

C711

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: 643299Xat Workshop m/s 11-3-80

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: 4 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: 643299XYr Regn: 6, 10

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

Truck / Trailer or CarMake: M.F. FB 70c.c. 2977Colour white

A/C: Insured / Std / NI / NA

Sp. Reading 370578

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: FB70 BBA 20/91Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: NI / S/Rim / STD A/Rim orTyre Size: F: 185-475 R15

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6/6 mmL/Bal. 6 mmL/Bal. 6/6 mmD.O.A. 27/2/18D.O.I. 9/3/18

Survey held at _____

Des. 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

20/3/18

L/S #1350 confirmed with Susan. (Ref 2353, 649)

RECEIVED 21 MAR 2018

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

21/3 - typist

Report Format : merimenLump Sum / I.B.I: (\$ 1350 / 2)Days Of Repair: 4Resurvey No. of Trip: -

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

☐

: Weekend (\$ _____)

Survey Fee: 220

Transportation: _____

S + RS \$ _____

Photos

Others

TOTAL

Survey Department Check List (Case Handler)

Reference No.: CS/CTI/8004579/Uvd3
Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

Admin (): Case handler to make sure all information created by the assignment team are ACCURATE.

(1) Office Assign Form

		Y-Date	N-Date	Y-Date	N-Date
C	Reference No.	✓			
C	Customer Code				
N	Assign From				
C	Assign Date	✓			
C	Veh No (Inspected)	✓			
C	Veh No (Insured)	✓			
C	D.O.A	✓			
C	Policy No	✓			
C	Claim No	✓			
C	Insurance Authorisation (CA /REV/REP)				
C	Report Type	✓			
C	Weekend Charges				
N	Survey held at/Repairer	✓			
C	Excess				

Surveyor (): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

C	Vehicle No	✓			
C	Regn Month/Year	✓			
N	Vehicle Type	✓			
N	Make & Model	✓			
C	Engine Capacity. (C.C)	✓			
N	Colour	✓			
C	Odometer. (Sp.Reading)	✓			
C	Chassis No	✓			
N	General Condition	✓			
N	Steering	✓			
N	Brake	✓			
N	Modification (Modi)	✓			
C	Tyre Size	✓			
N	Tyre Make	✓			
C	Tyre Balance	✓			
C	Date of Inspection	✓			
N	Survey held	✓			
N	Des.of Damages	✓			

(2) System - (Views/Merimen)

C	Damaged Vehicle Photographs Uploaded	✓			
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(3) Workshop Estimate/Assignment Form

N	ALL Parts condition	✓			
C	Market Value for OD cases				
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
C	Days of repair	✓			
C	Finalised Amount	✓			
C	Re-inspection Cases to Finalize within 5 Days				

(4) System - (Views/Merimen)

C	Resurvey photo Uploaded				
---	-------------------------	--	--	--	--

Check By: VERON 21/3/18
Case Handler Date

*C: Critical *N: Non-Critical

21/05/201



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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CS/CTI18004579/Uvd3

3 ANSON ROAD #16-00

SPRINGLEAF TOWERS SINGAPORE 079909

Date : 09-03-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GX 3268R	Veh. Inspected	GY 3299X
Policy No.	DMCVSN3065401700	Coverage (\$)	0.00
Claim No.	SNM18D01276C02	Excess (\$)	0.00
Assign From	MERIMEN (IRENE TAY)	Assign Date	09/03/2018

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	27/02/2018	Inspection Date
Survey held at	LIU'S BROTHER AUTO ENGINEERING WORKSHOP 1 KAKI BUKIT AVENUE 6 #01-01 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.

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	09 Mar 2018		09 Mar 2018 16:41 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	STVE PTE LTD		
Vehicle Reg. No.:	GY3299X	Date of Loss:	27/02/2018 00:00 - :59
Claim Type:	TP / SNM18D01276C02	Policy/Cover Note No.:	DMCVSN3065401700
Vehicle Reg. No. (Insured):	GX3268R	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Liu's Brother Auto Workshop (HQ) Liu's Brother Auto Workshop, Blk 1 Kaki Bt Ave 6 #01-01 Auto Bay @ Kaki Bt Singapore 417883, 417883 Kaki Bukit - Tel: 67411730		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 20/03/2018]		
Adj Asg. Remarks:	NO EST, CASE WITH SJE.		

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.									

Lucas Lee

From: Susan Low <liusbro@ymail.com>
Sent: Thursday, 8 March, 2018 4:37 PM
To: Jowyn Tay; Claims Dept of CTI; Hwang Shiang Yi; Irene Tay; Angie Foo
Subject: Re: Request for 3rd party survey GY3299X Claims against GX3268R
Attachments: GY3299X Search.pdf; GY3299X180227.pdf

Accident on 27/02/2018 Along BKE TO KJE Exit
Involving GY3299X and GX3268R

We refer to the above accident and 3rd party claims.

We hereby write to request of 3rd party claims pre-repair inspection for our client's vehicle.

Please let us have your single joint expert motor surveyors list (SJE) to conduct a pre-repair survey of the damage to our client's vehicle jointly with our client/our motor workshop at No. 1 Kaki Bukit Avenue 6 #01-01 AutoBay @ Kaki Bukit Singapore 417883 as soon as possible.

Kindly arrange.

Thank you.

Best Regard!

Susan Low
M/s Liu's Brother Auto Engineering Workshop
No. 1 Kaki Bukit Avenue 6 #01-01
AutoBay @ Kaki Bukit
Singapore 417883
Tel: 6741 1730
Fax: 6744 5746

Date of Survey:- _____

Name of Authorise Surveyor:- _____

Surveyor Email: _____

Remark :- _____

This email has been scanned by the Symantec Email Security.cloud service.
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RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-036422
Date of Request 08/03/2018

Your Ref No: Online Purchase

LIU'S BROTHER AUTO WORKSHOP
1 Kaki Bukit Ave 6 #01-01
Auto Bay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 08/03/2018
Enquiry By Susan Low Siew Yian
TP Vehicle No. GX3268R
Accident Date 27/02/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GX3268R	China Taiping Insurance (Singapore) Pte. Ltd	30/09/2017-29/09/2018	6389 6111

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

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	27/02/2018 21:44
Date Of Accident	27/02/2018 09:00
Exact Location Of Accident	BKE TO KJE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY3299X
Insured/Policyholder	
Name Of Registered Owner	STVE PTE LTD
Co Reg No	198703585C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64942897

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FB70BB1SRDEA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-17087422MFCV
Cover Note Number	N.A

Driver

Name of Driver	TAI KAI JIE
NRIC No	S8831415H
Date Of Birth	27/08/1988
Occupation	OUTDOOR
Date Of Driving Pass	16/07/2009
Driving Experience	8 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91598277
Fax Number	
Contact Number	
E-Mail Address	BREWERY@GOURMETSUPPLIES.COM.SG

Sketch Plan

IMPORTANT NOTICE

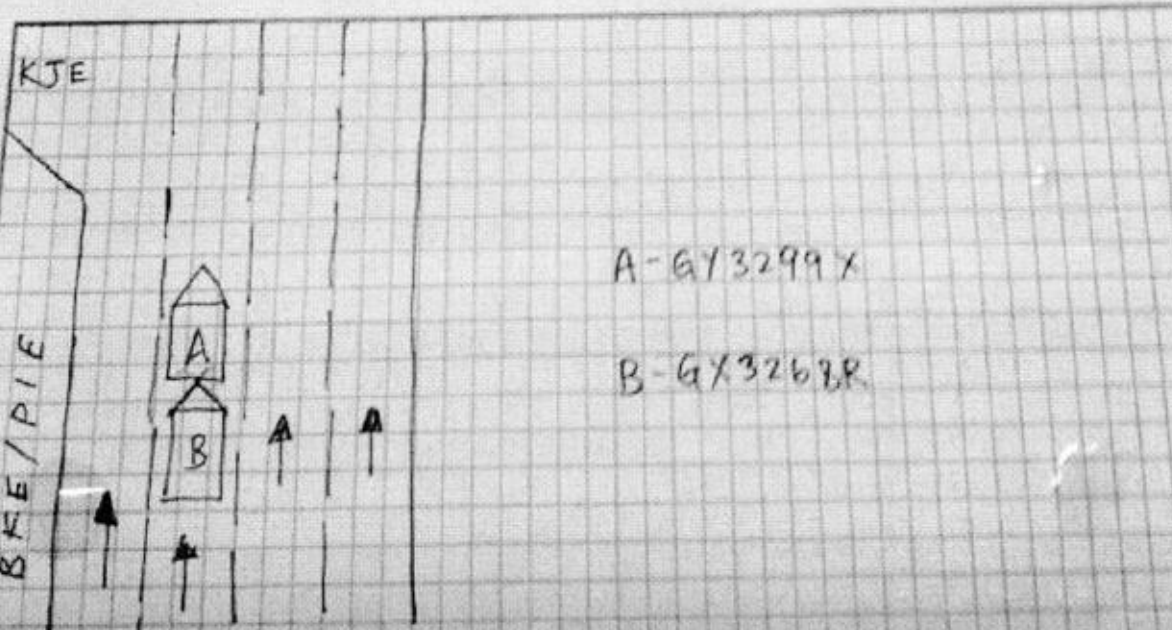
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may give insurance companies the right 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 insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers to the GfA Research 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 request 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.
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 disclosed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurers who have insured my vehicle(s) involved in this accident (all insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the insurers' lawyers/law firms, the Ministry of Transport 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, proposals, 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 correspondence 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/also 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 held outside of Singapore, for one or more of the above Purposes.

VERIFIED BY AJAX MARS
REPORTING OFFICER
Mohammad Azaly Bin Abdullah
Witnessed by Reporting Centre
Personnel

Policyholder's Signature / Date & Time:

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

Sketch Plan



Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 3585C

Vehicle Details

Vehicle No.: GY3299X

Vehicle to be Exported: No

Intended De-registration Date: 08 Mar 2018

Vehicle Make: MITSUBISHI

Vehicle Model: FB70BB1SRDEA

Primary Colour: Red

Manufacturing Year: 2009

Engine No.: 4M42A75941

Chassis No.: FB70BBA20191

Maximum Power Output: -

Open Market Value: \$29,016.00

Original Registration Date: 14 Jun 2010

First Registration Date: 14 Jun 2010

Transfer Count: 0

Actual ARF Paid: \$1,451.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -



LIU'S BROTHER AUTO ENGINEERING WORKSHOP

No. 1 Kaki Bukit Avenue 5 #01-01 Jora Bay @ Kaki Bukit Singapore 417807

ROD No: 522917031, Tel: 6741 1750 / 751, Fax: 6741 2746, Email: liubro@prod.com

Invoice/Ref No: GY3299X180227

Estimate

Customer:		Date:	08-03-18
Name:	China Taiping Insurance (Singapore) Pte Ltd	Vehicle No:	GY3299X
Address:	Motor Claims Department	Model/Make:	Mitsubishi
	3 Anson Road #16-00		FB70B1SRDEA
	Springleaf Tower		
	Singapore 079909		

Item No.	Descriptions Of Parts	Original Quotation / Estimation	Revised Quotation / Cost Of Repair
1	Rear Lh Tail Lamp <i>CNE</i>	\$ 198.00	☒
2	Tail Lamp Panel <i>R</i>	\$ 170.00	☒
3	Number Plate Lamp <i>11</i>	\$ 97.00	☒
4	Number Plate "Metal" <i>Set R</i>	\$ 28.00	☒ <i>145.00</i>
5	Box Fridge Stainless Panel	\$ 1,600.00	☒
6	Box Fridge Support Rubber 02 pcs (@ \$5180.00) <i>70.00</i>	\$ 360.00	☒
	To check all wiring & electrical component for proper function	\$ 50.00	☒ <i>20</i>
	Labor for Panel Beating, Cut, Weld, Straighten & Replacing Parts Etc	\$ 800.00	☒ <i>780</i>
	To putty & spray painting & including touch up paint on accident affected areas	\$ 400.00	☒ <i>380</i>

Total Parts & Labour of estimate for damaged vehicle

\$ 3,703.00

Total amount in Lump Sum Basis for repaired vehicle

SDLS:



M/s Liu's Brother Auto Engrg Wks

Not Allowed
Wk
L/S @ 1350
4 day.

9/3/18
Multiple Approvals

9-198
257
148.50
1702.50

LKK Auto Consultants hence 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 legal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	09 Mar 2018		09 Mar 2018 16:41 Edit Adj Rpt	S\$1,350.00 Edit Estimates	S\$1,350.00 View Rpt		Pending for Survey Report Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	-, Co. Reg. No.: -		
Main Claimant:	STVE PTE LTD		
Vehicle Reg. No.:	GY3299X	Date of Loss:	27/02/2018 00:00 - :59
Claim Type:	TP / SNM18D01276C02	Policy/Cover Note No.:	DMCVSN3065401700
Vehicle Reg. No. (Insured):	GX3268R	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Lius Brother Auto Workshop (HQ) Liu's Brother Auto Workshop, Blk 1 Kaki Bt Ave 6 #01-01 Auto Bay @ Kaki Bt Singapore 417883, 417883 Kaki Bukit - Tel: 67411730		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Final Rpt due 20/03/2018]		
Adj Asg. Remarks:	NO EST, CASE WITH SJE.		

ASSOCIATED MAIL RECEIVED

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There are no mail for this case.

ALL ASSOCIATED TASKS

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Due Date Priority Type Task Group Subject Handler Assigned By Completed On Created On Done?

No results.

Claim Documents

*GY3299X (SNM18D01276C02)
[GX3268R]
TP
STVE PTE LTD
Feb 27 2018 12:00AM
[-]
Lius Brother Auto Workshop

[Upload Documents](#)
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[View in Browser](#)

Photos/Images			3 per page ▼	☒
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	21/03/18 12:33	General View	 Load JPG	☒
2	21/03/18 12:33	General View	 Load JPG	☒
3	21/03/18 12:33	General View	 Load JPG	☒
4	21/03/18 12:33	General View	 Load JPG	☒
5	21/03/18 12:33	General View	 Load JPG	☒
6	21/03/18 12:33	General View	 Load JPG	☒
7	21/03/18 12:33	General View	 Load JPG	☒
8	21/03/18 12:33	General View	 Load JPG	☒
9	21/03/18 12:33	General View	 Load JPG	☒
10	21/03/18 12:33	General View	 Load JPG	☒
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33	21/03/18 12:33	General View	 Load JPG	☒
34	21/03/18 12:33	General View	 Load JPG	☒

			1		✓
35	21/03/18 12:33	General View	1	Load JPG	✓
Documentation			1 per page		✓
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	09/03/18 16:40	PRS	1	Load PDF	
2	09/03/18 16:40	TP GIA REPORT	1	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST

ResetSavePrint

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

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/CTI18004579/UVD3S2
Date: 22/03/2018

REFERENCE

Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. **Policy No:** DMCVSN3065401700
Claimant Vehicle No : GY3299X **Insured Vehicle No :** GX3268R
Date of Loss: 27/02/2018 **Nature of Claim:** TP **Claim No:** SNM18D01276C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: GY3299X
Make & Model: MITSUBISHI FB70BB1SRDEA, 3.0 D (M) **Engine No:** 4M42A75941
Reg. Date: 14/06/2010 (Man. Year: 2009) **Chassis No:** FB70BBA20191
Colour: White **Odometer:** 370578 km
Engine Capacity: 2977 cc
Market Value/New Car Price: N/A
Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Good **Steering (Serviceable):** Yes **Footbrake (Serviceable):** Yes
Handbrake (Serviceable): Yes **Engine Modification:** No **Pre-accident Condition:**

CONDITION OF TYRES

Front Tyre Size: 185/75 R15 **Rear Tyre Size:** 185/75 R15 (D)
Front Left Side: Yokohama 6 mm **Rear Left Side:** Yokohama 6/6 mm
Front Right Side: Yokohama 6 mm **Rear Right Side:** Yokohama 6/6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,453.00	522.50	1,930.50	78.70
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,250.00	1,180.00	70.00	5.60
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	3,703.00	1,702.50	2,000.50	54.02
Approved Total (Overridden) (S\$)		1,350.00		
Nett Amount (S\$)	3,703.00	1,350.00	2,353.00	63.54

INSPECTION

Date of Assignment: 09/03/2018
Date Inspected: 09/03/2018 **Inspected At:** Liu's Brother Auto Engineering Workshop
 Blk 1 Kaki Bt Ave 6 #01-01 Auto Bay @ Kaki Bt
 Singapore 417883
Estimated Period of Repair: 4.0 days

Adjuster: MARCUS CHUA**Manager:** VERON CHEN

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

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen_print&caseid=690484&extid=266689&CFID=30748986&CFTOKEN=c

3/22/2018

Adjuster Report

any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 22 Mar 2018)	
Parts:	N/A	mitsubishi FB70BB1SRDEA 3.0 D (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GY3299X)	
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 LH TAIL LAMP	Cracked	198.00 F	*198.00 FL
2	1		*REAR LH TAIL LAMP PANEL	Repair	170.00 F	*- FL
3	1		*REAR LH NUMBER PLATE LAMP	Not Necessary	97.00 F	*- FL
4	1		*REAR LH NUMBER PLATE METAL	Bent	28.00 FS	*14.00 FS
5	1		*REAR LH BOX FRIDGE STAINLESS PANEL	Repair	1,600.00 FS	*- FS
6	2		*REAR LH BOX FRIDGE SUPPORT RUBBER	Torn	360.00 FS	*360.00 FS
					Sub Total (\$\$)	2,453.00 572.00
					- List Item Discount on L Items 0.00/25.00% (\$\$)	0.00 49.50
					Total Parts (\$\$)	2,453.00 522.50

F=Franchise part, S=SpcNett, L=ListItemDisc.

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	TO CHECK ALL WIRING & ELECTRICAL COMPONENT FOR PROPER FUNCTION.	New	50.00	20.00
2	LABOR FOR PANEL BEATING, CUT, WELD, STRAIGHTEN & REPLACING PARTS ETCS.	New	800.00	780.00
3	TO PUTTY & SPRAY PAINTING & INCLUDING TOUCH UP PAINT ON ACCIDENT AFFECTED AREAS.	New	400.00	380.00
Gross Labour Cost (S\$)			1,250.00	1,180.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >