



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. AC2100483

INV Date 22/01/2021

Reference CS/EQI20013902/Utf3e2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SFN 8222D
Insured Veh. YP 3220G
Claim No. DM20HO01868-JG
Policy No.
Accident Date 09/12/2020
Inspection Date 17/12/2020

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

KHM



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Affiliated to Federation Internationale Des Experts En Automobile

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MND COMPLEX SINGAPORE 069110

Ref: CS/EQI20013902/Utf3e2

Date: 22/01/2021

Code: EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 3220G	Veh. Inspected	SFN 8222D
Policy No.		Coverage (\$)	0.00
Claim No.	DM20HO01868-JG	Excess (\$)	0.00
Assign From	JOEL GOH	Assign Date	16/12/2020

2. Vehicle Particulars & Condition

Make & Model	PORSCHE CAYENNE (A)	c.c	3598
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	WP1ZZZ92ZELA08691	Colour	BLACK
Odometer	73445 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	275/45 R20	DELINTE	6 mm
L/H Front Tyre	275/45 R20	DELINTE	6 mm
R/H Rear Tyre	275/45 R20	DELINTE	6 mm
L/H Rear Tyre	275/45 R20	DELINTE	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	09/12/2020	Inspection Date	17/12/2020
Survey held at	AUTOBAY PTE LTD NO. 1 KAKI BUKIT AVE 6 #02-11 SINGAPORE 417883		

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: **3 Working Days**



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SFN 8222D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BONNET	BADLY DENTED	4,850.90	3,855.00
1	FRONT BONNET BADGE	NECESSARY	221.50	185.00
1	FRONT BONNET BADGE BASE	NOT NECESSARY	180.60	-
1	FRONT BONNET SEAL	NOT NECESSARY	120.30	-
1	FRONT BONNET LOCK	NOT NECESSARY	215.60	-
1	FRONT BONNET LOCK STRIKER	NOT NECESSARY	110.50	-
1	FRONT BUMPER	NOT NECESSARY	3,110.50	-
1	FRONT FENDER - RH	TO REPAIR SEE LABOUR	1,855.80	-
1	FRONT HEADLAMP - RH	CRACKED	4,559.50	3,266.00
	LESS 5% DISCOUNT		-761.26	-
	LESS 10% DISCOUNT		-	-730.60
			14,463.94	6,575.40
LABOUR				
	TO CHECK FRONT ELECTRICAL WIRING.		50.00	20.00
	TO RESPRAY UNDERCOATING. }		100.00	-
	TO RESPRAY PAINTING AND ETC. }		1,200.00	450.00
	PANEL BEATING, CUT, WELD REMOVE & REPLACING ABOVE PARTS. INCLUSIVE OF THE REPAIR OF FRONT FENDER - RH.		800.00	250.00
			2,150.00	720.00
GRAND TOTAL			16,613.94	7,295.40
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				5,800.00

Report Ref No. CS/EQI20013902/Utf3e2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

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	10/12/2020 12:46 (SGT)
Date of Accident	09/12/2020 08:45 (SGT)
Exact Location of Accident	Tampines Street 81, Singapore
Additional Location Information	BLK 821 TAMPINES STREET 81 CAR PARK.
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFN8222D
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INSURED/POLICYHOLDER*

Is company?	No
Name Of Registered Owner	ANG LAI CHUN
NRIC No	SXXXX629G
Email Address	CLEMENT@CA-ERA.COM
Mobile Phone No	(Phone) +65-91891892
Alternative Phone No	(Office) +65-91891892

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Cayenne
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Great Eastern
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2020-V0109587-VDP
Cover Note Number	-

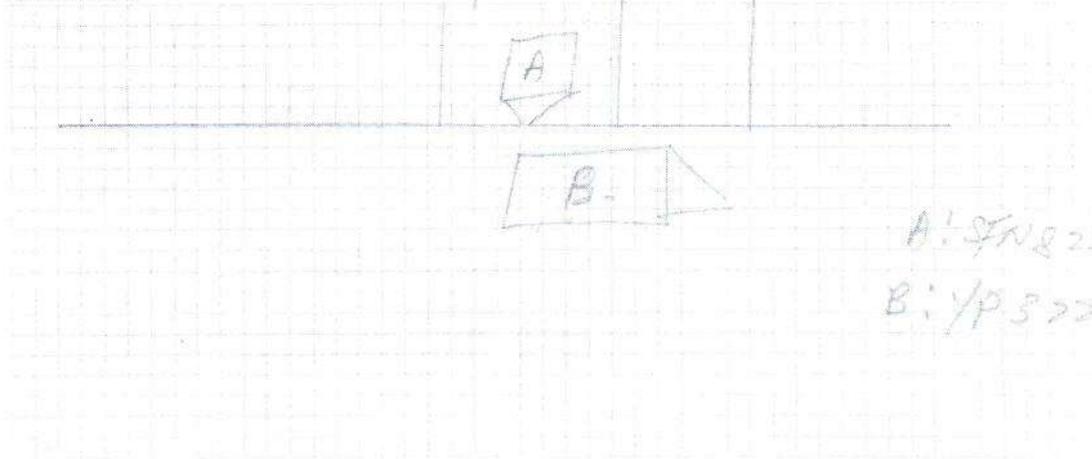
DRIVER

Name of Driver	ANG LAI CHUN
NRIC No	SXXXX629G
Date Of Birth	28/10/1966
Occupation	Indoor

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

Tampines St 81

SKETCH PLAN



A: SFN 82220
B: YP 37206

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report - attached

Insurance Co: GT Easken
 Vehicle No: SFN 82220 Date of Accident: 09/12/2020
 Reporting Only
 Own Damage Claim
 Third Party Claim

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:
NRIC/FIN No.:



11:55 AM



**SINGAPORE
POLICE FORCE**



T/20201209/2032D

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20201209/2032D

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/12/2020 22:58		Vide Report No.:		Station Diary No.: 5015	
Informant's Particulars					
Name of Informant: ANG LAI CHUN			Address: 205 JALAN LOYANG BESAR #05-13 SINGAPORE 509456		
ID Type / ID No.: NRIC NO / S1769629G			Contact No.: Home/Office: Mobile: 91891892		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 54	Date of Birth: 28/10/1966	Type of Informant: Vehicle Owner		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: ACRYLIC DISPLAY MANAGER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident					
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 09/12/2020 08:45	Type of Location: Car Park	
Location: TAMPINES STREET 81					
Weather:		Road Surface:		Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control:		Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFN8222D	Car					0
YP3220G	Lorry					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20201209/2032D

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

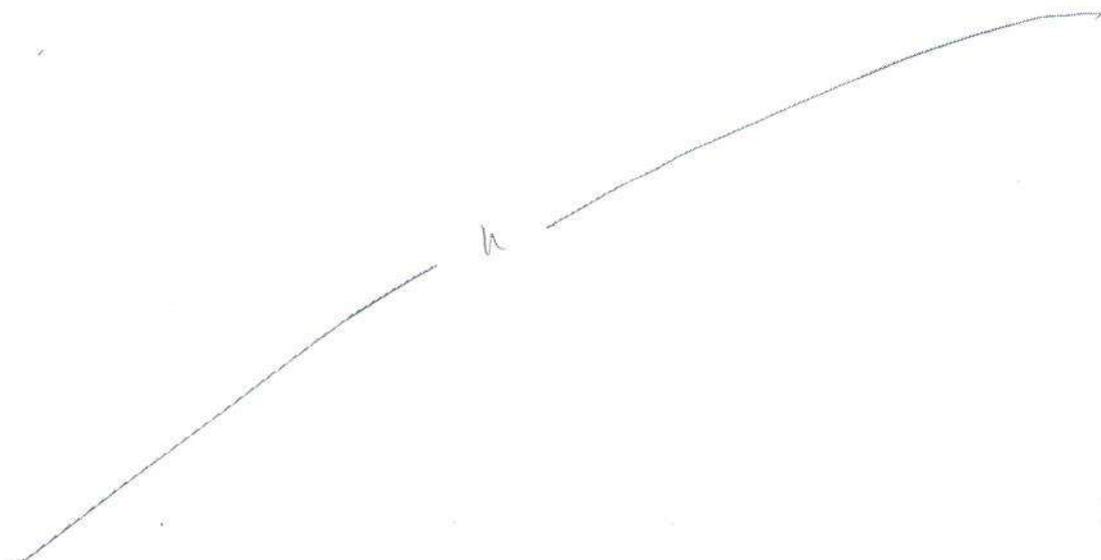
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Report No. T/20201209/2032D

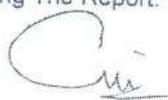
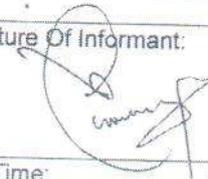
CONTINUATION OF REPORT

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 Report: G / Sgt 2 CHIN CLIFFORD 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 09/12/2020 22:58
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
Authentication Stamp NP168 	



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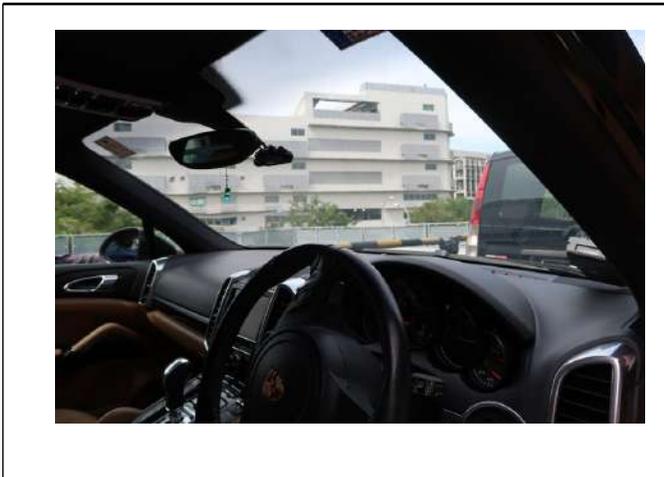
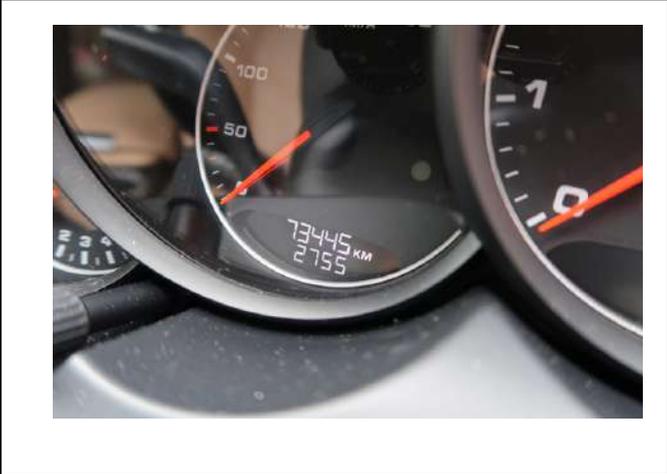
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PHOTOGRAPHS FOR VEHICLE NO. SFN 8222D

INSPECTION





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RE-INSPECTION

