ASS. REC. BY:	RI	EF: Colfc118012		d3eppe	ial Instruction:
	Sithara	ASSIGNME of FC	1		Date/Time: 5 7 (60 2.05)
To Inspect Vehic	TP RES / OD RES /	EVA/INV/MV/CS SMA 470	S	Insured:	SHA 0461C 8686 5188
of 60 & Policy No:	in Ming Dri	# 66-03	3		0 5 190 MF8H
Sum Insured: Make of Veh: (Client's Record)			Excess: _		810x170 10 A.O.
CA / REV / B	TEP. / REV 24 HRS 50pm @ 5/7/16	Person Contacted:	8 topho	inie ve	H.O.D. Endorsement:
Date/Time A	Action/Instruction (SMA 4708- SHAO461 C-	X			
	lump Sum &	RH50- (Red	1: 1782 1	55%)	

(08/11/13) wef ASS. REC. BY:	
	SSIGNMENT
	Sm 1 6700 05 18
From: Date: 9716	Veh No:
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck/Trailer or an wegan
To Inspect Vehicle No: SMA 470 S	Make: [-lang Freed From 199
at Workshop m/s MBM Whellpower	Colour M. Grey A/C: Insured / Std / NI / NA
of 160 Sin Ming Drive # 06-03, Sin Ming A	Max Fig. Reading 2512 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: GBF . 1060186
Claims No.	Gen. Cond Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorger / Jammed / Leaked / Burnt or
(Client's Record) 12pm@owner waiting	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh: Stephanic	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 185/65R15
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO Or
Bal, or Market Value: 891k	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 9 mm R/Bal. 9 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 9 mm L/Bal. 9 mm
Est. Repairs: 62 days Res.: Yes or No	D.O.A. 1/7/18 D.O.I. 9/7/18
Lum Sum: /-B./ % 3 Val.: Yes or No	Survey held at
	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS (W) Vehicle: IN / OL	11.16.
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction 10/7 1-6 pass & Carhenne	
RECEIV	ED 2 2 OCT 2018
·	
Date/Time, File Pass to?	Davis Of Bassist
1 T. of	Days Of Repair:
Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: 130
Adde	Transportation: 50 Site Insp (\$)S+RS,SI
Add Fe	
70	: Interview (\$) Photos /D
Report Format :	: Tech. Invs (\$) Others
Lump \$um / I.B.I: (\$ HD -)	: Weekend (\$
*	1010



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580

Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

03-07-2018

Our Ref No. D18005190MFSH

Accident Date

01-07-2018

Claim Type. Third Party

Insured Vehicle

SHA0461C

Third Party Vehicle. SMA470S

Survey Location

160 SIN MING DRIVE #06-03 SIN MING AUTOCITY

Contact Person.

STEPHANIE

Contact No.

62628888/86865188

Fax No. 62509015

Survey Type

WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:

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

Cc: TP Solicitor

NA

Attention. NIL

TP Solicitor Fax No. NA

Officer Incharge

SITHARA

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.

7 2 1						
Job Sheet (/	ClaimWS/Surveyor/JobSheet/	(242050) 🕌 PI	RI Documents 😃 Close 🗶			
			PRI Header Details			
Claim No	D18005190MFSH	Policy No	D-18088937MFSH	Claimant S.No & Name	1 & MBM WHI	
Workshop Name	MBM WHEELPOWER PTE LTD (Contact Person : STEPHANIE)	Survey Location & Contact Details	160 SIN MING DRIVE #06-03 SIN MING AUTOCITY Mobile: 86865188 , Phone: 62628888 , Fax: 6250 EmailId: STEPHANIE.LIN@MBMWHEELPOWER.COM			
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:			
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHA0461C	TP Vehicle No	SMA470S	
PRI Recieved Date	03-07-2018 10:23:18 PM	Surveyor Appointed Date	05-07-2018 02:04:51 PM	Surveyor Accept Date	05-07-2018 0	
			Survey Report Upload			
Surveyor Inspection Date *:		Surveyor Report Date	05-07-2018	Upload Survey Report *:	Choose File	
			Vehicle Particulars			
Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year •	
Chasis No		Engine No		Mileage		
Color		Cubic Capacity				
Multiple Do	cuments Upload					
		Upload Multiple	Documents			
File Nam	e			Action		
Surveyor Jo	ob Remarks					
Remarks				Save		

MBM WHEELPOWER PTE LTD

Your Ref: SHA461C Our Ref: SMA470S

To:

FIRST CAPITAL

CC

Fax

SUPPLEMENTARY FOR VEHICLE NO SMA470S

DESCRIPTION

SPECIAL NETT G-GUARD COATING FOR FRONT BUMPER Date: 9/7/2018

From: Stephanie 64525333 Fax:

Contact: 86865188

Make / Model: HONDA FREED HYBRID

Chassis No.: Engine No.:

Accident Date:

GB71060146 LEB5591739

mbm wheelpower

Year of Make:

2018

1 July 2018

QTY List Price

250.00 250.00 Total: \$ 7% GST: \$ 17.50 Grand Total: \$ 267.50

> Mbm wheelpower pte ltd 160 SIN MING DRIVE #06-02 SIN MING AUTOCITY t 62828888 f 64525333

Company Registration Number : 200204110W

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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

atoresata.	
的複雜的思想是是主要是在自由的	ACCIDENT STATEMENT
Date Of Report	02/07/2018 16:47
Date Of Accident	01/07/2018 13:50
Exact Location Of Accident	MARSILING RISE W18 LOT NO.464(OPEN CARPARK)
Country/State of Loss	SINGAPORE
and the property of the best of the best of the board of the best	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMA470S
Insured/Policyholder	
Name Of Registered Owner	BENAZIR BINTE MOHAMED SHARIFF
NRIC No	S8711471F
Email Address	MEVINJIT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96235561
Alternative Phone No	OTHERS-96235561
Vehicle Particulars	
Manufacturer	HONDA
Model	FREED
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	SD18V05580/VPC/R00
Cover Note Number	
Dutinous	

Driver

Name of Driver MEVINJIT SINGH DHILLON

 NRIC No
 \$8944933B

 Date Of Birth
 06/12/1989

 Occupation
 INDOOR

 Date Of Driving Pass
 15/08/2011

Driving Experience 6 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96235561

Fax Number

Contact Number OTHERS-96235561
EMail Address MEVINJIT@GMAIL.COM

BLK 119 MARSILING RISE Address

#09-132 730119

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions CLEAR Road Surface DRY

Other Information

Postcode

Was any foreign vehicle involved in this accident? NO 2 Number of vehicles involved in the accident Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged? I have been approached by unknown person(s) NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

WOODLANDS EAST N.P.C

ROAD: 3 WOODLANDS DRIVE 63, POSTCODE: 737890, COUNTRY: Police Station Address

SINGAPORE

YES

NO

TEL NO: - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED

Attachment(s)

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

Details of Witness 1

ROSLI BIN MAHMUD Name

Phone Number 81638586

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

SHA461C Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

TAXI Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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 the purpose(s) and the purpose of the p
 - (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.

A

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

NRIC/FIN No .:

Reporting Centre Personnel's Signature

manage the pelation of

Sketch Plan #2 Pg. 1

SKETCH PLAN			
		\longrightarrow	
			1 A : SMA 419
			I DISHALCIC
	The state of the s	- MAH-15-1-1-1	DES MINET
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
	Redar Po	lice Report.	
	heunr (o	THE REPORT	
			2
DECLARATION			1/
	iculars are true in every respect.	/	/
	N	fA	
	M		
Policyholder's Signature	Driver's Signature	Reporting Cen	re Personnel's Signature
Date & Time:	(If driver is not the policyh Date & Time:	older) Name: NRIC/FIN No.:	





1 of 3 Report No. T/20180702/2047

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999

DE	TCIOC	OF	CITYA	AFFIC	ACCH	VERIT

Date/Time 02/07/201		lade:	Vide Report No.:	Station Diary No.: 119			
Informant	's Particu	ilars					
Name of Informant:			Address:				
MEVINJIT SINGH DHILLON			APT BLK 119 MARSILING RISE #09-132 SINGAPORE 730119				
ID Type / ID No.:			Contact No.:				
NRIC NO / S8944933B			Home/Office: Mobile: 96235561				
Nationality: SINGAPORE CITIZEN		EN	Email:				
Sex: Male	Age: 28	Date of Birth: 06/12/1989	Type of Informant: Driver				
Race: Sikh			Language: Institution / School Nam English				
Occupation: ARMY REGULAR			Driving Licence Information: Class: 3 Date of Expiry:				

General Inform	nation of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 02/07/2018 10:20)	Type of Location: Car Park
Location: Along Road 1 MARSILING R	NSE arpark at blk 119 Marsilir	ng Rise Lot 464			
		Road Surface:		Road	Speed Limit:
Traffic Flow: Traffi		Traffic Control:		Traffic Volume:	
Type of Collisi Moving Vehicle	on: e Against - Parked Vehic	le			one conveyed by ulance:

Vehicle No.	- Type	- Make	Model	Color	Condition	No of Passenge
SMA470S	Car				Slightly	0

Details of Person Involved	经数据有益的 计未完全 化中心 医多种性神经 医克莱克氏 医电影
Any Pedestrian Involved: No	A
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20180702/2047

Police Station Of Origin: Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

CONTINUATION OF REPORT

Driver Name	MEVINJIT SINGH DHILLON		ID No		S8944933B			
Related Vehicle	SMA470S (Car)			SMA470S (Car)		Conta	ict No.	96235561
Hospital/Clinic	NIL .		Class Drivin Licen Expir	g	Class: 3 Date of Expiry: NIL			
Date Treatment	NIL Dat			charge	NIL			
No. of Days gran	ted Medical Leave	Degree o	f Injury	NIL				

Brief Details.

On 02/07/2018 at about 1020hrs, I went to retrieve my vehicle. I noticed that there was a note pasted on my driver side window. The note stated" Hi, a taxi reversed and hit your car. The taxi vehicle is SHA461C. You can call me at 81638586). I called the witness and he informed me that the taxi reversed and hit the left side of my vehicle and drove off. He also informed that the incident happened on 01/07/2018 at about 1350hrs.

I am making for report for insurance claim purposes. This is the first time such incident happened to me. I have an in car camera inside my vehicle however it was switched off.





3 of 3

Report No. T/20180702/2047

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 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:	Signature Of Informant:
J/	M
Sgt 1 TOH CHAI TEE	A
Signature Of Interpreter:	Date/Time:
Not applicable	02/07/2018 13:24
Officer In Charge Of Case:	Classification Of Case:
TP / HRT /	
Sr Staff Sgt TAN JEOK LENG	
Contact No.: 65476144 SN 130	
Authentication Stamp NR468 Signature	
Singapore Police Porce	

Enquire Transfer Fee			
Vehicle Details			
Vehicle No.:	SMA470S		
Vehicle Type :	P11 - Passenger Station Wagon/Jeep/Land F	lover	
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	HONDA		
Vehicle Model:	FREED HYBRID 1.5G AUTO		
Chassis No. :	GB71060146		
Propellant:	Petrol-Electric		
Engine No. :	LEB5591739		
Motor No.:	H14072157		
Engine Capacity:	1496 сс		
Power Rating:	22.0 kW		
Maximum Power Output:	101.0 kW (135 bhp)		
Maximum Laden Weight:	1440 kg		
Unladen Weight:	1430 kg		
Year Of Manufacture :	2018		
Original Registration Date:	25 May 2018		
Lifespan Expiry Date:			
COE Category:	E - Open - all except motorcycle		
Quota Premium :	\$39,000.00		
COE Expiry Date :	24 May 2028		
Road Tax Expiry Date :	24 Nov 2018		
PARF Eligibility Expiry Date:	24 May 2028		
Inspection Due Date:	24 May 2021		
Intended Transfer Date:	03 Jul 2018		
CO2 Emission:	99.00 (g/km)		
CEV/VES Rebate Utilised	\$10,000.00		
Amount:			
CO Emission:	0.038000 (g/km)		
HC Emission:	0.009000 (g/km)		
NOx Emission:	0.011000 (g/km)		
PM Emission:	0.900000 (mg/km)		
Late renewal fee(s) will be impose	ed if road tax / lay up has expired. Please use Enqu	ire Road Tax Payable for fee(s) pay	able.
	t (if any), of a vehicle will follow the vehicle to the		
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After
Transfer Fee :	25.00	(5\$)	
Total Amount Payable :	20100		2

You may print this page for reference.

OK Print

MBM WHEELPOWER PTE LTD

Your Ref: SHA461C Our Ref: **SMA470S**

To:

FIRST CAPITAL

CC

Not Nothersel Renny Blepains Eday

Fax

ESTIMATE FOR VEHICLE NO. : SMA470S Date:

4/7/2018

From:

Stephanie

Fax:

64525333

Contact:

86865188

Make / Model:

HONDA FREED HYBRID

mbm wheelpower

Chassis No.:

GB71060146

Engine No.: Year of Make: LEB5591739 2018

Accident Date:

1 July 2018

DESCRIPTION	QTY	List Price		
FRONT BUMPER	1	\$ Bular	1,350.00	
FRONT BUMPER CLIPS @ \$5 EACH	10	\$ ne	50.00	$\overline{}$
FRONT BUMPER SIDE BRACKET LH	1	\$ Sh	90.00	×
FRONT BUMPER SIDE RETAINER LH	1	\$ Sh	80.00	X
FRONT BUMPER LOWER GRILLE	1	\$ Su	220.00	1
FRONT LH FENDER INNERSHIELD	1	\$ ^ ∽	200.00	X
FRONT LH FENDER INNERSHIELD CLIPS @ \$5 EACH	10	\$ an	50.00	X
	Total:	\$	2,040.00	- \
	LESS 20%	\$	(408.00)	E
	Parts Total:	\$	1,632.00	

SPECIAL NETT

BODY SEALANT

7% GST: \$

Grand Total: \$

na 80.00 X

226.24

3,458.24

LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS. INCLUDING TO KNOCK-OUT, WELD & STRAIGHTEN ON THE AFFECTED PARTS.

TO CHECK & RECONNECT ALL NECESSARY WIRING

TO SPRAY PAINT ON THE AFFECTED AREAS

	\$ 800.00	2001
	\$ 120.00	15%
	\$ 600.00	2501
Total:	\$ 3,232.00	

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:

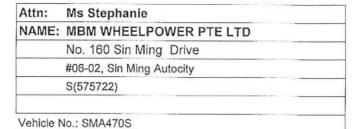
8-32

Mbm wheelpower pte ltd

160 SIN MING DRIVE #06-02

SIN MING AUTOCITY t 62828888 f 64525333

Company Registration Number: 200204110W





INVOICE

GST REG NO:

200504627K

Tax Invoice:

INV8222026/1

Invoice Date:

22.9.2018

S/N	Qty	Particular	 Jnit Price	Amount	_
01.		Being charge polish and apply ceramic coating on tailgate and rear bumper	\$ 500.00 \$	500.00	2501
		G-GUARD 'RADIANT' 3-LAYER COAT			

SUB TOTAL: 500.00 7% GST: 35.00

E. & O.E Total S\$ (SGD)

535.00

The above items are received in good order and condition by

Customer's Signature/Co.Stamp

for KBS Motorsport Pte Ltd

Terms & Conditions:

kbs motorsports pte ltd 160 Sin Ming Drive, #06-03 Sin Ming Autocity, S575722 t 64515 333 f 64525 333

Mr Mevinjit Singh Dhillon
Blk 119 Marsiling Rise
#09-132
S(730119)
lo.: SMA470S



INVOICE

GST REG NO:

200504627K

Tax Invoice:

INV8222026

Involce Date:

26.5.2018

S/N	Qty	Particular	Unit Price	Amount
01.		Being charge polish and apply ceramic coating on full vehicle	\$ 1,288.00	\$ 1,288.00
		G-GUARD 'RADIANT' 3-LAYER COAT		



E. & O.E	Total S\$ (SGD)	\$ 1,378.16
	7% GST:	\$ 90.16
	SUB TOTAL:	\$ 1,288.00

The above items are received in good order and condition by

Customer's Signature/Co.Stamp

for KBS Motors Pte Ltd

Terms & Conditions:

kbs motorsports pte ltd 160 Sin Ming Drive, #06-03 Sin Ming Autocity, S575722 t 64515 333 f 64525 333



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 Internation	nale Des Experts En Automobi	lle.
FIRS	ST CAPITAL INSUI	RANCE LTD	Ref : CS/FCI18012285/F	Ktd3e2
	ROBINSON ROAD -01 CITY HOUSES	INGAPORE 068877	Date: 22-10-2018 Code: FCI2	
1.		Policy Particulars	:- THIRD PARTY CLAIM	
	Insured Veh.	SHA 461C	Veh. Inspected	SMA 470S
	Policy No.	D-18088937MFSH	Coverage (\$)	0.00
	Claim No.	D18005190MFSH	Excess (\$)	0.00
	Assign From	SITHARA	Assign Date	05/07/2018
2.		Vehicle Partic	culars & Condition	
	Make & Model	HONDA FREED (A)	c.c	1496
	Engine No.	HIDDEN	Year of Reg.	2018
	Chassis No.	GB71060146	Colour	METALLIC GREY
	Odometer	2512	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Conditi	ons of Tyres	
		Size	Make	Balance
	R/H Front Tyre	185/65 R15	YOKOHAMA	9 mm
	L/H Front Tyre	185/65 R15	YOKOHAMA	9 mm
	R/H Rear Tyre	185/65 R15	YOKOHAMA	9 mm
	L/H Rear Tyre	185/65 R15	YOKOHAMA	9 mm
4.		Description	on of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE N/S	FRONT PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		Genera	I Information	
	Accident Date	01/07/2018	Inspection Date	09/07/2018
	Survey held at	160SIN MING DRIVE # 06-03 SI	IN MING AUTOCITY	
	Repairer	MBM WHEELPOWER PTE LTD		
5a.		R	emarks	
	B)THE INSPECTION	ISISTENT TO ACCIDENT REPOR ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	THOUT PREJUDICE" BASIS.	REPAIRS.
5b.		Estimate	Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	2 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. SMA 470S

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	BUCKLED / CUT	1,350.00	1,350.00
10	FRONT BUMPER CLIPS @\$5.00	NECESSARY	50.00	50.00
1	FRONT BUMPER SIDE BRACKET LH	SERVICEABLE	90.00	-
1	FRONT BUMPER SIDE RETAINER LH	SERVICEABLE	80.00	-
1	FRONT BUMPER LOWER GRILLE	SERVICEABLE	220.00	-
1	FRONT LH FENDER INNERSHIELD	SERVICEABLE	200.00	-
10	FRONT LH FENDER INNERSHIELD CLIPS @\$5.00	NOT NECESSARY	50.00	-
	LESS 20% DISCOUNT		-408.00	-280.00
			1,632.00	1,120.00
	SPECIAL NETT ITEMS			
1	BODY SEALANT (SN)	NOT NECESSARY	80.00	_
			80.00	-
	LABOUR			
	TO REMOVE,REFIT & REPAIR AFFECTED DAMAGED PARTS INCLUDING TO KNOCK-OUT,WELD & STRAIGHTEN ON THE AFFECTED PARTS.		800.00	200.00
	TO CHECK & RECONNECT ALL NECESSARY WIRING.		120.00	15.00
	TO SPRAY PAINT ON THE AFFECTED AREAS.		600.00	250.00
	BEING CHARGE POLISH AND APPLY CERAMIC COATING ON TAILGATE AND REAR BUMPER (ADDITIONAL).		500.00	250.00
			2,020.00	715.00
	GRAND TOTAL		3,732.00	1,835.00

RECOMMENDED COST OF LUMP SUM REPAIRS		1,450.00
--------------------------------------	--	----------

Report Ref No. CS/FCI18012285/Ktd3e2

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.