



## 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. AC2206814

INV Date 03/11/2022

Reference CS/EQI22009556/Eqy3e2

Code EQI

### PROFESSIONAL SERVICE FEE

Vehicle No. SLP 1195M

Insured Veh. SJK 6572A

Claim No. DM22HO01660/JT

Policy No.

Accident Date 27/09/2022

Inspection Date 28/09/2022

Description	Total
Survey Inspection	160.00
Resurvey Inspection	
Digital Photographs	
Transportation	
<b>Subtotal</b>	<b>160.00</b>
<b>GST (7%)</b>	<b>11.20</b>
<b>Grand Total</b>	<b>171.20</b>

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 COMPLEX SINGAPORE 069110

Ref: CS/EQI22009556/Eqy3e2

Date: 03/11/2022

Code: EQI

### 1. Policy Particulars :- THIRD PARTY CLAIM

<b>Insured Veh.</b>	SJK 6572A	<b>Veh. Inspected</b>	SLP 1195M
<b>Policy No.</b>		<b>Coverage (\$)</b>	0.00
<b>Claim No.</b>	DM22HO01660/JT	<b>Excess (\$)</b>	0.00
<b>Assign From</b>	JAIME TAY	<b>Assign Date</b>	27/09/2022

### 2. Vehicle Particulars & Condition

<b>Make &amp; Model</b>	TOYOTA ALTIS	<b>c.c</b>	1598
<b>Engine No.</b>	HIDDEN	<b>Year of Reg.</b>	2017
<b>Chassis No.</b>	MR053REH104558722	<b>Colour</b>	BLACK
<b>Odometer</b>	87826 KM	<b>Steering</b>	IN ORDER
<b>Brakes</b>	IN ORDER	<b>Modification</b>	SPORTS RIM
<b>General</b>	FAIR		

### 3. Conditions of Tyres

	Size	Make	Balance
<b>R/H Front Tyre</b>	185/60 R15	GOODYEAR	4 mm
<b>L/H Front Tyre</b>	185/60 R15	GOODYEAR	4 mm
<b>R/H Rear Tyre</b>	185/60 R15	GOODYEAR	4 mm
<b>L/H Rear Tyre</b>	185/60 R15	GOODYEAR	4 mm

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.  
DAMAGES SEE DETAILS.

### 5. General Information

<b>Accident Date</b>	27/09/2022	<b>Inspection Date</b>	28/09/2022
<b>Survey held at</b>	MOVA AUTOMOTIVE PTE LTD 15 FAN YONG ROAD SINGAPORE 629792		

### 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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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLP 1195M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	DENTED	689.50	581.00
1	REAR BUMPER REINFORCEMENT	BENT	423.90	395.00
1	REAR BUMPER SIDE RETAINER BRACKET LH	BROKEN	116.00	116.00
1	REAR BUMPER SIDE RETAINER BRACKET RH	BROKEN	116.00	116.00
1	REAR END PANEL	DENTED	740.90	740.90
1	REAR END PANEL TOP COVERING	CUT	256.60	202.00
1	REAR SPARE TYRE UPPER BOARD	NOT NECESSARY	382.80	-
1	REAR TAIL LAMP RH	NOT NECESSARY	472.60	-
1	REAR BOOT LID "COROLLA" EMBLEM	NECESSARY	56.50	56.50
1	REAR BOOT LID "ALTIS" EMBLEM	NECESSARY	58.30	58.30
1	REAR BOOT LID "LOGO" EMBLEM	NECESSARY	80.70	80.70
1	REAR BOOT LID (NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR QUATER PANEL RH (NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR SPARE TYRE PANEL (NPA)	TO REPAIR SEE LABOUR	-	-
1	END PANEL SENSOR	BROKEN	96.40	96.40
	LESS 25% DISCOUNT		-872.55	-610.70
			2,617.65	1,832.10
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	200.00	200.00
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	40.00	30.00
1	REAR END PANEL TOP COVERING CLIPS (SN)	NECESSARY	30.00	10.00
1	REAR END PANEL JOINT SEALANT (SN)	NECESSARY	50.00	20.00
			320.00	260.00
<b><u>LABOUR</u></b>				
	TO REMOVE, REPLACE, REFIT REAR BUMPER, REVERSE SENSOR, REAR REVERSE CAMERA & ETC. TO EFFECT REPLACE OF REAR BUMPER.		80.00	30.00
	TO CHECK WIRING & ELECTRICAL SYSTEM.		60.00	30.00



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE, REPLACE, REPAIR, READJUST & CHISEL REAR ACCIDENT AREAS SUCH AS REAR BOOT LID, REAR END PANEL, REAR BUMPER, REAR SPARE TYRE PANEL, REAR QUATER PANEL RH & ETC. BACK TO ORIGINAL CONDITIONS. INCLUSIVE OF THE REPAIR OF REAR BOOT LID, REAR QUATER PANEL RH AND REAR SPARE TYRE PANEL.		900.00	400.00
	TO SUPPLY PAINT & FURNISHING MATERIALS AT REAR BUMPER, REAR END PANEL, REAR BOOT LID, REAR SPARE TYRE PANEL, REAR QUATER PANEL RH & ETC.		1,000.00	800.00
			2,040.00	1,260.00
<b>GRAND TOTAL</b>			<b>4,977.65</b>	<b>3,352.10</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>2,700.00</b>

Report Ref No. CS/EQI22009556/Eqy3e2

CHEN TSUE YEE

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 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 Actual 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 ..... 27/09/2022 12:24 (SGT)  
Reported by ..... Both  
Date of Accident ..... 27/09/2022 08:40 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... JUNCTION OF QUEENSWAY TURNING INTO  
COMMONWEALTH AVENUE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLP1195M

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LIM JIAN LIANG, KARL MICHAEL  
NRIC No ..... SXXXXX015E  
Email Address ..... KARLMICHAELLIM@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-98893365  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... COROLLA ALTIS 1.6 CVT  
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 ..... 1598

### INSURANCE COMPANY

Name of Insurance Company ..... Singapore Life Ltd  
Policy Number / Cover Note Number ..... 11134245

### DRIVER

Name of Driver ..... LIM JIAN LIANG, KARL MICHAEL  
NRIC No ..... SXXXXX015E  
Date Of Birth ..... 15/09/1988

Occupation .....	Indoor
Date Of Driving Pass .....	21/06/2010
Driving experience .....	12 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98893365
Alt. Phone Number .....	-
Email Address .....	KARLMICHAELLIM@GMAIL.COM
Address .....	BLK 677B YISHUN RING ROAD
Address complement .....	13-1972
Postcode .....	762677
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) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### 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

-

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJK6572A
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	NG PENG WEI

Contact Number ..... (Phone) +65-87827278  
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 willful 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

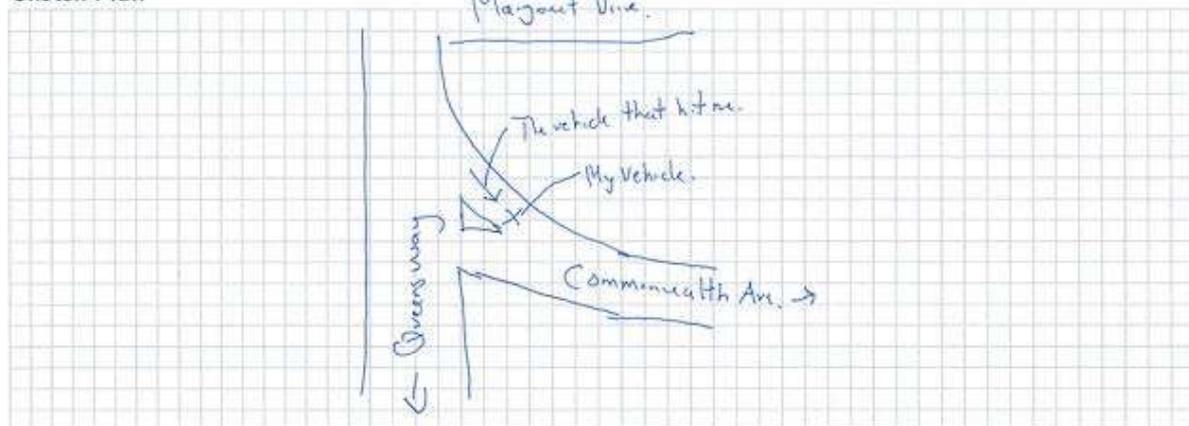
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (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.

  
 Policyholder's Signature / Date & Time

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

  
 Witnessed by Reporting Centre Personnel

**Sketch Plan**







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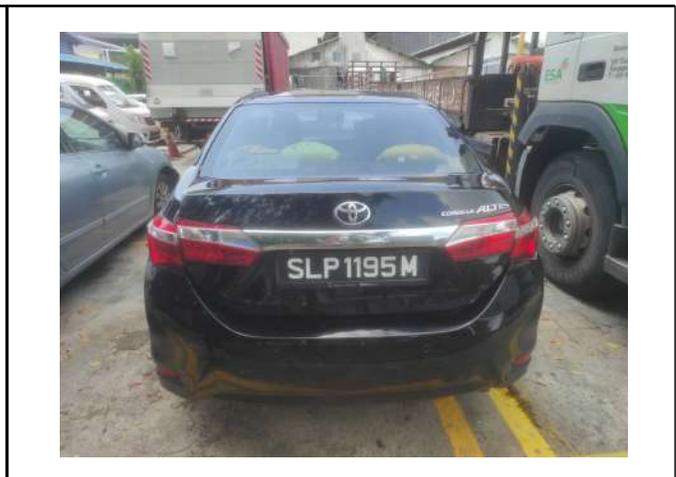
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## PHOTOGRAPHS FOR VEHICLE NO. SLP 1195M

## INSPECTION



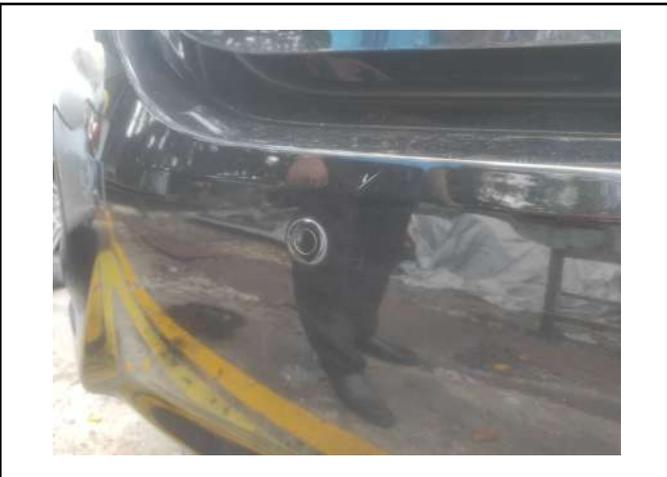
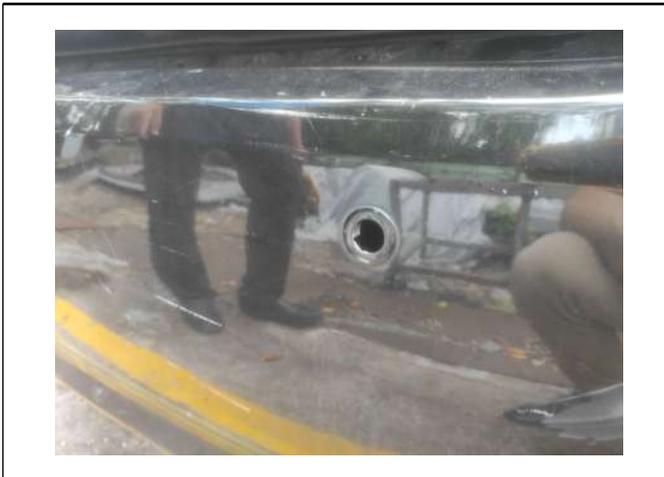


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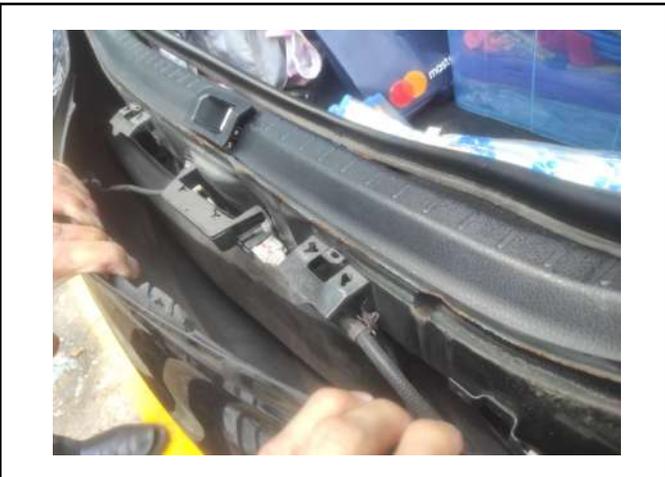


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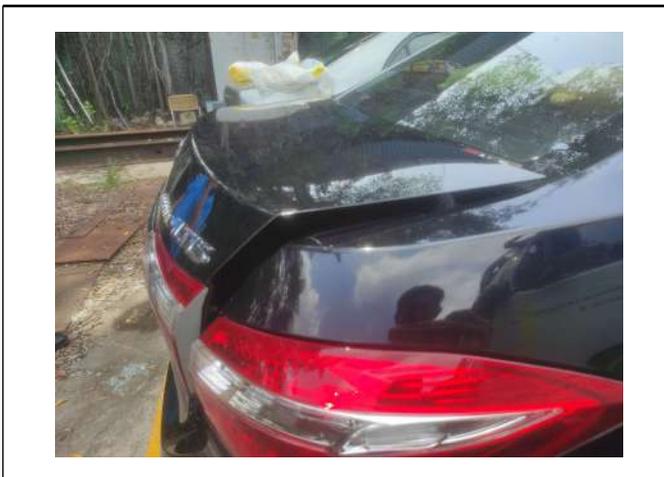
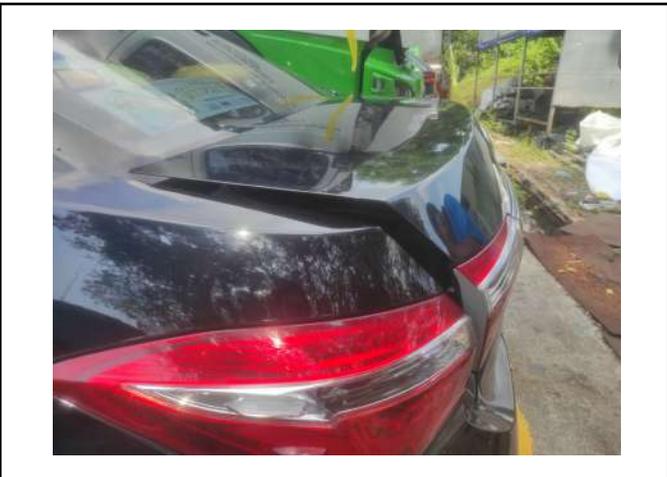
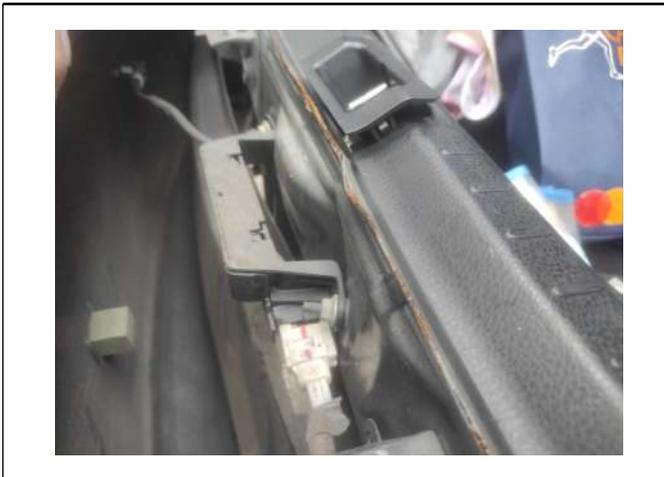


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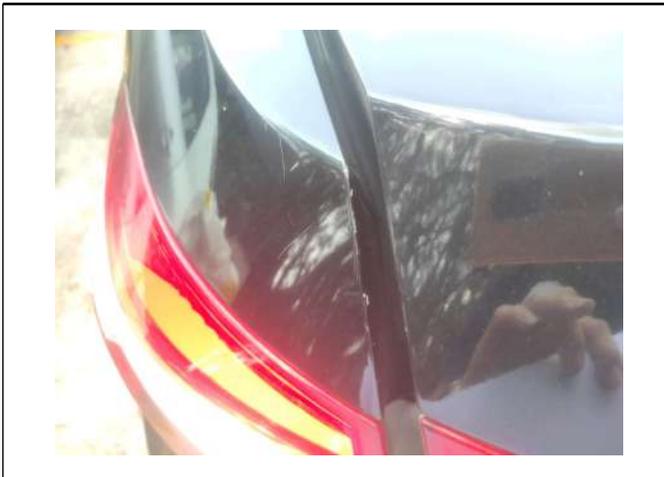
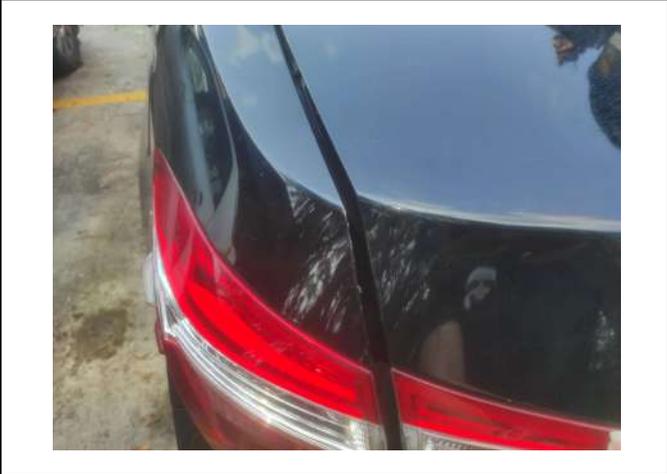


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RE-INSPECTION

