

Form 1

ASS. REC. BY

REF CS/FCI17021403/RH22

Issue/Revision

SA/Agent

Rashid

ASSIGNMENT (Office)

CWS

From (Person)

Sifheira

FCI

Date/Time 12.13pm @ 9/11/17

Estimated Cost

Bill to

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

To Inspect Vehicle No

SJA 4851K

Insured

SHB3501X

at Workshop m/s

Zhong Cheng

Tel

93382859

of

Blk 6 Woodlands Rd Yew Tee Ind-Est. 399J

Policy No

Claim No

D17010313MFSH

Sum Insured

Excess

Make of Veh

(Client's Record)

D.O.A. 3/11/2017

CA / REV / REP. / REV 24 HRS

'wp'

H.O.D. Endorsement

Date/Time

12.25pm @ 9/11/17

Person Contacted

Ms. Sini

Vehicle IN

OUT

Date/Time

Action/Instruction (✓) Estimate

SJA 4851K - X

SHB 3501X - NS / INC17007394 / H 1h3m2 - D.O.A. 13/04/2017

Surveyor: Ram

REF:

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

To Inspect Vehicle No: SJA 4851Kat Workshop m/s Zhong Chenof 3K 6, Woonnam Rd 3993Insured: FCI / up

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.

Bal. of 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: SJA 4851K Yr Regn: Dec 07Type: ☒ M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hondac.c. 1497Colour: grey

A/C: Insured / Std / NI / NA

Sp. Reading: 688703

T/Radio: Insured / Std / NI / NA

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

C/No: MRH6D86568P646109

Gen. Cond: Good / Fair / Poor / Burnt

Steering: ☒ Order / Jammed / Leaked / Burnt orBrake: ☒ Order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/45R17

R: \_\_\_\_\_

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 03/11/17D.O.I. 20/11/17Survey held at Zhong Chen

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

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

Date / Time Action / Instruction

Market value \$11,000/-

LTA: 9420

Nett value: 1580/-

RECEIVED 24 DEC 2017

Lump sum \$1000/- confirm (Red: 2006-32-66%)

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

) S + RS \$

) Photos

) Others

Report Format :

Lump Sum / I.B.I: (\$ 1000/-)

TOTAL

321



# 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/FCI17021403/R1tb	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 09-11-2017	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHB 3501X	Veh. Inspected	SJA 4851K	
Policy No.		Coverage (\$)	0.00	
Claim No.	D17010313MFSH	Excess (\$)	0.00	
Assign From	CWS (SITHARA)	Assign Date	09/11/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	03/11/2017	Inspection Date	09/11/2017	
Survey held at	ZHONG CHENG ENTERPRISE BLK 4 YEW TEE IND 393-H WOODLANDS ROAD SINGAPORE 677969			
<b>5a. Remarks</b>				
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	06-11-2017	Our Ref No. D17010313MFSH
Accident Date	03-11-2017	Claim Type. Third Party
Insured Vehicle	SHB3501X	Third Party Vehicle. SJA4851K
Survey Location	BLK 6 WOODLANDS ROAD YEW TEE INDUSTRIAL ESTATE 399J	
Contact Person.	MS SINI	
Contact No.	93382859/ 93382859	Fax No. 0
Survey Type	WITHOUT PREJUDICE:	
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	ZHONG CHENG ENTERPRISE	Attention. NIL
Cc : TP Solicitor	CHEONGHOH LAW CORPORATION	TP Solicitor Fax No. NA
Officer Incharge	SITHARA	

## 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/229852)



PRI Documents



Close



## PRI Header Details

Claim No	D17010313MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & CHEONGH
Workshop Name	ZHONG CHENG ENTERPRISE (Contact Person : MS SINI)	Survey Location & Contact Details	BLK 6 WOODLANDS ROAD YEW TEE INDUSTRIAL ESTAT Mobile: 93382859 , Phone: 93382859 , Fax: 0 EmailId: MAIL@CHEONGHOH.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHB3501X	TP Vehicle No	SJA4851K
PRI Recieved Date	08-11-2017 07:38:36 PM	Surveyor Appointed Date	09-11-2017 12:12:44 PM	Surveyor Accept Date	09-11-2017 1.

## Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	09-11-2017	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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## Rasul (LKKAuto)

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**From:** zhong xiong Tan <zhongchengenterprise@hotmail.com>  
**Sent:** Tuesday, 28 November, 2017 3:25 PM  
**To:** Rasul (LKKAuto)  
**Subject:** Re: SJA4851K GIA Report

Hi Rasul,

Thank you.

Best Regards  
Sini Tan  
Zhong Cheng Enterprise Pte Ltd  
Blk 6, 399J  
Yew Tee Industrial Est  
S678008  
HP: 93382859 Fax: 68942883

---

**From:** Rasul (LKKAuto) <Rasul@lkkauto.com>  
**Sent:** Tuesday, November 28, 2017 3:18 PM  
**To:** zhong xiong Tan  
**Subject:** RE: SJA4851K GIA Report

Hi Sini,

5 days

Best Regards,

**Rasul** | Assessor

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [Rasul@lkkauto.com](mailto:Rasul@lkkauto.com) | fax: 6841-4315

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



Auto  
Consultants  
Pte Ltd

*Save the Earth. Print only when necessary.*

---

**From:** zhong xiong Tan [<mailto:zhongchengenterprise@hotmail.com>]  
**Sent:** Tuesday, 28 November, 2017 3:14 PM  
**To:** Rasul (LKKAuto)  
**Subject:** Re: SJA4851K GIA Report

Hi Rasul,

Ok to accept. Repair days?

Thanks

Best Regards  
Sini Tan

Zhong Cheng Enterprise Pte Ltd  
Blk 6, 399J  
Yew Tee Industrial Est  
S678008  
HP: 93382859 Fax: 68942883

---

**From:** Rasul (LKKAuto) <[Rasul@lkkauto.com](mailto:Rasul@lkkauto.com)>  
**Sent:** Tuesday, November 28, 2017 3:02 PM  
**To:** zhong xiong Tan  
**Subject:** RE: SJA4851K GIA Report

Hi Sini,

As spoken, the NETT amount is 1K

Best Regards,

**Rasul** | Assessor

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [Rasul@lkkauto.com](mailto:Rasul@lkkauto.com) | fax: 6841-4315

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



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Pte Ltd

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---

**From:** zhong xiong Tan [<mailto:zhongchengenterprise@hotmail.com>]  
**Sent:** Tuesday, 28 November, 2017 2:37 PM  
**To:** Rasul (LKKAuto)  
**Subject:** Re: SJA4851K GIA Report

Hi Rasul,

Yes, left only 1 1/2 month.

Thanks

Best Regards

Sini Tan

Zhong Cheng Enterprise Pte Ltd

Blk 6, 399J

Yew Tee Industrial Est

S678008

HP: 93382859 Fax: 68942883

---

**From:** Rasul (LKKAuto) <[Rasul@lkkauto.com](mailto:Rasul@lkkauto.com)>  
**Sent:** Tuesday, November 28, 2017 2:30 PM  
**To:** zhong xiong Tan  
**Subject:** RE: SJA4851K GIA Report

Hi Sini,

This vehicle COE expired on 11/12/2017

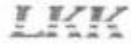
Best Regards,

**Rasul** | Assessor

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [Rasul@lkkauto.com](mailto:Rasul@lkkauto.com) | fax: 6841-4315

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



Auto  
Consultants  
Pte Ltd

*Save the Earth. Print only when necessary.*

---

**From:** zhong xiong Tan [<mailto:zhongchengenterprise@hotmail.com>]

**Sent:** Friday, 24 November, 2017 5:09 PM

**To:** Rasul (LKKAuto)

**Subject:** Fw: SJA4851K GIA Report

Dear Rasul,

GIA and after paint and estimate fyi.

Thanks

Best Regards

Sini Tan

Zhong Cheng Enterprise Pte Ltd

Blk 6, 399J

Yew Tee Industrial Est

S678008

HP: 93382859 Fax: 68942883

---

**From:** YT(HQ) <[utauto@singnet.com.sg](mailto:utauto@singnet.com.sg)>

**Sent:** Wednesday, November 8, 2017 3:33 PM

**To:** [zhongchengenterprise@hotmail.com](mailto:zhongchengenterprise@hotmail.com)

**Cc:** [utauto@singnet.com.sg](mailto:utauto@singnet.com.sg)

**Subject:** SJA4851K GIA Report

Hi,

Kindly find attached GIA report for your kind attention.

Thank You ☺

Best Regards

Ms Lai Yee Meng





**Yew Tee Automobile Tech Pte Ltd**

HQ:

Blk 6 Woodlands Road 399F

Yew Tee Ind. Est

Singapore 678006

DID: 6765 3373 / 6762 2081 / 6764 9042 Fax: 6760 4895

Email: [utauto@singnet.com.sg](mailto:utauto@singnet.com.sg)

Branch Office:

Synergy@KB, 25 Kaki Bukit Road

Unit No #01-60/61

Singapore 417800

DID: 6702 3113

Email: [utauto2@singnet.com.sg](mailto:utauto2@singnet.com.sg)



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### 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	08/11/2017 15:11
Date Of Accident	03/11/2017 15:20
Exact Location Of Accident	ALJUNIED RD TRAFFIC JUNCTION
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA4851K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CAR PRO AUTO
Co Reg No	53251538B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93382859
Alternative Phone No	OFFICE-93382859

#### Vehicle Particulars

Manufacturer	HONDA
Model	CITY VTEC CVT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL OR COMPANY'S USAGE
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	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5077011641-01
Cover Note Number	

#### Driver

Name of Driver	SIN KIN SENG (XIAN JIANCHENG)
NRIC No	S7738324G
Date Of Birth	31/12/1977
Occupation	INDOOR
Date Of Driving Pass	27/05/1997
Driving Experience	20 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91846002
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 682C WOODLANDS DRIVE 73 #13-255
Postcode	733682
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHMENT

#### 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	SHB3501X
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

### 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)

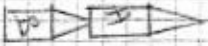
Reporting Centre Personnel's Signature  
Name:

## Sketch Plan #2

### SKETCH PLAN

A) SJA 4851K

B) SHB 3501X



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At mentioned details, my vehicle was stationary as traffic was red. Suddenly vehicle B hit into the rear of my vehicle.

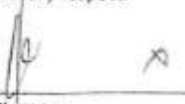
\* Later reporting as writing for 3rd party to confirm ~~pro~~ settle settlement of or proceed with insurance claim.

### DECLARATION

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

 PRO

Policyholder's Signature  
Date & Time:

 X

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



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

Accident Photo



Accident Photo





Accident Photo





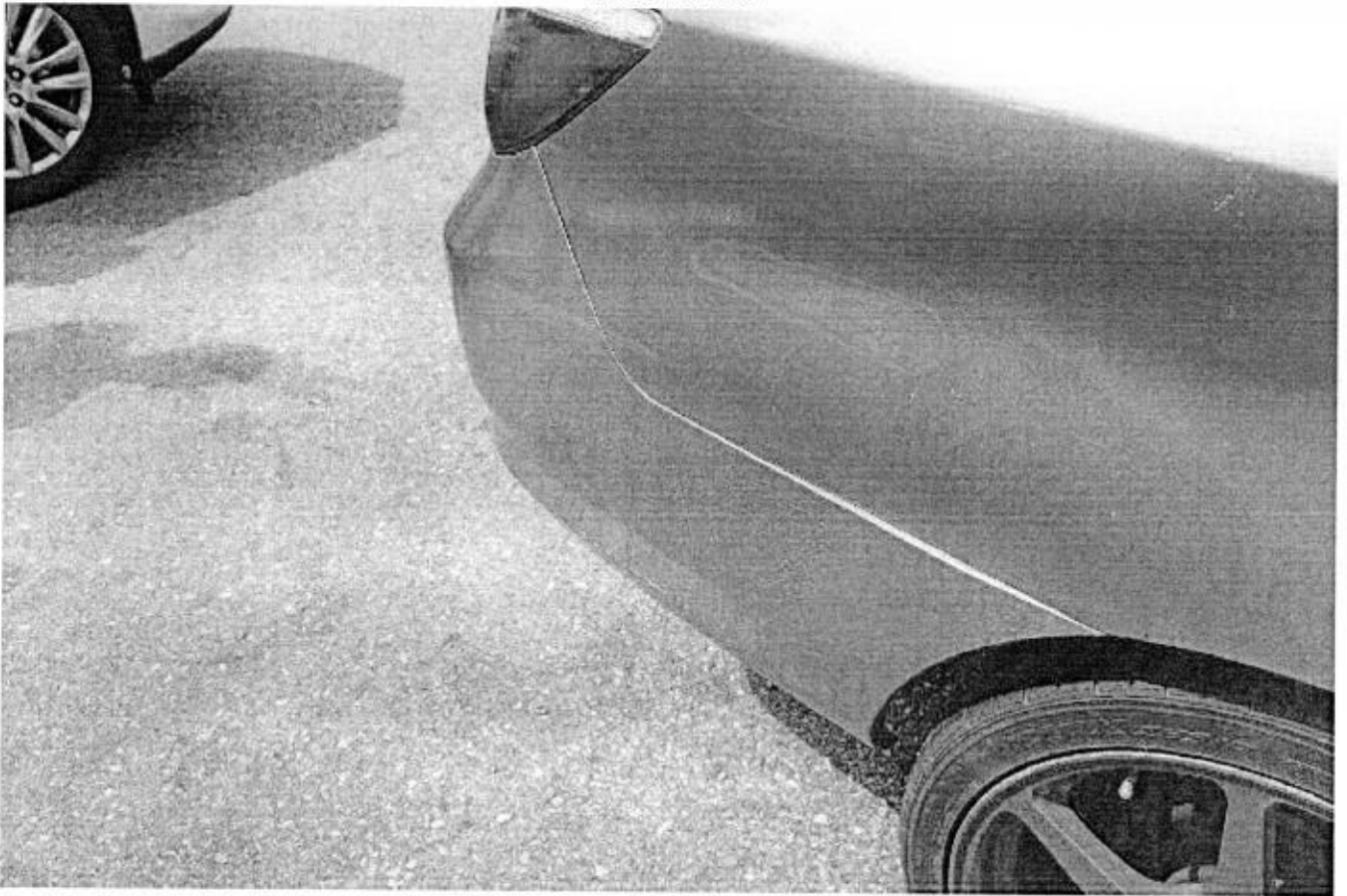
Accident Photo



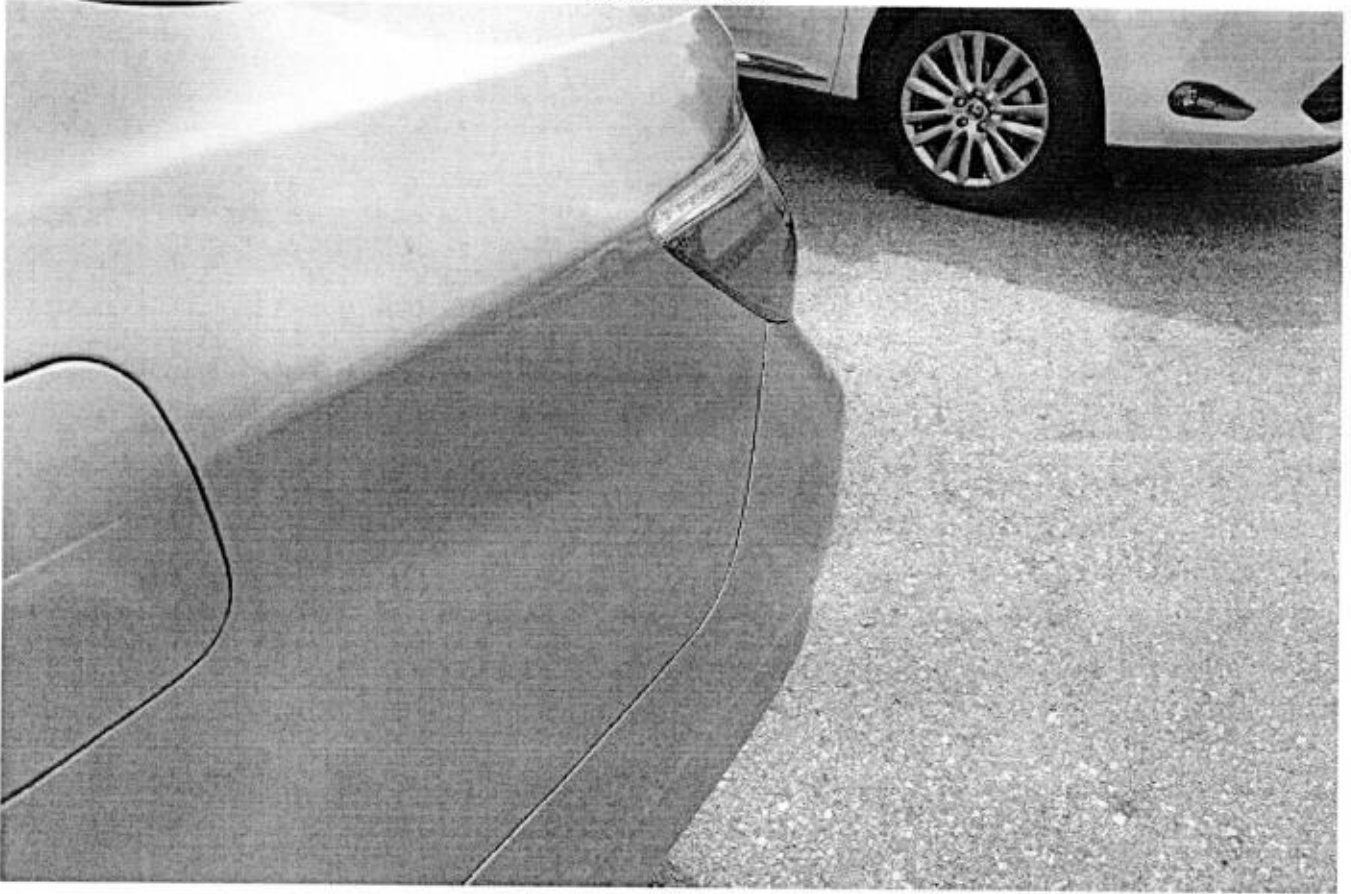
Accident Photo



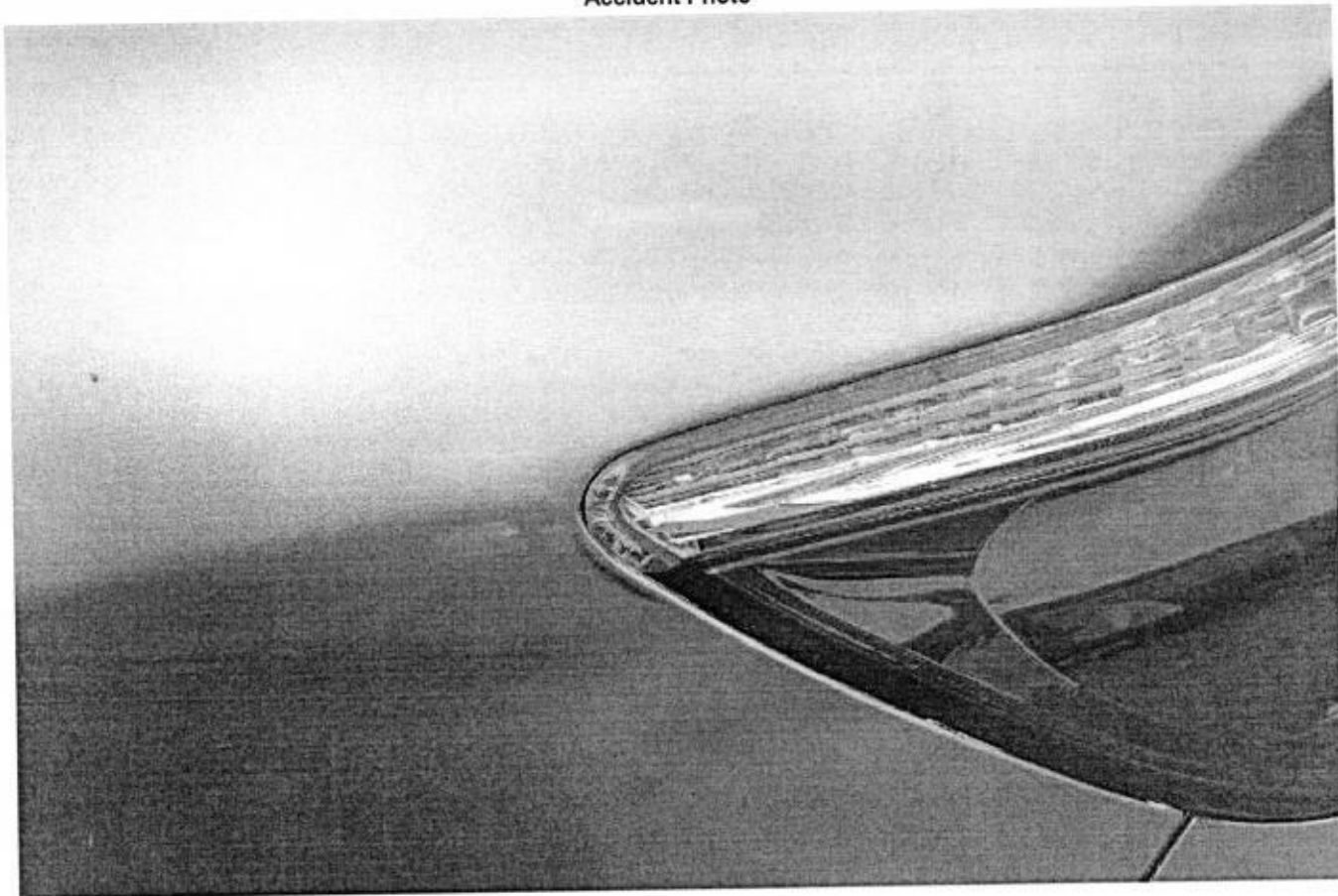
Accident Photo



Accident Photo



Accident Photo



Accident Photo



## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type	Business
Owner ID	1538B
Vehicle Details	
Vehicle No.	SJA4851K
Vehicle to be Exported	No
Intended De-registration Date	28 Nov 2017
Vehicle Make	HONDA
Vehicle Model	CITY VTEC CVT
Primary Colour	Silver
Manufacturing Year	2007
Engine No.	L15A16801063
Chassis No.	MRHGD86508P040109
Maximum Power Output	81.0 kW (108 bhp)
Open Market Value	\$17,036.00
Original Registration Date	12 Dec 2007
First Registration Date	12 Dec 2007
Transfer Count	2
Actual ARF Paid	\$18,740.00
Intended PARF Rebate Details	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	11 Dec 2017
PARF Rebate Amount	\$9,370.00
Intended COE Rebate Details	
COE Expiry Date	11 Dec 2017
COE Category	A - Car (1600cc & below)
COE Period(Years)	10
QP Paid	\$14,404.00
COE Rebate Amount	\$50.00
<b>Total Rebate Amount</b>	<b>\$9,420.00</b>

10,000  
9,420  
1580

The information contained herein is correct as at 28 Nov 2017

OK



## Enquire Transfer Fee

Vehicle Details			
Vehicle No.	SJA4851K		
Vehicle Type	R10 - Private Hire (Self-Drive) Motor Car		
Vehicle Attachment 1	No Attachment		
Vehicle Scheme	Normal		
Vehicle Make	HONDA		
Vehicle Model	CITY VTEC CVT		
Chassis No.	MRHGD86508P040109		
Propellant	Petrol		
Engine No.	L15A16801063		
Engine Capacity	1497 cc		
Maximum Power Output	81.0 kW ( 108 bhp )		
Maximum Laden Weight	1443 kg		
Unladen Weight	1108 kg		
Year Of Manufacture	2007		
Original Registration Date	12 Dec 2007		
Lifespan Expiry Date	-		
COE Category	A - Car (1600cc & below)		
Quota Premium	\$14,404.00		
COE Expiry Date	11 Dec 2017		
Road Tax Expiry Date	11 Dec 2017		
PARF Eligibility Expiry Date	11 Dec 2017		
Inspection Due Date	11 Dec 2018		
Intended Transfer Date	28 Nov 2017		
CO2 Emission	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use <a href="#">Enquire Road Tax Payable</a> for fee (s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee	11.00	-	11.00



# ZHONG CHENG ENTERPRISE PTE LTD

Vehicle no. : SJA4851K  
Model : HONDA CITY

## Estimate - Parts(s)

S/N	Qty	Descriptions	Amount
-----	-----	--------------	--------

### LIST ITEMS:-

1	1pc	Rear bumper	\$ 483.00 <i>DE</i>
2	2pc	Rear bumper retainer	\$ 74.00 <i>nee</i>
3	2 set	bumper fastener	\$ 70.00 <i>nee</i>
4	2pc	LH/RH rear taillamp	\$ 421.40 <i>car</i>
5	2 set	LH/RH rear taillamp fastners	\$ 36.00 <i>nee</i>
6	2 pcs	bootlid lamp @S\$214.20	\$ 428.00 <i>car</i>
7	2 set	bootlid lamp clips	\$ 32.00 <i>nee</i>
8	1pc	Boot	\$ 537.50 <i>R</i>
9	1pc	Bootlid lock	\$ 164.50 <i>Xsu</i>
10	1pc	Bootlid logo	\$ 38.00 <i>nee</i>
11	1pc	End panel	\$ 335.00 <i>bt</i>
12	1pc	End paneltop garnish	\$ 178.50 <i>DE</i>
13	1set	End paneltop garnish clips	\$ 28.00 <i>nee</i>
14	1	Rear exhaust pipe	\$ 432.00 <i>pt</i>
Less 20%			\$ 3,257.90
			\$ 651.58
			<b>\$ 2,606.32</b>

### Special Nett

1	1 pc	Rear carplate w housing	\$ 60.00 <i>X M</i>
2	1 set	Reverse sensor	\$ 280.00 <i>nee</i>
3	1pc	End panel sealant	\$ 60.00 <i>nee</i>
			<b>\$ 400.00</b>

Sub Total \$ 3,006.32

Vehicle no. : SJA4851K  
Model : HONDA CITY

Estimate - Labour(s)

S/N	Qty	Descriptions	Amount
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B/F

\$

LABOUR & OTHER CHARGES:-

1		To panel beat and renewal of all necessary damaged body parts	\$ 1,200.00 <del>600</del>
2		To check wiring and rewire	\$ <del>60.00</del> 30
3		To remove and reinstall reverse sensors	\$ 100.00 <del>60</del> 1430
4		To remove & realign exhaust	\$ <del>100.00</del> 60
6		To anti-rust	\$ <del>140.00</del> 80
7		To putty and spray-paint of affected areas	\$ 1,000.00 <del>600</del>
			\$ 2,600.00

Repair  
Hp 900000 68

5 days

4/3

20/11/17 @ 1710

Repair after  
repair

2044.72

260.00

1430.00

3734.72

20%

2987.71

4/3 - 3,000

Due to COE 10ft 1 month,  
workshop willing to take repair  
cost at \$1,000

4/3 - \$1,000 / 5 days




## 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/FCI17021403/R1tbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 13-12-2017	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHB 3501X	Veh. Inspected	SJA 4851K	
Policy No.	D-15072702MFSH	Coverage (\$)	0.00	
Claim No.	D17010313MFSH	Excess (\$)	0.00	
Assign From	SITHARA	Assign Date	09/11/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HONDA CITY	c.c	1497	
Engine No.	HIDDEN	Year of Reg.	2007	
Chassis No.	MRHGD86508P040109	Colour	GREY	
Odometer	388703	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/45 R17	GOODYEAR	6 mm	
L/H Front Tyre	205/45 R17	GOODYEAR	6 mm	
R/H Rear Tyre	205/45 R17	GOODYEAR	6 mm	
L/H Rear Tyre	205/45 R17	GOODYEAR	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	03/11/2017	Inspection Date	20/11/2017	
Survey held at	ZHONG CHENG ENTERPRISE BLK 4 YEW TEE IND 393-H WOODLANDS ROAD SINGAPORE 677969			
<b>5a. Remarks</b>				
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.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:			5 Working Days	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJA 4851K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	DEFORMED	483.00	483.00
2	REAR BUMPER RETAINER	NECESSARY	74.00	74.00
2	SET BUMPER FASTENER	NECESSARY	70.00	70.00
2	LH / RH REAR TAILLAMP	CRACKED	421.40	421.40
2	SET LH / RH REAR TAILLAMP FASTNERS	NECESSARY	36.00	36.00
2	BOOTLID LAMP @\$214.20	CRACKED	428.00	428.00
2	SET BOOTLID LAMP CLIPS	NECESSARY	32.00	32.00
1	BOOT	TO REPAIR SEE LABOUR	537.50	-
1	BOOTLID LOCK	SERVICEABLE	164.50	-
1	BOOTLID LOGO	NECESSARY	38.00	38.00
1	END PANEL	BENT	335.00	335.00
1	END PANEL TOP GARNISH	DEFORMED	178.50	178.50
1	SET END PANEL TOP GARNISH CLIPS	NECESSARY	28.00	28.00
1	REAR EXHAUST PIPE	BENT	432.00	432.00
	TO ANTI-RUST.		140.00	80.00
	LESS 20% DISCOUNT		-651.58	-511.18
			2,746.32	2,124.72
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR CARPLATE W HOUSING (SN)	NOT NECESSARY	60.00	-
1	SET REVERSE SENSOR (SN)	NOT WORKING	280.00	200.00
1	END PANEL SEALANT (SN)	NECESSARY	60.00	60.00
			400.00	260.00
<b><u>LABOUR</u></b>				
	TO PANEL BEAT AND RENEWAL OF ALL NECESSARY DAMAGED BODY PARTS. INCLUSIVE OF THE REPAIR OF BOOT.		1,200.00	600.00
	TO CHECK WIRING AND REWIRE.		60.00	30.00
	TO REMOVE AND REINSTALL REVERSE SENSORS.		100.00	60.00
	TO REMOVE & REALIGN EXHAUST.		100.00	60.00



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO PUTTY AND SPRAY-PAINT OF AFFECTED AREAS.		1,000.00	600.00
			2,460.00	1,350.00
	GRAND TOTAL		5,606.32	3,734.72
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,000.00

Report Ref No. CS/FCI17021403/R1tbe2

MARKET VALUE: \$11,000.00 (EST)-LTA REIMBURSEMENT VALUE: \$9,420.00=NETT VALUE: \$1,580.00

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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