

ASS. REC. BY

REF: CS/FCI 18011483/K2d3/9

Surveyor

aws

ASSIGNMENT (Office)

From (Person):

Joanne Yong

of

FCI

Date/Time:

25/6/18 @ 12:50pm

Estimated Cost

Bill to:

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

To Inspect Vehicle No:

SLL 5782M

Insured:

8HA 3457X

at Workshop m/s:

MBM Wheelpower

Tel:

8686 5188

of

160 Sin Ming Drive # 06-02

Policy No:

D-18088936 MFSH

Claim No:

D18004867 MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

16/06/2018

CA / REV / REP. / REV 24 HRS

cup

Date/Time:

2:38pm @ 25/6/18

Person Contacted:

Joseph

H.O.D. Endorsement:

Vehicle IN (OUT)

Date/Time

Action/Instruction

(✓) Estimate

SLL 5782M-X

8HA 3457X-cc3/AIG09009013/CWZ

DUA: 23/04/2024

28/6/18 @

3:49p. Reused to Joanne Yong by email.

(08/11/13) waf

ASS. REC. BY:

REF: FCI

ASSIGNMENT

Front: Date: 27/6/2018

Estimated Cost:

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

To inspect Vehicle No: SLL 5782 M

at Workshop m/s MBM Wheel/power

of 176 Sin Ming Drive # 01-15

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: \$62k

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 01 days Res.: Yes or No

Lum Sum: 1-B.1% 3 Val: Yes or No

CA / REV / REP. / 24 HRS up

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SLL 5782 M Yr Regn: 03 17

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

Truck / Trailer or

Make:

Hyundai Elantra G.C. 1591

Colour:

M. Black A/C: Insured / Std / NI / NA

Sp Reading:

19877 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KMH0841CN1U 218956

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: 195/65R15

R:

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

TOYO / YOKO or

Hankook

Front

R/Bal.

8 mm

Rear

R/Bal.

8 mm

L/Bal.

8 mm

L/Bal.

8 mm

D.O.A.

16/6/18

D.O.I.

27/6/18

Survey held at

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

Rear cls door mirror

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

OPC

Date / Time Action / Instruction

28/6 File pass to Goh

28/6 8664.00 Confirmed by email (Ref \$ 590, 472)

RECEIVED 29 JUN 2018

Date/Time, File Pass to?



: Prelim. Report

11/29/6 to M/S



: Final Report

Date/Time, File Return to?

2)

Report Format:

TP

Lump Sum / I.B.I. (\$) 664

Days Of Repair: 1

Resurvey No. of Trip: 1

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Survey Fee:

Transportation:

S + RS SI

Photos

Others

TOTAL

100
5
50
14
214

MOTOR SURVEY ASSIGNMENT

Date	20-06-2018	Our Ref No. D18004867MFSH
Accident Date	16-06-2018	Claim Type. Third Party
Insured Vehicle	SHA3457X	Third Party Vehicle. SLL5782M
Survey Location	160 Sin Ming Drive #06-02 Sin Ming Autocity	
Contact Person.	JOSEPH TAN	
Contact No.	62628888/ 86865188	Fax No. 64525333
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	MBM WHEELPOWER PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	JOANNEY	

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/241614)



PRI Documents



Close



PRI Header Details

Claim No	D18004867MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & MBM WHE
Workshop Name	MBM WHEELPOWER PTE LTD (Contact Person : JOSEPH TAN)	Survey Location & Contact Details	160 Sin Ming Drive #06-02 Sin Ming Autocity Mobile: 86865188 , Phone: 62628888 , Fax: 6452533: EmailId: JOSEPH.TAN@MBMWHEELPOWER.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHA3457X	TP Vehicle No	SLL5782M
PRI Recieved Date	21-06-2018 05:51:52 PM	Surveyor Appointed Date	25-06-2018 12:49:12 PM	Surveyor Accept Date	25-06-2018 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	25-06-2018	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

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Thursday, 28 June 2018 3:49 PM
To: 'Claim Workflow System'; assignments
Cc: JOANNEYONG@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18004867MFSH/1
Attachments: CSFCI18011483Kqd3.pdf

Dear Joanne,

Enclosed herewith preliminary advice of SLL 5782M.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Monday, 25 June 2018 2:41 PM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: JOANNEYONG@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18004867MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not in workshop, repairer will arrange.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: 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: Monday, 25 June 2018 12:50 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; JOANNEYONG@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18004867MFSH/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



Auto
Consultants
Pte Ltd

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

Your Ref: D18004867MFSH

Date: 28 June 2018

Our Ref: CS/FCI18011483/Kqd3

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

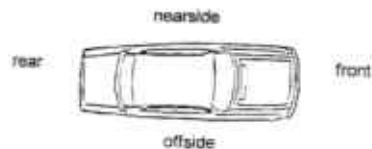
INITIAL INSPECTION REPORT OF VEHICLE NO. SLL 5782M .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 27/06/2018 at the premises of M/s MBM WHEELPOWER, and have the following to report:-

Workshop Estimate Amount	: S\$ <u>1,254.00</u> .
Revised Estimate Amount	: S\$ <u>664.00</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 front o/s door mirror.



Yours faithfully

KONG SENG CHEONG
Licensed Appraiser

[Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	2120D
Vehicle Details	
Vehicle No.:	SLL5782M
Vehicle to be Exported:	No
Intended De-registration Date:	30 Jun 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT
Primary Colour:	Black
Manufacturing Year:	2016
Engine No.:	G4FGGU205504
Chassis No.:	KMHD841CMHU218956
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$12,337.00
Original Registration Date:	01 Mar 2017
First Registration Date:	01 Mar 2017
Transfer Count:	0
Actual ARF Paid:	\$12,337.00
OPC Cash Rebate Details	
OPC Cash Rebate Eligibility:	No
OPC Cash Rebate Eligibility Expiry Date:	-
OPC Cash Rebate Amount:	-
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Feb 2027
PARF Rebate Amount:	\$9,252.00
Intended COE Rebate Details	
COE Expiry Date:	28 Feb 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$32,430.00
COE Rebate Amount:	\$28,106.00
Total Rebate Amount:	\$37,358.00

The information contained herein is correct as at 21 Jun 2018

OK

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	21/06/2018 10:41
Date Of Accident	16/06/2018 20:15
Exact Location Of Accident	LORONG M TELOK KURAU
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL5782M
Insured/Policyholder	
Name Of Registered Owner	AW YONG HONG ADRIAN
NRIC No	S6832120D
Email Address	ADRIANAWY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91004364
Alternative Phone No	OFFICE-91004364

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 AD GLS (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098311299
Cover Note Number	

Driver

Name of Driver	AW YONG HONG ADRIAN
NRIC No	S6832120D
Date Of Birth	31/08/1968
Occupation	INDOOR
Date Of Driving Pass	26/11/1990
Driving Experience	27 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91004364
Fax Number	
Contact Number	OFFICE-91004364
Email Address	ADRIANAWY@GMAIL.COM

Address	138 POTONG PASIR AVE3 #03-100
Postcode	350138
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 50 SERANGOON AVE 2 #01-02 , POSTCODE: 556129 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4880999 - FAX NO: 64883561
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER 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	SHA3457M
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	VEH. B
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

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: 21/6/18 1030am

Driver's Signature

(If driver is not the policyholder)

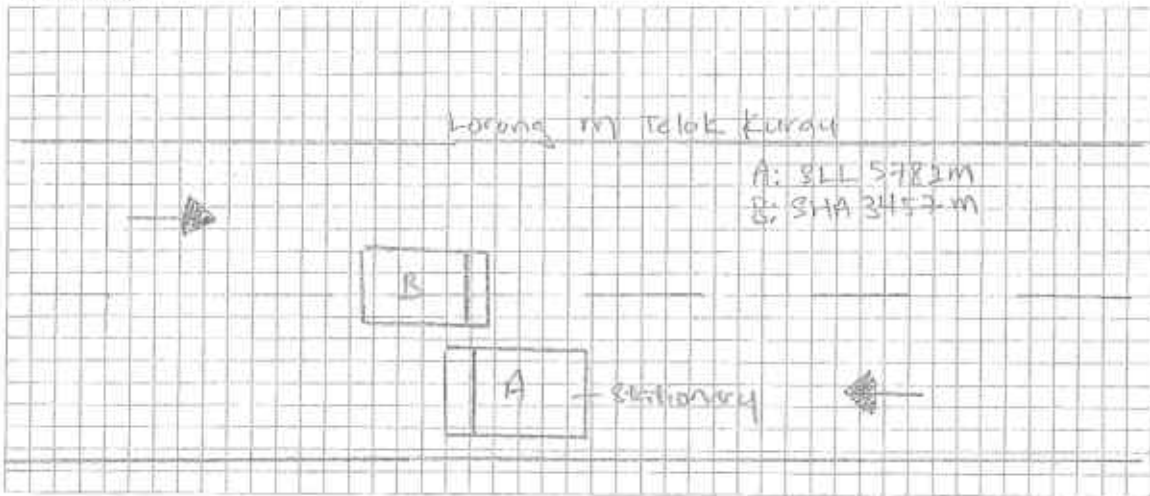
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

DECLARATION

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

Policyholder's Signature
Date & Time: 21/6/18 1030am

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

Reporting Centre Personnel's Signature
Name: Joseph Tan
NRIC/FIN No.: 8696 5188



**SINGAPORE
POLICE FORCE**



T/20180616/2132

1 of 3

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

Report No. T/20180616/2132

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/06/2018 23:03		Vide Report No.:		Station Diary No.: 58	
Informant's Particulars					
Name of Informant: AW YONG HONG ADRIAN			Address: APT BLK 138 POTONG PASIR AVENUE 3 #03-100 SINGAPORE 350138		
ID Type / ID No.: NRIC NO / S6832120D			Contact No.: Home/Office: Mobile: 91004364		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 49	Date of Birth: 31/08/1968	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Polytechnic lecturer			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/06/2018 20:15	Type of Location: Straight Road
Location: Along Road 1 LORONG M TELOK KURAU				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SLL5782M	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT	Black	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLL5782M	NTUC Income Insurance Co-Operative Limited	5098311299	01/03/2018	28/02/2019



SINGAPORE
POLICE FORCE



T/20180616/2132

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

2 of 3

Report No. T/20180616/2132

CONTINUATION OF REPORT

Brief Details.

On 16 June 2018 at about 1900hrs, I parked and secured my vehicle bearing SLL5782M by the side of the road at Lorong M Telok Kurau. Everything was intact at that time. On the same day at about 2130hrs, I went back to my vehicle and discovered the right side view mirror of my vehicle was dislodged. No note was left on my vehicle. Thus, I went to the security guard post to check with the security officers. I was then informed by the security officer that at about 2015hrs, a Comfort taxi was travelling along Lorong M Telok Kurau from the other direction of my parked vehicle. The right side mirror of the Comfort taxi had side swiped the right side mirror of my vehicle. Thus, resulting to the damage on my vehicle. However, they did not manage to take down the carplate number of the taxi and the taxi driver did not stop to make a check. The security officer also informed that they do not have any CCTV installed at the location. I am unsure if there is any CCTV directed at my vehicle. I am lodging this traffic accident report as advised by my insurance agent.



**SINGAPORE
POLICE FORCE**



T/20180616/2132

3 of 3

Report No. T/20180616/2132

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 TOH RUI YUN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/06/2018 23:03
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case: SN 154
Authentication Stamp: NP166 Singapore Police Force	Signature:

MBM WHEELPOWER PTE LTD



Your Ref: SHA3457M

Our Ref: SLL5782M

*Not Authorised
Resurvey B4 painting
1 day*

To: FIRST CAPITAL

CC

Email

Fax

Date: 21/6/2018
From: Joseph
Fax: 62509015
Contact: 86865188
Make / Model: HYUNDAI ELANTRA 1.6 AD GLS
Chassis No.: KMHD841CMHU218956
Engine No.: G4FGGU205504
Year of Make: 2016
Accident Date: 16/6/2018

ESTIMATE FOR VEHICLE NO.: SLL5782M

DESCRIPTION

RH SIDE MIRROR FRAME

RH SIDE MIRROR COVER

QTY

List Price

1

\$

Ref / 410.00

mbm 1

\$

Ref / 95.00

TOTAL: \$ 505.00

LESS 20%: \$ (101.00)

PARTS TOTAL: \$ 404.00

LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS. INCLUDING TO STRAIGHTEN, KNOCK-OUT OF THE SAME, ETC

\$

600.00

TO SPRAY PAINT ON THE ASIDE MIRROR COVER

\$

250.00

Total: \$ 1,254.00

7% GST: \$ 87.78

Grand Total: \$ 1,341.78

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/FCI18011483/Kqd3q2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 02-07-2018	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHA 3457X	Veh. Inspected	SLL 5782M
Policy No.	D-18088936MFSH	Coverage (\$)	0.00
Claim No.	D18004867MFSH	Excess (\$)	0.00
Assign From	JOANNE YONG	Assign Date	25/06/2018
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI ELANTRA (A)	c.c	1591
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	KMHD841CMHU218956	Colour	METALLIC BLACK
Odometer	19877	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65R15	HANKOOK	8 mm
L/H Front Tyre	195/65R15	HANKOOK	8 mm
R/H Rear Tyre	195/65R15	HANKOOK	8 mm
L/H Rear Tyre	195/65R15	HANKOOK	8 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S DOOR MIRROR. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	16/06/2018	Inspection Date	27/06/2018
Survey held at	MBM WHEELPOWER PTE LTD 176 SIN MING DRIVE #01-15 SIN MING AUTOCARE SINGAPORE 575721		
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:		1 Working Days	



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3581 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLL 5782M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	RH SIDE MIRROR FRAME	DENTED	410.00	410.00
1	RH SIDE MIRROR COVER	MTG CRACKED	95.00	95.00
	LESS 20% DISCOUNT		-101.00	-101.00
			404.00	404.00
	<u>LABOUR</u>			
	TO REMOVE ,REFIT & REPAIR AFFECTED DAMAGED PARTS ,INCLUDING TO STRAIGHTEN ,KNOCK -OUT OF THE SAME ,ETC.		600.00	180.00
	TO SPRAY PAINT ON THE ASIDE MIRROR COVER .		250.00	80.00
			850.00	260.00
	GRAND TOTAL		1,254.00	664.00
	RECOMMENDED COST OF REPAIRS			664.00

Report Ref No. CS/FCI18011483/Kqd3q2

KONG SENG CHEONG

Licensed Appraiser

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