NECERT:		ASSIC	NMENT (Office)		OH O	240
MANNA SED (Ferson):	Elane Ngu	of	(NSTP	Dat	e/Time: 040	11016
timated Cost: _	0		Bill to:			
0	le No:	3H AG	to Ter Auto	Tel:	FBL 31	50C
		Blk I stin	ming Ind Ist	# OHIS	1 10/12/	
olicy No:	msD/vms/1	-351075 -CA	Claim No		17-00/174	
um insured:				-	2/45	71017
Take of Veh:	REP. / REV 2	i HRS 'WP'	11 F106/8/01	- 12pm .		£
Make of Veh: Client's Record)	REP. / REV 2.	HRS 'UP' Person Co	11 F106/8/01	- 12pm .	H.O.D. Endorsemed	£
Make of Veh:	1E FILK8010	on ( / ) E	11 Froc/8/01 vial betocted	-12pm . Ve	H.O.D. Endorsemed	£
Make of Veh:	Action/Instructi	on ( / ) E	11 Froc/8/01 vial betocted	-12pm . Ve	HOD Endorsement	£
Make of Veh:	Action/Instructi SBY 3000 FBL 31900	on ( / ) E	10/8/2017 11 Interest Junior Stimate	-12pm . Ve	HOD Endorsement	£
Date/Time	Action/Instruction Stry 3855° FEL 31900 Change W	on ( / ) E	10/8/2017 11 Introduced Junior Stimple  Le Auto	-12pm . Ve	HOD Endorsement	£

09/01/2018 - To submit PIP 1710/- with 3 days of you.

- Ho perts allowed . Only labor . Hence ? !? submission .
- LKK smylled on 10/08/2017 @ 181116 km. About 10 day) MAN acident Independed sury surged on 19/09/2017 e 181906 km milesgi. Verice traveled 790 km from LKK smy to independent erry. We unlikely to ke done ped from sicions.
- Furthermore, 77 reported that levine was statementy when impact so up unlikely to be exposed to torsiand stress. RECEIVED 0 9 JAN 2018
  - Impact by migale.
  - Although MC and rims were replaced. I am not allowing as the deman to we may not be related to this prudent.

REF:



## 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						
MSIG	INSURANCE (SI	NGAPORE) PTE LTD	Ref : CS3/MSG1701	14843/M1vb-1				
	AFFLES QUAY )1 HONG LEONG	BLDG SINGAPORE 048581	Date: 04-01-2018 Code: MSG					
1.	STATE OF THE PARTY	Policy Particulars	:- THIRD PARTY CLA	.IM				
	Insured Veh.	FBL 3190C	Veh. Inspected	SBY 8855S				
	Policy No.	MSD/VMS/16-351035-CA	Coverage (\$)	0.00				
	Claim No.	MSC/V/17-001174	Excess (\$)	0.00				
	Assign From	MERIMEN (ELAINE NGU)	Assign Date	04/01/2018				
2.	TO THE REAL PROPERTY.	Vehicle Parti	culars & Condition					
	Make & Model		c.c	0				
	Engine No.	HIDDEN	Year of Reg.					
	Chassis No.		Colour					
	Odometer	*	Steering					
	Brakes		Modification					
	General							
3.		Condit	ions 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.	BERTHAN ESPIA	Descripti	ion of Damages					
5.	KANDON SECTION	Genera	al Information					
	Accident Date	30/07/2017	Inspection Date	04/01/2018				
	Survey held at	YEE AUTO SERVICE		4				
		BLK 15, #01-107 SIN MING IND SINGAPORE 575673	DUSTRIAL ESTATE .					
5a.		A MODELLA CONTRACTOR P	Remarks	<b>建筑学工作品等的支撑工</b> 具				
	A)THE INSPECTION B)IN ACCORDAN	ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, V	THOUT PREJUDICE" BA VE HAVE NOT AUTHOR	SIS. ISED REPAIRS.				

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

Paper Survey

LAIM SU	BFOLDER TRAC	KING								
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Su	bmitted	Ins Auth'ed	Auth'ed Status  Pending for Survey Report  Cancel Case		
Main	31 Jul 2017		01 Aug 2017 14:34 Edit Adj Rpt	S\$0.00 Edit Estimate	- 14 Contract	0.00 w Rpt				
	Main	Ref	erence	Cla	aim Details		Docume	nts	Show All	
CLAIM S	UBFOLDER DE	TAILS			Access to the last		[Created by	v insurer1	OPERAL OPERAL CO	
Insured: Main Clai	mant:		DUL HAMID, 1		F, Tel: +658	32563387	¿circutes o	, madrer j		
Vehicle R	hicle Reg. No.: SBY8855S Date of Loss:						30/07/2017	00:00 - :59		
Claim Type: TP / MSC/V/17-001174				P	olicy/Cover	Note No.:	MSD/VMS/16-351035-CA (TP, Fire & Theft) Coverage: 06/09/2016 - 05/09/2017			
Vehicle R (Insured)	ehicle Reg. No. rnsured): FBL3190C Policy No. (Claima				aimant):		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,05/201/		
	250-00				xcess:					
Repairer:	8	Yee Auto Serv	ice (HQ) 160 Sir	n Ming Drive #	02-17 Sin Min	g Autocity,	575722 Sin Min	g - Tel: 6457	5768	
Handling	Insurer:	MSIG Insuran 2540]	ce (Singapore)	Pte. Ltd. (HQ	) - Tel: +65 6	827 7888	[Handled by	Elaine Ngu S	iau Mei - 6594	
Adjuster:	X	08/01/2018]	ultants Pte Ltd	(HQ) - Tel: 6	256-3561 [	[Handled by	MA CHIN FOO	K] [Fina	Rpt due	
ASSOCIA	TED MAIL REC	EIVED					View Al	I Compo	ose Case Mail	
<ul> <li>MSIG_S</li> </ul>	G (04/01/2018)	: Report Send Ba	ck Alerts - SBY	8855S (TP)						
ALL ASSO	OCIATED TASK	S Type Task Gr	oup Subjec	t Handler	View All Assigned	Search 1	Tasks Crea	ate New Task Created	Complete	

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number Contact Number

**EMail Address** 

- 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 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.

	ACCIDENT STATEMENT
Date Of Report	31/07/2017 17:44
Date Of Accident	30/07/2017 15:55
Exact Location Of Accident	ALONG JIN EUNOS TOWARDS PIE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SBY8855S
Insured/Policyholder	
Name Of Registered Owner	GAN KHENG SIONG
NRIC No	S1686422F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92336677
Alternative Phone No	OFFICE-92336677
Vehicle Particulars	THE THE STATE OF T
Manufacturer	MITSUBISHI
Model	EVO 10-2.0 GSR (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1873492
Cover Note Number	
Driver	
Name of Driver	GAN KHENG SIONG
NRIC No	S1686422F
Date Of Birth	28/01/1965
Occupation	INDOOR
Date Of Driving Pass	29/05/1986
Driving Experience	31 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92336677
Para Maria hara	

OFFICE-92336677

NOEMAIL

Address

BLK 132 GEYLANG EAST AVE 1 #03-239

Postcode

380132

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle

OWNER

Vehicle Registration Number of Driver's Own

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

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)

**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 TO STATEMENT

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

IMRAN BIN ABDUL HAMID

Vehicle Registration Number Vehicle Make/Model/Colour

FBI 3190C

**Details Of Properties** Name of Driver

NRIC/Passport Number

S6806776F

Contact Number

87831735

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. Rease report <u>correctly</u> the details of the accident to speed up the claims process.
- 2 This Formmust be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any wiful managementation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 4 The issue and acceptance of this Formby insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5 Any take reporting may be referred to the Police for Investigation
- 6 The report will be forwarded by the insurers of the GM Records Management Centre established by the General Insurance Association
- of Singapore (GK) for archiving and that copies of this report will for a fee be made available upon application by interested parties
- 7 By the adgement 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.
- 5 Consent under the Personal Data Protection Act (PDPA)

Lunders tand, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General Insurence Association of Singapore ("GIA") may larg permitted to collect, use, disclose and/or process my personal data/personal information set out in the [lotin] 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 "lew yeardaw firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
- (ii) processing, handling ancifor dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) sivestigating 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 clems (including the making of correspondence, statements, invoices, reports or notices to me, which could involve declosure of certain personal data about me to bring about delivery of the same as wiell as on the external cover of envelopes/mail packages), analog
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposite")
- (b) all insurer(s) who have neured vehicle(s) involved in the accident and the insurers law yers/law firms, may/are permitted to collect use, declose 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.

blicyholder's Sign me	ature / Date &	Divers Signa & Time	ture (\$ driver is not the		Wenes sed by Reporting Personnel	Centre
ketch Plan	IN EUNO	S FOAD		WW.		
	<b>-&gt;</b>					
1	_,	Till Control		See and	(S)	
( <del>Usess</del> e)						-
	r					-
	) <u></u>	-	4.1		S - 1_2,7 - 1-2	7

10

#### Common Statement

O Driver O Owner

ACCIDENT STATEMENT Location of Accident Time Date of Accident 30-07-2017 16-65pm ALONG JUY ELLNOS TOURIOS PIE INSURED! POLICY HOLDER (VEHICLE A) SRY88555 Vehicle Registration Number SIGNE CONS Name of Policyholder NRICI FINI Pessport ROC (il Policyholder is company) DK132 GEYLA-G EAST AVE (403-239 (6 300 122) Address Contact Number - NOOR Occupation VEHICLE PARTICULARS (VEHICLE A) Vehicle Make / Model Selpon MPV, CRV, Van Lorry, Bus Micycle, Others Type of Volucie Exact Purpose for which vehicle was being used PAVAR 4SE at the time of accident ON NO O Yes
O Private O No Remarks Thrily MALLY O Commercial O Molorcycle Are you claiming under your own insurance policy? Vehicle category HEURANCE COMPANY (VEHICLE A) Name of Insurance Company Comprehensive O TP Fire & Tneh O Third party
O Yes No Type of Policy O Yes Ficet Policy UPA/PIET3492 Policy Number ORIVER Name of Drive: NRIC/FIN/ Passport MOONE 28-01-1965 Date of Birth 29-05-1986 Male 0 Female Occupation Driving Pass Date Gender THE BYLANG EAST HUE 1 402-289 ( 380132 ) Contact Number Address Email Address @ No O Yes Was driver an employee of the insured's Company? CHNRK if No relationship of Driver with the Insured Vehicle Number of Univers Own Vehicle (if applicable) 01 insurance of Driver's Own Vehicle (if applicable) GENERAL INFORMATION OF THE ACCIDENT HIT INSURED COMERS
Of Dry Comers er chap Type of Callmon (E.g. Chain Collision/ Head-On etc.) Weather Conditions O Wet Road Surface Damage Area OTHER INFORMATION W NO O YEL Was there any fore-go vehicle(s) myolyng? O YES DV NO Was anybody injured in the accident? (Including Wilhest C No Was any other vehicle(s) or properly damage 27 C. Yes Was there any camera video footage (in car)? DETAILS OF POLICE ACTION W 140 C. ter Was the appears reported to the Police? if Yes, please state which police station & Report No 4 744 Also unlike of intended Prosecution given? Yes applied whom?

## Common Statement

OWN VEHICLE REGISTRATION NUMBER					
OETAILS OF OTHER VEHICLES OR PR Other Vehicle or Property 1 (VEHICLE B)	OPERTY DAM	AGED			and the second s
Vehicle Registration Number Vehicle Make! Model! Colour		1	BL 3	190C	# 1 H
Delait of Properties (# Other Party is not a Vi	ehele)				
Damage Area	C trace of				
Name of Driver		Ton	ALI DIE	ann	LAMITA
NRIC/FIN/Passpon	10	T. 67	DAC 3	1350	L Hamid
Contact Number / Email Address		676	7127	101	
Address		2 40	21177		
Name of Insurance Company					
Other Vehicle or Property 2 Vehicle Repistration Number	#	5.0			
Vehicle Make/ Model/ Colour					
Details of Properties (if Other Party is not a Vi	ehicle)				
Damage Area					
Name of Driver					
NRICI FINI Passport					
Contact Number / Email Address					
Address					
Name of Insurance Company					
DETAILS OF WITNESS	Augus II	1 99 1877 - E	1 or 1		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Phone / Email Address					
Address					
NRIC/ FIN/ Passport					
DETAILS OF INJURED PERSON 1		Tel.			
NRICI FINI Passnort					
Address					
Approximate Ape					
Incres Sustained					
If Vehicle Occupants, state in which vehicle?					
Were Seat Betts Worn?		0	Yes	0	No
Was injured conveyed to hospital by embulant	A=2	õ	Yes	0	No
DETAILS OF MUURED PERSON 2	,		192		
NRIC: I IN Passport					
Adoress					
Approximate Aps					
Injuries Sustained					
If Vehicle Occupants, state in which service?					
Were Sea! Bells Worn?		0	Yes	C	No
Was Injured conveyed to Hospital by Ambular	ce*	٥	Yes	C	No
Declaration					
I'We declare that the above particulars & store	million provided a	tione a	re true it	Every 2504	кС <sup>1</sup>
	COK & Torre				
Signature of Holder Holder					
(Ctripany Chot / epp-ration)					
20 A 325 12					
	Cieta & Time				
5-protore of Driver / Date & Time					

## Individual Statement

		20	7.5	T.11	7		IN	17716	2.5	2337	der.	1 6-	-	-	-	12	-
		教	-	-	Tr			- Annie Com		- ,	100000000000000000000000000000000000000	1000			K		
	DIF	1	7		7	130	10	走	7	by	30	The	10	7	77	(u)	395
- 7	PIE	- 1	4 /	7	2 1	- 37		-	710					- 10	The state of		
				_	-	_		-	2000					100 to 100		2000	
4 V	2			_					-								-1500000
, ,	)		77							_							2009-35
			227		115 30					_				_			
			04	920-								-	-				
		- - 	VII	-0.000										-			-
		NV.	10000				STATE OF STREET			1111111111111				_			
To Diane								3707 To Co.									
_			-					- FILOR-	elle-ile-					100			
			_	-		_	-						Sizeso				
			_		-								-				
West W	District Services									-	-						
-11-01-b	SMICHAE				-100							-					
- All			- 11		- 15												
						HEADS											
											LEAST						
		-															7/21-0
	-						_										
								_			_	h = 100		III O			AHBY-2
													E07.5215			ili.	
			Street											-			
			III-O'SS		11/2/							_		-		_	
		41042.0	THERE			- 8											
-	-					W.	·	105 (O.E.									
													SC1-17-				
			_									\$10.e+11.i		Than -	C. Carrie		
									and the same			-	-				South
												_	-		1500000		
							-				_						
				UI-S	11220	-										_	
					7/10=5		30.55			enter-							
				-						www.							
	11000	_		_	-		-									!!!	=00008
							-	-							T-30446		- 115
	911								_					-			

### Declaration

IVM decisie the foregoing particulars are true in every respect

Policyhouser's Signature Com &

Time a benature of private notific party holds to face, a different

Winescape Reporting Centre

# Enquire PARF/COE Rebate for Registered Vehicle

AL-SEARCH AND THE CONTROL OF THE CON	Singapore NRIC	
Owner ID Type:	Singapore (1110	
Owner ID:	6422F	
ehicle Details		
/ehicle No.:	SBY8855S	
/ehicle to be Exported:	No	
ntended De-registration Date:	05 Jan 2018	
Vehicle Make:	MITSUBISHI	
Vehicle Model:	EVO 10 GSR 2.0 M	
Primary Colour:	Red	
Manufacturing Year:	2008	
Engine No.:	4B11AY6462	
Chassis No.:	CZ4A0001093	
Maximum Power Output:	206.0 kW (276 bhp)	
Open Market Value:	\$28,468.00	
Original Registration Date:	19 Dec 2008	
First Registration Date:	19 Dec 2008	
Transfer Count:	3	
Actual ARF Paid:	\$28,468.00	
Intended PARF Rebate Details		
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	18 Dec 2018	
PARF Rebate Amount:	\$14,234.00	

COE Expiry Date:	18 Dec 2018	
COE Category:	E - Open Category	
COE Period(Years):	10	
QP Paid:	\$14,001.00	
COE Rebate Amount:	\$1,321.00	
Total Rebate Amount:	\$15,555.00	

The information contained herein is correct as at 05 Jan 2018

ОК

## PREMIER APPRAISER SERVICES

#### VEHICLE INSPECTION REPORT

To:

Mr. Gan Kheng Siong c/o 160 Sin Ming Drive #02-17 Sin Ming Autocity

Singapore 575722

Our Ref.

PT1709004-L

Policy No. Claim No.

Sum Insured :

Excess

: T/P Claim

Date

Follow up inspections were also conducted.

: 28th Sep 2017

Assigned By

: Mr. Gan Kheng Siong

Date of Assignment : 19th Sep 2017

: 30th July 2017

Date of Accident Date of Inspection

: 19th Sep 2017

Name of Workshop : Yee Auto Service

Place of Inspection : 160 Sin Ming Drive #02-17 Sin Ming Autocity

Singapore 575722

#### PARTICULARS OF VEHICLE

Registration No.

: SBY 8855 S

Odometer/km : 181906

Make/Model

: Mit. Lancer Evo 10 GSR 2.0M

Chassis No. : CZ4A0001093 Engine No.

: 4B11AY6462

Type Of Body

: 4 Door Saloon

Engine Cap.

: 1997 cc

Year of Manuf./Regn. : 2008 Colour

: Pearl Blue

Carrying Cap. : 4 Passengers

#### PRE-ACCIDENT CONDITION (Static tests only)

Handbrake

: Serviceable

Body Work

Market Value : Good

Footbrake

: Serviceable

Paint Work

Scrap Value : Good

Steering

: Serviceable

Modifications : None

Others

#### CONDITION OF TYRES

Size

N/s - Tread Depth/Make

O/s - Tread Depth/Make

Front Tread

265/35 - R18

5mm - Yokohama

5mm - Yokohama

Rear Tread (inner) Rear Tread (outer)

265/35 - R18

5mm - Yokohama

5mm - Yokohama

The above represent an estimated remaining life of the tyre treads in mm.

## POINT OF IMPACT/GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained an impact on the n/s rear portion.

The n/s rear fender, n/s rear door were dented. The rear bumper was chafed. The n/s rear wheel rim was dented/grazed. A computer wheel alignment check revealed that the n/s rear suspension has been missaligned as the result of the sustained impact.

For details of damages please refer to our schedule attached.

#### REMARKS:

This survey was conducted strictly without prejudice.

This report is confidential and is given for the use of clients and their agents and any disclosure or publication of it or parts thereof shall be the responsibility of such person and no liability shall be attached to us therefore.

## PREMIER APPRAISER SERVICES

Our Ref: PT1709004-L

Vehicle No: SBY 8855 S

Qty	Parts Descriptions	Conditions	F	Repairer's Est.		Our Revised	
	NETT ITEMS:						
1	n/s taillamp	serviceable	S\$	495.00	S\$		
1	n/s rear fender	dented - repair		926.00			
1	rear windscreen mldg	not required		188.00			
1	n/s rear susp shock absorber	serviceable		680.00			
1	n/s rear susp knuckle arm	damaged		888.00		888.00 HM	
1	n/s rear susp lower arm	damaged		650.00		650.00 HH	
1	n/s rear wheel bearings	damaged		480.00		480.00 Hall	
•1	n/s rear susp control arm	damaged		560.00		560.00 HH	
*1		damaged		468.00		468.00 니니	
1	n/s rear susp toe control arm	damaged	C# -	5,335.00	S\$ -	3,046.00	
		1.500	S\$	2020.0 SERVED SEC.			
		LESS	0%_	-	10%	304.60	
				5,335.00		2,741.40	
	S/NETT ITEMS:					00.00 1)	
1	rear windscreen sealant	necessary		60.00		60.00 HH	
1	n/s rear tyre	serviceable 7	51-	500.00			
1	n/s rear sport rim 18 "- ENKEI - Japan	damaged	-	1,500.00	-	1,500.00 LR 300	1
		TOTAL S/PARTS	S\$	7,395.00	S\$	4,301.40	
	To remove/refit interior trims & garnish (luggage & fender inner trims)	n to assist repairs.		300.00		80.00	
	To remove/refit rear windscreen to ass	sist repairs.		250.00			
	Labour charges to repair, panel beat a damaged parts and replace the above (\$\$280.00 * 1.5 days)			1,500.00		420.00	
	To dismantle/replace damaged n/s rea	ar suspension parts.		350.00		250.00 보네	
	To check & adjust wheel alignment & (before & after)	steering geometry.		150.00		150.00 120 -	
	To check wiring functions.	. 1410	\-	80.00		30.00 HA	
	To putty, apply primer & spray-paint th (n/s rear door, n/s rear fender & rear bump			1,400.00		750.00 —	
	To apply rust-proofing on repaired/rep	laced panels.	ss -	160.00 11,585.00	ss —	40.00 6,021.40	
2	50000000000000000000000000000000000000	0.500075	-				

Note: The repairer has agreed to undertake the repairs at our adjusted amount of S\$ 6,021.40 corresponding to supply of parts, labour and spray The estimated period of repairs is SIX ( 6 ) days. Pursuant to your instruction we have not authorised repairs on your behalf.

supplementary parts.

PREMIER APPRAISER SERVICES

LESLIE K CLIM CAE (UK), MIMI (UK) MSAAA, Automotive Appraiser Dip.MTM. Automotive Engineer

# ...CLAIM SUBFOLDER...(Pending for Survey Report) Paper Survey

	FOLDER TRAC	Est Submitted	Adı Assigned	Adi Rpt	Adi Submitted	Ins Auth'ed	Status		
Case	Notified 31 Jul 2017	Est Submitted	01 Aug 2017 14:34 Edit Adj Rpt	S\$1,710.00  Edit Estimates	\$\$1,710.00 View Rpt		Pending for Survey Report Cancel Case		
	Main	Refer	ence	Claim Details		ocuments	Show All		
CLAIM SI	UBFOLDER DET	AILS	THE PERSON NAMED IN COLUMN			[Created by in	surer]		
Insured:		IMRAN BIN	ABDUL HAMID,	107 000000	el: +6582563387				
Main Clain	nant:	GAN KHENG	SIONG, ID: S1	686422F		T			
Vehicle Re	g. No.:	SBY88559	5	Date of Los	s:	30/07/2017 00:0			
Claim Typ	e:	TP / MSC/	V/17-001174	Policy/Cove	r Note No.:	MSD/VMS/16-351035-CA (TP, Fire & Theft) Coverage: 06/09/2016 - 05/09/2017			
Vohicle De	eg. No. (Insured)	FBL3190C		Policy No. (	Claimant):				
VEHICLE NO	g. No. (Insured)			Excess:					
Repairer:		Yee Auto Se	rvice (HQ) 160 S	in Ming Drive #02-1	7 Sin Ming Autocity	, 575722 Sin Ming	- Tel: 64575768		
Handling 1	Insurer:	6594 25401		) Pte. Ltd. (HQ) - T					
Adjuster:		due 08/01	onsultants Pte Lt /2018]	d (HQ) - Tel: 6256-	3561 [Handled b	y MA CHIN FOOI	() [Final Kpt		
ASSOCIA	ATED MAIL REG	CEIVED				View All	Compose Case Mai		
MSIG_	SG (04/01/2018	): Report Send Ba	ack Alerts - SBY8	855S (TP)					
ALL ASS	SOCIATED TAS	KS <sup>=</sup>			View All Search	Tasks   Create N	ew Task Complet		
Due Da	ite Priority	Type Task Gr	oup Subject	Handler Assi	gned By Con	pleted On C	reated On Don		

## **Claim Documents**

\*SBY8855S (MSC/V/17-001174)

[FBL3190C]

TP

GAN KHENG SIONG

Jul 30 2017 12:00AM

[IMRAN BIN ABDUL HAMID]

Yee Auto Service

Upload Documents Upload Photos Compose New Letter					
	yau bocuments		1 per	page 🗸	✓
	ssment Reports	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
10		Adjuster Immediate Advice	0	Load HTM	
	14/08/17 11:21	Adjuster Immediate Advice			
2hot	os/Images		3 pe	r page 🔻	✓
Vo.		LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
	10/08/17 18:30	General View	0	Load JPG	✓
		General View	0	Load JPG	$\checkmark$
2	10/08/17 18:30	(*************************************	0	Load JPG	<b>V</b>
3	10/08/17 18:30	General View	0	Load JPG	V
4	10/08/17 18:30	General View	0	Load JPG	<b>V</b>
5	10/08/17 18:30	General View		100000000000000000000000000000000000000	V
6	10/08/17 18:30	General View	0	Load JPG	
7	10/08/17 18:32	General View	0	Load JPG	$\mathbf{Z}$
8	10/08/17 18:32	General View	0	Load JPG	<b>☑</b>
	10/08/17 18:32	General View	0	Load JPG	₹
9		General View	•	Load JPG	$\mathbf{A}$
10	10/08/17 18:32	General View	0	Load JPG	$\mathbf{Z}$
11	10/08/17 18:32		0	Load JPG	V
12	10/08/17 18:32	General View			
_			1 p	er page 🔻	<b>V</b>
	umentation	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
No	Finalized On 01/08/17 13:56	SBY8855S GIA RPT	0	Load PDF	
2	18/08/17 11:19	Email to TP Lawyer on SJE - request for workshop details	0	Load PDF	
3	18/08/17 13:10	PRI Details	0	Load PDF	
-	03/11/17 16:31	TPD SBY8855S GIA REPORT	0	Load PDF	
5	03/11/17 16:31	PREMIER APPPAISER SERVICES REPORT - SBY8855S	0	Load PDF	-
No	Relabel/Reorder			Thumbnail	Prin
1	09/01/18 17:05	PRS INVOICE	0	Load PDF	

## **Documents Checklist**

DOCUMENTS CHECKLIST		Reset	Save	Print
There are no document checklists configured.				
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)				
Our Checklist Remarks - LRR Add Goldson	^			
	~			

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

51 Ubi Ave 1 #01-25. Paya Ubi Industrial Park

Singapore 408933

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

# VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS3/MSG17014843/M1VBS2-1

Date:

09/01/2018

REFERENCE

MSIG Insurance (Singapore) Pte.

Policy No:

MSD/VMS/16-351035-

Handling Insurer:

CA

Claimant Vehicle

SBY8855S

Insured Vehicle No:

FBL3190C

No: Date of Loss:

30/07/2017

Nature of Claim:

TP

Claim

No:

MSC/V/17-001174

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

**SBY8855S** 

Make & Model:

MITSUBISHI EVO 10, 2.0 GSR (M) 19/12/2008 (Man. Year: 2008)

Engine No: Chassis No:

Odometer:

4B11AY6462 CZ4A0001093

181116 km

Reg. Date: Colour:

Blue

1997 cc

Engine Capacity: Market Value/New Car Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Good Yes

Steering (Serviceable): Engine Modification:

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Rear Tyre Size:

265/35R18

Pre-accident Condition:

Front Tyre Size: Front Left Side:

Yokohama 7 mm

265/35R18

Rear Left Side:

Yokohama 7 mm

Front Right Side:

Yokohama 7 mm

Rear Right Side:

Yokohama 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
		7,395.00	300.00	7,095.00	95.94
Parts Miscellaneous Items		0.00	0.00	0.00	
Labour		4.190.00	1,410.00	2,780.00	66.35
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Nett Amount (S\$)	11,585.00	1,710.00	9,875.00	85.24

INSPECTION

Date of Assignment:

01/08/2017

Date Inspected:

10/08/2017 Inspected At:

Blk 1 Sin Ming Ind Est #01-115

Repairer: YEE AUTO SERVICE BLK 15, #01-107 SIN MING INDUSTRIAL

**ESTATE** 

SINGAPORE 575673

Estimated Period of Repair:

3.0 days

Adjuster: MA CHIN FOOK

Manager:

CATHERINE CHONG KAI LING

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen\_p... 9/1/2018

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

## REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 09 Jan 2018)

Parts: 143 MITSUBISHI EVO 10 2.0 GSR (M) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SBY8855S)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk \*.

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
4	1		*N/S TAILLAMP	Serviceable	495.00 F	*-FN
2	4		*N/S REAR FENDER	Repair	926.00 F	*- FN
2			*REAR WINDSCREEN MLDG	Not Required	188.00 F	*- FN
3	1		*N/S REAR SUSP SHOCK ABSORBER	Serviceable	680.00 F	*-FN
5	1		*N/S REAR SUSP KNUCKLE ARM	Not Necessary	888.00 F	*-FN
6	1		*N/S REAR SUSP LOWER ARM	Not Necessary	650.00 F	*-FN
7	1		*N/S REAR WHEEL BEARINGS	Not Necessary	480.00 F	*-FN
8	1		*N/S REAR SUSP CONTROL ARM	Not Necessary	560.00 F	*-FN
9	1		*N/S REAR SUSP TOE CONTROL ARM	Not Necessary	468.00 F	*-FN
10	1		*REAR WINDSCREEN SEALANT	Not Necessary	60.00 FS	*-FS
11	4		*N/S REAR TYRE	Serviceable	500.00 FS	
12	1		*N/S REAR SPORT RIM 18 - ENKEI - JAPAN (LOCAL REPAIR)	Damaged	1,500.00 FS	*300.00 FS
F=Fr	ranchise	e part. S=	SpcNett. N=NettItemDisc.	Sub Total (S\$	7,395.00	300.00
			- Nett Item Discount on N Items	s 0.00/10.00% (S\$	0.00	0.00
				Total Parts (S\$	7,395.00	300.00

Report was unsubmitted during this print-out.

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items		100000000000000000000000000000000000000	270.02.20
1	TO REMOVE / REFIT INTERIOR TRIMS & GARNISH TO ASSIST REPAIRS. (LUGGAGE & FENDER INNER TRIMS)	New	300.00	80.00
2	TO REMOVE / REFIT REAR WINDSCREEN TO ASSIST REPAIRS.	New	250.00	0.00
3	LABOUR CHARGES TO REPAIR, PANEL BEAT AND STRAIGHTEN DAMAGED PARTS AND REPLACE THE ABOVE-MENTIONED PARTS.	New	1,500.00	420.00
4	TO DISMANTLE / REPLACE DAMAGED N/S REAR SUSPENSION PARTS.	New	350.00	0.00
5	TO CHECK & ADJUST WHEEL ALIGNMENT & STEERING GEOMETRY. (BEFORE & AFTER)	New	150.00	120.00
6	TO CHECK WIRING FUNCTIONS.	New	80.00	0.00
7	TO PUTTY, APPLY PRIMER & SPRAY-PAINT THE AFFECTED AREAS. (N/S REAR DOOR, N/S REAR FENDER & REAR BUMPER)	New	1,400.00	750.00
8	TO APPLY RUST-PROOFING ON REPAIRED / REPLACED PANELS.	New	160.00	40.00
	Gross Labou	r Cost (S\$)	4,190.00	1,410.00
	Report was unsubmitted during	this print-out.		

< END OF ESTIMATES >