| Estimated Cost Bill to: OD ATP WS / TP RES / OD RES / EVA / INV / MV / CS To Inspect Vehicle No: Skw 65601 1 at Workshop m/s AF motor work z of 6 6 korks Dutil Ave C Arc (a B Policy No: DMCXSN30S4961803) Claim No: Si Sum instruct: Excess: Make of Veh: (Client's Record) CA / REV / REP. / REV 24 HRS Date/Time: Action/instruction (X) Estimate | Date/Time: 28/8/2019. Sured: 6BD 8482V Tel: 638/49931 M19/202798602 D.O.A. 16-6-19 H.O.D. Endorsement: Vehicle IN JOUT |
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| OD TP WS TP RES / OD RES / EVA / INV / MV / CS To Inspect Vehicle No: Skw 65601 1 Int Workshop m/s AF Motorwart Z of 66 kork Duti 1 Ave C Arc (60 B) Policy No: DMCVS N30S 49618033 Claim No: Sl Sum Instruct: Excess: Make of Veh: (Chent's Record) CA / REV / REP. / REV 24 HRS Date/Time: Action/lestruction (X) Estimate Sky 6503 - X | D.O.A. 16.6 19 H.O.D. Endorsement: Vehicle IN JOUT |
| To Inspect Vehicle No: Skw 65603 Int Workshop m/s AF Motorwork Z of 6 6 korks Duttil Ave C Arx (& B Policy No: DMCVSN30S4961803) Claim No: Si Sum instruct: Excess: Make of Veh: (Client's Record) CA / REV / REP. / REV 24 HRS Date/Time: Action/Instruction (X) Estimate Skw 65603 - X | D.O.A. 16.6 19 H.O.D. Endorsement: Vehicle IN JOUT |
| The Workship m/s AF Motorwork 2 of 66 korks Duttil Ave C Are (20 B) Policy No: DMCYSN30S49618033 Claim No: SI Sum instruct Excess: Make of Veh: (Client's Record) CA / REV / REP. / REV 24 HRS Date/Time: Action/Instruction (X) Estimate Sty (4507) - X | D.O.A. 16-6-19 H.O.D. Endorsement: Vehicle IN JOUT |
| Policy No: DMCYSN30SH9618033 . Claim No: SI Sum instruct: Excess: Make of Veh: (Client's Record) CA / REV / REP. / REV 24 HRS Date/Time: Action/Instruction (X) Estimate Sky (4507) - X | D.O.A. 16.6 19 H.O.D. Endorrement: Vehicle IN JOUT |
| Sum insured: Excess: Make of Veh: (Chent's Record) CA / REV / REP. / REV 24 HRS Date/Time: T 6 19 1211 p m Person Contacted: Jin 9un Date/Time: Action/instruction (X) Estimate Sty 64003 - X | D.O.A. 16.6 19 H.O.D. Endorrement: Vehicle IN JOUT |
| Make of Veh: (Chent's Record) CA / REV / REP. / REV 24 HRS Date/Time: 7 6.19 12/19 m Person Contacted: Jim Jun Date/Time: Action/Instruction (X) Estimate Sty 64003 - X | Vehicle IN OUT |
| CA / REV / REP. / REV 24 HRS Date/Time: 16.19 121:pm Person Contacted: Jim Jun Date/Time: Action/Instruction (X) Estimate | Vehicle IN OUT |
| Date/Time: Action/Instruction (X) Estimate Sty 6-503- | Vehicle IN JOUT |
| | SIAP O MOUASPORTIDA LINOV |
| 6Bh 34316-4 | |
| | (see email) |
| Dismantle: 26/6/2019. | |
| After repair: 28/6/2019 | monto |
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| AYPUNG GOLD. REF: CTi | |
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| | SSIGNMENT |
| imated Cost: OF WS / TP RES / OD RES / EVA / INV / MV Inspect Vehicle No Workshop m/s AF M- 4cr Sured GRX 37550 alicy No. aims No aim Insured: Excess: (Client's Record) lake of Veh: | Veh No. Skubb605 Yr Regn: 11 Nov 2-15 Type: NCa/M.Cycle Bus Van Lorry Taxi Prime Mover Truck Trailer or Make Tyota Camry 2.5 c.c 2494 Colour Cyay A/C Insured Std NI NA Sp. Reading 82 5 T/Radio: Insured Std NI NA Eng/No: C/No: Mk 053 Ak 500-40 607 4 Gen. Cond: God Fair Poor Burnt Steering: Inoger Jammed Leaked Burnt or Brake: Inoger Jammed Leaked Burnt or Mod : Nil S/Rim STD Akim or Tyre Size: F: 215 55 R 17 R: 11 D/S BS DUN EXNOVA GY FS LIZA MIC OHTSU PIR SUMI TOYO YOKE or |
| DAC Accident Rport: Consistent? : Yes or No SIA / PR Seen: Consistent? : Yes or No SIA / PR Seen: Consistent? : Yes or No SIA / PR Seen: Yes or No SIA / PR Seen: Yes or No SIA / PR Seen: Yes or No Ways Res.: Yes or No Vehicle: IN / | Front Rear R/Bal 6 mm L/Bal 6 mm L/Bal 6 mm D.O.A. D.O.I. 25 - 06 - 19 Survey held at Des. of Damages : Fity Rear O/S N/S U/C Rooftop or U/OUT |
| Date / Time Action / Instruction \$ \$2000 | The U/C / Chassis frame / Body Structure affected due to collision. |
| Dete/Time, File Pass to? : Preli. Report 1) : Final Report Cate/Time, File Return to? Add | Days Of Repair: 4 Resurvey No. of Trip: 3 Survey Fee. Transportation d Fee: Site Insp (\$)S+RSSI |
| | : Interview (\$) Photos |
| Report Format : PCS | Tech Invs (\$) Others |

TOTAL

Weakend (\$

Report Format:

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

PRS

Ni itha (LKK Auto)

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

Sent: Wednesday, 28 August 2019 6:53 PM

To: assignments; SUR
Cc: Irene Tay; Alfred Toh

Subject: RE: ACCIDENT INVOLVING GBD8482U & SKW6560JK ON 16 JUNE 2019

(SNM19D202798C02/2(thp)

Attachments: REPORT FROM PROMINENT APPRAISER SERVICES PTE LTD.pdf

LKK REF: CC3/CTI19011388/GCD3S2 CTPIS REF: SNM19D202798C02/2(thp)

ATTN: MR XING GUO AING/MS CELINE FONG

Dear Sirs

We refer to your pre-repair report (without estimates provided by the third party workshop).

Please assist to issue a <u>RE-INSPECTION report</u> (not paper survey) based on M/s Prominent Appraiser Services Pte Ltd report and let us have your findings and bill at your earliest convenience.

Aside to Irene, please assist to keep track on the matter.

Best Regards

Alfred Toh Senior Executive Claims Department China Taiping Insurance (Singapore) Pte. Ltd. 3 Anson Road #XX-00 Springleaf Tower Singapore 079909

DID: (65) 6389 6183 FAX: (65) 6224 7478

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

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From: Claims Dept of CTI

Sent: Wednesday, 28 August, 2019 5:07 PM

To: jackieng1973@gmail.com

Cc: Vitesse Insurance <sales@vitesseinsurance.com>; Irene Tay <irene.tay@sg.cntaiping.com>; Alfred Toh

<alfred.toh@sg.cntaiping.com>; Sally Chua <sally.chua@sg.cntaiping.com>; Chai Chui Ai

<chuiai.chai@sg.cntaiping.com>

Subject: ACCIDENT INVOLVING GBD8482U & SKW6560JK ON 16 JUNE 2019 (SNM19D202798C02/2(thp)

Policy No: DMCVSN3054961802 From 17 June 2018 to 16 June 2019

Date of Accident: 16 June 2019 11.10 hours

Vehicle No: GBD8482U

Claim Ref: SNM19D202798C02/2(thp)

M/s SP Campers Pte Ltd Attn: Mr Jackie Ng Chee Kang

Hi Mr Jackie Ng

We refer to the telephone conversation you had with our Irene Tay yesterday and our telephone conversation a while ago pertaining to the above matter.

Please file the SAS (accident) report at any of China TaiPing Insurance's Authorized Workshop (Reporting Centre) IMMEDIATELY to enable us to handle the incoming claim/s against your Motor Insurance Policy.

Aside to Irene, please assist to keep track on the matter.

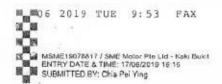
Best Regards

Alfred Toh Senior Executive Claims Department China Taiping Insurance (Singapore) Pte. Ltd. 3 Anson Road #XX-00 Springleaf Tower Singapore 079909 DID: (65) 6389 6183

DID: (65) 6389 6183 FAX: (65) 6224 7478

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

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to 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

| atoresaid, | |
|-----------------------------|---|
| | ACCIDENT STATEMENT |
| Date Of Report | 17/06/2019 16:16 |
| Date Of Accident | 16/06/2019 11:10 |
| Exact Location Of Accident | BLK 404B FERNVALE LANE LOADING/ UNLOADING BAY |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SKW6560J |
| Insured/Policyholder | |
| Name Of Registered Owner | TAY LENG WHATT |
| NRIC No | S0488993B |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96654252 |
| Alternative Phone No | OFFICE-96654252 |
| Vehicle Particulars | |
| Manufacturer | TOYOTA |
| Model | CAMRY-2.5 (A) |

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken THIRD PARTY PRIVATE CAR Vehicle Category

Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

2100436690-03 Policy Number

Cover Note Number

Driver

TAY LENG WHATT Name of Driver

NRIC No S0488993B Date Of Birth 18/12/1951 INDOOR Occupation Date Of Driving Pass 23/06/1970

48 YEARS AND 11 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-96654252 Mobile Number

Fax Number

OFFICE-96654252 Contact Number

EMail Address NOEMAIL Address

BLK 301 TAMPINES ST 32 #08-14

Postcode

520301

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) Passenger 1

2

NAME:

: TAY LEE YEN

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TAMPINES NORTH NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 461 TAMPINES STREET 44 #01-56, POSTCODE: 520461,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-7818999 - FAX NO: 67838603

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT: T/20190616/2058.

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

GBD8482U

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

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

TAY LEE YEN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SKW6560J

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 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 Oriver.
- 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
- 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
- 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/ere permitted to collect, use, ductors 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 us 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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary nvestigations relating to the claims;
 - (ii) Investigating the accident and/or my claims;
 - (ii) 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, discinse and/or process my Personal information for one or more of the above Purposes; and
- 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 dains.
- (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: 17/6/19 11:55am

Oriver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/TIN No.:

DANNE SPACESTAND OF

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Sketch Plan #2 Pg. 1

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Sketch Plan #3 Pg. 1





Report No. T/20190616/2058

1 of 4

Police Station Of Origin: Tampines North NPP 461 Tampines Street 44 #01-56 SINGAPORE 520461

Tel No: 1800-7818999

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: | Vide Report No.: | Station Diary No. |
|------------------------|------------------|-------------------|
| 16/06/2019 15:20 | | 14 |
| | | |

| 16/06/2019 15:20 | | | | 14 | | |
|--|--------------|------------------------------|---|---------------------------------------|--|--|
| Informa | nt's Partice | ilars | | 数30mm(1995年1月1日)。 100mm(1995年1月1日) | | |
| Name of Informant: TAY LENG WHATT | | | Address: APT BLK 301 TAMPINES STREET 32 #08-14 SINGAPORE 520301 | | | |
| ID Type / ID No.: NRIC NO / S0488993B | | | Contact No.: Home/Office: | Mobile: 96654252 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | | |
| Sex: Male | Age: 67 | Date of Birth: 18/12/1951 | Type of Informant: Driver | 90x | | |
| Race: Chinese | | | Language: English | Institution / School Name: | | |
| Occupation: Self-employed | | | Driving Licence Informati Class: 2B,2A,2,3 | on: Date of Expiry: | | |

| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 16/06/2019 11:1 | 0 | Type of Location Service Road |
|----------------------------------|------------------------------|------------------------------------|--|------------|----------------------------------|
| FERNVALE L Blk 404B Fer Weather: | ANE nvale Lane loading/ui | nloading bay Road Surface: | - 10 Mari | Road | i Speed Limit: |
| Clear | H | Dry | | | |
| - m | 77.78 | Traffic Control: Not Controlled | | 100005-000 | ic Volume: raffic |
| Traffic Flow: | | 1101 College | | | |

| Vehicle No. | Type | Make 1/4 | Model | Color | Condition. | No of Passenge |
|-------------|------|-----------|--|-------|------------|----------------|
| GBD8482U | Van | SSANGYONG | ACTYON SPORTS D/CAB 2.0 5AT ABS D/AB 2WD | Brown | | 0 |
| SKW6560J | Car | TOYOTA | CAMRY 2.5 AUTO | Grey | | 0 - |

Sketch Plan #4 Pg. 1





2 of 4 Report No. T/20190616/2058

Police Station Of Origin: Tampines North NPP 461 Tampines Street 44 #01-56 SINGAPORE 520461

Tel No: 1800-7818999

CONTINUATION OF REPORT

| | e insurance | ly a | e e e e e e e e e e e e e e e e e e e | AG E | Hactivid's | Expiry Date | | |
|--|--|---|--|----------|---------------------------------------|-------------|----------|--|
| Venide Not Ins SKW6560J AIC LTI | orance Company S ASIA PACIFIC INSURANCE F D. | | 6690-03 | | 1/11/2018 | 10/11/2019 | | |
| Details of Perso | ilinvolved | | 1000344 | Market N | | | | |
| Any Pedestrian Ir No. of Pedestrian | | Use of Per | destrian (| Crossi | na: NA | 4 | | |
| Driver | The second secon | | | | | STANCTORY. | | |
| Name | JACKIE NG CHEE KANG | | ID No. | | NIL | | | |
| Related Vehicle | GBD8482U (Van) | | Contac | t No. | 96530343 | #5 #E | | |
| Hospital/Clinic | NIL | | Class of Driving Licence Expiry | 8 | Class: NIL Date of Exp | piry: NIL | | |
| Date Treatment | NIL | Date Disc | | | | | | |
| No. of Days gran | ted Medical Leave NIL | Degree o | f Injury | NIL . | | | | |
| Driver Page 9 | "我们是我们是是我们的是我们的 | | | | 经有限产业 分别 | 明確的課題 | | |
| Name | TAY LENG WHATT | Ĭ. | ID No. | * | S0488993I | 3 | | |
| Related Vehicle | SKW6560J (Car) | | Contac | t No. | 96654252 | And shepped | | |
| Hospital/Clinic, | NIL · | 6 23 A | Class of Driving Licence Expiry | l e&: | Class: 2B, Date of Ex | | | |
| Date Treatment | NIL | Date Dis | charge | NIL | | | | |
| No of Dave gran | nted Medical Leave NIL | ,Degree o | | | / 6/3 (\$600) and (\$600) and (\$600) | | | |
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| Name | TAY LEE YEN | | ID No. | 12 | \$8735300 | Α | | |
| Related Vehicle | elated Vehicle SKW6560J (Car) | | ed Vehicle SKW6560J (Car) | | Contact No. | | 96876203 | |
| Hospital/Clinic | SENGKANG GENERAL HOS | SPITAL PTE. | Class Driving Licent Expiry | g e & | Class: NIL Date of Ex | | | |
| Date Treatment | 16/06/2019 | Date Dis | charge | | 6/2019 | | | |
| | 10/00/2015 | | of Injury | | | | | |

02

No. of Days granted Medical Leave

Degree of Injury

Sketch Plan #5 Pg. 1





Police Station Of Origin: Tampines North NPP 461 Tampines Street 44 #01-56 SINGAPORE 520461 3 of 4 Report No. T/20190616/2058

Tel No: 1800-7818999

CONTINUATION OF REPORT

Brief Detalls.

On 16/06/2019 at about 1110hrs, I wanted to drop-off my daughter namely Tay Lee Yen at Blk 4048 Fernvale Lane. I parked my car (SKW6560J) at the loading/unloading bay as she wanted to unload somethings from the car boot. I alighted from my car to help unload the stuffs from the car boot.

Out of sudden, there was a vehicle (GBB8482U) reversing towards my car and hit on the front bumper of my car which resulted to damage. The strong impact also resulted my car to move backwards and hit on my daughter's right hand which caused internal injury. I was away when the accident occurred hence I was not injured.

I have in-car CCTV installed which captured the accident footage. I exchanged particulars with the driver.

I brought my daughter to the Sengkang General Hospital and she was given 2 days of outpatient sick leave from 16/06/2019 to 17/06/2019. The doctor informed she is required to go for the follow-up consultation.

Sketch Plan #6 Pg. 1





T/20190616/2058

Report No. T/20190616/2058

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Police Station Of Origin:

Tampines North NPP

461 Tampines Street 44 #01-56 SINGAPORE

520461 Tel No: 1800-7818999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Informant: Signature Of Officer Recording The Report: G/ Sgt 3 MUHAMMAD ISA BIN MD RASHID Date/Time: Signature Of Interpreter: 16/06/2019 15:20 Not applicable Officer In Charge Of Case: Classification Of Case: TP / GIA / SINGAPORE POLICE FORCE Staff Sgt WONG SIEU LUI Contact No.: 65476151 Authentication Stamp NP168 SIGNATURE



PROMINENT APPRAISER SERVICES PTE LTD Qualified Loss Adjusters And Motor Appraisers

Correspondence Address: 1 Simei 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/0520619

Date of Report

: 19/07/2019

To: Mr Tay Leng Whatt C/o. 66 Kaki Bukit Ave 6 Date of Assignment

: 25/06/2019

Report requested by

: Mr Tay Leng Whatt

ARK @ KB Singapore 417895 Date of Accident

: 16/06/2019

Date of Inspection

: 25/06/2019

Claim No.

: Third Party Claim

Policy No.

PARTICULARS OF DAMAGED VEHICLE

Vehicle Registration No.

: SKW6560J

Engine Capacity (cc) : 2494cc

Make & Model

: Toyota Camry

Mileage (km)

: 82151km Chassis / Frame No. : MR053AK5004010074

Date of Registration Colour

: 11/11/2015 : Met. Grey

Engine No.

: 2ARU271124

TYRE CONDITION

Front LH

: 7 mm

Front RH

: 7 mm

Make

: Yokohama

Make

: Yokohama

Rear LH

: 7 mm

Rear RH

: 7 mm

Make

: Yokohama

Make

: Yokohama

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

PLACE OF REPAIRER OFFICE/WORKSHOP

Location

M/s. AF Motorworkz Pte Ltd

66, Kaki Bukit Ave 6, ARK @ KB, Singapore 417895

ASSESSMENT

Repairer's Estimate

: \$ 10,335.88

Revised Amount

: \$ 9,230.13

Less Excess

Recommended Reserve : \$

Apparent Engine Modification

: \$

7,380.00

(Lump Sum)

Estimated Normal Period of Repairs

: 5 Working Days

Disclaimer: This report is intended for the exclusive use of the addresses 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,

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: SKW6560J

Report No.: PAS/TP/0520619

GENERAL REMARKS

WITHOUT PREJUDICE

THE ASSIGNMENT

The survey was conducted at M/s. AF Motorworkz Pte Ltd, 66, Kaki Bukit Ave 6, ARK @ KB, Singapore 417895.

(Subsequent inspections have been conducted)

POINT OF IMPACT

At the front portion.

DAMAGES

The bonnet, front bumper, front support panel, front chassis members, front fenders, headlamps, front grilles, 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 \$9,230.13.

CONCLUSION

The repairer has agreed to undertake the repairs at a lump sum of SGD \$7,380.00.

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



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PROMINENT APPRAISER SERVICES PTELTD Qualified Loss Adjusters And Motor Appraisers 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.: SKW6560J

Report No.: PAS/TP/0520619

APPRAISEMENT SCHEDULE

| S | /No. | Qty | Parts Descriptions | Condition | | | 2000 | airer's imate (S\$) | | our nent (S\$) |
|---|------------------|-----------------------|--|---|------|------------------------------|----------------|---|------------------------------|---|
| | 1 2 3 4 | 1 pc | Bonnet moulding Headlamp R/L Frt grille assy | Dented/Distorted Broken/Dislodged Cracked/Broken Dented/Broken | \$ 2 | 2,932.60 | \$ \$ \$ | 1,520.30 283.70 5,865.20 496.80 71.60 | 1267.48 168.88 1287.68 | 1,520.30 283.70 5,865.20 496.80 72.60 |
| | 5 6 7 8 | 3.45 3.35 3.55 | Frt grille emblem Frt bumper Frt bumper lower grille assy Frt bumper clip | Necessary Dented Dented/Cracked Necessary | \$ | 3.20 | \$ \$ \$ | 589.70 725.60 19.20 | 57.6 \$ | 589.70 725.60 19.20 |
| (| 9 10 11 | 2 pcs 1 pc 1 pc | Frt bumper retainer R/L Frt bumper absorber Frt bumper reinforcement | Cracked/Necessary Dented/Cracked Dented | \$ | 58.70 | \$ \$ \$ | 117.40 100.80 393.90 | \$ \$ \$ | 117.40 100.80 ×393.90 5V |
| | 12 13 14 | 1 pc | Frt support assy Frt radiator side deflector Frt fender LH | Dented/Repair LH Cracked Dented/Repair | s | 109.30 | \$ | 0.500 | | 109.30 / no. 2 & 3) |
| | 15 16 | 1 pc 2 pcs | Frt support assy Frt chassis member R/L | Dented/Repair Dented/Repair | | | \$ | 1.00 | | no. 2 & 3) no. 2 & 3) |
| | | | | Lis | | Discount : 25% ub-Total : | 9 T) | 2,758.63 8,275.88 | 25%_\$ | 2,573.38 |

Parts Total :

\$ 8,275.88

\$ 7,720.13

794.62 25%: 5845.96

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PROMINENT APPRAISER SERVICES PTE LTD Qualified Loss Adjusters And Motor Appraisers

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.: SKW6560J | | Report No | .: PAS/T | P/0520619 |
|--|-------|-------------------------|-------------|------------------|
| S/No. Labour Descriptions | 0.632 | oairer's imate (S\$) | Transcond V | ur nent (S\$) |
| 1 To check electrical system and calibrate/focus headlamp. | \$ | 60.00 | S | 50.00 30 |
| 2 To straighten, repair, realign on affected area and replace damaged parts. | S | 1,000.00 | \$ | 660:60 60 |
| 3 To spray painting, blending on affected and adjacent area. | S | 1,000.00 | S | 800,00 / |
| Labour Total : | S | 2,060.00 | \$ | 1,510.00 |
| Total (Parts & Labour) : | \$ | 10,335.88 | \$ | 9,230.13 |

For Lump Sum Repairs

(

The final adjusted Lump Sum contract amount is \$

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

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

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 has 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.

7275.96



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

| LIS. | | Affiliated to Federation Intern | ationale Des Experts En Autom | obile |
|------|--------------------------------|---|-------------------------------|--------------------|
| CHIN | A TAIPING INSU | RANCE (S) PTE LTD | Ref : CS3/CTI190113 | 388/Gtd3s2-1 |
| | SON ROAD #16-0 NGLEAF TOWER | 0 SINGAPORE 079909 | Date: 17-09-2019 Code: CTI | |
| 1. | Pol | icy Particulars :- THIRD P | ARTY CLAIM (RESURVE | Y INSPECTION) |
| | Insured Veh. | GBD 8482U | Veh. Inspected | SKW 6560J |
| | Policy No. | DMCVSN30549618022 | Coverage (\$) | 0.00 |
| | Claim No. | SNM19D202798C02 | Excess (\$) | 0.00 |
| | Assign From | ALFRED TOH | Assign Date | 28/08/2019 |
| 2. | | Vehicle Pa | articulars & Condition | |
| | Make & Model | TOYOTA CAMRY 2.5 | c.c | 2494 |
| | Engine No. | HIDDEN | Year of Reg. | 2015 |
| | Chassis No. | MR053AK5004010074 | Colour | GREY |
| | Odometer | 82151 | Steering | IN ORDER |
| | Brakes | IN ORDER | Modification | STANDARD ALLOY RIM |
| | General | GOOD | | |
| 3. | | Con | ditions of Tyres | |
| | | Size | Make | Balance |
| | R/H Front Tyre | 215/55 R17 | YOKOHAMA | 6 mm |
| | L/H Front Tyre | 215/55 R17 | YOKOHAMA | 6 mm |
| | R/H Rear Tyre | 215/55 R17 | YOKOHAMA | 6 mm |
| | L/H Rear Tyre | 215/55 R17 | YOKOHAMA | 6 mm |
| 4. | | Descr | iption of Damages | |
| | | D COMPLETED ITS REPAIR I ON SEE DETAILS. | WORKS. | |
| 5. | | Gen | eral Information | |
| | Accident Date | 16/06/2019 | Inspection Date | 25/06/2019 |
| | Survey held at | AF MOTORWORKZ PTE LT | D | |
| | | 66 KAKI BUKIT AVENUE 6 SINGAPORE 417895 | | |
| 5a. | | SEE LEVEL STORY | Remarks | |
| | | ON WAS CONDUCTED ON A" CE TO YOUR INSTRUCTIONS | | |
| 5b. | | Estim | ate Days of Repair | |
| | ESTIMATED NOR | MAL PERIOD FOR REPAIR: | 5 Working Day | ys |



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

TEL: 6256 3561 FAX: 6256 4315

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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKW 6560J

| Qty | Description of Parts | Condition | Estimate By Workshop (\$)) | Our Adjusted (\$) |
|-----|--|------------------------|-------------------------------|----------------------|
| | REPLACEMENT OF PARTS | | | |
| 1 | BONNET | REPLACED | 1,520.30 | 1,267.40 |
| 1 | BONNET MOULDING | REPLACED | 283.70 | 168.80 |
| 2 | HEADLAMP R/L @ \$2932.60 | REPLACED | 5,865.20 | 4,887.60 |
| 1 | FRT GRILLE ASSY | REPLACED | 496.80 | 439.52 |
| 1 | FRT GRILLE EMBLEM | REPLACED | 71.60 | 59.60 |
| 1 | FRT BUMPER | REPLACED | 589.70 | 521.10 |
| 1 | FRT BUMPER LOWER GRILLE ASSY | REPLACED | 725.60 | 115.10 |
| 6 | FRT BUMPER CLIP @ \$3.20 | REPLACED | 19.20 | 19.20 |
| 2 | FRT BUMPER RETAINER R/L @ \$58.70 | REPLACED | 117.40 | 117.40 |
| 1 | FRT BUMPER ABSORBER | REPLACED | 100.80 | 100.80 |
| 1 | FRT BUMPER REINFORCEMENT | SERVICEABLE | 393.90 | 3 |
| 1 | FRT SUPPORT ASSY | REPAIRED SEE LABOUR | 631.70 | É |
| 2 | FRT RADIATOR SIDE DEFLECTOR @ \$109.30 | N/S REPLACED | 218.60 | 98.10 |
| 1 | FRT FENDER LH (NPA) | REPAIRED SEE LABOUR | | a |
| 1 | FRT SUPPORT ASSY (NPA) | REPAIRED SEE LABOUR | - | 3 |
| 2 | FRT CHASSIS MEMBER R/L (NPA) | REPAIRED SEE LABOUR | 70- | Di Di |
| | LESS 25% DISCOUNT | | -2,758.62 | -1,948.66 |
| | | | 8,275.88 | 5,845.96 |
| | LABOUR | | | |
| | TO CHECK ELECTRICAL SYSTEM AND CALIBRATE / FOCUS HEADLAMP. | | 60.00 | 30.00 |
| | TO STRAIGHTEN, REPAIR, REALIGN, ON AFFECTED AREA AND REPLACE DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF FRT SUPPORT ASSY, FRT FENDER LH AND FRT CHASSIS MEMBER R/L. | | 1,000.00 | 600.00 |
| | TO SPRAY PAINTING, BLENDING ON AFFECTED AND ADJACENT AREA. | | 1,000.00 | 800.00 |
| | | | 2,060.00 | 1,430.00 |
| | GRAND TOTAL | | 10,335.88 | 7,275.96 |

Report Ref No. CS3/CTI19011388/Gtd3s2-1



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| RECOMMENDED COST OF LUMP SUM REPAIRS | 5,800.00 |
|--------------------------------------|----------|
| (TO ITS PRE-ACCIDENT CONDITION) | |

Report Ref No. CS3/CTI19011388/Gtd3s2-1



XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

St. S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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