

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / P / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: *GBJ 7454S*at Workshop m/s *Ethelwyns*

of _____

Insured: *SLQ8340J*

Policy No. _____

Claims No. _____

Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: *£60k.*

IDAC Accident Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: *3* days

Res.: Yes or No

Lum Sum: *1.3-1* %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS *C 453h*

Vehicle: IN / OUT

Date: _____

Person Contacted: *Jonathan*

Date / Time

Action / Instruction

*ATA £19709 20/8/13**Robur 716.10 s/w (s.d. bracket £181)**17/11/14 P/P £2700.13 confirmed with Jonathan*Veh No: *GBJ 7454S*Yr Regn: *29/7/19*

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or *CA1*Make: *NISSAN NV 350*c.c. *2488*Colour: *White*

A/C: Insured / Std / NI / NA

Sp. Reading: *60092*

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: *JN1MC2E2620031490*Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: *195-215*

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or *7 Aukn*

Front

Rear

R/Bal. *7* mmR/Bal. *7* mmL/Bal. *7* mmL/Bal. *7* mmD.O.A. *20/9/14*D.O.I. *5/11/21*

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

N/S fnd.

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS \$

) Photos

) Others

)

Report Format :

Lump Sum / I.B.I.: (\$ _____)

Add Fee:

☐

Site Insp (\$ _____)

☐

Interview (\$ _____)

☐

Tech. Invs (\$ _____)

☐

Weekend (\$ _____)

TOTAL

PLEASE ARRANGE TO SURVEY
VEHICLE AT 30 BUKIT BATOK
CRESCENT (S 658075)

Jonathan Lim
CLAIM DEPARTMENT
DID : 66547606
FAX : 66547540

Date : 05/11/2021

To : INDIA INTERNATIONAL INSURANCE PTE LTD

ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : ETHOZ Group Ltd
: SOMPO INSURANCE SINGAPORE PTE. LTD.

Certificate No : 1 Accident Date : 20/09/2021

Vehicle No : GBJ-7454-B Make & Model : NISSAN NV350 PANEL VAN 2.5 DIESEL G (A) I

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
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Nett Item

1	FRONT BUMPER <i>Deep CUT</i>	<i>571.90</i>	571.90	<i>✓</i>
10	FRONT BUMPER CLIP <i>nee</i>	<i>30.00</i>	50.00	<i>✓</i>
1	FRONT BUMPER RETAINER LH <i>BND</i>		164.80	<i>2</i>
1	FRONT BUMPER GRILLE <i>17</i>		940.00	<i>X</i>
1	HEADLAMP (LH) <i>en</i>	<i>441.40</i>	464.90	<i>✓</i>
1	FOG LAMP COVER <i>su</i>		117.90	<i>X</i>
1	SIDE STEP LH <i>2</i>		65.80	<i>X</i>
1	LEFT HAND DOOR <i>2</i>	RESTORE		<i>X</i>

Date : 05/11/2021

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ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : ETHOZ Group Ltd
: SOMPO INSURANCE SINGAPORE PTE. LTD.

Certificate No : 1

Accident Date : 20/09/2021

Vehicle No : GBJ-7454-B

Make & Model : NISSAN NV350 PANEL VAN 2.5 DIESEL G (A) 1

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	Sub Total	2375.30	
	Discount 10% On Parts	(237.53)	
	<u>Special Nett Item</u>		
1	COMPANY DETAILS STICKER <i>nee</i>	20.00	✓
1	ADVERTISEMENT STICKER - FRONT LH DOOR <i>nee</i>	150.00	100
	Sub Total	170.00	
	<u>Labour & Misc</u>		
	LABOUR TO FACILIATE REPAIR	600.00	300
	TO SPRAY PAINT ON AFFECTED AREAS	600.00	400
	TO APPLY ANTI - RUST COATING	80.00	11 x

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Date : 05/11/2021

To : INDIA INTERNATIONAL INSURANCE PTE LTD

ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : ETHOZ Group Ltd

: SOMPO INSURANCE SINGAPORE PTE. LTD.

Certificate No : 1

Accident Date : 20/09/2021

Vehicle No : GBJ-7454-B

Make & Model : NISSAN NV350 PANEL VAN 2.5 DIESEL G (A) 1

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS	35.00	20
	Sub Total	1315.00	

Remarks:

not Authorized

SUB TOTAL

GST 7.0 % 253.59

TOTAL 3,876.36

Surveyor's name: Marcus Loh 90096608

Principal's name: ETHOZ Group Ltd

Survey Date & Time: 5/11/21 @ 11.00am.

maruschua@lkkauto.com

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PLEASE ARRANGE TO SURVEY
VEHICLE AT 30 BUKIT BATOK
CRESCENT (S 658075)

Jonathan Lim
CLAIM DEPARTMENT
DID : 66547606
FAX : 66547540

Date : 06/11/2021

To : INDIA INTERNATIONAL INSURANCE PTE LTD
SUPPLEMENTARY

Attn : Motor Claim Department

FAX :

Owner : ETHOZ Group Ltd

: SOMPO INSURANCE SINGAPORE PTE. LTD.

Certificate No : 1

Accident Date : 20/09/2021

Vehicle No : GBJ-7454-B

Make & Model : NISSAN NV350 PANEL VAN 2.5 DIESEL G (A) 1

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
<u>Nett Item</u>			
1	A/T OIL COOLER	750.00	10/11/21
1	A/T OIL COOLER GARNISH COVER	131.50	
	Sub Total	881.50	
	Discount 10% On Parts	(88.15)	
<u>Special Nett Item</u>			
1	AUTO TRANSMISSION OIL - 1L NEC	25.00	10/11/21
	Sub Total	25.00	
		818.35	

Remarks:

SUB TOTAL

GST 7.0 % 57.28

TOTAL 875.63

Surveyor's name: _____

Principal's name: ETHOZ Group Ltd

Survey Date & Time: _____

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