

ASS. REC. BY: SteveREF: A1GCC3/A1G20004567/Eq/f3

ASSIGNMENT

From: _____

Date: 26.3.2020Veh No: SMG 1822YYr Regn: 7/12/18

Estimated Cost: _____

Type: (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /OD / TP / WS / TP RES / OD RES / EVA / INV / MV

Truck / Trailer or

To Inspect Vehicle No: SMG 1822YMake: Audi A3C.C. 999 1395at Workshop m/s PremiumColour Blue

A/C: Insured / Std / NI / NA

of 281 Alexandra RoadSp. Reading 28917

T/Radio: Insured / Std / NI / NA

Insured: _____

Eng/No: _____

Policy No. _____

C/No: W AU 2228V3K 1008346

Claims No. _____

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured: _____

Excess: _____

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt orMake of Veh: 2pm owner waitingModi: Nil / S/R / STD A/Rim or

(Policy Condition)

Tyre Size: F: 205/55R16R: "

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

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

TOYO / YOKO or

Bal. or Market Value: _____

Front

Rear

IDAC Accident Report: _____

Consistent? : Yes or No

R/Bal. 5 mmR/Bal. 5 mm

GIA / PR Seen: _____

Consistent? : Yes or No

L/Bal. 5 mmL/Bal. 5 mm

Est. Repairs: _____

days

Res.: Yes or No

D.O.A. 20/3/20D.O.I. 26/3/20

Lum Sum: _____

%

3 Val.: Yes or No

Survey held at Premium, Alexandra RoadCA REV / REP. / 24 HRS

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

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

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

Date / Time

Action / Instruction

MV-101KSMG 1822Y - X27/3/20 @ 10.07am report to Victor via messenger.

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

☐

: Weekend (\$ _____)

S + RS \$ _____

Photos

Others

TOTAL

Report Format: _____

Lump Sum / I.B.I. (\$) _____

Note: This document has not been finalised.**LKK Auto Consultants Pte Ltd** (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

To: AIG Asia Pacific Insurance Pte. Ltd.
AIG Building
78 Shenton Way #08-16
Singapore 079120

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Azlan, Syazairdina

Date: 27 Mar 2020

Preliminary Advice

Vehicle No	: SMG1822Y	Accident Date	: 20/03/2020
Make	: AUDI A3	Policy No.	: 1800145592
Assignment Date	: 27/03/2020	Excess	: S\$0.00
Date of Inspection	: 26/03/2020	Est. Duration of Repair	: 5.00
Inspection At	: PREMIUM AUTOMOBILES PTE LTD (UBI) 55 UBI ROAD 1 SINGAPORE 408699		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages front n/s portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	18,137.00
Revised Amount	:S\$	10,983.00
Check Items (Estimated)	:S\$	2,787.00
Total	:S\$	13,770.00

Lump Sum Repair	:S\$	
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Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	101,000.00
COE / PARF Rebate	:S\$	45,672.00
Salvage Value	:S\$	
Margin for Repair	:S\$	55,328.00

Remarks

- (X) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- () The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- () Other comments :