From (Pecros	jenny Lew		GNMENT (Office UOI		100	into line assi
Estimated Co		of	13.000.00	Di	te/Time:	10/9/10/39:56
	S/TP RES/OD R	ES / FU A / DOU /	Bill to:			
	ehicle No:		M 4752P	Insured:	SKJ	5197B
a) Workshop	m/r		ns Gurokars			\$ 9802
of	27/	+ Tanjona		17,000	- 01-	- [4-2
Folicy No:			Claim No	M120	15719	09
Sum insured:			Excess			
Make of Veh (Climit's Recor					ο.λ ξ	slalzoia
CA / REV	/ REP. / REV 241	HRS			H.O.D. Findo	the second
Date/Time_	10-46am2101911	Person Con	duction Jess		ick_IN (
Dule/Time	Action/Instruction	Tolorida C	/			-
	SK3 5 MTB	20				
	SMM 43520					
	The state of the s					

Nivitha (LKK Auto)

From:

LEW JENNY <jennylew@uoi.com.sg>

Sent:

Tuesday, 10 September 2019 9:51 AM

To:

jess.francis@eurokars.com.sg; SUR; assignments

Cc:

ronald.yap@eurokars.com.sg; samuel.ng@eurokars.com.sg;

jobithomas@eurokars.com.sg; eva.kok@eurokars.com.sg; admin-d@lkkauto.com;

admin-a@lkkauto.com

Subject:

RE: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for

Attachments:

3008_001.zip

WITHOUT PREJUDICE

Dear Jess.

We will appoint LKK as SJE as agreed.

Dear Shiau Chan,

Please arrange to survey the vehicle at Trans Eurokars.

Thank You.

Warmest Regards

Jenny Lew

Claims Division

United Overseas Insurance Limited

3 Anson Road, #28-01 Springleaf Tower, Singapore 079909 Main • (65) 6222 7733 | DID • (65) 6490 9329 | Fax • (65) 6327 3869 | Email • jennylew@uoi.com.sg

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From: jess.francis@eurokars.com.sg [mailto:jess.francis@eurokars.com.sg]

Sent: Tuesday, 10 September, 2019 9:35 AM

To: LEW JENNY < jennylew@uoi.com.sg>

Cc: ronald.yap@eurokars.com.sg; samuel.ng@eurokars.com.sg; jobithomas@eurokars.com.sg;

eva.kok@eurokars.com.sg; admin-d@lkkauto.com; admin-a@lkkauto.com

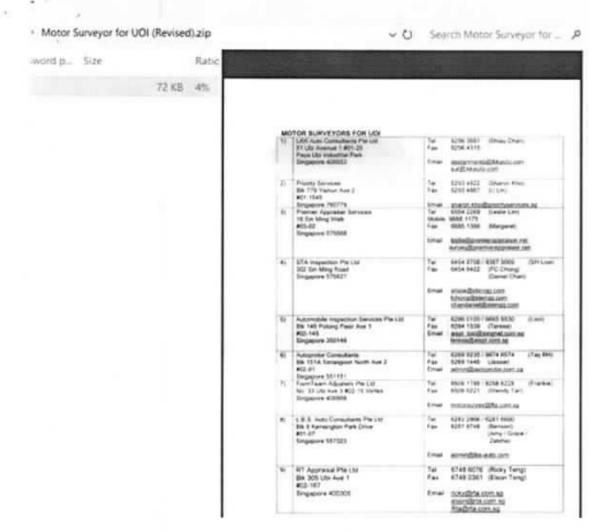
Subject: RE: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for PRI.

Dear Ms Jenny.

Reterring to your email below.

We will choose LKK Auto for this case.

Kindly do the necessary arrangements before we get in touch with LKK Auto.



Regards.

Jess Francis Carlos Insurance Claims Executive Trans Eurokars Pte Ltd 27 A Tanjong Penuru Singapore 609042 Tel no.: 8128 9802

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From: LEW JENNY < jennylew@uoi.com.sg>

Sent: 09 September 2019 5:29 PM

To: Jess Francis Amurao Carlos < jess francis@eurokars.com.sg>; LEE KATIE < katielee@uoi.com.sg>

Cc: Ronald Yap <ronald.yap@eurokars.com.sg>; Samuel Ng <samuel.ng@eurokars.com.sg>; Jobi Thomas

<jobithomas@eurokars.com.sg>

Subject: RE: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for PRI.

WITHOUT PREJUDICE

Dear Jess.

Pursuant to the amended Pre-action Protocol for Non-Injury Motor Accident (NIMA), we enclose a list of our Surveyors, for your attention.

In this case, we propose to appoint M/s Priority Services.

Please revert to the undersigned within two (2) working days whether you have any objections to the appointment of any of our Surveyors, failing which we shall proceed to carry out the survey of your client's vehicle by our appointed Surveyors.

We reserve all our rights in this matter.

Thank You.

Warmest Regards

Jenny Lew

Claims Division

United Overseas Insurance Limited

3 Anson Road, #28-01 Springleaf Tower, Singapore 079909 Main: • (65) 6222 7733 | DIO • (65) 6490 9329 | Fax • (65) 6327 3869 | Email • jennylew@uoi.com.sg

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From: jess.francis@eurokars.com.sg [mailto:jess.francis@eurokars.com.sg]

Sent: Monday, 9 September, 2019 5:27 PM

To: LEE KATIE <katielee@uoi.com.sg>; LEW JENNY <jennylew@uoi.com.sg>

Cc: ronald.yap@eurokars.com.sg; samuel.ng@eurokars.com.sg; jobithomas@eurokars.com.sg Subject: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for PRI.

To whom it may concern.

Kindly arrange the PRI to our client's vehicle.

Let us know the appointed surveyor for us to arrange,

Regards,

Jess Francis Carlos Insurance Claims Executive Trans Eurokars Pte Ltd 27 A Tanjong Penuru Singapore 609042 Tel no.: 8128 9802

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From: Eurokars Printer Scan < transeurokars@eurokars.com.sg>

Sent: 09 September 2019 5:18 PM

To: Jess Francis Amurao Carlos < jess.francis@eurokars.com.sg>

Subject: Attached Image

Shiau Chan (LKKAuto)

From:

LEW JENNY <jennylew@uoi.com.sg>

Sent:

Friday, 1 November 2019 12:18 PM

To:

Shiau Chan (LKKAuto); Admin-D (LKKAuto); assignments

Cc:

SUR

Subject:

RE: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for

PRI.

Dear Shiau Chan,

Claim no: M12D11571909

Warmest Regards

Jenny Lew

Claims Division

United Overseas Insurance Limited

3 Anson Road, #28-01 Springleaf Tower, Singapore 079909

Main • (65) 6222 7733 | DID • (65) 6490 9329 | Fax • (65) 6327 3869 | Email • jennylew@uoi.com.sg

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From: Shiau Chan (LKKAuto) [mailto:siewsc@lkkauto.com]

Sent: Friday, 1 November, 2019 11:08 AM

To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; LEW JENNY <jennylew@uoi.com.sg>; assignments

<assignments@lkkauto.com> Cc: SUR <sur@lkkauto.com>

Subject: RE: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for PRI.

Dear Jenny,

Kindly provide us the claim number of above mentioned.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>

Sent: Tuesday, 10 September 2019 10:49 AM

To: 'LEW JENNY' < jennylew@uoi.com.sg>; assignments < assignments@lkkauto.com>

Cc: SUR <sur@lkkauto.com>

Subject: RE: UOI ref - SKJ5197B | Our ref - SMM4752P | Doa Sep 5, 2019 | Requesting for PRI.

Dear Sir/Mdm,

Thank you for the assignment.

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 fability 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 cupies 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

	ACCIDENT STATEMENT	
Date Of Report	07/09/2019 09:31	
Date Of Accident	05/09/2019 17:25	
Exact Location Of Accident	UPPER THOMSON RD/MARYMOUNT LANE JUNCTION	
Country/State of Loss	SINGAPORE	

THE RESIDENCE OF THE PARTY AND ADDRESS.	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMM4752P

SMM4752P

Insured/Policyholder

Name Of Registered Owner

MDM LEE MIN TAY

NRIC No

S04926881

Email Address

LEEMINTAY@YAHOO.COM

Mobile Phone No.

(LOCAL) +65-96498854

Alternative Phone No.

OFFICE-96498854

Vehicle Particulars

Manufacturer

MAZDA

Model

2-1.5 HATCHBACK (A)

Exact Purpose for which vehicle was being used at

PRIVATE USE

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle? If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

Cover Note Number

Name of Driver

MDM LEE MIN TAY

NRIC No Date Of Birth S04926881 26/05/1945

Occupation Date Of Driving Pass

INDOOR 20/02/1968

Driving Experience

51 YEARS AND 6 MONTHS

Gender

FEMALE

Mobile Number

(LOCAL) +65-96498854

Fax Number

Contact Number

OFFICE-96498854

EMail Address

LEEMINTAY@YAHOO.COM

Address

273B BISHAN STREET 24 #27-112

Postcode

572273

OWNER

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

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

NO

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

ambulance?

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BISHAN NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-5529999 - FAX NO: 65561905

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

SEE SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKJ5197B

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

GWEE TONG CHEW

NRIC/Passport Number

S1254626B

Contact Number

98249018

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 20

No. Of Passenger (Including Driver)

SUBSIDE STATE STATE OF THE PROPERTY OF

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to spend up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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.
- 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:
 - 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:
 - 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: 6/9/19

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

Reporting Centre Personnel's Signature

NRIC/FIN No.:





1 of 3

Report No. T/20190905/2148

Street No.

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

Date/Time Report Made: 05/09/2019 21:09			Vide Report No.:	Station Diary No. 98			
Informan	t's Partic	ulars					
Name of Informant: LEE MIN TAY			Address: APT BLK 273B BISHAN STREET 24 #27-112 SINGAPORE 572273				
ID Type / ID No.: NRIC NO / S0492688I			Contact No.: Home/Office:	Mobile: 96498854			
Nationality: SINGAPORE CITIZEN		ŒN	Email;	To Salary			
Sex: Female	Age: 74	Date of Birth: 26/05/1945	Type of Informant: Driver	348			
Race: Chinese			Language:	Institution / School Name:			
Occupation: DIRECTOR OF NURSING			Driving Licence Information Class: 3	: Date of Expiry:			

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 05/09/2019 17:25	Type of Location X-Junction
22 M V9 2	MSON ROAD Marymount Lane	Road Surface; Dry		Road Speed Limit:
		Traffic Control;		Traffic Volume; Moderate
Type of Collis Between Mov	ion: ing Vehicles - Head 1	To Rear		Anyone conveyed by ambulance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKJ5197A	Car					0
SMM4752P	Car	MAZDA	MAZDA2 HATCHBAC K 1.5 AT STANDARD 2WD	Silver		0





2 of 3

Report No. T/20190905/2148

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

CONTINUATION OF REPORT

Details of Ve	ehicle Insurance			COLUMN SETS
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMM4752P	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900103536	28/06/2019	27/06/2021

Brief Details.

On 05/09/2019 at about 1725hrs, I was traveling along Upper Thomson Road towards Marymount Lane. I was turning right into Marymount Lane. I was waiting for the traffic light to turn green.

Suddenly, I felt an impact from the rear. I alighted and made a check. I realised that one vehicle (SKJ5197A) had hit onto my vehicle's rear. No one was injured at the point of time. No police or ambulance activated. I exchange particular with the driver.

Particulars of the driver: Gwee Tong Chew, S1254626B

HP: 98249018

1.92:5





3 of 3

Report No. T/20190905/2148

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

4,947

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 / Sgt 2 LIM HWEE JIE, SAMUEL	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/09/2019 21:09
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	



TRANS EUROKARS PTE LTD



ESTIMATE COST OF REPAIRS

UNITED OVERSEAS INSURANCE LTD NAME: Mdm Lee Min Tay WIP: 50809

3 ANSON ROAD EXCESS: ADDRESS: 2738 Bishan Street 24

#28-01 SPRINGLEAF TOWER #27-112 DATE: 9-Sep-19

SINGAPORE 079909 Singapore 572273 ATTN.: MOTOR CLAIMS TEL: 96498854

FAX:

VEH NO: SMM4752P DATE IN: CONTACT PERSON: Jess 63957874 JM6DJ2HAA01300413 THIRD PARTY CLAIM MILEAGE: TYPE OF CLAIM: CHASSIS NO:

MODEL: MAZDA2 DATE REG.: 28-Jun-19 POLICY NO. : NATURE OF WORKS Parts Description PRICES NO QTY REVISED REAR BUMPER MDC3R-50-221888 893.40 BRACKET CENTER WY S 2 1 MKD53-50-251 5.40 STAY, REAR BUMPER 22.80 \$ 3 2 MD09W-50-271A CAP CENTER, REAR BUMPER 39.60 4 MD09W-50-705 \$ FASTENER, REAR BUMPER 7 nin 5 21.00 5 M845A-56-146A 10.80 GROMMET, REAR BUMPER MBHN1-50-0Z1A ply. \$ 4 6 7 GROMMET, REAR BUMPER 2 \$ 6.00 M9991-00-501 121 TAPE PROTECTOR, REAR BUMPER \$ 14.10 8 3 MBCKA-50-EM1 un LAMP, LICENSE PLATE 111.60 9 2 MD09H-51-270B 5 10 REAR END PANEL MDJYS-70-75Z \$ 477.10 TRIM, END PANEL MD09W-68-89XA02 on the 77.00 11 1 12 FASTENER, TRIM 4 MGJ21-68-885B02 12.00 ORNAMENT, MAZDA 58.30 13 1 MDB2M-51-721 250 -\$ MASCOT, REAR 12-61.20 MD09W-51-730 \$ 14 1 UE ORNAMENT, SKYACTIVE \$ 68.00 15 MD09W-51-771 GASKET LHS, TAILLAMP 16 Ĩ MDA6A-51-3J8 \$ 54.30 ue-GASKET RHS, TAILLAMP 54.30 17 MDA6A-51-3HB w \$ 18 SILENCER, EXHAUST 1.105.80 1 \$ MP516-40-100B HANGER, SILENCER 19 2 MBP47-40-061A \$ 70.00 20 GASKET, EXHAUST MP549-40-305 15.40 S TOTAL PARTS \$ 3,178.10 LESS 10% 317.81 TOTAL PARTS COST \$ 2,860.29 Labour Description TO REPLACE BEAR BUMPER, REAR END PANEL TO REPAIR BEAR FLOOR PANEL TAILGATE AND 1 1320-\$ 3.960.00 ALL AREAS AFFECTED BY THE ACCIDENT. 660 TO RESPRAY REAR SUMPER, REAR REINFORCEMENT, REAR END PANEL, REAR FLOOR PANEL AND MZ-SP-SREAR6 TALLGATE. 2 \$ 3,465,00 1260 630

			GRAND TOTAL	5 -	5	
			GST 7%	\$ -	\$	- 20
			TOTAL AFTER EXCESS	\$ -		
			LESS EXCESS	\$ -	\$	- 5
			TOTAL	\$ -	\$1	3,535.2
			TOTAL PARTS	s -	\$	2,860.2
	1.		TOTAL LABOUR	\$ -	\$1	0,675.0
1	MZ-BR-SUNDRI	SUNDRIES NEC	30.	NETT	\$	100.0
10		TO SUPPLY BRILA PREMIUM COATING. * 7. pv 2.4 VL	sales agreement ?	200 / NETT	\$	250.0
9	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		180-	\$	350.0
8	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		150	\$	250.0
7	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION.	- i	150X	\$	250.0
6	MZ-BR-EXASSY	TO REMOVE & INSTALL REAR EXHAUST ASSY,	phop.	w Z	\$	990.0
5	MZ-BR-PLATE1	TO SUPPLY NUMBER PLATE.	M	⊀ NETT	\$	70.0
4	MZ-BR-CAMERA	TO TRANSFER REVERSE CAMERA.	ηN	× NETT	\$	330.0
3	MZ-8R-REVSEN	TO TRANSFER REVERSE SENSORS. (WITH REVERSE SENSOR)	330-	NETT	\$	660.0

TRANS EUROKARS PTE LTD

REMARKS.
THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400 WILL BE APPLIED ACCORDINGLY FOR MANY OURS INVOLVED IN SOURCING FOR PARTS PRICE AS

Authorised Signature

24/9/19 CIO am * Persony before point sure Mhants com. 0 6 days

LKK Auto Consultants hence notify the Requirer of the following:

- . To resurvey before/latter spray beloning
- . To display distinged parts) during renormy
- . Parts prices are subject to confirmation
- . Third party survey is on a "Warred Probables" balls.
- . No Repail residence (4) in abound
- Supplementary thereigh must be inconsisted and be surfaced to first access of from last access Company

Administrat by Realist

Commo

Com



TRANS EUROKARS PTE LTD



FINALISED COST OF REPAIRS

UNITED OVERSEAS INSURANCE LTD

NAME:

Mdm Lee Min Tay

WIP:

52968

3 ANSON ROAD

ADDRESS: 273B Bishan Street 24

EXCESS:

#28-01 SPRINGLEAF TOWER

#27-112

DATE:

9-Sep-19

SINGAPORE 079909

Singapore 572273

ATTN.:

MOTOR CLAIMS

TEL:

96498854

FAX:

VEH NO:	SMM4752P	DATE IN:		CONTACT PERSON:	Jess 63957874
CHASSIS NO :	JM6DJ2HAA01300413	MILEAGE :		TYPE OF CLAIM:	THIRD PARTY CLAIM
MODEL:	MAZDAZ	DATE REG.:	28-Jun-19	POLICY NO. :	

NATURE OF WORKS

			Parts Description	on				
NO			QTY		R	EVISED	-	PRICES
1	REAR BUMPER		1	MDC3R-50-221888	\$	893.40	\$	893.40
2	BRACKET CENTER	1	1	MK053-50-251			\$	5.40
3	STAY, REAR BUM	PER	2	MD09W-50-271A			\$	22.80
4	CAP CENTER, REA	AR BUMPER	1	MD09W-50-705			\$	39.60
5	FASTENER, REAR	BUMPER	7	M845A-56-146A	\$	21.00	5	21.00
6	GROMMET, REAL	RBUMPER	4	M8HN1-50-0Z1A	\$	10.80	\$	10.80
7	GROMMET, REAL	RBUMPER	2	M9991-00-501	\$	6.00	\$	6.00
8	TAPE PROTECTO	R, REAR BUMPER	3	MBCKA-50-EM1	\$	14.10	\$	14.10
9	LAMP, LICENSE P	LATE	2	MD09H-51-2708			\$	111.60
10	REAR END PANEL		1	MDJYS-70-75Z			\$	477.10
11	TRIM, END PANE	L	1	MD09W-68-89XA02			5	77.00
12	FASTENER, TRIM		4	MGJ21-68-885802			\$	12.00
13	ORNAMENT, MA	ZDA	1	MDB2M-51-721	\$	58.30	\$	58.30
14	MASCOT, REAR		1	MD09W-51-730	\$	61.20	\$	61.20
15	ORNAMENT, SKY	ACTIVE	1	MD09W-51-771	\$	68.00	\$	68.00
16	GASKET LHS, TAI	LIAMP	1	MDA6A-51-318	\$	54.30	\$	54.30
17	GASKET RHS, TAI	LLAMP	1	MDA6A-51-3H8	\$	54.30	\$	54.30
18	SILENCER, EXHAL	JST	1	MP516-40-1008			\$	1,105.80
19	HANGER, SILENC	ER	2	MBP47-40-061A			\$	70.00
20	GASKET, EXHAUS	Т	1	MP549-40-305			\$	15.40
	TOTAL PARTS					1,241.40	\$	3,178.10
	LESS 10%					124.14	5	317.81
				TOTAL PARTS COST	\$	1,117.26	\$	2,860.29
			Labour Descript	ion				
1		TO REPLACE REAR BUMPER, REAR EN AND ALL AREAS AFFECTED BY THE AC		PAIR REAR FLOOR PANEL, TAILGATE	\$	1,320.00	\$	3,960.00
2	MZ-SP-SREAR6	TO RESPRAY REAR BUMPER, REAR RI PANEL AND TAILGATE.	EINFORCEMENT.	REAR END PANEL, REAR FLOOR	\$	1,260.00	\$	3,465.00

			GRAND TOTAL	S	4,908.37	\$	
			GST 7%	\$	321.11	T	
			TOTAL AFTER EXCESS	\$	4,587.26	1	
			LESS EXCESS	5		\$	
			TOTAL	5	4,587.26	\$	13,535.2
			TOTAL PARTS	\$	1,117.26	s	2,860.2
_			TOTAL LABOUR	\$	3,470.00	\$	10,675.0
11	MZ-BR-SUNDRI	SUNDRIES.		\$	30.00	s	100.0
10		TO SUPPLY BRILA PREMIUM COATING.		\$	200.00	\$	250.0
9	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		\$	180.00	s	350.0
8	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		\$	150.00	\$	250.0
7	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION.				\$	250.0
6	MZ-BR-EXASSY	TO REMOVE & INSTALL REAR EXHAUST ASSY				\$	990.00
5	MZ-BR-PLATE1	TO SUPPLY NUMBER PLATE.				\$	70.00
4	MZ-BR-CAMERA	TO TRANSFER REVERSE CAMERA.				\$	330.00
3	MZ-BR-REVSEN	TO TRANSFER REVERSE SENSORS. (WITH RE	EVERSE SENSOR)	\$	330.00	\$	660.00

REMARKS:

6 REPAIR DAYS (exclude preparation of estimate, wait for survey/authorization/spare parts, Sat/Sun/PH)

ID: t05

ENGINE NO:

DESCRIPTION:

P.D.I.

INTERNAL INVOICE

PAGE NO : 1 INVOICE NO: 31017056 DEPT/POS ID: N / 12 DATE IN 25/06/2019 DATE PRINTED: 29/06/2019 108 NO: 44442 19104 **IO4** CODE: Mdm Lee Min Tay 273B Bishan Street 24 #27-112 CUSTOMER: ADDRESS: JOB NO: CSO/OP CODE: calvin Chow Singapore 572273 TEL NO: MAZDAZ IPM3 HB CORE JM6DJ2HAA01300413 P520598297 REGN NO: REGN DATE: SMM4752P MODEL: CHASSIS NO:

PETROL TOPPING
Std PDI Pkg M2
PRE DELIVERY INSPECTION & INSTALL IU
Std PDI Pkg M2
POLISH A UNIT OF VEHICLE
Std PDI Pkg M2
SUPPLY 1 SET OF REGN PLATE
Std PDI Pkg M2
SUPPLY 1 UNIT OF IU
Std PDI Pkg M2
SUPPLY & INSTALL M2 SOLAR FILM
SUBLET 148582
SUPPLY BRILA M2 RED LINE BODY COATING 0.00 MZ-PT M2 00 MZ-PDI M 0.00 MZ-PV M2 0.00 MZ-RP M2 0.00 MZ-IU M2 .00 MZ-SF M2 SUBLET 148582
SUPPLY BRILA M2 RED LINE BODY COATING
SUBLET 148585
INSTALL M2 FRONT & REAR VIDEO CAMERA
SUPPLY & INSTALL M2 HALF LEATHER SEATS(CLASSIC)
SUBLET 148586
SUPPLY & INSTALL M2 REVERSE SENSOR(TLW) .00 SUB .00 MZ-FVC M .00 MZ-LS M2 .00 MZ-RS M2

MILEAGE:

REQUISITION NO: 30135/CC

ID: t05

CODE:

T9104 **TO4**

CUSTOMER: ADDRESS:

Mdm Lee Min Tay 273B Bishan Street 24 #27-112

Singapore 572273

MODEL: CHASSIS NO: ENGINE NO:

SINGAPORE MAZDAZ IPM3 HB CORE JM6DJ2HAA01300413 P520598297

INTERNAL INVOICE

PAGE NO: 31017056 N 12 25/06/2019 29/06/2019 44442 Calvin Chow INVOICE NO: DEPT/POS ID: DATE DATE PRINTED: JOB NO: CSO/OP CODE:

TEL NO: REGN NO: REGN DATE:

SMM4752P

MILEAGE:

3



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

		Affiliated to Federation Intern	nationale Des Experts En Autom	nobile
UNI	TED OVERSEAS I	NSURANCE LTD	Ref : CS/UOI190159	97/T1qd3n2
3 ANSON ROAD #28-01 SPRINGLEAF TOWER SINGAPORE 079909			Date: 05-11-2019 Code: UOI2	
1.	3 2 JUL - W	Policy Particula	ars :- THIRD PARTY CLAI	M
	Insured Veh.	SKJ 5197B	Veh. Inspected	SMM 4752P
	Policy No.		Coverage (\$)	0.00
	Claim No.	M12D11571909	Excess (\$)	0.00
	Assign From	JENNY LEW	Assign Date	10/09/2019
2.		Vehicle Pa	articulars & Condition	
	Make & Model	MAZDA 2	c.c	1496
	Engine No.	HIDDEN	Year of Reg.	2019
	Chassis No.	JM6DJ2HAA01300413	Colour	SILVER
	Odometer	1546	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Con	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	185/65 R15	PIRELLI	6 mm
	L/H Front Tyre	185/65 R15	PIRELLI	6 mm
	R/H Rear Tyre	185/65 R15	PIRELLI	6 mm
	L/H Rear Tyre	185/65 R15	PIRELLI	6 mm
ŧ			ption of Damages	
	THE VEHICLE SU DAMAGES SEE D	STAINED DAMAGES AT THE ETAILS.	REAR PORTION.	
5.	Reserved to	Gen	eral Information	
	Accident Date	05/09/2019	Inspection Date	24/09/2019
	Survey held at	27A TANJONG PENJURU		
	Repairer	TRANS EUROKARS PTE LT	D	
5a.			Remarks	
		ON WAS CONDUCTED ON A" CE TO YOUR INSTRUCTIONS		
5b.		Estima	ate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	6 Working Day	5



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMM 4752P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	DEFORMED	893.40	893.40
1	BRACKET CENTER	NOT NECESSARY	5.40	
2	STAY,REAR BUMPER	NOT NECESSARY	22.80	
1	CAP CENTER, REAR BUMPER	NOT NECESSARY	39.60	
7	FASTENER,REAR BUMPER	NECESSARY	21.00	21.00
4	GROMMET,REAR BUMPER	NECESSARY	10.80	10.80
2	GROMMET,REAR BUMPER	NECESSARY	6.00	6.00
3	TAPE PROTECTOR, REAR BUMPER	NECESSARY	14.10	14.10
2	LAMP, LICENSE PLATE	NOT NECESSARY	111.60	
1	REAR END PANEL	NOT NECESSARY	477.10	
1	TRIM END PANEL	NOT NECESSARY	77.00	
4	FASTENER,TRIM	NOT NECESSARY	12.00	
1	ORNAMENT,MAZDA	NECESSARY	58.30	58.30
1	MASCOT,REAR	NECESSARY	61.20	61.20
1	ORNAMENT, SKYACTIVE	NECESSARY	68.00	68.00
1	GASKET LHS,TAILLAMP	NECESSARY	54.30	54.30
1	GASKET RHS, TAILLAMP	NECESSARY	54.30	54.30
1	SILENCER, EXHAUST	NOT NECESSARY	1,105.80	
2	HANGER, SILENCER	NOT NECESSARY	70.00	
1	GASKET,EXHAUST	NOT NECESSARY	15.40	
	LESS 10% DISCOUNT		-317.81	-124.14
			2,860.29	1,117.26
	SPECIAL NETT ITEMS			
1	SUNDRIES (SN)	NECESSARY	100.00	30.00
1	NUMBER PLATE (SN)	NOT NECESSARY	70.00	
	100 Personal Control of the Control	Nacronne Casarana	170.00	30.00
	LABOUR			
	TO REPLACE REAR BUMPER, REAR END PANEL, TO REPAIR REAR FLOOR PANEL, TAILGATE AND ALL AREA: AFFECTED BY THE ACCIDENT.	s	3,960.00	1,320.00
	TO RESPRAY REAR BUMPER, REAR REINFORCEMENT, REAR END PANEL, REAR FLOOR PANEL AND TAILGATE.		3,465.00	1,260.00
	TO TRANSFER REVERSE SENSORS.(WITH REVERSE SENSOR).		660.00	330.00

Report Ref No. CS/UOI19015997/T1qd3n2



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TEL: 6256 3561 FAX: 6256 4315

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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO TRANSFER REVERSE CAMERA.	NOT NECESSARY	330.00	
	TO REMOVE & INSTALL REAR EXHAUST ASSY.	NOT NECESSARY	990.00	
	TO CARRY-OUT BODY CAVITY PRESERVATION.	NOT NECESSARY	250.00	
	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		250.00	150.00
	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		350.00	180.00
	TO SUPPLY BRILA PREMIUM COATING.		250.00	200.00
	77304311.5744		10,505.00	3,440.00
	GRAND TOTAL		13,535.29	4,587.26

RECOMMENDED COST OF REPAIRS	4,587.26
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Report Ref No. CS/UOI19015997/T1qd3n2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

ADRIAN LING WAI PING

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

Automotive Assessor

Licensed Appraiser

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