

REF: CS3 / AXA16004935 / RSB²-1

Special instruction:

YS: \$12000.00

Third Parties:

Claimant:

Surveyor:

Workshop:

PAR Automotive

N-51 Automotive

From (Person): Chua Li Suen of ComLaw Date/Time: 30/07/2018
Estimated Cost: _____ Bill to: _____

OD/FP Re-inspection / (Evaluation)

To Inspect Vehicle No: EW 323m Insured: SJR 9145H
at Workshop m/s N-51 Automotive Tel: 6842 0051
of 2 Kaki Bukit Ave 2 #01-17

Policy No: _____ Claim No: CLS. 2018.216217

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 15032016
(Client's Record)

H.O.D. Emplacement/Date: _____

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

Date/Time: 4/1/1 Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original 10 days)

Date/Time: 16/03/18 Submit Final Fig \$7,300.00, 10 days (Red \$ 4,700 / 39 %; Original / 2 days)

Date/Time	Action/Instruction
	EW 323m - (G3) /ATA16004935 /Gh3dl STR 9445H - X L/S Repair days 10 RECEIVED 16 AUG 2018
	EXA: 15032016 7/8/2018

Para(1) : Parts found not replaced	(To highlight <i>R or UB, LR, Etc</i>)
------------------------------------	---

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

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value : _____

Inspected/
Evaluated by:

Fee Charged:

Date: _____

Basic & Add

Transport

Photos

Others

Total

300

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

12/03/2003 * PD 2

ASS. REC. BY:

REF:

033/00010004035/0h3

Special Instruction:

SURVEYOR: Wm G. Pitt

ASSIGNMENT (Office)

no. inv. n

From (Person): Flores ANG

of

AKADate/Time: 10/3/2016 4:58pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: EW 22374

Insured:

SIR 74454at Workshop m/s: M-51 Automotive

Tel:

8435483of Bldg 2 Ksk. Bldg 1 H 01-17118 AkhabPolicy No: 6A084754

Claim No:

0375080

Sum Insured:

Excess:

Make of Veh:

D.O.A. 10/3/2016

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10/3/2016 9:01AM

Person Consented:

W. ANGVehicle IN/OUT

Date/Time	Action/Instruction (*) Estimate
	<u>EW 22374 - rev/024134 2174/102000</u>
	<u>SIR 74454 - 2</u>
<u>10/3/2016 11:59am</u>	<u>Send Email to Flores ANG</u>

1000-1-3 PREL REF: MA

Surrender

ASSIGNMENT

From: _____ Date: 10/5/2016
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To inspect Vehicle No: EW 323A7
at Workshop m/s: N-G1 Automotus
of 814 2 km, Kintaf Ave 2 H. 01-1718 Aufchua
Insured: _____
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.

Bal. or Market Value: _____
IDAC Accident Rpt: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: 6 days Res.: Yes or No
Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS up

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: EW 323M Yr Regn: 30 Aug 2007
Type: M.Cycle / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Mazda RX-8 C.C. 1308
Colour: Grey A/C: Insured / Std / NI / NA
Sp. Reading: 143496 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: SE 3P 14 22 . 43
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modl: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 225/55 R16
R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front 5 mm Rear 5 mm
R/Bal. 5 mm L/Bal. 5 mm
D.O.A. 16-03-16
Survey held at w/s 4pm
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

Date/Time, File Pass to?

1) 17/4/2016 - Tqpl

Date/Time, File Return to?

2)

Report Format: PREL - J

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ Site Insp (\$ _____)
☐ Interview (\$ _____)
☐ Tech. Invs (\$ _____)
☐ Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

Photos

Others

TOTAL

Catherine Chong (LKK Auto)

From: Chua Li Suan <cls@comlaw.com.sg>
Sent: Monday, 30 July, 2018 7:11 PM
To: ASSIGNMENTS@LKKAUTO.COM; Catherine Chong (LKK Auto)
Subject: instructions for papar re-survey of EW 323M yr ref : CS3/AXA/16004935/GH3D1
OUR REF CLS.2018.216217
Attachments: INSPECTION REPORT.pdf; REPAIR BILL.pdf; ACCIDENT STATEMENT OF EW
323M.pdf; ACCIDENT STATEMENT OF SJR 9495H.pdf; PRI.pdf; PRI PHOTOS.pdf

Dear Sirs

1. We act for AXA Insurance Pte Ltd, the insurers of SJR 9495H which was involved in a road accident on 15 March 2016. Our clients are facing a claim by the owner of the EW 323M for repair costs and loss of use.
2. As the vehicle has been sold since 2016, it is no longer available for re-survey now, so we are appointing you to do a paper re-survey in the light of the survey adjustments of PAR Automotive Consultancy.
3. We attach herewith copies of the following documents for your consideration:-
 - (a) Vehicle Damage Inspection Report of PAR Automotive Consultancy dated 8 August 2016 with 45 pages of coloured photographs of EW 323M.
 - (b) Repair bill of N-51 Automotive Pte Ltd.
 - (c) Singapore Accident Statement of driver of EW 323M.
 - (d) Singapore Accident Statement of driver of SJR 9495H.
 - (e) Your PRI report dated 24 March 2016 and 9 pages of photos.
4. We shall be obliged if you will carry out the re-inspection of EW 323M and let us have your re-inspection report as soon as possible.
5. Kindly acknowledge receipt of our instructions herein and also let us know whether you did any post-repair survey after your PRI done on 16 March 2016.

Warm regards
Ms Chua Li Suan
DID: 6506 9132

ComLaw LLC
64 Cecil St #06-01
IOB Building
Singapore 049711

MSME16032248 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 15/03/2016 14:51

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	15/03/2016 14:51
Date Of Accident	15/03/2016 08:55
Exact Location Of Accident	SLIP ROAD OF YIO CHU KANG TOWARDS CTE (TPE).
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	EW323M
Insured/Policyholder	
Name Of Registered Owner	YAP CHOON PIAN, MATTHEW
NRIC No	S7342703G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97457333
Alternative Phone No	Office-97457333
Vehicle Particulars	
Manufacturer	MAZDA
Model	RX8
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Third Party
Vehicle Category	Private Car
Insurance Company	
Name of Insurance Company	Lonpac Insurance Bhd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	Z/15/VP00/095081
Cover Note Number	
Driver	
Name of Driver	YAP CHOON PIAN, MATTHEW
NRIC No	S7342703G
Date Of Birth	24/11/1973
Occupation	Indoor
Date Of Driving Pass	17/11/1993
Driving Experience	22 Years And 3 Months
Gender	Male
Mobile Number	(Local) +65-97457333
Fax Number	
Contact Number	Office-97457333
Email Address	NOEMAIL

Address BLK 491 YIO CHU KANG RD #02-03
 Postcode 787078
 Was driver an employee of the Insured's Company No
 If No, Relationship of the Driver with the Insured Owner
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident Collision- Head to Rear (TP Hit Insured)
 Weather Conditions Clear
 Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No
 Was any body injured in the Accident? Yes
 Was any other material or property damaged? Yes
 Was there any video captured by Car Camera? 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

I WAS DRIVING ALONG YIO CHU KANG ROAD TOWARDS CTE (PIE) ON A SINGLE LANE SLIP ROAD. SOMEWHERE ALONG THE SLIP ROAD BEFORE ENTERING CTE (TPE), I STOPPED AT THE GIVE WAY LINE TO GIVE WAY TO TRAFFIC ALONG THE MAIN ROAD. MOMENT AFTER I STOPPED, I SUDDENLY FELT AN IMPACT FROM THE REAR PORTION OF MY VEHICLE. AFTER THE ACCIDENT, I ALIGHTED FROM MY VEHICLE AND SAW THAT VEHICLE B HAD COLLIDED INTO THE REAR PORTION OF MY VEHICLE. HENCE, I WAS INVOLVED IN AN ACCIDENT OF 2 VEHICLES.

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJR9495H
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Name of Driver KOH CHEW WA
 NRIC/Passport Number S8772238D
 Contact Number 96199144
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver) 2

Details of Witness

Name
 Phone Number
 Email Address

DETAILS OF INJURED PERSON 1

Name YAP CHOON PIAN, MATTHEW
 Approximate Age
 Injuries Sustain
 Injured person in which vehicle? EW323M

• Were seat belts worn?

• Was injured conveyed to hospital by ambulance?

Address

Postcode

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 willful 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 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' 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

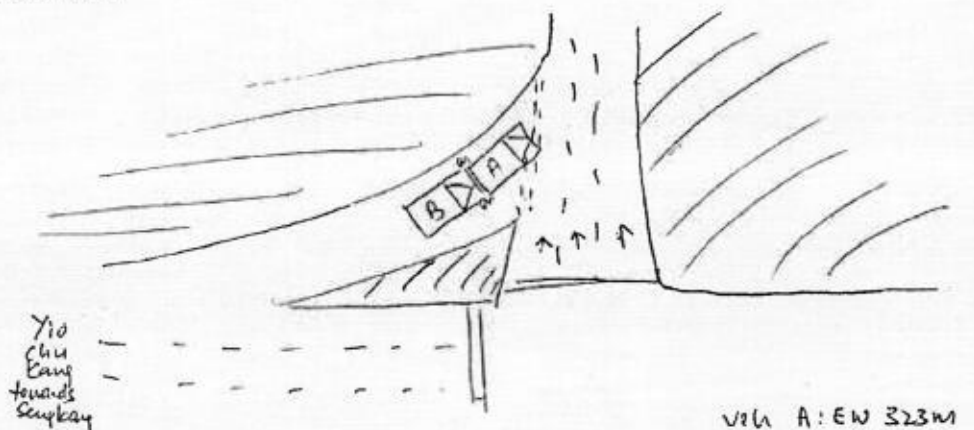
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be tied outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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

Witnessed by Reporting Centre Personnel

Sketch Plan



VEH A: EW 323M
VEH B: SJ R9496H

SINGAPORE ACCIDENT STATEMENT**IMPORTANT NOTICE**

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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 15/03/2016 16:23
 Date Of Accident 15/03/2016 09:00
 Exact Location Of Accident YIO CHU KANG ROAD SLIP ROAD TWDS TPE SLE.
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJR9495H
Insured/Policyholder
 Name Of Registered Owner AW SUET CHEE
 NRIC No S8460666I
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-90055102
 Alternative Phone No Office-90055102
Vehicle Particulars
 Manufacturer MERCEDES-BENZ
 Model C180K
 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 REPORTING ONLY
 Vehicle Category PRIVATE CAR
Insurance Company
 Name of Insurance Company AXA INSURANCE SINGAPORE PTE LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number GA084784/1
 Cover Note Number
Driver
 Name of Driver KOH CHEW WA
 NRIC No S8772238D
 Date Of Birth 05/09/1987
 Occupation INDOOR
 Date Of Driving Pass 05/07/2007
 Driving Experience 8 YEARS AND 8 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-96199144

Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 157 ANG MO KIO AVE 4 #04-554
Postcode	560157
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

Type Of Accident	COLLISION- HEAD TO REAR (TP HIT INSURED)
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
Number of Passengers (Including Driver)	2

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

I WAS TRAVELLING TOWARDS TPE/SLE ON YIO CHU KANG, AS I WAS ENTERING THE SLIP ROAD, I SLOWED DOWN AND WAITING FOR MY FRONT VEHICLE TO CLEAR, HOWEVER, HE DID NOT CLEAR THE JUNCTION AND I HIT HIM ON HIS BACK. NO ONE WAS CONVEYED OR REPORTED INJURED AT THE SCENE. A LTA OFFICER WAS ON SCENE AS WELL.

Are accident photos available for attachment?	YES
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EW323M
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Name of Driver	MR YAP
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Details of Witness

Name	
Phone Number	
Email Address	

Accident Sketch Plan

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 willful 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 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:

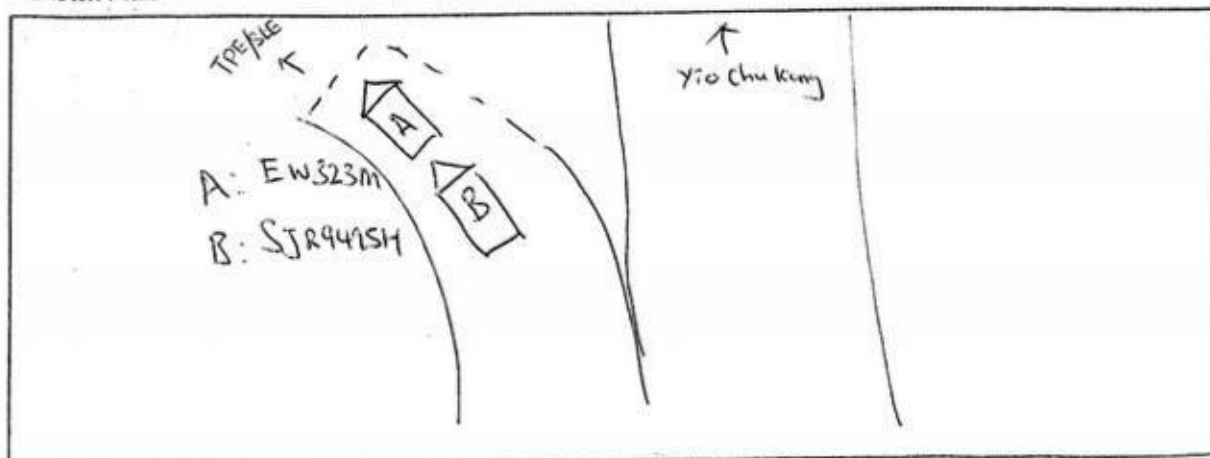
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan




Accident Sketch Plan

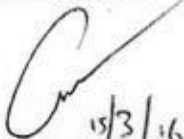
Describe Circumstances of the Accident

I was travelling towards TPE / SLE on Yio Chu Kang, as I was entering the Slip Road, I slowed down waiting for my front vehicle to clear. However, he did not clear the junction and I hit him on his back. No one was conveyed or reported injured at the scene. A LTA officer was on scene as well.

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

Witnessed by Reporting Centre Personnel

Insurance Co.	AXIA	
Vehicle NO.	SJK9495H	Date Of Accident
		15, 03, 16
<input checked="" type="checkbox"/> Reporting Only		
<input type="checkbox"/> Own Damage Claim		
<input type="checkbox"/> Third Party Claim		

Accident Sketch Plan

N-51 AUTOMOTIVE PTE LTD

Kaki Bukit AutoHub

2 Kaki Bukit Ave 2

#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27

Singapore 417921 Tel No. : +65 6842 0051 Fax No. : +65 6741 0510

E-Mail : sales@n51.com.sg

Company Reg. No. : 200616038C

GST Registration No. : 200616038C

MATTHEW YAP CHOON PIAN
BLK 491 YIO CHU KANG ROAD #02-03
SINGAPORE 787078

Contact : 65547333 97457333

TAX INVOICE

Date : 22/09/2016

Date in : 15/03/2016

Vehicle Num. : EW323M

Make/Model : MAZDA RX-8 1.3 A-2007

Chassis/Eng# : SE3P142243/13B529091

Accident Date : 15/03/2016

Claim No : CLM13440

Reference : MAR-40/2016

Policy No. : Z/15/VP00/09581 (01/09/2016)

LUMPSUM REPAIR BILL
AS PER SURVEYOR REPORT
REF : 0404-16-N51 DATED 08/08/2016
BY PAR AUTOMOTIVE CONSULTANCY

Amount S\$

12,000.00



for N-51 AUTOMOTIVE PTE LTD

E. & O.E. Sub S\$: 12,000.00

Add GST (7 %) S\$: 840.00

Total Amount S\$: 12,840.00



PAR Automotive Consultancy

Regn. No. 52986974L

Thomson Rd Post Office PO Box 029 Singapore 915701 Tel : 645 31173, Fax 645 36131

Report No: 0404-16-N51

08 August 2016

ACCIDENT VEHICLE SURVEY REPORT

Yap Choon Pian Matthew
Blk 491 Yio Chu Kang Road #02-03
Singapore 787078

VEHICLE INFORMATION:

Vehicle Reg No.:	EW323M	Odometer:	143497km
Make & Model:	Mazda RX8 1.3A	Colour:	Grey
Chassis number:	SE3P142243	Date of accident:	15/03/2016
Year of Regn.:	30/08/2007	Date inspected:	17/03/2016
Repairer at:	N-51 Automotive Pte Ltd 2 Kaki Bukit Ave 2 #01-18 Kaki Bukit Auto Hub Singapore 417921		

STATIC CHECKS, where applicable:

Steering :	serviceable
Footbrake :	serviceable
Handbrake :	serviceable
Paintwork :	Good
General condition :	Good

TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
Front:	5mm/Michelin	5mm/Michelin	225/55R16
Rear:	5mm/Yokohama	5mm/Yokohama	225/55R16

POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear portion.
Please see details as described in the Annex for parts and labour.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

Parts and Labour Assessment

PARTS

Description of part	Qty	Condition	Repairer's estimate	Our adjustment
EXHAUST MID PIPE	1	bent	R 456.00	456.00 X
EXHAUST MID PIPE GASKET	1	necessary	15.60	X 15.60 X
EXHAUST MID PIPE RUBBER MOUNTING	2	distorted	53.40	53.40 NN X
REAR BOOTLID	1	buckled	1,238.00	992.20 1,238.00 BT ✓
REAR BOOTLID 'LOGO' EMBLEM	1	necessary	37.60	✓ 37.60 NECV
REAR BOOTLID 'MAZDA' EMBLEM	1	necessary	30.40	✓ 30.40 NECV
REAR BOOTLID 'RX-8' EMBLEM	1	necessary	47.40	✓ 47.40 NECV
REAR BOOTLID DAMPER L/R	2	bent	243.20	243.20 NN X
REAR BOOTLID HINGES L/R	2	bent	306.00	306.00 R X
REAR BOOTLID INNER HANDLE	1	reuse	48.00	-0.00
REAR BOOTLID INNER UPHOLSTERY TRIM	1	deformed	148.00	✓ 148.00 BT ✓
REAR BOOTLID MECHANISM LOCK	1	bent	315.00	✓ 315.00 BT ✓
REAR BOOTLID RUBBER GUIDE STOPPER L/R	2	deformed	10.00	10.00 NN X
REAR BOOTLID THIRD BRAKE LAMP	1	fractured	183.00	✓ 183.00 CUT ✓
REAR BOOTLID WEATHERSTRIP	1	deformed	125.00	✓ 125.00 DIS ✓
REAR BUMPER	1	squashed	807.00	✓ 807.00 CUT ✓
REAR BUMPER EXHAUST GARNISH L/R	2	deformed	249.20	196.20 249.20 CUT ✓
REAR BUMPER INNER SIDE SHIELD CLIPS L/R	8	necessary	52.00	✓ 52.00 NECV
REAR BUMPER INNER SIDE SHIELD L/R	2	warped	135.40	✓ 135.40 DIS ✓
REAR BUMPER NUMBER PLATE LAMP L/R	2	fractured	216.00	72.00 216.00 BR ✓
REAR BUMPER OUTER LOCK HANDLE SWITCH	1	shorted	115.00	✓ 115.00 CUT ✓
REAR BUMPER REINFORCEMENT	1	bent	276.10	✓ 276.10 BT ✓
REAR BUMPER SIDE RETAINER L/R	2	necessary	175.80	✓ 175.80 NECV
REAR BUMPER TOW HOOK COVER	1	warped	41.00	✓ 41.00 CUT ✓
REAR CHASSIS FRAME L/R	2	repair	1,536.00	0.00 X
REAR END PANEL	1	buckled	316.80	274.20 316.80 DD ✓
REAR END PANEL INNER BOOTLID ANTENNA BUZZLE	1	shorted	95.00	95.00 CUT ✓
REAR END PANEL INNER BOOTLID ANTENNA SENSOR	1	shorted	185.00	185.00 CUT ✓
REAR END PANEL INNER TOP GARNISH	1	warped	159.40	✓ 159.40 DIS ✓
REAR END PANEL INNER TOP GARNISH CLIPS	4	necessary	26.00	✓ 26.00 NECV
REAR END PANEL LOCK STRIKER	1	bent	58.00	✓ 58.00 BT ✓
REAR EXHAUST ALUMINIUM HEAT SHIELD	1	deformed	95.80	95.80 R X
REAR EXHAUST END CHROME PIPE L/R	2	distorted	173.00	173.00 DD ✓
REAR EXHAUST GASKET	1	necessary	20.30	✓ 20.30 NECV
REAR EXHAUST RUBBER MOUNTING	4	distorted	99.20	99.20 NN X
REAR EXHAUST SILENCER BOX	1	bent	1,819.80	✓ 1,819.80 BT ✓
REAR LH FENDER	1	repair	994.00	-0.00
REAR LH FENDER INNER AIR VENT	1	reuse	66.20	-0.00
REAR LH FENDER INNER PANEL	1	repair	786.00	-0.00
REAR LH FENDER INNER UPHOLSTERY TRIM	1	deformed	313.00	140.00 313.00 DIS ✓
REAR LH FENDER PETROL LID MECHANISM LOCK	1	reuse	106.00	-0.00
REAR RH FENDER	1	repair	994.00	-0.00

REAR RH FENDER INNER AIR VENT	1	reuse	66.20	0.00	
REAR RH FENDER INNER PANEL	1	repair	786.00	0.00	
REAR RH FENDER INNER UPHOLSTERY TRIM	1	deformed	313.00	313.00	UBX
REAR TAILLAMP BACK RUBBER GASKET L/R	2	necessary	71.20	71.20	NEC ✓
REAR TAILLAMP CLIPS L/R	4	necessary	26.00	26.00	NEC ✓
REAR TAILLAMP INNER PANEL L/R	2	buckled	195.20	195.20	RX
REAR TAILLAMP L/R	2	fractured	738.40	738.40	BR ✓
REAR TAILLAMP RH OUTER KEY LOCK	1	jammed	246.00	246.00	BT ✓
REAR WELL PANEL	1	buckled	494.00	494.00	DD ✓
REAR WELL PANEL INNER TOP UPHOLSTERY BOARD	1	deformed	357.00	357.00	DIS ✓
REAR WHEEL HOUSE PANEL ASSY L/R	2	repair	1,522.00	0.00	
REAR WINDSCREEN MOULDING	1	necessary	215.00	215.00	NNX

Subtotal before discount S\$ 18,197.60 S\$ 11,293.20

Percentage discount 20% and 20%

S\$ 3,639.52 S\$ 2,258.64

Sub-total 1 S\$ 14,558.08 S\$ 9,034.56

REAR BOOTLID INNER UPHOLSTERY TRIM CLIPS - SET	1	necessary	30.00	30.00	NNX
REAR BUMPER BRAKE REFLECTIVE LAMP	1	fractured	300.00	135.00	300.00 BR ✓
REAR BUMPER CLIPS - SET	1	necessary	30.00	30.00	NEC ✓
REAR BUMPER NUMBER PLATE	1	broken	25.00	25.00	BR ✓
REAR BUMPER NUMBER PLATE HOLDER	1	na	50.00	0.00	
REAR BUMPER REVERSE SENSOR - SET	1	shorted	350.00	200.00	350.00 CUT ✓
REAR END PANEL INNER BRAKE DOWN SIGN	1	reuse	150.00	0.00	
REAR LH FENDER INNER UPHOLSTERY TRIM CLIPS - SET	1	necessary	30.00	30.00	NEC ✓
REAR LH FENDER INSULATOR MAT	1	reuse	280.00	0.00	
REAR RH FENDER INNER UPHOLSTERY TRIM CLIPS - SET	1	necessary	30.00	30.00	NNX
REAR RH FENDER INSULATOR MAT	1	reuse	280.00	0.00	
REAR TAILLAMP BRAKE BULB L/R	2	fused	24.00	24.00	NNX
REAR TAILLAMP REVERSR BULB L/R	2	fused	24.00	24.00	NNX
REAR TAILLAMP SIGNAL BULB L/R	2	fused	24.00	24.00	NNX
REAR WELL PANEL INNER JACKING TOOLS	1	bent	180.00	180.00	BT ✓
REAR WELL PANEL INSULATOR MAT	1	necessary	350.00	100.00	350.00 NEC ✓
REAR WINDSCREEN SEALANT	1	necessary	100.00	100.00	NNX

Subtotal before discount S\$ 2,257.00 S\$ 1,497.00

Sub-total 2 S\$ 2,257.00 S\$ 1,497.00

Parts-total S\$ 16,815.08 S\$ 10,531.56

700.00
700.00
7847.84

PAR Automotive Consultancy

LABOUR

To remove, reinstall electrical wiring harness, check lighting, and rewire for parking sensor.

150.00

50.00
80.00

To remove and refit rear windscreen(to FR)

150.00

120.00 ~~NNX~~

To remove, reinstall roof top trim upholstery, cushion seat, trim garnish, trim liner carpet (to FR)

140.00

60.00

To re-spray painting on the rear bootlid, rear end panel, rear fender (L/R), spare tyre panel and rear bumper.

1,500.00

1,200.00

To remove and change exhaust silencer box with pipe, re-align where necessary consistent to the accident.

160.00

140.00 80.00

To provide labour, workmanship to change the above damaged bodyparts, repair, re-construct and re-align body structure, body alignments and damaged consistent to the accident.

1,750.00

1,200.00
1,540.00

To mount vehicle on to Car 'O' Liner.

400.00

400.00 ~~NNX~~

To apply anti-rust chemical on repaired and replaced panel.

120.00


90.00 60.00

Labour Total	SS 4,370.00	SS 3,630.00
Parts & Labour Total	SS 21,185.08	SS 14,161.56

Results of inspection of the accident vehicle are as shown above.


We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on Lump Sum repairs is : **SS 12,000.00**
and the recommended number of working days for the repairs is within 12 day(s).


B J Loi (I Eng., MIMI, AIRTE)
Automotive Appraiser

Repair days 10

TG Lim

 3/8/18



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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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. EW 323M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	EXHAUST MID PIPE	TO REPAIR SEE LABOUR	456.00	-
1	EXHAUST MID PIPE GASKET	NOT NECESSARY	15.60	-
2	EXHAUST MID PIPE RUBBER MOUNTING	NOT NECESSARY	53.40	-
1	REAR BOOTLID	BENT	1,238.00	992.20
1	REAR BOOTLID 'LOGO' EMBLEM	NECESSARY	37.60	37.60
1	REAR BOOTLID 'MAZDA' EMBLEM	NECESSARY	30.40	30.40
1	REAR BOOTLID 'RX-8' EMBLEM	NECESSARY	47.40	47.40
2	REAR BOOTLID DAMPER L/R	NOT NECESSARY	243.20	-
2	REAR BOOTLID HINGES L/R	TO REPAIR SEE LABOUR	306.00	-
1	REAR BOOTLID INNER HANDLE	REUSE	48.00	-
1	REAR BOOTLID INNER UPHOLSTERY TRIM	BENT	148.00	148.00
1	REAR BOOTLID MECHANISM LOCK	BENT	315.00	315.00
2	REAR BOOTLID RUBBER GUIDE STOPPER L/R	NOT NECESSARY	10.00	-
1	REAR BOOTLID THIRD BRAKE LAMP	CUT	183.00	183.00
1	REAR BOOTLID WEATHERSTRIP	DISTORTED	125.00	125.00
1	REAR BUMPER	CUT	807.00	807.00
2	REAR BUMPER EXHAUST GARNISH L/R	CUT	249.20	196.20
8	REAR BUMPER INNER SIDE SHIELD CLIPS L/R	NECESSARY	52.00	52.00
2	REAR BUMPER INNER SIDE SHIELD L/R	DISTORTED	135.40	135.40
2	REAR BUMPER NUMBER PLATE LAMP L/R	BROKEN	216.00	72.00
1	REAR BUMPER OUTER LOCK HANDLE SWITCH	CUT	115.00	115.00
1	REAR BUMPER REINFORCEMENT	BENT	276.10	276.10
2	REAR BUMPER SIDE RETAINER L/R	NECESSARY	175.80	175.80
1	REAR BUMPER TOW HOOK COVER	CUT	41.00	41.00
2	REAR CHASSIS FRAME L/R	TO REPAIR SEE LABOUR	1,536.00	-
1	REAR END PANEL	DENTED	316.80	274.20
1	REAR END PANEL INNER BOOTLID ANTENNA BUZZLE	CUT	95.00	95.00
1	REAR END PANEL INNER BOOTLID ANTENNA SENSOR	CUT	185.00	185.00
1	REAR END PANEL INNER TOP GARNISH	DISTORTED	159.40	159.40

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
4	REAR END PANEL TOP GARNISH CLIPS	NECESSARY	26.00	26.00
1	REAR END PANEL LOCK STRIKER	BENT	58.00	58.00
1	REAR EXHAUST ALUMINIUM HEAT SHIELD	TO REPAIR SEE LABOUR	95.80	-
2	REAR EXHAUST END CHROME PIPE L/R	DENTED	173.00	173.00
1	REAR EXHAUST GASKET	NECESSARY	20.30	20.30
4	REAR EXHAUST RUBBER MOUNTING	NOT NECESSARY	99.20	-
1	REAR EXHAUST SILENCER BOX	BENT	1,819.80	1,819.80
1	REAR LH FENDER	TO REPAIR SEE LABOUR	994.00	-
1	REAR LH FENDER INNER AIR VENT	REUSE	66.20	-
1	REAR LH FENDER INNER PANEL	TO REPAIR SEE LABOUR	786.00	-
1	REAR LH FENDER INNER UPHOLSTERY TRIM	DISTORTED	313.00	140.00
1	REAR LH FENDER PETROL LID MECHANISM LOCK	REUSE	106.00	-
1	REAR RH FENDER	TO REPAIR SEE LABOUR	994.00	-
1	REAR RH FENDER INNER AIR VENT	REUSE	66.20	-
1	REAR RH FENDER INNER PANEL	TO REPAIR SEE LABOUR	786.00	-
1	REAR RH FENDER INNER UPHOLSTERY TRIM	USED BACK	313.00	-
2	REAR TAILLAMP BACK RUBBER GASKET L/R	NECESSARY	71.20	71.20
4	REAR TAILLAMP CLIPS L/R	NECESSARY	26.00	26.00
2	REAR TAILLAMP INNER PANEL L/R	TO REPAIR SEE LABOUR	195.20	-
2	REAR TAILLAMP L/R	BROKEN	738.40	738.40
1	REAR TAILLAMP RH OUTER KEY LOCK	BENT	246.00	246.00
1	REAR WELL PANEL	DENTED	494.00	494.00
1	REAR WELL PANEL INNER TOP UPHOLSTERY BOARD	DISTORTED	357.00	357.00
2	REAR WHEEL HOUSE PANEL ASSY L/R	TO REPAIR SEE LABOUR	1,522.00	-
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	215.00	-
	LESS 20% DISCOUNT		-3,639.52	-1,726.48
			14,558.08	6,905.92

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