



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

Affiliated to Federation Internationale Des Experts En Automobile				
SINGAPORE CIVIL DEFENCE FORCE (MHA05)			Ref:	CS/SCD22003404/Uqy3e2
91 UBI AVE 4			Date:	28/04/2022
SINGAPORE 408827				
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ATTN: RALF TAY GIM CHYE			Code:	SCD
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	QX 2049U	Veh. Inspected	SGD 8111G	
Policy No.		Coverage (\$)	0.00	
Claim No.	2022 - 36	Excess (\$)	0.00	
Assign From	RALF TAY GIM CHYE	Assign Date	12/04/2022	
2. Vehicle Particulars & Condition				
Make & Model	HONDA ACCORD (A)	c.c	2354	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	MRHCP2630CP070002	Colour	WHITE	
Odometer	112497 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/45 R18	CONTINENTAL	7 mm	
L/H Front Tyre	225/45 R18	CONTINENTAL	7 mm	
R/H Rear Tyre	225/45 R18	CONTINENTAL	7 mm	
L/H Rear Tyre	225/45 R18	CONTINENTAL	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	11/04/2022	Inspection Date	13/04/2022	
Survey held at	KAH MOTOR CO SDN BERHAD 15 UBI ROAD 4 SINGAPORE 408610			
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. SGD 8111G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	FACEREAR BUMPER (SN)	DISTORTED	472.87	472.87
6	CLIP ABUMPER (SN)	NECESSARY	17.55	17.55
1	SPACERL RR BUMPER SIDE (SN)	NECESSARY	12.22	12.22
1	SPACERR.RR.BUMPER SIDE (SN)	NECESSARY	12.22	12.22
1	BRACKETL.RR.BUMPER (SN)	NOT NECESSARY	4.65	-
1	BRACKETR.RR.BUMPER (SN)	NOT NECESSARY	5.77	-
1	BEAM COMPRR BUMPER (SN)	TO REPAIR SEE LABOUR	104.10	-
2	SENSOR ASSYBACK (SN)	SERVICEABLE	358.95	-
2	CLIPBACK SENSOR (SN)	NECESSARY	6.60	6.60
1	EMBLEMRR (H) (SN)	NECESSARY	22.87	22.87
1	EMBLEMRR (ACCORD) (SN)	NECESSARY	13.72	13.72
1	EMBLEMRR (2.4) (SN)	NECESSARY	13.20	13.20
1	EMBLEMRR (I-VTEC) (SN)	NECESSARY	29.17	29.17
1	SUNDRIES (SN)	NECESSARY	50.00	20.00
			1,123.89	620.42
	<u>LABOUR</u>			
	INSPECT RR LIGHTING MECHANISMS. PERFORM WATER.		180.00	120.00
	REMOVE & REFIX REVERSE SENSOR - 4 PCS.		200.00	150.00
	STRAIGHTEN ALIGN TRUNK LID. }		250.00	-
	STRAIGHTEN ALIGN RR PANEL & RENEW DAMAGE PARTS. INCLUSIVE OF THE REPAIR OF BEAM COMPRR BUMPER. }		1,500.00	1,300.00
	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (3P).		1,600.00	1,200.00
	GST		339.78	237.33
			4,069.78	3,007.33
	GRAND TOTAL		5,193.67	3,627.75



RECOMMENDED COST OF REPAIRS			3,627.75
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Report Ref No. CS/SCD22003404/Uqy3e2

A handwritten signature in black ink, appearing to read 'Chua'.

CHUA KANG SENG

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	12/04/2022 14:11 (SGT)
Date of Accident	11/04/2022 08:43 (SGT)
Exact Location of Accident	Near 139 Tampines St. 11, Singapore 521139
Additional Location Information	SLIP RD TAMPINES AVE 2 TO TAMPINES AVE 5
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGD8111G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SEOW VOON KWONG
NRIC No	SXXXX881H
Email Address	eric_seow@singnet.com.sg
Mobile Phone No	(Phone) +65-96779790
Alternative Phone No	(Home) +65-96779790

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Accord
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2400

INSURANCE COMPANY

Name of Insurance Company	Great Eastern General Insurance Limited
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2022-V8010821-VDP
Cover Note Number	-

DRIVER

Name of Driver	SEOW VOON KWONG
NRIC No	SXXXX881H

Date Of Birth	07/03/1953
Occupation	Indoor
Date Of Driving Pass	18/05/1973
Driving experience	48 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96779790
Alt. Phone Number	(Home) +65-96779790
Email Address	eric_seow@singnet.com.sg
Address	BLK 360 TAMPINES STREET 34
Address complement	#02-427
Postcode	520360
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	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	JESSIE LIM HWEE LING
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

REFER TO ATTACHED STATEMENT

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	QX2049U
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government

Name of Driver	TAUFIQ
Contact Number	(Phone) +65-81334939
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Vehicle

Number:

540 811 G.

SKETCH PLAN

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- Any false reporting may be referred to the Police for investigation.**
- 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.
- 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.
- Consent under the Personal Data Protection Act (PDPA)** I understand, acknowledge, agree and consent that:
 - 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:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - investigating the accident and/or my claims;
 - carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - 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
 - complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
 - 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
 - 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.
 - 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.
 - the information so collected under (d) above may be shared / disclosed:
 - 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
 - for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

11/4/22 12.40pm

Driver's Signature (If driver is not the policyholder)

Date & Time:

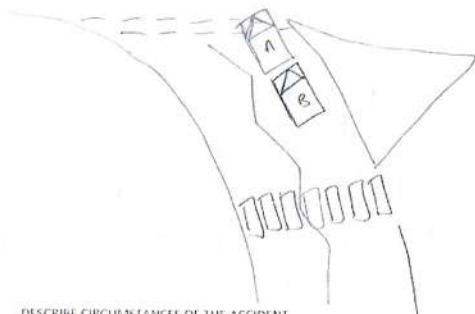
Reporting Centre Personnel's Signature

Name:

N/A/C/P/M No.:

Vehicle Number: SGD 8116

SKETCH PLAN



A : SGD 8116

B : QX 20494

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my wife toward a car on the way from Thompson Ave. 2 heading out to Thompson Ave 5. I stopped the stop sign I got way to crossing vehicle, suddenly, my car was hit by by vehicle QX 20494.

DECLARATION

(We declare the foregoing particulars are true in every respect.)

Police Officer's Signature
Date & Time

04/11/2012 12:40pm

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

Signature

Reporting Center Personnel's Signature
Name
NED/IN 500



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PHOTOGRAPHS FOR VEHICLE NO. SGD 8111G

INSPECTION





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