

ASS. REC. BY:

REF: CS3/EG1800218/Gd322

Special Instruction:

range &amp; days

claim

Surveyor:

ASSIGNMENT (Office)

From (Person):

Yee Pei Li

of

EGI

Date/Time:

2/2/18 @ 10.22am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GY 9708T

Insured:

XD1484A

at Workshop m/s

Ace Autolution

Tel:

6844 1184

of

13 Kaki Bkt Rd 4 #03-29

Policy No:

Claim No:

DSM CV 1800239

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

30/01/2018

CA / REV / REP. / REV 24 HRS

'wp'

05/02/2018 @ Morning

H.O.D. Endorsement:

Date/Time:

2.57pm @ 2/2/18

Person Contacted:

Angel

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

GY 9708T-X

XD1484A-CS/EGT17019557/Uqbn2

D.O.A: 7/10/2017

Dismantle: 9/2/2018.

After repair: 16/3/2018.

PRS xml.

EGI

S/2/18

GY9708T  
B

(-2020)  
12 Oct 2005

① WS TO RES CORRES EVALUATION

GY9708T  
Ace Autolution

13 kaki Bkt Rd 4 #03-29

ISUZU NHR 69E 3059  
Silver

341989

JAA NHR 69E 57100292

Gen Cond ☒ Gen Jammed Locked Burnt

Steering ☒ Gen Jammed Locked Burnt

Brake ☒ Gen Jammed Locked Burnt

Mod ☒ 6 Rpm STD 4 Rpm

195 R15 (Good ride)  
165 R13 (Maxtrek)

BS DUN/EXNOVA GR RS L24 M/C HTS PR SLV

TOYO YOKO

Sign	Rep
RBa	S
LBa	S
COA	05-02-18
Survey recd	w/s
Des of Damages	①

5pm

The U.C. Chassis Frame Body Structure affected due to

Date Time Action Instruction

\* Repair Estimate : S\$ 5,000 — \$6,800

\* 6 days

*Signature*  
18/6/2018

RECEIVED 19 JUN 2018

Des Time Ref Report

☐  
☐

Prel. Report

Final Report

Days Of Repair

6

Resurvey No. of This

2

Des Time Ref Report

Add Fee

☐  
☐  
☐  
☐  
☐

Des Time Ref

Des Time Ref

Des Time Ref

Des Time Ref

Des Time Ref Report

PR2

Des Time Ref Report

50  
50  
50

150

**Catherine Chong (LKK Auto)**

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**From:** Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>  
**Sent:** Friday, 2 February, 2018 10:22 AM  
**To:** admin-d@lkkauto.com  
**Subject:** OI : XD1484A / TP : GY9708T/LKK / DOA : 30/01/2018  
**Attachments:** XD1484A - SAS.pdf; GY9708T - SAS.pdf; RE: PRI FOR GY 9708T (19.4 KB)

Dear Catherine,

We have rejected to their PRS list, please assist to conduct this survey **CHIA S ARUL LLC**,

ADDRESS : **ACE AUTOLUTION PTE LTD**  
13 KAKI BUKIT ROAD 4  
#03-29 BARTLEY BIZ CENTRE  
SINGAPORE 417807

PERSON TO CONTACT : MS ANGEL @ 6844 1184

ERGO OFFICER-IN-CHARGE : STEVE LIM

***Note: To survey on without prejudice basis. Try to obtain estimate and advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.***

Please update the survey status via [Survey.Report@ergo.com.sg](mailto:Survey.Report@ergo.com.sg).

Attached are insured's & TP's SAS (note: reports not to be released to any Third Party). No estimates was provided.

**Kindly acknowledge receipt of this email.**

Thank you.

**Yee Pei Li**

Claims Assistant (Motor)  
ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
Singapore 038985  
Tel.: 65 6829 9199 DID: 65 6829 9194  
Website: [www.ergo.com.sg](http://www.ergo.com.sg)

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

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Business

Owner ID: 6579B

### Vehicle Details

Vehicle No.: GY9708T

Vehicle to be Exported: No

Intended De-registration Date: 06 Feb 2018

Vehicle Make: ISUZU

Vehicle Model: NHR69E

Primary Colour: White

Manufacturing Year: 2005

Engine No.: 4JG2275294

Chassis No.: JAANHR69E57100292

Maximum Power Output: -

Open Market Value: \$18,879.00

Original Registration Date: 12 Oct 2005

First Registration Date: 12 Oct 2005

Transfer Count: 3

Actual ARF Paid: \$944.00

### Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

### Intended COE Rebate Details

COE Expiry Date: 11 Oct 2020

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 5

PQP Paid: \$23,992.00

COE Rebate Amount: \$12,860.00

**Total Rebate Amount: \$12,860.00**

### Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 06 Feb 2018

OK

**► Isuzu NHR69E Used Vehicle List (3 vehicles)**

Car Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Company	Availability
<b>Isuzu NHR69E (COE till 04/2019) (Diesel)</b>	<b>\$22,800</b>	<b>\$18,580 /yr</b>	<b>11-Apr-2001</b>	<b>3,059 cc</b>	<b>-</b>	<b>Thiam Heng Motor</b>	<b>Available</b>
In House Loan Available, Can Use For ETS. Good Condition. Office No. - 64695691 Anthony Toh - 96849282   Johnny Yeo - 98558158   Mr Soh - 96399510   Mr Goh - 96918468							
<b>Isuzu NHR69E (COE till 06/2021) (Diesel)</b>	<b>\$24,838</b>	<b>\$7,370 /yr</b>	<b>21-Jun-2006</b>	<b>3,059 cc</b>	<b>-</b>	<b>Hoe Beng Auto Trading</b>	<b>Available</b>
Most Reliable Lorry For Commercial Use! Good Condition! 100% In House Loan Available, 100% Worth Buy. Don't Miss It. Call Now To Enquire For More Details, Act Fast Or Else Sure Gone. Office No. - 67450138 / 65523003 Lim - 91290138   Agnes - 93680138   Eric - 83538778							
<b>Isuzu NHR69E (COE till 09/2021) (Diesel)</b>	<b>\$24,800</b>	<b>\$6,800 /yr</b>	<b>11-Oct-2006</b>	<b>3,059 cc</b>	<b>-</b>	<b>ABWIN (1994) Pte Ltd</b>	<b>Available</b>
Very Good Condition For Your Business Use. No Gimmick! See For Yourself! 100% Loan And High Trade In Available! Call Our Friendly Sale Consultant Now For More Information! Office No. - - Siang - 84344451   Chong Wei - 90909307							

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## 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 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	01/02/2018 16:53
Date Of Accident	30/01/2018 19:30
Exact Location Of Accident	PIE TOWARDS JURONG INTO BKE EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY9708T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	APS CONTRACTOR (SINGAPORE)
Co Reg No	5316579B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-85870018
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	ISUZU
Model	NHR69E-3.1 D (M)
Exact Purpose for which vehicle was being used at time of accident	
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCPHQ17-001759
Cover Note Number	

### Driver

Name of Driver	ADAIKKALAM KAMALHASAN
Passport No/FIN	G8245218X
Date Of Birth	22/05/1987
Occupation	OUTDOOR
Date Of Driving Pass	12/12/2014
Driving Experience	3 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-85119548
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 21 BUKIT BATOK CRESCENT (WCEGA TOWER) #09-79  
 Postcode 658065  
 Was driver an employee of the Insured's Company YES  
 If No, Relationship of the Driver with the Insured  
 Vehicle Registration Number of Driver's Own Vehicle -  
 Vehicle -  
 Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR  
 Weather Conditions RAINING  
 Road Surface WET

#### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles involved in the accident 2  
 Was any body injured in the Accident? YES  
 Was any injured conveyed to hospital by ambulance? YES  
 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) 4  
 Passenger 1 NAME: : NO NAME  
 GENDER: : MALE  
 Passenger 2 NAME: : NO NAME  
 GENDER: : MALE  
 Passenger 3 NAME: : NO NAME  
 GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name CHOA CHU KANG NPC  
 Police Station Address ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 ,  
 COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: - FAX NO:  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

REFER TO ATTACHED REPORT.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XD1484A  
 Vehicle Make/Model/Colour  
 Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

GY9708T

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode



## Sketch Plan

### 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 companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [Form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature  
Date & Time:

A. Kamalhasan

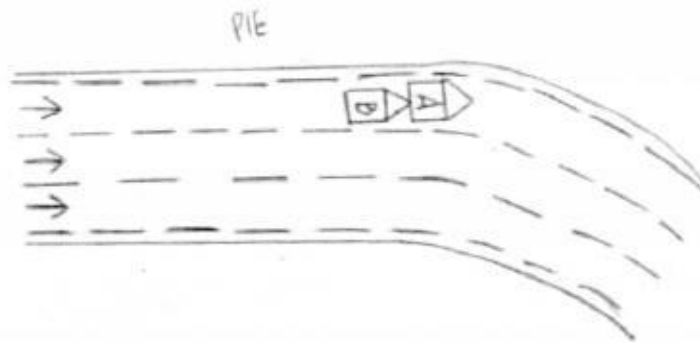
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

# Sketch Plan #2

SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30 Jan 2018 at around 7:30 p.m., I was travelling along PIE towards Jurong Interchange. Then, front of my vehicle was slow down and my vehicle also was slow down. Suddenly, the vehicle B (YD 1484 A) collided onto my vehicle rear.

### DECLARATION

(We declare the foregoing particulars are true in every respect.)

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)

Reporting Centre Personnel's Signature  
Name:



**SINGAPORE  
POLICE FORCE**



T/20180130/2185

1 of 3

Report No. T/20180130/2185

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No. 1800-7659999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/01/2018 22:34	Vide Report No.: F/20180130/0304	Station Diary No.: 132
<b>Informant's Particulars</b>		
Name of Informant: ADAIKKALAM KAMALHASAN		Address: C/O 21 BUKIT BATOK CRESCENT WCEGA TOWER SINGAPORE 658065
ID Type / ID No.: FIN NO / G8245218X	Contact No.: Home/Office:	Mobile: 85870018
Nationality: INDIAN	Email:	
Sex: Male	Age: 30	Date of Birth: 22/05/1987
Race: Indian	Type of Informant: Driver	Institution / School Name:
Occupation: CONSTRUCTION WORKER-CUM- DRIVER	Driving Licence Information: Class: 3	Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/01/2018 19:30	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 PAN ISLAND EXPRESSWAY BUKIT TIMAH EXPRESSWAY				
Weather: Clear	Road Surface: Wet	Road Speed Limit:		
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

## Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
GY9708T	Lorry				Seriously Damaged	3
XD1484A	Tipper Truck				Slightly Damaged	0

## Details of Person Involved

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



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999



T/20180130/2185

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Report No. T/20180130/2185

CONTINUATION OF REPORT

Driver Name	ADAIKKALAM KAMALHASAN	ID No.	G8245218X
Related Vehicle	GY9708T (Lorry)	Contact No.	85870018
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	Slight
Driver Name	THANGAMUTHU PALANIKUMAR	ID No.	G8146833N
Related Vehicle	XD1484A (Tipper Truck)	Contact No.	86195759
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 30/1/2018 at about 1930hrs, I was driving along PIE towards BKE direction in my lorry (GY9708T) with 3 passengers in my lorry when I approached the bend, the car in front of me slowed down and as such, I did the same when all of a sudden, the tipper truck (XD1484A) that was behind collided onto the rear of my lorry. Due to that, my 2 of my passengers were injured and I then called for the ambulance. The ambulance and traffic police arrived at the scene and my 2 injured passengers were then conveyed to NTFGH. The driver of the tipper truck is unhurt from the incident. My one of the 2 passengers sustained back injury and could not stand up whereas the other sustained cuts on his forearm. I sustained aches on my chest area whereas the passenger beside me sustained pains on his head and back area. My lorry had sustained severe damage in the interior of the lorry driver area and had severe dents on the rear portion of the lorry. My lorry cannot be started as well. The tipper truck sustained minor damages to the front portion of the truck. I am now lodging this accident report for insurance claims.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No. 1800-7659999



T/20180130/2185

3 of 3

Report No. T/20180130/2185

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 The Report:

J/

Sgt 2 YAO MING YANG, CASIMIR

Signature Of Informant:

A. Kamulhasan

Signature Of Interpreter:

Not applicable

Date/Time:

30/01/2018 22:34

Officer In Charge Of Case:

TP / GIT

Sgt 2 LIM HONG LEE

Contact No. 65476438

Signature

Classification Of Case:

Authentication Stamp

NP168

**Singapore Police Force**




# 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

PRE-REPAIR INSPECTION REPORT			
ERGO INSURANCE PTE LTD		Ref: CS3/EGI18002118/Gd3e2	
5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER		Date: 26-06-2018	
FIVE SINGAPORE 038985		Code: EGI	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	XD 1484A	Veh. Inspected	GY 9708T
Policy No.		Coverage (\$)	0.00
Claim No.	DSMCV1800239	Excess (\$)	0.00
Assign From	YEE PEI LI	Assign Date	02/02/2018
2. Vehicle Particulars & Condition			
Make & Model	ISUZU NHR69E	c.c	3059
Engine No.	HIDDEN	Year of Reg.	2005
Chassis No.	JAANHR69E57100292	Colour	SILVER
Odometer	341989 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195 R15	GOODRIDE	5 mm
L/H Front Tyre	195 R15	GOODRIDE	5 mm
R/H Rear Tyre	165 R13	MAXTREK	5 mm
L/H Rear Tyre	165 R13	MAXTREK	5 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5. General Information			
Accident Date	30/01/2018	Inspect Date / Time	05/02/2018 ( 05:00 PM )
Survey held at	ACE AUTOLUTION PTE LTD 13 KAKI BUKIT ROAD 4 #03-29 BARTLEY BIZ CENTRE SINGAPORE 417807		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$5,000-\$6,800			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		6 Working Days	

Report Ref No. CS3/EGI18002118/Gd3e2

## Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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