

11/10/2017

ASS. REC. BY:

REF: CS/FCI17020416/Rlgbs*

Special Instruction:

SUN/WS

Rasul

ASSIGNMENT (Office)

From (Person):

Serene Lee

of

FCI

Date/Time:

24/10/17 @ 8:18pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FR 3133P

Insured:

SHD 4089C

at Workshop no/s

Performance

Tel:

63190100 / 9116 5226

of

303 Alexandra Road

Policy No:

Claim No:

D17009959MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record):

D.O.A.

23/10/2017

CA / REV / REP. / REV 24 HRS

Ds'

26/10/17 @ 1-4pm

H.O.D. Endorsement:

Date/Time: 25/10/17 @

Person Contacted:

Kris Chew

Vehicle IN (OUT)

Date/Time

Action/Instruction (✓) Estimate

FR 3133P-X

SHD 4089C-CS/FCI15017502/Ugbc 2-D.O.A: 8/10/2015

Page

REF. FCI

70516

ASSIGNMENT

From: _____ Date: 26/10/2017

Estimated Cost: _____

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

To Inspect Vehicle No: FR 3138P

at Workshop m/s: Performance

of: 345 Alexandra Rd

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Ven: _____

1-4pm

(Policy Condition)

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

Bal. or Market Value: _____

IDAO Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res: Yes or No

Lump Sum: 1-B-1 % 3/Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle IN / OUT

Veh No: FR 3138P Vc Regn: 2017 AUS

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

Truck / Trailer or

Make: B.M.W R1200GS cc: 1170

Colour: MULTI A.C. Insured / Std / NI / NA

Sp. Reading: 3498 T. Radio Insured / Std / NI / NA

Eng/No: _____

C/No: WB10A 0104H2897226

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / B/Rim / STD A/Rim or

Tyre Size: F: 120/70R19

R: 170/60R17

BS / DUN / EXNOVA / GY / FS / LIZA / M/C / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front: _____ Rear: _____

R/Bal: 4 mm R/Bal: 4 mm

L/Bal: _____ mm L/Bal: _____ mm

D.O.A: 23/10/17 D.O.L: 26/10/17

Survey held at: Performance

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

Rear o/s & N/S

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

Date / Time Action / Instruction

24/10/17 email preli to Serene

21/11/17 confirmed final fig \$ 4168.93 with Eric.

(Red: 1094.33, 21%).

RECEIVED 22 NOV 2017

Date/Time File Pass to: ☐ : Preli. Report

1 ☐ : Final Report

Date/Time File Return to: _____

Days Of Repair: 2

Resurvey No. of Trip: _____

Add Fee: ☐ Site Insp. / \$

☐ Interview / \$

☐ Tech. Insp. / \$

☐ Weekend / \$

Survey Fee

Transportation

(Price)

Report Format: TP

Lump Sum / 4168.93

135
50
38
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/FCI17020410/R1gb	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 25-10-2017	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHD 4089C	Veh. Inspected	FR 3133P	
Policy No.		Coverage (\$)	0.00	
Claim No.	D17009959MFSH	Excess (\$)	0.00	
Assign From	CWS (SERENE LER)	Assign Date	25/10/2017	
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				
5. General Information				
Accident Date	23/10/2017	Inspection Date		
Survey held at	PERFORMANCE MOTORS LTD 303 ALEXANDRA ROAD SINGAPORE 159941			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

First Capital Insurance Limited

A FAIRFAX Company

Company Reg. No. 195000106C

GST Reg. No. M2-0001676-9

MOTOR SURVEY ASSIGNMENT

Date	24-10-2017	Our Ref No. D17009959MFSH
Accident Date	23-10-2017	Claim Type. Third Party
Insured Vehicle	SHD4089C	Third Party Vehicle. FR3133P
Survey Location	303 ALEXANDRA ROAD SIME DARBY PERFORMANCE CENTRE	
Contact Person.	KRIS CHEW	
Contact No.	63190100/ 0	Fax No. 64747770
Survey Type	DIRECT SETTLEMENT: EST. COR \$5,254.70	
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	PERFORMANCE MOTORS LIMITED	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	SERENE	

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/229412)



PRI Documents



Close



PRI Header Details

Claim No	D17009959MFSH	Policy No	D-15072701MFSH	Claimant S.No & Name	1 & PERFORM
Workshop Name	PERFORMANCE MOTORS LIMITED (Contact Person : KRIS CHEW)	Survey Location & Contact Details	303 ALEXANDRA ROAD SIME DARBY PERFORMANCE CEP Mobile: 0 , Phone: 63190100 , Fax: 64747770 EmailId: KRIS.CHEW.LEECHYE@SIMEDARBY.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT: EST. COR \$5,254.70		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHD4089C	TP Vehicle No	FR3133P
PRI Recieved Date	24-10-2017 06:52:31 PM	Surveyor Appointed Date	24-10-2017 08:17:37 PM	Surveyor Accept Date	25-10-2017 0

Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	25-10-2017	Upload Survey Report *:	<input type="button" value="Choose File"/>
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Vehicle Particulars

Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year ▼
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

Remarks	<input type="text"/>	<input type="button" value="Save"/>
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Ai Phing (LKKAUTO)

From: Ai Phing (LKKAUTO)
Sent: Friday, 27 October, 2017 3:29 PM
To: 'Claim Workflow System'
Cc: SERENELER@FIRST-INSURANCE.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D17009959MFSH/1
Attachments: FR 3133P.pdf

Dear Serene,

Enclosed herewith preliminary advise of vehicle FR 3133P.

Best Regards,

Ai Phing | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #01-25 | S(408933)

From: Admin-D (LKKAUTO)
Sent: Wednesday, 25 October, 2017 9:37 AM
To: 'Claim Workflow System' <cwsmotorclaims@first-insurance.com.sg>; assignments <assignments@lkkauto.com>
Cc: SERENELER@FIRST-INSURANCE.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D17009959MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not In workshop, repairer will arrange.

Best Regards,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Claim Workflow System [<mailto:cwsmotorclaims@first-insurance.com.sg>]
Sent: Tuesday, 24 October, 2017 8:18 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG; SERENELER@FIRST-INSURANCE.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D17009959MFSH/1

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.



Auto
Consultants
Pte Ltd

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

Your Ref: D17009959MFSH

Date: 27-10-2017

Our Ref: CS/FCI17020410/R1gb

The Motor Claims Department
First Capital Insurance Ltd

Without Prejudice

Dear Sir/Madam,

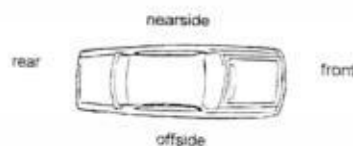
INITIAL INSPECTION REPORT OF VEHICLE NO. FR 3133P.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 26-10-2017 at the premises of M/s PERFORMANCE MOTORS and have the following to report:-

Workshop Estimate Amount	: S\$	<u>5,254.70</u>
Revised Estimate Amount	: S\$	<u>4,160.93</u>
"Check" Items Amount	: S\$	<u>-</u>
Market Value	: S\$	<u>-</u>
LTA Reimbursement Value	: S\$	<u>-</u>
Nett Value	: S\$	<u>-</u>

Description of Damage:

The vehicle sustained damages at the rear o/s and n/s portion.



Yours faithfully

Mohamed Rasul
Automotive Assessor

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	23/10/2017 14:31
Date Of Accident	23/10/2017 14:20
Exact Location Of Accident	BRINCHANG & BISHAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FR3133P
Insured/Policyholder	
Name Of Registered Owner	ONG KAY YONG ALVIN
NRIC No	S1817051E
Email Address	KAVINONG99@YAHOO.COM
Mobile Phone No	(LOCAL) +65-91055300
Alternative Phone No	OFFICE-91055300

Vehicle Particulars

Manufacturer	BMW
Model	GS1200
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	AN3158751
Cover Note Number	

Driver

Name of Driver	ONG KAY YONG ALVIN
NRIC No	S1817051E
Date Of Birth	26/10/1967
Occupation	INDOOR
Date Of Driving Pass	20/03/2005
Driving Experience	12 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91055300
Fax Number	
Contact Number	OFFICE-91055300
Email Address	KAVINONG99@YAHOO.COM

SKETCH PLAN

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the 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)

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.
- (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
 Date & Time:

23/10/17 2:25pm


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

23/10/17 2:25pm


 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1817051E



Name

ONG KAY YONG ALVIN

Race

CHINESE

Date of birth

26-10-1967

Country/Place of birth

SINGAPORE

Sex

M

S1817051E

5419758



NRIC No. S1817051E



Allergy: PENICILLIN

Date of issue

16-01-2015

APT BLK 148 GANGSA ROAD #07-289
SINGAPORE 670148

NRIC No. S1817051E

Date: 14/07/2016

Sketch Plan Pg. 5

Date: 23/10/17

To: Owner of Vehicle Number: FR3133P

The following has been advised to you via your workshop, CRAC through their staff, [Signature]

Please tick the applicable box if you had been advised on the content as seen below:

- ☒ You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☐ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☐ The Estimation waiting time for the spare parts to arrive is _____
The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanical personnel that the vehicle may not be road worthy.
- ☐ For vehicles below Three (3) years old, your insurance company will use only genuine or parts to repair your vehicle.
- For vehicles above Three (3) years old, your insurance company will be carrying out or using any combination of genuine original parts and/or original equipment manufacture (OEM) parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own/ repairs on workmanship related to the accident.
- ☐ For vehicles below Five (5) years old, you had been advised by the workshop to check local distributor on your warranty status.
- ☐ Others _____

Signed and acknowledge by:

[Signature]
Name and signature of policyholder/ authorised driver

Name and signature of workshop personnel including company stamp

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

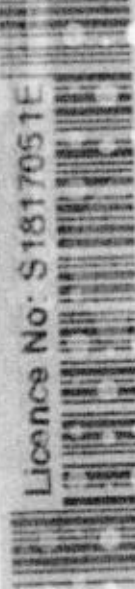
EFFECTIVE DATE

03 Oct 1988
29 Aug 2013
20 Mar 2015
12 Nov 1986

- Class 2B Motorcycles \leq 200 CC
Class 2A Motorcycles between 201 CC and 400 CC
Class 2 Motorcycles $>$ 400 CC
Class 3 Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors/vehicles \leq 2500 kg

S / No. 9000216765

51817051E



Licence No. S1817051E

NP 428A

Accident Photo



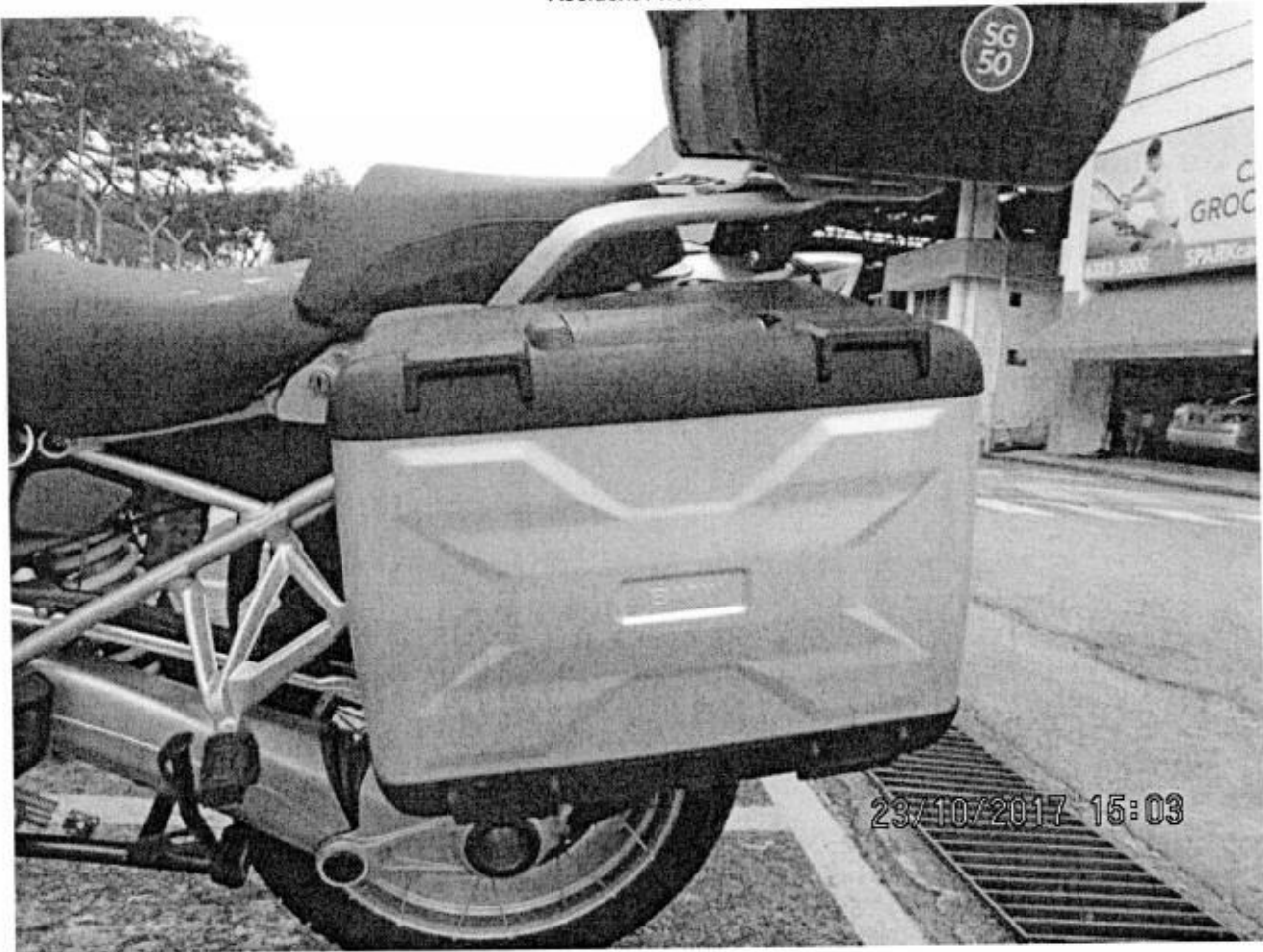
Accident Photo



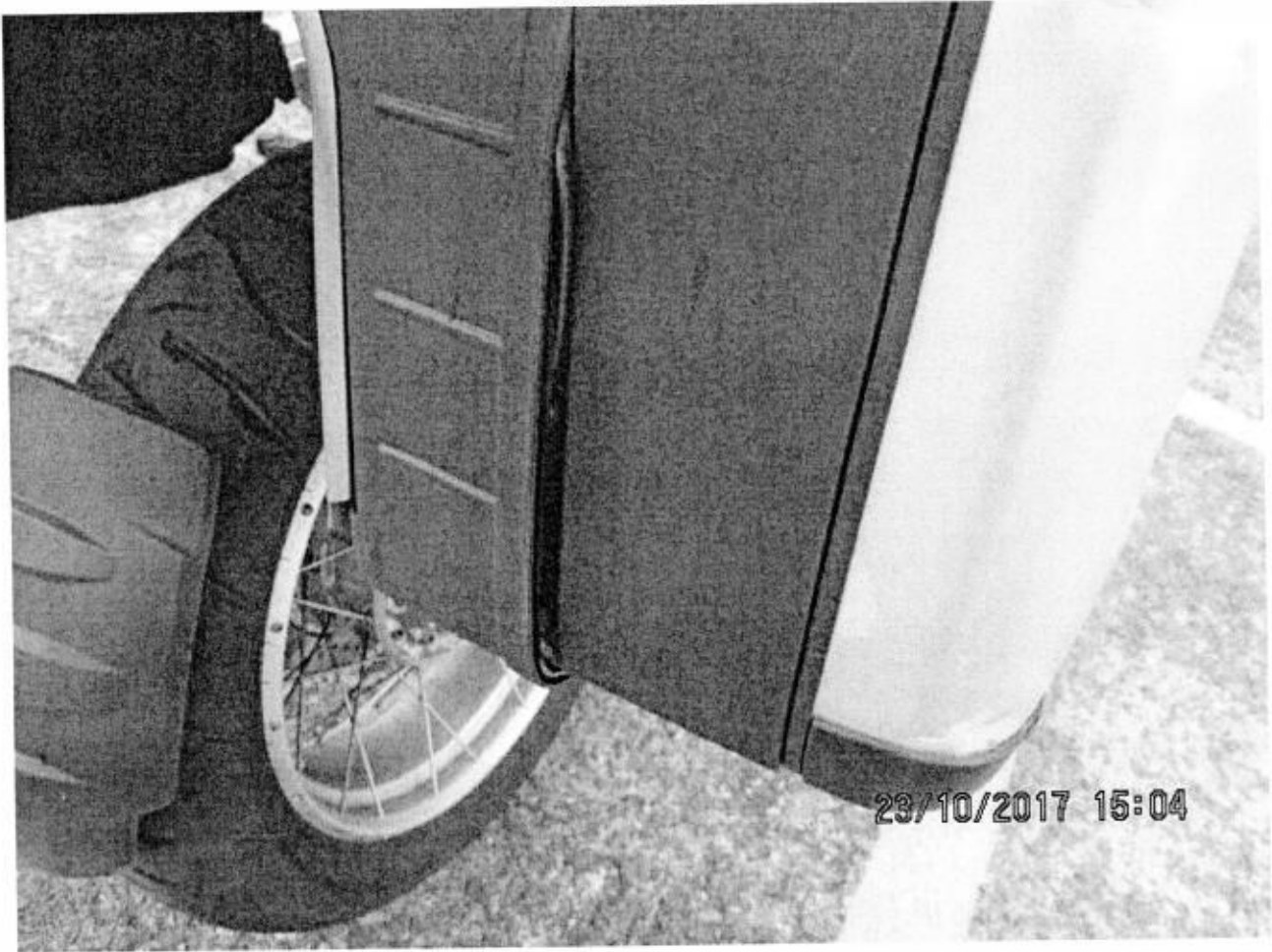
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X



303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/530 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)

GST REG. NO : M2 - 0020081 - X

ESTIMATE

Estimate No. : w5 44582
Date Estimated : 24/10/2017
Prepared By : Kris Chew Lee Chye

Page No. : 1 of 2

- ESTIMATE REPAIR FOR -

Ong Kay Yong Alvin
148 Gangsa Road
#07-289

Singapore 670148

- ACCOUNT - 303

First Capital Insurance Ltd
36 Robinson Road
#16-01 City House
Singapore 068877

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
FR3133P	Z897226	29/08/2017	R 1200 GS LC	0

DESCRIPTION

To replace damaged parts due to accident

1200 1,950.00

This estimate is based on visual inspection only. A supplementary will be forward in due course upon authorisation of repair.

0.00

All parts prices quoted are subject to change without prior notice.

0.00

Accident on 23/10/2017 at 1420hrs
(Jalan Brinchang towards Bishan Road)

0.00

3rd party claim against SHD4089C - First Capital Insurance

0.00

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

0.00

Acknowledged by Repairer

Signature:

Date:

Total Labour 1:

1,950.00

PART NUMBER	DESCRIPTION	QTY	PRIC	DISC	VALUE
46638528677	COCKPIT FAIRING LH	1	29.08	0.00	29.08
46638556013	TRIM WINDSHIELD LH	1	29.03	0.00	29.03
46638557867	WINDSCREEN L=380MM	1	310.61	0.00	310.61
46718526739	FOOTREST WIDE RIDER LH	1	82.81	0.00	82.81
51168567447	MIRROR LH	1	115.45	0.00	115.45
51257698202	REPAIR KIT FOR LOCK CYLINDER	2	50.93	0.00	101.86
77328525880	HAND PROTECTORS	1	216.35	0.00	216.35
77407721035	VARIO CASE LH	1	610.98	0.00	610.98
77418567204	VARIO CASE RH	1	610.98	0.00	610.98
T0104551620	STAINLESS STEEL CRASH BAR BLACK	1	468.91	0.00	468.91
T0104551630	STAINLESS STEEL CRASH BAR EXTENSION	1	384.87	0.00	384.87
Total Parts :					2,960.93

4418.93

BMW Dealer

Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X



303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/530 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)

GST REG. NO : M2 - 0020081 - X

ESTIMATE

Estimate No. : w5 44582		Page No. : 1 of 2	
Date Estimated : 24/10/2017			
Prepared By : Kris Chew Lee Chye			
- ESTIMATE REPAIR FOR - Ong Kay Yong Alvin 148 Gangsa Road #07-289 Singapore 670148		- ACCOUNT - 303 First Capital Insurance Ltd 36 Robinson Road #16-01 City House Singapore 068877	

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
FR3133P	Z897226	29/08/2017	R 1200 GS LC	0

DESCRIPTION	VALUE
To replace damaged parts due to accident	1,200.00
Accident on 23/10/2017 at 1420hrs (Jalan Brinchang towards Bishan Road)	0.00
3rd party claim against SHD4089C - First Capital Insurance	0.00
Front license plate <i>Not (A)</i>	8.00
Total Labour 1:	1,208.00

PART NUMBER	DESCRIPTION	QTY	PRIC	DISC	VALUE
46638528677	COCKPIT FAIRING LH	1	29.08	0.00	29.08
46638556013	TRIM WINDSHIELD LH	1	29.03	0.00	29.03
46638557867	WINDSCREEN L=380MM	1	310.61	0.00	310.61
46718526739	FOOTREST WIDE RIDER LH	1	82.81	0.00	82.81
51168567447	MIRROR LH	1	115.45	0.00	115.45
51257698202	REPAIR KIT FOR LOCK CYLINDER	2	50.93	0.00	101.86
77328525880	HAND PROTECTORS	1	216.35	0.00	216.35
77407721035	VARIO CASE LH	1	610.98	0.00	610.98
77418567204	VARIO CASE RH	1	610.98	0.00	610.98
T0104551620	STAINLESS STEEL CRASH BAR BLACK	1	468.91	0.00	468.91
T0104551630	STAINLESS STEEL CRASH BAR EXTENSION	1	384.87	0.00	384.87
Total Parts :					2,960.93

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Co. Reg. No. 197401559W GST Reg. No M2-0020081-X

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Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/530 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

ESTIMATE

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Estimate No. : w5 44582
Date Estimated : 24/10/2017
Prepared By : Kris Chew Lee Chye

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
FR3133P	Z897226	29/08/2017	R 1200 GS LC	0

Labour 1	:	1,208.00
Parts	:	2,960.93
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	291.83
Grand Total	:	<u>4,460.76</u>

** THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY**
** PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE **



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/FCI17020410/R1gbs2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 27-11-2017



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHD 4089C	Veh. Inspected	FR 3133P
Policy No.	D-15072701MFSH	Coverage (\$)	0.00
Claim No.	D17009959MFSH	Excess (\$)	0.00
Assign From	SERENE	Assign Date	24/10/2017

2. Vehicle Particulars & Condition

Make & Model	B.M.W. R1200GS	c.c	1170
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	WB10A0104HZ897226	Colour	MULTI
Odometer	3498	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	120/70 R19	MICHELIN	4 mm
L/H Front Tyre			mm
R/H Rear Tyre	170/60 R17	MICHELIN	4 mm
L/H Rear Tyre			mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION AND N/S BODY. DAMAGES SEE DETAILS.

5. General Information

Accident Date	23/10/2017	Inspection Date	26/10/2017
Survey held at	315 ALEXANDRA RD		
Repairer	PERFORMANCE MOTORS LTD		

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

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Page No.: 1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FR 3133P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	COCKPIT FAIRING LH (SN)	SCRATCHED	29.08	29.08
1	TRIM WINDSHIELD LH (SN)	SCRATCHED	29.03	29.03
1	WINDSCREEN L=380MM (SN)	SCRATCHED	310.61	310.61
1	FOOTREST WIDE RIDER LH (SN)	SCRATCHED	82.81	82.81
1	MIRROR LH (SN)	SCRATCHED	115.45	115.45
2	REPAIR KIT FOR LOCK CYLINDER @ \$50.93 (SN)	NECESSARY	101.86	101.86
1	HAND PROTECTORS (SN)	SCRATCHED	216.35	216.35
1	VARIO CASE LH (SN)	SCRATCHED	610.98	610.98
1	VARIO CASE RH (SN)	DEFORMED	610.98	610.98
1	STAINLESS STEEL CRASH BAR BLACK (SN)	SCRATCHED	468.91	468.91
1	STAINLESS STEEL CRASH BAR EXTENSION (SN)	SCRATCHED	384.87	384.87
1	FRONT LICENSE PLATE (ADDITIONAL)(SN)	NECESSARY	8.00	8.00
			2,968.93	2,968.93
LABOUR				
TO REPLACE DAMAGED PARTS DUE TO ACCIDENT.			1,950.00	1,200.00
			1,950.00	1,200.00
GRAND TOTAL			4,918.93	4,168.93
RECOMMENDED COST OF REPAIRS				4,168.93

Report Ref No. CS/FCI17020410/R1gbs2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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