4	22/03/2002 -	1 1		
	ASS. REC. BY:	REF: (S FCT)	8004737/RIda	Depecial Instruction:
100	Surveyor: RUSU		MENT (Office)	
4	From (Person): Eileln		FCT	Date/Time: 13/3/18/3/10/pm
	Estimated Cost:		Bill to:	Date Time. 1515116
	OD (TP) WS/TP RES/OD	RES/EVA/INV/M	V7·CS	
	To Inspect Vehicle No:	SII 75	AAV	rured: SHC 8818U
	at Workshop m/s	Mova Au	tomotive	Tel: 62723892
	of BIK 1008, BK+1	Terah Leine 3	#01-04/06	02 2 30 2
	Policy No:	*	Claim No: \	8002040MFSH
•	Sum Insured:		Excess:	0000-10111311
	Make of Veh: (Client's Record)			D.O.A. 10 03 2018
	CA / REV / REP. / REV 2	4 HRS (DS)		
_	Date/Time: 1.02pm 0131	la c	d Nither	H.O.D. Endorsement:
		Person Contacts	ed: 1111/2(Vehicle (IN) OUT
	Date/Time Action/Instructi	on () Estima	nte	
	317590	X-cs/Msg.jon/19	93/Dvn	NON-17/6/2010
	SHC 881	84-CC3/AIG	11012066 HILL	201 N.O.A:30/6/2011
	14 9 9 1	011	1101 24 00 1111119	292 DOM 2301013011
	lump &	-1000H# mis	100d. 2521	127 1220/1
	- tavy	WINT THEW	CFEO - 250	177:38%
		r [‡]		

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: Smeller	KASUL

REF:

1 12 23 %	A 2 77	***
1 2 2 1	1 1	IENT
-117171	1111	11 11
. 7001	O . 111	il.

From: Date:	(=====================================
Estimated Cost:	Veh No: SJJ 7590 X Yr Regn: 2015 / Aug
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
To Inspect Vehicle No: SJJ 1590 K	
at Workshop m/s Mova	Make: Toyoth Coroun 1275 1.6 c.c. 1598
of	Colour CREY A/C: Insured / Std / NI / NA
Insured: FU TP	Sp.Reading 57 444 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	C/No: MROS 3REH 104536465
	Gen. Cond: Good Fair Poor / Burnt
(Client's Record)	Steering: (norder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: horder / Jammed / Leaked / Burnt or
Make of yell.	Modi: Nil /S/Rim / STD A/Rim or
(Policy Condition)	Tyre Size: F: 205/55R16
(Policy Collation)	R:
Remark: The veh had commenced its N/S O/S repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU PIR / SUMI /
	TOYO/YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 1003/18 D.O.I. 13/03/18
Lum Sum: % 3 Val.: Yes or No	Survey held at MoVA (BM)
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
y local y mediadeli	
DECEIVED 4 2 1111 2011	
RECEIVED 1 2 JUL 2018	
	Days Of Repair:
DATUPIST : Final Report :	Resurvey No. of Trip: / Survey Fee:
	Transportation, 50
Add Fee:	7_5 7.5 _ 50
Report Format : TO	: Interview (\$) Photos
ump(Sum / I.B.I: (3 4000)	Tech. Invs (\$) Others
1000	Weekend (\$
	-071

22/03/2002 -	[
ASS. REC. BY	- A Medical instruction:
Surveyor:	ASSIGNMENT (Office)
From (Person)	
Estimated Cos	Sti Rill to:
OD (TP) WS	STTP RES / OD RES / EVA / INV / MV 7 CS
To Inspect Ve	hicle No: SIL 7590X Insured: SHC 8818 U
at Workshop r	P/s MINOR A Hammatica
Policy No:	Claim No: D18000040MFSH
Sum Insured:	Excess:
Make of Veh: (Client's Record	10/02/2019
CA / REV /	REP. / REV 24 HRS (DS)
Date/Time:	ODOM 013/3/18 Person Contacted: Nither Vehicle (IN)OUT
Date/Time	Action/Instruction () Estimate
	8)7590x-cs/msg100/1993/DVn Nort-17/6/2010
	SHC 88184-CC3/AIG/1012966/H/n/g2g2 D.O.A:30/6/2011
	lump Sum \$4000 - (Red: 2529.77:38%)
-	

		,	
4 0	1	L	1
D 7	ţ	P	_

ASSIGNMENT

From: Date:	Veh No: SJJ 7590X Yr Regn: 2015 / Aug
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: SJJ 1590K	Make: Toyoth Coroun 1275 1.6 c.c. 1598
at Workshop m/s MovS	Colour CREY A/C: Insured / Std / NI / NA
of	Sp.Reading 57 494 T/Radio: Insured / Std / NI / NA
Insured: FCI TP	Eng/No:
Policy No.	C/No: MROS 3REH 104536465
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: norder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Morder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /S/Rim / STD A/Rim or
4 -	Tyre Size: F: 205/55R16
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU/ PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	<u>Front</u> Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 10/03/18 D.O.I. 13/03/18
Lum Sum: % 3 Val.: Yes or No	Survey held at MVA (BM)
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
RECEIVED 1 2 JUL 201	8
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: / Survey Fee:
Date/Time, File Return to?	Transportation. 50
Add Fee	
Panet Format : TO	: Interview (\$) Photos
Report Format:	Tech. Invs (\$) Others
ump Sum / I.B.I: (\$ 4000)	Weekend (\$
	TOTAL 3/3



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor 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

12-03-2018

Our Ref No. D18002040MFSH

Accident Date

10-03-2018

Claim Type. Third Party

Insured Vehicle

SHC8818U

Third Party Vehicle. SJJ7590X

Survey Location

BLOCK 1008 BUKIT MERAH LANE 3 #01-04/06/08

Contact Person.

NITHA

Contact No.

62723892/0

Fax No. 62708314

Survey Type

DIRECT SETTLEMENT:

Appointed

LKK AUTO CONSULTANTS PTE LTD

Surveyor

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

MOVA AUTOMOTIVE PTE

Attention, NIL

Cc: TP Solicitor

LTD 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/	(235846) PF	RI Documents 🕙 Close	к	
			PRI Header Details		
Claim No	D18002040MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & MOVA AL
Workshop Name	MOVA AUTOMOTIVE PTE LTD (Contact Person : NITHA)	Survey Location & Contact Details	BLOCK 1008 BUKIT MERA Mobile: 0 , Phone: 6272 EmailId: NITHA@MOVA.	3892 , Fax: 62	TOTAL PROPERTY CONTRACTOR
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC8818U	TP Vehicle No	SJJ7590X
PRI Recieved Date	12-03-2018 06:50:57 PM	Surveyor Appointed Date	13-03-2018 01:00:24 PM	Surveyor Accept Date	13-03-2018 (
			Survey Report Upload		
Surveyor Inspection Date *:		Surveyor Report Date	13-03-2018	Upload Survey Report *:	Choose File
			Vehicle Particulars		
Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year
Chasis No		Engine No		Mileage	
Color		Cubic Capacity			
Multiple Do	ocuments Upload				
		Upload Multiple	Documents		
File Nam	e			Action	
Surveyor Jo	ob Remarks				
Remarks				Save	



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

	THE PLANE A		ernationale Des Experts En Auto	omobile	
-11	RST CAPITAL INS	URANCE LTD	Ref : CS/FCI18004	737/R1td3	
	ROBINSON ROAI 6-01 CITY HOUSE	O SINGAPORE 068877	Date: 13-03-2018 Code: FCI2		
1.	《李本教》	Policy Particu	lars :- THIRD PARTY CLA	AIM	
	Insured Veh.	SHC 8818U	Veh. Inspected	SJJ 7590X	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	D18002040MFSH	Excess (\$)	0.00	
	Assign From	CWS (EILEEN LEE)	Assign Date	13/03/2018	
2.		Vehicle F	Particulars & Condition		
	Make & Model		c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
	Chassis No.		Colour Steering		
	Odometer	•			
	Brakes		Modification		
	General				
•			nditions of Tyres	14 N. 11 14 1 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	D#15	Size	Make	Balance	
_	R/H Front Tyre			mm	
	L/H Front Tyre			mm	
_	R/H Rear Tyre			mm	
	L/H Rear Tyre			mm	
- 9/3	D LIVE STATEMENT	Descr	iption of Damages		
	Pensone No. 3 La	Gen	eral Information		
	Accident Date	10/03/2018	Inspection Date	13/03/2018	
	Survey held at	MOVA AUTOMOTIVE PTE L			
		BLK 1008 BUKIT MERAH LA SINGAPORE 159722	NE 3 #01-04/06/08 .		
а.			Remarks		
	A)THE INSPECTIO	N WAS CONDUCTED ON A"\ E TO YOUR INSTRUCTIONS	WITHOUT PREJUDICE" BAS	IS.	

MMOV18033422 / Mova Automotive Pte Ltd - Bukit Merah ENTRY DATE & TIME: 10/03/2018 11:38 SUBMITTED BY: Monitha Gunasekaran

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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 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	10/03/2018 11:38
Date Of Accident	10/03/2018 09:05
Exact Location Of Accident	PIE EXIT INTO UPPER CHANGI ROAD EAST
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJJ7590X
Insured/Policyholder	
Name Of Registered Owner	VIKRAM BANSAL

NRIC No S7060516C

Email Address NOEMAIL

Mobile Phone No (LOCAL) +69

Mobile Phone No (LOCAL) +65-91853010
Alternative Phone No OTHERS-NOPHONE

Vehicle Particulars

Manufacturer TOYOTA

Model COROLLA ALTIS CLASSIC 1.6 CVT

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 PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number

Cover Note Number

Driver

Name of Driver ZANKHANA BANSAL

 NRIC No
 S7160012B

 Date Of Birth
 24/04/1971

 Occupation
 INDOOR

 Date Of Driving Pass
 19/09/2001

Driving Experience 16 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-98169316

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 370H ALEXANDRA ROAD Address

#05-09

159961 Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions DRIZZLING

WET Road Surface

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?

NO

NO

2

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: PRATYUSH BANSAL

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC8818U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

LAI KOK WAH

NRIC/Passport Number

S0231280H

Contact Number

96857131

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable 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: 10 03 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time: 10 03 2018

11.35 am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN	
	A: (JJ 7590X
The Carporal	B: SHC 8818U (MERCEDES TAXI)
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
LICENSE PLATE: SJJ 7590X	ACCIDENT DATE & TIME: (0.03.2018. 09:08 AM
CONTACT NUMBER: 91853010 / 98169316	
Can SJJ 7590x (Can A) W	vaiting on PIE Exit road to allow
treffic on Upper Change	ei Road East to page, & During this
time the Taxi SHC 88	180 (Car B) hit Car A from behind.
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT LICENSE PLATE: SJJ 7590X ACCIDENT DATE & TIME: (D. 03.2 D. 18. 09; C) CONTACT NUMBER: 91853010 98169316 EMAIL ADDRESS: LOCATION: PIE EXIT INTO USFER CHANGI ROAD E AST Car SJJ 7590X (Gar A) Waiting on PIE Exit road to all treffic on Upper Changi Road East to pags, in During time the Taxi SHC 8818U (Car B) hit Car A from be NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT A OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMAPIORS STATE:	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT LICENSE PLATE: SJJ 7590X ACCIDENT DATE & TIME: [D. 03.2D18. 09:08 AN CONTACT NUMBER 91853010 98169316 E-MAIL ADDRESS: LOCATION: PIE EXIT INTO UPER CHANGI ROAD E AST Can SJJ 7590 X (Gan A) Waiting on PIE Exit road to allow treffic on Upper Changi Road East to page, be During this time the Taxi SHC 8818U (Gan B) hit Gan A from behing this time the Taxi SHC 8818U (Gan B) hit Gan A from behing the state: (1) Claim Own Policy Main Third Party (1) Claim OD/TP at other workshop (1) Reporting Only DECLARATION (1) Claim Own Policy Main Third Party (1) Claim OD/TP at other workshop (1) Reporting Only DECLARATION (1) We declare the foregoing particulars are true in every respect.	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY	HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN
OWN DAMAGE CLAIM UNDER YOUR OWN POLICY.	B: SHC 8818 U (MERCEDES TAXI) TANCES OF THE ACCIDENT JJ 7590X ACCIDENT DATE & TIME: 10.03.2018. 09:08 AM 91853010 98169316 E-MAIL ADDRESS: EXIT INTO Uffer CHANGI ROAD EAST SJJ 7590X (Gar A) Waiting on PIE Exit road to allow this on Upper Changi Road East to pags, During this e the Taxi SHC 8818U (Gar B) hit Gar A from behind. ENOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN LAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION Office William Third Party () Claim OD/TP at other workshop () Reporting Only
Please state:	
() Claim Own Policy Claim Third Party	() Claim OD/TP at other workshop () Reporting Only
	et.
Date & Time: 11:35 /10.03.2018. (If driver is not the poli	icyholder) Name:

11.35 am

Page #

Veh#



Automotive Pte Ltd

Main Office: Mova Building No. 22, Jalan Kilang, Singapore 159419

Singapore 159419 Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sg

Workshop Dept: Block 1008,

Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Estimate

12/03/2018

MS FIRST CAPITAL INSURANCE LIMITED

36 Robinson Road #16-01 City House

Singapore 068877.

Attention :- XA026

Claim #

ACC. Date :- 10/03/18

Estimate# :- CK417186

Terms

. C.O.D Days

SJJ7590X

Veh Model :- TOYOTA ALTIS

Remarks :-

No. Description Qty U.Price Amounts S\$ LIST ITEMS: 1. REAR BOOT EMBLEM "CORROLA" 75.70 v PC 75.70 1 2. REAR BOOT 875.60 PC 875.60 3. **REAR BOOT LOGO** 78.30 PC. 78.30 4. REAR BOOT EMBLEM "ALTIS" PC 75.70 75.70 PA-395.10 L 5. REAR BOOT LOCK PC 395.10 6. REAR BOOT CATCH 43.70 X PC 43.70 7. REAR BOOT RUBBER 185.20 L PC 185.20 8. REAR LAMP RH LR 395.10 PC 395.10 9. REAR LAMP CLIPS 10.30 PC 10.30 ER 75.60 10. REAR LAMP LOWER BRACKET RH PC 75.60 11. REAR PANEL 677.20 PC 677.20 12. REAR PANEL INNER TRIM 290.10 \$ × 290.10. PC 13. REAR PANEL INNER TRIM CLIPS PC X 30.60 -6 5.10 14. REAR BUMPER PC 784.10 784.10 P2061-12021-76 - PART NO 398.70 (PA 15. REAR BUMPER SENSOR PC 398.70 85.30 SVL 16. REAR BUMPER REFLECTOR RH 85.30 PC 17. REAR BUMPER REINFORCEMENT 495.60 PC 495.60 18. REAR BUMPER BRACKET RH New -117 20 PC 117.20 REAR BUMPER CLIPS 19. 51.00 PC 5.10 10 € 939.60 R REAR EX SILANCER 20. 939.60 M(OL)A LIST TOTAL S\$ 6.079.70 25% DISCOUNT S\$ -1,519.93 4,559.77 LABOUR : TO CUT/WELD REAR END PANEL, TO REPAIR REAR FENDER L+R. SPARE TYRE PANEL REMOVE AND REFIX DAMAGED PARTS, STRAIGHTEN AND REALIGN AFFECTED AREA TO SPRAY AFFECTED AREAS TO REMOVE AND REFIX LUGGAGE COMPARTMENT SIDE COVER, SIDE TRIM BOARD, CARPET AND OTHER ATTTACHMENT PARTS TO REMOVE AND REFIX REVERSE SENSOR AND CHECK WATER SEEPAGE TO RUST PROOF AFFECTED AREAS TO REMOVE AND REFIX REAR EX SILANCER 60.00 1.970.00 LABOUR TOTAL S\$



Automotive

Main Office: Mova Building

No. 22, Jalan Kilang, Singapore 159419 Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sg

Workshop Dept: Block 1008, Bukit Merah Lane 3,

#01-04/06/08/94 Singapore 159722 Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Estimate

12/03/2018

36 Robinson Road

MS FIRST CAPITAL INSURANCE LIMITED

#16-01 City House Singapore 068877.

Veh Model :- TOYOTA ALTIS

:- SJJ7590X

Estimate# :- CK417186

Claim#

ACC. Date :- 10/03/18

Terms

Page #

Veh#

C.O.D Days

Remarks

Attention :- XA026

No. Description

Qty

131037

U.Price Amounts S\$

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$

6,529.77

GST @ 7 %

457.08

AMOUNT DUE S\$

6,986.85

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD

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 illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Signature:

Date:

Res after report



Main Office:

Mova Building No. 22, Jalan Kilang, Singapore 159419 Tel: **(65) 6476 3333** Fax: **(65)** 6271 5891 www.mova.com.sg

Workshop Dept:

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Estimate

12/03/2018

MS FIRST CAPITAL INSURANCE LIMITED

36 Robinson Road #16-01 City House Singapore 068877.

Attention :- XA026

Page #

:- SJJ7590X Veh#

Veh Model :- TOYOTA ALTIS

Estimate# :- CK417186

Claim#

ACC. Date :- 10/03/18

Terms

:- C.O.D Days

Remarks

No.	Description	Qt	у	U.Price	Amounts S
	LIST ITEMS :	 			1.
1.	REAR BOOT EMBLEM "CORROLA"	1	PC	75.70	75.70
2.	REAR BOOT	1	PC	875.60	M 875.60
3.	REAR BOOT LOGO	1	PC	78.30	78.30
4.	REAR BOOT EMBLEM "ALTIS"	1	PC	75.70	75.70
5.	REAR BOOT LOCK	1	PC	395.10	395.10
6.	REAR BOOT CATCH	1	PC	43.70	× 43.70
7.	REAR BOOT RUBBER	1	PC	185.20	185.20
8.	REAR LAMP RH	1	PC	395.10	395.10
9.	REAR LAMP CLIPS	1	PC	10.30	10.30
10.	REAR LAMP LOWER BRACKET RH	1	PC	75.60	75.60
11.	REAR PANEL	1	PC	677.20	677.20
12.	REAR PANEL INNER TRIM	1	PC	290.10	× 290.10
13.	REAR PANEL INNER TRIM CLIPS	6	PC	5.10	30.60
14.	REAR BUMPER	1	PC	784.10	784.10
15.	REAR BUMPER SENSOR	1	PC	398.70	- 000.1
16.	REAR BUMPER REFLECTOR RH	1	PC	85.30	85.30
17.	REAR BUMPER REINFORCEMENT	1	PC	495.60	495.60
18.	REAR BUMPER BRACKET RH	1	PC	117.20	New -117.20
19.	REAR BUMPER CLIPS	10	PC	5.10	51.00
20.	REAR EX SILANCER	1	PC	939.60	939.60
	LIST TOTAL S\$			(OL)	6,079.70
	25% DISCOUNT S\$				-1,519.93
					4,559.77
	LABOUR :			S -111	
	TO CUT/WELD REAR END PANEL, TO REPAIR REAR				
	FENDER L+R. SPARE TYRE PANEL REMOVE AND REFIX				
	DAMAGED PARTS, STRAIGHTEN AND REALIGN				7-0
	AFFECTED AREA				840.00
	TO SPRAY AFFECTED AREAS			7	750 840.00 750 850.00
	TO REMOVE AND REFIX LUGGAGE COMPARTMENT				
	SIDE COVER, SIDE TRIM BOARD, CARPET AND OTHER				_
	ATTTACHMENT PARTS				60 80.01
	ATTIMO IN LATITUDE				20.00
	TO DELICATE AND DEEM DEVELOP OF MADE				

TO REMOVE AND REFIX REVERSE SENSOR AND CHECK WATER SEEPAGE

TO RUST PROOF AFFECTED AREAS

TO REMOVE AND REFIX REAR EX SILANCER

LABOUR TOTAL S\$

1,970.00



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12/03/2018

MS FIRST CAPITAL INSURANCE LIMITED

36 Robinson Road #16-01 City House Singapore 068877.

Estimate

Veh # :- SJJ7590X

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Attention :- XA026

No.

Description

Qty

131037

U.Price Amounts S\$

E. & O.E

News

NON-TAX AMOUNT S

AMOUNT S\$

6,529.77

GST @ 7 %

457.08

AMOUNT DUE S\$

6.986.85

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD

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 illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed <u>and</u> is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Reg after report



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

TEL: 6256 3561 FAX: 6256 4315

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

		Affiliated to Federation Internati	onale Des Experts En Automob	oile			
IRS	RST CAPITAL INSURANCE LTD Ref : CS/FCI18004737/R1td3e2						
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date: 19-07-2018 Code: FCI2				
		Policy Particulars	:- THIRD PARTY CLAIM				
	Insured Veh.	SHC 8818U	Veh. Inspected	SJJ 7590X			
	Policy No.	D-18088936MFSH	Coverage (\$)	0.00			
	Claim No.	D18002040MFSH	Excess (\$)	0.00			
	Assign From	EILEEN LEE	Assign Date	13/03/2018			
		Vehicle Part	iculars & Condition				
	Make & Model	TOYOTA COROLLA ALTIS 1.6	c.c	1598			
	Engine No.	HIDDEN	Year of Reg.	2015			
	Chassis No.	MR053REH104536465	Colour	GREY			
	Odometer	57494	Steering	IN ORDER			
	Brakes	IN ORDER	Modification	SPORTS RIM			
	General	FAIR					
		Condi	tions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre	205/55 R16	PIRELLI	6 mm			
	L/H Front Tyre	205/55 R16	PIRELLI	6 mm			
	R/H Rear Tyre	205/55 R16	PIRELLI	6 mm			
	L/H Rear Tyre	205/55 R16	PIRELLI	6 mm			
	THE VEHICLE SU	STAINED DAMAGES AT THE RI	EAR PORTION.				
	DAMAGES SEE D	ETAILS.					
	General Information						
	Accident Date	10/03/2018	Inspection Date	13/03/2018			
	Survey held at	MOVA AUTOMOTIVE PTE LTE)				
		BLK 1008 BUKIT MERAH LANE 3 #01-04/06/08 . SINGAPORE 159722					
a.			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.						
b.		Estimate Days of Repair					
_	TESTIMATED NOR	MAL PERIOD FOR REPAIR:	7 Working Days				



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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJJ 7590X

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BOOT EMBLEM "CORROLA"	NECESSARY	75.70	75.70
1	REAR BOOT	BENT	875.60	875.60
1	REAR BOOT LOGO	NECESSARY	78.30	78.30
1	REAR BOOT EMBLEM "ALTIS"	NECESSARY	75.70	75.70
1	REAR BOOT LOCK	BENT	395.10	395.10
1	REAR BOOT CATCH	SERVICEABLE	43.70	-
1	REAR BOOT RUBBER	NECESSARY	185.20	185.20
-1	REAR LAMP RH	CRACKED	395.10	395.10
1	REAR LAMP CLIPS	NECESSARY	10.30	10.30
1	REAR LAMP LOWER BRACKET RH	CRACKED	75.60	75.60
1	REAR PANEL	BENT	677.20	677.20
1	REAR PANEL INNER TRIM	SERVICEABLE	290.10	-
6	REAR PANEL INNER TRIM CLIPS @\$5.10	NOT NECESSARY	30.60	-
1	REAR BUMPER	DEFORMED	784.10	784.10
1	REAR BUMPER REFLECTOR RH	SERVICEABLE	85.30	-
1	REAR BUMPER REINFORCEMENT	BENT	495.60	495.60
1	REAR BUMPER BRACKET RH	NECESSARY	117.20	117.20
10	REAR BUMPER CLIPS @\$5.10	NECESSARY	51.00	51.00
1	REAR EX SILANCER (REPAIR)	NOT CONSISTENT WITH THE IMPACT	939.60	-
	LESS 25% DISCOUNT		-1,420.25	-1,072.93
			4,260.75	3,218.77
	REAR BUMPER SENSOR	CRACKED	398.70	220.00
1		CRACKED	-99.68	220.00
	LESS 25% DISCOUNT		299.02	220.00
	LABOUR		50-30-30-30-30-30-30-30-30-30-30-30-30-30	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	TO CUT / WELD REAR END PANEL, TO REPAIR REAR FENDER L+R, SPARE TYRE PANEL REMOVE AND REFIX DAMAGED PARTS, STRAIGHTEN AND REALIGN AFFECTED AREA.		840.00	700.00

Report Ref No. CS/FCI18004737/R1td3e2



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

Page No.:2 of 2

4,000.00

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	TO SPRAY AFFECTED AREAS.		850.00	750.00
	TO REMOVE AND REFIX LUGGAGE COMPARTMENT SIDE COVER, SIDE TRIM BOARD, CARPET AND OTHER ATTACHMENT PARTS.		80.00	60.00
	TO REMOVE AND REFIX REVERSE SENSOR AND CHECK WATER SEEPAGE.		60.00	40.00
	TO RUST PROOF AFFECTED AREAS.		80.00	60.00
	TO REMOVE AND REFIX REAR EX SILANCER.	NOT NECESSARY	60.00	-
			1,970.00	1,610.00
	GRAND TOTAL		6,529.77	5,048.77

Report Ref No. CS/FCI18004737/R1td3e2

RECOMMENDED COST OF LUMP SUM REPAIRS

(TO ITS PRE-ACCIDENT CONDITION)

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

1800

ADRIAN LING WAI PING

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

Licensed Appraiser

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