CWS		117021745 / h MENT (Office)	20
From (Person	Lurene Jaw	FCI	122 9-28 am @ 14/11/15
Estimated Co.		Billio	
	STERES OD RESTEVATING M		
To Inspect Ve	hide No. SJS 7406	52	Insured SHC 156Z
at Workshop	Hock Motor		68449707
of No. 1 Ku	1ki Bukit Ave 6#02-22 a	utoby	22 MM N =
Policy No		Claim No.	D17010518 MFSH
Sum Insured		Excess	
Make of Veh (Client's Recor			DOA 11/11/2017
CA / REV	/ REP. / REV 24 HRS wp)		H.O.D. Endorseners.
Date/Tune	9.39 ⊗14/11/17 Person Contac	ted Kelvin	Velice CLOUT
	1 1 :		
Date/Time	Action/Instruction (+ Estim	WE	
47	SIS 74062 - ×	iote	
47	SJS 74062-x	rote	
47		iote	

Survey Department Check List (Case Handler)

dmin (): Case handler to make sure all inform				
) Office	Assign Form	<u>Y-Date</u>	N-Date	Y-Date	N-Date
C	Reference No.	1			
C	Customer Code	V			
N	Assign From	V			
C	Assign Date	/			
C	Veh No (Inspected)	/			
C	Veh No (Insured)	V			
C	D.O.A	/			
C	Policy No				
C	Claim No				
C	Insurance Authorisation (CA /REV/REP)				
C	Report Type	/			
С	Weekend Charges				
N	Survey held at/Repairer	1			
С	Excess	-			
				HOUSEN FRANK	
urveyo		he surveryor c	ompleted a	II required	information.
	nment Form				
C	Vehicle No	V ,	-		
C	Regn Month/Year	~			-
	Vehicle Type	/			
N	Make & Model	/			-
С	Engine Capacity. (C.C)	/			
N	Colour	/		_	-
С	Odometer. (Sp.Reading)	V	-	_	
С	Chassis No	/		_	-
N	General Condition	-	-		
N	Steering	/	-	-	
N	Brake	1	-	-	-
N	Modification (Modi)		+	-	
С	Tyre Size	V	-		
N	Tyre Make		+	-	-
С	Tyre Balance	V		-	+
С	Date of Inspection	/		-	
N	Survey held	V .	-	-	
Ν	Des.of Damages	_/			
	em - (Views/Merimen)				
C	Damaged Vehicle Photographs Uploaded				
(3) Worl	kshop Estimate/Assignment Form				
N	ALL Parts condition				
С	Market Value for OD cases				
С	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
C	Days of repair				
C	Finalised Amount				
C	Re-inspection Cases to Finalize within 5 Days				
	em - (Views/Merimen)		-		
C	Resurvey photo Uploaded			N F	

*C: Critical *N: Non-Critical

Case Handler

Date

Reference'No.:



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

IRST CAP	ITAL INSUF	RANCE LTD	Ref : CS3/FCI170217	745/Wb		
66 ROBINSON ROAD 16-01 CITY HOUSESINGAPORE 068877		Date: 14-11-2017 Code: FCI2				
The second	E. Philosophe	Policy Particula	ars :- (THIRD PARTY CLAI			
Insur	ed Veh.	SHC 0156Z	Veh. Inspected	SJS 7406Z		
Polic	y No.		Coverage (\$)	0.00		
Clain	n No.	D17010518MFSH	Excess (\$)	0.00		
Assig	gn From	CWS (LURENE JAW)	Assign Date	14/11/2017		
2.	May 1915	Vehicle P	articulars & Condition			
Make	& Model		c.c	0		
Engi	ne No.	HIDDEN	Year of Reg.			
Chas	sis No.		Colour			
Odor	meter	•	Steering			
Brak	es		Modification			
Gene	eral					
3.	Sol (Yachu	Co	nditions of Tyres	AND SHEET FOR		
		Size	Make	Balance		
R/H I	Front Tyre			mm		
L/H F	Front Tyre			mm		
R/H	Rear Tyre			mm		
L/H F	Rear Tyre			mm		
4.		Desc	ription of Damages			
			11.6			
5.			neral Information	14/11/2017		
	dent Date	11/11/2017	Inspection Date	14/11/2017		
Surv	ey held at		101			
		NO.1 KAKI BUKIT AVE 6 #02-38 AUTOBAY @KAKI SINGAPORE 417883	BUKIT			
5a.			Remarks			
B) TH	HE REPAIR E	ON WAS CONDUCTED ON STIMATE WAS NOT PRESE VAS TOLD TO PREPARE TH LEASE FIND DAMAGED VEH	A "WITHOUT PREJUDICE" BA ENTED AT THE TIME OF INSF HE ESTIMATE. HICLE PHOTOGRAPHS.	ASIS. PECTION.		

First Capital Insurance Limited

A FAIRFAX Company

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

MOTOR SURVEY ASSIGNMENT

Date

13-11-2017

Our Ref No. D17010518MFSH

Accident Date

11-11-2017

Claim Type. Third Party

Insured Vehicle

SHC0156Z

Third Party Vehicle. SJS7406Z

Survey Location

No 1 kaki bukit avenue 6 #02-38 autobay @ kaki bukit

Contact Person.

KELVIN

Contact No.

68499707/0

Fax No. 67535346

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

HOCK MOTOR WORKSHOP

Attention, NIL

Cc: TP Solicitor

C YOGARAJAH LLC

TP Solicitor Fax No. NA

Officer Incharge

LURENE

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.

			PRI Header Details		
Claim No	D17010518MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & C YOGAR
Workshop Name	HOCK MOTOR WORKSHOP (Contact Person : KELVIN)	Survey Location & Contact Details	No 1 kaki bukit avenue 6 # Mobile: 0 , Phone: 68499 EmailId: HELEN@YOGA-LE	707 , Fax: 67	그렇게 하다는 얼마나 하는 것이다. 그렇게 하는 생각이 되었다면서
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC0156Z	TP Vehicle No	SJS7406Z
PRI Recieved Date	13-11-2017 06:02:07 PM	Surveyor Appointed Date	14-11-2017 09:27:56 AM	Surveyor Accept Date	14-11-2017 1
			Survey Report Upload		
Surveyor Inspection Date *:	iii iii iii	Surveyor Report Date	14-11-2017	Upload Survey Report *:	Choose File
			Vehicle Particulars		
Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year
Chasis No		Engine No		Mileage	I
Color		Cubic Capacity			he
Multiple Do	ocuments Upload				
		Upload Multiple	e Documents		
File Nam	ne			Action	
Surveyor J	ob Remarks				
	1				
Remarks				Save	

MSIVE17150505 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 13/11/2017 17:49

SINGAPORE ACCIDENT STATEMENT



IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be completed by the Policyholder and/or the Authorised Driver.

3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.

4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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.

ACC		(T &	1 A T	1001 = 1	uт
ACC	DEI	4 I O		100	

Date Of Report 13/11/2017 17:49

Date Of Accident 11/11/2017 03:10

Exact Location Of Accident ALONG HAVELOCK ROAD.

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJS7406Z

Insured/Policyholder

Name Of Registered Owner HWV RENTAL PTE LTD

Co Reg No 201721318E Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-64647339

Vehicle Particulars

Manufacturer MAZDA

Model 5

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

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5094745084

Cover Note Number

Driver

Name of Driver MD ESHAMMUDIN BIN AMBALI

 NRIC No
 S8116619F

 Date Of Birth
 23/05/1981

 Occupation
 INDOOR

 Date Of Driving Pass
 11/10/2010

Driving Experience 7 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-82394837

Fax Number

Contact Number

EMail Address NOEMAIL

PUNGGOL PLACE #04-1218 BLK 210A

stonde

Vas 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 - CROSS JUNCTION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Was any body injured in the Accident?

YES

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?

YES

If Yes, Please state which Police Station

Police Station Name

PUNGGOL N.P.C

Police Station Address

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT NO.T/20171111/2019.

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

SHC156Z

Vehicle Make/Model/Colour

Details Of Properties

VEH B

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

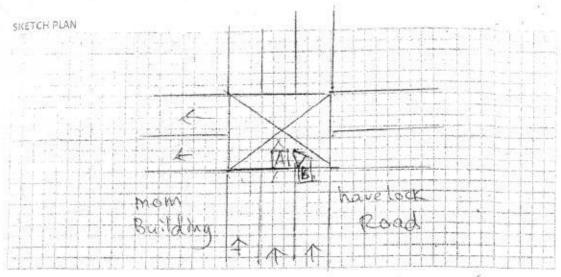
No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Accident Sketch Plan Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
(SHC 156Z) turned less and hit	suddenty vehicle B
Dortes	J 1
(* After accident he doesn't LOANT	to give his details,
Imindiately I call TEARPIC Police. HE clo	aim that he coant
TO TAKE PASSANGER.).	
* I was in the wich can lik 5-	SCAR fuer 360°
* 1 was in the wich car lik 5-	10 min due to
giddy and stock	
	4
	-2
GLARATION	7

he incegoing particulars are true in

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name

NRIC/FIN No.:

Accident Sketch Plan Pg. 1





Police Station Of Origin; Punggol N.P.C 21A Tebing Lane SINGAPORE 826837 Tel No. 1800-6049999 Report No. 172017111172019

CONTINUATION OF REPORT

Name	MOHAMMAD ESHAMMUDIN BIN AMBALI		ID No	77	S8116619F
Related Vehicle	SJS7406Z (Cad		Conta	ct No.	82394837
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class Drivin Licend Expiry	g	Class, 3 Date of Expiry: NIL
Date Freatment	11/11/2017	Date Disc	harge	11/11	/2017
No. of Days gran	ted Medical Leave 05	Degree of	f Injury	Slight	

Brief Details

On 11/11/2017 at about 3.10am, I was driving my Black Mazda 5 bearing registration number SJS74062 along Havelock Rd towards Upper Pickering St at the 2nd lane from the left. As I approached the cross junction of Havelock Road and New Market Road, out of the sudden there was a Yellow CitrCab taxi bearing registration number SHC156Z, which was from the centre lane, making a left turn towards New Market Road. As such, the said taxi, front left bumper collided with my right rear passenger door.

As a result of the collision, my car swerved and came to a stop inside the Yellow box at the cross junction. I then went out from my car and approached the taxi driver, who also stopped at the said junction. I then asked for his particulars however he does not wish to give and informed me that he wanted to take a passenger. He then left the said location without providing any particulars. However I managed to get a photo of his Taxi's registration number. I then called the Police for assistance.

After twenty minutes later, the Traffic Police arrived and attended to me. A few minutes later, the Ambulance arrived and I was attended by the paramedics. During the accident, I felt pain on my right upper body and was subsequently conveyed to Singapore General Hospital to seek further treatment. It was then given some medication and 5 days of medical leave.





1 of 3

Report No. T/20171111/2019

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

Dete/Time Report Made: 11/11/2017 06:50			Vide Report No.:	Station Dlary No. 20	
or constitution	MARKET PARTIES	Spark of the state of	ARROWS AND REAL PROPERTY.		
MOHAM	Informant: MAD ESHA	AMMUDIN BIN	Address: APT BLK 210A PUNGGOL PL 821210	ACE #04-1218 SINGAPORE	
AMBALI ID Type / ID No.: NRIC NO / S8116619F		19F	Contact No.: Home/Office:	Mobile: 82394837	
National			Email:		
Sex: Age: Date of Birth:		Date of Birth: 23/05/1981	Type of Informant:		
Race: Malay Occupation: Grab Driver			Language; English	Institution / School Name:	
			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	e of Conveyed By Ambulance Drive: Accident:		Date/Time of Accident: 11/11/2017 03:10	Type of Location: X-Junction
Location: Along Road 1 HAVELOCK I NEW MARKE At the X-Junc Weather:	ROAD IT ROAD tion of Havelock Road and New Road	Market Ros	ıd	Road Speed Limit:
Clear Dry Traffic Flow: Traffic Control: One Way Traffic Light - Working				Traffic Volume: Moderate
Type of Collis	lon: ling Vehicles - Head To Side	54	Anyone conveyed by ambulance: Yes	

					oversion discoversion	
SHC156Z	Taxi	HYUNDAI	他们的"他是不是的"。	Yellow	Slightly Damaged	0
SJS7406Z	Car	MAZDA	Mazda 5	Black	Seriously Damaged	1,800

Any Pedestrian Involved: No	
Any Pedestrian Involved: No No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing; NA





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 3 Report No. T/20171111/2019

CONTINUATION OF REPORT

A. X. A. S. D. L. T. L.		REAL PROPERTY.		SHIP!	12 (1000)	
Name	MOHAMMAD ESHA	MOHAMMAD ESHAMMUDIN BIN AMBALI			,	S8116619F
Related Vehicle	SJS7406Z (Car)			Contact No.		82394837
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL			Class Drivin Licen Expin	g	Class: 3 Date of Expiry: NIL
Date Treatment	11/11/2017		Date Disc	harge		1/2017
No. of Days gran	ted Medical Leave	05	Degree o	finjury	Sligh	t

Brief Details.

On 11/11/2017 at about 3.10am, I was driving my Black Mazda 5 bearing registration number SJS7406Z along Havelock Rd towards Upper Pickering St at the 2nd lane from the left. As I approached the cross junction of Havelock Road and New Market Road, out of the sudden there was a Yellow CitiCab taxl bearing registration number SHC156Z, which was from the centre lane, making a left turn towards New Market Road. As such, the eald taxl, front left bumper collided with my right rear passenger door.

As a result of the collision, my car swerved and came to a stop inside the Yellow box at the cross junction. I then went out from my car and approached the taxi driver, who also stopped at the said junction. I then asked for his particulars however he does not wish to give and informed me that he wanted to take a passenger. He then left the said location without providing any particulars. However I managed to get a photo of his Taxi's registration number. I then called the Police for assistance.

After twenty minutes later, the Traffic Police arrived and attended to me. A few minutes later, the Ambulance arrived and I was attended by the paramedics. During the accident, I felt pain on my right upper body and was subsequently conveyed to Singapore General Hospital to seek further treatment. I was then given some medication and 5 days of medical leave.





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 3 of 3 Report No. T/20171111/2019

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report F/ Sgt-2 LIM JIN YEOW, BENNYS && A-2-cal	rt: Signature Of Informant.
Signature Of Interpreter: Not applicable	Date/Time: 11/11/2017 06:50
Officer in Charge Of Case: TP / GIT / Staff Sgt MOHAMED HUSNUL TAUE!OF YUSOF Contact No.: 65476358 Authentication Stamp	Classification Of Case: BIN MD Signature: Dore Police Force

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	POA -> 11/11/2017
Owner ID Type	Company
Owner ID	1318E
Vehicle Details	17
Vehicle No.	5,157406Z 30 08 20148
Vehicle to be Exported	No 11 11 2017
Intended De-registration Date	12 Dec 2017
Vehicle Make	MAZDA
Vehicle Model	MAZDAS (Signatural)
Primary Colour	Blue
Manufacturing Year	2009 Bal - 3 1 you 9.6 Mostly
Engine No.	LF10753062 3 21.6 Month
Chassis No.	JM6CR10F290310976
Maximum Power Output	107.0 kW (143 bhp) A Octage Daprecati
Open Market Value	\$26,045.00 # 9 667 1
Original Registration Date	31 Aug 2009 - 3 # 806 / Was
First Registration Date	31 Aug 2009
Transfer Count	2
Actual ARF Paid	\$26,045.00 21,6 mall x \$806
Intended PARF Rebate Details	# 13,000 = # 17 H29,60
PARF Eligibility	Ves
PARF Eligibility Expiry Date	30 Aug 2019 + # 13,022.50
PARF Rebate Amount	\$14,324.00 = # 30, 1432-10
Intended COE Rebate Details	# 30, 432-10
COE Expiry Date	30 Aug 2019
COE Category	E - Open Category
COE Period(Years)	10
QP Paid	\$17,905.00
COE Rebate Amount	\$2,793.00
Total Rebate Amount	\$17,117.00

The information contained herein is correct as at 12 Dec 2017

* M.U -> # 30,432.10

ОК







883 North Bridge Road #19-05 Southbank Singapore 198785 T: 6292 5838 F: 6292 5938 (UEN No. 201333127N) (GST Reg No: 201333127N)

Our Ref

CY(HMW)SJS7406Z(AC)hh

Please email to helen@yoga-legal.com

Your Ref

Your insured vehicle SHC156Z

13th November 2017

City Cab Pte Ltd c/o FIRST CAPITAL INSURANCE LTD (Motor Claims Department) 30 Robinson Road #10-01/02 Robinson Tower Singapore 048546

BY FAX (6507 3849) ONLY

Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION ACCIDENT INVOLVING SJS7406Z & SHC156Z ON 11/11/2017 @ 03:10 HRS ALONG HAVELOCK ROAD

We are instructed by M/s. HWV Rental Pte Ltd to notify you of a road traffic accident on 11th November 2017 at about 03:10 hours along Havelock Road involving our client's vehicle SJS7406Z and vehicle number SGC156Z driven by you /your insured's driver at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully

C. Yogarajah LLC

c.c. client M/s. HWV Rental Pte Ltd c/o M/s. Hock Motors Workshop (By Fax: 67535346) For Surveyor

Please initial here after completion of pre-repair inspection. Thank you.

Name: Signature:

Date & Time of Pre-repair Inspection:

1

Confidentiality & Privilege: This message is intended for the recipient to whom it is addressed. It may contained confidential or privileged information, if you are not the intended recipient, please notify the sandar immediately by replying to this message and than detail it from your system. Do not read, copy, use or circulate this communication. Displainer: Mail/Fav/Internet communications are not secure. While every reasonable effort has been made to ensure that this communication has been securely transmitted and not been tempered with. C. Yogarajah LLC cannot be responsible for alternations made to the contents of this message without its express consent, if you wish to receive a hard copy of this communication for comparison or should you require any other form of confirmation of the contents of this message, please contact the sender. Opinione, conclusions and other information in this message that do not relate to the official business of the firm shall be understood as neither given nor endorsed by C. Yogarajah LLC Advocates & Solicitors. Thank you

Page 1 of 1

VRL Application

Enquire Vehicle & Owner Information (Vehicle No. SHC156Z As At 11 Nov 2017 / 03:10:00)

Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

CY(HMW)SJS7406Z(AC)H

Current Owner Details

Owner ID Type:

Company

Owner ID:

199502839G

Owner Name:

CITYCAB PTE LTD

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office

Complexes

Registered Block/House

No.:

383

Registered Street Name:

SIN MING DRIVE

Registered Unit No.:

Registered Building Name: GAS BUILDING

Registered Postal Code:

575717

Current Vehicle Details

Vehicle No.:

SHC156Z

Make Description/Model:

TOYOTA / PRIUS HYBRID 1.8 CVT

Insurance Company Name: FIRST CAPITAL INS LTD



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

	PRE-REPAIR I	NSPECTION REPORT	
FIRST CAPITAL INSURANCE LTD 36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Ref: CS3/FCI17021745/Wbs2	
		Date: 14-12-2017	
		Code: FCI2	ALCOLO UNICO DE LA CONTRACTOR DE LA CONT
	Policy Particul	ars :- (THIRD PARTY CLAIM)
Insured Veh.	SHC 156Z	Veh. Inspected	SJS 7406Z
Policy No.	D-15072702MFSH	Coverage (\$)	0.00
Claim No.	D17010518MFSH	Excess (\$)	0.00
Assign From	LURENE JAW	Assign Date	14/11/2017
2.	Vehicle	Particulars & Condition	
Make & Model	MAZDA 5	c.c	1999
Engine No.	HIDDEN	Year of Reg.	2009
Chassis No.	JM6CR10F290310976	Colour	BLACK
Odometer	165938 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3.	Co	onditions of Tyres	
	Size	Make	Balance
R/H Front Tyre	215/50 R17	MICHELIN	3 mm
L/H Front Tyre	215/50 R17	MICHELIN	3 mm
R/H Rear Tyre	225/50 R17	BRIDGESTONE	3 mm
L/H Rear Tyre	225/50 R17	BRIDGESTONE	3 mm
4.	Des	cription of Damages	
THE VEHICLE SU	EHICLE SUSTAINED DAMAGES AT THE O/S BODY.		
5.	G	eneral Information	710000000000000000000000000000000000000
Accident Date	11/11/2017	Inspect Date / Time	14/11/2017 (11:57 AM
Survey held at	HOCK MOTORS WORKSH	HOP	
	NO.1 KAKI BUKIT AVE 6 #02-38 AUTOBAY @KAKI SINGAPORE 417883	BUKIT	
5a.		Remarks	
B) THE REPAIR I	ESTIMATE WAS NOT PRESE WAS TOLD TO PREPARE TH LEASE FIND DAMAGED VEH	A "WITHOUT PREJUDICE" BASI ENTED AT THE TIME OF INSPEC HE ESTIMATE. HICLE PHOTOGRAPHS.	S. CTION.

Report Ref No. CS3/FCI17021745/Wbs2

Inspected By

WILSON TEO CHENG MING

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE REGD Auto Consultant-SAE, Licensed Appraiser

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No liability of responsibility whatsoever, in contact or text, is accepted to any third party who may reply on the Report wholly or in part, Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.