

ASS. REC. BY:

REF: CS/FCL18003885/RHbz

Special Instruction:

Surveyor: Ramul

ASSIGNMENT (Office)

From (Person): "MS Eileen Lee" of FCL Date/Time: 7/7/2018 3:44pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: FX 9001R Insured: SH 7378Y

at Workshop m/s: SE 98 Motor Tel: 6452 4898

of 4001 Amk Ind Park #01-21

Policy No: Claim No: D18001660MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 25/7/2018
(Client's Record)

CA / REV / REP. / REV 24 HRS 'Wp'

H.O.D. Endorsement:

Date/Time: 28/7/2018 11:14am Person Contacted: Rose Vehicle: ~~IN~~ OUT

Date/Time	Action/Instruction (✓) Estimate
	FX 9001R - x
	SH 7378Y - CC4 INSA 17000517 / H1WB3G2 DCA: 08/01/2017
07/7/18	2:34pm informed Eileen Lee, we are pending estimate from repairer
	lump sum \$1600 (Red: 2051.50, 57%)

REF: FA

ASSIGNMENT

From: (P23) Date: 28022018

Estimated Cost:

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

To inspect Vehicle No: FX 9001R

at Workshop no: SG 98 Motor

or Blk 4001 Amk Ind Park 1 #01-21

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.



Bal. or Market value:

IDAC Accident Report: Consistent? : Yes or No

GIA / RR Seen: Consistent? : Yes or No

Est Repairs: days Res: Yes or No

Lump Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS 'wp'

Date: Person Contacted:

Vehicle IN / OUT

Van No: FX 9001R V/Reg: -3 2004

Type: M/Car / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda CO: 125

Colour: Red A/C Insured / Std / NI / NA

Sp. Resting: No Available T. Radio: Insured / Std / NI / NA

Eng No:

C/N:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In Order / Jammed / Leaked / Burnt or

Brake: In Order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 70/90-17 m/c

R: 80/90-17 m/c

BS / DUN / EXNOVA / GY / FS / LZA / MIC / OHTSU / PIR / SUM /

TOYO / YOKO or

Front:

Rear:

R/Bal: 3 mm R/Bal: 4 mm

L/Bal: mm L/Bal: mm

D.O.A: D.O.I: 28/2/2018

Survey held at: 1A Above

Des. of Damages: Frt / Rear / N/S / U/C / Rooftop or

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

28/2/2018 Mileage Not Available - Display Screen Damaged

Accident Report / Estimate - will be sent to HQ

RECEIVED 06 JUL 2018

Case Time: Pre Pass:

☐ Preli. Report☒ Final Report

Days Of Repair: 3

Resurvey No. of Trip:

Survey Fee:

Transport:

Fuel:

Tolls:

Other:

Total:

Grand Total:

Add Fee: ☐ Site Insp \$☐ Interview \$☐ Test \$☐ Other \$

Report Format:

Lump Sum / L.B.:

TP 1500f

130

50

33

213



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18003885/R1tb

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 28-02-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SH 7378Y	Veh. Inspected	FX 9001R
Policy No.		Coverage (\$)	0.00
Claim No.	D18001660MFSH	Excess (\$)	0.00
Assign From	CWS (EILEEN LEE)	Assign Date	27/02/2018

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	25/02/2018	Inspection Date	28/02/2018
Survey held at	SG 98 MOTOR PTE LTD BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21 SINGAPORE 569622		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Friday, 2 March 2018 2:34 PM
To: 'Claim Workflow System'; assignments
Cc: EILEENLEE@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18001660MFSH/1

Dear Eileen,

Please be informed that we have inspected the motorbike FX 9001R.

We are pending for estimate from repairer.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)
Sent: Wednesday, 28 February 2018 11:13 AM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: EILEENLEE@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18001660MFSH/1

Dear Sir / Madam,

Thank you for the assignment.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Claim Workflow System [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]
Sent: Tuesday, 27 February, 2018 3:04 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; EILEENLEE@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18001660MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Best Regards,

Admin Team

Claim Workflow System

Motor Claims Department

MOTOR SURVEY ASSIGNMENT

Date	26-02-2018	Our Ref No. D18001660MFSH
Accident Date	25-02-2018	Claim Type. Third Party
Insured Vehicle	SH7378Y	Third Party Vehicle. FX9001R
Survey Location	BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21	
Contact Person.	LEENA	
Contact No.	64524898/ 0	Fax No. 64526898
Survey Type	WITHOUT PREJUDICE: LIABILITY UNCLEAR: <i>Rosa vehin</i> <i>28/02/18 @ 11:14am</i>	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT



Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	SG 98 MOTOR PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	EILEEN LEE	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Job Sheet (/ClaimWS/Surveyor/JobSheet/235382)  PRI Documents  Close **X**

PRI Header Details

Claim No	D18001660MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & SG
Workshop Name	SG 98 MOTOR PTE LTD (Contact Person : LEENA)	Survey Location & Contact Details	BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #1 Mobile: 0 , Phone: 64524898 , Fax: 6452689 EmailId: SGMOTOR2000@YAHOO.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: LIABILITY UNCLEAR:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SH7378Y	TP Vehicle No	FX9001
PRI Recieved Date	26-02-2018 11:00:04 PM	Surveyor Appointed Date	27-02-2018 03:03:22 PM	Surveyor Accept Date	28-02-

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	28-02-2018	Upload Survey Report *:	<input type="text"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

<input type="button" value="Upload Multiple Documents"/>	
File Name	Action

Surveyor Job Remarks

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	38271
Vehicle Details	
Vehicle No.:	FX9001R
Vehicle to be Exported:	No
Intended De-registration Date:	06 Jul 2018
Vehicle Make:	HONDA
Vehicle Model:	ANF125
Primary Colour:	Red
Manufacturing Year:	2003
Engine No.:	JC33E5020841
Chassis No.:	MLHJC33A435020841
Maximum Power Output:	-
Open Market Value:	\$1,901.00
Original Registration Date:	27 Mar 2004
First Registration Date:	27 Mar 2004
Transfer Count:	4
Actual ARF Paid:	\$286.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	26 Mar 2024
COE Category:	D - Motorcycle
COE Period(Years):	10
PQP Paid:	\$2,474.00
COE Rebate Amount:	\$1,415.00
Total Rebate Amount:	\$1,415.00

The information contained herein is correct as at 06 Jul 2018

OK

6337 3700

MSR11602/458 / STA INSPECTION PTE LTD - Sin Ming
 ENTRY DATE & TIME: 26/02/2018 16:47
 SUBMITTED BY: Wang Lip Yong

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 willful 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. 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 26/02/2018 16:47
 Date Of Accident 25/02/2018 06:30
 Exact Location Of Accident BOON LAY PLACE
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number FX9001R
 Insured/Policyholder
 Name Of Registered Owner CHINNAIYAN VEERACHAMY
 NRIC No S74638271
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-90500275
 Alternative Phone No OTHERS-90500275
 Vehicle Particulars
 Manufacturer HONDA
 Model WAVE 125
 Exact Purpose for which vehicle was being used at time of accident PRIVATE USE
 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 MOTORCYCLE
 Insurance Company
 Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD
 Type Of Coverage THIRD PARTY
 Fleet Policy NO
 Policy Number 5049549783-06
 Cover Note Number
 Driver
 Name of Driver CHINNAKKANNU PRAKASH
 NRIC No G7333244W
 Date Of Birth 02/12/1981
 Occupation INDOOR
 Date Of Driving Pass 04/04/2007
 Driving Experience 10 YEARS AND 10 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-90500275
 Fax Number
 Contact Number OTHERS-90500275
 Email Address NOEMAIL

Address	BLK 540 JURONG WEST AVENUE 1 #02-1100
Postcode	640540
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH7378Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	KOH KWEE SENG
NRIC/Passport Number	
Contact Number	81445005
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

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

SKETCH PLAN

BANK SHIP

BANK-PTD

POLICE STATION

H/2 B-8/10-1

Main Entry Place

SH-33784

CURB SIDE

FX 400/R

BANKING COMMUNITY CENTER

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report #: 7/20/19 0226/2029.

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Officer's Signature

Marvec®

NIBC/FIN No.:



SINGAPORE POLICE FORCE



T/20180226/2028

1 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20180226/2028

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/02/2018 10:50		Vide Report No.: J/20180225/0103		Station Diary No.: 48	
Informant's Particulars					
Name of Informant: CHINNAKKANNU PRAKASH			Address: APT BLK 540 JURONG WEST AVENUE 1 #02-1100 SINGAPORE 640540		
ID Type / ID No.: FIN NO / G7333244W			Contact No.: Home/Office:		Mobile: 90500275
Nationality: INDIAN			Email:		
Sex: Male	Age: 36	Date of Birth: 02/12/1981	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: LOGISTIC SUPERVISOR			Driving Licence Information: Class: 2B,3,4,5		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/02/2018 06:30	Type of Location: Straight Road
Location: Along Road 1 BOON LAY PLACE				
Along Boon Lay Place.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
FX9001R	Motorcycle	HONDA	ANF125	Red	Slightly Damaged	0
SH7378Y	Car	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR	Blue	Slightly Damaged	0



Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2889999

Report No. T/20180225/2028

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHINNAKKANNU PRAKASH	ID No.	G7333244W
Related Vehicle	FX9001R (Motorcycle)	Contact No.	90500275
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	25/02/2018	Date Discharge	26/02/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	Koh Kwee Seng	ID No.	S2135948C
Related Vehicle	SH7378Y (Car)	Contact No.	81445005
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 25/02/2018 at about 0630hrs, I was riding my motorbike V1)FB9001R along Boon Lay Place on the extreme right lane at 25-30KM/H.

Out of a sudden, I lost control and fell onto the road and realized that a Comfort Delgro Taxi had collided onto my vehicle V1's rear. I then help myself and the said driver of V2 came down.

At about 15 minutes later, Ambulance and Traffic Police was at scene to assist and paramedics assist to put bandages on my hands and legs as I suffered abrasions as a result of the fall. I then went off after exchanging particulars with the said driver of V2 and was given J/20180225/0103 and asked to lodge a accident report.

I later then went to Ng Teng Fong general hospital and got myself checked and was given 03 days of medical certificate from 26/02/2018 - 28/02/2018. My motorcycle V1 could not be started as a result of the collision and the vehicle V2 suffered slight scratches to its front right side.



SINGAPORE
POLICE FORCE



T/20180228/2028

3 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20180228/2028

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 GOH WEI JIE

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

TP / GIT /
Sr Staff Sgt RAZIZ BIN TAHAR
Contact No.: 65476200

SN 126

Authentication Stamp

NP168

Singapore Police Force

Signature Of Informant:

Date/Time:
26/02/2018 10:50

Classification Of Case:

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 589622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

Date: 2 March 2018

To : LKK

By Fax: 6256-4315

Attn : Rasul

Tel : 90010068

VEHICLE NO : FX 9001R

Honda Wave ANF125

ACCIDENT DATE: 25 February 2018

<u>Description</u>	<u>Qty</u>	<u>Quotation \$</u>
1 Head Lamp	1	165.00 CRA ✓
2 Head Lamp Cover	1	135.00 CRA ✓
3 Mirror	1 set	150.00 SCA ✓
4 Brake Lever	1	75.00 SCA ✓
5 Front Mudguard	1	165.00 CRA ✓
6 Fork Tube	1 set	480.00 Repair ✓
7 Fork Bracket	1	135.00 X } SCA
8 Meter Cover	1	150.00 X } SCA
9 Handle Bar	1	135.00 PA ✓
10 Handle Grip	2 left 4	190.00 SCA ✓
11 Rear RH Signal	1	85.00 PA ✓
12 Front Rim	1 set	350.00 Repair (L) - 150 SCA ✓
13 Front Side Panel LH	1	150.00 SCA ✓
14 Gear Shaft	1	125.00 X SCA ✓
15 Gear Pedal	1	95.00 PA ✓
16 Footrest	1	95.00 X SCA ✓
17 Footrest Rubber	1	55.00 X ✓
Sub-Total		2,735.00 1345
Less 10%		273.50 10%
Sub-Total		2,461.50 1210.50

checked Rasul
4/3/18

1210
10%
1089

Agree: Mr. Rasal amount due
 Deceplane, pls proceed 3 day
 Thank you
 No

VEHICLE NO : FX 9001R

Honda Wave ANF125

Nett items

- 1 Front number plate
- 2 Seat
- 3 Rear box
- 4 Towing fee
- 5 Remove & replace parts etc
- 6 Remove & replace front fork, fork
oil seal, top up fork oil
- 7 Re-align front frame body

15.00 M-
 135.00 cut-
 250.00 150.00
 40.00
 300.00 200
 150.00 100
 200.00 100

Sub-Total

1,090.00

Nett Total

3,551.50

840

740

NB: This estimate was made from a visual inspection only, any other damage parts or labour require when repair commences, we will advise you and submit supplementary item to you accordingly.

Kindly revert upon completion
 Thank you

SG 98 MOTOR PTE LTD

Rasal
 Hp 90010068
 3 day
 28/02/18 @

1210
 740
 1950
 20%
 1560

1210.50
 890.00
 2100.50
 20%
 1680.40

40-1500

3 day
 X 30 days



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile				
FIRST CAPITAL INSURANCE LTD			Ref : CS/FCI18003885/R1tbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 06-07-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SH 7378Y	Veh. Inspected	FX 9001R	
Policy No.	D-18088936MFSH	Coverage (\$)	0.00	
Claim No.	D18001660MFSH	Excess (\$)	0.00	
Assign From	EILEEN LEE	Assign Date	27/02/2018	
2. Vehicle Particulars & Condition				
Make & Model	HONDA ANF125	c.c	125	
Engine No.	HIDDEN	Year of Reg.	2004	
Chassis No.	MLHJC33A435020841	Colour	RED	
Odometer	-	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	70/90-17	PIRELLI	3 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	80/90-17	PIRELLI	4 mm	
L/H Rear Tyre			mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY AND FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	25/02/2018	Inspection Date	28/02/2018	
Survey held at	SG 98 MOTOR PTE LTD BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21 SINGAPORE 569622			
5a. Remarks				
A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		



LKK Auto Consultants Pte Ltd

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

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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FX 9001R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	HEAD LAMP	CRACKED	165.00	165.00
1	HEAD LAMP COVER	CRACKED	135.00	135.00
1	SET MIRROR	SCRATCHED	150.00	150.00
1	BRAKE LEVER	SCRATCHED	75.00	75.00
1	FRONT MUDGUARD	CRACKED	165.00	165.00
1	SET FORK TUBE	TO REPAIR SEE LABOUR	480.00	-
1	FORK BRACKET	SERVICEABLE	135.00	-
1	METER COVER	SERVICEABLE	150.00	-
1	HANDLE BAR	BENT	135.00	135.00
1	HANDLE GRIP LH	SCRATCHED	190.00	190.00
1	REAR RH SIGNAL	BROKEN	85.00	85.00
1	FRONT SIDE PANEL LH	SCRATCHED	150.00	150.00
1	GEAR SHAFT	SERVICEABLE	125.00	-
1	GEAR PEDAL	BENT	95.00	95.00
1	FOOTREST	SERVICEABLE	95.00	-
1	FOOTREST RUBBER	SERVICEABLE	55.00	-
	LESS 10% DISCOUNT		-238.50	-134.50
			2,146.50	1,210.50
1	SET FRONT RIM (SN) (LOCAL REPAIR)	SCRATCHED	350.00	150.00
	LESS 10% DISCOUNT		-35.00	-
			315.00	150.00
	<u>SPECIAL NETT ITEMS</u>			
1	FRONT NUMBER PLATE (SN)	BENT	15.00	15.00
1	SEAT (SN)	CUT	135.00	135.00
1	REAR BOX (SN)	SCRATCHED	250.00	150.00
			400.00	300.00
	<u>LABOUR</u>			
	TOWING FEE		40.00	40.00

Report Ref No. CS/FCI18003885/R1tbe2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REMOVE & REPLACE PARTS ETC. INCLUSIVE OF THE REPAIR OF SET FORK TUBE.		300.00	200.00
	REMOVE & REPLACE FRONT FORK, FORK OIL SEAL, TOP UP FORK OIL.		150.00	100.00
	RE-ALIGN FRONT FRAME BODY.		200.00	100.00
			690.00	440.00
GRAND TOTAL			3,551.50	2,100.50
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,500.00

Report Ref No. CS/FC118003885/R1tbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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