ASS. REC. BY: | REF: 28/INC1902 1383/ Kyd3 n4 | Special Instructions:

Surveyor : Kenneth

ASSIGNMENT (Office)

From (Person): Annie Koh of INC Date/Time: 9/12/2019 @ 9'49 am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: GBJ5566A Insured: SLR2377M

at Workshop m/s AT Auto Consultnt Tel: 83868989

of Blk 1 Sin Ming Ind. Est. See. C #01-135

Policy No: Claim No: MT/1074252-001

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 29/11/2019

CA / REV / REP. / REV 24 HRS H.O.D. Endorsement:

Date/Time: 10:19am @ 9/12/19 Person Contacted: Alan Vehicle IN / OUT

Date/Time	Action/Instruction
	SLR2377M - NM/INC 18U566 2/+3 DOA: 12/10/2018
	GBJ [illegible] - X
	C/Cmp @ 82 col (Red $2358-50, 22%)

ASS. REC. BY: Kenneth | REF: INC/

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s AT

of 01-135

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: SLR 2377m

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 08 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: ~~SLR 2377m~~ SBJ5566A Yr Regn: 02 19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Toy Dyna c.c 2982

Colour Silver A/C: Insured / Std / NI / NA

Sp.Reading 29938 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTFAT354 20k 21250k

Gen. Cond: Good / Fair / Poor / Burnt

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

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

Modl: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: B.S 195/75R15

R: Yoku 155 R15 X8 (D)

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	9 9 mm
L/Bal.	8 mm	L/Bal.	9 9 mm
D.O.A.	29/11/19	D.O.I.	4/12/19

Survey held at ✓ 11.36am

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

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

Date / Time	Action / Instruction
1	File pass To

RECEIVED 17 JAN 2020

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) 15/1/20 Typist

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 8

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($) ☐ : Interview ($) Tech Invs ($) Weekend ($)

Survey Fee: _____

Transportation: $ - RS SI

Parts _____

Others _____

TOTAL 250

Report Format :

Lump Sum / I.B.I: ($ $8200/-

Nivitha (LKK Auto)

From: Annie Koh <annie.koh@income.com.sg>
Sent: Wednesday, 4 December 2019 10:50 AM
To: 'assignments@lkkauto.com'; Admin-D (LKKAuto)
Subject: RE: TP CASES FARMED OUT TO LKK ON 04/12/2019

Re-send

Warmest Regards

Annie Koh
Senior Admin,
Operations, Motor & Personal Lines (PL)
T +65 64307899
www.income.com.sg

From: Annie Koh
Sent: Wednesday, 4 December 2019 9:41 AM
To: 'assignments@lkkauto.com' <assignments@lkkauto.com>; 'Admin-D (LKKAuto)' <admin-d@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Teng Ken Leong <kenleong.teng@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 04/12/2019

Dear LKK,

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

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	OI VEH	DOA	Additional Remarks

1	Jared Liu	MT/1074252-001	GBJ5566A	AT AUTO CONSULTANT	BLK 1 SIN MING INDUSTRIAL ESTATE SECTOR C #01-135 SINGAPORE 575642	Alan Tan / 83868989	SLR2377M	29/11/19	
2	Jared Liu	MT/1074075-001	SLK4884P	AUTOWORX HOUSE	176 SIN MING DRIVE #02-01 SIN MING AUTOCARE SINGAPORE 575721	WK Chew / 64528211	SJG3372B	30/11/19	
3	Chester Chong	MT/1073749-002	SGJ1214H	H C AUTO PTE LTD	160 SIN MING DRIVE, #05-09 SIN MING AUTO CITY	Mr. Joe Chee / 94570678	SKZ1109Y	30/11/19	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Annie Koh
Senior Admin Assistant, **Motor Insurance**
T +65 6430 7899
www.income.com.sg

MYT219159611 / Yew Tee Automobile Tech Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 03/12/2019 16:16
SUBMITTED BY: Toh Lei Ming

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 03/12/2019 16:26

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	03/12/2019 16:16
Date Of Accident	29/11/2019 03:10
Exact Location Of Accident	KEPPEL ROAD TOWARDS MCE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBJ5566A
Insured/Policyholder	
Name Of Registered Owner	MING SOON FOOD SUPPLIER
Co Reg No	52999474K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86715389
Alternative Phone No	OFFICE-86715389
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORK USE
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107539225
Cover Note Number	
Driver	
Name of Driver	WU KAIHUA
Passport No/FIN	G5077785K
Date Of Birth	14/09/1982
Occupation	OUTDOOR
Date Of Driving Pass	25/02/2011
Driving Experience	8 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86715389
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	PASIR PANJANG WHOLESALE CENTRE
Postcode	110009
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 ON 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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	**ROAD**: 2 JURONG WEST AVE 5 , **POSTCODE**: 649482 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-7929999 - **FAX NO**:
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLR2377M
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 INJURED PERSON 1	
Name	WU KAIHUA
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	GBJ5566A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	PASIR PANJANG WHOLESALE CENTRE
Postcode	110009

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 motor 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 the 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 claim (collectively the "**Purposes**")

   (b) all insurer(s) who have insured vehicle(s) involved in the 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.

NING SOON FOOD SUPPLIER

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 #2 Pg. 1

SKETCH PLAN

A-GBJ5566A
B-SLR2377M
Date 29/11/2019
Time 0310.

Kepple Road
towards MCE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report.

DECLARATION

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

MHG FOOD SUPPLIER

Driver's Signature
Date & Time:

Driver's signature
(if driver is not the employee)
Date & Time:

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

SINGAPORE POLICE FORCE

T/20191129/2090

Report No. T/20191129/2090

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
29/11/2019 13:56		286

Informant's Particulars

Name of Informant: WU KAIHUA			Address: APT BLK 670 WOODLANDS DRIVE 71 #06-39 SINGAPORE 730670	
ID Type / ID No.: FIN NO / G5077785K			Contact No.: Home/Office: Mobile: 86715389	
Nationality: CHINESE			Email:	
Sex: Male	Age: 37	Date of Birth: 14/09/1982	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/11/2019 03:10	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 KEPPEL ROAD MARINA COASTAL EXPRESSWAY Keppel Road before MCE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ5566A	Van				Seriously Damaged	0
SLR2377M	Car				Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

SINGAPORE POLICE FORCE

T/20191129/2090

Report No. T/20191129/2090

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE 649482
Tel No: 1800-7929999

CONTINUATION OF REPORT

Driver					
Name	WU KAIHUA			ID No.	G5077785K
Related Vehicle	GBJ5566A (Van)			Contact No.	86715389
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL	
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL	
Name	Unknown			ID No.	NIL
Related Vehicle	SLR2377M (Car)			Contact No.	NIL
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL	
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL	

Brief Details.

On the 29/11/2019 at around 0310hrs, I was driving my van (GBJ5566A) along Keppel Road towards MCE, before I entered MCE a car (SLR2377M) suddenly collided with my van from the opposite direction. The car had cross the divider and collided with my van.

My van sustained dent on the driver side doors and car sustained a dented front bumper and damaged headlights. No one was injured and conveyed to hospital.
TP and ambulance was at scene and the other driver was arrested on the spot but I do not know the details.

I was given D/201911296/0016 with TP IOShikiu DID: 65476439.

I am unsure if any government property was damage but there was no government vehicle was involved.
I wish to state that there is in vehicle camera on my van but the Traffic Police had already taken the footage.

SINGAPORE POLICE FORCE

T/20191129/2090

Report No. T/20191129/2090

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE 649482
Tel No: 1800-7929999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: J / SHAO QIANKANG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/11/2019 13:56
Officer In Charge Of Case: TP / GIT / Sgt 2 PHUA TIAK YEE Contact No.: 65472077	Classification Of Case:

Authentication Stamp
NP168
SIGNATURE

A T AUTO CONSULTANT

Not Authorised
C/Lmp $8200/=
Return After Paint
8 days

Blk 113 Teck Whye Lane #05-650 Singapore 680113
HP: 8386 8989 Email:atautoconsultant@gmail.com
Co. Reg. No. : 53368526E

Date of Estimate: 03.12.2019
Vehicle No: GBJ5566A
Owner: MING SOON FOOD SUPPLIER
Date of Accident: 29.11.2019
Make & Model: TOYOTA DYNA
Chassis No : JTFAT35Y20K212504

ESTIMATE FOR ACCIDENT VEHICLE NO GBJ5566A

NETT ITEM

1	1	Front bumper 698.60	Rp	$986.00
2	1	Front bumper bracket RH	R	$423.00
3	1	Headlamp RH 1015.34	Cm	$1,289.00
4	1	Front corner panel(~~repair~~)		$0.00
5	1	Front door RH 1460.00	Rp	$1,577.00
6	1	Front door hinges RH	R	$115.00
7	1	Front door step garnish RH	Sm	$333.00
8	1	Front door lock actuator RH	R	$154.00
9	1	Front door lock inner RH	R	$389.00
10	1	Front door window regulator RH	Sm	$378.00
11	1	Front door window motor RH	Sm	$645.00
12	1	Front wheel mudflap	Rp/Cm	$178.00
13	1	Lower arm RH	Dm	$652.00
14	1	Lower arm ball joint	Rp	$257.00
15	1	Top arm RH	Dm	$1,356.00
16	1	KNunkle arm RH	Rp	$622.00
17	1	Wheel hub RH 210.00	Rp	$458.00
18	1	Absorber RH	Sm	$198.00
19	1	Dise rotor	Sm	$286.00
20	1	Rear deck side board RH	Rp	$1,723.00
21	1	Rear deck floor board RH 1487.00	Rp	$2,003.00
22	1	Cabin B pillar panel(repair)		$0.00
23	1	Cabin B pillar emblem	Rm	$56.00

SUB TOTAL	**$14,078.00**
LESS 25%	**$3,519.50**
DISCOUNTED SUB TOTAL	**$10,558.50**

S. NETT ITEM

1	2	Rear deck side guard	@ $350.00	Cm	$700.00
2	1	Rear side board rubber protector		Cm	$56.00
3	1	Front door company sticker		Rm	$20.00

SUB TOTAL	**$776.00**
LESS 0 %	**$0.00**
DISCOUNTED SUB TOTAL	**$776.00**

LABOUR

1	Panel beating for replace and repair affected parts	$1,000.00	900
2	Spray painting on accident areas X 5 panels	$1,250.00	1000
3	Wiring charges	$100.00	20
4	Apply undercoating to above affected areas	$150.00	90
5	Wheel alignment	$100.00	60
6	Front Rim(~~repair~~)	$100.00	X
7	Remove/refix under carriage	$300.00	180

SUB TOTAL (LABOUR)	**$3,000.00**
SUB TOTAL (PARTS)	**$10,558.50**
	14334.50

UOK Auto Consultants hence notify the Repairer of the following:
- To reserves before/after spray painting
- damaged parts) during
- Paint prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- Structural modification(s) is allowed
- Supplementary item(s) must be reserved and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

R001409
12.12.19 2:19 PM
GBJ5566A

Toyota : Dyna KDY231R-TLMKY
Thrust Line Alignment

Front : Left

Actual	Before	Specified Range
-0°52'	[illegible]	-0°15' 1°15'
3°43'	3°43'	2°25' 3°55'
0°00'	0°13'	0°07' 0°12'
13°22'	12°26'	
12°29'	12°29'	
	0,0BAR	

Camber	
Caster	
Toe	
SAI	
Included Angle	
Turning Angle Diff.	
Tire Pressure	

Front : Right

Actual	Before	Specified Range
-0°20'	0°21'	-0°15' 1°15'
4°10'	4°10'	2°25' 3°55'
0°01'	-0°06'	0°07' 0°12'
12°33'	11°52'	
12°13'	12°13'	
	0,0BAR	

Front

	Actual	Before	Specified Range
Cross Camber	-0°33'	-0°18'	-0°30' 0°30'
Cross Caster	-0°27'	-0°27'	-0°30' 0°30'
Cross SAI	0°49'	0°34'	-0°30' 0°30'
Total Toe	0°01'	0°06'	0°14' 0°24'
Cross Turn Diff.			

Rear : Left

Actual	Before	Specified Range
-0°14'	-0°16'	
0°20'	0°19'	
	0,0BAR	

Camber	
Toe	
Tire Pressure	

Rear : Right

Actual	Before	Specified Range
0°03'	0°05'	
-0°24'	-0°24'	
	0,0BAR	

Rear

	Actual	Before	Specified Range
Cross Camber	-0°18'	-0°21'	
Total Toe	-0°04'	-0°05'	
Thrust Angle	0°22'	0°21'	

R001274
3.12.19 12:50 PM
GBJ5566A

Toyota : Dyna : KDY/LY(220,230,250,260) Independent Front Suspension Models : 2006.9- : KDY231R-TLMKY
Thrust Line Alignment

Front : Left

Actual	Before	Specified Range
-1°12'	-1°16'	-0°15' 1°15'
3°20'	3°20'	2°25' 3°55'
0°55'	1°20'	0°07' 0°12'
13°40'	13°44'	
12°28'	12°28'	

	Front : Right		
	Actual	Before	Specified Range
Camber	-3°28'	-3°15'	-0°15' 1°15'
Caster	2°23'	2°23'	2°25' 3°55'
Toe	1°56'	1°29'	0°07' 0°12'
SAI	15°29'	15°15'	
Included Angle	12°00'	12°00'	
Turning Angle Diff.			

Front

	Actual	Before	Specified Range
Cross Camber	2°16'	1°59'	-0°30' 0°30'
Cross Caster	0°57'	0°57'	-0°30' 0°30'
Cross SAI	-1°48'	-1°31'	-0°30' 0°30'
Total Toe	2°51'	2°49'	0°14' 0°24'
Cross Turn Diff.			

Rear : Left

Actual	Before	Specified Range
-0°07'	-0°08'	
-0°14'	-0°15'	

	Rear : Right		
	Actual	Before	Specified Range
Camber	-0°08'	-0°08'	
Toe	0°11'	0°11'	

Rear

	Actual	Before	Specified Range
Cross Camber	0°01'	0°01'	
Total Toe	-0°04'	-0°04'	
Thrust Angle	-0°13'	-0°13'	

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

ATTN: JARED LIU

Ref: CS/INC19021383/Kyd3n2

Date: 20-01-2020

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SLR 2377M	**Veh. Inspected**	GBJ 5566A
	Policy No.		**Coverage ($)**	0.00
	Claim No.	MT/1074252-001	**Excess ($)**	0.00
	Assign From	ANNIE KOH	**Assign Date**	04/12/2019

2. Vehicle Particulars & Condition

	Make & Model	TOYOTA DYNA (M)	**c.c**	2982
	Engine No.	HIDDEN	**Year of Reg.**	2019
	Chassis No.	JTFAT35Y20K212504	**Colour**	SILVER
	Odometer	29938 KM	**Steering**	IN ORDER
	Brakes	IN ORDER	**Modification**	NIL
	General	GOOD		

3. Conditions of Tyres

		Size	**Make**	**Balance**
	R/H Front Tyre	195/75 R15	BRIDGESTONE	8 mm
	L/H Front Tyre	195/75 R15	BRIDGESTONE	8 mm
	R/H Rear Tyre	155 R15X8 (D)	YOKOHAMA	9/9 mm
	L/H Rear Tyre	155 R15X8 (D)	YOKOHAMA	9/9 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	29/11/2019	**Inspect Date / Time**	04/12/2019 (11:36 AM)
	Survey held at	BLK 1 SIN MING IND EST SEC C # 01-135		
	Repairer	AT AUTO CONSULTANT		

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: **8 Working Days**

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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBJ 5566A

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	BENT	986.00	698.60
1	FRONT BUMPER BRACKET RH	TO REPAIR SEE LABOUR	423.00	-
1	HEADLAMP RH	CUT	1,289.00	1,015.34
1	FRONT CORNER PANEL (NPA)	TO REPAIR SEE LABOUR	-	-
1	FRONT DOOR RH	BENT	1,577.00	1,460.00
1	FRONT DOOR HINGES RH	TO REPAIR SEE LABOUR	115.00	-
1	FRONT DOOR STEP GARNISH RH	SERVICEABLE	333.00	-
1	FRONT DOOR LOCK ACTUATOR RH	TO REPAIR SEE LABOUR	154.00	-
1	FRONT DOOR LOCK INNER RH	TO REPAIR SEE LABOUR	389.00	-
1	FRONT DOOR WINDOW REGULATOR RH	SERVICEABLE	378.00	-
1	FRONT DOOR WINDOW MOTOR RH	SERVICEABLE	645.00	-
1	FRONT WHEEL MUDFLAP	DENTED / CUT	178.00	178.00
1	LOWER ARM RH	DISTORTED	652.00	652.00
1	LOWER ARM BALL JOINT	BENT	257.00	257.00
1	TOP ARM RH	DISTORTED	1,356.00	1,356.00
1	KNUCKLE ARM RH	BENT	622.00	622.00
1	WHEEL HUB RH	BENT	458.00	210.00
1	ABSORBER RH	SERVICEABLE	198.00	-
1	DISE ROTOR	SERVICEABLE	286.00	-
1	REAR DECK SIDE BOARD RH	BENT	1,723.00	1,723.00
1	REAR DECK FLOOR BOARD RH	BENT	2,003.00	1,487.00
1	CABIN B PILLAR PANEL (NPA)	TO REPAIR SEE LABOUR	-	-
1	CABIN B PILLAR EMBLEM	NECESSARY	56.00	56.00
	LESS 25% DISCOUNT		-3,519.50	-2,428.74
			10,558.50	7,286.20

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Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	SPECIAL NETT ITEMS			
2	REAR DECK SIDE GUARD @$350.00 (SN)	CRACKED	700.00	700.00
1	REAR SIDE BOARD RUBBER PROTECTOR (SN)	CUT	56.00	56.00
1	FRONT DOOR COMPANY STICKER (SN)	NECESSARY	20.00	20.00
1	FRONT RIM (SN)	NOT NECESSARY	100.00	-
			876.00	776.00
	LABOUR			
	PANEL BEATING FOR REPLACE AND REPAIR AFFECTED PARTS.INCLUSIVE OF THE REPAIR OF FRONT BUMPER BRACKET RH,FRONT CORNER PANEL,FRONT DOOR HINGES RH,FRONT DOOR LOCK ACTUATOR RH,FRONT DOOR LOCK INNER RH AND CABIN B PILLAR PANEL.		1,000.00	900.00
	SPRAY PAINTING ON ACCIDENT AREAS X 5 PANELS.		1,250.00	1,000.00
	WIRING CHARGES.		100.00	20.00
	APPLY UNDERCOATING TO ABOVE AFFECTED AREAS.		150.00	90.00
	WHEEL ALIGNMENT.		100.00	60.00
	REMOVE/REFIX UNDER CARRIAGE.		300.00	180.00
			2,900.00	2,250.00
	GRAND TOTAL		**14,334.50**	**10,312.20**

	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**8,200.00**

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KONG SENG CHEONG

Licensed Appraiser

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser