

Surveyor:

AWK

DOI:

ASSIGNMENT

27/8/19

Date / Time:

27/8/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

GW 4346y

Claim No.:

Name of Insured:

Sunshine Cons & Construction Pte Ltd

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A:

26/8/19

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Adam Sanjiv

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No.:

(V/L: YES / NO)

Insured Liability: %

Final ? Yes / No

SHA 1876 H



INSRS:

WSP:

Tel:

Liability:

RMKS:

CP2670yng



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

SHA 1876 H. NA / HCB 12018963 / EL : 00A. 27/8/19
GW 4346y. 02/19/11075710 / HCB 100A. 27/8/19

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

Email 11/10

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

PRELIMINARY ADVICE Date/Time:

Sent By:

Post-Repair Photos:

Others:

FINALIZATION

Date/Time:

Confirm with:

Confirm by: AWK

Repair Cost: 1/3 S\$900.00

(2 days) Reduction:

48 %

Email

Call

FINAL SETTLEMENT

Date/Time: 25.10.19

Confirm with: CPMERINE

Email

Call

Final Liability:

% 100

(Agreed / Assessed) BOLA S/N No.:

37

If NO or B 28, Ass. Lia:

Repair Cost:

2/1/57 S\$963.00

NO REPR ENDED TP

Loss of Rental (LOR):

S\$ 205.34

(2 days) x 102.67

Loss of Use (LOU):

S\$ -

(\$ x 2 days)

Loss of Income (LOI):

S\$ 100.00

(\$ 50 x 2 days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒ [Tick only one]

GIA/LTA Search

S\$1.49

Medical:

S\$ -

Disbursement:

S\$ -

(e.g. Tow/ Independent)

Legal Cost

S\$ -

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

400

Total: S\$1,295.83

Global Sum S\$1,290.00

FINAL PAYMENT

Date/Time: 25.10.19

Confirm with: CPMERINE

Email

Call

Payee 1:

S\$1,290.00

Name 1:

CONFORTERALGO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: TBA
Our ref: CC3/CTI19015198/K1ea3

Date: 29/08/2019

The Motor Claims Department
M/s CHINA TAIPING INSURANCE (S) PTE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHA 1876H

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 27/08/2019 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) and have the following to report:-

Workshop Estimate Amount	: S\$	1,733.32
Revised Estimate Amount	: S\$	900.00
"Check" Items Amount	: S\$	-
Total (Including Check Items)	: S\$	900.00
Market Value	: S\$	- (est.)
LTA Reimbursement Value	: S\$	- (est.)
Nett Value	: S\$	- (est.)

Description of Damage:

The vehicle sustained damages at the
Rear Portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

REPAIR ESTIMATE*

VEHICLE NO : SHA 1876H

DATE 26/8/2019 16:17

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Licence Lamp Cover <i>X 1 pc</i>			\$ 100.00	
	Rear Bumper <i>- 1 pc</i>			\$ 553.00	
	Rear Bumper Clip 10 pcs <i>- 10</i>			\$ 22.00	
	Rear Bumper Bracket <i>2 pc</i>		\$ 35.60	\$ 71.20	
	Rear Bumper Reflector Lamp (LH/RH) <i>2 pc</i>		\$ 30.60	\$ 61.20	
	<i>Rear Bumper undercoat - 1 pc</i>			\$ 22.80	
	SUB TOTAL			\$ 807.40	1035.40
	LESS 20%			\$ 161.48	207.08
	DISCOUNTED TOTAL			\$ 645.92	828.32
	Rear No. Plate <i>- 1 pc</i>			\$ 25.00	Nett
	Rear Bumper Advertisement Logo <i>X 1 pc</i>			\$ 50.00	Nett
				\$ 75.00	
	Labour Charge			200	
	Panel Beating			\$ 400.00	
	Spray Painting Charge			\$ 300.00	200
	Wiring Charge			\$ 50.00	X 1
	Remove/Refix Reverse Sensor			\$ 80.00	70
	TOTAL LABOUR			\$ 830.00	
	ESTIMATE TOTAL			\$ 1,550.92	1733.32
<p><i>Kali 1 (10/11)</i></p> <p><i>27/8/11 10556</i></p> <p><i>2 pc</i></p> <p><i>4 pc</i></p> <p><i>After Repair plz</i></p>					
<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.</p>					

COMFORTDELGRO ENGINEERING

Our Job Ref No 305327746

Date : 27/08/2019

ComfortDelGro Engineering Pte Ltd
58 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHA1876H

Date of Accident : 26/08/2019

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: CHINA --- GW4346Y
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges ###
 - Total for Part-By-Part Repair Cost**
 - (c) Lumpsum Repair (if applicable) N
 - Total for Lumpsum repair cost after Less: 20% \$900.00
 - Final Lumpsum Repair cost**

3. Estimated normal period for repairs: 2 working days

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : JUMANI

Tel : 6214 8315

Fax : 65468156

Signature : 

Name : Kahl

Date : 28/8/19

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

VEHICLE NO. : SHA1876H

TYPE OF CASE : CHINA

JOB CARD NO. 305327746

SURVEY BY : LKK – KALVIN

ACC.DATE 26/08/2019

DATE : _____

SUPPLEMENTARY OF PARTS AND LABOUR COSTS

DESCRIPTION	QTY	ESTIMATE	REMARKS
REAR BUMPER UNDER COVER	1	\$228.00	
CHECK ITEMS			
LABOUR			
TOTAL:		\$228.00	JUMANI

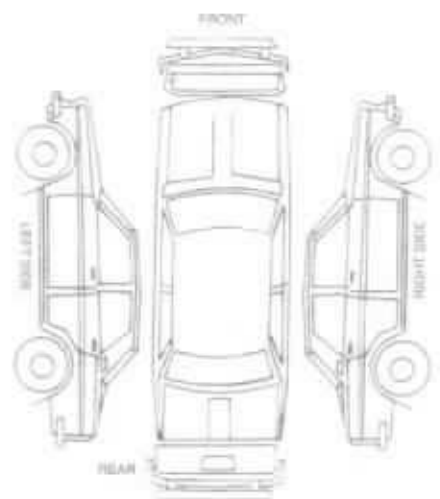
Team: ARC Repair TP(CLS0)1 JOB CARD Sales Order: JC NO.: 305327746

OMER	REGN NO.	SHA1876H	MILEAGE
S	COMFORT TRANSPORTATION PTE LTD	MAKE :	HYUNDAI
OMER NO.	7010045	MODEL	I-40
ESS	383 SIN MING DRIVE	DATE/TIME IN	26.08.2019 10:55
(R)	Singapore SINGAPORE 575717	YR OF MANU	09.06.2016
(P)	65508755 (O)	CHASSIS CODE	KMHLB41UMGU090137
UNT CARD NO.		COMPLETION DATE/TIME	

Accident Date: 26.08.2019
NATURE: 3P 26.08.19

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



IED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

dgement Slip	Exit Pass
Vehicle No.	SHA1876H
Signature/Date	Date
Name of Service Advisor	To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 1876H

DATE 26/8/2019 16:17

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Licence Lamp Cover <i>X</i>			\$ 100.00	
	Rear Bumper <i>-</i>			\$ 553.00	
	Rear Bumper Clip 10 pcs <i>-</i>			\$ 22.00	
	Rear Bumper Bracket <i>!</i>		\$ 35.60	\$ 71.20	
	Rear Bumper Reflector Lamp (LH/RH) <i>LH X RH</i>		\$ 30.60	\$ 61.20	
	<i>Rear Bumper undercover</i>		<i>\$ 220</i>		
	SUB TOTAL			\$ 807.40	
	LESS 20%			\$ 161.48	
	DISCOUNTED TOTAL			\$ 645.92	
	Rear No.Plane <i>-</i>			\$ 25.00	Nett
	Rear Bumper Advertisement Logo <i>X</i>			\$ 50.00	Nett
				\$ 75.00	
	Labour Charge			<i>200</i>	
	Panel Beating			\$ 400.00	
	Spray Painting Charge			\$ 300.00	<i>200</i>
	Wiring Charge			\$ 50.00	<i>X</i>
	Remove/Refix Reverse Sensor			\$ 80.00	<i>70</i>
	TOTAL LABOUR			\$ 830.00	
	ESTIMATE TOTAL			\$ 1,550.92	
<i>Kali (11/11/19)</i> <i>27/8/19 1050h</i> <i>2 Pys</i> <i>4p</i> <i>After Repair p4h</i>					
<div> <p> I, the undersigned, hereby acknowledge that I have received the above estimate for the repair of the vehicle described above and that I have agreed to the terms and conditions of the estimate and that I have authorized the repairer to carry out the repair work as described in the estimate. </p> <p>Acknowledged by Repairer:</p> <p>Signature: _____</p> <p>Date: _____</p> </div>					
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.					

Mei Kwan (LKKAuto)

From: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Sent: Tuesday, 8 October, 2019 10:51 AM
To: Mei Kwan (LKKAuto)
Cc: Asher Sng (LKKAuto); Admin A
Subject: RE: OUR REF: SNM19D204041-GW4346Y-TKL & YOUR REF: (TP : LKK REF - CC3/CTI19015198/K1ea3) -Direct Settlement - Accident Involving GW4346Y and SHA1876H on 26/08/2019
Attachments: GW4346Y.PDF
Categories: HMK

Without Prejudice

Dear Mei Kwan,

We refer to your email below.

Attached is our insured's GIA report for your necessary actions.

Please keep us posted on the status of the claim.

Thank you.

Regards

Tan Kah Leong
Assistant Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6193 | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/

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From: Mei Kwan (LKKAuto) [mailto:Meikwan@lkkauto.com]
Sent: Tuesday, October 8, 2019 9:23 AM
To: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Cc: Chee So Chow <sochow.chee@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>; Asher Sng (LKKAuto) <AsherSng@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: RE: OUR REF: SNM19D204041-GW4346Y-TKL & YOUR REF: (TP : LKK REF - CC3/CTI19015198/K1ea3) -Direct Settlement - Accident Involving GW4346Y and SHA1876H on 26/08/2019

Dear Kah Leong,

We refer to the above matter.

Kindly let us have a copy of your insured's GIA report for our necessary action.

Thank you.

Disclaimer: This e-mail and any files transmitted with it is intended only for the named recipients and may contain confidential information. Any unauthorized disclosure, use or dissemination of this message, either in whole or partial, is prohibited. If you are not the intended recipient, please notify the sender immediately. Please delete the e-mail and any copies of it thereafter.

From: Mei Kwan (LKKAuto) [mailto:Meikwan@lkkauto.com]
Sent: Friday, 30 August, 2019 10:10 AM
To: Claims Dept of CTI
Cc: CS A Team; Admin A; Asher Sng (LKKAuto)
Subject: Direct Settlement - Accident Involving GW4346Y (OI : CTI - TBA) and SHA1876H (TP : LKK REF - CC3/CTI19015198/K1ea3) on 26/08/2019

'WITHOUT PREJUDICE'
SAVE AS TO COSTS

Dear Sir / Madam,

We refer to the above matter.

We have inspected TP vehicle SHA 1876H at M/s ComfortDelGro Engineering Pte Ltd (Loyang) on a WP basis and TP repairer proposed for a direct settlement.

Enclosed for your perusal is:

- TP GIA report
- TP estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge Asher and she can be contacted at DID: 6841 6051.

To check availability of the case handler, you may contact the undersigned.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

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For more information please visit <http://www.symanteccloud.com>

CC3/CN19015198/K1293

Asher

COMFORTDELGRO
ENGINEERING

Our Ref : T 0819 / SHA1876H /WT(st)

Your Ref :

Date : 03-Sep-19

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198506042W

CHINA TAIPING INSURANCE CO LTD

3 ANSON ROAD

#16-00 SPRINGLEAF TOWER

SINGAPORE 079909

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA1876H YOUR INSURED GW 4346Y
AND OTHER _____ ON 26.08.19

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA1876H which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving GW 4346Y we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 963.00
6	2 days Loss of Rental @ \$ 112.67 per day	\$ 225.34
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 1,195.83

HIRER'S CLAIM

7	2 days Loss of Income @ \$ 80.00 per days	\$ 160.00
Total Claims :		\$ 1,355.83

We enclose herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs : 8 pcs.
- b) LTA search slip/s of : GW 4346Y
- c) GIA / Police report/s of : SHA1876H
- d) Letter of authority from owner / hirer / operator
- () Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance
- () Photograph/s of Accident Scen (x) Downtime/Mileage record (x) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

William Tan

CDGE Claims Department

Tel: 6214 8737 Fax: 6214 1843 Email : williamtan@cdge.com.sg

This is a computer generated letter. No signature is required.

A member of

COMFORTDELGRO



Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Friday, 11 October 2019 9:52 AM
To: SUNRENOS@SINGNET.COM.SG
Subject: ACCIDENT INVOLVING GW 4346Y AND SHA 1876H ON 26/08/2019

Our Ref: CC3/CTI19015198/K1ea3

11 OCT 2019

SUNSHINE RENO & CONSTRUCTION PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING GW 4346Y AND SHA 1876H ON 26/08/2019

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

Asher
Case Handler
DID: 6841 6051
FAX: 6741 4108
Email: ashersng@lkkauto.com

c.c. China Taiping Insurance (Singapore) Pte Ltd
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG**

**I 40 SHA1876H , GW4346Y
SIMS AVE TWDS BEDOK**

ON 26-Aug-19 10:10

I / We

KHUAN BOK CHOON

(Hirer) NRIC No.: **SXXXX255I**

and/or

(Relief) NRIC No.: **SXXXX255I**

Taxi Number

SHA1876H

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of **"ComfortDelGro Engineering Pte Ltd"**.

Date

26-Aug-2019

Name of Hirer

KHUAN BOK CHOON

Hirer NRIC

SXXXX255I

Signature :



Address

**570 PASIR RIS STREET 53 #06-64
510570**

Contact No.

97357580

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN3089751904

Claim No : SNM19D204041

Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$1,290.00

DOLLARS ONE THOUSAND AND TWO HUNDRED AND NINETY ONLY.

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SHA 1876H

Insured Vehicle No. : GW 4346Y

Date of Loss : 26/08/2019

Place of Accident : SIMS AVE TWDS BEDOK

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : SUNSHINE RENO & CONSTRUCTION PTE LTD

Driver Name : ALAM SARIFUL

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) Global Sum	S\$ 1,290.00
TOTAL	S\$ 1,290.00

Claimant Name : COMFORT TRANSPORTATION PTE LTD

NRIC No :

Signature :

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
19 LOYANG DRIVE
SINGAPORE 508969

Date :

25/10/19

"The contents of this document apply to vehicle damages only
All personal injuries and damages arising therefrom are excluded
from the ambit and application of this document"

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

TAX INVOICE

8010012

CHINA TAIPING INSURANCE CO (S) PTE LTD
SPRINGLAP TOWER

3 ANSON ROAD #16-00
SINGAPORE 079909

CONTACT NO: 62222366

VEHICLE NO
SHA1876H

MARK
HYUNDAI

MODEL
I-40

DATE OF REG
09.06.2016

CHASSIS CODE
KMH1B41UMGU090137

NO/DATE
91463412 29.08.2019

JOB NO.
305327746

ODMETER READING

JOB TYPE

Description : 3P 26.08.19

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	900.00
Add GST @ 7.000 %	63.00
Total Invoice amount	963.00

Issued by : KATHIRINETAN 29.08.2019 11:50:55
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ N

Our Ref: CT19080635

Date: 29 August 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	26/08/2019 @ 10:10 hrs
ALONG	SIMS AVE TWDS BEDOK
INVOLVING	GW4346Y

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA1876H** (the "Taxi"). The Taxi was hired to **KHUAN BOK CHOON IC NO SXXXX255I** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$112.67** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Manager, Fleet Safety

This is a computer generated letter. No signature is required.

[illegible]

Enquire Vehicle Insurance Details

Vehicle No Incident Date/Time Search Status Insurance Company Code Insurance Company Name

GW4346Y 26 Aug 2019 / 10:10:00 Successful C01

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

[Previous](#)[OK](#)

5UP1F76M



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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI19015198/K1ea3q2

3 ANSON ROAD #16-00
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 06-11-2019



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GW 4346Y	Veh. Inspected	SHA 1876H
Policy No.	DMCVSN3089751904	Coverage (\$)	0.00
Claim No.	SNM19D204041	Excess (\$)	0.00
Assign From		Assign Date	27/08/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU090137	Colour	BLUE
Odometer	356861	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	26/08/2019	Inspection Date	27/08/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

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:	2 Working Days
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**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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 1876H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	LICENCE LAMP COVER	TO REPAIR SEE LABOUR	100.00	-
1	REAR BUMPER	DEFORMED	553.00	553.00
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @\$35.60	SERVICEABLE	71.20	-
2	REAR BUMPER REFLECTOR LAMP (LH/RH) @\$30.60	N/S SERVICEABLE / O/S CUT	61.20	30.60
1	REAR BUMPER UNDERCOVER	CUT	228.00	228.00
	LESS 20% DISCOUNT		-207.08	-166.72
			828.32	666.88
SPECIAL NETT ITEMS				
1	REAR NO.PLATE (SN)	CRACKED	25.00	25.00
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NOT NECESSARY	50.00	-
			75.00	25.00
LABOUR				
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF LICENCE LAMP COVER .		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX REVERSE SENSOR .		80.00	30.00
			830.00	430.00
GRAND TOTAL			1,733.32	1,121.88
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				900.00

Report Ref No. CC3/CTI19015198/K1ea3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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