



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

TAX INVOICE

EQ INSURANCE COMPANY LTD

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEX
SINGAPORE 069110

INV No. AC2100524

INV Date 25/01/2021

Reference CC3/EQI20013667/Ktf3q2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SHD 9534B

Insured Veh. FBK 926Y

Claim No. DM20HO01931-JG

Policy No.

Accident Date 08/12/2020

Inspection Date 09/12/2020

Description	Total
Survey Inspection	230.00
Resurvey Inspection	
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

LKM



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Affiliated to Federation Internationale Des Experts En Automobile				
EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110			Ref: CC3/EQI20013667/Ktf3q2 Date: 25/01/2021 Code: EQI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	FBK 926Y	Veh. Inspected	SHD 9534B	
Policy No.		Coverage (\$)	0.00	
Claim No.	DM20HO01931-JG	Excess (\$)	0.00	
Assign From		Assign Date	09/12/2020	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA PRIUS (A)	c.c	1798	
Engine No.	HIDDEN	Year of Reg.	2019	
Chassis No.	JTDKB3FU003080123	Colour	M.P. WHITE / RED	
Odometer	226974 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	SAILUN	9 mm	
L/H Front Tyre	195/65 R15	SAILUN	9 mm	
R/H Rear Tyre	195/65 R15	SAILUN	8 mm	
L/H Rear Tyre	195/65 R15	SAILUN	8 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	08/12/2020	Inspection Date	09/12/2020	
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.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:			2 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 9534B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	COVER,REAR BUMPER	CRACKED	442.60	442.60
1	REINFORCEMENT SUB-ASSY,REAR BUMPER	TO REPAIR SEE LABOUR	332.70	-
1	GUARD,REAR BUMPER,CENTER	SERVICEABLE	576.30	-
1	RETAINER REAR BUMPER SIDE,LH	DISTORTED	116.50	116.50
1	FILLER,REAR BUMPER EXTENSION,LH	SERVICEABLE	123.70	-
1	SEAL,REAR BUMPER SIDE,LH	SERVICEABLE	88.50	-
1	LENS & BODY,REAR COMBINATION LAMP,LH	SERVICEABLE	443.30	-
1	LENS AND BODY,REAR LAMP,LH	SERVICEABLE	502.00	-
1	PANEL SUB-ASSY,BODY LOWER BACK	TO REPAIR SEE LABOUR	651.00	-
1	PANEL SUB-ASSY,QUARTER,LH	TO REPAIR SEE LABOUR	871.50	-
1	LINER,REAR WHEEL HOUSE,LH	SERVICEABLE	139.80	-
1	PANEL SUB-ASSY,BACK DOOR	TO REPAIR SEE LABOUR	1,147.80	-
1	GARNISH SUB-ASSY,BACK DOOR,OUTSIDE	SERVICEABLE	925.60	-
1	WEATHERSTRIP,BACK DOOR	SERVICEABLE	372.30	-
1	SPOILER,SUB ASSY,REAR	SERVICEABLE	1,575.40	-
1	STAY ASSY,BACK DOOR,LH	SERVICEABLE	242.50	-
1	STAY ASSY,BACK DOOR,RH	SERVICEABLE	242.50	-
1	HINGE ASSY,BACK DOOR,LH	TO REPAIR SEE LABOUR	61.00	-
1	HINGE ASSY,BACK DOOR,RH	TO REPAIR SEE LABOUR	61.00	-
1	COVER,FLOOR UNDER NO.1 (LH)	SERVICEABLE	175.10	-
1	COVER,FLOOR UNDER NO.2 (RH)	SERVICEABLE	241.90	-
1	COVER,REAR FLOOR (CTR)	SERVICEABLE	229.90	-
	LESS 25% DISCOUNT		-2,390.73	-139.77
			7,172.17	419.33
	<u>SPECIAL NETT ITEMS</u>			
1	SET PARKING AID (SN)	SERVICEABLE	700.00	-
1	SET REAR BUMPER CLIP (SN)	NECESSARY	95.00	66.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	WINDSCREEN SEALANT (SN)	NOT NECESSARY	150.00	-
1	WINDSCREEN MOULDING (SN)	NOT NECESSARY	200.00	-
1	WINDSCREEN INNER SPONGE SEAL (SN)	NOT NECESSARY	130.00	-
1	REAR TAILGATE TOYOTA LOGO (SN)	NOT NECESSARY	47.90	-
1	REAR TAILGATE WORDING "PRIUS" (SN)	NOT NECESSARY	54.60	-
1	REAR TAILGATE WORDING "HYBRID" (SN)	NOT NECESSARY	54.60	-
1	REAR TAILGATE STICKER "TRANS-CAB" (SN)	NOT NECESSARY	80.00	-
1	REAR TAILGATE STICKER "6555-3333" (SN)	NOT NECESSARY	80.00	-
1	REAR BUMPER PROTECTOR (SN)	NO SUCH PARTS	180.00	-
1	SET REAR FENDER LINER CLIP (SN)	NOT NECESSARY	85.00	-
1	SET REAR BUMPER RETAINER CLIP (SN)	NOT NECESSARY	85.00	-
1	REAR NUMBER PLATE WITH HOLDER (SN)	SERVICEABLE	140.00	-
1	SET TAILLAMP LOWER CLIP (SN)	NOT NECESSARY	55.00	-
1	SET TAILLAMP UPPER CLIP (SN)	NOT NECESSARY	55.00	-
1	END PANEL TRIM CLIP (SN)	NOT NECESSARY	65.00	-
1	REAR SPOILER CLIP (SN)	NOT NECESSARY	70.00	-
			2,327.10	66.00
	LABOUR			
	TO REMOVE AND REFIT REAR BIG AND SMALL W/SCREEN GLASS TO FACILITATE BODYWORK REPAIR.	NOT NECESSARY	300.00	-
	TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH, FITTINGS AND OTHER,TO ENABLE REPAIR.	NOT NECESSARY	380.00	-
	PANEL BEATING,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS,ADJUST AND REALIGN THE SAME.INCLUSIVE OF THE REPAIR OF REINFORCEMENT SUB-ASSY,REAR BUMPER,PANEL SUB-ASSY,BODY LOWER BACK,PANEL SUB-ASSY,QUARTER,LH,PANEL SUB-ASSY,BACK DOOR,HINGE ASSY,BACK DOOR,LH AND HINGE ASSY,BACK DOOR,RH.		2,200.00	200.00
	TO TRANSFER OF REAR END PANEL FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	-
	TO TRANSFER OF TAILGATE FITTINGS,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	180.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE AND REFIT ELECTRICAL WIRING,BATTERY AND OTHER NECESSARY ITEMS TO FACILITATE BODYWORK REPAIR.		480.00	10.00
	TO TRANSFER OF FENDER FITTINGS,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	480.00	-
	TO DISMANTLE AND REFIT AIRCON ASSY AND ATTACHMENT,VACUUM AND CHARGE-IN-GAS.	NOT NECESSARY	380.00	-
	LABOUR CHARGE TO MOUNT AND DISMOUNT VEHICLE ON JIG BENCH,TO FACILITATE REPAIR.	NOT NECESSARY	380.00	-
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	-
	TO RUST-PROOFING AND APPLY UNDERCOAT OF THE AFFECTED AREAS.	NOT NECESSARY	250.00	-
	TOWING FEES.	NOT NECESSARY	150.00	-
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		2,200.00	220.00
	TO REINSTALL REAR BUMPER PARKING SENSOR.		170.00	50.00
	TO CHECK ELECTRICAL LIGHTING CONCERNED.	NOT NECESSARY	170.00	-
	TO TRANSFER OF LUGGAGE FLOOR PANEL FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	-
	TO TRANSFER OF TIRE,RIM AND ON WHEEL BALANCING.	NOT NECESSARY	220.00	-
	TO REPLACE,REFIX AND TOP UP COOLANT FOR RADIATOR.	NOT NECESSARY	170.00	-
	TO LIFT-UP/OUT ENGINE WITH GEAR BOX AND REFIT.	NOT NECESSARY	440.00	-
	TO REMOVE AND REFIT RADIATOR SUPPORT CROSS-MEMBER AND OTHER NECESSARY ITEMS TO ENABLE BODYWORK REPAIR.	NOT NECESSARY	380.00	-
	TO CONDUCT AND PERFORM A COMPREHENSIVE VEHICLE DIAGNOSTIC CHECK AND RESET VEHICLE WARNING INDICATORS.	NOT NECESSARY	380.00	-
			10,290.00	480.00
GRAND TOTAL			19,789.27	965.33

RECOMMENDED COST OF REPAIRS			965.33
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KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission 15/12/2020 15:42 (SGT)
Date of Accident 08/12/2020 10:30 (SGT)
Exact Location of Accident Aljunied Rd & Geylang Rd, Singapore
Additional Location Information JUNCTION OF ALJUNIED ROAD AND GEYLANG ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD9534B

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner TRANS-CAB SERVICES PTE LTD
Company Reg No 2XXXXX878K
Email Address Claims@transcab.com.sg
Mobile Phone No (Phone) +65-62866666
Alternative Phone No (Home) +65-62866666

VEHICLE PARTICULARS

Manufacturer Toyota
Model Prius
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Taxi

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage ThirdParty
Fleet Policy Yes
Policy Number VFX/P2348706
Cover Note Number NA

DRIVER

Name of Driver WONG TING WEI
NRIC No SXXXX774C
Date Of Birth 02/02/1968
Occupation Outdoor

Date Of Driving Pass	04/12/1992
Driving experience	28 YEARS
Gender	Male
Mobile Number	(Phone) +65-82881398
Alt. Phone Number	-
Email Address	Claims@transcab.com.sg
Address	NA
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

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 the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS DRIVING ALONG ALJUNIED ROAD TOWARDS GEYLANG ROAD . AFTER I TURNING RIGHT TOWARDS GEYLANG ROAD , SUDDENLY I SAW LORRY IN FRONT OF MY VEHICLE JAM BRAKE AND PARKING HIS LORRY TO HIS PARKING LOT . I STOPPED IN TIME BUT VEHICLE B COLLIDED ONTO REAR OF MY VEHICLE . NO INJURIES INVOLVED .

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBK926Y
Vehicle Manufacturer	Yamaha
Vehicle Model	TMAX 530 CVT
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	NUR HAFIZUDDIN BIN RAHIM
NRIC No	SXXXX440C
Contact Number	-

Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN**IMPORTANT NOTICE**

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**Personal Information**") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "**Purposes**")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

**VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
WONG JUN KEAT**

Policyholder's Signature
Date & Time:

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

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

8/12/2020

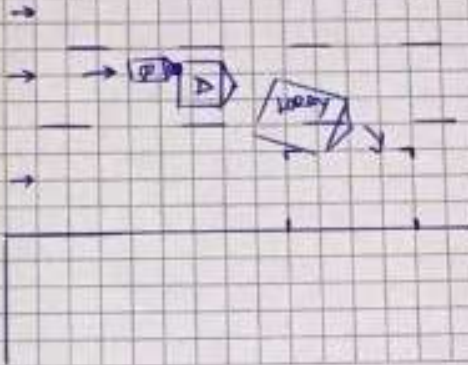
SKETCH PLAN

A: 3HD9534B

B: FBK426Y

ALJUNIED ROAD

GEKLANG
ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

ACCIDENT STATEMENT (2000 characters)

I WAS DRIVING ALONG ALJUNIED ROAD TOWARDS GEYLANG ROAD . AFTER I TURNING RIGHT TOWARDS GEYLANG ROAD , SUDDENLY I SAW LORRY IN FRONT OF MY VEHICLE JAM BRAKE AND PARKING HIS LORRY TO HIS PARKING LOT . I STOPPED IN TIME BUT VEHICLE B COLLIDED ONTO REAR OF MY VEHICLE . NO INJURIES INVOLVED .

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
WONG JUN KEAT

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

8 December 2020 at 2:12 PM

Date/Time:

8 December 2020 at 2:12 PM



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INSPECTION





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RE-INSPECTION

