

# **PREMIER AUTOMOTIVE SERVICES PTE LTD**

23 CHANGI SOUTH AVE 2 #01-02

SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: SHD1649G/GS

**WITHOUT PREJUDICE**

12<sup>th</sup> May 2018

**(By Email Only)**

**Attn: The Motor Claims Department**

AXA Insurance Pte Ltd

No.8 Shenton Way

#27-01

Singapore 068811

Dear Sir/Madam

## **ACCIDENT INVOLVING SHD1649G & SLK5866K ALONG JALAN BATU CARPARK AT BLK 11 ON 16.12.17**

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: SHD1649G, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: SLK5866K at the material time of the accident with the driver of our client's vehicle, Mr Kwek Kim Teck

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: SLK5866K, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repair	\$	3485.38 (Incl. GST)
(2) Loss of Rental - 24Days @\$109.94per day	\$	2638.56
(3) Loss of Income – 24Days @\$100.00per day	\$	2400.00
(4) GIA Search fee	\$	2.00
	<b>\$</b>	<b><u>8525.94</u></b>

A copy of each of the following supporting documents is enclosed:

- (1) Final Repair Bill, GIA report & sketch plan of SHD1649G
- (2) Driver's I/C and Driving Licence
- (3) Vehicle Registration card, Certificate of Insurance
- (4) Check In/Out Voucher, GIA search & Scene video

## **PREMIER AUTOMOTIVE SERVICES PTE LTD**

23 CHANGI SOUTH AVE 2 #01-02

SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: SHD1649G/GS

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,



Claims Department – Gary Shi

Email: [gary.shi@premiertaxi.com](mailto:gary.shi@premiertaxi.com)

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client – Premier Taxis Pte Ltd



PREMIER AUTOMOTIVE SERVICES PTE LTD  
OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)  
TEL: 65436676 / 65436689 FAX: 62141511  
CO. REG NO.: 200707743D GST. REG. NO.: 200707743D

PREMIER TAXIS PTE LTD  
23 CHANGI SOUTH AVENUE 2 #03-02  
SINGAPORE 486443

### TAX INVOICE

DATE 12-May-2018  
PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR HYUNDAI I30 REGN NO: SHD 1649 G			\$ 3,257.36
TOTAL REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 3,257.36
GST @ 7%				\$ 228.02
GRAND TOTAL				\$ 3,485.38



for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)



22 December 2017

To Whom It May Concern

Dear Sir/Madam

**CERTIFICATION LETTER**

This letter serves to inform that Kwek Kim Teck of NRIC Number S1391818Z is a registered driver of SHD1649G. Kwek Kim Teck is paying daily rental rate of \$109.94 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to be "Chin Bee Lian".

Chin Bee Lian (Ms)  
Assistant Vice President  
Taxis Administration

Prepared By: SY

PREMIER TAXIS PTE LTD  
23 Changi South Avenue 2  
#03-02  
Singapore 486443  
Telephone: +65 6214 8880 Fax: +65 6214 0330  
[www.premiertaxi.com](http://www.premiertaxi.com)  
Co. Reg. No. 200304975H

## 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	18/12/2017 10:01
Date Of Accident	16/12/2017 10:25
Exact Location Of Accident	JALAN BATU - CARPARK @ BLK 11
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD1649G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I30 (FD)-1.6 DOHC (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

### Driver

Name of Driver	KWEK KIM TECK
NRIC No	S1391818Z
Date Of Birth	27/01/1959
Occupation	OUTDOOR
Date Of Driving Pass	18/11/1982
Driving Experience	35 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90532632
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 12 #06-127 MERPATI ROAD
Postcode	370012
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 - CHANGE/CROSS LANE
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)	3

#### 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

VEH. A - 2 PAX (CHINESE COUPLES) VEH. B - 1 PAX (FEMALE CHINESE)

#### 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	SLK5866K
Vehicle Make/Model/Colour	WHITE PORSCHE
Details Of Properties	VEH. B
Name of Driver	TAN JACKY
NRIC/Passport Number	
Contact Number	90048581
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

#### Details of Witness

Name	
Phone Number	
Email Address	

## Sketch Plan Pg. 1

### SKETCH PLAN

#### IMPORTANT NOTICE

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



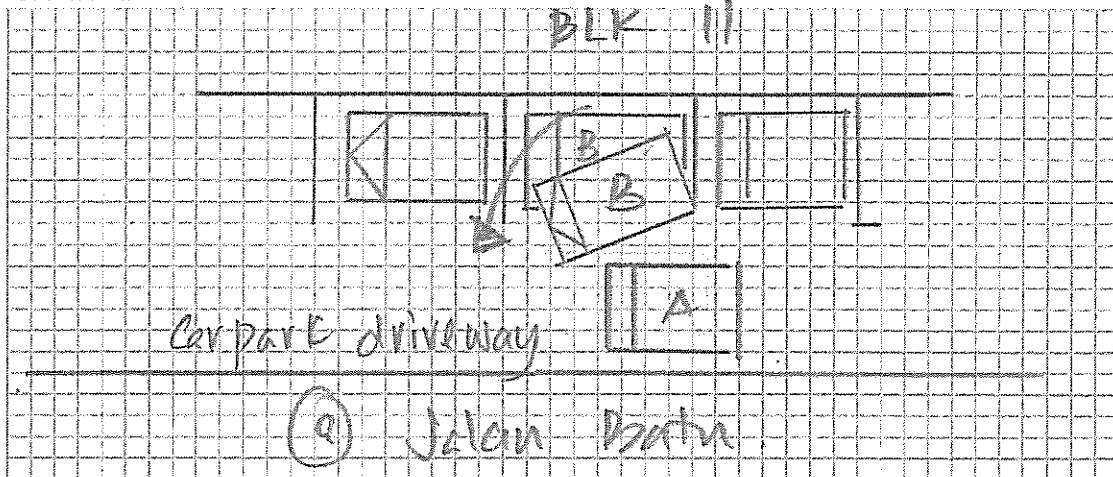
x An 1391818/2 18 DEC 2017

Policyholder's Signature  
Date & Time:

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

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

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: STD 16496

B: SLK 5866K.

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

Date & Time:

62.  $\frac{1}{2} \ln 2$  63.  $\frac{1}{2} \ln 2$  64.  $\frac{1}{2} \ln 2$  65.  $\frac{1}{2} \ln 2$  66.  $\frac{1}{2} \ln 2$  67.  $\frac{1}{2} \ln 2$  68.  $\frac{1}{2} \ln 2$  69.  $\frac{1}{2} \ln 2$  70.  $\frac{1}{2} \ln 2$

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

Date &amp; Time:

18 DEC 2017

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Describe Circumstance of the Accident.

ON 16/12/2017 @ 1025HRS, I WAS DRIVING MY TAXI ( SHD 1649 G )  
TRAVELLING ALONG THE CARPARK DRIVEWAY @ JALAN BATU WITH 2  
PASSENGERS ONBOARD ( CHINESE COUPLES ).

UPON APPROACHING MY PASSENGERS DESTINATION, SUDDENLY VEHICLE B  
( SLK 5866 K – PORSCHE ) WHICH WAS INITIALLY PARKED HORIZONTALLY ON  
MY RIGHT – FAILED TO KEEP FOR PROPER LOOK OUT FOR CLEARANCE – STEERED  
OUT & ENCROACHED ONTO MY PATH ON MY RIGHT ABRUPTLY.

AS SUCH, THE FRONT LEFT TYRE OF VEHICLE B COLLIDED ONTO THE RIGHT FRONT  
OF MY TAXI.

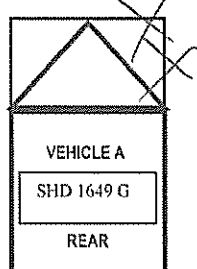
DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE RIGHT FRONT PORTION AND  
NO VISIBLE DAMAGES TO VEHICLE B.

NO INJURY INVOLVED.

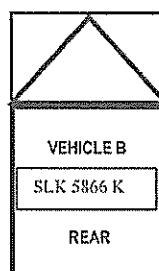
VEHICLE B HAD A PASSENGER ONBOARD ( FEMALE CHINESE )

\*VIDEO FOOTAGE CAPTURED.

DAMAGES FOUND ON VEHICLE A & VEHICLE B





Premier



THIRD PARTY VEHICLE

 1391818/z

Driver's Signature  
Monday, December 18, 2017 @ 10:10:02 AM

 <b>PREMIER TAXIS</b>	<b>HIRER / RELIEF / SUPER RELIEF</b>
VEHICLE NO.	<b>SHD 16496</b>
CONTACT NO.	<b>90532632</b>
NEW MAILING ADDRESS (if any)	

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1391818Z**



Name

**KWEK KIM TECK**

Race

**CHINESE**

Date of birth

**27-01-1959**

Sex

**M**

**S1391818Z**

Country/Place of birth  
**SINGAPORE**



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1391818Z**

Name:

**KWEK KIM TECK**

Birth Date: **27 Jan 1959**

Issue Date: **16 Sep 2003**



5578078



NRIC No. **S1391818Z**



Date of issue

**22-03-2016**

Address

**APT BLK 12 MERPATI ROAD  
#06-127  
SINGAPORE 370012**

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

**18 Nov 1982**

NP 428A



Land Transport Authority



**VOCATIONAL LICENCE**

Licence No. **S1391818Z**

Name **KWEK KIM TECK**

Issue Date: **20/12/2013**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

Text size + -

**Enquire Vehicle Registration Details****Owner Particulars**

NRIC/Passport/Company Cert No.: 200304975H  
Owner ID Type: Company  
Owner Name: PREMIER TAXIS PTE. LTD.  
Registered Address: 23 CHANGI SOUTH AVENUE 2 #04-03 SINGAPORE 486443  
Mailing Address: -  
Birth Date: -

**Vehicle Particulars**

Vehicle No.: SHD1649G  
Previous Vehicle No.: -  
Effective Date of Ownership: 30 Aug 2017  
Original Regn Date: 30 Aug 2017  
Registration Date: 30 Aug 2017  
Year of Manufacture: 2016  
Vehicle Type: Public Transport Taxi (Motor Car)  
Vehicle Scheme: Taxi (Company)  
Vehicle Attachment 1: Air-Con (Taxi)  
Vehicle Attachment 2: -  
Vehicle Attachment 3: -  
Vehicle Make: HYUNDAI  
Vehicle Model: I30 GDH 1.6 TCI 5DR DCT  
Primary Colour: Silver  
Secondary Colour: -  
Passenger Capacity: 4  
Chassis No.: TMAD281UVHJ134125  
Engine No.: D4FBGZ144455  
Engine Capacity/Power Rating: 1582 cc / -  
Maximum Power Output: 100.0 kW (134 bhp)  
Propellant: Diesel  
Max Unladen Weight: 1496 kg  
Maximum Laden Weight: 1940 kg  
Open Market Value: \$20,185.00  
PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 29 Aug 2025  
Minimum PARF Benefit: \$7,655.00  
No. of Transfers: 0  
IU Label No.: 1050707042  
COE No.: 2017083001004051R  
COE Expiry Date: 29 Aug 2025  
COE Category: A - Car up to 1600cc & 97kW (130bhp)  
COE Registration Category: A - Car up to 1600cc & 97kW (130bhp)

## Certificate of Insurance

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

**Certificate Number** : 5095103893

**Cover** : Third Party

1. Index mark and Registration Number of Vehicle

: **SHD1649G**

Chassis Number

: TMAD281UVHJ134125

2. Name of Policyholder

: PREMIER TAXIS PTE. LTD.

3. Effective Date of Insurance

: 20 Oct 2017

4. Expiry Date of Insurance

: 19 Oct 2018

5. Persons or Classes of Persons entitled to drive\*

(a) The Policyholder.

(b) Any licensed taxi driver driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use\*

(a) Use as a Taxi.

(b) Use for social domestic and pleasure purposes.

**This Policy does not cover**

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third- Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION I) : N/A

EXCESS (SECTION II) : S\$3,500

INSURE WITH COE : N/A

HIRE PURCHASE COMPANY : UNITED OVERSEAS BANK LIMITED

SUM INSURED : N/A

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

Agency : HL SUNTEK INSURANCE BROKERS PTE LTD (00000690672)

Date of Issue : 16 Oct 2017 17:13 hrs

**For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED**

**Countersigned By:**



**Authorised Officer**



**Chief Executive**



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**Third Party Insurer Enquiry**

Our Ref No: GR-17-190258

Date of Request: 18/12/2017

Your Ref No:

Online Purchase

Premier Automotive Services Pte Ltd  
23 Changi South Ave 2  
#01-02  
Singapore 486443

Dear Sir/Madam,

Enquiry Date 18/12/2017  
Enquiry By GOH WEE DEK  
TP Vehicle No. SLK5866K  
Ident Date 16/12/2017

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLK5866K	AXA Insurance Pte Ltd	20/01/2017-19/01/2018	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-17-190258  
Date of Request: 18/12/2017

Your Ref No: Online Purchase

Premier Automotive Services Pte Ltd  
23 Changi South Ave 2  
#01-02  
Singapore 486443

Dear Sir/Madam,

Enquiry Date 18/12/2017  
Enquiry By GOH WEE DEK  
TP Vehicle No. SLK5866K  
☐ Ident Date 16/12/2017

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



16 May 2018

To whom it may concern,

Dear Sir/Madam

Please be informed that below mentioned parts for vehicle number SHD1649G were on back orders from 16 December 2017 to 3 Jan 2018:

- 1) P/N:66321A6010 (Panel Fender, RH)
- 2) P/N:92102A6090 (Lamp Assy Head, RH)
- 3) P/N:86511A6000 (Cover Front Bumper)

Thank you.

Yours faithfully,



KOMOCO MOTORS PTE LTD  
253 ALEXANDRA ROAD #01-01  
SINGAPORE 159936

Joe Too  
Komoco Motors Pte Ltd  
Senior Manager, Parts Sales



REPLACEMENT VEH GIVEN YES / NO SHD/K49G  
VEH NO. 20171014101811  
JOS NO.

# CHECK IN / OUT VOUCHER

DRIVER'S NAME <u>KWEK Kim Teck</u>	
NRIC S <u>13918182</u>	HANDPHONE <u>90532632</u>
TAXI REGN NO. S <u>D16494</u>	MAKE / MODEL <u>150 A.</u>
DATE IN <u>16/12/17</u> TIME IN <u>1130</u>	DATE OUT <u>09/01/18</u> TIME OUT <u>1025</u>
KILOMETRES IN <u>30049</u> FUEL IN <u>E 1/4 1/2 3/4 F</u>	KILOMETRES OUT <u>30051</u> FUEL OUT <u>E 1/4 1/2 3/4 F</u>

TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED TO WORKSHOP

DATE / TIME CALL TO SERVICE FOR VEHICLE COLLECTION

09/01/18 0928

I ACKNOWLEDGE AND CONFIRM THAT I HAVE EXAMINED THE ABOVE SAID VEHICLE AND THAT THE SAME IS IN GOOD CONDITION AND TO MY SATISFACTION IN EVERY RESPECT TOGETHER WITH THE ACCESSORIES / ITEMS LIST ABOVE. THIS VOUCHER IS USED IN CONJUNCTION WITH THE TERM RENTAL AGREEMENT.

CHECK IN

KWEK Kim Teck

DRIVER'S NAME

AM

DRIVER'S SIGNATURE / DATE / TIME

CHECKED IN BY  
(PREMIER'S AUTHORISED WORKSHOP)

CHECK OUT

KWEK Kim Teck

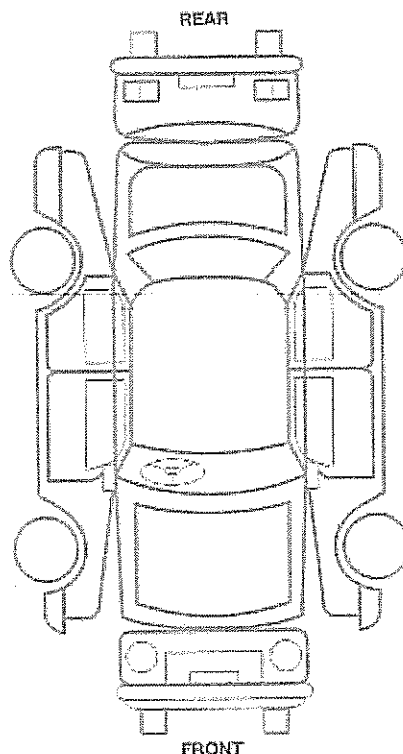
DRIVER'S NAME

AM

DRIVER'S SIGNATURE / DATE / TIME

CHECKED OUT BY  
(PREMIER'S AUTHORISED WORKSHOP)

INDICATE AREA OF DAMAGE HERE:



BODY MARKINGS

- |                     |             |
|---------------------|-------------|
| 1 - Light Dent      | 5 - Damaged |
| 2 - Serious Dent    | 6 - Chip    |
| 3 - Light Scratch   | 7 - Crack   |
| 4 - Serious Scratch | 8 - Peeling |

SERVICE / REPAIRS DONE	DRIVER'S REMARKS
<input type="checkbox"/> SERVICING <input type="checkbox"/> OTHERS: <input type="checkbox"/> T / BELT <input type="checkbox"/> AIRCON SYSTEM <input type="checkbox"/> ACCIDENT: DATE / TIME of ACCIDENT: <input type="checkbox"/> TURBO <input type="checkbox"/> BRAKE SYSTEM <input type="checkbox"/> CLUTCH SYSTEM <input type="checkbox"/> BULB <input type="checkbox"/> UNDER CARRIAGE <input type="checkbox"/> CPF <input type="checkbox"/> BATTERY	