

REF: CS1/ICS18012754/Bsb92

Special Instruction:

US: \$12500.00.

Third Parties:

Claimant:

Surveyor: PAL'S Appraiser

Workshop: Reliable Cars

ASSIGNMENT (Office)

From (Person): Janice Goh of Ics Date/Time: 13/07/2018

Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: 6HV 3965Y Insured: 6HV 6774X

at Workshop m/s Reliable Carz Tel: 8166 5757

of No. 8 Kaki Bukit Ave 4 #05-50

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 21.07.2017

(Client's Record)

D.O.A. 21.07.2017

H.O.D. Enrolment/Date: _____

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: 1/1 Confirmed with Final Fig , days (Red S / %; Original 16 days)

Date/Time: 20/07/18 Submit Final Fig \$ 7,000/-, 12 days (Red \$ 5,500/- 44 %; Original 16 days)

Date/Time	Action/Instruction
	SHV 3965Y - M3 / ALH15013675/RW0352 DUA : 120815. DFA : 181012
	SHY 6714X - CS1/RSL1300K338/Kqdl

John J. [Signature]
20/7/20

Para(1) : Parts found not replaced (To highlight *R or UB, LR, Etc*)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)
--

RECEIVED 20 JUL 2010

Para(3) : Nett Value

Market Value : _____

Salvage Value :

Nett Value : _____

Inspected/
Evaluated by:

Fee Charged:

Date: _____

Basic & Add

Transport

Photos

Others

Total

1) Date/Time _____ File Pass to _____

2) Date/Time

File Return to

3) Date/Time _____ File Pass to _____

4) Date/Time

File Return to

5) Date/Time _____ File Pass to _____

6) Date/Time

File Return to

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 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	22/07/2017 12:08
Date Of Accident	21/07/2017 12:30
Exact Location Of Accident	SELETAR EXPRESSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGV3965Y
Insured/Policyholder	
Name Of Registered Owner	RELIABLE RIDES PTE LTD
Co Reg No	201611527N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90000000

Vehicle Particulars

Manufacturer	HONDA
Model	AIRWAVE
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5091802582
Cover Note Number	

Driver

Name of Driver	MUHAMAD AZHAR BIN RAHMAN
NRIC No	S8114337D
Date Of Birth	18/05/1981
Occupation	OUTDOOR
Date Of Driving Pass	21/08/2004
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94214479
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Email Address

DETAILS OF INJURED PERSON 1

Name MUHAMAD AHZR BIN RAHMAN

Approximate Age 36

Injuries Sustain

Injured person in which vehicle? SGV3965Y

Were seat belts worn? YES

Was injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan #2 Pg. 1

Describe Circumstances of the Accident

As per Police Report.



Declaration

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

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20170721/7010

2 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20170721/7010

CONTINUATION OF REPORT

Driver			
Name	MUHAMAD AZHAR BIN RAHMAN	ID No.	S8114337D
Related Vehicle	SGV3965Y (Car)	Contact No.	94214479
Hospital/Clinic	JIREH FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	21/07/2017	Date Discharge	21/07/2017
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	NG KIM SONG	ID No.	S1325074Z
Related Vehicle	SGY6774X (Car)	Contact No.	96688174
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I WAS DRIVING ALONG SLE TOWARDS CTE AFTER MANDAI EXIT, I WAS TRAVELLING ALONG LANE 2 AND DUE TO ROAD WORKS ALONG LANE 1, 1 VEHICLE LANE CHANGED INTO LANE 2 FROM LANE 1. I SLOWED DOWN TO ALLOW THE FRONT VEHICLE TO LANE CHANGE AND SUDDENLY I FELT AN IMPACT FROM THE REAR. I ALIGHTED MY VEHICLE AND NOTICED THAT A VEHICLE HAD HIT ONTO THE REAR OF MY VEHICLE. I THEN TOOK DOWN THE PARTICULARS OF THE OTHER DRIVER. I ALSO TOOK DOWN THE CONTACT NUMBER OF MY PASSENGER. THEY THEN TOOK ANOTHER VEHICLE WHERE THEY WERE SEND TO THE NEAREST EXIT OF THE HIGHWAY. ABOUT 30 MINUTES LATER, ONE OF THE PASSENGER CALLED ME TO INFORM THAT HE FELT PAIN IN THE BACK AND NECK AREA. I AM A GRAB DRIVER AND AT THE POINT OF ACCIDENT, I HAD 4 PASSENGER IN MY VEHICLE.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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 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	21/07/2017 17:40
Date Of Accident	21/07/2017 12:30
Exact Location Of Accident	ALONG SLE TOWARDS TPE L/P:61/2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGY6774X
Insured/Policyholder	
Name Of Registered Owner	LEOW HOCK MOI
NRIC No	S1335907E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96808331
Alternative Phone No	OFFICE-96808331

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (A)
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC16A00252500
Cover Note Number	

Driver

Name of Driver	LEOW HOCK MOI
NRIC No	S1335907E
Date Of Birth	31/03/1958
Occupation	INDOOR
Date Of Driving Pass	26/01/2000
Driving Experience	17 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96808331
Fax Number	
Contact Number	OFFICE-96808331
EMail Address	NOEMAIL

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

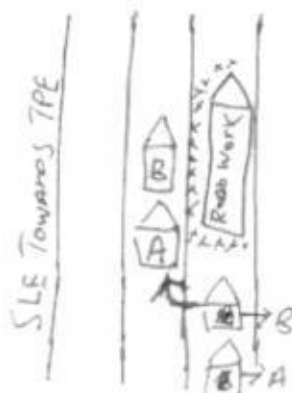
1. Please report correctly the details of the accident to speed up the claims process.
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the 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.
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' law yers/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 making 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



(A) SGY 6774 X

(B) SGV 3965 Y

Individual Statement

OWN VEHICLE REGISTRATION NUMBER _____

DETAILS OF OTHER VEHICLES OR PROPERTY DAMAGED

Other Vehicle or Property 1 (VEHICLE B)

Vehicle Registration Number _____

SGV 3965Y

Vehicle Make/ Model/ Colour _____

Details of Properties (If Other Party is not a Vehicle) _____

Damage Area _____

Name of Driver _____

NRIC/ FIN/ Passport _____

Contact Number / Email Address _____

Address _____

Name of Insurance Company _____

Other Vehicle or Property 2

Vehicle Registration Number _____

Vehicle Make/ Model/ Colour _____

Details of Properties (If Other Party is not a Vehicle) _____

Damage Area _____

Name of Driver _____

NRIC/ FIN/ Passport _____

Contact Number / Email Address _____

Address _____

Name of Insurance Company _____

DETAILS OF WITNESS

Name _____

Phone / Email Address _____

Address _____

NRIC/ FIN/ Passport _____

DETAILS OF INJURED PERSON 1

Name _____

NRIC/ FIN/ Passport _____

Address _____

Approximate Age _____

Injuries Sustained _____

If Vehicle Occupants, state in which vehicle? _____

Were Seat Belts Worn? _____

☐ Yes

☐ No

Was Injured conveyed to hospital by ambulance? _____

☐ Yes

☐ No

DETAILS OF INJURED PERSON 2

Name _____

NRIC/ FIN/ Passport _____

Address _____

Approximate Age _____

Injuries Sustained _____

If Vehicle Occupants, state in which vehicle? _____

Were Seat Belts Worn? _____

☐ Yes

☐ No

Was Injured conveyed to Hospital by Ambulance? _____

☐ Yes

☐ No

Declaration

I/We declare that the above particulars & information provided above are true in every aspect

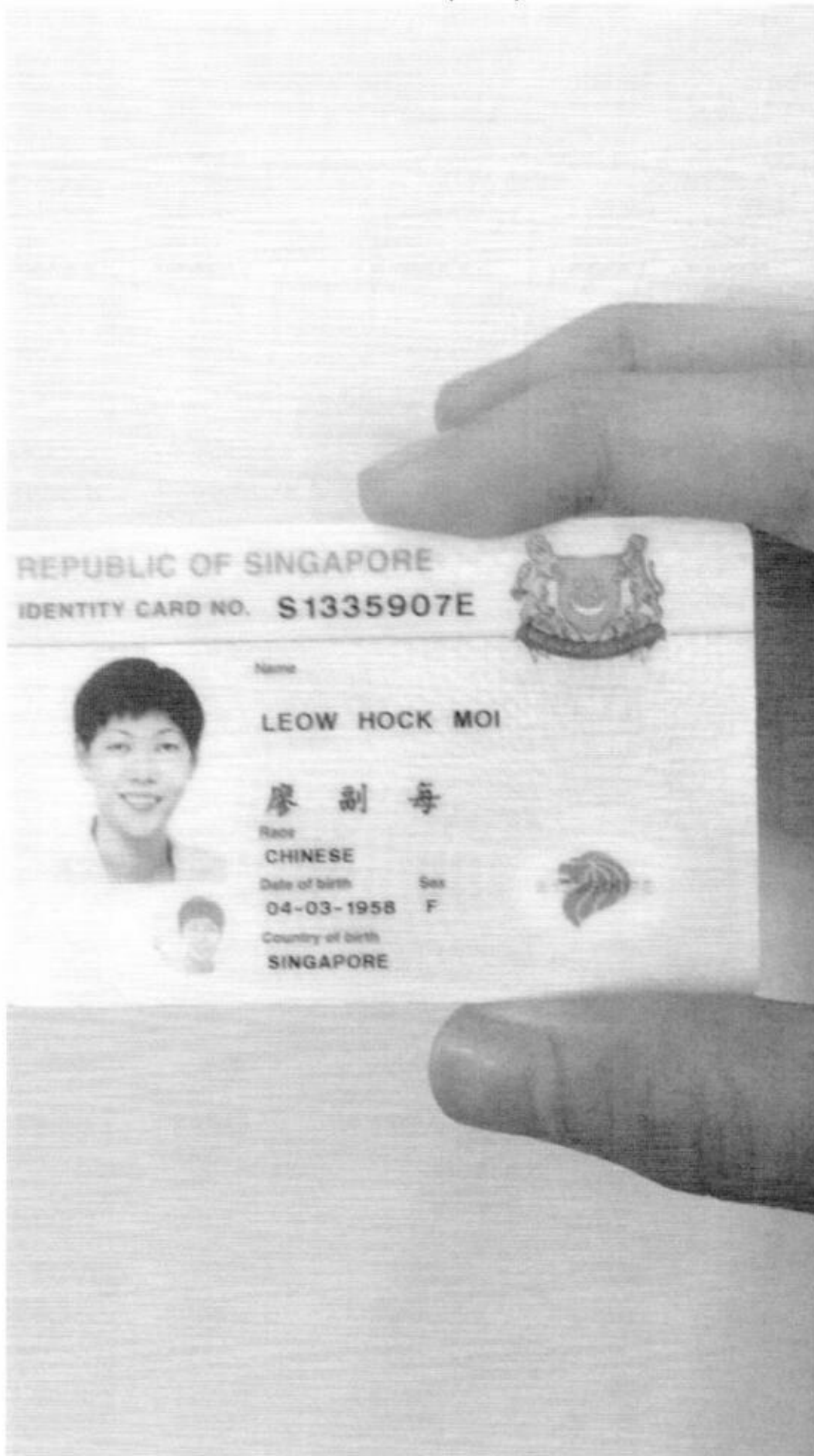
Signature of Policy Holder
(Company Chop if applicable)

Date & Time _____

Signature of Driver / Date & Time
(if Driver is not the Policy Holder)

Date & Time _____

IDENTITY CARD (FRONT)



IDENTITY CARD & DRIVING LICENCE

Barcode: 51325074Z

Photo: [Placeholder]

Serial No: A+ Date of Issue: 03-08-2002

Address: APT BLK 613 HOUGANG AVENUE 8 #12-636 SINGAPORE 530613

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S):

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight <= 2000kg with <= 7 passengers, exclusive of driver, and other motor vehicles with unladen weight <= 2500kg	09 Nov 1998
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	26 Jan 2000
	Motor vehicles which are not constructed to carry load or passengers and the unladen weight > 7250kg	

NP 426A



REPUBLIC OF SINGAPORE
IDENTITY CARD NO: S1325074Z

Photo: [Placeholder]

Name: NG KIM SONG

Chinese Name: 黄金松

Race: CHINESE

Date of Birth: 31-03-1958 Sex: M

Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License No: S1325074Z

Photo: [Placeholder]

Name: NG KIM SONG

Date of Birth: 31 Mar 1958

Issue Date: 29 Sep 2016

Barcode: 0025148071H

Accident Photo



Accident Photo



Accident Photo



Accident Photo



PAL'S

APPRAISER PTE LTD

No. 1 Kaki Bukit Avenue 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883 Tel: 8181 8802 Fax: 6747 1017
Registration No.: 201000268D

Report Reference : TP / 07-17068/DY / 2017

Date of Report : 4 Aug 2017

Reliable Rides Pte Ltd
c/o No.8 Kaki Bukit Ave 4
#05-50 Premier@Kaki Bukit
Singapore 415875

THIRD PARTY SURVEY

ACCIDENT HAPPENED ON 21 Jul 2017

As per your instruction dated 21 Jul 2017 with regard to the above matter. We have carried out a physical inspection on the said vehicle **SGV 3965 Y**. We enclosed herewith our report and findings as follows:

1. VEHICLE PARTICULARS

Registration No : SGV 3965 Y
Model : Honda Airwave
Year / Capacity : 2007/1496
Chassis No : GJ11123418
Engine No : L15A5128080
Mileage : 145382
Colour : White

2. TYRES CONDITION

			<u>Size</u>	<u>Made</u>	<u>Balance</u>		<u>Rim</u>
FRONT	O/S	:	185/65 R14	Neuton	5.00	mm	Sport
REAR	O/S	:	185/65 R14	Neuton	5.00	mm	Sport
FRONT	N/S	:	185/65 R14	Neuton	5.00	mm	Sport
REAR	N/S	:	185/65 R14	Neuton	5.00	mm	Sport

PAL'S

APPRAISER PTE LTD

No. 1 Kaki Bukit Avenue 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883 Tel: 8181 8802 Fax: 6747 1017
Registration No.: 201000268D

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the rear portion(s). For more detail of the damages, please see photograph attached.

4. Workshop Address : Reliable Carz Pte Ltd
No.8 Kaki Bukit Ave 4
#05-50 Premier@Kaki Bukit
Singapore 415875

5. Estimated normal period of repair : **16** working days to complete.

6. Enclosed number of photograph : **138** copies.

7. In accordance to your instruction, we have **Not Authorised** repair to the vehicle and the survey was done on a **"Without Prejudice"** basis. We hope that this report will be of assistance to you in dealing with the matter.

8. Should you discover any discrepancy in the report, please kindly notify us **within 2 weeks**, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle No: **SGV 3965 Y**
 Report No: **TP/ 07-17068/DY / 2017**

SPARE PARTS

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
<u>List Items</u>				
1	Rear windscreen moulding	Necessary	\$ 67.00	\$ ✓ 67.00 NEC ✓
1	Rear tailgate	Damage	\$ 1127.00	\$ ✓ 1127.00 DIS ✓
1	Rear tailgate chrome logo	Necessary	\$ 35.00	\$ ✓ 35.00 NEC ✓
1	Rear tailgate chrome moulding	Necessary	\$ NNX 385.60	\$ 385.60
1	Rear tailgate inner board	Damage	\$ 585.60	\$ 258.30 585.60 CRA
1	Rear tailgate inner handle	Damage	\$ 105.00	\$ 68.50 105.00 CUT ✓
1	Rear tailgate lock	Damage	\$ 176.00	\$ ✓ 176.00 BT ✓
1	Rear tailgate outer garnish	Damage	\$ 406.70	\$ 302.30 406.70 CUT ✓
2	Rear tailgate reflectors x1 @ 243.80	Damage ^{CRA}	\$ 616.00	\$ 481.60 616.00 BR ✓
1	Rear tailgate rubber	Necessary ^{BT}	\$ 197.00	\$ ✓ 197.00 CUT ✓
2	Rear tailgate number plate lamps	Intact	\$ 60.60	\$
1	Rear wiper motor	Damage	\$ 485.90	\$ 485.90 NNX
2	Rear taillamps @ 263.30	Damage	\$ 981.20	\$ 526.60 981.20 SCR ✓
2	Rear taillamp panels	Damage	\$ 563.20	\$ 563.20 NNX
1	Rear end panel	Damage	\$ 498.00	\$ ✓ 498.00 DIS ✓
1	Rear end panel inner garnish	Damage	\$ 147.00	\$ ✓ 147.00 CUT ✓
1	Rear bumper	Damage	\$ 997.00	\$ ✓ 997.00 DIS ✓
1	Rear bumper clip (1 set)	Necessary	\$ 35.00	\$ ✓ 35.00 NEC ✓
2	Rear bumper retainers	Necessary	\$ 58.00	\$ ✓ 58.00 NEC ✓
1	Rear spare tyre panel	Damage	\$ 990.60	\$ ✓ 990.60 DIS ✓
1	Rear spare tyre screw	Damage	\$ 48.80	\$ ✓ 48.80 BT ✓
1	Rear chassis member	Damage	\$ 685.00	\$ 685.00 R X
1	Rear exhaust silencer	Damage	\$ 795.00	\$ 795.00 NNX
2	Rear exhaust silencer mountings	Necessary	\$ 24.00	\$ 24.00 NNX
2	Rear fenders	Damage	\$ 1956.20	\$ 1956.20 R X
1/2	Rear fender inner garnishes x1 LH	Damage	\$ 1193.00	\$ 596.50 1193.00 DIS ✓
2	Rear fender quarter glass mouldings	Necessary	\$ 373.00	\$ 373.00 NNX
			\$ 13592.40	\$ 13531.80 ^{6661.30}
	Discount 20.0%		\$ 2718.48	\$ 2706.36 ^{132.01}
			\$ 10873.92	\$ 10825.44
<u>Special Nett Items</u>				
1	Rear windscreen sealant	Necessary	\$ 60.00	\$ ✓ 50.00 NEC ✓
1	Rear number plate	Damage	\$ 45.00	\$ ✓ 45.00 BT ✓
1	Rear spare tyre insulator	Damage	\$ 180.00	\$ 60.00 180.00 DIS ✓
			\$ 285.00	\$ -275.00
				155.00
	Spare Parts Total		\$ 11158.92	\$ 5484.04 11100.44

Vehicle No: **SGV 3965 Y**
 Report No: **TP/ 07-17068/DY / 2017**

LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
	Spare Parts Total c/f	\$ 11158.92	\$ 11100.44 5484.04
1	To disconnect and reconnect, check electrical wiring, harness wires, sockets, replace damaged parts.	\$ 50.00	\$ 40.00 40.00 ✓
2	To remove and refit rear cushion seats, radio speaker board, interior upholstery to facilitate the repairs.	\$ 200.00	\$ 140.00 60.00
3	To remove and refit fuel tank system.	\$ 120.00	\$ 80.00 ✓
4	To remove and refit rear bumper sensor.	\$ 120.00	\$ 80.00 60.00
5	To remove and refit rear windscreen glass.	\$ 170.00	\$ 120.00
6	To remove and refit quarter glass to facilitate the repairs.	\$ 180.00	\$ 120.00 NNX
7	To remove and refit, straighten and re-adjust exhaust pipe and replace rear exhaust silencer and mountings.	\$ 110.00	\$ 80.00
8	To remove and replace the above damaged parts, straighten, knock out, realign and repair including cut and weld body panels. To re-adjust to the original position using power tools.	\$ 2300.00	\$ 1980.00 1400.00
9	To spray paint on the replaced and repaired parts, prepare spray such as masking tape the unaffected areas with paper, cleaning and sanding of surfaces, final polishing and waxing are also available.	\$ 2000.00	\$ 1760.00 1400.00
10	To apply undercoating on the repaired and replaced panels for rust protection.	\$ 200.00	\$ 180.00 60.00 + 30
Total		\$ 16608.92	\$ 15680.44

19/2/18

*4/5
Repair days 12*

Vehicle No: **SGV 3965 Y**
Report No: **TP/ 07-17068/DY / 2017**


LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
Total c/f		\$ 16608.92	\$ 15680.44

The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a Lump Sum Repair Contract of:

\$ 12500.00

SDLS: TWELVE THOUSAND FIVE HUNDRED ONLY


Qualified Appraiser



51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

Your Ref: DMPC1700451H

Date: 24th July 2018

Our Ref: CS1/ICS18012754/Bsbs2

M/s ECICS Ltd

7 Temasek Boulevard
#10-01 Suntec Tower One
Singapore 038987
(The Motor Claims Department)

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO:
SGV 3965Y INSURED VEHICLE: SGY 6774X ACCIDENT DATE: 21/07/2017**

We thank you for your instruction on 13/07/2018.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SGV 3965Y from M/s Pal's Appraiser Pte Ltd.
- b) Singapore Accident Statement of Vehicles SGV 3965Y and SGY 6774X.
- c) Colour damaged vehicle photographs of SGV 3965Y.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SGV 3965Y
Make & Model	: Honda Airwave
Year of Registration	: 2007
Chassis Number	: GJ11123418
Engine Capacity	: 1496 cc

2. We recommend that the repairs of the entire damage require about 12 (Twelve) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



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 3

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGV 3965Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR WINDSCREEN MOULDING	NECESSARY	67.00	67.00
1	REAR TAILGATE	DISTORTED	1,127.00	1,127.00
1	REAR TAILGATE CHROME LOGO	NECESSARY	35.00	35.00
1	REAR TAILGATE CHROME MOULDING	NOT NECESSARY	385.60	-
1	REAR TAILGATE INNER BOARD	CRACKED	585.60	258.30
1	REAR TAILGATE INNER HANDLE	CUT	105.00	68.50
1	REAR TAILGATE LOCK	BENT	176.00	176.00
1	REAR TAILGATE OUTER GARNISH	CUT	406.70	302.30
2	REAR TAILGATE REFLECTORS	CRACKED / BROKEN	616.00	481.60
1	REAR TAILGATE RUBBER	BENT / CUT	197.00	197.00
2	REAR TAILGATE NUMBER PLATE LAMPS	INTACT	60.60	-
1	REAR WIPER MOTOR	NOT NECESSARY	485.90	-
2	REAR TAILLAMPS	SCRATCHED	981.20	526.60
2	REAR TAILLAMP PANELS	NOT NECESSARY	563.20	-
1	REAR END PANEL	DISTORTED	498.00	498.00
1	REAR END PANEL INNER GARNISH	CUT	147.00	147.00
1	REAR BUMPER	DISTORTED	997.00	997.00
1	SET REAR BUMPER CLIP	NECESSARY	35.00	35.00
2	REAR BUMPER RETAINERS	NECESSARY	58.00	58.00
1	REAR SPARE TYRE PANEL	DISTORTED	990.60	990.60
1	REAR SPARE TYRE SCREW	BENT	48.80	48.80
1	REAR CHASSIS MEMBER	TO REPAIR SEE LABOUR	685.00	-
1	REAR EXHAUST SILENCER	NOT NECESSARY	795.00	-
2	REAR EXHAUST SILENCER MOUNTINGS	NOT NECESSARY	24.00	-
2	REAR FENDERS	TO REPAIR SEE LABOUR	1,956.20	-
2	REAR FENDER INNER GARNISHES	N/S DISTORTED	1,193.00	596.50
2	REAR FENDER QUARTER GLASS MOULDINGS	NOT NECESSARY	373.00	-

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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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 20% DISCOUNT		-2,718.48	-1,322.04
			10,873.92	5,288.16
	SPECIAL NETT ITEMS			
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	60.00	50.00
1	REAR NUMBER PLATE (SN)	BENT	45.00	45.00
1	REAR SPARE TYRE INSULATOR (SN)	DISTORTED	180.00	60.00
			285.00	155.00
	LABOUR			
	TO DISCONNECT AND RECONNECT, CHECK ELECTRICAL WIRING, HARNESS WIRES, SOCKETS, REPLACE DAMAGED PARTS.		50.00	40.00
	TO REMOVE AND REFIT REAR CUSHION SEATS, RADIO SPEAKER BOARD, INTERIOR UPHOLSTERY TO FACILITATE THE REPAIRS.		200.00	60.00
	TO REMOVE AND REFIT FUEL TANK SYSTEM.		120.00	80.00
	TO REMOVE AND REFIT REAR BUMPER SENSOR.		120.00	60.00
	TO REMOVE AND REFIT REAR WINDSCREEN GLASS.		170.00	120.00
	TO REMOVE AND REFIT QUARTER GLASS TO FACILITATE THE REPAIRS.	NOT NECESSARY	180.00	-
	TO REMOVE AND REFIT, STRAIGHTEN AND RE-ADJUST EXHAUST PIPE AND REPLACE REAR EXHAUST SILENCER AND MOUNTINGS.		110.00	80.00
	TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, STRAIGHTEN, KNOCK OUT, REALIGN AND REPAIR INCLUDING CUT AND WELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS. INCLUSIVE OF THE REPAIR OF REAR CHASSIS MEMBER AND REAR FENDERS.		2,300.00	1,400.00
	TO SPRAY PAINT ON THE REPLACED AND REPAIRED PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE.		2,000.00	1,400.00
	TO APPLY UNDERCOATING ON THE REPAIRED AND REPLACED PANELS FOR RUST PROTECTION.		200.00	90.00
			5,450.00	3,330.00
	GRAND TOTAL		16,608.92	8,773.16

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RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			7,000.00
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LIM TEOW GUAN

Asst. Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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