



## 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

STRIDES AUTOMOTIVE SERVICES PTE LTD

INV No. AC2304917

60 WOODLANDS INDUSTRIAL PARK E4  
SINGAPORE 757705

INV Date 02/08/2023  
Reference CS/SMR23007244/Uqy3e2  
Code SMR

### PROFESSIONAL SERVICE FEE

Vehicle No. XD 5675P  
Insured Veh. SMB 1442L  
Claim No. BUS/07/23/5054  
Policy No.  
Accident Date 11/07/2023  
Inspection Date 25/07/2023

Description	Total
Survey Inspection	128.00
Resurvey Inspection	
Digital Photographs	
Transportation	
<b>Subtotal</b>	<b>128.00</b>
<b>GST (8%)</b>	<b>10.24</b>
<b>Grand Total</b>	<b>138.24</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				
STRIDES AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4SINGAPORE 757705			Ref: CS/SMR23007244/Uqy3e2 Date: 02/08/2023 Code: SMR	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
	Insured Veh.	SMB 1442L	Veh. Inspected	XD 5675P
	Policy No.		Coverage (\$)	0.00
	Claim No.	BUS/07/23/5054	Excess (\$)	0.00
	Assign From	HUA YEN	Assign Date	18/07/2023
<b>2. Vehicle Particulars &amp; Condition</b>				
	Make & Model	ISUZU CYZ52K (M)	c.c	15681
	Engine No.	HIDDEN	Year of Reg.	2012
	Chassis No.	JALCYZ52KC7000009	Colour	BLUE / GREEN
	Odometer	287626 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		
<b>3. Conditions of Tyres</b>				
		Size	Make	Balance
	R/H Front Tyre	295/80 R22.5	AGATE	6 mm
	L/H Front Tyre	295/80 R22.5	AGATE	6 mm
	R/H Rear Tyre	295/80 R22.5 (D/D)	LING LONG	6/6/6/6 mm
	L/H Rear Tyre	295/80 R22.5 (D/D)	LING LONG	6/6/6/6 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	11/07/2023	Inspection Date	25/07/2023
	Survey held at	MAH LIAN MOTOR VEHICLE REPAIRER 38 DEFU LANE 9 SINGAPORE 539278		
<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:		3 Working Days	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. XD 5675P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	FRONT BUMPER	DISTORTED	1,843.50	1,843.50
1	FRONT BUMPER BRACKET - RH	BENT	127.50	127.50
1	FRONT BUMPER SIDE - RH	DISTORTED	262.50	262.50
1	FRONT BUMPER STEP GARNISH - RH	TWISTED	137.50	137.50
1	FRONT BUMPER STEP GARNISH - CENTER	NOT NECESSARY	232.50	-
1	FRONT BUMPER BOTTOM GARNISH - RH	DISTORTED	232.50	232.50
1	FRONT HEADLAMP ASSY - RH	CRACKED	501.00	501.00
1	FRONT HEADLAMP BRACKET - RH	TO REPAIR SEE LABOUR	409.50	-
1	FRONT SIGNAL LAMP - RH	CRACKED	125.00	125.00
1	FRONT FOG LAMP - RH	CRACKED	318.00	318.00
1	FRONT BUMPER LAMP BRACKET - RH	BENT	202.50	202.50
1	FRONT CORNER PANEL - RH	TO REPAIR SEE LABOUR	654.00	-
1	FRONT CORNER PANEL SEAL - RH	NOT NECESSARY	102.00	-
1	FRONT CORNER PANEL LOWER BRACKET - RH	NOT NECESSARY	90.00	-
1	SIDE MIRROR STAY - RH	TO REPAIR SEE LABOUR	690.00	-
1	SIDE MIRROR STAY BOTTOM BRACKET - RH	NOT NECESSARY	142.50	-
1	SIDE MIRROR STAY BOTTOM RUBBER COVER - RH	NOT NECESSARY	71.00	-
2	SIDE MIRROR STAY BOTTOM INNER COVER - RH @ \$41.50	NOT NECESSARY	83.00	-
1	SIDE MIRROR (B) - RH	NOT NECESSARY	99.00	-
1	SIDE MIRROR STAY TOP BRACKET (B) - RH	TO REPAIR SEE LABOUR	432.50	-
1	SIDE MIRROR STAY TOP BRACKET - RH	NOT NECESSARY	64.50	-
1	SIDE MIRROR STAY TOP BRACKET - RH	NOT NECESSARY	48.00	-
1	FRONT DOOR - RH	DENTED	1,732.50	1,732.50
1	FRONT DOOR SIGNAL LAMP - RH	CRACKED	148.10	148.10
1	FRONT DOOR PANEL OUTER - RH	TO REPAIR SEE LABOUR	954.00	-
1	FRONT DOOR PILLAR - RH	TO REPAIR SEE LABOUR	756.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	FRONT DOOR HINGE TOP - RH	NOT NECESSARY	157.50	-
1	FRONT DOOR HINGE BOTTOM - RH	NOT NECESSARY	157.50	-
1	STAND PANEL - RH	NOT NECESSARY	570.00	-
1	STAND PANEL ALLOY MAT TOP - RH	NOT NECESSARY	270.00	-
1	STAND PANEL ALLOY MAT BOTTOM - RH	NOT NECESSARY	270.00	-
1	STEP PANEL - RH	NOT NECESSARY	106.00	-
1	STEP CENTER PANEL - RH	NOT NECESSARY	102.00	-
1	STEP BOTTOM PANEL - RH	NOT NECESSARY	110.50	-
1	STEP PANEL SUPPORT BAR - RH	NOT NECESSARY	504.00	-
1	STEP PANEL ALLOY MAT - RH	NOT NECESSARY	270.00	-
	LESS 10% DISCOUNT		-1,297.66	-
	LESS 15% DISCOUNT		-	-844.59
			11,678.94	4,786.01
	<b><u>LABOUR</u></b>			
	LABOUR TO REMOVE & REFIT FRONT DOOR & TRANSFER PARTS.		150.00	80.00
	LABOUR TO REMOVE & REFIT HEADLAMP, SIGNAL LAMP, FOGLAMP AND CHECK ALL WIRING.		180.00	30.00
	LABOUR CHARGE TO CUT & WELD & DISMANTLE & REMOVE & REFIL ALL PARTS. INCLUSIVE OF THE REPAIR OF FRONT HEADLAMP BRACKET - RH, FRONT CORNER PANEL - RH, SIDE MIRROR STAY - RH, SIDE MIRROR STAY TOP BRACKET (B) - RH, FRONT DOOR PANEL OUTER - RH AND FRONT DOOR PILLAR - RH.		1,900.00	600.00
	TO RUST PROOFING AT ACCIDENT AFFECTED AREA.		680.00	50.00
	TO SPRAY & PAINTING AT ACCIDENT AFFECTED AREA (3 TONE COLOUR).		1,700.00	800.00
			4,610.00	1,560.00
<b>GRAND TOTAL</b>			<b>16,288.94</b>	<b>6,346.01</b>

<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>5,000.00</b>
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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	12/07/2023 14:55 (SGT)
Reported by	Actual Driver
Date of Accident	11/07/2023 14:58 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HOLLAND ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD5675P
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	WEE GUAN ENGINEERING PTE LTD
Company Reg No	199804158D
Email Address	ALEX.CHIA@WEEGUAN.COM.SG
Mobile Phone No	(Phone) +65-96868669
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	Cyz52k
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	15681

### INSURANCE COMPANY

Name of Insurance Company	Great Eastern General Insurance Limited
Policy Number / Cover Note Number	2023-V0119922-VCV

### DRIVER

Name of Driver	RAMASAMY VIRUDHAGIRI
Passport No/FIN	G7708376L
Date Of Birth	05/03/1982
Occupation	Outdoor

Date Of Driving Pass	26/02/2013
Driving experience	10 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83729036
Alt. Phone Number	-
Email Address	ALEX.CHIA@WEEGUAN.COM.SG
Address	37 KRANJI LINK S.728643
Address complement	-
Postcode	-
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 - Change/cross lane
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)	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 ATTACHED

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE TOO LARGE

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMB1442L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of 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.



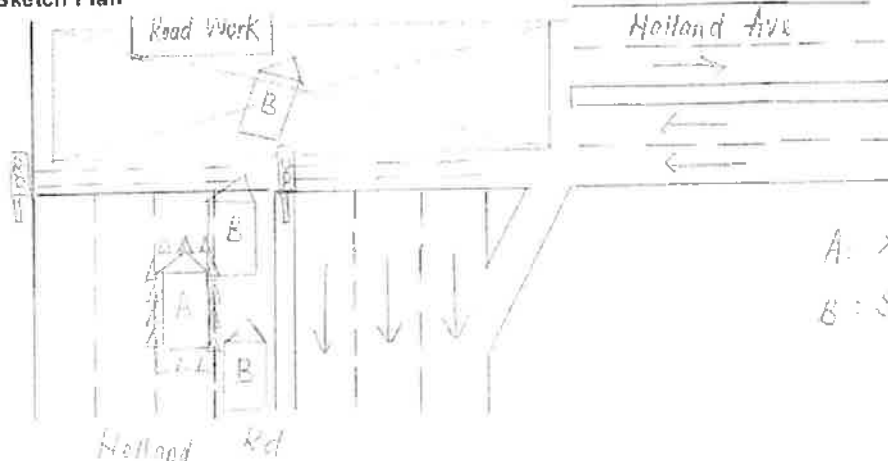
*Vandhagani R*

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time  
12/7/23, 1120 hrs

Witnessed by Reporting Centre Personnel

**Sketch Plan**



A: XD5675P  
B: SA1B 1143 L



**Describe Circumstances of the Accident**

My vehicle was stationary on the road to doing road site work with traffic safety cone around my vehicle. The bus SMB1442L want turn right forward to Holland Ave and he cut left into my lane & the bus SMB1442L left portion hit into my vehicle front right portion & caused damages to my vehicle.

### Declaration

We declare the foregoing particulars are true in every respect.



**Policyholder's Signature / Date & Time**

Wendell L. B.

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

Witnessed by Reporting Centre  
Personnel



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### PHOTOGRAPHS FOR VEHICLE NO. XD 5675P

### INSPECTION







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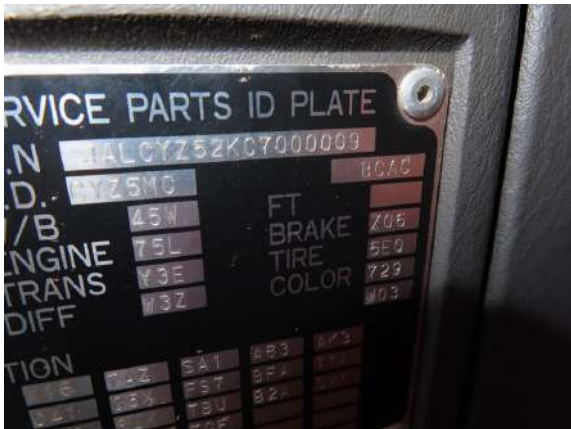


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PHOTOGRAPHS FOR VEHICLE NO. XD 5675P

RE-INSPECTION





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