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a Insured Vel	ncle No.: SFD 3	5585S	Claim No.	8004		
Name of In	ared : MOHOMMC	D SHOPOT B	Policy No.	: 3/000		
Insured Tel	MOHONEELS			PREZE	ON EXCRA	
-:0						
Excess Sec	H :S\$	DOA: 30.01.201	> Place of Acc	ident: PET	RUAN .	
Is driver the	owner? ( YES / NO )	Nature of Accident:		12		
If NO, Dri	ver Name / Age : RASLIA	DA BYE AHMAD	OI GIA REP	ORT: YES / NO	; TP GIA REPORT: YE	SINO
	ver Tel No. :		NO Insured Linb	ility: 9	5 Final ? Yes / No	
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	FOR CSO ONLY:			STAGE	RGEN	WIC.
	Is driver the owner?	(YES /NO)		Finalisation	KACIAI	
	If NO, Driver Name / Age :			Email AIG for		
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ASSIGNMENT Vehillo S/HO 9 1 9 7 Ris Regul 10 1 11 enneth Type: M.Car / M.Cycle / Bus / Van / Lony / Pax? / Prime Mover / Estimated Cost Truck / Trailer or OD [TP] WS | TP RES | OD RES | EVA | INV | MV Make Chewolet Epicyco Colour holy to I had AC. Insured | Std | NI | NA To Inspect Vehicle No: Trans Cab Sp.Reading 2/2 92 TiRadio: Insured / Std / NI / NA at Workshop m/s Eng/No 4216 A69RTBB 05848 Insured C/No Gen. Cond. Good / Fair / Poor / Burnt Policy No. Steering: Inorder I Jammed I Leaked I Burnt or Claims No. Excess Brake: Inorder / Jammed / Leaked / Burnt or Sum Insured: (Client's Record) Modi: Nil / S/Rim / STD A/Rim or Tyre Size: F: 195/63215 Make of Veh: BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / (Policy Condition) O/S N/S Remark: The veh had co.nmenced its TOYO I YOKO or repair at the time of inspection. Real Front Bal, or Market Value: R/Bal. mm R/Bal. Consistent? : Yes or No IDAC Accident Roort: L/Bal. mm L/Bal Consistent? : Yes or No GIA / PR Seen: D.O.A. Res.: Yes or No Est. Repairs: Survey held at 3 Val.: Yes or No Des. of Damages: Frt. / Rear / O/S / N/S / U/C / Rooftop or Lum Sum: CA / REV / REP. / 24 HRS Vehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision. Person Contacted: Action / Instruction Date / Time (Reel \$ 2816. 87/ 529). Survey Fee: Date Date/Time. File Return to? Date/Time, File Pass to? Basic & Add TOTAL S+RS \_ SI Presi Report

## 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</u> and <u>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.

Was driver an employee of the Insured's Company No If No, Relationship of the Driver with the Insured Oth

- 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	31/01/2013 09:55
Date Of Accident	30/01/2013 21:30
Exact Location Of Accident	Petir Road Car Park
<b>。</b>	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD9197R
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Vehicle Particulars	
Manufacturer	CHEVROLET
Model	EPICA-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	Hire and Reward
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	First Capital Insurance Ltd
Type Of Coverage	Third Party
Fleet Policy	Yes
Policy Number	D-12047359MFSH
Cover Note Number	
Driver	
Name of Driver	GOH CHONG YEE
NRIC No	S6815048E
Date Of Birth	24/04/1968
Occupation	Outdoor
Date Of Driving Pass	08/12/1993
Driving Experience	19 Years And 1 Month
Gender	Male
Mobile Number	(Local) +65-98975751
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	APT BLK 115 BEDOK NORTH ROAD #08-311
Postcode	460115

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

Side Swipe-Opposite Direction

Weather Conditions

Clear

Road Surface

Dry

Other Information

Was any foreign vehicle involved in this accident? No

Was any body injured in the Accident?

No

Was any other material or property damaged?

Yes

Was there any video captured by Car Camera?

No

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

On 30.01.2013 at about 2130hrs, I was traveling straight along Petir Road car park when I notice Vehicle B (SFD3585S) was approaching in fast speed. As the road is bending road, I slow down and stop to give way to him. While stationary, I felt an impact and see that vehicle B collided onto my taxi's right side portion. Vehicle A: 2 passengers Vehicle B: no passenger /rc

Are accident photos available for attachment?

Yes

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SFD3585S

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

NG HUI YIN JALINDA

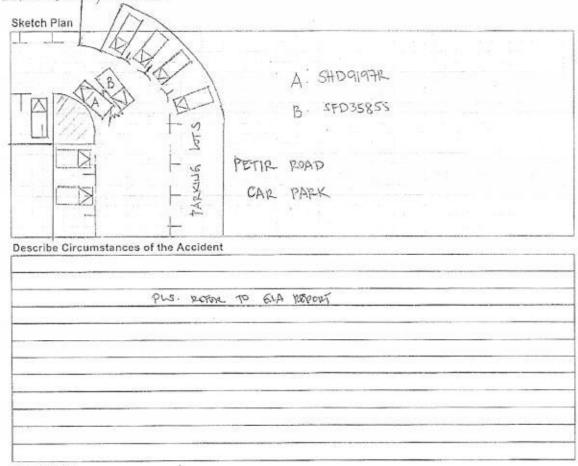
Phone Number

Email Address

#### 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.
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- 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 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.



Declaration

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

Policyholder's Signature / Date & Time

sture (If driver is not the policyholder) / Date Driver's Sig & Time

ROEL Witnessed by Reporting Centre

# Enquire Transfer Fee

## Vehicle Details

Vehicle No.:

SHD9197R

Vehicle Type

H10 - Public Transport Taxi (Motor Car)

Vehicle Attachment 1

Air-Con (Taxi)

Vehicle Scheme

Taxi (Company)

Vehicle Make

CHEVROLET

Vehicle Model

EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO

Chassis No.

KL1LA69RJBB058498

Propellant:

Diesel

Engine No.

Z20S1443559K

Engine Capacity :

1991 cc

Maximum Laden

Weight:

2055 kg

Unladen Weight:

1625 kg

Year Of Manufacture.

Original Registration

2011

14 Oct 2011

Lifespan Expiry Date

13 Oct 2019

COE Category :

A - Car (1600cc & below)

Quota Premium

\$35,200,00

COE Expiry Date

13 Oct 2019

Road Tax Expiry Date

13 Apr 2013

PARF Eligibility Expiry

Date

13 Oct 2019

Inspection Due Date

13 Apr 2013 31 Jan 2013

Intended Transfer

CO2 Emission.

The current road tax expiry is 13 Apr 2013. You may renew the road tax from 14 Jan 2013 with all pre-requisite(s) fulfilled. If the road tax is renewed after 13 Apr 2013, late renewal fee(s) will be imposed. Please use. Enquire Road Tax Payable to check on the late fee(s) payable

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred

Amount Payable (From 14 Apr 2013 to 13 Oct 2013)

Amount rayable (rioni	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee	11.00	4	11.00
Sub Total :			11.00
Nett Road Tax Amount (After Offsetting Over	3,080.00		3,060 00
Payment) : Total Amount			3,071.00
Payable : Message			

No further renewal of COE is allowed for this vehicle. The vehicle must be de-registered at the end of COE expiry

You may print this page for reference

OK | Print |





Home | About Us | Services

Driving Licence Enquiry Home>Driving Licence information
>Licence Enquiry Options> Status of Driving Licence

Terms and Conditions | FAQs| Help

Outstanding Traffic Offence

Licence Number:

Status of Driving Licence

S7129872H

Driving

Status of Driving Licence: Valid Classes of Licence: 3

Expiry Date:

Valid for life unless revoked, suspended or disqualified

Singapore Police Force Website The above information is accurate as at 15/02/2013 12:01 AM

Print Licence Status

Please do not use the Back or Forward button on your browser or double-click a hyperlink as this may end your transactions.

Rate this e-Service.

If you encounter any problems with this-eService, please contact us at

You may also give us your comments at hit www.spf.gov.lig/feedback.htm.

Last updated/reviewed on 03/08/2007

Privacy Statement

@ 2007 Government of Singapore

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 3. Information provided must be as truthful and accurate 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 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.

A SPACE OF THE PROPERTY OF	ACCIDENT STATEMENT	
Date Of Report	31/01/2013 16:11	
Date Of Accident	30/01/2013 21:30	
Exact Location Of Accident	PETIR ROAD	

Exact Location Of Accident	PETIR ROAD
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFD3585S
Insured/Policyholder	
Name Of Registered Owner	MOHAMMAD GHAZALI BIN MOHAMED HASHIM
NRIC No	S7143144D
Vehicle Particulars	
Manufacturer	PROTON
Model	EXORA-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	GOING HOME
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	Chartis Singapore Insurance Pte Ltd

RASLINDA BINTE AHMAD RASIDIR

Type Of Coverage Comprehensive

Fleet Policy No Policy Number

Name of Driver

Cover Note Number

Driver

 NRIC No
 S7129872H

 Date Of Birth
 28/08/1971

 Occupation
 Indoor

 Date Of Driving Pass
 17/04/1993

Driving Experience 19 Years And 9 Months

Gender Female

Mobile Number (Local) +65-96349626

Fax Number
Contact Number

EMail Address NOEMAIL

Address BLK 203, PETIR RD

#03-669 Postcode 670203

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

SGD6456A

Insurance Company of Driver's Own Vehicle

NTUC Income Insurance Co-operative Ltd

General Information of the Accident

Type Of Accident

Side Swipe-Opposite Direction

Weather Conditions

Clear

Road Surface

Dry

Other Information

Was any foreign vehicle involved in this accident?

No

Was any body injured in the Accident?

No

Was any other material or property damaged?

Yes

Was there any video captured by Car Camera?

No

**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

Are accident photos available for attachment?

Yes

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SHD9197R

Vehicle Make/Model/Colour

TAXI

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **Details of Witness**

Name

Phone Number

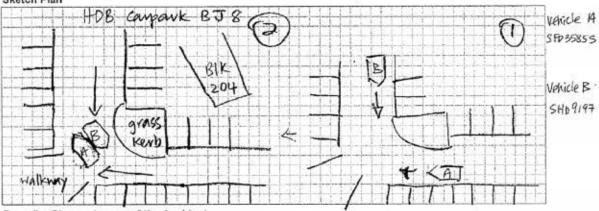
Email Address

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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>.
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#### Sketch Plan



Describe Circumstances of the Accident

Date: 30 JANUARY 2013

Time : 2135 ms

Laration: Petir Road HDB compank BJ8

on the above date and time at the above named campark on my way home I was travelling little direction as indicated in (1). After about halfway negotiating the bend, vehicle B, SHD 9197R, was also taking the corner causing both our vehicles to have a side swipe against each other.

## Declaration

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

2013

10

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

Witnessed by Reporting Centre

Personnel

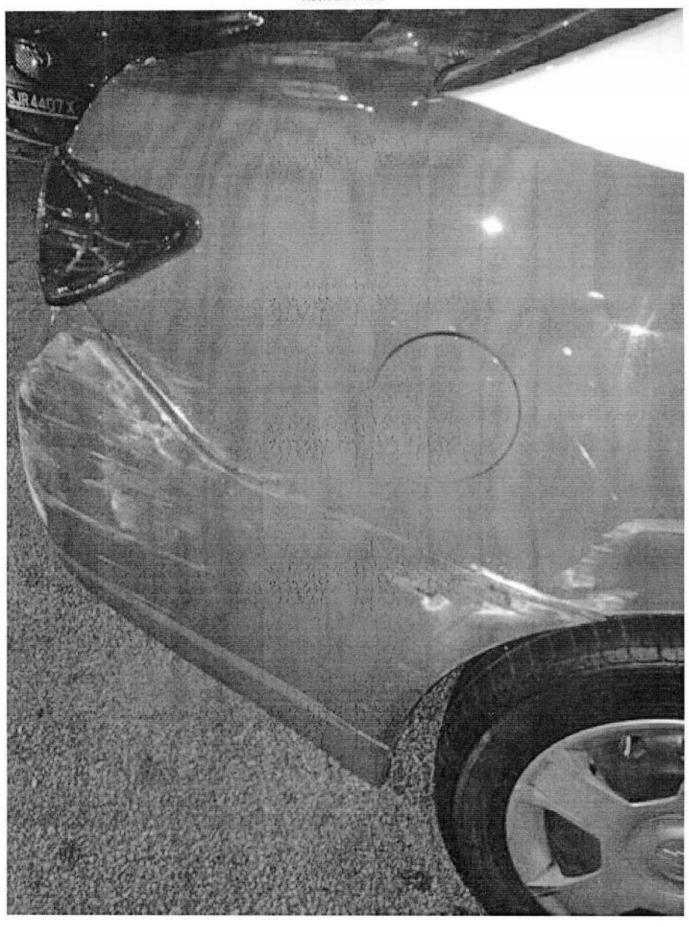


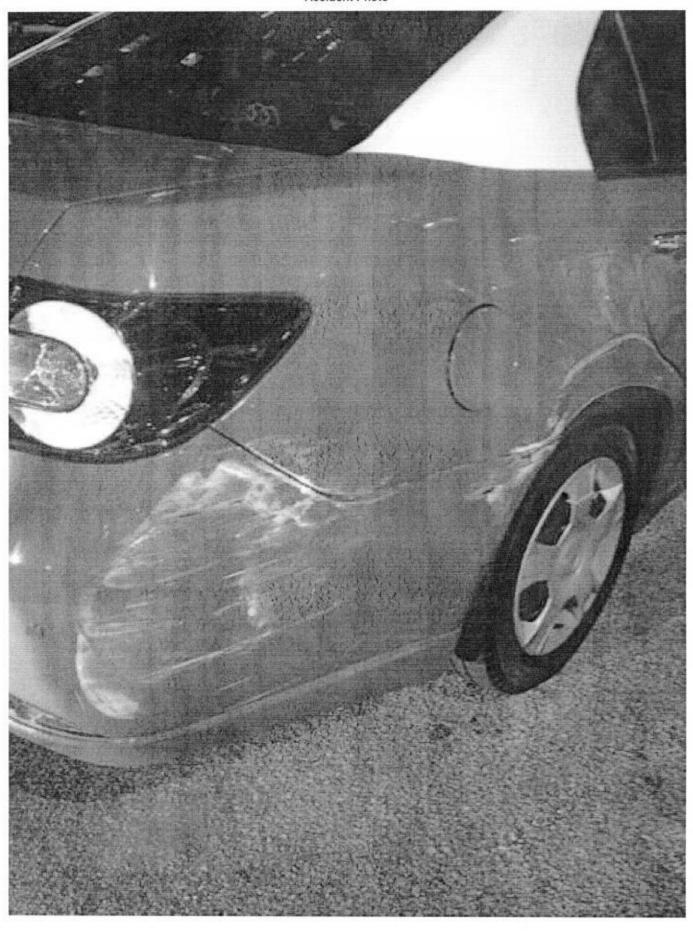












# TRANS-CAB AUTO SERVICES PTE LTD

NO.58 DEFU LANE 1 SINGAPORE 539498 TEL NO.6287 6666 FAX NO.6281 1400 CO/GST REG NO.201019626G

SHD9797K - CHARTIS

Vehicle No.: Chassis No.: Vehicle Make: Vehicle Model: Date of Accident: Not Ashonal

ROEL

SHD 9197K - ROEL KL1LA69RJBB058498\* CHEVROLET CHEVROLET EPICA 2.0 30.01.2013

CHARTIS

	Third Party Insurer :	CHART	.~	
	PART		LIST	
		. 1	Bed 011 1 200 001	
1	Rear Bumper ( Bumper A-RR )	\$	1,202.00	
1	Rear Bumper Side Retainer RH	\$	1 145.00	
		\$	1,145.00	
	TOTAL	Ś	2,415.76	
	2070	\$	1,811.82	
	Specical Nett			
		de	20.00	4
1 Set	Rear Bumper Fastener Clip	\$	30.00	6
1	Rear Windscreen Sealant	\$	75.00	7
1	Rear Windscreen Inner Sponge Seal	\$	75.00	-630-
	TOTAL	\$	205.00	
	TOTAL PARTS	\$	2,016.82	
	Panel Beating, Knocking And Straightening The Necessary Portion, Remove And			
	Renewal Of Parts, Adjust And Realign The			1
	Same	\$	1,250.00	600/
	To Rust-Proofing Of The Affected Areas.	\$	200.00	301
	Putty And Spray Painting Of The Affected			
	Portion.	\$	900.00	4001
	To Transfer Of Fender Fittings, Attachments	E)	300.00	
	1 1 1 1 Set	PART  1 Rear Bumper (Bumper A-RR) 1 Rear Bumper Side Retainer RH 1 Rear Fender RH  TOTAL 25%  Specical Nett  1 Set Rear Bumper Fastener Clip 1 Rear Windscreen Sealant 1 Rear Windscreen Inner Sponge Seal  TOTAL  T	PART  1 Rear Bumper (Bumper A-RR) \$ 1 Rear Bumper Side Retainer RH \$ 1 Rear Fender RH \$  TOTAL \$ 25% \$ \$  Specical Nett  Specical Nett  Specical Nett  Specical Nett  Rear Windscreen Sealant \$ 1 Rear Windscreen Inner Sponge Seal \$  TOTAL \$  Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same \$  To Rust-Proofing Of The Affected Areas. \$  Putty And Spray Painting Of The Affected Portion. \$	### PART LIST    Rear Bumper (Bumper A-RR)

# TRANS-CAB AUTO SERVICES PTE LTD

ROEL

05 DAYS

Gdey,

NO.58 DEFU LANE 1 SINGAPORE 539498 TEL NO.6287 6666 FAX NO.6281 1400 CO/GST REG NO.201019626G SHD9797K - CHARTIS

Over All Total	\$ 4,366.82	680
TOTAL	\$ 2,350.00	
Towing Fees.	\$ 100.00	X
To Reseal Sealant On Gap	\$ 100.00	50%
To Remove And Refit Rear W/Screen Glass To Facilitate Bodywork Repair.	\$ 150.00	1200
To Remove And Refit Interior Fittings, Trimings, Garnish, Fittings And Other, To Enable Repair.	\$ Papeare 350.00	X

Total Repair Days

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

Revoked / No settlement

Case Main	Notified 15 Feb 2013 Edit Reg	Est Submitted	Adj Assigned 31 Jan 2013 00:00 Eak Adj Rpt	S\$2,550.00 Edit Estimates	S\$2,550 View R	0.00	Ins Authled	Pending for Report Cancel Co	en removalen.
	Main	) Re	ference	Clain	n Details	I	Docume	nts	Show All
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1ain Cla			SERVICES PTE LT	Dat	e of Loss:		30/01/2013	21:00 - :59	
	Reg. No.:	SHD9197R TP / 8006363			icy/Cover No	ote No.:	2100298918	( Comprehen	sive)
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Repaire		Trans Cab Au	ito Services Pte	Ltd (HQ) No 58	Defu Lane 1,	539498 D	eru cane - i ei		
	g Insurer:	AIG Asia Pac	ific Insurance P	te. Ltd. (SG)	16I: 02-041A	3000			
Claiman	t's Insurer:	First Capital	Insurance Ltd (I nsultants Pte Ltd	HQ) - Telt 6222	2311	unedled by	KENNETH K	ONG Fin	al Rpt due
Adjuste		22/02/2013	nsultants Pte Ltr	d (HQ) - Tel: 64	(20-3201 l	Handled by			
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There are	e no mail for this	case.							
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Due !	Date Priori	ty Type	Task Group	Subject	Mandier	assigne	or way	AND AND DESCRIPTION	

# Claim Documents

\*SHD9197R (800636391) [SFD3585S]

# TRANS-CAB SERVICES PTE LTD Jan 30 2013 9:00PM [MOHAMMAD GHAZALI BIN MOHAMED HASHIM]

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2	13/02/13 17:40	General View		0	Load JPG	4
3	13/02/13 17:40	General View		0	Load JPG	V
4	13/02/13 17:40	General View		0	Load JPG	7
5	13/02/13 17:40	General View		0	Load JPG	17
6	13/02/13 17:40	General View		0	Load JPG	V
7	13/02/13 17:40	General View		0	Load JPG	V
8	13/02/13 17:40	General View		0	Load JPG	V
9	13/02/13 17:40	Odometer Readin	g	0	Load JPG	7
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2	13/02/13 17:39	TP WORKSHOP E		0	Load PDF	
3	09/12/14 14:26	Email to TP wksp		0	Load PDF	
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5	10/12/14 10:32	LETTER TO OI	The second secon		Thumbnail	Prin
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1	15/02/13 08:47	OI GIA REPORT				

# **Documents Checklist**

DOCUMENTS CHECKLIST  There are no document checklists configured.	Reset Save Print
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
Show Remarks To: Handling Insurer  Note: Remarks are private unless you show a to other partiels.	

# LKK Auto Consultants Pte Ltd (Co Reg No. 199607198R)

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

Singapore 408933

Tel. 6256-3561 Fax: 6844-8805: Email: account@lkkauto.com;sur@lkkauto.com;assignments@lkkauto.com

# VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CC3/AIG13002833/KPA3WZ

Date:

10/12/2014

REFERENCE

Handling Insurer:

AIG Asia Pacific Insurance Pte. Ltd.

Policy No:

2100298918

Claimant Vehicle No :

SHD9197R

Insured Vehicle No:

SFD3585S

Date of Loss:

30/01/2013

Nature of Claim:

Claim No: 800636391

DESCRIPTION & IDENTIFICATION OF VEHICLE

Rea No:

SHD9197R

Make & Model:

CHEVROLET EPICA, 2.0 (A) 14/10/2011 (Man. Year: 2011)

Engine No: Chassis No: Z20S1443559K

Reg. Date:

Red/White

Odometer:

KL1LA69RJBB058498 212926 km

Colour: Engine Capacity:

1991 cc

Market Value/New Car Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Yes Engine Modification:

Yes Footbrake (Serviceable): Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES

195/65 R15

Rear Tyre Size:

195/65 R15

Front Tyre Size: Front Left Side:

West Lake 7 mm

Rear Left Side:

West Lake 6 mm

West Lake 7 mm

Rear Right Side:

West Lake 6 mm

Front Right Side: The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts	Repairer's 2,016.82 0.00	Adjuster's 1,911.82 0.00	105.00 0.00	Diff % 5.21
Miscellaneous Items Labour Paintwork Labour	3,350.00 0.00 0.00	1,300.00 0.00 0.00	2,050.00 0.00 0.00	61.19
Towing  Calculated Gross Total (S\$)  Approved Total (Overridden) (S\$)	5,366.82	3,211.82 2,550.00	2,155.00	40.15
(S\$) + GST 7.00/7.00% (S\$)	5,366.82 375.68	2,550.00 178.50	2,816.82 197.18	52.49 52.49
Nett Amount (S\$)	5,742.50	2,728.50	3,014.00	52.49
743553414101701701713323 <del></del>	Settlement (S\$)	0.00		

INSPECTION

Date of Assignment:

31/01/2013

31/01/2013

Inspected At:

Trans Cab Auto Services Pte Ltd (HQ)

No 58 Defu Lane 1 Singapore 539498

Est Repair Period:

Date Inspected:

4.0 days

KENNETH KONG Adjuster:

Manager:

CHEW HSIAO TONG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

# REPAIR DETAILS

		Condition	Repairer's	Amount
	*REAR BUMPER (BUMPER A-RR)  *REAR BUMPER SIDE RETAINER RH  *REAR FENDER RH  *SET REAR BUMPER FASTENER CLIP  *REAR WINDSCREEN SEALANT  *REAR WINDSCREEN INNER SPONGE SEAL  Nett. L=ListHemDisc.	Buckled/Distorted Cracked Bent Necessary Necessary Necessary Sub Total (S\$)	1,202,00 FL 68.76 FL 1,145.00 FL 30,00 FS 100,00 FS 75,00 FS 2,620.76	*1,202.00 FL *68.76 FL *1,145.00 FL *30.00 FS *40.00 FS *30.00 FS
	- List Item Discount on L	tems 25.00/25.00% (S\$)	603.94	603.94
		Total Parts (S\$)	2,016.82	1,911.82
,	Part No.	*REAR BUMPER (BUMPER A-RR)  *REAR BUMPER SIDE RETAINER RH  *REAR FENDER RH  *SET REAR BUMPER FASTENER CLIP  *REAR WINDSCREEN SEALANT  *REAR WINDSCREEN INNER SPONGE SEAL  se part, S=SpcNett, L=LiettlemDisc.	*REAR BUMPER (BUMPER A-RR) Buckled/Distorted  *REAR BUMPER SIDE RETAINER RH Cracked  *REAR FENDER RH  *SET REAR BUMPER FASTENER CLIP Necessary  *REAR WINDSCREEN SEALANT Necessary  *REAR WINDSCREEN INNER SPONGE SEAL Necessary  *REAR WINDSCREEN INNER SPONGE SEAL Necessary  *List Item Discount on L Items 25.00/25.00% (SS)	*REAR BUMPER (BUMPER A-RR) Buckled/Distorted 68.76 FL  *REAR BUMPER SIDE RETAINER RH Cracked 68.76 FL  *REAR FENDER RH Bent 1,145.00 FL  *SET REAR BUMPER FASTENER CLIP Necessary 30.00 FS  *REAR WINDSCREEN SEALANT Necessary 75.00 FS  *REAR WINDSCREEN INNER SPONGE SEAL Necessary 75.00 FS  *List Item Discount on L Items 25.00/25.00% (S\$) 603.94

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour  No. Particulars  Lab.Type			Repairer's	Amount
No	Particulars			
Lab	our Items	New	1,250.00	600.00
1	PANEL BEATING , KNOCKING AND STRAIGHTENING THE NECESSARY PORTION , REMOVE AND RENEWAL OF			
	PARTS ,ADJUST AND REALIGN THE SAME.	New	200.00	30.00
2	TO RUST-PROOFING OF THE AFFECTED AREAS.	New	900.00	400.00
3	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.	New	300.00	100.00
4	TO TRANSFER OF FENDER FITTINGS ,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	15.07.20	5000-5000,00000	0.00
5	TO REMOVE AND REFIT INTERIOR FITTINGS ,TRIMINGS ,GARNISH ,FITTINGS AND OTHER ,TO ENABLE REPAIR.	New	350.00	120.00
6	TO REMOVE AND REFIT REAR W/SCREEN GLASS TO FACILITATE BODYWORK REPAIR.	New	150.00	
-	TO RESEAL SEALANT ON GAP.	New	100.00	50.00
7	TOWING FEES.	New	100.00	0.00
	Gross Lab	our Cost (S\$)	3,350.00	1,300.00

< END OF ESTIMATES >

Report was unsubmitted during this print-out

## **Hsiao Tong**

From:

Hsiao Tong

Sent:

Wednesday, 12 November, 2014 11:28 AM

To:

'JasmineTan' (jasminetan@transcabservices.com.sg);

'claims@transcabservices.com.sg'

Cc:

Kenneth Kong; CS A Team

Subject:

Pending Documents for Closure (Trans-cab)

Dear Sirs/Madam,

Please let us have the supporting documents for the following cases in order for us to proceed further: -

No:	Your Taxi:	Our Insured(AIG)	DOA:	Settlement Amount:
1.	SHD 959T	GW 6063A	16/11/2012	\$1,420.00
2.	SHC 5942M	SJW 9710K	01/12/2012	\$980.00
3.	SHD 5667C	GBB 4989L	12/04/2012	\$940.00
4.	SHD 5138M	SJX 749D	24/09/2013	\$1,578.32
5.	SHD 5032J	SFJ 1279H	13/01/2013	\$760.00
6.	SHD 9197R	SFD 3585S	30/01/2013	\$3,556.95
7.	SHB 7772D	SGZ 2916A	25/03/2014	\$1,922.47
8.	SHB 9821H	SGV 5342G	07/04/2014	\$5,055.71

Appreciate if you could revert within the next 10days. Otherwise, we have our principal instruction to close the file at our end.

Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement.

Best regards, Chew Hsiao Tong LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park (S) 408933

DID: 6742 3197 Fax: 6741 4108

Email: chewht@lkkauto.com