ASS. REC. BY:	REF: (%	FC118003	897 N	Hb	JV Special I	nétruction		
*Survayor -	ASS	IGNMEN	T (Offi	ce) /				
From (Person): (WS May On	U(A · _ of _	FCL		1	Date	Time:	28022018	8519m
Estimated Cost:		F	ill to:			- Sales III		
OD / WS/TP RES / OD R To Inspect Vehicle No:	ES/EVA/INV SHC 1	MV/CS 30F0			Insured:	4	9HA 7660Z	
nt Workshop m/s	Chunni	motor			Tel:	6 Ц 8 3	56016	
of	BIK 10 F		Park	2A	401-05			
Policy No:			Claim l	Vo:	D18001	650m	TF5H	
Sum Insured:			Exces					
Make of Veh: (Client's Record)					D.0	A	23022018	
CA / REV / REP. / REV 24	HRS 'DS'		NTI3 21		H.	O.D. End	orseneat:	
Date/Time: 2802018 112	8(17) Person Co	ontacted:	File	M	Vehic		OUT	
Date/Time Action/Instruction	(V)	Strute						
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SHA THUZ-	C93/TCL13	50118h3 / (adi			2906		
513- Pevent Wis								

22/03/2002

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Estimates Costs			Major Eve in	.:	i e
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ENVIRONDE THE	SHC1070E Chunni Motor	5662°	7 Luc		17(8
	AMK Ind. Prk 24 #01-05			Table Institu	
*1.7K	MIL INC. ILL SH NOI 03	Sha No	(1250)		10.000
Policy No		\$ No.	JTDK B3A	476356136	f2-
Diama No		Gan Long	B 21 Feb 2.		
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	9	Tyre Size	E	195/657212	5
(Policy Condition Remark: The year had con	nmenced its NS DS		R		
repair at the tim	[BJ3-J3777]	BS/DUN TOYO/Y	EXNOVA GET ESTU DKC :- I	woodate.	RI SEM
Sal or Narket Value	-	9,571		MOSIUME	
ICAC Accident Poort	Scrastert7: Yes or No	F. 5 a	8	=== 8	407.46
GUA FR Seen	Consistent? I Yes or No	_8a	8	LEE 8.	
Est. Pedent	cays Res Yes or No	2:2	3/2/2018	== 2/8	stron &
um Bum	% 3 /8 Yes or No	Survey ne			
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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

FIR	ST CAPITAL INSU	RANCELTO	Ref : CS/FCI180038	192/M11th			
	OT OATTIAL MOO	TONOL LID	ital . Con Cirouosc	ISZNY I LU			
	ROBINSON ROAD -01 CITY HOUSES	SINGAPORE 068877	Date: 28-02-2018				
			Code: FCI2	CONTROL OF THE PERSON OF THE P			
1.		A) SUBSCRIPTION	lars :- THIRD PARTY CLA	IM			
	Insured Veh.	SHA 7660Z	Veh. Inspected	SHC 1070E			
	Policy No.		Coverage (\$)	0.00			
	Claim No.	D18001650MFSH	Excess (\$)	0.00			
	Assign From	CWS (MAY CHUA)	Assign Date	28/02/2018			
2.		Vehicle I	Particulars & Condition				
	Make & Model		c.c	0			
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour				
	Odometer	- Steering					
	Brakes		Modification				
	General						
3.		Co	nditions 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.		Desc	ription of Damages				
5.			neral Information				
	Accident Date	23/02/2018	Inspection Date	01/03/2018			
	Survey held at	CHUNNI MOTOR WORK F	TE LTD				
		BLK 10 ANG MO KIO IND. #03-19 AMK AUTOPOINT SINGAPORE 568047.	PARK 2A,				
ia.		TAL BOTTOM	Remarks				



MS First Capital Insurance Limited Co.Reg No. 195000106C GST Reg. No. M2-000167E-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Hotor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

26-02-2018

Our Ref No. D18001650MFSH

Accident Date

23-02-2018

Claim Type. Third Party

Insured Vehicle

SHA7660Z

Third Party Vehicle. SHC1070E

Survey Location

AMK AUTOPOINT, SOON HOCK MOTOR,#01-05/06

Contact Person.

LYNN OR IRENE - 65425119

Contact No.

64836016/0

Fax No. 65426039

Survey Type

WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

231122112 @ 11254m

turn wh in

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

S102018

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

CHUNNI MOTOR WORK

Attention, NIL

Cc : TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

MAY CHUA

PTE LTD

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.

lob Sheet (/	ClaimWS/Surveyor/JobShee	t/235369) 🕌	PRI Documents 😃 Close	×	
			PRI Header Details		
Claim No	D18001650MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & C
Workshop Name	CHUNNI MOTOR WORK PTE LTD (Contact Person : LYNN OR IRENE - 65425119)	Survey Location & Contact Details	AMK AUTOPOINT, SOON Mobile: 0 , Phone: 6483 EmailId: CHUNNIMOTOR	86016 , Fax:	654260
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: W	E ADMIT LIA	BILITY (
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHA7660Z	TP Vehicle No	SHC10
PRI Recieved Date	26-02-2018 09:31:00 PM	Surveyor Appointed Date	28-02-2018 08:50:40 AM	Surveyor Accept Date	28-02
		s	urvey Report Upload		
Surveyor Inspection Date *:		Surveyor Report Date	28-02-2018	Upload Survey Report *:	
	1	18	Vehicle Particulars		
Make	Please Select Make	Model	Please Select Model	Year	Selec
Chasis No		Engine No		Mileage	
Color		Cubic Capacity			
Multiple D	ocuments Upload				

Surveyor Job Remarks



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

Your Ref: D18001650MFSH

Date: 5/3/2018

Our Ref: CS/FCI18003892/M1tb

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SHC 1070E .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 2/3/2018 at the premises of M/s Chun Ni. and have the following to report: -

Workshop Estimate Amount	: S\$	26,197.76
Revised Estimate Amount	: S\$	5,902.30
"Check" Items Amount	: <u>S</u> \$	1,663.20
Market Value	: S\$	
LTA Reimbursement Value	: <u>S</u> \$	
Nett Value	: <u>S\$</u>	

Description of Damage: The vehicle sustained damages at the rear.

Comments/ Present Status:

Damages Consistent.

Yours faithfully Ma CF Automotive Assessor

Denise Tay (LKKAuto)

From:

Denise Tay (LKKAuto)

Sent:

Monday, 5 March 2018 5:24 PM

To:

Admin-D (LKKAuto); 'Claim Workflow System'; assignments

Cc:

MAYCHUA@MSFIRSTCAPITAL.COM.SG; SUR

Subject:

RE: SURVEY ASSESSMENT - D18001650MFSH/1

Attachments:

PRELI ADVISED SHC 1070E.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SHC 1070E

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: denisetay@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 11:29 AM

To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: MAYCHUA@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D18001650MFSH/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: Wednesday, 28 February, 2018 8:51 AM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; MAYCHUA@MSFIRSTCAPITAL.COM.SG

Subject: PRI: SURVEY ASSESSMENT - D18001650MFSH/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 MCD618026490 / ComforDelGre Engineering Pts Ltd - Leyang ENTRY DATE & TIME: 24/02/2016 08:43 SURMITTED BY: Janet Lim Stano Gen

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 Oriver.
- 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.

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 end that copies of this report will, for a fee, be made available upon application by interested penies.
- 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.

CIDENT STATEME	ACT	
		ų

Date Of Report

24/02/2018 08:43

Date Of Accident

23/02/2018 23:40

Exact Location Of Accident

SLIP RD FROM LOR 2 TOA PAYOH TWDS PIE/AIRPORT

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHC1070E

Insured/Policyholder

Name Of Registered Owner

COMFORT TRANSPORTATION PTE LTD

Co Reg No

199303821R

Email Address

FLEETSAFETY@CDGTAXI.COM.SG

Mobile Phone No

Alternative Phone No

OFFICE-65508768

Vehicle Particulars

Manufacturer

TOYOTA

Model

PRIUS HYBRID 4G

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?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

TAXI

Insurance Company

Name of Insurance Company

MS FIRST CAPITAL INSURANCE LTD

Type Of Coverage

THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

YES

Policy Number

D-18088936MFSH

Cover Note Number

Driver

Name of Driver NG SOON YEOW

NRIC No S1743037H Date Of Birth 12/12/1966 Occupation OUTDOOR 10/06/1987 Date Of Driving Pass

30 YEARS AND 8 MONTHS **Driving Experience**

Gender

MALE

Mobile Number

Fax Number

Contact Number

EMall Address

NOEMAIL

BLK 793 WOODLANDS AVENUE 6 Address

#02-663

Postcode 730793

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured OTHER - TAXI DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

DRIZZLING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

YES

Was any body injured in the Accident?

NO

3

Was any injured conveyed to hospital by 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)

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

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHA7660Z

Vehicle Make/Model/Colour

Details Of Properties

TAXI

Vehicle Category Name of Driver

LEE FOOK HIAN

NRIC/Passport Number

Contact Number

91807391

Address

Postcode

Insurance Company Name

Nature Of Damage

FRONT

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJX541K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SHAHIRIAN

NRIC/Passport Number

Contact Number

98574157

Address

Postcode

Insurance Company Name

Nature Of Damage

REAR

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

NG SOON YEOW

Approximate Age

Injuries Sustain

SHOULDER & BACK

Injured person in which vehicle?

SHC1070E

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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.
- 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
- my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- my 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.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

Policyholder's Signature Date & Time:

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

Date & Time:

Reporting Centra Personnel's Signature

Name:

NRIC/FIN No .:

GIANNIC Shetch Planform V3



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COMFORYTHAINSPORTATIONEPHEICHES are true in every syspect.

CO. REG. NO. 199303821R

Policyholder's Signature Date & Time: 2 4 FEB 2018

Driver's Signature

SIARMC ShetchPlanFurro_V3

(If driver is not the policyholder)
Date & Time: 2 4 FEB 2018

0840 hrs.

Reporting Centre Personfel's Signature

Name:

NRIC/FIN No.:

Describe Circumstances of the Accident
On 23 Feb 2018 at about 23:40 hrs I was driving along a Slip Rd from Lor 2 Toa Payoh heading
owards PIE/Airport direction.
As I approached the give way lines I saw a red plate car SJX541K slowed down and stopped at
the give way lines hence I slowed down as well and was in the midst of preparing to stop
suddenly a Comfort taxi SHA7660Z came from behind collided onto the Rear Portion of my
axi. The impact of the collision forced my taxi to surge forward to hit the rear of SJX541K.
No passenger on board my taxi. No injury at the point of the accident. However after the
accident I felt pain to my neck, shoulder and back areas. If the pain still persist I will consult a
Doctor later on.
Enclosed is a video footage and scene photos to support my claims.

Declaration

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

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

Policyholder's Signature/Date &

Time 2 4 FEB 2018

. // //

Driver's Signature(If driver is not the policyholder)/Date & Time 2 4 FEB 2018 0840 kms .

Witnessed by Reporting

CHUNNI MOTOR WORK PTE LTD

Go Sarvey Gy MALLER)

REPAIR ESTIMATE

VEHICLE NO: SHC 1070E

DATE : 26.02.2018 *

TEL NO: 6542 5115

MAKE

EAY NO - 6542 6039

MODEL	: TOYOTA PRIUS		FAX NO : 654	2 6039
	PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
×	BONNET D			S 938.40
	BONNET LOCK SW		1	\$ 128.90
_	RADIATOR GRILLE 375			\$ 438.00
	RADIATOR GRILLE EMBLEM CVQ.			\$ 86.50
	FRONT BUMPER COVER del			s 490.50
0	FRONT BUMPER REINFORCEMNENT DENTED			S 691.50
2	FRONT BUMPER REINFORCEMNENT ABSORBER	rack		S 115.70
V	FRONT BUMPER SPONGE			S 78.80
V	FRONT BUMPER CENTRE GRILLE A'S		1	\$ 301.90
	FRONT BUMPER TOP GARNISH			\$ 225.40
	BRACKET, FRONT BUMPER SIDE, RH WC			s 77.00
V	BRACKET, FRONT BUMPER SIDE, LH VAC			s 77.00 v
.2	UNIT ASSY, HEADLAMP, RH (LED) OVG		1	\$ 3,380.30
12	UNIT ASSY, HEADLAMP, LH (LED) CVO			S 3,380.30
	HEAD LAMP PANEL (RH)			s 213.50
VZ	HEAD LAMP PANEL (LH)		i	S 213.50
				s 364.90
V	TOP PANEL CENTRE ()			100000000000000000000000000000000000000
Y	TOP PANEL SIDE, LH TO			[15] [15] [15] [15] [15] [15] [15] [15]
Ž	TOP PANEL SIDE, RH			S 69.20
7	BRACE PANEL W			S 75.20
×	BRACKET, HEADLAMP MOUNTING, RH			\$ 25.50
	BRACKET, HEADLAMP MOUNTING, LH			\$ 25.50
	RADIATOR ASSY CO			\$ 1,841.80
	RADIATOR BOTTOM MOUNTING			\$ 27.50
	STAY, RADIATOR SUPPORT, RH SVC			\$ 65.70
10.9	STAY, RADIATOR SUPPORT, LH 900			S 65.70
	DEFLECTOR, RADIATOR SIDE, RH			\$ 83.50
	DEFLECTOR, RADIATOR SIDE, LH			\$ 77.00
Ľ	CONDENSER ASSY, W/RECEIVER VO			S 1,304.00
	SUB TOTAL			\$ 14,931.90
	LESS.20%	25%		\$ 2,986.38
	DISCOUNTED TOTAL			S 11.945.52
	FRONT NO, PLATE		Nu. la	\$ 11.725.00
	FRONT NO PLATE TRIM COVER		New 10	s 40 (30.00)
	FRONT NO.PLATE GARNISH		de	\$ 99.00
	FRONT BUMPER LOGO			S . 87.10
	ranowaka amawa masama (a. M.)		sv.	4
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estimation of the control of the con		/ Capragages Commercial	SHC 1070E	1
PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT	1
LABOUR CHARGE				L
Panel Beating			s _1,000.00	10
Spray Painting Charge			\$ 400:00	1
Wiring Charge			S 50,00	ŀ
Tuff Kote			S 50.00	1
Towing Charge			\$ 50.00	
Remove/Refix Aircon & Refill Gas			s 150:00	1
TOTAL LABOUR			\$ 1,700.00	
REAR TRUNK LID COVER			s ≠922.50	17
REAR TRUNK LID LOCK			s ×447.70	1-
REAR TRUNK LID RUBBER			\$ 357,00	1
REAR TRUNK LID GLASS (BLACK COLOR)			\$ \$\times_721.30	1
GARNISH SUB-ASSY, BACK DOOR, OUTSIDE			S 1 7 889.70	1
REAR TRUNK LID LOGO(PRIUS)	1		\$ 60.80	1
REAR TRUNK LID LOGO(HYBRID)			\$ 52.40	
REAR TROPA EID EOGO(HTBAD)		-117		l
REAR TRUNK LID LOGO(TOYOTA STAR) J			\$52.90	
1975			\$ 458.60	1
REAR BUMPER RE-INFORCEMENT			S 1318.80	ľ
REAR BUMPER UNDER COVER DE			\$ 552.60	ı
REAR BUMPER SPONGE			5 7 143.40	
REAR BUMPER CLIPS New CV9	le serowe		S22,00	
TAIL LAMP ASSY (UPPER) (LH/RH) OS	March Street		\$ 1,115.80	
TAIL LAMP ASSY (LOWER) (LH/RH) MS ara (s and	\$ 548.40	DS 1,096.80	11:
REAR END PANEL			\$ 602.10	1
REAR END PANEL GARNISH		30.	S × 121.60	ı
REAR SPARE TYRE PANEL			SR × 667.70	1.
REAR EXHAUST PIPE		200	S 1,163.40	
REAR EXHAUST PIPE HANGER		-	EV X 40.70	ľ
REAR EXHAUST PIPE INSULATOR		a	\$1 314.60	
REAR WINDSCREEN GLASS		NI)	\$ × 1,555.80	
REAR WINDSCREEN GLASS MOULDING		1.50	HIN Y 208.60	
(4)				
SUB TOTAL			\$ 11,886.80	
LESS 20%	15%		\$ 2,377.36	
DISCOUNTED TOTAL			\$ 9,509.44]
REAR TRUNK LID APPS STICKER		h	€ V 40.00	
REAR TRUNK LID COMFORT & TEL NO. STCIKER		u	E 60.00	1
REAR BUMPER REVERSE SENSOR		8	SA -135.70	
REAR BUMPER METAL PLATE		ī	50.00	1
REAR WINDSCREEN SEALANT		A1/14		
			2 223000	-
			\$ 331.70	1

			SHC	1070E	ē
PARTS DESCRIPTION	QTY	UNIT PRICE	A	MOUNT	
LABOUR CHARGE					1
Panel Beating			S	1,500.00	6
Spray Painting Charge			S	600.00 م	R
Wiring Charge			S	5,0:00	3
Tuff Kote	ľ		S	50.00	3
Remove/Refix Reverse Sensor			S	120.00	C
Remove/Refix Exhaust Pipe			S	150.00	×
0.100 (2000) 100 (1000) 100 (1000)					-
TOTAL LABOUR			5	2,470.00	
		1	_		
ESTIMATE TOTAL			\$	26.197.76	
		1			
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This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

D18/1650/ctayno

Your Ref : SHA 7660Z Our Ref : SHC 1070E

Ng Ah Kan c/o

CHUNNI MOTOR WORK PTE LTD

Blk 10 Ang Mo Kio Industrial Park 2A

#03-19 AMK AutoPoint

Singapore 568047

Date: 26/05/18

The Motor Claims Department

Ms First Capital France del 36 Robinson Road #16-01

Dear Sir / Madam.

WITHOUT PREJUDICE

RE: ACCIDENT INVOLVING SHC 1070E/SHA 7660Z/SJX 541K On 23.02.2018

ALONG Slip Rd Fm Lor 2 Toa Payoh Twds PIE/Airport After Lamp Post 5353

I am the owner/hirer of motor vehicle/taxi,

SHC 1070E

which was involved in the

above-mentioned accident.

The motor vehicle/taxi was surveyed by your appointed appraiser at the premises of M/S CHUNNI MOTOR WORK PTE LTD. The accident was caused by your insured's negligent driving and or management of his vehicle. Therefore, I am claiming damages and losses sustained by me against you in connection with the accident based on the appraiser's recommendation.

Our claim is as follows:

1) Cost of Repair

2) Loss of Rental 3) Loss of Income

4) GIA Report Fee

5) LTA Search Fee

6) Survey Report Fee

14, 480.00

2,633.40

SS

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S\$

SS 663.

We enclose herewith the following relevant supporting documents:

- a) Authorisation Letter
- b) Final repair bill(s)
- c) LTA Search
- d) GIA report(s)
- e) Insurance Certificate

Kindly look into the matter and revert as soon as possible. Thank you.

Yours faithfully

Received 8112 H MO

Alaohed CCTO DISC S



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

1		Affiliated to Federation Inter	nationale Des Experts En Autom	obile
FIRS	CAPITAL INSU	RANCE LTD	Ref : CS/FCI1800389	92/M1tbq2
	DBINSON ROAD 1 CITY HOUSES	INGAPORE 068877	Date: 20-06-2018 Code: FCI2	
1.	Control Con	Policy Particu	lars :- THIRD PARTY CLAI	M
	Insured Veh.	SHA 7660Z	Veh. Inspected	SHC 1070E
	Policy No.	D-18088936MFSH	Coverage (\$)	0.00
	Claim No.	D18001650MFSH	Excess (\$)	0.00
	Assign From	MAY CHUA	Assign Date	28/02/2018
2.		Vehicle F	Particulars & Condition	
	Make & Model	TOYOTA PRIUS	c.c	1798
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	JTDKB3FU703561342	Colour	BLUE
	Odometer	112528	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.	Minutes at	Co	nditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	195/65 R15	WEST LAKE	8 mm
	L/H Front Tyre	195/65 R15	WEST LAKE	8 mm
	R/H Rear Tyre	195/65 R15	WEST LAKE	8 mm
	L/H Rear Tyre	195/65 R15	WEST LAKE	8 mm
4.		Desc	ription of Damages	
	THE VEHICLE SU DAMAGES SEE D	STAINED DAMAGES AT THI ETAILS.	E REAR PORTION.	
5.		Ger	neral Information	
	Accident Date	23/02/2018	Inspection Date	02/03/2018
	Survey held at	BLK 10 AMK IND PARK 2A	#01-05	
	Repairer	CHUNNI MOTOR WORK P	TE LTD	
5a.		州京中华1381818	Remarks	
	B)THE INSPECTION		PORT. "WITHOUT PREJUDICE" BAS IS, WE HAVE NOT AUTHORIS	
5b.			nate Days of Repair	

8 Working Days

ESTIMATED NORMAL PERIOD FOR REPAIR:



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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1070E

aty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BONNET	TO REPAIR SEE LABOUR	938.40	
1	BONNET LOCK	SERVICEABLE	128.90	
1	RADIATOR GRILLE	DISTORTED	438.00	438.00
1	RADIATOR GRILLE EMBLEM	CRACKED	86.50	86.50
1	FRONT BUMPER COVER	DEFORMED	490.50	490.50
1	FRONT BUMPER REINFORCEMENT	DENTED	691.50	691.50
1	FRONT BUMPER REINFORCEMENT ABSORBER	CRACKED	115.70	115.70
1	FRONT BUMPER SPONGE	CRACKED	78.80	78.80
1	FRONT BUMPER CENTRE GRILLE	DISTORTED	301.90	301.90
1	FRONT BUMPER TOP GARNISH	SERVICEABLE	225.40	
1	BRACKET ,FRONT BUMPER SIDE ,RH	NECESSARY	77.00	77.00
1	BRACKET ,FRONT BUMPER SIDE ,LH	NECESSARY	77.00	77.00
1	UNIT ASSY ,HEADLAMP ,RH (LED)	CRACKED	3,380.30	3,380.30
1	UNIT ASSY ,HEADLAMP ,LH (LED)	CRACKED	3,380.30	3,380.30
1	HEAD LAMP PANEL (RH)	BENT	213.50	213.50
1	HEAD LAMP PANEL (LH)	BENT	213.50	213.50
1	TOP PANEL CENTRE	BENT	364.90	364.90
1	TOP PANEL SIDE ,LH	TO REPAIR SEE LABOUR	69.20	
1	TOP PANEL SIDE ,RH	TO REPAIR SEE LABOUR	69.20	
1	BRACE PANEL	NOT NECESSARY	75.20	
1	BRACKET, HEADLAMP MOUNTING, RH	SERVICEABLE	25.50	1
1	BRACKET, HEADLAMP MOUNTING, LH	SERVICEABLE	25.50	
1	RADIATOR ASSY	BENT	1,841.80	1,841.80
1	RADIATOR BOTTOM MOUNTING	SERVICEABLE	27.50	
1	STAY ,RADIATOR SUPPORT ,RH	SERVICEABLE	65.70	
1	STAY , RADIATOR SUPPORT ,LH	SERVICEABLE	65.70	
1	DEFLECTOR, RADIATOR SIDE, RH	SERVICEABLE	83,50	
1	DEFLECTOR, RADIATOR SIDE, LH	SERVICEABLE	77,00	
1	CONDENSER ASSY ,W/RECEIVER	BENT	1,304.00	1,304.00

Report Ref No. CS/FCI18003892/M1tbq2



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

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ty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	REAR TRUNK LID COVER	TO REPAIR SEE LABOUR	922.50	
1	REAR TRUNK LID LOCK	SERVICEABLE	447.70	,
1	REAR TRUNK LID RUBBER	DISTORTED	357.00	357.00
1	REAR TRUNK LID GLASS (BLACK COLOR)	SERVICEABLE	721.30	;
1	GARNISH SUB-ASSY ,BACK DOOR ,OUTSIDE	DISTORTED	889.70	889.70
1	REAR TRUNK LID LOGO (PRIUS)	NECESSARY	60.80	60.80
1	REAR TRUNK LID LOGO (HYBRID)	NECESSARY	52.40	52.40
1	REAR TRUNK LID LOGO (TOYOTA STAR)	NECESSARY	52.90	52.90
1	REAR BUMPER	BENT	458.60	458.60
1	REAR BUMPER REINFORCEMENT	BENT	318.80	318.80
1	REAR BUMPER UNDER COVER	DEFORMED	552.60	552.60
1	REAR BUMPER SPONGE	TORN	143.40	143.40
1	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
2	TAIL LAMP ASSY (UPPER) (LH/RH) @\$557.90	O/S CRACKED / N/S SERVICEABLE	1,115.80	557.90
2	TAIL LAMP ASSY (LOWER) (LH/RH) @\$548.40	N/S CRACKED / O/S SERVICEABLE	1,096.80	548.40
1	REAR END PANEL	BENT	602.10	602.10
- 1	REAR END PANEL GARNISH	SERVICEABLE	121.60	
1	REAR SPARE TYRE PANEL	TO REPAIR SEE LABOUR	667.70	
1	REAR EXHAUST PIPE	SERVICEABLE	1,163.40	
1	REAR EXHAUST PIPE HANGER	SERVICEABLE	40.70	
1	REAR EXHAUST PIPE INSULATOR	SERVICEABLE	314.60	
1	REAR WINDSCREEN GLASS	NOT NECESSARY	1,555.80	
1	REAR WINDSCREEN GLASS MOULDING	NOT NECESSARY	208.60	
	LESS 20% DISCOUNT		-5,363.74	
	LESS 25% DISCOUNT		_	-4,417.95
		1	21,454.96	13,253.85
	SPECIAL NETT ITEMS			
1	FRONT NO PLATE (SN) }	NECESSARY	25.00	40.00
1	FRONT NO PLATE TRIM COVER (SN) }	NECESSARY	30.00	
1	FRONT NO.PLATE GARNISH (SN)	DEFORMED	99.00	99.00

Report Ref No. CS/FCI18003892/M1tbq2



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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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	FRONT BUMPER LOGO (SN)	SERVICEABLE	87.10	-
1	REAR TRUNK LID APPS STICKER (SN)	NECESSARY	40.00	40.00
1	REAR TRUNK LID COMFORT & TEL NO STICKER (SN)	NECESSARY	60.00	60.00
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
1	REAR BUMPER METAL PLATE (SN)	BENT	50.00	50.00
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	
			572.80	424.70
	LABOUR			
	PANEL BEATING INCLUSIVE OF THE REPAIR OF BONNET, TOP PANEL SIDE ,LH ,TOP PANEL SIDE ,RH,REAR TRUNK LID COVER AND REAR SPARE TYRE PANEL .		2,500.00	1,000.00
	SPRAY PAINTING CHARGE.		1,000.00	900.00
	WIRING CHARGE		100.00	60.00
	TUFF KOTE.		100.00	60.00
	TOWING CHARGE.		50.00	50.00
	REMOVE/REFIX AIRCON & REFILL GAS.		150.00	100.00
	REMOVE/REFIX REVERSE SENSOR.		120.00	60.00
	REMOVE/REFIX EXHAUST PIPE.	NOT NECESSARY	150.00	
	3-11		4,170.00	2,230.00
	GRAND TOTAL		26,197.76	15,908.55
	RECOMMENDED COST OF LUMP SUM REPAIRS			14,000.00

RECOMMENDED COST OF LUMP SUM REPAIRS	14,000.00
(TO ITS PRE-ACCIDENT CONDITION)	HALL STORY

Report Ref No. CS/FCI18003892/M1tbq2

MA CHIN FOOK

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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