	nts	Show All
CLAIM SUE	FOLDER DE	TAILS					[Create	ed by insurer]		
Insured:	0, Co. Re	g. No.: 0					Larcati	ed by mourer]		
Main Claimant:	HUATION	G CONTRACTOR	PTE LTD							
Vehicle Reg. No.:	XD7357	U			Date of	Loss:	02/08/2019 20:00 - :59 [73 Months and 27 Days From LTA Reg Date (Man Yr)]			Date (Man Yr)1
Claim Type:	TP / SNM	119D203686C0	2		Policy/C					, ()
Vehicle Reg. No. (Insured):	XD4654G				Policy No (Claimar					
Danalass					Excess:		S\$0.00			
Repairer: Handling Insurer:		Contractor Pte L ping Insurance (							y Hui Ping -	6389861921
Adjuster:	the state of the s	Consultants Pte								
Adj Asg. Remarks:	Control of the contro	RVEY AND REVER				,			rpe due 22	,,00,2015]
ASSOCIATI	ED MAIL REG	CEIVED							View All	Compose Case Mai
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	Priority		Group Subj	ect Handl	er A	ssign	ed By	Completed O		v Task Complete ted On Done

## 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/CTI19014679/R1YF3S2

Date:

24/09/2019

No:

REFERENCE

Handling Insurer:

China Taiping Insurance (Singapore) Pte. Ltd.

Policy No:

Nature of Claim:

DMCVSN18018319011

Claimant Vehicle

Date of Loss:

XD7357U

02/08/2019

**Insured Vehicle** 

XD4654G

No:

No:

TP

Claim SNM19D203686C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

XD7357U

MERCEDES-BENZ MB ACTROS, 11.9 3336K 6X4

3300 ABS (A)

Engine No:

541972C0868764

464049 km

Reg. Date:

06/06/2013 (Man. Year: 2012)

Chassis No: Odometer:

WDB9321612L718819

Colour: Engine Capacity:

Make & Model:

Multi-colour

11946 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):

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification: Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

295/80R22.5

Rear Tyre Size:

295/80R22.5(D)

Front Left Side:

West Lake 8 mm

Rear Left Side:

West Lake 8/8 mm

Front Right Side:

West Lake 8 mm

Rear Right Side:

West Lake 8/8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,786.20	2,507.58	278.62	10.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	180.00	150.00	30.00	16.67
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	2,966.20	2,657.58	308.62	10.40
+ GST 7.00/7.00% (S\$)	207.63	186.03	21.60	10.40
Nett Amount (S\$)	3,173.83	2,843.61	330,22	10.40

INSPECTION

Date of Assignment:

20/08/2019

Huationg Contractor Pte Ltd (HQ)

Date Inspected:

21/08/2019

9 Benoi Crescent Singapore 629972

Estimated Period of Repair:

1.0 days

MOHD RASUL Adjuster:

Manager:

YVONNE WONG YIN 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.

Inspected At:

## REPAIR DETAILS

Reference

(Last Synchronised: 24 Sep 2019) Part Source:

MERCEDES-BENZ MB ACTROS 11.9 3336K 6X4 3300 ABS (A) (Model not available in database) Parts:

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

Print Code: (Unsubmitted, no print-code for XD7357U)

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

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
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50.7773		Part No.	Particulars	Condition	Repairer's	Amount
1	1		*RHS SIDE MIRROR ASSY	Cracked	2,786.20 F	*2,786.20 FL
F=Fra	anchise	part. L=ListItem		Sub Total (S\$) on L Items 0.00/10.00% (S\$)	<b>2,786.20</b> 0.00	<b>2,786.20</b> 278.62
				Total Parts (S\$)	2,786.20	2,507.58
			Report was unsubn	nitted during this print-out.		

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended	Labour
1 (000111111011404	

No Particulars	Lab.Type	Repairer's	Amount
Labour Items 1 BODY	New	180.00	150.00
	Gross Labour Cost (S\$)	180.00	150.00
Repor	t was unsubmitted during this print-out.		

< END OF ESTIMATES >