## **LAWRENCE LEE & CO**

Advocates & Solicitors

李伟平律师楼 UEN: 53159236K

Your ref:

(please advise)

Our ref:

LWP/KMM/4324A/19/wt(ec)

1 Oct 2019

SNM 19D 204048

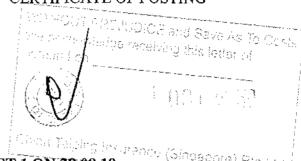
133 New Bridge Road #13-05 Chinatown Point Singapore 059413 tel: 6533 3680 fax: 6533 3689 email: info@lawrencelee.com.sg

This is a letter of claim issued pursuant to the Non-Injury Motor Accident Practice Direction of the State Courts

Longlim Pte. Ltd. 34 Jalan Tari Piring Jalan Kayu Estate Singapore 799187

ring

**CERTIFICATE OF POSTING** 



Dear Sirs

ACCIDENT ALONG YISHUN INDUSTRIAL ST 1 ON 28.08.19 INVOLVING GBH9808L & PC643P (OWNER'S CLAIM)

We act for K & M Electrical Pte Ltd, owner of the above m/van registration no. GBH9808L.

We are instructed to claim damages against you in connection with the above road traffic accident involving our client's vehicle and m/vehicle registration no. PC643P owned by you and driven by your servant/agent one Li Jiangchao at the material time.

We are instructed that the accident was caused by your servant/agent's negligent driving, management and/or control of your vehicle; for whose actions you are vicariously liable. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

### Particulars

1.	Cost of repairs		\$ 20,651.00 (\$19,300.00 plus GST)
_	- 07- /	****	h

2. Loss of Use (13 days x \$120.00 per day) \$ 1,560.00

### Disbursements

3. Survey fee	\$ 1,051.00
4. LTA fee	\$ 7.49
5. GIA fee	\$ 15.00
6. TP fee	\$ 14.00
7. Legal costs	\$ 900.00
8. Miscellaneous	\$ 100.00

## **LAWRENCE LEE & CO**

Advocates & Solicitors

李伟平律师楼

UEN: 53159236K

Your ref:

(please advise)

Our ref:

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1 Oct 2019

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3.	Survey fee	\$ 1,051.00
4.	LTA fee	\$ 7.49
5.	GIA fee	\$ 15.00
6.	TP fee	\$ 14.00
7.	Legal costs	\$ 900.00
8.	Miscellaneous	\$ 100.00

A copy of each of the following documents is enclosed with the copy of this letter to your insurer:

- 1. LTA search on your vehicle with receipt;
- 2. Our client's LTA online enquiry;
- 3. Our client's GIA report with receipt;
- 4. Our client's TP report with receipt;
- 5. Invoice No. 50074 from K & M Leasing Pte Ltd dated 23.09.19 for cost of repairs; and
- 6. Original Survey Report no. 500/TP/2019 with 76 color photographs and Invoice No. 180919-500 from Sincere Appraisal Services Pte Ltd.

### Please note that:

- a. If you are insured and you wish to claim under your insurance policy, you should immediately pass this letter to your insurer.
- b. You or your insurer should send us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
- c. If you have any witnesses or photographs of the accident scene, please send to us the witnesses' names/addresses/contact nos. or the photographs within 14 days of your receipt of this letter.
- d. If you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

In the event that your vehicle had been driven by someone not in the capacity as your servant/agent, please inform us in writing within 14 days otherwise we will name you as a defendant in the Writ that may be issued and you may be liable for legal costs.

Yours faithfully

LEE WEE PENG LAWRENCE Secretary: Ms Tay Wan Ting

Email: wanting@lawrencelee.com.sg

Cc China Taiping Insurance (Singapore) Pte Ltd

(Insurer of PC643P)

Cc Clients

BY PDX WITH ENCS

# Enquire Vehicle & Owner Information (Vehicle No. PC643P As At 28 Aug 2019 / 08:30:00)

### Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

LWP/KMM/4324A/19/WT

### **Current Owner Details**

Owner ID Type:

Company

Owner ID:

201109995N

Owner Name:

LONGLIM PTE. LTD.

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 34

Registered Street Name:

JALAN TARI PIRING

Registered Unit No.:

Registered Building Name: JALAN KAYU ESTATE

Registered Postal Code:

799187

**Current Vehicle Details** 

Vehicle No.:

PC643P

Make Description/Model: SCANIA / KIB4X2 MANUAL ABS

Insurance Company Name: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD



Lee Wee Peng Lawrence has successfully logged out.

Your last login date and time was 29 Aug 2019, 10:51:51.

To return to ONE.MOTORING, please click here

For security reasons, please CLEAR YOUR CACHE after each session.

## **Session Transaction History**

			Asset Owner		Transaction	
S/No.↓È	Asset Type	Asset ID.	ID	Transaction Type	Amount(S\$)	Log Date/Time
1	Vehicle	PC643P	-	18.19 Enquire Veh Owner Info	7.49	29 Aug 2019 /
				(Others) by Law Firm		10:52:23

## > Back to OneMotoring

### **Enquire PARF/COE Rebate for Registered Vehicle**

**Vehicle Owner Particulars** 

Owner ID Type: Company 721Z Owner ID:

Vehicle Details

First Registration Date:

Vehicle No.: GBH9808L

Vehicle to be Exported: Yes Intended Deregistration Date:

29 Aug 2019 Vehicle Make: ATOYOTA

HIACE VAN TURBO 5DR MT Vehicle Model:

Primary Colour: Silver Manufacturing Year: 2018

1KD2827733 Engine No.:

Chassis No.: JTFHT02P800246144

Maximum Power Output: Open Market Value: \$28,136,00 Original Registration Date: 14 Nov 2018 14 Nov 2018

Transfer Count: 0

\$1,407.00 Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility: No PARF Eligibility Expiry Date:

\$0.00 PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date: 13 Nov 2028

C - Goods Vehicle & Bus COE Category:

COE Period(Years): 10

PQP Paid: \$26,563.00 COE Rebate Amount: \$21,250.00 **Total Rebate Amount:** \$21,250.00

The information contained herein is correct as at 29 Aug 2019

#### 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 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.

	ACCIDENT STATEMENT	
Date Of Report	29/08/2019 09:33	<u> </u>
Date Of Accident	28/08/2019 08:30	
Exact Location Of Accident	YISHUN INDUSTRIAL ST 1	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBH9808L	

Vehicle Registration Number

Insured/Policyholder

K & M ELECTRICAL PTE LTD Name Of Registered Owner

Co Reg No 200912721Z **Email Address** NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-89999999

Vehicle Particulars

Manufacturer TOYOTA

Model HIACE VAN TURBO 5DR MT

Exact Purpose for which vehicle was being used at

time of accident

WORKING

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company ALLIED WORLD ASSURANCE COMPANY, LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy

AVCPSB0093861800 Policy Number

Cover Note Number

Driver

Name of Driver KRISHNAN ANBARASAN

Passport No/FIN G2390331N Date Of Birth 11/02/1992 Occupation OUTDOOR **Date Of Driving Pass** 16/04/2015

**Driving Experience** 4 YEARS AND 4 MONTHS

MALE Gender

Mobile Number (LOCAL) +65-98077600

Fax Number

OFFICE-98077600 Contact Number

EMail Address **NOEMAIL**  Address

51 ADMIRALTY ROAD WEST #B-03-18 COCHRANE LODGE 1

Postcode

757443

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

COLLISION - CHANGE/CROSS LANE

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?

YES

Was any other material or properly damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

NAME:

Number of Passengers (Including Driver)

\_

Passenger 1

: CHUAH KOK SEONG

GENDER: : MALE

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 31 YIS SINGAPORE

ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-8529999 - FAX NO: 68522299

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT - T/20190828/2151.

Attachment(s)

Are accident photos available for attachment?

YES

NO

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FOOTAGE TOO LARGE

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

PC643P

Vehicle Make/Model/Colour

**Details Of Properties** 

BUS

Vehicle Category

Name of Driver

LI JIANGCHAO

NRIC/Passport Number

G2596646K

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF INJURED PERSON 1**

Name CHUAH KOK SEONG

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? GBH9808L

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

### **Accident Sketch Plan**

### **SKETCH PLAN**

### **IMPORTANT NOTICE**

- 3. The air topics conjectly the metals of the accident to speed up the claims process
- 2 Shock care most the completed by the Policyholder and/or the Authorised Drivet.
- 3 Information to wide or must be an truthful and accurate as possible. Any wide impreparation or withholding of magenal facts may all professionable transposites to repudiate policy liability.
- 4. The issue are weightness of this form by regularity companies a region demission of policy habitity on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 6 The copy I will be forwarded by the insures of the GWA Accord. Management Centre established by the General Management Centre established by the General Macuaham of Singapore (6:4) for an blood and that copies of the report will for a fee be made available upon application by independent parties.
- 4. As the lodgework of the report to the ensurers, you because onstant to the archiving of this report at the centur and to report of the report being made available aforesaid.
- 8. Convent under the Personal Data Protection Act (PDPA)

runderstand, act nowledge, agree and consent that

- My insurer, bry workshop and the General insurance Association of Singapore ("GIA") may/are permitted to extent, use, this case and/or process my personal intermation and not in this (form) and any other personal information provided by the operand by my report (collectively the "Personal information") and disclose and transfer such Personal information. I and disclose and transfer such Personal information to all insurer(s) who have insured vehicle(s) involved in this acceptant (all insurer(s) who have insured vehicle(s) involved in this acceptant for any insured that the "Insurers" it the Insurers' Sewyet (fam firms, the Monstary Authority of bingapore and any relevant government agency/authority (such as the police), for the purposets) of
  - proceeding, transling and/or dealing with my claim, including the settlement of the craims and any necessary any sugations relating to the claims;
  - lat investigating the accident and/or my dialou.
  - bigit anymotion and for dealing with my instructions or responding to any enquiries by min;
  - (iii) administering my chana (including the mailing of correspondence, statements, imposes, seponts of nothing 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 cream of uncompositived packages); an e/or
  - (e) complying with applicable law in administering, preceiving thanking and/or dealing with my claims (collectively the Purposes)\*;
- (b) All insurerist who have insured ventures) involved in this accident and the insurers' tawyers/can firms, may/are petinitied to entiret, use, disclose and/or process my kersonal information for one or more of the above Purposes, and
- 42) my Personal information may/ren be disclosed by any of the insurers and/or GrA to their shird party service providers on agentisfications their lawyers/law forms), which may be steed outdide of Singapore, for one or more of the above Purposes.
- (d) my hersonal information will also be solicited and used to compile claims history for the purpose of traud derection, solvestigation and may agenteen in present and all future claims.
- (b) the inturnation so collected or decid) above may be shated / disclosed:
  - 10 to structure and/or any other third parties that agent in evaluating, investigating controlling or managing field, regulators law enforcement and povernment agencies as reasonably required for the purposes stated, or

But for complying with edgler ements under any regulations, laws or court process

Parcyllolder's Signature Date R. time

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Date & Time

Reported Centre Personne 's Signature

Name Nervice

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## **Accident Sketch Plan**

SKETCH PLAN						
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(If driver is not the policyholder). Date & Time

Name ARC /S/N No

## Police Report





Police Station Of Origin Yishun North N.P.C. 31 Yishun Central SINGAPORE 768627 Tel No. 1800-8529999 1 ol 3 Report No. 1/20190828/2151

REPORT C	)F A TRAFFIC	CACCIDENT			
Date/Time Report Made: 28/08/2019 20:50			Vide Report No	Station Diary No.	
Informa	nt's Partice	llere	ng Baja na ng Karong Kinga		
	Informant: AN ANBAR	IASAN	Address: 51 Admiralty Road West #B-0 SINGAPORE 757443	3-15 Cochrane Lodge 1	
ID Type / ID No. FIN NO / G2390331K			Contact No.: Mobile: 98077600		
National INDIAN	ty		Email:		
Sex. Male	Age: 27	Date of Birth: 11/02/1992	Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation Van driver			Driving Licence Information; Class: 2B,3	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/08/2019 08:30	Type of Location Straight Road
	JS1RIAL STREET	Yishun Aye 9 near to bui Road Surface: Dry		b Road Speed Limit:
Traffic Flow One Way		Traffic Control: Not Controlled	<u> </u>	raftic Volume: ight
Type of Collis	ion: ing Vehicles - Head	res. Oblis	· ·	knyone conveyed by imbulance:

Datails of Ve	hicle involved				<b>774</b>
Vehicle No.	Type	Make	Model Color	Condition	No of Passenger
GBH950BL	Ven	TOYOTA	Grey	Seriously Damaged	1
PC643P	Bus/Coach/Mi nibus	SCANIA	Red	Slightly Damaged	0

Details of Po	mon involved	
Any Pedestri	an involved: No	
No. of Pedes	trians Injured: NIL	Use of Pedestrian Crossing: NA

### Police Report





Police Station Of Origin: Yishun North N.P.C. 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529699 2 of 3 Report No. 1/20190828/2151

CONTINUATION OF REPORT

Driver						
Name	KRISHNAN ANBARASAN	V	·	ID No.		G2390331N
Related Vehicle	GBH9608L (Van)			Conta	ct No	98077600
Hospital/Clinic	NIL			Class Driving Licent Expiry	e &	Class: 2B,3 Date of Expiry, NIL
Date Treatment	NIL	Ē	ate Disc	narge	NIL	
No. of Days gran	ted Medical Leave Nit	L C	egree of	Injury	NIL	
Driver		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PRODUČ	34.44E		741.241.492.5334.34134
Name	LI JIANGCHAO			ID No		G2596646K
Related Vehicle	PC643P (Bus/Coach/Mini	ก์อินร์)		Conta	ct No.	NIL
Hospital/Clinic	NIL			Class Orivin Licens Expiry	9 ce &	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		ale Cisc	harge	NIL	Ar ano 50.11-1
No. of Days gran	ted Medical Leave NII	L	egree of	injury	NIL	

### Brief Details.

On 28.08.2019 at about 0830hrs, I am driving my company van GBH9808t, at along Yishun Industrial Street 1 toward Yishun Ave 9 with a front passenger. I am driving my van on the right lane along Yishun Industrial Street 1 beside the building North View Bizhub. There was a bus PC643P which was trevelling on my left side. The bus made a right turn toward North View Bizhub and hit the laft passenger door of my van After the accident, my passenger (Chuah Kok Seong FIN: G2998845K DOB: 19-01-1996 work permit No: 406111946 Malaysian national) HP 98801257 complain of pain on the left shoulder. There were scratches seen on the left shoulder. My passenger went to a clinic at 8/620 Hougang and see a doctor and he was given 4 day of medical leave. Damaged to the van: left passenger door dented and scratches at the whole left side of the van. I has no injury.

### Police Report





Police Station Of Origin Yishun North N P C 31 Yishun Central SINGAPORE 768827 Tel No. 1800-8529999 3 of 3 Report No. 7/20190828/2151

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 Re	port	Signature Of Informant:
SI YEO HWEE BENG	V I	b All I
Signature Of Interpreter. Not applicable	<del>- i , -</del>	Date/Time: 28/08/2019 20.50
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	10 mg	Classification Of Case;
Authentication Stamp NP188	<del>regardent da</del> t. Turkjansk	ireline Come



# 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-19-151521

Date of Request:

16/09/2019

Your Ref No:

LWP/KMM/4324A/19/WT

LAWRENCE LEE & CO 133 New Bridge Road #13-05 Chinatown Point Singapore 059413

Dear Sir/Madam,

### Your Search Criteria:

Date of Accident:

28/08/2019

Place of Accident:

YISHUN INDUSTRIAL ST 1

Client Vehicle No:

GBH9808L

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



A FORCE FOR THE NATION

## **PAYMENT**

Invo	( INVOICE bice No: e/Time:		9091601000134 919 11:03:59				
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Trar	nsaction Ref No:	TP00012	26043				
_	Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amou
1	Police Document	Search Fee	0050000002117343	14.00	0.00	1	14.00
			PM - 142-14	7 Ti	Tota	el (S\$)	
Thi	s is a computer-genera	ated invoice. No sig	mature is required.				
				· ······	****		
Ple	ase print a copy of the	invoice for your ref	erence.				



## K & M LEASING PTE LTD

(Co./GST Reg. No. 201634342C)

51 Ubi Avenue 1 #03-18 Paya Ubi Industrial Park Singapore 408933

TEL: 67475763 / 97538067 FAX: 6734 7389

## TAX INVOICE

K&M ELECTRICAL PTE LTD

Our Ref: 50074

Date: 23/09/2019

### **RE: INVOICE FOR GBH9808L**

No	DESCRIPTION	QTY	U.P. (SGD)	AMC	UNT (SGD)
1	Lump Sum Cost Of Repair	1	\$ 19,300.00		19,300.00
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All C	neque shoud be crossed and made payable to "K & M LEASING F	TE. LTD,"	Sub Total	\$	19,300.00
			GST 7%	\$	1,351.00
Acco	unt No : 669-836314-001		Total	\$	20,651.00

Account No: 669-836314-001 OCBC Yishun Branch

THIS IS COMPUTER GENERATED DOCUMENT NO SIGNATURE IS REQUIRED

E & O.E.



### SINCERE APPRAISAL SERVICES PTE LTD Co, Reg no: 201800639R

60 Paya Lebar Road #07-41 Paya Lebar Square Singapore 409051

Tel: 6636 4628 Fax: 6636 4638 E-mail: office@sincereappraisal.com.sg

## INVOICE

K & M Electrical Pte Ltd Lawrence Lee & Co 133 New Bridge Road #13-05 Chinatown Point Singapore 059413

Invoice No:

180919-500

Our ref:

500/TP/2019

Date:

18/9/2019

Claim Type: Third Party

Vehicle Reg No: GBH9808L

**Date of Loss:** 28/8/2019

Vehicle Make/Model: Toyota Hiace Van

Claimant:

K & M Electrical Pte Ltd

Description

Amount (S\$)

1. Professional Fee

1051

(including Transport, 76 Photographs and

Miscellaneous charges)

Total

1051

Singapore Dollar: One thousand and fifty one dollars only.

Cheques should be crossed A/C PAYEE and made payable to Sincere Appraisal Services Pte Ltd

Sincere Appraisal Services Pte Ltd



### VEHICLE DAMAGE INSPECTION REPORT

Our Ref:

500/TP/2019

Date: 18/9/2019

REFERENCE

Date of loss:

28/8/2019

Claimant:

K & M Electrical Pte Ltd

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

GBH9808L

14/11/2018

Reg date: Colour:

Silver

Type: Type of Claims:

Van

Third Party

Make &

Model

Engine No:

1KD2827733 Chassis No:

JTFHT02P800246144

Toyota

Hiace Van

Odometer No: 16149km

2982cc Engine Cap:

**CONDITION OF VEHICLE AT THE TIME OF SURVEY** 

(STATIC ONLY)

General Condition: Good

Steering:

Good

Engine Modification: Nil

Paint work:

Good

Handbrake: Footbrake:

Good Good Pre-accident

Damage:

Nil

**CONDITION OF TYRES** 

Front Left Size:

Bridgestone 195/R15 70%

Front Right Size:

Bridgestone 195/R15 70%

Rear Left Size:

Bridgestone 195/R15 70%

Rear Right Size:

Bridgestone 195/R15 70%

The above percentages represent the remaining life of the tyre threads

**COST OF REPAIRS** 

Parts

Labour

Calculated Cost (S\$):

Repairer S\$

Adjuster S\$

18,707.25 \$ 18,497,25 6,750.00

25,457.25

5,600.00 24,097,25

19,300.00 Recommended Lump Sum Repair Cost (S\$): \$

Date of Assignment:

28/8/2019

Inspected At: K & M Leasing Pte Ltd

Date Inspected: Est. repair Period: 28/8/2019 11 days

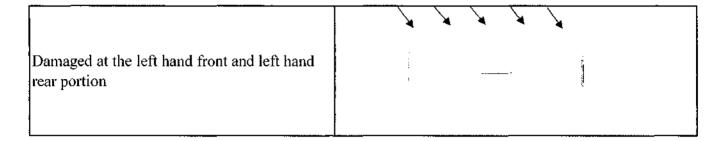
51 Ubi Avenue 1 #03-18 Paya Ubi Industrial Park

Singapore 408933

SINCERE APPRAISAL SERVICES PTE LTD Co.Reg no: 201800639R

60 Paya Lebar Road #07-41 Paya Lebar Square Singapore 409051 Tel: 6636 4628 Fax: 6636 4638 E-mail: office@sincereappraisal.com.sg

### **POINT OF IMPACT**



## BRIEF CIRCUMSTANCES OF ACCIDENT

The Insured's vehicle collided onto the Third Party's vehicle along Yishun Industrial Street 1 towards Yishun Avenue 9.

## **GENERAL DESCRIPTION OF DAMAGES**

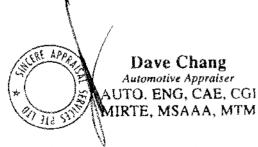
Our visual inspection of the vehicle revealed that the damages noted are at the left hand front and left hand rear portion.

## **SPECIAL REMARKS**

We have inspected the actual damages found on the vehicle and recommend the replacement of parts and repairs accordingly. The estimated repair cost is \$25,457.25. The repairer has agreed to undertake the repairs at our adjusted lump sum amount of \$19,300.00.

We have not authorised the repair. Under normal circumstances, estimated 11 working days are required to repair the vehicle.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Inspection Report and photographs.



Automotive Appraiser: Dave Chang

Please note that this report is solely based on our findings at the time and place of inspection. This inspection has been carried out to our best knowledge and ability. Any other liability is hereby excluded.

## ANNEX A

## REPAIR DETAILS

Recommended Parts

				R	epairer's	A	djuster's 📒
No	Qty	Description	Condition	A	Amount	A	Amount
1	1	Front left corner panel	warped/bent	\$	284.00	\$	284.00
2	1	Front left step inner panel	dented	\$	693.00	\$	693.00
3	1	Front left wing mirror assy	cracked	\$	350.00	\$	350.00
4	1	Front left lower bracket	bent	\$	251.00	\$	251.00
5	1	Front left tie rod	bent	\$	191.00	\$	191.00
6	1	Front left door panel	deformed	\$	1,858.00	\$	1,858.00
7	1	Front left door regulator linkage with motor	malfunction	\$	480.00	\$	480.00
8	1	Front left door weatherstrip	warped/necessary	\$	288.00	\$	288.00
9	1	Front left door outer handle	necessary/grazed	\$	176.00	\$	176.00
10	1	Front left door lock mechanism	bent/necessary	\$	245.00	\$	245.00
11	1	Front left door outer moulding	warped/necessary	\$	196.00	\$	196.00
12	1	Front left door glass	shattered	\$	389.00	\$	389.00
13	2	Front left door hinges	bent	\$	180.00	\$	180.00
14	1	Front left door inner board	bent/warped	\$	498.00	\$	498.00
15	1	Front left door inner bracket	bent	\$	106.00	\$	106.00
16	1	Front left door inner switch cover	bent	\$	151.00	\$	151.00
17	1	Front left door inner side cover	bent	\$	125.00	\$	125.00
18	1	Front left stabilizer link	bent	\$	161.00	\$	161.00
19	1	Front left upper arm	bent	\$	380.00	\$	380.00
20	1	Front left lower arm	bent	\$	395.00	\$	395.00
21	1	Front left knuckle arm	bent	\$	499.00	\$	499.00
22	1	Front left shock absorber	bent	\$	685.00	\$	685.00
23	1	Front left wheel hub bearing	necessary	\$	255.00	\$	255.00
24	1	Front dash board assy	grazed/cut	\$	2,400.00	\$	2,400.00
25	1	Front air con filter cover	cracked	\$	119.00	\$	119.00
26	1	Front left fuel tank cover	dented	\$	95.00	\$	95.00
27	1	Left 'B' pillar	dented	\$	1,159.00	\$	1,159.00
				\$	12,609.00	\$	12,609.00
		Less 25%		_\$	3,152.25	\$	3,152.25
				_\$	9,456.75	\$	9,456.75

## ANNEX A

## REPAIR DETAILS

**Recommended Parts** 

Total parts

				R	epairer's	A	djuster's 🧸
No	Qty	Description	Condition	A	Amount	Å	Amount
28	1	Rear left sliding door assy	dented	\$	1,612.00	\$	1,612.00
29	1	Rear left sliding door lock	malfunction	\$	189.00	\$	189.00
30	1	Rear left sliding door lock catch	necessary	\$	63.00	\$	63.00
31	2	Rear left sliding door lower hinges	bent/necessary	\$	218.00	\$	218.00
32	1	Rear left sliding door outer handle	grazed/bent	\$	125.00	\$	125.00
33	1	Rear left sliding door weatherstrip	warped	\$	288.00	\$	288.00
34	1	Rear left sliding door sensor	malfunction	\$	192.00	\$	192.00
35	1	Rear left sliding door railing	bent	\$	275.00	\$	275.00
36	1	Rear left panel assy	deformed	\$	3,827.00	\$	3,827.00
37	1	Rear bumper assy	grazed/bent	\$	1,260.00	\$	1,260.00
38	1	Rear left taillamp	bent/cut	\$	885.00	\$	885.00
				\$	8,934.00	\$	8,934.00
		Less 25%		\$	2,233.50	\$	2,233.50
				\$	6,700.50	\$	6,700.50
		Special Nett Items					
1	1	Front left tyre	grazed	\$	350.00	\$	245.00
2	1	Front left wheel rim	grazed/cut	\$	650.00	\$	650.00
3	1	Front left wheel rim cover	grazed/cut	\$	150.00	\$	150.00
4	1	Front left door company sticker	necessary	\$	50,00	\$	50.00
5	1	Front left door company advertisement sticker	necessary	\$	50.00	\$	50.00
6	8	Front left door inner board clips	necessary	\$	30.00	\$	30.00
7	1	Rear left panel sealant	necessary	\$	120.00	\$	120,00
8	1	Rear left tyre	grazed	\$	350.00	\$	245,00
9	1	Rear left wheel rim	grazed/cut	\$	650.00	\$	650.00
10	1	Rear left wheel rim cover	grazed/cut	\$	150.00	\$	150.00
			_	\$	2,550.00	\$	2,340.00

\$ 18,707.25 \$ 18,497.25

## ANNEX B

## REPAIR DETAILS

Recommended Labour

No	Description		epairer's Amount	djuster's Amount
1	Labour for panel beating, cut, weld, straighten front, front left affected area and replace front, front left damaged parts.	\$	1,000.00	\$ 800.00
2	To putty and spray painting front and front left portion.	\$	1,000.00	\$ 800.00
3	To apply anti rust proofing to front and front left affected area.	\$	140.00	\$ 120.00
4	Labour for panel beating, cut, weld, straighten rear, rear left affected area and replace rear and rear left damaged parts.	\$	1,400.00	\$ 1,200.00
5	To putty and spray painting rear left and rear portion.	\$	1,400.00	\$ 1,200.00
6	To apply anti rust proofing to rear left and rear affected area.	\$	140.00	\$ 120.00
7	To check rear lighting and wiring.	\$	50.00	\$ 30.00
8	To remove and install front left door lock mechanism.	\$	80.00	\$ 60.00
9	To check door central locking for function.	\$	80.00	\$ 60.00
10	To transfer front left door glass to new door.	\$	80.00	\$ 60.00
11	To remove and install front left undercarriage part.	\$	350.00	\$ 300.00
12	To balance front left wheel.	\$	50.00	\$ 30.00
13	To balance rear left wheel.	\$	50.00	\$ 30.00
14	To conduct wheel alignment.	\$	140.00	\$ 120.00
15	To remove and install front dash board to facilitate the repair.	\$	300.00	\$ 250.00
16	To conduct chassis alignment.	\$	350.00	\$ 300.00
17	Towing service.	_\$	140.00	\$ 120.00
	Total labour :	\$	6,750.00	\$ 5,600.00

## ANNEX C

## REPAIR DETAILS

Adjusted Repair Cost

	Repairer's Amount	Adjuster's Amount
Total parts:	\$ 18,707.25	\$ 18,497.25
Total labour :	\$ 6,750.00	\$ 5,600.00
Total repair cost:	\$ 25,457.25	\$ 24,097.25

Adjusted Repair Cost (Lump Sum Repair) \$ 19,300.00
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