

Signature: *[Handwritten Signature]*

ASSIGNMENT

LOG REF: 2026/SEP

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

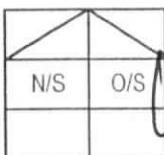
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 6 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: PA 6426 X Yr Regn: 2006 / SEP

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

Truck / Trailer or

Make: ISUZU LT134P C.C. 7790

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

Sp. Reading: 605180 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JALLT134P67000043

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: 11R 22.5

R: -

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

TOYO / YOKO or FALKEN

Front

Rear

R/Bal. 8 mm R/Bal. 8/8 mm

L/Bal. 8 mm L/Bal. 8/8 mm

D.O.A. 21/03/18 D.O.I. 11/04/18

Survey held at SC ANTU

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

RECEIVED 06 AUG 2018

Date/Time, File Pass to?

: Preli. Report

1) 06/8/18 *[Handwritten]*

: Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 6

Resurvey No. of Trip: _____

Survey Fee:

Transportation

S + RS, SI

Photos

Others

TOTAL

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)

Report Format : TP

Lump Sum / I.B.I. (\$) 2600

150

50

24

224

MOTOR SURVEY ASSIGNMENT

Date	09-04-2018	Our Ref No. D18002771MFSH
Accident Date	21-03-2018	Claim Type. Third Party
Insured Vehicle	SHC7650S	Third Party Vehicle. PA6426X
Survey Location	51 SENOKO ROAD	
Contact Person.	AELYNE LEE MEI LIN	
Contact No.	67582222/ 0	Fax No. 62576931
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	SC AUTO INDUSTRIES (S) PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	LURENE	

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/236761)



PRI Documents



Close



PRI Header Details

Claim No	D18002771MFSH	Policy No	D-18088937MFSH	Claimant S.No & Name	1 & SC AUTO
Workshop Name	SC AUTO INDUSTRIES (S) PTE LTD (Contact Person : AELYNE LEE MEI LIN)	Survey Location & Contact Details	51 SENOKO ROAD Mobile: 0 , Phone: 67582222 , Fax: 62576931 EmailId: CLAIMS@SCAUTO.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC7650S	TP Vehicle No	PA6426X
PRI Recieved Date	09-04-2018 05:27:02 PM	Surveyor Appointed Date	10-04-2018 02:57:23 PM	Surveyor Accept Date	10-04-2018 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	10-04-2018	Upload Survey Report *:	<input type="button" value="Choose File"/>
------------------------------------	----------------------	-----------------------------	------------	--------------------------------	--

Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select Year"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Remarks

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Thursday, 12 April 2018 4:47 PM
To: 'Claim Workflow System'; assignments
Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18002771MFSH/1
Attachments: CSFC18006601R1qd3.pdf

Dear Lurene,

Enclosed herewith preliminary advice of PA 6426X.

Best Regards,

Shiau Chan (Ms) | Case Handler
LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)
Sent: Tuesday, 10 April 2018 3:02 PM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18002771MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not in workshop, repairer will arrange.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | 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: Tuesday, 10 April 2018 2:58 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; LURENEJAW@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18002771MFSH/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



Auto
Consultants
Pte Ltd

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

Your Ref: D18002771MFSH

Date: 12 April 2018

Our Ref: CS/FCI18006601/R1qd3

The Motor Claims Department
First Capital Insurance Ltd

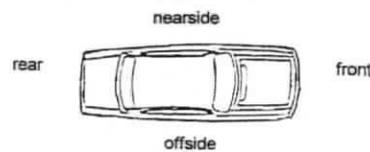
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. PA 6426X .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 11/04/2018 at the premises of M/s SC AUTO. and have the following to report:-

Workshop Estimate Amount	: <u>S\$ 7,000.50 .</u>
Revised Estimate Amount	: <u>S\$ 3,240.50 .</u>
“Check” Items Amount	: <u>S\$ - .</u>
Market Value	: <u>S\$ - .</u>
LTA Reimbursement Value	: <u>S\$ - .</u>
Nett Value	: <u>S\$ - .</u>

Description of Damage:
The vehicle sustained damages
at the o/s portion.



Yours faithfully

Rasul
Automotive Assessor

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	21/03/2018 15:35
Date Of Accident	21/03/2018 07:50
Exact Location Of Accident	PASIR PANJANG DRIVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA6426X
Insured/Policyholder	
Name Of Registered Owner	KHIM SEAH ENTERPRISE PTE LTD
Co Reg No	200206061K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67582468

Vehicle Particulars

Manufacturer	ISUZU
Model	LT134P-7.8 D (A)

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 BUS

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	P1830584
Cover Note Number	

Driver

Name of Driver	YANG WEI
Passport No/FIN	G8413589K
Date Of Birth	04/03/1979
Occupation	OUTDOOR
Date Of Driving Pass	21/12/2016
Driving Experience	1 YEAR AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82728803
Fax Number	
Contact Number	
EMail Address	NOEMAIL

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 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.
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 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
- (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:

Yangwei 21-03-18

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

[Signature]

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



SC AUTO INDUSTRIES (S) PTE LTD

51 Senoko Road, Singapore 758133

T 65 6758 2222 F 65 6257 6931

E sales@scauto.com.sg

scauto.com.sg

Co. Reg. No. 199800107D

M/S KHIM SEAH ENTERPRISE PTE LTD
 NO 71 WOODLANDS IND PARK E9
 #06-08 WAVE 9
 SINGAPORE 757048
 Insured KHIM SEAH ENTERPRISE PTE LTD
 Policy VFX/P1830584/00004

ESTIMATE Bill

GST Reg. No: 19-9800107D

Date: 9/4/2018

Our Case Ref. SC18/04/074/4KS-TP

Accident Date 21/3/2018

Damaged Vehicle No: PA6426X

S/no	Description	QTY	Price	Disc	Amount
<u>Replaced Parts</u>					
1	LUGGAGE PANEL RHS	1 PC	\$1,200.00	- R	\$1,200.00
2	ARTWORK	1 ST	\$500.00	- 350	\$500.00
3	MUDGUARD LAMP	1 PC	\$60.50	- 30	\$60.50
4	MUDGUARD RHS REAR	1 PC	\$800.00	- R	\$800.00
<u>Labour Charges</u>					
1	LABOUR FOR WIRING	1	\$80.00	- 30	\$80.00
2	SPRAY PAINTING	1	\$1,800.00	- 1200	\$1,800.00
3	LABOUR FOR RHS LUGG / MUDGUARD PORTION	1	\$2,560.00	- 1600	\$2,560.00

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:

Repair
by 9000068
6 days
P/P
11/04/18 @ 10 25
Resurvey after repair

[Signature]
 2/5/18

Sub Total \$ 7,000.50

[Signature]

 Authorised Signature



SC AUTO INDUSTRIES (S) PTE LTD

51 Senoko Road, Singapore 758133

T 65 6758 2222 F 65 6257 6931

E sales@scauto.com.sg

scauto.com.sg

Co. Reg. No. 199800107D

M/S	KHIM SEAH ENTERPRISE PTE LTD NO 71 WOODLANDS IND PARK E9 #06-08 WAVE 9 SINGAPORE 757048
Insured	KHIM SEAH ENTERPRISE PTE LTD
Policy	VFX/P1830584/00004

Final Bill

GST Reg. No:	19-9800107D
Date:	3/6/2018
Our Case Ref.	SC18/04/074/4KS-TP
Accident Date	21/3/2018

Damaged Vehicle No: PA6426X

S/no	Description	QTY	Price	Disc	Amount
<u>Replaced Parts</u>					
1	ARTWORK	1 ST	\$350.00	-	\$350.00
2	MUDGUARD LAMP	1 PC	\$60.50	-	\$60.50
<u>Labour Charges</u>					
1	LABOUR FOR WIRING	1	\$30.00	-	\$30.00
2	SPRAY PAINTING	1	\$1,200.00	-	\$1,200.00
3	LABOUR FOR RHS LUGG / MUDGUARD PORTION	1	\$1,600.00	-	\$1,600.00
Sub Total					\$ 3,240.50
Lump Sum					\$ 2,600.00
GST (7%)					\$ 182.00
Total Amount					\$ 2,782.00

Authorised Signature



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		Ref : CS/FCI18006601/R1qd3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 06-08-2018	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 7650S	Veh. Inspected	PA 6426X
Policy No.	D-18088937MFSH	Coverage (\$)	0.00
Claim No.	D18002771MFSH	Excess (\$)	0.00
Assign From	LURENE JAW	Assign Date	10/04/2018
2. Vehicle Particulars & Condition			
Make & Model	ISUZU LT134P	c.c	7790
Engine No.	HIDDEN	Year of Reg.	2006
Chassis No.	JALLT134P67000043	Colour	MULTI COLOUR
Odometer	605180	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	11 R22.5	FALKEN	8 mm
L/H Front Tyre	11 R22.5	FALKEN	8 mm
R/H Rear Tyre	11 R22.5 (D)	FALKEN	8/8 mm
L/H Rear Tyre	11 R22.5 (D)	FALKEN	8/8 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	21/03/2018	Inspection Date	11/04/2018
Survey held at	SC AUTO INDUSTRIES (S) PTE LTD 51, SENOKO ROAD #03-01 . SINGAPORE 758133		
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:		6 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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PA 6426X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	LUGGAGE PANEL RHS	TO REPAIR SEE LABOUR	1,200.00	-
1	MUDGUARD RHS REAR	TO REPAIR SEE LABOUR	800.00	-
			2,000.00	-
	<u>SPECIAL NETT ITEMS</u>			
1	MUDGUARD LAMP (SN)	BROKEN	60.50	60.50
			60.50	60.50
	<u>LABOUR</u>			
	ARTWORK.		500.00	350.00
	LABOUR FOR WIRING.		80.00	30.00
	SPRAY PAINTING.		1,800.00	1,200.00
	LABOUR FOR RHS LUGG / MUDGUARD PORTION. INCLUSIVE OF THE REPAIR OF LUGGAGE PANEL RHS AND MUDGUARD RHS REAR.		2,560.00	1,600.00
			4,940.00	3,180.00
	GRAND TOTAL		7,000.50	3,240.50
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,600.00

Report Ref No. CS/FCI18006601/R1qd3e2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.