

ASS. REC. BY:

REF: 08/AGI20002595/KSD3/NZ

Special Instructions:

Assigner: Limuth

ASSIGNMENT (Office)

From (Person):

Stanley Lai

of

AGI

Date/Time:

14/2/2020 @ 9:22am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBA 4293R

Insured:

SLT8042D

at Workshop n/s

GM solution

Tel:

9101 8302

of

160 Sin Ming Drive # 03-18/19

Policy No:

Claim No:

C10005505/LA

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

04/02/2020

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

10:40am @ 14/2/2020

Person Contacted:

BernardVehicle: IN / OUT

Date/Time

Action/Instruction

1:30pm ☒GBA 4293R-XSLT 8042D-X

19/02/20

@ 16:09 pm checked with Bernard, got estimate, will email to Kenneth

ASS. REC. BY:

REF:

AGI

ASSIGNMENT

From: _____ Date: 17/2/2020

Estimated Cost: _____

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

To Inspect Vehicle No: GBA 4293R

at Workshop m/s Em Solution

of 160 sin ming Drive #03-18/11

Insured: _____

Policy No. _____

Claims No. _____

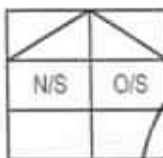
Sum Insured: _____ Excess: _____

(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: 04 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date:

8/22

Person Contacted: _____

Vehicle: IN / OUT

Veh No: GBA 4293R Yr Regn: 06, 07

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

Truck / Trailer or _____

Make: Suzuki Every c.c. 658

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

Sp. Reading: 208413 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: PA64V - 202580

Gen. Cond: ☒ Good / Fair / Poor / Burnt

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

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

Modi: ☒ Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 155R12x8

R: _____

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

TOYO / YOKO or _____

Front

R/Bal. 9 mm R/Bal. 9 mm

L/Bal. 9 mm L/Bal. 9 mm

D.O.A. 4/2/20 D.O.I. 17/2/20

Survey held at: ☒

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

o/s Rear

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

Date / Time Action / Instruction

27/2 612y 8220x email to confirm
(\$ 2,276.02 Red - 51%)

RECEIVED 27 FEB 2020

Date/Time, File Pass to?

27/2/201) Type

Date/Time, File Return to?

2) _____



Prel. Report



Final Report

Days Of Repair: 4Resurvey No. of Trip: 1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

Report Format:

Lump Sum / I.B.E. (%) 2.200/- U/S250

Nivitha (LKK Auto)

From: Stanley Lai <stanley.lai@budgetdirect.com.sg>
Sent: Friday, 14 February 2020 9:22 AM
To: sur@lkkauto.com; admin-d@lkkauto.com
Cc: Loganathan Agoram
Subject: TP- PRS; Claim ref: C10005505/LA || OI- SLT8042D (White) TP- GBA4293R || Est: 0 || EM Solution
Attachments: OI SLT8042D Police Statement.PNG; OI GIA Report SLT8042D.pdf; TP GBA4293R Police Statement.PNG; TP GIA Report GBA4293R.pdf

Dear Sirs,

We wish to appoint **Mr Kenneth Kong from LKK Auto Consultants Pte Ltd** to do PRS on a without prejudice basis.

Please find the attached PRS notice, OI GIA report and TP GIA report for your reference.

Regards,

Stanley Lai
Executive, Claims

T +65 6540 2189
F +65 6725 0853
E stanley.lai@budgetdirect.com.sg

It pays to choose

**Budget
Direct**
insurance



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.sg

auto  general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

From: Anil Kumar <anil@htapartners.com.sg>
Sent: Thursday, 13 February 2020 5:43 pm
To: Stanley Lai <stanley.lai@budgetdirect.com.sg>

Cc: Loganathan Agoram <loganathan.a@budgetdirect.com.sg>

Subject: RE: NOTICE OF ACCIDENT & PRE-REPAIR SURVEY -YOUR REF: GBA4293R & OUR REF: TCL.GCN.an.50080.20.EM - ACCIDENT INVOLVING GBA4293R & SLT8042D 0N 04/02/20 @ TIME: 11:20 HRS ALONG TESSENSOHN ROAD

Importance: High

Without Prejudice
Save As To Cost

Dear Stanley,

We refer to your email dated even date..

Our client is agreeable to use **Mr Kenneth Kong from LKK Auto Consultants Pte Ltd** from your list to conduct the joint pre-repair survey as a single joint expert for our client's vehicle GBA4293R as follows:

Kindly contact the person-in-charge to arrange for the inspection of the vehicle. Please be informed that the said vehicle can be inspected at: -

Venue : **EM SOLUTION PTE LTD**
160 Sin Ming Autocity
#03-18/19
Singapore 575722

Contact Person : Mr Bernard at H/P: 91018302 (Important: Kindly contact Mr Bernard, prior to arranging your appointed surveyor going down to inspect our client's vehicle for the above matter)

If you fail to conduct the pre-repair survey within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference.

Best regards,
Anil (Secretary)
M/s Hin Tat Augustine & Partners
20 Upper Circular Road
#02-10/12 The Riverwalk
Singapore 058416
Tel : 6533 0212
Direct Fax: 63383536
Fax : 63383536

From: Stanley Lai <stanley.lai@budgetdirect.com.sg>

Sent: Thursday, 13 February 2020 4:38 PM

To: Anil Kumar <anil@htapartners.com.sg>

Cc: Loganathan Agoram <loganathan.a@budgetdirect.com.sg>

Subject: RE: NOTICE OF ACCIDENT & PRE-REPAIR SURVEY -YOUR REF: GBA4293R & OUR REF: TCL.GCN.an.50080.20.EM - ACCIDENT INVOLVING GBA4293R & SLT8042D 0N 04/02/20 @ TIME: 11:20 HRS ALONG TESSENSOHN ROAD

Without Prejudice

Dear Sirs,

Please find the list of our proposed surveyors.

1. Philip Phoong (A-PAC Adjusters & Surveyors Pte Ltd)
2. Siew Meng Hui (A-PAC Adjusters & Surveyors Pte Ltd)
3. Muammar Gaddafi Bin Marzuki (A-PAC Adjusters & Surveyors Pte Ltd)
4. Xing Guo Qiang (LKK Auto Consultant Pte Ltd)
5. Mohammed Rasul (LKK Auto Consultant Pte Ltd)
6. Mohamad Taufihk (LKK Auto Consultant Pte Ltd)
7. Adrian Ling (LKK Auto Consultant Pte Ltd)
8. Marcus Chua (LKK Auto Consultant Pte Ltd)
9. Kenneth Kong (LKK Auto Consultant Pte Ltd)
10. Pang Kiah Keen (Frankie) (FormTeam Adjusters Pte Ltd)
11. Chua Soo Teck (Benjamin) (FormTeam Adjusters Pte Ltd)
12. Lim Say Koon (FormTeam Adjusters Pte Ltd)
13. Ng You Han (FormTeam Adjusters Pte Ltd)
14. Soon HanXin (Gary) (FormTeam Adjusters Pte Ltd)
15. Chow Bo Xiong (FormTeam Adjusters Pte Ltd)

Kindly let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors.

Regards,

Stanley Lai
Executive, Claims

T +65 6540 2189
F +65 6725 0853
E stanley.lai@budgetdirect.com.sg

It pays to choose

**Budget
Direct**
insurance



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.sg

auto  general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

From: Anil Kumar <anil@htapartners.com.sg>
Sent: Thursday, 13 February 2020 4:26 pm
To: Claims <claims@budgetdirect.com.sg>

Subject: NOTICE OF ACCIDENT & PRE-REPAIR SURVEY -YOUR REF: GBA4293R & OUR REF: TCL.GCN.an.50080.20.EM - ACCIDENT INVOLVING GBA4293R & SLT8042D ON 04/02/20 @ TIME: 11:20 HRS ALONG TESSENSOHN ROAD

Importance: High

Without Prejudice

Save As To Cost

Dear Sir,

ACCIDENT INVOLVING GBA4293R & SLT8042D ON 04/02/20 @ TIME: 11:20 HRS ALONG TESSENSOHN ROAD

*We are instructed to notify you of the above-mentioned road traffic accident which involves our client's vehicle registration number **GBA4293R** and vehicle registration number **SLT8042D** driven by your insured at the material time.*

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurers would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without reference to you.

Best regards,
Anil (Secretary)
M/s Hin Tat Augustine & Partners
20 Upper Circular Road
#02-10/12 The Riverwalk
Singapore 058416
Tel : 6533 0212
Direct Fax: 63383536
Fax : 63383536

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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	13/02/2020 15:48
Date Of Accident	04/02/2020 11:20
Exact Location Of Accident	TESSENSOHN ROAD OUTSIDE SHOP HOUSE NUMBER 67
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA4293R
Insured/Policyholder	
Name Of Registered Owner	SINGAPORE BIKEN PTE. LTD.
Co Reg No	2XXXXX815H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64674778
Vehicle Particulars	
Manufacturer	SUZUKI
Model	EVERY
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	5092493934-02
Cover Note Number	
Driver	
Name of Driver	CHEN KIM LOONG
NRIC No	FXXXX158W
Date Of Birth	21/09/1977
Occupation	OUTDOOR
Date Of Driving Pass	08/11/2019
Driving Experience	0 YEAR AND 2 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97931562
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	7 MANDAI LINK #03-29 SINGAPORE
Postcode	728653
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	NO
Was any injured conveyed to hospital by ambulance?	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT AND ATTACHED

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	SLT8042D
Vehicle Make/Model/Colour	
Details Of Properties	REFER POLICE REPORT AND ATTACHED
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)

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



A. GBA4293K PARKED

B. 34T8042D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Attached Police Report T/20200204/2049

DECLARATION

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



Policyholder's Signature
Date & Time:

Date & Time:

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

Date & Time:

Reporting Centre Personnel's Signature
Name:
NR/C/FIN No.:

NR/C/FIN No.1



**SINGAPORE
POLICE FORCE**



T/20200204/2049

1 of 3

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20200204/2049

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/02/2020 12:45			Vide Report No.:		Station Diary No.: 96
Informant's Particulars					
Name of Informant: CHEN KIM LOONG			Address: C/O 7 MANDAI LINK #03-29 SINGAPORE 728653		
ID Type / ID No.: FIN NO / F7854158W			Contact No.: Home/Office: Mobile: 97931562		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 42	Date of Birth: 21/09/1977	Type of Informant: Driver		
Race: Chinese			Language: Mandarin		Institution / School Name:
Occupation: Air-conditioning/Refrigeration engineering technician			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 04/02/2020 11:20	Type of Location: Straight Road
Location: Along Road 1 TESSENHORN ROAD				
Parking lot located outside House number 67				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Detail of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBA4293R	Van	SUZUKI	EVERY	Silver	Slightly Damaged	0
SLT8042D	Car	MAZDA		White	Slightly Damaged	0

Detail of Vehicle Insurance

Vehicle No.	Insurance Company	Policy No.	Effective Date	Expiry Date
GBA4293R	NTUC Income Insurance Co-Operative Limited	5092493934-02	08/07/2019	07/07/2020



**SINGAPORE
POLICE FORCE**



T/20200204/2049

2 of 3

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20200204/2049

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHEN KIM LOONG	ID No.	F7854158W
Related Vehicle	GBA4293R (Van)	Contact No.	97931562
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SANDY	ID No.	NIL
Related Vehicle	SLT8042D (Car)	Contact No.	98355318
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 04/02/2020 at about 9.30am along Tessensohn Road, I had parked the company van "GBA4293R" at a parking lot located outside house number 67 and left. At about 11.15am, I received a call from my company's manager informing me that our van had been hit by another vehicle. As such, I went to make a checked and reached the vehicle at about 11.20am. A female subject approached me and informed that she had hit onto my van. Her vehicle number was "SLT8042D". The right side rear near to the tail light was dented with scratches. The vehicle "SLT8042D" left side mirror was damaged. The vehicle body below the said damaged mirror was dented with scratches. Agreed to settle privately. Lodging for recorded purpose.



**SINGAPORE
POLICE FORCE**



T/20200204/2049

3 of 3

Report No. T/20200204/2049

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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: A / Sr Staff Sgt KHOO CHOON HUA	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 04/02/2020 12:45
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	<p>SINGAPORE POLICE FORCE</p> <p>SIGNATURE</p>

E M SOLUTION PTE LTD

160, Sin Ming Drive, #03-18/19, Sin Ming Autocity, Singapore 575722
Fax: 64584500

Tel: 64560226

Fax: 64584500

Registration No: 201016308K

14.02.2020

Singapore Biken Pte Ltd

Not Withheld
C1 Lng 82200h
Recovery After Pains

REPAIR ESTIMATE FOR SUZUKI EVERY - GBA 4293 R

Delay,

REPAIR ESTIMATE		Buick		
1 pc	rear bumper		665.50	—
2 pcs	rear bumper side retainers	42.20	84.40	+
2 pcs	rear bumper brackets	36.30	72.60	x
1 pc	RH tail lamp assy 278		365.20	—
1 pc	RH rear side wing panel		825.30	—
1 pc	RH rear channel guide		212.30	x
1 pc	RH rear side wing panel inner trim		342.50	x
			<u>2,567.80</u>	
		Less 10%	256.78	
		15%	<u>2,311.02</u>	2,311.02

1 set	rear bumper clips	45.00	SN	✓
1 set	RH rear side wing panel inner trim	30.00	SN	x
1 pc	RH rear side wing glass sealant	70.00	SN	401a

- 1) Check electrical wirings.
- 2) Repair accident damages and renew parts
- 3) Spray paint on affected portions.
- 4) Remove and refit RH rear side wing glass
- 5) Tuff kote on affected portions.

60.00	201
880.00	6001
880.00	4001
150.00	601
50.00	301
<u>\$ 4,476.02</u>	

[illegible]




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			
AUTO & GENERAL INSURANCE (S) PL		Ref : CS/AGI20002595/Ksd3n2	
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924		Date : 28-02-2020	
		Code : AGI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLT 8042D	Veh. Inspected	GBA 4293R
Policy No.		Coverage (\$)	0.00
Claim No.	C10005505/LA	Excess (\$)	0.00
Assign From	STANLEY LAI	Assign Date	14/02/2020
2. Vehicle Particulars & Condition			
Make & Model	SUZUKI EVERY (M)	c.c	658
Engine No.	HIDDEN	Year of Reg.	2007
Chassis No.	DA64V202580	Colour	SILVER
Odometer	208413	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	155 R12X8	YOKOHAMA	9 mm
L/H Front Tyre	155 R12X8	YOKOHAMA	9 mm
R/H Rear Tyre	155 R12X8	YOKOHAMA	9 mm
L/H Rear Tyre	155 R12X8	YOKOHAMA	9 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	04/02/2020	Inspection Date	17/02/2020
Survey held at	EM SOLUTION PTE LTD 160 SIN MING DRIVE #03-18/19 SIN MING AUTOCITY SINGAPORE 575722		
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:		4 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. GBA 4293R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	BUCKLED / DENTED	665.50	665.50
2	REAR BUMPER SIDE RETAINERS @\$42.20	O/S DISTORTED	84.40	42.20
2	REAR BUMPER BRACKETS @\$36.30	TO REPAIR SEE LABOUR	72.60	-
1	RH TAIL LAMP ASSY	CUT	365.20	278.00
1	RH REAR SIDE WING PANEL	BENT	825.30	825.30
1	RH REAR CHANNEL GUIDE	SERVICEABLE	212.30	-
1	RH REAR SIDE WING PANEL INNER TRIM	SERVICEABLE	342.50	-
	LESS 10% DISCOUNT		-256.78	-
	LESS 15% DISCOUNT		-	-271.65
			2,311.02	1,539.35
SPECIAL NETT ITEMS				
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	45.00	45.00
1	SET RH REAR SIDE WING PANEL INNER TRIM (SN)	NOT NECESSARY	30.00	-
1	RH REAR SIDE WING GLASS SEALANT (SN)	NECESSARY	70.00	40.00
			145.00	85.00
LABOUR				
	CHECK ELECTRICAL WIRINGS.		60.00	20.00
	REPAIR ACCIDENT DAMAGES AND RENEW PARTS.INCLUSIVE OF THE REPAIR OF REAR BUMPER BRACKETS.		880.00	600.00
	SPRAY PAINT ON AFFECTED PORTIONS.		880.00	400.00
	REMOVE AND REFIT RH REAR SIDE WING GLASS.		150.00	60.00
	TUFF KOTE ON AFFECTED PORTIONS.		50.00	30.00
			2,020.00	1,110.00
GRAND TOTAL			4,476.02	2,734.35
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,200.00

Report Ref No. CS/AGI20002595/Ksd3n2

KSC
KONG SENG CHEONG
 Licensed Appraiser

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