

22/03/2002

ASS. REC. BY:

REF: CS/PCI 17015748/THb2/ Special Instruction:

Surveyor: CWEC (May Chua) ASSIGNMENT (Office)From (Person): CWEC (May Chua) of PCI Date/Time: 15/8/17 8:45am

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SJB 441G Insured: SH 8010Bat Workshop m/s MOVA Tel: _____of BIK 1008 bukit merah lanePolicy No: _____ Claim No: D17007839 MFSH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. _____
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: _____ Person Contacted: _____ Vehicle: IN/OUT

Date/Time	Action/Instruction () Estimate
	Confirm lump sum \$1250 \$12150 - (Red: 4849.20289)

540

Nivitha (LKK Auto)

From: Claim Workflow System <cwsmotorclaims@first-insurance.com.sg>
Sent: Tuesday, 15 August 2017 8:45 AM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG; MAYCHUA@FIRST-INSURANCE.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D17007839MFSH/1
Attachments: Jobsheet_D17007839MFSH_TPD1.pdf

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Best Regards,
Admin Team
Claim Workflow System
Motor Claims Department
First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.

First Capital Insurance Limited

A FAIRFAX Company

Company Reg. No. 195000106C
GST Reg. No. M2-0001676-9

MOTOR SURVEY ASSIGNMENT

Date	14-08-2017	Our Ref No. D17007839MFSH
Accident Date	10-08-2017	Claim Type. Third Party
Insured Vehicle	SH8010B	Third Party Vehicle. SJB441G
Survey Location	BLOCK 1008 BUKIT MERAH LANE 3 #01-04/06/08	
Contact Person.	VIVIAN WONG	
Contact No.	62723892/ 0	Fax No. 62708314
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	MOVA AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	MAY CHUA	

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.

Enquire Transfer Fee

Vehicle Details

Vehicle No.: SJB441G
Vehicle Type: P10 - Passenger Motor Car
Vehicle Attachment 1: With Sun Roof
Vehicle Scheme: Normal
Vehicle Make: SUBARU
Vehicle Model: LEGACY 2.0GT
Chassis No.: JF1BL5KV56G018776
Propellant: Petrol
Engine No.: EJ20C548480
Engine Capacity: 1994 cc
Maximum Power Output: 180.0 kW (241 bhp)
Maximum Laden Weight: 2000 kg
Unladen Weight: 1440 kg
Year Of Manufacture: 2005
Original Registration Date: 05 Oct 2006
Lifespan Expiry Date: -
COE Category: E - Open Category
PQP Paid: \$28,376.00
COE Expiry Date: 04 Oct 2021
Road Tax Expiry Date: 04 Apr 2018
Inspection Due Date: 04 Oct 2018
Intended Transfer Date: 27 Mar 2018
CO2 Emission: -
CO Emission: -
HC Emission: -
NOx Emission: -
PM Emission: -

The current road tax expiry is 04 Apr 2018. You may renew the road tax from 05 Jan 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 04 Apr 2018, late renewal fee(s) will be imposed. Please use [Enquire Road Tax Payable](#) to check on the late fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable (From 05 Apr 2018 to 04 Oct 2018)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	724.00	-	724.00
Total Amount Payable:			749.00

Amount Payable (From 05 Apr 2018 to 04 Apr 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	1,508.00	-	1,508.00
Total Amount Payable:			1,533.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

You may print this page for reference.

OK

Print

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 11/08/2017 15:23
Date Of Accident 10/08/2017 21:30
Exact Location Of Accident EXIT FROM PIE (EXIT 2 LOYANG AVE)
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJB441G
Insured/Policyholder
Name Of Registered Owner EDMAZING ADVENTURES
Co Reg No 53351488J
Email Address EDWTONG@HOTMAIL.COM
Mobile Phone No (LOCAL) +65-98371757
Alternative Phone No OFFICE-NOPHONE

Vehicle Particulars

Manufacturer SUBARU
Model LEGACY 2.0GT

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 CAR

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 5087782817
Cover Note Number

Driver

Name of Driver TONG MING EE
NRIC No S7334730J
Date Of Birth 03/10/1973
Occupation INDOOR
Date Of Driving Pass 16/06/1995
Driving Experience 22 YEARS AND 1 MONTH
Gender MALE
Mobile Number (LOCAL) +65-98371757
Fax Number
Contact Number
Email Address EDWTONG@HOTMAIL.COM

Address
Postcode
Was driver an employee of the Insured's Company YES
If No, Relationship of the Driver with the Insured
Vehicle Registration Number of Driver's Own Vehicle -
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. NO
Number of Passengers (Including Driver) 1

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

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 SH8010B
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver TAY CHENG WHAT
NRIC/Passport Number S0621165H
Contact Number 94572127
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 SKG2779G
Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

BERNICE LEE SIEW TIN

NRIC/Passport Number

Contact Number

97337342

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 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;

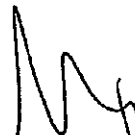
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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

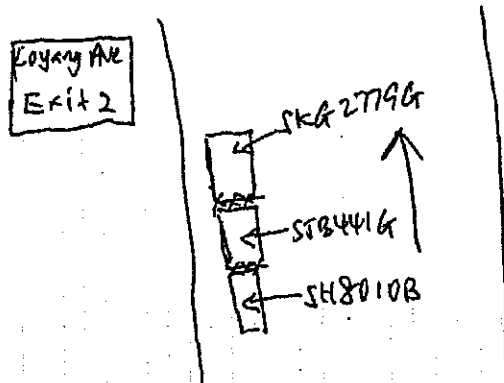
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


11/8/17
1540
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

LICENSE PLATE NUMBER: **SJB 441G**
 ACCIDENT DATE: **10/8/17** CONTACT NUMBER: **98371757**
 ACCIDENT TIME: **9:30pm** EMAIL: **edwtonge@hotmail.com**
 LOCATION: **Exit from PIE (Exit 2 Laying Me)**

I was driving along the filter lane just before PIE Exit 2. When the vehicle in front of me **SG 2779G** braked suddenly. I applied emergency brake and managed to stop right before the vehicle. A couple of seconds later I was hit from the rear by a comfort taxi **SG 8010B** driven by **Tay cheng what (l/c: S062465H)**. The impact caused my vehicle to surge forward and hit the front vehicle **SG 2779G** (Nissan Sunny) driven by **Bernice Lee Siew Tin**. The impact caused the rear bumper to have some scratches and dents. I inspected my vehicle and found the rear bumper to be seriously damaged and the exhaust was damaged as well. The taxi front bumper and bumper was seriously damaged as well.


NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY.
 PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please state:

() Claim Own Policy ☒ Claim Third Party () Claim OD/TP at other workshop () Reporting Only

Declaration

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



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5087782817 Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SJB441G
 Chassis Number : JF1BL5KV56G018776

2. Name of Policyholder : EDMAZING ADVENTURES

3. Effective Date of Insurance : 08 Feb 2017

4. Expiry Date of Insurance : 04 Apr 2018

5. Persons or Classes of Persons entitled to drive#
 (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with his/her permission.
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover
 (a) Use for racing, pace-making, reliability trial or speed-testing.
 (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : INSMART (INSURANCE) AGENCY PTE LTD (00000615165)
 Date of Issue : 07 Feb 2017 16:38 hrs

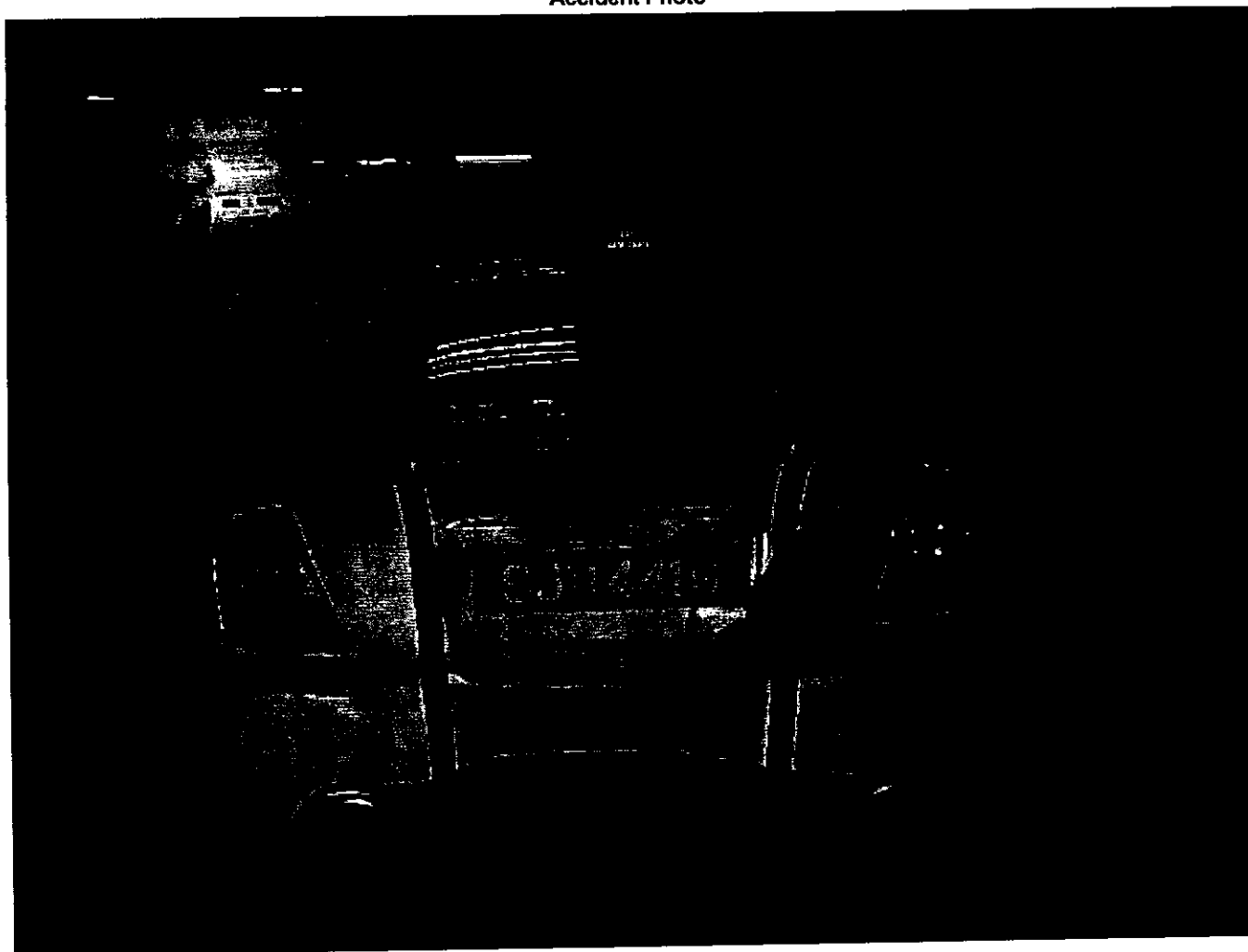
For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

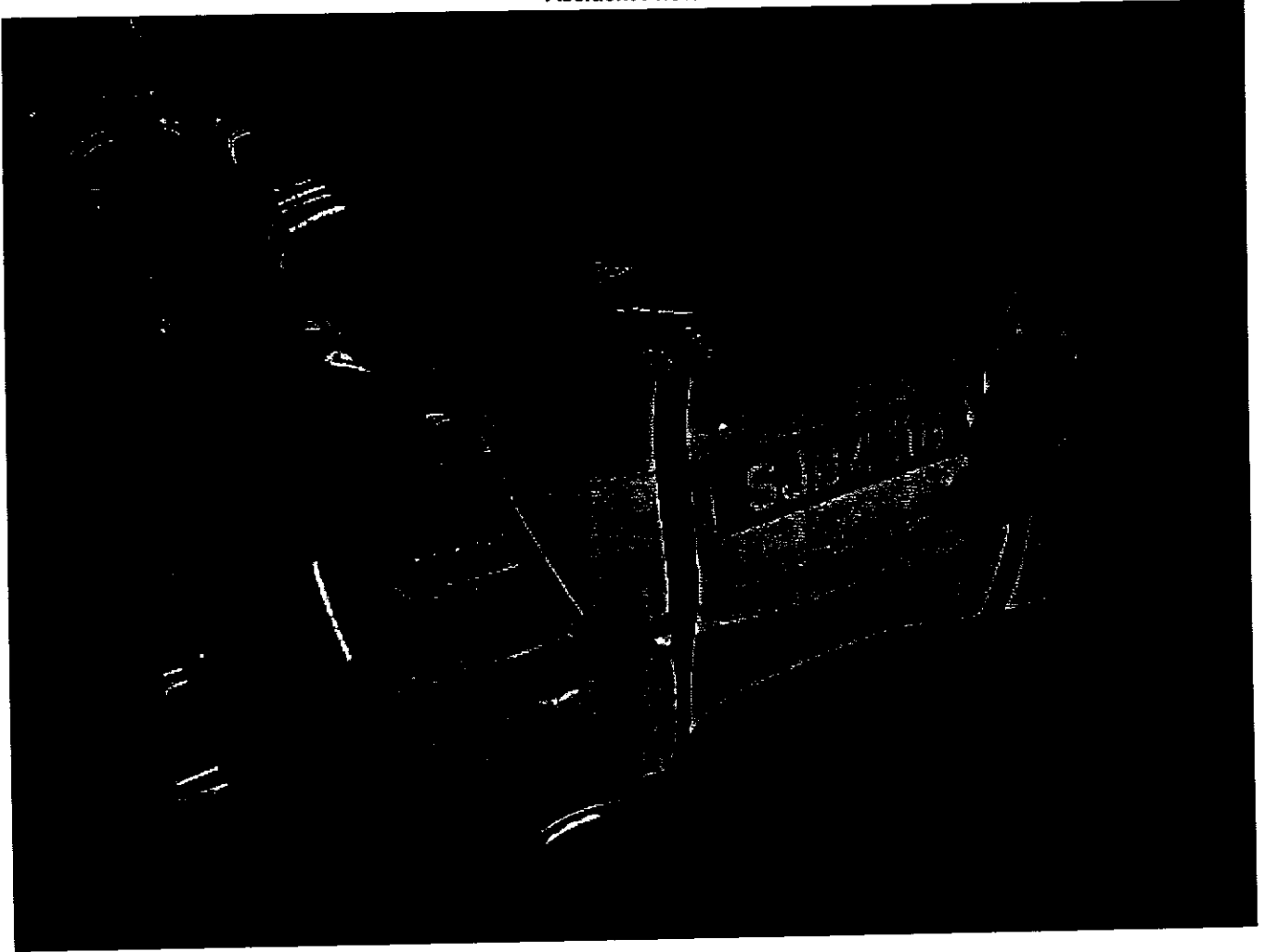
Authorised Officer

Chief Executive

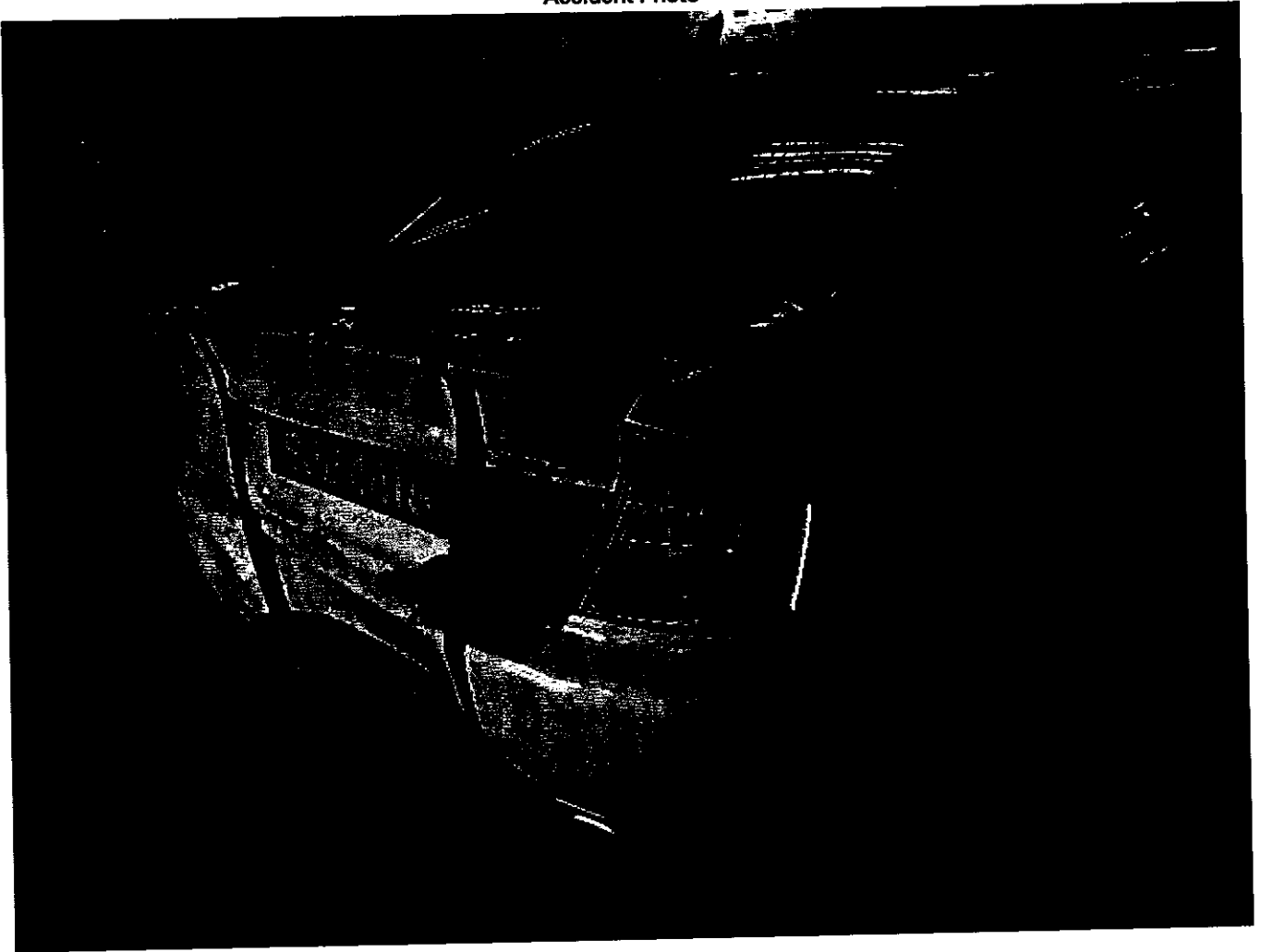
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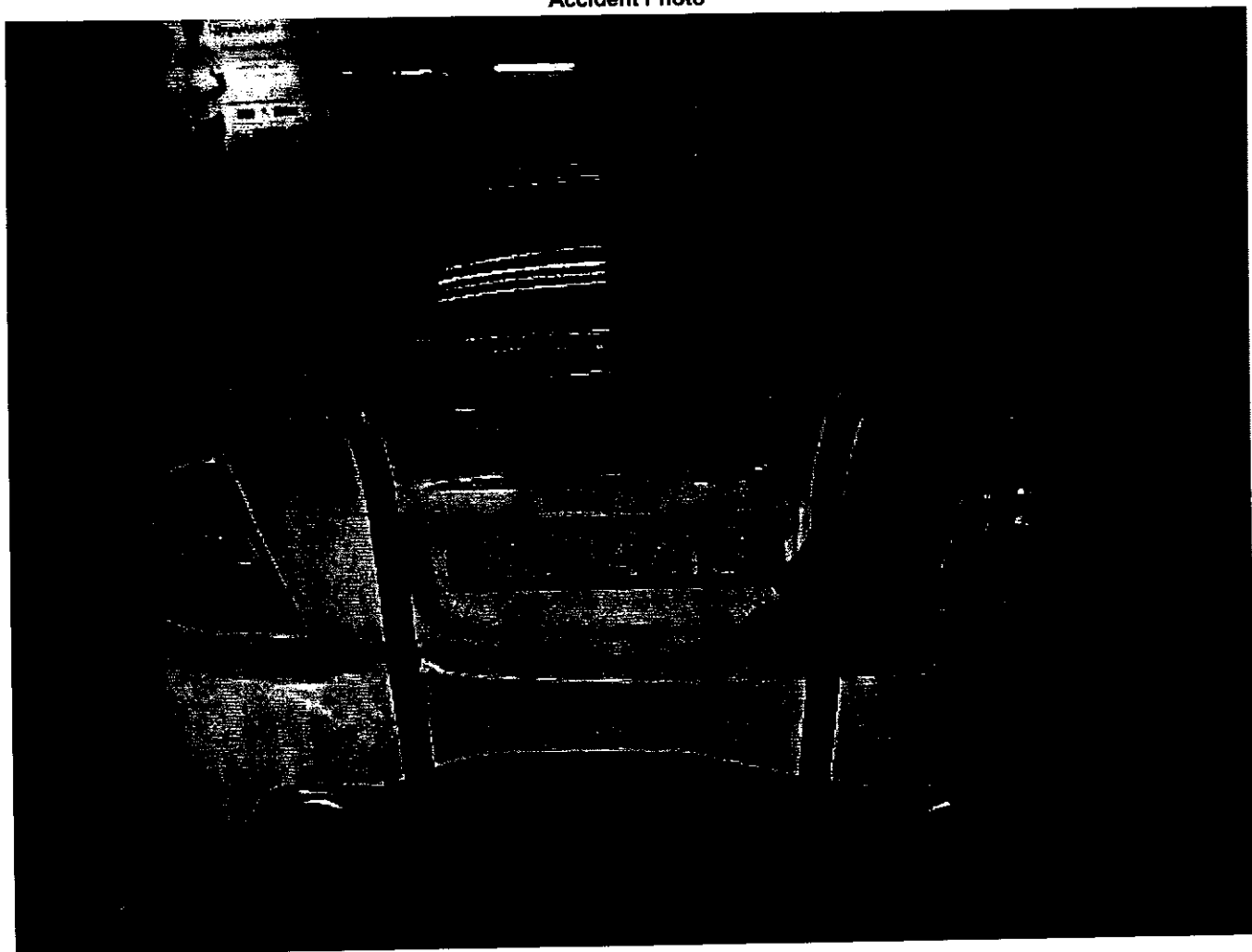
Accident Photo



Accident Photo



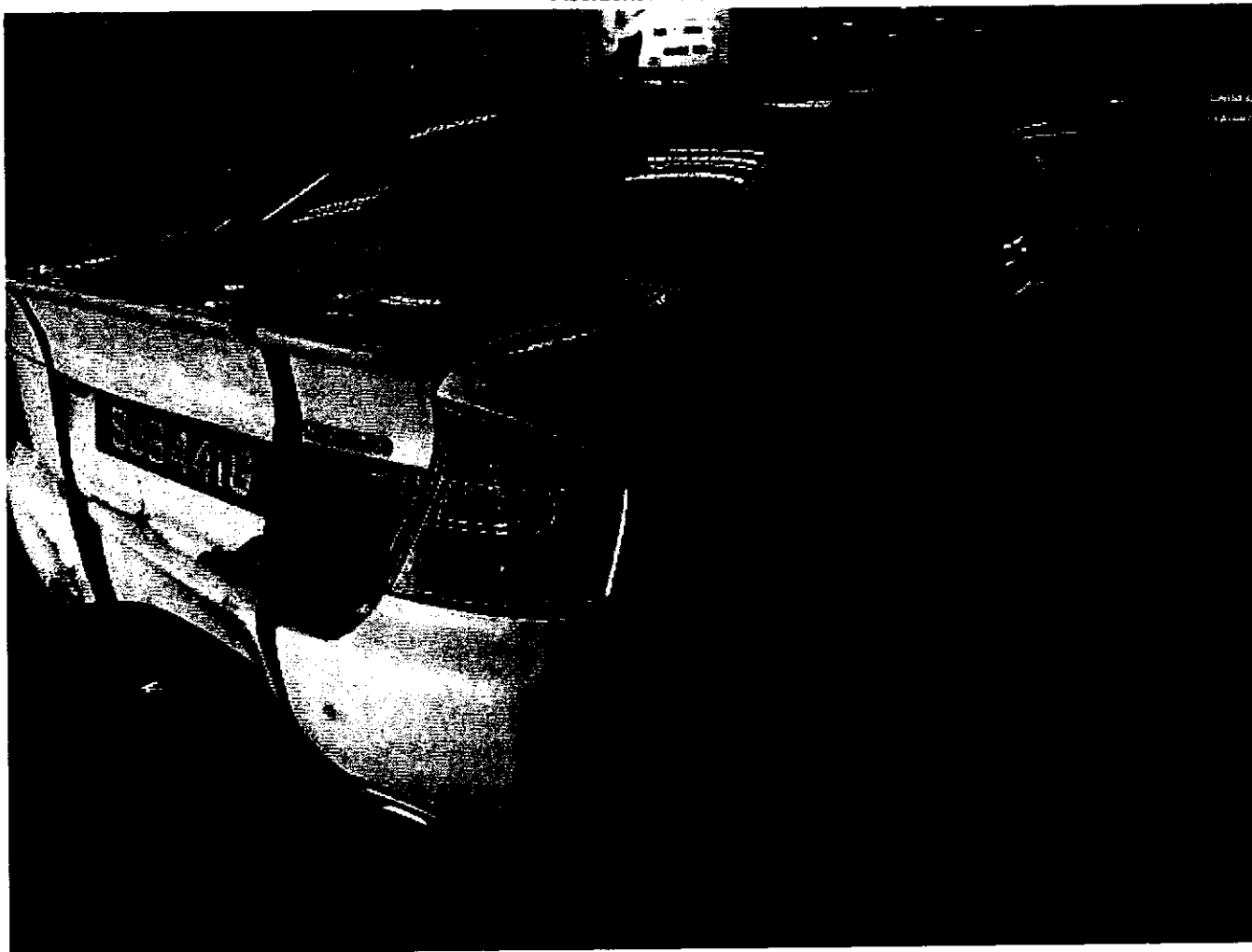
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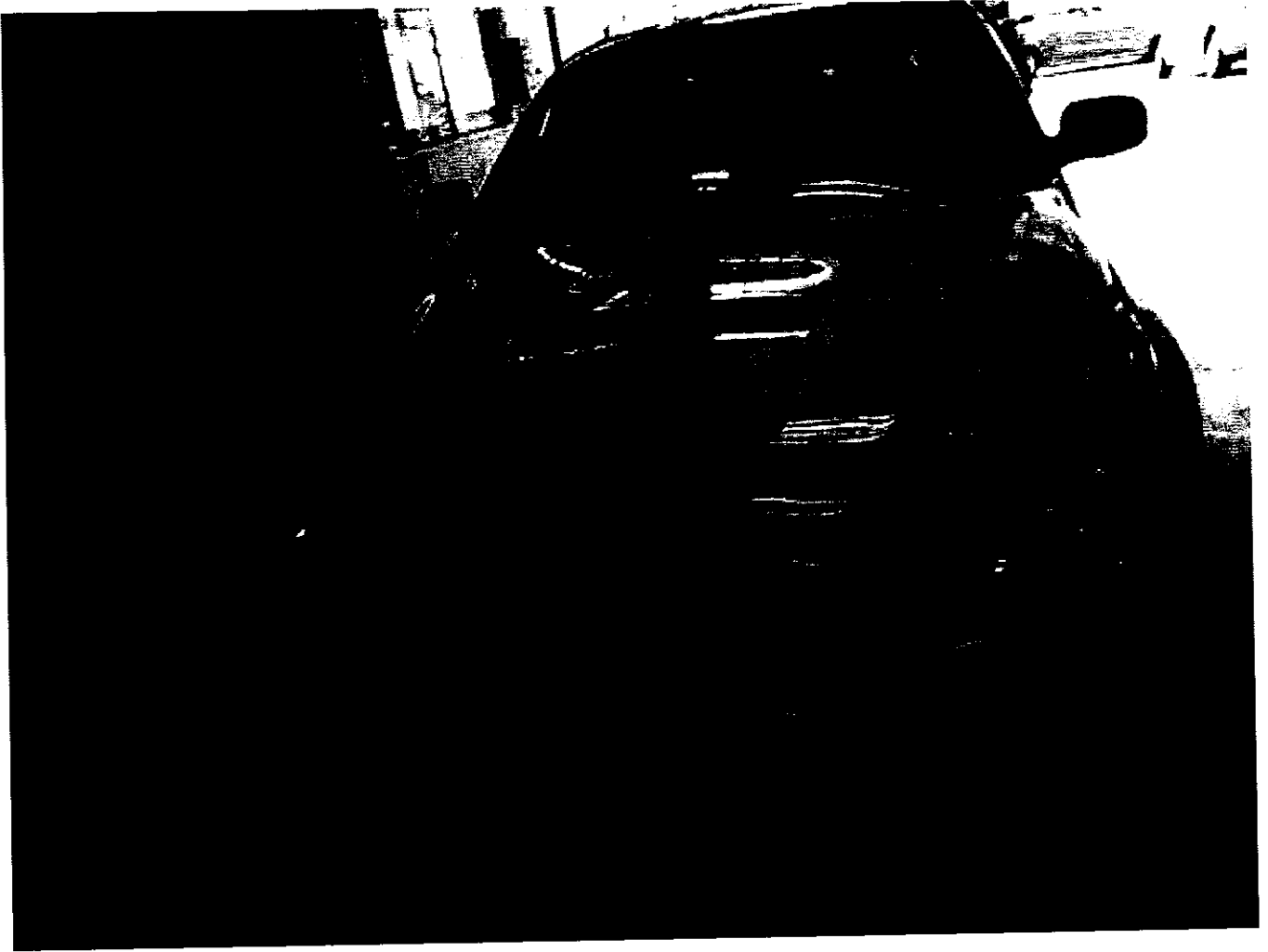
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Accident Photo



Accident Photo



Accident Photo



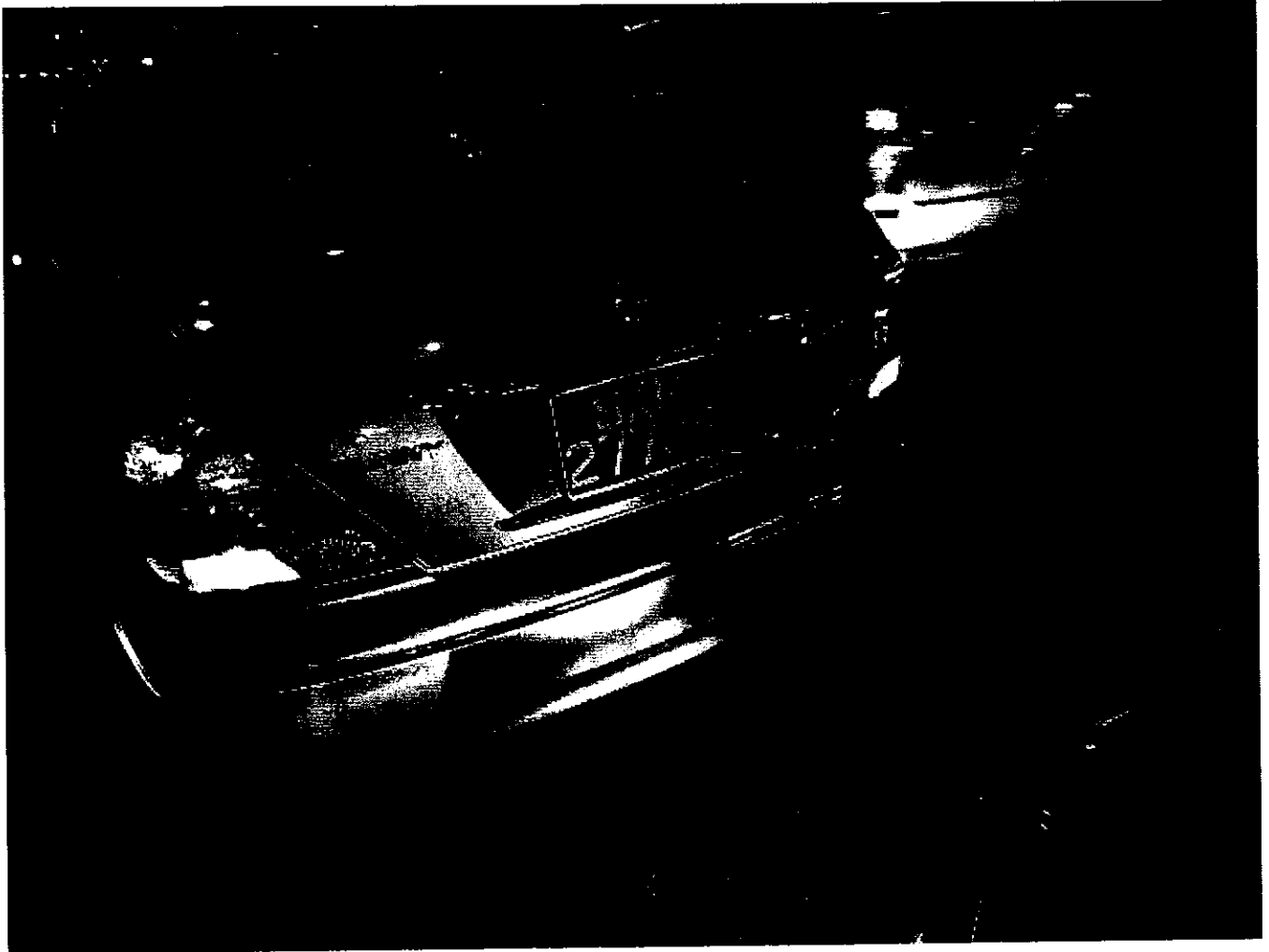
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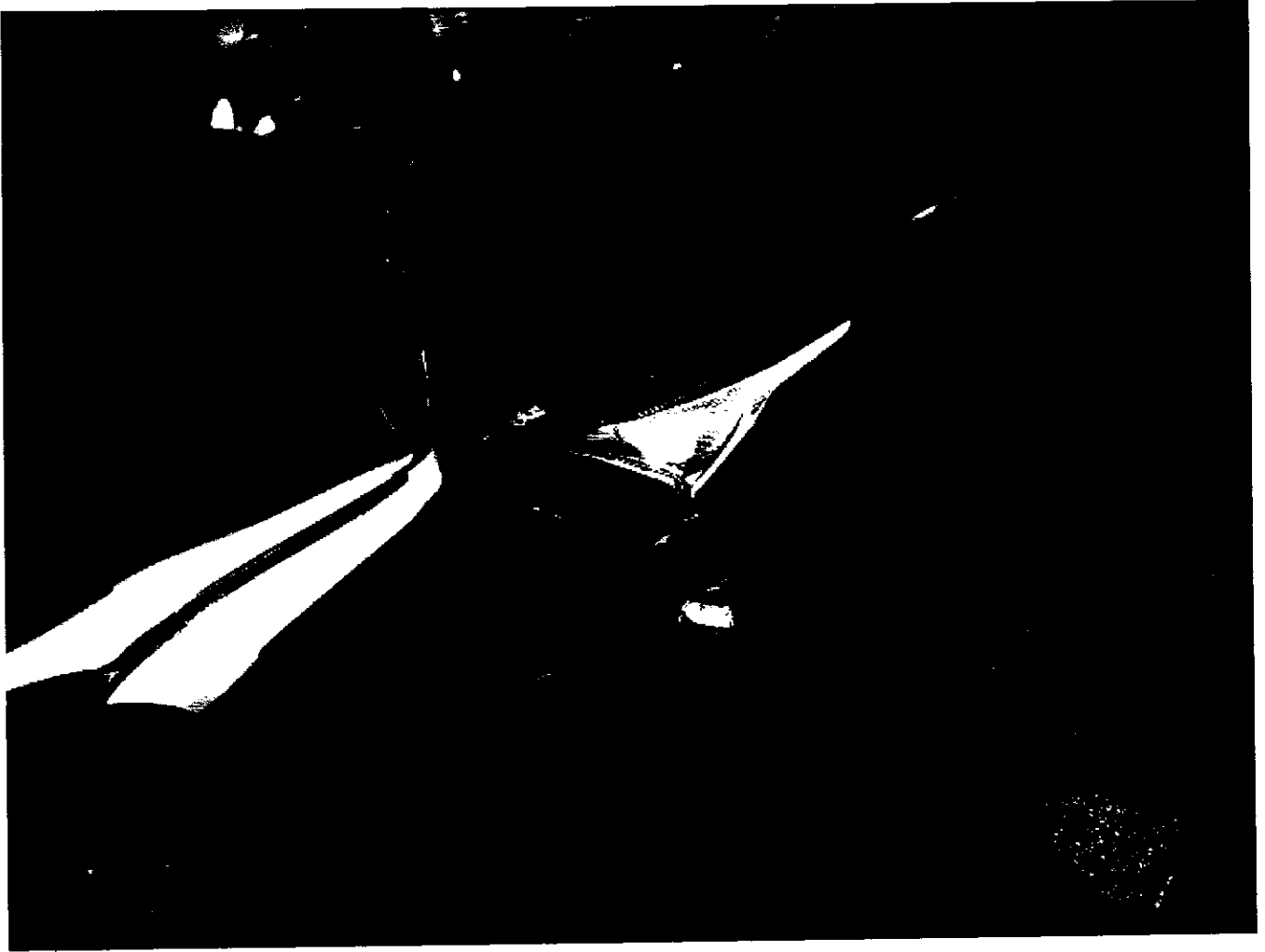
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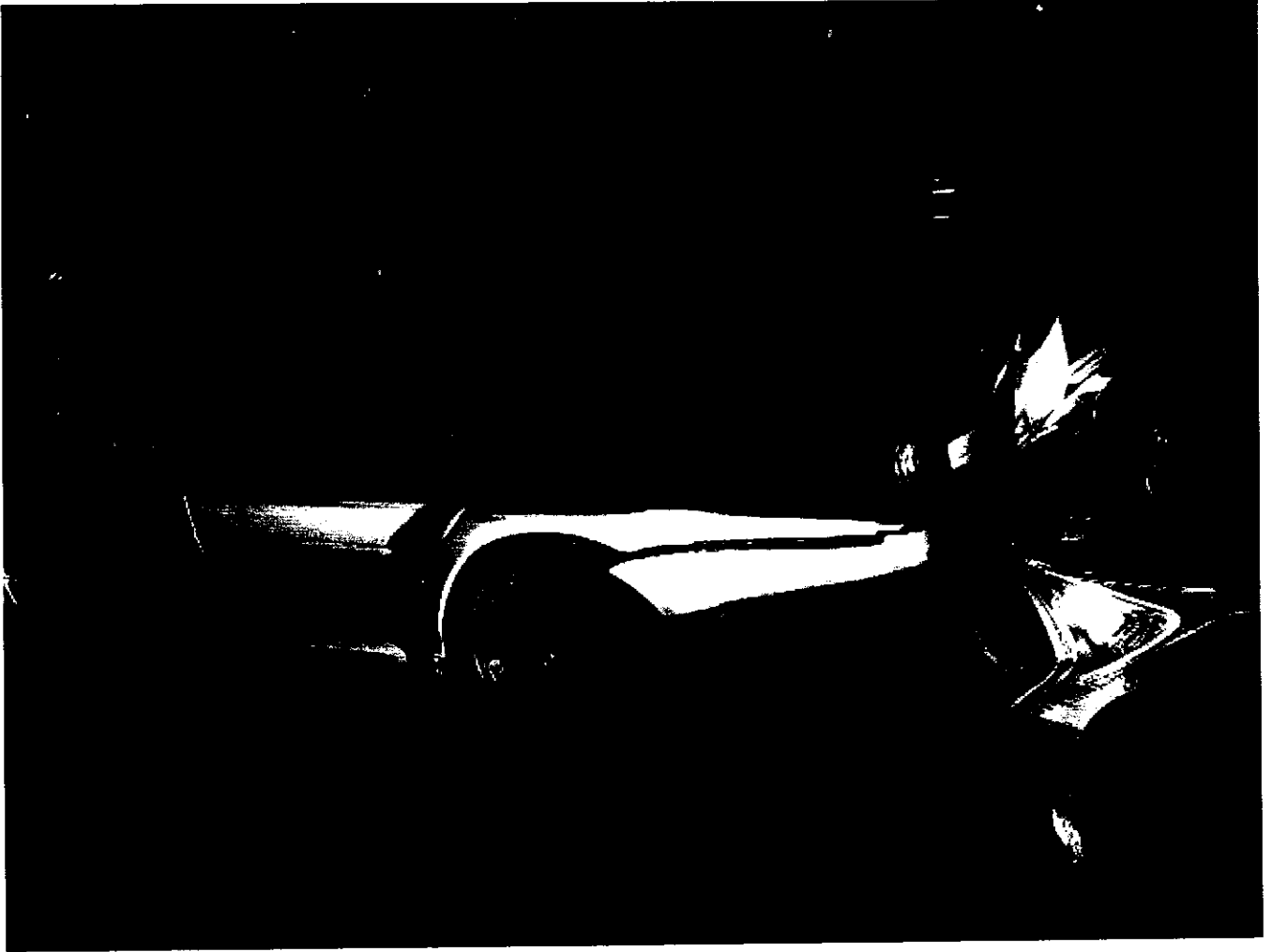
Accident Photo



Accident Photo



Accident Photo



Accident Photo



12150
10 days**Estimate**

14/08/2017

FIRST CAPITAL INSURANCE LTD
36 Robinson Road
#16-01 City House
Singapore 068877.

Page # :- 1

Veh # :- SJB441G

Veh Model :- SUBARU

Estimate# :- CK416239

Claim # :-

ACC. Date :- 10/08/17

Terms :- C.O.D Days

Remarks :-

Attention :- XA026

Main Office:
Mova Building
No. 22, Jalan Klang,
Singapore 159418
Tel: (65) 6476 3333
Fax: (65) 6271 6891
www.mova.com.sg

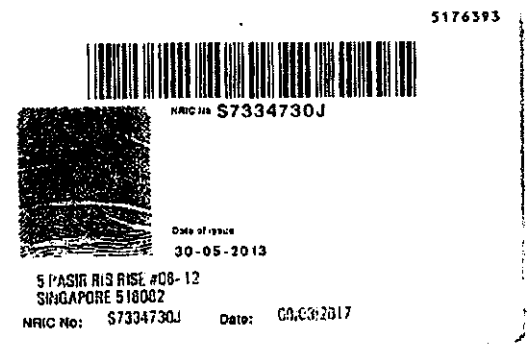
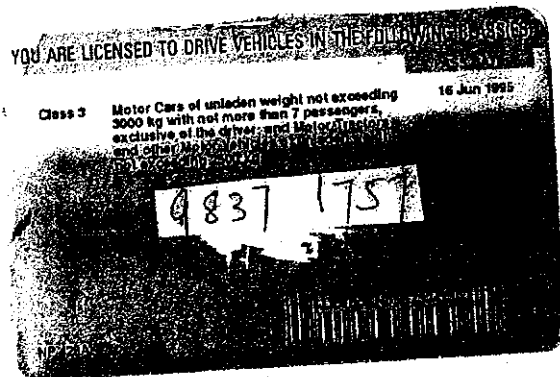
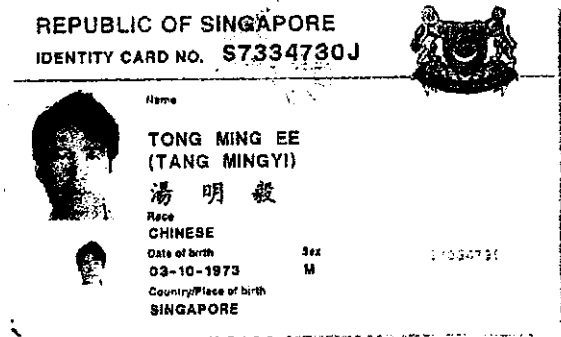
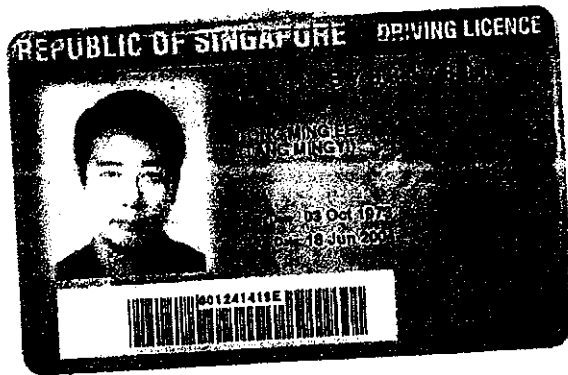
Workshop Dept:
Block 100B,
Bukit Merah Lane 3,
#01-04/05/08/94
Singapore 159722

Tel: (65) 6272 3892
Fax: (65) 6270 8314

Co. Reg. 198904033G
GST Reg. M2-0088864-2

No.	Description	Qty	U.Price	Amounts S\$
LIST ITEMS :				
1.	REAR BUMPER	1 PC	989.00	989.00 <i>del</i>
2.	REAR BUMPER BRACKET	2 PC	110.00	220.00 <i>del</i>
3.	REAR BUMPER TOP BRACKET	1 PC	195.00	195.00 <i>del</i>
4.	REAR BUMPER REINFORCEMENT	1 PC	395.00	395.00 <i>del</i> <i>photo</i>
5.	REAR BUMPER BRACKET	2 PC	130.00	260.00 <i>del</i>
6.	REAR BUMPER CLIPS	10 PC	5.00	50.00 <i>del</i>
7.	BOOT LID	1 PC	1,430.00	1,430.00 <i>del</i>
8.	BOOT LID LOCK	1 PC	295.00	295.00 <i>del</i>
9.	BOOT LID GARNISH	1 PC	689.00	689.00 <i>del</i>
10.	BOOT LID EMBLEM	1 PC	70.00	70.00 <i>del</i>
11.	BOOT LID HINGE COVER	2 PC	195.00	390.00 <i>del</i>
12.	TAIL LAMP LH-RH	2 PC	680.00	1,360.00 <i>del</i>
13.	TAIL LAMP PANEL LH-RH	2 PC	150.00	300.00 <i>del</i>
14.	REAR FENDER INNER TRIM	2 PC	495.00	990.00 <i>del</i>
15.	INNER TRIM CLIPS	20 PC	5.00	100.00 <i>del</i>
16.	END PANEL ASSY	1 PC	195.00	195.00 <i>del</i>
17.	END PANEL ASSY	1 PC	789.00	789.00 <i>del</i>
18.	TRUNK LID WEATHERSTRIP	1 PC	230.00	230.00 <i>del</i>
19.	SPARE TYRE BOARD	1 PC	495.00	495.00 <i>del</i>
LIST TOTAL S\$				9,442.00
20% DISCOUNT S\$				-1,888.40
SPECIAL NET TOTAL S\$				7,553.60
Supplementary Parts				
<i>1) Front Bumper = 495.00 - del</i>				
<i>2) Front No plate SIN-HO - ora</i>				
SPECIAL NET ITEMS :				
1.	REAR EXHAUST ASSY	1 PC	2,800.00	2,800.00 <i>del</i> <i>photo</i>
2.	REAR EXHAUST CHROME PIPE	2 PC	160.00	320.00 <i>del</i>
3.	REAR EXHAUST MOUNTING	4 PC	40.00	160.00 <i>del</i>
4.	REAR BUMPER BOTTOM LINE L/R	2 PC	150.00	300.00 <i>del</i>
5.	REAR BUMPER SIDE PROTECTOR	2 PC	150.00	300.00 <i>del</i>
6.	REAR NO PLATE	1 PC	50.00	50.00 <i>del</i>
7.	REAR PARKING SENSOR	1 PC	200.00	200.00 <i>del</i>
8.	ACCIDENT TOWING TO FAN YONG	1 PC	60.00	60.00 <i>del</i>
SPECIAL NET TOTAL S\$				4,190.00
LABOUR :				
TO INSPECT RR LIGHTING WATER & LEAKAGE TEST.				30 40.00
TO REMOVE & INSTALL REAR PARKING SENSOR.				30 50.00
TO REMOVE & RENEW REAR EXHAUST.				60 80.00
TO REMOVE & INSTALL REAR GARNISH, CARPET, & ETC IN ORDER TO CUT OFF END PANEL.				100 200.00
TO CUT OFF END PANEL, STRAIGHTEN BOTH SIDE REAR FENDER, FLOOR PANEL & AFFECTED AREAS & RENEW DAMAGED PARTS.				1000 1,200.00

To Repair Front portion \$400 \$200





Automotive Pte Ltd



Main Office:
Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel: (65) 6476 3333
Fax: (65) 6271 5891
www.mova.com.sg

Workshop Dept:
Block 1008,
Bukit Merah Lane 3,
#01-04/05/08/09
Singapore 159722
Tel: (65) 6272 3892
Fax: (65) 6270 8314
Co. Reg. 198904033G
GST Reg. M2-0088854-2

Estimate

14/08/2017

FIRST CAPITAL INSURANCE LTD
36 Robinson Road
#16-01 City House
Singapore 068877.

Page # :- 1 129095

Veh # :- SJB441G

Veh Model :- SUBARU

Estimate# :- CK416239

Claim # :-

ACC. Date :- 10/08/17

Terms :- C.O.D Days

Remarks :-

Attention :- XA026

No.	Description	Qty	U.Price	Amounts S\$
	TO APPLY BODY JOINT SEALANT ON CUTTING AREAS.			60.
	TO APPLY RUST PROOF ON AFFECTED AREAS.			80.00
	TO SPRAY PAINT ON REPLACED, REPAIRED AREAS.			80.
	TO SET VEHICLE ON CHASSIS BENCH IN ORDER TO CUT OFF DAMAGED PANEL, STRAIGHTEN.			150.00
				1,000
				1,300.00
				200
				300.00
				3,400.00
	LABOUR TOTAL S\$			

Supplementary labor spray paint
1) To spray paint front bumper, L/R door handle \$650

E. & O.E

NON-TAX AMOUNT S\$

AMOUNT S\$

GST @ 7 %

AMOUNT DUE S\$

15,143.60

1,060.05

16,203.65

Customer's Signature/Co. Stamp **MOVA AUTOMOTIVE PTE LTD**

P-8897
+ P-957 - Supply
P-9854
-208
P-7883.20
SN-4020.00
SN-40.00 - supply
LC-2560
LC-700.00 - supply
15,203.20
15,203.20
12,162.56

Tanah 97495749.
WP
15/8/17 @ 1715.
To check repair limit.
sur @ Likanto.
10 days.
lumpsum
Repair after repair

16,999.20



Main Office:
Mova Building
No. 22, Jalan Kilang
Singapore 158415
Tel : (65) 6476 3392
Fax : (65) 6271 5891
www.mova.com.sg

Workshop Dept:
Block 1008
Bukit Merah Lane 3
#01-04/06/08/94
Singapore 159722

Tel : (65) 6272 3892
Fax : (65) 6270 8314
Co. Reg. 198904033G
GST Reg. M2-0088864-2

SUPPLEMENTARY

FIRST CAPITAL INSURANCE LTD
30 ROBINSON ROAD
#10-01/02 ROBINSON TOWERS
SINGAPORE 048546.


Page : 1
Veh No : SJB4416
Model : SUBARU
Acc Date : 10/8/2017
Incharge : ALAN

No	Description	Qty	U.Price	Amt \$
	<u>LIST ITEMS:</u>			
1	FRONT BUMPER - <i>crack/deformed</i>	1	\$957.00	\$957.00 <i>del</i>
	LIST TOTAL S\$			\$957.00
	20% DISCOUNT S\$			\$191.40
				<u>\$765.60</u>
	<u>SPECIAL NET ITEMS:</u>			
1	FRONT NUMBER PLATE - <i>crack</i>	1	\$40.00	\$40.00 <i>cr</i>
	SPECIAL NET TOTAL S\$			<u>\$40.00</u>
	<u>LABOUR:</u>			
1	TO REPAIR FRONT PORTION			\$400.00 <i>200</i>
2	TO SPRAY PAINT FRONT BUMPER, L/R FRONT FENDER			\$650.00 <i>500</i>
	LABOUR TOTAL S\$			<u>\$1,050.00</u>

P-765.60
LC-700.00
SIN-40.00

NON-TAX AMOUNTS	\$1,855.60
GST @ 7%	\$129.89
AMOUNT DUE	<u>\$1,985.49</u>

Customer's Signature/Co. Stamp


MOVA AUTOMOTIVE PTE LTD

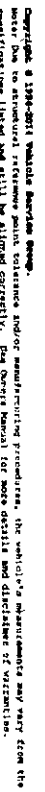


Date: August 30, 2017 Time: 11:30 AM

Vehicle.....: 2007-SUBARU-LEGACY-4DR AWD

Work Order # :: 20584

Odometer : 0






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/FCI17015748/T1tbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 20-03-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SH 8010B	Veh. Inspected	SJB 441G	
Policy No.		Coverage (\$)	0.00	
Claim No.	D17007839MFSH	Excess (\$)	0.00	
Assign From	MAY CHUA	Assign Date	15/08/2017	
2. Vehicle Particulars & Condition				
Make & Model	SUBARU	c.c	1994	
Engine No.	HIDDEN	Year of Reg.	2006	
Chassis No.	JF1BL5KV56G018776	Colour	WHITE	
Odometer	-	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/45 R18	YOKOHAMA	6 mm	
L/H Front Tyre	215/45 R18	YOKOHAMA	6 mm	
R/H Rear Tyre	215/45 R18	YOKOHAMA	6 mm	
L/H Rear Tyre	215/45 R18	YOKOHAMA	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	10/08/2017	Inspection Date	15/08/2017	
Survey held at	MOVA AUTOMOTIVE PTE LTD BLK 1008 BUKIT MERAH LANE 3 #01-04/06/08 SINGAPORE 159722			
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:		10 Working Days		



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJB 441G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	DEFORMED	989.00	989.00
2	REAR BUMPER BRACKET @\$110.00	NECESSARY	220.00	220.00
1	REAR BUMPER TOP BRACKET	BENT	195.00	195.00
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	395.00	-
2	REAR BUMPER BRACKET @\$130.00	NECESSARY	260.00	260.00
10	REAR BUMPER CLIPS @\$5.00	NECESSARY	50.00	50.00
1	BOOT LID	BENT	1,430.00	1,430.00
1	BOOT LID LOCK	BENT	295.00	295.00
1	BOOT LID GARNISH	CRACKED	689.00	689.00
1	BOOT LID EMBLEM	NECESSARY	70.00	70.00
2	BOOT LID HINGE COVER @\$195.00	DEFORMED	390.00	390.00
2	TAIL LAMP @\$680.00	N/S CUT / O/S CRACKED	1,360.00	1,360.00
2	TAIL LAMP PANEL @\$150.00	N/S BENT / O/S TO REPAIR SEE LABOUR	300.00	150.00
2	REAR FENDER INNER TRIM @\$495.00	TORN	990.00	990.00
20	INNER TRIM CLIPS @\$5.00	NECESSARY	100.00	100.00
1	END PANEL ASSY GARNISH	DEFORMED	195.00	195.00
1	END PANEL ASSY	BENT	789.00	789.00
1	TRUNK LID WEATHERSTRIP	TWISTED	230.00	230.00
1	SPARE TYRE BOARD	CRACKED	495.00	495.00
1	FRONT BUMPER (ADDITIONAL)	DEFORMED	957.00	957.00
	LESS 20% DISCOUNT		-2,079.80	-1,970.80
			8,319.20	7,883.20
SPECIAL NETT ITEMS				
1	FRONT NUMBER PLATE (SN) (ADDITIONAL)	CRACKED	40.00	40.00
1	REAR EXHAUST ASSY (SN)	BENT	2,800.00	2,800.00
2	REAR EXHAUST CHROME PIPE @\$160.00 (SN)	DENTED	320.00	320.00
4	REAR EXHAUST MOUNTING @\$40.00 (SN)	NOT NECESSARY	160.00	-
2	REAR BUMPER BOTTOM LINE L/R @\$150.00 (SN)	DEFORMED	300.00	300.00

Report Ref No. CS/FCI17015748/T1tbe2

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	REAR BUMPER SIDE PROTECTOR @\$150.00 (SN)	CRACKED	300.00	300.00
1	REAR NO PLATE (SN)	CUT	50.00	40.00
1	REAR PARKING SENSOR (SN)	NOT WORKING	200.00	200.00
			4,170.00	4,000.00
	LABOUR			
	ACCIDENT TOWING TO FAN YOUNG.		60.00	60.00
	TO INSPECT RR LIGHTING WATER & LEAKAGE TEST.		40.00	30.00
	TO REMOVE AND INSTALL REAR PARKING SENSOR.		50.00	30.00
	TO REMOVE & RENEW REAR EXHAUST.		80.00	60.00
	TO REMOVE & INSTALL REAR GARNISH, CARPET. & ETC IN ORDER TO CUT OFF END PANEL.		200.00	100.00
	TO CUT OFF END PANEL, STRAIGHTEN BOTH SIDE REAR FENDER, FLOOR PANEL & AFFECTED AREAS & RENEW DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF TAIL LAMP PANEL O/S.		1,200.00	1,000.00
	TO APPLY BODY JOINT SEALANT ON CUTTING AREAS.		80.00	60.00
	TO APPLY RUST PROOF ON AFFECTED AREAS.		150.00	80.00
	TO SPRAY PAINT ON REPLACED, REPAIRED AREAS.		1,300.00	1,000.00
	TO SET VEHICLE ON CHASSIS BENCH IN ORDER TO CUT OFF DAMAGED PANEL, STRAIGHTEN.		300.00	200.00
	TO REPAIR FRONT PORTION. (ADDITIONAL)		400.00	200.00
	TO SPRAY PAINT FRONT BUMPER, L/R FRONT FENDER. (ADDITIONAL)		650.00	500.00
			4,510.00	3,320.00
GRAND TOTAL			16,999.20	15,203.20

RECOMMENDED COST OF REPAIRS			12,150.00
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Report Ref No. CS/FCI17015748/T1tbe2

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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