

ASS. REC. BY:

REF: CS/FCI18000436/Gtd3/

Special Instruction:

Surveyor:

CWS

ASSIGNMENT (Office)

From (Person):

May chua

of

FCI

Date/Time:

12:36pm @ 08/01/2017

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLP650Y

Insured:

SHB 63402

at Workshop m/s

Jack Cars Enterprise

Tel:

674 88824

of

Blk 3007, 14bi Rd 1 # 01-150

Policy No:

Claim No:

D18000196MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A.

26/12/2017

(Client's Record)

11/01/2018 @ Morning

CA / REV / REP. / REV 24 HRS

'up'

H.O.D. Endorsement:

Date/Time:

1:57pm @ 08/01/2017

Person Contacted:

Ms. Thana

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SLP650Y-NBA/MSG17024609/Y
	SHB 63402-NBA/MSG17024609/Y
10/1-	Revert preli advice.
	Part by Part #407-201 (Red: 25-76-80; 64%)

Wkl.

FCI

11/01/2018

SLP650Y

13 Aug 2015

TP WS TR RES CO RES EVAL INV M
SLP650Y
Jack Cars
81K3007 Ubi Rd 1 # 01-456

Subaru Forester 1998
Blue
49157

IFISIGK85FG 054020

Morning

225/55R18

Remark: The veh had commenced its repair at the time of inspection

INS	DIS

Sal or Market value
OAC Accident Report Constant? Yes or No
QAC PR Egn Constant? Yes or No
Est Repair days Res Yes or No
W/S
CA REV REP 24hrs 1 wpr

TOYO YOKO

6 6
6 6
11-01-18 3pm
w/s

Date Time Action Inspection

RECEIVED 6-4-2018

1014 Typist
Final Report

Days Of Repair 2
Resurvey No of Days

TP
1407.20

135
30
13
198



Auto
Consultants
Pte Ltd

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

Your Ref: D18000196MFSH

Date: 19/1/2018

Our Ref: CS/FCI18000436/Gtd3

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

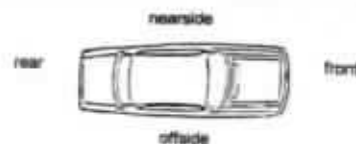
INITIAL INSPECTION REPORT OF VEHICLE NO. SLP 650Y

Please be informed that we had conducted the inspection of the abovementioned vehicle on 11/1/2018 at the premises of M/s JACKCAR ENTERPRISE, and have the following to report: -

Workshop Estimate Amount	: S\$ <u>4,262.88</u>
Revised Estimate Amount	: S\$ <u>729.20</u>
"Check" Items Amount	: S\$ <u>1,490.00</u>
Market Value	: S\$ <u>-</u>
LTA Reimbursement Value	: S\$ <u>-</u>
Nett Value	: S\$ <u>-</u>

Description of Damage:

The vehicle sustained damages at the front body.



Comments/ Present Status:

Damages Consistent.

Yours faithfully

Guo Qiang

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 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	28/12/2017 10:33
Date Of Accident	26/12/2017 08:45
Exact Location Of Accident	BLK 5 DELTA AVENUE OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP650Y
Insured/Policyholder	
Name Of Registered Owner	HWEE HON FAI
NRIC No	S8326849B
Email Address	CHERRIELIEW@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98516650
Alternative Phone No	OTHERS-93899081
Vehicle Particulars	
Manufacturer	SUBARU
Model	FORESTER
Exact Purpose for which vehicle was being used at time of accident	SENT DAUGHTER TO MOTHER IN LAW PLACE B/F GOING TO WORK
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	S 28986558 SMF
Cover Note Number	
Driver	
Name of Driver	LIEW GUAT TING
NRIC No	S8780170E
Date Of Birth	18/01/1987
Occupation	INDOOR
Date Of Driving Pass	31/03/2005
Driving Experience	12 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93899081
Fax Number	
Contact Number	OTHERS-98516650
EMail Address	CHERRIELIEW@GMAIL.COM

Address	BLK 13 CANTONMENT CLOSE #26-29
Postcode	080013
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20171226/2069 (TYPE OF COLLISION IS HEAD TO SIDE)

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 Witness 1

Name	HWEE KWAI KUEN
Phone Number	98186273
Email Address	

Details of Witness 2

Name	HWEE HON LOONG
Phone Number	96345553
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB6340Z
Vehicle Make/Model/Colour	SONATA I40

Details Of Properties

Vehicle Category

TAXI

Name of Driver

LEONG

NRIC/Passport Number

Contact Number

98186028

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

SKETCH PLAN

(30) I compared with appropriate law in connection of processing, handling and/or dealing with my claims collectively the

(10) We warrant that we will not use or disclose any personal information for one or more of the above purposes, and

(c) Any Payment or Distribution may not be distributed to any of the members and/or due to their third party service providers or representatives of their respective firms, which may be listed outside of Singapore, for one or more of the above Purposes.

Any information submitted will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management of persons with all future claims.

© The information is collected under (a) above may be shared / disclosed

(2) To all persons, and to 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

and for complying with requirements under any regulations, laws or court orders.

Driver's Signature _____
 Of Driver's Car (the policyholder)
 Date & Time _____

Reporting Center Personnel's Signature
Name: Rishi Khatwa
APR 11 2018

Sketch Plan #2

SKETCH PLAN

2017 EBLW PLANTIA CARPARK



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description area:

as per the police report
7/20/2017 6/20/17

DECLARATION

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

Reporting Officer's Signature
Date & Time

Driver's Signature
(If given is not the possessor)
Date & Time

Reporting Officer's Signature
Name: *Rishi Williams*
NRIC/TIN No. *08112/2017*

Sketch Plan #3



SINGAPORE
POLICE FORCE



702110260065

Police Station Of Origin
Bukit Merah East N.P.C.
401 New Bridge Road Police Cantonment
Complex SINGAPORE 189752
Tel No: 1800-2360660

Report No: T0071047069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26-12-2017 12:45	File Report No.	Station Diary No. 57
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Informant's Particulars

Name of Informant LEA GUAT * NG		Address APT BLK 13 CANTONMENT CLOSE #26-28 SINGAPORE 189752	
IC Type ID No. NRIC NO: S47501706		Contact No. Home/Office Mobile: 93809061	
Nationality MALAYSIAN		Email	
Sex Female	Age 30	Date of Birth 18/11/1987	Type of Informant Driver
Race Chinese		Language Chinese	
Occupation SALES EXECUTIVE		Driving Licence Information Class: 3 Date of Expiry	

General Information of the Accident

Type of Accident Non-Injury	Drink Drive No	Date/Time of Accident 26-12-2017 08:45	Type of Location Car Park
Location Along Road 1 DELTA AVENUE			
BLK 5 Delta Avenue Carpark			
Weather Clear	Road Surface Dry	Road Speed Limit	
Traffic Flow One Way	Traffic Control Not Controlled	Traffic Volume Light	
Type of Collision Between moving and stationary - Head to side			Anyone conveyed by ambulance No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SH863402	Car					0
SLP850Y	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved	No
No. of Pedestrians Injured	NIL
Use of Pedestrian Crossing	NA

Sketch Plan #4



SINGAPORE
POLICE FORCE



702112262009

Police Station Of Origin
Bukit Merah East N.P.C.
~ 391 New Bridge Road Police Cantonment
Singapore SINGAPORE 06100
Tel No: +65-2389999

Report No: 702112262009

CONTINUATION OF REPORT

Driver			
Name	LIU YUANG * N2	ID No.	NIL
Related Vehicle	SH553407 Car	Contact No.	95186028
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LIU YUANG * N2	ID No.	95186028
Related Vehicle	SLP850V Car	Contact No.	93899081
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details:

On 26/12/2017 at about 0842hrs, I was moving off from a parking lot at Block 5 Delta Avenue carpark. While moving off, I saw a Taxi oncoming as such I stop to allow the Taxi to pass. The Taxi drove pass and collided onto the front of my vehicle. I aligned and check the damages on my car, the registration plate and frame, scratches on the front bumper and parts of the bumper came off. After exchanging details the Taxi driver left.

Sketch Plan #5



SINGAPORE
POLICE FORCE

Police Station Of Origin
Luhmawashan S.P.O.
A 351 Nov. Bridge Road Police Cantonment
Compass SINGAPORE 000752
Tel No. 1 800 238 2299



Report No. 12011 014204

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording This Report

Sgt I LOO DIN HWEE

Signature Of Informant

[Handwritten Signature]

Signature Of Interpreter
Not applicable

Date/Time:
26/12/2017 13:46

Officer In Charge Of Case
TP 1 GUA
Staff Sgt TANG SIEW PHU
Contact No. 65476430

Classification Of Case

Authentication Stamp:
42199

Enquire Transfer Fee

Vehicle Details	
Vehicle No.:	SLP650Y
Vehicle Type:	P11 - Passenger Station Wagon/Jeep/Land Rover
Vehicle Attachment 1:	With Sun Roof
Vehicle Scheme:	Normal
Vehicle Make:	SUBARU
Vehicle Model:	FORESTER 2.0XT CVT AWD SR
Chassis No.:	JF1SJGK85FG054020
Propellant:	Petrol
Engine No.:	FA20K888830
Engine Capacity:	1998 cc
Maximum Power Output:	177.0 kW (237 bhp)
Maximum Laden Weight:	2110 kg
Unladen Weight:	1682 kg
Year Of Manufacture:	2015
Original Registration Date:	13 Aug 2015
Lifespan Expiry Date:	-
COE Category:	B - Car above 1600cc or 97kW (130bhp)
Quota Premium:	\$60,789.00
COE Expiry Date:	12 Aug 2025
Road Tax Expiry Date:	12 Feb 2018
PARF Eligibility Expiry Date:	12 Aug 2025
Inspection Due Date:	12 Aug 2018
Intended Transfer Date:	12 Jan 2018
CO2 Emission:	197.00 (g/km)
CEV/VES Rebate Utilised Amount:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
The current road tax expiry is 12 Feb 2018. You may renew the road tax from 13 Nov 2017 with all pre-requisite(s) fulfilled. If the road tax is renewed after 12 Feb 2018, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.	
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.	
Amount Payable (From 13 Feb 2018 to 12 Aug 2018)	



ESTIMATE

DATE OF ACCIDENT : 26/12/2018
VEHICLE : SLP650Y 49157
MAKE & MODEL : SUBARU FORESTER
INSURANCE : FIRST CAPITAL INSURANCE LTD
SURVEYOR : LKK AUTO CONSULTANTS PTE LTD

PARTS	CONDITION	COST
1. FRONT BUMPER / Cut		\$ 1850
2. FRONT BUMPER LOWER GRILLE / Cut		\$ 750
3. FRONT BUMPER FOG LAMP COVER - RIGHT X/M		\$ 285
Front support Beam / BT		\$175
SPECIAL NETT ITEMS		
1. CLIPS x 15 / MC		\$ 58
2. TOW HOOK COVER / M's.		\$ 58
3. NUMBER PLATE & NUMBER PLATE COVER / Cut		\$ 60
LABOUR		
1. TO PUTTY & SPRAY PAINT OF AFFECTED AREA		\$ 550
2. TO REMOVE DAMAGED & NECESSARY PARTS & ATTACHEMENTS; KNOCK, JACK, WELD, RESHAPE AND ALIGN ALL AFFECTED PORTIONS. REINTALL ALL UNDAMAGED PARTS & NECESSAY NEW PARTS INTO ORIGINAL POSITION		\$ 650
3. TO REMOVE & REPLACE BUMPER		\$ 180
4. ANTI RUST TREATMENT		\$ 120
PART - 20% :		\$ 2,308
LABOUR :		\$ 1,500

? 660
324
X
984
20% : 787.
30
? 10
40
80

200
200
X
X
400

1267.2



	SPECIAL NETT :	\$ 176
	TOTAL :	\$ 3,984
	7% GST :	\$ 278.88
	GRAND TOTAL :	\$ 4,262.88

2 Days.

part by part.

before paint photos.

Gno Qiang - 82880282

11/1/18.

LPS Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and
is subject to final approval from Insurance Company

Acknowledged by Repairer:

Signature:

Date:



Our Ref : 2017.JC.SLP650Y

Your Ref : SHB6340Z

17th January 2018

First Capital Insurance Limited
36 Robinson Road
#16 - 01
City House
Singapore 068877
Attn: Motor Claims Dept

WITHOUT PREJUDICE

Dear Sir/Madam,

CLAIMANT: LIEW GUAT TING
ACCIDENT INVOLVING SLP650Y & SHB6340Z ON 26TH DECEMBER 2017
AT BLK 5 DELTA AVENUE OPEN SPACE CARPARK.

We act for **LIEW GUAT TING** who was involved in the accident mentioned above.

On demand for an amicable settlement, we are pleased to offer as follows:

Cost of Repairs	: S\$1,505.70 (Including 7% GST)
Loss of Use	: S\$480 (S\$120 x 4days – Including Saturday & Sunday)
LTA Search Fee	: S\$7.45
Total (all in)	: S\$1,993.15

Kindly revert on the acceptance.

Yours sincerely,
S.Thanaletchumi
Jack Cars Enterprise Pte Ltd
Motor Claims Dept
Tel: 67488824 Fax: 67488834
Email: thana@jackcars.com.sg



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
FIRST CAPITAL INSURANCE LTD			Ref : CS/FCI18000436/Gtd3q2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 10-04-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHB 6340Z	Veh. Inspected	SLP 650Y	
Policy No.	D-15072701MFSH	Coverage (\$)	0.00	
Claim No.	D18000196MFSH	Excess (\$)	0.00	
Assign From	MAY CHUA	Assign Date	08/01/2018	
2. Vehicle Particulars & Condition				
Make & Model	SUBARU FORESTER	c.c	1998	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	JF1SJGK85FG054020	Colour	BLUE	
Odometer	49157	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/55 R18	BRIDGESTONE	6 mm	
L/H Front Tyre	225/55 R18	BRIDGESTONE	6 mm	
R/H Rear Tyre	225/55 R18	BRIDGESTONE	6 mm	
L/H Rear Tyre	225/55 R18	BRIDGESTONE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	26/12/2017	Inspection Date	11/01/2018	
Survey held at	JACK CARS ENTERPRISE PTE LTD BLK 3007 UBI ROAD 1 #01-450 SINGAPORE 408700			
5a. Remarks				
A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		

**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. SLP 650Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	CUT	1,850.00	660.00
1	FRONT BUMPER LOWER GRILLE	CUT	750.00	324.00
1	FRONT BUMPER FOG LAMP COVER -RIGHT	NOT NECESSARY	285.00	-
1	FRONT SUPPORT BEAM	BENT	175.00	175.00
	LESS 20% DISCOUNT		-612.00	-231.80
			2,448.00	927.20
<u>SPECIAL NETT ITEMS</u>				
15	CLIPS (SN)	NECESSARY	58.00	30.00
1	TOW HOOK COVER (SN)	MISSING	58.00	10.00
1	NUMBER PLATE & NUMBER PLATE COVER (SN)	CUT	60.00	40.00
			176.00	80.00
<u>LABOUR</u>				
	TO PUTTY & SPRAY PAINT OF AFFECTED AREA.		550.00	200.00
	TO REMOVE DAMAGED & NECESSARY PARTS & ATTACHMENTS ,KNOCK ,JACK ,WELD ,RESHAPE AND ALIGN ALL AFFECTED PORTIONS .REINSTALL ALL UNDAMAGED PARTS & NECESSARY NEW PARTS INTO ORIGINAL POSITION .		650.00	200.00
	TO REMOVE & REPLACE BUMPER .	NOT NECESSARY	180.00	-
	ANTI RUST TREATMENT .	NOT NECESSARY	120.00	-
			1,500.00	400.00
GRAND TOTAL			4,124.00	1,407.20
RECOMMENDED COST OF REPAIRS				1,407.20

Report Ref No. CS/FCI18000436/Gtd3q2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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