

22/03/2002

ASS. REC. BY:

REF: CS/CT219015785/T15f3n2

Special Instruction:

Survivor: Tunfikh

ASSIGNMENT (Office)

From (Person): Iron Tay Hui Ping of CTIDate/Time: 6.9.19 9.04 a.m

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No:

SJS 8723B

Insured:

SJS 8950J

at Workshop m/s

Auto Wheels

Tel:

9768 4247of NO 1 Bukit Babor Crescent, #02-40

Policy No:

Claim No: SWM19B204163C02

Sum Insured:

Excess:

Make of Veh:

D.O.A. 2.9.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

"up"

H.O.D. Endorsement:

Date/Time: 6.9.19 10.15 a.m

Person Contacted:

Louis

Vehicle IN/OUT

Date/Time

Action/Instruction (☒) EstimateSJS 8950J :XSJS 8723B :X

Tanpik

CT 1

CoE 2029 Apr 1.

Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To inspect Vehicle Ho: _____
at Myon Shop on: _____
of: _____
Insured: _____
Policy Ho: _____
Claim Ho: _____
Sum Insured: _____ Excess: _____
(Client's Record)
Make of Veh: _____

N/S	O/S

(Policy Condition)
Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: _____
IDAC Accident Report: _____ Consistent? : Yes or No
GLA / 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

Sub No: SS 87235 Date: 2009 Sep
Type: M/Cat / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or: Allion
Make: Toyota Axi No: 1496
Colour: Black Insured / Std / NI / NA
Sp Reading: 189 282 T/Radio: Insured / Std / NI / NA
Eng No: _____
C/No: NZT 260303 6708
Gen Cond: Good / Fair / Poor / Burnt
Steering: Inorder / Jammed / Leaked / Burnt or
Brake: Inorder / Jammed / Leaked / Burnt or
Modi: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 195/60R15
R: 2 1/2
BS / DUN / EXNOVA / GY / FS / LIZA / MIG / OHTSU / PIR / SUMI /
TOYO / YOKO or: Goodrive
Front: C mm Rear: 6 mm
R/Bal: 6 mm L/Bal: 6 mm
D.O.A: 24/9/19
Survey held at: Auto wheels Bkt B7h
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Tw 6/5 / u/c
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time: 10/10/19 Action / Instruction: L/S \$3400, 6 days email to Loin's
(\$ 7,599.70 Red - 69%)

11/10/2019

RECEIVED 11 OCT 2019

Date/Time: File Pass to: 11/10/19
Type: Typ 4
Date/Time: File Return to: _____
☐ : Preli. Report
☒ : Final Report

Days Of Repair: 6
Resurvey No. of Trip: 1

Report Format: _____
Lump Sum: \$ 3,400/- L/S

Add Fee: ☐ Site Insp. \$
☐ Interview \$
☐ Transport \$
☐ Other \$

Survey Fee: _____
Transportation: _____
Other: _____

220

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	05 Sep 2019		06 Sep 2019 09:04 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS		[Created by insurer]							
Insured:									
Main Claimant:		VASRO RENTALS							
Vehicle Reg. No.:		SJS8723B	Date of Loss:	02/09/2019 13:00 - :59					
Claim Type:		TP / SNM19D204163C02	Policy/Cover Note No.:	DMPCSN30542418000					
Vehicle Reg. No. (Insured):		SJJ8950J	Policy No. (Claimant):						
		Excess:	S\$0.00						
Repairer:		Auto Wheels Motorworks Pte Ltd (HQ) No.1 Bukit Batok Crescent, #02-40 WCEGA PLAZA, 658064 Bukit Batok - Tel: 97684247							
Handling Insurer:		China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 17/09/2019]							
Adj Asg. Remarks:		PLEASE SURVEY AND REVERT							
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.									

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	03/09/2019 17:46
Date Of Accident	02/09/2019 13:30
Exact Location Of Accident	NEWTON CIRCUS ROUNDABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS8723B
Insured/Policyholder	
Name Of Registered Owner	VASRO RENTALS
Co Reg No	53367446L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-87795829

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALLION

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

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5110677583-01
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FIRDAUS BIN SELAMAT
NRIC No	S8737599D
Date Of Birth	09/11/1987
Occupation	INDOOR
Date Of Driving Pass	05/06/2018
Driving Experience	1 YEAR AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87795829
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address

BLK 106A CANBERRA ST #09-411

* Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - RENTAL

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? 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) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] ORCHARD NPC

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER ATTACHED ACCIDENT REPORT FROM THE DRIVER: POLICE REPORT NO. T/20190903/2084

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 SJJ8950J

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)

DETAILS OF INJURED PERSON 1

Name:	DRIVER
- Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SJS8723B
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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.



Handwritten signature

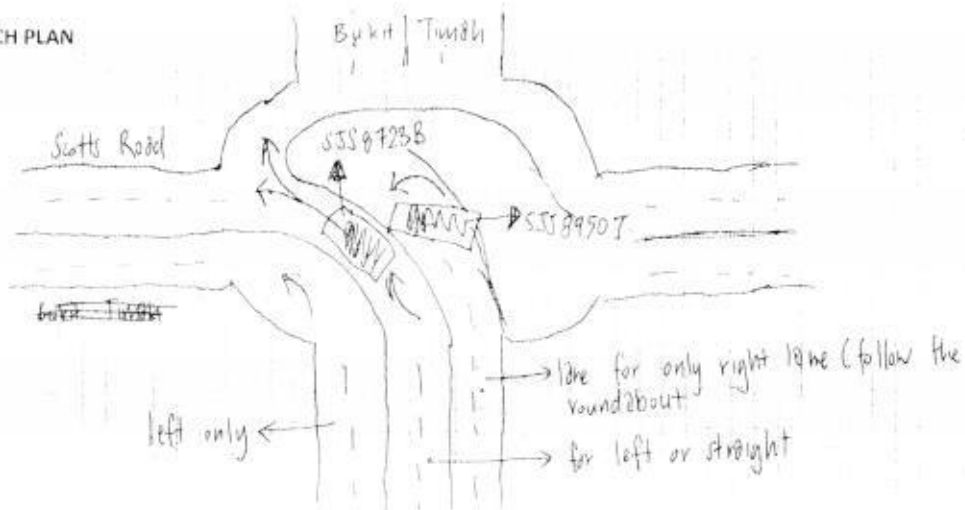
Policyholder's Signature:
Date & Time:

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

(GIA) REPORT DATOK (VAC)

Reporting Centre Personnel's Signature
Name:
NRIC/HN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Towards Bukit Timah

I'm in the ~~second~~ second lane to go straight Vehicle (SJS8950J) Porsche, ~~started~~ to come from nowhere out of sudden and unfortunately hit on my car on the right hand on the driver side, vehicle (SJS87238) I was shocked as it's really a hard bang and impact for me.

SJS87238
Toyota
Allian



SJS8450J
Porsche

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 Signature
Name
NRIC/FIN No.



SINGAPORE POLICE FORCE



T/20190903/2084

1 of 4

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No: T/20190903/2084

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/09/2019 14:54	Vide Report No.:	Station Diary No.: 94
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Informant's Particulars

Name of Informant: MUHAMMAD FIRDAUS BIN SELAMAT			Address: APT BLK 106A CANBERRA STREET #09-411 SINGAPORE 751106	
ID Type / ID No.: NRIC NO / S8737599D			Contact No.: Home/Office: Mobile: 87795829	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 31	Date of Birth: 09/11/1987	Type of Informant: Driver	
Race: Malay			Language: English	Institution / School Name:
Occupation: SELF-EMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/09/2019 13:30	Type of Location: Roundabout
Location: Along Road 1 NEWTON CIRCUS				
The roundabout				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJJ8950J	Car	PORSCHE	CAYENNE V6 E5 TIP	White	Slightly Damaged	0
SJS8723B	Car	TOYOTA	ALLION 1.5 A	Black	Seriously Damaged	2

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No. 1800-7359999

Report No. T/20190903/2084

CONTINUATION OF REPORT

Driver			
Name	Yeo Chew Guat, Lina	ID No.	S7832864I
Related Vehicle	SJJ8950J (Car)	Contact No.	90609733
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	MUHAMMAD FIRDAUS BIN SELAMAT	ID No.	S8737599D
Related Vehicle	SJS8723B (Car)	Contact No.	87795829
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	03/09/2019	Date Discharge	03/09/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

I am a Ryde driver for vehicle registration SJS8723B. On 02/09/2019 at about 1.30pm, I was driving along Clemenceau Avenue North together with my 2 passengers after picking one of them from Lucky Plaza. As I was driving along Clemenceau Avenue North heading out to the Newton Circus before proceeding to Bukit Timah and accident happened. At that point, one of them was sitting at the front passenger seat while another sat at the rear passenger seat.

Before the accident happened, I was on the 2nd lane from the left before heading out to the Newton Circus roundabout before proceeding to Bukit Timah Road. As I was at the roundabout, one vehicle registration SJJ8950J coming from my right hitting onto my right side door. The driver then had to reverse before I able to alight from my driver side door.

After which, the driver had reverse the vehicle I then alighted from my vehicle. We then assess the damages to our vehicle. Due to the accident, my vehicle driver side door and the front right side above the wheel were dent and scratched mark. While the other vehicle had a slight dent and broken left front light. After assessing the damages to our vehicle and taking picture, we then exchange particular. At that point, I do felt slight giddiness but didn't required immediate medical attention. After exchanging particulars, we both left as I required to send my passenger to their destination.

After sending them, I decided to go back to rest. I started to feel pain as such, I decided to proceed to Khoo Teck Puat Hospital located at 90 Yishun Central Singapore 768828. After seeking medical treatment, I was given 3 days MC. I wish to state that I have install in-built camera to my vehicle. I am lodging this report for insurance claiming and record purpose.



**SINGAPORE
POLICE FORCE**



T/20190903/2084

3 of 4

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No. T/20190903/2084

CONTINUATION OF REPORT



SINGAPORE
POLICE FORCE



T/20190903/2084

4 of 4

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No. 1800-7359999

Report No. T/20190903/2084

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 Officer Recording The Report:

E /

Sr Staff Sgt SITI AISYAH BINTI NANI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTI AHMAD

Contact No. 65486219

Signature Of Informant:

Date/Time:

03/09/2019 14:54

Classification Of Case:

Authentication Stamp

NP168

SIGNATURE

AUTOWHEELS

MOTORWORKS PTE LTD

NO 1 BUKIT BATOK CRESCENT #02-40

WCEGA PLAZA SINGAPORE 658064

ATTN: CHINA TAIPING INSURANCE

DATE: 4/9/2019

VEHICLE NO: SJS8723B

MODEL: TOYOTA ALLION

YEAR: 2009 - 2029

ACCIDENT DATE: 2/9/2019

TYPE OF CLAIM: TP

CLAIM ADVISOR: LOUIS (91928963)

EMAIL: louisongautowheels@yahoo.com

ESTIMATION

DESCRIPTION

QTY

LIST PRICE

PARTS

BONNET

1

REPAIR

FRONT BUMPER

1

\$779.60 *de*

FRONT BUMPER CLIPS

10

\$30.00 *nei*

RH FRONT BUMPER RETAINER

1

\$67.80 *nei*

RH FRONT BUMPER BRACKET

1

\$89.60 *X*

FRONT BUMPER CENTRE LOWER GRILLE

1

\$196.40 *X* *un*

RH HEADLAMP

1

\$567.40 *X*

RH FRONT FENDER

1

\$553.20 *bt*

RH FRONT FENDER INNER SHIELD

1

\$211.40 *de*

RH FRONT FENDER INNER SHIELD CLIPS

10

\$30.00 *nei*

SUPPORT PANEL

1

REPAIR

RH A PILLAR

1

REPAIR

RH WING MIRROR

1

\$675.30 *X un*

RH FRONT DOOR

1

\$1,132.20 *bt*

RH FRONT DOOR OUTER MOULDING

1

\$204.30 *X un*

RH FRONT DOOR BLACK TAPE

1

\$199.40 *ne*

RH FRONT DOOR HINGE

2

\$398.80 *?*

RH FRONT DOOR CHECKER

1

\$257.40 *?* *un*

RH FRONT DOOR GLASS REGULATOR

1

\$435.30 *?*

RH FRONT DOOR ACUTACTOR

1

\$442.10 *X*

RH ROCKER PANEL

1

REPAIR

RH FRONT ABSORBER TOP MOUNTING

1

\$135.40 *X un*

3003.6

AUTOWHEELS

MOTORWORKS PTE LTD

NO 1 BUKIT BATOK CRESCENT #02-40

WCEGA PLAZA SINGAPORE 658064

ATTN: CHINA TAIPING INSURANCE

DATE: 4/9/2019
VEHICLE NO: SJS8723B
MODEL: TOYOTA ALLION
YEAR: 2009 - 2029
ACCIDENT DATE: 2/9/2019
TYPE OF CLAIM: TP
CLAIM ADVISOR: LOUIS (91928963)
EMAIL: louisongautowheels@yahoo.com

ESTIMATION

RH FRONT ABSORBER
RH FRONT KNUCKLE ARM
RH FRONT LOWER ARM
RH FRONT WHEEL HUB
RH FRONT WHEEL HUB BEARING
RH FRONT TIE ROD
RH FRONT TIE ROD END
RH FRONT STABILIZER LINK

1	\$368.50	X
1	\$399.50	?
1	\$387.90	?
1	\$267.50	?
1	\$199.60	?
1	\$101.30	X
1	\$104.20	X
1	\$124.70	X

3003.60

TOTAL: \$8,358.80
DISCOUNT 25%: \$2,089.70
\$6,269.10

2252.70

S/NET

RH FRONT RIM

1

\$450.60

TOTAL: \$450.60

LABOUR

LABOUR FOR FACILITATE REPAIR
TO RESPRAY AFFECTED AREAS - BONNET
TO RESPRAY AFFECTED AREAS - FRONT BUMPER
TO RESPRAY AFFECTED AREAS - RH FRONT FENDER AND INNER PANEL

PRICE

\$1,200.00 700
\$300.00 X m.
\$300.00 200
\$300.00 200

AUTOWHEELS

MOTORWORKS PTE LTD

NO 1 BUKIT BATOK CRESCENT #02-40

WCEGA PLAZA SINGAPORE 658064

ATTN: CHINA TAIPING INSURANCE

DATE: 4/9/2019
VEHICLE NO: SJS8723B
MODEL: TOYOTA ALLION
YEAR: 2009 - 2029
ACCIDENT DATE: 2/9/2019
TYPE OF CLAIM: TP
CLAIM ADVISOR: LOUIS (91928963)
EMAIL: louisongautowheels@yahoo.com

ESTIMATION

TO RESPRAY AFFECTED AREAS - SUPPORT PANEL
TO RESPRAY AFFECTED AREAS - RH FRONT DOOR
TO RESPRAY AFFECTED AREAS - RH A PILLAR
TO RESPRAY AFFECTED AREAS - RH ROCKER PANEL
TO REMOVE AND REFIT RH FRONT DOOR COMPONENT FOR FACILITATE REPAIR
TO REMOVE AND REFIT RH FRONT UNDERCARRIAGE
TO BALANCE AND ROTATE RH FRONT RIM
WHEEL ALIGNMENT
TO CHECK AND RECONNECT ALL NECESSARY WIRING
SUNDARIES
RUST PROOFING

\$300.00 X nn.
\$300.00 200
\$300.00 100
\$300.00 100
\$150.00 60
\$350.00 120? photo X nn.
\$100.00 30
\$100.00 80
\$100.00 30
\$80.00 X nn.
\$100.00 30 1730.

TOTAL: \$4,280.00

TOTAL: \$10,999.70

7% GST: \$769.98

\$11,769.68

4282.70
4/9/19 3400
6 days

James
26/9/19
Tauplin 97495749
wop
24/9/19 @ 430pm
Lumpsum
Resurvey after repair
sure@lkkauto.com
6-7 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:

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/CT119015785/T1SF3N2

Date: 15/10/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN30542418000	
Claimant Vehicle No :	SJS8723B	Insured Vehicle No :	SJJ8950J	
Date of Loss:	02/09/2019	Nature of Claim:	TP	Claim No: SNM19D204163C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SJS8723B	Engine No:	1NZD273931
Make & Model:	TOYOTA ALLION, 1.5 (A)	Chassis No:	NZT2603036708
Reg. Date:	11/09/2009 (Man. Year: 2008)	Odometer:	189282 km
Colour:	Black		
Engine Capacity:	1496 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:	195/60R15	Rear Tyre Size:	195/60R15
Front Left Side:	Good Rich 6 mm	Rear Left Side:	Good Rich 6 mm
Front Right Side:	Good Rich 6 mm	Rear Right Side:	Good Rich 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	6,799.70	2,552.70	4,247.00	62.46
Miscellaneous Items	0.00	0.00	0.00	
Labour	4,200.00	1,730.00	2,470.00	58.81
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	10,999.70	4,282.70	6,717.00	61.07
Approved Total (Overridden) (S\$)		3,400.00		
(S\$)	10,999.70	3,400.00	7,599.70	69.09
+ GST 7.00/7.00% (S\$)	769.98	238.00	531.98	69.09
Nett Amount (S\$)	11,769.68	3,638.00	8,131.68	69.09

INSPECTION

Date of Assignment: 06/09/2019

Date Inspected: 24/09/2019 Inspected At:

Auto Wheels Motorworks Pte Ltd (HQ)
No.1 Bukit Batok Crescent, #02-40
WCEGA PLAZA
Singapore 658064

Estimated Period of Repair: 6.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: Hiew May Fung

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: 15 Oct 2019)
Parts:	143	TOYOTA ALLION 1.5 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SJS8723B)	
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 (NPA)	Repair	0.00 FL	*- FL
2	1		*FRONT BUMPER	Deformed	779.60 FL	*779.60 FL
3	10		*FRONT BUMPER CLIPS	Necessary	30.00 FL	*30.00 FL
4	1		*RH FRONT BUMPER RETAINER	Necessary	67.80 FL	*67.80 FL
5	1		*RH FRONT BUMPER BRACKET	Not Necessary	89.60 FL	*- FL
6	1		*FRONT BUMPER CENTRE LOWER GRILLE	Not Necessary	196.40 FL	*- FL
7	1		*RH HEADLAMP	Not Necessary	567.40 FL	*- FL
8	1		*RH FRONT FENDER	Bent	553.20 FL	*553.20 FL
9	1		*RH FRONT FENDER INNER SHIELD	Deformed	211.40 FL	*211.40 FL
10	10		*RH FRONT FENDER INNER SHIELD CLIPS	Necessary	30.00 FL	*30.00 FL
11	1		*SUPPORT PANEL (NPA)	Repair	0.00 FL	*- FL
12	1		*RH A PILLAR (NPA)	Repair	0.00 FL	*- FL
13	1		*RH WING MIRROR	Not Necessary	675.30 FL	*- FL
14	1		*RH FRONT DOOR	Bent	1,132.20 FL	*1,132.20 FL
15	1		*RH FRONT DOOR OUTER MOULDING	Not Necessary	204.30 FL	*- FL
16	1		*RH FRONT DOOR BLACK TAPE	Necessary	199.40 FL	*199.40 FL
17	2		*RH FRONT DOOR HINGE	Not Necessary	398.80 FL	*- FL
18	1		*RH FRONT DOOR CHECKER	Not Necessary	257.40 FL	*- FL
19	1		*RH FRONT DOOR GLASS REGULATOR	Not Necessary	435.30 FL	*- FL
20	1		*RH FRONT DOOR ACUTACTOR	Not Necessary	442.10 FL	*- FL
21	1		*RH ROCKER PANEL (NPA)	Repair	0.00 FL	*- FL
22	1		*RH FRONT ABSORBER TOP MOUNTING	Not Necessary	135.40 FL	*- FL
23	1		*RH FRONT ABSORBER	Not Necessary	368.50 FL	*- FL
24	1		*RH FRONT KNUCKLE ARM	Not Necessary	399.50 FL	*- FL
25	1		*RH FRONT LOWER ARM	Not Necessary	387.90 FL	*- FL
26	1		*RH FRONT WHEEL HUB	Not Necessary	267.50 FL	*- FL
27	1		*RH FRONT WHEEL HUB BEARING	Not Necessary	199.60 FL	*- FL
28	1		*RH FRONT TIE ROD	Not Necessary	101.30 FL	*- FL
29	1		*RH FRONT TIE ROD END	Not Necessary	104.20 FL	*- FL
30	1		*RH FRONT STABILIZER LINK	Not Necessary	124.70 FL	*- FL
31	1		*RH FRONT RIM	Cut	450.60 FS	*300.00 FS
32	1		*SUNDARIES	Not Necessary	80.00 FS	*- FS

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

Sub Total (\$\$)	8,889.40	3,303.60
- List Item Discount on L Items 25.00/25.00% (\$\$)	2,089.70	750.90
Total Parts (\$\$)	6,799.70	2,552.70

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Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	LABOUR FOR FACILITATE REPAIR	New	1,200.00	700.00
2	TO RESPRAY AFFECTED AREAS-BONNET	New	300.00	0.00
3	TO RESPRAY AFFECTED AREAS-FRONT BUMPER	New	300.00	200.00
4	TO RESPRAY AFFECTED AREAS-RH FRONT FENDER AND INNER PANEL	New	300.00	200.00
5	TO RESPRAY AFFECTED AREAS-SUPPORT PANEL	New	300.00	0.00
6	TO RESPRAY AFFECTED AREAS-RH FRONT DOOR	New	300.00	200.00
7	TO RESPRAY AFFECTED AREAS-RH A PILLAR	New	300.00	100.00
8	TO RESPRAY AFFECTED AREAS-RH ROCKER PANEL	New	300.00	100.00
9	TO REMOVE AND REFIT RH FRONT DOOR COMPONENT FOR FACILITATE REPAIR	New	150.00	60.00
10	TO REMOVE AND REFIT RH FRONT UNDERCARRIAGE	New	350.00	0.00
11	TO BALANCE AND ROTATE RH FRONT RIM	New	100.00	30.00
12	WHEEL ALIGNMENT	New	100.00	80.00
13	TO CHECK AND RECONNECT ALL NECESSARY WIRING	New	100.00	30.00
14	RUST PROOFING	New	100.00	30.00
Gross Labour Cost (\$\$)			4,200.00	1,730.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >