



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. AC2102247

INV Date 06/04/2021

Reference CC3/EQI21000321/R1vd3q2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SMF 9600Z

Insured Veh. GBA 1948E

Claim No. DM21HO00031-JG

Policy No.

Accident Date 22/12/2020

Inspection Date 07/01/2021

| Description | Total |
|---------------------|---------------|
| Survey Inspection | 160.00 |
| Digital Photographs | |
| Transportation | |
| Subtotal | 160.00 |
| GST (7%) | 11.20 |
| Grand Total | 171.20 |

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/EQI21000321/R1vd3q2 Date: 06/04/2021 Code: EQI | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | | |
| Insured Veh. | GBA 1948E | Veh. Inspected | SMF 9600Z | |
| Policy No. | | Coverage (\$) | 0.00 | |
| Claim No. | DM21HO00031-JG | Excess (\$) | 0.00 | |
| Assign From | | Assign Date | 07/01/2021 | |
| 2. Vehicle Particulars & Condition | | | | |
| Make & Model | VOLKSWAGEN SCIROCCO 1.4L AT | c.c | 1390 | |
| Engine No. | HIDDEN | Year of Reg. | 2011 | |
| Chassis No. | WVWZZZ13ZCV004950 | Colour | WHITE | |
| Odometer | 124072 KM | Steering | IN ORDER | |
| Brakes | IN ORDER | Modification | SPORTS RIM | |
| General | FAIR | | | |
| 3. Conditions of Tyres | | | | |
| | Size | Make | Balance | |
| R/H Front Tyre | 235/40Z R18 | PIRELLI | 6 mm | |
| L/H Front Tyre | 235/40Z R18 | PIRELLI | 6 mm | |
| R/H Rear Tyre | 235/40Z R18 | PIRELLI | 6 mm | |
| L/H Rear Tyre | 235/40Z R18 | PIRELLI | 6 mm | |
| 4. Description of Damages | | | | |
| | THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS. | | | |
| 5. General Information | | | | |
| Accident Date | 22/12/2020 | Inspection Date | 07/01/2021 | |
| Survey held at | LI SHENG AUTOMOBILE TRADING BLK 1, PANDAN LOOP, #01-16 SINGAPORE 128219. | | | |
| 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. SMF 9600Z

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|---|---|----------------------|---------------------------|-------------------|
| <u>REPLACEMENT OF PARTS</u> | | | | |
| 1 | FRONT BUMPER | TO REPAIR SEE LABOUR | 1,400.55 | - |
| 10 | FRONT BUMPER CLIPS | NOT NECESSARY | 90.00 | - |
| 1 | FRONT RHS BUMPER RETAINER | SERVICEABLE | 68.33 | - |
| 1 | FRONT RHS FENDER | TO REPAIR SEE LABOUR | 900.22 | - |
| 1 | FRONT RHS HEADLAMP | CRACKED | 1,777.33 | 850.00 |
| | LESS 10% DISCOUNT | | -423.64 | -85.00 |
| | | | 3,812.79 | 765.00 |
| <u>SPECIAL NETT ITEMS</u> | | | | |
| 1 | FRONT HEADLAMP STICKER (SN) | NOT NECESSARY | 200.00 | - |
| 1 | SUNDRIES (SN) | NOT NECESSARY | 30.00 | - |
| | | | 230.00 | - |
| <u>LABOUR</u> | | | | |
| | LABOUR FOR REPAIR ON AFFECTED AREA.INCLUSIVE OF THE REPAIR OF FRONT BUMPER AND FRONT RHS FENDER . | | 900.00 | 300.00 |
| | SPRAY PAINT ON AFFECTED AREA. | | 800.00 | 400.00 |
| | CHECK WIRING . | | 100.00 | 30.00 |
| | APPLY RUST PROOF ON AFFECTED PANEL. | NOT NECESSARY | 80.00 | - |
| | | | 1,880.00 | 730.00 |
| GRAND TOTAL | | | 5,922.79 | 1,495.00 |
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) | | | | 1,200.00 |

Report Ref No. CC3/EQI21000321/R1vd3q2

MOHAMMED RASUL BIN MOHD YUNUS

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 replying 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 23/12/2020 14:38 (SGT)
Date of Accident 22/12/2020 17:00 (SGT)
Exact Location of Accident 1 Soon Lee St, Singapore 628070
Additional Location Information NO; 1 SOON LEE STREET -PIONEER CENTRE - LEVEL 1
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMF9600Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIN JUNGMING
NRIC No SXXXX242D
Email Address mingkia@hotmail.com
Mobile Phone No (Phone) +65-91823567
Alternative Phone No +65-91823567

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model Scirocco
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 NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5106239762-01
Cover Note Number -

DRIVER

Name of Driver LIN JUNGMING
NRIC No SXXXX242D
Date Of Birth 13/05/1989
Occupation Indoor

| | |
|--|--|
| Date Of Driving Pass | 08/02/2010 |
| Driving experience | 10 YEARS AND 10 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-91823567 |
| Alt. Phone Number | +65-91823567 |
| Email Address | mingkia@hotmail.com |
| Address | BLK 666B JURONG WEST STREET 65 #11-205 |
| Address complement | - |
| Postcode | 642666 |
| Is the driver the policyholder? | Yes |
| If No, Relationship of the Driver with the Insured | - |
| 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 | Hit and run / Vandalism / Damaged whilst parked |
| 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) | 0 |
| 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? | Yes |
| Police Station Name | Jurong Neighbourhood Police Post |
| Police Station Phone No | (Phone) +65-18002659999 |
| Alt. Police Station Phone No | (Fax) +65-62664987 |
| Police Station Address | Blk 158 Yung Loh Road #01-58 Singapore 610158 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------------|--------------------|
| Vehicle Registration Number | GBA1948E |
| Vehicle Manufacturer | Toyota |
| Vehicle Model | Dyna |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | NA |
| Contact Number | - |

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

WITNESS DETAILS

WITNESS 1

Name THILAINATHAN GANESAN
Phone (Phone) +65-81360091
Email -

SKETCH PLAN

(A) SMF 9600Z
(B) GBA1948E

1 Soon Lee Street
Pioneer Centre #1-30

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police Report

DECLARATION

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

Policyholder's Signature

Date & Time: 23/12/20
14:00

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre/Police's Signature

Name:
NRIC/FIN NO.:

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.

Policyholder's Signature

Date & Time: 23/12/20

1000

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/PR No.:

General Insurance Association of Singapore (GIA)



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PHOTOGRAPHS FOR VEHICLE NO. SMF 9600Z

INSPECTION



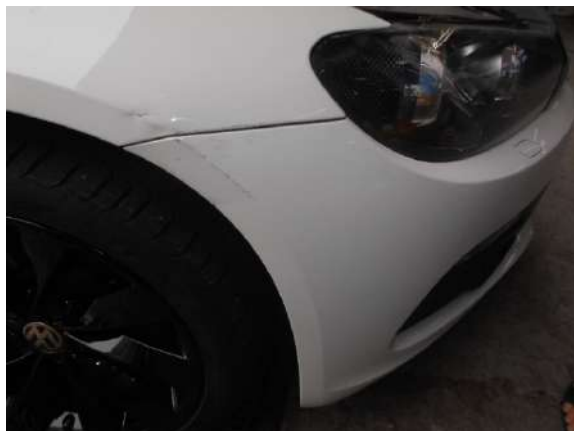


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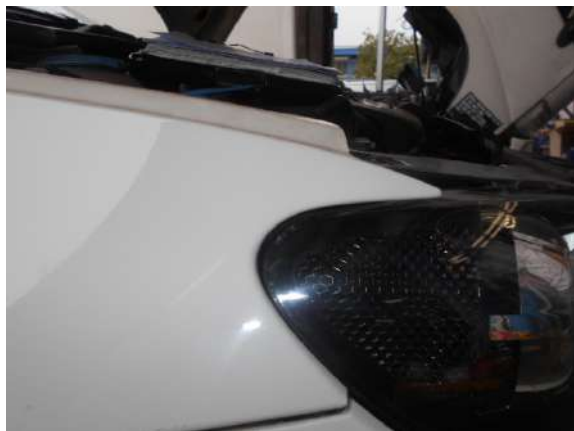
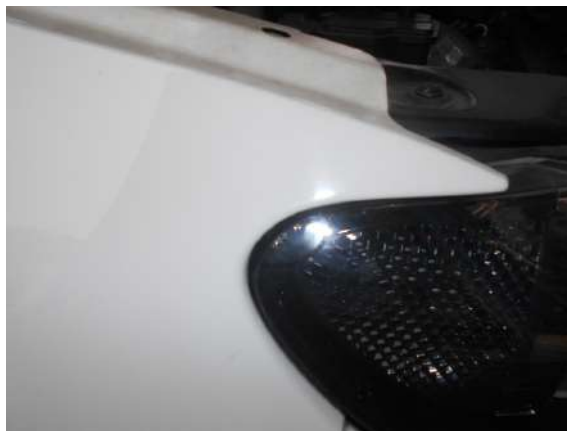


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