rom (Person); Luy	Russia	_ ciř	1	NT (Office)	Date/Time	12/02/2001.23
stimuted Co					Bill to:		
D TEY W	S/TP RES	OD RES/E	SJK (NC.	MV/CS FZ		Insured:	SLL YNY8X
t. Workshop		Ch	in Mea	PM	Aors	Tel: 624	7 4810 91912829
r	1 Kaks	mucit	Aue 6	GIL E	40140		
olicy No:					Claim No:	0,000	5518
un Insured:					Ехоеза;		
inke of Velu Jene's Recen						D.O.A	acollete
	f proper	EV 24 HRS	LWP			uon v	pdopument:
A / REV	REAL / R	The second secon			Kin song	Vehiel IN	1
A / REV	12/1/20	C 11.382	Person Contr	seted:	* 1,00	Active To	None
ste/Time;	Action/Ins		Person Control (-/-	1,000	Actifici (TIV	your
A / REV	Action/Ins			-/-	140.5.54	Venucie III	your
te/Time:	Action/Ins	truction T		-/-	1,442.5	venici III	your

Nivitha (LKK Auto)

From:

lvy Ratilla <ivy.r@budgetdirect.com.sg>

Sent:

Wednesday, 12 February 2020 11:23 AM

To:

Nivitha (LKK Auto)

Branch

#01-11

ARK @ KB

68 Kaki Bukit Ave 6

Singapore 417896

Tel: 6384-0111

Cc:

'SUR'; Loganathan Agoram

Subject:

FW: SJK1007Z, TP claim against SLL4248X (DOA: 07-02-20) || C10005518

Attachments:

SLL4248X.pdf; SJK1007Z.pdf

Hi Team,

We would like to arrange TP survey for SJK1007Z. They have chosen Mr. Adrian Ling to survey their client's vehicle.

Workshop information:

Chin Meng Motors

Main

1 Kaki Bukit Ave 6

Blk B #01-40

Blk C #01-63

Autobay

Singapore 417883

Tel: 6747-4810

Fax: 6745-5018

Hp: 9191-2829

Please confirm. Thank you.

Regards,

Ivy Ratilla Executive, Claims Admin

T +65 6540 2185

F +65 6725 0853

E ivv.r@budgetdirect.com.sg



Customer Care +65 6221 2111 Claims +65 6221 2199 Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01 Singapore Shopping Centre Singapore 239924 budgetdirect.com.sq

auto 🗟 general

Veh: in T: 12/2/20 @163800 C: Vein Scop E: V

Auto·& General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as <u>Budget</u> Direct Insurance.

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From: Quek Kim Seng (CMM) <kimseng@cmm.sg> Sent: Wednesday, 12 February 2020 9:16 AM

To: Ivy Ratilla <ivy.r@budgetdirect.com.sg>; Claims <claims@budgetdirect.com.sg>
Cc: cmm@cmm.sg; Loganathan Agoram <loganathan.a@budgetdirect.com.sg>
Subject: RE: SJK1007Z, TP claim against SLL4248X (DOA: 07-02-20) | | C10005518

Dear Ms lvy,

Choice of single joint expert:

Adrian Ling LKK Auto Consultants Pte Ltd

Thank you.

Best Regards,

Quek Kim Seng, Chin Meng Motors

Main

1 Kaki Bukit Ave 6

Blk B #01-40 Blk C #01-63

Autobay Singapore 417883

Tel: 6747-4810 Fax: 6745-5018 Hp: 9191-2829 Branch

68 Kaki Bukit Ave 6

#01-11 ARK @ KB

Singapore 417896

Tel: 6384-0111

From: Quek Kim Seng (CMM) < kimseng@cmm.sg>

Sent: Tuesday, 11 February 2020 6:22 PM To: Claims <claims@budgetdirect.com.sg>

Cc: cmm@cmm.sg

Subject: SJK1007Z, TP claim against SLL4248X (DOA: 07-02-20)

Dear Sir/Ms,

Accident involving SJK1007Z and SLL4248X on 07-02-20 along TPE Exit Loyang

We are the motor workshop for SJK1007Z and are making a claim against your insured/owner of SLL4248X

Kindly forward your list of panel surveyors to be chosen as out single joint expert

Enclosed here with

1) Police report

*estimate and GIA to follow up/

Thank you.

Best Regards,

Quek Kim Seng, Chin Meng Motors

Main

1 Kaki Bukit Ave 6 Blk B #01-40

Blk C #01-40

Autobay Singapore 417883

Tel: 6747-4810 Fax: 6745-5018 Hp: 9191-2829 Branch

68 Kaki Bukit Ave 6

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Singapore 417896 Tel: 6384-0111

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MSME20018109 / SME Motor Pte Ltd - Kald Build ENTRY DATE & TIME: 10/02/2020 13:18 SUBMITTED BY: Chia Pei Ying

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 willul misrepresentation or witholding 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.

- Any false reporting may be referred to the Police for investigation.
 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	10/02/2020 13:18
Date Of Accident	07/02/2020 18:55
Exact Location Of Accident	TPE EXITING LOYANG AVE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJK1007Z
Insured/Policyholder	
Name Of Registered Owner	ABDUL RAHMAN BIN RAHIM THOOLLAH
NRIC No	SXXXX145C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97704748
Alternative Phone No	OFFICE-97704748
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	VELLFIRE
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	ACT
Fleet Policy	NO
Policy Number	GA517855
Cover Note Number	
Driver	
Name of Driver	ABDUL RAHMAN BIN RAHIM THOOLLAH

Name of Driver ABDUL RAHMAN BIN RAHIM THOOLLAH

NRIC No SXXXX145C Date Of Birth 10/07/1971 Occupation INDOOR Date Of Driving Pass 30/03/2001

Driving Experience 18 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97704748

Fax Number

Contact Number OFFICE-97704748

EMail Address NOEMAIL Address BLK 268 PASIR RIS ST 21 #04-420

Postcode 510268

Was driver an employee of the Insured's Company NO

OWNER 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 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

NO

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

4

Number of Passengers (Including Driver)

Passenger 1

NAME:

: FAUZIAH

GENDER:

: FEMALE

Passenger 2

NAME:

: ZULHAIMAN

GENDER:

: MALE

Passenger 3

NAME:

: MAIYA ZAFIRA

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name PASIR RIS NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-5852999 - FAX NO: 65855261

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20200208/2059

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

SLL4248X

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

Vehicle Category

PRIVATE CAR

Name of Driver

ONG HAI EN AMANDA

NRIC/Passport Number

Contact Number

96710015

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

ABDUL RAHMAN BIN RAHIM THOOLLAH

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJK1007Z

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

Postcode

Sketch Plan Pg. 1

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.
- 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.
- 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.
- 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.
- 3. Consent under the Personal Data Protection Act (PDPA)

l 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 fall 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 :
 - 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' (awyers/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 lawvers/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:
 - 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.

THEW

Policyholder's Signature

Abdel

Oriver's Signature (If thiver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

7/2020

Name:

NUCTIN NO.

11:12 ar

Sketch Plan #2 Pg. 1

STK 10072

SLL 4248 X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.	
ECLARATION	

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

About

Abdaul

10/2/2070

Foliopholder's Signature Date & Time: Driver's lignature (If driver is not the palicyholder) Reporting Centre Personnel's Signature
Name: 11:15 6-

Sketch Plan #4 Pg. 1





Police Station Of Origin:

Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT

1 of 3 Report No. T/20200208/2059

Date/Time Report Made: Vide Report No.: Station Diary No.: 08/02/2020 11:43 37 Informant's Particulars Name of Informant: Address: ABDUL RAHMAN BIN RAHIM APT BLK 268 PASIR RIS STREET 21 #04-420 SINGAPORE THOOLLAH 510268 ID Type / ID No.: Contact No.: NRIC NO / S7123145C Home/Office: Mobile: 97704748 Nationality. Email: SINGAPORE CITIZEN Age: Sex: Date of Birth: Type of Informant: 48 10/07/1971 Male Driver Race: Language: Institution / School Name: Indian English Occupation: Driving Licence Information: Supply and Class: 2B,2A,3 Date of Expiry: distribution/Logistics/Warehousing manager

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/02/2020 18:55	Type of Location Y-Junction	
TAMPINES E LOYANG AV TPE exiting L	Traveling Toward F XPRESSWAY ENUE oyang Ave at the slip				
Weather: Clear		Road Surface: Dry	F	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume:	
One Way	ion:		-	Anyone conveyed by	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJK1007Z	Car	ТОУОТА	VELLFIRE ELEGANCE MOONROO F (AUTO)	Black	Slightly Damaged	3
SLL4248X	Car				Slightly Damaged	1

Sketch Plan #5 Pg. 1





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 2 of 3 Report No. T/20200208/2059

Tel No: 1800-5852999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJK1007Z	AXA INSURANCE SINGAPORE PTE	GA517855	31/12/2019	30/12/2021

Details of Perso	n Involved	100	DOS COSTA	THE	NJ-Fig	PER CHILDREN
Any Pedestrian I	nvolved: No					
No. of Pedestrian		Use of Pe	destria	n Cross	sing: NA	
Driver				E95		- 10 AL 10 A
Name	ABDUL RAHMAN BIN RAHIM THOOLLAH			ID No.		S7123145C
Related Vehicle	SJK1007Z (Car)			Contact No.		97704748
Hospital/Clinic	ONECARE CLINIC LOYANG		Class of Driving Licence & Expiry Date		Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	08/02/2020		Date Disc			/2020
No. of Days gran	ted Medical Leave	03	Degree of Injury Slight			
Driver			STEE WOR		Ed.C	ATTION TO THE LESS
Name	Ong Hui En, Amanda	3		ID No.		S9018833Z
Related Vehicle	SLL4248X (Car)			Contact No.		96710015
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 07/02/2020 at about 1855hrs, I was driving my vehicle registration plate number SJK1007Z and was travelling along TPE towards to Pasir Ris.

While I was at the slip road from TPE to Loyang Ave, I slowed down my vehicle and was making a stop at the slip road. While my car was in a stationary, suddenly, I felt an impact coming from my rear. I then alighted from my vehicle to make a check and discovered that one vehicle registration plate number SLL4248X had collided on my rear portion of my vehicle.

I suffered some injuries on my leg and back pain.

Sketch Plan #6 Pg. 1





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999

3 of 3 Report No. T/20200208/2059

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 G / Staff Sgt IDRIS BIN ROSLI	Signature Of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	08/02/2020 11:43
Officer In Charge Of Case:	Classification Of Case:
TP / AEIT /	NOTATION SOUTH DESCRIPTION OF THE PROPERTY OF
SI MOHAMAD ZULFAZDLI BIN ABDULLAH	1
Contact No.: 65476204	THOU WELL
Authentication Stamp	1001

振明摩哆 CHIN MENG MOTORS

1 Kaki Bukit Ave 6, #01-40 Autobay@Kaki Bukit, Singapore 417883 Tel: 6747-4810 Fax: 6745-5018 cmmotors@singnet.com.sg

Our Ref: EST028/20/TP

Your Ref: TP claim against SLL4248X

11-Feb-20

Yvonne.

Budget Direct Insurance

190 Clemenceau Avenue, #03-01 Singapore Shopping Centre Singapore 239924.

Attn: Motor Claims Department

Dear Sir/Ms,

Re: Estimated cost of repair to Toyota Vellfire no: SJK1007Z

Date of accident: 07-02-2020

Date of accident 07-02-2020
Parts supply:
1 pc Tailgate Dewted
1 nc Tailgate emblem - VELLEIRE
2 pcs Tailgate absorbers @\$381.90 The
2 pcs Tailgate hinges @\$151.90
1 pc Tailgate inner lock
1 pc Tailgate weatherstrip &
1 pc Tailgate inner board
10 pcs Tailgate board clips @\$3.50 ***
2 pcs Tailgate stoppers @\$36.90
2 pcs Tailgate side stoppers @\$45.90 / -
1 pc Taillamp L/h hec
1 pc Tailgate switch unit (close tailgate) At ~
1 pc Tailgate sensor open assy Alexander
1 pc Rear windscreen moulding
1 pc Rear windscreen gum (S-Nerr)
1 pc Rear bumper Relead
1 pc Rear beam >4-0+
4 pcs Rear bumper retainers @\$129.20 ~ Lea
2 pcs Rear bumper brackets @\$89.50 XFC ~~
8 pcs Rear bumper clips @\$3.50
2 pcs Rear bumper reflectors @\$65.90 744 ~
2 pcs Rear bumper tow cover @\$48.90
4 pcs Rear bumper reverse sensor @\$230.50 2 pieces day
1 pc Rear end panel Reafted
1 pc Rear end panel garnish De L
1 pc Rear compartment storage box 164 c

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" hasis • 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:	

ESTIMATE

SS	1,889.90
	55.60
	763.80 +
	303.80 +
	781.65 -
	367.50
	624.00
	35.00
633945	73.80 +
6 53 / 13	91.80 -
1051 50	661.90 €
4754.58	389.50 +
	1,006.90
	78.50 —
	40.00
	869.80
	336.50
	516.80= 130
	179.00 1.
	28.00
	131.80
	97.80
	922.00-461
	796.60
	181.90
	496.95
	11,720.80
Less 25%:	(2,930.20)

Labour charges:

To panel beating, welding, removing damaged parts and replacement of the new parts as mentioned above etc.

To apply underseal

To remve and refit windscreen

To reset fault code after repair.

To respray affected part.

To check wirings.

1890 Adrin Lay Syptematy: 578.85 12/02/20) total: 722343 L/S 5750.

80.00 850:00 Pool 30.00 10,870.60

900.00 800

100:00 60

120.00

振明摩哆 CHIN MENG MOTORS

1 Kaki Bukit Ave 5, #01-40 Autobay@Kaki Bukit, Singapore 417883

Tel: 6747-4810 Fax: 6745-5018 cmmotors@singnet.com.sg

Our Ref: EST028/20/TP

Your Ref: TP claim against SLL4248X

11-Feb-20

Budget Direct Insurance

190 Clemenceau Avenue, #03-01 Singapore Shopping Centre Singapore 239924.

Attn: Motor Claims Department

Dear Sir/Ms.

Re: Supplementary cost of repair to Toyota Vellfire no: SJK1007Z

Date of accident: 07-02-2020

Parts supply:

2 pcs Rear taillamp lower panel @\$385.90 Could

771.80 Less 25%: (192.95)

ESTIMATE

Adria () 13/01/20 Supplementy: 578.85



5b.

ESTIMATED NORMAL PERIOD FOR REPAIR:

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 Interna	tionale Des Experts En Aut	tomobile
AUT	O & GENERAL IN	SURANCE (S) PL	Ref : CS/AGI2000	2420/Ayf3n2
190			Date: 16-03-2020	
1.	200	Policy Particular	rs :- THIRD PARTY CL	AIM
	Insured Veh.	SLL 4248X	Veh. Inspected	SJK 1007Z
	Policy No.	(200/10/10/10/10/10/10/10/10/10/10/10/10/1	Coverage (\$)	0.00
	Claim No.	C10005518	Excess (\$)	0.00
	Assign From	IVY RATILLA	Assign Date	12/02/2020
2.	The second second	Vehicle Par	rticulars & Condition	
	Make & Model	TOYOTA VELLFIRE	c.c	2494
	Engine No.	HIDDEN	Year of Reg.	2018
	Chassis No.	JTNGF3DH108018678	Colour	BLACK
	Odometer	17843	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Cond	litions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	245/40 R20	DUNLOP	6 mm
	L/H Front Tyre	245/40 R20	DUNLOP	6 mm
	R/H Rear Tyre	245/40 R20	DUNLOP	6 mm
	L/H Rear Tyre	245/40 R20	DUNLOP	6 mm
4.	1-0-1	Descrip	otion of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE I	REAR PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		Gene	ral Information	THE RESERVE OF THE PARTY OF THE
	Accident Date	07/02/2020	Inspection Date	12/02/2020
	Survey held at	CHIN MENG MOTORS		
		1 KAKI BUKIT AVE 6 #01-40/63 SINGAPORE 417883.		
5a.	Tollar We		Remarks	Chillips and the

Estimate Days of Repair

6 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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJK 1007Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	TAILGATE	DENTED	1,889.90	1,889.90
1	TAILGATE EMBLEM-VELLFIRE	NECESSARY	55.60	55.60
2	TAILGATE ABSORBERS @\$381.90	NOT NECESSARY	763.80	
2	TAILGATE HINGES @\$151.90	NOT NECESSARY	303.80	
1	TAILGATE INNER LOCK	DAMAGED	781.65	781.65
1	TAILGATE WEATHERSTRIP	CUT	367.50	367.50
1	TAILGATE INNER BOARD	CRACKED	624.00	624.00
10	TAILGATE BOARD CLIPS @\$3.50	NECESSARY	35.00	35.00
2	TAILGATE STOPPERS @\$36.90	NOT NECESSARY	73.80	
2	TAILGATE SIDE STOPPERS @\$45.90	NOT NECESSARY	91.80	
1	TAILLAMP L/H	NOT NECESSARY	661.90	
1	TAILGATE SWITCH UNIT (CLOSE TAILGATE)	NOT NECESSARY	389.50	
1	TAILGATE SENSOR OPEN ASSY	NOT NECESSARY	1,006.90	
1	REAR WINDSCREEN MOULDING	NECESSARY	78.50	78.50
1	REAR WINDSCREEN GUM	NECESSARY	40.00	40.00
1	REAR BUMPER	DEFORMED	869.80	869.80
1	REAR BEAM	NOT NECESSARY	336.50	
4	REAR BUMPER RETAINERS @\$129.20	NECESSARY	516.80	130.00
2	REAR BUMPER BRACKETS @\$89.50	NOT NECESSARY	179.00	
8	REAR BUMPER CLIPS @\$3.50	NECESSARY	28.00	28.00
2	REAR BUMPER REFLECTORS @\$65.90	NOT NECESSARY	131.80	
2	REAR BUMPER TOW COVER @\$48.90	NOT NECESSARY	97.80	
4	REAR BUMPER REVERSE SENSOR @\$230.50	DAMAGED (2 PCS ONLY)	922.00	461.00
1	REAR END PANEL	DENTED	796.60	796.60
- 1	REAR END PANEL GARNISH	DEFORMED	181.90	181.90
1	REAR COMPARTMENT STORAGE BOX	NOT NECESSARY	496.95	
2	REAR TAILLAMP LOWER PANEL @\$385.90 (ADDITIONAL)	CRACKED	771.80	771.80
	LESS 25% DISCOUNT		-3,123.15	-1,777.81
			9,369.45	5,333.44
	LABOUR			
	TO PANEL BEATING, WELDING, REMOVING DAMAGED PARTS AND REPLACEMENT OF THE NEW PARTS AS MENTIONED ABOVE ETC.		900.00	800.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO APPLY UNDERSEAL.		100.00	60.00
	TO REMOVE AND REFIT WINDSCREEN.		120.00	120.00
	TO RESET FAULT CODE AFTER REPAIR.		80.00	80.00
	TO RESPRAY AFFECTED PART.		850.00	800.00
	TO CHECK WIRINGS.		30.00	30.00
			2,080.00	1,890.00
	GRAND TOTAL		11,449.45	7,223.44

RECOMMENDED COST OF LUMP SUM REPAIRS	5.750.00
(TO ITS PRE-ACCIDENT CONDITION)	

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ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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