

ASS. REC. BY:

REF: CS/FC118008137/Ks3b

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person): WS Lurene Jwa of FCI Date/Time: 03/05/2018 4:28pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: GV 555S Insured: SHC 769E

at Workshop m/s NGS Trading Tel: 9695 5547

of Blk 10 Amik Ind Park 2A #05-18

Policy No: Claim No: D18003768MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 05042018
(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp' 08052018 H.O.D. Endorsement:

Date/Time: 03/05/2018 5:20pm Person Contacted: Evelyn. Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	GV 555S - X
	SHC 769E - CS/ATG13016199/H11163V3 Def: 22/09/2015
10/05/18	@ 15.20pm. revised to Lurene via email.
24/5	CLP 827501 error & confirmed
25/05/18	(\$6,246.25 - \$2,750) - Reduction = 55%

REF: FCL

ASSIGNMENT

From: _____ Date: **08052018**

Estimated Cost: _____

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

To Inspect Vehicle No: **GV 555S**

at Workshop m/s: **NGS Tralling**

of: **81k 10 Amk Ind Park 2A #05-18**

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: **05** days Res.: Yes or NoLum Sum: **20** % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

4122

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: **GV 555S** Yr Regn: **05 02**

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

Truck / Trailer or

Make: **Isuzu** **NHR 69E** **3059**

Colour: **Blue** A/C: Insured / Std / NI / NA

Sp. Reading: **999999** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **JAA NHR 69E V 710 1183**

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: **185 R14 x 8**

R: **(D)**

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

TOYO / YOKO or

Front

R/Bal: **5** mm

L/Bal: **5** mm

D.O.A: **5/14/18**

Rear

R/Bal: **2 2** mm

L/Bal: **2 2** mm

D.O.I: **8/15/18**

Survey held at _____

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

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

Date / Time Action / Instruction

9/5 File pass to Customer

RECEIVED 25 MAY 2018

Date/Time, File Pass to?

25/05/18
Typist

Date/Time, File Return to?

2)



Preli. Report



Final Report

Days Of Repair: **5 days**Resurvey No. of Trip: **1**

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Survey Fee:

Transportation

) S+RQ (\$)

) Photos

) Others

TOTAL

Report Format:

Lump Sum / I.B.I: (\$ **1/5 \$ 2,750/-**)**145****50****50****18****263**

MOTOR SURVEY ASSIGNMENT

Date	09-04-2018	Our Ref No. D18002768MFSH
Accident Date	05-04-2018	Claim Type. Third Party
Insured Vehicle	SHC0769E	Third Party Vehicle. GV555S
Survey Location	BLK 10 ANG MO KIO IND PK 2A #05-18 AMK AUTOPOINT	
Contact Person.	EVELYN NG	
Contact No.	96955547/ 96955547	Fax No. 00
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	NGS TRADING	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.



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D18002768MFSH

Date: 10 May 2018

Our Ref: CS/FCI18008137/Ks3b

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

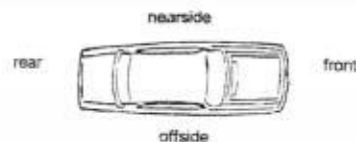
INITIAL INSPECTION REPORT OF VEHICLE NO. GV 555S .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 08/05/2018 at the premises of M/s NGS Trading and have the following to report:-

Workshop Estimate Amount	: S\$ <u>6,216.35</u> .
Revised Estimate Amount	: S\$ <u>3,976.75</u> .
"Check" Items Amount	: S\$ <u>-</u> .
Market Value	: S\$ <u>-</u> .
LTA Reimbursement Value	: S\$ <u>-</u> .
Nett Value	: S\$ <u>-</u> .

Description of Damage:

The vehicle sustained damages at the front portion.



Comments/ Present Status:

Damages Consistent.

Repair days: 5 Days

Yours faithfully,
Kenneth Kong
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 09/04/2018 11:57
Date Of Accident 05/04/2018 12:25
Exact Location Of Accident ADAM ROAD TOWARDS BUKIT TIMAH
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GV555S
Insured/Policyholder
Name Of Registered Owner TEO KIAN HOCK (CHEE CHEN) TOWING SERVICES
Co Reg No NA 41373600L
Email Address JACKIEONG95@LIVE.COM
Mobile Phone No
Alternative Phone No OFFICE-96790882
Vehicle Particulars
Manufacturer ISUZU
Model TOW TRUCK
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 COMMERCIAL VEHICLE
Insurance Company
Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage THIRD PARTY
Fleet Policy NO
Policy Number M066218/17/1000/2000
Cover Note Number
Driver
Name of Driver JACKIE ONG YOKE JIE
NRIC No S9516075A
Date Of Birth 05/05/1995
Occupation OUTDOOR
Date Of Driving Pass 06/12/2016
Driving Experience 1 YEAR AND 3 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-84488959
Fax Number
Contact Number
EMail Address JACKIEONG95@LIVE.COM

Accident Sketch Plan Pg. 1

Date	Car Plate	Tow From	To	Price	Remark
4/18	I Goh Kian Hua	0236901Z		Min OFF SHC 769 E	
	jammed brake and filter left				without looking behind to
	cause Tow-truck GVSSS				mistake and
	Knock on to me. It is my				Repair.
	I am responsible for the cause of				
	COST Min				
	Goh Kian Hua	0236901Z		Min	

NGS TRADING

50, 10 Ang Mo Kio Ind. Pk 2a #02-01 AMK AutoPoint Singapore 569047
Tel: 64815727 Fax: 64815772 Email: evelynngstrading@gmail.com
Reg No: 51105300L

QUOTATION

No. : QT-09299

FIRST CAPITAL INSURANCE LTD
MOTOR CLAIM DEPARTMENT
36 ROBINSON ROAD
#16-01 CITY HOUSE
SINGAPORE 068877

Your Ref. :
Our Ref. : QT-09299/GV55551
C. C. :
Date : 02-05-2018
Page : 1 of 2

TEL : 6507 3848

FAX : 6507 3849

*Not Withdrawn
U.S. 82750
Assess After Pain*

Description	Qty	U/ Price	Amount
		SS	SS
ACCIDENT ON 05/04/2018 @12:25 HRS INVL GV5555 & SHC769E			
<i>5 days</i>			
REPLACEMENT PARTS:-			
FRONT PANEL	1	522.00	<i>As</i> 522.00
GRILLE	1	243.00	<i>CM</i> 243.00
FRONT BUMPER	1	397.00	<i>Bu</i> 397.00
HEADLAMP RH/LH	2	313.00	<i>CM</i> 626.00
HEADLAMP LOWER GARNISH RH/LH	2	<i>NLSM</i> 126.00	252.00
HEADLAMP GARNISH TOP RH/LH	2	<i>SM</i> 131.00	262.00
CORNER PANEL LH/RH	1	182.00	<i>R</i> 182.00
SIDELAMP RH/LH	2	<i>NLSM</i> 141.00	282.00
HORN	1	65.00	<i>SM</i> 65.00
Total			2,831.00
Less 15%	1		-424.65
TO REMOVE/REPLACE A/C EVAPORATOR COIL & BLOW MOTOR & REFILL A/C GAS	1	750.00	<i>Good</i> 750.00
COILING COIL			<i>100%</i>
EXP VALVE			
DRIER			
HOSE 2 PCS			
NO PLATE C/W CASING	1	50.00	<i>nd</i> 50.00
DOOR STICKER 'COMPANY REG'	1	50.00	<i>nd</i> 50.00
BODY STICKER 'TED KIAN HOCK TOWING SERVICES'	<i>nd</i> 1	<i>120%</i> 280.00	280.00
REMOVE ALL NECESSARY DAMAGED PARTS WITH ALL NECESSARY COMPONENT/ATTACHMENT.	1	1,600.00	<i>Good</i> 1,600.00

NGS TRADING

Blk 10 Ang Mo Kio Ind. Pk 2n #02-01, AMK AutoPoint Singapore 568047
Tel: 64815727 Fax: 64815772 Email: evelynngstrading@gmail.com
Reg No: 51106300L

QUOTATION

No. : QT-09299

FIRST CAPITAL INSURANCE LTD
MOTOR CLAIM DEPARTMENT
36 ROBINSON ROAD
#16-01 CITY HOUSE
SINGAPORE 068877

Your Ref. :
Our Ref. : QT-09299/GV55551
C. C. :
Date : 02-05-2018
Page : 2 of 2

TEL : 6507 3848 FAX : 6507 3849

Description	Qty	U/ Price	Amount
		S\$	S\$
WITH ALL NECESSARY COMPONENT/ATTACHMENT: STARIGHTEN CHASSIS MEMBER REPAIR/RESHARE DENTED BODY PANEL REPLACE DAMAGED PART, REFIT INTO POSITIO			
TO SPRAY PAINT REPLACE/REPAIR BODY PART	1	750.00	750.00
REMOVE DASHBOARD TO ENABLE CUT/WELD FRNT PANEL	1	280.00	280.00
CHECK WIRING & LIGHT FUNCTION	1	50.00	50.00

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:

Any other parts which necessitate repair or renewal will incur additional charged.
Please contact our Ms Evelyn @ HP 96955547 to arrange for survey. Thank you.

Total 6,216.35

Yours faithfully,



Administrator



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/FCI18008137/Ks3be2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 30-05-2018



Code : FCI2

Policy Particulars :- THIRD PARTY CLAIM

1.	Insured Veh.	SHC 769E	Veh. Inspected	GV 555S
	Policy No.		Coverage (\$)	0.00
	Claim No.	D18002768MFSH	Excess (\$)	0.00
	Assign From	LURENE JAW	Assign Date	03/05/2018

Vehicle Particulars & Condition

2.	Make & Model	ISUZU NHR69E	c.c	3059
	Engine No.	HIDDEN	Year of Reg.	2002
	Chassis No.	JAANHR69EY7101183	Colour	BLUE
	Odometer	999999	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		

Conditions of Tyres

3.		Size	Make	Balance
	R/H Front Tyre	185 R14X8	MICHELIN	5 mm
	L/H Front Tyre	185 R14X8	MICHELIN	5 mm
	R/H Rear Tyre	185 R14X8 (D)	MICHELIN	2/2 mm
	L/H Rear Tyre	185 R14X8 (D)	MICHELIN	2/2 mm

Description of Damages

4.	THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.
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General Information

5.	Accident Date	05/04/2018	Inspection Date	08/05/2018
	Survey held at	BLK 10 AMK IND PK 2A #05-18		
	Repairer	NGS TRADING		

Remarks

5a.	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.
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Estimate Days of Repair

5b.	ESTIMATED NORMAL PERIOD FOR REPAIR:	5 Working Days
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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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GV 555S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT PANEL	BENT	522.00	522.00
1	GRILLE	CRACKED	243.00	243.00
1	FRONT BUMPER	BUCKLED	397.00	397.00
2	HEADLAMP RH / LH @\$313.00	CRACKED	626.00	626.00
2	HEADLAMP LOWER GARNISH RH / LH @\$126.00	N/S CRACKED	252.00	126.00
2	HEADLAMP GARNISH TOP RH / LH @\$131.00	SERVICEABLE	262.00	-
2	CORNER PANEL LH / RH	TO REPAIR SEE LABOUR	182.00	-
2	SIDELAMP RH / LH @\$141.00	N/S CRACKED	282.00	141.00
1	HORN	SERVICEABLE	65.00	-
	LESS 15% DISCOUNT		-424.65	-308.25
			2,406.35	1,746.75
<u>SPECIAL NETT ITEMS</u>				
1	NO PLATE C/W CASING (SN)	DENTED	50.00	20.00
1	DOOR STICKER 'COMPANY REG' (SN)	NECESSARY	50.00	30.00
1	BODY STICKER "TEO KIAN HOCK TOWING SERVICES" (SN)	NECESSARY	280.00	120.00
			380.00	170.00
<u>LABOUR</u>				
	TO REMOVE / REPLACE A/C EVAPORATOR COIL & BLOW MOTOR & REFILL A/C GAS, COILING COIL, EXP VALVE, DRIER, HOSE 2 PCS.		750.00	100.00
	REMOVE ALL NECESSARY DAMAGED PARTS WITH ALL NECESSARY COMPONENTS / ATTACHMENT. WITH ALL NECESSARY COMPONENT / ATTACHMENT.		1,600.00	600.00
	STRAIGHTEN CHASSIS MEMBER REPAIR / RESHARE DENTED BODY PANEL. REPLACE DAMAGED PART, REFIT INTO POSITION. INCLUSIVE OF THE REPAIR OF CORNER PANEL LH / RH.		750.00	600.00
	TO SPRAY PAINT REPLACE / REPAIR BODY PART.		280.00	240.00
	REMOVE DASHBOARD TO ENABLE CUT / WELD FRT PANEL.			

Report Ref No. CS/FCI18008137/Ks3be2



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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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	CHECK WIRING & LIGHT FUNCTION.		50.00	20.00
			3,430.00	1,560.00
	GRAND TOTAL		6,216.35	3,476.75
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,750.00

Report Ref No. CS/FC118008137/Ks3be2

KONG SENG CHEONG

Licensed Appraiser

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