



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. AC2203684

INV Date 14/06/2022

Reference CS/EQI22002759/Avy3e2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. GBG 6870E

Insured Veh. XE 4536J

Claim No. DM22HO00449/JT

Policy No. DMCPHQ21-004009

Accident Date 23/03/2022

Inspection Date 07/04/2022

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				
EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110			Ref: CS/EQI22002759/Avy3e2 Date: 14/06/2022 Code: EQI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	XE 4536J	Veh. Inspected	GBG 6870E	
Policy No.	DMCPHQ21-004009	Coverage (\$)	0.00	
Claim No.	DM22HO00449/JT	Excess (\$)	0.00	
Assign From	JAIME TAY	Assign Date	25/03/2022	
2. Vehicle Particulars & Condition				
Make & Model	NISSAN NV200	c.c	1461	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	VSKYBAM20Z0145957	Colour	WHITE	
Odometer	242176 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	175/70 R14	GENCOTIRE	6 mm	
L/H Front Tyre	175/70 R14	GENCOTIRE	6 mm	
R/H Rear Tyre	175/70 R14	GENCOTIRE	6 mm	
L/H Rear Tyre	175/70 R14	GENCOTIRE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	23/03/2022	Inspection Date	07/04/2022	
Survey held at	MODERN AUTOMOTIVE PTE LTD BLK 3023A UBI ROAD 1 #01-61 SINGAPORE 408717			
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:		6 Working Days		



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBG 6870E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BUMPER	DEFORMED	632.70	632.70
2	REAR BUMPER SIDE HOLDER - LH & RH	NECESSARY	86.60	86.60
2	REAR BUMPER REFLECTOR - LH & RH	NOT NECESSARY	85.00	-
1	REAR BUMPER SPONGE	CRACKED	128.90	128.90
1	REAR END PANEL OUTER PANEL	DENTED	485.20	485.20
1	REAR END PANEL TOP GARNISH	DEFORMED	128.40	128.40
1	TAILGATE - LH	DISTORTED	1,545.00	1,545.00
1	TAILGATE LOWER LOCK - LH	DAMAGED	159.30	159.30
1	TAILGATE OUTER GARNISH - L;H	DEFORMED	351.50	351.50
1	TAILGATE INNER TRIMBOARD - LH	NOT NECESSARY	145.20	-
2	TAILGATE HINGE (UPPER & LOWER) - LH	NOT NECESSARY	190.20	-
1	TAILGATE CHECK - LH	NOT NECESSARY	82.40	-
1	NISSAN LOGO	NECESSARY	64.90	64.90
1	NV200 EMBLEM	NECESSARY	88.00	88.00
1	TAILGATE - RH	DISTORTED	1,102.50	1,102.50
1	TAILGATE LOWER LOCK - RH	DAMAGED	159.30	159.30
1	TAILGATE INNER TRIMBOARD - RH	NOT NECESSARY	145.40	-
1	TAILGATE FRAME WEATHERSTRIPE	CUT	285.90	285.90
1	TAILGATE CHECK - RH	NOT NECESSARY	82.40	-
1	SPARE TYRE CARRIER	NOT NECESSARY	269.80	-
1	SPARE TYRE CARRIER LOCK SCREW	NOT NECESSARY	64.50	-
2	TAILLAMP - LH & RH	N/S CRACKED	517.40	258.70
	LESS 10% DISCOUNT		-680.05	-547.69
			6,120.45	4,929.21
	<u>SPECIAL NETT ITEMS</u>			
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	30.00	30.00
1	SET REVERSE SENSOR (SN)	DAMAGED	280.00	200.00
1	REAR END PANEL SEALANT (SN)	NECESSARY	60.00	60.00
1	TAILGATE GLASS SEALANT - LH (SN)	NECESSARY	60.00	50.00
1	70KM/H STICKER (SN)	NECESSARY	10.00	10.00

Report Ref No. CS/EQI22002759/Avy3e2



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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	TAILGATE GLASS SEALANT - RH (SN)	NECESSARY	60.00	50.00
1	TAILGATE SURROUND MOULDING - LH (SN)	NECESSARY	80.00	80.00
1	5 PAX STICKER (SN)	NECESSARY	10.00	10.00
1	ADVERTISEMENT STICKER (SN)	NECESSARY	500.00	450.00
1	REAR NUMBER PLATE (SN)	DENTED	30.00	30.00
1	REAR NUMBER PLATE HOLDER (SN)	DEFORMED	30.00	30.00
			1,150.00	1,000.00
	LABOUR			
	TO KNOCKING & PULL OUT REAR SIDE PORTION & RENEW ABOVE PARTS.		1,000.00	800.00
	TO PUTTY & SPRAY UP PAINT WORKS.		1,000.00	800.00
	TO CHECK WIRING.		50.00	30.00
	TO SPRAY TUFF COAT.		100.00	80.00
	TO REMOVE REVERSE SENSOR.		100.00	50.00
	TO TRANSFER REAR LH & RH TAILGATE FITTINGS.		200.00	160.00
	TO REMOVE REAR LH & RH TAILGATE GLASSES.		180.00	120.00
	TO REMOVE UPHOLSTERY.		100.00	60.00
			2,730.00	2,100.00
GRAND TOTAL			10,000.45	8,029.21
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				6,400.00

Report Ref No. CS/EQI22002759/Avy3e2

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 24/03/2022 14:28 (SGT)
Date of Accident 23/03/2022 17:26 (SGT)
Exact Location of Accident Mount Pleasant Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBG6870E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ARRIBA LOGISTICS
Company Reg No 5XXXX533M
Email Address SUPPORT@ARRIBALOGISTICS.COM.SG
Mobile Phone No (Phone) +65-92471084
Alternative Phone No (Home) +65-83718619

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv200
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 Goods vehicle
Transmission Manual
CC 1461

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5104008625-03
Cover Note Number -

DRIVER

Name of Driver EZWANN BIN TOMIN
NRIC No SXXXX524B

Date Of Birth	13/04/1982
Occupation	Outdoor
Date Of Driving Pass	05/10/2015
Driving experience	6 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83718619
Alt. Phone Number	-
Email Address	SUPPORT@ARRIBALOGISTICS.COM.SG
Address	BLK 140A CORPORATION DRIVE #14-12
Address complement	-
Postcode	611140
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PASSENGER1
Gender	Female

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

THE CAR INFRONT STOPPED AND I FOLLOW STOP AS WELL. SUDDENLY, VEHICLE B BEHIND BANGED DIRECTLY ONTO MY VEHICLE REAR PORTION.

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	XE4536J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Commercial vehicle
Name of Driver	CHONG SIEW PENG
Contact Number	(Phone) +65-91078916
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

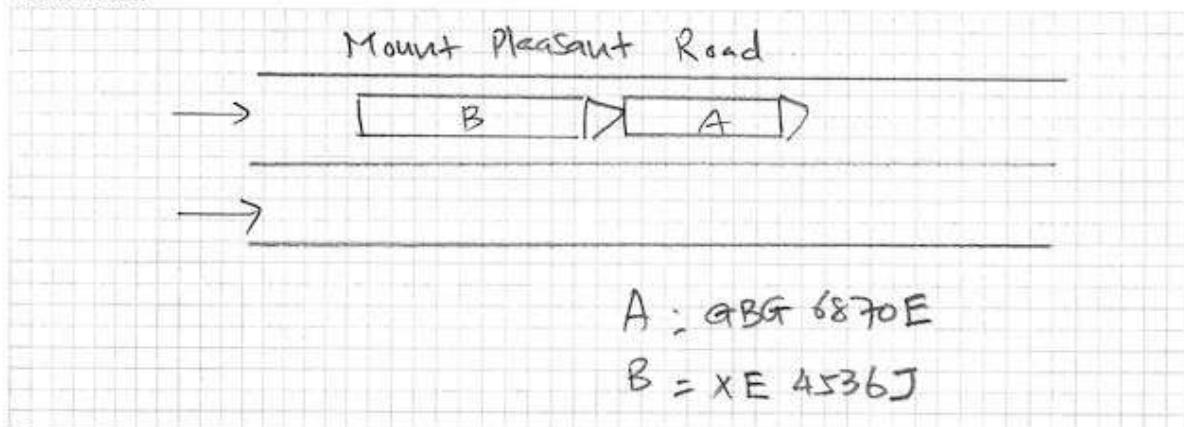
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 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.
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' law yers/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 w ith 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 w ith 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 w ell as on the external cover of envelopes/mail packages); and/or
(v) complying w ith applicable law in administering, processing, handling and/or dealing w ith my claims.
(collectively the "Purposes")
(b) all insurer(s) w ho have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

ARRIBA EXPRESS
UEN
53370533M
Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time
24/3/22

MODERN AUTOMOTIVE
GST Reg. No.
200501102H
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

The car in front stopped and I follow stop as well. Suddenly, vehicle 'B' behind banged directly into my vehicle rear portion.

Declaration

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

24/3/22



Witnessed by Reporting Centre Personnel



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PHOTOGRAPHS FOR VEHICLE NO. GBG 6870E

INSPECTION





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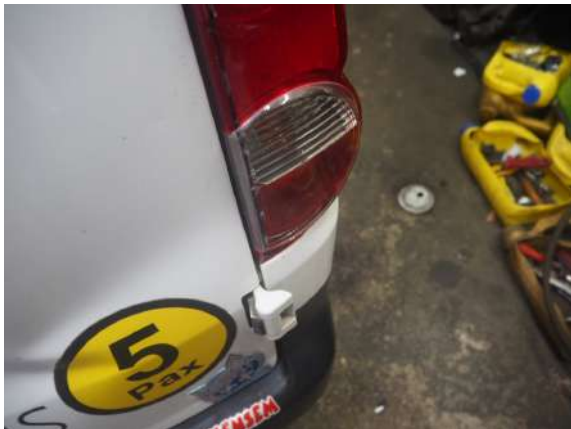


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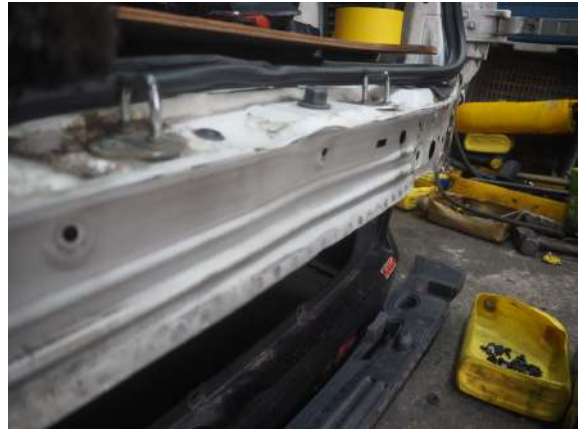
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PHOTOGRAPHS FOR VEHICLE NO. GBG 6870E

RE-INSPECTION





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