

22/03/2003

ASS. REC. BY:

REF:

CS/FLU 8011819 / R/rber

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): CWS Lurene Jaw of FCI Date/Time: 28062018 9.09am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: 56W 7134Y Insured: SHB 29706

at Workshop m/s Ethoz Tel: 8822 8339.

of 30 Bukit Batok Crescent

Policy No: Claim No: DP80024911 MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 17062018  
(Client's Record)

CA / REV / REP. / REV 24 HRS 'DSI

02072018 @ before 12pm

Date/Time: 28062018 1030am Person Contacted: Lee Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	56W 7134Y - x
	SHB 29706 - CS / LCR / 8011-715 / Kluc3 Df: 22062018
	Perent from email.

(08/11/13) wef

ASS. REC. BY:

REF: FCI

7645F

COPY: 2007/July

## ASSIGNMENT

From: Date: 02/07/2018

Estimated Cost:

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

To Inspect Vehicle No: SGW 7134Y

at Workshop m/s ETHOZ

of 30 Bkt Butok Crescent

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Before 12pm

Make of Veh:

Lee

(Policy Condition)

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

N/S	O/S

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 (up)

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SGW 7134Y Yr Regn: 2007 / July

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

Truck / Trailer or

Make: TOYOTA COROLLA ALTS 1.6A C.C 1598

Colour: GREEN A/C: Insured / Std / NI / NA

Sp. Reading: 145970 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MRO 53 ZEC 107149264

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: 195/60R15

R:

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

TOYO / YOKO or CONTINENTAL

Front

Rear

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. 5 mm L/Bal. 5 mm

D.O.A. 17/06/18 D.O.I. 02/07/18

Survey held at ETHOZ

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

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

Date / Time Action / Instruction

Contin L/S \$4250 @ 7 days  
Red: \$3880.62, 48%.

RECEIVED 05 SEP 2018

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: 7

1) typist

☒ : Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

2)

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

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format: VP

Lump Sum / H.B.I: (\$ 4250 )

160

50

50

49

309

**MOTOR SURVEY ASSIGNMENT**

Date	21-06-2018	Our Ref No. D18004911MFSH
Accident Date	17-06-2018	Claim Type. Third Party
Insured Vehicle	SHB2970G	Third Party Vehicle. SGW7134Y
Survey Location	30 BUKIT BATOK CRESCENT	
Contact Person.	LEE CHEN SIN	
Contact No.	66547520/ 88228339	Fax No. 66547542
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	ETHOZ GROUP LTD	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

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

Your Ref: D18004911MFSH

Our Ref: CS/FCI18011819/R1rd3

The Motor Claims Department  
First Capital Insurance Ltd

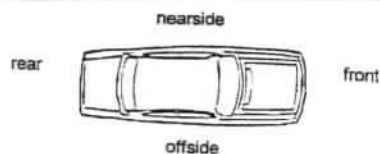
Dear Sir/Madam,

**INITIAL INSPECTION REPORT OF VEHICLE NO. SGW 7134Y .**

Please be informed that we had conducted the inspection of the above mentioned vehicle on 02.07.2018 at the premises of M/s ETHOZ GROUP LTD and have the following to report:-

Workshop Estimate Amount	: S\$ <u>8,130.62</u> .
Revised Estimate Amount	: S\$ <u>5,336.75</u> .
"Check" Items Amount	: S\$ _____ .
Market Value	: S\$ _____ .
LTA Reimbursement Value	: S\$ _____ .
Nett Value	: S\$ _____ .

Description of Damage:  
The vehicle sustained damages  
at o/s body.



Yours faithfully

MOHAMMAD 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	18/06/2018 10:03
Date Of Accident	17/06/2018 17:55
Exact Location Of Accident	CP BETWEEN BLK 258 & BLK 260 BT BATOK EAST AVE 4
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW7134Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HENG LANG HUAY
NRIC No	S0027645F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91182563
Alternative Phone No	OTHERS-91182563

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	OOI WAI KEONG
NRIC No	S8128015J
Date Of Birth	18/09/1981
Occupation	INDOOR
Date Of Driving Pass	03/10/2006
Driving Experience	11 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97594900
Fax Number	
Contact Number	
Email Address	NOEMAIL

Postcode	650257
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	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	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-6659999 - FAX NO: 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

KINDLY REFER TO SKETCH PLAN AND POLICE NOTICE OF REPORTING.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB2970G
Vehicle Make/Model/Colour	CITYCAB (YELLOW)
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM HER LENG
NRIC/Passport Number	S0052143D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	



## 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.

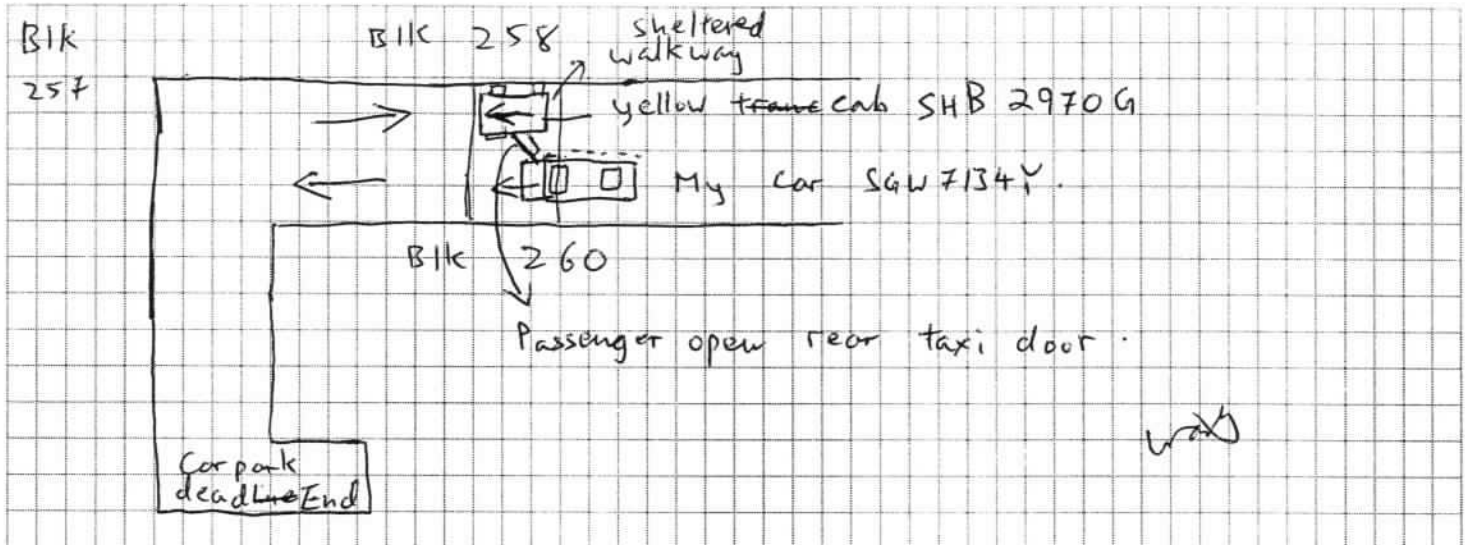
Policyholder's Signature  
Date & Time:

 18/6/18  
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

Was almost home, searching for Lots, saw taxi stationary on right hand side below sheltered walkway, so decided to proceed straight, As I was proceeding straight, passenger Name: Norazizah Binte Abdullah ic no S79223869D, residing Blk 1, spencer road #04-92 S(168789) opened rear left passenger door, causing it to scarp scarp right side of my car from A-pillar on wards, causing right side mirror to completely dislodge.

Subsequently stopped car after recovering from shock and impact to exchange particulars and details.

Was advised by taxi driver to lodge police report in case passenger counter claim and claim damages through insurance.

way

### Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE** WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

<input type="checkbox"/>	- Reporting Only
<input type="checkbox"/>	- Claim OD
<input checked="" type="checkbox"/>	- Claim TP
<input type="checkbox"/>	- Claim OD/ TP at other workshop

### DECLARATION

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

Policyholder's signature  
Date & Time

Driver's Signature  
(if driver not the policyholder)  
Date & Time

Reporting Centre Personnel's Signature  
Name:  
Nric/Fin No.

( 4K AUTO ) ( 2/7 )

PLEASE ARRANGE TO SURVEY  
VEHICLE AT 30 BUKIT BATOK  
CRESCENT (S 658075)

Lee Chen Sin  
CLAIM DEPARTMENT  
DID : 66547520  
FAX :

Date : 27/06/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

## ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000

Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y

Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

### ESTIMATED REPAIR COST DETAILS

Excess : 0.00

Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
-----	-------------	-------------------	---------------

#### List Item

1	FRONT BONNET	RESTORE	R	
1	FRONT FENDER RH			375.60
1	FRONT FENDER SIGNAL LAMP RH			42.20
1	A PILLAR RH	RESTORE		
1	A PILLAR OUTER GARNISH RH (TRIANGLE)			76.40
1	WING MIRROR RH			566.10
1	WING MIRROR COVER RH			75.60
1	FRONT DOOR RH			1,242.30
1	FRONT DOOR HINGE RH (UPPER)			114.20

Date : 27/06/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

## ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000

Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y

Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

### ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
1	FRONT DOOR HINGE RH (LOWER)	114.20	X X <i>su</i>
1	FRONT DOOR STICKER RH (SET)	57.50	<i>su</i> - 57.50
1	FRONT DOOR GLASS RH	244.30	<i>Repair</i> X
1	FRONT DOOR GLASS OUTER MOULDING RH	175.30	<i>su</i> - 175.30
1	FRONT DOOR HANDLE RH	245.70	<i>su</i> - 245.70
1	FRONT DOOR LOCK CAP RH	75.50	<i>su</i> - 75.50
1	FRONT DOOR HANDLE BRACKET RH	211.40	<i>3 X</i> X <i>su</i>
1	FRONT DOOR PROTECTOR RH	103.60	<i>Repair</i> <i>su</i> - 103.60
1	FRONT DOOR PROTECTOR CHROME MOULDING RH	55.90	<i>su</i> - 55.90
1	FRONT DOOR LOCK RH	755.40	X X <i>su</i>

Date : 27/06/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

## ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000

Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y

Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

### ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
1	FRONT DOOR GLASS REGULATOR RH	292.10	X
1	FRONT DOOR GLASS REGULATOR MOTOR RH	488.30	X
	<b>Sub Total</b>	<b>5311.60</b>	
	<b>Discount 25% On Parts</b>	<b>(1327.90)</b>	
	<u><b>Labour &amp; Misc</b></u>		
	LABOUR TO FACILITATE REPAIR	<del>900.00</del>	550 550
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS	35.00	35
	TO SPRAY PAINT ON AFFECTED AREAS	<del>800.00</del>	550 550
	SPRAY RUST PROOF ON AFFECTED AREA	<del>50.00</del>	30 30
	TO TRANSFER FRONT DOOR (RH) FITTING	<del>100.00</del>	60 60

Date : 27/06/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

## ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000

Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y

Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

### ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	Sub Total	1885.00	

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:

5,868.70 8130.62

Remarks:

5 days - Lumpsum

SUB TOTAL

GST 7.0 % 410.81

TOTAL 6,279.51

Surveyor's name: Rasul - Hp 90010068

Principal's name: HENG LANG HUAY

Survey Date & Time: 02/07/18 @ 1120

Resurvey after repair

PAGE : 4

PLEASE ARRANGE TO SURVEY  
VEHICLE AT 30 BUKIT BATOK  
CRESCENT (S 658075)

Lee Chen Sin  
CLAIM DEPARTMENT  
DID : 66547520  
FAX :

Date : 16/07/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

SUPPLEMENTARY

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000

Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y

Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

## ESTIMATED REPAIR COST DETAILS

Excess : 0.00

Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
<u>List Item</u>			
1	REAR DOOR RH	975.60	975.60 PA /
1	REAR DOOR STICKER RH (SET)	55.00	55.00 new /
1	REAR DOOR PROTECTOR RH	85.60	85.60 new /
1	REAR DOOR PROTECTOR CHROME MOULDING RH	42.20	42.20 new /
1	REAR DOOR OUTER HANDLE RH	202.10	202.10 new /
1	REAR DOOR LOCK CAP RH	55.40	55.40 new /
1	REAR FENDER RH	RESTORE	R

Date : 16/07/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

## SUPPLEMENTARY

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000

Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y

Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

### ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	Sub Total	1415.90	
	Discount 25% On Parts	(353.97)	
	<u>Labour &amp; Misc</u>		
	LABOUR TO CARRY OUT REAR REPAIR	500.00	500 300
	TO SPRAY PAINTING ON REAR AFFECTED AREA	500.00	500 400
	TO TRANSFER & REFIX REAR DOOR RH	100.00	100 60
	TO REMOVE & REFIT ALL NECESSARY TRIM BOARDS, GARNISH, CARPET, FLOOR MATS & SEAT	100.00	100 60
	Sub Total	1200.00	

2,261.92

Remarks:

SUB TOTAL

GST 7.0 % 158.33

TOTAL 2,420.26

Surveyor's name: \_\_\_\_\_

Principal's name: HENG LANG HUAY

Survey Date & Time: \_\_\_\_\_

PAGE : 2

Date : 16/07/2018

To : MS FIRST CAPITAL INSURANCE LIMITED

Attn : Motor Claim Department

FAX :

Owner : HENG LANG HUAY

Insured By : AIG ASIA PACIFIC INSURANCE PTE. LTD.

Certificate No : 2100033313-1000 Accident Date : 17/06/2018

Vehicle No : SGW-7134-Y Make &amp; Model : TOYOTA COROLLA ALTIS 1.6 (A)

FINAL ESTIMATED REPAIR COST DETAILS Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
<b>List Item</b>			
1	REAR DOOR RH	975.60	975.60
1	REAR DOOR STICKER RH (SET)	55.00	55.00
1	REAR DOOR PROTECTOR RH	85.60	85.60
1	REAR DOOR PROTECTOR CHROME MOULDING RH	42.20	42.20
1	REAR DOOR OUTER HANDLE RH	202.10	202.10
1	REAR DOOR LOCK CAP RH	55.40	55.40
1	REAR FENDER RH RESTORE	0.00	0.00
1	FRONT BONNET RESTORE	0.00	0.00
1	FRONT FENDER RH	375.60	375.60
1	FRONT FENDER SIGNAL LAMP RH	42.20	0.00
1	A PILLAR RH RESTORE	0.00	0.00
1	A PILLAR OUTER GARNISH RH (TRIANGLE)	76.40	0.00



Date : 16/07/2018  
To : MS FIRST CAPITAL INSURANCE LIMITED

Attn : Motor Claim Department FAX :

Owner : HENG LANG HUAY  
Insured By : AIG ASIA PACIFIC INSURANCE PTE. LTD.  
Certificate No : 2100033313-1000 Accident Date : 17/06/2018  
Vehicle No : SGW-7134-Y Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

**FINAL ESTIMATED REPAIR COST DETAILS** Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
1	WING MIRROR RH	566.10	566.10
1	WING MIRROR COVER RH	75.60	75.60
1	FRONT DOOR RH	1242.30	1242.30
1	FRONT DOOR HINGE RH (UPPER)	114.20	0.00
1	FRONT DOOR HINGE RH (LOWER)	114.20	0.00
1	FRONT DOOR STICKER RH (SET)	57.50	57.50
1	FRONT DOOR GLASS RH	244.30	0.00
1	FRONT DOOR GLASS OUTER MOULDING RH	175.30	175.30
1	FRONT DOOR HANDLE RH	245.70	245.70
1	FRONT DOOR LOCK CAP RH	75.50	75.50
1	FRONT DOOR HANDLE BRACKET RH	211.40	0.00
1	FRONT DOOR PROTECTOR RH	103.60	103.60
1	FRONT DOOR PROTECTOR CHROME MOULDING RH	55.90	55.90

Date : 16/07/2018  
To : MS FIRST CAPITAL INSURANCE LIMITED

Attn : Motor Claim Department FAX :

Owner : HENG LANG HUAY  
Insured By : AIG ASIA PACIFIC INSURANCE PTE. LTD.  
Certificate No : 2100033313-1000 Accident Date : 17/06/2018  
Vehicle No : SGW-7134-Y Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

FINAL ESTIMATED REPAIR COST DETAILS Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
1	FRONT DOOR LOCK RH	755.40	0.00
1	FRONT DOOR GLASS REGULATOR RH	292.10	0.00
1	FRONT DOOR GLASS REGULATOR MOTOR RH	488.30	0.00
Sub Total		6727.50	4389.00
Discount 25% On Parts (0.00)		(1681.87)	(1097.25)
<b>Labour &amp; Misc</b>			
	LABOUR TO CARRY OUT REAR REPAIR	500.00	500.00
	TO SPRAY PAINTING ON REAR AFFECTED AREA	500.00	500.00
	TO TRANSFER & REFIX REAR DOOR RH	100.00	100.00
	TO REMOVE & REFIT ALL NECESSARY TRIM BOARDS, GARNISH, CARPET, FLOOR MATS & SEAT	100.00	100.00
	LABOUR TO FACILITATE REPAIR	900.00	550.00

Date : 16/07/2018  
To : MS FIRST CAPITAL INSURANCE LIMITED

Attn : Motor Claim Department FAX :

Owner : HENG LANG HUAY  
Insured By : AIG ASIA PACIFIC INSURANCE PTE. LTD.  
Certificate No : 2100033313-1000 Accident Date : 17/06/2018  
Vehicle No : SGW-7134-Y Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

**FINAL ESTIMATED REPAIR COST DETAILS** Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS	35.00	35.00
	TO SPRAY PAINT ON AFFECTED AREAS	800.00	550.00
	SPRAY RUST PROOF ON AFFECTED AREA	50.00	30.00
	TO TRANSFER FRONT DOOR (RH) FITTING	100.00	60.00
	<b>Sub Total</b>	<b>3085.00</b>	<b>2425.00</b>

Date : 16/07/2018  
To : MS FIRST CAPITAL INSURANCE LIMITED

Attn : Motor Claim Department FAX :

Owner : HENG LANG HUAY  
Insured By : AIG ASIA PACIFIC INSURANCE PTE. LTD.  
Certificate No : 2100033313-1000 Accident Date : 17/06/2018  
Vehicle No : SGW-7134-Y Make & Model : TOYOTA COROLLA ALTIS 1.6 (A)

FINAL ESTIMATED REPAIR COST DETAILS Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
	Sub Total	8,130.63	<del>8,130.63</del>
	GST 7.0 %	569.14	400.17
	Total	8,699.77	6,116.92

COR : \$ 4,550.00 (1/2 REPAIR)

7 DAYS REPAIR

Surveyor Name : RASUL - LKK

Date & Time : 02/07/2018 11:20:00 AM

Lee Chen Sin

CLAIM DEPARTMENT

DID : 66547520

FAX :

PARTS - \$ 4,389.00 - 25%

- \$ 3,291.75

LABOR - \$ 2,425.00

\$ 5,716.75

- 20% (1/2 REPAIR)

\$ 4,573.40

PAGE: 5

## Jarice Lee (LKKAuto)

---

**From:** Lee Chen Sin <ChenSin.Lee@ethozgroup.com>  
**Sent:** Monday, July 16, 2018 11:06 AM  
**To:** Rasul (LKKAuto)  
**Cc:** SUR  
**Subject:** FINALIZATION REPORT OF SGW-7134-Y TOYOTA ALTIS (TP)(MS FIRST CAPITAL)  
**Attachments:** 33\_20180716103721.pdf; 33\_20180716103740.pdf; PHOTO AFTER PAINT (1).JPG; PHOTO AFTER PAINT (2).JPG; PHOTO AFTER PAINT (3).JPG; PHOTO AFTER PAINT (4).JPG; PHOTO AFTER PAINT (5).JPG; PHOTO AFTER PAINT (6).JPG; PHOTO AFTER PAINT (7).JPG; PHOTO AFTER PAINT (8).JPG; PHOTO AFTER PAINT (9).JPG; PHOTO AFTER PAINT (10).JPG

Hi Rasul,

Attached are the finalization report and photo after paint of above mention vehicle.

Please send acceptance once the COR is confirm.

COR : \$ 4,550.00 (Lump Sum Repair)  
Repair days : 7

Kindly revert.

Thank you.

Warmest Regards,  
Lee Chen Sin



ETHOZ GROUP LTD  
30 Bukit Batok Crescent Singapore 658075  
Mobile: (65) 8822 8339 / DID: 6654 7520 / Fax: 6654 7542

Website: [www.ethozgroup.com](http://www.ethozgroup.com)



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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/FCI18011819/R1rbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 07-09-2018	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHB 2970G	Veh. Inspected	SGW 7134Y	
Policy No.		Coverage (\$)	0.00	
Claim No.	D18004911MFSH	Excess (\$)	0.00	
Assign From	LURENE JAW	Assign Date	28/06/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	TOYOTA COROLLA ALTIS 1.6 A	c.c	1598	
Engine No.	HIDDEN	Year of Reg.	2007	
Chassis No.	MR053ZEC107149264	Colour	GREY	
Odometer	145970	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/60 R15	CONTINENTAL	5 mm	
L/H Front Tyre	195/60 R15	CONTINENTAL	5 mm	
R/H Rear Tyre	195/60 R15	CONTINENTAL	5 mm	
L/H Rear Tyre	195/60 R15	CONTINENTAL	5 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	17/06/2018	Inspection Date	02/07/2018	
Survey held at	ETHOZ GROUP LTD 30 BUKIT BATOK CRESCENT SINGAPORE 658075			
<b>5a. Remarks</b>				
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.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:			<b>7 Working Days</b>	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGW 7134Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	FRONT BONNET (NPA)	TO REPAIR SEE LABOUR	-	-
1	FRONT FENDER RH	BENT	375.60	375.60
1	FRONT FENDER SIGNAL LAMP RH	SERVICEABLE	42.20	-
1	A PILLAR RH (NPA)	SERVICEABLE	-	-
1	A PILLAR OUTER GARNISH RH (TRIANGLE)	SERVICEABLE	76.40	-
1	WING MIRROR RH	BROKEN	566.10	566.10
1	WING MIRROR COVER RH	MISSING	75.60	75.60
1	FRONT DOOR RH	BENT	1,242.30	1,242.30
1	FRONT DOOR HINGE RH (UPPER)	SERVICEABLE	114.20	-
1	FRONT DOOR HINGE RH (LOWER)	SERVICEABLE	114.20	-
1	FRONT DOOR STICKER RH (SET)	NECESSARY	57.50	57.50
1	FRONT DOOR GLASS RH	TO REPAIR SEE LABOUR	244.30	-
1	FRONT DOOR GLASS OUTER MOULDING RH	NECESSARY	175.30	175.30
1	FRONT DOOR HANDLE RH	SCRATCHED	245.70	245.70
1	FRONT DOOR LOCK CAP RH	SCRATCHED	75.50	75.50
1	FRONT DOOR HANDLE BRACKET RH	SERVICEABLE	211.40	-
1	FRONT DOOR PROTECTOR RH	NECESSARY	103.60	103.60
1	FRONT DOOR PROTECTOR CHROME MOULDING RH	NECESSARY	55.90	55.90
1	FRONT DOOR LOCK RH	SERVICEABLE	755.40	-
1	FRONT DOOR GLASS REGULATOR RH	SERVICEABLE	292.10	-
1	FRONT DOOR GLASS REGULATOR MOTOR RH	SERVICEABLE	488.30	-
1	REAR DOOR RH (ADDITIONAL)	BENT	975.60	975.60
1	REAR DOOR STICKER RH (SET)(ADDITIONAL)	NECESSARY	55.00	55.00
1	REAR DOOR PROTECTOR RH (ADDITIONAL)	NECESSARY	85.60	85.60
1	REAR DOOR PROTECTOR CHROME MOULDING RH (ADDITIONAL)	NECESSARY	42.20	42.20
1	REAR DOOR OUTER HANDLE RH (ADDITIONAL)	SCRATCHED	202.10	202.10
1	REAR DOOR LOCK CAP RH (ADDITIONAL)	SCRATCHED	55.40	55.40
1	REAR FENDER RH (NPA)(ADDITIONAL)	TO REPAIR SEE LABOUR	-	-

Report Ref No. CS/FCI18011819/R1rbe2

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 25% DISCOUNT		-1,681.88	-1,097.25
			5,045.62	3,291.75
	<b>LABOUR</b>			
	LABOUR TO FACILITATE REPAIR.INCLUSIVE OF THE REPAIR OF FRONT BONNET AND FRONT DOOR GLASS RH.		900.00	550.00
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS.		35.00	35.00
	TO SPRAY PAINT ON AFFECTED AREAS.		800.00	550.00
	SPRAY RUST PROOF ON AFFECTED AREA.		50.00	30.00
	TO TRANSFER FRONT DOOR (RH) FITTING.		100.00	60.00
	LABOUR TO CARRY OUT REAR REPAIR.INCLUSIVE OF THE REPAIR OF REAR FENDER RH. (ADDITIONAL)		500.00	300.00
	TO SPRAY PAINTING ON REAR AFFECTED AREA. (ADDITIONAL)		500.00	400.00
	TO TRANSFER & REFIX REAR DOOR RH. (ADDITIONAL)		100.00	60.00
	TO REMOVE & REFIT ALL NECESSARY TRIM BOARDS,GARNISH,CARPET,FLOOR MATS & SEAT. (ADDITIONAL)		100.00	60.00
			3,085.00	2,045.00
	<b>GRAND TOTAL</b>		<b>8,130.62</b>	<b>5,336.75</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>4,250.00</b>

Report Ref No. CS/FCI18011819/R1rbe2

**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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