

27/03/2002

ASS. REC. BY:

REF: CG/FCL 8014023 / Nt602

Special Instruction:

Surveyor

Naz

ASSIGNMENT (Office)

From (Person): CWS Lurene Jew of FCL Date/Time: 01082018 1131pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: PC 3117Y Insured: SHC 7798A

at Workshop m/s SMRT Tel: 8858 3566

of 251 North Bridge Road

Policy No: Claim No: D17002626MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 08032017
(Client's Record)

CA / REV / REP. / REV 24 HRS 'DS1

H.O.D. Endorsement:

Date/Time: 01-082018 557pm Person Contacted: Mr. Peh Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	PC 3117Y - X
	SHC 7798A - X
3/2@5pm	Revised preli advice via email

NAZ

REF: FCI

BPS/03/17/3003

ASSIGNMENT

From: Date: 22.11.2018

Estimated Cost:

QD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: PC 3117Y

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

Mr. Leh - 8858 3566

(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: 2 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 'DS'

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

PC 3117Y

Yr Regn: 16 DEC 2014

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

Truck / Trailer or

Make:

MITSUBISHI ROSA Bus

C.C. 2,998

Colour:

WHITE

A/C

☒ Insured / Std / NI / NA

Sp. Reading:

T/Radio

☒ Insured / Std / NI / NA

Eng/No:

CTNo:

BE641JJ10143

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

Tyre Size:

F:

7.00 R16 LT

R:

11

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

TOYO / YOKO or

WESTLAKE

Front

Rear

R/Bal.

5

mm

R/Bal.

6

mm

L/Bal.

5

mm

L/Bal.

6

mm

D.O.A.

8/3/17

D.O.I.

22/11/18

Survey held at

SMART WOODLANDS

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

D/S FRONT

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

Date / Time Action / Instruction

5/4/19 FINALIZED LUMP SUM REPAIR \$2,600.00 / 2 DAYS
(Red: 3430.86%, 56%)

RECEIVED 08 APR 2019

Date/Time: File Pass to?



Preli. Report

1) 8/4 Typist



Final Report

Date/Time: File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

) S+RS SI

) Photos

) Others

) X

TOTAL

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Report Format:

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

26000

139

50

50

33

268



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D17002626MFSH

Date: 3/12/2018

Our Ref: CS/FCI18014023/Ntb

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

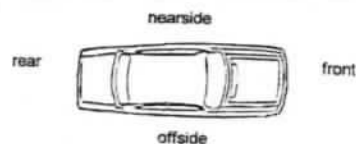
INITIAL INSPECTION REPORT OF VEHICLE NO. PC 3117Y

Please be informed that we had conducted the inspection of the abovementioned vehicle 22/11/2018 at the premises of M/s SMRT have the following to report: -

Workshop Estimate Amount	: S\$ 4,391.59
Revised Estimate Amount	: S\$ 3,230.42
"Check" Items Amount	: S\$ -
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

Description of Damage:

The vehicle sustained damages at the front o/s portion



Comments/ Present Status:

Damages Consistent.

Yours faithfully

Taukifh

Automotive Assessor

MOTOR SURVEY ASSIGNMENT

Date	09-03-2017	Our Ref No. D17002626MFSH
Accident Date	08-03-2017	Claim Type. Third Party
Insured Vehicle	SHC7798A	Third Party Vehicle. PC3117Y
Survey Location	251 NORTH BRIDGE ROAD	
Contact Person.	PEH ENG HOCK	
Contact No.	68662673/ 88583586	Fax No. 0
Survey Type	DIRECT SETTLEMENT:	
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	SMRT AUTOMOTIVE SERVICES PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	LURENE	

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.

Job Sheet (/ClaimWS/Surveyor/JobSheet/217608)



PRI Documents



Close



PRI Header Details

Claim No	D17002626MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & SM PTE LTD
Workshop Name	SMRT AUTOMOTIVE SERVICES PTE LTD (Contact Person : PEH ENG HOCK)	Survey Location & Contact Details	251 NORTH BRIDGE ROAD Mobile: 88583586 , Phone: 68662673 , Fax: EmailId: PEHENGHOCK@SMRT.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC7798A	TP Vehicle No	PC3117
PRI Recieved Date	30-07-2018 02:38:41 PM	Surveyor Appointed Date	01-08-2018 04:31:05 PM	Surveyor Accept Date	01-08-

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	01-08-2018	Upload Survey Report *:	<input type="text"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Denise Tay (LKKAUTO)

From: Denise Tay (LKKAUTO)
Sent: Monday, 3 December 2018 5:00 PM
To: Admin-D (LKKAUTO); 'Claim Workflow System'; assignments
Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D17002626MFSH/1
Attachments: PRELI ADVISED PC 3117Y.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle **PC 3117Y**

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Wednesday, 1 August 2018 6:02 PM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D17002626MFSH/1

Dear Sir / Madam,

Thank you for the assignment.

Please be informed that vehicle currently not in the workshop, repairer will arrange.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | 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: Wednesday, 1 August, 2018 4:31 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; LURENEJAW@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D17002626MFSH/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.

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	09/03/2017 17:09
Date Of Accident	08/03/2017 14:15
Exact Location Of Accident	MT ALVERNA HOSPITAL PICK UP POINT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	PC3117Y
Insured/Policyholder	
Name Of Registered Owner	BUS PLUS SERVICES PTE LTD
Co Reg No	199403524H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	BUS
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	BUS
Insurance Company	
Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	DII027593MFBP
Cover Note Number	
Driver	
Name of Driver	TOH KIM HIN
NRIC No	S1764955H
Date Of Birth	29/03/1966
Occupation	OUTDOOR
Date Of Driving Pass	27/09/1985
Driving Experience	31 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address
Postcode
Was driver an employee of the Insured's Company YES
If No, Relationship of the Driver with the Insured
Vehicle Registration Number of Driver's Own Vehicle -
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
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
Number of Passengers (Including Driver) 21

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 08/03/2017 while my bus was stationary at Mt Alverna pick up point a Taxi SHC7798A reversed and hit onto the front right portion of my bus. No injury reported

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC7798A
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver CHENG YOOK KEONG
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

Describe Circumstances of the Accident

Refer to Report

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

A handwritten signature in black ink.

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

A handwritten signature in black ink.

Witnessed by Reporting Centre Personnel

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.
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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the 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' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



[Signature]

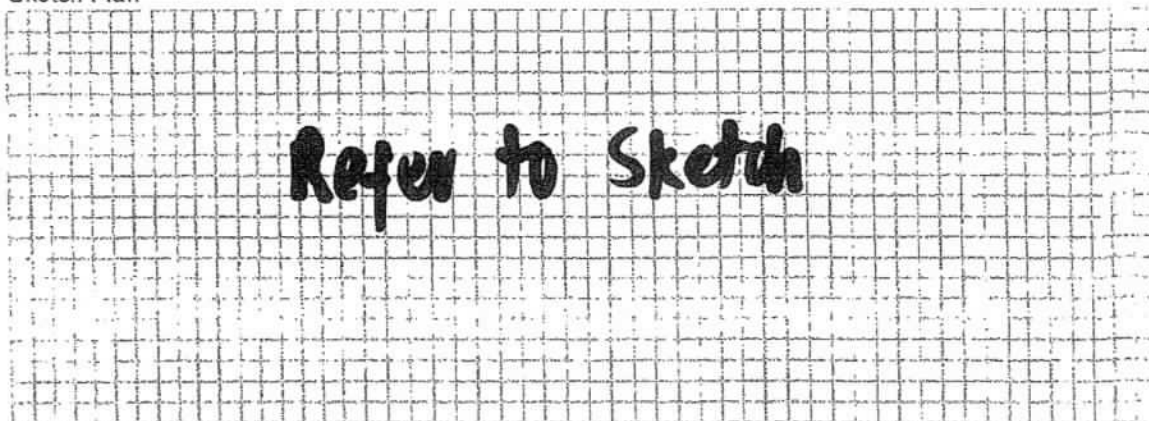
[Signature]

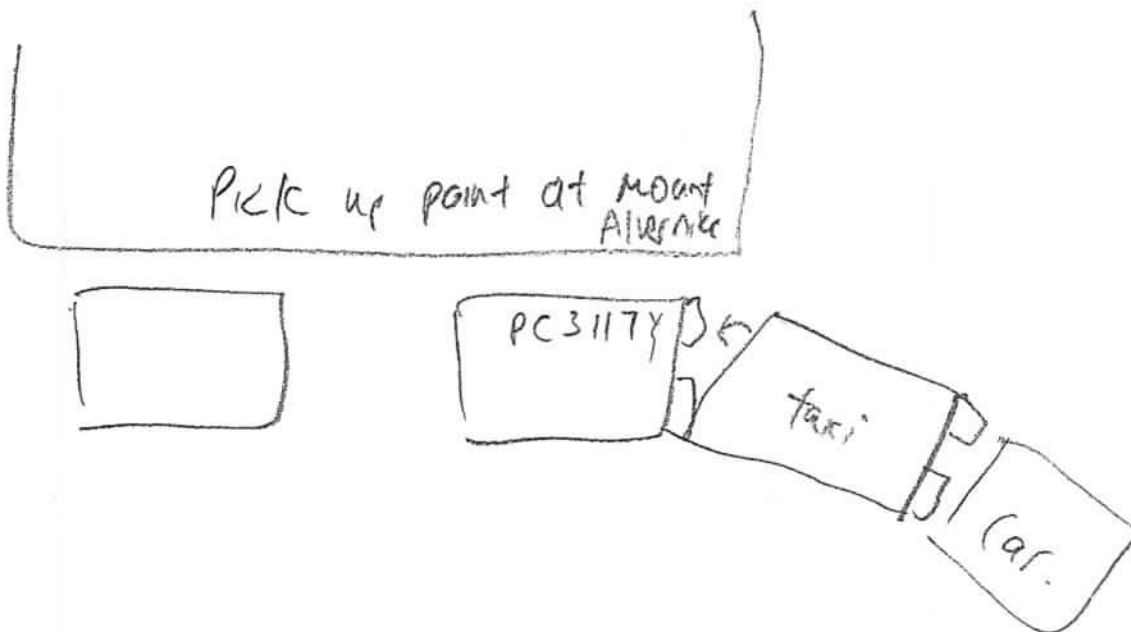
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan







SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63655692
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

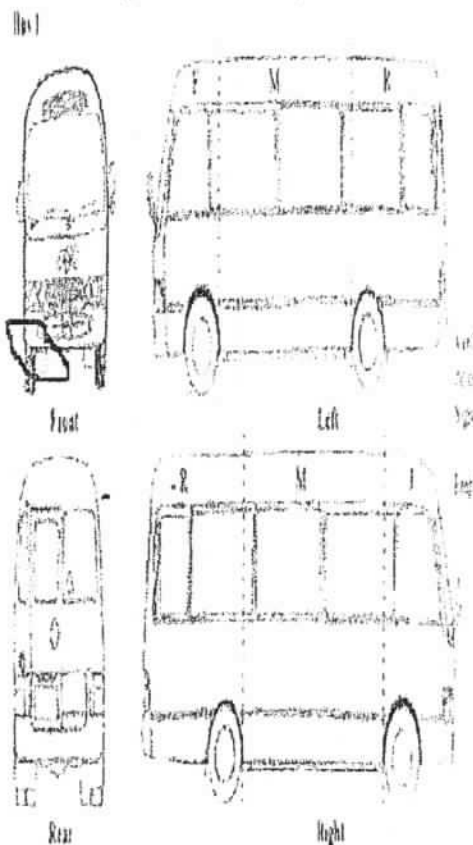
Date Generated : 12/11/2018

User ID : CatherinoLoe

Section A - Accident Details	
Registration Number	PC3117Y
Case Reference Number	GPS/03/17/3003
Registration Date	01/01/1993
Company Type	Bus-Plus Services Pte Ltd
Make	MITSUBISHI
Model	MITSUBISHI ROSA BE637
Name of Driver	Toh Kim Hin
Type of Accident	HEAD TO REAR
Accident Date and Time	08/03/2017 2:15 PM
Accident Reported Date and Time	08/03/2017 5:59 PM
Is Surveyor Required?	Yes
Survey by	FCI
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	
Special Instruction to ARC, if any	PC3117Y - FRONT RIGHT PORTION DAMAGED SHC7798A(TF) NOT SURE IF GOT DAMAGE AT THE REAR BUMPER WHEN HE REVERSE.
Prepared Date and Time	09/03/2017 12:33 PM
Chassis Number	
Mileage	
Work Shop	
Repair Completion Date and Time	

Section B - Summary of Repair Estimates		
Summary of Repair Estimates	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$800.00	\$0.00
Total Spray Cost	\$800.00	\$0.00
Total Spare Part Cost	\$2,350.44	\$0.00
Total Cost	\$3,950.44	\$0.00
TOTAL COST	\$4,310.44	\$0.00
Lump Sum Total	\$0.00	\$9.00
Number of Repair Days	3.0	0.0 2
Prepared / Adjusted By	ARC Manager Team	
ARC / Surveyor Sign Off Date	09/11/2018 4:47 PM	20/11/18
Signature	P	H
Remarks		

Section C - Quotation and Accident Invoice Details			
Quotation Number		Invoice Number	
Quotation Date		Invoice Date	
Invoice Amount		Prepared Date	





SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757701
FAX Number : 63685692
Estimator Telephone Number : 68562623
Accident Reporting Number : 68562872

Date Generated : 12/11/2018

User ID : CatherineLee

Part 1 - Labour Works		Section D - Details of Repair Estimates							
Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable							
TO REPAIR RH FRONT PORTION	\$400.00	\$0.00 300							
TO REMOVE & REFIT RH FRONT PORTION PARTS	\$400.00	\$0.00 100							
Total Labour	\$800.00	\$0.00							
Part 2 - Spray Painting & Panel Boating Related Works									
Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable							
TO RESPRAY ALL AFFECTED AREA	\$400.00	\$0.00 300							
PUTTY AFFECTED AREAS	\$400.00	\$0.00 100							
Total Spray Painting & Panel Boating	\$800.00	\$0.00							
Part 3 - Other Costs - Accident and Accident Repair Related Expense									
Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable							
TO CHECK WIRING AND SYSTEM FUNCTION	\$80.00	\$0.00 30							
TO TRANSFER DOOR MECHANISM	\$120.00	\$0.00 50							
TO CHECK WIRING AND SYSTEM FUNCTION	\$80.00	\$0.00 50							
TO TRANSFER DOOR MECHANISM	\$120.00	\$0.00							
Total Other Costs	\$360.00	\$0.00							
Part 4 - Spare Parts / Material Usage									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
			FRONT DOOR RH	1.00	\$2,305.35	10.00	\$2,074.81	Replace	Replace
			FRONT DOOR SIGNAL LAMP RH	1.00	\$221.09	10.00	\$198.98	Replace	Replace
			FRONT DOOR INNER SEAL RH	1.00	\$85.15	10.00	\$76.63	Replace	Replace
			FRONT DOOR RH	1.00	\$2,305.35	10.00	\$2,074.81	Replace	Replace
			FRONT DOOR SIGNAL LAMP RH	1.00	\$221.09	10.00	\$198.98	Replace	Replace
			FRONT DOOR INNER SEAL RH	1.00	\$85.15	10.00	\$76.63	Replace	Replace
Total					\$5,223.18		\$4,700.86		
Added Spare Parts / Material Usage After Surveyor Signed off									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
Total									

NAR LKK

22/11/18

L/S

2 days

CHECK ITEMS PHOTO

AFTER REPAIR PHOTOS

PARD \$2,074.81

SINBTT \$ 300

LABOUR \$ 480

SPRAY \$ 400

\$3,254.81

LESS 20% L/S \$2,603.84

L/S TOTAL \$2,600.00

/ 2 REPAIR DAYS

REQUEST FOR SUPPLEMENTS PARTS

Contractor:			
Accident Case Number		Date of Collection	/ /
Vehicle No	PC 3117 Y	Date of Request	17/1/2019
Vehicle Model	MITSUBISHI ROSA	Number of Days to Extend (If any)	—

S/N	Part Number	Part Description	Quantity	Unit Price
1		FRONT DOOR ADVERTISEMENT STICKER	1 SET	\$ 450.00

\$300 net

<<< Please submit photographs for damaged parts >>>

I, (Name) _____

(Position) _____

do solemnly and sincerely declare that:- Supplementary Parts are raised for replacement for the aforesaid vehicle.



Signature of person making this declaration
(to be signed in front of an authorised witness)

I acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the damages of perjury.

For SMRT Staff

Acknowledge By	ARC Executive / Supervisor / SA	
Approval By	Surveyor / In-house Staff	
Parts Ordering	SMRT Store / Contractor Supply / Form 22 / WOC	Form22 / PO / WOC/ Reservation / Number
Photo Submitted	YES / NO	Date of submission

AWAITING SURVEY

FCI



SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63655592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

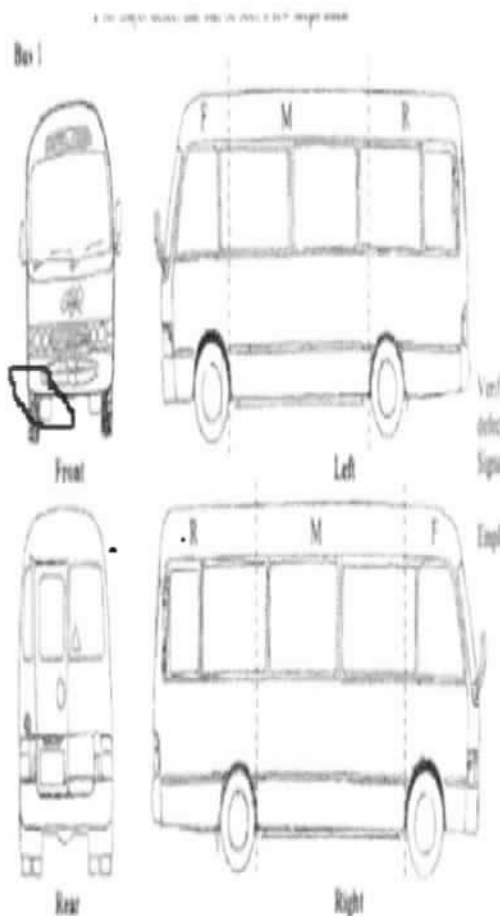
Date Generated : 12/11/2018

User ID : CatherineLee

Section A - Accident Details	
Registration Number	PC3117Y
Case Reference Number	BPS/03/17/3003
Registration Date	01/01/1900
Company Type	Bus-Plus Services Pte Ltd
Make	MITSUBISHI
Model	MITSUBISHI ROSA BE637
Name of Driver	Toh Kim Hin
Type of Accident	HEAD TO REAR
Accident Date and Time	08/03/2017 2:15 PM
Accident Reported Date and Time	08/03/2017 5:59 PM
Is Surveyor Required?	Yes
Survey by	FCI
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	
Special Instruction to ARC, if any	PC3117Y - FRONT RIGHT PORTION DAMAGED SHC7798A(TP) NOT SURE IF GOT DAMAGE AT THE REAR BUMPER WHEN HE REVERSE.
Prepared Date and Time	09/03/2017 12:33 PM
Chassis Number	
Mileage	
Work Shop	
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	Quotation from ARC	Adjusted by Surveyor, if applicable
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Total Other Cost	\$360.00	\$0.00
TOTAL COST	\$4,310.44	\$0.00
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	0.0
Prepared / Adjusted By	ARC Manager Team	
ARC / Surveyor Sign Off Date	09/11/2018 4:47 PM	
Signature	P	
Remarks		

Section C - Quotation and Accident Invoice Details			
Quotation Number		Invoice Number	
Quotation Date		Invoice Date	
Invoice Amount		Prepared Date	





SMRT Accident Vehicle Repair Estimates

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Total Labour		\$800.00				\$0.00			
Part 2 - Spray Painting & Panel Beating Related Works									
Job Scope		Quotation from ARC				Adjusted by Surveyor, if applicable			
TO RESPRAY ALL AFFECTED AREA		\$400.00				\$0.00 300			
PUTTY AFFECTED AREAS		\$400.00				100			
Total Spray Painting & Panel Beating		\$800.00				\$0.00			
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Job Scope		Quotation from ARC				Adjusted by Surveyor, if applicable			
TO CHECK WIRING AND SYSTEM FUNCTION		\$60.00				\$0.00 30			
TO TRANSFER DOOR MECHANISM		\$120.00				\$0.00 50			
TO CHECK WIRING AND SYSTEM FUNCTION		\$60.00							
TO TRANSFER DOOR MECHANISM		\$120.00							
Total Other Costs		\$360.00				\$0.00			
Part 4 - Spare Parts / Material Usage									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
			FRONT DOOR RH	1.00	\$2,305.35	10.00	\$2,074.81	Replace	Replace
			FRONT DOOR SIGNAL LAMP RH	1.00	\$221.09	10.00	\$198.98	Replace	Replace
			FRONT DOOR INNER SEAL RH	1.00	\$85.15	10.00	\$76.63	Replace	Replace
			FRONT DOOR RH	1.00	\$2,305.35	10.00	\$2,074.82	Replace	
			FRONT DOOR SIGNAL LAMP RH	1.00	\$221.09	10.00	\$198.98	Replace	
			FRONT DOOR INNER SEAL RH	1.00	\$85.15	10.00	\$76.64	Replace	
Total					\$5,223.18		\$4,700.86		
Added Spare Parts / Material Usage After Surveyor Signed off									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price \$	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
Total									

DEIF
XSVL
?

NAL LKK

22/11/18

L/S

2 days

CHECK ITEMS PHOTO

AFTER REPAIR PHOTOS

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

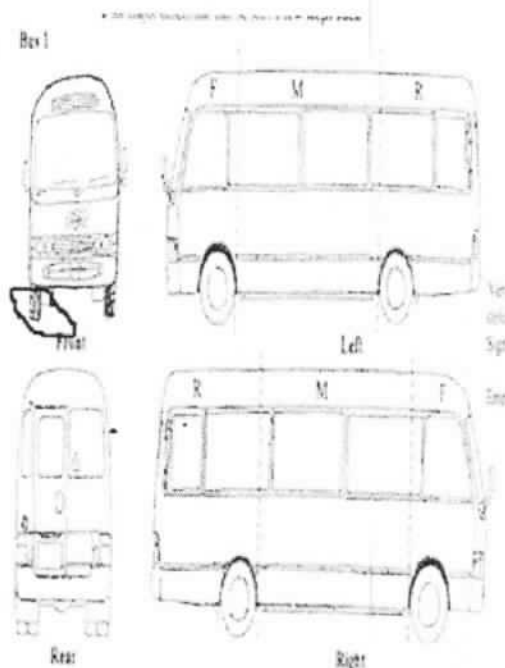
Signature:

Date:

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No : PC3117Y
 Ref. No : BPS/03/17/3003
 Reg. Date : 01/01/1900
 Vehicle Type : BUS-PLUS
 Make : MITSUBISHI ROSA
 Model : MITSUBISHI ROSA BE637
 Name of Driver : Toh Kim Hin
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 08/03/2017 02:15:00 PM
 Accident Reported Date / Time : 08/03/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : FCI
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No :
 Special Instruction to ARC,if any :



PC3117Y - FRONT RIGHT PORTION DAMAGED
 SHC7798A(TP) NOT SURE IF GOT DAMAGE AT THE REAR BUMPER WHEN HE REVERSE.

Prepared Date : 09/03/2017 12:33:42 PM

Chassis No :

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labour Charges : 400.00

0.00

Total Spray Painting Charges : 400.00

0.00

Total Material Charges : 2,427.05

2,427.05

Other Charges : 180.00

0.00

TOTAL : 3,407.05

0.00

Lum Sum Total : 0.00

0.00

No. of Repair Days : 3.00

0.00

Prepared / Adjusted By :

Arc / Surveyor Sing Off Date : 06/08/2018 02:03:38 PM

01/01/1900 12:00:00 AM

P

Prepared / Adjusted Date :

Remarks :

Prepared Date : 06/08/2018 02:03:15 PM

Section C - To be Completed by Admin Assistant, Accident Repair Centre, Upon Completion of Repair

Quotation No :

Invoice No :

Quotation Date :

Invoice Date :

Invoice Amount :

Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	400.00	0.00
Total Labour	400.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO RESPRAY ALL AFFECTED AREA	400.00	0.00
Total Spray Painting & Panel Beating	400.00	0.00

Part 3 - Other Costs - Accident and Accident Repair Related Expenses

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	60.00	0.00
TO TRANSFER DOOR MECHANISM	120.00	0.00
Total Other Costs	180.00	0.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
			FRONT DOOR RH	1	2,305.35	10.00	2,074.81	Replace	Replace	No
			FRONT DOOR SIGNAL LAMP RH	1	221.09	10.00	198.98	Replace	Replace	No
			FRONT DOOR INNER SEAL RH	1	85.15	10.00	76.63	Replace	Replace	No
TOTAL MATERIALS							2,350.43	2,350.42		
TOTAL MATERIALS(Discounted)							2,427.05	2,427.05		

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
TOTAL SUPPLEMENTARY MATERIALS									



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				
MS FIRST CAPITAL INSURANCE LTD			Ref : CS/FCI18014023/Ntbe2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 15-04-2019	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHC 7798A	Veh. Inspected	PC 3117Y	
Policy No.	D-15072702MFSH	Coverage (\$)	0.00	
Claim No.	D17002626MFSH	Excess (\$)	0.00	
Assign From	LURENE JAW	Assign Date	01/08/2018	
2. Vehicle Particulars & Condition				
Make & Model	MITSUBISHI ROSA BUS	c.c	2998	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	BE641JJ10143	Colour	WHITE	
Odometer	-	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	7.00 R16LT	WEST LAKE	5 mm	
L/H Front Tyre	7.00 R16LT	WEST LAKE	5 mm	
R/H Rear Tyre	7.00 R16LT	WEST LAKE	6 mm	
L/H Rear Tyre	7.00 R16LT	WEST LAKE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	08/03/2017	Inspection Date	22/11/2018	
Survey held at	251 NORTH BRIDGE ROAD			
Repairer	SMRT AUTOMOTIVE SERVICES PTE LTD			
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:		2 Working Days		

**LKK Auto Consultants Pte Ltd**

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PC 3117Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	FRONT DOOR RH	DEFORMED	2,305.35	2,305.35
1	FRONT DOOR SIGNAL LAMP RH	SERVICEABLE	221.09	-
1	FRONT DOOR INNER SEAL RH	SERVICEABLE	85.15	-
	LESS 10% DISCOUNT		-	-230.54
			2,611.59	2,074.81
	<u>SPECIAL NETT ITEMS</u>			
1	SET FRONT DOOR ADVERTISEMENT STICKER (SN)	NECESSARY	450.00	300.00
			450.00	300.00
	<u>LABOUR</u>			
	TO REPAIR RH FRONT PORTION.		400.00	300.00
	TO REMOVE & REFIT RH FRONT PORTION PARTS.		400.00	100.00
	TO RESPRAY ALL AFFECTED AREA.		400.00	300.00
	PUTTY AFFECTED AREAS.		400.00	100.00
	TO CHECK WIRING AND SYSTEM FUNCTION.		60.00	30.00
	TO TRANSFER DOOR MECHANISM.		120.00	50.00
			1,780.00	880.00
	GRAND TOTAL		4,841.59	3,254.81
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,600.00

Report Ref No. CS/FCI18014023/Ntbe2

MUHAMMAD NAZRIL BIN ABDULLAH

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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