



## 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/SCD22006045/Kqy3m4
91 UBI AVE 4		Date:	29/08/2022
SINGAPORE 408827			
SINGAPORE 408827			
ATTN: RALF TAY GIM CHYE		Code:	SCD
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	QX 2160E	Veh. Inspected	SME 8086U
Policy No.		Coverage (\$)	0.00
Claim No.	2022 - 63	Excess (\$)	0.00
Assign From	RALF TAY GIM CHYE	Assign Date	24/06/2022
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	MERCEDES A200 (A)	c.c	1333
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	WDD1770872N001056	Colour	METALLIC GREY
Odometer	80914 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	225/45 R18	GOODYEAR	4 mm
L/H Front Tyre	225/45 R18	GOODYEAR	4 mm
R/H Rear Tyre	225/45 R18	GOODYEAR	5 mm
L/H Rear Tyre	225/45 R18	GOODYEAR	5 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION.			
DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	03/06/2022	Inspection Date	04/08/2022
Survey held at	MBM WHEELPOWER PTE LTD 176 SIN MING DRIVE #01-15 SIN MING AUTOCARE SINGAPORE 575721		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SME 8086U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	HEADLAMP RH	CRACKED	3,415.00	3,185.00
1	FRONT BUMPER	TO REPAIR SEE LABOUR	1,462.00	-
1	FRONT BUMPER CARRIER RH	TO REPAIR SEE LABOUR	346.00	-
	LESS 10% DISCOUNT		-522.30	-318.50
			4,700.70	2,866.50
<b><u>SPECIAL NETT ITEMS</u></b>				
1	BODY SEALANT (SN)	NOT NECESSARY	80.00	-
10	FRONT BUMPER CLIPS (SN)	NOT NECESSARY	50.00	-
20	FRONT BUMPER RIVETS (SN)	NECESSARY	100.00	100.00
			230.00	100.00
<b><u>LABOUR</u></b>				
	TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF FRONT BUMPER AND FRONT BUMPER CARRIER RH.		600.00	200.00
	TO REMOVE & REPLACE BUMPER SENSORS.	NOT NECESSARY	120.00	-
	TO RESET ENGINE WARNING LIGHT (ABS, SRS, ECU MEMORY & ETC).		250.00	80.00
	TO CHECK & RECONNECT ALL NECESSARY WIRING.		50.00	20.00
	TO SPRAY PAINT ON THE AFFECTED AREAS.		400.00	220.00
			1,420.00	520.00
<b>GRAND TOTAL</b>			<b>6,350.70</b>	<b>3,486.50</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>3,486.50</b>

Report Ref No. CS/SCD22006045/Kqy3m4

KONG SENG CHEONG

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	04/06/2022 12:43 (SGT)
Date of Accident	03/06/2022 20:40 (SGT)
Exact Location of Accident	724 Jurong West Street 72, Singapore 640724
Additional Location Information	OPEN SPACE CAR PARK
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME8086U
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOHAMMED LUKMAN BIN HAJI OMAR
NRIC No	SXXXX510F
Email Address	lukman24@gmail.com
Mobile Phone No	(Phone) +65-96435635
Alternative Phone No	+65-96435635

### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	A200
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
Transmission	Auto
CC	1332

### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5123585389
Cover Note Number	-

### DRIVER

Name of Driver	MOHAMMED LUKMAN BIN HAJI OMAR
NRIC No	SXXXX510F

Date Of Birth .....	24/01/1983
Occupation .....	Indoor
Date Of Driving Pass .....	13/03/2010
Driving experience .....	12 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96435635
Alt. Phone Number .....	+65-96435635
Email Address .....	lukman24@gmail.com
Address .....	BLK 727 JURONG WEST AVE 5
Address complement .....	#07-194
Postcode .....	640727
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 .....	Side Swipe
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) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	ANIZAH
Gender .....	Female

#### PASSENGER 2

Name .....	SARAH
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Nanyang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18007929999
Alt. Police Station Phone No .....	(Fax) +65-67912972
Police Station Address .....	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACHED SKETCH PLAN & POLICE REPORT

#### 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	QX2160E
Vehicle Manufacturer	Mercedes
Vehicle Model	Sprinter
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government
Name of Driver	MUHAMMAD AIDIL
Contact Number	(Phone) +65-93650026
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

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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' 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.

*M. O. 4/6/22*

Policyholder's Signature / Date & Time

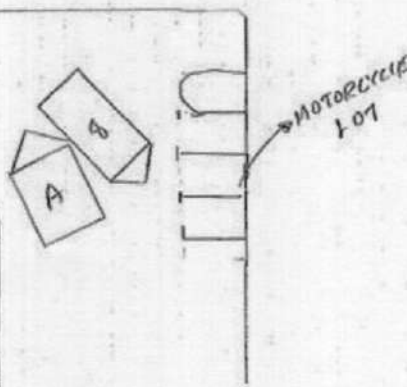
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

## Sketch Plan

A: S4E 8086U  
B: QX 2160E

724 Juncy Way S172





Describe Circumstances of the Accident

Refer to police report.

### Declaration

We declare the foregoing particulars are true in every respect.

Mar. 4/6/22

Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel



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### INSPECTION







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**RE-INSPECTION**

