

ASS. REC. BY:

REF: cs/FCI18011392/ R1 rd307 Special Instruction:

Surveyor:

CWS

ASSIGNMENT (Office)From (Person): Lurene juwof FCIDate/Time: 21/6/18 @ 6:05pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SID 8567R

Insured:

SHC 0729X

at Workshop m/s

Auto France

Tel:

64777364

of

305 Alexandra Road

Policy No:

Claim No:

D18604690MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

10/06/2018

CA / REV / REP. / REV 24 HRS

CDS)

Date/Time: 22/6/18 @ 9:05am

Person Contacted:

Kaviridhaa

H.O.D. Endorsement:

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>SID 8567R-x</u>
	<u>SHC 729X - cs/FCI18009716 / Ugd 3n2</u>
	<u>DOA: 24/5/2018</u>
	<u>Revert thru email.</u>
	<u>Confirm \$8735.20 @ 6 days</u>
	<u>Decl: \$3115.60, 26/</u>

Surveyor: Pasan

22954

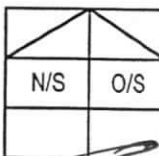
ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SLO 8567R
 at Workshop m/s Auto From IG
 of 305 MAXIMUS
 Insured: FCI
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

Guo XIANH

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: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLO 8567R Yr Regn: 2016 / Jun
 Type: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: PEUGEOT 5008 1-6 c.c. 1560Colour: BLACK A/C: Insured / Std / NI / NASp. Reading: 095024 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VF 306BH ZTF 314046Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/50R17

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 10/06/18D.O.I. 02/07/18

Survey held at

AUTOFORANCE

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

Rear o/s

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 61) By post☒ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

Survey Fee:

2) _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Transportation:

Photos

Others

TOTAL

Report Format: TPLump Sum / I.B.I: (\$ 8735.20)170 + 15505017332

MOTOR SURVEY ASSIGNMENT

Date	12-06-2018	Our Ref No. D18004690MFSH
Accident Date	10-06-2018	Claim Type. Third Party
Insured Vehicle	SHC0729X	Third Party Vehicle. SLD8567R
Survey Location	305 ALEXANDRA ROAD	
Contact Person.	MS.KAVIDHA (KAVI)	
Contact No.	64777364/ 0	Fax No. 64777398
Survey Type	DIRECT SETTLEMENT:	
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	AUTOFRANCE	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/241393)



PRI Documents




Close



PRI Header Details

Claim No	D18004690MFSH	Policy No	D-18088937MFSH	Claimant S.No & Name	1 & AUTOFRANCE
Workshop Name	AUTOFRANCE (Contact Person : MS.KAVIDHA (KAVI))	Survey Location & Contact Details	305 ALEXANDRA ROAD Mobile: 0 , Phone: 64777364 , Fax: 64777398 EmailId: BODYSHOP@SIMEDARBY.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC0729X	TP Vehicle No	SLD8567R
PRI Recieved Date	20-06-2018 09:37:13 PM	Surveyor Appointed Date	21-06-2018 06:05:39 PM	Surveyor Accept Date	21-06-2018 0

Survey Report Upload

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

Make	Please Select Make ▼	Model	Please Select Model ▼	Year	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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Auto
Consultants
Pte Ltd

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

Your Ref: D18004690MFSH

Our Ref: CS/FCI18011392/R1rd3

The Motor Claims Department
First Capital Insurance Ltd

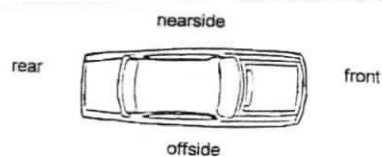
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SLD 8567R .

Please be informed that we had conducted the inspection of the above mentioned vehicle on 01.08.2018 at the premises of M/s AUTOFRANCE PTE LTD and have the following to report:-

Workshop Estimate Amount	: S\$ 11,850.80 .
Revised Estimate Amount	: S\$ 8,735.20 .
"Check" Items Amount	: S\$.
Market Value	: S\$.
LTA Reimbursement Value	: S\$.
Nett Value	: S\$.

Description of Damage:
The vehicle sustained damages
at rear 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	11/06/2018 15:33
Date Of Accident	10/06/2018 18:10
Exact Location Of Accident	LOYANG AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD8567R
Insured/Policyholder	
Name Of Registered Owner	QUEK KENG LENG
NRIC No	S1397295H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96378224
Alternative Phone No	OFFICE-96378224

Vehicle Particulars

Manufacturer	PEUGEOT
Model	5008-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD17V05915/VPE2/R00
Cover Note Number	

Driver

Name of Driver	CHUA CHEE TIAK
NRIC No	S0135046C
Date Of Birth	09/11/1953
Occupation	INDOOR
Date Of Driving Pass	18/11/1974
Driving Experience	43 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96378224
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 425 PASIR RIS DRIVE 6 #08-79
Postcode	510425
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
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	DRY

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)	1

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

REFER TO ATTACHMENT

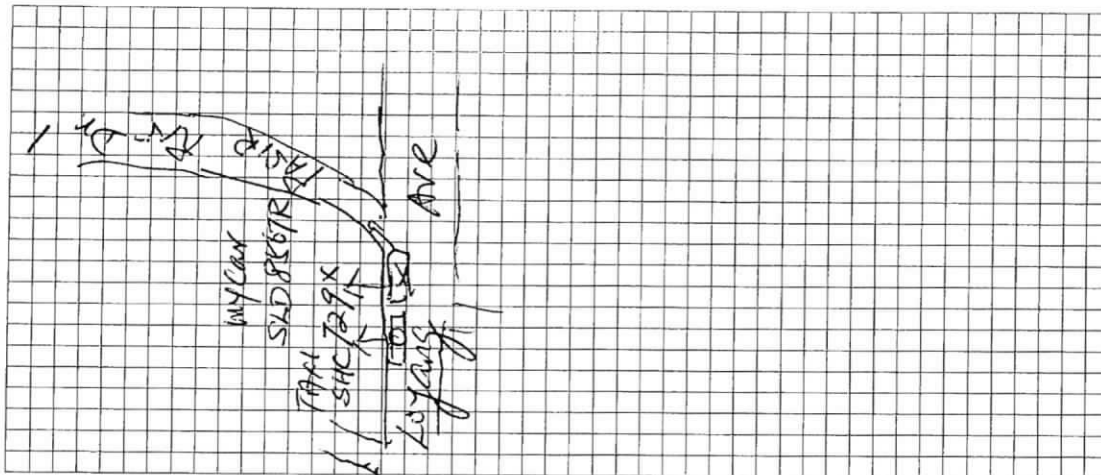
Attachment(s)

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	SCH729X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 10th June 2018, Time around 6.10^{PM} - 6.15pm
 I was Driving my ~~car~~ vehicle SHD 8567R along
 "Loyang Avenue" To ward PARK RD Dr 1.
 and the accident occur :- a "Comfort
 Delgro Taxi car plate " SHC 729X
 suddenly hit from my back." during that
 Time the road condition is good, No rain
 This cause by vehicle SHD 8567R
 the Black door being damage and
 as well the "lower bumper" being Hit.

DECLARATION

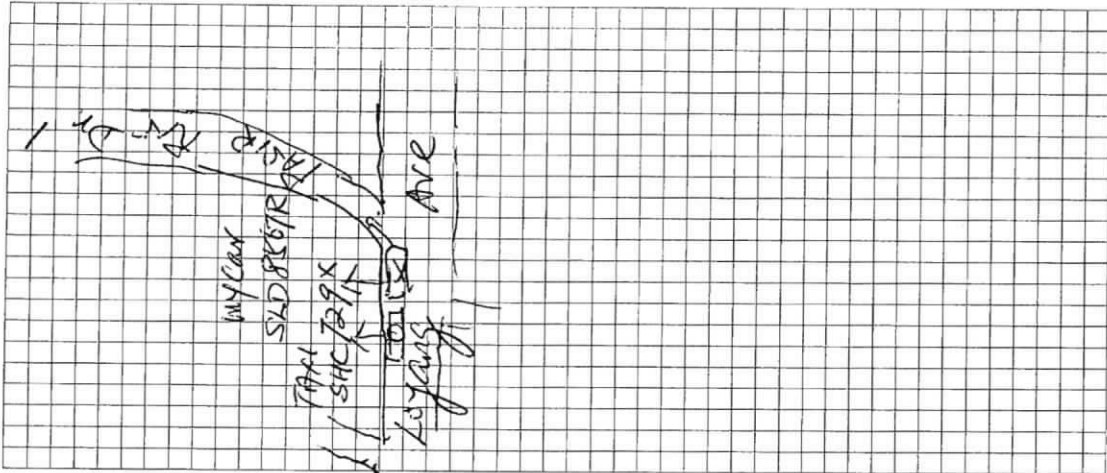
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
 Date & Time:

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 11-06-2018
 09.20Am

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 10th June 2018, Time around 6.10^{PM} - 6.15 PM
 I was driving my ~~car~~ vehicle SLD 8567R along
 "LOYANG Avenue" To ward PARKER Dr 1.
 and the accident occur :- a ^{taxi} Comfort
 Delgro Taxi car plate "SHC 729X"
 suddenly hit from my back during that
 time the road condition is good, No rain
 Thus cause by vehicle SLD 8567R
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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: 11-06-2018
 09.20 AM

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

AUTOFRANCE

(A Division of Vantage Automotive Limited)

Business Registration No. 52907220C GST Registration No. M2-0000551-1

305 Alexandra Road

159942, Singapore

Tel : 6376 2288

Fax : 6477 7373



PEUGEOT

GST Registration No. M2-0000551-1

ESTIMATE

Estimate No. :	BP 3726	Page No. :	1 of 2
Date Estimated :	12/06/2018		
Prepared By :	Wong Guo Xiang		

- ESTIMATE REPAIR FOR - Quek Keng Leng Blk 425 Pasir Ris Drive 6 #08-79 Singapore 510425	- ACCOUNT - 2000 CASH - Sale service
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REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLD8567R	VF30EBHZTFS314046	30/06/2016	5008 1.6 BlueHDi	0

DESCRIPTION	VALUE
SUNDRIES	30 150.00
REPLACE/REPAIR REAR BUMPER, REAR END PANEL, TAILGATE	1500 2400.00
RESpray REAR BUMPER, REAR END PANEL, REAR TAILGATE	1200 2400.00
WIRING CONNECTION & CHECK (NET T)	150.00
REMOVE & REPLACE REAR LIGHTING SYSTEM (NETT)	na X 150.00
REMOVE & REPLACE REVERSE SENSOR (NETT)	150.00
TRANSFER TAILGATE MECHANISM (NETT)	300 400.00
REMOVE & REFIX REAR BOOT COMPARTMENT INNER TRIM & GARNISH (NETT)	300.00
REMOVE & REPLACE REAR WINDSCREEN (NETT)	600.00
INNER SEAL FOR REAR WINDSCREEN (NETT)	na X 60.00
SEALANT FOR REAR WINDSCREEN (NETT)	50.00
TO SUPPLY & INSTALL REAR WINDSCREEN 3M SOLAR FILM (NETT)	350.00
TUFF KOTE @ \$60 PER PANEL	60 120.00
SEALANT FOR REAR TAILGATE @ \$90	90.00
TO CONDUCT ECU COMPUTER DIAGNOSTIC INCLUDING CLEAR FAULT CODE (NETT)	600.00
Total Labour 1:	7,970.00

PART NUMBER	DESCRIPTION	QTY	PRICE	DISC	VALUE
00007410KR	REAR BUMPER W/SENSOR MARKING HOLE	1	750.00	10.00	DE 675.00
00007416R8	REAR BUMPER BRACKET	1	98.00	10.00	na 7. 88.20
00007416R9	RR BUMPER CTR BRACKET	1	120.00	10.00	na 7. 108.00
00007416S0	RR BPR SIDE BRACKET SET	1	98.00	10.00	na 7. 88.20

AUTOFRANCE

(A Division of Vantage Automotive Limited)

Business Registration No. 52907220C GST Registration No. M2-0000551-1

305 Alexandra Road

159942, Singapore

Tel : 6376 2288

Fax : 6477 7373



PEUGEOT

GST Registration No. M2-0000551-1

E S T I M A T E

Estimate No. : **BP 3726**
Date Estimated : **12/06/2018**
Prepared By : **Wong Guo Xiang**

Page No. : **2 of 2**

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLD8567R	VF30EBHZTFS314046	30/06/2016	5008 1.6 BlueHdi	0

PART NUMBER	DESCRIPTION	QTY	PRICE	DISC	VALUE
00007422E9	RECESS DOOR	1	16.00	10.00	14.40
1613432080	LOW RR PAN FIX	1	59.00	10.00	53.10
9681099980	RR BUMPER REINFORCEMENT	1	330.00	10.00	297.00
00008701CP	TAILGATE	1	1,600.00	10.00	1,440.00
9806737680	TAILGATE GLASS	1	480.00	10.00	432.00
9806827080	BADGE ASSEMBLE	1	60.00	10.00	54.00
00008707L4	T/GATE WEATHERSTRIP	1	145.00	10.00	130.50
1607244380	TAILGATE FIX	1	116.00	10.00	104.40
00008666S2	EMBLEM <5008>	1	30.00	10.00	27.00
9678798480	RR BADGE E-HDI	1	50.00	10.00	45.00
9677782980	RR OBSTACLE DETECTION SENSOR	2	180.00	10.00	324.00
Total Parts :					3,880.80

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:

Paul
Hp 90010068
6 days
02/07/18 @ 1720
Resy 6 y part

Customer Service Officer

Contact

Labour 1	:	11850.80	7,970.00
Parts	:		3,880.80
Labour 2	:		0.00
Excess	:		0.00
Total GST @ 7%	:		829.56
Grand Total	:		12,680.36

The above estimates are base on visual inspection and it is possible that further materials and labour may be required upon dismantling. Should this occur, we will submit supplementary quotation for further approval.

11948

Janice Lee (LKKAUTO)

From: Wong Guo Xiang <wong.guo.xiang@sime-darby.com.sg>
Sent: Tuesday, July 17, 2018 11:18 AM
To: Rasul (LKKAUTO)
Cc: Mohamed Shabir Abdul Hamid; Natarajan Kavidha Rajan; Chong Kean Yap; SUR
Subject: Finalise - SLD8567R
Attachments: finalise - sld8567r.pdf; SUPP - SLD8567R.xlsx; DSCN9411.jpg; DSCN9412.jpg; DSCN9413.jpg; DSCN9414.jpg; DSCN9415.jpg; DSCN9416.jpg; DSCN9417.jpg; DSCN9418.jpg; DSCN9419.jpg; DSCN9420.jpg; DSCN9421.jpg; DSCN9422.jpg; DSCN9423.jpg; DSCN9679.jpg; DSCN9680.jpg; DSCN9681.jpg; DSCN9682.jpg; DSCN9683.jpg; DSCN9684.jpg; DSCN9685.jpg; DSCN9686.jpg

Dear Rasul,

Please find the attached finalise documents & photos for your reference.

COR: \$ 8,735.20
6 working days

Regards,
Wong Guo Xiang
Customer Service Advisor
AutoFrance (PEUGEOT) / Regent Motors (FORD)
c/o Vantage Automotive Limited
DID: 6477 7409 HP: 8383 3190

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AUTOFRANCE

(A Division of Vantage Automotive Limited)

Co. Regs. No. 52907220C GST Regs. No. M2-0000551-1

305 Alexandra Road

Vantage Automotive Centre

Singapore 159942

Service Booking: 6477 7377

Parts: 6477 7420

Vantage 24-Hour Assist: 6473 8588

Fax: 6477 7300

**PEUGEOT****SERVICE TAX INVOICE**

RE-PRINT

REPAIR ORDER NO. bp 114510	Date IN 02/07/2018	Invoice Number	Page No. 1 of 2
	Payment Term 30 Days From Invoice	Invoice Date	
	Customer Service Advisor Wong Guo Xiang	Invoice By Wong Guo Xiang	

CUSTOMER INFORMATION	INVOICE TO 14356
Quek Keng Leng Blk 425 Pasir Ris Drive 6 #08-79 Singapore 510425	First Capital Insurance Limited 36 Robinson Road #16-01 City House Singapore 068877

REGISTRATION No. SLD8567R	CHASSIS No. VF30EBH2TFS314046	STOCK No. 209099	REGISTRATION DATE 30/06/2016	MODEL 5008 1.6 BlueHDI	MILEAGE 95024
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CODE	DESCRIPTION	UNITS	DISC %	NETT
	SUNDRIES	1	0.00	30.00
	REPLACE/REPAIR REAR BUMPER, REAR END PANEL, TAILGATE	1	0.00	1,500.00
	RESPRAY REAR BUMPER, REAR END PANEL, REAR TAILGATE	1	0.00	1,200.00
	WIRING CONNECTION & CHECK (NET T)	1	0.00	150.00
	REMOVE & REPLACE REVERSE SENSOR (NETT)	1	0.00	150.00
	TRANSFER TAILGATE MECHANISM (NETT)	1	0.00	300.00
	REMOVE & REFIX REAR BOOT COMPARTMENT INNER TRIM & GARNISH (NETT)	1	0.00	300.00
	REMOVE & REPLACE REAR WINDSCREEN (NETT)	1	0.00	600.00
	SEALANT FOR REAR WINDSCREEN (NETT)	1	0.00	50.00
	TO SUPPLY & INSTALL REAR WINDSCREEN 3M SOLAR FILM (NETT)	1	0.00	350.00
	TUFF KOTE @ \$60 PER PANEL	1	0.00	60.00
	SEALANT FOR REAR TAILGATE @ \$90	1	0.00	90.00
	TO CONDUCT ECU COMPUTER DIAGNOSTIC INCLUDING CLEAR FAULT CODE (NETT)	1	0.00	600.00
Sub-Total :				5,380.00
CODE	DESCRIPTION	UNITS	DISC %	NETT
00007410KR	REAR BUMPER W/SENSOR MARKING HOLE	1	10.00	675.00
00008666S2	EMBLEM <5008>	1	10.00	27.00
00008701CP	TAILGATE	1	10.00	1,440.00
1607244380	TAILGATE FIX	1	10.00	104.40
1613432080	LOW RR PAN FIX	1	10.00	53.10
9678798480	RR BADGE E-HDI	1	10.00	45.00
9681099980	RR BUMPER REINFORCEMENT	1	10.00	297.00
9806737680	TAILGATE GLASS	1	10.00	432.00
9806827080	BADGE ASSEMBLE	1	10.00	54.00
00008707L4	T/GATE WEATHERSTRIP	1	10.00	130.50
00006350JK	LHR BUMPR REVERSE/FOG LAMP	1	10.00	97.20
Sub-Total :				3,355.20
Attending CSO : Wong Should you require further explanation, please reach me at 64777409				

AUTOFRANCE

(A Division of Vantage Automotive Limited)

Co. Regs. No. 52907220C GST Regs. No. M2-0000551-1

305 Alexandra Road

Vantage Automotive Centre

Singapore 159942

Service Booking: 6477 7377

Parts: 6477 7420

Vantage 24-Hour Assist: 6473 8588

Fax: 6477 7300

**PEUGEOT****SERVICE TAX INVOICE**

RE-PRINT

REPAIR ORDER NO. bp 114510	Date IN 02/07/2018 Payment Term 30 Days From Invoice Customer Service Advisor Wong Guo Xiang	Invoice Number Invoice Date Invoice By Wong Guo Xiang	Page No. 2 of 2
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Service Packages	0.00	Total Labour/Parts/Service Package Charges	S\$	8,735.20
Labour Charges	5,380.00	Less Insurance Excess	S\$	0.00
Parts Charges	3,355.20	GST @ 7%	S\$	611.46
Lubricant/Misc	0.00	Invoice Total Amounts	S\$	9,346.66
		Less Deposit/Voucher	S\$	0.00
Computer generated invoice. No signature is required.		Amount Payable	S\$	9,346.66
All amounts are in Singapore Dollars. Work was carried out subject to the Company's Terms and Conditions of Service. No complaints will be entertained unless reported within seven (7) days of the date of this invoice. For credit purchases, interest @1% per month will be debited on overdue amounts.				

**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/FCI18011392/R1rd3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 30-08-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHC 729X	Veh. Inspected	SLD 8567R	
Policy No.	D-18088937MFSH	Coverage (\$)	0.00	
Claim No.	D18004690MFSH	Excess (\$)	0.00	
Assign From	LURENE JAW	Assign Date	21/06/2018	
2. Vehicle Particulars & Condition				
Make & Model	PEUGEOT 5008 1.6	c.c	1560	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	VF30EBHZTFS314046	Colour	BLACK	
Odometer	95024	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/50 R17	TOYO	6 mm	
L/H Front Tyre	215/50 R17	TOYO	6 mm	
R/H Rear Tyre	215/50 R17	TOYO	6 mm	
L/H Rear Tyre	215/50 R17	TOYO	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	10/06/2018	Inspection Date	02/07/2018	
Survey held at	AUTOFRANCE 305, ALEXANDRA ROAD SINGAPORE 159942.			
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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLD 8567R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	SUNDRIES (SN)	NECESSARY	150.00	30.00
1	REAR BUMPER W/SENSOR MARKING HOLE (SN)	DEFORMED	675.00	675.00
1	REAR BUMPER BRACKET (SN)	NOT NECESSARY	88.20	-
1	RR BUMPER CTR BRACKET (SN)	NOT NECESSARY	108.00	-
1	SET RR BPR SIDE BRACKET (SN)	NOT NECESSARY	88.20	-
1	RECESS DOOR (SN)	NOT NECESSARY	14.40	-
1	LOW RR PAN FIX (SN)	NECESSARY	53.10	53.10
1	RR BUMPER REINFORCEMENT (SN)	BENT	297.00	297.00
1	TAILGATE (SN)	BENT	1,440.00	1,440.00
1	TAILGATE GLASS (SN)	NECESSARY	432.00	432.00
1	BADGE ASSEMBLE (SN)	NECESSARY	54.00	54.00
1	T/GATE WEATHERSTRIP (SN)	NECESSARY	130.50	130.50
1	TAILGATE FIX (SN)	NECESSARY	104.40	104.40
1	EMBLEM <5008> (SN)	NECESSARY	27.00	27.00
1	RR BADGE E-HDI (SN)	NECESSARY	45.00	45.00
2	RR OBSTACLE DETECTION SENSOR (SN)	SERVICEABLE	324.00	-
1	LHR BUMPER REVERSE / FOG LAMP (SN) (ADDITIONAL)	CRACKED	97.20	97.20
			4,128.00	3,385.20
<u>LABOUR</u>				
REPLACE / REPAIR REAR BUMPER, REAR END PANEL, TAILGATE.			2,400.00	1,500.00
RESPRAY REAR BUMPER, REAR END PANEL, REAR TAILGATE.			2,400.00	1,200.00
WIRING CONNECTION & CHECK.			150.00	150.00
REMOVE & REPLACE REAR LIGHTING SYSTEM.		NOT NECESSARY	150.00	-
REMOVE & REPLACE REVERSE SENSOR.			150.00	150.00
TRANSFER TAILGATE MECHANISM.			400.00	300.00
REMOVE & REFIX REAR BOOT COMPARTMENT INNER TRIM & GARNISH.			300.00	300.00
REMOVE & REPLACE REAR WINDSCREEN.			600.00	600.00
INNER SEAL FOR REAR WINDSCREEN.		NOT NECESSARY	60.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	SEALANT FOR REAR WINDSCREEN.		50.00	50.00
	TO SUPPLY & INSTALL REAR WINDSCREEN 3M SOLAR FILM.		350.00	350.00
	TUFF KOTE @ \$60 PER PANEL.		120.00	60.00
	SEALANT FOR REAR TAILGATE @ \$90.		90.00	90.00
	TO CONDUCT ECU COMPUTER DIAGNOSTIC INCLUDING CLEAR FAULT CODE.		600.00	600.00
			7,820.00	5,350.00
	GRAND TOTAL		11,948.00	8,735.20
RECOMMENDED COST OF REPAIRS				8,735.20

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MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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