

ASS: REC BY

REF: CS/FCI 17021832/Arbe2

Special Instruction:

Surveyor:

CWS

ASSIGNMENT (Office)

From (Person): Serene Ler

of FCI

Date/Time: 9:31am @ 15/11/17

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SLP 5734G

Insured: SHA 4049J

at Workshop m/s: 1st Autoworks

Tel: 82988933

of 23 kaki Bukit Ave 4 # 04-01

Policy No:

Claim No: D17010593MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A 8/11/2017

CA / REV / REP. / REV 24 HRS 'wp'

R.O.D. Endorsement:

Date/Time: 9:37am @ 15/11/17

Person Contacted:

Suhaimi

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SLP 5734G-X

SHA 4049J-NA/MSG/7006426/r3-D.O.A: 27/03/2017

Sent preli to Serene

REF:

SUMMARY

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SLP57346 Yr Regn: 2017, JuneType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Opel Mokka c.c. 1598Colour: Red A/C: Insured / Std / NI / NASp. Reading: 34993 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WOLJD7ECXHB180784Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/55R18R: 215/55R18

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

TOYO / YOKO or

Continental

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 16/11/17Survey held at 1st AutoworkDes. 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

TP 1st Corp.

Confirm LIS \$ 2.8K, 3 days
Red: 5729.75, 671.

RECEIVED 22 DEC 2017

Date/Time, File Pass to?



Preli. Report

1)

typist



Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3Resurvey No. of Trip: -Survey Fee: 160Transportation: 50

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

) \$ + RS \$

) Photos

) Others

TOTAL

160

50

7

217

Report Format: TPLump Sum / H.I.: (\$ 2800)



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/FCI17021832/Arb	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 15-11-2017	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHA 4049J	Veh. Inspected	SLP 5734G
Policy No.		Coverage (\$)	0.00
Claim No.	D17010593MFSH	Excess (\$)	0.00
Assign From	CWS (SERENE LER)	Assign Date	15/11/2017
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	08/11/2017	Inspection Date	
Survey held at	1ST AUTOWORKS PTE LTD 23 KAKI BUKIT AVE 4 #04-01 (SOUNTH WING) SINGAPORE 415933		
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	14-11-2017	Our Ref No. D17010593MFSH
Accident Date	08-11-2017	Claim Type. Third Party
Insured Vehicle	SHA4049J	Third Party Vehicle. SLP5734G
Survey Location	23 KAKI BUKIT AVE 4 #04-01 (SOUTH WING)	
Contact Person.	SUHAIMI ONG	
Contact No.	68441985/ 0	Fax No. 68445185
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	1ST AUTOWORKS PTE LTD	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/230201)



PRI Documents



Close



PRI Header Details

Claim No	D17010593MFSH	Policy No	D-15072701MFSH	Claimant S.No & Name	1 & AUTOWOF
Workshop Name	1ST AUTOWORKS PTE LTD (Contact Person : SUHAIMI ONG)	Survey Location & Contact Details	23 KAKI BUKIT AVE 4 #04-01 (SOUTH WING) Mobile: 0 , Phone: 68441985 , Fax: 68445185 EmailId: SUHAIMI@FIRSTAUTOWORKS.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHA4049J	TP Vehicle No	SLP5734G
PRI Recieved Date	14-11-2017 04:58:58 PM	Surveyor Appointed Date	15-11-2017 09:29:59 AM	Surveyor Accept Date	15-11-2017 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	15-11-2017	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

<input type="button" value="Upload Multiple Documents"/>	
File Name	Action

Surveyor Job Remarks

Remarks	<input type="text"/>	<input type="button" value="Save"/>
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Auto
Consultants
Pte Ltd

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

Your Ref: D17010593MFSH

Our Ref: CS/FCI17021832/Arb

The Motor Claims Department
First Capital Insurance Ltd

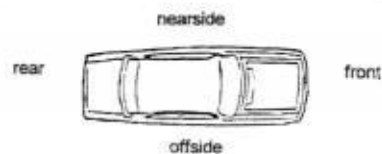
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SLP 5734G

Please be informed that we had conducted the inspection of the above mentioned vehicle on 16/11/2017 at the premises of M/s 1ST AUTOWORKS PTE LTD and have the following to report:-

Workshop Estimate Amount	: S\$ 8,529.75
Revised Estimate Amount	: S\$ 3,517.55
"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 body.



Yours faithfully

ADRIAN
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	09/11/2017 10:35
Date Of Accident	08/11/2017 15:30
Exact Location Of Accident	BASEMENT CAR PARK @MUSLIM ISLAMIC COUNCIL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP5734G
Insured/Policyholder	
Name Of Registered Owner	NATIONAL CAR RENTAL PTE LTD
Co Reg No	1960100157E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65113043

Vehicle Particulars

Manufacturer	OPEL
Model	MOKKA-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRER
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5089517881
Cover Note Number	

Driver

Name of Driver	NAZARUDY BIN AB RAHIM
NRIC No	S7726916I
Date Of Birth	01/09/1977
Occupation	OUTDOOR
Date Of Driving Pass	01/09/1977
Driving Experience	40 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88326949
Fax Number	
Contact Number	
EMail Address	NAZARUDY.A.RAHIM@GMAIL.COM

Address

Postcode

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 SIDE SWIPE

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

SEE REPORT ATTACHED

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 SHA4049J

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

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)

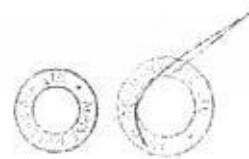
I understand, acknowledge, agree and consent that:

- (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

REFER TO PLAN ATTACH

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WE ARE IN A SINGLE LANE QUEUED TO EXIT FROM THE BASEMENT CARPARK OF THE MUSLIM ISLAMIC COUNCIL AT BRADLEY ROAD AT APPROX 1530HRS. THE LANE THERE WAS A SINGLE LANED ONE WAY FLOW. A ~~TAXI~~ ^{body car} SUDDENLY A COMFORT DELGRO BLUE TAXI, APPEARED FROM NO WHERE SQUEEZING PASS THROUGH A FEW CAR BEHIND ME. AS HE TRYING TO SQUEEZE PASS ME AND MAKE A ~~LEFT~~ ^{body car} RIGHT TURN AT THE SAME TIME HE RAN HIS TAXI FRONT LEFT BUMPER TO MY FRONT RIGHT DOOR WHICH AT THAT TIME THE LOCATION OF MY CAR IS AT THE BEGINNING OF THE BEND. IT CAUSES MY FRONT RIGHT DOOR TO HAVE AN OBVIOUS LOOK DENT

DECLARATION

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

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.:

BASMENT CHAPPEL
MUSLIM ISLAMIC COUNCIL

TO → EXIT

SAF 5734G.

QPEL
MORCA

QPEL
MORCA

SAF 4049 J

OTHER

OTHER

OTHER

ONE AND
ONE DAY



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5089517881

Cover: drive PREMIUM

- | | |
|---|--|
| 1. Index mark and Registration Number of Vehicle | : SLP5734G |
| Chassis Number | : W0LD7ECXHB180784 |
| 2. Name of Policyholder | : NATIONAL CAR RENTALS (PRIVATE) LIMITED |
| 3. Effective Date of Insurance | : 12 Jun 2017 |
| 4. Expiry Date of Insurance | : 11 Jun 2018 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. | |

This Policy does not cover

- (c) Use for racing, pace-making, reliability trial or speed-testing.
 - (d) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (e) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$2,000
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : AON SINGAPORE PTE LTD (00000690339)
Date of Issue : 11 Apr 2017 18:10 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

REPUBLIC OF SINGAPORE

DRIVING LICENSE



Licence Number **S 7 7 2 6 9 1 6 1**

Name

NAZARUDY BIN AB RAHIM

Birth Date: **01 Sep 1977**

Expires Date: **19 Jun 2010**

001867485D

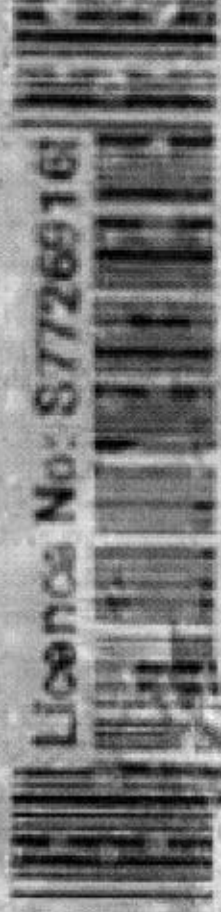


LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

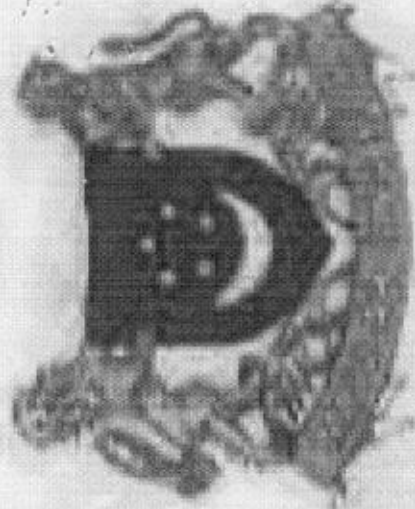
EFFECTIVE DATE

Class 3 — Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver, and other motor vehicles \leq 2500kg 19 Jun 2010

Licence No: S77269161



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S77269161



Name

NAZARUDY BIN AB RAHIM

Race

JAVANESE

Date of birth

01-09-1977

Sex

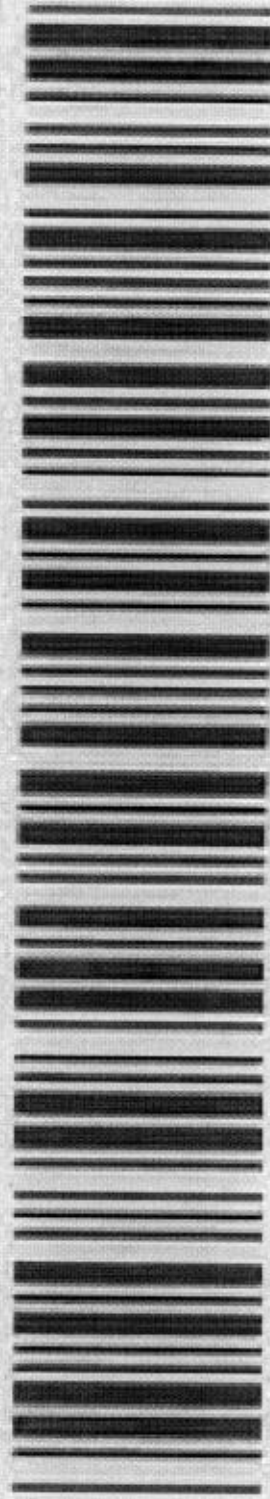
M

Country/Place of birth

SINGAPORE



570795



NRIC No. **S7726916I**



Date of Issue

01-03-2017

Address

**APT BLK 125 PENDING ROAD
#02-30
SINGAPORE 670125**

1st Autoworks Pte Ltd
23 Kaki Bukit Ave 4, #04-01 (South Wing) Singapore 415933

Repair Estimate

Date : 15/11/2017

Reference: SLP5734G
OPEL MOKKA X
Make: 1.6 CDTI 6AT

To Whom It May Concern

Dear Sir,

RE: VEHICLE : SLP5734G
CHASSIS NO.: W0LJD7ECXHB180784
ENGINE NO.: A3170185GU7X1122

Name of insured : National Car Rental Pte Ltd
Date of accident : 08/11/2017

We append hereunder the estimated cost of repairs to be carried out to the above vehicle.

Parts

No.	Qty	Part Description	Price (SGD)
1	1	RHF DOOR	\$ 2,197.50
2	1	RHF DOOR PROTECTOR	\$ 222.00
3	1	RHF DOOR INNER TRIM	\$ 2,277.50
4	1	RHF DOOR WINDOW REGULATOR/POWER WINDOW MOTOR	\$ 912.50
5	1	RHF DOOR INNER LOCK MECHANISM	\$ 660.00
6	1	RHF DOOR INNER SPEAKER	\$ 258.00

2419.5
2177.55
Parts Total: \$ 6,527.50
Less 10%: \$ 652.75
Total : \$ 5,874.75

Labour

No.	Labour Description	Price (SGD)
<u>Front portion</u>		
1	To dismantle / renew the accident damaged portion, to panel beating, reshape, straighten, orientate and align repair / replacement parts. (\$650 per day)	\$ 1,300.00
2	Carry out spray painting on accident affected area (\$550 per panel)	\$ 1,100.00
3	To conduct anti rust on LHF Door Panel	\$ 120.00
4	To conduct transfer front door mechanism to new door panel	\$ 70.00

1310
Labour Total : \$ 2,590.00

Others

Other Description

<u>No.</u>	<u>Qty</u>		<u>Price (SGD)</u>
<u>Front portion</u>			
1	10	LHF Inner Door Trim Clip <i>ML</i>	\$ 65.00
			30
			30
Other Total: \$			65.00

GRAND TOTAL: \$ 8,529.75

NB: THIS IS ONLY AN ESTIMATE AND SHOULD ADDITIONAL WORK BE FOUND NECESSARY TO BE CARRIED OUT IN THE COURSE OF REPAIRS, EXTRA MATERIALS AND LABOUR COST WILL BE CHARGED ACCORDINGLY WHICH HOWEVER, YOU WILL BE INFORMED PRIOR TO ACTION TAKEN. **PARTS PRICES ARE SUBJECT TO CHANGES.**

Yours faithfully

 **Suhaimi Ong**

Service Executive
Suhaimi Ong
HP : 8298 8933 Fax:6844 5185

Adrian L

16/11/12

P/P 032up

total: 3517.55
h/s: 2.8k.

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:

1st Autoworks Pte Ltd

23 Kaki Bukit Ave 4, #04-01 (South Wing) Singapore 415933

First Capital

AXA Insurance Singapore Pte Ltd
Cecil Street #01-01 GB Building
Singapore 069542

TAX INVOICE*Finalization*

GST Ref. No: 20-0000274-Z

Vehicle No: SLP5734G
Chassis No: W0LJD7ECXHB180784
Engine No: A3170185GU7X1122

Invoice No:

Invoice Date:

DESCRIPTION	AMOUNT	SGD
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Parts

No.	Qty.	Description	Price (SGD)
1	1	RHF DOOR	\$ 2,197.50
2	1	RHF DOOR PROTECTOR	\$ 222.00

Total: \$ 2,419.50
Less 10%: \$ 241.95
Parts Total: \$ 2,177.55

Labour

No.	Description	Price (SGD)
1	To dismantle / renew the accident damaged portion, to panel beating, reshape, straighten, orientate and align repair / replacement parts. (\$650 per day)	\$ 650.00
2	Carry out spray painting on accident affected area (\$550 per panel)	\$ 550.00
3	To conduct anti rust on LHF Door Panel	\$ 40.00
4	To conduct transfer front door mechanism to new door panel	\$ 70.00

Labour Total: \$ 1,310.00

Other

No.	Other Description	Price (SGD)
1	10 LHF Inner Door Trim Clip	\$ 30.00

Other Total: \$ 30.00

Total: \$ 3,517.55
Less Lump Sum 20%: \$ 703.51
GST (7%): \$ 196.98
Grand Total: \$ 3,000.00

Yours Faithfully,




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/FCI17021832/Arbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 02-01-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHA 4049J	Veh. Inspected	SLP 5734G	
Policy No.	D-15072701MFSH	Coverage (\$)	0.00	
Claim No.	D17010593MFSH	Excess (\$)	0.00	
Assign From	SERENE LER	Assign Date	15/11/2017	
2. Vehicle Particulars & Condition				
Make & Model	OPEL MOKKA	c.c	1598	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	W0LJD7ECXHB180784	Colour	RED	
Odometer	34993	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/55 R18	CONTINENTAL	6 mm	
L/H Front Tyre	215/55 R18	CONTINENTAL	6 mm	
R/H Rear Tyre	215/55 R18	CONTINENTAL	6 mm	
L/H Rear Tyre	215/55 R18	CONTINENTAL	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	08/11/2017	Inspection Date	16/11/2017	
Survey held at	1ST AUTOWORKS PTE LTD 23 KAKI BUKIT AVE 4 #04-01 (SOUNTH WING) SINGAPORE 415933			
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.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLP 5734G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	RHF DOOR	DENTED	2,197.50	2,197.50
1	RHF DOOR PROTECTOR	DEFORMED	222.00	222.00
1	RHF DOOR INNER TRIM	NOT NECESSARY	2,277.50	-
1	RHF DOOR WINDOW REGULATOR / POWER WINDOW MOTOR	NOT NECESSARY	912.50	-
1	RHF DOOR INNER LOCK MECHANISM	NOT NECESSARY	660.00	-
1	RHF DOOR INNER SPEAKER	NOT NECESSARY	258.00	-
	LESS 10% DISCOUNT		-652.75	-241.95
			5,874.75	2,177.55
SPECIAL NETT ITEMS				
10	LHF INNER DOOR TRIM CLIP (SN)	NECESSARY	65.00	30.00
			65.00	30.00
LABOUR				
	TO DISMANTLE / RENEW THE ACCIDENT DAMAGED PORTION, TO PANEL BEATING, RESHAPE, STRAIGHTEN, ORIENTATE AND ALIGN REPAIR / REPLACEMENT PARTS (\$650 PER DAY)		1,300.00	650.00
	CARRY OUT SPRAY PAINTING ON ACCIDENT AFFECTED AREA (\$550 PER PANEL)		1,100.00	550.00
	TO CONDUCT ANTI RUST ON LHF DOOR PANEL.		120.00	40.00
	TO CONDUCT TRANSFER FRONT DOOR MECHANISM TO NEW DOOR PANEL.		70.00	70.00
			2,590.00	1,310.00
GRAND TOTAL			8,529.75	3,517.55
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,800.00

Report Ref No. CS/FCI17021832/Arbe2

ADRIAN LING WAI PING

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

Licensed Appraiser

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