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(17)WS 11/188 1 (0)	RESIEVATINY/MV	Truck / Trailor or	L. Jeak
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	24 HRS IMP	Des of Damages: Frt. / Rear /	OIS / NIS / UIC / Rooftop OF
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		100-14-191	11
	123		
	121	THE PERSON NAMED IN	131

## Nivitha (LKK Auto)

From:

Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Sent:

Wednesday, 19 February 2020 5:58 PM

To:

Derrick Tan; SUR; assignments

Cc:

Zuhaidah Samsuri; KKLau; Olivia Lau (LKKAuto)

Subject:

RE: PAPER SURVEY SLL7956R III REF: MCT19110637 //LKK REF:

CS3/III19021015/Hqd3e2

Dear Sirs/Mdm,

Contents noted.

Hi SUR/Assign Team,

Kindly assist. CS3/III19021015/Hgd3e2

Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: <a href="mailto:chewht@lkkauto.com">com</a> | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Derrick Tan < Derrick Tan@iii.com.sg > Sent: Wednesday, 19 February 2020 4:49 PM

To: KKLau <kklau@lkkauto.com>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>; Hsiao Tong (LKKAuto)

<chewht@lkkauto.com>

Cc: Zuhaidah Samsuri <aida@iii.com.sg>

Subject: PAPER SURVEY SLL7956R III REF: MCT19110637

Dear Sir/Mdm,

Please conduct paper survey for the below TP vehicle and let us have your report urgently. LOD uploaded and rights granted to you in Merimen.

TP Veh No.: SLL7956R.

Thank you.

Derrick Tan

Motor & Work Injury Claims Department

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

### DISCLAIMER:

This email is intended solely for the person to whom it has been addressed.

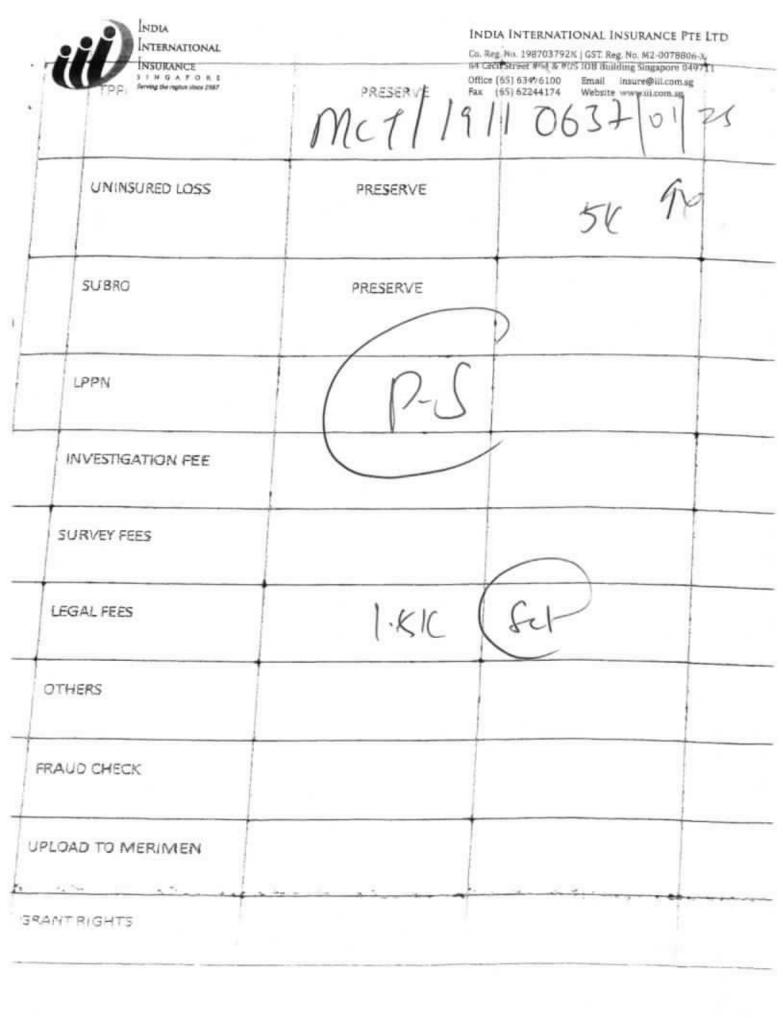
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Print this email only if it is absolutely necessary and help in preservation of environment. India International Insurance Pte Ltd.

Registration No. 198703792-K



\*\*\* TX REPORT \*\*\*

TRANSMISSION OK

TX/RX NO

RECIPIENT ADDRESS

2674 65381860

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0 9 JAN 2020

BANKING STEUT

# ORACLE LAW CORPORATION

Advocates & squelles

BRN:2009045/72L

Our Reference Date

SB/PO/Acc/2019-9203 9th January 2020

India International Insurance Pte Ltd

64 Cecil Street #04-05
IOB Building
Singapore 049711
Attention: Motor Claims Department

Comfort Transportation Pte Ltd

383 Sin Ming Drive GAS Building Singapore 575717

Mr Yeo Cheng Klew

Block 604 Ang Ma Kia Avenue 5 #02-2691 Singapore 560604 \*\* BY POST ONLY \*\*

\*\* BY HAND ON

nc7 191100.

1/2020

Dear Sira

ACCIDENT INVOLVING SLL 7956R & SHA 1871X AT JUNCTION OF FRENCH ROAD AND HORNE ROAD ON 26.11.2019

We act for Mr Quek Ting Chye Frankie, the owner of vehicle registration no. SLL 7956R which was involved in the above captioned accident.

We are instructed by our client to claim damages against the authorized driver of your insured's taxi registration no. SHA 1871X, namely Mr Yeo Cheng Kiew, in connection with the above captioned accident.

We are instructed that the accident was caused by Mr Yeo Cheng Kiew's negligent driving and management of your insured's said taxi registration no. SHA 1871X. As a result of the above captioned accident, our client's said vehicle was damaged and our client has been put to loss and expenses, particulars of which are as follows:-

### PARTICULARS

Description

- Cost of Repair
- Loss of use (9 days @ S\$200.00 per day PRI & weekend)

Costs contribution

Amount \$\$ 6,000.00

\$\$ 1,800.00

5\$ 1,200.00

# **ORACLE LAW CORPORATION**

Advocates & southflags

BRN:2009045722

Our Reference Date

SB/PO/Acc/2019-9203 9th January 2020

India International Insurance Pte Ltd

64 Cecil Street #04-05 IOB Building Singapore 049711

Attention: Motor Claims Department

64 Cecil Street #04-05

Comfort Transportation Pte Ltd 383 Sin Ming Drive

383 Sin Ming Drive GAS Building Singapore 575717

Mr Yeo Cheng Klew

Block 604 Ang Mo Kio Avenue 5 #02-2691

Singapore 560604

" BY POST ONLY "

\*\* BY HAND ONE

19110657

0 9 JAN 7028

AY POST QULY

13/1/2020

Dear Sirs

ACCIDENT INVOLVING SLL 7956R & SHA 1871X AT JUNCTION OF FRENCH ROAD AND HORNE ROAD ON 26.11.2019

We act for Mr Quek Ting Chye Frankie, the owner of vehicle registration no. SLL 7956R which was involved in the above captioned accident.

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### PARTICULARS

Description

- Cost of Repair
- Loss of use (9 days @ S\$200.00 per day PRI & weekend)
- Costs contribution
- Disbursements:-

a. Survey report fees

5\$518.00

b.

Traffic police, GIA reports fees & LTA fees

\$\$ 36.49

C.

Xerox, transport & postage charges

\$\$120.00

\$\$ 674,49 \$\$ 9,674.49

Amount

\$\$ 6,000.00

\$\$ 1,800,00

5\$ 1,200.00

We enclose herewith a copy each of the following supporting documents for your kind attention:-

- Singapore Accident Statements of vehicle registrations no. SLL 7956R & SHA 1871X;
- LTA search result on taxi registration no. SHA 1871X;

.../2

STANLEY BAY

PAULINE ONG

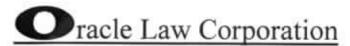
ALAN KOH

237 Alexandra Road #04-11 The Alexaler Singapore 159929

T (65) 6538 6250

(65) 6538 1860

E mail@oraclelaw.sg



Advocates & Solicitors
 UEN/GST Reg No. 200904572Z

Our Reference :

SB/PO/Acc/2019-9203

Date

9th January 2020

#### Page 2

- M.S. Panel Beating Workshop's Invoice No. MS2019048 dated 18th December 2019 for the sum of \$\$6,000.00;
- d. Auto Performance Appraisal's Tax Invoice No. APA19001947 dated 17th December 2019 for the sum of S\$518; and
- e. Original copy of Auto Performance Appraisal's Vehicle Survey Report No. 19/002049 dated 17th December 2019 together with photographs showing the damages sustained by our client's said vehicle.

We have on 27th November 2019 notified you of the above captioned accident and requested for a prerepair inspection to be conducted.

Please note that if your insured has a counterclaim against our client arising out of the above captioned accident, you are also required to send to our firm a letter giving full particulars of the counterclaim together with all the relevant supporting documents within 8 weeks of your receipt of this letter.

Kindly note that you should send to our firm an acknowledgement of receipt of this letter within fourteen (14) days from the date hereof, failing which our client will have no alternative but to commence legal proceedings without further notice to you and/or your insured.

Yours faithfully

Mr Stanley Bay / Miss Pauline Ong

Encl (for India International Insurance Pte Ltd only)

# M.S. PANEL BEATING WORKSHOP

2 Kaki Bukit Ave 2 #02-17
AutoHub @ Kuki Bukit Singapore 417921
Hp. 91436036 Fax. 67478306 Email. Pauline.lim.lie.hwe@gmail.com

Quek Ting Chye Frankie C/O M.S. Panel Beating Workshop 2 Kaki Bukit Ave 2 #02-17 AutoHub @ Kaki Bukit Singapore 417921 INVOICE NO : MS2019048

Date: 18/12/2019

Vehicle number SLL7956R

Make/Model : Kia Fronte K3

Accident Date : 26/11/2019

Total repair cost inclusive of spare parts and labour charges.

\$6,000.00

Singapore Dollars. Six Thousand Only

步成馬喀车厂 M.S. PANEL BEATING WORKSHOP BLK 2 KAKI BUKIT AVE 2 #02-17 AUTOHUB@KAKI BUKIT BINGAPORE 417921 BRN 53182846M

M.S Panel Beating Workshop



# TAX INVOICE

Quek Ting Chye Frankie C/O M.S. Panel Beating Workshop 2 Kaki Bukit Ave 2 #02-17 AutoHub @ Kaki Bukit Singapore 417921

INVOICE NO

: APA19001947

DATE

17/12/2019

VEHICLE NO

: SLL7956R

JOB REFERENCE NO

: 19/002049

ACCIDENT DATE

: 26/11/2019

SURVEY DATE

: 29/11/2019

DESCRIPTION

AMOUNT

Survey Fees Inclusive Of

\$470.00

Transportation

Photographs (\$1) Per Copies: 48

\$48.00

TOTAL AMOUNT

\$518.00

Notes:

All cheque payment should be "Crossed" and made payable to "Auto Performance Appraisal"

Auto Performance Appraisal





## VEHICLE SURVEY REPORTS

Quek Ting Chye Frankie C/O M.S. Panel Beating Workshop 2 Kaki Bukit Ave 2 #02-17 AutoHub @ Kaki Bukit Singapore 417921

Reference

Job Reference No

: 19/002049

Claim No

: Third Party

Claim Type Accident Date

: 26/11/2019

Survey Date

: 29/11/2019

Survey Report Date

: 17/12/2019

Particulars Of Vehicle

Vehicle Registration No

: SLL7956R

Make & Model

Mileage (KM)

: Kia Forte K3

Vehicle Registration Date

: 10/03/2017

Chassis No

: KNAFJ411MH5708213

Steering

Modification

Engine No

: Blocked

Colour

: White

Condition Of Vehicle And Tyres 3

79908	Serviceable	Serviceable	None
Tryes	Make	Size	Balance (MM)
Front RHS	Continental	195/65R15	5
Front LHS	Continental	195/65R15	5
Rear RHS	Continental	195/65R15	6
Rear LHS	Continental	195/65R15	6

#### 4 Description Of Damages

The vehicle sustained damages at frontal portion.

Brakes

(For information of damages please refer to Parts/Labour/Photographs attached)

#### 5 Instruction

This survey was conducted entirely on a "WITHOUT PREJUDICE" basis, and we have not authorised any repair.

Vehicle Assessment Reports

Ref No:

19/002049

# Damage And Repair Cost Adjustment

S/No	<u>Qty</u>	Parts Description	Comments/condition	Workshop Estimate (\$)	Our Assessment (\$)
27	9		List Items		
1	1	Front bumper Land	Deformed	735.00	735.00 6 39,20
2	1	Front bumper RH tow cover Self-	Deformed	24.00	24.00
3	. 1	Front bumper lower air grille - 19	Deformed/cut	92.00	92.00
4	12	Front bumper side retainer Hoty Jan	Deformed/necessary	58.00	58:00 29
5	1 set	Front bumper clips	Broken/necessary	30.00	30:00 75
6	1	Front bumper inner foam CAA	Broken	117.00	117.00
7	- 3	Front bumper inner reinforcement X		410.00	410.00
8	1	Front bumper inner lower beam	Bent	124.60	124:60 98.40
9	1	Front grille V CRA	Deformed/broken	230.00	230.00
10	1	Front grille top cover × (n)	Dented	56.70	56:70
11	1	Front grille top cover centre "KIA" // logo	Grazed/cut	37.00	37.00
12	121	Headlamp / - P. H	RH-Broken/cut	3,690.00	3,690:00 /03 7:
13	1	Front bonnet × (svc)	To repair	0,000.00	5,030.00703 711
14	1	Front support panel / CRA	Broken	776.00	276:00 652.50
15	1	Air con condenser × (sv=)	Serviceable/reuse	697.00	-
			-	7,077.30	6,380.30
		Less discount 10%		707.73	638.03
			Total:	6,369.57	5,742.27
40			Special Nett Items		
16	1	Front number plate Vs+	Broken/buckled	45.00	45.00 3 0 V
			Total :	45.00	45.00
			Total Spare Parts :	6,414.57	5,787.27

# Vehicle Assessment Reports

Ref No:

19/002049

# Damage And Repair Cost Adjustment

Items	Job Description	Workshop Estimate (\$)	Adjusted Costs (\$)
1	To remove, jack out, straighten, panel beating, align and renew replaced parts.	1,000.00	700:00 600
2	To putty and respray painting on affected areas.	1,100.00	800.00 30 0
3	To remove, refix aircon condenser, pipes, drier vacuum and recharge gas.	150.00	120.00 80
4	To check wirings and lightings.	50.00	30.00
5	To supplied and applied anti rust treatments.	100.00	60.00
	Total Labour :	2,400.00	1,710.00
	Total Spare Parts :	6,414.57	5,787.27
	Total Labour :	2,400.00	1,710.00
	Total Repair Costs :[	8,814.57	7,497.27

# Assessor's Recommendation

Repairer Estimate: Our Adjustment: 8,814.57 7,497.27

### Remarks

The repairer has agreed to undertake the repair on a lump sum basis of \$6,000.00, with a repair period of 5 working days.

### Surveyed By:

LKK Auto Consultants hence notify the Repairer of the following:

- \* To recurvey before/after spray painting
- To display damaged part(s) during resurvey

Lek Boon Hwee prices are subject to confirmation

- "Automobile Appraiser way is on a "Without Prejudice" basis
  - 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:

Date:

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## VEHICLE SURVEY REPORTS

Quek Ting Chye Frankie C/O M.S. Panel Beating Workshop 2 Kaki Bukit Ave 2 #02-17 AutoHub @ Kaki Bukit Singapore 417921

Reference

Job Reference No

: 19/002049

Claim No

: Third Party

Claim Type Accident Date

Survey Date

: 26/11/2019

: 29/11/2019

Survey Report Date

: 17/12/2019

Particulars Of Vehicle

Vehicle Registration No

: SLL7956R

Make & Model

: Kia Forte K3

Vehicle Registration Date

: 10/03/2017

Chassis No

: KNAFJ411MH5708213

Engine No

: Blocked

Colour

: White

3 Condition Of Vehicle And Tyres Mileage (KM)

79908	Serviceable	Steering Serviceable	Modification None
Tryes	Make	Size	Balance (MM)
Front RHS	Continental	195/65R15	5
Front LHS	Continental	195/65R15	5
Rear RHS	Continental	195/65R15	6
Rear LHS	Continental	195/65R15	6

### **Description Of Damages**

The vehicle sustained damages at frontal portion.

(For information of damages please refer to Parts/Labour/Photographs attached)

### Instruction

This survey was conducted entirely on a "WITHOUT PREJUDICE" basis, and we have not authorised any repair.

**Vehicle Assessment Reports** 

Ref No:

19/002049

# Damage And Repair Cost Adjustment

S/No	Qty	Parts Description	Comments/condition	Workshop Estimate (\$)	Our Assessment (\$)
			List Items		
1	1	Front bumper	Deformed	735.00	735.00
2	1	Front bumper RH tow cover	Deformed	24.00	24.00
3	1	Front bumper lower air grille	Deformed/cut	92.00	92.00
4	2	Front bumper side retainer	Deformed/necessary	58.00	58.00
5	1 set	Front bumper clips	Broken/necessary	30.00	30.00
6	1	Front bumper inner foam	Broken	117.00	117.00
7	1	Front bumper inner reinforcement	Dented/bent	410.00	410.00
8	1	Front bumper inner lower beam	Bent	124.60	124.60
9	1	Front grille	Deformed/broken	230.00	230.00
10	1	Front grille top cover	Dented	56.70	56.70
11	1	Front grille top cover centre "KIA" logo	Grazed/cut	37.00	37.00
12	2	Headlamp	Broken/cut	3,690.00	3,690.00
13	1	Front bonnet	To repair		-
14	1	Front support panel	Broken	776.00	776.00
15	1	Air con condenser	Serviceable/reuse	697.00	7
			-	7,077.30	6,380.30
		Less discount 10%		707.73	638.03
			Total :	6,369.57	5,742.27
			Special Nett Items		
16	1	Front number plate	Broken/buckled	45.00	45.00
			Total:	45.00	45.00
			Total Serve Body	0.444.57	£ 767 67
			Total Spare Parts:	6,414.57	5,787.27

Vehicle Assessment Reports

Ref No:

19/002049

# Damage And Repair Cost Adjustment

<u>Items</u>	Job Description	Workshop Estimate (\$)	Adjusted Costs (\$)
	To remove, jack out, straighten, panel beating, align and renew replaced parts.	1,000.00	700.00
2	To putty and respray painting on affected areas.	1,100.00	800.00
	To remove, refix aircon condenser, pipes, drier vacuum and recharge gas.	150.00	120.00
4	To check wirings and lightings.	50.00	30.00
5	To supplied and applied anti rust treatments.	100.00	60.00
	Total Labour :	2,400.00	1,710.00
	Total Spare Parts :	6,414.57	5,787.27
	Total Labour :	2,400.00	1,710.00
	Total Repair Costs :	8,814.57	7,497.27

# Assessor's Recommendation

Repairer Estimate : Our Adjustment : 8,814.57 7,497.27

## Remarks

The repairer has agreed to undertake the repair on a lump sum basis of \$6,000.00, with a repair period of 5 working days.

Surveyed By:

Lek Boon Hwee

Automobile Appraiser

### 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.
- Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misropresentation 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.
- 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.

19 17:23
19 09:30
RD JUNC WITH HORNE RD
ORE

Vehicle Registration Number

SLL7956R

Insured/Policyholder

Name Of Registered Owner

QUEK TING CHYE FRANKIE

NRIC No S1432773H

Email Address NOEMAIL
Mobile Phone No (LOCAL) +

 Mobile Phone No
 (LOCAL) +65-87230233

 Alternative Phone No
 OFFICE-87230233

Vehicle Particulars

Manufacturer KIA

Model FORTE K3

Exact Purpose for which vehicle was being used at

time of accident

COMMERCIAL USE

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY

If No, Please state action to be taken Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5107294329

Cover Note Number

Driver

Name of Driver

QUEK TING CHYE FRANKIE

 NRIC No
 \$1432773H

 Date Of Birth
 25/09/1960

 Occupation
 OUTDOOR

 Date Of Driving Pass
 28/06/1979

Driving Experience 40 YEARS AND 4 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-87230233

Fax Number

Contact Number

OFFICE-87230233

EMail Address

NOEMAIL

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- I where recent connectly the neture of the accident to speed up the mainly process
- ). The last is an in completed by the Policyholder and/or the Authornes Driver
- 3 information process must be as truthful and accurate as possible. Any act of marginal extension or with many of material tasks may also incurate amounts to repudiate policy liability.
- 4. The issue and acceptable of this turn by insurance companies is not an admission of policy liability on the part of the neutance companies.
- Any false reporting may be referred to the Police for investigation
- 5. The reduct will be for wended by the insurers of the GIA Records Management Centre estaticished by the General Insurance Association of Singapore (GIA) for antitiving and that copies of the report will for a fee be made available upon against all or by intervited parties.
- By the longment of this report to memojaren, you hereby consent to the archiving of this report at the centre and no topies of the report being made available afoneand.
- 5. Coment under the Personal Data Protection Act (PDPA)

Landerstand, acknowledge, agree and consent that

- (a) My mouter, my workshop and the General meurance Association of Singapore ("GLA") may/are perimited to collect, use districted and/or process my personal data/personal information set out in this (form) and any other personal information; showled by me or possessed by my insurer (collectively the "Personal information") and districted and transfer sum 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 "meurers"), the insurers lawyers/fav firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police). For the purpose(s) gift.
  - [4] processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - fill investigating the accident and/or my claims.
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me.
  - (h) 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) completing 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 disclused by any of the insurers and/or GIA to their third party service provides or agents including their lawsers/law firms), which may be sited outside of Singapore, for one or more of the above furposes.
- (d) the Personal information will also be oblected and used to compile claims featory for the purpose of fraud detection, inscription and management in present and all future claims.
- (e) the information to collected under (d) above may be shared / disclosed
  - to all inquirers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as responsity required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders

Parkyhorder's Signature

Arek Tone

Orner's Signature

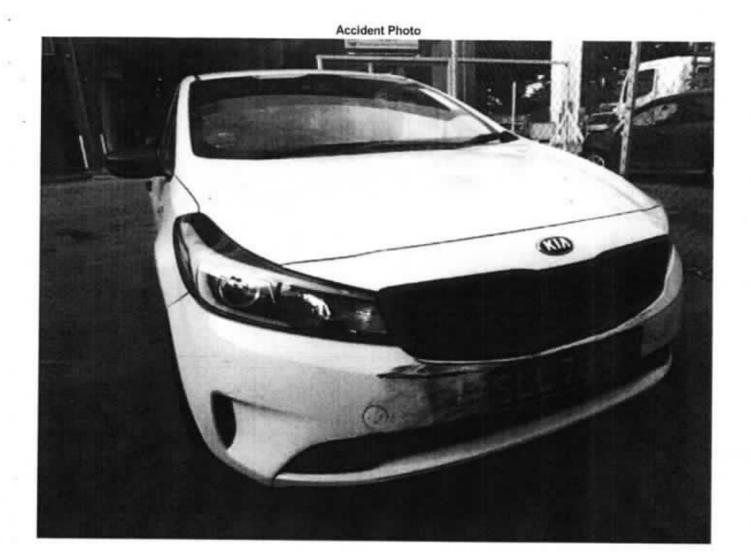
Iff throwing not the policyholder.

Date & firme

Reporting Centre Personnel's Signature

SRIC/FIN No.







## **Accident Photo**



기아자동차(주) KIA MOTORS CORPORATION SWP WK SWP WK KNAFJ411MH5708213 kg kg APPD DATE 1- kg 2- kg



RECORDS MANAGEMENT CENTRE

# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

# SEARCH RESULTS

Our Ref No:

GR-20-002967

Date of Request:

07/01/2020

Your Ref No:

SB/PO/ACC/2019-9203

ORACLE LAW CORPORATION 237 Alexandra Road #04-11 The Alexcier Singapore 159929

Dear Sir/Madam.

### Your Search Criteria:

Date of Accident:

26/11/2019

Place of Accident:

JUNC OF FRENCH RD/HORNE RD

Client Vehicle No:

SLL7956R

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

REQ. VEHICLE	ACCIDENT LOCATION	ACCIDENT DATE
SHA1871X	HORNE ROAD X FRENCH ROAD	26/11/2019 09:30

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



# RECORDS MANAGEMENT CENTRE

# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

# TAX INVOICE

Our Ref No:

GR-20-002969

Date of Request:

07/01/2020

Your Ref No:

SB/PO/ACC/2019-9203

ORACLE LAW CORPORATION 237 Alexandra Road #04-11 The Alexcier Singapore 159929

Dear Sir/Madam,

Date of Accident:

26/11/2019

Vehicle No:

SLL7956R

Place of Accident:

FRENCH RD JUNC WITH HORNE RD

Involving Vehicle No:

SHA1871X

With reference to your application for the accident report, we have attached the following accident reports

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SHA1871X	FRENCH RD JUNC WITH HORNE RD	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)		14.00		

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque

### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Insurance Company

- 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 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.
- 5. 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.
- 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	26/11/2019 13:41	
Date Of Accident	26/11/2019 09:30	
Exact Location Of Accident	HORNE ROAD X FRENCH ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VIEWS F	

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHA1871X	
Insured/Policyholder		
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD	
Vehicle Particulars		
Manufacturer	HYUNDAI	

1110111011101101101	1110110/1
Model	140
Vehicle Category	TAXI

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT	
Fleet Policy	YES	
Policy Number	MCOM0015	

S1113058E

Policy Number	MC
Cover Note Number	

Driver	
Name of Driver	YEO CHENG KIEW

Address	BLK 604 ANG MO KIO AVENUE 5
	#02-2691

	11 OE 200 1
General Information of the Accident	
Type Of Accident	COLLISION - HEAD TO REAR

Weather Conditions	CLEAR

Other Information	
Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

## Circumstances of Accident

Was there any audio recorded?

REFER POLICE REPORT NO: T/20191126/2130 \* TYPE OF ACCIDENT :- HEAD TO SIDE

NO

### Attachment(s)

NRIC No

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-

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

t 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:
  - 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 packagest; 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:
  - 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.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

> Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26.11.2019@12:30hrs

Lisa

Reporting Centre Personnel's Signature

Name: -

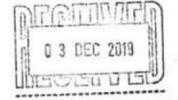
NRIC/FIN No .:-

## Individual Statement Pg. 1



Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999





T/20191126/2130

1 of 3

Report No. T/20191126/2130

REPORT	OF A	TRAFFIC	<b>ACCIDENT</b>

Date/Time Report Made: 26/11/2019 16:39		Vlade:	Vide Report No.:	Station Diary No.: 96	
Informa	ant's Partic	ulars			
	of Informant HENG KIEV		Address: APT BLK 604 ANG MO KIO A SINGAPORE 560604	AVENUE 5 #02-2691	
ID Type / ID No.: NRIC NO / S1113058E		58E	Contact No.: Home/Office:	Mobile: 91995038	
Nationa SINGAR	lity: PORE CITIZ	EN	Email:		
Sex: Male	Age: 64	Date of Birth: 12/04/1955	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupat Taxi driv			Driving Licence Information: Class: 2B,2A,2,3,4,5	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive No	Accide		Type of Location: X-Junction	
Location: Junction of Ri HORNE ROA FRENCH RO Junction						
Weather: Clear			ad Surface:		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled			10000	Traffic Volume: Light	
Type of Collis	ion: ing Vehicles - Head	To Side			yone conveyed by bulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHA1871X	Car	HYUNDAI	140	Blue	Seriously Damaged	0
SLL7956R	Car			White	Slightly Damaged	0

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

## Individual Statement Pg. 3





Police Station Of Origin: Ang Mo Kio South N P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel No: 1800-4519999

3 of 3 Report No. T/20191126/2130

CONTINUATION OF REPORT

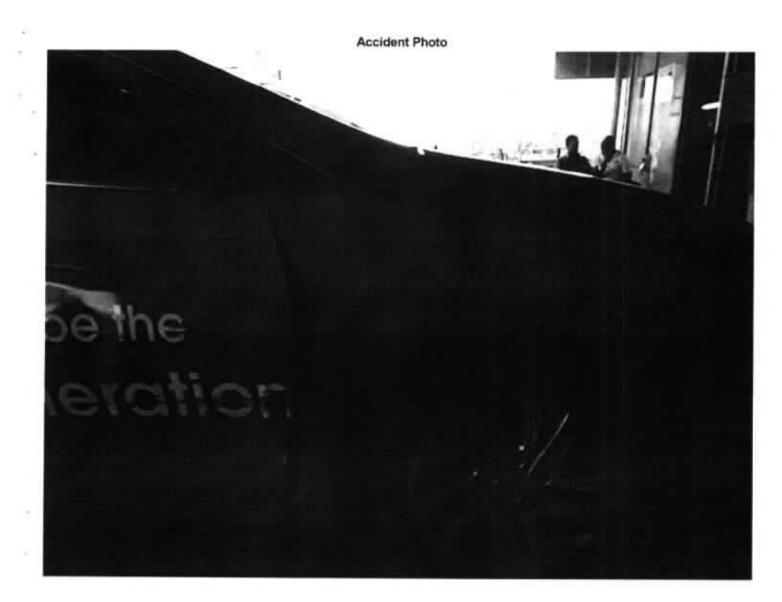
## Sketch Plan

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 /	Signature Of Informant:
Sr Staff Sgt MOHAMMAD HAARIFAN BIN MOHAMMAD NASIR	Cont.
Signature Of Interpreter: Not applicable	Date/Time: 26/11/2019 16:39
Officer In Charge Of Case: TP / AEIT /	Classification Of Case:
SI MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	SK 835
Authentication Stamp	my third
Sings,	4 1 1 F(418





















### Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (85) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 – 17:00 UEN: 56650020G / GST Reg. No.: M400017785

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### .....

•	PARTICULARS OF PE			
		MCD619156073-01	Vehicle Registration No:	SHA1871X
	Name(as shown in NRIC)	Yeo Cheng Klew	NRIC/FIN/Passport No :	S xxxx058E
	Vehicle Driver/Ve			
	Address	Blk 604 Ang Mo Kio Aven	ue 5 # 02-2691	Singapore(560604
	Contact (Tel)	•	Mobile No. : 9199 5038	
	Email Address	richardyck@gmail.com		
1	Date of Accident	26.11.2019	Time of Accident : 09:3	Ohrs
	Place of Accident :	Horne Road x French Roa	ad	
	nsurance Company:	India International Insuran	ice Pte Ltd	
1		mendments: ort No:T/20191126/2130 an	d 3 days MC given by doctor.	
-				
		3/12/20/9		iditional information or

Date:

# Enquire Vehicle & Owner Information (Vehicle No. SHA1871X As At 26 Nov 2019 / 09:30:00 ) Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

Current Owner Details

Owner ID Type:

Company

Owner ID:

199303821R

5B/PO/ACC/2019-9203

Owner Name:

COMFORT TRANSPORTATION PTE LTD

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.:383

Registered Street Name: SIN MING DRIVE

Registered Unit No.:

Registered Building Name: GAS BUILDING Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.:

SHA1871X

Make Description/Model: HYUNDAI / 140 1.7 CRDI F/L AT ABS AIRBAG 4DR

Insurance Company Name: INDIA INT'L INS PTE LTD

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

Contact Number EMail Address

- 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 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.
- 5. 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	26/11/2019 13:41
Date Of Accident	26/11/2019 09:30
Exact Location Of Accident	HORNE ROAD X FRENCH ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHA1871X
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	Control of Action (1) the Late of the Control of the Control of Co
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	140
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	TAXI
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
Driver	
Name of Driver	YEO CHENG KIEW
NRIC No	S1113058E
Date Of Birth	12/04/1955
Occupation	OUTDOOR
Date Of Driving Pass	13/02/1975
Driving Experience	44 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91995038
Fax Number	

RICHARDYCK@GMAIL.COM

BLK 604 ANG MO KIO AVENUE 5 Address

#02-2691

Postcode 560604

Was driver an employee of the Insured's Company NO

OTHER - TAXI DRIVER 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? NO

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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED \* TYPE OF ACCIDENT :- HEAD TO SIDE

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons: Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLL7956R

Vehicle Make/Model/Colour KIA

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver QUEK TING CHYE FRANKIE

NRIC/Passport Number

Contact Number 87230233

Address

Postcode

Insurance Company Name

Nature Of Damage FRONT

No. Of Passenger (Including Driver)

#### 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.
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- 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.
- 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 insurers) 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' 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:
  - 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.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

> Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)
Date & Time: 26.11.2019@12:30hrs

Lisa

Reporting Centre Personnel's Signature Name: -

NRIC/FIN No.:-



A-SHA 1871X B-SLL 7956R

### **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

On 26/11/2019 at about 09:50hrs,I was driving in my taxi (A) (SHA1871X) along Horne Road at cross junction of
French Road on the driveway.Suddenly,veh (B) (SLL 7956R) exited from a minor road on my right side with the
stop white lane, without giving way to me collided onto the front right side of my vehicle.
No injury in this accident.
I have a CCTV footage and scene photos to support my claims.
Veh (B) (SLL 7956R) Mr Quek Ting Chye Frankie.S 1432773H,Hp:8723 0233.

DECLARATION

COMFORT TRANSPORTATION PTE LTD

CO. REG. NO. 199303821R

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26,11,2019@12:30hrs

Lisa

Reporting Centre Personnel's Signature Name: \*

NRIC/FIN No :-











# Accident Photo

























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 Intern	nationale Des Experts En Auton	nobile
NDI	A INTERNATIONA	AL INSURANCE PL	Ref : CS3/III190210	15/Hqd3e2-1
	ECIL STREET 02 IOB BUILDING	SINGAPORE 049711	Date : 02-03-2020 Code : III2	
1.		Policy Particul	ars :- THIRD PARTY CLA	IM
	Insured Veh.	SHA 1871X	Veh. Inspected	SLL 7956R
	Policy No.	MCOM0015	Coverage (\$)	0.00
	Claim No.	MCT19110637	Excess (\$)	0.00
	Assign From	DERRICK TAN	Assign Date	19/02/2020
2.		Vehicle P	articulars & Condition	CALLY IN A MILES
	Make & Model	KIA FORTE	c.c	1591
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	KNAFJ411MH5708213	Colour	WHITE
	Odometer	79728	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Con	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	195/65 R15	CONTINENTAL	4 mm
	L/H Front Tyre	195/65 R15	CONTINENTAL	4 mm
	R/H Rear Tyre	195/65 R15	CONTINENTAL	4 mm
	L/H Rear Tyre	195/65 R15	CONTINENTAL	4 mm
4.			iption of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE	FRONT PORTION.	
	DAMAGES SEE D	ETAILS:		
5.	Present Car	Gen	eral Information	
	Accident Date	26/11/2019	Inspection Date	28/11/2019
	Survey held at	M.S. PANEL BEATING WOR	RKSHOP	
		2 KAKI BUKIT AVENUE 2 #02-17 KAKI BUKIT AUTOH SINGAPORE 417921	UB	
5a.	Ping and the	Ber Halletter Stor	Remarks	THE RESERVE OF THE
		ON WAS CONDUCTED ON A"		

Estimate Days of 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

Page No.:1 of 2

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLL 7956R

aty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	CRUMPLED	735.00	639.20
1	FRONT BUMPER RH TOW COVER	SCRATCHED	24.00	24.00
1	FRONT BUMPER LOWER AIR GRILLE	CRACKED	92.00	92.00
2	FRONT BUMPER SIDE RETAINER	N/S NECESSARY	58.00	29.00
1	SET FRONT BUMPER CLIPS	NECESSARY	30.00	25.00
1	FRONT BUMPER INNER FOAM	CRACKED	117.00	117.00
1	FRONT BUMPER INNER REINFORCEMENT	TO REPAIR SEE LABOUR	410.00	Si
1	FRONT BUMPER INNER LOWER BEAM	BENT	124.60	98.40
1	FRONT GRILLE	CRACKED	230.00	230.00
1	FRONT GRILLE TOP COVER	TO REPAIR SEE LABOUR	56.70	12
1	FRONT GRILLE TOP COVER CENTRE "KIA" LOGO	NECESSARY	37.00	37.00
2	HEADLAMP	O/S BROKEN / CUT / N/S SERVICEABLE	3,690.00	1,039.20
1	FRONT BONNET (NPA)	SERVICEABLE		
1	FRONT SUPPORT PANEL	CRACKED	776.00	652.50
1	AIR CON CONDENSER	SERVICEABLE	697.00	19
	LESS 10% DISCOUNT		-707.73	-298.33
	NOTES TO COMPANY OF THE WORLD PROPERTY OF THE STATE OF TH		6,369.57	2,684.97
	SPECIAL NETT ITEMS			
1	FRONT NUMBER PLATE (SN)	BENT	45.00	30.00
			45.00	30.00
	LABOUR			
	TO REMOVE, JACK OUT, STRAIGHTEN, PANEL BEATING, ALIGN AND RENEW REPLACED PARTS. INCLUSIVE OF THE REPAIR OF FRONT BUMPER INNER REINFORCEMENT AND FRONT GRILLE TOP COVER.		1,000.00	600.00
	TO PUTTY AND RESPRAY PAINTING ON AFFECTED AREAS.		1,100.00	300.00
	TO REMOVE, REFIX AIRCON CONDENSER, PIPES, DRIER VACUUM AND RECHARGE GAS.		150.00	80.00

Report Ref No. CS3/III19021015/Hqd3e2-1



# LKK Auto Consultants Pte Ltd

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	TO CHECK WIRINGS AND LIGHTINGS. TO SUPPLIED AND APPLIED ANTI RUST TREATMENTS.	NOT NECESSARY	50.00 100.00	
- 1		D. Serring Value of State Control Activities	2,400.00	1,010.00
	GRAND TOTAL		8,814.57	3,724.97

RECOMMENDED COST OF LUMP SUM REPAIRS	3,000.00
(TO ITS PRE-ACCIDENT CONDITION)	

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LEE HOCK ANN

Asst. Automotive Assessor

H.S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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