

ASS. REC. BY:

REF:

CS/INC19022931/Ksd362

Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Theresa Limela

of

INC

Date/Time: 31/12/19 @ 9:47am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

8MJ 3775X

Insured:

SMF 7568

at Workshop m/s

Hui Yung Motor

Tel:

64515752

of

Blk 176 Sin Ming Drive # 04-02

Policy No:

Claim No:

MT/1077814-001

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

28/12/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

10:03am @ 31/12/19

Person Contacted:

Bel

Vehicle IN / OUT

Date/Time

Action/Instruction

Tohngoh ✓

8MJ 3775X - X

29/1

L/Lm @ 5900 email & confirm

(\$ 3,834.00 Red - 39%)

ASS. REC. BY:

REF: INCL

ASSIGNMENT

From: _____

Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

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: _____

IDAC Accident Rpt: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

05 days

Res.: Yes or No

Lum Sum: _____

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Date / Time

Action / Instruction

1 File pass to

Date/Time, File Pass to?

10/02/201) Typ 4

Date/Time, File Return to?

2) _____

Report Format :

Lump Sum / I.B.I. (\$) 5,900/- 4/5☐ : Prell. Report☒ : Final ReportDays Of Repair: 5Resurvey No. of Trip: 2

Add Fee:

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

Survey Fee:

Transportation:

S + RS. \$

Fikros

Others

TOTAL

250250Veh No: SMJ 3775XYr Regn: 05, 19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Traller or

Make: HondaColour: M. GraySp. Reading: 45143

Eng/No: _____

C/No: GB7Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: NII / S/Rim / STD A/Rim orTyre Size: P: 185/65R15R: YokoBS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

R/Bal. 9 mmL/Bal. 9 mmD.O.A. 28/12/19

Survey held at

Rear

R/Bal. 8 mmL/Bal. 8 mmD.O.I. 31/12/19

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

O/S 1st & U/C

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

RECEIVED 10 FEB 2020

Nivitha (LKK Auto)

From: Theresa Vimala D/O Balagangadharan <thrsvim.bala@income.com.sg>
Sent: Tuesday, 31 December 2019 1:50 PM
To: 'assignments'
Cc: Theresa Vimala D/O Balagangadharan
Subject: FW: TP CASES FARMED OUT TO LKK ON 31/12/2019

List of OIC, details, thanks

Theresa Vimala
Senior Administrator
Operations, Motor & Personal Lines (PL)
T +65 6430 7898
www.income.com.sg



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Hi LKK

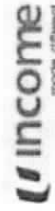
Please assist to survey these vehicles. Thank you.

SN	OIC	Claim No.	Survey Date	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
----	-----	-----------	-------------	---------	---------------	------------------	------------------	-------------	--------	-----	--------------------

1	Alice Low	MT/1077171-002	31/12/2019	SJR808Z	BH AUTO SERVICES PTE LTD	BLK 1 #01-115 SIN MING INDUSTRIAL EST SECTOR C SINGAPORE 575636	Wen Zheng / 6559 / 8945 / 9621 2084	10:00-13:00	SJP7805X	24/12/2019	This vehicle belong to our MD of ComfortDelGro (REQUESTED-9am to 10am)
2	Chryllis Quah	MT/1077895-001	31/12/2019	SLM1898J	COMFORTDELGRO ENGINEERING PTE LTD	205 BRADDELL ROAD EAST WING 3RD FLR SINGAPORE 579701	Ngo Toh Wee / 6383 8115 / 6383 7362 / 6383 7656	09:30-10:30	YP400Z	30/12/2019	
3	Rajeswary	MT/1077719-001	31/12/2019	SLX253T	CP MOTORS PTE LTD	BLK 160 SIN MING DRIVE SIN MING AUTO CITY #05-05	Thomas Tan / 8201 8103	10:00-12:00	SIV6239E	27/12/2019	
4	Azhari	MT/1077789-001	31/12/2019	SLU7303C	ESTEEM PERFORMANCE PTE LTD	385 SIN MING DRIVE VICOM INSPECTION CENTRE SINGAPORE 575718	CARMEN / 8799 0066 / 6566 2112		SKP2361Y	29/12/2019	
5	Chryllis Quah	MT/1077726-001	31/12/2019	SML358B	HUI YANG MOTOR SERVICE	176 SIN MING DRIVE #04-02/03 SIN MING AUTOCARE SINGAPORE 575721	Bel / 64515752	10:00-12:00	SIV9565T	29/12/2019	
6	Serene Lim	MT/1077814-001	31/12/2019	SMJ3775X	HUI YANG MOTOR SERVICE	176 SIN MING DRIVE #04-02/03 SIN MING AUTOCARE SINGAPORE 575721	Bel / 64515752	10:00-12:00	SMF756S	28/12/2019	
7	Huey Huey	MT/1077878-001	31/12/2019	SMK943S	TEAM AUTOPRO PTE LTD	BLK 160 SIN MING DRIVE #01-14 SINGAPORE 575722	Eric Lee / 8269 9999		SI2620Z	30/12/2019	agreeable with the appointment of Mr Lim - LKK

8	Helena	MT/1077820-001	31/12/2019	SLV535GH	TEAM AUTOPRO PTE LTD	BLK 160 SIN MING DRIVE #01-14 SINGAPORE 575722	Eric Lee / 8269 9999		SGK1569D	28/12/2019	agreeable with the appointment of Mr Lim - LKK
9	Airwan	MT/1077830-001	31/12/2019	SLV2518C	VIN'S AUTOMOTIVE GROUP	160 SIN MING DRIVE #08-09 SIN MING DRIVE SINGAPORE 575722	Raymond Teo / 64532121		FU7961Z	29/12/2019	
10	David	MT/1076933-002	31/12/2019	SJJ3638U	VIN'S AUTOMOTIVE GROUP	160 SIN MING DRIVE #08-09 SIN MING DRIVE SINGAPORE 575722	Raymond Teo / 64532121		SLL1656X	21/12/2019	

Theresa Vimala
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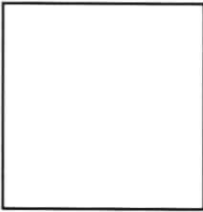


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SINGAPORE ACCIDENT STATEMENT

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	30/12/2019 14:11
Date Of Accident	28/12/2019 20:40
Exact Location Of Accident	MAXWELL ROAD TURNING TO CECIL STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ3775X
Insured/Policyholder	
Name Of Registered Owner	VFM PTE. LTD.
Co Reg No	2XXXXX773K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94888948
Alternative Phone No	OFFICE-62913113

Vehicle Particulars

Manufacturer	HONDA
Model	FREED
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5076629069-03 (CLASSIC)
Cover Note Number	

Driver

Name of Driver	YAP KENG GUAN
NRIC No	SXXXX903A
Date Of Birth	21/07/1979
Occupation	OUTDOOR
Date Of Driving Pass	15/12/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94888948
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 101D PUNGGOL FIELD #09-456
Postcode	824101
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	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	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT (ATTENDED BY: JAMES NG)

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMF756S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR LOO
NRIC/Passport Number	
Contact Number	89021317
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	YAP KENG GUAN
Approximate Age	40
Injuries Sustain	BACK, NECK AND COLLAR BONE PAIN, AND 3 DAYS MC
Injured person in which vehicle?	SMJ3775X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 101D PUNGGOL FIELD #09-456
Postcode	824101

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: **NG WING KIN JAMES**
NRIC/IN No.:
admin.vac@vicom.com.sg

30 DEC 2019

Sketch Plan #2 Pg. 1

SKETCH PLAN

Veh A- SMJ3775x

Veh. B - SMF 7565

Cecil Street

Maxwell Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to attached Police Report.

DECLARATION

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

Policyholder's Signature

Date & Time:

30 DEC 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

NG WING KIN, JAMES
Reporting Centre Personnel's Signature

Reporting Centre Personnel's Signature _____

admin.vac@vicom.com.sg

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20191229/2078

1 of 3

Report No. T/20191229/2078

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/12/2019 19:41		Vide Report No.:	Station Diary No.: 131
Informant's Particulars			
Name of Informant: YAP KENG GUAN		Address: APT BLK 101D PUNGGOL FIELD #09-456 SINGAPORE 824101	
ID Type / ID No.: NRIC NO / S7920903A		Contact No.: Home/Office: Mobile: 94888948	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 40	Date of Birth: 21/07/1979	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Driver		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/12/2019 20:40	Type of Location:
Location: Along Road 1 MAXWELL ROAD CECIL STREET Along Maxwell road turning left at the filter lane to cecil street				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
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
SMF756S	Car				Slightly Damaged	0
SMJ3775X	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/20191229/2078

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 3

Report No. T/20191229/2078

CONTINUATION OF REPORT

Driver			
Name	Mr Loo	ID No.	NIL
Related Vehicle	SMF756S (Car)	Contact No.	89021317
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
Driver			
Name	YAP KENG GUAN	ID No.	S7920903A
Related Vehicle	SMJ3775X (Car)	Contact No.	94888948
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	29/12/2019	Date Discharge	29/12/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 28/12/2019 at about 2040hrs while I was driving my car SMJ3775X along Maxwell Road turning left at the filter lane to Cecil Street. When I was halfway towards the filter lane, one car SMF756S drove from the 2nd lane supposing waited for the red traffic light to be on his favor however he suddenly changed lane and made a left turn towards the filter lane causing the accident to took place. His car front had then hit onto my car right driver door. We then managed to exchange particulars and he does not wish to settle the damages with me as he felt that he is not in the wrong.

I have footage of the accident. I have back pain and consulted the doctor from SKGH and doctor given me 3 days MC. Police or ambulance did not came to scene.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999



T/20191229/2078

3 of 3

Report No. T/20191229/2078

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:

F /

Sgt 3 TEO JIA HAO, KENNETH

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

29/12/2019 19:41

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

SN 085

Signature:

Authentication Stamp
NP168

Singapore Police Force

輝陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658

GST Reg No. 201629438M

28/12/2019

Owner: VFM PTE LTD

ESTIMATE TO REPAIR HONDA FREED HYBRID - SMJ3775X

1pc	front bumper	1014.10	My M	\$ 1,060.10	✓
1pc	front bumper RH side retainer		Per	\$ 24.90	✗
1pc	front RH headlamp	1740	My M	\$ 1,980.30	✓
1pc	front RH fender	567.	Ry	\$ 585.00	—
1pc	front RH fender "HTBRID" emblem		Me	\$ 68.50	—
1pc	front RH fender inner shield		Se	\$ 155.85	✗
1opcs	front RH fender inner shield clip @\$5.00		nn	\$ 50.00	✗
1pc	front RH side glass with moulding		midy ni	\$ 680.50	—
1pc	front RH door		Ry	\$ 1,105.00	—
1pc	front RH door side mirror	520	na	\$ 640.60	—
1pc	front RH door side mirror cover		n	\$ 110.70	✗
1pc	front RH door frame sticker		me	\$ 56.90	—
1pc	front RH door inner rubber		se	\$ 110.80	✗
1pc	front RH absorber	325	By	\$ 429.50	—
1pc	front RH knuckle arm		By	\$ 230.20	—
1pc	front RH knuckle bearing		me	\$ 129.40	—
1pc	front RH lower arm	300.30	nit	\$ 350.00	—
1pc	front RH rim		nd	\$ 380.50	50sn
				\$ 8,148.75	
				\$ 1,629.75	
				\$ 6,519.00	
	less 20%				
1pc	front RH tyre		Per	s.nett \$ 195.00	156sn 809sn
	sealant		me	s.nett \$ 80.00	30sn
	remove & refit front RH side glass			\$ 120.00	601
	remove & refit front RH door glass			\$ 60.00	—
	remove & refit front RH undercarriage			\$ 380.00	2001
	alignment			\$ 80.00	601
	wiring			\$ 120.00	201
	tuffkote			\$ 180.00	601
	spray painting			\$ 1,000.00	7001
	labour charges			\$ 1,000.00	6001
	Total			\$ 9,734.00	



NTUC
vehicle in
31/12/19

Not Authorized
C/Smp @ \$5900k
Resurvey After Paint
5 days

C-P



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/INC19022931/Ksd3e2

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

Date: 10-02-2020



ATTN : SERENE LIM

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SMF 756S	Veh. Inspected	SMJ 3775X
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1077814-001	Excess (\$)	0.00
Assign From	THERESA VIMALA	Assign Date	31/12/2019

2. Vehicle Particulars & Condition

Make & Model	HONDA FREED (A)	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	GB71078343	Colour	METALLIC GREY
Odometer	45143 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	185/65 R15	FIRENZA	9 mm
L/H Front Tyre	185/65 R15	FIRENZA	9 mm
R/H Rear Tyre	185/65 R15	YOKOHAMA	8 mm
L/H Rear Tyre	185/65 R15	YOKOHAMA	8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT AND UNDERCARRIAGE PORTION.

DAMAGES SEE DETAILS.

5. General Information

Accident Date	28/12/2019	Inspect Date / Time	31/12/2019 (01:26 PM)
Survey held at	HUI YANG MOTOR PTE LTD BLOCK 176 SIN MING DRIVE #04-02 SIN MING AUTOCARE SINGAPORE 575721		

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:	5 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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMJ 3775X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	MTG CRACKED	1,060.10	1,014.10
1	FRONT BUMPER RH SIDE RETAINER	SERVICEABLE	24.90	-
1	FRONT RH HEADLAMP	MTG CRACKED	1,980.30	1,740.00
1	FRONT RH FENDER	BENT	585.00	567.00
1	FRONT RH FENDER "HYBRID" EMBLEM	NECESSARY	68.50	68.50
1	FRONT RH FENDER INNER SHIELD	SERVICEABLE	155.85	-
10	FRONT RH FENDER INNER SHIELD CLIP @\$5.00	NOT NECESSARY	50.00	-
1	FRONT RH SIDE GLASS WITH MOULDING	MLDG DISTORTED	680.50	680.50
1	FRONT RH DOOR	BENT	1,105.00	1,105.00
1	FRONT RH DOOR SIDE MIRROR	DENTED	640.60	520.00
1	FRONT RH DOOR SIDE MIRROR COVER	TO REPAIR SEE LABOUR	110.70	-
1	FRONT RH DOOR FRAME STICKER	NECESSARY	56.90	56.90
1	FRONT RH DOOR INNER RUBBER	SERVICEABLE	110.80	-
1	FRONT RH ABSORBER	BENT	429.50	325.00
1	FRONT RH KNUCKLE ARM	BENT	230.20	230.20
1	FRONT RH KNUCKLE BEARING	NECESSARY	129.40	129.40
1	FRONT RH LOWER ARM	DISTORTED	350.00	300.30
	LESS 20% DISCOUNT		-1,553.65	-1,347.38
			6,214.60	5,389.52
1	FRONT RH RIM (LOCAL PURCHASE) (SN)	DENTED	380.50	50.00
	LESS 20% DISCOUNT		-76.10	-
			304.40	50.00
<u>SPECIAL NETT ITEMS</u>				
1	FRONT RH TYRE (SN) (80%)	PUNCTURE	195.00	156.00
1	SEALANT (SN)	NECESSARY	80.00	30.00
			275.00	186.00
<u>LABOUR</u>				
	REMOVE & REFIT FRONT RH SIDE GLASS.		120.00	60.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REMOVE & REFIT FRONT RH DOOR GLASS.		60.00	60.00
	REMOVE & REFIT FRONT RH UNDERCARRIAGE.		380.00	200.00
	ALIGNMENT.		80.00	60.00
	WIRING.		120.00	20.00
	TUFFKOTE.		180.00	60.00
	SPRAY PAINTING.		1,000.00	700.00
	LABOUR CHARGES. INCLUSIVE OF THE REPAIR OF FRONT RH DOOR SIDE MIRROR COVER.		1,000.00	600.00
			2,940.00	1,760.00
	GRAND TOTAL		9,734.00	7,385.52
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				5,900.00

Report Ref No. CS/INC19022931/Ksd3e2

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

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