

CLASS. REC. BY:

REF: es/CTI/19015567/Atd3

Special Instruction:

Inspector: Adnan

ASSIGNMENT (Office)

From (Person): Chong Boon Sen

of CTI

Date/Time: 3/9/19 @ 9:57am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SCK 8400H

Insured:

YP 1498K

at Workshop no:

1st Autoworks

Tel:

68441985

of

23 Kallie Bukit Ave 4 # 04-01

Policy No:

DmCVSN16068119033

Claim No:

SNM19D204099C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

28/08/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 12:32pm @ 3/9/19

Person Contacted:

Ronnie

Vehicle

IN/OUT

Date/Time	Action/Instruction	Technician
	SCK8400H-ICG/CTI19015567/Acon3	
	YP 1498K	
	Part by Part #7708.70 (Red: 4780.70; 38%)	
	5dup.	

DOA: 28/08/19

ASS. REC. BY:

REF:

Adrian

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SCJ8400H Yr Regn: 2017 Jan

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

Truck / Trailer or

Make: Opel Astra cc 999

Colour: Green A/C: Insured / Std / NI / NA

Sp. Reading: 57106 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WOLBE6EA3HG016287

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Normal / Jammed / Leaked / Burnt or

Brake: Normal / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/45R17

R: 225/45R17

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. ut D.O.I. 02/09/19

Survey held at 1st Antawak

Des. of Damages: Fit / Rear / O/S / N/S / U/C / Rooftop or Front o/s

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

Date / Time Action / Instruction

TP China

RECEIVED 10 JAN 2020

MV :

PV :

Nett :

Date/Time, File Pass to?	Date/Time, File Return to?
1) 10/1 Typist	2)
3)	4)
5)	6)
Prat. Report:	
Final Report:	

Part Prices Check:	
IN	OUT
	80
	11
	8

Survey Fee:	Date:
Basic & Add.	
_ S + RS, _ SI	
Photos	
Others	
TOTAL	

INS. CASE OWNER:

ASSIGNMENT

Surveyor: ADRIAN

DOI: 02/09/19

Date / Time : 02/09/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : YP 1498K
 Name of Insured : _____
 Insured Tel No. : _____ HP: _____
Excess Sec II :S\$ _____ D.O.A : 28/08/2019
 Is driver the owner? (YES / NO) Nature of Accident : _____

Claim No. : _____
 Policy No. : _____
 Make / Model : _____
 Place of Accident : _____

If NO, Driver Name / Age :

Driver Tel No. : _____ (V/L: YES / NO)

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

Insured Liability : % **Final ? Yes / No**

SCK 8400H



INSRS:
WSP: 1ST AUTOWORKS
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____

Date/ Time	YP 1498K - X	SCK 8400H - X	STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
			Documentation Check List: Handler Typist	
			Notification ltr (if non-pickup)	<input type="checkbox"/>
			After call ltr to OI:	<input type="checkbox"/>
			Authorisation To Act:	<input type="checkbox"/>
			Release Voucher:	<input type="checkbox"/>
			Final Repair Bill:	<input type="checkbox"/>
			Car Rental Invoice:	<input type="checkbox"/>
			Towing Invoice:	<input type="checkbox"/>
			LTA / GIA :	<input type="checkbox"/>
			Medical Bill:	<input type="checkbox"/>
			PIR:	<input type="checkbox"/>
			Mandate/Reject Instruction:	<input type="checkbox"/>
			LOD	<input type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/>
PRELIMINARY ADVICE Date/Time:	Sent By:		Post-Repair Photos:	<input type="checkbox"/>
			Others:	<input type="checkbox"/>
FINALIZATION Date/Time:	Confirm with:		Confirm by:	
Repair Cost: S\$	(days) Reduction: %		Email <input type="checkbox"/>	Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time:	Confirm with:		Email <input type="checkbox"/>	Call <input type="checkbox"/>
Final Liability: %	(Agreed / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia :	
Repair Cost: S\$				
Loss of Rental (LOR): S\$	(days)			
Loss of Use (LOU): S\$	(\$ x days)			
Loss of Income (LOI): S\$	(\$ x days)			
LOR only <input type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input type="checkbox"/>	[Tick only one]
GIA/LTA Search: S\$				
Medical: S\$				
Disbursement: S\$	(e.g. Tow/ Independent)		1) Claim status: Normal/Reject/Private Settle	
Legal Cost: S\$			2) Report Format:	
			3) Survey fee:	
Total: S\$	Global Sum S\$:			
FINAL PAYMENT Date/Time:	Confirm with:		Email <input type="checkbox"/>	Call <input type="checkbox"/>
Payee 1: S\$	Name 1:			
Payee 2: (Strike if N.A.) S\$	Name 2:			
Payee 3: (Strike if N.A.) S\$	Name 3:			

Nivitha (LKK Auto)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Tuesday, 3 September 2019 9:57 AM
To: ronnie.tan@firstautoworks.com.sg
Cc: assignments
Subject: RE: OUR REF: SNM19D204099-YP1498K-CBS - FW: Firstauto (KB) - Ronnie Tan/ NTUC insurance /TP Our insured SCK 8400H / DOA 28/08/2019

WITHOUT PREJUDICE

Dear Sir

We will be assigning M/s LKK Auto Consultants Pte Ltd to survey your client's vehicle.

Aside to LKK,

Please proceed to survey the third party vehicle on WP basis.

Thank you.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG 3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Ronnie Tan [mailto:ronnie.tan@firstautoworks.com.sg]
Sent: Tuesday, 3 September, 2019 8:35 AM
To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Subject: RE: OUR REF: SNM19D204099-YP1498K-CBS - FW: Firstauto (KB) - Ronnie Tan/ NTUC insurance /TP Our insured SCK 8400H / DOA 28/08/2019

Hi Mr Chong

Please arrange Adrain Ling LKK to survey SCK 8400H

Thank You

Regard

Ronnie

From: "Chong Boon Sen" <boonsen.chong@sg.cntaiping.com>
Sent: Monday, 2 September, 2019 4:08 PM
To: "ronnie.tan@firstautoworks.com.sg" <ronnie.tan@firstautoworks.com.sg>
Subject: RE: OUR REF: SNM19D204099-YP1498K-CBS - FW: Firstauto (KB) - Ronnie Tan/ NTUC insurance /TP Our insured SCK 8400H / DOA 28/08/2019

WITHOUT PREJUDICE

Dear Sir,

We intend to conduct a pre-repair survey of the damage to your client's vehicle jointly with your client/your motor workshop. We propose to use one of the following motor surveyors to conduct the joint pre-repair survey as a single joint expert.

ADRIAN LING
Kelvin Ang
SEE CHEW SENG
MOHD FADHILAH BIN OSMAN
XING QUO QIANG
KENNETH KONG
SIMON HO
CHUA WEIJIE
MARCUS CHUA
HENRY NG

Please let us know within two(2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

You may select one of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** ??? Taiping SG 3 Anson Road
#16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Claims Dept of CTI

Sent: Monday, 2 September, 2019 2:58 PM

To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>; Chee So Chow <sochow.chee@sg.cntaiping.com>; ronnie.tan@firstautoworks.com.sg

Subject: OUR REF: SNM19D204099-YP1498K-CBS - FW: Firstauto (KB) - Ronnie Tan/ NTUC insurance /TP Our insured SCK 8400H / DOA 28/08/2019

Dear Boon Sen,

Please conduct PRS for SCK8400H.

Note : officer in charge – Boon Sen 63896171.

Thank you

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 63896116 | F: (65) 62247175

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: ??? Taiping SG

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From: Ronnie Tan [<mailto:ronnie.tan@firstautoworks.com.sg>]
Sent: Friday, August 30, 2019 4:43 PM
To: Claims Dept of CTI
Cc: Suhaimi
Subject: Firstauto (KB) - Ronnie Tan/ NTUC insurance /TP Our insured SCK 8400H / DOA 28/08/2019

Date: 04/06/2019

Notice of accident

Firstauto (KB) - Ronnie Tan/ NTUC insurance /TP Our insured SCK 8400H / DOA 28/08/2019

To: China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower
Singapore 079909

Dear Sir

We are instructed by Amos Low Kim Fatt to notify you of a road traffic accident on 28/08/2019 at about 15.55 at EXIT FROM CARPARK OF 201 HOUGANG ST 21 our client's/customer's vehicle registration number SCK 8400H and vehicle registration number YP 1498K driven by you at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our client's/customer's vehicle has been damaged. Before our client/we proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client/we shall proceed to repair the vehicle without further reference to you.

Yours faithfully,

Ronnie Tan
1st Autoworks Pte Ltd
23 Kaki Bukit Ave 4
#04-01 (South Wing)

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

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	28/08/2019 23:43
Date Of Accident	28/08/2019 15:55
Exact Location Of Accident	EXIT FROM CARPARK OF 201 HOUGANG ST 21
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCK8400H
Insured/Policyholder	
Name Of Registered Owner	AMOS LOW KIM FATT
NRIC No	S1780898B
Email Address	AMOSLKF@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97940285
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	OPEL
Model	ASTRA-999CC HB (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106426676
Cover Note Number	

Driver

Name of Driver	AMOS LOW KIM FATT
NRIC No	S1780898B
Date Of Birth	02/07/1966
Occupation	INDOOR
Date Of Driving Pass	22/01/1985
Driving Experience	34 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97940285
Fax Number	
Contact Number	OFFICE-NOPHONE
EEmail Address	AMOSLKF@YAHOO.COM.SG

Address	141 LORONG AH SOO #06-271 SINGAPORE
Postcode	530141
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	SIDE SWIPE
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

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SEND TO MOTORVIDEO@INCOME.COM.SG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP1498K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YU MING SUN
NRIC/Passport Number	F7251311T
Contact Number	96116153
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**.
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 (POPA)**

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 purposes 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

20/8/2019
19:16:02

Driver's Signature

(If driver is not the policyholder)

Date & Time

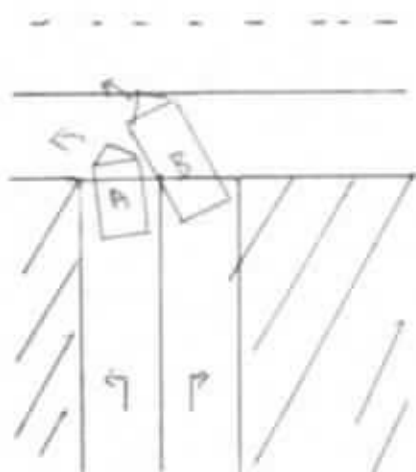
Reporting Centre Personnel's Signature

Name

NRIC/IN No.

Sketch Plan #2

SKETCH PLAN → HONGKONG ST 21



VEH A = 3CXP4604
 VEH B = TP448K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/8/2019 around 155hrs, I was driving at the above location heading home.

At the junction, I wanted to turn left into the main road.

Suddenly, vehicle B which was on the right turn lane left turned into my path of travel and collided into my vehicle.

No one was injured in the accident.

DECLARATION

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

 Policyholder's Signature
 Date & Time: 28/8/2019
 18:15hrs

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

 Reporting Centre Personnel's Signature
 Name: Ian Lee
 NRIC/FIN No: S8707107



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-19-141398

Date of Request: 29/08/2019

Your Ref No:

Online Purchase

Alpine Motors Pte Ltd
No. 7 Ubi Close
Alpine Centre
Singapore 408604

Dear Sir/Madam,

Enquiry Date 29/08/2019

Enquiry By RONNIE TAN GUAN HIN

TP Vehicle No. YP1498K

Accident Date 28/08/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YP1498K	China Taiping Insurance (Singapore) Pte. Ltd.	03/02/2019-02/02/2020	6389 6111

Thank You.

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**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-141398
Date of Request: 29/08/2019

Your Ref No: Online Purchase

Alpine Motors Pte Ltd
No. 7 Ubi Close
Alpine Centre
Singapore 408604

Dear Sir/Madam,

Enquiry Date 29/08/2019
Enquiry By RONNIE TAN GUAN HIN
TP Vehicle No. YP1498K
Accident Date 28/08/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

GIRO Cash Cheque

FIRST AUTOWORKS

Repair Estimate

Chassis TAG 111111

Date : 30/08/2019

Reference: SCK8400H

To Whom It May Concern

Make: Opel Astra

Dear Sir,

RE: VEHICLE : SCK8400H
 CHASSIS NO. W0LBE6EA3HG016287
 ENGINE NO.: B1162457GT2X0386

TP Chian
 Denise

Name of insured : Amos Low Kim Fatt
 Date of accident.: 28/08/2019

We append hereunder the estimated cost of repairs to be carried out to the above vehicle.

Parts

No.	Qty	Part Description	Price (SGD)
1	1	BONNET <i>Repair</i>	1,880.00 ✗
2	1	FRT BUMPER <i>torn</i>	1,500.00 ✓
3	1	FRT BUMPER SIDE RETAINER RH, Guide <i>para</i>	60.00 ✓
4	1	FRT BUMPER SIDE BRACKET RH <i>para</i>	58.00 ✓
5	1	FRT BUMPER TOW COVER <i>new</i>	40.00 ✗
6	1	FRT BUMPER CLIP SET - Rivet <i>new</i>	40.00 ✓
7	1	RH HEADLAMP <i>ut</i>	820.00 ✓
8	1	FRT FENDER RH <i>dent</i>	740.00 ✓
9	1	FRT UPPER GRILLE <i>crack</i>	420.00 ✓
10	1	FRT LOWER GRILLE <i>dent</i>	210.00 ✓
11	1	FRT EMBLEM <i>new</i>	120.00 ✓
12	1	FRT RH FOG LAMP <i>crack</i>	320.00 ✓
13	1	FRT RH FOG LAMP COVER <i>missing</i>	110.00 ✓
14	4	FRT BUMPER PARKING SENSOR <i>new</i>	420.00 ✗
15	4	FRT BUMPER PARKING SENSOR SEAL <i>new</i>	40.00 ✗
16	1	FRT BUMPER PARKING SENSOR WIRE HARNESS <i>new</i>	618.00 ✗
17	1	FRT FENDER INNERSHIELD RH <i>new</i>	180.00 ✗
18	1	FRT ENGINE UNDER DUST COVER RH <i>new</i>	80.00 ✗
19	1	FRT BUMPER UNDER DUST COVER <i>new</i>	190.00 ✗
20	1	RH WING MIRROR <i>new</i>	180.00 ✗

FRT Bumper *2nd* ✓ 210
 FRT Bumper BRACKET *Best* ✓ 95
 FRT Bumper *ROSONBUA* *crack* ✓ 170
 FRT Bumper *STAMPING* BRACKET *Best* ✓ 80

Parts Total: 8,566.00
 Less 10%: 856.60
 Total: 7,709.40

Labour

No.	Labour Description	Price (SGD)
1	To dismantle / renew the accident damaged portion, to panel beating, reshape, straighten, orientate and align repair / replacement parts.	2800.00 <i>1300</i>
2	Carry out spray painting on accident affected area. (Frt bumper, LHF Fender)	1850.00 <i>1750</i>
3	To disconnect wire harness of electrical component to facilitate repairs, reconnect and check electrical function after repair	40.00 <i>30</i>
4	To conduct 4 wheel alignment	50.00 ✗ <i>3080</i>

Labour Total : 4,740.00

Other

<u>No.</u>	<u>Other Description</u>	<u>Price (SGD)</u>
1	Frt Number Plate <i>HM</i>	40.00 <i>X</i>
Other Total :		40.00

Total : \$12,489.40
Gst (7%) : \$874.26
GRAND TOTAL: \$13,363.66

NB: THIS IS ONLY AN ESTIMATE AND SHOULD ADDITIONAL WORK BE FOUND NECESSARY TO BE CARRIED OUT IN THE COURSE OF REPAIRS, EXTRA MATERIALS AND LABOUR COST WILL BE CHARGED ACCORDINGLY WHICH HOWEVER WILL BE INFORMED PRIOR TO ACTION TAKEN. PARTS PRICES ARE SUBJECT TO CHANGES.

Yours faithfully



Service Advisor
Ronnie Tan
DID: 6844 1985 Fax:6844 5185

Addian King
P/P 02/09/19.
05 days.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer
Signature:
Date:

total. 770870 (P/P)

1st Autoworks Pte Ltd

23 Kaki Bukit Ave 4, #04-01 (South Wing) Singapore 415933 Tel: 68441985 Fax: 68445185

TAX INVOICEChina Taiping Insurance (Singapore) Pte. Ltd
3 Anson Road #16-00 Springleaf Tower
Singapore 038986

GST Ref. No: M2-0111811-5

Vehicle No: SCK8400H
Chassis No :W0LBE6EA3HG016287
Engine No: B1162457GT2X0386

Invoice No:

Invoice Date:

DESCRIPTION	AMOUNT SGD
-------------	---------------

Parts

No.	Qty.	Description	Price (SGD)
1	1	FRT BUMPER	1,500.00
2	1	FRT BUMPER SIDE RETAINER RH, Guide	60.00
3	1	FRT BUMPER SIDE BRACKET RH	58.00
4	1	FRT BUMPER CLIP SET - Rivet	40.00
5	1	RH HEADLAMP	820.00
6	1	FRT FENDER RH	740.00
7	1	FRT UPPER GRILLE	420.00
8	1	FRT LOWER GRILLE	210.00
9	1	FRT EMBLEM	120.00
10	1	FRT RH FOG LAMP	320.00
11	1	FRT RH FOG LAMP COVER	110.00
12	1	RH WING MIRROR	180.00

Supplementary Items

13	1	FRT BUZZER	210.00
14	1	FRT BUZZER BRACKET	95.00
15	1	FRT BUMPER ABSORBER	170.00
16	1	FRT BUMPER SUBFRAME BRACKET	90.00

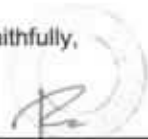
Total:	5143.00
Less 10%:	514.30
Parts Total :	4628.70

Labour

<u>No.</u>	<u>Description</u>	<u>Price (SGD)</u>
1	To dismantle / renew the accident damaged portion, to panel beating, reshape, straighten, orientate & align repair / replacement parts	1,300.00
2	Carry out spray painting on affect area frt portion (frt bumper, LH frt fender)	1,750.00
3	To disconnect front wire harness of electrical component to facilitate repair, reconnect & check electrical function after repair	30.00
Labour Total :		3080.00

Sub Total : \$7,708.70
GST (7%) \$539.61
Grand Total: \$8,248.31

Yours Faithfully,



Ronnie Tan
Service Advisor
Tel: 68441985 Fax:68445185

E & O E

- ALL CHEQUE PAYMENTS SHOULD BE CROSSED AND MADE PAYABLE TO "1 ST AUTOWORKS PTE LTD".
- PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

FIRST AUTOWORKS

Date: 11/11/2019

From: Firstautoworks Pte Ltd

Dear Sirs

RE: VEHICLE NO: SCK8400H
CHASIS NO: W0LBE6EA3HG016287

Supplementary Items

Further to our estimate dated 30.08.2018, we append hereunder the additional Parts & labour required in respect of the repair as carried to the above vehicle for your kind attention.

Parts

<u>No.</u>	<u>Qty</u>	<u>Description</u>	<u>Amount</u>
<u>1</u>	1	FRT BUZZER	210.00
<u>2</u>	1	FRT BUZZER BRACKET	95.00
<u>3</u>	1	FRT BUMPER ABSORBER	170.00
<u>4</u>	1	FRT BUMPER SUBFRAME BRACKET	90.00

Total: 565.00

Total: 565.00

Less 10%: 56.50

7 % GST: 35.60

Grand Total: 544.10

This is only an estimate and should additional work be found necessary to be carried out in the course of repairs, extra materials and labour cost will be charged accordingly. You will be informed prior actions to be taken. **Parts prices are subjected to change.**

Yours faithfully



Service Advisor

Ronnie Tan

DID : 6844 1985 Fax: 68445185

CC :

Fax:

1st Autoworks Pte Ltd

23 Kaki Bukit Ave 4, #04-01 (South Wing) Next to Vicom Building, Singapore 415933 Tel : 6844 1985 Fax : 6844 5185

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	05 Sep 2019		05 Sep 2019 13:29 Edit Adj Rpt	S\$7,708.70 Edit Estimates	S\$7,708.70 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by Insurer]									
Insured:	-, ID: -								
Main Claimant:	AMOS LOW KIM FATT , ID: S1780898B								
Vehicle Reg. No.:	SCK8400H	Date of Loss:	28/08/2019 15:00 - :59 [31 Months and 24 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM19D204099C02	Policy/Cover Note No.:	DMCVSN16068119033						
Vehicle Reg. No. (Insured):	YP1498K	Policy No. (Claimant):	5106426676						
		Excess:	S\$0.00						
Repairer:	First Autoworks Pte Ltd (HQ) 23 KAKI BUKIT AVE 4 #04-01 SOUTH WING, 415933 Kaki Bukit - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]								
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by ADRIAN LING] ... [Final Rpt due 16/09/2019]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SCK8400H (SNM19D204099C02)
[YP1498K]
TP
AMOS LOW KIM FATT
Aug 28 2019 3:00PM
[-]
First Autoworks Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			View	View in Browser
Photos/Images										
3 per page										
No	Finalized On	NTUC Income Insurance Co-operative Ltd (HQ)	Thumbnail			Print				
1	28/08/19 23:50	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>					
2	28/08/19 23:50	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>					
3	28/08/19 23:50	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>					
4	28/08/19 23:50	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>					
5	28/08/19 23:50	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>					
6	28/08/19 23:50	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>					
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail			Print				
1	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
2	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
3	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
4	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
5	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
6	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
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19	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
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30	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
31	10/01/20 11:22	General View		Load JPG	<input checked="" type="checkbox"/>					
32	10/01/20 11:22	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>					
33	10/01/20 11:22	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>					
34	10/01/20 11:22	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>					

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	NTUC Income Insurance Co-operative Ltd (HQ)	Thumbnail	Print
35	10/01/20 11:22	Reinspection Photo		Load JPG <input checked="" type="checkbox"/>
36	10/01/20 11:22	Reinspection Photo		Load JPG <input checked="" type="checkbox"/>
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38	10/01/20 11:22	Reinspection Photo		Load JPG <input checked="" type="checkbox"/>
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42	10/01/20 11:22	Reinspection Photo		Load JPG <input checked="" type="checkbox"/>
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44	10/01/20 11:22	Reinspection Photo		Load JPG <input checked="" type="checkbox"/>

Documentation			1 per page	<input checked="" type="checkbox"/>
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1	28/08/19 23:49	Sketch Plan <small>[Linked Accident Report Documents]</small>		Load JPG <input checked="" type="checkbox"/>
2	28/08/19 23:49	Sketch Plan #2 <small>[Linked Accident Report Documents]</small>		Load JPG <input checked="" type="checkbox"/>

Linked Accident Report Documents

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	NTUC Income Insurance Co-operative Ltd (HQ)	Thumbnail	Print
1	28/08/19 23:52	Accident Statement		Load HTM <input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	NTUC Income Insurance Co-operative Ltd (HQ)	Thumbnail	Print
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2	28/08/19 23:50	Accident Photo		Load JPG <input checked="" type="checkbox"/>
3	28/08/19 23:50	Accident Photo		Load JPG <input checked="" type="checkbox"/>
4	28/08/19 23:50	Accident Photo		Load JPG <input checked="" type="checkbox"/>
5	28/08/19 23:50	Accident Photo		Load JPG <input checked="" type="checkbox"/>
6	28/08/19 23:50	Accident Photo		Load JPG <input checked="" type="checkbox"/>

Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	NTUC Income Insurance Co-operative Ltd (HQ)	Thumbnail	Print
1	28/08/19 23:49	Sketch Plan		Load JPG <input checked="" type="checkbox"/>
2	28/08/19 23:49	Sketch Plan #2		Load JPG <input checked="" type="checkbox"/>

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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/CT119015567/ATD3Q2

Date: 14/01/2020

REFERENCE

Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. Policy No: DMCVSN16068119033
 Claimant Vehicle No : SCK8400H Insured Vehicle No : YP1498K
 Date of Loss: 28/08/2019 Nature of Claim: TP Claim No: SNM19D204099C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SCK8400H
 Make & Model: OPEL ASTRA, 999cc HB (A) Engine No: B1162457GT2X0386
 Reg. Date: 04/01/2017 (Man. Year: 2016) Chassis No: W0LBE6EA3HG016287
 Colour: Green Odometer: 57106 km
 Engine Capacity: 999 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 225/45 R17 Rear Tyre Size: 225/45 R17
 Front Left Side: Michelin 6 mm Rear Left Side: Michelin 6 mm
 Front Right Side: Michelin 6 mm Rear Right Side: Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	8,257.90	4,628.70	3,629.20	43.95
Miscellaneous Items	0.00	0.00	0.00	
Labour	4,740.00	3,080.00	1,660.00	35.02
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	12,997.90	7,708.70	5,289.20	40.69
+ GST 7.00/7.00% (S\$)	909.85	539.61	370.24	40.69
Nett Amount (S\$)	13,907.75	8,248.31	5,659.44	40.69

INSPECTION

Date of Assignment: 05/09/2019
 Date Inspected: 02/09/2019 Inspected At: First Autoworks Pte Ltd (HQ)
 23 KAKI BUKIT AVE 4 #04-01 SOUTH WING
 Singapore 415933
 Estimated Period of Repair: 5.0 days

Adjuster: ADRIAN LING

Manager: DENISE TAY KWEE 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.

REPAIR DETAILS

Reference	
Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 13 Jan 2020)
Parts: 144	OPEL ASTRA 999cc HB (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SCK8400H)
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BONNET	Repair	1,880.00 FL	*- FL
2	1		*FRT BUMPER	Torn	1,500.00 FL	*1,500.00 FL
3	1		*FRT BUMPER SIDE RETAINER RH ,GUIDE	Damaged	60.00 FL	*60.00 FL
4	1		*FRT BUMPER SIDE BRACKET RH	Damaged	58.00 FL	*58.00 FL
5	1		*FRT BUMPER TOW COVER	Not Necessary	40.00 FL	*- FL
6	1		*SET FRT BUMPER CLIP RIVET	Necessary	40.00 FL	*40.00 FL
7	1		*RH HEADLAMP	Cut	820.00 FL	*820.00 FL
8	1		*FRT FENDER RH	Dented	740.00 FL	*740.00 FL
9	1		*FRT UPPER GRILLE	Cracked	420.00 FL	*420.00 FL
10	1		*FRT LOWER GRILLE	Deformed	210.00 FL	*210.00 FL
11	1		*FRT EMBLEM	Necessary	120.00 FL	*120.00 FL
12	1		*FRT RH FOG LAMP	Cracked	320.00 FL	*320.00 FL
13	1		*FRT RH FOG LAMP COVER	Missing	110.00 FL	*110.00 FL
14	4		*FRT BUMPER PARKING SENSOR	Not Necessary	420.00 FL	*- FL
15	4		*FRT BUMPER PARKING SENSOR SEAL	Not Necessary	40.00 FL	*- FL
16	1		*FRT BUMPER PARKING SENSOR WIRE HARNESS	Not Necessary	618.00 FL	*- FL
17	1		*FRT FENDER INNERSHIELD RH	Not Necessary	180.00 FL	*- FL
18	1		*FRT ENGINE UNDER DUST COVER RH	Not Necessary	80.00 FL	*- FL
19	1		*FRT BUMPER UNDER DUST COVER	Not Necessary	190.00 FL	*- FL
20	1		*RH WING MIRROR COVER	Cut	720.00 FL	*180.00 FL
21	1		*FRT BUZZER	Damaged	210.00 FL	*210.00 FL
22	1		*FRT BUZZER BRACKET	Bent	95.00 FL	*95.00 FL
23	1		*FRT BUMPER ABSORBER	Cracked	170.00 FL	*170.00 FL
24	1		*FRT BUMPER SUBFRAME BRACKET	Bent	90.00 FL	*90.00 FL
25	1		*FRT NUMBER PLATE	Not Necessary	40.00 FS	*- FS

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

Sub Total (\$\$)	9,171.00	5,143.00
- List Item Discount on L Items 10.00/10.00% (\$\$)	913.10	514.30
Total Parts (\$\$)	8,257.90	4,628.70

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO DISMANTLE /RENEW THE ACCIDENT DAMAGED PORTION ,TO PANEL BEATING ,RESHAPE ,STRAIGHTEN ,ORIENTATE AND ALIGN REPAIR /REPLACEMENT PARTS	New	2,800.00	1,300.00
2	CARRY OUT SPRAY PAINTING ON ACCIDENT AFFECTED AREA.(FRT BUMPER ,LHF FENDER)	New	1,850.00	1,750.00
3	TO DISCONNECT WIRE HARNESS OF ELECTRICAL COMPONENT TO FACILITATE REPAIRS ,RECONNECT AND CHECK ELECTRICAL FUNCTION AFTER REPAIR	New	40.00	30.00
4	TO CONDUCT 4 WHEEL ALIGNMENT	New	50.00	0.00
Gross Labour Cost (S\$)			4,740.00	3,080.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >