

ASS. REC. BY:

REF: 08/7CU70114431 / Tirber

Special Instruction:

Surveyor: Taukiah ASSIGNMENT (Office)From (Person): CWS Vich Lim of JCL Date/Time: 26072017 2:18pm

Estimated Cost: _____ Bill to: _____

OD / ~~TP~~ / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLB 7916J Insured: SIC 8680Zat Workshop m/s Hitachi Copital Tel: 6833 6281of NO. 8 Fourth Lok Yang RoadPolicy No: _____ Claim No: D17007261M7SH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 22072017

(Client's Record)

CA / REV / REP. / REV 24 HRS wp

H.O.D. Endorsement: _____

Date/Time: 26072017 2:19pm Person Contacted: Zhu Mei Vehicle IN / OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	<u>SLB 7916J - X</u>
	<u>SIC 8680Z - NA (CTE17002211 / r3)</u> <u>DOA: 030217</u>
	<u>Taukiah confirm \$3806.50 @ 6 days</u>
	<u>(Red. \$5350.35, 58%)</u>

Taufik

REF:

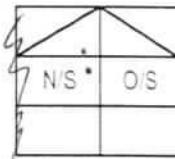
FCI

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD (FP) WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop mis _____
 of _____
 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 Rpt: _____ 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

WP

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLB 7916J Yr Regn: 2016 April

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

Truck / Trailer or

Make: Toyota Altis cc 1598

Colour: Blue AC: Insured / Std / NI / NA

Sp. Reading: 10123 T.Radio: Insured / Std / NI / NA

Eng.No: _____

C.No: M2053RE4104548679

Gen. Cond: Good Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size F: 205/55R16

R: _____

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

TOYO / YOKO or Hankook

Front

Rear

R.Bal: 6 mm R.Bal: 6 mm

L.Bal: 6 mm L.Bal: 6 mm

D.O.A. _____ D.O.I. 28/7/17 @ 4pm

Survey held at Hitachi Capital

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

RECEIVED 26 SEP 2018

Date/Time File Pass to?

Preli. Report

1) typst

Final Report

Date/Time File Return to?

2)

Days Of Repair: 6

Resurvey No. of Trip: -

Survey Fee:

Transportation

) \$ + RS \$)

) Photos

) Others

TOTAL

170
50
46
266

Add Fee: Site Insp (\$

Interview (\$

Tech. Invs (\$

Weekend (\$

Report Format: TP

Lump Sum / I.B.I.: (\$ 306.00)



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/FCI17014431/T1rb	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 26-07-2017	
		Code : FC12	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 8680Z	Veh. Inspected	SLB 7916J
Policy No.		Coverage (\$)	0.00
Claim No.	D17007261MFSH	Excess (\$)	0.00
Assign From	CWS (VION LIM)	Assign Date	26/07/2017
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			
5. General Information			
Accident Date	22/07/2017	Inspection Date	
Survey held at	HITACHI CAPITAL (S) PTE LTD JUN TAIYO SERVICE CENTRE NO. 8 FOURTH LOK YANG ROAD SINGAPORE 629705		
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

Date	25-07-2017	Our Ref No. D17007261MFSH
Accident Date	22-07-2017	Claim Type. Third Party
Insured Vehicle	SHC8680Z	Third Party Vehicle. SLB7916J
Survey Location	JUN TAIYO SERVICE CENTRE NO 8 FOURTH LOK YANG ROAD	
Contact Person.	SUN ZHU MEI	
Contact No.	64663022/ 68336281	Fax No. 68966591
Survey Type	WITHOUT PREJUDICE:	
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	HITACHI CAPITAL ASIA PACIFIC PTE. LTD.	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	VION LIM LUO SHAN	

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/226132)



PRI Documents



Close



PRI Header Details

Claim No	D17007261MFSH	Policy No	D-15072701MFSH	Claimant S.No & Name	1 & HIT PTE. LT
Workshop Name	HITACHI CAPITAL ASIA PACIFIC PTE. LTD. (Contact Person : SUN ZHU MEI)	Survey Location & Contact Details	JUN TAIYO SERVICE CENTRE NO 8 FOURTH LO Mobile: 68336281 , Phone: 64663022 , Fax: EmailId: SUNZHUMEI@HCSPL.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC8680Z	TP Vehicle No	SLB791
PRI Recieved Date	26-07-2017 03:07:57 PM	Surveyor Appointed Date	26-07-2017 01:56:16 PM	Surveyor Accept Date	26-07-

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	26-07-2017	Upload Survey Report *:	<input type="text"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

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	24/07/2017 12:00
Date Of Accident	22/07/2017 17:50
Exact Location Of Accident	CHANGI AIRPORT T1 DRIVE WAY BEFORE DEPARTURE HALL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB7916J
Insured/Policyholder	
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Co Reg No	199400399N
Email Address	JUNTAIYO@HCSPL.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64663022

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 CLASSIC CVT (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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	MSD/VPCP/16-001051-00
Cover Note Number	

Driver

Name of Driver	THAM SIANG SOANG
NRIC No	S1821912C
Date Of Birth	11/02/1967
Occupation	OUTDOOR
Date Of Driving Pass	27/04/1992
Driving Experience	25 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97608228
Fax Number	
Contact Number	
E Mail Address	THAMSS8228@GMAIL.COM

Address
 Postcode
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - LESSEE
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
 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. NO
 Number of Passengers (Including Driver) 3

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

PLEASE REFER TO THE ATTACHED.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC8680Z
 Vehicle Make/Model/Colour
 Details Of Properties
 Name of Driver KUAN KOK BOON
 NRIC/Passport Number S1466772E
 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 Pg. 1

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 willful 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

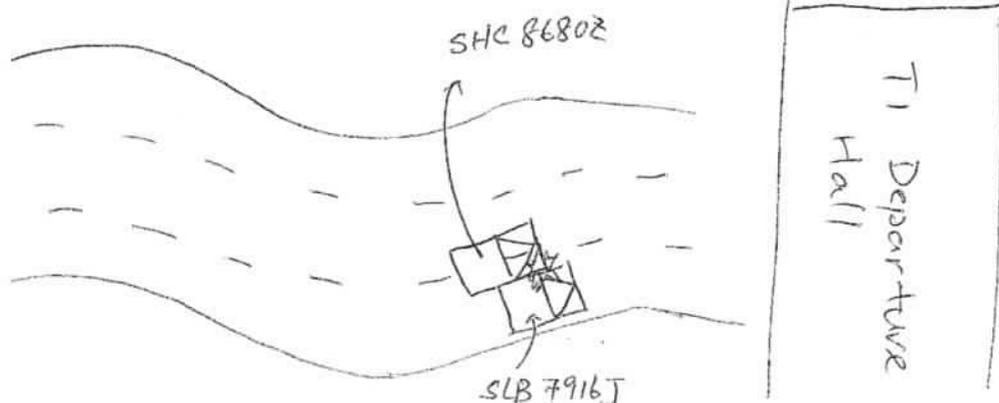
 24/7/2017 10 45 hrs

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



 Witnessed by Reporting Centre Personnel

Sketch Plan



Sketch Plan Pg. 2

Describe Circumstances of the Accident

I was travelling to T1 Departure Hall with my passengers on 22/7/17 around 1755 hrs.

I was travelling on the right lane leading to T1 but a taxi with regn number SHTC 8680E suddenly hit my left side of my car and causes damages on the left side panel.

I have the camera on board.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

24/7/2017 1045 hrs

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

Witnessed by Reporting Centre Personnel

Hitachi Capital Asia Pacific Pte. Ltd.

Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705

Tel: 64663022

Fax: 68966591

Co.Reg.No. 199400399N

GST Reg. No. M2-0118999-3

VEHICLE ESTIMATE

M/s : First Capital Insurance Limited
36 Robinson Rd
#16-01 City House
Singapore 068877

Quote No : 00004742
RevisionNo :
Date : 25/07/2017
Page : 1 / 2

Attn : Motor Claim Dept

Dear Sir/Madam,

Accident Repair On : SLB7916J - Toyota Altis
Insured : Hitachi Capital Asia Pacific Pte Ltd
Date of Accident : 22/07/2017
Your Insured Veh No : SHC8680Z

6533 6285
J. Tan

APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & PARTS TO BE REPLACED :-

	Qty	S\$Unit	S\$Amt	S\$Labor
1. Body Repair				
Parts Replacement				
1 Front Bumper	1.00	485.50	485.50	Ry Y
2 Front Bumper Clips	10.00	5.50	55.00	X X nh
3 Front Bumper Retainer LH/RH	2.00	110.20	220.40	LH-21, RH-X nh
4 Front LH Headlamp	1.00	850.20	850.20	X X nh
5 Front LH Fender	1.00	795.50	795.50	bt /
6 Front LH Fender "VVTI" Emblem	1.00	50.20	50.20	del /
7 Front LH Fender Shield	1.00	220.50	220.50	X X nh
8 Front LH Door	1.00	1,100.50	1,100.50	bt /
9 Front LH Door Hinge	2.00	85.60	171.20	? } X nh
10 Front LH Door Checker	1.00	152.20	152.20	? } X nh
11 LH Side Mirror	1.00	1,250.50	1,250.50	Rp
12 Front Door Sticker LH	1.00	45.60	45.60	nh /
13 Rear Door				Repair
14 Rear LH Fender				Repair
15 Rear Bumper	1.00	495.50	495.50	Ry
16 Rear Bumper Reverse Sensor	1.00	167.50	167.50	X
17 Rear Bumper LH Retainer	1.00	120.50	120.50	X
18 Front Fender Shield Clips	10.00	5.50	55.00	X
2. Labour Charge				
1 Panel beat, cut, weld, re-align & replace damaged parts of affected area				1,000 / 1,750.00
2 Putty, blend and paint affected area				1,000 / 1,750.00
3 Check Wiring, re-align headlamps and ensure proper function				80.00 30
4 Remove & reinstall bumper sensors				X nh 120.00
5 Cavity Treatment on New Parts				80.00 40 /

Hitachi Capital Asia Pacific Pte. Ltd.

Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705

Tel: 64663022

Fax: 68966591

Co.Reg.No. 199400399N

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VEHICLE ESTIMATE

M/s : First Capital Insurance Limited
36 Robinson Rd
#16-01 City House
Singapore 068877

Quote No : 00004742
RevisionNo :
Date : 25/07/2017
Page : 2 / 2

Attn : Motor Claim Dept

Dear Sir/Madam,

Accident Repair On : SLB7916J - Toyota Altis
Insured : Hitachi Capital Asia Pacific Pte Ltd
Date of Accident : 22/07/2017
Your Insured Veh No : SHC8680Z

6 Conduct four wheel alignment / side slip test	180.00
7 Transfer door lock & mechanism to new door	250.00
8 Conduct water seepage test	120.00
9 Remove & re-install rear trim compartment to facilitate cutting and repairing work	150.00

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

Acknowledged by Repairer
Signature:
Date:

SubTotal : 6,235.80 4,480.00

SubTotal : -1,558.95

SubTotal : -1,558.95

Grand Total : 9,156.85

Add 7 % GST : 640.98

Net Total After GST : 9,797.83

Less:

1 List Items Discount on List Items - 25%

No. of days needed for repair : 10

Tanjiu 97495749
- WP
28/7/17 @ 4pm
Resurvey before paint
P/P.



CUSTOMER SIGNATURE

6 days
sur@lkkauto.com.
A

Hitachi Capital Asia Pacific Pte. Ltd.
(Manager)

Hitachi Capital Asia Pacific Pte. Ltd.
Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705
 Tel: 64663022 Fax: 68966591
 Co.Reg.No. 199400399N GST Reg. No. M2-0118999-3

VEHICLE ESTIMATE

M/s : First Capital Insurance Limited
 36 Robinson Rd
 #16-01 City House
 Singapore 068877

Quote No : 00004742
 RevisionNo :
 Date : 25/07/2017
 Page : 1 / 2

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 Date of Accident : 22/07/2017
 Your Insured Veh No : SHC8680Z

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		Qty	S\$Unit	S\$Amt	S\$Labor
1. Body Repair	Parts Replacement				
1 Front Bumper		1.00	485.50	485.50 Ry X	
2 Front Bumper Clips		10.00	5.50	55.00 X	X
3 Front Bumper Retainer LH/RH		2.00 1	110.20	220.40 LH-RH X	X
4 Front LH Headlamp		1.00	850.20	850.20 X	
5 Front LH Fender		1.00	795.50	795.50 bt	/
6 Front LH Fender "VVTI" Emblem		1.00	50.20	50.20 net	/
7 Front LH Fender Shield		1.00	220.50	220.50 X	X
8 Front LH Door		1.00	1,100.50	1,100.50 bt	/
9 Front LH Door Hinge		2.00	85.60	171.20 ?	X
10 Front LH Door Checker		1.00	152.20	152.20 ?	X
11 LH Side Mirror		1.00	1,250.50	1,250.50 Rp	X
12 Front Door Sticker LH		1.00	45.60	45.60 net	/
13 Rear Door	Repair				
14 Rear LH Fender	Repair				
15 Rear Bumper		1.00	495.50	495.50 Ry	X
16 Rear Bumper Reverse Sensor		1.00	167.50	167.50 X	X
17 Rear Bumper LH Retainer		1.00	120.50	120.50 X	X
18 Front Fender Shield Clips		10.00	5.50	55.00 X	X
2. Labour Charge					
1 Panel beat, cut, weld, re-align & replace damaged parts of affected area					1,000.00 ✓
2 Putty, blend and paint affected area					1,750.00 ✓
3 Check Wiring, re-align headlamps and ensure proper function					(30) 80.00 ✓
4 Remove & reinstall bumper sensors					X 120.00
5 Cavity Treatment on New Parts					80.00 40. ✓

© Hitachi Capital Asia Pacific Pte. Ltd.
Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705
 Tel: 64663022 Fax: 68966591
 Co.Reg.No. 199400399N GST Reg. No. M2-0118999-3

VEHICLE ESTIMATE

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 36 Robinson Rd
 #16-01 City House
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 Page : 2 / 2

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 Your Insured Veh No : SHC8680Z

6 Conduct four wheel alignment / side slip test	180.00
7 Transfer door lock & mechanism to new door	250.00
8 Conduct water seepage test	120.00
9 Remove & re-install rear trim compartment to facilitate cutting and repairing work	150.00

parts \$2102 - 25% = \$1576.50
 labour \$2230

SubTotal : 6,235.80 4,480.00

Less:

1 List Items Discount on List Items - 25%

*Total P/P \$3806.50 @ 6 day *

-1,558.95
 SubTotal : -1,558.95

Grand Total : 9,156.85
 Add 7 % GST : 640.98
Net Total After GST : 9,797.83

No. of days needed for repair : 10

Tan Jiah 97495749
 - WP
 28/7/17 @ 4pm
 Resurvey before paint
 P/P



CUSTOMER SIGNATURE

6 days

Hitachi Capital Asia Pacific Pte. Ltd.
 (Manager)

sur@lkhants.com
 A

Janice Lee (LKKAuto)

From: KeanYap, Chong <keanyap.chong@hcspl.com.sg>
Sent: Friday, March 02, 2018 8:05 PM
To: SUR; Taufikh (LKKAuto)
Subject: SLB7916J TP/First Capital Insurance Finalization
Attachments: IMG_6672.JPG; IMG_6674.JPG; IMG_6676.JPG; IMG_6677.JPG; IMG_6678.JPG; IMG_6679.JPG; IMG_6680.JPG; IMG_6681.JPG; IMG_6682.JPG; IMG_6683.JPG; IMG_6684.JPG; IMG_6685.JPG; IMG_6686.JPG; IMG_6687.JPG; juntaiyo@hcspl.com.sg_20180302_175753.pdf

Dear all,

Attached with photo and preliminary report.

Please confirm final repair cost P/P \$3,806.50 before GST.
6 day

Best regards,

*Grant Chong
Motor Claims Advisor
Auto Servicing Section*

Hitachi Capital Asia Pacific Pte. Ltd.
Jun Taiyo Service Centre (Automobile Leasing & Workshop)
8 Fourth Lok Yang Road, Singapore 629705
t: 6833 6282 f: 6896 6591
e: KeanYap.Chong@hcspl.com.sg
w: www.hitachi-capital.com.sg

HITACHI
Inspire the Next

New Office Location Notice
From 12th March 2018, we will be relocated to a different floor.
(NEW) 111 Somerset Road #14-05 Singapore 238164

DISCLAIMER:
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Hitachi Capital Asia Pacific Pte. Ltd.
Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705
 Tel: 64663022 Fax: 68966591
 Co.Reg.No. 199400399N GST Reg. No. M2-0118999-3

VEHICLE ESTIMATE

M/s : First Capital Insurance Limited
 36 Robinson Rd
 #16-01 City House
 Singapore 068877
 Attn : Motor Claim Dept

Quote No : 00004742
 RevisionNo :
 Date : 25/07/2017
 Page : 1 / 2

Dear Sir/Madam,

Accident Repair On : SLB7916J - Toyota Altis
 Insured : Hitachi Capital Asia Pacific Pte Ltd
 Date of Accident : 22/07/2017
 Your Insured Veh No : SHC8680Z

APPENDED BELOW ARE THE ESTIMATED COST OF REPAIR & PARTS TO BE REPLACED :-

		Qty	S\$Unit	S\$Amt	S\$Labor
1. Body Repair	Parts Replacement				
1 Front Bumper		1.00	485.50	485.50 <i>Ry</i>	<i>X</i>
2 Front Bumper Clips		10.00	5.50	55.00 <i>X</i>	<i>X</i>
3 Front Bumper Retainer LH/RH		2.00 1	110.20	220.40 <i>220.40 LH-ret, RH-X</i>	<i>X</i>
4 Front LH Headlamp		1.00	850.20	850.20 <i>X</i>	
5 Front LH Fender		1.00	795.50	795.50 <i>bt</i>	<i>/</i>
6 Front LH Fender "VVTI" Emblem		1.00	50.20	50.20 <i>ret</i>	<i>/</i>
7 Front LH Fender Shield		1.00	220.50	220.50 <i>X</i>	<i>X</i>
8 Front LH Door		1.00	1,100.50	1,100.50 <i>bt</i>	<i>/</i>
9 Front LH Door Hinge		2.00	85.60	171.20 <i>?</i>	<i>X</i>
10 Front LH Door Checker		1.00	152.20	152.20 <i>?</i>	<i>X</i>
11 LH Side Mirror		1.00	1,250.50	1,250.50 <i>Rp</i>	<i>X</i>
12 Front Door Sticker LH		1.00	45.60	45.60 <i>ret</i>	<i>/</i>
13 Rear Door	Repair				
14 Rear LH Fender	Repair				
15 Rear Bumper		1.00	495.50	495.50 <i>Ry</i>	<i>X</i>
16 Rear Bumper Reverse Sensor		1.00	167.50	167.50 <i>X</i>	<i>X</i>
17 Rear Bumper LH Retainer		1.00	120.50	120.50 <i>X</i>	<i>X</i>
18 Front Fender Shield Clips		10.00	5.50	55.00 <i>X</i>	<i>X</i>

2. Labour Charge

1 Panel beat, cut, weld, re-align & replace damaged parts of affected area				1,000.00 ✓	1,750.00
2 Putty, blend and paint affected area				1,000.00 ✓	1,750.00
3 Check Wiring, re-align headlamps and ensure proper function				<i>(30)</i>	80.00
4 Remove & reinstall bumper sensors				<i>X</i>	120.00
5 Cavity Treatment on New Parts					80.00 <i>40. ✓</i>

Hitachi Capital Asia Pacific Pte. Ltd.
Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705
 Tel: 64663022 Fax: 68966591
 Co.Reg.No. 199400399N GST Reg. No. M2-0118999-3

VEHICLE ESTIMATE

M/s : First Capital Insurance Limited
 36 Robinson Rd
 #16-01 City House
 Singapore 068877
 Attn : Motor Claim Dept

Quote No : 00004742
 RevisionNo :
 Date : 25/07/2017
 Page : 2 / 2

Dear Sir/Madam,

Accident Repair On : SLB7916J - Toyota Altis
 Insured : Hitachi Capital Asia Pacific Pte Ltd
 Date of Accident : 22/07/2017
 Your Insured Veh No : SHC8680Z

6 Conduct four wheel alignment / side slip test	x 180.00
7 Transfer door lock & mechanism to new door	/ 60. 250.00
8 Conduct water seepage test	/ 40. 120.00
9 Remove & re-install rear trim compartment to facilitate cutting and repairing work	/ 60 150.00

parts \$2102 - 25% = \$1576.50 -

SubTotal : 6,235.80 4,480.00

labour \$2230 /

Less:

1 List Items Discount on List Items - 25%

*Total P/P \$3806.50 /
 @ 6 day *

SubTotal : -1,558.95
 -1,558.95

Grand Total : 9,156.85

Add 7 % GST : 640.98

Net Total After GST : 9,797.83

No. of days needed for repair : 10

Tanpin 97495749
 -wp'
 28/7/17 @ 4pm
 Resunny before paint
 P/P.



CUSTOMER SIGNATURE

6 days

Hitachi Capital Asia Pacific Pte. Ltd.

(Manager)

sur@1khauto.com.

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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/FCI17014431/T1rbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 02-10-2018	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 8680Z	Veh. Inspected	SLB 7916J
Policy No.	D-15072701MFSH	Coverage (\$)	0.00
Claim No.	D17007261MFSH	Excess (\$)	0.00
Assign From	VION LIM	Assign Date	26/07/2017
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA ALTIS	c.c	1598
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	MR053REH104548679	Colour	BLUE
Odometer	101123	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/55 R16	HANKOOK	6 mm
L/H Front Tyre	205/55 R16	HANKOOK	6 mm
R/H Rear Tyre	205/55 R16	HANKOOK	6 mm
L/H Rear Tyre	205/55 R16	HANKOOK	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	22/07/2017	Inspection Date	28/07/2017
Survey held at	HITACHI CAPITAL (S) PTE LTD JUN TAIYO SERVICE CENTRE NO. 8 FOURTH LOK YANG ROAD SINGAPORE 629705		
5a. Remarks			
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.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		6 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLB 7916J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	TO REPAIR SEE LABOUR	485.50	-
10	FRONT BUMPER CLIPS @\$5.50	NOT NECESSARY	55.00	-
2	FRONT BUMPER RETAINER LH / RH @\$110.20	N/S NECESSARY / O/S NOT NECESSARY	220.40	110.20
1	FRONT LH HEADLAMP	NOT NECESSARY	850.20	-
1	FRONT LH FENDER	BENT	795.50	795.50
1	FRONT LH FENDER "VVTI" EMBLEM	NECESSARY	50.20	50.20
1	FRONT LH FENDER SHIELD	NOT NECESSARY	220.50	-
1	FRONT LH DOOR	BENT	1,100.50	1,100.50
2	FRONT LH DOOR HINGE @\$85.60	NOT NECESSARY	171.20	-
1	FRONT LH DOOR CHECKER	NOT NECESSARY	152.20	-
1	LH SIDE MIRROR	TO REPAIR SEE LABOUR	1,250.50	-
1	FRONT DOOR STICKER LH	NECESSARY	45.60	45.60
1	REAR DOOR (NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR LH FENDER (NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR BUMPER	TO REPAIR SEE LABOUR	495.50	-
1	REAR BUMPER REVERSE SENSOR	NOT NECESSARY	167.50	-
1	REAR BUMPER LH RETAINER	NOT NECESSARY	120.50	-
10	FRONT FENDER SHIELD CLIPS @\$5.50	NOT NECESSARY	55.00	-
	LESS 25% DISCOUNT		-1,558.95	-525.50
			4,676.85	1,576.50
<u>LABOUR</u>				
	PANEL BEAT, CUT, WELD, RE-ALIGN & REPLACE DAMAGED PARTS OF AFFECTED AREA. INCLUSIVE OF THE REPAIR OF FRONT BUMPER, LH SIDE MIRROR, REAR DOOR, REAR LH FENDER AND REAR BUMPER.		1,750.00	1,000.00
	PUTTY, BLEND AND PAINT AFFECTED AREA.		1,750.00	1,000.00

Report Ref No. CS/FCI17014431/T1rbe2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	CHECK WIRING, RE-ALIGN HEADLAMPS AND ENSURE PROPER FUNCTION.		80.00	30.00
	REMOVE & REINSTALL BUMPER SENSORS.	NOT NECESSARY	120.00	-
	CAVITY TREATMENT ON NEW PARTS.		80.00	40.00
	CONDUCT FOUR WHEEL ALIGNMENT / SIDE SLIP TEST.	NOT NECESSARY	180.00	-
	TRANSFER DOOR LOCK & MECHANISM TO NEW DOOR.		250.00	60.00
	CONDUCT WATER SEEPAGE TEST.		120.00	40.00
	REMOVE & RE-INSTALL REAR TRIM COMPARTMENT TO FACILITATE CUTTING AND REPAIRING WORK.		150.00	60.00
			4,480.00	2,230.00
	GRAND TOTAL		9,156.85	3,806.50
RECOMMENDED COST OF REPAIRS				3,806.50

Report Ref No. CS/FCI17014431/T1rbe2

MOHAMAD TAUFIKH
M.MATAI, AMSAE-A
Automotive Assessor

ADRIAN LING WAI PING
B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI
Licensed Appraiser

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