| REF: CS MSG17023233/RIGh Special Instruction:  ASS. FEC. BY:  ASS. GROWN (Office)   |
|---|
| ASS. FEC. BY:  ASS. FEC. BY:  ASSIGNMENT (Office)  ASSIGNMENT (Office)  Mulmun  From (Person): Christian Wang of Bill to:  Bill to:   |
| To Inspect Vehicle No:  Sku 73057  Tel: 6316113   |
| of 508k+ Batok - Strt 23 # 01-00 1831   Strt |
| Make of Veh:  (Client's Record)  CA / REV / REP. / REV 24 HRS  Date/Time: 4.45pm @ 6  2  7 Person Contacted: MS. Heng Vehicle INVOUT  Date/Time: 4.45pm @ 6  2  7 Person Contacted: MS. Heng Vehicle INVOUT   |
| Date/Time Action/Instruction ( Estimate Do A: 29/11/2008  |
| (8 12 170 7m Informed Christina Worg in manner.  18 12 170 9m verised to christina worg in manner.  18 12 170 9m verised to christina worg in manner.  18 12 170 9m verised to christina worg in manner.  |
|   |



### 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 Internation                                | nale Des Experts En Auton                  | nobile               |  |
|-----|---------------------------------|---|--|----------------------|--|
| MSI | G INSURANCE (S                  | INGAPORE) PTE LTD   | Ref : CS/MSG17023                          | 233/R1qb             |  |
|     | RAFFLES QUAY<br>-01 HONG LEONG  | BLDG SINGAPORE 048581   | Date: 07-12-2017<br>Code: MSG              |                      |  |
| 1.  |                                 | Policy Particulars  | :- THIRD PARTY CLA                         | IM                   |  |
|     | Insured Veh.                    | SKW 7305Z   | Veh. Inspected                             | GY 5203J             |  |
|     | Policy No.                      | A29022840AT2  | Coverage (\$)                              | 0.00                 |  |
|     | Claim No.                       | 538191  | Excess (\$)                                | 0.00                 |  |
|     | Assign From                     | MERIMEN (CHRISTINA WONG)  | Assign Date                                | 07/12/2017           |  |
| 2.  |                                 | Vehicle Partic  | culars & Condition                         |                      |  |
|     | Make & Model                    |   | c.c  | 0                    |  |
|     | Engine No.                      | HIDDEN  | Year of Reg.                               |                      |  |
|     | Chassis No.                     |   | Colour                                     |                      |  |
|     | Odometer                        |   | Steering                                   |                      |  |
|     | Brakes                          |   | Modification                               |                      |  |
|     | General                         |   |  |                      |  |
| 3.  |                                 | Condition   | ons 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   | on of Damages                              |                      |  |
| 5.  | Englis No                       | General   | Information                                |                      |  |
|     | Accident Date                   | 22/11/2017  | Inspection Date                            |                      |  |
|     | Survey held at                  | WOON MENG MOTOR PTE LTE   |  |                      |  |
|     |                                 | 50 BUKIT BATOK ST 23<br>#01-06 MIDVIEW BUILDING<br>SINGAPORE 659578 |  |                      |  |
| 5a. | A Haland                        | Re  | emarks                                     |                      |  |
|     | A)THE INSPECTION B)IN ACCORDANG | ON WAS CONDUCTED ON A"WIT   | HOUT PREJUDICE" BAS<br>E HAVE NOT AUTHORIS | SIS.<br>SED REPAIRS. |  |

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

| CI ATM CI | UBFOLDER DET | ATIS          | THE RESERVE OF THE PARTY.      | MARKET LONG | PALISION DISCONDEN | [Created by | / insurer]                 |
|-----------|--------------|---------------|--------------------------------|-------------|--------------------|-------------|----------------------------|
|           | Main         | Refere        | ence                           | Claim D     | etails             | Documents   | Show All                   |
| Main      | 25 Nov 2017  |               | 06 Dec 2017<br>15:54<br>Assign |             |                    |             | New Assignment Cancel Case |
| Case      | Notified     | Est Submitted | Adj Assigned                   | Ad) Rpt     | Adj Submitted      | Ins Authled | Status                     |
| AIM SUE   | FOLDER TRACE | KING          |                                |             |                    |             |                            |

| Main   | Reference  | Claim Details                | Documents                                     | Show All                                 |  |
|--|--|------------------------------|---|--|--|
| CLAIM SUBFOLDER DETA   | ILS  | MILITARION ALISEOTEOGRAPHICA | [Created by i                                 | insurer]                                 |  |
| Insured:   | LEONG WAH CHIN, ID: S01045   | 511C                         |   |  |  |
| Main Claimant:   | CU WATER SERVICES PTE LTD,   | Co. Reg. No.: 200202946E     | All the relations of the second second second |  |  |
| Vehicle Reg. No.:  | GY5203J  | Date of Loss:                | 22/11/2017 08                                 | 1:00 - :59                               |  |
| Claim Type:  | <b>TP</b> / 538191   |                              |   | ! (Comprehensive)<br>11/2017 - 12/11/201 |  |
| Vehicle Reg. No. (Insured):  | SKW7305Z   | Policy No. (Claimant):       |   | - 28                                     |  |
|  |  | Excess:                      | S\$500.00                                     |  |  |
| Danalean   | Woon Meng Moor Pte Ltd (HQ)  | 50 BUKIT BATOK ST 23, #0     | 1-06 MIDVIEW BUILDIN                          | G, 659578 Bukit Batol                    |  |
| Repairer:  | - Tel: 63161131  |                              |   |  |  |
| •  | MSIG Insurance (Singapore) P   |                              |   |  |  |
| Handling Insurer:  | MSIG Insurance (Singapore) P   |                              |   |  |  |
| Handling Insurer:  | MSIG Insurance (Singapore) P   | (HQ) - Tel: 6256-3561 [I     |   |  |  |
| Handling Insurer:<br>Adjuster:   | MSIG Insurance (Singapore) P<br>6643 1311]<br>LKK Auto Consultants Pte Ltd (   | (HQ) - Tel: 6256-3561 [I     |   |  |  |
| Handling Insurer:<br>Adjuster:<br>Driver/Custodian (Insured):  | MSIG Insurance (Singapore) P<br>6643 1311]<br>LKK Auto Consultants Pte Ltd (<br>YEOW ZEHAO JOSEPH ( / Male),<br>Please assign Surveyor Taukfih | (HQ) - Tel: 6256-3561 [I     |   | /12/2017]                                |  |
| Handling Insurer:<br>Adjuster:<br>Driver/Custodian (Insured):<br>Adj Asg. Remarks:                         | MSIG Insurance (Singapore) P<br>6643 1311]<br>LKK Auto Consultants Pte Ltd (<br>YEOW ZEHAO JOSEPH ( / Male),<br>Please assign Surveyor Taukfih | (HQ) - Tel: 6256-3561 [I     | mm.Advice due 07,                             | /12/2017]                                |  |
| Handling Insurer:<br>Adjuster:<br>Driver/Custodian (Insured):<br>Adj Asg. Remarks:<br>ASSOCIATED MAIL RECE | MSIG Insurance (Singapore) P 6643 1311]  LKK Auto Consultants Pte Ltd ( YEOW ZEHAO JOSEPH ( / Male), Please assign Surveyor Taukfih  IVED se.  | (HQ) - Tel: 6256-3561 [I     | mm.Advice due 07,                             | /12/2017]                                |  |

### Note: This document has not been finalised. 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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Attn:

Christina Wong

Date:

27 Apr 2018

### **Preliminary Advice**

Insured Vehicle No : SKW7305Z

TP Vehicle No

: GY5203J

Accident Date

: 22/11/2017

: TOYOTA HILUX

Assignment Date

: 06/12/2017

Make

Date of Inspection : 12/12/2017

Est. Duration of Repair

Inspection At

: Wong Meng Motor Pte Ltd

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

| Repairer's Estimate (Gross) | :S\$ | 4,285.97 |
|-----------------------------|------|----------|
| Revised Amount              | :S\$ | 2,801.46 |
| Check Items (Estimated)     | :S\$ | 0.00     |
| Total                       | :S\$ | 2,801.46 |
| Lump Sum Repair             | :S\$ | 2,200.00 |

#### **Total Loss Consideration**

| New for Old Value  | :S\$ |
|--------------------|------|
| Pre-Accident Value | :S\$ |
| COE / PARF Rebate  | :S\$ |
| Salvage Value      | :S\$ |
| Margin for Repair  | :S\$ |

#### Remarks

- ) The vehicle is economical/not economical for repair.
- (X) The above survey was conducted on a 'without prejudice' basis.

### Shiau Chan (LKKAuto)

From:

Do-Not-Reply <do-not-reply@merimen.com>

Sent:

Monday, 18 December, 2017 12:00 PM

To:

do-not-reply@merimen.com

Cc:

SUR

Subject:

VEHICLE GY 5203J (YOUR REF: 538191)

This mail is associated with:

\*GY5203J (538191) [SKW7305Z]

TP

CU WATER SERVICES PTE LTD Nov 22 2017 8:00AM [LEONG WAH CHIN] Woon Meng Moor Pte Ltd

Dear Christina,

Please be informed that we have inspected the vehicle GY 5203J on 12/12/2017.

We are pending for estimate from repairer.

Thanks & Regards,

Shiau Chan (Ms) LKK Auto Consultants Pte Ltd

Tel: 6256 3561 Fax: 6256 4315

[ This mail is sent from a mailer account - do not reply to this email address ]

Sent by: SHIAU CHAN (LKK Auto Consultants Pte Ltd)

**Enquire PARF/COE Rebate for Registered Vehicle** 

| ehicle Owner Particulars      | Company  |
|-------------------------------|--|
| wner ID Type:                 | Victory Court Section  |
| wner ID:                      | 2946E  |
| ehicle Details                | CVE2021  |
| ehicle No.:                   | GY5203J  |
| ehicle to be Exported:        | No see a see |
| tended De-registration Date:  | 27 Apr 2018  |
| ehicle Make:                  | TOYOTA   |
| ehicle Model:                 | HILUX  |
| rimary Colour:                | Silver   |
| Manufacturing Year:           | 2005   |
| ngine No.:                    | 2KD9413294   |
| hassis No.:                   | MR0CS12G400009180  |
| Maximum Power Output:         | -  |
| Open Market Value:            | \$17,535.00  |
| Driginal Registration Date:   | 06 May 2005  |
| irst Registration Date:       | 06 May 2005  |
| ransfer Count:                | 0  |
| Actual ARF Paid:              | \$877.00   |
| ntended PARF Rebate Details   |  |
| PARF Eligibility:             | No   |
| PARF Eligibility Expiry Date: | •  |
| PARF Rebate Amount:           | \$0.00   |
| ntended COE Rebate Details    |  |
| COE Expiry Date:              | 30 Apr 2025  |
| COE Category:                 | C - Goods Vehicle & Bus  |
| COE Period(Years):            | 10   |
| PQP Paid:                     | \$55,305.00  |
| COE Rebate Amount:            | \$38,759.00  |
| Total Rebate Amount:          | \$38,759.00  |

The information contained herein is correct as at 27 Apr 2018

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

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

Any false reporting may be referred to the Police for investigation.

- 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.

| 010103010.                 |                        |  |
|----------------------------|------------------------|--|
|                            | ACCIDENT STATEMENT     |  |
| Date Of Report             | 22/11/2017 19:14       |  |
| Date Of Accident           | 22/11/2017 08:30       |  |
| Exact Location Of Accident | TOH TUCK ROAD          |  |
| Country/State of Loss      | SINGAPORE              |  |
|                            | DETAILS OF OWN VEHICLE |  |

| Country/State of Loss       | SINGAPORE              |  |
|-----------------------------|------------------------|--|
|                             | DETAILS OF OWN VEHICLE |  |
| Vehicle Registration Number | GY5203J                |  |
|                             |                        |  |

#### Insured/Policyholder

CU WATER SERVICES PTE LTD Name Of Registered Owner

0 Co Reg No

NOEMAIL Email Address

Mobile Phone No

OFFICE-83810092 Alternative Phone No.

Vehicle Particulars

TOYOTA Manufacturer

MR0CS12G400009180 Model

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

COMMERCIAL VEHICLE

#### Insurance Company

GREAT AMERICAN INSURANCE COMPANY Name of Insurance Company

THIRD PARTY Type Of Coverage

NO Fleet Policy

MOMVC000003984-00-000 Policy Number

Cover Note Number

#### Driver

LIM WEN SHENG Name of Driver

S8909787H NRIC No 03/03/1989 Date Of Birth OUTDOOR Occupation 19/01/2011 Date Of Driving Pass

6 YEARS AND 10 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-83810092 Mobile Number

Fax Number

Contact Number

WSHENG89@YAHOO.COM.SG EMail Address

Address

24 JALAN KAKATUA

Postcode

598542

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

2

**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 SKETCH.

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

SKW7305Z

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.
- 5. 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)

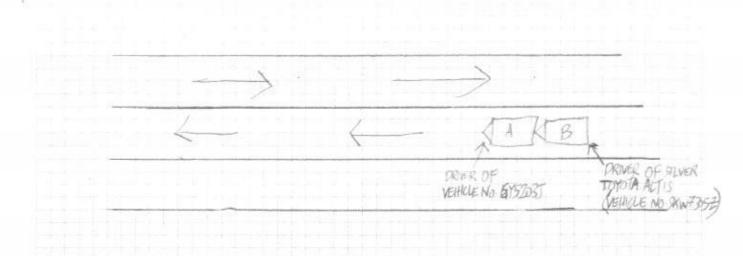
Data & Time:

Reporting Centre Perso Name

Signature

WRIT TIN NO.

Please note that you might be able/to submit an Own Damage Claim under own policy within 14 days. I Claim OD/TP at other workshoo



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

| ON 22 NOV 2017, AT AROUND 0830 HRS, I DRIVER OF VEHICLE NO SAY 5,403] WAS DRIVING ALONG TOH TO COMP  IN THE DRECTION OF TALAN TURING RECITIO. AT THE TIME OF THE ALLOWINT, MY VEHICLE MID ALROY COME TO A STO  STUDIES.  A TOYOTA ALTIS - SKW 7057 - HE MY YEHICLE FROM BEHIND I HEARD A LOUD BANG MY VEHICLE ME STUDIES.  HAD HAPPINED, MY COLLEAGUE - WHO WAS IN THE VEHICLE AT THAT TIME - AND I SET WENT TO INSPECT THE | LETE PUREN THE |
|---|--|
| # UPON INSPECTION, THE SAW THAT THE REAR END OF MY VEHICLE WAS SLIGHTLY DAMNED, WILLIE THE TO THAT HAD HE ME FROM BELLIND SUFFERED SEVERE DUMAGE TO ITS FRONT BUMPER OTHER THAN THAT.   | NAMES<br>MART<br>YOTA ALTIS<br>NO ONE              |
| NAS HEET IN THE ACCEPTANT. NO POLICE REPORT HAD BEEN HATE.  |  |
|   |  |
|   |  |
|   |  |
|   |  |

#### **DECLARATION**

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

Policyholder's Signature

Date & Time:

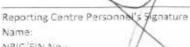
Driver's Signature

(If driver is not the policyholder)

Date & Time: 22 NOV 14

Name:

NRIC/FIN No.:



# **Woon Meng Motor Pte Ltd**

Office : 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578 Workshop: 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578

Tel: 6316 1131 HP: 9730 2017 Fax: 6316 7050

42, Sungei Kadut Ave, Singapore 729666 Tel: 63268523

( Email Adress : woonmeng @singnet.com.sg )

Co Reg No. 200603678M

GST Reg No. 20-0603678M

#### **Estimate**

TP CLAIM

To

: MSIG Insurance ( Singapore ) Pte Ltd

Motor Claims Dept

Date : 12 Dec 2017

Dear Sirs:

Fax: 6224 1047

### RE: ESTIMATE COST FOR TOYOTA HILUX MR0CS12400009180 - GY5203J ACCIDENT INVOLVING GY5203J & SKW7305Z ON 22/11/2017

| ITEMS | DESCRIPTION                     | QTY  | PRICE  |
|-------|---------------------------------|------|--|
| 1     | Rear tailgate                   | 1pc  | \$<br>1,233.64 PA<br>66.00 M<br>230.40 X SYC |
| 2     | Rear hilux.                     | 1pc  | \$<br>66.00                                  |
| 3     | Rear tailgate hinge @\$115.2EA  | 2pcs | \$<br>230.40                                 |
| 4     | Rear bumper.                    | 1pc  | \$<br>637.00                                 |
| 5     | Rear bumper lamp @\$88.1ea      | 2pcs | \$<br>176.20 <b>BRO</b><br>387.60 × SVC      |
| 6     | Rear bumper reforcement.        | 1pc  | \$<br>387.60× 500                            |
| 7     | Rear lamp n/s.                  | 1pc  | \$<br>269.60                                 |
| 8     | Rear bumper bracket @\$56.42ea. | 2pcs | \$<br>112.84                                 |
| 9     | Rear end panel                  | 1pc  | \$<br>494.67                                 |
|       |                                 |      | \$<br>3,607.95 2495.28                       |
|       | Less 25 %                       |      | \$<br>(901.98)                               |
|       | Sum Carried Forward             |      | \$<br>2,705.97                               |

1871.46

### 2,705.97 \$ Sum Carried Forward Labour Charge & Misc 89.00 500 89.00 30 709.00 400 To remove, repair, replace & install damaged parts. To R & R wiring. To putty & spray painting. 4,285.97 Total

All prices quoted are subjected to 7% GST.

This is a computer generated document. No signature is required.

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:

12/12/17@1540 Resong after repour

2801:46

#### 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/MSG17023233/R1QBN2

Date:

30/04/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

A29022840AT2

Claimant Vehicle No :

GY5203J

Insured Vehicle No:

SKW7305Z

Date of Loss:

22/11/2017

Nature of Claim:

TP

Claim No: 538191

MR0CS12G400009180

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

GY5203J

Make & Model:

TOYOTA HILUX, 2.5 (A)

Engine No: Chassis No: Odometer: 2KD9413294

338468 km

Reg. Date: Colour: 06/05/2005 (Man. Year: 2005) Grey

Grey 2494 cc

Engine Capacity:

Market Value/New Car

N/A

Price:

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Yes Engine Modification: Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195R15C

Rear Tyre Size:

195R15C

Front Left Side:

KAPSEN 7 mm

Rear Left Side: Rear Right Side: KAPSEN 7 mm KAPSEN 7 mm

Front Right Side: KAPSEN 7 mm
The above values represent the remaining tyre treads depth

| COST OF CLAIMS                    | Repairer's | Adjuster's | Difference | Diff % |
|-----------------------------------|------------|------------|------------|--------|
| Parts                             | 2,705.96   | 1,871.46   | 834.50     | 30.84  |
| Miscellaneous Items               | 0.00       | 0.00       | 0.00       |        |
| Labour                            | 1,580.00   | 930.00     | 650.00     | 41.14  |
| Paintwork Labour                  | 0.00       | 0.00       | 0.00       |        |
| Towing                            | 0.00       | 0.00       | 0.00       |        |
| Calculated Gross Total (S\$)      | 4,285.96   | 2,801.46   | 1,484.50   | 34.64  |
| Approved Total (Overridden) (S\$) |            | 2,200.00   | 100        |        |
| (S\$)                             | 4,285.96   | 2,200.00   | 2,085.96   | 48.67  |
| + GST 7.00/7.00% (S\$)            | 300.02     | 154.00     | 146.02     | 48.67  |
| Nett Amount (S\$)                 | 4,585.98   | 2,354.00   | 2,231.98   | 48.67  |

INSPECTION

Date of Assignment:

06/12/2017

Date Inspected:

12/12/2017 Inspected At:

Woon Meng Moor Pte Ltd (HQ) 50 BUKIT BATOK ST 23, #01-06

MIDVIEW BUILDING Singapore 659578

Estimated Period of Repair:

4.0 days

Adjuster: MOHD RASUL 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

| Referen  | ce  |  |  |  |  |
|--|---|--|--|--|--|
| Part Source:   |   | (Last Synchronised: 30 Apr 2018)                       |  |  |  |
| Parts:   | N/A   | TOYOTA HILUX 2.5 (A) (Model not available in database) |  |  |  |
| Labour:  | Repairer's  | (Price-denominated Standard List)                      |  |  |  |
| Print Code: (Unsubmitted, no print-code for GY5203J) |   |  |  |  |  |
| Validity:  | es are valid only if they contain the print code (above) on all estimate pages, running page<br>the END OF ESTIMATES marker on the last estimate page |  |  |  |  |
| Further Info   | : Items/values not in reference catalogue are prefixed with an asterisk *.  |  |  |  |  |

| Re  | com | ımende   | d Parts    |
|-----|-----|----------|------------|
| No. | Qty | Part No. | Particular |
| -   |     |          |            |

| No.   | Qty     | Part No.        | Particulars                                | Condition             | Repairer's             | Amount              |
|-------|---------|-----------------|--|-----------------------|------------------------|---------------------|
| 1     | 1       |                 | *REAR TAILGATE                             | Bent                  | 1,233.64 FL            | *1,233.64 FL        |
| 2     | 1       |                 | *REAR HILUX                                | Necessary             | 66.00 FL               | *66.00 FL           |
| 3     | 2       |                 | *REAR TAILGATE HINGE                       | Serviceable           | 230.40 FL              | *- FL               |
| 4     | 1       |                 | *REAR BUMPER                               | Deformed              | 637.00 FL              | *637.00 FL          |
| 5     | 2       |                 | *REAR BUMPER LAMP *REAR BUMPER REFORCEMENT | Broken<br>Serviceable | 176.20 FL<br>387.60 FL | *176.20 FL<br>*- FL |
| 7     | 1       |                 | *REAR LAMP N/S                             | Broken                | 269.60 FL              | *269.60 FL          |
| 8     | 2       |                 | *REAR BUMPER BRACKET                       | Bent                  | 112.84 FL              | *112.84 FL          |
| 9     | 1       |                 | *REAR END PANEL                            | Repair                | 494.67 FL              | *- FL               |
| F=Fre | anchise | part. L=ListIte | mDisc.                                     | 00                    |                        |                     |
|       |         |                 |  | Sub Total (S\$)       | 3,607.95               | 2,495.28            |
|       |         |                 | - List Item Discount on L Item             | ms 25.00/25.00% (S\$) | 901.99                 | 623.82              |
|       |         |                 |  | Total Parts (S\$)     | 2,705.96               | 1,871.46            |
|       |         |                 | Report was unsubmitted do                  | uring this print-out. |                        |                     |

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

| No  | Particulars  | Lab.Type           | Repairer's | Amount                                  |
|-----|--|--------------------|------------|---|
| Lab | our Items  |                    |            | 000000000000000000000000000000000000000 |
| 1   | TO REMOVE, REPAIR, REPLACE & INSTALL DAMAGED PARTS | New                | 800.00     | 500.00                                  |
| 2   | TO R& R WIRING                                     | New                | 80.00      | 30.00                                   |
| 3   | TO PUTTY & SPRAY PAINTING                          | New                | 700.00     | 400.00                                  |
|     | Gross Labor  | ur Cost (S\$)      | 1,580.00   | 930.00                                  |
|     | Report was unsubmitted duri                        | ng this print-out. |            |   |

< END OF ESTIMATES >