Men'nen From (Person	Lionel Tan of M	SIG	Date/Time 46/18@ 3.08p
Estimated Co	ost	Bill to:	
To Inspect V at Workshop	ehicle No: SKZ 3087M  COMPLE VMS  176. Sin Ming Drive # 03		Insured: XD 5281S Tel: 6455 8012
Policy No:_ Sum insured	MS D/VCC/18-000002	*Claim No: _ Excess:	
Make of Veh (Client's Recor CA / REV Date/Time [			D.O.A. 08 02 2018  18 @ 2pm UWNET Waiting  H.O.D. Endorrenners.  Vehicle IN (OUT)
Date/Time	Action/Instruction ( ) Estimate  SKZ 3087 M - ×  XD 5281 S - ×		
	Sont preli thre merimon		
- 7.	Ul Ling 81550L emal		

Ista Time Pile Pass to*	: Preli. Report	Days	Of Repair	3		
tapust /	Final Report	Resur	vey No of Tr	to L	3.14 19 [	
Case Time Fig. Report of					Transmitter.	
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.umb \$um L& 1 15	50		41.11			
		_				

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

Case	Notified	Est Supmitted	Adj Assigned	Ady Rot.	Adj Submitted	Ins Authred	Status
Main	09 Feb 2018		09 Feb 2018 15:08 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
CLAIM SUBFOLDER DETA	ILS		[Created by i	nsurer]
Insured:	SG SAGAWA AMEROID P	TE LTD, Co. Reg. No.: 1991004	123D	
Main Claimant:	Wak Lam Lee, ID: S177			
Vehicle Reg. No.:	SKZ3087M	Date of Loss:	08/02/2018 17	:00 - :59
Claim Type:	TP	Policy/Cover Note No	MSD/VCC/18-0 Coverage: 01/0	00002 1/2018 - 31/12/2018
Vehicle Reg. No. (Insured):	XD5281S	Policy No. (Claimant	):	
		Excess:		
Repairer:	Tel: 6455 0012	(HQ) 176 Sin Ming Drive #03-1	4 Sin Ming Autocare Comple	ex, 575721 Sin Ming
Handling Insurer:	MSIG Insurance (Singap 6643 1307]	ore) Pte. Ltd. (HQ) - Tel: +65	5827 7888 [Handled by I	ionel Tan Tian Pei
Handling Insurer: Adjuster:	6643 1307]	ore) Pte. Ltd. (HQ) - Tel: +65		
TIM POST SALVA IN THE SALVA IN	6643 1307]	e Ltd (HQ) - Tel: 6256-3561		
Adjuster:	6643 1307]  LKK Auto Consultants Pt  Please assign to Mr Kennet	e Ltd (HQ) - Tel: 6256-3561	[Imm.Advice due 10/	02/2018]
Adjuster: Adj Asg. Remarks: ASSOCIATED MAIL RECEI	6643 1307]  LKK Auto Consultants Pt Please assign to Mr Kennet	e Ltd (HQ) - Tel: 6256-3561		
Adjuster: Adj Asg. Remarks:	6643 1307]  LKK Auto Consultants Pt Please assign to Mr Kennet	e Ltd (HQ) - Tel: 6256-3561	[Imm.Advice due 10/	02/2018]
Adjuster: Adj Asg. Remarks: ASSOCIATED MAIL RECEI	6643 1307]  LKK Auto Consultants Pt Please assign to Mr Kennet  VED  e,	e Ltd (HQ) - Tel: 6256-3561	[Imm.Advice due 10/	02/2018] Compose Case Mai
Adjuster: Adj Asg. Remarks:  ASSOCIATED MAIL RECEI  There are no mail for this case	6643 1307    LKK Auto Consultants Pt   Please assign to Mr Kennet   VED   e,	e Ltd (HQ) - Tel: 6256-3561 h Kong, Thank you. View A	View All  Search Tasks Create	02/2018] Compose Case Mai



# 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 Internati	onale Des Experts En Autor	nobile
MS	SIG INSURANCE (	SINGAPORE) PTE LTD	Ref : CS/MSG18002	2767/Krd3
16 #2	RAFFLES QUAY 4-01 HONG LEON	G BLDG SINGAPORE 048581	Date: 12-02-2018 Code: MSG	
1.		Policy Particulars	:- THIRD PARTY CLA	IM
	Insured Veh.	XD 5281S	Veh. Inspected	SKZ 3087M
	Policy No.	MSD/VCC/18-000002	Coverage (\$)	0.00
	Claim No.	MSC/V/18-000228	Excess (\$)	0.00
	Assign From	MERIMEN (LIONEL TAN)	Assign Date	12/02/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.			
	Odometer	- Steering		
	Brakes Modification			
	General			
3.		Conditi	ons 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
	1	Description	on of Damages	
	Vindage of the last	General	Information	
	Accident Date	08/02/2018	Inspection Date	
	Survey held at	COMPLETE VMS PTE LTD	mapection Date	
		BLK 176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLE	X SINGAPORE 575721	
a.			marks	
	A)THE INSPECTIO	N WAS CONDUCTED ON A"WITH	HOUT PREJUDICE" BASIS HAVE NOT AUTHORISE	

# 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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Attn: Lionel Tan Tian Pei

Date: 09 Apr 2018

:S\$

# **Preliminary Advice**

Insured Vehicle No: XD5281S

TP Vehicle No

: SKZ3087M

Accident Date

: 08/02/2018

Assignment Date

: 09/02/2018

Make

: NISSAN TEANA

Date of Inspection: 13/02/2018

Est. Duration of Repair : 3.00

Inspection At

: COMPLETE VMS PTE LTD (HQ)

176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLEX

SINGAPORE 575721

# Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear o/s portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	4,988.08
Revised Amount	:S\$	1,884.07
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,884.07

Lump Sum Repair

### **Total Loss Consideration**

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

### Remarks

- The vehicle is economical/not economical for repair.
- ( X ) The above survey was conducted on a 'without prejudice' basis.

#### SINGAPORE ACCIDENT STATEMENT

NTUC - WSILT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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.

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.
- 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.

aforesaid.	at the day consent to the attributing on the report at the current and to copies or the report sering made available.
	ACCIDENT STATEMENT
Date Of Report	09/02/2018 11:37
Date Of Accident	08/02/2018 17:50
Exact Location Of Accident	JUNCTION OF TUAS AVE 11 & TUAS CRESCENT T-JUNCTION
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKZ3087M
Insured/Policyholder	
Name Of Registered Owner	WAK LAM LEE
NRIC No	S1773055Z
Email Address	JOHNNYWAK@FRP-PRODUCTS.COM
Mobile Phone No	(LOCAL) +65-96692152

Alternative	Phone	No
Vehicle Pa	rticula	rs

Manufacturer	NISSAN
Model	TEANA 250

Exact Purpose for which	vehicle	was	being	used at	
time of accident					

PRIVATE USE

OTHERS-96692152

Are you claiming	under your own	insurance policy
for repair to your	vehicle?	The second of th

for repair to your vehicle?

NO

If No, Please state action to be taken Vehicle Category

THIRD PARTY PRIVATE CAR

## Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5097161099

Cover Note Number

#### Driver

 Name of Driver
 WAK LAM LEE

 NRIC No
 \$1773055Z

 Date Of Birth
 02/05/1966

 Occupation
 OUTDOOR

 Date Of Driving Pass
 16/01/1988

Driving Experience 30 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96692152

Fax Number

Contact Number OTHERS-96692152

EMail Address JOHNNYWAK@FRP-PRODUCTS.COM

Address

BLK 429 CHOA CHU KANG AVE 4

#02-403

Postcode

680429

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

\*

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

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?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: LOH SOW LENG

GENDER:

: FEMALE

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

REFER ATTACHED

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

XD5281S

Vehicle Make/Model/Colour

PRIME MOVER

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

ZHOU CHANGLING

NRIC/Passport Number

G8309612N

Contact Number

96950068 (WILLY)

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 17

#### 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.
- 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.
- 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.
- The report will be forwarded by the insurers of the GIA flecords 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.
- 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 :
  - 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 faw 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:
  - 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 olders.

Policyholder's Signature
Date & Time: 9/2/2018

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

Name: ALLARI)

e Centre Personnel's Signature

SKETCH P	EAN	
IT	mpart	) _A
	Tour State	
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		- Tivas Crescent
-	-7	
	Funknam	A TUNE NO. 11
	tuntnam (valuelle)	
111	I I I I I I I I I I I I I I I I I I I	
EZCKIBE	CIRCUMSTANCES OF THE ACCIDENT	19
	I Stopped behind a unknown	van while waiting for
	traffic light, the trailor turn	for Out from This Ave !
	on my right side and but or	nto my vehicle right reat com
	on my right sick and but as Couling damage, no one has her	of and we exchange
	par romans.	
	I spoken to the climins man	ager about this accident.
		-25
CLARATI	ON	1
e declare	the foregoing particulars are true in every respect.	_ ///
244	0-	
cyfolder v	Signature Oriver's Signature	
percentage of	e f f n	Reporting Contre Personnel's Signature



COMPLETE VMS FTE LTD. The Premier One-Stop Vehicle Accident Claims Centre 176 Sin Ming Drive, #03-14, Sin Ming Autocare Complex, Singapore 575721 (Tel) 6455 0012 (Fax) 6554 0012 (Web) www.completevms.comsg

> Email: darren@completevms.com.sg ( lily@completevms.com.sg ( lihui@completevms.com.sq (

WAK LAM LEE BLK 429 CHOA CHU KANG AVE 4 #02-403

SINGAPORE 680429

Attention : THE OWNER

Contact: 96692152

Not Nother Vehicle Num: SKZ3087M.

Make/Model: NISSAN TE.

Chassis/Eng#: JN1BBUJ32

Accident Date: 13/02/2018

Claim No:

Reference:

Policy No:

3day

Unit

Date: 13/02/2018

Estimate: ES006264

Make/Model: NISSAN TEANA 2.5 CVT-2008 Chassis/Eng#: JN1BBUJ32Z0001196/VQ25406993A

Quantity Particular Unit Price Amount S\$ LIST ITEMS n 271.00 x REAR BUMPER INNER SHIELD R/H - 1 List TotalS\$ 271.00 30.00% Discount S\$ : 81.30 189.70 NETT ITEMS : 102.40 X REAR BUMPER BRACKET 51.20 Clipiy 2 3 4 2 REAR BUMPER SIDE RETAINER 68.80 137.60 4 6 REAR BUMPER CLIP 6.00 36.00 1 REAR BUMPER CHROME R/H 353.50 4 5 1 TAIL LAMP R/H 459.50 X M 389.20 K TAIL LAMP PANEL R/H REAR FENDER AIR DUCT R/H 186.00 x Nett Total S\$ 1.664.20 10.00% Discount S\$ : 166.42 1,497.78 SPECIAL NETT ITEMS: REAR BUMPER 880.60 % 2 280.00 X REVERSE SENSOR 1,160.60 Special Nett Total S\$: LABOUR SPRAY PAINT DAMAGED AREA AFFECTED 880.00

CONTINUE / ...

LKK Auto Consultants James notify

- · To reminely belongator many conting
- To display stamped particle calling tempty
- Partir priority and account to confirmation.
- . This party survey is on a "Water Projection" basis
- No Dept / malifeston (V) is all cast.
- Supplementary learns) must be recovered and is subject to four approved from recurrence Company

Addressinged by Repairer

Sturature



COMPLETE VMS FTE LTD. The Premier One-Stop Vehicle Accident Claims Centre 176 Sin Ming Drive, #03-14, Sin Ming Autocare Complex, Singapore 575721 (Tel) 6455 0012 [Fax) 6554 0012 [Web) www.completevms.com.sg

Email: darren@completevms.com.sg ( )
lily@completevms.com.sg ( )
lihui@completevms.com.sg ( )

WAK LAM LEE BLK 429 CHOA CHU KANG AVE 4 #02-403 SINGAPORE 680429

Attention : THE OWNER Contact : 96692152 Estimate: ES006264

Date : 13/02/2018 Vehicle Num : SKZ3087M

Make/Model: NISSAN TEANA 2.5 CVT-2008

Chassis/Eng#: JN1BBUJ32Z0001196/VQ25406993A

Accident Date: 13/02/2018

Claim No. : Reference : Policy No. :

S/N Quantity

Particular

Unit Price

Amount S\$

CHECK WIRING AND LIGHTING RUST PROOFING TREATMENT CUT OFF REAR TAILLAMP PANEL, KNOCK AND STRAIGHT REAR END PANEL, REAR R/H FENDER AND CHANGE ALL PARTS

Labour Total S\$ :

22 60.00 X

300/ 1,100.00

2,140.00

SingDollars Four Thousand Nine Hundred Eighty-Eight & Cents Eight Only

Total S\$

4,988.08

COMPLETE VMS PTE LTD

This is only an estimate bases on our preliminary inspection and does not cover additional parts and labour time which may be required after the work has begun

Merimen e-Claims

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

LAIM SUBF	OLDER TRA	CKING								
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj	Submitted	Ins Auth'ed	Status		
Main	09 Feb 2018		09 Feb 2018 15:08 Edit Adj Rpt	S\$1,550.0 Edit Estim	to a second	1,550.00 New Hpt		Report	Pending for Survey Report Cancel Case	
	fain	) R	eference	Ctai	m Details		Document	is ]	Show All	
CLAIM SUE	FOLDER DE	TAILS				[Created	by insurer]			
Insured:	SG SAGA	WA AMEROID PT	ELTD, Co. Reg. N	a.: 19910042	BD					
Main Claimant:	Wak Lam	Lee, ID: 51773	1055Z							
Vehicle Reg. No.:	SKZ3087M			Di	ate of Loss		08/02/2018 18:00 - :59 [108 Months and 29 Days From LTA Reg Date (Man Yr)]			
Claim Type:	TP / MSC/V/18-000228				licy/Cover ate No.:	MSD/VCC/18-000002 (Comprehensive) Coverage: 01/01/2018 - 31/12/2018				
Vehicle Reg. No. (Insured):	XD5281S			10.00	licy No. laimant):					
					cess:					
Repairer:	COMPLET	E VMS PTE LTD (	(HQ) 176 Sin Ming D	Drive #03-14 S	in Ming Au	tocare Compl	ex, 575721 Sin N	fing - Tel: 6455	0012	
Handling Insurer:	MSIG Ins	urance (Singapo	re) Pte. Ltd. (HQ)	- Tel: +65 68	27 7888	[Handled by	Lionel Tan Tian	Pel - 6643 130	7]	
Adjuster:	LKK Auto	<b>Consultants Pte</b>	Ltd (HQ) - Tel: 62	56-3561 [H	andled by I	KENNETH KO	NG] [Final	Rpt due 11/0:	3/2018]	
Adj Asg. Remarks:	Please ass	gn to Mr Kenneth	Kong, Thank you.							
ASSOCIATI	ED MAIL RE	CEIVED					V	ew All Compo	se Case Mail	
There are no	mail for this	case.								
ALL ASSOC	IATED TAS	KS⊟				View All   S	earch Tasks   0	Create New Task	Complete	
Due Date	Priority	Type Task	Group Subject	Mandley	_	1.4				
No results.	Priority	Type Task	uroup subject	t Handler	Assign	ned By	Completed On	Created 0	n Done	

### Claim Documents

\*SKZ3087M (MSC/V/18-000228)

[XD52815]

TP

Wak Lam Lee
Feb 8 2018 6:00PM

[SG SAGAWA AMEROID PTE LTD]

COMPLETE VMS PTE LTD

U	sload Documents Up	pload Photos   Compose New Letter	View	View in Brow	ser 🗸
Ass	essment Reports		1 per p	page 🔻	V
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	09/04/18 10:16	Adjuster Immediate Advice	0	Load HTM	
Pho	otos/Images		3 per s	age 💟	V
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	12/04/18 12:47	General View	0	Load JPG	V
2	12/04/18 12:47	General View	0	Load JPG	V
3	12/04/18 12:47	General View	0	Load JPG	Z
4	12/04/18 12:47	General View	0	Load 3PG	Z
5	12/04/18 12:47	General View	0	Load JPG	V
6	12/04/18 12:47	General View	0	Load JPG	2
7	12/04/18 12:47	General View	0	Load JPG	V
8	12/04/18 12:47	General View	0	Load JPG	<b>S</b>
9	12/04/18 12:47	General View	0	Load JPG	V
10	12/04/18 12:47	General View	0	Load JPG	V
11	12/04/18 12:48	Reinspection Photo	0	Load JPG	V
12	12/04/18 12:48	Reinspection Photo	0	Load JPG	V

# **Documents Checklist**

DOCUMENTS CHECKLIST	Reset   Save   Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
	^
	<u> </u>
Show Remarks To:  Handling Insurer  Note: Remarks are private unless you show it to other parties.	

# 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:

CS/MSG18002767/RD3Q2

Date:

16/04/2018

REFERENCE

Handling Insurer:

Ltd.

MSIG Insurance (Singapore) Pte.

Policy No:

MSD/VCC/18-000002

Claimant Vehicle No:

SKZ3087M

Insured Vehicle No:

XD5281S

Date of Loss:

08/02/2018

Nature of Claim:

TP

Claim No:

MSC/V/18-000228

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SKZ3087M

Make & Model:

NISSAN TEANA, 2.5 CVT ABS D/AB HID 2WD 4DR

Engine No:

VQ25406993A

Reg. Date:

10/01/2009 (Man. Year: 2008)

Chassis No:

JN1BBUJ32Z0001196

Colour:

Metallic Maroon

Odometer:

150843 km

Engine Capacity: Market Value/New Car Price: N/A

2496 cc

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES

Front Tyre Size:

215/55 R17

Rear Tyre Size:

215/55 R17

Front Left Side:

Nexen 9 mm

Rear Left Side:

No

Nexen 9 mm

Front Right Side:

Nexen 9 mm

Rear Right Side:

Nexen 9 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,760.02	1,205.01	1,555.01	56.34
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,140.00	755.00	1,385.00	64.72
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	4,900.02	1,960.01	2,940.01	60.00
Approved Total (Overridden) (S\$)		1,550.00		
(S\$)	4,900.02	1,550.00	3,350.02	68.37
+ GST 7.00/7.00% (S\$)	343.00	108.50	234.50	68.37
Nett Amount (S\$)	5,243.02	1,658.50	3,584.52	68.37

INSPECTION

Date of Assignment:

09/02/2018

Date Inspected:

13/02/2018 Inspected At:

COMPLETE VMS PTE LTD (HQ) 176 Sin Ming Drive #03-14 Sin Ming

Autocare Complex Singapore 575721

Estimated Period of Repair: 3.0 days

Adjuster: KENNETH KONG Manager: Janice Lee Si Hua

Page 2 of 4

NOTE: This report represents our findings at the time and piace 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.

Adjuster Report

Adjuster Report Page 3 of 4

## REPAIR DETAILS

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 16 Apr 2018)

Parts: 143 NISSAN TEANA 2.5 CVT ABS D/AB HID 2WD 4DR (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: (Unsubmitted, no print-code for SKZ3087M)

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
1	1		*REAR BUMPER INNER SHIELD R/H	Serviceable	271,00 FL	*-FL
2	2		*REAR BUMPER BRACKET	Repair	102.40 FN	*-FN
3	1		*REAR BUMPER SIDE RETAINER	O/S Distorted	137.60 FN	*68.80 FN
4	6		*REAR BUMPER CLIP	Necessary	36.00 FN	*36.00 FN
5	1		*REAR BUMPER CHROME R/H	Cracked	353.50 FN	*353.50 FN
6	1		*TAIL LAMP R/H	Serviceable	459.50 FN	*-FN
7	1		*TAIL LAMP PANEL R/H	Repair	389.20 FN	*-FN
8	1		*REAR FENDER AIR DUCT R/H	Serviceable	186.00 FN	*-FN
9	1		*REAR BUMPER	Buckled	880.60 FN	*880.60 FN
10	1		*REVERSE SENSOR	Serviceable	280.00 FS	*-FS
F=Fra	nchise	part. S=SpcN	ett. L=ListItemDisc. N=NettItemDisc.	-		
				Sub Total (S\$)	3,095.80	1,338.90
			<ul> <li>List Item Discount on L Ite</li> </ul>	ems 30.00/30.00% (S\$)	81.30	0.00
			- Nett Item Discount on N Ite	ems 10.00/10.00% (S\$)_	254.48	133.89
				Total Parts (S\$)	2,760.02	1,205.01

Report was unsubmitted during this print-out.

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# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

# Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items			
1	SPRAY PAINT DAMAGED AREA AFFECTED	New	880.00	440.00
2	CHECK WIRING AND LIGHTING	New	60.00	15.00
3	RUST PROOFING TREATMENT	New	100.00	0.00
4	CUT OFF REAR TAILLAMP PANEL ,KNOCK AND STRAIGHT REAR END PANEL,REAR R/H FENDERAND CHANGE ALL PARTS	New	1,100.00	300.00
	Gross Labou	ır Cost (S\$)	2,140.00	755.00

< END OF ESTIMATES >