

23/03/2001

ASS. REC. BY:

REF: CS/MSG18003138/A9d3nt

Special Instruction:

Survivor
Mennen

ASSIGNMENT (Office)

From (Person):

Fievel Foo

of

MSIG

Date/Time: 15/2/18 @ 9:50am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

XD5063E

Insured:

G251694

at Workshop m/s

Chew Motor

Tel:

67479241

of

Blk 1 Kaki BK Ave 6 #01-41 Autobay

Policy No:

A29046601MKC

Claim No:

548552

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

03/02/2018

CA / REV / REP. / REV 24 HRS

wp

H.O.D. Endorsement:

Date/Time:

67479241

Person Contacted:

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓) Estimate wksp closed for CNY.

XD5063E - CC3/EQT15016324/Hng3q2

D.O.A.: 25/9/15

G251694 - CC6/CTI16022312/Ay63n2

D.O.A.: 03/07/17

16/2/18 @ 3:20pm Informed Fievel Foo, we are pending estimate from repairer.

06/6/18 @ 2:36pm revised to travel 500 HK minimum.

US \$6000, 5 days (Feb \$1350, 60%)

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 5 days Res: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: XD5063E Yr Regn: 2011, octType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover

Truck / Trailer or

Make: Mit Fuso C.C. 12882Colour: white A/C: Insured / Std / NI / NASp. Reading: 502561 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: FV51TJA00778Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 10.00 R20R: 10.00 R20

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

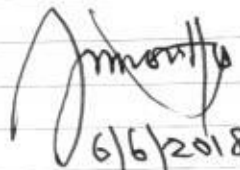
TOYO / YOKO or Mirage

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 05/02/18Survey held at Chew MotorDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

TP MSLG.

6/6/2018

RECEIVED 07 JUN 2018

Date/Time, File Pass to?

1) 07/6/2018

Date/Time, File Return to?

2) _____

☐ : Preli. Report☐ : Final ReportDays Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

) \$ + RS \$

) Photos:

) Others:

Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$Report Format: MER-TPLump Sum / I.B.I: (\$) 6000

TOTAL

300

10

310



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				
MSG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG18003138/qd3		
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 19-02-2018		
		Code : MSG		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GZ 5169U	Veh. Inspected	XD 5063E	
Policy No.	A29046601MKC	Coverage (\$)	0.00	
Claim No.	548552	Excess (\$)	0.00	
Assign From	MERIMEN (FIEVEL FOO)	Assign Date	19/02/2018	
2. Vehicle 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. Description of Damages				
5. General Information				
Accident Date	03/02/2018	Inspection Date		
Survey held at	CHEW MOTOR WORKSHOP BLK 1 KAKI BUKIT AVE 6 #01-41 AUTOBAY @ KAKI BUKIT SINGAPORE 417883			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

Note: This document has not been finalised.

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: Fievel Foo Wen Yao

Date: 06 Jun 2018

Preliminary Advice

Insured Vehicle No	: GZ5169U	Accident Date	: 03/02/2018
TP Vehicle No	: XD5063E	Assignment Date	: 15/02/2018
Make	: MITSUBISHI FV51JJD4RDEA	Est. Duration of Repair	: 5.00
Date of Inspection	: 05/02/2018		
Inspection At	: CHEW MOTOR PTE LTD (HQ) BLOCK 1 KAKI BUKIT AVE 6, #01-43 SINGAPORE 417883		

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	19,500.00
Revised Amount	:S\$	7,560.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	7,560.00

Lump Sum Repair	:S\$	6,000.00
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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.

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Feb 2018		15 Feb 2018 09:50 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	I.C.E CONSTRUCTION P/L , Co. Reg. No.: 201428757G		
Main Claimant:	CHEW HOCK SENG CONSTRUCTION PTE LTD , Co. Reg. No.: 199805776K		
Vehicle Reg. No.:	XD5063E	Date of Loss:	03/02/2018 06:00 - :59
Claim Type:	TP / 548552	Policy/Cover Note No.:	A29046601MKC (TP, Fire & Theft) Coverage: 15/11/2017 - 14/11/2018
Vehicle Reg. No. (Insured):	GZ5169U	Policy No. (Claimant):	
		Excess:	
Repairer:	Chew Motor Pte Ltd (HQ) BLOCK 1 KAKI BUKIT AVE 6, #01-43, 417883 Kaki Bukit - Tel: 67479241		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Fievel Foo Wen Yao - 6643 1316]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 16/02/2018]		
Driver/Custodian (Insured):	HE DAOMING () , NRIC: G7532656X, Tel: +6592383612		

ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Eileen Ang

From: Fievel Foo
Sent: Thursday, 15 February, 2018 9:37 AM
To: Eileen Ang
Subject: RE: XD5063E CLAIMING AGAINST GZ5169U DOA 03.02.18 claim ref no. 548552

Dear Eileen

Create TP and appoint LKK, Workshop under Chew motor Pte Ltd.

Thanks & regards

Fievel Foo Wenyao
Executive, Claim Services (Motor)
Direct line +65 6643 1316 | Direct fax +65 6225 7402 | Fievel_foo@sg.msig-asia.com



MSIG Insurance (Singapore) Pte. Ltd. 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | Tel +65 6220 9644 | Fax +65 6225 6371 | Co. Reg. No. 200412212G | <http://www.msig.com.sg/>

A member of **MS&AD** INSURANCE GROUP

MS&AD Insurance Group | 2011 General Insurance Company of the Year | Asia Insurance Industry Awards

From: Admin nht [<mailto:admin@nhtmotor.com>]
Sent: 13 February 2018 11:57
To: Claims <claims@sg.msig-asia.com>
Cc: assignments <assignments@lkkauto.com>; Chloe <chloe@nhtmotor.com>; Reena <reena@nhtmotor.com>
Subject: XD5063E CLAIMING AGAINST GZ5169U DOA 03.02.18

Hi Motor Claim Dept

We are appointed LKK for the PRI survey.

Please take note this claim is under Chew Motor Pte Ltd.

Thanks & Regards

Sukyi

Chew Motor Pte Ltd

1 Kaki Bukit Avenue 6, #01-43 Block C @ Autobay, Singapore 417883
T : 6747 9241 | F : 6741 7276



CONFIDENTIALITY NOTICE

This e-mail (including any attachments) may contain information that is privileged or confidential. The sending of this e-mail to any person other than the intended recipient is not a waiver of the privilege or confidentiality that attaches to it. If you are not the intended recipient, please notify the sender immediately, delete the email and do not copy, distribute or disclose its contents.

Shiau Chan (LKKAuto)

From: Do-Not-Reply <do-not-reply@merimen.com>
Sent: Monday, 26 February 2018 3:20 PM
To: do-not-reply@merimen.com
Cc: SUR
Subject: VEHICLE XD 5063E (YOUR REF: 548552)

This mail is associated with :

***XD5063E (548552)**

[GZ5169U]

TP

CHEW HOCK SENG CONSTRUCTION PTE LTD

Feb 3 2018 6:00AM

[I.C.E CONSTRUCTION P/L]

Chew Motor Pte Ltd

Dear Fievel,

Please be informed that we have inspected the vehicle XD 5063E on 05/02/2018.

We are pending for estimate from repairer.

Thanks & Regards,

Shiau Chan (Ms)
LKK Auto Consultants Pte Ltd
Tel: 6256 3561
Fax: 6256 4315

[This mail is sent from a mailer account - do not reply to this email address]

Sent by : SHIAU CHAN (LKK Auto Consultants Pte Ltd)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 5776K

Vehicle Details

Vehicle No.: XD5063E

Vehicle to be Exported: Yes

Intended De-registration Date: 03 Feb 2018

Vehicle Make: MITSUBISHI

Vehicle Model: FV51JJD4RDEA

Primary Colour: White

Manufacturing Year: 2011

Engine No.: 6M70447365

Chassis No.: FV51JJA00778

Maximum Power Output: -

Open Market Value: \$105,571.00

Original Registration Date: 03 Oct 2011

First Registration Date: 03 Oct 2011

Transfer Count: 0

Actual ARF Paid: \$5,279.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date:	02 Oct 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$30,089.00
COE Rebate Amount:	\$11,023.00
Total Rebate Amount:	\$11,023.00

The information contained herein is correct as at 03 Feb 2018

OK

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	05/02/2018 10:09
Date Of Accident	03/02/2018 06:30
Exact Location Of Accident	YISHUN AVE 2 TOWARDS YISHUN AVE 7.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD5063E
Insured/Policyholder	
Name Of Registered Owner	CHEW HOCK SENG CONSTRUCTION PTE LTD
Co Reg No	199805776K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63923788

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P1815454
Cover Note Number	

Driver

Name of Driver	SELLAIAH SARAVANAN
Passport No/FIN	034236852
Date Of Birth	31/07/1987
Occupation	INDOOR
Date Of Driving Pass	17/09/2014
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82589848
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	55 SERANGOOON NTH AVE 4 #08-08
Postcode	555859
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	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

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

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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

MY VEHICLE WAS STATIONARY DUE TO TRAFFIC LIGHT WAS RED. I WAS ON THE LEFT MOST LANE OUT OF THREE LANES. SUDDENLY, I FELT AN IMPACT VEHICLE B HAD HIT ONTO THE REAR PORTION OF MY VEHICLE AND CAUSED DAMAGES.

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	GZ5169U
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	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 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.

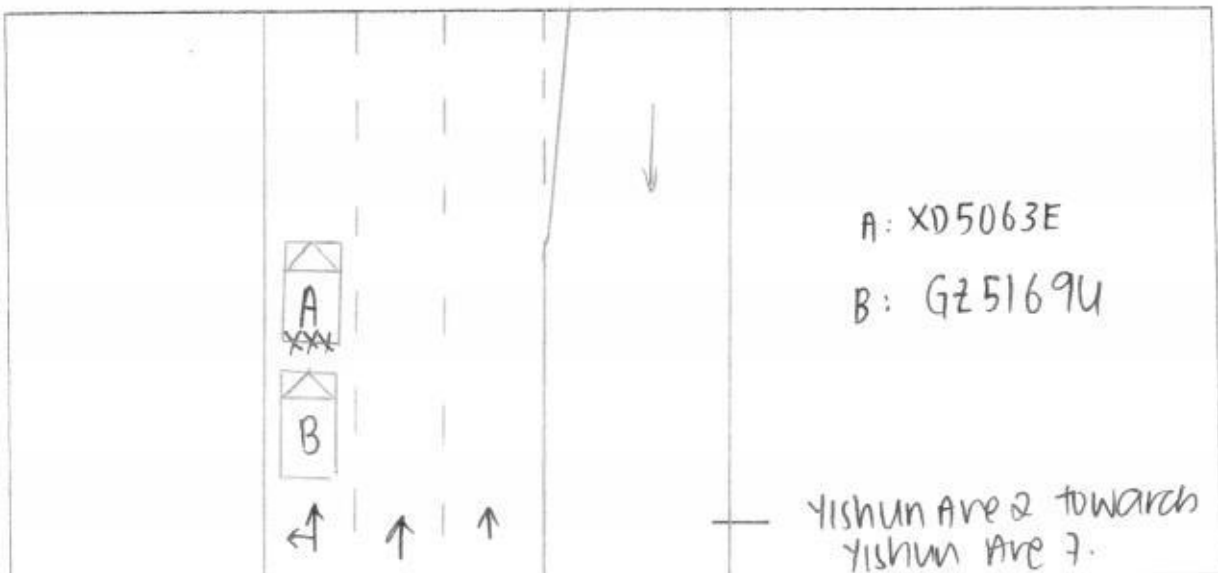


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

my vehicle was stationary due to traffic light was red.
I was on the left most lane out of three lanes.

Suddenly, I felt an impact. vehicle "B" had
hit onto the rear portion of my vehicle and
caused damages.

DECLARATION

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



Policyholder's Signature
Date & Time:

S. Saravanan

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

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



CHEW MOTOR PTE. LTD.

1 Kaki Bukit Avenue 6, Blk C #01-41 Autobay@Kaki Bukit Singapore 417883

Tel: 6509 5545

Fax: 6509 5567

Website: www.chewmotor.com

Registration No.: 201718369R

CHEW HOCK SENG CONSTRUCTION PTE LTD

06/02/2018

Blk 1 Kaki Bukit Ave 6

01-43

Singapore 417883

TP MSLG

Xiao Chen

Accident date: 03/02/2018

Estimated repair cost for vehicle no: XD5063E MITSUBISHI FV51JJD4RDEA

CHASSIS: FV51JJA00778

12.8 M '11

S/N	QTY	ITEMS	U/PRICE	AMOUNT
1	1	Rear Tailgate <i>dented</i>		\$10,000.00 <i>5500</i>
2	1	Rear Tailgate Sticker <i>New</i>		\$800.00 <i>250</i>
3	1	Rear Tailgate 60km/H Sticker <i>New</i>		\$30.00 <i>10</i>
4	2	Rear Tailgate Lower Hinge <i>Not New</i>	\$300.00	\$600.00 <i>X</i>
5	2	Rear Tailgate Lower Lock <i>Best</i>	\$380.00	\$760.00 <i>300</i>
6	2	Rear Tailgate Lower Lock Bracket <i>Best</i>	\$380.00	\$760.00 <i>300</i>
7	1	Rear Tailgate Lower Member <i>Repair</i>		\$2,500.00 <i>X</i>
8	2	Rear Tailgate Lower Lock Bar <i>2HP</i>	\$400.00	\$800.00 <i>X</i>
9	1	Rear Tailgate Lower Lock Bar Motor <i>1HP</i>		\$850.00 <i>X</i>

6360

Subtotal:- \$17,100.00

Labour charges

Panel beating

1200

\$1,400.00 *600*

Spray painting

\$1,000.00 *600*

Subtotal:- \$2,400.00

Total:- \$19,500.00

LKK Auto Consultants hereby 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
- Any item(s) must be resurveyed and final approval from Insurance Company

Accepted by Repairer

Signature:

Date:

total 7560

2/5: 6K

03 days

6K

05 days

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/MSG18003138/AQD3N2

Date: 07/06/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	A29046601MKC
Claimant Vehicle No :	XD5063E	Insured Vehicle No :	GZ5169U
Date of Loss:	03/02/2018	Nature of Claim:	TP
		Claim No:	548552

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	XD5063E	Engine No:	6M70447365
Make & Model:	MITSUBISHI FV51JJD4RDEA, 12.9 D (M)	Chassis No:	FV51JJA00778
Reg. Date:	03/10/2011 (Man. Year: 2011)	Odometer:	502561 km
Colour:	White		
Engine Capacity:	12882 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	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:	10.00 R20	Rear Tyre Size:	10.00 R20
Front Left Side:	Mirage 6 mm	Rear Left Side:	Mirage 6 mm
Front Right Side:	Mirage 6 mm	Rear Right Side:	Mirage 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	17,100.00	6,360.00	10,740.00	62.81
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,400.00	1,200.00	1,200.00	50.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	19,500.00	7,560.00	11,940.00	61.23
Approved Total (Overridden) (\$\$)		6,000.00		
Nett Amount (\$\$)	19,500.00	6,000.00	13,500.00	69.23

INSPECTION

Date of Assignment:	15/02/2018	
Date Inspected:	05/02/2018	Inspected At:
		Chew Motor Pte Ltd (HQ)
		BLOCK 1 KAKI BUKIT AVE 6, #01-43
		Singapore 417883
Estimated Period of Repair:	5.0 days	

Adjuster: ADRIAN LING

Manager: SHIAU CHAN

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

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 07 Jun 2018)	
Parts:	N/A	mitsubishi FV51JJD4RDEA 12.9 D (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for XD5063E)	
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 TAILGATE	Dented	10,000.00 F	*5,500.00 F
2	1		*REAR TAILGATE STICKER	Necessary	800.00 F	*250.00 F
3	1		*REAR TAILGATE 60KM/H STICKER	Necessary	30.00 F	*10.00 F
4	2		*REAR TAILGATE LOWER HINGE	Not Necessary	600.00 F	*- F
5	2		*REAR TAILGATE LOWER LOCK	Bent	760.00 F	*300.00 F
6	2		*REAR TAILGATE LOWER LOCK BRACKET	Bent	760.00 F	*300.00 F
7	1		*REAR TAILGATE LOWER MEMBER	Repair	2,500.00 F	*- F
8	2		*REAR TAILGATE LOWER LOCK BAR	Not Necessary	800.00 F	*- F
9	1		*REAR TAILGATE LOWER LOCK BAR MOTOR	Not Necessary	850.00 F	*- F
				Total Parts (S\$)	17,100.00	6,360.00

F=Franchise part.

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
Labour Items				
1	PANEL BEATING	New	1,400.00	600.00
2	SPRAY PAINTING	New	1,000.00	600.00
Gross Labour Cost (S\$)			2,400.00	1,200.00

Report was unsubmitted during this print-out.

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