

ASS. REC. BY:

REF: CS/MSG18005000/TIRD3

02

Special Instruction:

Surveyor: Taufik

ASSIGNMENT (Office)

From (Person): Monica chungof MSIGDate/Time: 15/3/18 @ 4:59pm

Estimated Cost: \_\_\_\_\_

Bill to: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

YP 8187L

Insured: \_\_\_\_\_

SLV 8187L

at Workshop m/s \_\_\_\_\_

Mova Automotive

Tel: \_\_\_\_\_

62723892of No. 22, Jalan Kilang # 07-01Policy No: 28795104MCX

Claim No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_

Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_

D.O.A. 12/03/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS <sup>wp</sup>

H.O.D. Endorsement: \_\_\_\_\_

Date/Time: 9:34am @ 16/3/18

Person Contacted: \_\_\_\_\_

NithaVehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>YP 8187L - x</u>
	<u>SLV 8187L - x</u>
	<u>Sent peli from minmen</u>

Tan Jia

REF: MSIG

ASSIGNMENT

From:

Date: 21/3/18

Estimated Cost:

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

To Inspect Vehicle No:

YP 8187L

at Workshop m/s

of

Mova  
15 Fan Yong Road

Insured:

Policy No.

Claims No.

Sum Insured:

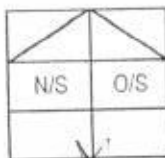
Excess:

(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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS <sup>lwp</sup>

Date:

Person Contacted:

Vehicle: IN / OUT

Alan

Veh No:

YP 8187L

Yr Regn:

2017 Dec

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

Truck / Trailer or

Make:

Hino XZU71K

C.C.

4009

Colour:

white

A/C

Insured / Std / NI / NA

Sp. Reading

6383

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

3H4UES3H50K022650

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

7.00 R16

R:

24 (D)

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

TOYO / YOKO or

Front

R/Bal.

6

mm

Rear

R/Bal.

4/6

mm

L/Bal.

6

mm

L/Bal.

4/6

mm

D.O.A.

D.O.I.

22/3/18 1245

Survey held at

Mova Fan Yong

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

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

Date / Time

Action / Instruction

Confirm L/S \$1350 @ 3 days  
Ref: 527, 281

RECEIVED 19 JUL 2018

Date/Time: File Pass to?

1)

typist

Date/Time: File Return to?

2)

Report Format:

TP

Lump Sum / LB: (\$

1350

Days Of Repair:

3

Resurvey No. of Trip:

1

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech Insp (\$

☐

Weekend (\$

Survey Fee:

Transportation

1) S + RS \$

2) Photos

3) Others

TOTAL

200  
10

210

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

CLAIM SUBFOLDER TRACKING						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd
Main	15 Mar 2018		15 Mar 2018 16:59 <a href="#">Assign</a>			
						<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
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**[Created by insurer]**

**CLAIM SUBFOLDER DETAILS**

Insured:	SKYWAY MOTOR PTE LTD, Co. Reg. No.: 199904194N, Email: PEILIN@SKYWAY.COM.SG		
Main Claimant:	OJJ-TIERNEY'S FOODS PTE LTD, Co. Reg. No.: 201320528R		
Vehicle Reg. No.:	YP8187L	Date of Loss:	12/03/2018 14:00 - :59
Claim Type:	TP	Policy/Cover Note No.:	28795104MCX (Comprehensive) Coverage: 08/08/2017 - 07/08/2018
Vehicle Reg. No. (Insured):	SLV2168D	Policy No. (Claimant):	
		Excess:	S\$700.00
Repairer:	Mova Automotive Pte Ltd (Bukit Merah) No. 22 Jalan Kilang, #07-01, Mova Building, 159419 Bukit Merah - Tel: 62723892/64763333		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Monica Chung Pei Zhen - 6594 2552]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 16/03/2018]		
Driver/Custodian (Insured):	HO YOUYI (36 / Male), NRIC: S8138217D, Tel: +6598258775		
Adj Asg. Remarks:	Please contact NITHA @ 6272 3892 to arrange for survey.		

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

**ASSOCIATED MAIL RECEIVED**

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.									



# 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			
MSIG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG18005000/T1rd3	
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 16-03-2018	
		Code : MSG	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SLV 8187L	Veh. Inspected	YP 8187L
Policy No.	28795104MCX	Coverage (\$)	0.00
Claim No.	552467	Excess (\$)	0.00
Assign From	MERIMEN (MONICA CHUNG)	Assign Date	16/03/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	c.c		0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	12/03/2018	Inspection Date	
Survey held at	MOVA AUTOMOTIVE PTE LTD BLK 1008 BUKIT MERAH LANE 3 #01-04/06/08 SINGAPORE 159722		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

## Janice Lee (LKKAUTO)

---

**From:** Mei Kwan (LKKAUTO)  
**Sent:** Monday, July 16, 2018 7:43 PM  
**To:** Janice Lee (LKKAUTO)  
**Cc:** SUR  
**Subject:** FW: finalization for veh no:YP8187L  
**Attachments:** 22032018125758-0001.pdf

CS/MSG18005000/T1rd3

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

-----Original Message-----

**From:** Alan Chng [mailto:tuckmeng@nova.com.sg]  
**Sent:** Friday, 13 July, 2018 12:44 PM  
**To:** Taufikh (LKKAUTO) <Taufikh@lkkauto.com>  
**Cc:** Admin A <admin-a@lkkauto.com>  
**Subject:** FW: finalization for veh no:YP8187L

Reminder

Dear Taufikh,

Please confirm the COR & working days by ASAP. Thanks!

Best Regards

Alan Chng

Claims Estimator

Nova Automotive Pte Ltd

H/P 9686 9276

Office No:6262 3377

Fax No:6264 3151

-----Original Message-----

**From:** Alan Chng [mailto:tuckmeng@nova.com.sg]  
**Sent:** Thursday, 22 March 2018 1:20 PM  
**To:** 'Taufikh (LKKAUTO)'  
**Cc:** 'Admin A'  
**Subject:** finalization for veh no:YP8187L

Dear Taufikh,

Please refer the attach estimate to confirm the COR & working days.

Repair cost lump sum \$1350 & 3 working days, please confirm and reply by email.  
I will send you the after repair photos once the lorry ready.  
Thank you!

Best Regards  
Alan Chng  
Claims Estimator  
Mova Automotive Pte Ltd  
H/P 9686 9276  
Office No:6262 3377  
Fax No:6264 3151

## Enquire PARF/COE Rebate for Registered Vehicle

## Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	0528R

## Vehicle Details

Vehicle No.:	YP8187L
Vehicle to be Exported:	Yes
Intended De-registration Date:	15 Mar 2018
Vehicle Make:	HINO
Vehicle Model:	HINO XZU710R-HKFM53
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	N04CUS34516
Chassis No.:	JHHUCS3H50K022650
Maximum Power Output:	-
Open Market Value:	\$35,214.00
Original Registration Date:	28 Dec 2017
First Registration Date:	28 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$1,761.00

## Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

## Intended COE Rebate Details

COE Expiry Date:	27 Dec 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$58,036.00
COE Rebate Amount:	\$46,428.00
<b>Total Rebate Amount:</b>	<b>\$46,428.00</b>

The information contained herein is correct as at 15 Mar 2018

OK

TPMS/G.

MMOV18035487 / Mova Automotive Pte Ltd - Bukit Merah  
ENTRY DATE & TIME: 15/03/2018 10:55  
SUBMITTED BY: Chio Ziling

Your NCD will be affected due to late reporting  
Actual e-Filing Submission Date & Time: 15/03/2018 11:06

## 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 15/03/2018 10:55  
Date Of Accident 12/03/2018 14:10  
Exact Location Of Accident ORCHARD ROAD  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number YP8187L  
**Insured/Policyholder**  
Name Of Registered Owner OJJ-TIERNEY'S FOODS PTE LTD  
Co Reg No 201320528R  
Email Address NOEMAIL  
Mobile Phone No (LOCAL) +65-96519933  
Alternative Phone No OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer HINO  
Model HINO XZU710R-HKFMS3  
Exact Purpose for which vehicle was being used at time of accident  
Are you claiming under your own insurance policy for repair to your vehicle? NO  
If No, Please state action to be taken THIRD PARTY  
Vehicle Category COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company TOKIO MARINE INSURANCE SINGAPORE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number 17-MU013238-R00  
Cover Note Number

### Driver

Name of Driver MAO ZHENGDAO  
Passport No/FIN G5364141K  
Date Of Birth 25/10/1981  
Occupation OUTDOOR  
Date Of Driving Pass 09/01/2013  
Driving Experience 5 YEARS AND 2 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-96519933  
Fax Number  
Contact Number  
Email Address NOEMAIL



Address -  
 Postcode -  
 Was driver an employee of the Insured's Company YES  
 If No, Relationship of the Driver with the Insured -  
 Vehicle Registration Number of Driver's Own Vehicle -  
 Vehicle -  
 Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR  
 Weather Conditions RAINING  
 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? NO  
 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? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

REFER TO SKETCH PLAN.

#### 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 SLV2168D  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 Name of Driver HO YOUYI  
 NRIC/Passport Number S8138217D  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

## Sketch Plan

### 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 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. 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 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 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

MAD ZHIN PA



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



Witnessed by Reporting Centre Personnel

#### Sketch Plan

A - YP8180L

B - SLV268D



Sketch Plan #2

Describe Circumstances of the Accident

On 12/3/18 @ 14:10 I was driving along Orchard Road  
I lost vehicle stops and I stop, suddenly vehicle  
B hit on my rear protection

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO  
SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY  
FOR MORE INFORMATION

Please State:

( ) Claim Own Policy ☒ Claim Third Party ( ) Claim OD/TP at other workshop ( ) Reporting only

Declaration

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



Policyholder's Signature / Date & Time



X MR ZHENGLI DAI  
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel



Automotive Pte Ltd

**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 100B,  
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**

15/03/2018

MSIG INSURANCE (S) PTE LTD (SGX CENTRE)  
16, RAFFLES QUAY  
#24-01 HONG LEONG BUILDING  
SINGAPORE 048581.

Attention :- XA013

Page # :- 1

Veh # :- YP8187L

Veh Model :- HINO XZU710R

Estimate# :- CK417208

Claim # :-

ACC. Date :- 12/03/18

Terms :- C.O.D Days

Remarks :- 96889276 Alam.

No.	Description	Qty	U.Price	Amounts S\$
1.	LIST ITEMS :			
1.	REAR REINFORCEMENT	1 PC	810.00	810.00 <i>bt-</i>
2.	REAR REINFORCEMENT	2 PC	320.00	640.00 <i>bt-</i>
3.	REAR BRACKET SCREW	8 PC	10.00	80.00 <i>bt-</i>
	LIST TOTAL S\$			1,530.00
	10% DISCOUNT S\$			-153.00
				1,377.00
	LABOUR :			
	TO STRAIGHTEN BOTH CHASSISMEMBER & RENEW DAMAGED PARTS			300.00 <i>200</i>
	TO APPLY RUST PROOF ON CHASSISMEMBER			200.00 <i>100</i>
	LABOUR TOTAL S\$			500.00

E. &amp; O.E

NON-TAX AMOUNT S

AMOUNT S\$ 1,877.00

GST @ 7 % 131.39

AMOUNT DUE S\$ 2,008.39

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:

Tan Jia 9749 5749  
- up  
22/3/18 @ 1145  
in mp sum  
Resurvey after repair  
3 days  
Su @ lkkauto.com



Automotive Pte Ltd

## Main Office:

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

## Workshop Dept:

Block 100B,  
Bukit Merah Lane 3,  
#01-04/08/08/94  
Singapore 159722  
Tel: (65) 6272 3892  
Fax: (65) 6270 8314  
Co. Reg. 198904033G  
GST Reg. M2-0085864-2

#1350  
3 days

## Estimate

15/03/2018

MSIG INSURANCE (S) PTE LTD (SGX CENTRE)  
16, RAFFLES QUAY  
#24-01 HONG LEONG BUILDING  
SINGAPORE 048581.

Page # : 1

Veh # : YP8187L

Veh Model : HINO XZU710R

Estimate# : CK417208

Claim # :

ACC. Date : 12/03/18

Terms : C.O.D Days

Remarks : 96889276 Alam.

Attention : XA013

No.	Description	Qty	U.Price	Amounts SS
1.	LIST ITEMS :			
2.	REAR REINFORCEMENT	1 PC	810.00	810.00 <i>61</i>
3.	REAR REINFORCEMENT	2 PC	320.00	640.00 <i>61</i>
	REAR BRACKET SCREW	8 PC	10.00	80.00 <i>61</i>
	LIST TOTAL SS			1,530.00
	10% DISCOUNT SS			-153.00
				1,377.00
	LABOUR :			200
	TO STRAIGHTEN BOTH CHASSISMEMBER & RENEW			300.00
	DAMAGED PARTS			100
				200.00
	TO APPLY RUST PROOF ON CHASSISMEMBER			
				500.00
	LABOUR TOTAL SS			

E. &amp; O.E

NON-TAX AMOUNT S

AMOUNT SS 1,877.00

GST @ 7 % 131.39

AMOUNT DUE SS 2,008.39

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

P-1377

LC-300

1677

200

1341.60

Tayfun 9744 5749

22/3/18 @ 1445

Lumpsum

Resum after repair

3 days

Sun@lucanto.com

## 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/MSG18005000/T1RD3N2

Date: 20/07/2018

## REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	28795104MCX
Claimant Vehicle No :	YP8187L	Insured Vehicle No :	SLV2168D
Date of Loss:	12/03/2018	Nature of Claim:	TP
		Claim No:	552467

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	YP8187L	Engine No:	N04CUS34516
Make & Model:	HINO XZU710R-HKFM3, 4.0 D (M)	Chassis No:	JHHUCS3H50K022650
Reg. Date:	28/12/2017 (Man. Year: 2017)	Odometer:	6383 km
Colour:	White		
Engine Capacity:	4009 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:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

## CONDITION OF TYRES

Front Tyre Size:	7.00 R16	Rear Tyre Size:	7.00 R16 (D)
Front Left Side:	Bridgestone 6 mm	Rear Left Side:	Bridgestone 6/6 mm
Front Right Side:	Bridgestone 6 mm	Rear Right Side:	Bridgestone 6/6 mm

The above values represent the remaining tyre treads depth

## COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	1,377.00	1,377.00	0.00	0.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	500.00	300.00	200.00	40.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>1,877.00</b>	<b>1,677.00</b>	<b>200.00</b>	<b>10.66</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,350.00</b>		
<b>(S\$)</b>	<b>1,877.00</b>	<b>1,350.00</b>	<b>527.00</b>	<b>28.08</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>131.39</b>	<b>94.50</b>	<b>36.89</b>	<b>28.08</b>
<b>Nett Amount (S\$)</b>	<b>2,008.39</b>	<b>1,444.50</b>	<b>563.89</b>	<b>28.08</b>

## INSPECTION

Date of Assignment: 15/03/2018

Date Inspected: 22/03/2018 Inspected At:

Mova Automotive Pte Ltd (Bukit Merah)  
Blk 1008, #01-04/06/08/94, Bukit Merah  
Lane 3  
Singapore 159722

Estimated Period of Repair: 3.0 days

Adjuster: MOHD RASUL

Manager: Janice Lee Si Hua

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our

*knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.*

## REPAIR DETAILS

## Reference

Part Source: (Last Synchronised: 20 Jul 2018)  
 Parts: N/A HINO XZU710R-HKFMS3 4.0 D (M) (Model not available in database)  
 Labour: Repairer's (Price-denominated Standard List)  
 Print Code: (Unsubmitted, no print-code for YP8187L)  
 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 REINFORCEMENT	Bent	810.00 FL	*810.00 FL
2	2		*REAR REINFORCEMENT BRACKET	Bent	640.00 FL	*640.00 FL
3	8		*REAR BRACKET SCREW	Bent	80.00 FL	*80.00 FL
					<b>Sub Total (S\$)</b>	<b>1,530.00</b>
					<b>- List Item Discount on L Items 10.00/10.00% (S\$)</b>	<b>153.00</b>
					<b>Total Parts (S\$)</b>	<b>1,377.00</b>

F=Franchise part. 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
<u>Labour Items</u>				
1	TO STRAIGHTEN BOTH CHASSISMEMBER & RENEW DAMAGED PARTS	New	300.00	200.00
2	TO APPLY RUST PROOF ON CHASSISMEMBER	New	200.00	100.00
Gross Labour Cost (\$\$)			500.00	300.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >