

22/03/2002

ASS. REC. BY:

REF: CS/FCI/8013255/Rlvdr

Special Instruction:

Surveyor
CWS

ASSIGNMENT (Office)

From (Person): Karen Tan

of

FCI

Date/Time: 20/7/18 @ 10:15am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 2169T

Insured:

SHA 7986S

at Workshop m/s

Prime Auto

Tel:

68610908

of

6 Benoi place

Policy No:

Claim No:

D18005540MPSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

19/07/2018

CA / REV / REP. / REV 24 HRS

(DS)

H.O.D. Endorsement:

Date/Time: 10:30am @ 20/7/18

Person Contacted:

Chrissy

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SHD 2169T-X

SHA 7986S-X

23/7/18

Email preli revised to FCI

2/8/18

Final fig \$6280.52 Confirmed by email (Recd 12.8.99, 16/9)

(08/11/18)

REF:

62932

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: SHD 2169T

at Workshop m/s PRIME AUTO

of

Insured: FLI/TP

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.

| | |
|-----|-----|
| | |
| 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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SHD 2169T Yr Regn: 2015 / M34

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

Truck / Trailer or

Make: TOYOTA VELLFIRE 2.4 C.C. 2362

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

Sp. Reading: 250934 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: AT4 208047136

Gen. Cond: Good / ☒ Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt orModi: Nil / ☒ S/Rim / STD A/Rim or

Tyre Size: F: 215/65R16

R: 215/65R16

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

TOYO / YOKO or WKS2169T

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 12/07/18 D.O.I. 20/07/18

Survey held at PRIME AUTO

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

REAR O/S

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: 8

1)

☐ : Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

2) 6/8 - typist

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

Survey Fee:

Transportation:

) \$ + RS. \$

) Photos

) Others

TOTAL

Report Format : CWS

Lump Sum / I.B.I. (\$) 6286.52

150

50

50

41

291

RECEIVED 13 AUG 2018



6/8/2018



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/FCI18013255/R1vd3 | |
| 36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877 | | | Date : 20-07-2018 |  |
| | | | Code : FCI2 | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | | |
| Insured Veh. | SHA 7986S | | Veh. Inspected | SHD 2169T |
| Policy No. | | | Coverage (\$) | 0.00 |
| Claim No. | D18005540MFSH | | Excess (\$) | 0.00 |
| Assign From | CWS (KAREN TAN) | | Assign Date | 20/07/2018 |
| 2. Vehicle Particulars & Condition | | | | |
| Make & Model | | | c.c | 0 |
| Engine No. | HIDDEN | | Year of Reg. | |
| Chassis No. | | | Colour | |
| Odometer | - | | Steering | |
| Brakes | | | Modification | |
| General | | | | |
| 3. Conditions of Tyres | | | | |
| | Size | Make | Balance | |
| R/H Front Tyre | | | mm | |
| L/H Front Tyre | | | mm | |
| R/H Rear Tyre | | | mm | |
| L/H Rear Tyre | | | mm | |
| 4. Description of Damages | | | | |
| | | | | |
| 5. General Information | | | | |
| Accident Date | 19/07/2018 | | Inspection Date | 20/07/2018 |
| Survey held at | PRIME AUTO CLAIMS SERVICE PTE LTD 6 BENOI PLACE SINGAPORE 629927 | | | |
| 5a. Remarks | | | | |
| A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. | | | | |

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Thursday, 2 August 2018 10:26 AM
To: 'Alice Leong'; Shu Pei (LKKAUTO); Rasul (LKKAUTO)
Cc: Admin A; SUR
Subject: RE: FINALISE TO SHD2169T (amended)

Dear Alice,

Noted with thanks.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Alice Leong <aliceleong@primeautoclaims.com>
Sent: Thursday, 2 August 2018 9:47 AM
To: Veron Chen (LKKAUTO) <veronchen@lkkauto.com>; Shu Pei (LKKAUTO) <shupeil@lkkauto.com>; Rasul (LKKAUTO) <Rasul@lkkauto.com>
Cc: Admin A <admin-a@lkkauto.com>
Subject: RE: FINALISE TO SHD2169T (amended)

Hi Veron,

Change to \$6,280.52 then confirm

Regards

Alice Leong

Motor Claims Manager

Prime Auto Claims Service Pte Ltd
5 Benoi Place Singapore 629926
T (65): 6861 0908 | F (65) 6515 2948
HP (65) 9818 4304

A member of the Prime Group

Disclaimer

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From: Veron Chen (LKKAUTO) [mailto:veronchen@lkkauto.com]
Sent: 02 August, 2018 9:43 AM
To: Shu Pei (LKKAUTO) <shupeil@lkkauto.com>; aliceleong@primeautoclaims.com; Rasul (LKKAUTO) <Rasul@lkkauto.com>
Cc: Admin A <admin-a@lkkauto.com>
Subject: RE: FINALISE TO SHD2169T (amended)

Dear Alice,

WITHOUT PREJUDICE

My calculation is \$6,280.53 @ 8 working days.

Please confirm.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Shu Pei (LKKAuto)

Sent: Tuesday, 31 July 2018 11:10 AM

To: aliceleong@primeautoclaims.com; Rasul (LKKAuto) <Rasul@lkkauto.com>; Veron Chen (LKKAuto) <veronchen@lkkauto.com>

Cc: Admin A <admin-a@lkkauto.com>

Subject: FW: FINALISE TO SHD2169T (amended)

Importance: High

Dear Sir / Madam,

Thank you for your email.

Our respective case handler will look into the matter and revert to you in due course.

Please note that: -

| LKK ref | Officer in charge |
|----------------------|-------------------|
| CS/FCI18013255/R1vd3 | Rasul /Veron |

To check availability of the case handler, you may contact the undersigned.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

From: Alice Leong <aliceleong@primeautoclaims.com>

Sent: Monday, 30 July 2018 4:46 PM

To: Rasul (LKKAuto) <Rasul@lkkauto.com>

Cc: Admin A <admin-a@lkkauto.com>

Subject: FW: FINALISE TO SHD2169T (amended)

Importance: High

Hi Rasul,

Amended

We enclosed our before & after repair photos & our calculation sheet for your retention. Shall we finalize at \$6,280.52 and 8 days

Please let us have your confirmation within three days from our e-mail.

Regards

Alice Leong

Motor Claims Manager

Prime Auto Claims Service Pte Ltd

5 Benoi Place Singapore 629926

T (65): 6861 0908 | F (65) 6515 2948

HP (65) 9818 4304

A member of the Prime Group

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MOTOR SURVEY ASSIGNMENT

| | | |
|---------------------------|---|--------------------------------------|
| Date | 19-07-2018 | Our Ref No. D18005540MFSH |
| Accident Date | 19-07-2018 | Claim Type. Third Party |
| Insured Vehicle | SH7986S | Third Party Vehicle. SHD2169T |
| Survey Location | 6 Benoi Place | |
| Contact Person. | CHRISSY TEO | |
| Contact No. | 68610908/ 0 | Fax No. 65152948 |
| Survey Type | WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED: | |
| 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 | PRIME AUTO CLAIMS SERVICE PTE. LTD. | Attention. NIL |
| Cc : TP Solicitor | NA | TP Solicitor Fax No. NA |
| Officer Incharge | KARENT | |

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.

Veron Chen (LKKAuto)

From: Veron Chen (LKKAuto)
Sent: Monday, 23 July 2018 12:28 PM
To: 'Claim Workflow System'
Cc: KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18005540MFSH/1, SHD 2169T
Attachments: SHD 2169T PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SHD 2169T
Date of survey: 20/7/2018
Number of days :8 days

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAuto)
Sent: Friday, 20 July 2018 10:22 AM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18005540MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

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: Friday, 20 July 2018 10:15 AM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; KARENTAN@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18005540MFSH/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
Motor Claims Department
MS First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.



This email has been checked for viruses by AVG antivirus software.
www.avg.com



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: D18005540MFSH
Our Ref: CS/FCI18013255/R1vd3

Date : 23/7/2018

The Motor Claims Department
M/s FIRST CAPITAL INSURANCE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO. SHD 2169T

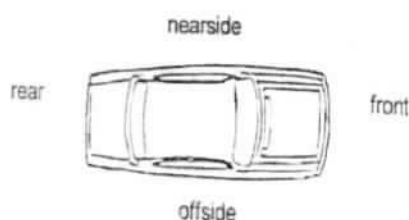
We thank you for your instruction on 20/7/2018

Please be informed that we had conducted the inspection of the above mentioned
20/7/2018 at the premises of M/s PRIME AUTO CLAIMS SERVICE PTE LTD
and have the following to report:-

| | |
|--------------------------|---------------|
| Workshop Estimate Amount | : S\$7,509.51 |
| Revised Estimate Amount | : S\$6,430.53 |
| "Check" Items Amount | : S\$243.99 |
| Market Value | : S\$ |
| LTA Reimbursement Value | : S\$ |
| Nett Value | : S\$ |

Description of Damage:

The vehicle sustained damages at the
rear o/s portion



Comments/Present Status:
Damages Consistent

Yours faithfully,

MOHAMMED RASUL
Automotive Assessor

MPRI18093132 / Prime Auto Claims Service Pte Ltd - HQ
 ENTRY DATE & TIME: 19/07/2018 11:38
 SUBMITTED BY: Chrissy Tan Ye En

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 19/07/2018 11:38
 Date Of Accident 19/07/2018 08:45
 Exact Location Of Accident T3 LINK SOUTH JUNCTION
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD2169T
Insured/Policyholder
 Name Of Registered Owner PRIME CAR RENTAL & TAXI SERVICES PTE LTD
 Co Reg No 199606293Z
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-68982000

Vehicle Particulars

Manufacturer TOYOTA
 Model VELLFIRE-2.4 X HYBRID (ATH20) (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 TAXI

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD
 Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
 Fleet Policy YES
 Policy Number 5068045737-03
 Cover Note Number

Driver

Name of Driver XU ZHICHENG
 NRIC No S8108575G
 Date Of Birth 21/03/1981
 Occupation OUTDOOR
 Date Of Driving Pass 14/09/2006
 Driving Experience 11 YEARS AND 10 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-91445722
 Fax Number
 Contact Number
 Email Address NOEMAIL

Address BLK. 288A PUNGGOL PLACE #15-803 SINGAPORE
Postcode 821288
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle -
-
-
Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
Number of vehicles involved in the accident 2
Was any body injured in the Accident? YES
Was any injured conveyed to hospital by ambulance? NO
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? NO
If Yes, Please state which Police Station
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED STATEMENT

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 SH7986S
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver SEETOH CHEE HONG
NRIC/Passport Number S7249112B
Contact Number 91698213
Address
Postcode
Insurance Company Name MS FIRST CAPITAL INSURANCE LTD
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name XU ZHICHENG
Approximate Age

Injuries Sustain

RIGHT SHOULDER AND NECK PAIN

Injured person in which vehicle?

SHD2169T

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

BLK. 288A PUNGGOL PLACE #15-803 SINGAPORE

Postcode

821288

Accident Sketch Plan Pg. 1

SKETCH PLANIMPORTANT 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.



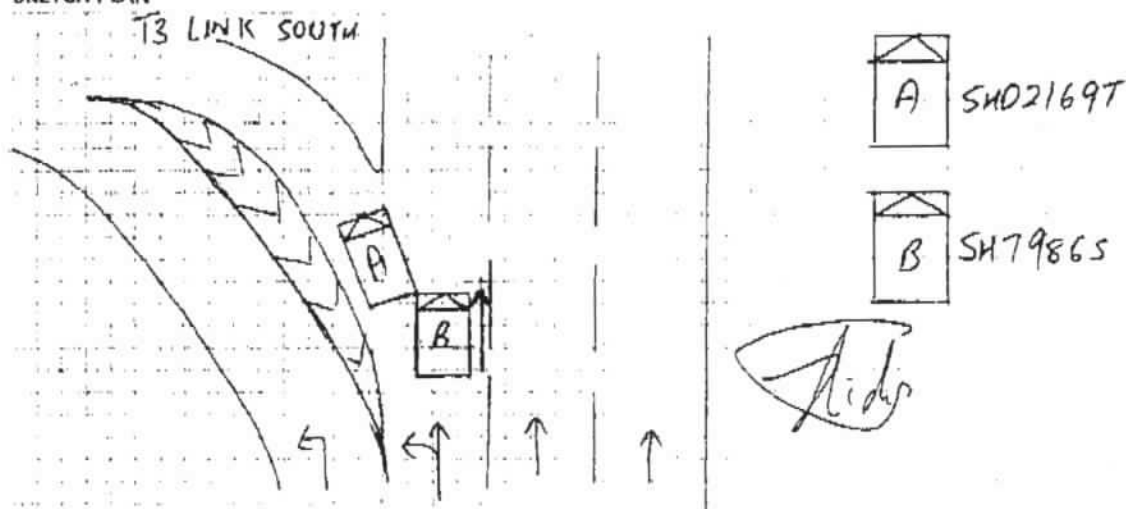
Policyholder's Signature
Date & Time:

[Signature] 19/07/18 11:24am
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Individual Statement Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached statement.

DECLARATION

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

Policyholder's Signature
Date & Time:



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

Hider

19/07/18 11:24am

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

[Signature]

Individual Statement Pg. 1

On 19.07.2018 @ 0845 hrs, I was driving my taxi SHD2169T towards Changi Airport Terminal 3 on lane 3 (this lane is going straight and left turning). Approaching to junction of T3 Link South, I turned on my taxi left signal and proceed turning left into T3 Link South and at this juncture, one Comfort taxi SH7986S which travelled behind my taxi collided onto my taxi centre right rear.

After the accident, we alighted from our vehicles to check on damages. We then met at Terminal 2 Coach Bay to exchange particulars. Driver of SH7986S, Mr. Seetoh Chee Hong (NRIC: S7249112B) verbally admitted his negligence and advised me to lodge an accident report. After the accident, I felt right shoulder and neck pain and I will consult doctor if the pain persisted.





Prime Auto Claims Service Pte Ltd

GST Reg. No : 201606560M
5 Benoi Place Singapore 629926
Tel: 6861 0908 Fax: 6515 2948

Date: 19.07.2018

MS First Capital Insurance Ltd
36 Robinson Road #16-01
City House
Singapore 068877

Attn: Motor Claims Dept

RE: ESTIMATE COST OF REPAIR TO SHD2169T TOYOTA VELLFIRE (2014)

To Supply

| | | | | | |
|------|------|---|----------|----------|------------|
| 1) | 1pc | tailgate | \$ | 2,200.00 | BT ✓ |
| 2) | 1pc | tailgate "Vellfire" emblem | \$ | 80.00 | re ✓ |
| 3) | 1pc | tailgate "Toyota" logo | \$ | 90.00 | re ✓ |
| 4) | 1pc | tailgate "E-Four" emblem | \$ | 70.00 | re ✓ |
| 5) | 1pc | tailgate "Hybrid Synergy Drive" emblem | \$ | 60.00 | re ✓ |
| 6) | 1pc | tailgate weatherstrip | \$ | 400.00 | re ✓ |
| 7) | 1pc | rear bumper | \$ | 1,050.00 | DE ✓ |
| 8) | 1pc | rear bumper right retainer | \$ | 130.00 | re ✓ |
| 9) | 1pc | rear bumper right bracket | \$ | 145.00 | re ✓ |
| 10) | 2pcs | rear bumper left & right tow hook cover | \$ | 70.00 | re ✓ |
| | | | @\$35.00 | | |
| 11) | 1set | rear bumper clip | \$ | 50.00 | re ✓ |
| 12) | 1pc | rear bumper right reflector | \$ | 90.00 | MIS ✓ |
| 13) | 1pc | right rear wheel house plate 65631-58010 | \$ | 43.32 | ? X gur ✓ |
| 14) | 1pc | right side back door opening frame 61775-58030 | \$ | 205.50 | ? X gur ✓ |
| 15) | 1pc | right rear wheel opening extension 61681-58030 | \$ | 76.50 | ? X gur ✓ |
| 16) | 1pc | right quarter wheel house outer panel 61631-58020 | \$ | 620.70 | BT ✓ |
| 17) | 1pc | exhaust tail pipe | \$ | 430.00 | repair ✓ |
| 18) | 1pc | rear bumper right parking sensor | \$ | 290.00 | MIS ✓ |
| 19) | 1pc | rear bumper center parking sensor cover | \$ | 25.00 | re ✓ |
| 20) | 1pc | right tail lamp lower corner panel | \$ | 200.00 | DE X gur ✓ |

| | | |
|--------------------|----|------------|
| Sub total parts | \$ | 6,326.02 |
| Less: 25% discount | \$ | (1,581.51) |
| | \$ | 4,744.51 |

To Supply S.Nett Parts

| | | |
|-------------------------------|----|------------------|
| 1) 1 tube rear glass sealant | \$ | 45.00 <i>rec</i> |
| 2) 1 pc inner seal | \$ | 20.00 <i>rec</i> |
| Sub total S.Nett Parts | \$ | 65.00 |

L./charges

| | | |
|--|----|--------------------------|
| 1) Towing charges (use king trolley) | \$ | 80.00 <i>receipt</i> |
| 2) To tuff kote | \$ | 100.00 60 |
| 3) To remove & refit rear glass | \$ | 120.00 |
| 4) To transfer tailgate trim board, handle, mechanism parts | \$ | 120.00 60 |
| 5) To remove & replace reverse sensors, reset sensor. | \$ | 60.00 |
| 6) To remove & replace exhaust tail pipe | \$ | 120.00 60 |
| 7) To remove rear bumper, tailgate & etc. cut/ welding right rear lower panel, end panel, replace the above parts | \$ | 1,000.00 800 |
| 8) To putty, respray painting tailgate inlet & outer, rear end panel, bumper, right tail lamp lower panel & lower right inner panel | \$ | 1,100.00 1000 |

| | | |
|-----------------------|----|----------|
| Sub total L./charges | \$ | 2,700.00 |
| Estimated Grand total | \$ | 7,509.51 |

I KIC 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:

Rec
 4p 90010068
 8 days
 4s
 20/07/18 @ 1100
 Resurvey after repair

43
20/07/18 21:00
Returning after repair

18-07-18 17:44 From

To: 62049941



Prime Auto Claims Service Pte Ltd

GST Reg. No.: 201606560M
5 Bencoolen Place Singapore 629926
Tel: 6861 0908 Fax: 6515 2948

Date: 19/07/2018

MS First Capital Insurance Ltd
36 Robinson Road #16-01
City House
Singapore 068877

Attn: Motor Claims Dept

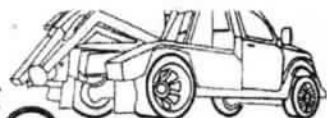
RE: ESTIMATE COST OF REPAIR TO SHD2169T TOYOTA VELLFIRE (2014)

To Supply

| | | | | | | |
|------|------|---|-----------|----|----------|---------------|
| 1.) | 1pc | tailgate | | \$ | 2,200.00 | ✓ |
| 2.) | 1pc | tailgate "Vellfire" emblem | | \$ | 80.00 | ✓ |
| 3.) | 1pc | tailgate "Toyota" logo | | \$ | 90.00 | ✓ |
| 4.) | 1pc | tailgate "E-Four" emblem | | \$ | 70.00 | ✓ |
| 5.) | 1pc | tailgate "Hybrid Synergy Drive" emblem | | \$ | 60.00 | ✓ |
| 6.) | 1pc | tailgate weatherstrip | | \$ | 400.00 | ✓ |
| 7.) | 1pc | rear bumper | | \$ | 1,050.00 | ✓ |
| 8.) | 1pc | rear bumper right retainer | | \$ | 110.00 | ✓ |
| 9.) | 1pc | rear bumper right bracket | | \$ | 145.00 | ✓ |
| 10.) | 2pcs | rear bumper left & right tow hook cover | @ \$33.00 | \$ | 70.00 | X is consider |
| 11.) | 1set | rear bumper clip | | \$ | 50.00 | ✓ |
| 12.) | 1pc | rear bumper right reflector | | \$ | 90.00 | ✓ |
| 13.) | 1pc | right rear wheel house plate 65631-58010 | | \$ | 43.32 | X |
| 14.) | 1pc | right side back door opening frame 61775-58030 | | \$ | 205.30 | X |
| 15.) | 1pc | right rear wheel opening extension 61681-58030 | | \$ | 78.50 | X |
| 16.) | 1pc | right quarter wheel house outer panel 61631-58020 | | \$ | 420.70 | ✓ |
| 17.) | 1pc | exhaust tail pipe | | \$ | 430.00 | ✓ |
| 18.) | 1pc | rear bumper right parking sensor | | \$ | 290.00 | ✓ |
| 19.) | 1pc | rear bumper center parking sensor cover | | \$ | 25.00 | ✓ |
| 20.) | 1pc | right tail lamp lower corner panel | | \$ | 200.00 | ✓ |

Sub total parts \$ 6,326.02
Less 25% discount \$ (1,581.51)
\$ 4,744.51

4000.70
1340.10
4000.50

24
HOURS

HOTLINE: 9182 8211

ISLAND RECOVERY SERVICES

Blk 3026, Ubi Road 1 #04-146 Singapore 408719

Telephone: 6747 7400

Email: islandrecovery@gmail.com

Facsimile: 6844 7233

Web: www.islandrecovery.com.sg

GST Reg.No. M90370499P

Co. Reg. 53120055L

Cash Sales/ Work Order

NO. 1189047

Date: 19/7/18

M/S:

PRIME

Vehicle No: SHD 2169 T Model: Toyota Vellfire

From: T2 Departure Time Start: 08:57 / 09:20

To: 6 Benoi Place Time End: 11:00

Remarks:

☐ Change Tyres / Jump Start☒ Accident☐ Use Car Carrier☐ Basement / Multi Carpark☐ Crane Up / Winch Out☐ Open Door☒ Using King Dolly☐ Dismantle Shaft / Brake☐ Loaded

AMOUNT S\$ 80.00

GST S\$ 5.60

TOTAL S\$ 85.60

Received By

bizSAFE₃

Important Note:

Island Recovery Services

Vehicle is transported at owner's risk. The company accepts no responsibility for damaged or other misdemeanour to your vehicle whilst being transported.



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/FCI18013255/R1vd3e2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 13-08-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

| | | | |
|--------------|---------------|----------------|------------|
| Insured Veh. | SHA 7986S | Veh. Inspected | SHD 2169T |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | D18005540MFSH | Excess (\$) | 0.00 |
| Assign From | KAREN TAN | Assign Date | 20/07/2018 |

2. Vehicle Particulars & Condition

| | | | |
|--------------|---------------------|--------------|------------|
| Make & Model | TOYOTA VELLFIRE 2.4 | c.c | 2362 |
| Engine No. | HIDDEN | Year of Reg. | 2015 |
| Chassis No. | ATH208047136 | Colour | WHITE |
| Odometer | 250934 | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | SPORTS RIM |
| General | FAIR | | |

3. Conditions of Tyres

| | Size | Make | Balance |
|----------------|------------|-----------|---------|
| R/H Front Tyre | 215/65 R16 | WEST LAKE | 6 mm |
| L/H Front Tyre | 215/65 R16 | WEST LAKE | 6 mm |
| R/H Rear Tyre | 215/65 R16 | WEST LAKE | 6 mm |
| L/H Rear Tyre | 215/65 R16 | WEST LAKE | 6 mm |

4. Description of Damages

| |
|--|
| THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS. |
|--|

5. General Information

| | | | |
|----------------|--|-----------------|------------|
| Accident Date | 19/07/2018 | Inspection Date | 20/07/2018 |
| Survey held at | PRIME AUTO CLAIMS SERVICE PTE LTD 6 BENOI PLACE SINGAPORE 629927 | | |

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: | 8 Working Days |
|-------------------------------------|----------------|



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 2169T

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|------------------------------------|--|--------------------------------|---------------------------|-------------------|
| <u>REPLACEMENT OF PARTS</u> | | | | |
| 1 | TAILGATE | BENT | 2,200.00 | 2,200.00 |
| 1 | TAILGATE "VELLFIRE" EMBLEM | NECESSARY | 80.00 | 80.00 |
| 1 | TAILGATE "TOYOTA" LOGO | NECESSARY | 90.00 | 90.00 |
| 1 | TAILGATE "E-FOUR" EMBLEM | NECESSARY | 70.00 | 70.00 |
| 1 | TAILGATE "HYBRID SYNERGY DRIVE" EMBLEM | NECESSARY | 60.00 | 60.00 |
| 1 | TAILGATE WEATHERSTRIP | NECESSARY | 400.00 | 400.00 |
| 1 | REAR BUMPER | DEFORMED | 1,050.00 | 1,050.00 |
| 1 | REAR BUMPER RIGHT RETAINER | NECESSARY | 130.00 | 130.00 |
| 1 | REAR BUMPER RIGHT BRACKET | NECESSARY | 145.00 | 145.00 |
| 1 | SET REAR BUMPER CLIP | NECESSARY | 50.00 | 50.00 |
| 2 | REAR BUMPER LEFT & RIGHT TOW HOOK COVER (NOT NECESSARY) @\$35.00 | NOT CONSISTENT WITH THE IMPACT | 70.00 | - |
| 1 | REAR BUMPER RIGHT REFLECTOR | MISSING | 90.00 | 90.00 |
| 1 | RIGHT REAR WHEEL HOUSE PLATE-65631-58010 | SERVICEABLE | 43.32 | - |
| 1 | RIGHT SIDE BACK DOOR OPENING FRAME 61775-58030 | SERVICEABLE | 205.50 | - |
| 1 | RIGHT REAR WHEEL OPENING EXTENSION 61681-58030 | SERVICEABLE | 76.50 | - |
| 1 | RIGHT QUARTER WHEEL HOUSE OUTER PANEL 61631-58020 | BENT | 620.70 | 620.70 |
| 1 | EXHAUST TAIL PIPE | TO REPAIR SEE LABOUR | 430.00 | - |
| 1 | REAR BUMPER RIGHT PARKING SENSOR | MISSING | 290.00 | 290.00 |
| 1 | REAR BUMPER CENTER PARKING SENSOR COVER | NECESSARY | 25.00 | 25.00 |
| 1 | RIGHT TAIL LAMP LOWER CORNER PANEL | SERVICEABLE | 200.00 | - |
| | LESS 25% DISCOUNT | | -1,581.50 | -1,325.18 |
| | | | 4,744.52 | 3,975.52 |
| <u>SPECIAL NETT ITEMS</u> | | | | |
| 1 | TUBE REAR GLASS SEALANT (SN) | NECESSARY | 45.00 | 45.00 |
| 1 | INNER SEAL (SN) | NECESSARY | 20.00 | 20.00 |
| | | | 65.00 | 65.00 |
| <u>LABOUR</u> | | | | |
| | TOWING CHARGES (USE KING TROLLEY). | | 80.00 | 80.00 |

Report Ref No. CS/FCI18013255/R1vd3e2



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Page No.:2 of 2

| Qty | Description of Parts | Condition | Estimate By Workshop (\$)) | Our Adjusted (\$) |
|-----------------------------|--|-----------|----------------------------|-------------------|
| | TO TUFF KOTE. | | 100.00 | 60.00 |
| | TO REMOVE & REFIT REAR GLASS. | | 120.00 | 120.00 |
| | TO TRANSFER TAILGATE TRIM BOARD,HANDLE,MECHANISM PARTS. | | 120.00 | 60.00 |
| | TO REMOVE & REPLACE REVERSE SENSOR,RESET SENSOR. | | 60.00 | 60.00 |
| | TO REMOVE & REPLACE EXHAUST TAIL PIPE. | | 120.00 | 60.00 |
| | TO REMOVE REAR BUMPER, TAILGATE & ETC,CUT/WELDING RIGHT REAR LOWER PANEL,END PANEL,REPLACE THE ABOVE PARTS.INCLUSIVE OF THE REPAIR OF EXHAUST TAIL PIPE. | | 1,000.00 | 800.00 |
| | TO PUTTY,RESPRAY PAINTING TAILGATE INLET,OUTER,REAR END PANEL,BUMPER,RIGHT TAIL LAMP LOWER PANEL & LOWER RIGHT INNER PANEL. | | 1,100.00 | 1,000.00 |
| | | | 2,700.00 | 2,240.00 |
| GRAND TOTAL | | | 7,509.52 | 6,280.52 |
| RECOMMENDED COST OF REPAIRS | | | | 6,280.52 |

Report Ref No. CS/FCI18013255/R1vd3e2

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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