ASS. REC. BY: | REF: CS/FCI1800S310/ M1rd3 | Special Instructions:

Surveyor: MA

CWS

ASSIGNMENT (Office)

From (Person): Aung Yin Ming of: FCI Date/Time: 2/3/18 @ 10:53 am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJG 3264E Insured: SHA 95062

at Workshop m/s: Rally Pitstop Tel: 91005500

of: 176 Bin Ming Drive #04-17

Policy No: Claim No: D1800 2058 MFSH

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A: 08/03/2018

CA / REV / REP. / REV 24 HRS (wp) Before 11am

Date/Time: 2.05pm @ 21/03/18 Person Contacted: Terrence Vehicle IN / OUT

H.O.D. Endorsement:

Date/Time	Action/Instruction (✓) Estimate
	SJG 3264E - X
	SHA 95062 - NSLINC10022033/Dn D·O·A: 28/10/2016
	Confirm L/S $1050, 3 days
	Rcd: $495.67, 29%

REF:

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s: AASPEC

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 Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SJG3264E Yr Regn: JUN / 2008

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

Make: TOYOTA CAMRY cc 2362

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

Sp.Reading 134088 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MR0FB8K4000702875

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/55/R17

R: —"—

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or DUN

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm

D.O.A 08/03/2018 D.O.I. 22/3/2018

Survey held at —"—

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

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

Date / Time	Action / Instruction

RECEIVED 03 JUL 2018

Date/Time, File Pass to? 1) typist

Date/Time, File Return to? 2)

☐ : Preli. Report

☑ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: -

Survey Fee:

Transportation: $ + RS SI

Photos:

Others:

TOTAL

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format : TP

Lump Sum / ~~LR~~: ($ 1250)

MS FirstCapital

MS First Capital Insurance Limited Co.Reg. No. 195000108C 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	13-03-2018	**Our Ref No.**	D18002058MFSH
Accident Date	08-03-2018	**Claim Type.**	Third Party
Insured Vehicle	SHA9506Z	**Third Party Vehicle.**	SJG3264E
Survey Location	176 Sin Ming Drive #04-17Sin Ming Autocare		
Contact Person.	TERRENCE LIM		
Contact No.	0/ 91005500	**Fax No.**	0
Survey Type	WITHOUT PREJUDICE:		
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD		
Contact Person	NA	**Fax No.**	68416315
Contact Number.	NA		

FOR DIRECT SETTLEMENT

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

THIRD PARTY SURVEY REQUEST

Cc : Workshop	RALLY PITSTOP	**Attention.**	NIL
Cc : TP Solicitor	NA	**TP Solicitor Fax No.**	NA
Officer Incharge	AUNGYM		

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/235868) PRI Documents Close

PRI Header Details

Claim No	D18002058MFSH	**Policy No**	D-18088937MFSH	**Claimant S.No & Name**	1 & RALLY PIT
Workshop Name	RALLY PITSTOP (Contact Person : TERRENCE LIM)	**Survey Location & Contact Details**	176 Sin Ming Drive #04-17Sin Ming Autocare **Mobile:** 91005500 , **Phone:** 0 , **Fax:** 0 **EmailId:** TAR6985@HOTMAIL.COM		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	**Instructions To Surveyor**	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	**Insured Vehicle No**	SHA9506Z	**TP Vehicle No**	SJG3264E
PRI Recieved Date	20-03-2018 03:04:51 PM	**Surveyor Appointed Date**	21-03-2018 10:52:14 AM	**Surveyor Accept Date**	21-03-2018 0

Survey Report Upload

Surveyor Inspection Date *:		**Surveyor Report Date**	21-03-2018	**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 Documents Upload

Upload Multiple Documents

File Name **Action**

Surveyor Job Remarks

Remarks		Save

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Ref : CS/FCI18005310/M1rd3

Date : 21-03-2018

Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SHA 9506Z	Veh. Inspected	SJG 3264E
	Policy No.		Coverage ($)	0.00
	Claim No.	D18002058MFSH	Excess ($)	0.00
	Assign From	CWS (AUNG YIN MING)	Assign Date	21/03/2018

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	08/03/2018	Inspection Date	
	Survey held at	RALLY PITSTOP 176 SIN MING DRIVE #04-17 SIN MING AUTO CARE SINGAPORE 575721		

5a. Remarks

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

MVA218032972 / VAC - Sin Ming
ENTRY DATE & TIME: 09/03/2018 12:16
SUBMITTED BY: CHRISTINA ONG Mui Lan

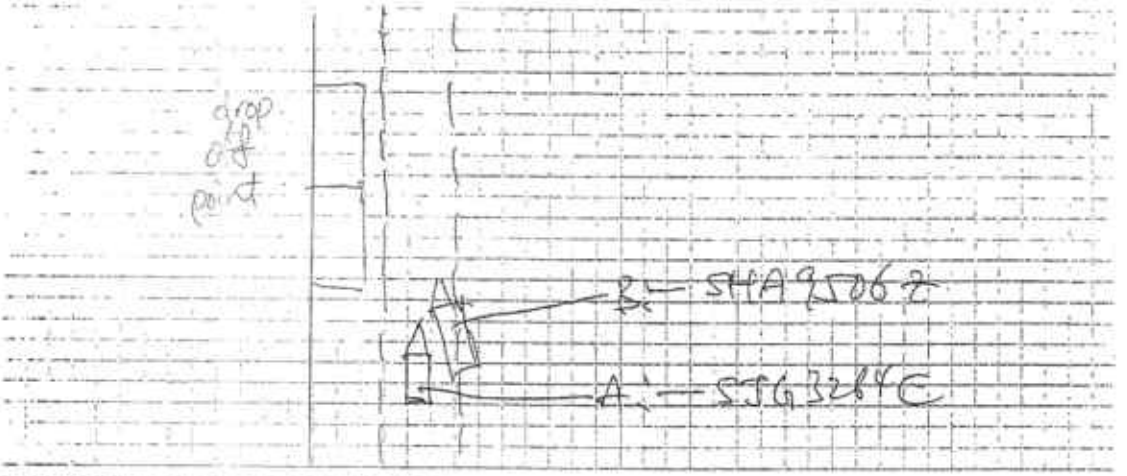
SINGAPORE ACCIDENT STATEMENT

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	09/03/2018 12:16
Date Of Accident	08/03/2018 19:05
Exact Location Of Accident	ALONG SERANGOON CENTRAL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJG3264E
Insured/Policyholder	
Name Of Registered Owner	REPUBLIC LIMOS
Co Reg No	53274366X
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93838392
Alternative Phone No	OFFICE-93838392
Vehicle Particulars	
Manufacturer	TOYOTA
Model	CAMRY
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088553141 (DRIVO CLASSIC)
Cover Note Number	
Driver	
Name of Driver	TRILOCHAN SINGH
NRIC No	S7771471E
Date Of Birth	03/03/1977
Occupation	OUTDOOR
Date Of Driving Pass	22/12/1997
Driving Experience	20 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93838392
Fax Number	
Contact Number	OTHERS-93838392
EMail Address	NOEMAIL

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I stopped my vehicle and drop off a passenger, suddenly vehicle B (SHA9506Z) cut into my front right from behind and hit into the front right of my vehicle. My passenger (Leen) (ph nos : 9001 2243) saw the accident and wait to be my witness.

DECLARATION

I/We declare that the foregoing particulars are true in every respect. 09 MAR 2018

Republic Limos

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 09/03/18 (2.24 pm)

ASSESSMENT CENTRE NICOM

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ASPEC AUTO CARE LLP
176 SIN MING DRIVE
#04-17 SIN MING AUTOCARE
SINGAPORE 575721
TEL: 64516985 FAX: 68540685

FACSIMILE TRANSMITTAL SHEET

TO: Motor Claims Department	FROM: Terrence Lim
COMPANY: First Capital Insurance Limited	DATE: 21-03-18
FAX NUMBER: 65073849	TOTAL NO. OF PAGES INCLUDING COVER: 1
PHONE NUMBER: 65073848	SENDER'S REFERENCE NUMBER: SJG3264E
RE: Estimate repair cost of SJG3264E	YOUR REF NUMBER: SHA9506Z

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☑ PLEASE REPLY ☐ PLEASE RECYCLE

Dear Sir/Madam,

Vehicle No : SJG3264E
Make & Model : Toyota/Camry
Date of accident : 08/03/2018
We are pleased to quote you the repair cost for above-mentioned vehicle:

QTY	PARTS DESCRIPTION	UNIT PRICE	TOTAL
1	Front bumper	✓	785.30
1	Rear bumper side retainer (RH)	✓	42.50
1	Head-lamp (RH)	✓	598.20
1	Front bumper chrome (RH)	✓	89.60
1	Fog-lamp (RH)		145.30
	Sub-total before discount		1660.90
	Parts percentage discount 25%		415.23
	PARTS TOTAL		**1245.67**
	LABOUR CHARGES & MISC		
1	Labour to dismantle, panel beat & replace front bumper		
	and all necessary parts.	200	~~300.00~~
2	To putty and spray paint		✓ 200.00
	LABOUR TOTAL		**500.00**
	LABOUR & PARTS TOTAL		**1745.67**

Not Authorised
H/C Repair
VTA ~ paint Photo
Hole Dente
22/3/2018
3w/days

L/S $1250/-
3w/days.

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Ref : CS/FCI18005310/M1rd3q2

Date : 03-07-2018

Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SHA 9506Z	**Veh. Inspected**	SJG 3264E
	Policy No.	D-18088937MFSH	**Coverage ($)**	0.00
	Claim No.	D18002058MFSH	**Excess ($)**	0.00
	Assign From	AUNG YIN MING	**Assign Date**	21/03/2018

2. Vehicle Particulars & Condition

	Make & Model	TOYOTA CAMRY	**c.c**	2362
	Engine No.	HIDDEN	**Year of Reg.**	2008
	Chassis No.	WR053BK4007027875	**Colour**	WHITE
	Odometer	134088	**Steering**	IN ORDER
	Brakes	IN ORDER	**Modification**	SPORTS RIM
	General	GOOD		

3. Conditions of Tyres

		Size	**Make**	**Balance**
	R/H Front Tyre	215/55 R17	DUNLOP	6 mm
	L/H Front Tyre	215/55 R17	DUNLOP	6 mm
	R/H Rear Tyre	215/55 R17	DUNLOP	6 mm
	L/H Rear Tyre	215/55 R17	DUNLOP	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	08/03/2018	**Inspection Date**	22/03/2018
	Survey held at	RALLY PITSTOP 176 SIN MING DRIVE #04-17 SIN MING AUTO CARE SINGAPORE 575721		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: **3 Working Days**

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJG 3264E

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	CUT	785.30	785.30
1	REAR BUMPER SIDE RETAINER (RH)	DISTORTED	42.50	42.50
1	HEAD-LAMP (RH)	CUT	598.20	598.20
1	FRONT BUMPER CHROME (RH)	DISTORTED	89.60	89.60
1	FOG-LAMP (RH)	SERVICEABLE	145.30	-
	LESS 25% DISCOUNT		-415.23	-378.90
			1,245.67	1,136.70
	LABOUR			
	LABOUR TO DISMANTLE ,PANEL BEAT & REPLACE FRONT BUMPER AND ALL NECESSARY PARTS.		300.00	200.00
	TO PUTTY AND SPRAY PAINT.		200.00	200.00
			500.00	400.00
	GRAND TOTAL		**1,745.67**	**1,536.70**

	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**1,250.00**

Report Ref No. CS/FCI18005310/M1rd3q2

MA CHIN FOOK

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser