

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

TAX INVOICE

EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEX SINGAPORE 069110 INV No. AC2007554

INV Date 11/11/2020

Reference CC3/EQI20012190/Kvd3e2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SHD 419K

Insured Veh. SLD 1922U

Claim No. DM20HO01638-JG

Policy No. DMPPHQ20-003744

Accident Date 03/11/2020

Inspection Date 04/11/2020

Description	Total
Survey Inspection	230.00
Digital Photographs	
Transportation	
Subtotal	230.00
GST (7%)	16.10
Grand Total	246.10

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

KHM



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EQ INSURANCE COM	Affiliated to Federation Internationale Des Experts En Automobile			
Ī	PANY LTD	Ref : CC3/EQI20012190	/Kvd3e2	
5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGA		Date: 11-11-2020		
		Code: EQI		
1.	Policy Particulars :	- THIRD PARTY CLAIM		
Insured Veh.	SLD 1922U	Veh. Inspected	SHD 419K	
Policy No.	DMPPHQ20-003744	Coverage (\$)	0.00	
Claim No.	DM20HO01638-JG	Excess (\$)	0.00	
Assign From		Assign Date	04/11/2020	
2.	Vehicle Partic	culars & Condition		
Make & Model	RENAULT LATITUDE (A)	c.c	1995	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	VF1ABL15AUC283417	Colour	METALLIC WHITE / RED	
Odometer	606868	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3.	Condition	ons of Tyres		
	Size	Make	Balance	
R/H Front Tyre	215/60 R16	SAILUN	9 mm	
L/H Front Tyre	215/60 R16	SAILUN	9 mm	
R/H Rear Tyre	215/60 R16	SAILUN	8 mm	
L/H Rear Tyre	215/60 R16	SAILUN	8 mm	
4.	Description	on of Damages		
	THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5.		Information		
	03/11/2020		04/11/2020	
	TRANS-CAB AUTO SERVICES			
	NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
	5a. Remarks			
5a.	Re	emarks		
A)THE INSPECTIO	N WAS CONDUCTED ON A"WIT	HOUT PREJUDICE" BASIS.	REPAIRS.	
A)THE INSPECTIO	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, WI	HOUT PREJUDICE" BASIS. E HAVE NOT AUTHORISED	REPAIRS.	
R/H Rear Tyre 215/60 R16 SAILUN 8 mm L/H Rear Tyre 215/60 R16 SAILUN 8 mm 4. Description of Damages THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS. 5. General Information Accident Date 03/11/2020 Inspection Date 04/11/2020 Survey held at TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111 5a. Remarks A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 419K

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BUMPER COVER REAR	BUCKLED	561.70	561.70
1	BUMPER LOWER REAR	SERVICEABLE	411.90	-
1	BUMPER BRACKET CTR REAR	SERVICEABLE	98.10	-
1	BUMPER BRACKET SIDE RH REAR	SERVICEABLE	82.10	-
1	BUMPER RETAINER RH REAR	SERVICEABLE	59.80	-
1	BUMPER BRACKET SIDE LH REAR	SERVICEABLE	80.80	-
1	BUMPER RETAINER LH REAR	SERVICEABLE	54.20	-
1	BUMPER BEAM REAR	TO REPAIR SEE LABOUR	547.80	-
1	BUMPER BEAM BRACKET LH REAR	TO REPAIR SEE LABOUR	114.50	-
1	BUMPER BEAM BRACKET RH REAR	TO REPAIR SEE LABOUR	114.50	-
1	OUTER PANEL REAR (END PANEL)	TO REPAIR SEE LABOUR	745.80	-
1	OUTER PANEL REAR (END PANEL) TRIM	SERVICEABLE	404.56	-
1	BOOT REAR	BENT	1,677.20	1,677.20
1	BOOT BADGE "RENAULT"	NECESSARY	82.40	82.40
1	BOOT BADGE	NECESSARY	95.80	95.80
1	BOOT FINISHER	SERVICEABLE	344.70	-
2	LICENCE PLATE LAMP	SERVICEABLE	26.30	-
1	TAILLAMP RH	SERVICEABLE	401.40	-
1	TAILLAMP LH	SERVICEABLE	401.40	-
	LESS 10% DISCOUNT		-630.50	-241.71
			5,674.46	2,175.39
	SPECIAL NETT ITEMS			
1	SET PARKING AID (SN)	SERVICEABLE	700.00	-
1	BOOT FINISHER NUT L70Y (SN)	NOT NECESSARY	60.00	-
1	SET REAR BUMPER CLIP (SN)	NECESSARY	66.00	66.00
1	SET BUMPER BRACKET CTR CLIP (SN)	NOT NECESSARY	33.00	-
1	SET BUMPER BRACKET SIDE CLIP RH RR (SN)	NOT NECESSARY	10.00	-
1	SET BUMPER RETAINER RH CLIP RR (SN)	NOT NECESSARY	20.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	SET BUMPER BRACKET SIDE CLIP LH RR (SN)	NOT NECESSARY	10.00	-
1	SET BUMPER RETAINER CLIP LH RR (SN)	NOT NECESSARY	20.00	-
1	SET BUMPER LOWER REAR RIVET (SN)	NOT NECESSARY	22.00	-
1	SET BUMPER LOWER REAR CLIP (SN)	NOT NECESSARY	66.00	-
1	REAR NUMBER PLATE WITH HOLDER (SN)	SERVICEABLE	120.00	-
1	REAR BOOT STICKER "TRANS-CAB" (SN)	NECESSARY	80.00	30.00
1	REAR BOOT STICKER "6555-3333" (SN)	NECESSARY	80.00	30.00
			1,287.00	126.00
	<u>LABOUR</u>			
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		3,000.00	440.00
	PANEL BEATING,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS,ADJUST AND REALIGN THE SAME.INCLUSIVE OF THE REPAIR OF BUMPER BEAM REAR,BUMPER BEAM BRACKET RH REAR AND OUTER PANEL REAR (END PANEL).		3,000.00	300.00
	TO RUST-PROOFING OF THE AFFECTED AREAS.		170.00	30.00
	TO REINSTALL REAR BUMPER PARKING SENSOR.		170.00	60.00
	TO TRANSFER OF BOOTLID FITTINGS,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.		170.00	60.00
	TO TRANSFER OF REAR END PANEL FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	-
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	-
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	15.00
			7,070.00	905.00
	GRAND TOTAL		14,031.46	3,206.39

RECOMMENDED COST OF LUMP SUM REPAIRS	2,550.00
(TO ITS PRE-ACCIDENT CONDITION)	

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KONG SENG CHEONG

Licensed 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.
 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

- Any false reporting may be referred to the Police for investigation.
 This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

	ACCIDENT STATEMENT
Date Of Report	03/11/2020 14:10
Date Of Accident	03/11/2020 06:15
Exact Location Of Accident	ALONG TAMPINES AVE 9
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD419K
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	2XXXXX878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666
Vehicle Particulars	
Manufacturer	RENAULT
Model	LATITUDE 2.0L DCI AUTO D/AB 4DR
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VFX/P2348706
Cover Note Number	N.A
Driver	SELECT CONTRACTOR OF THE SELECTION OF TH
Name of Driver	KEE CHER TEE
NRIC No	SXXXX576C
Date Of Birth	14/11/1953
Occupation	OUTDOOR
Date Of Driving Pass	30/01/1973
Driving Experience	47 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90258486
Fax Number	
Contact Number	
EMail Address	NOEMAIL

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Address NA

Postcode

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

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

TAMPINES NORTH NEIGHBOURHOOD POLICE POST Police Station Name

NO

YES

2

YES

NO

YES

NO

1

ROAD: BLK 461 TAMPINES STREET 44 #01-56, POSTCODE: 520461, Police Station Address

COUNTRY: SINGAPORE

TEL NO: 1800-7818999 - FAX NO: 67838603 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED POLICE REPORT

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Vehicle Registration Number

DETAILS OF OTHER VEHICLE PROPERTY 1

YES

NO

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category Name of Driver NRIC/Passport Number

Address Postcode

Contact Number

Insurance Company Name Nature Of Damage

SLD1922U

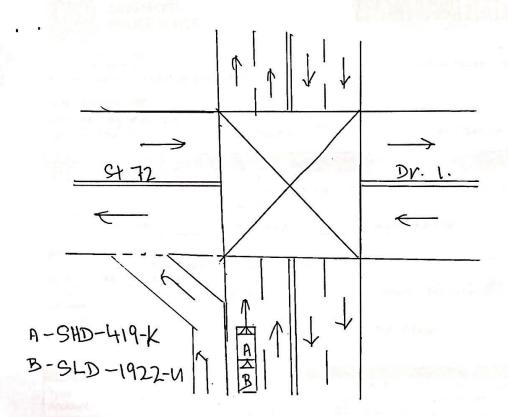
TOYOTA / HARRIER 2.0 AT PREMIUM STYLE MAUVE 2WD / BLACK

N.A PRIVATE CAR

PEH JUN HAO

SXXXX746E 98753269

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Tampines Ave 9.



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PHOTOGRAPHS FOR VEHICLE NO. SHD 419K

INSPECTION















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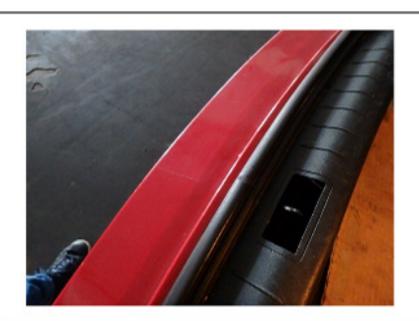
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