

Surveyor

REP: CS1 / LPC19015235 / Qtd302

Special Instruction:

HS: \$9950.00

From (Person): ong hi hi of LPC Date/Time: 27/8/2019  
Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

Third Parties:

Claimant:

Surveyor: Prominent Appraiser

Workshop: Dc's Automotive

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SLG 1790S Insured: GX 5826S

at Workshop n/s Dc's Automotive Tel: \_\_\_\_\_

of 1 Kaki Bukit Ave 6 # 01-23 Autobay

Policy No: \_\_\_\_\_ Claim No: 19/19/19/VCS/022034

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 06/07/2019

(Client's Record)

H.O.D. Endorsement/Date: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT

Date/Time: \_\_\_\_\_ Confirmed with \_\_\_\_\_ Final Fig \_\_\_\_\_ days (Red \$ \_\_\_\_\_ %; Original 10 days)

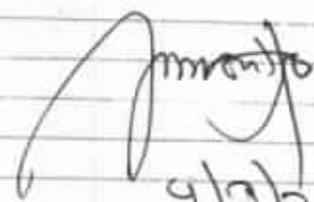
Date/Time: 10/9/19 Submit Final Fig 6000+, 7 days (Red \$ 3950.39 %; Original 10 days)

Date/Time Action/Instruction

SLG 1790S - NA/MSH/19011955/Y  
GX 5826S - NA/MSH/19011955/Y

DOA: 6/7/2019

DOA: 6/7/2019

  
9/9/2019

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

RECEIVED 11 SEP 2019

Para(3) : Nett Value

Market Value : \_\_\_\_\_

Salvage Value : \_\_\_\_\_

Nett Value : \_\_\_\_\_

Inspected/  
Evaluated by:

Fee Charged:

Basic & Add  
Transport  
Photos  
Others  
Total

Date:

120

120

1) Date/Time 10/9/19 File Pass to Typist

3) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

5) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

2) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

4) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

6) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

## Nivitha (LKK Auto)

---

**From:** ONG LI LI <llong@lonpac.com>  
**Sent:** Tuesday, 27 August 2019 4:31 PM  
**To:** assignments@lkkauto.com; Admin-D (LKKAuto)  
**Cc:** MT\_Claim\_SG  
**Subject:** Our Ref: 19/19/VC05/022034 [External General]  
**Attachments:** 22034 TP SR1.pdf

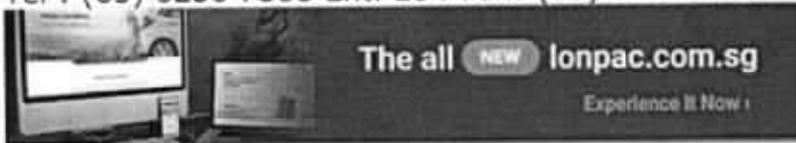
### Lonpac External - General

Dear Nivitha

Attached is the TP survey report (part 1).

Please conduct paper survey.

Regards,  
Ong Li Li  
Senior Claims Executive | Lonpac Insurance Bhd  
300 Beach Road #17-04/07 The Concourse Singapore 199555  
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



*Lonpac External - General data is for internal / external use.*



# PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers

Correspondence Address: 1 Simel St.3 #02-24 S(529890)  
Mobile: 9295 2204 Fax: 6722 8508 Email: pasvcs@hotmail.com

Business Reg. 201404434D

## VEHICLE INSPECTION REPORT

Report No. : PAS/TP/0110719

Date of Report : 26/07/2019

To : Mr Tan Yong Shiang (Chen Yongxiang)  
C/o. 1 Kaki Bukit Ave 6  
#01-23 Autobay  
Singapore 417883

Date of Assignment : 08/07/2019  
Report requested by : Mr Tan Yong Shiang (Chen Y)  
Date of Accident : 06/07/2019  
Date of Inspection : 08/07/2019  
Claim No. : Third Party Claim  
Policy No. : -

### PARTICULARS OF DAMAGED VEHICLE

Vehicle Registration No. : SLG1790S  
Make & Model : Honda Shuttle  
Date of Registration : 22/09/2016  
Colour : Pearl White

Engine Capacity (cc) : 1496cc  
Mileage (km) : 56458km  
Chassis / Frame No. : GK81003995  
Engine No. : L15B3534736

### TYRE CONDITION

Front LH : 7 mm	Front RH : 7 mm
Make : Dunlop	Make : Dunlop
Rear LH : 7 mm	Rear RH : 7 mm
Make : Dunlop	Make : Dunlop

Road wheels Type : Alloy

(The above represents the approximate remaining life of tyre treads)

### PRE-ACCIDENT CONDITION OF DAMAGED VEHICLE (Static tests only)

General Bodywork : Good  
Paintwork : Good  
Handbrake : Serviceable  
Footbrake : Serviceable  
Steering : Serviceable  
Apparent Engine Modification : Nil

### PLACE OF REPAIRER OFFICE/WORKSHOP

Location : M/s. DC's Automotive Pte Ltd  
1, Kaki Bukit Ave 6, #01-23, Autobay, Singapore 417883

### ASSESSMENT

Repairer's Estimate : \$ 14,663.92  
Revised Amount : \$ 12,433.12  
Less Excess : \$ -  
Recommended Reserve : \$ 9,950.00 (Lump Sum)

Estimated Normal Period of Repairs : 10 Working Days

*Disclaimer: This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle involved. No liability or responsibility whatsoever shall be held by PROMINENT APPRAISER SERVICES PTE LTD for any reliance on this report by any third party.*



# PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers

Correspondence Address: 1 Simei St 3 #02-24 S(528890)

Mobile: 9295 2204 Fax: 6722 8508 Email: pasvos@hotmail.com

Business Reg. 201404434D

Vehicle No : SLG1790S

Report No. : PAS/TP/0110719

## GENERAL REMARKS

WITHOUT PREJUDICE

### THE ASSIGNMENT

The survey was conducted at M/s. DC's Automotive Pte Ltd, 1, Kaki Bukit Ave 6, #01-23, Autobay, Singapore 417883.

(Subsequent inspections have been conducted)

### POINT OF IMPACT

At the rear portion.

### DAMAGES

The tailgate, rear bumper, rear end panel, rear floor panel, rear chassis members, rear fenders, taillamps, rear reflectors, rear windscreen, etc.

*Other parts were also found damaged. (See schedule for details)*

### ADJUSTMENT / RECOMMENDATION

We have inspected thoroughly each and every item on the repairer's estimate against the actual damaged found on the vehicle. We list the breakdown of our findings and our recommendation as per schedule attached.

Our adjusted amount for the cost of repairs is SGD \$12,433.12.

### CONCLUSION

The repairer has agreed to undertake the repairs at a lump sum of SGD \$9,950.00.

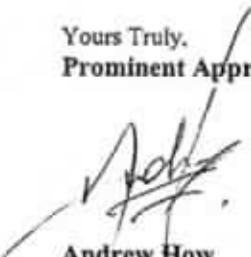
This inspection was conducted entirely on a 'Without Prejudice' basis. We have not given an authorization and/or instruction to the repairer to proceed with the repairs.

We hereby reverting the matter to you for your discretion on repairs.

Assuring you of our best services always.

Yours Truly,

Prominent Appraiser Services Pte Ltd

  
Andrew How  
Automobile Appraiser  
MSAAA  
Licensed Appraiser



# PROMINENT APPRAISER SERVICES PTE LTD

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Correspondence Address: 1 Simei St 3 #02-24 S(529890)  
Mobile: 9295 2204 Fax: 6722 8508 Email: pasvos@hotmail.com

Business Reg. 201404434D

Vehicle No. : SLG1790S

Report No. : PAS/TP/0110719

## APPRAISEMENT SCHEDULE

S/No.	Qty	Parts Descriptions	Condition		Repairer's Estimate (\$S)	Our Assessment (\$S)	
1	1 pc	Tailgate	Dented		\$ 1,886.40	\$ 1,886.40	1,200
2	2 pcs	Tailgate hinge R/L	Bent/Repair	X SVC \$ 65.80	\$ 131.60	\$ -	
3	2 pcs	Tailgate stay R/L	Bent/Jammed	X SVC \$ 198.10	\$ 396.20	\$ 396.20	X
4	1 pc	Tailgate windscreen	Broken/Shattered	/	\$ 1,384.20	\$ 1,384.20	1,200
5	1 pc	Tailgate windscreen moulding	Necessary	/	\$ 75.80	\$ 75.80	/
6	1 pc	Tailgate windscreen dam seal	Necessary	/	\$ 68.00	\$ 68.00	/
7	1 pc	Tailgate wiper blade	Cut	/	\$ 89.50	\$ 89.50	/
8	1 pc	Tailgate wiper motor	Dented/Damaged	X SVC Δ	\$ 581.90	\$ 581.90	X
9	1 pc	Tailgate no.plate garnish	Dented/Cracked	/	\$ 552.70	\$ 552.70	450
10	2 pcs	Tailgate no.plate lamp R/L	Refit	X SVC \$ 50.20	\$ 100.40	\$ -	
11	2 pcs	Tailgate reflector lamp R/L	Cracked	/ \$ 410.00	\$ 820.00	\$ 820.00	/
12	1 pc	Tailgate emblem (Logo)	Necessary	/	\$ 34.10	\$ 34.10	/
13	1 pc	Tailgate emblem (Shuttle)	Necessary	X NF	\$ 48.50	\$ 48.50	X
14	1 pc	Tailgate inner trim	Cut/Deformed	/	\$ 435.80	\$ 435.80	320
15	10 pcs	Tailgate inner trim clip	Necessary	/ \$ 3.20	\$ 32.00	\$ 32.00	/
16	1 pc	Tailgate lock	Dented/Jammed	/	\$ 397.90	\$ 397.90	140
17	1 pc	Tailgate lock striker	Bent	/	\$ 28.70	\$ 28.70	/
18	1 pc	Tailgate weatherstrip	Torn/Necessary	/	\$ 115.60	\$ 115.60	/
19	1 pc	Tailgate pull handle	Dented/Cracked	X SVC	\$ 98.30	\$ 98.30	X
20	2 pcs	Taillamp R/L	Cracked	/ \$ 435.20	\$ 870.40	\$ 870.40	/
21	2 pcs	Rr fender inner trim R/L	Refit	X SVC \$ 650.30	\$ 1,300.60	\$ -	
22	12 pc	Rr fender inner trim clip R/L	Necessary	X MC \$ 3.20	\$ 38.40	\$ 38.40	X
23	1 pc	Rr bumper (w/col)	Dented	/	\$ 1,378.20	\$ 1,378.20	1,200
24	2 pcs	Rr bumper reflector R/L	RH Dented/Cracked	X SVC \$ 40.20	\$ 80.40	\$ 40.20	X
25	2 pcs	Rr bumper reflector trim R/L	RH Dented/Cracked	X SVC \$ 55.60	\$ 111.20	\$ 55.60	X
26	6 pcs	Rr bumper clip	Necessary	/ \$ 3.60	\$ 21.60	\$ 21.60	/
27	2 pcs	Rr bumper retainer R/L	Cracked/Necessary	/ \$ 34.70 Δ	\$ 69.40	\$ 69.40	/
28	2 pcs	Rr bumper sponge R/L	Dented/Cracked	X NS \$ 36.40	\$ 72.80	\$ 72.80	X
29	1 pc	Rr end panel	Dented/Distorted	/	\$ 580.70	\$ 580.70	/
30	1 pc	Rr end panel garnish	Dented/Deformed	X CRP Δ	\$ 156.80	\$ 156.80	/
31	4 pcs	Rr end panel garnish clip	Necessary	/ \$ 3.20 Δ	\$ 12.80	\$ 12.80	/
32	1 pc	Rr compartment lid	Serviceable	X SVC	\$ 585.10	\$ -	
33	1 pc	Rr lock antenna	Dented/Damaged	X SVC	\$ 186.40	\$ 186.40	X
34	2 pcs	Rr fender R/L	Dented/Repair	X SVC			(Refer labour no. 1, 7 & 8) X
35	1 pc	Rr floor panel	Dented/Repair	X SVC			(Refer labour no. 1, 7 & 8) X
36	2 pcs	Rr chassis member R/L	Dented/Repair	X SVC			(Refer labour no. 1, 7 & 8) X
					\$ 12,742.40	\$ 10,528.90	7,092.7
Less Discount : 20%					\$ 2,548.48	20% \$ 2,105.78	
List Parts Sub-Total :					\$ 10,193.92	\$ 8,423.12	5,678.1
1	1 pc	Rr windscreen sealant	Necessary	/ S/N	\$ 50.00	\$ 40.00	/
2	1 set	Rr no.plate (w/bracket)	Dented/Cracked	X SVC S/N	\$ 50.00	\$ 50.00	
3	1 set	Rr reverse sensor	Damaged	/ S/N	\$ 250.00	\$ 220.00	200
4	1 pc	Rr end panel sealant	Necessary	/ S/N	\$ 50.00	\$ 40.00	30
5	1 pc	Rr bumper diffuser	Dented/Cracked	X SVC S/N	\$ 650.00	\$ 650.00	
Special Nett Sub-Total :					\$ 1,050.00	\$ 1,000.00	240
Parts Total :					\$ 11,243.92	\$ 9,423.12	5,918.16



# PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers

Correspondence Address 1 Simei St 3 #02-24 S(526890)  
Mobile: 9295 2204 Fax: 6722 8508 Email: pasvos@hotmail.com

Business Reg. 201404434D

Vehicle No. : SLG1790S

Report No. : PAS/TP/0110719

S/No.	Labour Descriptions	Repairer's Estimate (S\$)	Our Assessment (S\$)
1	To remove and reinstall rear interior trims, garnishes, etc. for necessary repairs.	\$ 150.00	\$ <del>120.00</del> 60
2	To check rear electrical wiring system.	\$ 60.00	\$ 50.00 20
3	To transfer tailgate component parts to new tailgate. (Include transfer rear spoiler and supply sealant)	\$ 150.00	\$ 140.00 60
4	To install rear windscreen to new tailgate.	\$ 120.00	\$ <del>120.00</del> 100
5	To remove, replace and reinstall bumper diffuser. (Incl. supply sealant)	\$ 60.00	\$ 60.00 30
6	To remove, replace and reinstall rear reverse sensors & control unit.	\$ 60.00	\$ 50.00 20
7	To straighten, repair, realign on affected area and replace damaged parts.	\$ 1,200.00	\$ <del>1,100.00</del> 600
8	To spray painting, blending on affected and adjacent area.	\$ 1,400.00	\$ <del>1,200.00</del> 800
9	To spray anti-rust coating on new and affected panels.	\$ 120.00	\$ 90.00 60
10	To vacuum, clean up broken glass debris and cleaning service on affected interior trims & leather seats.	\$ 100.00	\$ 80.00 20
<b>Labour Total :</b>		<u>\$ 3,420.00</u>	<u>\$ 3,010.00</u> 980
<b>Total (Parts &amp; Labour) :</b>		<u>\$ 14,663.92</u>	<u>\$ 12,433.12</u> 6,898.16

### For Lump Sum Repairs

The final adjusted Lump Sum contract amount is \$ 9,950.00 5,500

Under normal circumstances, the repairs should be completed within a reasonable period

of **10 Working Days.** (Exclude waiting days of PRI, Sunday, Public Holiday and awaiting of shipment for spare parts)

111 Photographs were taken at the time of inspection.

**N.B:** By accepting to carry out the repairs on a contract Lump Sum basis, the repairer shall have the prerogative and discretion to replace the damaged parts with new, used, OEM or reconditioned parts and/or to repair the vehicle on a roadworthy condition to the entire satisfaction of owner.

## 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	06/07/2019 13:13
Date Of Accident	06/07/2019 01:10
Exact Location Of Accident	HOUGANG AVE 8 TOWARDS HOUGANG AVE 4 BESIDE BLK 632
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG1790S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN YONG SHIANG (CHEN YONGXIANG)
NRIC No	S7914053H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94359959
Alternative Phone No	OFFICE-94359959

### Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE-1.5 GA (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29021167 QMY
Cover Note Number	

### Driver

Name of Driver	TAN YONG SHIANG (CHEN YONGXIANG)
NRIC No	S7914053H
Date Of Birth	14/05/1979
Occupation	OUTDOOR
Date Of Driving Pass	15/06/1999
Driving Experience	20 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94359959
Fax Number	
Contact Number	OFFICE-94359959
EMail Address	NOEMAIL

Address	BLK 275D COMPASSVALE LINK #07-240
Postcode	544275
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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?	YES
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: : DYLAN TAN JING KAI GENDER: : MALE
Passenger 2	NAME: : SELVAGANAPATHY S/O KUMARAN GENDER: : MALE

#### 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

PLEASE REFER TO SKETCH PLAN

#### 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	GX5826S
Vehicle Make/Model/Colour	MINI CANTER
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)

**DETAILS OF INJURED PERSON 1**

Name TAN YONG SHIANG (CHEN YONGXIANG)  
Approximate Age  
Injuries Sustain BACK & NECK  
Injured person in which vehicle? SLG1790S  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

**DETAILS OF INJURED PERSON 2**

Name DYLAN TAN JING KAI  
Approximate Age  
Injuries Sustain HAEDACHE  
Injured person in which vehicle? SLG1790S  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

**DETAILS OF INJURED PERSON 3**

Name SELVAGANAPATHY S/O KUMARAN  
Approximate Age  
Injuries Sustain BACK PAIN  
Injured person in which vehicle? SLG1790S  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

## 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**.
3. Information provided must be as **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may allow insurance companies to **revoke 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

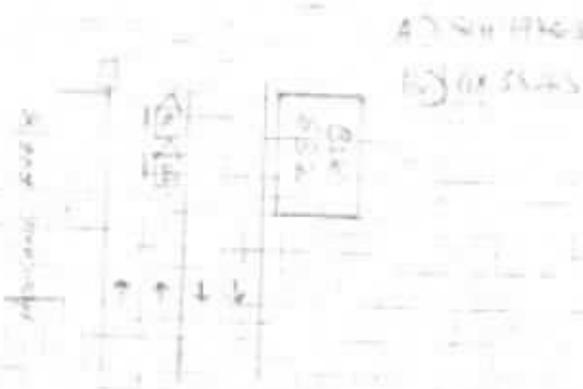
Driver's Signature  
(if driver is not the policyholder)  
Date & Time

Reporting Centre Personnel's Signature  
Name:  
NRC/IN No.:

06/07/2019  
Ashu Chatterjee

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Highway Ave R. As I was a red light, I came to a stop. Suddenly, a heavy car started to turn left.

DECLARATION

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

Policyholder's Signature  
Date & Time

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

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

*ca/cel/2005*  
*Rishi Vartan*

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo



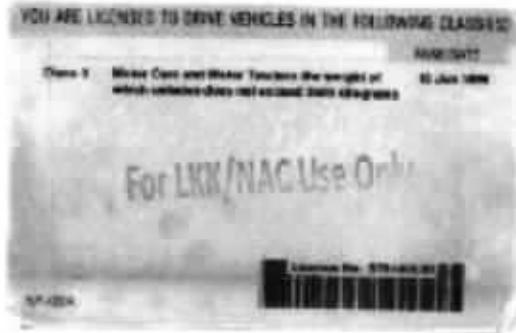
Accident Photo



Accident Photo



Identification Card



**Addendum Sheet**



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE**  
 8 Raffles Quay, #18-00 Singapore 048580  
 Tel: (65) 6224 0000 Fax: (65) 6224 0000  
 Operating Hours: Monday to Friday, 09:00 - 17:00  
 URL: www.gias.com.sg / GST Reg. No.: M400017781

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: MVA119080041 Vehicle Registration No: SLG 17905  
 Name (as shown on NRIC): Tan Yook Siang (Tan Yook Siang) NRIC/TIN/Passport No: S7940024  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address: \_\_\_\_\_ Singapore) \_\_\_\_\_  
 Contact (Tel): \_\_\_\_\_ Mobile No: 94357959  
 Email Address: \_\_\_\_\_  
 Date of Accident: 6/6/2019 Time of Accident: 07:10  
 Place of Accident: Holland Ave & Tampines Holland Ave 4, Beside  
 Insurance Company: MSU

**(B) ADDITIONAL INFORMATION / AMENDMENTS**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Time of accident should be 01:05 HRS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Policyholder / Driver's Signature \_\_\_\_\_  
 Date \_\_\_\_\_

Car 6/6/2019  
 Reporting Centre Personnel's Signature \_\_\_\_\_  
 Name: Keck Hooi  
 NRIC/TIN No. \_\_\_\_\_  
 Date: \_\_\_\_\_

## 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	08/07/2019 09:17
Date Of Accident	05/07/2019 23:00
Exact Location Of Accident	TRAFFIC LIGHT AT HOUGANG AVENUE 8 NEAR BLK 631
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX5826S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AMPEX ENGINEERING CONSTRUCTION
Co Reg No	53189151L
Email Address	AMPEXSNPC99@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97375918
Alternative Phone No	OFFICE-91194764

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FB511BOJSRDE

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 REPORTING ONLY

Vehicle Category COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	Z19VC05001717
Cover Note Number	

### Driver

Name of Driver	KHOO KAM SWEE
NRIC No	S2696164E
Date Of Birth	17/02/1961
Occupation	OUTDOOR
Date Of Driving Pass	01/01/1981
Driving Experience	38 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97375918
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 188C RIVERVALE DRIVE #10-1050
Postcode	543168
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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?	
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

PLEASE REFER TO SKETCH PLAN.

#### 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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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:

08 JUL 2019

*A. C. Tan*

Driver's Signature

(If driver is not the policyholder)

Date & Time:

08 JUL 2019

*9:17 AM*

Reporting Centre Personnel's Signature

Name:

Poh Kwee Ch

NRIC/FN No. 92045832



CERTIFICATE OF INSURANCE Pg. 1

**LONPAC INSURANCE BHD** (549636332)

Singapore Office: 301, Beach Road #11-04/07, The Centria, Singapore 189875.  
Tel: 6742 1788 Fax: 6742 2757 Website: www.lonpac.com.sg  
GET Reg No: P1-000025-C

Extension, Please Contact

**COE AUTO TRADING**

18 Se-Ming Lane

902-03 Midview City

Singapore 573900

Tel: 64588633, 64571902

Fax: 64565729

4000

**CERTIFICATE OF INSURANCE**

C228

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE)  
ROAD TRANSPORT ACT 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1969 (MALAYSIA)

Certificate No: Z19V02001717

Type of Cover: THIRD PARTY FIRE & THEFT

- |   |                                     |
|---|-------------------------------------|
| 1. Index Mark and Vehicle Registration Number   | MITSUBISHI F80110LJ99DE<br>- 008085 |
| 2. Name of Policy Holder  | AMPEX ENGINEERING CONSTRUCTION      |
| 3. Effective Date of the Commencement of Insurance for the purpose of the Act   | 02/02/2019                          |
| 4. Date of Expiry of the Insurance  | 03/02/2020                          |
| 5. Person To Drive<br>(A) THE POLICYHOLDER<br>(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS/THEIR PERMISSION<br>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.                           |                                     |
| E. Limitations as to use<br>USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.<br>USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.<br>USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES.<br>THE POLICY DOES NOT COVER:<br>USE FOR HIRE OR REWARD OR FOR RACING, PACEMAKING, RELIABILITY TRIAL OR SPEED TESTING.<br>USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE. |                                     |

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

H.P. Owner : COE AUTO TRADING

*Annie*

**CHEF EXECUTIVE**  
(Singapore Branch)

**LI INSURANCE AGENCY PTE LTD**

1803 BENCOCOLEN STREET  
#04-01 THE BENCOCOLEN  
SINGAPORE 120845  
TEL: 6324-0783 FAX: 6324-2824  
Co. Reg No: 196005000W

User ID: CYJONG  
Date Issued: 01/02/2019

DRIVER'S NRIC + DRIVING LICENCE Pg. 1



Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

CHASSIS NO : FB5IIBA46153  
U.W : 1720 KG  
M.L.W : 3500 KG  
PASS CAP : 01  
TYRE SIZE : F.650R-15-8  
F.650R-13-8(D)

Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
8 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S66500200 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MLHM19088199 Vehicle Registration No: GX5826S
Name (as shown in NRIC) : Khoo Kam Swee NRIC/FIN/Passport No : S2696164E
(\*Vehicle Driver / ~~Vehicle Driver~~) (\* Please delete as appropriate
Address : Blk 188C Rivervale Drive #10-1050 Singapore 643188 )
Contact (Tel) : Mobile No. : 97375918
Email Address : ampexsnpc99@yahoo.com
Date of Accident : 05/07/2019 Time of Accident : 23:00 Hours
Place of Accident : Traffic light at Ang Mo Kio Avenue 8
Insurance Company : LONPAC INSURANCE BHD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To amend and upload the driver's nric and driving licence and certificate of insurance.

Multiple horizontal lines for additional information or amendments.

Khoo Kam Swee
~~Vehicle Driver~~ / Driver's Signature
Date: 10/07/2019

Reporting Centre Personnel's Signature
Name: Poh Kwee Choo
NRIC/FIN No.: S6840583A
Date: 10/07/2019

Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 - 17:00  
URN: S66500200 / GST Reg. No.: M400617735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MLHM19088199-01 Vehicle Registration No: GX5826S  
Name (as shown in NRIC) : KHOO KAM SWEE NRIC/FIN/Passport No : S2696164E  
(\*Vehicle Driver / ~~Vehicle Owner~~) (\*) Please delete as appropriate  
Address : Blk 188C Rivervale Drive #10-1050 Singapore( 543188)  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 97375918  
Email Address : ampexsnpc99@yahoo.com  
Date of Accident : 05/07/2019 Time of Accident : 23:00 Hours  
Place of Accident : Traffic light at Hougang Avenue 8 near Blk 631  
Insurance Company: LONPAC INSURANCE BHD

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To locate of accident shall be Hougang Avenue 8 near Blk 631.

The date and time of accident is between 5 - 6 July and 11pm - 1am.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Kho Kam Swee  
\_\_\_\_\_  
Policyholder / Driver's Signature  
Date: 11/07/2019

  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: Poh Kwee Choo  
NRIC/FIN No.: S6840583A  
Date: 11/07/2019



Your Ref: 19/19/19/VC05/022034

Date: 12<sup>th</sup> Sep 2019

Our Ref: CS1/LPC19015235/Qtd3e2

**M/s Lonpac Insurance Bhd**

300 Beach Road  
#17-04/07 The Concourse  
Singapore 199555  
(The Motor Claims Department)

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: SLG 1790S  
INSURED VEHICLE: GX 5826S  
ACCIDENT DATE: 06/07/2019**

We thank you for your instruction on 27/08/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SLG 1790S from M/s Prominent Appraiser Services Pte Ltd.
- b) Singapore Accident Statement of Vehicles SLG 1790S and GX 5826S.
- c) Colour damaged vehicle photographs of SLG 1790S.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SLG 1790S
Make & Model	: Honda Shuttle 1.5G A
Year of Registration	: 2016
Chassis Number	: GK81003995
Engine Capacity	: 1496 cc

2. We recommend that the repairs of the entire damage require about 7 (Seven) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



## LKK Auto Consultants Pte Ltd

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

TEL: 6256 3581 FAX: 6256 4315

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

Page No.:1 of 3

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLG 1790S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	TAILGATE	DENTED	1,886.40	1,200.00
2	TAILGATE HINGE R/L @\$65.80	TO REPAIR SEE LABOUR	131.60	-
2	TAILGATE STAY R/L @\$198.10	SERVICEABLE	396.20	-
1	TAILGATE WINDSCREEN	BROKEN / SHATTERED	1,384.20	1,200.00
1	TAILGATE WINDSCREEN MOULDING	NECESSARY	75.80	75.80
1	TAILGATE WINDSCREEN DAM SEAL	NECESSARY	68.00	68.00
1	TAILGATE WIPER BLADE	CUT	89.50	89.50
1	TAILGATE WIPER MOTOR	SERVICEABLE	581.90	-
1	TAILGATE NO. PLATE GARNISH	DENTED / CRACKED	552.70	450.00
2	TAILGATE NO. PLATE LAMP R/L @\$50.20	SERVICEABLE	100.40	-
2	TAILGATE REFLECTOR LAMP R/L @\$410.00	CRACKED	820.00	820.00
1	TAILGATE EMBLEM (LOGO)	NECESSARY	34.10	34.10
1	TAILGATE EMBLEM (SHUTTLE)	NOT FITTED	48.50	-
1	TAILGATE INNER TRIM	CUT / DEFORMED	435.80	320.00
10	TAILGATE INNER TRIM CLIP @\$3.20	NECESSARY	32.00	32.00
1	TAILGATE LOCK	DENTED / JAMMED	397.90	140.00
1	TAILGATE LOCK STRIKER	BENT	28.70	28.70
1	TAILGATE WEATHERSTRIP	TORN / NECESSARY	115.60	115.60
1	TAILGATE PULL HANDLE	SERVICEABLE	98.30	-
2	TAILLAMP L/R @\$435.20	CRACKED	870.40	870.40
2	RR FENDER INNER TRIM R/L @\$650.30	REFIT	1,300.60	-
12	RR FENDER INNER TRIM CLIP R/L @\$3.20 (NECESSARY)	NOT CONSISTENT WITH THE IMPACT	38.40	-
1	RR BUMPER (W/COL)	DENTED	1,378.20	1,200.00
2	RR BUMPER REFLECTOR R/L @\$40.20	SERVICEABLE	80.40	-
2	RR BUMPER REFLECTOR TRIM R/L @\$55.60	SERVICEABLE	111.20	-
6	RR BUMPER CLIP @\$3.60	NECESSARY	21.60	21.60
2	RR BUMPER RETAINER R/L @\$34.70	CRACKED / NECESSARY	69.40	69.40
2	RR BUMPER SPONGE R/L @\$36.40	NO SUCH PARTS	72.80	-
1	RR END PANEL	DENTED / DISTORTED	580.70	580.70



## 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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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	RR END PANEL GARNISH	CRACKED	156.80	156.80
4	RR END PANEL GARNISH CLIP @\$3.20	NECESSARY	12.80	12.80
1	RR COMPARTMENT LID	SERVICEABLE	585.10	-
1	RR LOCK ANTENNA	SERVICEABLE	186.40	-
2	RR FENDER R/L (NPA)	TO REPAIR SEE LABOUR	-	-
1	RR FLOOR PANEL (NPA)	TO REPAIR SEE LABOUR	-	-
2	RR CHASSIS MEMBER R/L (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-2,548.48	-1,497.08
			10,193.92	5,988.32
	<b>SPECIAL NETT ITEMS</b>			
1	RR WINDSCREEN SEALANT (SN)	NECESSARY	50.00	40.00
1	SET RR NO. PLATE (W/BRACKET) (SN)	SERVICEABLE	50.00	-
1	SET RR REVERSE SENSOR (SN)	DAMAGED	250.00	200.00
1	RR END PANEL SEALANT (SN)	NECESSARY	50.00	30.00
1	RR BUMPER DIFFUSER (SN)	SERVICEABLE	650.00	-
			1,050.00	270.00
	<b>LABOUR</b>			
	TO REMOVE AND REINSTALL REAR INTERIOR TRIMS, GARNISHES, ETC. FOR NECESSARY REPAIRS.		150.00	60.00
	TO CHECK REAR ELECTRICAL WIRING SYSTEM.		60.00	20.00
	TO TRANSFER TAILGATE COMPONENT PARTS TO NEW TAILGATE. (INCLUDE TRANSFER REAR SPOILER AND SUPPLY SEALANT)		150.00	60.00
	TO REMOVE, REPLACE AND REINSTALL BUMPER DIFFUSER. (INCL SUPPLY SEALANT)		60.00	30.00
	TO REMOVE, REPLACE AND REINSTALL REAR REVERSE SENSORS & CONTROL UNIT.		60.00	20.00
	TO STRAIGHTEN, REPAIR, REALIGN ON AFFECTED AREA AND REPLACE DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF TAILGATE HINGE R/L, RR FENDER R/L, RR FLOOR PANEL AND RR CHASSIS MEMBER R/L.		1,200.00	600.00
	TO SPRAY PAINTING, BLENDING ON AFFECTED AND ADJACENT AREA.		1,400.00	800.00
	TO SPRAY ANTI-RUST COATING ON NEW AND AFFECTED PANELS.		120.00	60.00

Report Ref No. CS1/LPC19015235/Qtd3e2



## 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.:3 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO VACUUM, CLEAN UP BROKEN GLASS DEBRIS AND CLEANING SERVICE ON AFFECTED INTERIOR TRIMS & LEATHER SEATS.		100.00	20.00
	TO INSTALL REAR WINDSCREEN TO NEW TAILGATE.		120.00	100.00
			3,420.00	1,770.00
<b>GRAND TOTAL</b>			<b>14,663.92</b>	<b>8,028.32</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>6,000.00</b>

Report Ref No. CS1/LPC19015235/Qtd3e2

OI SUN PIN

Asst. Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

**DISCLAIMER OF LIABILITY TO THIRD PARTIES:-** This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.