

XSS, REC. BY:

REF: CS/TM2 1909928/ F43024

Special Instruction:

Surveyor: Ram

## ASSIGNMENT (Office)

From (Person): Shawn Ngo Sun Wu of TM2 Date/Time: 11.11.19 12:17p.m.

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SH 8318 P Insured: SMF 7940E

at Workshop m/z Camfordulgro  
of 59 Ioyang Drive Tel: 614 8200

Policy No: mt 00822 Claim No: M1908774

Sum Insured: Excess:

Make of Veh: D.O.A. 8.11.2019  
(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 11.11.19 114p.m. Person Contacted: Juman: H.O.D. Endorsement:

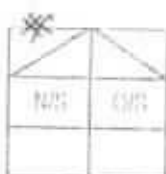
Vehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SH 8318 P - (S) PC1 Nov 2016 / Eqd 252 hq - 22/01/2019
	SMF 7940E - X
12/11/19	Send preli revised via merimen

Kalvin

# ASSIGNMENT

From:   
 Estimated Cost:   
 (OD / TP / WS / TP RES / OD RES / EVA / INV / MV)   
 To inspect vehicle No:   
 at Workshop no:   
 at:   
 Insured by:   
 Policy No:   
 Connected:   
 Date Insured:   
 (Check/Is Hired):   
 Make of Vch:   
 (Policy Condition)   
 (Remark: The veh had commenced its repair at the time of inspection.   
 Date of Market Value:   
 IDAC Accident Report: Consistent? Yes or No   
 CUA / PEE Seen: Consistent? Yes or No   
 Est. Repair: days Res. Yes or No   
 Lym Term: % 2 Val: Yes or No   
 CA / REV / REP / 24 HRS:   
 Date: Person Contacted:   
 Vehicle IN / OUT



Vch No: SH 8318P   
 Yr: 24/03/2016   
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Time Mover /   
 Truck / Trailer or   
 Make: Hyundai i40   
 Color: Blue   
 Sp/Modeling: 457563   
 Eng No: -   
 Cate: KMHLB41UMSU08S8A2   
 Gen Cond: Good (Fair) Poor / Burnt   
 Steering: Inorder / Jammed / Loosed / Burnt or   
 Brakes: Inorder / Jammed / Loosed / Burnt or   
 Mech: Nil / S/Bin / STD A/Rin or   
 Tyre Size: F: 205/60 R16   
 R: -   
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM /   
 TOYO / YOKO or: Hankook   
 Front:   
 Rear:   
 L/R:   
 D.O.A: 8/11/19   
 Survey held at: Comfortelgro (Layang)   
 Date of Damage: Fri / Rear / O/S / N/S / UIC / Roof top or   
 The UIC / Chassis frame / Body Structure affected due to collision

Date / Time:   
 Action / Instruction:   
 8L/S = \$1850/= (Red 597.44, 249)   
 2 repair days   
 com Am on 13/11/19

RECEIVED 10 NOV 2019

CONTRACT: Has Paid Out   
 ( ) : Prelim. Report   
 ( ) : Final Report

Days Of Repair: 2   
 Resurvey No. of Trip: 1

18/11 - typist

Report Format:   
 Lump Sum / I.B.I: (\$) 1850/=

Add Fee:   
 ( ) Site Insp: (\$)   
 ( ) Interview: (\$)   
 ( ) Tech. Ins: (\$)   
 ( ) Workshop: (\$)

Survey Fee:   
 260   
 11   
 261

TOKIO marine   
 4/5

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

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	08 Nov 2019 17:54 Sendback Est	08 Nov 2019 17:59 S\$2,447.44	11 Nov 2019 12:17 Assign				<b>New Assignment</b> Cancel Case

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>									
Insured:	LUMENS AUTO PTE. LTD., Co. Reg. No.: 201426961K								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SH8318P	Date of Loss:	08/11/2019 11:00 - :59 [43 Months and 15 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1908774	Policy/Cover Note No.:	MK000822 (Third Party Only) Coverage: 30/09/2019 - 29/09/2020						
Vehicle Reg. No. (Insured):	SMF7940E	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Ngo Sau Wei Shawn]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 20/11/2019]								
<b>ASSOCIATED MAIL RECEIVED</b>			View All	Compose Case Mail					
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b>									
View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

# 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: [sun@lkkauto.com](mailto:sun@lkkauto.com); [assignments@lkkauto.com](mailto:assignments@lkkauto.com)

To: Tokio Marine Insurance Singapore Ltd 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046	From: LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933
------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

Attn: Ngo Sau Wei Shawn	Date: 12 Nov 2019
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## Preliminary Advice

Insured Vehicle No	: SMF7940E	Accident Date	: 08/11/2019
TP Vehicle No	: SH8318P	Assignment Date	: 11/11/2019
Make	: HYUNDAI i40	Est. Duration of Repair	: 2
Date of Inspection	: 11/11/2019		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD		

## Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	2,447.44
Revised Amount	:S\$	1,455.68
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,455.68

Lump Sum Repair	:S\$	
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## 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 :The above survey was conducted on a 'Without Prejudice' basis.

## 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	08/11/2019 16:01
Date Of Accident	08/11/2019 11:45
Exact Location Of Accident	ALONG ORCHARD TURN TAKASHIMAYA JUNCTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8318P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I40

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-18088936MFSH
Cover Note Number	

### Driver

Name of Driver	NG YAN QU
NRIC No	S1605274D
Date Of Birth	13/06/1963
Occupation	OUTDOOR
Date Of Driving Pass	03/08/1999
Driving Experience	20 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83838928
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 180 LOMPANG ROAD #18-03
Postcode	670180
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	WET

#### 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

REFER ATTACHED \* TYPE OF ACCIDENT :- HEAD TO SIDE

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMF7940E
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHIAU TENG MENG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	RH FRONT
No. Of Passenger (Including Driver)	

**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.

CLAIMS CENTRE PERSONNEL'S SIGNATURE  
POLICYHOLDER'S SIGNATURE

Policyholder's Signature  
Date & Time:

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

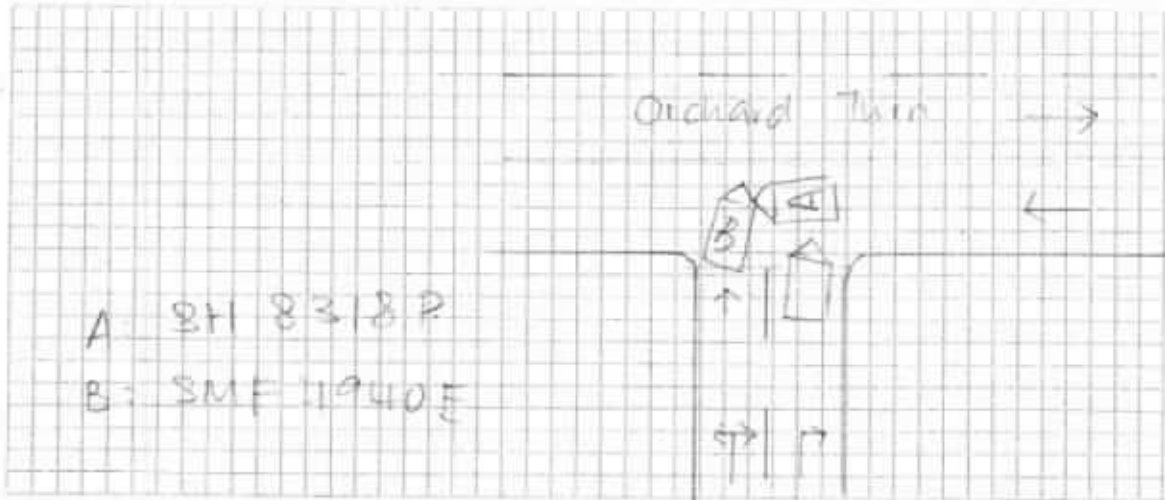
Reporting Centre Personnel's Signature  
Name:  
NRIC/PIN No:

Lokan Wai Yiong

Approved: (Print Name) \_\_\_\_\_



## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 8/11/17 at about 11:45hrs I veh A  
 Was driving straight along Orchard Turn without  
 prob. Suddenly veh B come out from  
 Tokashima.  
 As it happen too sudden, I couldn't react to  
 prevent collision. No injury at the point of  
 accident. Some photo taken to support claims.

## 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: LO LO YUN YONG  
 NRIC/FIN No:

REPORTING CENTRE PERSONNEL'S SIGNATURE





## ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive  
Singapore 508969  
Tel: 6214 8300

TP INSURER:  
CTPL

Tokio Marine Insurance Singapore Ltd (HQ)

Jumani

(Lumini)

Singapore

### PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	08/11/2019
Vehicle Reg. No.:	SH8318P	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	24/03/2016
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDFU597046	Chassis No:	KMHLB41UMGU085842
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

### COST OF CLAIMS

	Amount
Parts	1,786.44
Miscellaneous Items	11.00
Labour	650.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (S\$)</b>	<b>2,447.44</b>
<b>+ GST 7.00% (S\$)</b>	<b>171.32</b>
<b>Nett Amount (S\$)</b>	<b>2,618.76</b>

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

**REPAIR DETAILS****Reference**

**Part Source:** MRM-SG      Version: 1.0 (Last Synchronised: 08 Nov 2019)

**Parts:** 143      HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)

**Labour:** Repairer's      (Price-denominated Standard List)

**Print Code:** ComfortDelGro Engineering Pte Ltd/SH8318P/08/11/2019 17:59

**Validity:** 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

**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk \*.

**Estimates on Parts**

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRT BUMPER ASSY <del>cut</del> <i>cut</i>	20.00	0.00	*1,052.20 FL
2	1		*FRT RADIATOR GRILLE <i>cut</i>	20.00	0.00	*1,110.10 FL
3	1		*FRT RADIATOR GRILLE EMBLEM <i>cut</i> <i>NEC</i>	20.00	0.00	*39.50 FL
4	1		*FRT NUMBER PLATE <i>cut</i>	0.00	0.00	*25.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	2,226.80
- List Item Discount on L Items (S\$)	440.36
<b>Total Parts (S\$)</b>	<b>1,786.44</b>

ComfortDelGro Engineering Pte Ltd/SH8318P/08/11/2019 17:59. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

## Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
<b>Miscellaneous Items</b>			
1	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			11.00

## Estimates on Labour

No	Particulars	Lab.Type	Amount
<b>Labour Items</b>			
1	PANEL BEATING	New	300.00
2	SPRAYPAINT	New	300.00
3	WIRING	New	50.00
Gross Labour Cost (S\$)			650.00

ComfortDelGro Engineering Pte Ltd/SH8318P/08/11/2019 17:59. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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:

12/11/19  
Ram (LKK)  
11/11/19 1115 hrs  
2 repair days  
add repair photo  
4/5  
Ramesh@LKKauto.com  
88622778

2272-44

Our Job Ref No 305347763

Date : 12/11/19

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK  
Attn : RAM  
: SH 8318P

Fax :

08/11/19

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

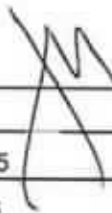
1. The repair job shall bill to: TOKIO --- SMF7940E  
###
2. The finalized amount shall be:
  - (a) Spare Parts after List discount
  - (b) Labour Charges ###
  - Total for Part-By-Part Repair Cost** ###
  - (c) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20% \$1,850.00  
**Final Lumpsum Repair cost**

3. Estimated normal period for repairs: 2 working days

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature :   
Name : JUMANI  
Tel : 6214 8315  
Fax : 65468156

Signature :   
Name : Ram  
Date : 13/11/19

### For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

## ...CLAIM SUBFOLDER...(Pending for Survey Report)

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	08 Nov 2019 17:54 <a href="#">Sendback Est</a>	08 Nov 2019 17:59 <b>S\$2,447.44</b>	11 Nov 2019 12:17 <a href="#">Edit Adj Rpt</a>	<b>S\$1,850.00</b> <a href="#">Edit Estimates</a>	<b>S\$1,850.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>									
Insured:	LUMENS AUTO PTE. LTD., Co. Reg. No.: 201426961K								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SH8318P	Date of Loss:	08/11/2019 11:00 - :59 [43 Months and 15 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1908774	Policy/Cover Note No.:	MX000822 (Third Party Only) Coverage: 30/09/2019 - 29/09/2020						
Vehicle Reg. No. (Insured):	SMF7940E	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Ngo Sau Wei Shawn]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by PARASURAM SHANMUGAM] ... [Final Rpt due 20/11/2019]								
<b>ASSOCIATED MAIL RECEIVED</b> <a href="#">View All</a> <a href="#">Compose Case Mail</a>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

SH8318P (M1908774)  
[SMF7940E]  
TP  
COMFORT TRANSPORTATION PTE LTD  
Nov 8 2019 11:00AM  
[LUMENS AUTO PTE. LTD.]  
ComfortDelGro Engineering Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			View <span>View in Browser</span>		
Assessment Reports									1 per page		<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)							Thumbnail	Print	
1	08/11/19 17:59	Repairer Estimates								Load HTM	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)							Thumbnail	Print	
1	11/11/19 11:02	Accident Statement From: SC - Reg. No: SMF7940E, Claimant: LUMENS AUTO PTE. LTD.								Load HTM	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)							Thumbnail	Print	
1	12/11/19 11:36	Adjuster Immediate Advice								Load HTM	
Photos/Images									3 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)							Thumbnail	Print	
1	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
2	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
3	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
4	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
5	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
6	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
7	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
8	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
9	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
10	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
11	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
12	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
13	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
14	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
15	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
16	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
17	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
18	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
19	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
20	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
21	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
22	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
23	12/11/19 09:31	General View								Load JPG	<input checked="" type="checkbox"/>
24	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
25	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
26	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
27	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
28	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
29	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
30	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
31	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
32	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
33	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
34	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
35	15/11/19 09:26	Reinspection Photo								Load JPG	<input checked="" type="checkbox"/>
36	15/11/19 09:27	After Repair Photo								Load JPG	<input checked="" type="checkbox"/>

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
37	15/11/19 09:27	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
38	15/11/19 09:27	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
39	15/11/19 09:27	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
40	15/11/19 09:27	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
41	15/11/19 09:27	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
42	15/11/19 09:27	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)		Thumbnail	Print
1	14/11/19 10:33	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee		Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	08/11/19 17:59	E-filed GIA report		Load PDF	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)		Thumbnail	Print
1	18/11/19 20:00	Letter of Demand from Third Party		Load TIF	

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Repairer <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			



## 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/TMI19019928/FVF3E2

Date: 19/11/2019

## REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MK000822

Claimant Vehicle No: SH8318P

Insured Vehicle No: SMF7940E

Date of Loss: 08/11/2019

Nature of Claim: TP

Claim No: M1908774

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SH8318P

Make &amp; Model: HYUNDAI I40, 1.7 D CRDI (A)

Engine No: D4FDFU529345

Reg. Date: 24/03/2016 (Man. Year: 2015)

Chassis No: KMHLB41UMGU085842

Colour: Blue

Odometer: 457563 km

Engine Capacity: 1685 cc

Market Value/New Car

Price: N/A

Sum Insured (S\$): Market Value/New Car Price

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Good Steering (Serviceable):

Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification:

No Pre-accident Condition: Average

## CONDITION OF TYRES

Front Tyre Size: 205/60 R16

Rear Tyre Size: 205/60 R16

Front Left Side: Hankook 6 mm

Rear Left Side: Hankook 6 mm

Front Right Side: Hankook 6 mm

Rear Right Side: Hankook 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,786.44	1,786.44	0.00	0.00
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	650.00	530.00	120.00	18.46
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>2,447.44</b>	<b>2,327.44</b>	<b>120.00</b>	<b>4.90</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,850.00</b>		
<b>(S\$)</b>	2,447.44	1,850.00	597.44	24.41
<b>+ GST 7.00/7.00% (S\$)</b>	171.32	129.50	41.82	24.41
<b>Nett Amount (S\$)</b>	<b>2,618.76</b>	<b>1,979.50</b>	<b>639.26</b>	<b>24.41</b>

## INSPECTION

Date of Assignment: 11/11/2019 Present Location:

ComfortDelGro Engineering Pte Ltd (Loyang)

Date Inspected: 11/11/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd (Loyang)  
59 Loyang Drive  
Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: PARASURAM SHANMUGAM

Manager: VERON CHEN

*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>	MRM-SG	Version: 1.0 (Last Synchronised: 19 Nov 2019)
<b>Parts:</b>	143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SH8318P)	
<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		*FRT BUMPER ASSY	Dented	1,052.20 FL	*1,052.20 FL
2	1		*FRT RADIATOR GRILLE	Cracked	1,110.10 FL	*1,110.10 FL
3	1		*FRT RADIATOR GRILLE EMBLEM	Necessary	39.50 FL	*39.50 FL
4	1		*FRT NUMBER PLATE	Cut	25.00 F	*25.00 F

F=Franchise part. L=ListItemDisc.

<b>Sub Total (S\$)</b>	<b>2,226.80</b>	<b>2,226.80</b>
<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	<b>440.36</b>	<b>440.36</b>
<b>Total Parts (S\$)</b>	<b>1,786.44</b>	<b>1,786.44</b>

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

No	Qty	Particulars	Repairer's	Amount
<u>Miscellaneous Items</u>				
1	1	OD/TP Case (Insurer)	11.00	11.00
Sub Total (S\$)			11.00	11.00

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	300.00	280.00
2	SPRAYPAINT	New	300.00	200.00
3	WIRING	New	50.00	50.00
Gross Labour Cost (S\$)			650.00	530.00

Report was unsubmitted during this print-out.
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&lt; END OF ESTIMATES &gt;