

ASS. REC. BY:

REF: CS/FCI17020411 /Drber

Special Instructions:

Support:

CWS

MA

ASSIGNMENT (Office)

From (Person):

Serene Ler

of

FCI

Date/Time: 24/10/17 @ 7:58pm

Estimated Cost:

Bill to:

OD: ☒ TI / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No.:

SLA 5355X

Insured:

SHA 7779 R

at Workshop n/s:

Ah Lim Motor

Tel:

64831244

of 10 AMK Ind Park 2A # 01-09

Policy No.:

Claim No.:

D17009958 MFSH

Sum Insured:

Excess:

Make of Veh.:

(Client's Record):

D.O.A. 21/10/2017

CA / REV / REP. / REV 24 HRS

'wp'

26/10/17 @ 10:30am

Date/Time: 25/10/17 @

Person Contacted:

Zila

R.O.D. Endorsement:

Vehicle IN ☒ OUT

Date/Time:

Action/Instruction

☒

Estimate

Liability Unclear

SLA 5355X - X

SHA 7779 R - CS/FCI17013970 / R1vbn2 - D.O.A. 14/07/2017

REF: FCI

## ASSIGNMENT

From \_\_\_\_\_ Date 26/10/17

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: SLA 5355Xat Workshop m/s Ah Lim Motorof 10 Ank Ind Park 2A # 01-09

Insured \_\_\_\_\_

Policy No: \_\_\_\_\_

Claims No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

10.30 am

(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

Lump Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS 1wp?

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Van No: SLA5255X Yr Regn: Aug 08

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

Truck / Trailer or

Make: MAZDA 3 cc 1598Colour: Grey A/O Insured / Std / NI / NASp. Reading 113842 Radio Insured / Std / NI / NA

Eng No: \_\_\_\_\_

C/No: JM6PK10 62804309 43

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/55/R16R: 205/55/R16

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

TOYO / YOKO or GY

Front

R/Bal. 2 mmL/Bal. 2 mmD.O.A. 21/10/2017

Survey held at: \_\_\_\_\_

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

OS Rear

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

Date / Time Action / Instruction

27/10/17 email preli to serene.31/7 2pm Spoken to Mui Hong, the owner drop claim charge to reporting only. John Ho31/7 Submit preli report.  
The vehicle has not send in for repair.11/11/2017

RECEIVED 11 DEC 2018

Date/Time File Pass to:



Preli. Report



Final Report

Date/Time File Return to:

Date/Time File Return to:

Report Format:

Lump Sum / I.B. / S:

Days Of Repair: 4

Resurvey No. of Trip: \_\_\_\_\_

Add Fee: ☐ Site Insp 15☐ Interview 15☐ Tech. Insp. 15☐ Weekend 15

Survey Fee

Transportation

V. S. - B. S. (S)

Phone

Other

1005013203



# 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/FCI17020411/M1gb

36 ROBINSON ROAD  
#16-01 CITY HOUSESINGAPORE 068877

Date : 25-10-2017



Code : FCI2

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHA 7779R	Veh. Inspected	SLA 5355X
Policy No.		Coverage (\$)	0.00
Claim No.	D17009958MFSH	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	21/10/2017	Inspection Date
Survey held at	AH LIM MOTOR CO NO 10 ANG MO KIO IND PK 2A #01-09 AMK AUTOPOINT SINGAPORE 568047	

## 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

<b>Date</b>	24-10-2017	<b>Our Ref No.</b> D17009958MFSH
<b>Accident Date</b>	21-10-2017	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHA7779R	<b>Third Party Vehicle.</b> SLA5355X
<b>Survey Location</b>	10, ANG MO KIO IND PARK 2A #01-09 AMK AUTOPOINT	
<b>Contact Person.</b>	ZILA	
<b>Contact No.</b>	64821244/ 0	<b>Fax No.</b> 64836170
<b>Survey Type</b>	WITHOUT PREJUDICE: LIABILITY UNCLEAR (EST. \$6,182.37)	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	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

<b>Cc : Workshop</b>	AH LIM MOTOR COMPANY	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	NA	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	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/229411)



PRI Documents



Close



## PRI Header Details

<b>Claim No</b>	D17009958MFSH	<b>Policy No</b>	D-15072701MFSH	<b>Claimant S.No &amp; Name</b>	1 & AH LIM M
<b>Workshop Name</b>	AH LIM MOTOR COMPANY (Contact Person : ZILA)	<b>Survey Location &amp; Contact Details</b>	10, ANG MO KIO IND PARK 2A #01-09 AMK AUTOPOINT <b>Mobile:</b> 0 , <b>Phone:</b> 64821244 , <b>Fax:</b> 64836170 <b>EmailId:</b> ZILA@AHLIMMOTOR.COM.SG		
<b>Our Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	<b>Instructions To Surveyor</b>	WITHOUT PREJUDICE: LIABILITY UNCLEAR (EST. \$6,182		
<b>Insured Name</b>	COMFORT TRANSPORTATION PTE LTD	<b>Insured Vehicle No</b>	SHA7779R	<b>TP Vehicle No</b>	SLA5355X
<b>PRI Recieved Date</b>	24-10-2017 05:24:16 PM	<b>Surveyor Appointed Date</b>	24-10-2017 07:57:25 PM	<b>Surveyor Accept Date</b>	25-10-2017 0

## Survey Report Upload

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

## Vehicle Particulars

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

## Multiple Documents Upload

File Name

Action

## Surveyor Job Remarks

Remarks

## Ai Phing (LKKAUTO)

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**From:** Ai Phing (LKKAUTO)  
**Sent:** Friday, 27 October, 2017 5:56 PM  
**To:** 'Claim Workflow System'  
**Cc:** SERENELER@FIRST-INSURANCE.COM.SG; SUR  
**Subject:** RE: SURVEY ASSESSMENT - D17009958MFSH/1  
**Attachments:** SLA 5355X.pdf

Dear Serene,

Enclosed herewith preliminary advise of vehicle SLA 5355X.

Best Regards,

**Ai Phing** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [sur@lkkauto.com](mailto:sur@lkkauto.com) | fax: 6256-4315

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



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**From:** Admin-D (LKKAUTO)  
**Sent:** Wednesday, 25 October, 2017 9:43 AM  
**To:** 'Claim Workflow System' <[cwsmotorclaims@first-insurance.com.sg](mailto:cwsmotorclaims@first-insurance.com.sg)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>  
**Cc:** SERENELER@FIRST-INSURANCE.COM.SG; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Subject:** RE: SURVEY ASSESSMENT - D17009958MFSH/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](mailto:assignments@lkkauto.com) | fax: 6256-4315

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

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**From:** Claim Workflow System [<mailto:cwsmotorclaims@first-insurance.com.sg>]  
**Sent:** Tuesday, 24 October, 2017 7:57 PM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** [CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG](mailto:CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG); [SERENELER@FIRST-INSURANCE.COM.SG](mailto:SERENELER@FIRST-INSURANCE.COM.SG)  
**Subject:** PRI: SURVEY ASSESSMENT - D17009958MFSH/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: D17009958MFSH

Date: 27-10-2017

Our Ref: CS/FCI17020411/M1gb

The Motor Claims Department  
First Capital Insurance Ltd

**Without Prejudice**

Dear Sir/Madam,

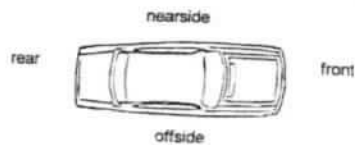
**INITIAL INSPECTION REPORT OF VEHICLE NO. SLA 5355X**

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

Workshop Estimate Amount	: S\$ 6,182.37
Revised Estimate Amount	: S\$ 2,276.80
"Check" Items Amount	: S\$ -
Market Value	: S\$ -
LTA Reimbursement Value	: S\$ -
Nett Value	: S\$ -

**Description of Damage:**

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



Yours faithfully

Ma Chin Fook  
Automotive Assessor

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type	Singapore NRIC
Owner ID	1050C
<b>Vehicle Details</b>	
Vehicle No.	SLA5355X
Vehicle to be Exported	Yes
Intended De-registration Date	23 Oct 2017
Vehicle Make	MAZDA
Vehicle Model	MAZDA3 SP
Primary Colour	Grey
Manufacturing Year	2008
Engine No.	Z6726762
Chassis No.	JM6BK106280430943
Maximum Power Output	79.0 kW (105 bhp)
Open Market Value	\$14,962.00
Original Registration Date	29 Aug 2008
First Registration Date	29 Aug 2008
Transfer Count	1
Actual ARF Paid	\$14,962.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	28 Aug 2018
PARF Rebate Amount	\$7,481.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date	28 Aug 2018
COE Category	A - Car (1600cc & below)
COE Period(Years)	10
QP Paid	\$13,289.00
COE Rebate Amount	\$1,125.00
<b>Total Rebate Amount</b>	<b>\$8,606.00</b>

The information contained herein is correct as at 23 Oct 2017

OK



## 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 13:59
Date Of Accident	21/10/2017 21:15
Exact Location Of Accident	555 SERANGOON ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA5355X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RAMASWAMY CHOCKALINGAM
NRIC No	S2721050C
Email Address	SONARM@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96755394
Alternative Phone No	OTHERS-96755394

### Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.6 SP (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA165831
Cover Note Number	11/04/2017 - 10/04/2018

### Driver

Name of Driver	RAMASWAMY CHOCKALINGAM
NRIC No	S2721050C
Date Of Birth	10/10/1957
Occupation	INDOOR
Date Of Driving Pass	26/12/2003
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96755394
Fax Number	
Contact Number	OTHERS-96755394
Email Address	SONARM@SINGNET.COM.SG

Address	BLK 805 YISHUN RING ROAD #12-4297
Postcode	760805
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	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	4

#### 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

REFER TO THE SKETCH PLAN BY DRIVER

#### 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	SHA7779R
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	LIM CHING KHOON
NRIC/Passport Number	S1255426E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

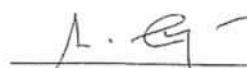
SKETCH PLAN

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
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:

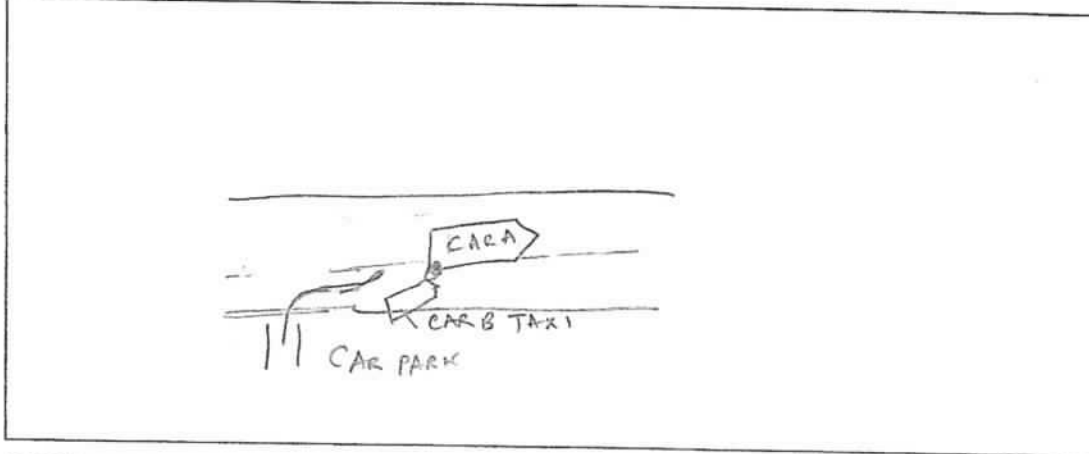
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# Sketch Plan Pg. 2

Date of accident: 21-10-17 Time: 9.18 pm Location: 555 Seveegoon Road  
 My Vehicle A: SLA5355X Vehicle B: SHA 779R Vehicle C: —

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on Saturday night at 9.18 pm just opposite  
 Temple from car park on at 555 Seveegoon Road coming  
 and joining the main road lane turning right  
 and waiting for all cars to move due to  
 signal cars was moving very slow and  
 lot of traffic waiting joining along the  
 second lane half taxi SHA 779R came  
 back and hit at the behind wheel and  
 bumper and damaged  
 Since traffic was slow hit was not  
 too hard caused any injury to passengers  
 and also taxi passenger

Car B - LIM CHENG KHONG, S1255426E

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop: Ah Lim Motor

Email address:

& myself: SONARM @ SINGNET.COM.SG

Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

## DECLARATION

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

L. E.  
 Policyholder's Signature  
 Date & Time:  
 23/10/17  
 at 8.57 AM

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

[Signature]  
 Reporting Center Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 AH LIM MOTOR COMPANY



redefining / insurance

CHOCKALINGAM RAMASWAMY  
BLK 805 YISHUN RING ROAD  
#12-4297  
SINGAPORE 760805

AXA Insurance Pte Ltd  
☎ 1800 880 4888 (Within Singapore)  
(65) 6880 4888 (International)  
☎ (65) 6880 4740  
✉ customer.care@axa.com.sg  
www.axa.com.sg

## Renewal

date  
**21/02/2017**

your servicing distributor  
**SUPERMANIAM MANICKAM / 04105**

your servicing distributor contact  
**65722119**

## Policy Schedule

Your **SmartDrive Comprehensive Private**

### Your policy snapshot

Policyholder name	CHOCKALINGAM RAMASWAMY	Policy number	VA1 / GA165831
Cover	Comprehensive	FIN / NRIC	S2721050C
Period of Insurance	from 11/04/2017 to 10/04/2018 (both dates inclusive)		

### Premium breakdown

Gross Premium after 50% NCD	SGD 1,100.49
Total Discounts	- SGD 110.05
7% GST	SGD 69.33
Final Premium	SGD 1,059.77

### Your benefits highlights

(refer to Policy Wording for full terms and conditions)

#### SmartDrive Comprehensive Private Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Loss or Damage
- Legal Liability
- Workshop of Your Choice
- Daily Transport Allowance of \$50 for a maximum of five (5) days
- Medical and dental expenses up to \$500 per person for either you as the driver or your authorised driver and a passenger
- Personal accident benefit of up to \$20,000 for you and your named drivers
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess

#### Add-on Benefits

- No Claim Discount Protector

### Vehicle details

Make & Model of Vehicle	MAZDA 3 1.6 SALOON	Year of manufacture	2006
Vehicle registration number	SLA5355X	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	1598
Seating capacity (excl driver)	4	Engine number	Z6726762
Off-Peak car	No	Chassis number	JM6BK106280430943

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	Nil

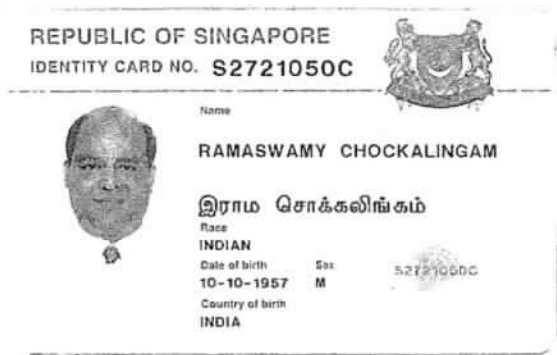
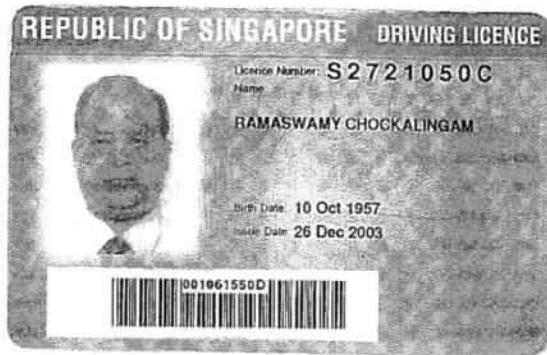
### Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess	SGD 400.00
Windscreen Excess	SGD 100.00

AXA Insurance Pte Ltd (199903512M)  
8 Shenton Way, #24-01, AXA Tower,  
Singapore 068811  
Customer Centre, #B1-01

1 of 2

Sketch Plan Pg. 4



TP: Spax.

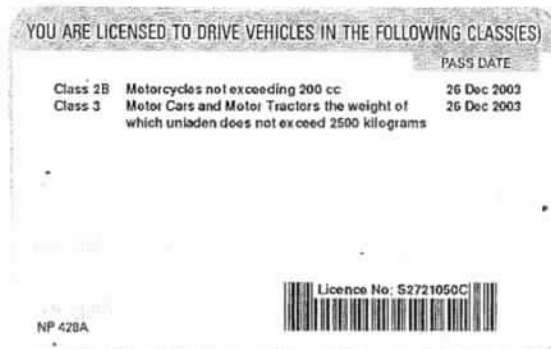
967 55 364.

plc

NO injury.

NO camera.

Spax.



Sketch Plan Pg. 5



redefining / insurance

Date: 23/10/17

To: Owner of Vehicle Number: SCA 5355 X

The following has been advised to you via your workshop, Ah Lim Motor Company through their staff Zila Eileen / Mui Hong.

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

- ☒ You had been advised by the workshop that in the case 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.
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated 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 mechanic/personnel that the vehicle may not be road worthy.
- ☐ For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.

☒ Others Claim Third Party.

Signed and acknowledge by:

Y. L. G.

Name and signature of policyholder/authorised driver

Wla

Name and signature of workshop personnel including company stamp





# AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047  
TEL: 6483 1244 ( 4 lines ) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg  
GST:M9-0009639-E RCB NO:06470300B

**SURVEYOR COPY**

M/S : RAMASWAMY CHOCKALINGAM  
BLK 805 YISHUN RING ROAD  
#12-4297  
SINGAPORE 760805

Estimate No: MC0912516  
Date: 23 Oct 2017  
Policy No: GA165831  
Veh Reg No: SLA5355X  
Make/Model: MAZDA 3 SP

ATTN:  
Your Ref No: SLA5355X  
Claim Type: Third Party  
Accident Date: 21/10/2017  
TP Veh Reg No: SHA7779R

LKke auto

26/10/17  
10:30am

## Estimate Repair Cost to Vehicle No :SLA5355X

Description	Quantity	List Price	Amount
		SS	SS
<b>SPARE PARTS</b>			
1 TAILAMP RH	1 PC	856.10	X 856.10
2 REAR BUMPER	1 PC	861.20	X 861.20
3 REAR BUMPER SIDE RETAINERS LH & RH OS dls NSWC	2 PC	81.00	X 162.00
4 REAR BUMPER CLIPS	15 PC	40.50	X 607.50
5 REAR BUMPER REFLECTOR RH	1 PC	66.80	X 66.80
6 REAR BUMPER MOULDING RH - CHECK PRICE (Lower side short R/H)	1 PC	0.00	X 0.00
7 REAR BUMPER REINFORCEMENT	1 PC	403.40	X 403.40
8 REAR WINDSCREEN MOULDING TOP - CHECK PRICE	1 PC	0.00	X 0.00
9 REAR WINDSCREEN MOULDING SIDE - CHECK PRICE	2 PC	0.00	X 0.00
10 REAR WINDSCREEN MOULDING LOWER - CHECK PRICE	1 PC	0.00	X 0.00
11 REAR FENDER RH	1 PC	827.10	X 827.10
12 REAR FENDER COWLING RH	1 PC	220.10	X 220.10
13 REAR FENDER COWLING CLIPS	8 PC	20.00	X 160.00
14 REAR END PANEL	1 PC	384.50	X 384.50
15 TAILAMP PANEL RH	1 PC	57.20	X 57.20
		3,822.40	
	Less 20%	764.48	3,057.92
<b>Special Nett</b>			
16 INNER SEAL	1 PC	20.00	X 20.00
17 WINDSCREEN SEALANT	1 PC	40.00	X 40.00
18 SPORT RIM RHF - CHECK PRICE	1 PC	0.00	X 0.00
		60.00	60.00
<b>LABOUR</b>			
19 TO DISCONNECT AND CHECK ELECTRICAL WIRING, WIRE SOCKETS AND ETC. TO REMOVE AND REINSTALL DAMAGED ELECTRICAL UNITS, TEST AND RECTIFY FOR PROPER FUNCTIONING.	1 PC	40.00	X 40.00
20 TO CHECK AND RE-ADJUST WHEEL ALIGNMENT.	1 PC	60.00	X 60.00
21 TO REMOVE AND REINSTALL/REPLACE FRONT/REAR WINDSCREEN.	1 PC	120.00	X 120.00
22 TO REMOVE AND REINSTALL CUSHIONS, SEATS, BACKREST, INNER TRIM, GARNISH, ROOF LINING OR UPHOLSTERY TO FACILITATE REPAIRS.	1 PC	120.00	X 120.00
23 TO REMOVE AND REINSTALL/REPLACE FUEL TANK, FIXTURE AND ATTACHMENTS.	1 PC	80.00	X 80.00
24 TO REMOVE AND REINSTALL/REPLACE FRONT/REAR BUMPER SENSORS.	1 PC	80.00	X 80.00
25 TO SPRY ANTI-RUST COATING ON AFFECTED AREAS.	1 PC	60.00	X 60.00







# AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047  
TEL: 6483 1244 ( 4 lines ) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg  
GST:M9-0009639-E RCB NO:06470300B

**SURVEYOR COPY**

**M/S :** RAMASWAMY CHOCKALINGAM  
BLK 805 YISHUN RING ROAD  
#12-4297  
SINGAPORE 760805

**Estimate No:** MC0912516  
**Date:** 23 Oct 2017  
**Policy No:** GA165831  
**Veh Reg No:** SLA5355X  
**Make/Model:** MAZDA 3 SP

**ATTN:**  
**Your Ref No:** SLA5355X  
**Claim Type:** Third Party  
**Accident Date:** 21/10/2017  
**TP Veh Reg No:** SHA7779R

## Estimate Repair Cost to Vehicle No :SLA5355X

Description	Quantity	List Price	Amount
26 TO DISMANTLE ALL DAMAGED PARTS.TO CUT & WELD TAILAMP PANEL RH,END PANEL,REAR FENDER RH. TO KNOCK & REPAIR INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME.	1 PC	<del>SS 1,100.00</del>	<del>SS 700</del>
27 TO SPRAY TAILAMP PANEL,REAR BUMPER,END PANEL, REAR FENDER RH.	1 PC	<del>1,000.00</del>	<del>650</del>
		2,660.00	2,660.00
		Total	SS 5,777.92
		Add GST @ 7%	404.45
		Total Amount Payable	SS 6,182.37

TOTAL: SINGAPORE DOLLAR SIX THOUSAND ONE HUNDRED EIGHTY TWO AND CENTS THIRTY SEVEN ONLY

Please arrange this vehicle to be surveyed soonest possible.  
Thank You

**For AH LIM MOTOR COMPANY**

  
AUTHORISED SIGNATURE

*Not Authorised*  
*After Repair*  
*After Paint Done*  
*Atk Auto (M)*  
*Hwday S*  
*26/10/2017*  
*[Signature]*  
*11/11/17*

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




# 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/FCI17020411/Drbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 14-08-2018	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHA 7779R	Veh. Inspected	SLA 5355X	
Policy No.	D-15072701MFSH	Coverage (\$)	0.00	
Claim No.	D17009958MFSH	Excess (\$)	0.00	
Assign From	SERENE LER	Assign Date	24/10/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	MAZDA 3	c.c	1598	
Engine No.	HIDDEN	Year of Reg.	2008	
Chassis No.	JM6BK106280430943	Colour	GREY	
Odometer	113842	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/55 R16	GOODYEAR	8 mm	
L/H Front Tyre	205/55 R16	GOODYEAR	8 mm	
R/H Rear Tyre	205/55 R16	GOODYEAR	8 mm	
L/H Rear Tyre	205/55 R16	GOODYEAR	8 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	21/10/2017	Inspection Date	26/10/2017	
Survey held at	AH LIM MOTOR CO NO 10 ANG MO KIO IND PK 2A #01-09 AMK AUTOPOINT SINGAPORE 568047			
<b>5a. Remarks</b>				
A)THE VEHICLE HAS NOT SEND IN FOR REPAIRS. B)DAMAGES CONSISTENT TO ACCIDENT REPORT. C)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. D)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>4 Working Days</b>		



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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

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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLA 5355X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	TAILLAMP RH	SERVICEABLE	856.10	-
1	REAR BUMPER	DEFORMED	861.20	861.20
2	REAR BUMPER SIDE RETAINER LH & RH	O/S DISTORTED / N/S SERVICEABLE	81.00	40.50
15	REAR BUMPER CLIPS	NECESSARY	45.00	40.00
1	REAR BUMPER REFLECTOR RH	CRACKED	66.80	66.80
1	REAR BUMPER MOULDING RH (NPA)	DISTORTED	-	-
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	403.40	-
1	REAR WINDSCREEN MOULDING TOP (NPA)	NOT NECESSARY	-	-
2	REAR WINDSCREEN MOULDING SIDE (NPA)	NOT NECESSARY	-	-
1	REAR WINDSCREEN MOULDING LOWER (NPA)	NOT NECESSARY	-	-
1	REAR FENDER RH	TO REPAIR SEE LABOUR	827.10	-
1	REAR FENDER COWLING RH	SERVICEABLE	220.10	-
8	REAR FENDER COWLING CLIPS	SERVICEABLE	20.00	-
1	REAR END PANEL	TO REPAIR SEE LABOUR	384.50	-
1	TAILLAMP PANEL RH	TO REPAIR SEE LABOUR	57.20	-
	LESS 20% DISCOUNT		-764.48	-201.70
			3,057.92	806.80
<b><u>SPECIAL NETT ITEMS</u></b>				
1	INNER SEAL (SN)	NOT NECESSARY	20.00	-
1	WINDSCREEN SEALANT (SN)	NOT NECESSARY	40.00	-
1	SPORT RIM RHF (NPA) (SN)	SERVICEABLE	-	-
			60.00	-
<b><u>LABOUR</u></b>				
	TO DISCONNECT AND CHECK ELECTRICAL WIRING, WIRE SOCKETS AND ETC. TO REMOVE AND REINSTALL DAMAGED ELECTRICAL UNITS, TEST AND RECTIFY FOR PROPER FUNCTIONING.		40.00	30.00
	TO CHECK AND RE-ADJUST WHEEL ALIGNMENT.	NOT NECESSARY	60.00	-

Report Ref No. CS/FCI17020411/Drbe2



## 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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE AND REINSTALL / REPLACE FRONT / REAR WINDSCREEN.	NOT NECESSARY	120.00	-
	TO REMOVE AND REINSTALL CUSHION, SEATS, BACKREST, INNER TRIM, GARNISH, ROOF LINING OR UPHOLSTERY TO FACILITATE REPAIRS.	NOT NECESSARY	120.00	-
	TO REMOVE AND REINSTALL / REPLACE FUEL TANK, FIXTURE AND ATTACHMENTS.	NOT NECESSARY	80.00	-
	TO REMOVE AND REINSTALL / REPLACE FRONT / REAR BUMPER SENSORS.		80.00	60.00
	TO SPRAY ANTI-RUST COATING ON AFFECTED AREAS.		60.00	30.00
	TO DISMANTLE ALL DAMAGED PARTS. TO CUT & WELD TAILLAMP PANEL RH, END PANEL, REAR FENDER RH. TO KNOCK & REPAIR INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME. INCLUSIVE OF THE REPAIR OF REAR FENDER RH, REAR END PANEL AND TAILLAMP PANEL RH.		1,100.00	700.00
	TO SPRAY TAILLAMP PANEL, REAR BUMPER, END PANEL, REAR FENDER RH.		1,000.00	650.00
			2,660.00	1,470.00
<b>GRAND TOTAL</b>			<b>5,777.92</b>	<b>2,276.80</b>
<b>RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE)</b>				<b>2,276.80</b>

Report Ref No. CS/FCI17020411/Drbe2

ANG BRYAN TANI

Automotive Assessor / Investigator

ADRIAN LING WAI PING

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

Licensed Appraiser

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