

ASS. REC. BY:

REF:

08/CTU7022103/T19672

Special Instruction:

SURVIVAL

Taufelch.

ASSIGNMENT (Office)

From (Person):

Irene Tay

of

CTL

Date/Time:

20-11-2017 4:09pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 2176Y

Insured:

STU 3272H

at Workshop m/s

Prime Auto

Tel:

6861 0908

of

6 Benoi Place

Policy No:

DMPCSN 3083361601

Claim No:

SNM17D 06670C02

Sum Insured:

Excess:

Make of Veh:

D.O.A.

17-11-2017

(Client's Record)

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

H.O.D. Endorsement:

Date/Time:

20-11-2017 4:36pm

Person Contacted:

Pai Yee

Vehicle: D / OUT

Date/Time

Action/Instruction (✓) Estimate

SHD 2176Y - NJA / INC08021256 / 21

DA: 270708

Surveyor: Tanjin

REF:

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT
WUE

Veh No: SHD2176Y Yr Regn: 2016 April
 Type: M.Car / M.Cycle / Bus / Van / Lorry / ☒ Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Toyota Ario Hybrid c.c. 1496
 Colour: Orange A/C: Insured / Std / NI / NA
 Sp. Reading: 194620 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: NKE/657151728
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: Nil / SRim / STD A/Rim or
 Tyre Size: F: 175/65R15
 R: 175/65R15
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Goodride
 Front _____ Rear _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. _____ D.O.I. 20/11/17 0170
 Survey held at: Prime Auto
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
front 4/s
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

(Red \$1152.50, 31%) \$2481.50, 3 days email to Mire

RECEIVED 30 NOV 2017

Date/Time, File Pass to? ☐ : Preli. Report
1/30/11 Tanjin ☐ : Final Report
 Date/Time, File Return to?

Days Of Repair: 3

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

\$ - RS. \$

Photos:

Others:

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

TOTAL

130

Report Format: WER-7P

Lump Sum / I.B.I. (\$) 2481.50



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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CS/CTI17022103/T1qb

3 ANSON ROAD #16-00
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 20-11-2017



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJU 3272H	Veh. Inspected	SHD 2176Y
Policy No.	DMPCSN3083361601	Coverage (\$)	0.00
Claim No.	SNM17D06670C02	Excess (\$)	0.00
Assign From	MERIMEN (IRENE TAY)	Assign Date	20/11/2017

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

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5. General Information

Accident Date	17/11/2017	Inspection Date	20/11/2017
Survey held at	PRIME AUTO CLAIMS SERVICE PTE LTD 6 BENOI PLACE SINGAPORE 629927		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

СНО 21764

Policy Type: OD / TP / TP RES / TL / EVA

Typist

(1) Office Assign Form

Surveyor (*Tauhid*): Case handler to make sure the surveyor completed all required information.

C	Vehicle No		
C	Regn Month/Year		
N	Vehicle Type		
N	Make & Model		
C	Engine Capacity. (C.C)		
N	Colour		
C	Odometer. (Sp.Reading)		
C	Chassis No		
N	General Condition		
N	Steering		
N	Brake		
N	Modification (Modi)		
C	Tyre Size		
N	Tyre Make		
C	Tyre Balance		
C	Date of Inspection		
N	Survey held		
N	Des.of Damages		

C	Damaged Vehicle Photographs Uploaded	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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N	ALL Parts condition			
C	Market Value for OD cases			
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)			
C	Days of repair			
C	Finalised Amount			
C	Re-inspection Cases to Finalize within 5 Days			

C	Resurvey photo Uploaded				
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	30/11/17
Case Handler	Date

21/05/2014

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	20 Nov 2017		20 Nov 2017 16:33 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:									
Main Claimant: PRIME CAR RENTAL & TAXI SERVICES PTE LTD, Co. Reg. No.: 199606293Z									
Vehicle Reg. No.: SHD2176Y		Date of Loss: 17/11/2017 09:00 - :59							
Claim Type: TP / SNM17D06670C02		Policy/Cover Note No.: DMPCSN3083361601							
Vehicle Reg. No. (Insured): SJU3272H		Policy No. (Claimant): 5068045737-03							
		Excess: S\$0.00							
Repairer: Prime Auto Claims Service Pte Ltd (HQ) 6 Benoi Place, 629927 Pioneer - Tel: 68610908									
Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]									
Claimant's Insurer: NTUC Income Insurance Co-operative Ltd (HQ) - Tel:									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 29/11/2017]									
Adj Asg. Remarks: PLEASE ASSIST TO CONDUCT PRS AND REVERT WITH YOUR RECOMMENDATION									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
<input type="checkbox"/> ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Catherine Chong (LKK Auto)

From: Irene Tay <irene.tay@sg.cntaiping.com>
Sent: Monday, 20 November, 2017 4:09 PM
To: Chrissy; assignments@lkkauto.com
Cc: aliceleong@primeautoclaims.com; peiyee@primeautoclaims.com; assignments@lkkauto.com
Subject: URGENT ... URGENT CTP REF NO. SNM17D06670C02 - PRI REQUEST TO ACCIDENT ON 17.11.2017 INVOLVING SHD2176Y & SJU3272H

WITHOUT PREJUDICE

Dear Sir/Mdm,

We refer to the above matter and the email below.

Please assist to get your surveyor to liaise with Prime Auto .

Regards

Irene Tay

Claims Department
China Taiping Insurance (Singapore) Pte. Ltd.
3, Anson Road, #16-00
Springleaf Tower,
Singapore 079909
Co. Reg. No. 200208384E
DID: 6389-6192
Fax: 6224 7175
Email: claimsdept@sg.cntaiping.com
Email: irene.tay@sg.cntaiping.com
Website: www.sg.cntaiping.com

From: Chrissy [mailto:chrissy@primeautoclaims.com]
Sent: Friday, 17 November, 2017 5:34 PM
To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Cc: aliceleong@primeautoclaims.com; peiyee@primeautoclaims.com
Subject: PRI REQUEST TO ACCIDENT ON 17.11.2017 INVOLVING SHD2176Y & SJU3272H
Importance: High

Hi

The above referred.

Our client's GIA report enclosed for your retention. Please arrange PRI on urgent basis.

****Please reply as soonest possible due to taxi loss of income and loss of rental per day count.**

****Please inform surveyor to avoid 11.45 am – 12.45 pm lunch hour.**

****We select: Form Team Adjusters**

Thank you.

Important Note: Our company will be migrating to Prime Auto Claims Services Pte. Ltd. with effective on 01.07.2017. Section Automotive Services will officially terminate on 31.12.2017.

Important Note: Our workshop is now located at No. 6 Benoi Place, Singapore 629927

Best regards,

Chrissy

Prime Auto Claims Service Pte. Ltd.

5 Benoi Place

Singapore 629926

Tel: 6861 0908

Fax: 6515 2948

Email: chrissy@primeautoclaims.com

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MPRI17152491 / Prime Auto Claims Service Pte Ltd - HQ
ENTRY DATE & TIME: 17/11/2017 15:12

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 17/11/2017 15:12
Date Of Accident 17/11/2017 09:05
Exact Location Of Accident JALAN PEMIMPIN
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD2176Y
Insured/Policyholder
Name Of Registered Owner PRIME CAR RENTAL & TAXI SERVICES PTE LTD
Co Reg No 199606293Z
Email Address NOEMAIL
Mobile Phone No
Alternative Phone No OFFICE-68982000
Vehicle Particulars
Manufacturer TOYOTA
Model COROLLA AXIO HYBRID 1.5 CVT D/AIRBAG 2WD
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 TAXI
Insurance Company
Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
Fleet Policy YES
Policy Number 5068045737-03
Cover Note Number
Driver
Name of Driver CHUA CHONG HUI
NRIC No S1257456H
Date Of Birth 10/08/1957
Occupation OUTDOOR
Date Of Driving Pass 01/07/1976
Driving Experience 41 YEARS AND 4 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91550620
Fax Number
Contact Number
EMail Address NOEMAIL

Address BLK 443B FAJAR ROAD #14-84 SINGAPORE
 Postcode 672443
 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 - 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) 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 ATTACHED STATEMENT

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Remarks/ Reasons: FILE SIZE TOO BIG
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJU3272H
 Vehicle Make/Model/Colour
 Details Of Properties
 Name of Driver TAN KIANG KIANG
 NRIC/Passport Number S1746694A
 Contact Number
 Address
 Postcode
 Insurance Company Name CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
 Nature Of Damage
 No. Of Passenger (Including Driver)
Details of Witness
 Name
 Phone Number
 Email Address

Accident Sketch Plan Pg. 1

SKETCH PLANIMPORTANT 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:

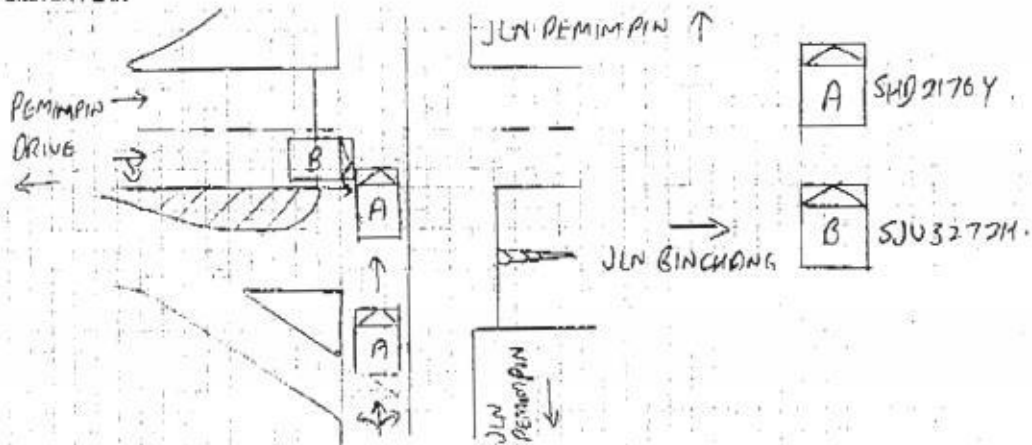
Driver's Signature
(if driver is not the policyholder)
Date & Time:

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

17/11/2017 2.16 PM

Individual Statement Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17.11.2017 @ approximately 0905 hrs, I was driving my taxi SHD2176Y along Jalan Pemimpin. Approaching to Pemimpin Drive junction, one car SJU3272H failing to stop at the stop line, give way to oncoming vehicles along Jalan Pemimpin, dashing out from Pemimpin Drive and as a result the frontal portion of SJU3272H collided onto my taxi left front portion.

After the accident, we alighted from our vehicles to check on damages. We exchanged particulars. Driver of SJU3272H, Ms. Tan Kiang Kiang (NRIC: S1746694A) verbally admitted her fault. No one was injured in this accident. My taxi front in-car camera captured the occurring of this accident.

李强

DECLARATION

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

Policyholder's Signature
Date & Time:

李强 17/11/2017 218 PM
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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



Prime Auto Claims Service Pte Ltd

GST Reg. No : 201606560M

5 Benoi Place Singapore 629926

Tel: 6861 0908 Fax: 6515 2948

Date: 20.11.2017

China Taiping Insurance (S) Pte Ltd

2 Anson Road #16-00

Springleaf Tower

Singapore 079909

Attn: Motor Claims Dept

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:

RE: ESTIMATE COST OF REPAIR TO VEHICLE SHD2176Y TOYOTA AXIO HYBRID (2016)

To Supply

1) 1pc	Front bumper	\$ <i>de</i> 1,370.00
2) 1set	Front bumper clip	\$ <i>ne</i> 30.00
3) 1pc	Front bumper left side retainer	\$ <i>ne</i> 97.00
4) 1pc	Front bumper sponge	\$ <i>?</i> 90.00 <i>xnn</i>
5) 1pc	Front bumper reinforcement	\$ <i>?</i> 340.00 <i>xnn</i>
6) 1pc	Left head lamp	\$ <i>ae</i> 825.00
7) 1pc	Font left fender	\$ <i>pp</i> 680.00

Sub total Parts	\$ 3,432.00	2322
Less: 25% discount	\$ 858.00	
	\$ 2,574.00	1741.50

L/charges

1) To focus left head lamp	\$ <i>20</i> 30.00	
2) To tuff kote	\$ <i>20</i> 30.00	
3) To remove front bumper, left head lamp and left front fender. Replace the above parts. Align & adjust front bonnet.	\$ <i>300</i> 500.00	
4) To putty, respray painting front bumper & front left fender. To polish.	\$ <i>400</i> 500.00	740

Sub total L/charges	\$ 1,060.00
Estimated Grand Total	\$ 3,634.00

\$ 2481.50

Tanpin 97495749
- WP

20/11/17 @ 1720

3 days

Resurvey after repair

Lumpsum
sur@lkkauto.com

[Signature]
22/11/17

20-11-17 11:09 From:

To: 62659941

1/ 5



Prime Auto Claims Service Pte Ltd

GST Reg. No : 201606560M
5 Benoi Place Singapore 629926
Tel: 6861 0908 Fax: 6515 2948

Date: 20.11.2017

China Taiping Insurance (S) Pte Ltd
2 Anson Road #16-00
Springleaf Tower
Singapore 079909

Attn: Motor Claims Dept

RE: ESTIMATE COST OF REPAIR TO VEHICLE SHD2176Y TOYOTA AXIO HYBRID (2016)

To Supply

- 1) 1pc Front bumper
- 2) 1set Front bumper clip
- 3) 1pc Front bumper left side retainer
- 4) 1pc Front bumper sponge
- 5) 1pc Front bumper reinforcement
- 6) 1pc Left head lamp
- 7) 1pc Front left fender

\$ ~~1,370.00~~
\$ ~~30.00~~
\$ ~~97.00~~
\$ ~~90.00 X~~
\$ ~~340.00 X~~
\$ ~~825.00~~
\$ ~~680.00 X~~

Sub total Parts \$ 3,432.00 2322.00
Less: 25% discount \$ 858.00 - 580.50
\$ 2,574.00 1741.50

L/charges

- 1) To focus left head lamp
- 2) To buff kote
- 3) To remove front bumper, left head lamp and left front fender.
Replace the above parts. Align & adjust front bonnet.
- 4) To putty, respray painting front bumper & front left fender. To polish.

\$ 20 30.00
\$ 20 30.00
\$ 300 500.00
\$ 400 500.00

Sub total L/charges \$ 1,060.00 740.00
Estimated Grand Total \$ 3,634.00 2481.50

Tanjin 97495749

- WP

20/11/17 @ 1720

3 days

Repair of repair

lumpsum sur@kkauto.com

LKK Auto Consultants Pte Ltd (Co.Reg No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CT117022103/T1QBN2

Date: 04/12/2017

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN3083361601
Claimant Vehicle No :	SHD2176Y	Insured Vehicle No :	SJU3272H
Date of Loss:	17/11/2017	Nature of Claim:	TP
		Claim No:	SNM17D06670C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHD2176Y	Engine No:	1NZR380442
Make & Model:	TOYOTA COROLLA AXIO, 1.5 HYBRID G CVT D/AIRBAG (M)	Chassis No:	NKE1657131728
Reg. Date:	29/04/2016 (Man. Year: 2016)	Odometer:	194620 km
Colour:	Orange		
Engine Capacity:	1496 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	175/65 R15	Rear Tyre Size:	175/65 R15
Front Left Side:	Goodride 6 mm	Rear Left Side:	Goodride 6 mm
Front Right Side:	Goodride 6 mm	Rear Right Side:	Goodride 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,574.00	1,741.50	832.50	32.34
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,060.00	740.00	320.00	30.19
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (\$\$)	3,634.00	2,481.50	1,152.50	31.71
+ GST 7.00/7.00% (\$\$)	254.38	173.71	80.67	31.71
Nett Amount (\$\$)	3,888.38	2,655.21	1,233.17	31.71

INSPECTION

Date of Assignment:	20/11/2017	
Date Inspected:	20/11/2017 Inspected At:	Prime Auto Claims Service Pte Ltd (HQ) 6 Benoi Place Singapore 629927
Estimated Period of Repair:	3.0 days	

Adjuster: MOHD TAUFIKH

Manager: SHIAU CHAN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 04 Dec 2017)
Parts:	143	TOYOTA COROLLA AXIO 1.5 HYBRID G CVT D/AIRBAG (M) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHD2176Y)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER	Deformed	1,370.00 FL	*1,370.00 FL
2	1		*SET FRONT BUMPER CLIP	Necessary	30.00 FL	*30.00 FL
3	1		*FRONT BUMPER LEFT SIDE RETAINER	Necessary	97.00 FL	*97.00 FL
4	1		*FRONT BUMPER SPONGE	Not Necessary	90.00 FL	*. FL
5	1		*FRONT BUMPER REINFORCEMENT	Not Necessary	340.00 FL	*. FL
6	1		*LEFT HEAD LAMP	Cracked	825.00 FL	*825.00 FL
7	1		*FRONT LEFT FENDER	Repair	680.00 FL	*. FL
					Sub Total (\$\$)	3,432.00 2,322.00
					- List Item Discount on L Items 25.00/25.00% (\$\$)	858.00 580.50
					Total Parts (\$\$)	2,574.00 1,741.50

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO FOCUS LEFT HEAD LAMP	New	30.00	20.00
2	TO TUFF KOTE	New	30.00	20.00
3	TO REMOVE FRONT BUMPER,LEFT HEAD LAMP AND LEFT FRONT FENDER.REPLACE THE ABOVE PARTS.ALIGN & ADJUST FRONT BONNET	New	500.00	300.00
4	TO PUTTY,RESPRAY PAINTING FRONT BUMPER & FRONT LEFT FENDER.TO POLISH	New	500.00	400.00
Gross Labour Cost (S\$)			1,060.00	740.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >