

REF: CS/FCI17019733/Mrbn2
ASSIGNMENT (Office)
CWS
From/Person: Ang Yin Min of FCI Date/Time: 13/10/17 @ 2:39pm

Estimated Cost:
OD: (TP) WS/TP RES/OD RES/EVA/INV/MV/CS
To Inspect Vehicle No: SHD1567J Insured: SHB4526T
at Workshop n/s: Premier Automotive Tel: 62148880
of: 23, Changi South Ave 2, #01-02, 486443
Policy No: Claim No: D17009676 MFSH
Sum Insured: Excess:
Make of Veh: D.O.A: 12/10/17
(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'
Date/Time: 13/10/17 @ 2:44pm Person Contacted: Vincent H.O.D. Endorsement:
Vehicle: IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SHD1567J - CC3/CA115005156/Uuy 302-D.O.A: 25/3/15
	SHB4526T - CC6/SH16005086/T1wg 302-D.O.A: 16/03/2016
	Confirm L/S \$950.00, 2 days
	Ed: \$1101.41, 54%

Sinyar

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s PREMIER

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.

N/S	O/S

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHD1567J Yr Regn: OCT / 2017

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

Truck / Trailer or

Make: HYUNDAI 1300cc 1582Colour: SILVER A/C: Insured / Std / NI / NASp. Reading: 990 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 1MAD281UVHJ141874Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD A/Rim orTyre Size: F: 175/65/R15

R: _____

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

TOYO / YOKO or HANKOOK

Front

R/Bal. 8 mmL/Bal. 8 mmD.O.A. 12/10/2017

Rear

R/Bal. 8 mmL/Bal. 8 mmD.O.I. 13/10/2017

Survey held at _____

Des. of Damages: FRt / Rear / O/S / N/S / U/C / Rooftop orNS REAR

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

Date / Time Action / Instruction

RECEIVED 23 NOV 2017

Date/Time, File Pass to?

1) typist

Date/Time, File Return to?

2) _____



Preli. Report



Final Report

Days Of Repair: 2Resurvey No. of Trip: 1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Report Format: TPLump Sum / L.B.I. (\$ 950)

110

50

50

13

223



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/FCI17019733/M1rb

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 13-10-2017



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 4526T	Veh. Inspected	SHD 1567J
Policy No.		Coverage (\$)	0.00
Claim No.	D17009676MFSH	Excess (\$)	0.00
Assign From	CWS (AUNG YIN MIN)	Assign Date	13/10/2017

2. Vehicle Particulars & Condition

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

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

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5. General Information

Accident Date	12/10/2017	Inspection Date	
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		

5a. Remarks

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

A FAIRFAX Company

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

MOTOR SURVEY ASSIGNMENT

Date	12-10-2017	Our Ref No. D17009676MFSH
Accident Date	12-10-2017	Claim Type. Third Party
Insured Vehicle	SHB4526T	Third Party Vehicle. SHD1567J
Survey Location	21 MOONSTONE LANE #01-01 POH LENG BUILDING	
Contact Person.	VINCENT CHUA	
Contact No.	62148880/ 0	Fax No. 62141511
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
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	PREMIER AUTOMOTIVE SERVICES PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	AUNGYM	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Job Sheet (/ClaimWS/Surveyor/JobSheet/229083)



PRI Documents



Close



PRI Header Details

Claim No	D17009676MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & PREMIER , LTD
Workshop Name	PREMIER AUTOMOTIVE SERVICES PTE LTD (Contact Person : VINCENT CHUA)	Survey Location & Contact Details	21 MOONSTONE LANE #01-01 POH LENG BUILDING Mobile: 0 , Phone: 62148880 , Fax: 62141511 EmailId: VINCENT.CHUA@PREMIERTAXI.COM		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM 1		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHB4526T	TP Vehicle No	SHD1567J
PRI Recieved Date	12-10-2017 09:45:50 PM	Surveyor Appointed Date	13-10-2017 02:38:31 PM	Surveyor Accept Date	13-10-2017 0

Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	13-10-2017	Upload Survey Report *:	Choose File
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Vehicle Particulars

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

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Remarks

Enquire Vehicle Registration Details**Owner Particulars**

NRIC/Passport/Company Cert No.: 200304975H
 Owner ID Type: Company
 Owner Name: PREMIER TAXIS PTE. LTD.
 Registered Address: 23 CHANGI SOUTH AVENUE 2 #04-03 SINGAPORE 486443
 Mailing Address: -
 Birth Date: -

Vehicle Particulars

Vehicle No.: SHD1567J
 Previous Vehicle No.: -
 Effective Date of Ownership: 04 Oct 2017
 Original Regn Date: 04 Oct 2017
 Registration Date: 04 Oct 2017
 Year of Manufacture: 2017
 Vehicle Type: Public Transport Taxi (Motor Car)
 Vehicle Scheme: Taxi (Company)
 Vehicle Attachment 1: Air-Con (Taxi)
 Vehicle Attachment 2: -
 Vehicle Attachment 3: -
 Vehicle Make: HYUNDAI
 Vehicle Model: I30 GDH 1.6 TCI 5DR DCT
 Primary Colour: Silver
 Secondary Colour: -
 Passenger Capacity: 4
 Chassis No.: TMAD281UVHJ141894
 Engine No.: D4FBHZ172976
 Engine Capacity/Power Rating: 1582 cc / -
 Maximum Power Output: 100.0 kW (134 bhp)
 Propellant: Diesel
 Max Unladen Weight: 1496 kg
 Maximum Laden Weight: 1940 kg
 Open Market Value: \$19,970.00
 PARF Eligibility: Yes
 PARF Eligibility Expiry Date: 03 Oct 2025
 Minimum PARF Benefit: \$7,482.00
 No. of Transfers: 0
 IU Label No.: 1050709923
 COE No.: 2017100401003706H
 COE Expiry Date: 03 Oct 2025
 COE Category: A - Car up to 1600cc & 97kW (130bhp)
 COE Registration Category: A - Car up to 1600cc & 97kW (130bhp)
 Quota Premium (QP) / Prevailing Quota Premium: - / \$42,564.00
 PQP Paid: \$34,052.00
 QP (Regn Cat): -
 OPC Cash Rebate Eligibility: No

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02

SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511

CO. REG:200707743D GST REG:200707743D

13-Oct-17

ESTIMATE REPAIR BILL FOR HYUNDAI I30 (A) WAGON REGN NO: SHD 1567 J

1 pc Rear bumper
1 pc Rear bumper n/s reflector

\$ 778.64
\$ 107.50
\$ 886.14
Less 20% \$ 177.23
\$ 708.91

S/NETT

1 set Rear bumper clips
1 set Reverse sensor
1 pc Rear bumper top protector
Sundry

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:

\$ 52.50
\$ 280.00
\$ 80.00
\$ 50.00
\$ 80.00

To dismantle and replace reverse sensor and test system

To labour charge for dismantle and renew the accident damaged parts. Including to knock-out, straighten, repair, reshape of the same

To putty and spray painting on the rear bumper

To apply rustproofing on the repaired and replaced panels

Total

\$ 400.00
\$ 200.00
\$ 200.00
\$ 2,051.41

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

95012
2w delays
Con
21/11/2017

Not Authorized
AS Reg
alt
2w days
13/10/2017

**LKK Auto Consultants Pte Ltd**

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Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI17019733/M1rbn2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 24-11-2017



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 4526T	Veh. Inspected	SHD 1567J
Policy No.	D-15072702MFSH	Coverage (\$)	0.00
Claim No.	D17009676MFSH	Excess (\$)	0.00
Assign From	AUNGYM	Assign Date	13/10/2017

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I30	c.c	1582
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	TMAD281UVHJ141894	Colour	SILVER
Odometer	990	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	HANKOOK	8 mm
L/H Front Tyre	195/65 R15	HANKOOK	8 mm
R/H Rear Tyre	195/65 R15	HANKOOK	8 mm
L/H Rear Tyre	195/65 R15	HANKOOK	8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	12/10/2017	Inspection Date	13/10/2017
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		

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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 1567J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BUMPER	DEFORMED	778.64	778.64
1	REAR BUMPER N/S REFLECTOR	CUT	107.50	107.50
	LESS 20% DISCOUNT		-177.23	-177.23
			708.91	708.91
	<u>SPECIAL NETT ITEMS</u>			
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	52.50	52.50
1	SET REVERSE SENSOR (SN)	SERVICEABLE	280.00	-
1	REAR BUMPER TOP PROTECTOR (SN)	NOT NECESSARY	80.00	-
1	SUNDRY (SN)	NOT NECESSARY	50.00	-
			462.50	52.50
	<u>LABOUR</u>			
	TO DISMANTLE AND REPLACE REVERSE SENSOR AND TEST SYSTEM.		80.00	60.00
	TO LABOUR CHARGE FOR DISMANTLE AND RENEW THE ACCIDENT DAMAGED PARTS.INCLUDING TO KNOCK-OUT,STRAIGHTEN,REPAIR,RESHAPE OF THE SAME.		400.00	200.00
	TO PUTTY AND SPRAY PAINTING ON THE REAR BUMPER.		200.00	200.00
	TO APPLY RUSTPROOFING ON THE REPAIRED AND REPLACE PANELS.	NOT NECESSARY	200.00	-
			880.00	460.00
	GRAND TOTAL		2,051.41	1,221.41
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			950.00

Report Ref No. CS/FCI17019733/M1rbn2

MA CHIN FOOK

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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