

ASS. REC. BY:

REF: CS/FCI18011306 | D9d3n2 Special Instruction:

Surveyor:

CWS

ASSIGNMENT (Office)

From (Person): Karen Tan of FCI Date/Time: 21/6/18 @ 5.18pm

Estimated Cost: Bill to:

OD (TI) / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SHH 4296C Insured: SHD 3626J

at Workshop m/s World Auto Tel: 6362 1776

of No. 1 Kranji Loop

Policy No: Claim No: D18004910MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 19/06/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS (up) 22/06/2018 H.O.D. Endorsement:

Date/Time: 5.18pm @ 21/6/18 Person Contacted: Ainee Vehicle: (IN) OUT

Date/Time	Action/Instruction ( ) Estimate
	SHH 4296C - CS/MSG17000950/Kqbn2 DOA: 18/12/2016
	SHD 3626J - CS/FCI10025269/Rvkl DOA: 02/12/2010
21/6/18 @ 11.45am	Sam revised to Karen Tan by email.
21/6/18	Sathya had finalised final fig @ 1550, 3 days. (Red \$1080, 413)

REF: FCI

ASSIGNMENT

From: \_\_\_\_\_ Date: **22/06/18**

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: **SLH 4296 C**

at Workshop m/s: **World Auto**

of: **No. 1 Krunji loop**

Insured: \_\_\_\_\_

Policy No: \_\_\_\_\_

Claims No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

Veh No: **SLH 4296 C** Yr Regn: **NOV / 2016**

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

Make: **Honda Shuttle** C.C: **1496**

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

Sp. Reading: **116303** T/Radio:  Insured /  Std /  NI /  NA

Eng/No: **LEB4263308**

C/No: **GP71043436**

Gen. Cond:  Good /  Fair /  Poor /  Burnt

Steering:  In order /  Jammed /  Leaked /  Burnt or

Brake:  In order /  Jammed /  Leaked /  Burnt or

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

Tyre Size: F: **185/60 R15**  
R: **185/60 R15**

N/S	O/S

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

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or **Giti (Rear), Pirelli (Front)**

Front		Rear	
R/Bal.	<b>6</b> mm	R/Bal.	<b>6</b> mm
L/Bal.	<b>6</b> mm	L/Bal.	<b>6</b> mm
D.O.A.	<b>19/6/2018</b>	D.O.I.	<b>22/6/2018</b>
Survey held at	<b>World Auto</b>		
Des. of Damages:	Frt / <input checked="" type="checkbox"/> Rear / <input checked="" type="checkbox"/> O/S / <input type="checkbox"/> N/S / <input type="checkbox"/> U/C / <input type="checkbox"/> Rooftop or <b>O/S Rear</b>		

CA / REV / REP. / 24 HRS **(up)**

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle:  IN /  OUT

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

Date / Time	Action / Instruction

RECEIVED 25 JUL 2018

Date/Time File Pass to?  : Preli. Report

**11/7/18**  : Final Report

Date/Time File Return to? \_\_\_\_\_

Report Format: **TP**

Lump Sum / I.B.T. (\$) **6550**

Days Of Repair: **3**

Resurvey No. of Trip: \_\_\_\_\_

Add Fee:  Site Insp (\$)  Interview (\$)  Tech. Invs (\$)  Weekend (\$)

Survey Fee: \_\_\_\_\_

Transportation \_\_\_\_\_

Photos \_\_\_\_\_

Other \_\_\_\_\_

110
50
16
<b>176</b>

TOTAL



Auto  
Consultants  
Pte Ltd

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

Your Ref: D18004910MFSH

Date: 27 June 2018

Our Ref: CS/FCI18011306/Vqd3

The Motor Claims Department  
First Capital Insurance Ltd

Dear Sir/Madam,

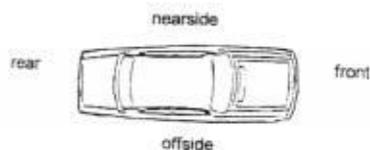
**INITIAL INSPECTION REPORT OF VEHICLE NO. SLH 4296C**

Please be informed that we had conducted the inspection of the abovementioned vehicle on 22/06/2018 at the premises of M/s WORLD AUTO, and have the following to report:-

Workshop Estimate Amount	: S\$ <u>2,630.00</u>
Revised Estimate Amount	: S\$ <u>1,550.00</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 o/s rear portion.



Yours faithfully

Sathya Sai  
Automotive Assessor

**MOTOR SURVEY ASSIGNMENT**

<b>Date</b>	21-06-2018	<b>Our Ref No.</b> D18004910MFSH
<b>Accident Date</b>	19-06-2018	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHD3626J	<b>Third Party Vehicle.</b> SLH4296C
<b>Survey Location</b>	NO.1, KRANJI LOOP	
<b>Contact Person.</b>	AINEE	
<b>Contact No.</b>	64513933/ 0	<b>Fax No.</b> 64557576
<b>Survey Type</b>	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	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**

<b>Cc : Workshop</b>	WORLD AUTO PTE LTD	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	NA	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	KARENT	

**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/241667)



PRI Documents



Close



## PRI Header Details

<b>Claim No</b>	D18004910MFSH	<b>Policy No</b>	D-18088936MFSH	<b>Claimant S.No &amp; Name</b>	1 & WORLD A
<b>Workshop Name</b>	WORLD AUTO PTE LTD (Contact Person : AINEE)	<b>Survey Location &amp; Contact Details</b>	NO.1, KRANJI LOOP <b>Mobile:</b> 0 , <b>Phone:</b> 64513933 , <b>Fax:</b> 64557576 <b>EmailId:</b> AINEE31@WORLDAUTO.COM.SG		
<b>Our Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	<b>Instructions To Surveyor</b>	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM		
<b>Insured Name</b>	COMFORT TRANSPORTATION PTE LTD	<b>Insured Vehicle No</b>	SHD3626J	<b>TP Vehicle No</b>	SLH4296C
<b>PRI Recieved Date</b>	21-06-2018 06:21:16 PM	<b>Surveyor Appointed Date</b>	21-06-2018 05:17:29 PM	<b>Surveyor Accept Date</b>	21-06-2018 0

## Survey Report Upload

<b>Surveyor Inspection Date *:</b>	<input type="text"/>	<b>Surveyor Report Date</b>	21-06-2018	<b>Upload Survey Report *:</b>	<input type="button" value="Choose File"/>
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## Vehicle Particulars

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

## Multiple Documents Upload

File Name

Action

## Surveyor Job Remarks

Remarks

## Shiau Chan (LKKAuto)

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**From:** Shiau Chan (LKKAuto)  
**Sent:** Wednesday, 27 June 2018 11:45 AM  
**To:** 'Claim Workflow System'; assignments  
**Cc:** KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR  
**Subject:** RE: SURVEY ASSESSMENT - D18004910MFSH/1  
**Attachments:** CSFCI18011306Vqb.pdf

Dear Karen,

Enclosed herewith preliminary advice of SLH 4296C.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [sjewsc@lkkauto.com](mailto:sjewsc@lkkauto.com) | fax: 6256-4315

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

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**From:** Admin-D (LKKAuto)  
**Sent:** Thursday, 21 June 2018 5:20 PM  
**To:** 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>  
**Subject:** RE: SURVEY ASSESSMENT - D18004910MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS,

**G.Nivitha** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto: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:** Thursday, 21 June 2018 5:17 PM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** [CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG](mailto:CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG); [KARENTAN@MSFIRSTCAPITAL.COM.SG](mailto:KARENTAN@MSFIRSTCAPITAL.COM.SG)  
**Subject:** PRI: SURVEY ASSESSMENT - D18004910MFSH/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  
Motor Claims Department  
MS First Capital Insurance Limited

# WORLD AUTO PTE LTD

47 Jalan Pemimpin #01-02/03  
 Halcyon 2, S'pore 577200  
 Tel No. : 6451 3933 Fax No. : 6455 7576  
 E-Mail : worldaut@singnet.com.sg  
 Website : www.worldauto.com.sg  
 Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

1150  
 - 20%  
 -----  
 920  
 + 30  
 + 600  
 -----  
 1550

\$ 1550 @ 3 days  
 confirmed.

FIRST CAPITAL INSSURANCE LIMITED  
 80 ROBINSON RD #09-02/03  
 068898

Estimate : ES000186

Date : 21/06/2018  
 Vehicle Num. : SLH 4296C (LCR)  
 Make/Model : HONDA SHUTTLE HYBRID  
 Chassis/Eng# :  
 Accident Date : 20/06/2018  
 Claim No. :  
 Reference :  
 Policy No. :

Attention : Motor Claim Department  
 Contact : 6222 2311 Fax No. : 6222 3547

S/N	Quantity	Particular	Unit Price	Amount S\$
LIST ITEMS :				
1.	1	REAR BUMPER ✓cut		1,150.00
2.	1	REAR BUMPER REFLECTOR GARNISH RH X		130.00
3.	1	REAR BUMPER REFLECTOR LENS RH X } NN		120.00
List TotalS\$ :				1,400.00
20.00% Discount S\$ :				280.00
				-----
				1,120.00
SPECIAL NETT ITEMS :				
1.	1	REAR BUMPER CLIP ✓NEC		50.00 30
Special Nett Total S\$ :				-----
				50.00
LABOUR :				
LABOUR TO REMOVE ACCIDENT DAMAGED PARTS IN ORDER TO REPAIRS INCLUDING PANEL BEAT, CUT/WELD, STRAIGHTEN PANEL WHERE NECESSARY & REPLACE ABOVE PARTS.				760.00 400
PUTTY & SPRAY PAINT ALL AFFECTED AREAS (INNER/ OUTER)				700.00 200
Labour Total S\$ :				-----
				1,460.00

E. & O.E.

Total S\$ :

2,630.00

Sathya Sai @ lkkauto.com

3 days

for WORLD AUTO PTE LTD

Sathya Sai  
 22/6/2018  
 98072012

  
 21/6/18

- Part by Part repair  
 - photo before paint.

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:



## 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/FCI18011306/Dqd3n2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 01-08-2018	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHD 3626J	Veh. Inspected	SLH 4296C
Policy No.	D-18088936MFSH	Coverage (\$)	0.00
Claim No.	D18004910MFSH	Excess (\$)	0.00
Assign From	KARENT	Assign Date	21/06/2018
2. Vehicle Particulars & Condition			
Make & Model	HONDA SHUTTLE	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	GP71043436	Colour	SILVER
Odometer	116303	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	185/60 R15	PIRELLI	6 mm
L/H Front Tyre	185/60 R15	PIRELLI	6 mm
R/H Rear Tyre	185/60 R15	GITI	6 mm
L/H Rear Tyre	185/60 R15	GITI	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	19/06/2018	Inspection Date	22/06/2018
Survey held at	NO.1 KRANJI LOOP		
Repairer	WORLD AUTO PTE LTD		
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

Page No.:1 of 1

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLH 4296C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	CUT	1,150.00	1,150.00
1	REAR BUMPER REFLECTOR GARNISH RH	NOT NECESSARY	130.00	-
1	REAR BUMPER REFLECTOR LENS RH	NOT NECESSARY	120.00	-
	LESS 20% DISCOUNT		-280.00	-230.00
			1,120.00	920.00
<b>SPECIAL NETT ITEMS</b>				
1	REAR BUMPER CLIP (SN)	NECESSARY	50.00	30.00
			50.00	30.00
<b>LABOUR</b>				
	LABOUR TO REMOVE ACCIDENT DAMAGED PARTS IN ORDER TO REPAIRS INCLUDING PANEL BEAT,CUT/WELD,STRAIGHTEN PANEL WHERE NECESSARY & REPLACE ABOVE PARTS.		760.00	400.00
	PUTTY & SPRAY PAINT ALL AFFECTED AREAS (INNER/OUTER).		700.00	200.00
			1,460.00	600.00
<b>GRAND TOTAL</b>			<b>2,630.00</b>	<b>1,550.00</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>1,550.00</b>

Report Ref No. CS/FCI18011306/Dqd3n2

ANG BRYAN TANI

Automotive Assessor / Investigator

ADRIAN LING WAI PING

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

Licensed Appraiser

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