



REF:

Surrey

## ASSIGNMENT

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 Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

85X4108C

Yr Regn:

2010, June

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

Truck / Trailer or

Make:

Subaru Forester

c.c

1994

Colour:

White

A/C: Insured / Std / NI / NA

Sp. Reading

169733

T/Radio: Insured / Std / NI / NA

Eng/No:

EJ20ED47820

C/No:

JF18H5K55A 0042333

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ Inorder / Jammed / Leaked / Burnt orBrake: ☒ Inorder / Jammed / Leaked / Burnt orModi: ☒ Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/65R16

R:

11

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

TOYO / YOKO or

Yokohama

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

27/04/2018

D.O.I.

30/04/2018

Survey held at

Teamwork Page Ubi

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

Rear N/S

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

Date / Time

Action / Instruction

Chine Teiping SSR 7792 M

07/11/2019 from H/S 2500/- into 4 days of rep (Reel 3501, 5690)

RECEIVED 08 NOV 2019

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2) sli - typist

Days Of Repair:

4

Resurvey No. of Trip:

2

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

menmen

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

2500/2

220

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	02 May 2018		02 May 2018 14:11 <a href="#">Edit Adj Rpt</a>				<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured:	RUHAIDA BINTE MOHAMAD								
Main Claimant:	CHIAN POE HONG								
Vehicle Reg. No.:	SJX4108C	Date of Loss:	27/04/2018 20:00 - :59						
Claim Type:	TP / SNM18D02200C02	Policy/Cover Note No.:	DMPCSN1644281701						
Vehicle Reg. No. (Insured):	SJR7792M	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Sharon Han - 63896]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by BRYAN TANI] ... [Final Rpt due 11/05/2018]								
Adj Asg. Remarks:	PLEASE SURVEY THIRD PARTY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLY LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NO ESTIMATE PROVIDED DURING PRE REPAIR.								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

**Catherine Chong (LKK Auto)**

---

**From:** Angie Foo <angie.foo@sg.cntaiping.com>  
**Sent:** Monday, 30 April, 2018 3:15 PM  
**To:** TEAMWORK GARAGE CLAIMS  
**Cc:** Sharon Han; assignments@lkkauto.com; 'SUR'; Admin A  
**Subject:** RE: OUR REF: SJR7792M & YR REF: SJX4108C -TO CONDUCT PRE REPAIR SURVEY SJX4108C

Without Prejudice

Dear Darren,

We refer to your email on even date.

We have appointed M/S LKK Auto Consultants Pte Ltd to survey your client's vehicle.

Please ensure that your client's vehicle is available for survey within 2 working days.

**REMARKS:**

Dear Marcus/Simon/Kalvin,

Please arrange to conduct survey, checking consistency of the damages on without prejudice.

Kindly take note, the claim handler on this case is Sharon Han 6389 6193.

Best Regards,

**Angie Foo**

Claims Executive

Claims Department – Motor Division

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Direct (65) 6389 6186

Fax (65) 6224 7175 / 6224 7478

Email: [angie.foo@sg.cntaiping.com](mailto:angie.foo@sg.cntaiping.com)

Email: [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)

Website: [www.sg.cntaiping.com](http://www.sg.cntaiping.com)



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**From:** TEAMWORK GARAGE CLAIMS [mailto:claims@teamworkgarage.com]  
**Sent:** Monday, 30 April, 2018 2:54 PM  
**To:** Angie Foo  
**Cc:** Sharon Han; claims@teamworkgarage.com  
**Subject:** RE: OUR REF: SJR7792M & YR REF: SJX4108C -TO CONDUCT PRE REPAIR SURVEY SJX4108C  
**Importance:** High

Dear Sir,

We have agreed and selected the surveyor / surveyor company proposed by you to conduct the pre-repair inspection as a single joint expert whereby the cost of the pre-repair survey carried out by single joint expert will be bear by you.

We have selected :

LKK AUTO CONSULTANCY PTE LTD

as the motor surveyor / surveyor company named in your attached list.

Kindly forward your assignment to them asap so that we can arrange for the survey with them.

\*Do get the surveyor / surveyor office to check with us on the availability of the car at the workshop before sending their surveyor down for PRI survey. We'll not be held responsible for wasted trips made to the workshop.

Darren Ng  
Teamwork Garage Pte Ltd  
53 Ubi Avenue 1  
#01-24 Paya Ubi Industrial Park  
Singapore 408934  
Tel: 68442475  
Fax: 68442474

---

**From:** Angie Foo [mailto:angie.foo@sg.cntaiping.com]  
**Sent:** Monday, April 30, 2018 1:34 PM  
**To:** CLAIMS TEAMWORK <claims@teamworkgarage.com>  
**Cc:** Sharon Han <sharon.han@sg.cntaiping.com>  
**Subject:** OUR REF: SJR7792M & YR REF: SJX4108C -TO CONDUCT PRE REPAIR SURVEY SJX4108C

WITHOUT PREJUDICE

Dear Sue,

We intend to conduct a pre-repair survey of the damage to your client's vehicle jointly with your client/your motor workshop.

We propose to use one of the following motor surveyors to conduct the joint pre-repair survey as a single joint expert.

TAY BENG HEE  
SAMUEL PHUN  
SEE CHEW SENG

MOHD FADHILAH BIN OSMAN  
DEREK OH SIONG WEE  
KALVIN ANG  
MARCUS CHUA  
SIMON HO  
LOW SAR HUEI  
HONG FOOK CHOY

Please let us know within two(2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

You may select one of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

Kindly let us hear from you.

REMARKS:

Kindly take note, the claim handler on this case is Sharon Han 6389 6193.

Best Regards,

**Angie Foo**

Claims Executive

Claims Department – Motor Division

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Direct (65) 6389 6186

Fax (65) 6224 7175 / 6224 7478

Email: [angie.foo@sg.cntaiping.com](mailto:angie.foo@sg.cntaiping.com)

Email: [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)

Website: [www.sg.cntaiping.com](http://www.sg.cntaiping.com)



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**From:** CLAIMS TEAMWORK [<mailto:claims@teamworkgarage.com>]

**Sent:** Monday, 30 April, 2018 10:34 AM

**To:** Smyth Woo; Hwang Shiang Yi; Angie Foo; Claims Dept of CTI

**Cc:** TEAMWORK - CLAIMS

**Subject:** PRE-REPAIR INSPECTION FOR SJX4108C

**Importance:** High

**WITHOUT PREJUDICE**

**OUR REF:** 1804-49

YOUR REF: SJR7792M

Dear Sir/Madam,

**PRE-REPAIR INSPECTION FOR SJX4108C  
ACCIDENT INVOLVING SJX4108C & SJR7792M ON 27.04.2018**

We refer to the above matter and enclosed herewith our client's GIA report and Notification of Pre-repair inspection for your attention.

Please let us have your list of surveyors for us to select as stated in the Practice Direction – Amendment No. 1 of 2016; Pre-action Protocol within 2 working days as of the date of our notice to you.

**Please take note: We will not entertain any of your surveyor calling us for the above inspection, without you giving us your list of surveyors for us to select by the Practice Direction of Pre-repair Inspection.**

Thank you.

Sue  
Teamwork Garage Pte Ltd  
53 Ubi Ave 1 #01-23/24  
Paya Ubi Industrial Park  
Singapore 408934  
Tel : 6844 2475  
Fax : 6844 2474

XX  
Please do not change the subject heading for easier reference. Thank you.  
XX

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This email has been scanned by the Symantec Email Security.cloud service.  
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(Draft)

MSAT18055855 / Sing Ah Tee Motor & Panel Service Pte Ltd - Pioneer  
ENTRY DATE & TIME: 28/04/2018 12:52  
SUBMITTED BY: [To Be Confirmed]

## 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 28/04/2018 12:52  
Date Of Accident 27/04/2018 20:30  
Exact Location Of Accident ALONG PIE TOWARDS PIONEER ROAD NORTH  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SJX4108C  
Insured/Policyholder  
Name Of Registered Owner CHIAN POE HONG  
NRIC No S7836831D  
Email Address CELIACHIAN@HOTMAIL.COM  
Mobile Phone No (LOCAL) +65-97645942  
Alternative Phone No Office-NOPHONE  
Vehicle Particulars  
Manufacturer SUBARU  
Model FORESTER-2.0 (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 PRIVATE CAR  
Insurance Company  
Name of Insurance Company AXA INSURANCE PTE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number GA251217  
Cover Note Number  
Driver  
Name of Driver CHIAN POE HONG  
NRIC No S7836831D  
Date Of Birth 05/12/1978  
Occupation INDOOR  
Date Of Driving Pass 30/04/1998  
Driving Experience 19 YEARS AND 11 MONTHS  
Gender FEMALE  
Mobile Number (LOCAL) +65-97645942  
Fax Number  
Contact Number OFFICE-NOPHONE  
Email Address CELIACHIAN@HOTMAIL.COM  
Address BLK 452 JURONG WEST ST 81 #03-309



Postcode	640852
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

**General Information of the Accident**

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	WET

**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
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)	2
---	---

Passenger 1	Name:	: LOW ZUN HONG
	Gender:	: Male

**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**

ON 27/04/2018 AT ABOUT 2045 HRS . WHILE I WAS TRAVELLING ALONG PIE TOWARDS PIONEER ROAD NORTH. WHEN I REACH THE ZEBRA CROSSING , HAVE PEDESTRIAN CROSSING THE ROAD. I THEN SLOW DOWN MY VEHICLE AND STOP IN FRONT THE ZEBRA CROSSING. SUDDENLY I FEEL AN IMPACT FROM MY REAR. I NOTICED THAT REAR OF MY VEHICLE COLLIDED BY VEHICLE B. NO ONE WAS INJURED .

**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**

Vehicle Registration Number	SJR7792M
-----------------------------	----------

Vehicle Make/Model/Colour

**Details Of Properties**

Vehicle Category	PRIVATE CAR
------------------	-------------

Name of Driver	MUHAMMAD NUR HIDAYAT BIN MOHD ZAKARIA
----------------	---------------------------------------

NRIC/Passport Number	S9309033J
----------------------	-----------

Contact Number

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 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.

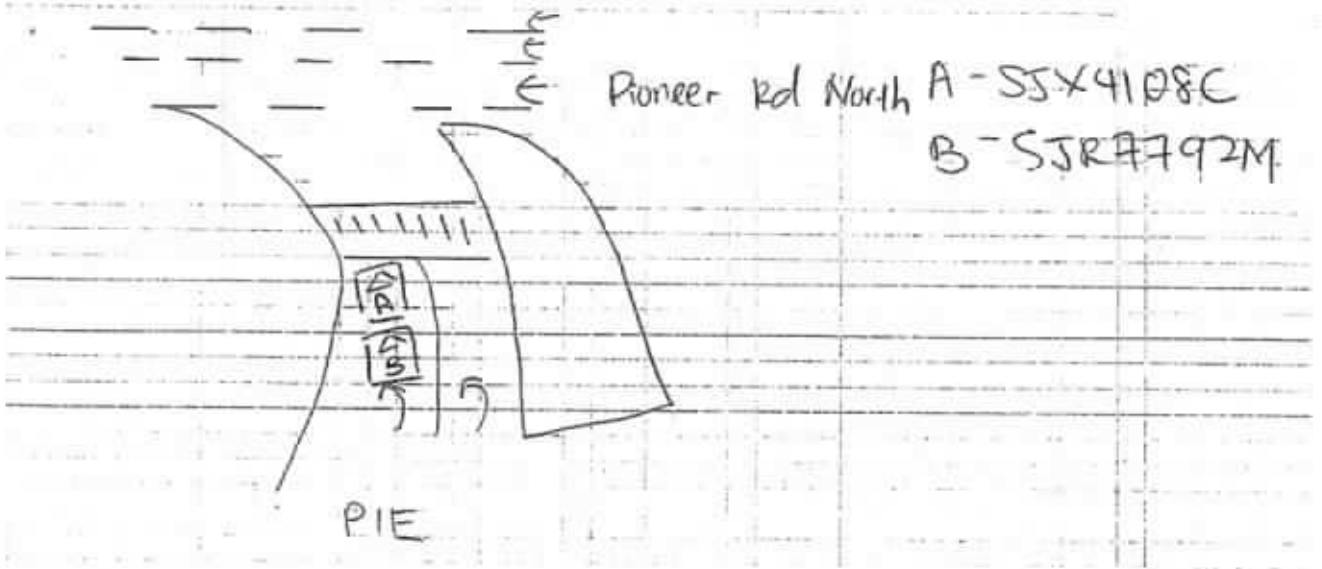
  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to circumstances

## DECLARATION

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

Policyholder's Signature  
Date & Time:

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

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

☐ Claim own policy  
☐ Claim third party  
☒ Claim OD (TP) at other workshop Team KlorK  
☐ For record purpose  
Policy No. GA 251217  
Insurer AXA Veh. No. SJX4108C



After the repair, the repairer will notify the Repairer of the following:

- To resurvey before/after repair
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis

China Taiping Insurance (Singapore) Pte Ltd  
105 Cecil Street #19-00  
The Octagon  
Singapore 069534

Acknowledged by Repairer  
Signature:  
Date:

TeamWork Garage Pte Ltd  
53 Ubi Avenue 1 #01-23/24 Spore 408934  
Paya Ubi Industrial Park  
Tel : 6844 2475  
E-mail : claims@teamworkgarage.com  
Register number : 201015366H  
3RD PARTY CLAIM ESTIMATION

Vehicle number SJX4108C  
Make / Model SUBARU/FORESTER  
Chassis number JF1SH5K55AG042333  
Accident date 27 April 2018  
Reference 1804-49

Qty Particulars Unit Price - SGD \$

PARTS REPLACEMENT - LIST ITEMS

1	REAR BUMPER <del>damaged</del>	720.30 ✓
1	REAR BUMPER TOP GARD PLATE <del>NB</del>	512.30 X
2	REAR BUMPER SIDE BRACKET <del>NB</del>	60.60 X
2	REAR BUMPER SIDE RETAINER <del>NB</del>	80.30 X
2	REAR BUMPER SIDE REFLECTOR <del>NB</del> 1/2 crack 0/2 NB	45.90 ✓ 22.95
1	REAR BUMPER REINFORCEMENT <del>Dented</del>	388.20 ✓
1	REAR BUMPER SILENCER <del>NB</del>	629.65 ✓
1	REAR EXHAUST CHROME PIPE <del>damaged</del>	98.70 ✓
1	REAR EXHAUST HEAT SHIELD <del>NB</del>	60.30 X
2	REAR EXHAUST MOUNTING <del>NB</del>	30.00 X

1859.80

1487.84

Less 20%

Subtotal

2626.25

525.25

2101.00

Balance C/F

2101.00

PARTS REPLACEMENT - SPECIAL NETT ITEMS

Balance B/F

2101.00

1 SET REAR BUMPER CLIP ~~NB~~

1 SET REAR REVERSE SENSOR ~~Dome~~

250/-

Subtotal

~~60.00~~ 30/-

~~400.00~~ 220/-

460.00

Balance C/F

2561.00

S/No

LABOUR AND MISCELLANEOUS CHARGES

Balance B/F

2561.00

- CHECK REAR WIRING AND LIGHTNING SYSTEM
- REMOVE AND REFIT REAR LINING, TRIM AND GARNISH
- REMOVE AND RENEW REAR EXHAUST ASSY
- REMOVE AND RENEW REAR REVERSE SENSOR
- PANEL BEATING ON AFFECTED AREAS
- SPRAY PAINTING ON AFFECTED AREAS
- APPLY ANTI RUST ON AFFECTED AREAS

1420.00

Subtotal

~~60.00~~ NB

~~150.00~~ 80/-

~~150.00~~ 60/-

~~100.00~~ 40/-

~~1400.00~~ 600/-

~~1200.00~~ 600/-

~~80.00~~ 40/-

3140.00

3157.84

4152500/-

Grand total

5701.00

30/04/2018 1600hr  
not Antul

1/5mm

*[Signature]*

4 days.

## 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/CT118007928/DVF3N2

Date: 08/11/2019

## REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN1644281701
Claimant Vehicle No :	SJX4108C	Insured Vehicle No :	SJR7792M
Date of Loss:	27/04/2018	Nature of Claim:	TP
		Claim No:	SNM18D02200C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	SJX4108C	Engine No:	EJ20E047820
Make & Model:	SUBARU FORESTER, 2.0 (A)	Chassis No:	JF1SH5KS5AG042333
Reg. Date:	11/06/2010 (Man. Year: 2010)	Odometer:	169733 km
Colour:	White		
Engine Capacity:	1994 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	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:	215/65R16	Rear Tyre Size:	215/65R16
Front Left Side:	Yokohama 6 mm	Rear Left Side:	Yokohama 6 mm
Front Right Side:	Yokohama 6 mm	Rear Right Side:	Yokohama 6 mm

The above values represent the remaining tyre treads depth

## COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	2,561.00	1,737.84	823.16	32.14
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,140.00	1,420.00	1,720.00	54.78
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (\$\$)</b>	<b>5,701.00</b>	<b>3,157.84</b>	<b>2,543.16</b>	<b>44.61</b>
<b>Approved Total (Overridden) (\$\$)</b>		<b>2,500.00</b>		
<b>(\$\$)</b>	5,701.00	2,500.00	3,201.00	56.15
<b>+ GST 7.00/7.00% (\$\$)</b>	399.07	175.00	224.07	56.15
<b>Nett Amount (\$\$)</b>	<b>6,100.07</b>	<b>2,675.00</b>	<b>3,425.07</b>	<b>56.15</b>

## INSPECTION

Date of Assignment:	02/05/2018	
Date Inspected:	30/04/2018 Inspected At:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park Singapore 408934

Estimated Period of Repair: 4.0 days

Adjuster: BRYAN TANI

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

## REPAIR DETAILS

## Reference

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 08 Nov 2019)
<b>Parts:</b>	M1-SUV	SUBARU FORESTER 2.0 (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SJX4108C)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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 BUMPER	Distorted	720.30 FL	*720.30 FL
2	1	*REAR BUMPER TOP GARD PLATE	No such part	512.30 FL	*- FL
3	2	*REAR BUMPER SIDE BRACKET	Not Necessary	60.60 FL	*- FL
4	2	*REAR BUMPER SIDE RETAINER	Not Necessary	80.30 FL	*- FL
5	1	*REAR BUMPER SIDE REFLECTOR	N/s Cracked/O/s Not Necessary	45.90 FL	*22.95 FL
6	1	*REAR BUMPER REINFORCEMENT	Dented	388.20 FL	*388.20 FL
7	1	*REAR BUMPER SILENCER	Bent	629.65 FL	*629.65 FL
8	1	*REAR EXHAUST CHROME PIPE	Distorted	98.70 FL	*98.70 FL
9	1	*REAR EXHAUST HEAT SHIELD	Not Necessary	60.30 FL	*- FL
10	2	*REAR EXHAUST MOUNTING	Not Necessary	30.00 FL	*- FL
11	1	*SET REAR BUMPER CLIP	Necessary	60.00 FS	*30.00 FS
12	1	*SET REAR REVERSE SENSOR	Damaged	400.00 FS	*220.00 FS

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

<b>Sub Total (S\$)</b>	<b>3,086.25</b>	<b>2,109.80</b>
<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	<b>525.25</b>	<b>371.96</b>
<b>Total Parts (S\$)</b>	<b>2,561.00</b>	<b>1,737.84</b>

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
<b>Labour Items</b>				
1	CHECK REAR WIRING AND LIGHTING SYSTEM	New	60.00	0.00
2	REMOVE AND REFIT REAR LINING,TRIM AND GARNISH	New	150.00	80.00
3	REMOVE AND RENEW REAR EXHAUST ASSY	New	150.00	60.00
4	REMOVE AND RENEW REAR REVERSE SENSOR	New	100.00	40.00
5	PANEL BEATING ON AFFECTED AREAS	New	1,400.00	600.00
6	SPRAY PAINTING ON AFFECTED AREAS	New	1,200.00	600.00
7	APPLY ANTI RUST ON AFFECTED AREAS	New	80.00	40.00
<b>Gross Labour Cost (S\$)</b>			<b>3,140.00</b>	<b>1,420.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >