



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. AC2300435

INV Date 19/01/2023

Reference CS/EQI23000299/Kqy3m4

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SJM 2959J
Insured Veh. GBG 4785G
Claim No. DM23HO00045/JT
Policy No. DMCPHQ22-002404
Accident Date 05/01/2023
Inspection Date 10/01/2023

Description	Total
Survey Inspection	160.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	160.00
GST (8%)	12.80
Grand Total	172.80

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/EQI23000299/Kqy3m4 Date: 19/01/2023 Code: EQI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBG 4785G	Veh. Inspected	SJM 2959J	
Policy No.	DMCPHQ22-002404	Coverage (\$)	0.00	
Claim No.	DM23HO00045/JT	Excess (\$)	0.00	
Assign From	NEO JIE SI	Assign Date	09/01/2023	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI AVANTE S (A)	c.c	1591	
Engine No.	HIDDEN	Year of Reg.	2008	
Chassis No.	KMH DU41BR9U647362	Colour	METALLIC GREY	
Odometer	345699 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	205/55 R16	TRIANGLE	8 mm	
L/H Front Tyre	205/55 R16	TRIANGLE	8 mm	
R/H Rear Tyre	205/55 R16	BRIDGESTONE	6 mm	
L/H Rear Tyre	205/55 R16	BRIDGESTONE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR & FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	05/01/2023	Inspection Date	10/01/2023	
Survey held at	EM SOLUTION PTE LTD 160 SIN MING DRIVE #03-18/19 SIN MING AUTOCITY SINGAPORE 575722			
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. SJM 2959J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	FRT BUMPER	CRACKED	574.50	494.40
2	FRT BUMPER SIDE HOLDER L/R @\$36.20	SERVICEABLE	72.40	-
1	FRT GRILLE	CRACKED	352.20	352.20
1	FRT BUMPER LOWER GRILLE	SERVICEABLE	124.50	-
1	FRT BUMPER INNER FOAM	CRACKED	162.60	162.60
1	FRT BUMPER REINFORCEMENT	BENT	282.60	282.60
1	FRT SUPPORT PANEL	CRACKED	783.20	783.20
2	HEADLAMP L/R @\$594.20	MTG CRACKED	1,188.40	1,100.00
1	REAR BOOT LID	BENT	886.00	886.00
2	REAR BOOT LID REFLECTOR LAMP L/R @\$126.20	SERVICEABLE	252.40	-
1	REAR BOOT LID OUTER MOULDING	WARPED	136.50	136.50
1	REAR BOOT LID ADVANTE EMBLEM	NECESSARY	32.50	32.50
1	REAR BOOT LID S EMBLEM	NECESSARY	25.60	25.60
1	REAR BOOT LID HYUNDAI LOGO	NECESSARY	32.90	32.90
1	REAR BOOT LID MECHANISM LOCK	DENTED	168.00	168.00
1	REAR BOOT LID INNER UPHOLSTRY TRIM	SERVICEABLE	126.40	-
2	REAR BOOT LID HINGES L/R @\$112.70	TO REPAIR SEE LABOUR	225.40	-
1	REAR BUMPER	BUCKLED	582.20	489.00
2	REAR BUMPER SIDE HOLDER L/R @\$42.30	SERVICEABLE	84.60	-
1	REAR BUMPER REINFORCEMENT	CRACKED	286.20	286.20
2	REAR BUMPER BRACKET L/R @\$78.30	N/S BENT	156.60	78.30
1	REAR BUMPER INNER FOAM	CRACKED	141.40	108.20
1	REAR END PANEL	BENT	485.10	485.10
1	REAR END PANEL TOP GARNISH	DENTED	89.30	89.30
2	REAR LAMP L/R @\$326.20	O/S CRACKED	652.40	326.20
	LESS 20% DISCOUNT		-1,580.78	-1,263.76
			6,323.12	5,055.04
1	REAR BOOT WEATHERSTRIP (50%) (SN)	DENTED/ DISTORTED	118.50	59.25

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 20% DISCOUNT		-23.70	-
			94.80	59.25
	<u>SPECIAL NETT ITEMS</u>			
1	FRT LICENSE PLATE (SN)	BENT	50.00	45.00
1	REAR LICENSE PLATE (SN)	SERVICEABLE	50.00	-
1	SET FRT BUMPER CLIP (SN)	NECESSARY	45.00	45.00
1	SET FRT GRILLE CLIP (SN)	NECESSARY	35.00	35.00
1	SET REAR BUMPER CLIP (SN)	NECESSARY	45.00	45.00
1	SET END PANEL GARNISH CLIP (SN)	NECESSARY	35.00	35.00
1	SET REVERSE SENSOR (SN)	SHORTED	250.00	200.00
			510.00	405.00
	<u>LABOUR</u>			
	TO REMOVE & REARRANGE ELECTRICAL WIRINGS, CHECK LIGHTINGS.		100.00	40.00
	TO REMOVE & REPLACE UPHOLSTRY, TRIM GARNISHES TO FACILITATE REPAIRS.		100.00	60.00
	TO REMOVE & TRANSFER BOOT LID COMPONENTS.		80.00	50.00
	TO REMOVE, REPAIR & REPLACE DAMAGED BODYPARTS, REALIGN BODYWORK AND WHERE CONSISTENT TO THE ACCIDENT. INCLUSIVE OF THE REPAIR OF REAR BOOT LID HINGES L/R.		1,000.00	800.00
	PUTTY AND RESPRAY PAINTING ON AFFECTED PORTIONS.		1,200.00	800.00
	TO REMOVE & RENEW REVERSE SENSOR.		100.00	50.00
	RUST PROOFING ON AFFECTED PORTIONS.		100.00	60.00
			2,680.00	1,860.00
GRAND TOTAL			9,607.92	7,379.29
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				5,900.00

Report Ref No. CS/EQI23000299/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 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	06/01/2023 11:15 (SGT)
Reported by	Driver
Date of Accident	05/01/2023 14:06 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE (TOWN BEFORE BALESTIER EXIT)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM2959J
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ASSET LIMO
Company Reg No	53309913K
Email Address	jamesleecars@hotmail.com
Mobile Phone No	(Phone) +65-90218889
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	HD AVANTE 1.6 A
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	1591

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	P2382948

DRIVER

Name of Driver	SIVAKUMAR S/O VIJAYA KUMAR
NRIC No	S7628037A
Date Of Birth	14/09/1976
Occupation	Outdoor

Date Of Driving Pass	24/07/2015
Driving experience	7 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93492434
Alt. Phone Number	-
Email Address	jamesleecars@hotmail.com
Address	BLK 134 YISHUN STREET 11 #08-167
Address complement	-
Postcode	760134
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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

REFER TO SKETCH PLAN

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	GBG4785G
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	FAIROS KHAN BIN AMIR KHAN
NRIC No	S8117323J

Contact Number	(Phone) +65-87545179
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMG5631E
Vehicle Manufacturer	Kia
Vehicle Model	Cerato
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHIA CHEW CHUA
NRIC No	S1042488G
Contact Number	(Phone) +65-81125198
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' 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.

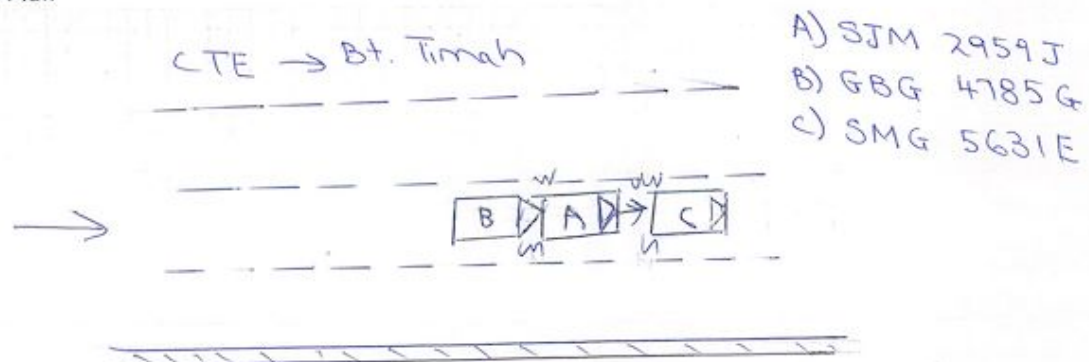
Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

When the Vehicle in front of mine braked, I braked as well. Subsequently about 5 seconds later, I felt an impact from the rear of car, pushing my car forward & collided onto the front Vehicle. I was alighted to check & realised Veh (B) had rear-ended my car causing the 3-cars chain collision. We exchange particulars & left the scene. No one was injured.

claiming TP at EM Solution Pte Ltd.

Declaration

I/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

Kiana



Witnessed by Reporting Centre Personnel



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PHOTOGRAPHS FOR VEHICLE NO. SJM 2959J

INSPECTION





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RE-INSPECTION





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