

22/03/2002

ASS. REC. BY:

REF: CS/INC19018682/RISD307 Special Instruction:

Surveyor: Rasu

ASSIGNMENT (Office)

From (Person): Theresa Yimulan

of

INC

Date/Time: 22/10/19 @ 9:43am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHC 71934

Insured:

SJL 9322E

at Workshop m/s

Ding Auto

Tel:

9689 1857.

of

31 Corporation Road

Policy No:

Claim No:

MT/1067536-002

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

18/10/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10:03am @ 22/10/19

Person Contacted:

velan

Vehicle IN/OUT

| Date/Time | Action/Instruction |
|-----------|---|
| | Johny/18 ✓ |
| | SHC 71934 - CS3 / PCI / 7022284 / C/bss 2 |
| | SJL 9322E - X |
| | |
| | |
| | |
| | |
| | |

D.O.A: 19/11/2017

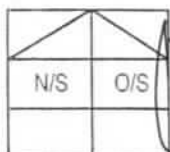
Pass

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / P / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SHC 7193U
 at Workshop m/s DINH ANU
 of 31, CORPORATION RD
 Insured: NTUC
 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 Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHC 7193U Yr Regn: 2016 / July
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Tr / Prime Mover /
 Truck / Trailer or
 Make: Hyundai 240 1-7 c.c. 1685
 Colour: Yellow A/C: Insured / Std / NI / NA
 Sp. Reading: 564646 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMH4LB41UM4 U092487
 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: 205/60R16
 R: ~

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Hankook

| Front | Rear |
|------------------------|--------------------------------------|
| R/Bal. <u>6</u> mm | R/Bal. <u>6</u> mm |
| L/Bal. <u>6</u> mm | L/Bal. <u>6</u> mm |
| D.O.A. <u>18/10/19</u> | D.O.I. <u>22/10/19</u> <u>0241pm</u> |

Survey held at DINH ANU

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

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

| Date / Time | Action / Instruction |
|-------------|---|
| 31/10/19 | Confirmed LS \$ 3,700/- @ 6 days with Resul. (\$ 4,169.38 Red - 53%) |
| | RECEIVED 31 OCT 2019 |
| | <i>[Signature]</i> 31/10/2019 |

Date/Time, File Pass to?

31/10/19



Prel. Report



Final Report

1) Typist

Date/Time, File Return to?

2)

Days Of Repair: 6

Resurvey No. of Trip: 1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Inve (\$



Week end (\$

Survey Fee:

Transportation:

3 - RS - SI

Photos

Other:

TOTAL

290

290

Report Form:

\$3,700/- 4s

Nivitha (LKK Auto)

From: Theresa Vimala D/O Balagangadharan <thrsvim.bala@income.com.sg>
Sent: Tuesday, 22 October 2019 11:21 AM
To: assignments
Cc: Theresa Vimala D/O Balagangadharan
Subject: RE: TP CASES FARMED OUT TO LKK ON 22/10/2019

Dear LKK, here is the list of the OIC details , etc.

With Regards

Theresa Vimala
Senior Administrator
Motor Insurance
www.income.com.sg

income
made different



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

From: Theresa Vimala D/O Balagangadharan
Sent: Tuesday, 22 October 2019 9:43 AM
To: assignments <assignments@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Theresa Vimala D/O Balagangadharan <thrsvim.bala@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 22/10/2019

Dear LKK

Please assist to survey the following vehicles :-

| SN | OIC | Claim No. | Survey Date | Vehicle | WorkShop Name | WorkShop Address | WorkShop Contact | Survey Time | OI VEH | DOA | Additional Remarks |
|----|-----------|----------------|-------------|----------|--------------------------------|--|----------------------------|-------------|----------|-------|--------------------|
| 1 | chrillie | MT/1067445-002 | 22/10/2019 | GBJ2611Y | CHENG AUTO BODYWORKS | 5 SOON LEE STREET #01-62 PIONEER POINT | Rachel Lai / 8666 7775 | | YP4499M | 17/10 | |
| 2 | JESSIE | MT/1067536-002 | 22/10/2019 | SHC7193U | DING AUTOMOTIVE PTE LTD | 31 CORPORATION ROAD SINGAPORE 649825 | VADIVELAN MOHAN / 96891857 | 10:00-12:00 | SJL9322E | 18/10 | |
| 3 | AIRWAN | MT/1067304-002 | 22/10/2019 | SLR2813X | HITACHI CAPITAL (S) PTE LTD | 8 FOURTH LOK YANG ROAD SINGAPORE 629705 | Vonn Siow / 96435107 | 10:00-12:00 | SMK1076E | 15/10 | |
| 4 | FIONA | MT/1064166-002 | 22/10/2019 | GBC2399Y | SIN SHENG ENGINEERING SERVICES | NO 8 TUAS AVENUE 18, #05-00 SINGAPORE 638892 | Pei Jin / 6863 9595 | | YK9262Y | 23/9 | |
| 5 | HELENA | MT/1066828-002 | 22/10/2019 | SMA478X | VANTAGE AUTOMOTIVE LIMITED | 305 ALEXANDRA ROAD SINGAPORE 159942 | CHUA SYASYA / 64777409 | 14:00-16:00 | SLM8134J | 11/10 | |
| 6 | CHARLOTTE | MT/1067439-001 | 22/10/2019 | SMP7810U | VOLKSWAGEN CENTRE SINGAPORE | 247 ALEXANDRA ROAD SINGAPORE 159934 | Charmaine Kong / 6305 7176 | 14:00-16:00 | SGT4461M | 17/10 | |

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

With Regards

Theresa Vimala
Senior Administrator
Motor Insurance
T +65 6430 7898
www.income.com.sg

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

Shirley Hiew (LKK Auto)

From: Taxis Customer Service <taxiscs@stengg.com>
Sent: Tuesday, 29 October 2019 10:32 am
To: Rasul (LKKAuto)
Cc: dd.hashim@dingauto.sg; Claims@dingautomotive.com.sg; kelly.ding@dingauto.sg; Shirley Hiew (LKK Auto)
Subject: RE: 50112135 / SHC7193U - Finalize Amount & After Repair Photo . (DOA:18/10/2019)

Dear Rasul,

We accept this finalize amount.

Thanks

Best Regards,
Guang
Ding Automotive Pte Ltd
Hp : 93299929 / 62657130

From: Rasul (LKKAuto) <Rasul@lkkauto.com>
Sent: Tuesday, October 29, 2019 9:41 AM
To: Taxis Customer Service <taxiscs@stengg.com>
Cc: dd.hashim@dingauto.sg; Claims@dingautomotive.com.sg; kelly.ding@dingauto.sg; Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Subject: RE: 50112135 / SHC7193U - Finalize Amount & After Repair Photo . (DOA:18/10/2019)

WARNING! THIS EMAIL ORIGINATES FROM OUTSIDE ST ENGINEERING.

Hi Guang,

Finalised amount round up is \$ 3,700 / 6 days lump sum
Kindly confirm

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

From: Taxis Customer Service [<mailto:taxiscs@stengg.com>]
Sent: Saturday, 26 October, 2019 2:38 PM

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 | 19/10/2019 14:18 |
| Date Of Accident | 18/10/2019 19:00 |
| Exact Location Of Accident | ALONG TAMPINES AVE 10 TOWARDS PASIR RIS |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------|
| Vehicle Registration Number | SHC7193U |
| Insured/Policyholder | |
| Name Of Registered Owner | CITYCAB PTE LTD |
| Co Reg No | 199502839G |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-65508768 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | HYUNDAI |
| Model | I40-1.7 D CRDI (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 | TAXI |

Insurance Company

| | |
|---------------------------|--------------------------------|
| Name of Insurance Company | MS FIRST CAPITAL INSURANCE LTD |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | YES |
| Policy Number | D-18088937MFSH |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | TAN KOK LIANG |
| NRIC No | S7303413B |
| Date Of Birth | 24/01/1973 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 03/06/1993 |
| Driving Experience | 26 YEARS AND 4 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-87691011 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|--|
| Address | APT BLK 257 JURONG EAST STREET 24 #11-395 SINGAPORE |
| Postcode | 600257 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRER |
| 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) | 5 |
| Passenger 1 | NAME: : UNKNOWN (HUSBAND) GENDER: : MALE |
| Passenger 2 | NAME: : UNKNOWN (WIFE) GENDER: : FEMALE |
| Passenger 3 | NAME: : UNKNOWN (CHILDREN) GENDER: : MALE |
| Passenger 4 | NAME: : UNKNOWN (CHILDREN) 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

REFER TO ATTACHMENT

Attachment(s)

| | |
|---|-------------------|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Remarks/ Reasons: | FILE NOT SUITABLE |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SJL9322E |
| Vehicle Make/Model/Colour | |

Details Of Properties

| | |
|-------------------------------------|-------------------|
| Vehicle Category | PRIVATE CAR |
| Name of Driver | AZMAN BIN SHARIFF |
| NRIC/Passport Number | S8412195I |
| Contact Number | 97129557 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

Accident 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.

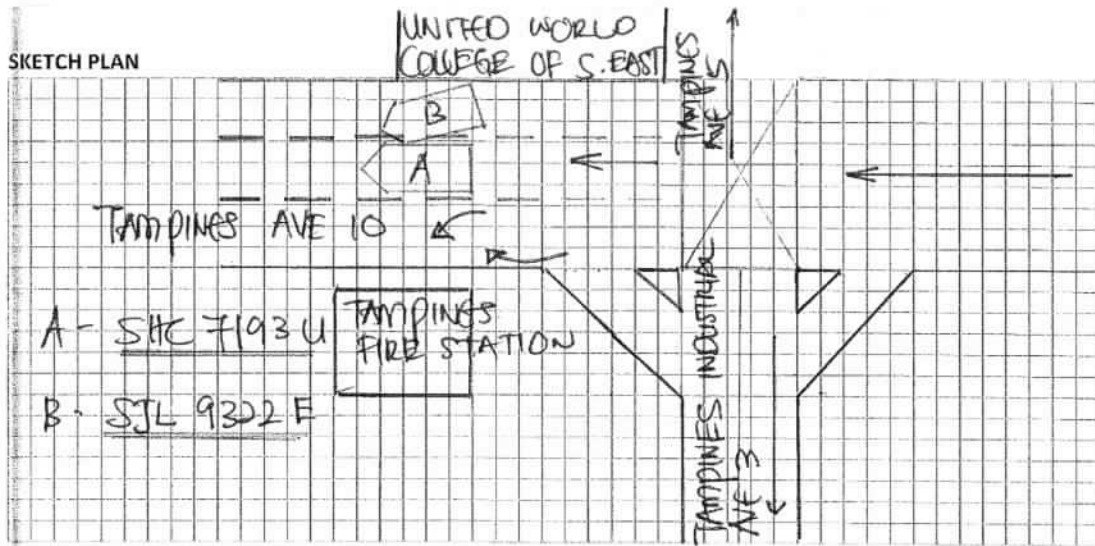
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 18 OCTOBER 2019 I WAS DRIVING MY TAXI (SHC7193U) @ 19:00 HOURS ALONG TAMPINES AVE 10 TOWARDS PASIR RIS. AT TIME 4 FOREIGNER PASSENGER ON BOARD (HUSBAND WIFE, MALE KID, FEMALE KID). TRAFFIC WAS SLOW AND HEAVY. WHILE DRIVING ON MY LANE, SUDDENLY 1 VEHICLE (SJL9322E) CUT INTO MY LANE AND SIDE SWIPE WHOLE RHS BODY. WF TOOK PHOTOS AND EXCHANGED PARTICULARS FOR INSURANCE REPORTING. NO INJURY WAS INVOLVED.

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: VFD1.

NRIC/FIN No.:

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

22/10/2019 11:00

JOB-NO: 50112135

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE
SINGAPORE 575717 0

64739522

VEHICLE DETAILS

LICENSE NO: SHC7193U

TRANS: AUTO

CHASSIS: KMHLB41UMGU092487

MAKE / MODEL: HYUNDAI / i40

ENGINE: D4FDGU661858

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

| DESCRIPTION | QTY | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|---|------|--------------|----------|------------|-----|----------|-----------|
| LABOUR | | | | | | | |
| 1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS | 1.00 | 1,200.00 | 0.00 | 1,200.00 | | Y | 700 |
| 2 RESPRAY REAR RHS FENDER | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 3 RESPRAY REAR RHS DOOR ASSY | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 4 RESPRAY RHS SKIRTING | 1.00 | 200.00 | 0.00 | 200.00 | | Y | 160 |
| 5 RESPRAY FRONT RHS DOOR ASSY | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 6 RESPRAY FRONT RHS FENDER ASSY | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 7 RESPRAY FRONT BUMPER | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 8 CHECK WIRING & LIGHTING SYSTEM AND RE-POSITION HEADLAMP | 1.00 | 80.00 | 0.00 | 80.00 | | Y | X 1.4 |
| 9 R&R FRONT RHS DOOR COMPONENT | 1.00 | 150.00 | 0.00 | 150.00 | | Y | 60 |
| TOTAL: | | 2,880.00 | 0.00 | 2,880.00 | | | |

MATERIALS

| | | | | | | | |
|--|------|----------|--------|----------|---|---|--|
| 1 REAR FENDER (REPAIR) | 1.00 | 0.00 | 0.00 | 0.00 | L | Y | |
| 2 RHS SKIRTING (REPAIR) | 1.00 | 0.00 | 0.00 | 0.00 | L | Y | |
| 3 REAR RHS DOOR ASSY (REPAIR) | 1.00 | 0.00 | 0.00 | 0.00 | L | Y | |
| 4 FRONT RHS DOOR ASSY <i>bt</i> | 1.00 | 2,256.83 | 451.37 | 1,805.46 | L | Y | |
| 5 FRONT RHS FENDER <i>bt</i> | 1.00 | 659.50 | 131.90 | 527.60 | L | Y | |
| 6 FRONT BUMPER <i>repair</i> | 1.00 | 599.68 | 119.94 | 479.74 | L | Y | |
| 7 FRONT RHS BUMPER RETAINER <i>x 500</i> | 1.00 | 43.83 | 8.77 | 35.06 | L | Y | |
| 8 FRONT RHS WHEEL CAP <i>ch</i> | 1.00 | 256.30 | 51.26 | 205.04 | L | Y | |
| 9 FRONT RHS HEADLAMP ASSY <i>x 500</i> | 1.00 | 1,808.10 | 361.62 | 1,446.48 | L | Y | |
| 10 FRONT BUMPER CLIPS <i>x 20</i> | 1.00 | 45.00 | 0.00 | 45.00 | S | Y | |
| 11 REAR RHS DOOR STICKER-COMFORT DELGRO <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 12 REAR RHS DOOR STICKER-BOOK NOW <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 13 REAR RHS DOOR STICKER-APPS STORE <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 14 REAR RHS DOOR STICKER - GOOGLE PLAY <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 15 FRONT RHS DOOR STICKER-COMFORT DELGRO <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 16 FRONT AND REAR DOOR CLIPS | 1.00 | 45.00 | 0.00 | 45.00 | S | Y | |
| TOTAL: | | 6,114.24 | 124.86 | 4,989.38 | | | |

TOTAL PARTS & LABOUR :

8,994.24

1,124.86

7,869.38

EXCESS/LOADING:\$S 0.00

No. Of Day:

6 days

CLAIM DETAILS

| DESCRIPTION | QTY | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|-------------|-----|--------------|----------|------------|-----|----------|-----------|
|-------------|-----|--------------|----------|------------|-----|----------|-----------|

RE-SURVEY: BEFORE/ AFTER PAINTINGPART-BY-PART OR LUMP SUM: \$DATE OF SURVEY: 22 / 10 / 19SURVEYED BY: RASULCONTACT NO: 96060068

FAX NO: _____

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001

Ding Auto User 1

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:

[Signature]
24/10/2019

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:

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

22/10/2019 11:00

JOB-NO: 50112135

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)
 ADDRESS: 383 SIN MING DRIVE
 SINGAPORE 575717 0

CONTACT: 65533880
 64739522

Page 1 of 2

VEHICLE DETAILS

LICENSE NO: SHC7193U

TRANS: AUTO

CHASSIS: KMHLB41UMGU092487

MAKE / MODEL: HYUNDAI / i40

ENGINE: D4FDGU661858

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

| DESCRIPTION | QTY | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|-------------|-----|--------------|----------|------------|-----|----------|-----------|
|-------------|-----|--------------|----------|------------|-----|----------|-----------|

LABOUR

| | | | | | | | |
|---|------|----------|------|----------|--|---|-----|
| 1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS | 1.00 | 1,200.00 | 0.00 | 1,200.00 | | Y | 700 |
| 2 RESPRAY REAR RHS FENDER | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 3 RESPRAY REAR RHS DOOR ASSY | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 4 RESPRAY RHS SKIRTING | 1.00 | 200.00 | 0.00 | 200.00 | | Y | 100 |
| 5 RESPRAY FRONT RHS DOOR ASSY | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 6 RESPRAY FRONT RHS FENDER ASSY | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 7 RESPRAY FRONT BUMPER | 1.00 | 250.00 | 0.00 | 250.00 | | Y | 200 |
| 8 CHECK WIRING & LIGHTING SYSTEM AND RE-POSITION HEADLAMP | 1.00 | 80.00 | 0.00 | 80.00 | | Y | Xan |
| 9 R&R FRONT RHS DOOR COMPONENT | 1.00 | 150.00 | 0.00 | 150.00 | | Y | 60 |
| TOTAL: | | 2,880.00 | 0.00 | 2,880.00 | | | |

MATERIALS

| | | | | | | | |
|--|------|----------|---------|----------|---|---|--|
| 1 REAR FENDER (REPAIR) | 1.00 | 0.00 | 0.00 | 0.00 | L | Y | |
| 2 RHS SKIRTING (REPAIR) | 1.00 | 0.00 | 0.00 | 0.00 | L | Y | |
| 3 REAR RHS DOOR ASSY (REPAIR) | 1.00 | 0.00 | 0.00 | 0.00 | L | Y | |
| 4 FRONT RHS DOOR ASSY <i>bt</i> | 1.00 | 2,256.83 | 451.37 | 1,805.46 | L | Y | |
| 5 FRONT RHS FENDER <i>st</i> | 1.00 | 659.50 | 131.90 | 527.60 | L | Y | |
| 6 FRONT BUMPER <i>repair</i> | 1.00 | 599.68 | 119.94 | 479.74 | L | Y | |
| 7 FRONT RHS BUMPER RETAINER <i>x suc</i> | 1.00 | 43.83 | 8.77 | 35.06 | L | Y | |
| 8 FRONT RHS WHEEL CAP <i>ch</i> | 1.00 | 256.30 | 51.26 | 205.04 | L | Y | |
| 9 FRONT RHS HEADLAMP ASSY <i>x suc</i> | 1.00 | 1,808.10 | 361.62 | 1,446.48 | L | Y | |
| 10 FRONT BUMPER CLIPS <i>x an</i> | 1.00 | 45.00 | 0.00 | 45.00 | S | Y | |
| 11 REAR RHS DOOR STICKER- COMFORT DELGRO <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 12 REAR RHS DOOR STICKER-BOOK NOW <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 13 REAR RHS DOOR STICKER-APPS STORE <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 14 REAR RHS DOOR STICKER - GOOGLE PLAY <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 15 FRONT RHS DOOR STICKER-COMFORT <i>na</i> | 1.00 | 80.00 | 0.00 | 80.00 | S | Y | |
| 16 FRONT AND REAR DOOR CLIPS | 1.00 | 45.00 | 0.00 | 45.00 | S | Y | |
| TOTAL: | | 6,114.24 | 1,24.86 | 4,989.38 | | | |

TOTAL PARTS & LABOUR: 8,994.24 1,124.86 7,869.38

EXCESS/LOADING:\$ 0.00

No. Of Day:

6 Days

CLAIM DETAILS

| DESCRIPTION | QTY | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|-------------|-----|--------------|----------|------------|-----|----------|-----------|
|-------------|-----|--------------|----------|------------|-----|----------|-----------|

RE-SURVEY: BEFORE/ AFTER PAINTING

PART-BY-PART OR LUMP SUM: \$

DATE OF SURVEY: 22 / 10 / 19

SURVEYED BY: RASUL

CONTACT NO: 90010068 FAX NO: _____

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001

Ding Auto User 1

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:

Lump Sum

Labour = \$ 1860

S/M = \$ 230

Parts = \$ 2538.10

L + S + P = \$ 4628.10 - 20% 45

= \$ 3702.48

Final Amount = \$ 3702.48



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

DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19018682/R1sd3e2

73 BRAS BASAH ROAD

Date: 14-11-2019

#05-01 NTUC TRADE UNION HOUSESINGAPORE

189556



ATTN : JESSIE

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

| | | | |
|--------------|----------------|----------------|------------|
| Insured Veh. | SJL 9322E | Veh. Inspected | SHC 7193U |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | MT/1067536-002 | Excess (\$) | 0.00 |
| Assign From | THERESA VIMALA | Assign Date | 22/10/2019 |

2. Vehicle Particulars & Condition

| | | | |
|--------------|-------------------|--------------|----------|
| Make & Model | HYUNDAI I40 1.7 | c.c | 1685 |
| Engine No. | HIDDEN | Year of Reg. | 2016 |
| Chassis No. | KMHLB41UMGU092487 | Colour | YELLOW |
| Odometer | 564646 KM | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | NIL |
| General | FAIR | | |

3. Conditions of Tyres

| | Size | Make | Balance |
|----------------|------------|---------|---------|
| R/H Front Tyre | 205/60 R16 | HANKOOK | 6 mm |
| L/H Front Tyre | 205/60 R16 | HANKOOK | 6 mm |
| R/H Rear Tyre | 205/60 R16 | HANKOOK | 6 mm |
| L/H Rear Tyre | 205/60 R16 | HANKOOK | 6 mm |

4. Description of Damages

| |
|--|
| THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS. |
|--|

5. General Information

| | | | |
|----------------|---------------------|---------------------|-------------------------|
| Accident Date | 18/10/2019 | Inspect Date / Time | 22/10/2019 (02:51 PM) |
| Survey held at | 31 CORPORATION ROAD | | |
| Repairer | DING AUTO 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: | 6 Working Days |
|-------------------------------------|----------------|



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 7193U

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|------------------------------------|--|----------------------|---------------------------|-------------------|
| <u>REPLACEMENT OF PARTS</u> | | | | |
| 1 | REAR FENDER (NPA) | TO REPAIR SEE LABOUR | - | - |
| 1 | RHS SKIRTING (NPA) | TO REPAIR SEE LABOUR | - | - |
| 1 | REAR RHS DOOR ASSY (NPA) | TO REPAIR SEE LABOUR | - | - |
| 1 | FRONT RHS DOOR ASSY | BENT | 2,256.83 | 2,256.83 |
| 1 | FRONT RHS FENDER | BENT | 659.50 | 659.50 |
| 1 | FRONT BUMPER | TO REPAIR SEE LABOUR | 599.68 | - |
| 1 | FRONT RHS BUMPER RETAINER | SERVICEABLE | 43.83 | - |
| 1 | FRONT RHS WHEEL CAP | CRACKED | 256.30 | 256.30 |
| 1 | FRONT RHS HEADLAMP ASSY | SERVICEABLE | 1,808.10 | - |
| | LESS 20% DISCOUNT | | -1,124.85 | -634.53 |
| | | | 4,499.39 | 2,538.10 |
| <u>SPECIAL NETT ITEMS</u> | | | | |
| 1 | FRONT BUMPER CLIPS (SN) | NOT NECESSARY | 45.00 | - |
| 1 | REAR RHS DOOR STICKER - COMFORT DELGRO (SN) } | NECESSARY | 80.00 | 120.00 |
| 1 | REAR RHS DOOR STICKER - BOOK NOW (SN) } | NECESSARY | 80.00 | - |
| 1 | REAR RHS DOOR STICKER - APPS STORE (SN) } | NECESSARY | 80.00 | - |
| 1 | REAR RHS DOOR STICKER - GOOGLE PLAY (SN) } | NECESSARY | 80.00 | - |
| 1 | FRONT RHS DOOR STICKER - COMFORT DELGRO (SN) | NECESSARY | 80.00 | 80.00 |
| 1 | FRONT AND REAR DOOR CLIPS (SN) | NECESSARY | 45.00 | 30.00 |
| | | | 490.00 | 230.00 |
| <u>LABOUR</u> | | | | |
| | STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS. INCLUSIVE OF THE REPAIR OF REAR FENDER, RHS SKIRTING, REAR RHS DOOR ASSY AND FRONT BUMPER. | | 1,200.00 | 700.00 |
| | RESPRAY REAR RHS FENDER. | | 250.00 | 200.00 |
| | RESPRAY REAR RHS DOOR ASSY. | | 250.00 | 200.00 |
| | RESPRAY RHS SKIRTING. | | 200.00 | 100.00 |

Report Ref No. CS/INC19018682/R1sd3e2



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

Page No.:2 of 2

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|---|--|---------------|---------------------------|-------------------|
| | RESPRAY FRONT RHS DOOR ASSY. | NOT NECESSARY | 250.00 | 200.00 |
| | RESPRAY FRONT RHS FENDER ASSY. | | 250.00 | 200.00 |
| | RESPRAY FRONT BUMPER. | | 250.00 | 200.00 |
| | CHECK WIRING & LIGHTING SYSTEM AND RE-POSITION HEADLAMP. | | 80.00 | - |
| | R&R FRONT RHS DOOR COMPONENT. | | 150.00 | 60.00 |
| | | | 2,880.00 | 1,860.00 |
| GRAND TOTAL | | | 7,869.39 | 4,628.10 |
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED) | | | | 3,700.00 |

Report Ref No. CS/INC19018682/R1sd3e2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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