

ASS. REC. BY:

REF: SMO19017894/4yd3<sup>n2</sup>

Special Instruction:

Assignment:

Menmen

ASSIGNMENT (Office)

From (Person):

Ruth Chua Gek

of

SMO

Date/Time:

10/10/19 @ 8:15am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJY 8374T

Insured:

XD 3427C

at Workshop in/s

Kaizen Motor

Tel:

6384 1956 / 91500670

of

68 Kaler Bukit Ave 6 #02-12

Policy No:

D18MTPCRE003854

Claim No:

CMTD1904750

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

5/10/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

10:58am @ 10/10/19

Person Contacted:

Shawn

Vehicle:

IN / OUT

Date/Time

Action/Instruction

Estimate ✓

SJY 8374T - CC6 / AXA 11000552 / Ky / P292

D.O.A. 3/01/2011

XD 3427C - X

14/10 -

Reused via menmen preli advise

photo O.K.

(08/11/13) wef.  
ASS. REC. BY: Marcus

REF:

50m /  
**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To inspect Vehicle No: **SY83747**  
at Workshop m/s: **Kaizen**  
of \_\_\_\_\_  
Insured: \_\_\_\_\_  
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: **23k.**

IDAC Accident Report: \_\_\_\_\_

Consistent? : Yes or No

GIA / PR Seen: **1**

Consistent? : Yes or No

Est. Repairs: **4** days

Res.: Yes or No

Lum Sum: **2** %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

**LTA16100**

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No: **SY83747** Yr Regn: **10 10**  
Type: ☒ M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or **CA**

Make: **ALFA ROMEO**

Colour: **Red**

Sp. Reading: **143612**

Eng/No: \_\_\_\_\_

C/No: **2AR939000 07269014**

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt or

Brake: ☒ In order / Jammed / Leaked / Burnt or

Modi: ☒ Nil / S/Rim / STD A/Rim or

Tyre Size: F: **235/45R18**

R: \_\_\_\_\_

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

TOYO / YOKO or

Front: **6** mm

R/Bal. **6** mm

L/Bal. **6** mm

D.O.A. **5/10/19**

Survey held at \_\_\_\_\_

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

**N/A**

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

**15/10/19 contact w/ #3200 w/ Shown. (Red \$7958-86, 71%)**

RECEIVED 10 OCT 2019

Date/Time: File Pass to?

☐ : Preli. Report  
☐ : Final Report

Days Of Repair: **4**

Resurvey No. of Trip: **1**

Survey Fee:

Transportation:

Photos:

Others:

TOTAL

Report Format:

Lump Sum I.B.I. (\$

**3200f**)

Add Fee:

☐ : Site Insp (\$ \_\_\_\_\_)  
☐ : Interview (\$ \_\_\_\_\_)  
☐ : Tech. Invs (\$ \_\_\_\_\_)  
☐ : Weekend (\$ \_\_\_\_\_)

**350**

**11**

**361**

Note: This document has not been finalised.  
**LKK Auto Consultants Pte Ltd** (Co.Reg.No:199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

To: Somp Insurance Singapore Pte. Ltd.  
50 Raffles Place  
#05-01/06, Singapore Land Tower  
Singapore 048623

From: LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933

Attn: Ruth Chua Gek Tiang

Date: 14 Oct 2019

**Preliminary Advice**

Insured Vehicle No	: XD3427C	Accident Date	: 05/10/2019
TP Vehicle No	: SJY8374T	Assignment Date	: 10/10/2019
Make	:	Est. Duration of Repair	: 4.00
Date of Inspection	: 10/10/2019		
Inspection At	: KAIZEN MOTORS PTE LTD (HQ) 68 KAKI BUKIT AVE 6, #02-12 ARK @ KAKI BUKIT SINGAPORE 417896		

**Point of Impact / General Description of Damages**

The vehicle sustained impact / damages n/s front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	10,428.84
Revised Amount	:S\$	4,009.68
Check Items (Estimated)	:S\$	0.00
Total	:S\$	4,009.68
Lump Sum Repair	:S\$	

**Total Loss Consideration**

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

**Remarks**

- ( ) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- ( ) The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- ( x ) Other comments : Survey on "wp"

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	07 Oct 2019		10 Oct 2019 08:15 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
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### CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	ASPHALT SPECIALIST SERVICES PTE LTD, Co. Reg. No.: 200202155K			
Main Claimant:	LER JUN HONG, ID: S8802995Z			
Vehicle Reg. No.:	SJY8374T	Date of Loss:	05/10/2019 09:00 - :59	
Claim Type:	TP / CMTD1904750	Policy/Cover Note No.:	D18MTPCVE003854 (TP, Fire & Theft)	
Vehicle Reg. No. (Insured):	XD3427C	Policy No. (Claimant):		
		Excess:		
Repairer:	Kaizen Motors Pte Ltd (HQ) 68 KAKI BUKIT AVE 6, #02-12 ARK @ KAKI BUKIT, 417896 Kaki Bukit - Tel:			
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Ruth Chua Gek Tiang - 6329 5153]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... <b>[Final Rpt due 21/10/2019]</b>			
Driver/Custodian (Insured):	CHI SHENGLI (), NRIC: G8166653P, Tel: +6585756983 Email: -			

[View All](#)   [Compose Case Mail](#)

### ASSOCIATED MAIL RECEIVED

There are no mail for this case.

[View All](#)   [Search Tasks](#)   [Create New Task](#)   [Complete](#)

### ALL ASSOCIATED TASKS [ ]

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Nice / Rare Vehicle  
Registration Number

- Free VCOM evaluation
- Free grooming and 6 months maintenance
- In-house workshop ensures quality service
- Member of SVTA and hire purchase association
- 100% deposit refund for unapproved loan

 **YONG LEE SENG MOTOR PTE LTD**

Sort by Date Posted ▾ 20 results/page ▾

Advanced Search  Submit

20 results/page

[https://www.sgcar mart.com/used\\_cars/listing.php?RGD=2010&MOD=Alfa Romeo 159&RPG=20&VE...](https://www.sgcar mart.com/used_cars/listing.php?RGD=2010&MOD=Alfa Romeo 159&RPG=20&VE...) 10-Oct-19

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	675C
<b>Vehicle Details</b>	
Vehicle No.:	SJY8374T
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Oct 2019
Vehicle Make:	ALFA ROMEO
Vehicle Model:	ALFA 159 2.2JTS.SELESPEED
Primary Colour:	Red
Manufacturing Year:	2010
Engine No.:	939A50001740838
Chassis No.:	ZAR93900007269014
Maximum Power Output:	136.0 kW (182 bhp)
Open Market Value:	\$23,716.00
Original Registration Date:	08 Oct 2010
First Registration Date:	08 Oct 2010
Transfer Count:	2
Actual ARF Paid:	\$23,716.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 Oct 2020
PARF Rebate Amount:	\$11,858.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	07 Oct 2020
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$43,501.00
COE Rebate Amount:	\$4,242.00
<b>Total Rebate Amount:</b>	<b>\$16,100.00</b>

The information contained herein is correct as at 10 Oct 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	07/10/2019 17:39
Date Of Accident	05/10/2019 09:50
Exact Location Of Accident	UBI AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY8374T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LOH SIEW SHONG
NRIC No	S1488675C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81575405
Alternative Phone No	OFFICE-81575405

### Vehicle Particulars

Manufacturer	ALFA ROMEO
Model	159-2.2 SELESPEED (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? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

### Insurance Company

Name of Insurance Company	ETIQA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MA004280
Cover Note Number	

### Driver

Name of Driver	LER JUN HONG
NRIC No	S8802995Z
Date Of Birth	29/01/1988
Occupation	INDOOR
Date Of Driving Pass	08/09/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81575405
Fax Number	
Contact Number	
EMail Address	NOEMAIL



Address	BLK 440B FERNVALE LINK #13-165
Postcode	792440
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SON-IN-LAW
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	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 BESIDE VEHICLE B AND PREPARING TO MAKE A RIGHT TURN. I STOPPED WHEN I REALISED VEHICLE B IS VERY CLOSE TO ME AND HONKED HIM. HOWEVER, VEHICLE B DID NOT STOP AND EVENTUALLY HIT THE LEFT SIDE 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	XD3427C
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 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 willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

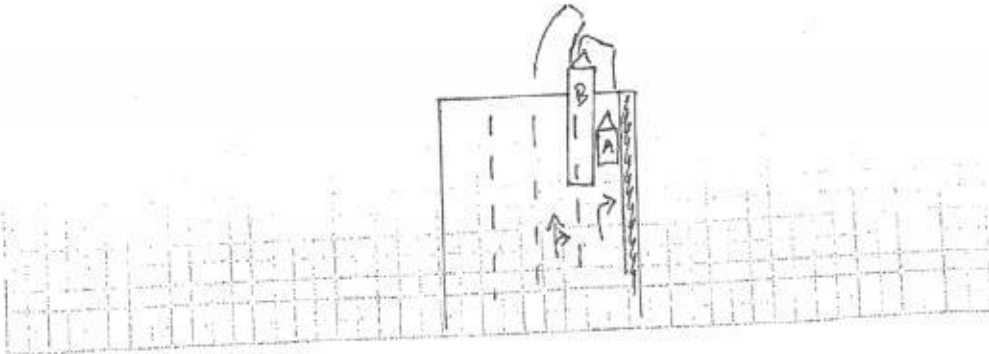
  
Policyholder's Signature  
Date & Time:

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

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

Report made by Reporting Centre

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


I was driving beside vehicle B, and preparing to make the right turn. I stopped when I realised vehicle B is very close to me, and honked him.

However, vehicle B did not stop, and eventually hit the left side 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/ID No:

16.5.0hrs

etiqa

Insurance

INTERVIEW FORM

Name (Driver)

Jake Lee Jun Hong

Policy No

MA 004280

Vehicle No

SJY 83747

Place of Accident

Ubi Ave 2

Insured Driver's relationship with Insured:

mother in law

Drink Driving of Insured and/or Insured Driver:

N:1

No of passenger(s) in Insured vehicle:

N:1

Injury to Insured and/or Insured driver, please indicate which hospital:

N:1

Third Party Vehicle No (if any)

XD3427C

No of passenger(s) in Third Party Vehicle:

no idea

Injury to Third Party driver and/or passenger(s), please indicate which hospital:

N:1

Type of collision and the extensiveness of the damages to all vehicles/Third Party property involved:

Change lane

Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement):

N:1

Traffic Police report (enclosed) : Yes / No

Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)

*[Signature]*

Driver (Name & Signature) / Date

I, affirmed the above information is given to my best knowledge

Attended by (Name & Signature) / Date

Workshop Name:

etiqa Insurance Pte Ltd  
Raffles Quay  
01 Raffles Quay  
Singapore 068553

03360027  
03397109

2013-01-01

01-01-2013

Maybank



MX1  
71120002  
Cov. Type: CO

**CERTIFICATE OF INSURANCE**

• MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) • MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 • ROAD TRANSPORT ACT, 1987 (MALAYSIA) • MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

<b>CERTIFICATE No.</b>	MA004280		
1. Index Mark and Registration Number of Vehicle	SJY8374T		
2. Name of Policyholder	Loh Siew Shong		
3. Effective Date of Commencement of Insurance for the purposes of the Act	30/03/2019	Excess: Named Drivers Excess: Unnamed Drivers	S\$800 S\$1,300
4. Date of Expiry of Insurance	07/04/2020		
5. Persons or Classes of Persons entitled to drive	<p>(A) THE POLICYHOLDER. THE POLICYHOLDER MAY ALSO DRIVE A MOTOR CAR NOT BELONGING TO HIM OR HIRED (UNDER A HIRE PURCHASE AGREEMENT OR OTHERWISE) TO HIM OR HIS EMPLOYER OR HIS PARTNER. (B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.</p> <p>Loh Siew Shong</p> <p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.</p>		
6. Limitations as to Use	<p>USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION. THE POLICY DOES NOT COVER:</p> <p>( i ) USE FOR HIRE OR REWARD. ( ii ) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING. ( iii ) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS. ( iv ) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.</p>		

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these bindings.

**Policy Owner's Protection Scheme**

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

For and on behalf of Etika Insurance Pte. Ltd.  
Approved Insurer

Authorised Signatory

GOP93167 03/04/2019 11:35:20



# KAIZEN MOTORS

KAIZEN MOTORS PTE. LTD.

68 Kaki Bukit Avenue 6, #02-12 Ark@KB, Singapore 417896

UEN: 201502816H

GST Reg No. 201502816H

Tel: (+65) 6384 1956

Fax: (+65) 6384 1957

Webpage: <https://www.kaizenmotors.com.sg>



kaizenmotorsingapore



kaizen\_motors



kaizenmotors

Date : 07/10/2019

Vehicle No : SJY8374T

Model : Alfa Romeo 159

Mileage :

## Accident Damaged Parts

No	Job Description	Qty	Price / Unit	Amount
1	FRONT L/H HEADLAMP ASSY <i>11 X</i>	1	\$ 1,618.19	\$ 1,618.19 <i>X</i>
2	FRONT L/H BUMPER BRACKET <i>321</i>	1	\$ 86.00	\$ 86.00 <i>✓</i>
3	FRONT BUMPER ASSY <i>147</i>	1	\$ 1,374.14	\$ 1,374.14 <i>✓</i>
4	FRONT L/H FENDER ASSY <i>503</i>	1	\$ 874.87	\$ 874.87 <i>✓</i>
5	FRONT L/H ABSORBER <i>11 X</i>	1	\$ 520.00	\$ 520.00 <i>X</i>
6	FRONT L/H LOWER ARM <i>11 X</i>	1	\$ 750.00	\$ 750.00 <i>X</i>
7	FRONT L/H WHEEL INNER TRIM <i>70.2</i>	1	\$ 355.64	\$ 355.64 <i>✓</i>
8	FRONT L/H RIM <i>147 600 S.W</i>	1	\$ 1,100.00	\$ 1,100.00 <i>600 S.W</i>
9	FRONT L/H TIRE <i>147 12 200 60R</i>	1	\$ 250.00	\$ 250.00 <i>602 120</i>
10	FRONT L/H FENDER CLIPS <i>10</i>	10	\$ 8.00	\$ 80.00 <i>✓</i>
11	LABOUR FOR CHECKING ON WIRING		\$ 120.00	\$ 120.00 <i>20</i>
12	LABOUR FOR DISMANTLING & REPLACING OF ACCIDENT DAMAGED PARTS, INCLUDING WELDING, KNOCKING, REPAIRING, STRAIGHTENING, RESHAPE & ADJUSTMENT OF FRONT L/H FENDER, DOOR ASSY, HINGES		\$ 1,300.00	\$ 1,300.00 <i>400</i>
13	LABOUR FOR REPLACING SUSPENSION, LOWER ARM, RIM & TIRES		\$ 600.00	\$ 11 600.00 <i>X</i>
14	SPRAYPAINTING & PUTTY OF FRONT L/H FENDER, BUMPER DOOR ASSY		\$ 1,200.00	\$ 1,200.00 <i>600</i>
15	4 WHEEL ALIGNMENT		\$ 200.00	\$ 200.00 <i>80</i>

*N.F. Akhbar*  
*11/10/19*  
*3200*  
*400*

*P- 2737-11*  
*202*  
*P- 2189-68*  
*S.W-720.00*  
*L- 1100.00*  
*4009.68*  
*202*  
*3207.74*

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:

Sub-Total	\$	10,428.84
GST 7%	\$	730.02
Grand Total	\$	11,158.86

## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/SMO19017894/UYD3N2

Date: 23/10/2019

## REFERENCE

Handling Insurer:	Sompo Insurance Singapore Pte. Ltd.	Policy No:	D18MTPCVE003854
Claimant Vehicle No :	SJY8374T	Insured Vehicle No :	XD3427C
Date of Loss:	05/10/2019	Nature of Claim:	TP
		Claim No:	CMTD1904750

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	SJY8374T	Engine No:	939A50001740838
Make & Model:	ALFA ROMEO 159, 2.2 JTS.SELESPEED (A)	Chassis No:	ZAR93900007269014
Reg. Date:	08/10/2010 (Man. Year: 2010)	Odometer:	143612 km
Colour:	Red		
Engine Capacity:	2198 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

## CONDITION OF TYRES

Front Tyre Size:	235/45R18	Rear Tyre Size:	235/45R18
Front Left Side:	Goodyear 6 mm	Rear Left Side:	Goodyear 6 mm
Front Right Side:	Goodyear 6 mm	Rear Right Side:	Goodyear 6 mm

The above values represent the remaining tyre treads depth

## COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	7,008.84	2,909.69	4,099.15	58.49
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,420.00	1,100.00	2,320.00	67.84
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (\$\$)</b>	<b>10,428.84</b>	<b>4,009.69</b>	<b>6,419.15</b>	<b>61.55</b>
<b>Approved Total (Overridden) (\$\$)</b>		<b>3,200.00</b>		
<b>(\$\$)</b>	10,428.84	3,200.00	7,228.84	69.32
<b>+ GST 7.00/7.00% (\$\$)</b>	730.02	224.00	506.02	69.32
<b>Nett Amount (\$\$)</b>	<b>11,158.86</b>	<b>3,424.00</b>	<b>7,734.86</b>	<b>69.32</b>

## INSPECTION

Date of Assignment:	10/10/2019	
Date Inspected:	10/10/2019 Inspected At:	Kaizen Motors Pte Ltd (HQ) 68 KAKI BUKIT AVE 6, #02-12 ARK @ KAKI BUKIT Singapore 417896

Estimated Period of Repair: 4.0 days

Adjuster: MARCUS CHUA

Manager: YVONNE WONG YIN CHENG

*NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.*



## REPAIR DETAILS

### Reference

<b>Part Source:</b>	(Last Synchronised: 23 Oct 2019)	
<b>Parts:</b>	N/A	ALFA ROMEO 159 2.2 JTS.SELESPEED (A) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SJY8374T)	
<b>Validity:</b>	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

### Recommended Parts

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
1	1	*FRONT L/H HEADLAMP ASSY	Not Necessary	1,618.19 F	*- FL
2	1	*FRONT L/H BUMPER BRACKET	Bent	86.00 F	*86.00 FL
3	1	*FRONT BUMPER ASSY	Cut	1,374.14 F	*1,374.14 FL
4	1	*FRONT L/H FENDER ASSY	Badly Dented	874.87 F	*874.87 FL
5	1	*FRONT L/H ABSORBER	Not Necessary	520.00 F	*- FL
6	1	*FRONT L/H LOWER ARM	Not Necessary	750.00 F	*- FL
7	1	*FRONT L/H WHEEL INNER TRIM	Torn	355.64 F	*322.10 FL
8	10	*FRONT L/H FENDER CLIPS	Necessary	80.00 F	*80.00 FL
9	1	*FRONT L/H RIM	Cut	1,100.00 FS	*600.00 FS
10	1	*FRONT L/H TIRE (\$200.00)(60%)(LOCAL PURCHASE)	Cut	250.00 FS	*120.00 FS

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

<b>Sub Total (\$\$)</b>	<b>7,008.84</b>	<b>3,457.11</b>
<b>- List Item Discount on L Items 0.00/20.00% (\$\$)</b>	<b>0.00</b>	<b>547.42</b>
<b>Total Parts (\$\$)</b>	<b>7,008.84</b>	<b>2,909.69</b>

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	LABOUR FOR CHECKING ON WIRING	New	120.00	20.00
2	LABOUR FOR DISMANTLING & REPLACING OF ACCIDENT DAMAGED PARTS,INCLUDING WELDING,KNOCKING,REPAIRING,STRAIGHTENING,RESHAPE & ADJUSTMENT OF FRONT L/H FENDER,DOOR ASSY,HINGES	New	1,300.00	400.00
3	LABOUR FOR REPLACING SUSPENSION,LOWER ARM & RIM & TIRES	New	600.00	0.00
4	SPRAYPAINTING & PUTTY OF FRONT L/H FENDER,BUMPER DOOR ASSY	New	1,200.00	600.00
5	4 WHEEL ALIGNMENT	New	200.00	80.00
<b>Gross Labour Cost (\$\$)</b>			<b>3,420.00</b>	<b>1,100.00</b>

Report was unsubmitted during this print-out.

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