

ASS. REC. BY:

REF:

CS/7CL17013369 / MITB

Special Instruction:

Surveyor:

MA

**ASSIGNMENT (Office)**

From (Person):

CWS

Amy Yin Min

of

FCL

Date/Time:

11072017 9:15am

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SLF 3210S

Insured:

SHB 4806K

at Workshop m/s

Cycle &amp; Carriage Klu

Tel:

65684501

of

209 Pandan Garden

Policy No:

Claim No:

D17006750MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A.

07072017

(Client's Record)

CA / REV / REP. / REV 24 HRS 'DS'

H.O.D. Endorsement:

Date/Time:

11072017

9:48am

Person Contacted:

Jun Te

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SLF 3210S - CS / 7CL17000693 / SHB

DA: 07-01-2017

SHB 4806K - CS / 7CL16019513 / Ugh3m2

DA: 12-10-2016

Part by Part #3404 (Red: 2057; 46%)

REF: FCI

## ASSIGNMENT

From: \_\_\_\_\_ Date: 11-07-2017

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: SLF 3210S  
at Workshop m/s Cycle & Carriage  
of 209 Pandan Garden

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

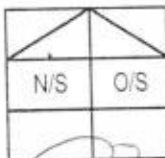
Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS DS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SLF3210S Yr Regn: \_\_\_\_\_

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: KIA FORTÉ-K3 c.c 159L

Colour: Silver A/C: Insured / Std / NI / NA

Sp. Reading: 87164 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KNAPX411M45656165

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / STD A/Rim or

Tyre Size: F: 205/55/16

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 8 mm

L/Bal. 8 mm

D.O.A. 2/7/2017

Survey held at

Des. of Damages: Frt Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

D/P#3404  
3w/4days

RECEIVED 29 NOV 2017

Date/Time, File Pass to?

11/29/11 Typist

Date/Time, File Return to?

2)

☐ : Preli. Report☒ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee: 145

Transportation: 50

S + RS: 50

Photos: 15

Others: \_\_\_\_\_

TOTAL

260

Report Format: TP

Lump Sum / (B): (\$ 3404)



# 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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI17013369/M1tb

36 ROBINSON ROAD  
#16-01 CITY HOUSESINGAPORE 068877

Date : 11-07-2017



Code : FCI2

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 4806K	Veh. Inspected	SLF 3210S
Policy No.		Coverage (\$)	0.00
Claim No.	D17006750MFSH	Excess (\$)	0.00
Assign From	CWS (AUNG YIN MIN)	Assign Date	11/07/2017

## 2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

## 3. Conditions 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. Description of Damages

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## 5. General Information

Accident Date	07/07/2017	Inspection Date	11/07/2017
Survey held at	CYCLE & CARRIAGE KIA PTE LTD 209 PANDAN GARDENS SINGAPORE 609339		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

**MOTOR SURVEY ASSIGNMENT**

<b>Date</b>	10-07-2017	<b>Our Ref No.</b> D17006750MFSH
<b>Accident Date</b>	07-07-2017	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHB4806K	<b>Third Party Vehicle.</b> SLF3210S
<b>Survey Location</b>	209 PANDAN GARDENS	
<b>Contact Person.</b>	TAY JIAN YE	
<b>Contact No.</b>	65684501/ 0	<b>Fax No.</b> 65651240
<b>Survey Type</b>	DIRECT SETTLEMENT:	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	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**

<b>Cc : Workshop</b>	CYCLE & CARRIAGE KIA PTE LTD	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	NA	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	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 (/ClaimWS/Surveyor/JobSheet/225211)



PRI Documents



Close X

## PRI Header Details

Claim No	D17006750MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & CY LTD
Workshop Name	CYCLE & CARRIAGE KIA PTE LTD (Contact Person : TAY JIAN YE)	Survey Location & Contact Details	209 PANDAN GARDENS Mobile: 0 , Phone: 65684501 , Fax: 6565124 EmailId: JIANYE.TAY@CYCLECARRIAGE.COM.!		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHB4806K	TP Vehicle No	SLF321
PRI Recieved Date	10-07-2017 08:30:49 PM	Surveyor Appointed Date	11-07-2017 09:14:51 AM	Surveyor Accept Date	11-07-

## Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	11-07-2017	Upload Survey Report *:	
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## Vehicle Particulars

Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select
Chasis No		Engine No		Mileage	
Color		Cubic Capacity			

## Multiple Documents Upload

Upload Multiple Documents

File Name

Action

## Surveyor Job Remarks

## Denise Tay (LKKAuto)

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**From:** Denise Tay (LKKAuto)  
**Sent:** Wednesday, 29 November, 2017 11:58 AM  
**To:** Admin-D (LKKAuto); 'Claim Workflow System'; assignments  
**Cc:** AUNGYINMIN@FIRST-INSURANCE.COM.SG; SUR  
**Subject:** RE: SURVEY ASSESSMENT - D17006750MFSH/1  
**Attachments:** PRELI ADVISED SLF 3210S.pdf

"Without prejudice"

Dear Sir/Madam,

Enclosed preliminary revised of vehicle **SLF 3210S**

Best Regards,

**Denise Tay** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Admin-D (LKKAuto)  
**Sent:** Tuesday, 11 July, 2017 9:49 AM  
**To:** 'Claim Workflow System' <cwsmotorclaims@first-insurance.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** AUNGYINMIN@FIRST-INSURANCE.COM.SG; SUR <sur@lkkauto.com>  
**Subject:** RE: SURVEY ASSESSMENT - D17006750MFSH/1

Dear Sir / Madam,

Thank you for the assignment.

Best Regards,

**Catherine Chong** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6741-8434 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Claim Workflow System [<mailto:cwsmotorclaims@first-insurance.com.sg>]  
**Sent:** Tuesday, 11 July, 2017 9:15 AM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** [CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG](mailto:CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG); [AUNGYINMIN@FIRST-INSURANCE.COM.SG](mailto:AUNGYINMIN@FIRST-INSURANCE.COM.SG)  
**Subject:** PRI: SURVEY ASSESSMENT - D17006750MFSH/1

Dear Sir/Mdm,



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D17006750MFSH

Date: 29/11/2017

Our Ref: CS/FCI17013369/M1tb

The Motor Claims Department  
First Capital Insurance Ltd

Dear Sir/Madam,

**INITIAL INSPECTION REPORT OF VEHICLE NO. SLF 3210S**

Please be informed that we had conducted the inspection of the abovementioned vehicle 11/7/2017 at the premises of M/s Cycle and Carriage at and have the following to report:-

Workshop Estimate Amount	: S\$ <u>6,361.00</u>
Revised Estimate Amount	: S\$ <u>3,404.00</u>
"Check" Items Amount	: S\$ <u>-</u>
Market Value	: S\$ <u>-</u>
LTA Reimbursement Value	: S\$ <u>-</u>
Nett Value	: S\$ <u>-</u>

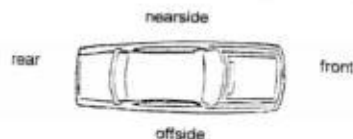
Description of Damage:  
The vehicle sustained damages  
At front rear portion.

Repair days: 3

Yours faithfully

Ma C.F

Motor Surveyor



## 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 withholding 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	07/07/2017 13:34
Date Of Accident	07/07/2017 09:00
Exact Location Of Accident	ECP TOWARDS CITY(BEFORE TANJONG KATONG FLYOVER)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF3210S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LION CITY RENTALS PTE LTD
Co Reg No	201504621K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91890147
Alternative Phone No	OFFICE-94392758

### Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	UBER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	

### Driver

Name of Driver	ONG JUN WEI,MARCUS
NRIC No	S9619724A
Date Of Birth	06/06/1996
Occupation	OUTDOOR
Date Of Driving Pass	15/05/2015
Driving Experience	2 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91890147
Fax Number	
Contact Number	
Email Address	MOJW96@GMAIL.COM



Address	BLK 61 LORONG 40 GEYLANG #07-26
Postcode	398083
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
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.	YES
Number of Passengers (Including Driver)	2

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
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	SHB4806K
Vehicle Make/Model/Colour	HYUNDAI SONATA(YELLOW)TAXI
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	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJG9008P
Vehicle Make/Model/Colour	

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.
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' 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;

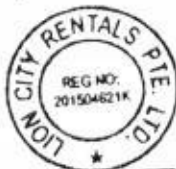
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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.



Policyholder's Signature / Date & Time

*J. 2/2/12*  
12.08



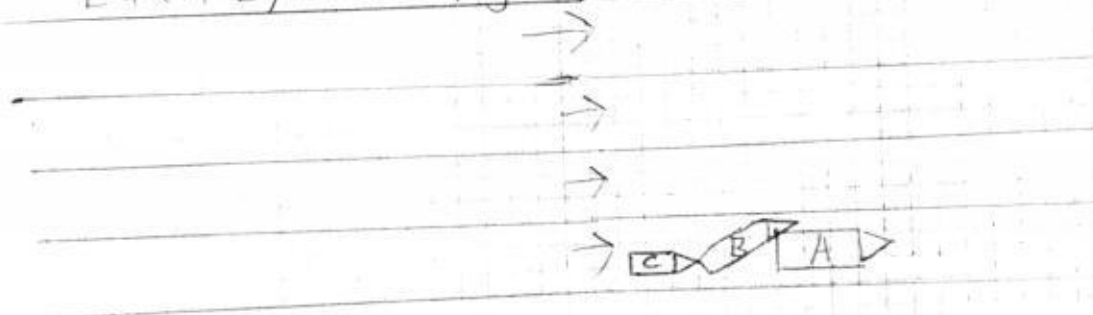
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

### Sketch Plan

ECP (MCE) Towards City (Before Tanjong Katong Flyover)

Vehicle A: SLF3  
Vehicle B: SHB48  
Vehicle C: SJ6900



### Describe Circumstances of the Accident

I'm a uber driver, I was sending a passenger to club st along ECP towards city before tanjong Katong Flyover, a vehicle in front jammed brake and I have to slam brake, and the taxi (SHB 4806K) could not stop on time and he tried to swerve out to the left but still hit on to my vehicle rear left bumper. And another vehicle behind the taxi (SHB 4806) hit onto the taxi (SHB 4806).  
The vehicle that hit onto the taxi was SJG 9008P.

### Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

2/7/17  
12-08



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

Witnessed by Reporting Centre Personnel

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9619724A

Name: ONG JUN WEI, MARCUS

Birth Date: 06 Jun 1996

Issue Date: 15 May 2015

002427369J

FOR C&C USE ONLY



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9619724A

Name: ONG JUN WEI, MARCUS

王 俊 伟

Race: CHINESE

Date of birth: 06-06-1996

Country of birth: SINGAPORE

Sex: M

4784226



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

EFFECTIVE DATE: 15 May 2015

FOR C&C USE ONLY

Licence No: S9619724A

NP 428A

4784226

NRIC No. S9619724A

Date of issue: 15-08-2011

BLK 61 LORONG 40 GEYLANG #07-26

SINGAPORE 398083

NRIC No: S9619724A

Date: 21/08/2018





CYCLE &amp; CARRIAGE

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

209 Pandan Gardens Singapore 609339 Tel: 65684567 Fax: 65651240

**ESTIMATE**

Co Reg No : 199405410K

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Lion City Rentals Pte Ltd	Cust No/Name LL000015/Lion City Rentals Pte Ltd
60 Anson Road	Reg No/Reg Date SLF3210S / 23/08/201
Mapletree Anson Level 11-01	Date In/Mileage / 0
Singapore 079914	Chassis No KNAFX411MH5656165
Contact No Mobile: 67420984	Engine No G4FGGH649230
	Make/Model KIA/FORTE K3 1.6 A EX BRQ
	Colour/Trim 4SS SILKY SILVER / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
CSM00081	Cash	07/07/2017/ 22:32		465 / Tay Jian Ye	11499		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000					1100		2200.00
TO RENEW FRT BUMPER AND WELD AND CUT END PANEL							
E PNT88000							300.00
TO REMOVE AND REFIT REAR BBOT TRIMS AND SIDE FENDER TRIM TO FACILITE REPAIR							
E PNT98000					840		1260.00
PAINT WORK SPRAY REAR BUMPER ,END PANEL							
A 54900099							60.00
CHECK WIRING AND CHASSIS ELECTRICAL SYSTEM							
A 10028901							200.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST							
USING HI-SCAN PRO TEST							
M SUNDRY							100.00
TO APPLY BODY SEALANT ON AFFECTED PORTION							
M SUNDRY							100.00
TO APPLY ANTI COROSSION ON AFFECTED PORTION							
M SUNDRY							220.00
TO SUPPLY PARKING SENSOR							
M SUNDRY							50.00
SUNDRIES							
M STAY-RR BUMPER LH	del.				1.00	120.00 00.00	120.00
M STAY-RR BUMPER RH	on				1.00	120.00 00.00	120.00
M BEAM-RR BUMPER	SUC				1.00	313.00 00.00	313.00
M COVER-RR BUMPER	del				1.00	668.00 00.00	668.00
M COVER-RR BUMPER,CTR	cut				1.00	347.00 00.00	347.00
M BRACKET-RR BUMPER SIDE MTG,LH	dis				1.00	29.00 00.00	29.00
M PANEL ASSY-BACK	R.				1.00	274.00 00.00	274.00

LKK 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 claim(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer  
Signature:  
Date:

Not Authorised  
PIP Repair  
Before Paint Photo  
LKK Auto (MIA)  
11/7/2017  
3w/1day

SURVEYOR NAME : \_\_\_\_\_  
SURVEYOR SIGNATURE : \_\_\_\_\_

LKK 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:

Date:

Not Authorized  
PIP Repair  
Before Paint Photo  
LKK Auto (MIA)  
11/7/2017  
3w/ days

SURVEYOR NAME: \_\_\_\_\_

SURVEYOR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Confirm &amp; accepted by

REMARKS: \_\_\_\_\_

7% GST on

Nett

6361.00

6,361.00

445.27

Total Payable

6,806.27

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.



LKK  
MA

VEHICLE NO : SLF 3210 S

MODEL : KIA/FORTE K3 1.6 A EX

WIP : 11499

Material	:	\$	<u>1,164.00</u>
Labour	:	\$	<u>2,240.00</u>
Sub-Total	:	\$	<u>3,404.00</u>
Less 2% Disc	:	\$	<u>—</u>
Less Excess	:	\$	<u>—</u>
Total	:	\$	<u>3,404.00</u> ✓
GST 7%	:	\$	<u>238.28</u>
Grand Total	:	\$	<u>3,642.28</u>
Finalise By/Date	:	<u>Wong ON 16/11/17</u>	

OK

☒ REVERT BACK WITHIN 7 DAYS,  
OTHERWISE WILL PROCEED WITH INVOICING

☐ SURVEYOR'S REPORT REQUIRED

REPAIR TOOK 3 WORKING DAYS

\* TP vehicle no: SHB4806K

\* Claim loss of use.





CYCLE &amp; CARRIAGE

**CYCLE & CARRIAGE KIA PTE LTD**  
**PANDAN GARDENS CUSTOMER SERVICE CENTRE**

209 Pandan Gardens Singapore 609339 Tel: 65684567 Fax: 65651240

**PRO-FORMA INVOICE**

Co Reg No : 199405410K

**THIS IS NOT AN OFFICIAL TAX INVOICE**

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Lion City Rentals Pte Ltd	Cust No/Name LL000015/Lion City Rentals Pte Ltd
60 Anson Road	Reg No/Reg Date SLF3210S / 23/08/2016
Mapletree Anson Level 11-01	Date In/Mileage 12/07/2017/ 83561
Singapore 079914	Chassis/Package KNAFX411MH5656165
Contact No Mobile: 67420984	Engine No G4FGGH649230
11/07/	Make/Model KIA/FORTE K3 1.6 A EX BRQ
	Colour/Trim 4SS SILKY SILVER / WK SATURN BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CTP00080	Cash	16/11/2017/ 11:35	TLT	884 / Lauro Songcuan	11499

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
E PNT88000 RENEW FRONT BUMPER AND REPAIR REAR END PANEL				1100.00
E PNT98000 SPRAY PAINT REAR BUMPER, END PANEL				840.00
A 54900099 CHECK WIRING AND CHASSIS ELECTRICAL SYSTEM				60.00
M SUNDRY APPLY BODY SEALANT ON AFFECTED PORTION				100.00
M SUNDRY APPLY ANTI CORROSION ON AFFECTED PORTION				100.00
M SUNDRY SUNDRIES				40.00
X STAY-RR BUMPER LH	1.00	120.00	00.00	120.00
X COVER-RR BUMPER	1.00	668.00	00.00	668.00
X COVER-RR BUMPER,CTR	1.00	347.00	00.00	347.00
X BRACKET-RR BUMPER SIDE MTG,LH	1.00	29.00	00.00	29.00
Z TEXT TP FIRST CAPITAL DOA: 07.07.2017 SURVEYOR: MA 11.07.2017 3 DAYS				

*"Guarantee your warranty, maintain with Cycle & Carriage."*

Parts	1,164.00	Nett	3,404.00
Labour	2,000.00	7% GST on	238.28
Standard Menu	0.00		
Specialist Job	0.00		
Diagnostics Job	0.00	Total Payable	3,642.28
Sundry/Others	240.00		
Total(w/o GST)	3,404.00		

This is not an official tax invoice.  
This is a computer generated document, no signature is required.






## 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

Affiliated to Federation Internationale Des Experts En Automobile				
FIRST CAPITAL INSURANCE LTD			Ref : CS/FCI17013369/M1tbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 08-12-2017	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHB 4806K	Veh. Inspected	SLF 3210S	
Policy No.	D-15072702MFSH	Coverage (\$)	0.00	
Claim No.	D17006750MFSH	Excess (\$)	0.00	
Assign From	AUNG YIN MIN	Assign Date	11/07/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	KIA FORTE K3	c.c	1591	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	KNAFX411MH5656165	Colour	SILVER	
Odometer	87164	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/55 R16	BRIDGESTONE	8 mm	
L/H Front Tyre	205/55 R16	BRIDGESTONE	8 mm	
R/H Rear Tyre	205/55 R16	BRIDGESTONE	8 mm	
L/H Rear Tyre	205/55 R16	BRIDGESTONE	8 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	07/07/2017	Inspection Date	11/07/2017	
Survey held at	CYCLE & CARRIAGE KIA PTE LTD 209 PANDAN GARDENS SINGAPORE 609339			
<b>5a. Remarks</b>				
A)DAMAGES CONSISTENT TO ACCIDENT REPORT. B)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. C)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		

**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

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**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLF 3210S**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	SUNDRIES (SN)	NECESSARY	50.00	40.00
1	STAY-RR BUMPER LH (SN)	DISTORTED	120.00	120.00
1	STAY-RR BUMPER RH (SN)	SERVICEABLE	120.00	-
1	BEAM-RR BUMPER (SN)	SERVICEABLE	313.00	-
1	COVER-RR BUMPER (SN)	DEFORMED	668.00	668.00
1	COVER-RR BUMPER, CTR (SN)	CUT	347.00	347.00
1	BRACKET-RR BUMPER SIDE MTG, LH (SN)	DISTORTED	29.00	29.00
1	PANEL ASSY-BACK (SN)	TO REPAIR SEE LABOUR	274.00	-
			1,921.00	1,204.00
<b>LABOUR</b>				
	TO RENEW FRT BUMPER AND WELD AND CUT END PANEL. INCLUSIVE OF THE REPAIR OF PANEL ASSY-BACK.		2,200.00	1,100.00
	TO REMOVE AND REFIT REAR BOOT TRIMS AND SIDE FENDER TRIM TO FACILITATE REPAIR.	NOT NECESSARY	300.00	-
	PAINT WORK SPRAY REAR BUMPER, END PANEL.		1,260.00	840.00
	CHECK WIRING AND CHASSIS ELECTRICAL SYSTEM.		60.00	60.00
	TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST USING HI-SCAN PRO TEST.	NOT NECESSARY	200.00	-
	TO APPLY BODY SEALANT ON AFFECTED PORTION.		100.00	100.00
	TO APPLY ANTI COROSSION ON AFFECTED PORTION.		100.00	100.00
	TO SUPPLY PARKING SENSOR.	NOT NECESSARY	220.00	-
			4,440.00	2,200.00
<b>GRAND TOTAL</b>			<b>6,361.00</b>	<b>3,404.00</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>3,404.00</b>

Report Ref No. CS/FC117013369/M1tbe2

MA CHIN FOOK

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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