

ASS. REC. BY:

REF: CS/UOI/9016253/At 13<sup>12</sup>

Special Instruction:

Surveyor: Adrian

ASSIGNMENT (Office)

From (Person): Jenny Lew of UOI Date/Time: 12/9/19 @ 4:20pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No.: SMA 96209 Insured: YN 6316 E  
at Workshop m/s Hua Meng Spray Tel: 6747 8064 / 6746 5519  
of 1 kaki Bukit Ave 6 # 01-61

Policy No: Claim No: M11009191910

Sum Insured: Excess:

Make of Veh: D.O.A. 11/09/2019  
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 1001am @ 13/9/19 Person Contacted: Jing Yee Vehicle IN (OUT)

Date/Time	Action/Instruction
	Insured ✓
	SMA 96209 - X
	YN 6316 E - NA / UOI / 9016134 / 24 DOA: 11/09/2019
	Lump Sum \$ 23501- (Red: 6807.10; 74%)

# ASSIGNMENT

Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 UD / TP / WS / TP RES / OO RES / EVA / RV / RV  
 To inspect Vehicle No: \_\_\_\_\_  
 At Workshop no: \_\_\_\_\_  
 of: \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No: \_\_\_\_\_  
 Claim 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

Est. or Market Value:

IDAC Accident Report: Consistent? Yes or No

GIA / PR Seen: Consistent? Yes or No

Est. Repairs: days Fin: Yes or No

Lim Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Make: SMA 9620S at From: 2009 Dec  
 Type: M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or

Make: Toyota Altis 1588

Colour: Silver A/C: Insured / Std / Nil / NA

Sp. Reading: 201759 T/Ratio: Insured / Std / Nil / NA

Engin:

C/Nr: NROS32EE10616143

Gen. Cond: Good / Fair / Poor / Burnt

Steering: inorder / Jammed / Leaked / Burnt or

Brake: inorder / Jammed / Leaked / Burnt or

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

Tyre Size F: 195/60R15

R: 195/60R15

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

TOYO / OKO or

Front

Rear

R/Bal: 06 mm R/Bal: 06 mm

L/Bal: 06 mm L/Bal: 06 mm

D.O.A: \_\_\_\_\_ D.O.I: 16/09/19

Survey held at: the mery

Des. of Damages: Fnt / Rear / O/S / N/S / U/B / Rooftop or

Front N/S

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time: \_\_\_\_\_ Action / Instruction:

TP uol

RECEIVED 21 JAN 2020

mv: 131c  
 PV: 941c  
 Nett: 3.61c

Date/Time: File Path for

2011 Tupist

Date/Time: File Path for

21

Support: \_\_\_\_\_

0

☐ : Prelt. Report  
☒ : Final Report

Days Of Repair: 5

Resurvey No. of Trip: 1

Avail Page: ☐ Shopkeep: ☐

☐ Intercom: ☐

☐ Term: ☐

☐ : ☐

Survey Fee

(Inspection)

21/1/20

21/1/20

21/1/20

21/1/20

350

60

80

27

27

27

417

## Nivitha (LKK Auto)

---

**From:** LEW JENNY <jennylew@uoi.com.sg>  
**Sent:** Thursday, 12 September 2019 4:20 PM  
**To:** Hua Meng; SUR; assignments  
**Subject:** RE: PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019  
**Attachments:** img-912132327.zip

WITHOUT PREJUDICE

Dear Jing Yee,

We will arrange LKK as SJE as agreed.

Dear Shiau Chan,

Please arrange to survey the vehicle at Hua Meng Spray Painting Workshop.

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](mailto:jennylew@uoi.com.sg)

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**From:** Hua Meng [<mailto:huameng@live.com.sg>]  
**Sent:** Thursday, 12 September, 2019 3:50 PM  
**To:** LEW JENNY <jennylew@uoi.com.sg>  
**Subject:** Re: PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019

Dear Jenny

We propose to choose **LKK Auto Consultants Pte Ltd** to conduct pre-repair survey.

Thank You.

Regards,  
Jing Yee  
Hua Meng Spray Painting Workshop  
Tel : 6746 5519 Fax : 6743 4896

---

**From:** LEW JENNY <jennylew@uoi.com.sg>  
**Sent:** Thursday, September 12, 2019 2:26 PM  
**To:** [huameng@live.com.sg](mailto:huameng@live.com.sg) <[huameng@live.com.sg](mailto:huameng@live.com.sg)>

Cc: LEE KATIE <katielee@uoi.com.sg>

Subject: RE: PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019

WITHOUT PREJUDICE

Dear Jing Yee,

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 STA Inspection Pte Ltd.

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.

Please forward us a copy of the estimated cost of repair and accident report.

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 | DID • (65) 6490 9329 | Fax • (65) 6327 3869 | Email • [jennylew@uoi.com.sg](mailto:jennylew@uoi.com.sg)

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**From:** Hua Meng [<mailto:huameng@live.com.sg>]

**Sent:** Thursday, 12 September, 2019 1:29 PM

**To:** LEE KATIE <katielee@uoi.com.sg>

**Subject:** PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019

**Importance:** High

Dear Sirs/Madam

Please refer the attachment FYNA and kindly send us your surveyor name list.  
Your prompt reply will appreciated by us.

Thank You.

Regards,

Jing Yee

Hua Meng Spray Painting Workshop

Tel : 6746 5519 Fax : 6743 4896

## Denise Tay (LKKAUTO)

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**From:** WONG JOSEPHINE <josephinewong@uoi.com.sg>  
**Sent:** Monday, 20 January 2020 1:28 PM  
**To:** Denise Tay (LKKAUTO)  
**Subject:** RE: PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019

Claim no: M11D08191910

### Josephine Wong

Executive  
Claims

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 • josephinewong@uoi.com.sg

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**From:** Denise Tay (LKKAUTO) [mailto:denisetay@lkkauto.com]  
**Sent:** Monday, January 20, 2020 11:58 AM  
**To:** Admin-D (LKKAUTO) <admin-d@lkkauto.com>; WONG JOSEPHINE <josephinewong@uoi.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** SUR <sur@lkkauto.com>; 'LEW JENNY' <jennylew@uoi.com.sg>  
**Subject:** RE: PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019

Dear Josephine,

Please provide claim no.

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: [sur@lkkauto.com](mailto:sur@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Admin-D (LKKAUTO) <admin-d@lkkauto.com>  
**Sent:** Friday, 13 September 2019 10:01 AM  
**To:** 'LEW JENNY' <jennylew@uoi.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** SUR <sur@lkkauto.com>  
**Subject:** RE: PRS - UOI INSURED: YN 6316 E OUR REF: SMA 9620 S D.O.A: 11.09.2019

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed that vehicle is not in the workshop, repairer will arrange.

# HUA MENG SPRAY PAINTING WORKSHOP

1 KAKI BUKIT AVE 6, BLK C #01-61 / 01-34

AUTOBAY @ KAKI BUKIT S417883

TEL: 6747 8064/6746 5519 FAX: 6743 4896

Our Ref: HUAMENGI/SMA 96205  
Your Ref: YN 6316E

(Please quote our reference number when replying)

Date: 12/09/2019

United Overseas Ins Ltd.

Attention: Motor Claims Dept

Dear Sirs

ACCIDENT INVOLVING MOTOR VEHICLE SMA 96205 & YN 6316E ALONG  
Bishan St 33 ON 11-09-2019 AT ABOUT 1040 HOURS

(NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY WITHIN 2 WORKING DAYS  
PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES)

We are instructed by Soh Chiam Bee to notify you of a road traffic accident on 11-09-2019  
about 1040 HOURS along Bishan St 33 involving our  
client's vehicle registration number SMA 96205 and vehicle registration number YN 6316E  
driven by you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed  
to repair the damaged vehicle, please let us know within 2 working days of 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 shall  
proceed to repair the vehicle without further reference to you.

Yours faithfully,

  
HUA MENG SPRAY PAINTING WORKSHOP  
AUTOBAY @ KAKI BUKIT  
1 KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883  
TEL: 6747 8064, 6746 5519 FAX: 6743 4896



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner's Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	522H

### Vehicle Particulars

Vehicle No.:	SMA9620S
Vehicle to be Exported:	Yes
Intended Deregistration Date:	16 Sep 2019
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	3ZZ4951181
Chassis No.:	MR053ZEE106161413
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$17,853.00
Original Registration Date:	16 Dec 2009
First Registration Date:	16 Dec 2009
Transfer Count:	2
Actual ARF Paid:	\$17,853.00

### Intended PARF Eligibility

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Dec 2019
PARF Rebate Amount:	\$8,926.00

### Intended COE Rebate Particulars

COE Expiry Date:	15 Dec 2019
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$18,502.00
COE Rebate Amount:	\$454.00
<b>Total Rebate Amount:</b>	<b>\$9,380.00</b>

The information contained herein is correct as at 16 Sep 2019

OK



## 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	11/09/2019 17:56
Date Of Accident	11/09/2019 10:40
Exact Location Of Accident	BISHAN ST 22
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMA9620S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SOH CHIAM BEE
NRIC No	S0102522H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88288645
Alternative Phone No	OFFICE-88288645
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	ALTIS
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
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5103254132
Cover Note Number	
<b>Driver</b>	
Name of Driver	SOH CHIAM BEE
NRIC No	S0102522H
Date Of Birth	15/02/1954
Occupation	OUTDOOR
Date Of Driving Pass	25/10/1976
Driving Experience	42 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-88288645
Fax Number	
Contact Number	OFFICE-88288645
EEmail Address	NOEMAIL

Address	BLK 410 TAMPINES ST 41 #05-235
Postcode	520410
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 - CHANGE/CROSS LANE
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?	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

I WAS DRIVING ALONG LANE 1 OF BISHAN ST 23 ON 11/09/2019 AT 1040HRS. SUDDENLY, VEHICLE B CUT FROM LANE 2 INTO MY LANE. VEHICLE B COLLIDED ONTO LEFT PORTION OF MY VEHICLE.

#### 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	YN6316E
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)	

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 regulate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature  
Date & Time:

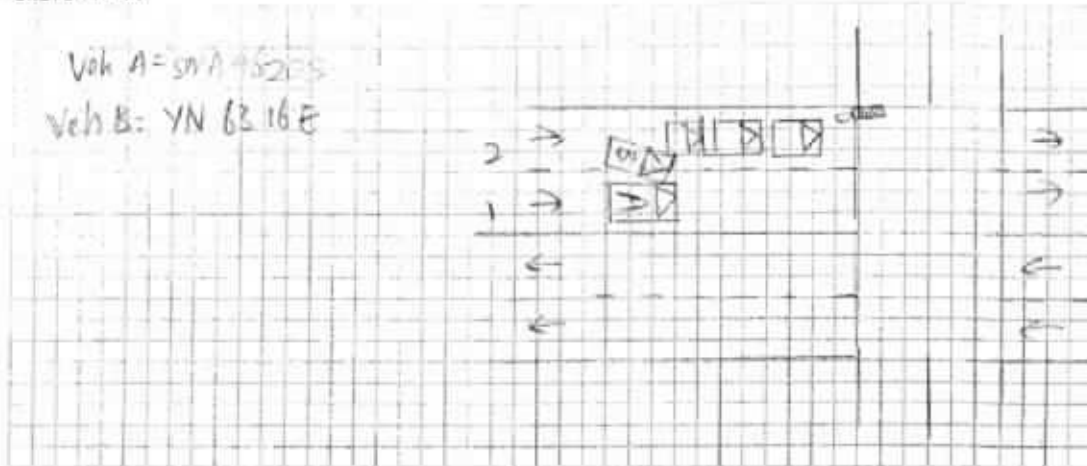
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

HUA MENEY

# Sketch Plan #2 Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Lane 1 of

I was driving along Bishan Street 23 on 11-09-2019 @ 1040 hours.

Suddenly, vehicle B cut from lane 2 into my lane. Vehicle B was collided onto left portion of my vehicle.

## 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.:

# HUA MENG SPRAY PAINTING WORKSHOP

1, Kaki Bukit Avenue 6, Blk C #01-61 / 01-34, Singapore 417883

Autobay @ Kaki Bukit

Tel: 6747 8064, 6746 5519 / 9666 9680 Fax: 6743 4896

## ESTIMATE

MR0537FE10616/43

SOH CHIAM BEE

BLK 410 TAMPINES ST 41

#05-235

S 520410

TP 401

Devis

Date

:23.09.2019

Vehicle No

:SMA 9620 S

Make/Model

:TOYOTA ALTIS

Accident date

:11.09.2019

No	DESCRIPTION	Qty	Amount (\$\$)
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### List Items

1	Front bumper <i>Beland</i>	1	\$ 530.1 ✓
2	Front bumper side holder @ \$ 191.90 <i>LH side</i>	2	\$ <del>383.8</del> 6510
3	Front bumper LH fog lamp <i>3 piece</i>	1	\$ 411.9 ✓
4	Front bumper LH fog lamp cover	1	\$ 188.2 ✓
5	Front bumper clips (1set) <i>new</i>	1	\$ <del>66</del> 30
6	Front LH headlamp <i>ect</i>	1	\$ <del>2993.6</del> 745.60
7	Front LH headlamp lower bracket <i>new</i>	1	\$ 189.3 x
8	Front LH fender <i>repair</i>	1	\$ 639.2 x
9	Front LH fender inner shield <i>Beland</i>	1	\$ <del>310.1</del> 187.90
10	Front LH fender inner shield clips (1 set) <i>new</i>	1	\$ <del>66</del> 30
11	Front LH knuckle arm <i>new</i>	1	\$ 636.4 ✓
12	Front LH knuckle arm bearing <i>200g d</i>	1	\$ 210.6 ✓
13	Front LH lower arm <i>3 piece</i>	1	\$ 412.2 ✓
14	Front LH shock absorber	1	\$ 640.1 ✓
			\$ 7677.5
Less 25% Disc			\$ 1919.4
Total			\$ 5758.12

### Special Nett Items

1	Front LH sport rim <i>ect</i>	\$ 800 550
2	Front LH tyre <i>new</i>	\$ 300 ✓
Total		\$ 1100

### Labour Cost

1	To check wheel alignment	\$ 100 80
2	Remove & reinstall front LH suspension	\$ 300 80
3	Remove, replace & repair consistent to the accident	\$ 1000 450
4	Respray painting	\$ 900 450
Total		\$ 2300

Grand Total \$ 9158.12

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 2936.97

L/s: 2350

050 days

050

2350




## 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 Internationale Des Experts En Automobile				
UNITED OVERSEAS INSURANCE LTD		Ref : CS/UOI19016253/Ald3n2		
3 ANSON ROAD #28-01 SPRINGLEAF TOWER SINGAPORE 079909		Date : 22-01-2020		
		Code : UOI2		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	YN 6316E	Veh. Inspected	SMA 9620S	
Policy No.		Coverage (\$)	0.00	
Claim No.	M11D08191910	Excess (\$)	0.00	
Assign From	JENNY LEW	Assign Date	12/09/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	TOYOTA ALTIS	c.c	1598	
Engine No.	HIDDEN	Year of Reg.	2009	
Chassis No.	MR053ZEE106161413	Colour	SILVER	
Odometer	201759	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/60 R15	YOKOHAMA	6 mm	
L/H Front Tyre	195/60 R15	YOKOHAMA	6 mm	
R/H Rear Tyre	195/60 R15	YOKOHAMA	6 mm	
L/H Rear Tyre	195/60 R15	YOKOHAMA	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	11/09/2019	Inspection Date	16/09/2019	
Survey held at	HUA MENG SPRAY PAINTING WKSP 1 KAKI BUKIT AVE 6 #01-61 AUTOBAY SINGAPORE 417883			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		5 Working Days		



# LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMA 9620S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	FRONT BUMPER	DEFORMED	530.10	530.10
2	FRONT BUMPER SIDE HOLDER @\$191.90	N/S NECESSARY	383.80	65.10
1	FRONT BUMPER LH FOG LAMP	NOT NECESSARY	411.90	-
1	FRONT BUMPER LH FOG LAMP COVER	NOT NECESSARY	188.20	-
1	SET FRONT BUMPER CLIPS	NECESSARY	66.00	30.00
1	FRONT LH HEADLAMP	CUT	2,993.60	745.60
1	FRONT LH HEADLAMP LOWER BRACKET	NOT NECESSARY	189.30	-
1	FRONT LH FENDER	TO REPAIR SEE LABOUR	639.20	-
1	FRONT LH FENDER INNER SHIELD	DEFORMED	310.10	187.90
1	SET FRONT LH FENDER INNER SHIELD CLIPS	NECESSARY	66.00	30.00
1	FRONT LH KNUCKLE ARM	NOT NECESSARY	636.40	-
1	FRONT LH KNUCKLE ARM BEARING	DAMAGED	210.60	210.60
1	FRONT LH LOWER ARM	NOT NECESSARY	412.20	-
1	FRONT LH SHOCK ABSORBER	NOT NECESSARY	640.10	-
	LESS 25% DISCOUNT		-1,919.38	-449.83
			5,758.12	1,349.47
<b>SPECIAL NETT ITEMS</b>				
1	FRONT LH SPORT RIM (SN)	CUT	800.00	550.00
1	FRONT LH TYRE (SN)	NOT NECESSARY	300.00	-
			1,100.00	550.00
<b>LABOUR</b>				
	TO CHECK WHEEL ALIGNMENT.		100.00	80.00
	REMOVE & REINSTALL FRONT LH SUSPENSION.		300.00	80.00
	REMOVE,REPLACE & REPAIR CONSISTENT TO THE ACCIDENT.INCLUSIVE OF THE REPAIR OF FRONT LH FENDER.		1,000.00	450.00
	RESPRAY PAINTING.		900.00	450.00
	-		-	-
	-		-	-
	-		-	-
			2,300.00	1,060.00
<b>GRAND TOTAL</b>			<b>9,158.12</b>	<b>2,959.47</b>



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,350.00
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Report Ref No. CS/UOI19016253/Atd3n2

ADRIAN LING WAI PING

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

Licensed Appraiser

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