1		:0/FC217(10bg	540 121th 3	CZ Special lastru	ction:	
ĺ	Curveyor : Rogul	ASSIGNME	NT (Office)			<del></del>
٠.		of H	IL.	Date/Tir	ne: 44/2017	11-21am
1	Estimated Cost:		Bill to:			
	To Inspect Vehicle No: 276	7/10		Insured: SMC	1814L	
	at Workshop m/s Cycle & C	arriage buton	utive.	Tel: <b>(</b>	568 45UI	
		1 Pandon Gau	dere			<u></u>
	Policy No:		Claim No:	טנוטט	3433MF54	
:	Sum Insured:		Excess:			<del></del>
	Make of Veh: (Client's Record)			D.O.A.	30/3/2017	
	CA / REV / REP. / REV 24 HRS ( Date/Time: U//wil 11.26 am P	OS' erson Contacted:	Edwin	H.O.D. Vehicle (I	Endorsement:	
	Date/Time Action/Instruction ( V	) Estimate				
	SAC78141. X	-				······································
	Part by Par	+ \$14,227	led:	3240:18	%)	

(08/11/13) wef REF:	
AS	SIGNMENT
From. Date: Estimated Cost:	Veh No. SLJ 611.8 Yr Regn. 2016 Avol.  Type. McCar / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD THE WS ! TP RES! OD RES! EVA! INV! MV	Truck / Trailer or
To Inspect Vehicle No: SL3 61(\$	Make: MITHINGSHI ATTARKHE 1-2 CUT. 1193
at Workshop m/s C&C C	Colour Rev A/C Insured / Std / NI / NA
99	Sp.Reading 8300 T.Radio: Insured / Std / NI / NA
Insured: FUTP	Eng/No.
Policy No.	C/No. MM BSTA 13A HH 003428
Claims No.	Gen. Cond: Good / Fair Poor / Burnt
Sum Insured: Excess:	Steering: Inorder I dammed / Leaked / Burnt or
(Client's Record)	Brake: (norder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / 8/Rim / STD A/Rim or
600000	Tyre Size: F: 188 55R15
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
8al. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bai. L/Bai. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 30/03/17 D.O.I. 54/04/17
Lum Sum: % 3 Val.: Yes or No	Survey held at C&C CPG)
CA / REV / REP. / 24 HRS  Vehicle: IN / OU	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collisión.
Date / Time Action / Instruction  [04/17 Poly Vehrle massuffaced darners of  etated at rew portur only.  infinel Edmin for CEC pe  once and a to amend the	front 8 new parter. In the QIB neport, obther front parter state damage of the forget to write ntaking to this care. He said he mill call report
promise 200	· · · · · · · · · · · · · · · · · · ·
KE ME TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO	18/5/5018
Date/Time. File Pass to? : Preli. Report	Days Of Repair: 12
192 Typist : Final Report	Resurvey No. of Trip: Survey Fee: 1707 150
Date/Time. File Return to?	
Date/Time. File Return to?  2)  Add Fe	e:   Site Insp (\$ )S+RSSI
	ee: Site Insp (\$ )S+RSSI
	Interview (\$ ) Photos () \\ 23
2) Add Fe	Interview (\$ ) Photos () \\ 23



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 Internation	<ul> <li>In the State of the Control of the State of the</li></ul>	nobile		
FIRS	ST CAPITAL INSUI	RANCE LTD	Ref : CS/FCI170065	40/R1th3		
	ROBINSON ROAD 01 CITY HOUSES	INGAPORE 068877	Date: 04-04-2017 Code: FCl2			
1.		Policy Particulars	:- THIRD PARTY CLA	IM		
	Insured Veh.	SHC 7814L	Veh. Inspected	SLJ 611S		
	Policy No.	<del> </del>	Coverage (\$)	0.00		
	Claim No.	D17003433MFSH	Excess (\$)	0.00		
	Assign From	CWS (AUNG YIN MIN)	Assign Date	04/04/2017		
2.		Vehicle Parti	culars & Condition			
	Make & Model		c.c	0		
	Engine No.	HIDDEN	Year of Reg.			
	Chassis No.		Colour Steering			
	Odometer	-				
	Brakes		Modification			
	General					
3.		Condit	ions of Tyres			
		Size	Make	Balance		
· · · · · ·	R/H Front Tyre			mm		
	L/H Front Tyre			mm		
	R/H Rear Tyre			mm		
	L/H Rear Tyre			mm		
4.		√ Descripti	on of Damages			
5.		Genera	al Information	en e		
<del></del>	Accident Date	30/03/2017	Inspection Date	04/04/2017		
	Survey held at	CYCLE & CARRIAGE AUTOMO		0 110 112011		
	Julyey Held at	209 PANDAN GARDENS SING				
5a.	Charter Salar		Remarks			
		ON WAS CONDUCTED ON A"WI	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	210		

# **First Capital Insurance Limited**

A FAIRFAX Company

MOTOR SURVEY ASSIGNMENT

Date 31-03-2017

Our Ref No. D17003433MFSH

**Accident Date** 

30-03-2017

Claim Type. Third Party

Insured Vehicle

SHC7814L

Third Party Vehicle. SLJ611S

**Survey Location** 

209 PANDAN GARDENS

Contact Person.

**EDWIN CAINA** 

Contact No.

65684501/0

Fax No. 65651240

Survey Type

DIRECT SETTLEMENT:

**Appointed** 

Surveyor

LKK AUTO CONSULTANTS PTE LTD

**Contact Person** 

NA

Fax No. 68416315

Contact Number.

NA

#### FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

CYCLE & CARRIAGE

AUTOMOTIVE PTE LTD

Attention, NIL

Cc: TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

AUNGYM

#### **IMPORTANT NOTE**

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

Job Sheet (/C	laimWS/Surveyor/JobSheet/2	18784) 📐 PRI	Documents 🚨 Close 🗶		
			PRI Header Details	-	
Claim No	D17003433MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & CYCLE &
Workshop Name	CYCLE & CARRIAGE AUTOMOTIVE PTE LTD (Contact Person : EDWIN CAINA)	Survey Location & Contact Details	209 PANDAN GARDENS  Mobile: 0 , Phone: 65684  EmailId: EDWIN.CAINA@		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC7814L	TP Vehicle No	SLJ611S
PRI Recieved Date	31-03-2017 10:11:35 PM	Surveyor Appointed Date	04-04-2017 11:19:14 AM	Surveyor Accept Date	04-04-2017
	1		Survey Report Upload		
Surveyor Inspection Date *:	notes notes	Surveyor Report Date	04-04-2017	Upload Survey Report *:	Choose File
	1		Vehicle Particulars		
Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year
Chasis No		Engine No		Mileage	<b></b>
Color		Cubic Capacity			
Multiple De	ocuments Upload				,
		Upload Multiple	Documents		And we see
File Nan	ne			Action	
Surveyor	Job Remarks				
Remarks				Save	
Date	Job Remarks				Action

#### 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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 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 Report	30/03/2017 18:10
Date Of Accident	30/03/2017 12:35
Exact Location Of Accident	EAST COAST ROAD X ENTRANCE OF 112 BUILDING
Country/State of Loss	Singapore
	DETAIL OF CHANGE IN

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHC7814L	

Insured/Policyholder

Name Of Registered Owner CITYCAB PTE LTD

Co Reg No 199502839G

Email Address fleetsafety@cdgtaxi.com.sg

Mobile Phone No

Alternative Phone No Office-65508768

Vehicle Particulars

Manufacturer HYUNDAI

Model SONATA-2.0 (A)

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?

...

If No, Please state action to be taken Reporting Only

Vehicle Category Taxi

Insurance Company

Name of Insurance Company First Capital Insurance Ltd

Type Of Coverage Third Party Fire and/or Theft

Fleet Policy Yes

Policy Number D-15072702MFSH

Cover Note Number

Driver

Name of Driver SOH GHIN CHONG

NRIC No S8214609A

Date Of Birth 09/05/1982

Occupation Outdoor

Date Of Driving Pass 25/04/2003

Driving Experience 13 Years And 11 Months

Gender Male

Mobile Number Fax Number

Contact Number

EMail Address NOEMAIL

Address 333A YISHUN ST 31 # 11-195

Postcode S761333

Was driver an employee of the Insured's Company No

. If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Other - TAXI DRIVER

Insurance Company of Driver's Own Vehicle

No

1

No

No

General Information of the Accident

Type Of Accident Collision- Head to Rear (Insured Hit TP)

Weather Conditions Raining Road Surface Wet

Other Information

Was any foreign vehicle involved in this accident? Νo

Was any body injured in the Accident? No

Was any other material or property damaged? Yes

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS SEE ATTACHED

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Remarks/ Reasons:

Was there any audio recorded?

Yes Yes

No

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SLJ611S

Vehicle Make/Model/Colour

**Details Of Properties** 

Name of Driver SAMIVILA SHARIEFE

NRIC/Passport Number S2720710C Contact Number 97624143

Address Postcode

Insurance Company Name

Nature Of Damage REAR

No. Of Passenger (Including Driver)

**Details of Witness** 

Name

Phone Number

**Email Address** 

#### **SKETCH PLAN**

#### **IMPORTANT NOTICE**

- 1. Hease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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)

Tunderstand, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

CITYCAB PTE L' CO. REG. NO. 19950	TD 12839C 3 1-1	
Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centersonnel
Sketch Plan		
	> East Coest	
	K-q	P-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
10	<del></del>	-
city	MA) (J	1
	A=SH(7814L	
	B: SLJ611S	
	II2 Bldg.	
	)	

Describe Circumstances of the Accident
It was raining when I travelled along
East Crast Ra this after a con (30/2/17)
in the direction towards City.
At the building 112 when find which B
(SLJ6112), a red car, regred left and
stopped & uddenty of the citiance of the
building it was under such situation
I banged unto its rear partin whon
I could not stop it time despite
I had fully braked on my taxi.
de prossuper in my toli.

Declaration

We declare the foregoing particulars are true in every respect.

CITYCAB PTE LTD CO. REG. NO. 1995028301

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Cate

Witnessed by Reporting Centre

Personnel

#### 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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 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 Report	30/03/2017 17:44
Date Of Accident	30/03/2017 12:50
Exact Location Of Accident	112E COAST ROAD \$428802
Country/State of Loss	Singapore

	DETAILS OF OWN VEHICLE		 
Vehicle Registration Number	SLJ611S		
Insured/Policyholder			

LION CITY RENTALS PTE LTD Name Of Registered Owner

201504621K Co Reg No **Email Address NOEMAIL** 

(LOCAL) +65-97624143 Mobile Phone No

Office-97624143 Alternative Phone No

Vehicle Particulars

MITSUBISHI Manufacturer

ATTRAGE-1.2 (A) Model

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy

Νo

**UBER** 

for repair to your vehicle?

Third Party

If No, Please state action to be taken Private Car Vehicle Category

**Insurance Company** 

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company

Comprehensive Type Of Coverage

Nο Fleet Policy

999995174 Policy Number

Cover Note Number

Driver

Name of Driver SAMIULLA SHARIEFF

S2720710C NRIC No. 30/09/1957 Date Of Birth Outdoor Occupation 05/07/2000 Date Of Driving Pass

16 Years And 8 Months **Driving Experience** 

Male Gender

(Local) +65-97624143 Mobile Number

Fax Number

Contact Number

**NOEMAIL EMail Address** 

Address

BLK 474 ANG MO KIO AVENUE 10 #11-838

Postcode

560474

Was driver an employee of the Insured's Company No

If No. Relationship of the Driver with the Insured

Other - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

Collision- Chain Collision

Weather Conditions

Raining

Road Surface

Wet

Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident?

Nο No

Was any other material or property damaged?

Yes

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Nο

Number of Passengers (Including Driver)

2

**Details of Police Action** 

Was the accident reported to the police?

No

15

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

Nο

If Yes, against whom?

**Circumstances of Accident** 

REFER TO ATTACHMENT

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

SHC7814L

Vehicle Make/Model/Colour

CITY CAB

**Details Of Properties** 

Name of Driver

NRIC/Passport Number

S8214609A

Contact Number

98192102

Address

Postcode

Insurance Company Name

Nature Of Damage

**BACK BOOTH & BUMPER** 

No. Of Passenger (Including Driver)

**Details of Witness** 

Name

Phone Number

**Email Address** 

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHA4461B

Vehicle Make/Model/Colour

Page 2 of 40

**Details Of Properties** 

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **Details of Witness**

Name

Phone Number

Email Address

#### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

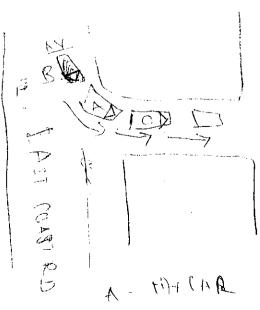
( READ POR ) (1)

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

#### Sketch Plan



be to the

C - THEKAS BURELL EDON CAR

B- SHC78141

escribe Circumstances	s of the Accident
6	ofrer for Uba, rended car from LCR
Α	<b>N</b>
into a	That disophery a - female passerages to 113 E COAST RD,  Shapping mall Keman, and entering it Since There was
a four	The stropping a - female processing to the Charles were were shopping mall Keman, and entering it Since There were to the shape in green Suddenly a care with my car from and it was a city cob.
<u> </u>	
l	

### 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

Witnessed by Reporting Centre Personnel



# CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED. PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

Co Reg No : 197701469G

### **ESTIMATE**

GST Reg No : MR-8500111-X

Invoice Name & Address	<b>N.3</b>	Owner Name & Vehicle Info
dia Oita Dantala Dia 14d	Cust No/Name	/Lion City Rentals Pte Ltd
Lion City Rentals Pie Liu	ion City Rentals Pte Ltd Reg No/Reg Date	SLJ611S / 28/11/201
29 Paya Lebar Road	Date In/Mileage	/ 23478
#01-03	Chassis No	MMBSTA13AHH003428
Singapore 409005	Engine No	3A92UDN8200
Contact No Mobile: 67420984	Make/Model	MIT/17MY ATTRAGE 1.2 CVT
	Colour/Trim	PO1 RED METALLIC / BK BLACK

Account No	Terms	Date/Time Printe	ed CSE	Operator	in the state of th	WIP No	
CSM00041	Cash	30/03/2017/ 17	:29 QUE	261 / Edwin	Caina	58879	
		Description of	Goods / Service	s la la	Qty	Unit Price	Disc% Amount
RENEW FR REPAIR LI E PNT88000 RENEW & I RENEW RHI REPAIR SI A 25000001	T BUMPER HF FENDE RE-ALIGN R FENDER PARETYRE REFIT A DIATOR A	FRT DAMAGED POR & FRT GRILLE R & FRT SUPPORT REAR DAMAGED PO ,REAR END PNL & PNL & RHR WHEEL IRCON CONDENSER SSY	PNL PNL ORTION: REAR BUMPER	şş	af.(		2200.00 2200.3850.00 100.00
TO GIVE 1 A 54900099 CHECK WI A 54900099 CONDUCT M SUNDRY	WAY FOR RING ELE DIAGNOST	PARETYRE BOARD, REPAIR CTRICAL SYSTEM TIC CHECK ON VEHI	AND ADJUST HEA	REAR SEAT			200.00 30.00 200.00 (OV 120.00 240.00
M SUNDRY SUPPLY F M SUNDRY	RT NUMBE	REAR WINDSCREEN OF PLATE WITH CA	SING				od 80.00 nn × 80.00
SUPPLY R E PNT88000 RENEW RE M SUNDRY SUPPLY R M SUNDRY	VERSE SE		ASING				/ 100.00 / 280.00 / 80.00

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worm or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



# CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED. PANDAN GARDENS CUSTOMER SERVICE CENTRE

MITSUBISHI

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

Co Reg No : 197701469G

#### **ESTIMATE**

GST Reg No : MR-8500111-X

Invoice Name & Address		Owner Name & Vehicle Info
Lion City Rentals Pte Ltd	Cust No/Name	/Lion City Rentals Pte Ltd SLJ611S / 28/11/201
29 Paya Lebar Road	Reg No/Reg Date Date In/Mileage	
#01-03	Chassis No	MMBSTA13AHH003428
Singapore 409005	Engine No	3A92UDN8200
Contact No Mobile: 67420984	Make/Model	MIT/17MY ATTRAGE 1.2 CVT
	Colour/Trim	PO1 RED METALLIC / BK BLACK

Account No	Terms	Date/Time		CSE	Operator			<b>WIP No</b> 58879		\$	
CSM00041	Cash	30/03/2017		QUE	····	win Caina			- ne	#. •.	
				s / Services			Qty	Unit Price	DISC%	Am	ount
	EAR WINDS	SCREEN SEAL	ANT								/ 20
M SUNDRY										/	∕30.
SUNDRIES										/	20
M SUNDRY	<b>--</b>										30.
SUPPLY C							1.00	540.00	00.00	CRA	540.
M GRILLE, R							1.00	48.00		44 5	48.
M MARK, THR							1.00	686.00			686.
M FACE, FR		n nu					1.00	13.00			<b>13</b> .
M BRACKET,							1.00		00.00	ne.	<b>1</b> 3.
M BRACKET,			y negative makes many	s polyment	grantig		1.00	644.00		CM	644.
M HEADLAMP M PANEL,AI				<u> </u>		~ / <u>~_</u> ~;	1.00	109.00		gue ?	109
M RADIATOR				CHIL	HHhho		1.00	3 899.00		J. C. T.	899.
		/C REFRIGE	il.	5) IL	And the second s		1.00	7 704.00		2000	704.
M GLASS, RR		/ C REFRIGE	· · · · · · · · · · · · · · · · · · ·	·			1.00	529.00		SULT	529.
M STOPPER,		ID GLASS					2.00	3.00		m	<b>-</b> 6.
M SPACER,R							3.00	8.00	00.00	u	24.
M PANEL,QT							1.00	745.00	00.00		745.
		MP HSG,RH 4	uro.				1.00	59.00	00.00	R	<b>5</b> 9.
		PR OTR RH					1.00	115.00	00.00		115.
M SHIELD,R							1.00	39.00		Year	39.
M MUD GUAR		•					1.00	40.00		for	40.
M MUD GUAR	-						1.00	40.00			<b>≤</b> 40.
M WEATHERS		NK LID					1.00	153.00			153.
M PANEL, TR	UNK LID						1.00	852.00			852.
M HINGE,TR	UNK LID,	LH					1.00	198.00		»××	198.
M HINGE, TR	UNK LID,	RH					1.00	198.00		SUX	198.
M LATCH, TR	UNK LID						1.00	212.00			212.
M STRIKER,							1.00	20.00			<b>≤</b> 20.
		TION T/GAT					1.00	81.00			81.
M RETAINER		CK CYL					1.00	5.00		معه ا	$\sum_{i=1}^{5}$
M MARK, THR							1.00	43.00		معه	43.
	RAGE						1.00	20.00	00.00	· · · · · ·	20.

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



# CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED. PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

Co Reg No : 197701469G

#### **ESTIMATE**

GST Reg No : MR-8500111-X

Invoice Name & Address		Owner Name & Vehicle Info
	Cust No/Name	/Lion City Rentals Pte Ltd
Lion City Rentals Pte Ltd	Reg No/Reg Date	SLJ611S / 28/11/201
29 Paya Lebar Road	Date In/Mileage	· · · · · · · · · · · · · · · · · · ·
#01-03	Chassis No	MMBSTA13AHH003428
Singapore 409005	Engine No	3A92UDN8200
Contact No Mobile: 67420984	Make/Model	MIT/17MY ATTRAGE 1.2 CVT
	Colour/Trim	PO1 RED METALLIC / BK BLACK

Description of Goods   Services	Account No Term	s Date/Time Pr	rinted	CSE	N Opera		i na m	<b>K</b> tz	WIP No.			
GARNISH, RR END PAREL PANEL, RR END PANEL PANEL, RR END PANEL, RR END BOARD, TRUNK ROOM FLOOR TRIM, RR END DUCT, RR VENTILATOR 1.00 190.00 00.00 PANEL, RR END DUCT, RR VENTILATOR 1.00 28.00 00.00 PANEL PANEL, RE END DUCT, RR VENTILATOR 1.00 37.00 00.00 PANEL PANEL, REYNTLATOR 1.00 37.00 00.00 PANEL	SM00041 Cash	30/03/2017/	17:29	QUE	261 /	Edwin	Caina				The co.	
Confirm & accepted by   Confirm & accepted	· 特里的	Description	of Goods	/ Services			5. (2)	and the same				
SURVEYOR NAME:   SURVEYOR NAME:   SURVEYOR NAME:   SURVEYOR NAME:   SURVEYOR NAME:   Surveyor Survey Surveyor		PANEL							<del>-</del>	•	1 1 2 2	
1.00											1 - 4	
1.00		OM FLOOR										
COVER, RR VENTILATOR CLIP, GEARSHIFT CONTROL LIN SIZER, KEYLESS OPERATION, RR ANT, KEYLESS OPERATION, RR 1.00 84.00 00.00 RFACKET, RR BUMPER CLIP, FR BUMPER BRACKET, RR BUMPER, RH BRACKET, RR BUMPER, LH BRACKET, RR BUMPER, LH REFLECTOR LAMP ASSY, COMB, RR LH LAMP ASSY, COMB, RR RH   LIXE Auto Consultanta hence notify the Repairer of the following:  • To resurvey before/after sproy painting • To disply during resurvey • Parls survey is on a "Without Prejudica" basis • No liegal modification(s) is allowed • Supplementary item(s) must be resurveyed and is subject to final approvel from Insurance Company  Acknowledged by Repairer  Symmetric  Confirm & accepted by  Nett  7% GST on 17467.00 12,00 37.00 00.00 12.0 37.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 27.00 00.00 12.0 12.0 12.0 12.0 12.0 12.0		M T Ô D									·	28.00
CLIP, GEARCHIFT CONTROL LIN   3.00   3.00   00.00   1.00											l '	37.00
BUZZER, KEYLESS OPERATION, RR  ANT, KEYLESS OPERATION, RR  FACE, RR BUMPER  CLIP, FR BUMPER  BRACKET, RR BUMPER, RH  BRACKET, RR BUMPER, LH  REFLECTOR  REFLECTOR  LAMP ASSY, COMB, RR LH  LAMP ASSY, COMB, RR RH  LICK Auto Consultanta hence notify the Repairer of the following:  To reservely before/after spray peinting  To display damaged partis) during resurvey  Parts prices are subject to confirmation  Third parts survey is on a "Without Prejudice" basis No Holegal modification(s) is allowed  Supplementary lemn(s) must be resurveyed and is subject to final approval from Insurance Company  Acknowledged by Repairer  Confirm & accepted by  Nett  7% GST on 17467.00 12222.  Total Payable 18,689.								3.00	3.00	00.00	144	- 9.00
ANT, KEYLESS OPERATION, RR FACE, RR BUMPER CLIP, FR BUMPER, RH BRACKET, RR BUMPER, RH BRACKET, RR BUMPER, LH REFLECTOR REFLECTOR LAMP ASSY, COMB, RR LH LAMP ASSY, COMB, RR RH  LIOK Auto Consultants hence notify the Rapairer of the following:  • To resurvey before/after spray peinting • To display damaged part(s) during resurvey • Parts prices are subject to confirmation • Trird party survey is on a "Without Prejudico" basis • No illegal modification(s) is allowed • Supplementary lend(s) must be resurveyed and is subject to final approval from Insurance Company Acknowledged by Repairer    Surveyor Name:   Parts   Parts								1.00			1 '	87.00
Confirm & accepted by												84.00
BRACKET, RR BUMPER, RH BRACKET, RR BUMPER, LH REFLECTOR REFLECTOR REFLECTOR LAMP ASSY, COMB, RR LH LAMP ASSY, COMB, RR RH  LICK Auto Consultants hence notify the Repairer of the following: • To resurvey before/after spray pointing • Third party survey is on a "Without Prejudice" basis • No litegal modification(s) is allowed • Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company Acknowledged by Repairer  Symphome  Confirm & accepted by  Nett  7% GST on 17467.00  Total Payable  18,689.	M FACE,RR BUMPER											
REFLECTOR LAMP ASSY, COMB, RR LH LAMP ASSY, COMB, RR RH  LOCATE A STATE OF THE Color of Surgery 21.0 and 327.00 and 327.0	M CLIP,FR BUMPER		1	بإدال يسس			,	1 1				
REFLECTOR LAMP ASSY, COMB, RR LH LAMP ASSY, COMB, RR RH  LOCATE A STATE OF THE Color of Surgery 21.0 and 327.00 and 327.0		PER,RH	<u></u>	$\mathcal{O}_{\mathcal{I}}$	111a	$\bigcap$	<b>1</b>	1 00	N 1		1 -	27.00 27.00
REFLECTOR LAMP ASSY, COMB, RR LH LAMP ASSY, COMB, RR RH  LOCATE A STATE OF THE Color of Surgery 21.0 and 327.00 and 327.0		PER,LM	Emmanus Company	$\supset)$   [		1 11 (	OI	4.00			- <b>(</b>	21.00
LICK Auto Consultanta hence notify the Rapairer of the following: To resurvey before after spray painting To displey damaged part(s) during resurvey Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" basis No tilegal modification(s) is allowed Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company Actacoutedged by Repairer Signature: Otto:  Confirm & accepted by  Nett 17,467. Total Payable 18,689.		to a			LI LI L	₹ فـا الم	فسائحسي	1.00	agraph .			21.00
LICK Auto Consultanta hence notify the Repairer of the following:  • To display damaged part(s) during resurvey • Parts prices are subject to confirmation • Third party survey is on a "Without Prejudice" basis • No litegal modification(s) is allowed • Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company  Advanced day Repairer  Signature:  Confirm & accepted by  Nett  7% GST on 17467.00 1222.  Total Payable 18,689.		.RR 1H						1.00	327.00	00.00		327.00
LICK Auto Consultants hence notify the Repairer of the following:  • To resurvey before/after spray painting  • To display damaged part(s) during resurvey  • Parts prices are subject to confirmation  • Third party survey is on a "Without Prejudice" basis  • No illegal modification(s) is allowed  • Supplementary item(s) must be resurveyed and is subject to final approval from insurance Company  Acknowledged by Repairer  Signature:  Get:  Confirm & accepted by  Nett  17, 467.  7% GST on 17467.00 1222.  Total Payable 18,689.								1.00	327.00	00.00	CA.	327.00
Nett 17,467. 7% GST on 17467.00 1222.  Total Payable 18,689.	th •1 •1 •	B Repairer of the folio recurvey before/after a to display damaged parti- parts prices are subject to third party survey is on a to illegal modification(s) Supplementary item(s) in a subject to final approvi	lowing: spray peinting (s) during resu to confirmation a "Without Prej is allowed nust be resurval al from Insural	irvey i judice" basis		SURV DATE	/EYOR :	SIGNATU	1	1Hp 130 130	90010	r68
1 de la company resemble de la company resemb	Confirm & accepte	d by					<u></u>	7% GST 0	on 17467.	00		1222.6
				<del>.</del>								

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



VEHICLE NO : SLJGIIS

MODE	L: MIT/ATTRAGE 1.2 CVT
WI	P: 50079
Material	:\$ 6,937.00
Labour	:\$ 7,290.00
Sub-Total	:\$ 14,227.00
Less 2% Disc	: <u>\$</u>
Less Excess	: <u>\$</u>
Total	:\$ 14,227.00
GST 7%	: \$ 995.89
Grand Total	:\$ 15,222.89
Finalise By/Date	8: Unky on 23/11/17
	CK WITHIN 7 DAYS, WILL PROCEED WITH INVOICING
01112.00102	WILL I HOOLED WITH INVOICING
SURVEYORS	S REPORT REQUIRED
<del></del>	·
REPAIR TOO	K 12 WORKING DAYS + 4 days (when ) = 16 days
x TP vehicle	no: SHC7814L (FCIL)
	TP report \$ 15.00
y claim los	
•	}



# CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

# **PRO-FORMA INVOICE**

Co Reg No : 197701469G

THIS IS NOT AN OFFICIAL TAX INVOICE

GST Reg No : MR-8500111-X

Invoice Name & Address and		Ownershame & Vehicles Info
Lion City Rentals Pte Ltd	Cust No/Name	/Lion City Rentals Pte Ltd
Lion City Rentals File Eta	Reg No/Reg Date	SLJ611S / 28/11/2016
29 Paya Lebar Road	A STATE OF THE PARTY OF THE PAR	06/04/2017/ 23478
#01-03		MMBSTA13AHH003428
Singapore 409005	Engine No	3A92UDN8200
Contact No Mobile: 67420984	Make/Model	MIT/17MY ATTRAGE 1.2 CVT
06/04/	Colour/Trim	PO1 RED METALLIC / BK BLACK

Account No Terms Date/Time/Brinted CSE Operator Comments WIP No	
CTP00040 Cash 23/11/2017/ 18:29 TLE 884 / Lauro Songcuan 58879	
Description of Goods//Services A. Cry Unit Price Disc/	6 Amount
E PNT88000	1100.00
RENEW & REALIGN FRONT DAMAGED PORTION: RENEW FRONT BUMPER	
AND FRONT GRILLE , REPAIR LH FRONT FENDER	2200.00
E PNT88000 RENEW & REALIGN REAR DAMAGED PORTION: RENEW RH REAR FENDER,	2200.00
REAR END PANEL & REAR BUMPER	
REPAIR SPARETYRE PANEL & RH REAR WHEELHOUSE	
E PNT88000	200.00
REMOVE & REFIT SPARETYRE BOARD, TRIM, CARPET & REAR SEAT	
TO FACILITATE REPAIR	20.00
A 54900099	30.00
CHECK WIRING ELECTRICAL SYSTEM AND ADJUST HEADLAMP AIM	200.00
A 54900099  CONDUCT DIAGNOSTIC CHECK ON VEHICLE SYSTEM	200.00
M SUNDRY	100.00
APPLY BODY SEALANT AND ANTI CORROSION ON AFFECTED AREAS	
E PNT88000	240.00
REMOVE & REFIT REAR WINDSCREEN GLASS	
E PNT88000	100.00
RENEW REVERSE SENSOR	80.00
M SUNDRY SUPPLY REAR WINDSCREEN SEALANT	00.00
M SUNDRY	30.00
SUNDRIES	
M SUNDRY	30.00 ∤
SUPPLY C&C BADGE	
E PNT98000	2520.00
SPRAY PAINT FRONT BUMPER , LH FRONT FENDER , RH REAR FENDER ,	
REAR END PANEL, REAR BUMPER, SPARETYRE PANEL, LH REAR FENDER	100.00
E PNT88000 REMOVE & REFIT AIRCON CONDENSER , RENEW RADIATOR ASSY	100.00
S SPECIALISTJOB	80.00
TO SUPPLY ONE PC OF FRONT LICENSE PLATE WITH PLASTIC FRAME	



# CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

# **PRO-FORMA INVOICE**

Co Reg No : 197701469G

THIS IS NOT AN OFFICIAL TAX INVOICE

GST Reg No : MR-8500111-X

Invoice Name & Address & Section 1	Owner Name & Vehicle Info
Lion City Rentals Pte Ltd	Cust No/Name /Lion City Rentals Pte Ltd
Lion City Rentals rie Lou	Reg No/Reg Date SLJ611S / 28/11/2016
29 Paya Lebar Road	Date In/Mileage 06/04/2017/ 23478
#01-03	Chassis/Package MMBSTA13AHH003428
Singapore 409005	Engine No 3A92UDN8200
Contact No Mobile: 67420984	Make/Model MIT/17MY ATTRAGE 1.2 CVT
06/04/	Colour/Trim PO1 RED METALLIC / BK BLACK

Account No Terms	Date/irine/Printed	o Operation	MANUE NOW-	ALC: NO.
CTP00040 Cash	23/11/2017/ 18:29 TLE	884 / Lauro Songcuan	58879	
THE RESIDENCE OF THE	Description of Goods//Servi	en e	<b>#</b> Unit Price Disc%	Amount
S SPECIALISTJOB				280.00
	ENSOR ( MIT ATTRAGE / P19 )			540.00
X GRILLE, RADIATOR		1.00	540.00 00.00	540.00
X MARK, THREE-DIA		1.00	48.00 00.00	48.001
X FACE, FR BUMPER		1.00	686.00 00.00	686.00
X BRACKET, FR BUMPE		1.00	13.00 00.00	13.00 1 13.00 1
X BRACKET, FR BUMPE		1.00	13.00 00.00 644.00 00.00	644.001
X HEADLAMP ASSY, LH		1.00 1.00	899.00 00.00	899.00
X RADIATOR ASSY	O O O A O O	2.00	3.00 00.00	6.00
X STOPPER, WINDSHIE			6-8.00 00.00	
X SPACER, RR WINDOW			745.00 00.00	
X PANEL,QTR,OTR RH X PANEL,RR COMB LA			59.00 00.00	1
X PANEL,RR COMB LA X WEATHERSTRIP,TRU		1.00	153.00 00.00	153.00
X PANEL, TRUNK LID		1.00	852.00 00.00	852.00
X LATCH, TRUNK LID		1.00	212.00 00.00	
X MARK, THREE-DIA		1.00	43.00 00.00	1
X MARK, ATTRAGE		1.00	20.00 00.00	
X PANEL, RR END		1.00	414.00 00.00	414.00-
X BOARD, TRUNK ROOM	1 FLOOR	1.00	190.00 00.00	190.00
X TRIM, RR END		1.00	64.00 00.00	
X CLIP, GEARSHIFT C	CONTROL LIN /	3.00	3.00 00.00	
X FACE, RR BUMPER -		1.00	729.00 00.00	
X CLIP, FR BUMPER -		4.00	3.00 00.00	
X BRACKET, RR BUMPE	CR,RH	1.00	27.00 00.00	27.00
X BRACKET, RR BUMPE	R,LH /	1.00	27.00 00.00	
X REFLECTOR /		1.00	21.00 00.00	
X LAMP ASSY, COMB, R	RR RH	1.00	327.00 00.00	
X REINFORCEMENT, FR	BUMPER Supp,	1.00	134.00 00.00	
X LLC 4L	4.	1.00	26.00 00.00	20.00
Z TEXT				
TP CLAIM-FIRST (				
SURVEYOR: RASUL:	: 04.04.2017 12 DAYS	intain with Cycle & Carriage."		
	audiantee your warranty, ma	though atth of the a correcte.		
Parts				14,227.00
Labour	6,937.00	7% GST or		995.89
Standard Menu	6,690.00 0.00	/% d31 01	: 4766/100	222.00
Specialist Job	360.00	1	Total Payable	15,222.89
Diagnostics Job	0.00	'		
Sundry/Others	240.00			
Total (w/o GST)	14,227.00			
	14,667.00			

This is not an official tax invoice.

This is a computer generated document, no signature is required.



**INSURANCE CO.:** 

**FIRST CAPITAL** 

Supplementary For Registration No.:

**SLJ 611 S** 

	<u>Materials</u>	Cost (\$)
1	Reinforcement, FR Bumper	134.00 BY 26.00 Au
¥	LLc 4L	160.00
	Labour	
1	Spray Paint Front Bumper, LH Front Fender, RH Rear Fender, Rear End Panel, Rear Bumper, Spare Tyre Panel, LH Rear Fender	2,520.00
		2,680.00
	7% Gst	187.60
	Total	2,867.60

Thank You.

Yours faithfully

CYCLE & CARRIAGE AUTOMOTIVE PTE LTD

LARRY SONGCUAN CUSTOMER SERVICE

TEL: 6568 4554 FAX: 6567 5258



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

FIRS	ST CAPITAL INSU	RANCE LTD	Ref : CS/FCI17006	5540/R1th3e2	
	OBINSON ROAD	INGAPORE 068877	Date: 21-02-2018		
			Code: FCI2		
1.		Policy Particular	s :- THIRD PARTY CL	AIM.	
	Insured Veh.	SHC 7814L	C 7814L Veh. Inspected		
	Policy No.	D-15072702MFSH	Coverage (\$)	0.00	
	Claim No.	D17003433MFSH	Excess (\$)	0.00	
	Assign From	AUNG YIN MIN	Assign Date	04/04/2017	
2.		Vehicle Par	ticulars & Condition		
•	Make & Model	MITSUBISHI ATTRAGE 1.2 CVT	c.c	1193	
	Engine No.	HIDDEN	Year of Reg.	2016	
	Chassis No.	MMBSTA13AHH003428	Colour	RED	
	Odometer	8300	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	SPORTS RIM	
	General	FAIR			
3. 1		Cond	itions of Tyres :		
		Size	Make	Balance	
	R/H Front Tyre	185/55 R15	BRIDGESTONE	6 mm	
	⊔/H Front Tyre	185/55 R15	BRIDGESTONE	6 mm	
	R/H Rear Tyre	185/55 R15	BRIDGESTONE	6 mm	
	⊔/H Rear Tyre	185/55 R15	BRIDGESTONE	6 mm	
1.		Descrip	tion of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE F ETAILS.	RONT N/S AND REAR PO	ORTION.	
5.			al Information		
	Accident Date	30/03/2017	Inspection Date	04/04/2017	
	Survey held at	CYCLE & CARRIAGE AUTOM	OTIVE PTE LTD		
		209 PANDAN GARDENS SING	GAPORE 609339		
5a.			Remarks, 2		
	A)DAMAGES CON B)THE INSPECTION	ISISTENT TO ACCIDENT REPO ON WAS CONDUCTED ON A'W CE TO YOUR INSTRUCTIONS,	ITHOUT PREJUDICE" BA	ASIS. RISED REPAIRS.	
5b.			e Days of Repair	parties of the section of the	
	and the second of the second o	- 一、一、東京の大学を持ちられている。	Commence A Charles Management of the Commence		



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

Page No.:1 of 3

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLJ 611S

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRT NUMBER PLATE WITH CASING (SN)	SCRATCHED	80.00	80.00
1	REAR NUMBER PLATE WITH CASING (SN)	NOT NECESSARY	80.00	-
1	SUNDRIES (SN)	NECESSARY	30.00	30.00
1	GRILLE,RADIATOR (SN)	CRACKED	540.00	540.00
1	MARK, THREE-DIA (SN)	NECESSARY	48.00	48.00
1	FACE, FR BUMPER (SN)	DEFORMED	686.00	686.00
1	BRACKET, FR BUMPER, RH (SN)	NECESSARY	13.00	13.00
1	BRACKET, FR BUMPER, LH (SN)	NECESSARY	13.00	13.00
1	HEADLAMP ASSY, LH (SN)	CRACKED	644.00	644.00
1	PANEL, AIR GUIDE (SN)	SERVICEABLE	109.00	-
1	RADIATOR ASSY (SN)	CRACKED	899.00	899.00
1	CONDENSER ASSY, A/C REFRIGE (SN)	SERVICEABLE	704.00	- ]
1	GLASS, RR WINDOW (SN)	SERVICEABLE	529.00	-
2	STOPPER, WINDSHIELD GLASS @\$3.00 (SN)	NECESSARY	6.00	6.00
3	SPACER, RR WINDOW @\$8.00 (SN)	NECESSARY	24.00	24.00
1	PANEL, QTR, OTR RH (SN)	BUCKLED	745.00	745.00
1	PANEL, RR COMB LAMP HSG, RH (SN)	CRACKED	59.00	59.00
1	EXTN, QTR PANEL, UPR OTR RH (SN)	TO REPAIR SEE LABOUR	115.00	-
1	SHIELD, RR WHEELHOUSE, RH (SN)	SERVICEABLE	39.00	-
1	MUD GUARD, RR RH (SN)	SERVICEABLE	40.00	-
1	MUD GUARD, RR LH (SN)	SERVICEABLE	40.00	-:
1	WEATHERSTRIP, TRUNK LID (SN)	NECESSARY	153.00	153.00
1	PANEL, TRUNK LID (SN)	BENT	852.00	852.00
1	HINGE, TRUNK LID, LH (SN)	SERVICEABLE	198.00	-
1	HINGE, TRUNK LID, RH (SN)	SERVICEABLE	198.00	-
1	LATCH, TRUNK LID (SN)	BENT	212.00	212.00
1	STRIKER, TRUNK LID LATCH (SN)	SERVICEABLE	20.00	-
1	SW, KEYLESS OPERATION T/GAT (SN)	SERVICEABLE	81.00	-
1	RETAINER, DOOR LOCK CYL (SN)	SERVICEABLE	5.00	-
1	MARK, THREE-DIA (SN)	NECESSARY	43.00	43.00

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51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

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Qty	Description of Parts	Condition	Estimate Bys Workshop (\$))	Our Adjusted
1	MARK, ATTRAGE (SN)	NECESSARY	20.00	20.00
1	GARNISH, RR END PANEL (SN)	SERVICEABLE	328.00	-
1	PANEL, RR END (SN)	BENT	414.00	414.00
1	BOARD, TRUNK ROOM FLOOR (SN)	CRACKED	190.00	190.00
1	TRIM, RR END (SN)	DEFORMED	64.00	64.00
1	DUCT, RR VENTILATOR (SN)	SERVICEABLE	28.00	-
1	COVER, RR VENTILATOR (SN)	SERVICEABLE	37.00	-
3	CLIP, GEARSHIFT CONTROL LIN @\$3.00 (SN)	NECESSARY	9.00	9.00
1	BUZZER, KEYLESS OPERATIO, RR (SN)	SERVICEABLE	87.00	-
1	ANT, KEYLESS OPERATION, RR (SN)	SERVICEABLE	84.00	-
1	FACE, RR BUMPER (SN)	DEFORMED	729.00	729.00
4	CLIP, FR BUMPER @\$3.00 (SN)	NECESSARY	12.00	12.00
1	BRACKET, RR BUMPER, RH (SN)	NECESSARY	27.00	27.00
1	BRACKET, RR BUMPER, LH (SN)	NECESSARY	27.00	27.00
1	REFLECTOR RH (SN)	SCRATCHED	21.00	21.00
1	REFLECTOR LH (SN)	SERVICEABLE	21.00	-
1	LAMP ASSY, COMB, RR LH (SN)	SERVICEABLE	327.00	-
1	LAMP ASSY, COMB, RR RH (SN)	CRACKED	327.00	327.00
1	REINFORCEMENT, FR BUMPER (SN) (ADDITIONAL)	BENT	134.00	134.00
1	LLC 4L (SN) (ADDITIONAL)	NECESSARY	26.00	26.00
			10,117.00	7,047.00
	LABOUR			***************************************
	RENEW & RE-ALIGN FRT DAMAGED PORTION : RENEW FRT BUMPER & FRT GRILLE REPAIR LHF FENDER & FRT SUPPORT PNL.		2,200.00	1,100.00
	RENEW & RE-ALIGN REAR DAMAGED PORTION: RENEW RHR FENDER, REAR END PNL & REAR BUMPER REPAIR SPARE TYRE PNL & RHR WHEELHOUSE. INCLUSIVE OF THE REPAIR OF EXTN, QTR PANEL, UPR OTR RH.		3,850.00	2,200.00
	REMOVE & REFIT AIRCON CONDENSER RENEW RADIATOR ASSY.		100.00	100.00
	TOP UP AIRCON GAS.	NOT NECESSARY	80.00	-
	REMOVE & REFIT SPARETYRE BOARD, TRIM, CARPET & REAR SEAT TO GIVE WAY FOR REPAIR.		200.00	200.00

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14,227.00

Qty	Description of Parts	Condition	Estimate By a Workshop (\$))	Our Adjusted (\$)
	CHECK WIRING ELECTRICAL SYSTEM AND ADJUST HEADLAMP AIM.		30.00	30.00
	CONDUCT DIAGNOSTIC CHECK ON VEHICLE SYSTEM.		200.00	200.00
	APPLY BODY SEALANT AND ANTI CORROSION ON AFFECTED AREAS.		120.00	100.00
	REMOVE & REFIT REAR WINDSCREEN GLASS.		240.00	240.00
	RENEW REVERSE SENSOR.		100.00	100.00
	SUPPLY REVERSE SENSOR.		280.00	280.00
	SUPPLY REAR WINDSCREEN SEALANT.		80.00	80.00
	SUPPLY C & C BADGE.		30.00	30.00
	SPRAY PAINT FRONT BUMPER, LH FRONT FENDER, RH REAR FENDER, REAR END PANEL, REAR BUMPER, SPARE TYRE PANEL, LH REAR FENDER. (ADDITIONAL)		2,520.00	2,520.00
			10,030.00	7,180.00
	GRAND TOTAL		20,147.00	14,227.00

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RECOMMENDED COST OF REPAIRS

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

XXX.

**ADRIAN LING WAI PING** 

B.Eng, AMSOE, AMIRTE, AMSAE-A, M.MATAI

Licensed Appraiser

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