

Accident Photo



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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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 | 05/10/2018 16:35 |
| Date Of Accident | 03/10/2018 16:25 |
| Exact Location Of Accident | PIE TOWARDS CHANGI |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------------|
| Vehicle Registration Number | SKP308Z |
| Insured/Policyholder | |
| Name Of Registered Owner | HON SIN YEA, SAMANTHA |
| NRIC No | S8900334B |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-93261711 |
| Alternative Phone No | OTHERS-NOPHONE |

Vehicle Particulars

| | |
|--------------|--------|
| Manufacturer | BMW |
| Model | 335i A |

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

| | |
|------------------|-------------|
| Vehicle Category | PRIVATE CAR |
|------------------|-------------|

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5093096153-01 |
| Cover Note Number | |

Driver

| | |
|----------------------|-------------------------|
| Name of Driver | TANG KAI LOON, NICHOLAS |
| NRIC No | S8228994A |
| Date Of Birth | 31/08/1982 |
| Occupation | INDOOR |
| Date Of Driving Pass | 05/10/2012 |
| Driving Experience | 5 YEARS AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-82008343 |
| Fax Number | |
| Contact Number | |

| | |
|---|-----------------------------------|
| Address | BLK 539 BUKIT BATOK ST 52 #08-577 |
| Postcode | 650539 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | SPOUSE |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General information of the Accident

| | |
|--------------------|-----------------|
| Type Of Accident | CHAIN COLLISION |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

Other Information

| | |
|---|-----|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles involved in the accident | |
| 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 | TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY |
| Police Station Address | ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 65470000 - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

refer to police report.

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 | SLQ137H |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | TAN LIAN HIANG |
| NRIC/Passport Number | S0186833J |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLT7853L
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver LIM JIUNN YUAN
NRIC/Passport Number S1475780E
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SGS773U
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 OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SLL3570X
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 OTHER VEHICLE PROPERTY 5

Vehicle Registration Number WWJ7899
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TANG KAI LOON NICHOLAS

Approximate Age

Injuries Sustain

Injured person in which vehicle? SKP308Z

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan Pg. 1

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 reudiate 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.: _____



Police Report Pg. 1



**SINGAPORE
POLICE FORCE**



T/20181004/2140

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20181004/2140

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|---|------------|------------------------------|---|--------------------|----------------------------|
| Date/Time Report Made: 04/10/2018 17:41 | | Vide Report No.: | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: TANG KAI LOON, NICHOLAS | | | Address: APT BLK 539 BUKIT BATOK STREET 52 #08-577 GUILIN BREEZE SINGAPORE 650539 | | |
| ID Type / ID No.: NRIC NO / S8228994A | | | Contact No.: Home/Office: Mobile: 82008343 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 36 | Date of Birth: 31/08/1982 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: MANAGER | | | Driving Licence Information: Class: 3 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---|---------------------------------|------------------------------------|---|---|
| Type of Accident: | Injury Conveyed By Ambulance | Drink Drive: No | Date/Time of Accident: 03/10/2018 16:25 | Type of Location: Straight Road |
| Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE (AP) 18KM, LP874F | | | | |
| 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 Rear | | | | Anyone conveyed by ambulance: Yes |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|-------|--|-------|---------------------|-----------------|
| SGS773U | Car | BMW | 520I 2.0L AT D/AB 2WD 4DR GAS/D NAV | Blue | Slightly Damaged | 0 |
| SKP308Z | Car | BMW | 335I A | Black | Slightly Damaged | 0 |
| SLL3570X | Car | MAZDA | MAZDA3 4- DOOR SEDAN 1.5L SP.6EAT | Blue | Slightly Damaged | 0 |

Police Report Pg. 2



**SINGAPORE
POLICE FORCE**



T/20181004/2140

2 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20181004/2140

CONTINUATION OF REPORT

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|------------------|--|--------|---------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| SLQ137H | Car | MERCEDES BENZ | A200 FL STYLE (R17 HLG) | Silver | Slightly Damaged | 0 |
| SLT7853L | Car | KIA | NIRO HYBRID 1.6 GDI DCT SUNROOF | Brown | Slightly Damaged | 0 |
| WWJ7899 | Car | | | | Slightly Damaged | 0 |

Brief Details.

ON THE ABOVE MENTIONED DATE TIME AND LOCATION
I WAS TRAVELLING ALONG THE SAID LOCATION. THE VEHICLES ARE AS FOLLOWS (IN
CHOROLOGICAL ORDER; A1(SGS773U), A2(SLT7853L), B1(SKP308Z), A3(SLQ137H),
A4(SLL3570X), B2(WWJ7899). I AM B1, I NOTICE THE VEHICLE INFRONT OF ME A2 DID A SUDDEN
BRAKE. IN ORDER NOT TO MAKE THINGS WORST, I APPLIED BRAKE AS WELL. AT THAT
MOMENT, MY VEHICLE ONLY HAD A SLIGHT CONTACT WITH THE REAR. HOWEVER, THE
VEHICLE AT MY REAR A3, WAS UNABLE TO BRAKE ON TIME AND COLLIDED ONTO MY REAR.
THE MOMENTUM CAUSED BY THE A3 MADE MY VEHICLE WORSEN THE DAMAGES MADE TO
THE VEHICLE INFRONT OF ME. SUBSEQUENTLY, A4 COLLIDED ONTO A3 AND B2 COLLIDED
ONTO A4. WE GOT OFF AND EXCHANGE PARTICULARS. I WAS ADMITTED TO MOUNT
ELIZABETH HOSPITAL FOR FUTHER MEDICAL TREATMENT AND WAS GIVEN 5 DAYS MC.

THE PARTICULARS ARE AS FOLLOWS:

NAME: LIM JIUNN YUAN (A2)

NRIC: S1475780E

NAME: TAN LIAN HIANG (A3)

NRIC: S0186833J



SINGAPORE
POLICE FORCE



T/20181004/2140

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3



Report No. T/20181004/2140

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: TP / NG JIN SHENG | Signature Of Informant:  |
| Signature Of Interpreter: Not applicable | Date/Time: 04/10/2018 17:41 |
| Officer In Charge Of Case: TP / GIT / Sr Staff Sgt RAZIZ BIN TAHAR Contact No.: 65476200 | Classification Of Case: SINGAPORE POLICE FORCE |
| Authentication Stamp NP168 | Signature:  |



Mount Elizabeth™
NOVENA

MC NO: PNH-2018-018084

MEDICAL CERTIFICATE

NAME: TANG, KAI LOON NICHOLAS

Identification No: S8228994A

THIS IS TO CERTIFY THAT THE ABOVE IS UNFIT FOR DUTY FOR A PERIOD OF **5** DAYS
FROM **03-Oct-2018** TO **07-Oct-2018**

TYPE OF MEDICAL LEAVE GRANTED: **HOSPITALIZATION LEAVE**

ADMITTED ON : **03-Oct-2018**

DISCHARGED ON : **04-Oct-2018**

DATE

04-Oct-2018

SIGNATURE, NAME (IN BLOCK LETTERS) AND DESIGNATION

Wong, Siang Sung
13693z

A handwritten signature in black ink, appearing to read 'Wong Siang Sung', written over the printed name and ID number.

This certificate is not valid for absence from court or other judicial proceedings unless specifically stated*

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Addendum Sheet

**GENERAL
INSURANCE**

GENERAL INSURANCE ASSOCIATION OF SINGAPORE REGIONAL MANAGEMENT CENTRE
 4 North Bridge Road Singapore 049000
 Tel: 6733 8284 (Ext: 224) Fax: 6733 8285
 Operating Hours: Monday to Friday, 09:00 - 5:00
 (For information only, not for business)

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with which you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MTA118129447 Vehicle Registration No: SAP 388Z
 Name (as on ID): TANG KAI LOON, NICHOLAS NRIC/ID/Passport No: S81289945
 (*Vehicle Driver / Vehicle Owner) (*): Please delete as appropriate
 Address: _____ Singapore
 Contact (Tel): _____ Mobile No: _____
 Email Address: _____
 Date of Accident: 03/08/2018 Time of Accident: 14:25
 Place of Accident: 711 EDWARDS CHANGI
 Insurance Company: NTUC INCOME INSURANCE CO-OPERATIVE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TO AMEND 'THIRD PARTY' TO 'OWN DAMAGE' CLAIM.

Policyholder / Driver's Signature
 Date: 15/10/2018

Reporting Centre Personnel's Signature
 Name: _____
 Title: _____




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 | | | | |
|--|--|-----------------|--------------------------------|---|
| AIG ASIA PACIFIC INSURANCE PTE LTD | | | Ref : CS3/AIG18018217/Ayd3e2-1 | |
| 78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120 ATTN : MAVIS CHEW | | | Date : 21-10-2019 |  |
| | | | Code : AIG | |
| 1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION) | | | | |
| Insured Veh. | SLL 3570X | Veh. Inspected | SLQ 137H | |
| Policy No. | 2100503147-01 | Coverage (\$) | 0.00 | |
| Claim No. | 1234823063SG | Excess (\$) | 0.00 | |
| Assign From | MAVIS CHEW | Assign Date | 09/10/2019 | |
| 2. Vehicle Particulars & Condition | | | | |
| Make & Model | MERCEDES BENZ A200 | c.c | 1595 | |
| Engine No. | HIDDEN | Year of Reg. | 2016 | |
| Chassis No. | WDD1760432J489142 | Colour | SILVER | |
| Odometer | 19236 | Steering | IN ORDER | |
| Brakes | IN ORDER | Modification | SPORTS RIM | |
| General | GOOD | | | |
| 3. Conditions of Tyres | | | | |
| | Size | Make | Balance | |
| R/H Front Tyre | 225/45 R17 | BRIDGESTONE | 6 mm | |
| L/H Front Tyre | 225/45 R17 | BRIDGESTONE | 6 mm | |
| R/H Rear Tyre | 225/45 R17 | BRIDGESTONE | 6 mm | |
| L/H Rear Tyre | 225/45 R17 | BRIDGESTONE | 6 mm | |
| 4. Description of Damages | | | | |
| THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. | | | | |
| REPAIR CONDITION SEE DETAILS. | | | | |
| 5. General Information | | | | |
| Accident Date | 03/10/2018 | Inspection Date | 17/10/2019 | |
| Survey held at | PRECISE AUTO SERVICE NO.1 KAKI BUKIT AVE 6 #02-34/36 SINGAPORE 417883 | | | |
| 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: | | 14 Working Days | | |



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TEL: 6256 3561 FAX: 6256 4315

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

Page No.:1 of 5

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLQ 137H

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----------------------------|--------------------------------------|----------------------|---------------------------|-------------------|
| REPLACEMENT OF PARTS | | | | |
| 1 | FRONT BUMPER FASCIA | REPLACED | 1,240.22 | 1,240.22 |
| 2 | FRONT BUMPER SIDE RETAINER | REPLACED | 70.00 | 70.00 |
| 1 | FRONT BUMPER LOWER AIR GRILLE | REPLACED | 128.00 | 128.00 |
| 1 | FRONT BUMPER LOWER CHROME MOULDING | REPLACED | 168.58 | 168.58 |
| 1 | FRONT BUMPER REINFORCEMENT | REPLACED | 285.65 | 285.65 |
| 2 | FRONT BUMPER REINFORCEMENT BRACKET | REPLACED | 268.88 | 268.88 |
| 1 | FRONT BUMPER SPONGE | REPLACED | 108.48 | 108.48 |
| 1 | FRONT BUMPER EMBLEM | REPLACED | 55.10 | 55.10 |
| 1 | FRONT BUMPER TOW HOOK COVER | REPLACED | 50.00 | 50.00 |
| 16 | FRONT BUMPER CLIP | REPLACED | 128.00 | 50.00 |
| 4 | FRONT BUMPER PDC SENSOR | REPLACED (2PCS ONLY) | 637.36 | 318.68 |
| 4 | FRONT BUMPER PDC SENSOR HOLDER | SERVICEABLE | 117.60 | - |
| 1 | FRONT BUMPER PDC SENSOR WIRE HARNESS | SERVICEABLE | 184.95 | - |
| 1 | FRONT BUMPER RADAR SENSOR | REPLACED | 631.85 | 631.85 |
| 1 | FRONT BUMPER RADAR SENSOR BRACKET | REPLACED | 39.15 | 39.15 |
| 2 | FRONT BUMPER BRACKET | REPLACED | 120.00 | 120.00 |
| 1 | FRONT BUMPER LOWER COVER | REPLACED | 228.23 | 228.23 |
| 8 | FRONT BUMPER LOWER COVER CLIP | REPLACED | 64.00 | 20.00 |
| 2 | FRONT BUMPER LOWER COVER BRACKET | SERVICEABLE | 136.32 | - |
| 2 | FRONT BUMPER FOG LAMP COVER GARNISH | SERVICEABLE | 86.22 | - |
| 1 | FRONT GRILLE - OUTER | REPLACED | 440.00 | 440.00 |
| 1 | FRONT GRILLE - INNER | REPLACED | 198.00 | 198.00 |
| 1 | FRONT GRILLE OUTER GARNISH | REPLACED | 292.45 | 292.45 |
| 1 | FRONT GRILLE LOGO EMBLEM | REPLACED | 122.74 | 122.74 |
| 1 | FRONT GRILLE LOGO EMBLEM GARNISH | REPLACED | 66.44 | 66.44 |
| 2 | FRONT GRILLE CHROME | REPLACED | 133.82 | 133.82 |
| 6 | FRONT GRILLE CLIP | REPLACED | 48.00 | 48.00 |
| 1 | FRONT NUMBER PLATE PLINTH | REPLACED | 58.66 | 58.66 |
| 2 | HEADLAMP | REPLACED | 1,569.88 | 1,569.88 |
| 2 | HEADLAMP BRACKET | SERVICEABLE | 242.96 | - |

Report Ref No. CS3/AIG18018217/Ayd3e2-1



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

Page No.2 of 5

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|---|---------------|---------------------------|-------------------|
| 1 | FRONT SUPPORT PANEL | REPLACED | 596.97 | 596.97 |
| 2 | FRONT SUPPORT PANEL SIDE AIR GRILLE GARNISH | REPLACED | 84.22 | 84.22 |
| 1 | FRONT TURBO INTERCOOLER | REPLACED | 784.65 | 784.65 |
| 1 | FRONT TURBO INTERCOOLER AIR GRILLE GARNISH | SERVICEABLE | 98.11 | - |
| 2 | FRONT TURBO INTERCOOLER BRACKET | SERVICEABLE | 29.20 | - |
| 1 | AIRCOND CONDENSOR | REPLACED | 1,018.64 | 1,018.64 |
| 2 | AIRCOND CONDENSOR SIDE AIR GRILLE GARNISH | REPLACED | 223.48 | 223.48 |
| 1 | RADIATOR ASSY | REPLACED | 789.99 | 789.99 |
| 2 | RADIATOR TOP MOUNTING | REPLACED | 34.28 | 34.28 |
| 2 | RADIATOR TOP MOUNTING CLIP | REPLACED | 16.00 | 16.00 |
| 2 | RADIATOR LOWER BRACKET | SERVICEABLE | 100.00 | - |
| 1 | RADIATOR COOLING FAN ASSY | REPLACED | 703.26 | 703.26 |
| 1 | RADIATOR FILLER PIPE | SERVICEABLE | 197.11 | - |
| 1 | FRONT BONNET LOCK | SERVICEABLE | 114.02 | - |
| 1 | FRONT BONNET LOCK SENSOR SWITCH ASSY | SERVICEABLE | 168.11 | - |
| 1 | FRONT AIR CLEANER INLET DUCT | REPLACED | 139.16 | 139.16 |
| 2 | FRONT HORN ASSY | SERVICEABLE | 220.00 | - |
| 1 | TAILGATE ASSY | REPLACED | 1,538.11 | 1,538.11 |
| 1 | TAILGATE WEATHERSTRIP | REPLACED | 168.16 | 168.16 |
| 2 | TAILGATE RUBBER STOPPER | SERVICEABLE | 23.60 | - |
| 1 | TAILGATE UPPER LOCK | REPLACED | 190.00 | 190.00 |
| 1 | TAILGATE LOWER LOCK STRIKER | NOT NECESSARY | 66.81 | - |
| 1 | TAILGATE INNER TRIMBOARD | REPLACED | 363.11 | 363.11 |
| 1 | TAILGATE LOWER EDGE TRIMBOARD | REPLACED | 488.16 | 488.16 |
| 2 | TAILGATE DAMPER | SERVICEABLE | 580.00 | - |
| 1 | TAILGATE LOGO EMBLEM | REPLACED | 48.00 | 48.00 |
| 1 | TAILGATE A200 EMBLEM | REPLACED | 60.00 | 60.00 |
| 14 | REAR WINDSCREEN GLASS CLIP | REPLACED | 112.00 | 50.00 |
| 2 | TAILLAMP | REPLACED | 1,075.98 | 1,075.98 |
| 2 | TAILLAMP CLIP | REPLACED | 16.00 | 16.00 |
| 1 | REAR BUMPER ASSY | REPLACED | 1,175.04 | 1,175.04 |
| 2 | REAR BUMPER SIDE RETAINER | REPLACED | 70.22 | 70.22 |
| 2 | REAR BUMPER SIDE ATTACHMENT | REPLACED | 58.32 | 58.32 |

Report Ref No. CS3/AIG18018217/Ayd3e2-1



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

TEL: 6256 3581 FAX: 6256 4315

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

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| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|---|----------------------|---------------------------|-------------------|
| 1 | REAR BUMPER CENTRE RETAINER | REPLACED | 96.31 | 96.31 |
| 1 | REAR BUMPER REINFORCEMENT | REPLACED | 417.32 | 417.32 |
| 1 | REAR BUMPER TOW HOOK COVER | REPLACED | 60.00 | 60.00 |
| 6 | REAR BUMPER PDC SENSOR | REPLACED (2PCS ONLY) | 1,304.40 | 434.80 |
| 6 | REAR BUMPER PDC SENSOR HOLDER | REPLACED | 108.66 | 108.66 |
| 1 | REAR BUMPER PDC SENSOR WIRE HARNESS | SERVICEABLE | 279.11 | - |
| 1 | REAR BUMPER LOWER DIFFUSER | REPLACED | 290.00 | 290.00 |
| 2 | REAR BUMPER LOWER BRACKET | REPLACED | 96.28 | 96.28 |
| 10 | REAR BUMPER CLIP | REPLACED | 80.00 | 30.00 |
| 1 | REAR END PANEL | REPAIRED SEE LABOUR | 777.41 | - |
| 1 | REAR END PANEL TOP TRIM | REPLACED | 199.68 | 199.68 |
| 4 | REAR END PANEL TOP TRIM CLIP | REPLACED | 32.00 | 10.00 |
| 1 | REAR EXHAUST SILENCER | REPAIRED SEE LABOUR | 1,296.48 | - |
| 1 | REAR EXHAUST SILENCER HEAT SHIELD | REPLACED | 88.17 | 88.17 |
| 2 | REAR EXHAUST SILENCER MOUNTING | SERVICEABLE | 79.32 | - |
| | LESS 10% DISCOUNT | | - | -1,823.58 |
| | | | 24,477.39 | 16,412.20 |
| | SPECIAL NETT ITEMS | | | |
| 1 | TAILGATE C&C EMBLEM (SN) | REPLACED | 58.00 | 58.00 |
| 1 | SET REAR WINDSCREEN GLASS REPLACEMENT KIT (SN) | REPLACED | 185.00 | 185.00 |
| 2 | TAILLAMP SEALANT (SN) | REPLACED | 100.00 | 40.00 |
| 1 | FRONT NUMBER PLATE (EMBOSS) (SN) | REPLACED | 29.00 | 29.00 |
| 1 | FRONT NUMBER PLATE CASING (SN) | REPLACED | 45.00 | 30.00 |
| | | | 417.00 | 342.00 |
| | LABOUR | | | |
| | TO PROVIDE TOWING SERVICE USING "KING DOLLY". | | 120.00 | 110.00 |
| | TO REMOVE / REFIT FRONT AND REAR WIRE HARNESS, ALL RELATED CONNECTORS, CHECK PROPER FUNCTION. FOCUS HEADLIGHTS. | | 180.00 | 150.00 |
| | TO APPLY UNDERSEAL AND RUST-PROOFING ON THE AFFECTED AREAS. | | 280.00 | 60.00 |

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| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|--------------------|---|---------------|---------------------------|-------------------|
| | TO REMOVE / REFIT BOOT GARNISHES, SPEAKERS, INTERIOR GARNISHES, CARPETS WHERE NECESSARY. | | 180.00 | 80.00 |
| | TO PERFORM DIAGNOSTIC CHECKS ON CONTROL UNITS. RESET TO FACTORY SPECIFICATIONS. | | 380.00 | 150.00 |
| | TO REMOVE / REFIT REAR WINDSCREEN GLASS. | | 180.00 | 120.00 |
| | TO REMOVE / REFIT EXHAUST ASSEMBLY AND COOLING FAN ASSY WITH ALL ATTACHMENTS, BRACKETS AND HOLDERS. | | 280.00 | 80.00 |
| | TO REMOVE / RENEW AIR-CON CONDENSER WITH ALL NECESSARY PIPES AND HOSES. VACUUM AND REPLENISH COOLING AGENT. CHECK FOR PROPER FUNCTION. | | 250.00 | 60.00 |
| | TO REMOVE / RENEW RADIATOR ASSEMBLY WITH ALL CONNECTING HOSES. REPLENISH COOLING AGENT AND CHECK FOR PROPER FUNCTION (INCLUDE COOLANT). | | 250.00 | 60.00 |
| | TO SET VEHICLE ON CHASSIS ALIGNMENT BENCH, INCLUSIVE OF ALL NECESSARY PREPARATORY WORKS. | NOT NECESSARY | 380.00 | - |
| | TO TRANSFER TAILGATE MECHANISMS WITH MOTOR ASSEMBLY AND ALL ATTACHMENTS. | | 250.00 | 80.00 |
| | TO REMOVE / REFIX ENGINE FRONT TURBO INTERCOOLER. CHECK FUNCTION. | | 120.00 | 50.00 |
| | TO SPRAY PAINT FRONT BUMPER FASCIA, FRONT MAIN GRILLE, FRONT BONNET, BOTH FRONT FENDERS, REAR BUMPER FASCIA, REAR END PANEL, REAR TRUNK LID, BOTH REAR FENDERS AND ETCS., INCLUSIVE OF PREPARATORY WORKS AND PAINTING MATERIALS. | | 2,800.00 | 1,500.00 |
| | TO REMOVE ALL DAMAGED PARTS WITH ALL NECESSARY COMPONENTS / ATTACHMENTS. TO APPLY HOT-WORKS WHERE NECESSARY, STRAIGHTEN CHASSIS MEMBERS, REPAIR / RESHAPE DENTED BODY PANELS, IN ACCORDANCE WITH FACTORY SPECIFICATIONS. REPLACE DAMAGED PARTS, REFIT AND ALIGN INTO POSITION. REFIT ALL NECESSARY COMPONENTS / ATTACHMENTS. INCLUSIVE OF THE REPAIR OF REAR END PANEL AND REAR EXHAUST SILENCER. | | 3,000.00 | 2,000.00 |
| | | | 8,650.00 | 4,500.00 |
| GRAND TOTAL | | | 33,544.39 | 21,254.20 |

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| | | | |
|--|--|--|-----------|
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (AMOUNT AGREED AND ACCEPTED BY REPAIRER) | | | 17,000.00 |
|--|--|--|-----------|

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ADRIAN LING WAI PING

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

Licensed Appraiser

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