

Transcript

Asst. REC. BY:

REF:

81UOI20006178/KSD302

(Special Instruction)

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Felis

of

UOI

Date/Time: 12:17pm @ 3/1/2020

Estimated Cost:

Bill to:

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

SJR 2200M

To Inspect Vehicle No:

SHD 635C

Insured:

~~SJR 2200M~~

at Workshop m/s

Transcarb

Tel:

6287 6666

of

NO. 2 AMK SH-63

Policy No: DHOM120021661602

Claim No:

Sum Insured:

Excess:

Make of Vols:

D.O.A. 31/12/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time: 12:17pm @ 3/1/2020

Person Contacted:

Candy

Vehicle: IN / OUT

| Date/Time | Action/Instruction |
|-----------|------------------------|
| | SHD 635C - X |
| | SJR 2200M - X |
| 11/2 | 81531.24 Confirm |
| | (532,033.84 Red - 95%) |

ASS. REC. BY:

REF: U021

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Tans Coh

of _____

Insured: _____

Policy No. _____

Claims No. _____

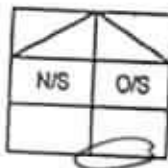
Sum Insured: _____ Excess: _____

(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 Report: _____ Consistent?: Yes or No

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

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 1.3.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SHD 635C Yr Regn: 11.17

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

Truck / Trailer or _____

Make: Renault Latitude cc 1995Colour M. White / Bl A/C: Insured / Std / NI / NASp. Reading 225752 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VI-1ABC13AUC.283461Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD A/Rim orTyre Size: F: 215/60R16

R: _____

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

TOYO / YOKO or Giti

Front _____ Rear _____

R/Bal. P mm R/Bal. P mmL/Bal. P mm L/Bal. P mmD.O.A. 31/12/19 D.O.I. 3/1/2020

Survey held at _____

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

Acc c/s

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

RECEIVED 11 FEB 2020

Date/Time, File Pass 107

1) 11/02/20

Date/Time, File Return 107

2) _____

☐ : Prell. Report
☒ : Final Report
Days Of Repair: 2Resurvey No. of Trip: 1
Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech Invs (\$)
☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS: \$

Fuel:

Others:

TOTAL

23 x 25 = 575

250 + 575

60

80

15

980

Report Format:

Lump Sum / I.B.I: (\$) 1,531.24 p/p



MEMBER OF THE UOB GROUP

United Overseas Insurance Limited
3 Anson Road #20-01 Springleaf Tower
Singapore 079909
Tel (65) 6222 7733
Fax (65) 6327 3869 / 6327 3870
E-mail: ContactUs@uoi.com.sg
uoi.com.sg
Co. Reg. No. 197100132R

| | | |
|--------|---|---|
| To : | Trans-Cab Services Pte Ltd Attn: Candy - Accident Dept | Fax : 62571330 |
| From : | Josephine Wong | Fax : 63273869 |
| Date : | 3.1.2020 | Cur ref: SJR2200M (DHOM120021661E02) Yr ref : SHD635C |

FACSIMILE MESSAGE

WITHOUT PREJUDICE

**REQUEST FOR PRE-REPAIR SURVEY -- SHD635C
ACCIDENT INVOLVING SJR2200M AND SHD635C ON 31.12.2019**

We refer to your facsimile dated 2.1.2020.

In this case you have proposed to appoint M/s LKK Auto Consultants Pte Ltd from our list, to conduct the pre-repair survey on without prejudice basis.

Please forward us a copy of the estimated cost of repair for our reference.

Please seek your client's instruction for the repair after the inspection has been completed.

We reserve all our rights in this matter.

Thank you.

Regards

Josephine Wong
Claims Division

cc. LKK Auto Consultants Pte Ltd
Fax: 62564315
Attn : Nivitha

For your immediate attention.
fy

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

| | |
|----------------|---------|
| Owner ID Type: | Company |
| Owner ID: | 878K |

Vehicle Details

| | |
|-------------------------------|---------------------------------|
| Vehicle No.: | SHD635C |
| Vehicle to be Exported: | Yes |
| Intended Deregistration Date: | 31 Dec 2019 |
| Vehicle Make: | RENAULT |
| Vehicle Model: | LATITUDE 2.0L DCI AUTO D/AB 4DR |
| Primary Colour: | Red |
| Manufacturing Year: | 2016 |
| Engine No.: | M9R8839C003108 |
| Chassis No.: | VF1ABL15AUC283461 |
| Maximum Power Output: | 127.0 kW (170 bhp) |
| Open Market Value: | \$19,998.00 |
| Original Registration Date: | 30 Nov 2017 |
| First Registration Date: | 30 Nov 2017 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$19,998.00 |

Intended PARF Rebate Details

| | |
|-------------------------------|-------------|
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 29 Nov 2025 |
| PARF Rebate Amount: | \$14,998.00 |

Intended COE Rebate Details

| | |
|-----------------------------|--------------------------------------|
| COE Expiry Date: | 29 Nov 2025 |
| COE Category: | A - Car up to 1600cc & 97kW (130bhp) |
| COE Period(Years): | 8 |
| PQP Paid: | \$33,596.00 |
| COE Rebate Amount: | \$24,835.00 |
| Total Rebate Amount: | \$39,833.00 |

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 31 Dec 2019

OK

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 | 31/12/2019 11:00 |
| Date Of Accident | 31/12/2019 08:15 |
| Exact Location Of Accident | JURONG WEST AVENUE 4 |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------------|
| Vehicle Registration Number | SHD635C |
| Insured/Policyholder | |
| Name Of Registered Owner | TRANS-CAB SERVICES PTE LTD |
| Co Reg No | 2XXXXX878K |
| Email Address | CLAIMS@TRANSCAB.COM.SG |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-62866666 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | RENAULT |
| Model | LATITUDE-2.0 L (A) |
| Exact Purpose for which vehicle was being used at time of accident | HIRE AND REWARD |
| 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 | AXA INSURANCE PTE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | YES |
| Policy Number | VFX/P1680520 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | SIM MENG THONG |
| NRIC No | SXXXX544I |
| Date Of Birth | 27/05/1956 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 30/06/1978 |
| Driving Experience | 41 YEARS AND 6 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-98535279 |
| Fax Number | |
| Contact Number | |
| EMail Address | NOEMAIL |

| | |
|---|------------------------------|
| Address | 86 CORPRATION ROAD #10-11 |
| Postcode | 649822 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|--------------------------|
| Type Of Accident | COLLISION - HEAD TO REAR |
| 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) | 4 |
| Passenger 1 | NAME: : UNKNOWN GENDER: : MALE |
| Passenger 2 | NAME: : UNKNOWN GENDER: : FEMALE |
| Passenger 3 | NAME: : UNKNOWN GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | UBI AVE 3 |
| Police Station Address | ROAD: 10 UBI AVE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT : T/20191231/7003

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 | SJR2200M |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |

| | |
|-------------------------------------|-----------------|
| Vehicle Category | PRIVATE CAR |
| Name of Driver | NGAI CHING KWAN |
| NRIC/Passport Number | SXXXX978H |
| Contact Number | 96420818 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

DETAILS OF INJURED PERSON 1

| | |
|---|----------------|
| Name | SIM MENG THONG |
| Approximate Age | |
| Injuries Sustain | |
| Injured person in which vehicle? | SHD635C |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

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 #2 Pg. 1

SKETCH PLAN

Diagram of a building layout on grid paper. The layout shows a central corridor with several rooms. On the left, a room is labeled 'Dining West'. Below it, a room is labeled 'Avenue 4'. On the right, a room is labeled 'A' and another room below it is labeled 'B'. To the right of the main building, there are two more rooms labeled 'A' and 'B'. The text 'A = SHD 635C' and 'B = SDR 2200M' is written next to the rooms on the right.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see other police Report

DECLARATION

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

Policyholder's Signature

Date & Times:

Driver's Signature _____

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: _____

NRIC/FIN No.:

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20191231/7003

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20191231/7003

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|---|--------------------|----------------------------|
| Date/Time Report Made: 31/12/2019 10:24 | | Vide Report No.: | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: SIM MENG THONG | | | Address: 86 CORPORATION ROAD #10-11 SINGAPORE 649822 | | |
| ID Type / ID No.: NRIC NO / S1194544I | | | Contact No.: Home/Office: Mobile: 98535279 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: simmengthong@yahoo.com.sg | | |
| Sex: Male | Age: 63 | Date of Birth: 27/05/1956 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: TAXI DRIVER | | | Driving Licence Information: Class: | | Date of Expiry: |

| | | | | |
|--|------------------|---|---|--|
| General Information of the Accident | | | | |
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 31/12/2019 08:15 | Type of Location: X-Junction |
| Location: JURONG WEST AVENUE 4 | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: 50 Km/h | |
| Traffic Flow: Dual Carriage Way | | Traffic Control: Traffic Light - Working | Traffic Volume: Heavy | |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: No |

| Details of Vehicle Involved | | | | | | |
|------------------------------------|------|--------|--------|-------|---------------------|-------------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No. of Passengers |
| SHD635C | Car | | | | | 0 |
| SJR2200M | Car | TOYOTA | Premio | Brown | Slightly Damaged | 0 |

| | |
|-----------------------------------|--------------------------------|
| Details of Person Involved | |
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20191231/7003

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20191231/7003

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|------------------------|------------------|---|
| Driver | | | |
| Name | SIM MENG THONG | | ID No. S1194544I |
| Related Vehicle | SHD635C (Car) | | Contact No. 98535279 |
| Hospital/Clinic | 24 HOUR WALK-IN CLINIC | | Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL |
| Date Treatment | 31/12/2019 | Date Discharge | 31/12/2019 |
| No. of Days granted Medical Leave | 03 | Degree of Injury | Serious |
| Driver | | | |
| Name | SIM MENG THONG | | ID No. S1194544I |
| Related Vehicle | SHD635C (Car) | | Contact No. 98535279 |
| 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.

I was stationary on lane 2 along Jurong west ave 4 waiting to Turn Right to Jalan Boon Lay. While I was waiting for the green light, I suddenly felt a great impact from the rear of my vehicle. Upon alighting my vehicle i realised it was a vehicle with license plate (SJR2200M) that collides onto the rear of my vehicle. The driver of SJR2200M showed indecent gesture when I called the police.

I felt injured and went to see a doctor intermedical. I was given 3 days MC



**SINGAPORE
POLICE FORCE**



T/20191231/7003

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20191231/7003

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
SHARIFAH NOR FARIZAN BINTE SYED MOHD
SAID
Contact No.: 65476172

Authentication Stamp

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
31/12/2019 10:24

Classification Of Case:

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 635C**AAD1912-213***Not Notified
Resurvey By point*

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration :

SHD 635C

VF1ABL15AUC283461

RENAULT

LATITUDE

31.12.19

UOI

30/11/2017

PART**LIST**

| | | | | | | |
|----|---|-----------------------------------|----|---------------|----------|-----|
| 1 | 1 | BUMPER COVER REAR | \$ | <i>Bul/Ad</i> | 561.70 | ✓ |
| 2 | 1 | BUMPER LOWER REAR | \$ | <i>ad/ln</i> | 411.90 | ✓ |
| 3 | 1 | BUMPER BRACKET CTR REAR | \$ | <i>ln</i> | 98.10 | } X |
| 4 | 1 | BUMPER BRACKET SIDE RH REAR | \$ | <i>ln</i> | 82.10 | |
| 5 | 1 | BUMPER RETAINER RH REAR | \$ | <i>ln</i> | 59.80 | |
| 6 | 1 | BUMPER REFLECTOR RH | \$ | <i>ln</i> | 16.60 | |
| 7 | 1 | BUMPER BRACKET SIDE LH REAR | \$ | <i>ln</i> | 80.80 | |
| 8 | 1 | BUMPER RETAINER LH REAR | \$ | <i>ln</i> | 54.20 | } X |
| 9 | 1 | BUMPER REFLECTOR LH | \$ | <i>ln</i> | 16.60 | |
| 10 | 1 | BUMPER BEAM REAR | \$ | <i>ln</i> | 547.80 | |
| 11 | 1 | BUMPER BEAM BRACKET LH REAR | \$ | <i>ln</i> | 114.50 | } X |
| 12 | 1 | BUMPER BEAM BRACKET RH REAR | \$ | <i>ln</i> | 100.90 | |
| 13 | 1 | OUTER PANEL REAR (End Panel) | \$ | <i>ln</i> | 745.80 | |
| 14 | 1 | OUTER PANEL REAR (End Panel) TRIM | \$ | <i>ln</i> | 404.56 | |
| 15 | 1 | TAILLAMP RH | \$ | <i>ln</i> | 313.10 | |
| 16 | 1 | TAILLAMP PANEL RH | \$ | <i>ln</i> | 401.40 | |
| 17 | 1 | TAILLAMP LH | \$ | <i>ln</i> | 401.40 | |
| 18 | 1 | TAILLAMP PANEL LH | \$ | <i>ln</i> | 401.40 | |
| 19 | 1 | BOOT REAR | \$ | <i>ln</i> | 1,677.20 | |
| 20 | 1 | BOOT FINISHER | \$ | <i>ln</i> | 344.70 | |
| 21 | 1 | BOOT WHEATERSTRIP | \$ | <i>ln</i> | 178.20 | } X |
| 22 | 1 | BOOT REFLECTOR LAMP LH | \$ | <i>ln</i> | 277.70 | |
| 23 | 1 | BOOT REFLECTOR LAMP RH | \$ | <i>ln</i> | 277.70 | |
| 24 | 1 | BOOT BADGE 'RENAULT' | \$ | <i>ln</i> | 82.40 | |
| 25 | 1 | BOOT BADGE | \$ | <i>ln</i> | 95.80 | |
| 26 | 1 | BOOT STRUT LH | \$ | <i>ln</i> | 145.10 | |
| 27 | 1 | BOOT STRUT RH | \$ | <i>ln</i> | 145.10 | |

Trans-cab Auto Services Pte Ltd

AAD1912-213

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 635C

| | | | | | | | | |
|-------|---|--------------------------|----|----|-----------|---|---|--|
| 28 | 1 | BOOT HINGE LH | \$ | R | 254.20 | } | X | |
| 29 | 1 | BOOT HINGE RH | \$ | R | 253.80 | | | |
| 30 | 2 | BOOT RUBBER PLUG | \$ | Sn | 139.90 | | | |
| 31 | 1 | SPARE TYRE BOARD | \$ | Sn | 680.90 | | | |
| 32 | 1 | BOOT LOCK LINKAGE | \$ | Sn | 20.60 | | | |
| 33 | 1 | BOOT LOCK LINKAGE HOLDER | \$ | Sn | 99.50 | | | |
| 34 | 1 | BOOT INNER TRIM BOARD | \$ | Sn | 611.00 | | | |
| 35 | 1 | BOOT SWITCH | \$ | Sn | 113.00 | | | |
| 36 | 1 | BOOT LOCK | \$ | R | 246.60 | | | |
| 37 | 1 | BOOT LOCK CATCH | \$ | R | 41.70 | | | |
| 38 | 1 | EXHAUST REAR | \$ | R | 5,263.60 | | | |
| 39 | 1 | EXHAUST CAP REAR | \$ | R | 125.40 | | | |
| TOTAL | | | \$ | | 15,886.76 | | | |
| 10% | | | \$ | | 1,588.68 | | | |
| | | | \$ | | 14,298.08 | | | |

Special Nett

| | | | | Special Net | | |
|----|------|-----------------------------------|----|-------------|--------|-----|
| 1 | 1SET | PARKING AID | \$ | Sn | 700.00 | X |
| 2 | 1SET | REAR BUMPER CLIP | \$ | na | 66.00 | ✓ |
| 3 | 1SET | BUMPER BRACKET CTR CLIP | \$ | na | 33.00 | ✓ |
| 4 | 1SET | BUMPER BRACKET SIDE CLIP RH RR | \$ | na | 10.00 | X |
| 5 | 1SET | BUMPER RETAINER RH CLIP RR | \$ | na | 20.00 | X |
| 6 | 1SET | BUMPER BRACKET SIDE CLIP LH RR | \$ | na | 10.00 | X |
| 7 | 1SET | BUMPER RETAINER CLIP LH RR | \$ | na | 20.00 | X |
| 8 | 1SET | BUMPER LOWER REAR RIVET | \$ | na | 22.00 | X |
| 9 | 1SET | BUMPER LOWER REAR CLIP | \$ | na | 66.00 | ✓ |
| 10 | 1 | BOOT STICKER "Trans-cab" | \$ | na | 30.00 | } X |
| 11 | 1 | BOOT STICKER "6555-3333" | \$ | na | 30.00 | |
| 12 | 2 | REAR WINDSCREEN SEALANT | \$ | na | 80.00 | |
| 13 | 1 | WINDSCREEN MOULDING | \$ | na | 100.00 | |
| 14 | 1 | REAR WINDSCREEN INNER SPONGE SEAL | \$ | na | 100.00 | |
| 15 | 1 | BOOT INNER TRIM CLIP | \$ | na | 45.00 | |
| 16 | 1SET | BOOT FINISHER CLIP | \$ | na | 24.20 | |
| 17 | 1 | TAILLAMP CLIP LH | \$ | na | 5.00 | |
| 18 | 1 | TAILLAMP CLIP RH | \$ | na | 5.00 | |

Trans-cab Auto Services Pte Ltd**AAD1912-213**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 635C

| | | | | | |
|--------------------|---|--------------------------------|-----------|------------------|---|
| 19 | 1 | Rear Bumper Protector | \$ | 100.00 | X |
| 20 | 1 | EXHAUST MOUNTING REAR | \$ | 16.00 | X |
| 21 | 1 | REAR LICENCE PLATE WITH HOLDER | \$ | 80.00 | X |
| 22 | 1 | EXHAUST BRACKET REAR | \$ | 24.80 | X |
| TOTAL | | | \$ | 1,587.00 | |
| TOTAL PARTS | | | \$ | 15,885.08 | |

LABOUR

| | | | |
|---|----|----------|------|
| To transfer of bootlid fittings, attachments and perform water seepage test. | \$ | 170.00 | X |
| To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair. | \$ | 380.00 | X |
| To Rust-Proofing Of The Affected Areas. | \$ | 170.00 | X |
| To Check Electrical Lighting Concerned. | \$ | 170.00 | 101 |
| To transfer of tire, rim and on wheel balancing. | \$ | 170.00 | X |
| To reinstall rear bumper parking sensor. | \$ | 170.00 | 601 |
| Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same | \$ | 7,500.00 | 2001 |
| To transfer of rear end panel fittings, attachment and perform water seepage test. | \$ | 170.00 | X |
| To transfer of rear windscreen glass to facilitate bodywork repair. | \$ | 170.00 | X |
| To check steering geometry and computer wheel alignment | \$ | 220.00 | X |

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SHD 635C

| | | |
|--|-----------|---------------------------|
| To repair and realign rear exhaust pipe. | \$ | <i>nn</i> 170.00 <i>X</i> |
| Putty and spray painting of the affected portion. | \$ | 7,500.00 <i>2201</i> |
| To transfer of rear bumper fittings, attachment and perform water seepage test. | \$ | <i>nn</i> 170.00 <i>X</i> |
| Labour charge to mount and dismount vehicle on jig bench, to facilitate repair. | \$ | <i>4</i> 380.00 <i>X</i> |
| To drop rear exhaust box, renew the same, to repair and realign centre exhaust pipe. | \$ | <i>7</i> 170.00 <i>X</i> |
| TOTAL | \$ | 17,680.00 |
| Over All Total | \$ | 33,565.08 |

PART BY PART (REPAIR DAY)*25 DAYS*
2 days

LMT Auto Consultants hereby notify the Repairer of the following:

- To remove tailgate after painting
- To supply damaged parts body recovery
- Parts prices are subject to confirmation
- Third party survey is on a "no cost" Prepaid" basis
- No charge modification is allowed
- Supplementary liability must be authorized and is subject to final approval from Insurance Company.

Acknowledged by Repairer:

Signature:

Date:

**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

Affiliated to Federation Internationale Des Experts En Automobile

UNITED OVERSEAS INSURANCE LTD

Ref : CS/UOI20000178/Ksd3q2

3 ANSON ROAD #28-01
SPRINGLEAF TOWER SINGAPORE 079909

Date : 11-02-2020



Code : UOI2

1. Policy Particulars :- THIRD PARTY CLAIM

| | | | |
|--------------|------------------|----------------|------------|
| Insured Veh. | SJR 2200M | Veh. Inspected | SHD 635C |
| Policy No. | DHOM120021661602 | Coverage (\$) | 0.00 |
| Claim No. | | Excess (\$) | 0.00 |
| Assign From | FELIS | Assign Date | 03/01/2020 |

2. Vehicle Particulars & Condition

| | | | |
|--------------|----------------------|--------------|----------------------|
| Make & Model | RENAULT LATITUDE (A) | c.c | 1995 |
| Engine No. | HIDDEN | Year of Reg. | 2017 |
| Chassis No. | VF1ABL15AUC283461 | Colour | METALLIC WHITE / RED |
| Odometer | 225752 | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | NIL |
| General | GOOD | | |

3. Conditions of Tyres

| | Size | Make | Balance |
|----------------|------------|------|---------|
| R/H Front Tyre | 215/60 R16 | GITI | 8 mm |
| L/H Front Tyre | 215/60 R16 | GITI | 8 mm |
| R/H Rear Tyre | 215/60 R16 | GITI | 8 mm |
| L/H Rear Tyre | 215/60 R16 | GITI | 8 mm |

4. Description of Damages

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

5. General Information

| | | | |
|----------------|--|-----------------|------------|
| Accident Date | 31/12/2019 | Inspection Date | 03/01/2020 |
| Survey held at | TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111 | | |

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: | 2 Working Days |
|-------------------------------------|-----------------------|



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 635C

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|------------------------------------|----------------------|---------------------------|-------------------|
| | <u>REPLACEMENT OF PARTS</u> | | | |
| 1 | BUMPER COVER REAR | BUCKLED / DENTED | 561.70 | 561.70 |
| 1 | BUMPER LOWER REAR | DENTED / CUT | 411.90 | 411.90 |
| 1 | BUMPER BRACKET CTR REAR | SERVICEABLE | 98.10 | - |
| 1 | BUMPER BRACKET SIDE RH REAR | SERVICEABLE | 82.10 | - |
| 1 | BUMPER RETAINER RH REAR | SERVICEABLE | 59.80 | - |
| 1 | BUMPER REFLECTOR RH | SERVICEABLE | 16.60 | - |
| 1 | BUMPER BRACKET SIDE LH REAR | SERVICEABLE | 80.80 | - |
| 1 | BUMPER RETAINER LH REAR | SERVICEABLE | 54.20 | - |
| 1 | BUMPER REFLECTOR LH | SERVICEABLE | 16.60 | - |
| 1 | BUMPER BEAM REAR | TO REPAIR SEE LABOUR | 547.80 | - |
| 1 | BUMPER BEAM BRACKET LH REAR | TO REPAIR SEE LABOUR | 114.50 | - |
| 1 | BUMPER BEAM BRACKET RH REAR | TO REPAIR SEE LABOUR | 100.90 | - |
| 1 | OUTER PANEL REAR (END PANEL) | TO REPAIR SEE LABOUR | 745.80 | - |
| 1 | OUTER PANEL REAR (END PANEL) TRIM | SERVICEABLE | 404.56 | - |
| 1 | TAILLAMP RH | SERVICEABLE | 313.10 | - |
| 1 | TAILLAMP PANEL RH | TO REPAIR SEE LABOUR | 401.40 | - |
| 1 | TAILLAMP LH | SERVICEABLE | 401.40 | - |
| 1 | TAILLAMP PANEL LH | TO REPAIR SEE LABOUR | 401.40 | - |
| 1 | BOOT REAR | TO REPAIR SEE LABOUR | 1,677.20 | - |
| 1 | BOOT FINISHER | SERVICEABLE | 344.70 | - |
| 1 | BOOT WEATHERSTRIP | SERVICEABLE | 178.20 | - |
| 1 | BOOT REFLECTOR LAMP LH | SERVICEABLE | 277.70 | - |
| 1 | BOOT REFLECTOR LAMP RH | SERVICEABLE | 277.70 | - |
| 1 | BOOT BADGE "RENAULT" | NOT NECESSARY | 82.40 | - |
| 1 | BOOT BADGE | NOT NECESSARY | 95.80 | - |

Report Ref No. CS/UOI20000178/Ksd3q2



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| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|---|----------------------|---------------------------|-------------------|
| 1 | BOOT STRUT LH | SERVICEABLE | 145.10 | - |
| 1 | BOOT STRUT RH | SERVICEABLE | 145.10 | - |
| 1 | BOOT HINGE LH | TO REPAIR SEE LABOUR | 254.20 | - |
| 1 | BOOT HINGE RH | TO REPAIR SEE LABOUR | 253.80 | - |
| 2 | BOOT RUBBER PLUG | SERVICEABLE | 139.90 | - |
| 1 | SPARE TYRE BOARD | SERVICEABLE | 680.90 | - |
| 1 | BOOT LOCK LINKAGE | SERVICEABLE | 20.60 | - |
| 1 | BOOT INNER TRIM BOARD | SERVICEABLE | 611.00 | - |
| 1 | BOOT SWITCH | SERVICEABLE | 113.00 | - |
| 1 | BOOT LOCK | TO REPAIR SEE LABOUR | 246.60 | - |
| 1 | BOOT LOCK CATCH | TO REPAIR SEE LABOUR | 41.70 | - |
| 1 | EXHAUST REAR | TO REPAIR SEE LABOUR | 5,263.60 | - |
| 1 | EXHAUST CAP REAR | TO REPAIR SEE LABOUR | 125.40 | - |
| 1 | BOOT LOCK LINKAGE HOLDER | SERVICEABLE | 99.50 | - |
| | LESS 10% DISCOUNT | | -1,588.68 | -97.36 |
| | | | 14,298.08 | 876.24 |
| | <u>SPECIAL NETT ITEMS</u> | | | |
| 1 | SET PARKING AID (SN) | SERVICEABLE | 700.00 | - |
| 1 | SET REAR BUMPER CLIP (SN) | NECESSARY | 66.00 | 66.00 |
| 1 | SET BUMPER BRACKET CTR CLIP (SN) | NECESSARY | 33.00 | 33.00 |
| 1 | SET BUMPER BRACKET SIDE CLIP RH RR (SN) | NOT NECESSARY | 10.00 | - |
| 1 | SET BUMPER RETAINER RH CLIP RR (SN) | NOT NECESSARY | 20.00 | - |
| 1 | SET BUMPER BRACKET SIDE CLIP LH RR (SN) | NOT NECESSARY | 10.00 | - |
| 1 | SET BUMPER RETAINER CLIP LH RR (SN) | NOT NECESSARY | 20.00 | - |
| 1 | SET BUMPER LOWER REAR RIVET (SN) | NOT NECESSARY | 22.00 | - |
| 1 | SET BUMPER LOWER REAR CLIP (SN) | NECESSARY | 66.00 | 66.00 |
| 1 | BOOT STICKER "TRANS-CAB" (SN) | NOT NECESSARY | 30.00 | - |
| 1 | BOOT STICKER "6555-3333" (SN) | NOT NECESSARY | 30.00 | - |
| 2 | REAR WINDSCREEN SEALANT (SN) | NOT NECESSARY | 80.00 | - |

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| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|---|---------------|---------------------------|-------------------|
| 1 | WINDSCREEN MOULDING (SN) | NOT NECESSARY | 100.00 | - |
| 1 | REAR WINDSCREEN INNER SPONGE SEAL (SN) | NOT NECESSARY | 100.00 | - |
| 1 | BOOT INNER TRIM CLIP (SN) | NOT NECESSARY | 45.00 | - |
| 1 | SET BOOT FINISHER CLIP (SN) | NOT NECESSARY | 24.20 | - |
| 1 | TAILLAMP CLIP LH (SN) | NOT NECESSARY | 5.00 | - |
| 1 | TAILLAMP CLIP RH (SN) | NOT NECESSARY | 5.00 | - |
| 1 | REAR BUMPER PROTECTOR (SN) | SERVICEABLE | 100.00 | - |
| 1 | EXHAUST MOUNTING REAR (SN) | SERVICEABLE | 16.00 | - |
| 1 | REAR LICENCE PLATE WITH HOLDER (SN) | SERVICEABLE | 80.00 | - |
| 1 | EXHAUST BRACKET REAR (SN) | SERVICEABLE | 24.80 | - |
| | | | 1,587.00 | 165.00 |
| | LABOUR | | | |
| | TO TRANSFER OF BOOTLID FITTINGS, ATTACHMENTS AND PERFORM WATER SEEPAGE TEST. | NOT NECESSARY | 170.00 | - |
| | TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR. | NOT NECESSARY | 380.00 | - |
| | TO RUST-PROOFING OF THE AFFECTED AREAS. | NOT NECESSARY | 170.00 | - |
| | TO CHECK ELECTRICAL LIGHTING CONCERNED. | | 170.00 | 10.00 |
| | TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING. | NOT NECESSARY | 170.00 | - |
| | TO REINSTALL REAR BUMPER PARKING SENSOR. | | 170.00 | 60.00 |
| | PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF BUMPER BEAM REAR, BUMPER BEAM BRACKET LH REAR, BUMPER BEAM BRACKET RH REAR, OUTER PANEL REAR (END PANEL), TAILLAMP PANEL RH, TAILLAMP PANEL LH, BOOT REAR, BOOT HINGE LH, BOOT HINGE RH, BOOT LOCK, BOOT LOCK CATCH, EXHAUST REAR AND EXHAUST CAP REAR. | | 7,500.00 | 200.00 |
| | TO TRANSFER OF REAR END PANEL FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST. | NOT NECESSARY | 170.00 | - |
| | TO TRANSFER OF REAR WINDSCREEN GLASS TO FACILITATE BODYWORK REPAIR. | NOT NECESSARY | 170.00 | - |
| | TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT. | NOT NECESSARY | 220.00 | - |

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| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----------------------------|---|---------------|---------------------------|-------------------|
| | TO REPAIR AND REALIGN REAR EXHAUST PIPE. PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION. | NOT NECESSARY | 170.00 | - |
| | | | 7,500.00 | 220.00 |
| | TO TRANSFER OF REAR BUMPER FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST. | NOT NECESSARY | 170.00 | - |
| | LABOUR CHARGE TO MOUNT AND DISMOUNT VEHICLE ON JIG BENCH, TO FACILITATE REPAIR. | NOT NECESSARY | 380.00 | - |
| | TO DROP REAR EXHAUST BOX, RENEW THE SAME, TO REPAIR AND REALIGN CENTRE EXHAUST PIPE. | NOT NECESSARY | 170.00 | - |
| | | | 17,680.00 | 490.00 |
| GRAND TOTAL | | | 33,565.08 | 1,531.24 |
| RECOMMENDED COST OF REPAIRS | | | | 1,531.24 |

Report Ref No. CS/UOI20000178/Ksd3q2

KONG SENG CHEONG

Licensed Appraiser

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