



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. AC2100298

INV Date 14/01/2021

Reference CC3/EQI20013793/Ktd3e2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SGS 3631B

Insured Veh. GZ 7312Z

Claim No. DM20HO01755/SG

Policy No.

Accident Date 24/11/2020

Inspection Date 25/11/2020

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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Affiliated to Federation Internationale Des Experts En Automobile			
EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110		Ref: CC3/EQI20013793/Ktd3e2 Date: 14/01/2021 Code: EQI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	GZ 7312Z	Veh. Inspected	SGS 3631B
Policy No.		Coverage (\$)	0.00
Claim No.	DM20HO01755/SG	Excess (\$)	0.00
Assign From		Assign Date	25/11/2020
2. Vehicle Particulars & Condition			
Make & Model	MITSUBISHI LANCER GLX (A)	c.c	1584
Engine No.	HIDDEN	Year of Reg.	2007
Chassis No.	JMYSTCS3A7U005354	Colour	METALLIC BLUE
Odometer	195559 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/60 R15	FALKEN	3 mm
L/H Front Tyre	195/60 R15	FALKEN	3 mm
R/H Rear Tyre	195/60 R15	FALKEN	4 mm
L/H Rear Tyre	195/60 R15	FALKEN	4 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	24/11/2020	Inspection Date	25/11/2020
Survey held at	Blk, 5035 ANG MO KIO IND PARK 2#01-345		
Repairer	GOLDBELL ENGINEERING PTE LTD		
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:		4 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGS 3631B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BONNET	BENT	986.30	789.00
1	BONNET LOCK	TO REPAIR SEE LABOUR	256.30	-
1	BONNET HINGE LH	DISTORTED	155.10	110.00
1	BONNET HINGE RH	TO REPAIR SEE LABOUR	155.10	-
2	FRONT GRILLE @\$223.50	SERVICEABLE	447.00	-
1	FRONT EMBLEM	NECESSARY	65.80	65.80
1	FRONT BUMPER	CRACKED	796.30	729.00
1	FRONT BUMPER RETAINER LH	DISTORTED	35.00	35.00
1	FRONT BUMPER RETAINER RH	DISTORTED	35.00	35.00
1	FRONT FOG LAMP LH	SERVICEABLE	240.00	-
1	FRONT FOG LAMP RH	SERVICEABLE	240.00	-
1	FRONT FOG LAMP COVER LH	MTG CRACKED	75.00	75.00
1	FRONT FOG LAMP COVER RH	MTG CRACKED	75.00	75.00
1	FRONT BUMPER LOWER SKIRT	CRACKED	480.00	480.00
1	HEADLAMP LH	BROKEN	875.00	658.00
1	HEADLAMP RH	SERVICEABLE	875.00	-
1	HEADLAMP BRACKET PANEL LH	BENT	199.60	199.60
1	HEADLAMP BRACKET PANEL RH	BENT	199.60	199.60
1	FRONT REINFORCEMENT	BENT	497.60	313.00
1	FRONT FENDER LH	BENT	480.00	480.00
1	FRONT FENDER INNER SHIELD LH	CRACKED	178.40	107.00
	LESS 10% DISCOUNT		-734.71	-435.10
			6,612.39	3,915.90
	<u>SPECIAL NETT ITEMS</u>			
1	SET FRONT FENDER INNER SHIELD CLIPS (SN)	NECESSARY	30.00	30.00
1	SET FRONT BUMPER CLIPS (SN)	NECESSARY	30.00	30.00
1	FRONT TYRE LH (195/60 R15)(SN)	SERVICEABLE	150.00	-
1	FRONT RIM LH (SN)	SERVICEABLE	250.00	-



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	SET FRONT GRILLE CLIPS (SN)	NOT NECESSARY	30.00	-
			490.00	60.00
	LABOUR			
	TO REMOVE,REFIX & REPAIR AFFECTED DAMAGED PARTS,INCLUDING KNOCK OUT,WELD AND STRAIGHTEN ON THE AFFECTED PARTS.INCLUSIVE OF THE REPAIR OF BONNET LOCK AND BONNET HINGE RH.		2,400.00	1,200.00
	TO REPAIR AND ALIGN RH FRONT FENDER.	NOT NECESSARY	150.00	-
	TO CHECK AND RECONNECT ALL NECESSARY WIRING.		150.00	20.00
	TO PUTTY,CLEAN,SPRAY PAINT AND POLISH,ETC.		2,100.00	1,400.00
	TO CONDUCT FOUR WHEEL ALIGNMENT.	NOT NECESSARY	100.00	-
			4,900.00	2,620.00
GRAND TOTAL			12,002.39	6,595.90
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				5,250.00

Report Ref No. CC3/EQI20013793/Ktd3e2

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 renege 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 24/11/2020 16:49
Date Of Accident 24/11/2020 14:55
Exact Location Of Accident PUNGGOL FIELD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGS3631B
Insured/Policyholder
Name Of Registered Owner YIP CHUN WAI DARYL (YE JUNWEI)
NRIC No SXXXX135C
Email Address DARYLYIP.CW@GMAIL.COM
Mobile Phone No (LOCAL) +65-97940158
Alternative Phone No OFFICE-97940158

Vehicle Particulars

Manufacturer MITSUBISHI
Model LANCER-1.6 (A)

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 PRIVATE CAR

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number DMPCSNA00022712006
Cover Note Number

Driver

Name of Driver YIP CHUN WAI DARYL (YE JUNWEI)
NRIC No SXXXX135C
Date Of Birth 18/09/1980
Occupation OUTDOOR
Date Of Driving Pass 04/05/1999
Driving Experience 21 YEARS AND 6 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-97940158
Fax Number
Contact Number OFFICE-97940158
Email Address DARYLYIP.CW@GMAIL.COM

Address BLK 226C SUMANG LANE
#11-234
Postcode 823226
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER
Vehicle Registration Number of Driver's Own Vehicle -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION
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 TO SKETCH PLAN

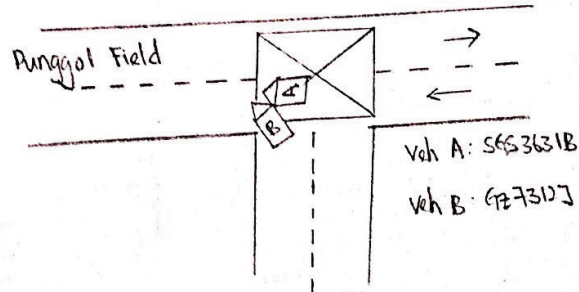
Attachment(s)

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 GZ7312J
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24/11/2020 @2.55pm, I am travelling along Punggol Field. Suddenly the vehicle B come out from the exit and hit into my vehicle LH front portion.

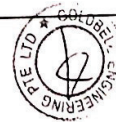
DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

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

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





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PHOTOGRAPHS FOR VEHICLE NO. SGS 3631B

INSPECTION





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