22/03/2002 -		1	Til.			
ASS. REC. BY:	REF: (9/76()	1 FC48 20F1	119 De Frecia	d Instruction:		
Surveyor Taufilch		MENT (Office)	V			
From (Person): Yee Poi 4	of	EGIL	Da	ate/Time:	105 E180	Mg FELL
Estimated Cost:				_		
OD (TP) / WS / TP RES / OD R	ES / EVA / INV / MY	//CS		-		
To Inspect Vehicle No:			Insured:	GB	С 4323С	
at Workshop m/s	erneo motor.		_ Tel:	7221	315()	
of	Pandan Cresan	t				
Policy No:		Claim No: _	(A)	SC 43230	_/SE/p1	
Sum Incurade		Excess:				
Make of Veh: (Client's Record)			D.	O.A	(F1) 2017]
CA / REV / REP. / REV 24	HRS ' Mì	13.12.2017	@ 100m	H.O.D. Ende	rsement:	
Date/Time: 11/12 2017 11/19	um Person Contacte	d: Raymond	Vel	icle-IN/	our —	
Date/Time Action/Instruction						
SIM 503) R						
98C N3)3C	- X					
	rsed to per	li by em	vál.			
		—				
		······································				-
						

FEF EGI

ASSIGNMENT

From: Date 13/12/17	Ventic S24 50 32R was 2016 Nov
Estimated Cost.	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi : Prime Mover /
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To inspect Vehicle No: SLH 5032R	Make Toyot Wish and 1798 Colour Gry A.O Insured / Std / NI / NA
at Workshop mis Borneo Motors	Colour A.O Insured / Std / NI / NA
of 2 pundan Cres Cent	So Reading //249 . TRadic Insured / Std / NI / NA
Insured.	Eng/No:
Policy No.	C/NO: 5 5T 69 9 20 W 50 JUD5845
Claims No	Gen. Cond: Good / Fair / Poor / Burnt
Sum insured: Excess:	Steering: Inpropr / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorden/ Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
10 am	Tyre Size F: 145/65/215
(Policy Condition)	R: ^ h
Remark: The veh had commenced its N/S 0/S	BS / DUN / EXNOVA (TY) FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bal, or Market Value.	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bai. mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 13/12/17.
Lum Sum: % 3 Val.: Yes or No	Survey held at Sorner Motors
CA / REV / REP. / 24 HRS 35 2	Des. of Damages : Frt / Real / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted: همس سل	
Pate / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
(Ped \$ 2895, 80, 577.)	6, 3dy evel to Kyma.
(Ped \$ 2895,80, 57%)	. 0
referred (4-11 24-1	
	~ · · · · · · · · · · · · · · · · · · ·
Cated Time File Pass to : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee: 250
Date. Time File Return to 1 Add Fe	e: Site Insp (\$: : 4 FE : 2 A
Add Fe	e:
Denoid Format : -10	Tech inus \$ Inv
Report Format: 7/ Lump Sum / I.B.I: 3 270,46	
Cump Sum / HEAL I VIIV. 40	//eskent \$



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

	12210	Ref : CS/EGI	17023427/T1qb			
5 TEMASEK BOUL #04-01 SUNTEC TO SINGAPORE 03898)WER EIVE	Date : 11-12-20	017			
		Code: EGI				
Insured Veh.	GBC 4323C	iculars :- THIRD PARTY	CLAIM			
Policy No.	10200	Ton. Inspected	SLH 5032R			
Claim No.	GBC4323C/SE/pl	Coverage (\$)	0.00			
Assign From	YEE PEI LI	Excess (\$)	0.00			
		Assign Date	08/12/2017			
Make & Model	Vehicl	e Particulars & Conditio				
		c.c	0			
Engine No.	HIDDEN	Year of Reg.				
Chassis No.		Colour Steering Modification				
Odometer	-					
Brakes						
General						
and the second s	Company of the Compan	onditions of Tyres				
D#1 =	Size	Make	In a			
R/H Front Tyre			Balance			
L/H Front Tyre			mm			
R/H Rear Tyre			mm			
L/H Rear Tyre			mm			
The story was	Desc	ription of Damages on	mm			
Engine No. 156	HOURNAL AND GO	noral Info				
Accident Date	07/12/2017	neral Information				
Survey held at	BORNEO MOTORS (S) PT	Inspection Date				
1	2 PANDAN CRESCENT SINGAPORE 128462					
A VINCE OF		Remarke	George Maria and and a fine and a			
A)THE INSPECTION B)IN ACCORDANCE		WITHOUT PREJUDICE" BA S. WE HAVE NOT AUTHOR	SIS			

SUH 5032R Policy Type: OD //TP// TP RES / TL / EVA Case Handler **Typist** Admin (Cath): Case handler to make sure all information created by the assignment team are ACCURATE. Y-Date N-Date Y-Date N-Date (1) Office Assign Form C Reference No. C **Customer Code** Ν Assign From Assign Date C Ç Veh No (Inspected) C Veh No (Insured) C D.O.A C Policy No C Claim No C Insurance Authorisation (CA /REV/REP) C Report Type C Weekend Charges Survey held at/Repairer Ν C Excess Surveyor (Taufill): Case handler to make sure the surveryor completed all required information. (1) Assignment Form C Vehicle No C Regn Month/Year Ν Vehicle Type Ν Make & Model C Engine Capacity. (C.C) Colour Ν C Odometer. (Sp.Reading) C Chassis No Ν **General Condition** Steering N Brake Ν Ν Modification (Modi) C Tyre Size Ν Tyre Make C Tyre Balance C Date of Inspection N Survey held Ν Des.of Damages (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form **ALL Parts condition** Ν C Market Value for OD cases C Estimate Repair Cost for PRI (RSI, TMI, MSIG) C Days of repair C **Finalised Amount** Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo Upleaded

Survey Department Check List (Case Handler)

Check By:

Catherine Chong (LKK Auto)

From: Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>

Sent: Friday, 8 December, 2017 4:37 PM

To: 'admin-d@lkkauto.com'

Subject: OI : GBC4323C / TP : SLH5032R/LKK / DOA : 07/12/2017

Attachments: GBC4323C - SAS.pdf; SLH5032E - SAS.pdf; SLH5032E - ESTIMATE.pdf; SLH5032E -

PRS FORM.pdf

Dear Catherine,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company LKK AUTO CONSULTANTS PTE LTD to be the "Single Joint Expert".

Please assist to conduct this survey from **INCHCAPE - BORNEO MOTORS (S) PTE LTD**,

ADDRESS : 2 PANDAN CRESCENT

INCHCAPE CENTRE LEVEL 4

SINGAPORE 128462

PERSON TO CONTACT : RAYMOND SEAH @ 9221 3150 / 6631 1865

ERGO OFFICER-IN-CHARGE : STEVE LIM

Note: To survey on DIRECT SETTLEMENT basis. Please inform the repairer <u>in writing</u>, that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.

Please fill up the necessary on ERGO PRS Form from workshop and return to us together on your update of the survey status via Survey.Report@ergo.com.sg.

Attached are estimate, insured, Third Parties SAS (note: reports not to be released to any Third Party).

Kindly acknowledge receipt of this email.

Frank von

Yee Pei Li

Oberts Assemble Medicine
ERGO Insurance Pte. Ltd.
5 Tamaisek Beufevard
#U4-0 ESantec Tower Five
Singapore 038985

Tel: 65 6829 9199 DID: 65 6829 9194

Website: www.ergo.com.sg

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers

ERGO

Date:	08.12.2017		Sent via Fax			
Our Reference:	GBC 4323C/SE/pl	-				
	SLH 5032R	-	or			
Your Reference:	3th 3032N	-	Email			
То:	INCHCAPE - BORNEO MOTOR	S (S) PTE LTC		Şiti.Na	bilah@inchcape.com.sg	
Pre-Repair Su	rvey (PRS) Acknowledgement					
Vehicle For Inspe		_				
Insured's Vehicle	GBC 4323C	-				
Date Of Accident	t: 07.12.2017					
We acknowledge	receipt of your request for PRS on:	07.12.2017	_			
In compliance w	ith "State Courts Practice Directions Ame	endment No.1 of	2016", do se	lect an asse	essor from	
	nd indicate your selection in the box mark		·	* LKK A		
tue list below at	id malcate your selection in the box man	keu .		· LNN A	010	
AIS	Automobile Inspection Services Pte Ltd	LBS	L.B.S Auto Cor			
FTA	FormTeam Consultancy Pte Ltd	LKK	LKK Auto Cons		_td	
IAS	Infiniti Appraisal Service	PS	Priority Services			
JPK	JP Knights Pte Ltd	VAC	Vicom Ltd			
L		1				
We acknow	est for inspection does not have your client's of wledge your interest for direct settlement, we d's driver has not reported the accident to us We write to confirm our agreeme	will assess & revertodate. nt to have a di	t soan upon re			
	quantum to be agreed. OFFICER-II	N-CHARGE - SI	EAE LIM	• •	 	
Prepared by:	De.	Pei Li	6829 9	9194	claims@ergo.com.sg FAX: 6829 9247	
	<u> </u>	,I	 		1	
Assignment Date: Assignment Time: Remarks:		Workshop use on Assessor attende Date: Time Inspector: Vehicle not availa	d workshop on	ointed date	and time. for the above job .	
		Workshop Ackno			ion to liability basis.	

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)

Sent: Monday, 18 December, 2017 12:04 PM
To: 'Survey Report (ERGO Insurance Pte. Ltd.)'

Cc: SUR; assignments

Subject: RE: GBC4323C / TP : SLH5032R/LKK / DOA : 07/12/2017

Attachments: CSEGI17023427T1qb.pdf

Dear Pei Li,

Enclosed herewith preliminary advice of SLH 5032R.

Best Regards,

Shiau Chan (Ms) | Case Handler LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)

Sent: Monday, 11 December, 2017 11:10 AM

To: 'Survey Report (ERGO Insurance Pte. Ltd.)' <Survey.Report@ergo.com.sg> **Cc:** SUR <sur@lkkauto.com>; assignments <assignments@lkkauto.com>

Subject: RE: GBC4323C / TP: SLH5032R/LKK / DOA: 07/12/2017

Dear Pei Li,

Thank you for the assignment.

Please be informed that vehicle currently not in the workshop, repairer will arrange.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Survey Report (ERGO Insurance Pte. Ltd.) [mailto:Survey.Report@ergo.com.sg]

Sent: Friday, 8 December, 2017 4:37 PM

To: 'admin-d@lkkauto.com' <a driver line and admin-d@lkkauto.com >

Subject: OI: GBC4323C / TP: SLH5032R/LKK / DOA: 07/12/2017

Dear Catherine,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company **LKK AUTO CONSULTANTS PTE LTD** to be the "Single Joint Expert".



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

Your Ref: GBC4323C/SE/pl Date: 18th December 2017

Our Ref: <u>CS/EGI17023427/T1qb</u> Without Prejudice

The Motor Claims Department ERGO Insurance Pte Ltd

Attn: Pei Li

Dear Sirs/Mdm

PRELIMINARY ADVICE OF VEHICLE NO. SLH 5032R .

We thank you for the instruction on 08/12/2017.

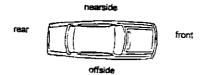
Please be informed that we had conducted the inspection of the abovementioned vehicle on 13/12/2017 at the premises of M/s BORNEO MOTOR and have the following to report:-

Workshop Estimate Amount	: <u>S\$</u>	5,666.26 .
Revised Estimate Amount	: <u>S\$</u>	<u>2,778.26</u> .
"Check" Items Amount	: <u>S\$</u>	400.00 .
Market Value	: <u>S\$</u>	<u> </u>
Salvage Value	: <u>S\$</u>	-
Nett Value	: <u>S\$</u>	<u>-</u> .

Description of Damage:

The vehicle sustained damages at the

rear portion.



Comments/ Present Status:

<u>Damages consistent.</u>

<u>Days of repair: 3 days.</u>

We have NOT authorise repair.

-

Yours faithfully

Taufikh

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 <u>truthful and accurate</u> 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.

	ACCIDENT STATEMENT	
Date Of Report	07/12/2017 13:58	
Date Of Accident	07/12/2017 09:05	
Exact Location Of Accident	JŁN ANK BUKIT	
Country/State of Loss	SINGAPORE	•

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLH5032R

Insured/Policyholder

Name Of Registered Owner CHAI KOK SOON

NRIC No \$7366777A

Email Address KOKSOON100@GMAIL.COM

Mobile Phone No (LOCAL) +65-96173073
Alternative Phone No OFFICE-96173073

Vehicle Particulars

Manufacturer TOYOTA
Model WISH-1.8 (A)

Exact Purpose for which vehicle was being used at

time of accident

NORMAL USAGE

Are you claiming under your own insurance policy

for repair to your vehicle?

110

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 2100488825

Cover Note Number

Driver

Name of Driver CHAI KOK SOON

NRIC No S7366777A

Date Of Birth 13/09/1973

Occupation INDOOR

Date Of Driving Pass 10/04/2008

Driving Experience 9 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96173073

Fax Number

Contact Number OFFICE-96173073

EMail Address KOKSOON100@GMAIL.COM

Address

985 BUKIT BATOK WEST AVE 5 #11-334

Postcode

650385

OWNER

Was driver an employee of the Insured's Company

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?

Was any body injured in the Accident?

NO 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

PLEASE REFER AS 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

GBC4323C

Vehicle Make/Model/Colour

VW/WHITE

Details Of Properties

Name of Driver

HUO JIA MING

NRIC/Passport Number

Contact Number

Address

Postcode

BLK 248 BUKIT BATOK EAST AVE 5 #04-68

650248

Insurance Company Name

ERGO INSURANCE PTE, LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

	Paul
TYPE OF CLAIM: □OD □OD/UL □DS	MCA:
Date Of Report: 7 / 2 / 7 Time:	Date Of Accident: 7/12/17 Time: 09 05
Exact Location Of Accident: Jalan Angk Buki	
Country/State of Loss: Singapore	selangor Darul Ehsan □ / Negeri Sembilan □ / Melaka □ / Pahang □ / Johor Ilau Pinang □ / Perlis □ / Thailand □
OWN VEHICLE D	DETAILS (INSURED/POLICY HOLDER)
Vehicle Registration Number: SL H 5032R Name Of Registered Owner: Char Kok Sour	Co. Reg. No(for Co. Vehicle)/NRIC/PP/FIN No: \$73 66777A
Mobile Number: 96173073 Alternative No:	Email Address: 1-0KSOON1100@ BMAIL. COM
Vehicle Particulars	
Manufacturer: Toyota 🗸 Lexus 🗀 Suzuki 🗀 Hino 🗆	Model: WLY
Exact Purpose for which vehicle was being used at time of accident: Are you claiming under your own insurance policy for repair to your	
	Others
Insurance Company	
Name of Insurance Company: A 1 ©	And the same of th
Any In-Car Camera? (applicable for United Overseas Insurance Limit	ted insured only): Yes □ (please attach photo) No □
Type Of Coverage: Comprehensive ☐ Third Party ☐ Th	hird Party Fire and/or Theft 🗆
Fleet Policy: Yes No	Policy / Cover Note No: 210048833
DRIVER DI	ETAILS AT POINT OF ACCIDENT
Name of Driver: Chai La L So 30	NRIC/Passport / FIN No: S7366777A
Date Of Birth: 13 109 1973	Occupation: Indoor 🗸 Outdoor 🗋
Date Of Driving Pass: 10 April 2008	Gender: Male ☑ Female □
Mobile Number: 96177072 Fax No:	Alternative No:
Address: #11-334, Bukit Batok	We'A Ave 5 Postal Code: 650785
Email Address: KOK SOON 1866 COM	AL COM
	State relationship of the driver with the insured:
:Vehicle Registration Number of Driver's Own Vehicle (if applicable)	SLH 5032R
Insurance Company of Driver's Own Vehicle (if applicable):	
GENERAL II	NFORMATION OF THE ACCIDENT
Type Of Accident: Pow 170 Fell (TP H7)	Number of Passengers in the above vehicle (Including Driver):
Weather Conditions: Clear Raining □ Others □ (If others,	
Road Surface: Wet Dry Others (If others, please state	e condition):
Was any body injured in the Accident? No ☐ Yes ☐	
Was any foreign vehicle involved in this accident? No. Yes	□ Vehicle No: Vehicle type:
Was any other material or property (e.g. other vehicle) damaged?	No □ Yes □
Was there any video captured by Car Camera? No. Yes	Are accident scene photos available for attachment? o 🗆 Yes 📈
Was the accident reported to the police? No Yes (If y	res,please state which Police Station):
	yes, please state against whom):
I have been approached by unknown person(s) soliciting/offering a	
	PERTY 1 (Please fill Annex A if more vehicles involved)
Vehicle Registration Number: GBC 4323 C	Vehicle Make/Model/Colour: Wolks was an / Von / Wm
Details Of Properties Damage in Accident:	ricle of the cor, bumper
Name of Driver: Huo Jia Min	Company and the company of the compa
NRIC/Passport/FIN Number: 58731410 C	Contact Number:
Address: Apt DIK 245 DINKIT BAT	ok tost the >, # 04-68 Postal Code: 656248
Insurance Company Name: 上尺のり	The second secon
Nature Of Damage:	No. Of Passenger (Including Driver):
Name:	Name:
Phone Number:	Phone Number:
Email Address: DETAILS OF INJURED PERS	Email Address: 50N 1 (Please fill Annex A if more person injured)
Name:	Approximate Age:
Address:	Postal Code:
Injuries Sustained:	Injured person in which vehicle:
injuries suscanies.	*

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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.

ACWish X

(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre

Sketch Plan

A=SLH5032 R

B=GBC4323C

Describe Circumstances of the Accident
At around gosam on 7/Dec/2017, I stopped my Toyota
to monitor for incoming cars going to PIE.
to monitor for incoming ones going to PIE.
While waiting tor the busy traffic to clear, for 5-10
saconds After a few schools stopping my car
a van GBC 4323 C hit the back of thy Joyota Wish
SLH 5032R.
The accident damage The subsystem related to back bunger and others.
back bunger and others.
V

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

Witnessed by Reporting Centre Personnel



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: Chai KOK SOON
VEHICLE NUMBER	: SLH 5032 R
DATE/TIME OF ACCIDENT	: 7/12/2017.09:05
PLACE OF ACCIDENT	: A junction at Jln Anak Buk
THIRD PARTY VEHICLE (IF ANY)	: 9BC4323C
**********	***********
DESTINATION BEFORE THE ACCII	JOURNEY AND WHERE WAS THE INTENDED DENT? 12 385 Bakit Batok Wort ayar Lepar Square.
	C DRINKS BEFORE YOU DRIVE ON THE DAY OF E TRAFFIC POLICE CONDUCT ANY BREATHE-WHAT IS THE RESULT?
TO ALL VEHICLES INVOLVED?	N AND THE EXTENSIVENESS OF THE DAMAGES
WERE YOU OR YOUR PASSENGE WERE YOU TAKEN TO THE TRAFF	R/S INJURED? IF INJURED, WHICH HOSPITAL? FIC POLICE FOR INVESTIGATION?
Name: CGAT (CON SOON)	

I Affirmed The Above Information Is Given To My Best Knowledge.

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7366777A





Name

CHAI KOK SOON





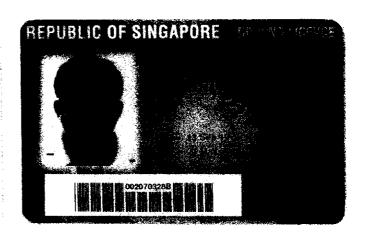
Race CHINESE

Date of birth 13-09-1973

Sex

873**8577**7A

Country of birth



923312



NRIC No. S7366777A

MALAYSIAN

Date of Space 11-04-2008

APT BLK 385 BUKIT BATOK WEST AVENUE 5 #11 - 334 SINGAPORE 650385

NRIC No. S7366777A

4

Date: 23/09/2008

No: 6062111

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Motorcycles =< 200 cc 10 Apr 2008
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

NP 428A



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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)

M.X.1

TOYOTA AUTO PROTECTOR (2-YEAR)

(The below excess is subject to GST)

OWN DAMAGE EXCESS S\$600.00 (1) WINDSCREEN EXCESS S\$100.00

CERTIFICATE NO. 2100488825-00001

SUM INSURED Market Value **INSURING WITH COE/PARF** Yes

1) VEHICLE REGISTRATION NO.

SLH5032R

2) NAME OF INSURED

Chai Kok Soon

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

8 Nov 2016

4) DATE OF EXPIRY OF INSURANCE

7 Nov 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

SUBJECT TO AGE CONDITION: All Age Condition

a) The Insured

b) Any other person who is driving on the Insured's order or with his permission.

This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions.

A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in additional to the

Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said

Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.

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) LIMITATION AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or rewards, tuition, driving test, racing, pacemaking, reliability trial speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

APPROVED REPORTING CENTRES / TOYOTA AUTHORISED REPAIRERS

1, Borneo Motors (S) Pte Ltd - 2 Pandan Crescent (Tel: 6631 1188)

APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)

2. ComfortDeigro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501) 4. Ethoz - 30 Bukit Batok Cres(Tel:66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 6747808070 - 21 Sin Ming Ind (Tel: 64538110)

8. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)

10. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)

LOSS OF USE Loss of Use 15 Days (1500 - 1600cc) - Refer to policy wordings for details

* NAMED DRIVER NA

HIRE PURCHASE COMPANY DBS BANK LTD /EMPLOYER'S LOAN

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

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).

Issued in Singapore 6 Jan 2017

030210-139 INCHCAPE AUTO TOYOTA-LK2LHF 33 LENG KEE ROAD SINGAPORE 159102

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE



6 Jan 2017

Chai Kok Soon 385 Bukit Batok West Avenue 5 #11-334 Singapore 650385

Dear Chai Kok Soon,

We wish to inform you that the following endorsement(s) has/have been passed on the above-captioned policy:

1) Vehicle Details: Update Vehicle Registration No.

Please do not hesitate to contact our Customer Care Consultants at (65) 6419-3000 if you have any further enquiries.

We look forward to serving your insurance needs.

Thank you.

Yours faithfully,

AIG Asia Pacific Insurance Pte. Ltd. CUSTOMER SERVICES GROUP

This letter is computer generated, no signature is required.



Co Reg No : 196700086Z GST Reg No : MR-8500000-9

Borneo Motors (Singapore) Pte Ltd

Online Service Booking: www.toyotasingapore.com.sg

Toyota Bodycare Centre No. 2 Pandan Crescent Singapore 129462

GST Reg No:MR-8500000-9 Join Toyota ME	ame.borneomotors.com	sg & earn points	MATE for attrac	tive items!	No. 2 Pai Singapore	ndan Cre e 128462	sdent
Account	Detail 1 1	Account No			Tel no.: Custo	6631 11 mer Detail	
Ergo Insurance Pte Lto 5 Temasek Boulevard #04-01 Suntec Tower Fi Singapore 038985 Attn: Motor Claims Dep	ve cherk	S1000010 Document No Document Date 07/12/	0	385 I #11-3 Singa		ok W est 385	t Avenue 5
Year Make Model	Reg Date	Veh Reg No	Kilometers	WI	P No	Order N	o/Remarks
16 HPXNP S6 ZG Chassis No Engine JTDGG20W50J005845	E20R 08/11/2016 No TWC No 2ZR1852664	Terms	Service Engineer	Vel	hicle In	Collecte	5032R-07121 ed On
L Cd	Job/Parts Desc		iona sean ii ii	Qty	Unit Price	Disc %	Amount
TP VEH:GBC43: TP INS:ERGO DATE-IN: BY: 2 B BP-ECU 3 B BP-LAB TO WATER TES' 4 B BP-LAB SENSOR ON NEI 5 B BP-LAB STRAIGHTEN/R AREAS. 6 B BP-RES AFFECTED ARE 7 1 T52159-68907 8 2 T81920-13022 9 3 S52161-0K040 10 4 T52575-68020 11 5 T52576-68020	NO OF REPAIR DAY: DATE SURVEY AUTHORISED OF TO RESET ECU AND IT FO CHECK WIRING & T FOR LEAK TO DRILL HOLES & TO W BUMPER. TO REPLACE REAR ACE EALIGN ALL OTHER TO AS. REAR BUMPER L/R BUMPER L/R BUMPER PIECE, RR BUT R/R SIDE BP	Y: N: REPROGRAMME LIGHTING. INSTALL REVER. CCIDENT DAMAG: AFFECTED REAR ACCIDENT COVER, de/ REFLECTOR,? MPER AL/ R RETAINER, AL	E PARTS.	1.00 1.00 2.00 1.00	574.90 58.00 3.90 44.40 44.40		508.50 508.50 115.26 169.50 678.2034.00 574.90 58.00 7.80 44.40 44.40
	Ple ise III AMB Con To resurvey before To display dama Parts prices are Third party survey	enjoy warranty benefit	Change Summary Change Summary y ir ials		Total Ta	13/12/1 esuney sur@ 	17495749 17 Q 1020. DS before paint likeuto.wm.
	• Supplementary i	em(s) hust be res .cveyo andro al from Insurance PLEASE TEAR ALON	ed and Company			<u> </u>	3543109
TO SECURITY GUARD PLEASE ALLOW THE UNDERMEI	Acknowledged by Signature; Date: DATE		OT LIT OWN CLERKE	 .	- - - -		354310 9

VEHICLE NO

VEHICLE TO LEAVE THE COMPANY PREMISES.

SLH5032R

SIGNATURE FOR BORNEO MOTORS (SINGAPORE) PTE LTD

13:43





Co Reg No : 196700086Z GST Reg No : MR-8500000-9

GST Reg No: MR-8500000-9

Join Toyota ME @ http://toyotame.borneomotors.com.sg & earn points to redeem for attractive items!

Borneo Motors (Singapore) Pte Ltd

Online Service Booking : www.toyotasingapore.com.sg

Toyota Bodycare Centre No. 2 Pandan Crescent Singapore 128462

		Account Detail		Account No			Tel no.: Custo	mer Detail		
5 Ter #04-0 Singa	apore 0389	levard Tower Five		\$1000010 / ICNI3 Document No 0 Document Date 07/12/2017		385 #11- Sing		ok West 385	West Avenue 5	
/ear	Make	Model	Reg Date	Veh Reg No	Kilomete	rs W	IP No	Order No.	/Remarks	
6 HPX Chassis	NP S6	ZGE20R Engine No	08/11/2016 TWC No	SLH5032R Terms	Service Eng		8687 .9 Phicle In	DS/SLH5 Collected	032R-07121' On	
DGG20	OW50J005	845 2ZR1	852664	60 R	aymond Seah	LM/-	/ 0.	00/-	-/ 0.00	
. Cd			Job/Parts Desci	ription		Qty	Unit Price	Disc %	Amount	
2 6 7 4 8 9		68030 68010 12010 24	R/RR BUMPER L/RR BUMPER REAR BUMPER 1G3 SENSOR	SUPPORT, NA ARM, ?		1.00 1.00 1.00	93.90 93.90 52.10 151.60		93.90, 93.90, 52.10 151.60	
	For & on beh	alf of	chever comes first) to e Customer's Signa		nefits. Conditions app Change Sur	<u> </u>	Total			
	Borneo Mo		lease acknowledge rece	ept of vehicle Pa	arts abour laterials ubrication/Fluid	1,121.00 4,545.26 0.00	GST 7.00 Less	8	5,666.26 396.64 0.00	
		<u>'</u>			thers	0.00 0.00	Amount Due	-		
							L		6,062.90	

TO SECURITY GUARD

CUSTOMER

PLEASE ALLOW THE UNDERMENTIONED VEHICLE TO LEAVE THE COMPANY PREMISES.

DATE TIME

07/12/2017 13:43

VEHICLE NO

SLH5032R

SIGNATURE FOR BORNEO MOTORS (SINGAPORE) PTE LTD Borneo Motors



Co Reg No : 196700086Z GST Reg No : MR-8500000-9

Borneo Motors (Singapore) 19te Lt

Online Service Booking: www.toyotasingapore.com.sg

Toyota Bodycare Centre No. Z Fandan Crescent Singapore 128462

ent for attractive items!

Join Toyota ME @ http://toyotame.borneomotors.com.sg & earn polities to red rel no.: 6631 1188 Account No Customer Detail Account Detail S1000010/ICNI3 Mr Chai Kok Soon Ergo Insurance Pte Ltd Document No 385 Bukit Batok West Avenue 5 5 Temasek Boulevard #11-334 0 404-01 Sunted Tower Five Singapore 650385 Singapore 038985 Document Date Attn: Motor Claims Dept Mobile: 96173073 27/12/2017 Order No/Remarks WIP No Kilometers Veh Reg No Reg Date Year Make Model 9DS/SLH5032R-07121 28687 ZGEZOR 14899 08/11/2016 **SLH5032R** 16 HPXNP S6 Vehicle In Collected On Service Engineer Terms Chassis No Engine No TWC No 26/12/2017 9.00 27/12/2017 18.00 JTDGG20W50J005845 2ZR1B52664 60 Raymond Seah L M Disc % Amount Oty Unit Price Job/Parts Description Cd 30.001 TP/DS CLAIM BP-SUNDRY 1 Z TP VEH: GBC4323C ACC DATE: 07/12/17 TP INS:ERGO NO OF REPAIR DAYS:03 DATE-IN:26/12/2017 DATE SURVEY:13/12/2017 AUTHORISED ON: 08/12/07 BY: LKK-TAUFIKH 508.50 TO RESET ECU AND REPROGRAMME BP-ECU 2 В 115.26 02 TO CHECK WIRING & LIGHTING. 3 В BP-LAB TO WATER TEST FOR LEAK 169.50 TO DRILL HOLES & INSTALL REVERSE 02 4 В BP-LAB SENSOR ON NEW BUMPER. 678.004 TO REPLACE REAR ACCIDENT DAMAGE PARTS. 02 B BP-LAB STRAIGHTEN/REALIGN ALL OTHER AFFECTED AREAS. 556.001 TO SPRAY PAINT ON REAR ACCIDENT BP~RES 6 ₿ AFFECTED AREAS. 574.90 574.90 1.00 T52159-68907 COVER RR BUMPER 1 44.40 1.00 44.40 T52576-68020 RETAINER RR BUMPER 8 2 1.00 93.90 93.90 SUPPORT RR BUMPER LH 3 T52156-68030 9 Borneo Motors is the only authorised workshop to maintain your Toyota. Service your Toyota every 6 months or 10,000 km (whichever comes first) to enjoy warranty benefits. Conditions apply. For & on behalf of Change Summary Total Customer's Signature 2,770.46 **Borneo Maters** Please acknowledge receipt of vehicle Paris 713.20 GST 7.00% 193.93 Labour 2,057.26 Less Materials 0.00 0.00 Lubrication/Fluid 0.00 Others 0.00 **Amount Due** 2,964.39

PLEASE TEAR ALONG PERFORATED LINE

354522 354522

TO SECURITY GUARD

DATE TIME

27/12/2017 12:50

VEHICLE NO

PLEASE ALLOW THE UNDERMENTIONED

VEHICLE TO LEAVE THE COMPANY PREMISES.

SLH5032R

SIGNATURE FOR RORNEO MOTORS (SINGAPORE) PTF ITD Borneo Moto

Vehicle Diagnostic Report

SLH5032R

TOYOTA BODY CARE

	Printed By: Default User(1) 27/12/2017 10:28:40 AM
Health Check All Systems	

Enhanced					
Engine and ECT	No	P1604	X		36824200
					A0C01000
Entry&Start	No	U0100	X		-
	No	U0142	X		
	No	U0155	X_		
RR-Door Motor	No	B2312	X		
RL-Door Motor	No	B2312	X		-
ABS/VSC/TRC					F152668071
EMPS				- - - 	JCF305F0
Air Conditioner					ı -
Combination Meter					838006827102
Main Body					660C1SCV**02
D-Door Mator		<u> </u>			
P-Door Motor					
Master Switch					-
HL AutoLeveling					004750040
SRS Airbag		 _ _ _ _ _ _ _ _ _ _		 	0917700010
PM2 Gateway				-├	
Starting Control		 		 - 	<u> </u>
Power Source Control	i	<u> </u>			

Vehicle Diagnostic Report , 2ZRFAE

SLH5032R

TOYOTA BODY CARE	E	۱۶	CA	Y	D	0	В	ГА	O'	Υ	TO	•
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 Printed By: Default User(1)	27/12/2017 10:30:09 AM
Health Check Results All Systems(1 of 1)	

Enhanced	 	 			
Engine and ECT			\Box	•	36824200
			\coprod		A0C01000
ABS/VSC/TRC			П	•	F152668071
EMPS					JCF305F0
Air Conditioner				<u> </u>	<u> </u>
Combination Meter					838006827102
Main Body			11		660C1SCV**02
D-Door Motor			Ш		
Entry&Start			14		-
P-Door Motor			$\bot \bot$		
RR-Door Motor		 	Щ.	<u>.</u>	<u> </u>
RL-Door Motor			44		-
Master Switch		 	+	<u> </u>	<u> </u>
HL AutoLeveling			- -		-
SRS Airbag			44	<u> </u>	8917F68010
PM2 Gateway			11	<u> </u>	<u>-</u>
Starting Control			44	÷	<u> </u>
Power Source Control					<u> </u>



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 Automob	ile
O INSURANCE P	TE LTD	Ref : CS/EGI17023427/	T1qbe2
1 SUNTEC TOW		Date: 15-01-2018 Code: EGI	
	Policy Particulars	:- THIRD PARTY CLAIM	
Insured Veh.	GBC 4323C	Veh. Inspected	SLH 5032R
Policy No.		Coverage (\$)	0.00
Claim No.	GBC4323C/SE/pl	Excess (\$)	0.00
Assign From	YEE PEI LI	Assign Date	08/12/2017
e All Salaria	Vehicle Partic	culars & Condition	
Make & Model	TOYOTA WISH	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	JTDGG20W50J005845	Colour	GREY
Odometer	16245	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
	Conditi	ons of Tyres	
	Size	Make	Balance
R/H Front Tyre	195/65 R15	GOODYEAR	6 mm
L/H Front Tyre	195/65 R15	GOODYEAR	6 mm
R/H Rear Tyre	195/65 R15	GOODYEAR	6 mm
L/H Rear Tyre	195/65 R15	GOODYEAR	6 mm
·	Description	on of Damages	
THE VEHICLE SU	STAINED DAMAGES AT THE REA	AR PORTION.	
DAMAGES SEE DI			
1 1 2	General	Information 📜 🖫	
Accident Date	07/12/2017	Inspection Date	13/12/2017
Survey held at	BORNEO MOTORS (S) PTE LTI)	
	2 PANDAN CRESCENT SINGAPORE 128462		
	Re	emarks 😯 💛 🐪	
,			and the second s
	Estimate	Days of Repair	
	Insured Veh. Policy No. Claim No. Assign From Make & Model Engine No. Chassis No. Odometer Brakes General R/H Front Tyre L/H Front Tyre L/H Rear Tyre L/H Rear Tyre THE VEHICLE SUS DAMAGES SEE DI Accident Date Survey held at	MASEK BOULEVARD Of SUNTEC TOWER FIVE BAPORE 038985 Policy Particulars Insured Veh. GBC 4323C Policy No. Claim No. GBC4323C/SE/pl Assign From YEE PEI LI Vehicle Particulars Vehicle Particulars Vehicle Particulars Vehicle Particulars Vehicle Particulars Vehicle Particulars Insured Veh. GBC 4323C Policy No. Claim No. GBC4323C/SE/pl Assign From YEE PEI LI Vehicle Particulary Veh	MASEK BOULEVARD OF SUNTEC TOWER FIVE APORE 038985 Code: EGI Policy Particulars: - THIRD PARTY CLAIM Insured Veh. GBC 4323C Veh. Inspected Policy No. Coverage (\$) Claim No. GBC4323C/SE/pl Excess (\$) Assign From YEE PEI LI Assign Date Vehicle Particulars & Condition Make & Model TOYOTA WISH c.c. Engine No. HIDDEN Year of Reg. Chassis No. JTDGG20W50J005845 Colour Odometer 16245 Steering Brakes IN ORDER Modification General GOOD Conditions of Tyres R/H Front Tyre 195/65 R15 GOODYEAR R/H Rear Tyre 195/65 R15 GOODYEAR L/H Rear Tyre 195/65 R15



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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLH 5032R

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	SUNDRY (SN)	NECESSARY	50.00	30.00
1	REAR BUMPER COVER (SN)	DEFORMED	574.90	574.90
1	L/R BUMPER REFLECTOR (SN)	NOT NECESSARY	58.00	-
2	PIECE, RR BUMPER @\$3.90 (SN)	NOT NECESSARY	7.80	-
1	R/R SIDE BPR RETAINER (SN)	NOT NECESSARY	44.40	-
1	L/R SIDE BPR RETAINER (SN)	NECESSARY	44.40	44.40
1	R/RR BUMPER SUPPORT (SN)	NOT NECESSARY	93.90	-
1	L/RR BUMPER SUPPORT (SN)	NECESSARY	93.90	93.90
1	REAR BUMPER ARM (SN)	NOT NECESSARY	52.10	-
1	1G3 SENSOR (SN)	NOT NECESSARY	151.60	-
			1,171.00	743.20
	LABOUR			
	TO RESET ECU AND REPROGRAMME.		508.50	508.50
	TO CHECK WIRING & LIGHTING. TO WATER TEST FOR LEAK.		115.26	115.26
	TO DRILL HOLES & INSTALL REVERSE SENSOR ON NEW BUMPER.		169.50	169.50
	TO REPLACE REAR ACCIDENT DAMAGE PARTS. STRAIGHTEN / REALIGN ALL OTHER AFFECTED AREAS.		2,034.00	678.00
	TO SPRAY PAINT ON REAR ACCIDENT AFFECTED AREAS.		1,668.00	556.00
			4,495.26	2,027.26
	GRAND TOTAL		5,666.26	2,770.46

Report Ref No. CS/EGI17023427/T1qbe2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

ADRIAN LING WAI PING

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

Licensed Appraiser

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

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