

23/07/2019

ASS. REC. BY:

REF:

CS/CNB/901692/Kd3

Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Chns Tan

of

CNB

Date/Time: 25/09/2019 @ 5:11pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLR 73804

Insured:

PC 7477G

at Workshop in/e Autocline

Tel:

9336 8442.

of 43, Toh Guan Road East #02-36 enterprise hub

Policy No:

Claim No:

HOMCNBED019301266.

Sum Insured:

Excess:

Make of Veh:

D.O.A.

4/9/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

4:30pm @ 26/9/19

Person Contacted:

Anthony

Vehicle IN ☒ OUT

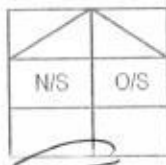
Date/Time	Action/Instruction	Notes
	SLR 73804 - NBA/INC19015746/y	DOA: 4/9/2019
	PC 7477G - NBA/INC19015746/y	DOA: 4/9/2019
	Submit #3543.80 , 5 days	(Red: 4910.70: 58%)

REG. BY: **Kenneth**

REF: **CNB**

ASSIGNMENT

From: _____ Date: **30/9/2019**
 Estimated Cost: _____
 OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: **SLR 73804**
 at Workshop m/s: **No Clinic Alan's United**
 of **Blk 7 Sg Ming Ind. Est. Sec. C #**
 Insured: **01-76**
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____



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

Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: **05** days Res.: Yes or No
 Lum Sum: **1-B.1** % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS **1up**

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

Veh No: **SLR 73804** Yr Regn: **08 17**
 Type: ☒ M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: **Toy Axi** C.C. **1496**
 Colour: **M.P. White** A/C: **Insured / Std / NI / NA**
 Sp. Reading: **161250** T/Radio: **Insured / Std / NI / NA**
 Eng/No: _____
 C/No: **NRE161 0020262**
 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: **185/65R15**
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front: _____ Rear: _____
 R/Bal. **9** mm R/Bal. **9** mm
 L/Bal. **9** mm L/Bal. **9** mm
 D.O.A. **4/9/19** D.O.L. **30/9/19**
 Survey held at: **Alan's United** ✓
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear N/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	GIA & EN not ready
	Follow email PO number
	RECEIVED 27 NOV 2019
	Billing refer to email (Fee)

Date/Time, File Pass to? ☐ : Prel. Report

1) **22/11 Typist** ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: **5**

Resurvey No. of Trip: **1**

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Survey Fee: **280**

Transportation: _____

S + RS: \$ _____

Photos: _____

Other: _____

TOTAL

Report Format: _____

Lump Sum / Fee: **3543.80**

Nivitha (LKK Auto)

From: Celine Fong (LKKAuto) <celinefong@lkkauto.com>
Sent: Wednesday, 25 September 2019 5:11 PM
To: Chris TAN (CNB); Olivia Lau (LKKAuto); assignments
Cc: SUR
Subject: RE: Quotation for vehicle survey

Dear Chris,

Thank you for the assignment.

Please provide location and contact details.

Dear Nivitha (Assignment Team),

Please follow up.

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315

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

From: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>
Sent: Wednesday, 25 September 2019 4:55 PM
To: Celine Fong (LKKAuto) <celinefong@lkkauto.com>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Quotation for vehicle survey

Message Classification: Confidential

Hi Celine

Please proceed to survey a private vehicle (SLR7380U) involved in an accident with a CNB vehicle. Details of accident are as follows:

Brief Details.

On 04/09/2019 at about 1725hrs, I was driving the CNB van, PC7477G along College Road leading slip road to CTE when I met up with an accident involving another vehicle SLR7380U. During that time, the traffic was heavy and I was driving behind the said car, SLR7380U and going very slow the traffic was slow, I had to apply intermittent braking along the way and at one point of time, I lost concentration and brake a bit slower causing my van to hit onto the rear of the car in front of me. No one was injured during the accident and the CCTV inside my van was faulty.

The repair quote and photos of the damaged vehicle are attached. I will email the details of the workshop separately.

PO will be issued through Gebiz within the week. Thanks.

Chris Tan
Logistics Officer
Corporate Services Division
Central Narcotics Bureau
DID: (65) 6557 4315



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Singapore-Global Firefighters & Paramedics Challenge!

Keeping Singapore Drug-Free 

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From: Celine Fong (LKKAuto) <celinefong@lkkauto.com>
Sent: Wednesday, 25 September 2019 3:04 PM
To: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Quotation for vehicle survey

Dear Chris,

Confirm survey fee still at \$280.00 (before GST).

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315

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

From: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>
Sent: Wednesday, 25 September 2019 2:18 PM
To: Olivia Lau (LKKAuto) <olivialau@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Quotation for vehicle survey

Message Classification: Confidential

Hi Olivia

Can you confirm the price please? Thanks.

Chris Tan
Logistics Officer
Corporate Services Division
Central Narcotics Bureau

DID: (65) 6557 4315



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From: Chris TAN (CNB)

Sent: Tuesday, 24 September 2019 3:55 PM

To: 'olivialau@lkkauto.com' <olivialau@lkkauto.com>

Subject: Quotation for vehicle survey

Message Classification: Confidential

Hi Olivia

Can I confirm the price for survey of damaged vehicle is still \$280.00? Thanks.

Chris Tan
Logistics Officer
Corporate Services Division
Central Narcotics Bureau
DID: (65) 6557 4315



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Nivitha (LKK Auto)

From: Shiau Chan (LKKAuto) <siewsc@lkkauto.com>
Sent: Thursday, 26 September 2019 2:41 PM
To: assignments
Subject: FW: ACCIDENT INVOLVING SLR7380U & PC7477G ALONG COLLEGE ROAD TURNING TO CTE (AYE) TOWARDS JURONG

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

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

From: Anthony Goh <anthony.goh@autoclinicgroup.com.sg>
Sent: Thursday, 26 September 2019 2:32 PM
To: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>
Cc: Celine Fong (LKKAuto) <celinefong@lkkauto.com>; SUR <sur@lkkauto.com>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>
Subject: Re: ACCIDENT INVOLVING SLR7380U & PC7477G ALONG COLLEGE ROAD TURNING TO CTE (AYE) TOWARDS JURONG

Without Prejudice

Dear All

Please refer below for repair workshop address;
Alan United
Blk 7 Sin Ming Industrial Estate Sector C #01-76 S(575642)
Attn: Alan

Please advise if next Monday is available for LKK to survey the damages?

Best Regards,

Anthony Goh
Director
Hp [+65 9336 8442](tel:+6593368442)

Autoclinic Group of Companies

48 Toh Guan Road East #02-136, Enterprise Hub | Singapore 608586 |

Office [+65 6686 2511](tel:+6566862511) | Fax [+65 6686 2509](tel:+6566862509) | info@autoclinicgroup.com.sg

Denise Tay (LKKAuto)

From: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>
Sent: Wednesday, 27 November 2019 3:05 PM
To: Denise Tay (LKKAuto); Admin-D (LKKAuto); Olivia Lau (LKKAuto); assignments
Cc: SUR
Subject: RE: Quotation for vehicle survey

Message Classification: Restricted

Hi Denise

Apologies for the delay, PO has been issued - HOMCNBEP019301266.

Chris Tan
Logistics Officer
Corporate Services Division
Central Narcotics Bureau
DID: (65) 6557 4315



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From: Denise Tay (LKKAuto) <denisetay@lkkauto.com>
Sent: Monday, 25 November 2019 11:27 AM
To: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>; Admin-D (LKKAuto) <admin-d@lkkauto.com>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>; assignments <assignments@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Quotation for vehicle survey

Dear Chris,

Any update on the PO number?

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: sur@lkkauto.com | fax: 6256-4315

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

From: Chris TAN (CNB) <Chris_TAN@cnb.gov.sg>
Sent: Wednesday, 20 November 2019 3:40 PM



GOVERNMENT OF SINGAPORE

PURCHASE ORDER

ISSUED

GENERAL INFORMATION

Purchase Order No. / Issue No. HOMCNBECI19301261 / 1
Purchase Order Reference No.
Purchase Order Description Survey of private vehicle SLR7380U
Type of Purchase Services
Purchase Order Date 27 Nov 2019

SUPPLIER INFORMATION

Trading Partner Reference No. 199607198R
Supplier Name LKK AUTO CONSULTANTS PTE LTD
GST Registered No. 19-9607198-R
Address 51 UBI AVENUE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE, 408933

CONTACT PERSON'S DETAILS

LKK AUTO CONSULTANTS PTE LTD

Email account@lkkauto.com
Contact No. 62563561
Fax No. 62564315

BUYER INFORMATION

Buyer Name Ministry of Home Affairs-Central Narcotics Bureau
Address PCC, Fin & Logs Office (B0602)

CONTACT PERSON'S DETAILS

Chris Tan

Email chris_tan@cnb.gov.sg
Contact No. 65574315
Fax No.

DETAILS OF PURCHASE ORDER

Description of Goods / Services See Annex A
Total Purchase Order Value 280.00 (SGD - Singapore Dollar)
Payment Terms 30 Days
Billing Location PCC, Fin & Logs Office (B0602)

SIGNATORY INFORMATION

Name ANGELINE LEOW
Designation Director Corporate Services
Purchase Order Signed Date 27 Nov 2019

ANNEX A

LIST OF ITEMS

1

Item No. 1

Survey of private vehicle SLR7380U

Unit of Measurement EACH

Quantity 1.0000

Unit Price 280.0000 (SGD)

Total Amount 280.00 (SGD)

Remarks

Instruction to Supplier

Delivery Information

S/N	Location	Delivery Date	Quantity	Delivery Terms
1	PCC, Fin & Logs Office (B0602)	30 Nov 2019	1.0000	Local Delivery

ANY OTHER INSTRUCTION(S)

ATTACHMENT INFORMATION

No attachments available.

MNA419117831 / National Assessment Centre Services - Bukit Merah
 ENTRY DATE & TIME: 05/09/2019 15:24
 SUBMITTED BY: ROSLI BIN ABDUL WAHAB

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	05/09/2019 15:24
Date Of Accident	04/09/2019 17:25
Exact Location Of Accident	COLLEGE ROAD TURNING TO CTE (AYE) TOWARDS JURONG
Country/State Of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR7380U
Insured/Policyholder	
Name Of Registered Owner	BUDDY TRANS SERVICES
Co Reg No	53329820B
Email Address	DAVELEE_SG@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96268559
Alternative Phone No	OFFICE-96268559

Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093708050-02
Cover Note Number	

Driver

Name of Driver	LEE CHEE YIN (LI ZHIXIAN)
NRIC No	S7623014E
Date Of Birth	27/07/1976
Occupation	OUTDOOR
Date Of Driving Pass	06/09/1996
Driving Experience	22 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96268559
Fax Number	
Contact Number	OTHERS-96268559
Email Address	DAVELEE_SG@YAHOO.COM

Address BLK 12 JALAN BUKIT MERAH
#03-5044
Postcode 150012
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 -
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? 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) 2
Passenger 1
NAME: : PASSENGER
GENDER: : FEMALE

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

PLEASE REFER TO 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 PC7477G
Vehicle Make/Model/Colour NISSAN
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver SUFYAN
NRIC/Passport Number
Contact Number 96362546
Address
Postcode
Insurance Company Name
Nature Of Damage

No..Of Passenger (Including Driver)

1

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodging 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.

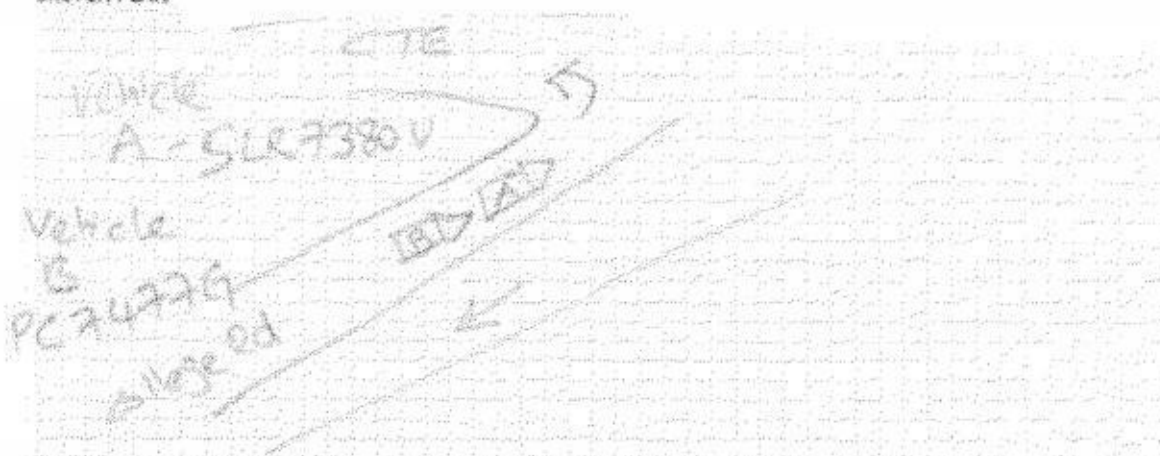
Policyholder's Signature
Date & Time

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

Reporting Centre Personnel's Signature
Name
NRIC/IN No.

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle B bang on vehicle A when vehicle A is at complete stop.

Vehicle A is at College Rd turning to slip rd to CTE (Jung Aye) direction.

Road condition is dry and not raining.

I am vehicle A driver after picked up a Grab heading at Block 6/7 SHH to Jung west.

DECLARATION

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

Policyholder's Signature

Date & Time

5/9/19



Driver's Signature

(If not a policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name

TAIC/FIN No:

08/09/2019

Loke (Jordon)



AUTOCLINIC PTE LTD

48 TOH GUAN ROAD EAST #02-136 Enterprise Hub Singapore 608586
TEL: 6686 2511 FAX: 6686 2509 Email: info@autoclinicgroup.com.sg
GST:201801145H RCB NO:201801145H

M/S : BUDDY TRANS SERVICES
12 JALAN BUKIT MERAH #03-5044

SINGAPORE 150012
TEL: 96268559
ATTN: Motor Claim Department

Your Ref No: -
Claim Type:
Accident Date: 04/09/2019

Estimate No: QUO1800014
Date: 19 Sep 2019
Policy No:
Veh Reg No: SLR7380U
Make/Model: TOYOTA COROLLA
AXIO 1.5X A
Chassis No: NRE1610020262
Engine No: 2NR8655546
Reg. Date: 25/08/2017

Estimate Repair Cost to Vehicle No : SLR7380U

Description	U/Price	Quantity	Cost	Amount
			SS	SS
Others				
1 BOOT LID	0.00	1 PC	685.80	✓
2 BOOT LID INNER LOCK	0.00	1 PC	94.30	X
3 BOOT LID RUBBER	0.00	1 PC	189.30	X
4 BOOT LID 'COROLLA' EMBLEM	0.00	1 PC	39.20	—
5 BOOT LID 'AXIO' EMBLEM	0.00	1 PC	44.20	—
6 BOOT LID LOGO	0.00	1 PC	52.70	—
7 BOOT LID OUTER CHROME	0.00	1 PC	298.10	—
8 TAIL LAMP	0.00	2 PC	637.30	✓ + 318.65
9 TAIL LAMP SIDE CLIP	0.00	2 PC	4.20	✓
10 TAIL LAMP CORNER PANEL	0.00	2 PC	159.20	X
11 REAR END PANEL	0.00	1 PC	602.10	✓
12 REAR END PANEL TOP GARNISH	0.00	1 PC	218.60	X
13 REAR SPARE TYRE BOARD	0.00	1 PC	390.70	X
14 REAR SPARE TYRE PANEL	0.00	1 PC	687.80	X
15 REAR BUMPER FASCIA	0.00	1 PC	559.70	✓
16 REAR BUMPER SIDE RETAINER S	0.00	2 PC	85.80	✓ + 42.90
17 REAR BUMPER SIDE RETAINER L	0.00	2 PC	101.70	✓ + 50.85
18 REAR BUMPER BRACKET	0.00	2 PC	92.80	X
19 REAR BUMPER REVERSE SENSOR SET	0.00	1 PC	300.00	2000
20 REAR NUMBER PLATE WITH BOX	0.00	1 PC	50.00	X
21 TO REMOVE ROOF LINING, FRONT AND REAR SEATS, TRIM BOARD AND CARPET	0.00	1 PC	80.00	601
22 TO APPLY UNDERSEALING	0.00	1 PC	100.00	601
23 TO PUTTY AND SPRAY REPLACED PARTS	0.00	1 PC	900.00	600
24 TO REMOVE, CUT-OUT DAMAGED PARTS, PANEL BEATING, WELDING, ALIGN, REFIX AND TO RENEW ABOVE PARTS	0.00	1 PC	1,000.00	600
				8,454.50

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:

7373.50

**AUTOCLINIC PTE LTD**

48 TOH GUAN ROAD EAST #02-136 Enterprise Hub Singapore 608586
TEL: 6686 2511 FAX: 6686 2509 Email: info@autoclinicgroup.com.sg
GST:201801145H RCB NO:201801145H

M/S : BUDDY TRANS SERVICES
12 JALAN BUKIT MERAH #03-5044

SINGAPORE 150012

TEL: 96268559

ATTN: Motor Claim Department

Your Ref No: -

Claim Type:

Accident Date: 04/09/2019

Estimate No: QUO1800014

Date: 19 Sep 2019

Policy No:

Veh Reg No: SLR7380U

Make/Model: TOYOTA COROLLA

AXIO 1.5X A

Chassis No: NRE1610020262

Engine No: 2NR8655546

Reg. Date: 25/08/2017

Estimate Repair Cost to Vehicle No : SLR7380U

Total	S\$ 8,454.50
Lump Sum Less 25%	-2,113.63
Total Amount payable	S\$ 6,340.87
Include GST @ 7% For 5,926.05 = \$414.82	

TOTAL: SINGAPORE DOLLAR SIX THOUSAND THREE HUNDRED FORTY AND CENTS EIGHTY SEVEN ONLY

For AUTOCLINIC PTE LTD


AUTHORISED SIGNATURE



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				
CENTRAL NARCOTICS BUREAU			Ref : CS/CNB19016992/Ktd3s2	
CORPORATE SERVICES DIVISION BLK B POLICE CANTONMENT COMPLEX 393 NEW BRIDGE ROADSINGAPORE 088763			Date : 28-11-2019	
ATTN: CHRIS TAN			Code : CNB	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	PC 7477G	Veh. Inspected	SLR 7380U	
Policy No.		Coverage (\$)	0.00	
Claim No.	HOMCNBEPO19301266	Excess (\$)	0.00	
Assign From	CHRIS TAN	Assign Date	25/09/2019	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA AXIO (A)	c.c	1496	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	NRE1610020262	Colour	METALLIC PEARL WHITE	
Odometer	161250	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	185/65 R15	MICHELIN	9 mm	
L/H Front Tyre	185/65 R15	MICHELIN	9 mm	
R/H Rear Tyre	185/65 R15	MICHELIN	9 mm	
L/H Rear Tyre	185/65 R15	MICHELIN	9 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	04/09/2019	Inspection Date	30/09/2019	
Survey held at	BLK 7 SIN MING IND. EST SEC C #01-76			
Repairer	AUTOCLINIC PTE LTD			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		5 Working Days		



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLR 7380U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BOOT LID	BENT	685.80	685.80
1	BOOT LID INNER LOCK	TO REPAIR SEE LABOUR	94.30	-
1	BOOT LID RUBBER	SERVICEABLE	189.30	-
1	BOOT LID 'COROLLA' EMBLEM	NECESSARY	39.20	39.20
1	BOOT LID 'AXIO' EMBLEM	NECESSARY	44.20	44.20
1	BOOT LID LOGO	NECESSARY	52.70	52.70
1	BOOT LID OUTER CHROME	WARPED	298.10	298.10
2	TAIL LAMP	N/S MTG CRACKED	637.30	318.65
2	TAIL LAMP SIDE CLIP	NECESSARY	4.20	4.20
2	TAIL LAMP CORNER PANEL	TO REPAIR SEE LABOUR	159.20	-
1	REAR END PANEL	BENT	602.10	602.10
1	REAR END PANEL TOP GARNISH	SERVICEABLE	218.60	-
1	REAR SPARE TYRE BOARD	SERVICEABLE	390.70	-
1	REAR SPARE TYRE PANEL	TO REPAIR SEE LABOUR	687.80	-
1	REAR BUMPER FASCIA	BUCKLED	559.70	559.70
2	REAR BUMPER SIDE RETAINER S	N/S DISTORTED	85.80	42.90
2	REAR BUMPER SIDE RETAINER L	N/S DISTORTED	101.70	50.85
2	REAR BUMPER BRACKET	TO REPAIR SEE LABOUR	92.80	-
1	REAR NUMBER PLATE WITH BOX	SERVICEABLE	50.00	-
	LESS 25% DISCOUNT		-	-674.60
			4,993.50	2,023.80
SPECIAL NETT ITEMS				
1	SET REAR BUMPER REVERSE SENSOR (SN)	SHORTED	300.00	200.00
			300.00	200.00
LABOUR				
	TO REMOVE ROOF LINING, FRONT AND REAR SEATS, TRIM BOARD AND CARPET.		80.00	60.00
	TO APPLY UNDERSEALING.		100.00	60.00
	TO PUTTY AND SPRAY REPLACED PARTS.		900.00	600.00



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE, CUT-OUT DAMAGED PARTS, PANEL BEATING, WELDING, ALIGN, REFIX AND TO RENEW ABOVE PARTS. INCLUSIVE OF THE REPAIR OF BOOT LID INNER LOCK, TAIL LAMP CORNER PANEL, REAR SPARE TYRE PANEL AND REAR BUMPER BRACKET.		1,000.00	600.00
			2,080.00	1,320.00
GRAND TOTAL			7,373.50	3,543.80
RECOMMENDED COST OF REPAIRS				3,543.80

Report Ref No. CS/CNB19016992/Ktd3s2

KONG SENG CHEONG

Licensed Appraiser

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