• .				25.	
Assemi	Umrth:a	1 A NT	- 2.50	uhung!	.KK:
> INS. CASE OWNER		CC T/AXA1800	1 026	C VI 172	DAC
7-11		ASSIGNME	NT	/	81 18100
Surveyor:	MARCOS	DOI: 247011	10	Date / Time :	0.1101118
				Registered in Merime	m: 84 01 18
Pre-assign / CCU		0.0			a service of
Insured Vehicle No	SHF 52	0 8	Claim No:	C04G7	-99 A
Name of Insured	TRANS -CAR	SERVICES VIL	Policy No.	. VPx	121680570
2_9		100	Maria Program	PEM	MIT
Insured Tel No.	0 10000	83/ -1 N	Make / Model	of a Dec	The second second
Excess Sec II :S\$	Ø 2000		Place of Accide	ent : 12 prv	D CLUBS IN THE
Is driver the owner		Nature of Accident :	778 14 14 14 17 17 17 17 17 17 17 17 17 17 17 17 17		VALUE OF THE PARTY
	ne / Age: DIVM SEOW	The state of the s		The second second	IA REPORT: YES/ NO
Driver Tel !	\$0.1	(V/L: YE3 / NO)	Insured Liabilit	y: % F	inal? Yes/No
SUM YAZ	₹S				•
INICRE.	Thirties and the same of the s		INSRS:		INSRS
INSRS: OF M	HSVIS INSRS		WSP:		WSP
Tel: Liability: Charge-	L Tel:	H-H	Tel: Liability:	H_H	Tel: Liability:
RMKS:	Liabilit RMKS	(V-3)	RMKS:		RMKS:
Date/Time		7.5			
ST 1 - 7	SIM YXXX - V	SHE DWO-Y		STAGE	DATE/PIC
10/1/18				Non-Reporting lir (1st)	
NL				Non-Reporting ltr (2nd Non-Reporting ltr (Fine	
10/01/18	HINE BANKORA	" OLD RAMP-AMDRO.	TP.	Notification lir (if upn-	
	OPHIN FAMIL	40 OI 40 MOREN	TP	Call Of:	Idolla-11c (trush)
	CLANUS.	f OIPEN		After call itr to O1: Documentation Check	
	PUNNAGED .	Country		Notification by (if non-	
	THE COD IN B	by buyll		After call ltr to OI:	AMMIC
and the	The second second	544 (III 314 -/ I 14		Authorisation To Act	
20/11/18	- WARDING FOUR	- HOLY MANDELLE HAS	SOM.	Release Voucher: Final Repair Bill:	
	fretalit bons			Cur Rental Invoice:	
10/12/16	- UPLOND WAND	18 14 14 11 11 11 11 11 11 11 11 11		Towing Invoice	
12/12/18	- WAY WALKONA			LTA / GIA :	
		OPPER, PROPERS	of Ich to	Medical Bill:	
photol		Sport to AXA.	15/400.00	Mandate/Reject Instr	
22/01/19	ANA THOUSED	UNHALIDIKTE.		LOD	
19/01/19		MOR BUNIC TO TE.		Payment Breakdown	Form:
PRELIMINARY ADVICE				Post-Repair Photos:	
FINALIZATION	Date/Time:	Confirm with:	<i>K</i> .	Others: Confirm by:	
Repair Cost: 49	55 2,050,00 (7		%		imari Call
FINAL SETTLEMENT	Date/Time: 12/02/19	Confirm with		Email Call	
Final Liability:		/ Assessed) BOLA S/N No.:	27	If NO or B 28, Ass. I	
Repair Cost: (12) (47)	SS Z (1938 . 50)	4-3		collo MANA	- FUNDAD - AD)
Loss of Use (LOU):	ss 260-00s 30) x	2 days) CONTAIN VATE OF T	8.95 + LC	TE COOD III	DY RELL
Loss of Income (LOI):	SS (5 x	days)		Lord	731
LOR only LOU only		OR + LOI [Tick only one]			
GIA/LTA Search Medical:	ss —			1) Claim stams: Non	nal/Reject/Private Settle
Disbursement:	ss —	(e.g. Tow/Independent)		2) Report Format:	
Legal Cost	55 —		A.e.	3) Survey fee:	5350.00
Total:	ss 1,455.50	Global Sum SS: Z. 450 - C	00	the the same	
FINAL PAYMENT	Date/Time:	Confirm with:	SIN HATE IN	Email Call	AG PTE UTD
Payee 1: Payee 2: (Strike if N.A.)	ss 2,460.00	Name 1: TOORSON CINE	Olio oo i-ua	- 1,00	110 010
Payee 3: (Strike if N.A.)	55	Name 3:	-		

ASS REC. BY MOVELS	REF:	AXA/ N
	ASS	IGNMENT /
From	Date	Veh No. SLM 4337 (Yr Regn 3.17
Estimated Cost	Date.	Type: M.Carl M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD FP WS TP RES OD R	RES / EVA / INV / MV	Truck/Trailer or (A/
To Inspect Vehicle No	SLM 43375	Make: NISSAN Qashogi 00 1197
at Workshop m/s	0	Colour Wille Ab Insured / Std / NI / NA
of	Pogesus	Sp. Reading 9 4637 T/Radio: Insured / Std / NI / NA
Insured	SHF 520P	Eng/No
Policy No.	201	CINO: SINFEAJILUI712757
Claims No.		Gen. Cond Good / Fair / Poor / Burnt
Sum Insured	Excess:	Steering: Interder / Jammed / Leaked / Burnt or
(Client's Record)	-765165	Brake: Improder/ Jammed / Leaked / Burnt or
Make of Veh.		Modi: Nil SIRIm / STD A/Rim or
		Tyre Size: F: 215-/60217
(Policy Condition)		R: 700-27
Remark: The veh had comme	enced its N/S O/S	BS / DUN / EXNOVA GY 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/Bal. 6 mm
PR Seen	Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: 1	days Res: Yes or No	DOA 7/1/18 DOI 24/1/18
Lum Sum: 20	% 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24	пре	Des. of Damages : Frt. / Rear / O/S / N/S / U/C / Rooftop or
	Vehicle: IN / OUT	Rea
	Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Inst	ruction	
116	0 4 2,050.00	
-	PED: \$5,065.16 60%	
	,	
		Days Of Repair:
Caté/Time: File Pass to?	: Preli. Report	Days Of Repair: Resurvey No. of Trip: Survey Fee
Date/Time: File Pass to?	: Preli. Report	Days Of Repair: Resurvey No. of Trip: Survey Fee Transponation
Onte/Time: File Pass to?	: Preli. Report	Resurvey No. of Trip: Survey Fee Transportation
Date/Time: File Pass to?	: Preli. Report : Final Report	Resurvey No. of Trip: Survey Fee Transportation:
Date/Time: File Pass to?	: Preli. Report : Final Report	Survey No. of Trip: Survey Fee



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

AXA	INSURANCE PT	ELTD	Ref : CC4/AXA1800	00530/hb3	
	SHENTON WAY #24-01 XA TOWERSINGAPORE 068811		Date: 09-01-2018 Code: AXA2		
1.		Policy Par	ticulars :- THIRD PARTY CLA	AIM.	
	Insured Veh.	SHF 520P	Veh. Inspected	SLM 4337S	
	Policy No.		Coverage (\$)	0.00	
	Claim No.		Excess (\$)	0.00	
	Assign From		Assign Date	09/01/2018	
2.		Vehi	cle Particulars & Condition		
	Make & Model		c.c	0	
	Engine No. HIDDEN		Year of Reg.		
	Chassis No.		Colour		
	Odometer -		Steering		
	Brakes		Modification		
	General				
3.			Conditions 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.		D	escription of Damages		
5.			General Information		
	Accident Date	07/01/2018	Inspection Date		
	Survey held at	PEGASUS ENGINEER	RING & TRADING PTE LTD		
		51 DEFU LANE 10 SINGAPORE 539216			
5a.			Remarks		

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.
- 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.
- 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 aftersaid.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	08/01/2018 17:06
Date Of Accident	07/01/2018 11:50
Exact Location Of Accident	AIRPORT BOULEVARD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLM4337S
Insured/Policyholder	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98235249
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI-1.2 DIG-T CVT ABS 2WD 5DR (A)
Exact Purpose for which vehicle was being used at time of accident	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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 HIRE
Insurance Company	
Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	MTGRAB20170677
Driver	
Name of Driver	WONG KWEE HENG
NRIC No	S6926501D
Date Of Birth	02/08/1969
Occupation	OUTDOOR
Date Of Driving Pass	02/02/1990
Driving Experience	27 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	+65-90288776

5466TIM@GMAIL.COM

Address

503 SEMBAWANG ROAD

#03-23

Postcode

757707

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 - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

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)

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

On 07.01.2018 at about 1150hrs, I was driving my vehicle (A: SLM4337S) along T2 Blvd turning into Airport Blvd. When I noticed the front vehicle slowed down, I followed suit. Suddenly, a vehicle (B: SHF520P) which was travelling behind me on the same lane hit onto my vehicle's rear portion. Vehicle A (SLM4337S): No passenger on board. Vehicle B (SHF520P): No passenger on board.

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

Vehicle Registration Number

SHF520P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

85497995

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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
- 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)
 - (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
- (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
- 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.
- my Fersonal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

SHOW THE PARTY OF THE PARTY OF THE PARTY.

Driver's Signature (if driver is not the policyholder) Date & Time: #2 (1)

Name:

cayoun NRIC/FIN No.:

Reporting Centre Personnel's Signature

Sketch Plan Pg. 2

KETCH PLAN		
	Refer to Scene Photo	
	Keter 18 scere 111	
ESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
	Refer to GIA Haport	
ECLARATION	H-20	
	ticulars are true in every respect.	
	1 10	Λ
	PMM 28 DI 18	
		M.
olicyholder's Signature		eporting Centre Porsphnel's Signature ame: Dujusu
ste & Time:	(ti driver is not the policyholoer)	
CONTROL STATE OF THE STATE OF T	Date at 1876.	G-2879666x -

CARL BUILDINGS OF

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

Direct Settlement

LAIM SU	BFOLDER TRAC	KING							
Case	Notified 09 Jan 2018	Est Submitted	Ad) Assigned 09 Jan 2018 10:23	Adj Rpt	Adj Submitted	the Author	New Assign Cancel Cas		
			Assign				Cancer Cas	ie.	
	Main	Re	ference	Cla	im Details	Docum	ents	Show All	
CLAIM S	UBFOLDER DET	AILS				[Created b	v insurer1		
Insured:		TRANS-CAB S	ERVICES PTE LT	D		* AND THE THE	# Internation		
Main Clai	mant:	GRAB RENTAL	S PTE LTD						
Vehicle R	teg. No.:	SLM4337S		Da	te of Loss:	07/01/2018	11:00 - :59		
Claim Typ	pe:	TP		Po	licy/Cover Note No.	r P1680520 (Third Party On	rty Only)	
Vehicle Reg. No. SHF520P		SHF520P		Po	Policy No. (Claimant):				
					cess:	5\$5,000.00			
Repairer:) 51 DEFU LANE 10,			846	
Account of the latest and the latest	Insurer:				8 [Handled by Cyn				
Adjuster: Driver/Co		LKK Auto Con	sultants Pte Ltd	(HQ) - Tel: 62	56-3561 [Final F	Ipt due 18/01,	/2018]		
(Insured	section in our set I district to the	ONG SEOW PER	VG (60 / Male),	NRIC: 5126317	76F, Tel: +6591562	823			
Adj Asg.	Remarks:	TP: NON-ARC							
ASSOCIA	TED MAIL REC	EIVED				View A	uli Comp	ose Case Mail	
AXA_St	G (09/01/2018):	New TP Assignn	rent - /P168052	0					
ALL ASS	OCIATED TASK	s			View All Search	n Tasks Cr	eate New Task	Complete	
Due Dat No results		Type Task 6	roup Subject	Handler	Assigned By	Completed Or			

09.01.2018 @ 10.30am Alvin veh not in

PEGASUS

ENGINEERING & TRADING PTE LTD

GST / ROC COMPANY NO: 201101753C

Quotation

From:

PEGASUS ENGINEERING & TRADING PTE LTD

C/O 51 DEFU LANE 10 SINGAPORE 539216

Officer in Charge: ALVIN LOW WAI LUN

Tel: Email:

SLM 43375

Customer:

GRAB RENTALS PTE LTD

18 SIN MING LANE #01-08 MIDVIEW CITY SINGAPORE 573960

Attn:

Tel: Fax: C2010

2 4/1/18

Quotation No : QO18/01-1039 Quotation Date : 08/01/2018 Terms : 30 DAYS

Remarks : TP INSURER: AXA, TP INSURED VEHICLE NO: SHF520P, DATE OF ACCIDENT: 07.01.2018

TEM DESCRIPTION QTY UNIT PRICE AMOUNT (SGD) 1 REAR BUMPER 755.50 755.5000 2 REAR BUMPER REINFORCEMENT 674.0000 2 1 674.00 3 REAR BUMPER REINFORCEMENT BRACKET 2 174.8000 X 349.60 133.8000 7 4 REAR BUMPER ABSORBER FOAM 133.80 REAR BUMPER SIDE RETAINER 5 2 35.2000 70.40 2.5000 6 REAR BUMPER CLIPS 10 25.00 REAR BUMPER YELLOW CLIPS nn 15.1000 X 45.30 7 3 20 8 REAR BUMPER TOW COVER 28,1000 28.10 540.9000 X 9 REAR END PANEL 540.90 84.0000 7 10 REAR END PANEL INNER TRIMM 11 84.00 REAR BUMPER REFLECTOR 2 57.9000 X 115.80 11 11 337,2400 -337.2412 LESS 10% (ITEM 1 - 10) 1 550,0000 22,20 N 550,00 13 REAR BUMPER PARKING SENSOR 100.0000 🗙 14 TO RUST-PROOFING OF THE AFFECTED AREAS. 100.00 11 TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMMINGS, 150.0000 150.00 15 GARNISH AND OTHER, TO ENABLE REPAIR. 60.0000 20 TO CHECK ELECTRICAL LIGHTING CONCERNED. 60.00 16 1 120.0000 \$ TO REINSTALL OF REAR BUMPER PARKING SENSOR. 120.00 17 850.0000 300 18 PANEL BEATING, KNOCKING AND STRAIGHTEN THE NECESSARY 850.00 PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. 800.0000 (0) 800.00 PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION. 19 renatoriement 0.00 C/F

16868

Page 1 of 2

ENGINEERING & TRADING PTE LTD

GST / ROC COMPANY NO: 201101753C

Quotation

From:

PEGASUS ENGINEERING & TRADING PTE LTD

C/O 51 DEFU LANE 10 SINGAPORE 539216

Officer in Charge: ALVIN LOW WAI LUN

Tel: Email: Customer:

GRAB RENTALS PTE LTD

18 SIN MING LANE #01-08 MIDVIEW CITY SINGAPORE 573960

Attn : Tel : Fax :

Quotation No: QO18/01-1039

Quotation Date: 08/01/2018

Terms: 30 DAYS

Remarks: TP INSURER: AXA, TP INSURED VEHICLE NO: SHF520P, DATE OF ACCIDENT: 07.01.2018

MET

DESCRIPTION

QTY

UNIT PRICE

AMOUNT (SGD)

B/F

0.00

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey helpmuster spray painting
- To display demaged partist during resurvey
- . Parts prices are subject to confirmation
- Third party survey is un a "Without Prejudice" basis
- No ringar modification(x) is allowed.
- Supplementar, remiss must be resurveyed and as subject to final approval from Insurance Company

Azknowledged by Repairer

Signature:

Dote:

Sub Total GST(7.00%) Total (SGD) 5,115.16 358.06 5,473.22

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

7200G

Vehicle Details

Vehicle No.:

5LM43375

Vehicle to be Exported:

Yes

Intended De-registration

08 Jan 2018

Date:

Vehicle Make:

NISSAN

Vehicle Model:

QASHQAI 1.2 DIG-T CVT

ABS 2WD 5DR

Primary Colour:

White

Manufacturing Year:

2016

Engine No.:

HRA2304357A

Chassis No.:

SJNFEAJ11U1712751

Maximum Power Output:

85.0 kW (113 bhp)

Open Market Value:

\$18,689.00

Original Registration Date:

30 Mar 2017

First Registration Date:

30 Mar 2017

Transfer Count:

0

Actual ARF Paid:

\$13,689.00

tended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

29 Mar 2027

PARF Rebate Amount:

\$10,266.00

Intended COE Rebate Details

COE Expiry Date:

29 Mar 2027

COE Category:

A - Car up to 1600cc &

97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$50,101.00

COE Rebate Amount:

\$40,080.00

Total Rebate Amount:

\$50,346.00

The information contained herein is correct as at 08 Jan 2018

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

7200G

Vehicle Details

Vehicle No.:

SLM43375

Vehicle to be Exported:

No

Intended De-registration

24 Jan 2018

Date:

Vehicle Make:

NISSAN

Vehicle Model:

QASHQAI 1.2 DIG-T CVT ABS

2WD 5DR

Primary Colour:

White

Manufacturing Year:

2016

Engine No.:

HRA2304357A

Chassis No.:

SJNFEAJ11U1712751

Maximum Power Output:

85.0 kW (113 bhp)

Open Market Value:

\$18,689.00

Original Registration Date:

30 Mar 2017

First Registration Date:

30 Mar 2017

Transfer Count:

0

Actual ARF Paid:

\$13,689.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

29 Mar 2027

PARF Rebate Amount:

\$10,266.00

Intended COE Rebate Details

COE Expiry Date:

29 Mar 2027

COE Category:

A - Car up to 1600cc & 97kW

(130bhp)

COE Period(Years):

10

QP Paid:

\$50,101.00

COE Rebate Amount:

\$45,993.00

Total Rebate Amount:

\$56,259.00

The information contained herein is correct as at 24 Jan 2018



ENGINEERING & TRADING PTE LTD

GST / ROC COMPANY NO: 201101753C

Quotation

From:

PEGASUS ENGINEERING & TRADING PTE LTD

C/O 51 DEFU LANE 10 SINGAPORE 539216

Officer in Charge: ALVIN LOW WAI LUN

Tel: Email:

SLM 43375

Customer:

GRAB RENTALS PTE LTD

18 SIN MING LANE #01-08 MIDVIEW CITY SINGAPORE 573960

Attn:

Tel:

Fax:

Quotation No: QO18/01-1039 Quotation Date: 08/01/2018 Terms: 30 DAYS Remarks: TP INSURER: AXA, TP INSURED VEHICLE NO: SHF520P, DATE OF ACCIDENT: 07.01.2018

TEM	DESCRIPTION	QTY	UNI	TPRICE	AMOUN	T (SGD)
1	REAR BUMPER	1	m/se	755.5000		755.50
2	REAR BUMPER REINFORCEMENT	1	15	674.0000	?	674.00
3	REAR BUMPER REINFORCEMENT BRACKET	2	11	174.8000	X	349.60
4	REAR BUMPER ABSORBER FOAM	1		133.8000	?	133.80
5	REAR BUMPER SIDE RETAINER	2	ner	35.2000	/	70.40
6	REAR BUMPER CLIPS	10	ne	2.5000		25.00
7	REAR BUMPER YELLOW CLIPS	3	nn	15,1000	X	45.30
8	REAR BUMPER TOW COVER	1	ae	28.1000	/	28.10
9	REAR END PANEL	1	n	540,9000	X	540.90
10	REAR END PANEL INNER TRIMM	1	11	84.0000	1	84.00
11	REAR BUMPER REFLECTOR	2	11	57.9000	X	115.80
12	LESS 10% (ITEM 1 - 10)	1		-337.2400		-337.24
13	REAR BUMPER PARKING SENSOR	1 50	1 shel	550,0000	2005.	$N_{550.00}$
14	TO RUST-PROOFING OF THE AFFECTED AREAS.	1	11	100.0000	X	100.00
15	TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMMINGS, GARNISH AND OTHER, TO ENABLE REPAIR.	1	11	150.0000	\propto	150.00
16	TO CHECK ELECTRICAL LIGHTING CONCERNED.	1		60.0000	20	60.00
17	TO REINSTALL OF REAR BUMPER PARKING SENSOR.	1		120.0000	50	120.00
18	PANEL BEATING, KNOCKING AND STRAIGHTEN THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME.	1		850.0000	300	850.00
19	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.	1		800.0000	(20)	800.00

C/F 0.00

Page 1 of 2

Print Received Message

This mail is associated with:

*SLM4337S (C0467994) [SHF520P] TP GRAB RENTALS PTE LTD

Jan 7 2018 11:00AM [TRANS-CAB SERVICES PTE LTD]

Pegasus Engineering & Trading Pte Ltd

From

AXA Insurance Pte Ltd (HQ) (AXA_SG), sent on 22/01/2019 14:07 PM.

To

LKK_HQ

Subject

Alert - Adj Mandate Approved (S\$2450.00) - SLM4337S - Claim Handler: Stacey Ng

Approved:2450.00.			



GREAT AMERICAN INSURANCE COMPANY

GST REG. NO.: M90370081T UEN: T15FC0029B 3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER SINGAPORE 039190

TEL: +65 6804 6000 FAX: +65 6235 2616

MOTOR COVER NOTE: MTGRAB20170677

The Insured mentioned in this Covernote, having proposed for insurance in respect of the Motor Vehicle described, is hereby HELD COVERED under the terms of the insurer's usual form of Motor Policy applicable thereto for the period mentioned unless the cover be terminated by the Insurer by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium payable for such insurance will be charged for the time the Company has been on risk.

The Insurer

: GREAT AMERICAN INSURANCE COMPANY

The insured

Grab Rentals Pte. Ltd.

Insured Nric/Passport No/ Roc

201617200G

Policy Coverage

: Comprehensive

Make And Description Of Vehicle

: Nissan Qashqai 1.2

Vehicle Registration No.

: 2017

Year Of Manufacture

: HRA2304357A

Engine No.

SJNFEAJ11U1712751

Chassis No. Engine Capacity/ Tonnage/ Seater

: 1197 cc

Hire Purchase

: HL Bank

Value (S\$)

: Market Value of Insured Vehicle at Time of Loss

Period Of Insurance

: From 30/03/2017 to 29/03/2018

: All Claims Excess - S\$2,000.00

Excess (S\$)

Windscreen Excess - S\$100.00

Great American Authorised Workshop

: Authorised Workshop

IWE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA)

Note: This Cover Note is only valid for 60 days from the date of issuance unless replaced by the Certificate of Insurance issued by the Company.

For and on behalf of Great American Insurance Company

Great American Insurance Company **Authorised Signatory**

Date of Issue

29/03/2017

Intermediary

: Citrine Systems (S) Pte Ltd (Grab Leasing)

MTR/COVERNOTE/V02/16



9A Lok Yang Singapore 628628 c/o 51 Defu Lane 10 Singapore 539216 Tel: 6858 1846 / HP 9628 6508

Fax: 6858 0877

Our R	tef <u>SM084012018</u> Date	918-06-2018
Your	Ref SHF520P	
Claim	s Department - Searchive in Charge A Incurrence Pie Ltd.	WITHOUT PREJUDICE
Dear	Sir/Madam,	
ACC	IDENT INVOLVING SLM4337S / SHF 500P ON	8104-10.70
Refer	to the above accident and please acknowledge receipt of this letter within 1	14 days.
prope	pears that the accident was caused by your insured. Enclosed documents rty damaged claim as our client had authorized us to quantify, to act and s on their behalf: -	
0 Or	ginal survey report/ copies of photographs	
Ø On	ginal Tax-invoice number 11/18/04-1223 O police report / police r	result
6 cer	tificate Of Insurance O Vehicle search result	
Ø Aut	thorization To Act - Gwner/Hirer O Rental Torith.	
*Surv	rey under insurance instruction / Independent surveyor / No survey.	
a)	Cost of repair (inclusive GST)	\$ 2,193.50
b)	Survey fees / Photographs as per request	5
c)	Vehicle Search fees / GIA fees / Police Report fees / Reporting fees	\$
d)	Loss of rental days @ \$ 48.95	\$ 157.90
e)	Loss of earnings /rental fees 2 days @ \$ 100.00	\$ 201.00
f)	Administrative charges to negotiate settlement (Waive if 100% offer made within acknowledge timeframe)	\$ 200.00
g)		\$
	Total	\$ 2,751.40
* Drivi	er's injury and other losses exclude in this claim.	

If you are agreeable to the above, please forward discharge voucher for our client's signature and payment

issued directly to "Pegasus Engineering & Trading Pte Ltd" within 28 days.

Yours faithfully,

Sharon Ow

Email: claims@pegasusengrg.com.sg

Vic (LKKAuto)

From:

Vic (LKKAuto)

Sent:

Wednesday, 10 January, 2018 9:57 AM

To:

claims@transcab.com.sg

Cc:

carrisalee@ava-ins.com; icewong@ava-ins.com; ireneng@ava-ins.com;

foonghon@ava-ins.com; Admin A; Vic (LKKAuto)

Subject:

YOUR REF: P1680520 (SHF 520P) ACCIDENT INVOLVING SHF 520P & SLM 4337S

ALONG T2 BOULEVARD TOWARDS T2 VIP DRIVE ON 07/01/2018



Auto Consultants Pte Ltd

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

10 JANUARY 2018

Transcab Taxi Singapore

Dear Sir/Madam,

OUR REF: CC4/AXA18000530/hb3 YOUR REF: P1680520 (SHF 520P)

ACCIDENT INVOLVING SHF 520P & SLM 4337S ALONG T2 BOULEVARD TOWARDS T2 VIP DRIVE ON 07/01/2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s PEGASUS ENGINEERING & TRADING PTE LTD acting on behalf of the owner of SLM 4337S against your motor insurance policy.

Based on the accident report and accident scenario, we are of the opinion that liability is not to our favour. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

We also wish to advise that there is an excess of <u>\$\$5,000.00</u> attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim.

AXA shall keep you informed of the third party claim settlement and thereafter kindly let AXA have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by AXA for the above subject matter, AXA expressly reserves all their rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- · Coloured photographs of accident scene (if any)
- · Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us
 informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg/vicalpeh@lkkauto.com or deliver it by hand to our Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorized driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or cst@axa.com.sg/vicalpeh@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: <u>vicalpeh@lkkauto.com</u> | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

LKK Save the Earth Print only when necessary

This e-mail contain confidential and privileged material, and are for the sole use of the intended recipient. Use or distribution by an unintended recipient is prohibited, and may be a violation of law. If you believe that you received this e-mail in error, please do not read this e-mail or any attached items. Please delete the e-mail and all attachments, including any copies thereof, and inform the sender that you have deleted the e-mail, all attachments and any copies thereof. Thank you.

AUTHORIZATION TO ACT

TO: PEGASI	US ENGINEERING & TRADIN	NG PTE LTD	
FROM: OW	NER OF VEHICLE NUMBER _	QLM4337S	
ACCIDENT	INVOLVING	P	
ALONG/AT	Amport Boulevard	۵N	810£.10.70
	authorize you to act on our be rising out of the above accide		our claim for all damages during
This letter s	serve as the 'AUTHORITY TO	ACT'.	
	reby authorize all agreed se ING & TRADING PTE LTD.	ettlement payment b	pe made in favour to PEGASUS
Name	: Grab Rentals Pte Ltd		
Co Reg No	: 201617200 <i>G</i>		
Address	: 18 Sin Ming Lane #01-08	Midview City Singapo	ore 573960
Contact	: 6655 0005		
Date	: 14.06.2018		
Signature			

AUTHORIZATION TO ACT

ACCIDENT	INVOLVIN	G SHFBOOR		
ALONG/A	Arport	Boulevars	ON.	8104.10.40
		u to act on my behalf air arising out of the abo		ny claim for loss of rental
This letter	serve as the	'AUTHORITY TO ACT	- .	
		rize all agreed settlem DING PTE LTD.	ent payment be i	made in favour to PEGASU:
Name	: _\\\)o\	ng kwae Heng		
NRIC	:9	169 26501D		
	503	Sunbawang Roa	d #03-23	8'757767
Address				
Address Contact	: _ 90	1288776		
	1	31-03-2018		

Hirer



CLAIM REF

: C0467994

INSURED

: TRANS-CAB SERVICES PTE LTD

DISCHARGE VOUCHER

We/I, GRAB RENTALS PTE LTD, CO. REG. NO.201617200G hereby agree to accept the sum of dollars TWO THOUSAND FOUR HUNDRED FIFTY ONLY (\$\$2,450.00) paid to us/me by AXA INSURANCE PTE LTD as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said AXA INSURANCE PTE LTD or their Insured or the driver of motor vehicle no. SHF 520P as a result of an accident along T2 BOULEVARD TOWARDS T2 VIP DRIVE on 07/01/2018 of which we/I were/was the driver/ owner/ hirer/passenger/rider/pillion/ insurer of motor vehicle no. SLM 4337S.

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said insurer, owner and/or driver of vehicle no. **SHF 520P** in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify AXA INSURANCE PTE LTD against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. <u>SHF 520P.</u>

Dated this	12	day of	2019.
Claimant's Signature		(20 oc 172000) (2)	
NRIC no./ Company Stamp	:	2016/7 1009	-
Occupation/ Business	:	Rental.	_
Address	: 18	Sin Ming Lane HOLOS	Midview (Ty 5(5/3960)
Telephone No.	-	66×0005	
Witness's Name	-	Share on	
Witness's Signature		4	
Witness's NRIC No.	-	5.756TM2H.	



GST / ROC Company No: 201101753C

Third Party Insurer :

AXA

Insured's Veh No:

SHF520P

Date of accident :

07.01.2018

Grab Rentals Pte Ltd 18 Sin Ming Lane

#01-08 Midview City Singapore 573960

Tax Invoice No:

IV18/04-1223 30.04.2018

Invoice Date :

NISSAN QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR

Vehicle Model : Vehicle No :

SLM4337S

Chassis No :

SJNFEAJ11U1712751

	Pages :	1 of
DESCRIPTION	10	AMOUNT
TO LUMP SUM REPAIR AS RECOMMENDED BY SURVEYOR.	\$	2,050.00
Sub Total	\$	2,050.0
GST (7.00%)	S	143.5
Total	S	2,193.5

Cheques should be made payable to PEGASUS ENGINEERING & TRADING PTE LTD

PEGASUS ENGINEERING & TRADING PTE LTD





Authorised Signature (Company Stamp)

If you have enquiries concerning this invoice, please contact Mr. Alvin or Mr. Wee at Tel: (65) 6858 1846 Mailing Address: Pegasus Engineering@Tan Lim Motor Pte Ltd c/o 51 Defu Lane 10 Singapore 539216 E-mail: claims@pegasusengrg.com.sg



Our Ref. GR-ACC-2017-02

01 June 2017

Pagasus Engineering & Trading Pte Ltd No. 51 Defu Lane 10 Singapore 539216 Mailing Address 18 Sin Ming Lane, #01-08 Midview City, Singapore 573960 Co. No. 201617200G

To whom it may concern,

Re: Vehicle Rental Rates for Loss of Rental Claims.

With regards to the above subject matter, we are pleased to inform you our Grab Rental rate for our various vehicles which are as follows:

S/No.	Make & Model	Daily Rental Rates (S\$)
01	Toyota Prius 1,798cc, 90kw, 120bhp, Automatic	\$ 79.95
02	Mazda 3 1.5 (A) Sedan	\$ 66.95
03	Nissan Qashqai 1.2L	\$78.95
04	Honda Vezel 1.5L	\$77.95
05	Honda Vezel 1.5L Hybrid	\$84.95
06	Toyota Vios 1.5L	\$66.95

Please note that the above stated rate is our daily rental rate to our drivers. For your necessary actions on third party accident claims on loss of rental.

Yours faithfully,

Tay Chee Wee Grab Rental Pte Ltd

...CLAIM SUBFOLDER...(Pending for Survey Report) Direct Settlement

LAIM SUB	FOLDER TRA	CKING									
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt		Ad) Sut	partimo	Ins Auth'ed	Sta	tus	
Main	09 Jan 2018		09 Jan 2018 10:23 Edit Adj Rpt	5\$2,05 Edit E	0.00 stimates	5\$2,05 View I			Rep	nding for port ancel Case	Survey
	Main	∏ R	eference		Claim Det	alls	\mathbf{T}	Documen	nts	1	Show All
CLAIM SU	BFOLDER DI	TAILS				10	Created	by insurer]			
Insured:	TRANS-C	AB SERVICES PT	ELTD, Co. Reg. No	5.5 -		-	ALPAGER.				
Main Claimant:			Co. Reg. No.: 201								
Vehicle Reg No.:	SLM4337S				Date of I	Loss: [5		8 11:00 - :59 and 8 Days Fro	m LTA Reg	Date (M	an Yr)]
Claim Type	ype: TP / C0467994				Policy/Co Note No.		1680520	(Third Party On	ly)		
Vehicle Reg No. (Insured):	SHF520P				Policy No (Claimar						
					Excess		\$5,000.00	The second secon			
Repairer: Handling Insurer:			rading Pte Ltd (HQ IQ) - Tel: 6338 7288						146		
Claimant's Insurer:	Great Am	erican Insuranc	e Company (HQ) -	Tel: 6804	6047						
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62:	56-3561	Handled	by MAR	CUS CH	UA] [Final	Rpt due	18/01/	2018]
Driver/Cust dian (Insured):		V PENG (60 / Mair	e), NRIC: S126317	6F, Tel:	+6591562	2823		*			
Adj Asg. Remarks:	TP: NON-A	RC									
ASSOCIAT	ED MAIL RE	CEIVED						- 1	/lew All	Compo	se Case Mai
 AXA_SG 	(12/12/2018)	: Alert - Adj Mai	ndate Approved (Sindate Approved (Sindate Approved (Sindate) - /P1680520	\$2413.50							
ALL ASSO	CIATED TAS	ks⊟				Viev	v All S	Search Tasks	Create Ne	w Task	Complete
Due Date	Priority	Type Task	Group Subject	Hand	iler A	ssigned	Ву	Completed O	n Cr	eated O	Done

Claim Documents

*SLM4337S (C0467994)

[SHF520P]

TP

GRAB RENTALS PTE LTD

Jan 7 2018 11:00AM

[TRANS-CAB SERVICES PTE LTD]

Pegasus Engineering & Trading Pte Ltd

		pload Photos Compose New Letter Upload Video Upload Audio	View	View in Brown	ser v
Let	ters/Corresponder	nces	1 per	page 🔻	~
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	(Draft)	Third Party Express Settlement - Payment Breakdown	0	Edit	
Ass	sessment Reports		1 per	page 🔻	V
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	25/01/18 16:43	Adjuster Immediate Advice	0	Load HTM	
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1	03/05/18 10:57	LKK INSPECTION PHOTOS	0	Load PDF	
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No	Finalized On	AXA Insurance Pte Ltd (HQ)		Thumbnail	Print
1	09/01/18 09:43	EMAIL	0	Load PDF	
2	09/01/18 09:43	ESTIMATE	0	Load PDF	
3	09/01/18 09:43	SHF0520P INS GIA	0	Load PDF	
4	09/01/18 09:43	SLM4337S TP GIA	0	Load PDF	
5	09/01/18 10:15	TP Excess 2C \$5000	0	Load TIF	
6	09/01/18 10:21	Email to Transcab	0	Load TIF	
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1	10/01/18 10:04	EMAIL TO OI	0	Load PDF	
2	25/01/18 17:53	TP ESTIMATE- MARKED	0	Load PDF	
3	10/12/18 17:54	MANDATE IA	0	Load POF	
4	15/02/19 14:22	WORKSHOP INVOICE	0	Load PDF	
5	15/02/19 14:22	AUTHORISATION TO ACT FORM	0	Load PDF	
6	15/02/19 14:22	DISCHARGE VOUCHER	0	Load PDF	
7	15/02/19 14:22	RENTAL RATES	0	Load PDF	
B	15/02/19 14:22	LOD	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)			
			0
			v
Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other parties.			

NOTE: TO BE COMPLETED BY SURVEYOR

LKK Auto Consultants Pte Ltd

THAM		
I P A M		

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

s at \$130.00 per day s
5
(Kindly indicate
(%)
OLA Scenario No:
(%)
LA does not apply.
2,450.0

Please attach all the supporting documents to the form. (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)

Date

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CC4/AXA18000530/UHB3Q2

Date:

15/02/2019

REFERENCE

Handling Insurer: AXA Insurance Pte Ltd

Policy No:

P1680520

Claimant Vehicle No :

SLM4337S

Insured Vehicle No:

SHF520P

Date of Loss:

07/01/2018

Nature of Claim:

TP

Claim No:

C0467994

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

Colour:

SLM4337S

Make & Model:

NISSAN QASHQAI, 1.2 (A) 30/03/2017 (Man. Year: 2016) Engine No:

HRA2304357A

Reg. Date:

White.

2016) Chassis No: Odometer: SJNFEAJ11U1712751 94633 km

Engine Capacity:

1197 cc

Market Value/New Car Price: N/A Sum Insured (S\$): Mar

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

215/60 R17

Rear Tyre Size:

215/60 R17

Front Left Side:

Goodyear 6 mm

Rear Left Side: Rear Right Side: Goodyear 6 mm Goodyear 6 mm

Front Right Side: Goodyear 6 mm
The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,090.16	1,718.12	1,372.04	44.40
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,080.00	870.00	1,210.00	58.17
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,170.16	2,588.12	2,582.04	49.94
Approved Total (Overridden) (S\$)		2,050.00		
(S\$)	5,170.16	2,050.00	3,120.16	60.35
+ GST 7.00/7.00% (S\$)	361.91	143.50	218.41	60.35
Nett Amount (S\$)	5,532.07	2,193.50	3,338.57	60.35
+ Loss of Use (2.0 x S\$1	30.00/day) (S\$)	260.00		

Nett Liability (S\$)

Global Sum Settlement (S\$)

INSPECTION

Date of Assignment:

09/01/2018

Date Inspected:

24/01/2018 Inspected At:

Pegasus Engineering & Trading Pte Ltd

(HQ)

2,453.50

2,450.00

Adjuster Report

Page 2 of 4

51 DEFU LANE 10 Singapore 539216

Estimated Period of Repair:

2.0 days

Adjuster: MARCUS CHUA Manager: VIC ALPEH

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

REPAIR DETAILS

Referen	ce	
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 10 Dec 2018)
Parts:	M1-SUV	NISSAN QASHQAI 1.2 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted,	no print-code for SLM4337S)
Validity:		es are valid only if they contain the print code (above) on all estimate pages, running page the END OF ESTIMATES marker on the last estimate page
Further Info:	Items/values n	ot in reference catalogue are prefixed with an asterisk *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER (CONSISTENT)	Dented / Deformed	755,50 FL	*755.50 FL
2	1		*REAR BUMPER REINFORCEMENT (CONSISTENT)	Dented	674.00 FL	*674.00 FL
3	2		*REAR BUMPER REINFORCEMENT BRACKET (CONSISTENT)	Not Necessary	349.60 FL	•-FL
4	1		*REAR BUMPER ABSORBER FOAM (CONSISTENT)	Torn	133.80 FL	*133.80 FL
5	2		*REAR BUMPER SIDE RETAINER (CONSISTENT)	Necessary	70.40 FL	*70.40 FL
В	10		*REAR BUMPER CLIPS (CONSISTENT)	Necessary	25.00 FL	*25.00 FL
7	3		*REAR BUMPER YELLOW CLIPS (CONSISTENT)	Not Necessary	45.30 FL	*-FL
8	1		*REAR BUMPER TOW COVER (CONSISTENT)	Deformed	28.10 FL	*28.10 FL
9	1		*REAR END PANEL (CONSISTENT)	Repair	540.90 FL	*-FL
10	1		*REAR END PANEL INNER TRIM (CONSISTENT)	Not Necessary	84.00 FL	*-FL
11	2		*REAR BUMPER REFLECTOR (CONSISTENT)	Not Necessary	115.80 FL	*-FL
12	1		'SET REAR BUMPER PARKING SENSOR (CONSISTENT)	Shorted	550.00 FS	*200:00 FS
F=Fra	inchise	part. B=5	SpcNett, L=ListItemDisc.		- CONTRACTOR	I Commission of
				Sub Total (S\$)		1,886.80
			- List Item Discount on L Items	10.00/10.00% (S\$)	282.24	168.68
				Total Parts (S\$)	3,090,16	1,718.12

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			
1	TO RUST-PROOFING OF THE AFFECTED AREAS	New	100.00	0.00
2	TO REMOVE AND REFIT INTERIOR FITTINGS ,TRIMMINGS ,GARNISH AND OTHER ,TO ENABLE REPAIR	New	150.00	0.00
3	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	60.00	20.00
4	TO REINSTALL OF REAR BUMPER PARKING SENSOR	New	120.00	50.00
5	PANEL BEATING ,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS ,ADJUST AND REALIGN THE SAME.	New	850.00	300.00
6	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	800.00	500.00
	Gross Labour	r Cost (S\$)	2,080.00	870.00

< END OF ESTIMATES >

Report was unsubmitted during this print-out.