SULVEYOF:	Rusul	ASSIGNM	ENT (Office)				F of
Melimen From (Person)	: Lynn Khong	of	AXA	Da	te/Time: _	78092017	5.06pm
Estimated Cos	t		Bill to:				
To Inspect Ve		SJK 276B	CS	Insured:			
at Workshop r	m/s	(omfut Delgro		Tel:	F383	6918	
of		45 Pandan	Road				
Policy No:	VAI / GA 26	1084	Claim No: _	C	4531	7	
Sum Insured:			Excess:	NIL			
Personal Conditions						20 00 20	-
Make of Veh:				D.	O.A	25.09.201	14
CA / REV	d) / REP. / REV 24	HRS	05-10-2017 @ Tiagg	after qui	M H.O.D. End	orsement:	+
CA / REV	Action/Instruction	Person Contacted  1 ( ✓ ) Estima	Tiaga -	after qui	M H.O.D. End	orsement:	14
CA / REV	Action/Instruction	4am Person Contacted  ( V ) Estima  X V	te  Khong via	Vel	M.O.D. Endo	OUT)	
CA / REV Date/Time: Date/Time	Action/Instruction  ACTION	Ham Person Contacted  (V) Estimate  X V  OSED to Lynn  onto med we	te  Khong via	Vel	M.O.D. Endo	OUT)	
CA / REV Date/Time: Date/Time	Action/Instruction  Action/Instruction  JK JHB  131M re  131M re  131M re  (Ned b)	4am Person Contacted  ( V ) Estima  X V	te  Khong via	Vel	M.O.D. Endo	OUT)	

#### 98694 ASSIGNMENT Date 5/10/17 Ven No SJX 276B Yr Regn 2010 / May Estimated Cost Type M.Cer / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / OD TP / WS / TP RES / OD RES / EVA / INV / MV Truck / Trailer or a inspect Venicle No. SIX 276B TOYOTA PREMA 8 FEATER == 2362 WHITE AC Insured / Std / N/ / NA Sp Reading T Radio Insured / Std / NI / NA insured Eng No Policy No. CNo JTEG 052 MOOT 087420 Clams No Gen Cond Good / Fell Poor / Burnt NIL Steering Morder / Jammed / Leaked / Burnt or Excess (Client's Record) Brake norder / Jammed / Leaked / Burnt or Make of Veh Mod Nil / BIRIN / STD A/Rim or (Policy Condition) . . Remark. The veh had commenced its NS 08 BS / PUNJ EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / repair at the time of inspection. TOYO / YOKO or 8al or Market Value 54K Front DAC Accident Roort Consistent? Yes or No GIA PR Seen Consistent? . Yes or No Est Repairs O days Res Yes or No DOA 28/08/17 Lum Sum -3 Val. Yes or No. CA) | REV | REP. | 24 HRS Des of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or Yenicle IN/OUT OS FRI Person Contacted The U/C / Chassis frame / Body Structure affected due to collision Date Time . Agtion Instruction

RECEIVED 1 1 DEC 2

1/15/501) July 18

CateTime Fie Pass to? : Preli. Report	Day	s Of Repair: 2		
Date Title Fie Return 107	Res	urvey No. of Trip;	Survey Fee	100
3.	Add Fee:	Site Insp (\$	Franscortation  5 + RS/S	
Report Format: (MEX-10)	1,777. 12	Interview (\$ Tech Invs (\$	) Protos	
Lump Sum / I.B.H. (S <sup>1</sup> -B. 580		.Weekend (\$	) Others	
			TOTAL	11/1



# 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

ΔΥΛ	INCLIDANCE	Affiliated to Federation Intern	ationale Des Experts En Aut	omobile		
AAA	INSURANCE F	TE LTD	Ref : CS/AXA17018632/R1qb			
8 SH AXA	ENTON WAY # TOWERSINGA	24-01 PORE 068811	Date: 28-09-2017 Code: AXA2			
1.		Policy Partic	ulars :- OWN DAMAGE			
	Insured Veh.	, oney raine		The latest the second		
	Policy No.	VA1/GA261084	Veh. Inspected Coverage (\$)	SJX 276B		
	Claim No.		Excess (\$)	0.00		
	Assign From	MERIMEN (LYNN KHONG)		0.00		
2.			Assign Date	28/09/2017		
	Make & Model	venicie Par	ticulars & Condition			
	Engine No.	HIDDEN	c.c	0		
_	Chassis No.	THOOLIN	Year of Reg.			
_	Odometer		Colour			
_	Brakes		Steering			
-	General		Modification			
1600						
T		Size	tions of Tyres			
F	R/H Front Tyre	3128	Make	Balance		
_	JH Front Tyre			mm		
_	R/H Rear Tyre			mm		
	/H Rear Tyre			mm		
				mm		
		Descripti	on of Damages			
HI IS	rather the Control					
A	ccident Date	25/09/2017 Genera	I Information			
-	urvey held at		Inspection Date	28/09/2017		
	vy mena at	COMFORTDELGRO ENGINEER 45 PANDAN ROAD SINGAPORE 609286	RING PTE LTD			
et le	STREET, STREET		emarks			

Policy Type OD / TP / TP RES / TL / EVA Case Handler -): Case handler to make sure all Information created by the assignment team are ACCURATE. Admin ( N-Date Y-Date N-Date Y-Date (1) Office Assign Form Reference No. C Customer Code C Assign From Ν C Assign Date Veh No (Inspected) C Veh No (Insured) C D.O.A C C Policy No C Claim No Insurance Authorisation (CA /REV/REP) C Report Type C C Weekend Charges Survey held at/Repairer N C Excess ): Case handler to make sure the surveryor completed all required information. Surveyor ( Keyu ) (1) Assignment Form Vehicle No C Regn Month/Year C Vehicle Type N . Make & Model N Engine Capacity. (C.C) C N Colour Odometer. (Sp.Reading) Chassis No General Condition N Steering N Brake N Modification (Modi) N C Tyre Size Tyre Make N Tyre Balance C Date of Inspection C Survey held N Des.of Damages N (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form ALL Parts condition N Market Value for OD cases C Estimate Repair Cost for PRI (RSI, TMI, MSIG) C Days of repair C Finalised Amount C Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo Uploaded Check By:

Survey Department Check List (Case Handler)

ase Handler

# ...CLAIM SUBFOLDER...(New Assignment)

AA (AXA Assistance)

Case	Notified	Est Submitted	Ad) Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status		
Main	28 Sep 2017 10:02 Sendback Est	28 Sep 2017 14:31 \$\$880.00	28 Sep 2017 17:06 Assign				New Assignment Cancel Case		
	Main	Refere	nce	Claim	Details	Documents	Show All		
4	SUBFOLDER DET			oncou Tal	: +6594245182, E	mail: NOEMATI			
Insured:		SUZANNE HOPKI	NSON, ID: G332			25/09/2017 00:	nn . ·59		
Vehicle F	Reg. No.:	SJX276B			0.000				
Claim Ty	pe:	OD			y/Cover Note No.	5\$0.00	(Comprehensive)		
					Excess: 5\$0.00 andan) 45 Pandan Road, 609286 Eunos - Tel: 6338 8778				
Repairer		ComfortDelGro E	ngineering Pte L	ta (Pandan)	(Unadled by Lynn	Whom - 6990 499	21		
-	Insurer:	AXA Insurance P	te Ltd (HQ) - Tel	: 6338 /288	[Handled by Lynn	Khong - 6880 489	171		
Adjuster					329869U, Tel: +6	tpt due 09/10/20	1/1		
	Custodian:	OD Xs NIL	SON (42 / Ferriale,	, MAIC. GO	3230030, 101. 10	331210200			
Adj Asg.	Remarks:	OD XS NIL							
ASSOCI	ATED MAIL REC	EIVED				View All	Compose Case Mail		
There are	e no mail for this c	ase.							
E ALL ASI	SOCIATED TASK	s			View All   Search	n Tasks   Create	New Task   Complete		
			p Subject	Handler	Assigned By	Completed On	Created On Done		
No result		Type Task Grou	ap Subject		girica sy		2000 A 187		

## Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Thursday, 7 December, 2017 11:31 AM

To:

'CDGE Pandan Private Cars Crash Repair Counter'

Cc:

SUR

Subject:

RE: FINALISATION OF VEHICLE SJX 276B

Dear Mr Theaga,

Confirm final fig \$580.00 before GST and 2 repair days.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CDGE Pandan Private Cars Crash Repair Counter [mailto:pandan\_cr@sparkcarcare.com]

Sent: Thursday, 7 December, 2017 8:28 AM

To: Shiau Chan (LKKAuto) <siewsc@lkkauto.com>
Subject: Re: FINALISATION OF VEHICLE SJX 276B

Morning Shiau Chan,

As requested, attached for your reference.

Thank you,

Best Regards,

Theagarajan Muniandiy

ComfortDelGro Engineering Pte LTD 45 Pandan Road Singapore 609286

Tel: (65) 6867 6918

From: "Shiau Chan (LKKAuto)" < siewsc@lkkauto.com>
To: "pandan\_cr@sparkcarcare.com" < spandan\_cr@sparkcarcare.com" < spandan

"pandan\_cr@sparkcarcare.com" <pandan\_cr@sparkcarcare.com>,

Date: 04/12/2017 12:07 PM

Subject: FINALISATION OF VEHICLE SJX 276B

Dear Mr Tiaga,

Kindly advise the status of SJX 276B.

#### Note: This document has not been finalised.

## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To:

Attn:

AXA Insurance Pte Ltd

8 Shenton Way #24-01

**AXA Tower** Singapore 068811 From: LKK Auto Consultants Pte Ltd

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

Lynn Khong

06 Oct 2017 Date:

## **Preliminary Advice**

Vehicle No

: SJX276B

Accident Date

: 25/09/2017

Make Assignment Date : TOYOTA PREVIA

Policy No.

: VA1/GA261084

: 28/09/2017

Excess

: \$\$0.00

Date of Inspection

: 05/10/2017

Est. Duration of Repair

: 2.00

Inspection At

: COMFORTDELGRO ENGINEERING PTE LTD (PANDAN)

45 PANDAN ROAD

SINGAPORE 609286

## Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	880.00
Revised Amount	:S\$	580.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	580.00

:S\$ Lump Sum Repair

#### Total Loss Consideration

New for Old Value :S\$

Pre-Accident Value :S\$ 54,000.00 COE / PARF Rebate :S\$ 30,870.00

Salvage Value

Margin for Repair :SS 23,130.00

:S\$

#### Remarks

4	44 6	그렇게 하는 이 어린 가입을 되었다면 하면 하는데
1	X )	The vehicle is repairable at our adjusted amount.

The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.

Other comments: WE HAVE AUTHORISE REPAIR ON 05/10/2017 AT 11am.

Text size + -

## Enquire PARF/COE Rebate for Registered Vehicle

#### Vehicle Owner Particulars

Owner ID Type:

Foreign Identification Number

Owner ID:

9869U

Vehicle Details

Vehicle No.:

SJX276B

Vehicle to be Exported:

Intended De-registration

06 Oct 2017

Date:

Vehicle Make:

TOYOTA

Vehicle Model:

PREVIA 8 SEATER

Primary Colour:

White

Manufacturing Year:

2010

Engine No.:

2AZH483845

Chassis No.:

JTEGD52M007087420

Maximum Power

Output:

125.0 kW (167 bhp)

Open Market Value:

\$35,039.00

Original Registration

10 May 2010

First Registration Date:

10 May 2010

Transfer Count:

1

Actual ARF Paid:

\$35,039.00

#### Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry

Date

09 May 2020

PARF Rebate Amount:

\$21,023.00

## Intended COE Rebate Details

COE Expiry Date:

09 May 2020

COE Category:

B - Car (1601cc & above)

COE Period(Years):

10

QP Paid:

\$38,000.00

COE Rebate Amount:

\$9,847.00

Total Rebate Amount: \$30,870.00

01000100000000000

The information contained herein is correct as at 06 Oct 2017

OK

Land Transport Authority

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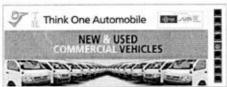
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Tags: 2010 Toyota Previa, 2010 Toyota Previa, Toyota Previa, Toyota Previa, Toyota, Previa, Previa, Used Posted: 24-Aug-2017 Toyota



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## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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.

Any false reporting may be referred to the Police for investigation.

- 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	28/09/2017 09:34		
Date Of Accident	25/09/2017 00:00		
Exact Location Of Accident	TURF CLUB ROAD		
Country/State of Loss	SINGAPORE		

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJX276B	
Insured/Policyholder		
Name Of Registered Owner	SUZANNE HOPKINSON	
Passport No/FIN	G3329869U	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-94245182	
Alternative Phone No	OTHERS-94245182	
Vehicle Particulars		
Manufacturer	TOYOTA	

Manufacturer	1010111
Model	PREVIA-2.4 7-SEATER (A)

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

Are you claiming under your own insurance policy YES for repair to your vehicle?

If No. Please state action to be taken

Vehicle Category	PRIVATE CAR

## Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number VA1/GA261084

Cover Note Number

#### Driver

Name of Driver SUZANNE HOPKINSON

 Passport No/FIN
 G3329869U

 Date Of Birth
 03/12/1974

 Occupation
 INDOOR

 Date Of Driving Pass
 01/05/1992

Driving Experience 25 YEARS AND 4 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-94245182

Fax Number

Contact Number OTHERS-94245182

EMail Address NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

22

Insurance Company of Driver's Own Vehicle

184

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

6

Number of Passengers (Including Driver)

0

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

**BUKIT TIMAH NPP** 

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

UNKNOWN

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.
- The Form must be completed by the Policyholder and/or the Authorised Driver
- information provided most 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.
- 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.
- By the lodgment 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)

Lunderstand, acknowledge, agree and consent that.

- 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" i, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
  - (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")
- 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
- 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, Investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature.

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name

NRIC/FIN Na.

SKETCH PLAN

Do Hetch Man

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Mark V	is dep chalacter met	poort
A		111
		T

## DECLARATION

I/We declare the foregoing particulars are true in every respect

Potryholder's Signature Dever's Signature
One & Time (If driver is not the

9 - Draw Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.



## redefining / insurance



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MANIGSACA DIRECT-MECIETO / 15896

your servicing distributor contact

SUZANNE HOPKINSON 10 GARLIC AVE SINGAPORE 279642

Policy Schedule

Your SmartDrive Comprehensive Essential+

Your policy snapshot

Policyholder name

SUZANNE HOPKINSON Comprehensive

Policy number

VA1 / GA261084 G3329869U

Cover Period of Insurance

FIN / NRIC from 26/08/2017 to 09/11/2018 (both dates inclusive)

Premium breakdown

Gross Premium after 50% NCD

7% GST Final Premium SGD 1,142.77 SGD 79.99 SGD 1,222.76

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential + Benefits

24/7 Towing & Transportation in Singapore or Oversees

Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 dash reward with no excess .

Rusranteed Repuirs for twelve (22) Months

Loss or Damage

Legal Liability

Medical and dental expenses up to \$1,000 per person for you, your named drivers and your immediate family members

Delivery of repaired car to your preferred location

Daily Transport Allowance of \$100 for a maximum of ten (10) days

Reimbursement of 110% of your car's market value in the event of total loss (without Basic Own Damage Excess)

Claim Protector Pack Benefits

Basic own damage excess waiver

No Claim Discount Protector

#### Vehicle details

Make & Model of Vehicle

Vehicle registration number Body type

Seating capacity (excl driver)

Off-Peak car

TOYOTA PREVIA 2.4

SJX276B MPV

No

Year of manufacture

Type of Use Engine capacity (c.c.) Engine number

Chassis number

2010

Private use 2362

2AZH483845 JTEGD52M007087420

Insured's Estimated Market Value Limitation to use

Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts)

As per Certificate of Insurance

NII

Excess applicable (refer to Policy Wording for other applicable Excesses)

Windscreen Excess.

Not Applicable .

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower,

1 of 2





Police Station Of Origin: Bukit Timah NPP

1 Toh Yi Drive #01-139 SINGAPORE 591501

Tel No: 1800-4689999

1 of 4

Report No. T/20170925/2154

		CACCIDENT				
Date/Time Report Made: 25/09/2017 19:07			Vide Report No.:	Station Diary No 34		
Informan	t's Partic	ulars		(1) B 表 图 2 图 4 图 8 图 8 图 8		
Name of Informant: HOPKINSON SUZANNE JAYNE			Address: APT BLK 8 MARINA BOULEVARD #23-00 MARINA BAY FINANCIAL CENTRE SINGAPORE 018981			
ID Type / ID No.: FIN NO / G3329869U			Contact No.: Home/Office:	ct No.:		
Nationalit BRITISH	y:		Email:			
Sex: Age: Date of Birth: Female 42 03/12/1974			Type of Informant: Owner of the vehicle.			
Race: Caucasian			Language:	Institution / School Name:		
Occupation: Housewife			Driving Licence Information Class: 3	n: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/09/2017 00:00	Type of Location Road side
Location: Along Road 1 TURF CLUB  At the road s	ROAD	Road Surface:		and Spand Limit
Weather:		Dry	K	oad Speed Limit:
Clear				
Clear Traffic Flow: Two Way		Traffic Control: Not Controlled	11.7	raffic Volume: o Traffic

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJX276B	Car	TOYOTA	PREVIA 8 SEATER	White	Slightly Damaged	0

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SJX276B	AXA INSURANCE SINGAPORE PTE LTD	GA261084	26/08/2017	09/11/2018		





Police Station Of Origin: Bukit Timah NPP 2 of 4 Report No. T/20170925/2154

1 Toh Yi Drive #01-139 SINGAPORE 591501

Tel No: 1800-4689999

CONTINUATION OF REPORT

Any Pedestrian In	nvolved: No				
No. of Pedestrian	s Injured: NIL	Use of Pedestrian Crossing: NA			
Driver		and the second	A REELS		
Name	JAMES HOKINSON	1	D No.		G3327977P
Related Vehicle	SJX276B (Car)		Contact No.		91448710
Hospital/Clinic	NIL		Class of Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discha	arge	NIL	
	ted Medical Leave NIL	Degree of Ir	njury	NIL	
Owner of the veh	icle				
Name	HOPKINSON SUZANNE JAYNE		D No.		G3329869U
Related Vehicle	SJX276B (Car)	(	Contact No.		94245182
Hospital/Clinic	NIL		Class of Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discha		NIL	
No. of Days gran	ted Medical Leave NIL	Degree of Ir	njury	NIL	## 508-WES (#WESSE)

#### Brief Details.

On 25/09/2017 at about 1600hrs, I was at the Shell petrol kiosk along Bukit Batok Rd to buy some stuffs. After which, when I returned to my car and I discovered a dent on the front right side of my car and I thought that other vehicle had hit my car and driven off. When I made a check with the staff there and they assisted me to check their CCTV camera and I was informed that when I driving in the petrol station my car front right portion of the car already dented.

I believe that the accident may occurred on 24/9/2017 at about 1050hrs, when my husband driven my car from home to the Turf City. And it could be at the Fairway Drive where he parked the car along the road side at about 1100hrs.

At about 1230hrs, when he returned to his car and driven back home. However, he does not aware about the dent of my car during that period he was using. He mentioned to me that he does not sure whether there is any CCTV camera at the Turf City where he parked the car.

This is the first time incident happened.





Police Station Of Origin: Bukit Timah NPP

Report No. T/20170925/2154

1 Toh Yi Drive #01-139 SINGAPORE 591501

Tel No: 1800-4689999

CONTINUATION OF REPORT

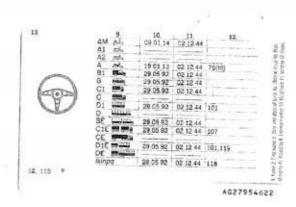
#### Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

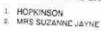
Signature Of Officer Recording The Report: D / Sgt 3 ZAMBREE BIN SA'AT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 25/09/2017 19:07
Officer In Charge Of Case: TP / HRT / SI TAN LEE HWANG DAWN Contact No.: 65476215	Classification Of Case:
Authentication Stamp NP168	

Ą





## DRIVING LICENCE





3 03 12 1974 NJRELAND 4a 09 01 2014 45 08 01 2024 46 DVLA 5 HOPKI7620345 J9GG 46

8 BEECH HOUSE, THE WARRIEN, ASHTEAD, KT21 25N

O JUNZA

9 AM/A/81/8/C1/D1/BE/C1E/D1E///A//n/p/g

# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES).

EFFECTIVE DATE

Class 3 Motor cars with unladen weight =< 3000kg with =< 7 12 Jun 2017 passengers, exclusive of divers and other motor vanicles with unladen weight =< 2500kg

NP 428A





















number of man

ComfortDelGro Engineering Pte Ltd (Co. Reg. No: 199508048W)

45 Pandan Road Singapore 609286

Tel: 6338 8778 Email: denisteo@cdge.com.sg

INSURER:

AXA Insurance Pte Ltd (HQ)

PARTICULARS OF CLAIM

Claim Type: Policy No:

OD (OWN DAMAGE)

VA1/GA261084

Ref. No:

Date of Loss: 25/09/2017

Vehicle Reg. No.: SJX276B

Driveable?

Driver Age/Info: 42 / FEMALE

Party At Fault: Third Party

UNKNOWN YES

TP Injury

NO

Involved?

Involved?

Driver:

+6594245182

Insured/Claimant: SUZANNE HOPKINSON

SUZANNE HOPKINSON

Contact No:

Make/Model:

TOYOTA PREVIA, 2.4 8-SEATER (A)

Vehicle Reg. Date: 10/05/2010

Vehicle Colour:

PEARL WHITE 2AZH483845

Chassis No:

JTEGD52M007087420

Engine No: Odometer:

0 KM

Paint Type:

Total Loss?

NO

Est. Duration of

Repair (day)

90010068

Description of

HIT AND RUN

Accident/Loss

Present Location: COMFORTDELGRO ENGINEERING PTE LTD (PANDAN)

COST OF CLAIMS		Amount
Parts	4	180.00
Miscellaneous Items		0.00
Labour		700.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	880.00
	+ GST 7.00% (S\$)	61.60
	Nett Amount (S\$)	941.60

This claim is handled by: THEAGARAJAN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

## REPAIR DETAILS

## Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 28 Sep 2017)

Parts:

M1-MPV

TOYOTA PREVIA 2.4 8-SEATER (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SJX276B/28/09/2017 14:31

Validity:

These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk \*.

Estimates on Parts

Amount %Depr %Disc No. Qty Part No. **Particulars** \*180.00 F\$4/ 0.00 0.00 \*FENDER RHF 180.00

Total Parts (S\$)

F=Franchise part.

ComfortDelGro Engineering Pte Ltd/SJX276B/28/09/2017 14:31. Not valid without Reference section. Generated using Merimen e-Claims IEAS

## Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Lab</u> 1 2	TO REMOVE AND REFIT DAMAGES PART TO PUTTY AND SPRAY FRONT BUMPER AND FENDER RHF	New New	300.00 200 400.00 200
		Gross Labour Cost (S\$)	700.00

ComfortDelGro Engineering Pte Ltd/SJX276B/28/09/2017 14:31. Not valid without Reference section. Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Resured

Res

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:

## Finalize form

# ComfortDelgro Engineering Pte Ltd 45 Pandan Road S 609268

Tel: 68676919 Fax:62626950

Amended Finalization Form

Cost Price       :\$	Bill To :	AXA INS	Vehicle No. :	SJX27	6B
Discount / Plus   S	Attention :	Mr. Rasul		DOA @ 25/	09/2017
B. Nett Price :\$				:\$_	180.00
Discount / Plus :\$	0% Disc	ount / Plus		:\$_	
C. Special Nett  D. Labour  Finalized Total:  \$ 400.00  Finalized Total:  \$ 580.00  E. Lump Sum (less 20 %)  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	B. Nett Price			:\$_	
D. Labour :\$ 400.00  Finalized Total: :\$ 580.00  E. Lump Sum (less 20 %) :\$ :\$  F. Less Excess :\$  Total Amount: :\$ 580.00  N.B. If we DO NOT receive your reply within 2 weeks, we shall treat the above finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017	Disc	ount / Plus		:\$_	<u> </u>
Finalized Total: :\$ 580.00  E. Lump Sum (less 20 %) :\$ :\$ :\$  F. Less Excess :\$ Total Amount: :\$ 580.00  N.B. If we DO NOT receive your reply within 2 weeks, we shall treat the above finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017	C. Special Nett			:\$_	
E. Lump Sum (less	D. Labour			:\$_	400.00
F. Less Excess  Total Amount::\$ 580.0  N.B. If we DO NOT receive your reply within 2 weeks, we shall treat the above finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017			Finalized Total:	:\$_	580.00
Total Amount:: \$ 580.0  N.B. If we DO NOT receive your reply within 2 weeks, we shall treat the above finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017	E. Lump Sum (le	ss%)		:\$_	-
Total Amount:: \$ 580.0  N.B. If we DO NOT receive your reply within 2 weeks, we shall treat the above finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017				:\$_	
N.B. If we DO NOT receive your reply within 2 weeks, we shall treat the above finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017	F. Less Excess			:\$	
finalized amount as confirmed & correct.  Remarks: Please confirm & revert by fax. Thanks  Submitted By / Date: M.THEAGARAJAN 24/10/2017			Total Amount :	:\$	580.00
Submitted By / Date : M.THEAGARAJAN 24/10/2017	N.B. If we DO N	IOT receive your rent as confirmed & c	ply within 2 weeks, we sh orrect.		
	Remarks : Plea	se confirm & revert by	fax. Thanks		
Confirmed By / Date :	Submitted By / D	ate: M.THEAG	GARAJAN 24/10/2017		
	Confirmed By / D	Date:	ear realization		

# ComfortDelGro Engineering Pte Ltd

SPARK! CAR CARE

ComfortDelGro Engineering

COMPANY REG. NO. 199506048W

8042547

COMPANY AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01 SG 068811

CONTACT NO:63387288

TAX INVOICEO

SJX 276B

MAKE TOYOTA

MODEL PERVIA

DATE/TIME IN 14.10.2017 09:20 INVOICE NO. /DATE 91342696 25.11.2017

JOB NO. 305080379

ODOMETER READING

DATE/TIME OUT 24.10.201711:03

S/NO	DESCRIPTION	QTY	UNIT PRICE (S\$)	DISCOUNT	NET PRICE (S\$)
01	FENDER RHF	1 PC	180.00	NA	180.00
02	LABOUR CHARGES	1 EAC	400.00	NA	400.00
	Total Amount Add GST Net Amount Payable	7,00 %			580.00 40.60 620.60

Issued by Repair Type Payment term : DECRCS04 25.11.2017 11:21:11

: CPSO/52/50 : Cash Term

PLEASE EXAMINE THIS INVOICE IMMEDIATELY LIPON RECEPT AND ADVISE THE COMPANY BY ANY TERRORS CHARGE: 1 OF LC.

Cheque should be crossed and made payable to "ComfortDelGro Engineering Pta Ltd"

#### ComfortDelGro Engineering Pte Ltd A member of COMFORIDITION

Head Office: 205 Braddell Road Bik C Ext 1 Level 2 Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ N
			Y
			<u></u>

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

AA (AXA Assistance)

ALI JOE	FOLDER TRACK		Adi Accioned	Adi Rpt	Adj Submit	ted Ins A	uth'ed	Status
Case Main	Notified 28 Sep 2017 Sendback Est	28 Sep 2017 14:31 \$\$880.00	Adj Assigned 28 Sep 2017 17:06 Edit Adj Rpt	S\$580.00 Edit Estimates	\$\$580.0 View Rpt	0		Pending for Survey Report Cancel Case
	Main	Reference		Claim Details		Documents		Show All
CLAIM S	UBFOLDER DET		NEON ID: G33	29869U, Tel: +6	594245182.	Email: NOEMA	dL.	
Insured:		SUZANNE HOPKI	NSUN, 10. 0332	Date of Loss:		25/09/2017	00:00 - :	59
Vehicle F	teg. No.:	SJX276B		Policy/Cover		VA1/GA2610	And the second second	
Claim Ty	pe:	<b>OD</b> / C0453771		Excess:		5\$0.00	A STATE OF THE PARTY OF THE PAR	
		ComfortDelGro E	ngineering Pte I	td (Pandan) 45	Pandan Road,	609286 Eunos	- Tel: 63	38 8778
Repairer		AVA Toomson D	to 1td (HO) - Tel	- 6338 7288 [H	landled by Lyr	nn Knong - bi	990 4035	
Adjuster	Insurer:	due 09/10/2017	tants Pte Ltd (H	<b>Q)</b> - Tel: 6256-350	61 [Handle	d by MOHD K	ASUL]	[Final Rpt
Driver /C	ustodian:	SUZANNE HOPKIN	SON (42 / Female	), NRIC: G33298	869U, Tel: +	16594245182		
Dilvei/		OD Xs NIL						
and the second second second	Remarks:					- 1	-	
Adj Asg.	Remarks:	EIVED				View All	Comp	ose Case Mail
Adj Asg. ASSOCI						View All	Comp	ose Case Mail

## **Claim Documents**

SJX276B (C0453771) OD Sep 25 2017 12:00AM [SUZANNE HOPKINSON] ComfortDelGro Engineering Pte Ltd

	Upload Documents	Upload Photos Compose New Letter	View Use Viewe	r •
Ass	essment Reports		1 per page ▼	V
No.	Finalized On	ComfortDelGro Engineering Pte Ltd (Pandan)	Thumbnail	Print
1	28/09/17 10:02	Accident Statement	€ Load HTM	
2	28/09/17 14:31	Repairer Estimates	6 Load HTM	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	06/10/17 13:39	Adjuster Immediate Advice	1 Load HTM	
Doc	umentation		1 per page ▼	V
No	Finalized On	AXA Insurance Pte Ltd (HQ)	Thumbnail	Print
1	28/09/17 17:06	CI	Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	07/12/17 11:41	INSPECTION PHOTO	1 Load PDF	
2	12/12/17 15:23	Workshop Invoice	Load PDF	

## **Linked Accident Report Documents**

			v	iew Use Viewe	c
Ass	essment Report	15	1 per	page 🔻	V
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Pandan)		Thumbnail	Print
1	28/09/17 10:02	Accident Statement	0	Load HTM	
Pho	otos/Images		3 per	page 🔻	V
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Pandan)		Thumbnail	Print
1	28/09/17 09:53	Accident Photo	0	Load JPG	V
2	28/09/17 09:53	Accident Photo	0	Load JPG	7
3	28/09/17 09:53	Accident Photo	9	Load JPG	J
4	28/09/17 09:53	Accident Photo	0	Load JPG	J
Doc	cumentation		1 per	page 🔻	V
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Pandan)		Thumbnail	Print
1	28/09/17 09:56	Accident Sketch Plan	•	Load JPG	V
2	28/09/17 09:56	Accident Sketch Plan	0	Load JPG	V
3	28/09/17 09:56	Accident Sketch Plan	0	Load TIF	
4	28/09/17 09:56	Accident Sketch Plan	0	Load TIF	
5	28/09/17 09:56	Accident Sketch Plan	0	Load TIF	
6	28/09/17 09:56	Accident Sketch Plan	Θ	Load TIF	
7	28/09/17 09:56	Accident Sketch Plan	0	Load TIF	
8	28/09/17 09:56	Accident Sketch Plan	0	Load TIF	

## **Documents Checklist**

DOCUMENTS CHECKLIST		Reset Save Print
There are no document checklists configured.		
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HC	2)	
	A	
Show Remarks To: Repairer Handling Insurer		
Note: Remarks are private unless you show it to other parties.		

## LKK Auto Consultants Pte Ltd (Co. Reg. No: 199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

AXA Insurance Pte Ltd

8 Shenton Way #24-01, AXA Tower

Singapore 068811

Our File No:

CS/AXA17018632/R1QBE2

Date:

12/12/2017

REFERENCE

Insured/Claimant: Date of Loss:

SUZANNE HOPKINSON

25/09/2017

Policy No: Nature of Claim: VA1/GA261084

Engine No:

Odometer:

Chassis No:

Claim No: C0453771

JTEGD52M007087420

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SJX276B

Make & Model:

TOYOTA PREVIA, 2.4 8-SEATER (A)

10/05/2010 (Man. Year: 2010) White

Reg. Date: Colour:

Engine Capacity: Market Value/New Car Price:

Sum Insured (S\$):

2362 cc

\$\$54,000.00 Market Value/New Car Price

Yes Engine Modification:

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable): No Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES

Front Left Side:

Front Tyre Size:

215/60 R16

Dunlop 6 mm

Rear Tyre Size: Rear Left Side: Rear Right Side: 215/60 R16 Dunlop 6 mm Dunlop 6 mm

2AZH483845

63439 km

Front Right Side: Dunlop 6 mm The above values represent the remaining tyre treads depth

Nett Amount (S\$)

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	180.00	180.00	0.00	0.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	700.00	400.00	300.00	42.86
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	880.00	580.00	300.00	34.09
+ GST 7.00/7.00% (S\$)	61.60	40.60	21.00	34.09
Nett Amount (S\$)	941.60	620.60	321.00	34.09

941.60

INSPECTION

Date of Assignment:

28/09/2017 Present Location:

ComfortDelGro Engineering Pte Ltd

(Pandan)

Date Inspected:

05/10/2017 Inspected At:

45 Pandan Road Singapore 609286

Estimated Period of Repair: 2.0 days

Adjuster: MOHD RASUL

Manager: SHIAU CHAN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

# REPAIR DETAILS

Referen	ce	
Part Source	MRM-SG	Version: 1.0 (Last Synchronised: 12 Dec 2017)
Parts:	M1-MPV	TOYOTA PREVIA 2.4 8-SEATER (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted	, no print-code for SJX276B)
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	

Further Info: Items/values not in reference catalogue are prefixed with an asterisk \*.

No.	Qty Part	No. Particulars	Condition	Repairer's	Amount
1	1	*FENDER RHF (CONSISTENT)	Bent	180.00 F	*180.00 F
F=Fra	nchise part.		Total Parts (S\$)	180.00	180.00

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TO REMOVE AND REFIT DAMAGES PART	New	300.00	200.00
2	TO PUTTY AND SPRAY FRONT BUMPER AND FENDER RHF	New	400.00	200.00
	Gross Labou	r Cost (S\$)	700.00	400.00
	Report was unsubmitted during		100.00000	

< END OF ESTIMATES >