

ASS. REC. BY:

REF: CS/INC 19019714/UGf302

Special Instruction:

Surveyor : Marcus

ASSIGNMENT (Office)

From (Person): HAZARSA BAY Ibrahim of INC Date/Time: 7.1.19 10:08am

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SDB 2382B Insured: SMG 3816C

at Workshop m/s **SME motor** Tel: **67476106**

of 1 Kaki Bukit Ave 6 #02-15

Policy No: _____ Claim No: **MT 11068654-002**

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 24.10.2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 7.11.19 11.10a.m Person Contacted: Jacob Vehicle: IN/OUT

H.O.D. Endorsement: _____

Vehicle ~~IN~~/OUT[illegible]

ASS. REC. BY:

Ref:

inc.

m/cus

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: 9DB2382Bat Workshop m/s smc

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: 48

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: 5 Consistent? : Yes or NoEst. Repairs: 3 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: 9DB2382B Yr Regn: 10/08Type: ☒ M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /Truck / Trailer or CAMake: Toyota Provia C.C. 2362Colour: Beige A/C: _____ Insured / Std / NI / NASp. Reading: 106911 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTEGD5KM80A010889Gen. Cond: Good / Fair / Poor / BurntSteering: Good / Jammed / Leaked / Burnt orBrake: Good / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/55R17

R: _____

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

TOYO / YOKO or

Front: 6 mm Rear: 6 mmR/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 24/10/19 D.O.I. 7/11/19

Survey held at: _____ 1037AM

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

Rear

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

Date / Time Action / Instruction

27/12/19 27A28842 log 14/10-2018 N/A Anthony's work Sports less 502

1/5 #1800 cont. and with AHG 5.00 and labor = 4/5

Chad #807-25, 31%

RECEIVED 31 DEC 2019

Date/Time, File Pass to?

☐

Prel. Report

Days Of Repair: 31) 30/12/19☐

Final Report

Resurvey No. of Trip: 2

Date/Time, File Return to?

2) _____

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

W/and end

Survey Fee:

Transportation:

S + RS \$

Photos

Other:

TOTAL

240240

Reprint Form:

Lump Sum / 1000

7P1800

Nivitha (LKK Auto)

From: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>
Sent: Thursday, 7 November 2019 11:28 AM
To: Admin-D (LKKAuto); assignments; SUR
Cc: Hazalya Binte Ibrahim
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear LKK,

Re-send with details.

Thank you.

Warmest Regards

Hazalya Bte Ibrahim
Admin Assistant
Motor Department
www.income.com.sg

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PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]
Sent: Thursday, 7 November 2019 10:56 AM
To: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear Hazalya,

Noted with thanks.

Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Hazalysa Binte Ibrahim [mailto:hazalysa.ibrahim@income.com.sg]
Sent: Thursday, 7 November 2019 10:54 AM
To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear LKK,

Please cancel the survey.

Thank you.

5	MT/1069323-001	GB88385C	RYDER AUTO PTE LTD	2 KAKI BUKIT AVE 2 #02-19 AUTOHUB @ KAKI BUKIT SINGAPOR 417921	june / 67418277	10:00-12:00				
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Warmest Regards

Hazalya Bte Ibrahim
Admin Assistant
Motor Department
www.income.com.sg



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you

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PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

From: Admin-D (LKKAuto) [<mailto:admin-d@lkkauto.com>]
Sent: Thursday, 7 November 2019 10:33 AM
To: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>; assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear Sir/Madam,

Thank you for your assignment.

SDB2382B, SMM5544S car not in the workshop, repairer will arrange.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>
Sent: Thursday, 7 November, 2019 10:08 AM
To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>
Subject: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	Jeff Lin	MT/1069832-002	SMG282L	ADVANCE AUTO GARAGE	23 KAKI BUKIT AVE 4 #04-01 AAS KAKI BUKIT CENTRE SINGAPORE 415933	Xavier Lim / 9007 9247		SMN6759C	04/11/19	
2	Azhari	MT/1070238-002	SMH8938X	DYNAMIC AUTOWORK PTE LTD	8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT	Michelle / 9856 4815		SLR4461P	05/11/19	
3	Charlotte Chew	MT/1070066-002	SLZ9192R	MG SOLUTION PTE LTD	23 KAKI BUKIT AVENUE 4 #02-03B (SOUTH WING)	Ms Hong / 6243 1373		SMD5781X	05/11/19	
4	Quek Swee Keng	MT/1070309-001	SHC6019Y	PREMIER AUTOMOTIVE SERVICES PTE LTD	23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443	MR CHUA / 65446689		FBP5293E	05/11/19	
5		MT/10692323-001	G888385C	RYDER AUTO PTE LTD	2 KAKI BUKIT AVE 2 #02-19-AUTOHUB @ KAKI BUKIT SINGAPOR 417921	June / 67418277	10:00-12:00			CANCEL THE SURVEY
6	Muhammad Airwan	MT/1062113-003	JTM5751	STAXX PTE LTD	1 KAKI BUKIT ROAD 1 #02-09 ENTERPRISE ONE SINGAPORE 415934	Chong / 6741 1480 / 9839 1819		YN7098C	11/09/19	
7	David Phua	MT/1070247-001	SKK6749X	CHEW MOTOR PTE LTD	1 KAKI BUKIT AVENUE 6 #01-11/41 AUTOBAY @ KAKI BUKIT	Suky Chong / 6747 9241		SLN6600M	05/11/19	

8	Charlotte Chew	MT/1069303-002	YN1408G	CHIN MENG MOTORS	1 KAKI BUKIT AVENUE 6 #01-40/63 AUTOBAY @ KAKI BUKIT SINGAPORE 417883	QUEK KIM SENG / 67474810	10:00-12:00	GV3920B	29/10/19	
9	Azhari	MT/1068654-002	SD82382B	SME MOTOR PTE. LTD.	1 KAKI BUKIT AVENUE 6 #02-15 AUTOBAY @ KAKI BUKIT SINGAPORE 417883	Jacob Ang / 6747 6106	10:00-12:00	SMG3816C	24/10/19	
10	Fiona Shen	MT/1069889-002	SMM5544S	SME MOTOR PTE. LTD.	1 KAKI BUKIT AVENUE 6 #02-15 AUTOBAY @ KAKI BUKIT SINGAPORE 417883	Jacob Ang / 6747 6106	10:00-12:00	SLT2636E	01/11/19	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Warmest Regards

Hazalya Bte Ibrahim
Admin Assistant
Motor Department
T +65 6430 7902
www.income.com.sg



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

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	509B
Vehicle Details	
Vehicle No.:	SDB2382B
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Nov 2019
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA PREVIA 7 SEATER
Primary Colour:	Gold
Manufacturing Year:	2008
Engine No.:	2AZH208664
Chassis No.:	JTEGD54M80A010889
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$37,936.00
Original Registration Date:	15 Oct 2008
First Registration Date:	15 Oct 2008
Transfer Count:	1
Actual ARF Paid:	\$37,936.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	14 Oct 2028
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$32,279.00
COE Rebate Amount:	\$28,842.00
Total Rebate Amount:	\$28,842.00

The information contained herein is correct as at 07 Nov 2019

OK

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previa

Price Range

Depreciation

> 10 year

Vehicle Type

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Home » Used Cars » Asia Carz Auto » Toyota Previa 2.4A (COE till 06/2028)

Toyota Previa 2.4A (COE till 06/2028)

- Overview
- Financial
- Insurance
- Accessories
- Similar
- Research
- Photos
- Map

Price	\$52,500		
Depreciation	\$6,100 /yr	Reg Date	16-Jun-2008 (8yrs 7mths 8days COE left)
Mileage	170,800 km (15k /yr)	Manufactured	2008
Road Tax	\$1,802 /yr	Transmission	Auto
Dereg Value	\$32,641 as of today (change)	OMV	\$37,999
COE	\$37,906	ARF	\$37,999
Engine Cap	2,362 cc	Power	125.0 kW (167 bhp)
Curb Weight	1,845 kg	No. of Owners	5
Type of Vehicle	MPV		

Features
Reliable 16V DOHC 2.4L VVTi Engine, ABS, Airbags, Climatic Aircon/Rear Vents, Driver Electric Seat, Auto Head/Fog Lamps, 7 Seater MPV. View specs of the Toyota Previa (2006-2016)


Accessories
Dual Sliding Doors, Beige Leather Upholstery, Armrest/Rear Legrest, 17" Sports Rims, DVD/USB/Audio System, Reverse/Front Camera, Tinted Films.

Description
Bank Loan At 3.25% Only.100% Loan At Only \$916 Per Month For 84 Months. 100% Loan Available. Trade In Welcome, Bank And In House Loan All Available, Interested Please Call For Viewing, Viewing By Appointment Only. Quiet Engine. Can Buy Warranty.


Category
COE Car

Status
Available

Resources

STA

Vehicle Evaluation
Afraid of lemons? Request to have this car evaluated professionally. Find out more



Car Valuation - Free
Find out the market value of your existing car for free. Get started



- Shortlist
- Compare
- Add note
- Report Error
- More Actions

Seller Information

Company

Asia Carz Auto
» dealer's pricelist
» 1 vehs sold | 11 vehs available

Address

18 Sin Ming Lane #02-06
Search cars nearby this location

Location

MidView City

Contact Person(s)

Jack85712226

Posted on: 22-Sep-2019 | Last Updated on: 01-Nov-2019

[Compare](#)

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	25/10/2019 17:12
Date Of Accident	24/10/2019 19:00
Exact Location Of Accident	ALJUNIED ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDB2382B
Insured/Policyholder	
Name Of Registered Owner	CHU FU KONG STEVEN
NRIC No	S1305509B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98239833
Alternative Phone No	OFFICE-98239833

Vehicle Particulars

Manufacturer	TOYOTA
Model	PREVIA
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA037365
Cover Note Number	

Driver

Name of Driver	MRS CHU LIANG YI TING
NRIC No	S7175228C
Date Of Birth	05/10/1971
Occupation	INDOOR
Date Of Driving Pass	25/06/1997
Driving Experience	22 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-87223388
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	9 CLIFTON VALE
Postcode	S359681
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 (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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: : CHARLES
	GENDER: : MALE

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

TRAFFIC LIGHT WAS RED. I SLOW DOWN AND STOP. SUDDENLY VEHICLE B REAR ENDED ME. WHEN I GOT DOWN FROM MY VEHICLE THEN I REALIZED IT WAS A 3 CAR CHAIN COLLISION.

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	SMG3816C
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 2

Vehicle Registration Number

SJW1642B

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)


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 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.



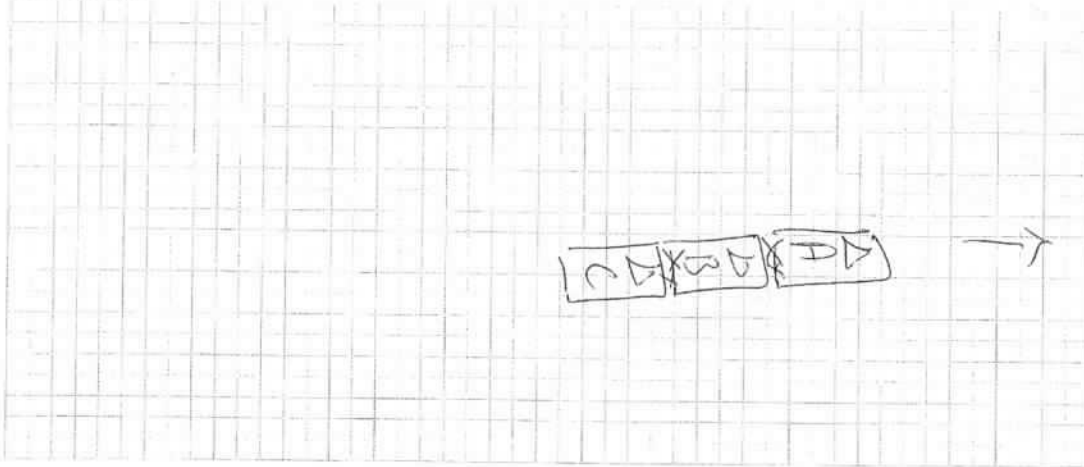
Policyholder's Signature
Date & Time:



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

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

SKETCH PLAN

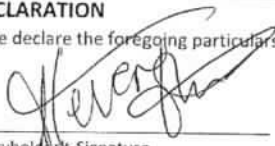


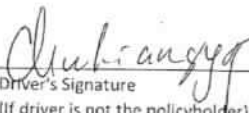
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Traffic light was red. I slow down and stop. Suddenly vehicle B rear ended me. When i got down from my vehicle then i realized it was a 3 car chain collision.

DECLARATION

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


Policyholder's Signature
Date & Time:


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

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

WATSON SKETCH PLAN V3

SME Motor Pte Ltd

1 Kaki Bukit Ave 6, #02-15 Autobay@KakiBukit Singapore 417883
TEL: 67476106 (6 lines) FAX: 67442368 Email: service@smemotor.com.sg
GST:201119451E RCB NO:201119451E

M/S : NTUC INCOME INSURANCE CO-OPERATIVE LTD

73 Bras Basah #05-01

NTUC Trade Union House

Singapore 189556

TEL: 67886616

FAX: 63381500

ATTN: Motor Claim Department

Your Ref No: 19/NTUC/TP-236 (10)

Claim Type: Third Party

Accident Date: 24/10/2019

TP Veh Reg No: SMG3816C

Estimate No: EST0005117

Date: 29 Oct 2019

Policy No: GA037365

Veh Reg No: SDB2382B

Make/Model: TOYOTA PREVIA

Chasis No: JTEGD54M80A010889

Engine No: 2AZH208664

Reg. Date: 15/10/2008

Estimate Repair Cost to Vehicle No :SDB2382B

Description	Quantity	List Price	Amount
		SS	SS
List Price			
1 REAR BUMPER	1 PC	585.00	
2 REAR BUMPER RETAINER	120 2PC	240.00	1PC
3 REAR BUMPER CLIP	10 PC	55.00	
4 REAR BUMPER SPONGE	2 PC	120.00	
5 REAR GATE LOGO	1 PC	75.00	
6 REAR GATE EMBLEM 'TOYOTA'	1 PC	55.00	
7 REAR GATE EMBLEM 'PREVIA'	1 PC	53.00	
8 Rear end panel		1,183.00	
	Less 25%	295.75	887.25
Special Net			
8 REAR REVERSE SENSOR	1 Defect	250.00	2005.00
		250.00	250.00
Labour			
9 WIRE CHECKING	1 UNIT	20.00	
10 LABOUR CHARGE + \$300 Repairs rear end panel	1 UNIT	450.00	520
11 SPRAY PAINTING + \$300 Rear end panel	1 UNIT	400.00	600
		870.00	870.00
Total			SS 2,007.25
Add GST @ 7%			140.51
Total Amount Payable			SS 2,147.76

TOTAL: SINGAPORE DOLLAR TWO THOUSAND ONE HUNDRED FORTY SEVEN AND CENTS SEVENTY SIX ONLY

Not Acknowledged
The photo other repair
7/11/19
3 days
2/5 \$1800

For SME Motor Pte Ltd

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts must be 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

AUTHORISED SIGNATURE

Acknowledged by Repairer

Signature:

Date:

2607.25
9943
507
471.50
1811.50

SME Motor Pte Ltd

1 Kaki Bukit Ave 6, #02-15 Autobay@KakiBukit Singapore 417883
TEL: 67476106 (6 lines) FAX: 67442368 Email: service@smemotor.com.sg
GST:201119451E RCB NO:201119451E

M/S : NTUC INCOME INSURANCE CO-OPERATIVE LTD

73 Bras Basah #05-01

NTUC Trade Union House

Singapore 189556

TEL: 67886616

FAX: 63381500

ATTN: Motor Claim Department

Your Ref No: 19/NTUC/TP-236 (10)

Claim Type: Third Party

Accident Date: 24/10/2019

TP Veh Reg No: SMG3816C

Estimate No: EST0005117

Date: 29 Oct 2019

Policy No: GA037365

Veh Reg No: SDB2382B

Make/Model: TOYOTA PREVIA

Chasis No: JTEGD54M80A010889

Engine No: 2AZH208664

Reg. Date: 15/10/2008

Estimate Repair Cost to Vehicle No :SDB2382B

Description	Quantity	List Price	Amount
		<u>S\$</u>	<u>S\$</u>
List Price			
1 REAR BUMPER	1 PC	585.00	
2 REAR BUMPER RETAINER	1 PC	240.00	
3 REAR BUMPER CLIP	10 PC	55.00	
4 REAR BUMPER SPONGE	2 PC	120.00	
5 REAR GATE LOGO	1 PC	75.00	
6 REAR GATE EMBLEM 'TOYOTA'	1 PC	55.00	
7 REAR GATE EMBLEM 'PREVIA'	1 PC	53.00	
REAR END PANEL 2 X		1,183.00	
	Less 25%	295.75	887.25
Special Net			
8 REAR REVERSE SENSOR	1	250.00	
	200	250.00	250.00
Labour			
9 WIRE CHECKING	1 UNIT	20.00	
10 LABOUR CHARGE + (\$300) (REAR END PANEL)	1 UNIT	450.00	
11 SPRAY PAINTING + (\$300) (REAR END PANEL)	1 UNIT	400.00	
	1140	870.00	870.00
Total			S\$ 2,007.25
Add GST @ 7%			140.51
Total Amount Payable			S\$ 2,147.76

TOTAL: SINGAPORE DOLLAR TWO THOUSAND ONE HUNDRED FORTY SEVEN AND CENTS SEVENTY SIX ONLY

For SME Motor Pte Ltd

AUTHORISED SIGNATURE

Nif Akmal
Nif
The photo after repair
7/10/19
3 day.
L/S



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/INC19019714/Uqf3e2

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 03-01-2020



ATTN: AZHARI

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SMG 3816C	Veh. Inspected	SDB 2382B
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1068654-002	Excess (\$)	0.00
Assign From	HAZALYSA BTE IBRAHIM	Assign Date	07/11/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PREVIA (A)	c.c	2362
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	JTEGD54M80A010889	Colour	BEIGE
Odometer	106911 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/55 R17	TOYO	6 mm
L/H Front Tyre	215/55 R17	TOYO	6 mm
R/H Rear Tyre	215/55 R17	TOYO	6 mm
L/H Rear Tyre	215/55 R17	TOYO	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	24/10/2019	Inspect Date / Time	07/11/2019 (10:37 AM)
Survey held at	SME MOTOR PTE LTD 1 KAKI BUKIT AVE 6 #02-15 (AUTOBAY @KAKI BUKIT) 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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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**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.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SDB 2382B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BUMPER	DENTED / DEFORMED	585.00	585.00
2	REAR BUMPER RETAINER	N/S BENT	240.00	120.00
10	REAR BUMPER CLIP	NECESSARY	55.00	55.00
2	REAR BUMPER SPONGE	NOT FITTED	120.00	-
1	REAR GATE LOGO	NECESSARY	75.00	75.00
1	REAR GATE EMBLEM 'TOYOTA'	NECESSARY	55.00	55.00
1	REAR GATE EMBLEM 'PREVIA'	NECESSARY	53.00	53.00
1	REAR END PANEL (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 25% DISCOUNT		-295.75	-
	LESS 50% DISCOUNT		-	-471.50
			887.25	471.50
	<u>SPECIAL NETT ITEMS</u>			
1	SET REAR REVERSE SENSOR (SN)	CRACKED	250.00	200.00
			250.00	200.00
	<u>LABOUR</u>			
	WIRE CHECKING.		20.00	20.00
	LABOUR CHARGE.INCLUSIVE OF THE REPAIR OF REAR END PANEL.		750.00	520.00
	SPRAY PAINTING.		700.00	600.00
			1,470.00	1,140.00
GRAND TOTAL			2,607.25	1,811.50
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,800.00

Report Ref No. CS/INC19019714/Uqf3e2

CHUA KANG SENG

Licensed Appraiser

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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