

22/03/2002

ASS. REC. BY:

REF: CS/FCI18008983/Srd3/22

Special Instruction:

Surveyor: Sebastian
aws

ASSIGNMENT (Office)

From (Person): Eileen lee

of

FCI

Date/Time:

17/5/18 @ 12.24pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKQ 5974L

Insured:

SHC 8318X

at Workshop m/s

Hua Hong, Private limited

Tel:

6661 9688

of

25 D Sungei Kadut Street 1

Policy No:

Claim No:

D18003931MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

15/05/2018

CA / REV / REP. / REV 24 HRS

'wp'21/05/2018 @ 10am

H.O.D. Endorsement:

Date/Time:

2.05pm @ 17/5/18

Person Contacted:

YvonneVehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>SKQ 5974L - X</u>
	<u>SHC 8318 X</u>
<u>7/11/18</u>	<u>Confirm \$1,118.28 @ 1 days with Asley</u>
	<u>(Red. 8 127.88, 10%.)</u>

REF: FCI

ASSIGNMENT

From Date: 21052018

Estimated Cost:

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

To inspect Vehicle No:

SKU 5974L

at Workshop m/s

Hua Hong

of

25D Sungai Kuitoh St 1

Insured:

Policy No:

Claims No:

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

10am

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

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value:

IDAC Accident Report:

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 WPI

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SKA 5974L

Yr Regn:

3/8/12

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

Truck / Trailer or

Make:

Toyota Altis

CC 1598

Colour:

Silver

A/C:

Insured / Std / NI / NA

Sp Reading:

39044

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MR 053REE 104137391

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: 195/65R15

R: 11

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

TOYO / YOKO or

Fellow

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

15/5/18

D.O.I.

21/5/18

Survey held at

Hua Hong

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

N/S

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

Date / Time

Action / Instruction

RECEIVED 12 NOV 2018

Date/Time: File Pass to?



Preli. Report

i) Typist



Final Report

Date/Time: File Return to?

Days Of Repair:

1

Resurvey No. of Trip:

1

Survey Fee:

100

Transportation

50

) \$ + P.S. \$

50

) Chassis

21

) + Pass

) +

TOTAL

221

Add Fee:



Site Insp (\$



Interview (\$



Tech Insp (\$



Workshop (\$

Report Format:

TP

Lump Sum / L.B. \$

1118.28

MOTOR SURVEY ASSIGNMENT

Date	16-05-2018	Our Ref No. D18003931MFSH
Accident Date	15-05-2018	Claim Type. Third Party
Insured Vehicle	SHC8318X	Third Party Vehicle. SKQ5974L
Survey Location	25D SUNGEI KADUT STREET 1	
Contact Person.	YVONNE TOH	
Contact No.	66619688/ 66619688	Fax No. 66619699
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
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	HUA HONG PRIVATE LIMITED	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	EILEEN LEE	

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/240427)



PRI Documents



Close



PRI Header Details

Claim No	D18003931MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & HUA HON
Workshop Name	HUA HONG PRIVATE LIMITED (Contact Person : YVONNE TOH)	Survey Location & Contact Details	25D SUNGEI KADUT STREET 1 Mobile: 66619688 , Phone: 66619688 , Fax: 66619699 EmailId: YVONNE@HUAHONG.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC8318X	TP Vehicle No	SKQ5974L
PRI Recieved Date	17-05-2018 12:18:43 AM	Surveyor Appointed Date	17-05-2018 12:23:24 PM	Surveyor Accept Date	17-05-2018 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	17-05-2018	Upload Survey Report *:	<input type="button" value="Choose File"/>
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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	<input type="text"/>	<input type="button" value="Save"/>
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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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18008983/Srd3

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 17-05-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHC 8318X	Veh. Inspected	SKQ 5974L
Policy No.		Coverage (\$)	0.00
Claim No.	D18003931MFSH	Excess (\$)	0.00
Assign From	CWS (EILEEN LEE)	Assign Date	17/05/2018

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	15/05/2018	Inspection Date
Survey held at	HUA HONG PTE LTD 25D SUNGEI KADUT STREET 1 SINGAPORE 729332	

5a. Remarks

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

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:

Owner ID:

Vehicle Details

Vehicle No.:

Vehicle to be Exported:

Intended De-registration Date:

Vehicle Make:

Vehicle Model:

Primary Colour:

Manufacturing Year:

Engine No.:

Chassis No.:

Maximum Power Output:

Open Market Value:

Original Registration Date:

First Registration Date:

Transfer Count:

Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Rebate Amount:

Total Rebate Amount:

Message

This vehicle is eligible for pro-rated COE when it is converted from COE-exempted to non COE-exempted status. The COE is pro-rated to the number of years for the vehicle to be 10 years old, subject to a minimum of 5 years. Please call our Customer Service Hotline at 1800-CALL LTA (1800-2255 582) for further details.

The information contained herein is correct as at 15 May 2018

Foreign Passport Country/Region: United States of America
27048

SKQ5974L

Yes

15 May 2018

TOYOTA

COROLLA ALTIS 1.6 AUTO

Silver

2012

1ZRX195789

MR053REE104137391

90.0 kW (120 bhp)

\$15,101.00

03 Aug 2012

03 Aug 2012

2

\$0.00

Yes

02 Aug 2022

\$0.00

\$0.00

\$0.00

OK

MV 6K - 7K

lmi

9/11/18



CLAIMS ASSISTANCE UNIT

NTUC Income 24 hr Hotline: 6788 6616
www.income.coop/claims

1. Goal:

If you have a potential insurance claim against us, our goal is to assist you to reach a prompt and fair settlement. Please report to us immediately and we will appoint a field officer to meet and continually assist you.

We will assist you in the following cases:

- motor property and injury claims
- workmen compensation and public liability claims
- fire and other property damage claims
- health and life claims

2. Payment / Compensation:

- We will assist you by providing all necessary information on your claim to our claims officers to enable them to decide to pay urgent general damages, medical expenses, loss of wages and for immediate expenses in cases of fire or property damage. The field officers will be different persons from the claims officers.

3. Liability:

- Any dispute relating to liability or quantum will be referred to an independent adjudicator or a medical expert. The expert will provide us an independent and impartial report. This is to protect your interest in your claim against us. The compensation offered will be in line with past Court's awards for similar injuries.

- Advance or Interim payments can be made if the issue of liability is not resolved or is pending.

4. Lawyers or legal representation:

- As far as possible, you must give us your full co-operation to reach a fair settlement rather than engage a lawyer. Legal representations might prolong and delay settlements. If you still need legal assistance, we will advise you.

5. Service Quality:

- Please provide the feedback on the service provided by our field officer in the form provided.
- If you find our service unsatisfactory, you can call our service quality manager at 6877 3469.

If you have any queries, please call our hotline at 6788 6616 or email cl@income.com.sg.

Motor Department
NTUC Income

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	15/05/2018 17:16
Date Of Accident	15/05/2018 12:20
Exact Location Of Accident	ALONG SEMBAWANG WAY (NEAR MRT TAXI STAND)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ5974L
Insured/Policyholder	
Name Of Registered Owner	PAUL CHRISTOPHER GRGAS
Passport No/FIN	427527048
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94880121
Alternative Phone No	OTHERS-67502565

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	GA114163/1
Cover Note Number	

Driver

Name of Driver	GRGAS MASAKO
Passport No/FIN	TZ1186628
Date Of Birth	20/11/1961
Occupation	INDOOR
Date Of Driving Pass	05/09/2016
Driving Experience	1 YEAR AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94880121
Fax Number	
Contact Number	
Email Address	GRGASP@MSN.COM

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

General Information of the Accident

Type Of Accident COLLISION - OPENING DOOR OF VEHICLE
 Weather Conditions CLEAR
 Road Surface DRY

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) 2
 Passenger 1
 NAME: : JASMINE
 GENDER: : FEMALE

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

AS PER 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 SHC8318X
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category TAXI
 Name of Driver LOW PAK SUM
 NRIC/Passport Number S1590266C
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

SKETCH PLAN

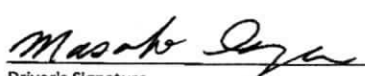
IMPORTANT NOTICE

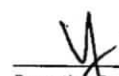
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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:

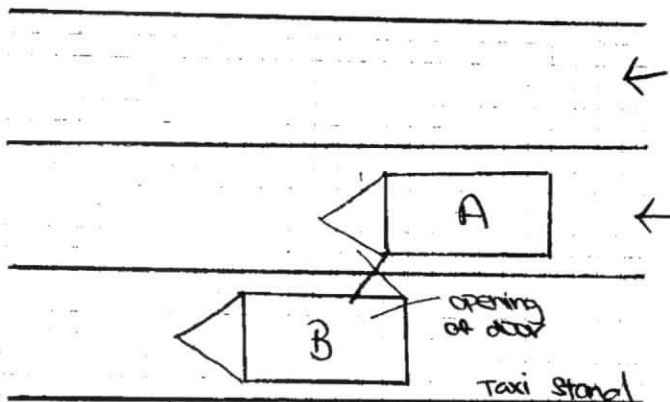
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

B → 8HC 8318 X



Accident Date & Time : 15 May 2018 , 12.20 pm

Accident Location : Along Sembawang Way (Sembawang MRT Taxi Stand)

I was travelling straight along the above mentioned. Suddenly, the rear RH door of veh B swunged open and hit onto my vehicle.

☐ Reporting Only ☐ Own Damage ☒ Third Party ☐ Claim at other workshop (OD/TP)

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

*** IMPORTANT NOTE:**
You had been advised by the workshop that in the event that you wish to claim against your own policy (Own Damage Claim), there is a **FOURTEEN (14) days** clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Date & Time:

Driver's Signature _____
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



HUA HONG PRIVATE LIMITED

25D Sungei Kadut Street 1 Singapore 729332
Tel: (65) 6661 9688 Fax: (65) 6661 9699 Email: info@huahong.com.sg

Estimate Repair List

17 May 2018

HHTPClaims18-41

First Capital Insurance Limited
36 Robinson Road
#16-01 City House
Singapore 068877

Attn: Motor Claims Department

ACCIDENT INVOLVING SKQ 5974 L & SHC 8318 X ON 15/5/2018 ALONG SEMBAWANG WAY (NEAR MRT TAXI STAND) AT ABOUT 1220 HOURS

Insured : PAUL CHRISOPHER GRGAS
Vehicle Registration No : SKQ 5974 L
Vehicle Make : TOYOTA
Vehicle Model : COROLLA ALTIS 1.6 AUTO
Vehicle Chassis No : MR053REE104137391
Policy No : GA114163/1
Date of Accident : 15/5/2018

Type of Claim: Third Party

S/N	Quantity	Description	Unit Price S\$	Amount S\$
1	1	Front Side Mirror (LH) Complete / CRK		\$ 1,157.70
			Less 20%	\$ (231.54) Δ
			25%	\$ 926.16
		To dismantle RH door trim to change RH side mirror.	150	\$ 200.00
		To perform wire checking. ✓		\$ 20.00
		To spray RH side mirror cover.	80	\$ 100.00
				\$ 1,246.16
		7% GST		\$ 87.23
		Total		\$ 1,333.39

Sebastian
21/5/18

- Part by part repair.
- Photo Before Paint.

90036121

sebastianyeang@lkkauto.com

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:

Authorised by Claims Dept.
Mrs Tan @ 9639 9195



Janice Lee (LKKAUTO)

From: Ashley Tan <ashley@huahong.com.sg>
Sent: Friday, November 09, 2018 4:13 PM
To: Janice Lee (LKKAUTO)
Subject: RE: Finalization for Vehicle No. SKQ5974L

Hi Janice

Confirmed \$1,118.28 (before GST).

Thanks & Regards

Ashley Tan



HUA HONG PRIVATE LIMITED
25D SUNGEI KADUT STREET 1 SINGAPORE 729332
T. 6661 9690 | M. 9816 4151 | F. 6661 9699
Follow us @ huahong.com.sg



From: Janice Lee (LKKAUTO) <JaniceLee@lkkauto.com>
Sent: Friday, 9 November 2018 3:44 PM
To: Ashley Tan <ashley@huahong.com.sg>
Subject: RE: Finalization for Vehicle No. SKQ5974L

Resent.

Kindly confirm \$1,118.28 @ 1 days

P1arts less 25%

Thank you.

Best Regards,

Jannice Lee (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: janicelee@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Janice Lee (LKKAUTO)
Sent: Friday, November 09, 2018 3:40 PM
To: 'Ashley Tan' <ashley@huahong.com.sg>
Subject: RE: Finalization for Vehicle No. SKQ5974L

Dear Ashley,



CLAIMS ASSISTANCE UNIT

NTUC Income 24 hr Hotline: 6788 6616
www.income.coop/claims

1. Goal:

If you have a potential insurance claim against us, our goal is to assist you to reach a prompt and fair settlement. Please report to us immediately and we will appoint a field officer to meet and continually assist you.

We will assist you in the following cases:

- motor property and injury claims
- workmen compensation and public liability claims
- fire and other property damage claims
- health and life claims

2. Payment / Compensation:

- We will assist you by providing all necessary information on your claim to our claims officers to enable them to decide to pay urgent general damages, medical expenses, loss of wages and for immediate expenses in cases of fire or property damage. The field officers will be different persons from the claims officers.

3. Liability:

- Any dispute relating to liability or quantum will be referred to an independent adjudicator or a medical expert. The expert will provide us an independent and impartial report. This is to protect your interest in your claim against us. The compensation offered will be in line with past Court's awards for similar injuries.

- Advance or Interim payments can be made if the issue of liability is not resolved or is pending.

4. Lawyers or legal representation:

- As far as possible, you must give us your full co-operation to reach a fair settlement rather than engage a lawyer. Legal representations might prolong and delay settlements. If you still need legal assistance, we will advise you.

5. Service Quality:

- Please provide the feedback on the service provided by our field officer in the form provided.
- If you find our service unsatisfactory, you can call our service quality manager at 6877 3469.

If you have any queries, please call our hotline at 6788 6616 or email cl@income.com.sg.

Motor Department
NTUC Income



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

MS FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18008983/Srd3e2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 16-11-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHC 8318X	Veh. Inspected	SKQ 5974L
Policy No.	D-18088936MFSH	Coverage (\$)	0.00
Claim No.	D18003931MFSH	Excess (\$)	0.00
Assign From	EILEEN LEE	Assign Date	17/05/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA ALTIS	c.c	1598
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	MR053REE104137391	Colour	SILVER
Odometer	39044	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	6 mm
L/H Front Tyre	195/65 R15	FALKEN	6 mm
R/H Rear Tyre	195/65 R15	FALKEN	6 mm
L/H Rear Tyre	195/65 R15	FALKEN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	15/05/2018	Inspection Date	21/05/2018
Survey held at	HUA HONG PTE LTD 25D SUNGEI KADUT STREET 1 SINGAPORE 729332		

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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	1 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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKQ 5974L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REPLACEMENT OF PARTS	CRACKED		
	FRONT SIDE MIRROR (LH) COMPLETE		1,157.70	1,157.70
	LESS 20% DISCOUNT		-231.54	-
	LESS 25% DISCOUNT		-	-289.42
			926.16	868.28
	LABOUR			
	TO DISMANTLE RH DOOR TRIM TO CHANGE RH SIDE MIRROR.		200.00	150.00
	TO PERFORM WIRE CHECKING.		20.00	20.00
	TO SPRAY RH SIDE MIRROR COVER.		100.00	80.00
			320.00	250.00
GRAND TOTAL			1,246.16	1,118.28
RECOMMENDED COST OF REPAIRS				1,118.28

Report Ref No. CS/FCI18008983/Srd3e2

YEANG WAI KEEN

Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

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