



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

INV No. AC2206861

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEX
SINGAPORE 069110

INV Date 07/11/2022
Reference CS/EQI22010061/Uvy3m4
Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SNF 7069J
Insured Veh. XD 1420J
Claim No. DM22HO01730
Policy No. DMCFHQ22-000049
Accident Date 30/09/2022
Inspection Date 12/10/2022

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

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

SML



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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/EQI22010061/Uvy3m4 Date: 07/11/2022 Code: EQI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	XD 1420J	Veh. Inspected	SNF 7069J	
Policy No.	DMCFHQ22-000049	Coverage (\$)	0.00	
Claim No.	DM22HO01730	Excess (\$)	0.00	
Assign From	NEO JIE SI	Assign Date	12/10/2022	
2. Vehicle Particulars & Condition				
Make & Model	MAZDA 3 M-HYBRID	c.c	1496	
Engine No.	HIDDEN	Year of Reg.	2022	
Chassis No.	JM6BP2SAAN1150785	Colour	BLUE	
Odometer	5773 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	205/60 R16	YOKOHAMA	8 mm	
L/H Front Tyre	205/60 R16	YOKOHAMA	8 mm	
R/H Rear Tyre	205/60 R16	YOKOHAMA	8 mm	
L/H Rear Tyre	205/60 R16	YOKOHAMA	8 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	30/09/2022	Inspection Date	12/10/2022	
Survey held at	T K LEE AUTOMOTIVE PTE LTD NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY SINGAPORE 417883			
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:			7 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SNF 7069J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BOOT LID	BADLY DENTED	1,260.00	896.00
1	REAR BOOT LOGO	NOT NECESSARY	86.50	-
1	REAR BOOT EMBLEM 'MAZDA'	NECESSARY	89.20	89.20
1	REAR BOOT EMBLEM '3'	NECESSARY	68.20	45.00
1	REAR BOOT EMBLEM 'HYBRID'	NECESSARY	86.90	86.90
1	REAR BOOT EMBLEM 'SKYACTIV'	NECESSARY	86.90	57.74
1	REAR BOOT LAMP -LH	CRACKED	991.50	561.85
1	REAR BOOT W/STRIP	NOT NECESSARY	181.90	-
1	REAR BOOT INNER LOCK	NOT NECESSARY	260.50	-
1	REAR BOOT INNER TRIM	NOT NECESSARY	281.90	-
1	REAR BUMPER	DISTORTED	1,150.00	1,143.51
1	REAR BUMPER TOW COVER -LH	NOT NECESSARY	68.20	-
1	REAR BUMPER REFELCTOR -LH	SERVICEABLE	110.50	-
2	REAR BUMPER PDC SENSOR @\$285.00	NOT NECESSARY	570.00	-
1	REAR BUMPER REINFORCEMENT	TO REPAIR SEE LABOUR	868.00	-
2	REAR BUMPER SIDE RETAINERS -R/L @\$90.50	N/S CRACKED	181.00	90.50
1	REAR END PANEL	DENTED / BENT	685.00	685.00
1	REAR END PANEL TRIM	NOT NECESSARY	241.60	-
1	REAR END PANEL HORN	NOT NECESSARY	99.50	-
1	REAR TAILLAMP -LH	CRACKED	1,285.00	1,021.00
1	REAR TAILLAMP PANEL	TO REPAIR SEE LABOUR	135.60	-
	LESS 20% DISCOUNT		-1,757.58	-935.34
			7,030.32	3,741.36
	<u>SPECIAL NETT ITEMS</u>			
1	SET REAR BUMPER CLIP (SN)	NECESSARY	45.00	45.00
1	SET REAR BOOT INNER TRIM CLIP (SN)	NOT NECESSARY	45.00	-
			90.00	45.00
	<u>LABOUR</u>			
	TO CHECK REAR ELECTRICAL WIRING.		50.00	20.00

Report Ref No. CS/EQI22010061/Uvy3m4



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE & REFIX REAR INTERIOR TRIMS TO ASSIST REPAIR.		120.00	60.00
	TO TUFF KOTE.		80.00	60.00
	TO PUTTY, SPRAY PAINT & POLISH AFFECTED PARTS.		1,200.00	1,000.00
	TO PANEL BEAT, CUT, WELD, REMOVE & REPLACE DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF REAR BUMPER REINFORCEMENT & REAR TAILLAMP PANEL		1,200.00	1,000.00
			2,650.00	2,140.00
GRAND TOTAL			9,770.32	5,926.36
RECOMMENDED COST OF REPAIRS				5,926.36

Report Ref No. CS/EQI22010061/Uvy3m4

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 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 11/10/2022 21:37 (SGT)
Reported by Driver
Date of Accident 30/09/2022 09:48 (SGT)
Exact Location of Accident Tuas South Ave 4, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNF7069J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner NATIONAL CAR RENTALS (PRIVATE) LIMITED
Company Reg No 1XXXXX157E
Email Address FLEET@AVIS.COM.SG
Mobile Phone No (Phone) +65-94871051
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mazda
Model 3
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 Commercial vehicle
Transmission Auto
CC 0

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5113954130-02

DRIVER

Name of Driver VELAYUDHAM ASHOK KUMAR
NRIC No SXXXX428Z
Date Of Birth 04/05/1981
Occupation Outdoor

Date Of Driving Pass	26/07/2011
Driving experience	11 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91006407
Alt. Phone Number	-
Email Address	FLEET@AVIS.COM.SG
Address	APT BLK 778 YISHUN AVE 2 #09-1561
Address complement	-
Postcode	760778
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	Raining
Road Surface	Wet

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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	RAMAKRISHNA
Gender	Male

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

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD1420J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
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 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.
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.
- (d) 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.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) 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
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

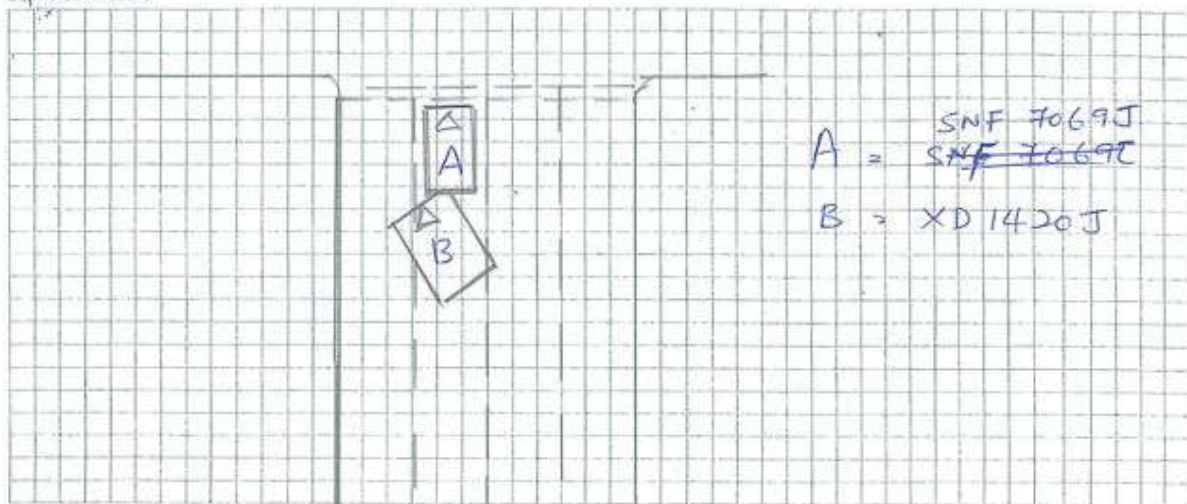
V. Agboh

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

SHAUN TOH

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My Car SNF 7069J Stopped In response to Traffic light to red. Suddenly I noticed the behind vehicle NO. XD1420J Seemingly lost control and i tried to move the car away to avoid accident but still the vehicle hit my car.

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

V. Aslokh

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

SHAUN TOH

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



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PHOTOGRAPHS FOR VEHICLE NO. SNF 7069J

INSPECTION





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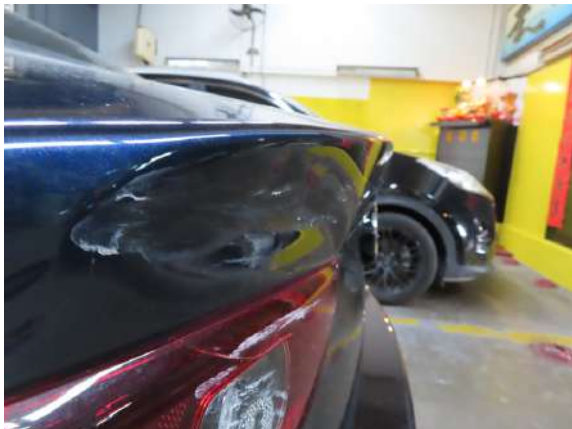


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RE-INSPECTION



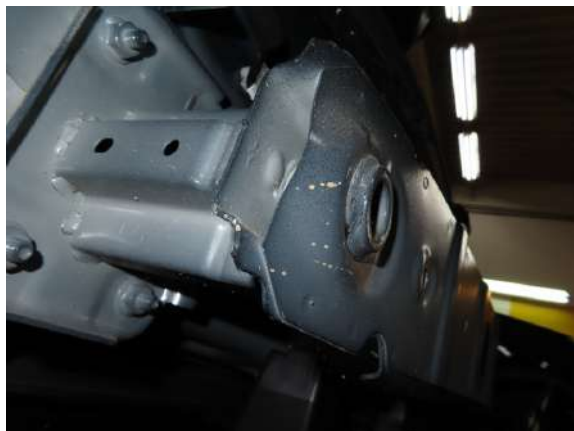


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