

ASS. REC. BY:

REF: CS/FCI18614955/R1nd302

Special Instruction:

Surveyor
(WS)

Rasul

ASSIGNMENT (Office)

From (Person):

Sihera

of

FCI

Date/Time: 15/11/18 @ 7:35pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No.:

SLW 571AC

Insured:

SHA 0943D

at Workshop in/s:

Kah Motor

Tel:

90721769

of

255 Alexandra Road

Policy No.:

Claim No.:

D18006150MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 12/08/2018

CA / REV / REP. / REV 24 HRS (up)

H.O.D. Endorsement:

Date/Time:

8:30am @ 16/11/18

Person Contacted:

Mr. Ng

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓)

Estimate

SLW 571AC - X

SHA0943D - CS1 AX07 / 1610404 / H/g / dg. 2

D.O.A. 29/15/2011

17/11/18-

Mr. Ng said VNI yet

Revert thru email

Signature *Rasm*

REF:

1022A

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SLW 5714C Yr Regn: 2018 / FEB
 Type: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Honda HRV 1.5 LX CVT c.c. 1496
 Colour: Red A/C: Insured / Std / NI / NA
 Sp. Reading: 506136 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JHMRU18304X203696
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modi: Nil / Rim / STD A/Rim or
 Tyre Size: F: 215/60R16
 R: m
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or

(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: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Front _____ Rear _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 12/08/18 D.O.I. 05/09/18
 Survey held at KAH MOTOR
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
5/3 FRNT.
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Confirm \$2468.85 @ 3 days Red: \$3095.03, 56%.
RECEIVED 18 OCT 2018	

Date/Time. File Pass to? : Preli. Report
 : Final Report

Days Of Repair: 3
 Resurvey No. of Trip: 1

1) typist
 Date/Time. File Return to?
 2)

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

Report Format : TP
 Lump Sum / I.B.I.: (\$ 2468.85)

Survey Fee:	<u>100</u>
Transportation:	<u>50</u>
_____ \$ + RS. _____ SI	<u>50</u>
) Photos	<u>26</u>
) Others	
TOTAL	<u>266</u>

MOTOR SURVEY ASSIGNMENT

Date	15-08-2018	Our Ref No. D18006150MFSH
Accident Date	12-08-2018	Claim Type. Third Party
Insured Vehicle	SHA0943D	Third Party Vehicle. SLW5714C
Survey Location	255 ALEXANDRA ROAD	
Contact Person.	NG SIN HAI	
Contact No.	64715419/ 90721769	Fax No. 0
Survey Type	WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:	
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	KAH MOTOR CO SDN BHD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	SITHARA	

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.



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/FCI18014955/R1rd3

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 16-08-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHA 943D	Veh. Inspected	SLW 5714C
Policy No.		Coverage (\$)	0.00
Claim No.	D18006150MFSH	Excess (\$)	0.00
Assign From	CWS (SITHARA)	Assign Date	16/08/2018

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	12/08/2018	Inspection Date	05/09/2018
Survey held at	KAH MOTOR CO SDN BERHAD NO. 255 ALEXANDRA ROAD SINGAPORE 159937		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

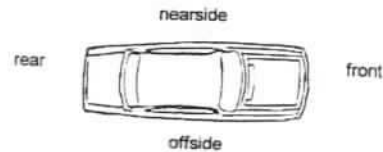
Your Ref: D18006150MFSHDate: 12 October 2018Our Ref: CS/FCI1801455/R1rbThe Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SLW 5714CPlease be informed that we had conducted the inspection of the abovementioned vehicle on 05/09/2018 at the premises of M/s KAH MOTOR and have the following to report:-

Workshop Estimate Amount	: S\$ <u>5,563.88</u>
Revised Estimate Amount	: S\$ <u>2,468.85</u>
"Check" Items Amount	: S\$ <u> </u>
Market Value	: S\$ <u> </u>
LTA Reimbursement Value	: S\$ <u> </u>
Nett Value	: S\$ <u> </u>

Description of Damage:

The vehicle sustained damages
at the o/s front portion.

Yours faithfully

RASUL
Automotive Assessor

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	14/08/2018 21:10
Date Of Accident	12/08/2018 14:20
Exact Location Of Accident	BLOCK 337 JURONG EAST AVE 1 CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW5714C
Insured/Policyholder	
Name Of Registered Owner	GERALDINE GWEE XIAO FEN
NRIC No	S8271022A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91064231
Alternative Phone No	OFFICE-91064231

Vehicle Particulars

Manufacturer	HONDA
Model	HR-V-1.5 (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 PRIVATE CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

Policy Number

Cover Note Number

Driver

Name of Driver	GERALDINE GWEE XIAO FEN
NRIC No	S8271022A
Date Of Birth	06/10/1982
Occupation	INDOOR
Date Of Driving Pass	17/03/2016
Driving Experience	2 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91064231
Fax Number	
Contact Number	OFFICE-91064231
EMail Address	NOEMAIL

Address	SINGAPORE
Postcode	
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 92 BOON LAY WAY , POSTCODE: 609962 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8999999 - FAX NO: 66655791
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA943D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan

Vehicle No _____

SKETCH PLAN

Annex D

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.

B. 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

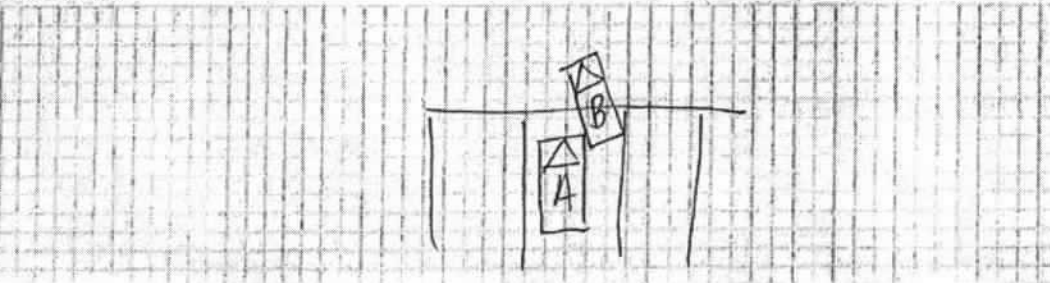
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Please continue to Annex E

Vehicle No _____

ANEX E

Describe Circumstances of the Accident

Refer to ^J police report.

You had been advised by the workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

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





**SINGAPORE
POLICE FORCE**



T/20180812/2059

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

2 of 3

Report No. T/20180812/2059

CONTINUATION OF REPORT

Brief Details.

On 12/08/2018 at about 1430hrs, my father namely Gwee Choon Huat, noticed my parked car (reg:SLW5714C) at the open car park lot no: 262, between Block 337 and 339 of Jurong East Ave 1, has damaged on the front right bumper and mudguard. I then viewed the in built car camera and noticed that there was City Cab reg:SHA9430 (cant really see the registration plate clearly) hit and run causing damaged to my car.



**SINGAPORE
POLICE FORCE**



T/20180812/2059

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

3 of 3
Report No. T/20180812/2059

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
D /
Sgt 2 SUKUMARAN S/O SIVANDARAJOO

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
12/08/2018 16:22

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt TAN JEOK LENG
Contact No.: 65476144

Classification Of Case:

Authentication Stamp
NP168
SN 34
SIGNATURE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8271022A**

Name: **GERALDINE GWEE XIAO FEN (GERALDINE WEI XIAOFEN)**


Birth Date: **06 Oct 1982**

Issue Date: **17 Mar 2016**

002548465E



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8271022A



Name: **GERALDINE GWEE XIAO FEN (GERALDINE WEI XIAOFEN)**
魏晓芬

Race: **CHINESE**

Date of birth: **06-10-1982** Sex: **F**

Country of birth: **MALAYSIA**





ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

EFFECTIVE DATE: **17 Mar 2016**

3A Motor cars without clutch pedals (Auto) with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight <= 2500kg

Licence No: S8271022A



4959863



NRIC No: **S8271022A**



Date of issue: **10-04-2013**

Address: **APT BLK 339 JURONG EAST AVENUE 1 #12-1538 SINGAPORE 600339**





Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 18-MT001199-R00 (Private Motor Car 24 Months)

- | | | |
|--|--|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SLW5714C | Chassis No.: JHMRU1830GX203696 |
| 2. Name of Policyholder | MS GERALDINE GWEE XIAO FEN (GERALDINE WEI XIAOFEN) | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 22/02/2018 | |
| 4. Date of Expiry of Insurance | 21/02/2020 | |
| 5. Persons or Class of Persons entitled to drive* | (a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his permission. | |

* Provided that the Person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: E2316DDA

Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims	SGD 800
	Windscreen Excess	SGD 100
Financial Interest:	UNITED OVERSEAS BANK LIMITED	

Tokio Marine Insurance Singapore Ltd.

Authorised Signature



KAH MOTOR CO. SDN. BHD.
 (A Member of the Oriental Holdings Berhad)
 Service and Body Repair
 Tel: +65 6841 3838 Website: www.honda.com.sg
 For 24-hours Roadside Assistance, Call 98203838

Fridky collect
QUOTATION

GST Reg No.: M200050223
 Company Ref. No.: S60FC1380G

Customer :	MS FIRST CAPITAL INSURANCE 36 ROBINSON ROAD #16-01 CITY HOUSE SINGAPORE 068877	Document No. :	SQT18003390	Page	1
Registration No :	SLW5714C	Date	: 15. Aug 2018		
Chassis No :	JHMRU1830GX203696	Customer No.	: WZF002		
Model :	HRV LX-SIN CVT YM 2016	Svc Advisor	: NG SIN HAI		
Owner's Name :	GERALDINE GWEE XIAO FEN	Engine No	: L15B4533696		
Ins Policy No. :		Date Time	: 15. Aug 2018 8:43:49 AM		
Date of Accident :	12/8/2018	Surveyor Name	:		
		Survey Date	:		
		Authorisation Date	:		

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER:GERALDINE GWEE XIAO FEN OWNER INSURER:TOKIO MARINE ACC DATE:12/08/2018 SURVEYED BY: DATE: REF NO: TP INSURER:MS FIRST CAPITAL INSURANCE LIMITED TP VEH:SHA943D						
91505-TM8-003	CLIPBUMPER	28	2.00 <i>see</i>	25	42.00	2.94	44.94
71123-T7A-901	MOLDINGFR.GRILLE	1	42.80 <i>X see</i>	25	32.10	2.25	34.35
71122-T7A-901	MOLDINGFR.GRILLE UPPER	1	186.10 <i>X see</i>	25	139.57	9.77	149.34
75700-TA0-A00	EMBLEMFR.	1	25.90 <i>X see</i>	25	19.42	1.36	20.78
90675-SA5-003	NUT,CLIP 6MM	2	2.80 <i>X see</i>	25	4.20	0.29	4.49
71126-T7B-Z01	SET,FR.GRILLE ASSY	1	265.50 <i>X see</i>	25	199.12	13.94	213.06
04711-T7A-N00ZZ	FACE,FR.BUMPER	1	466.20 <i>see</i>	25	349.65	24.48	374.13
71130-T7A-010ZZ	BEAM COMP,FR.BUMPER	1	236.60 <i>? see</i>	25	177.45	12.42	189.87
71103-T7A-000	GRILLEFR.BUMPER	1	77.50 <i>X see</i>	25	58.12	4.07	62.19
71193-T7A-J00	SPACER,R.FR.BUMPER SIDE	1	11.00 <i>see</i>	25	8.25	0.58	8.83
71198-T7A-J00	SPACER,L.FR.BUMPER SIDE	1	11.00 <i>see</i>	25	8.25	0.58	8.83
33100-T7S-E11	HEADLIGHT ASSY,R.	1	1661.00 <i>X see</i>	25	1245.75	87.20	1332.95
	Sum Item				2283.88	159.88	2.443.76
BOSUN	SUNDRIES	1	100.00 <i>30</i>		100.00	7.00	107.00
BML01I	INSPECT FR LIGHTING MECHANISMS & FOCUS	1	180.00		180.00	12.60	192.60
BKBH01S	STRAGHTEN ALIGN BULKHEAD & RENEW DAMAGE PARTS.	1	1800.00 <i>840</i>		1800.00	126.00	1926.00
BP01R	SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (1P)	1	1200.00 <i>900</i>		1200.00	84.00	1284.00
	Sum Labor				3280.00	229.60	3.509.60



KAH MOTOR CO. SDN. BHD.
 (A Member of the Oriental Holdings Berhad)
 Service and Body Repair
 Tel: +65 6841 3838 Website: www.honda.com.sg
 For 24-hours Roadside Assistance, Call 98203838

QUOTATION

GST Reg No.: M200050223
 Company Ref. No.: S60FC1380G

Customer : MS FIRST CAPITAL INSURANCE
 36 ROBINSON ROAD
 #16-01 CITY HOUSE
 SINGAPORE 068877
 Registration No : SLW5714C
 Chassis No : JHMRU1830GX203696
 Model : HRV LX-SIN CVT YM 2016
 Owner's Name : GERALDINE GWEE XIAO FEN
 Ins Policy No. :
 Date of Accident : 12/8/2018

Document No. : SQT18003390 Page 2
 Date : 15. Aug 2018
 Customer No. : WZF002
 Svc Advisor : NG SIN HAI
 Engine No : L15B4533696
 Date | Time : 15. Aug 2018 8:43:49 AM
 Surveyor Name :
 Survey Date :
 Authorisation Date :

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incld GST
Survey By	Rasul - Hp 90010068						
Date & Time	05/09/18 @ 0900						
Excess							
Status	4 days						
Signature							
Total Amount					5,563.88	389.48	5,953.36
Total (Inclusive of GST)							5,953.36
					5674.58		

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:

Printed on 15/8/2018 9:02:11 AM

This is a computer generated invoice. No signature is required.

Part prices are subjected to change without notice.

The above estimated cost of repair do not include any unforeseen damages.

GST Amount is calculated from individual line(s)



SERVICE PRE-INVOICE

KAH MOTOR CO. SDN. BHD.

(A Member of the Oriental Holdings Berhad)

370 Ubi Road 3 Singapore 408651. Tel: +65 6841 3883 Fax: +65 6741 5022

255 Alexandra Road Singapore 159937. Tel: +65 6471 5458 Fax: +65 6471 5460

GST Reg No.: M200050223
Company Ref. No.: S60FC1380G

Customer: WZF002 / MS FIRST CAPITAL
Chassis No: JHMURU1830GX203696
License No: SLW5714C
Mileage: 2275
Engine No: L15B4533696

Document No: SVO18052026
Printed By: SHNG
Order Date: 5. September 2018
Order Time: 9:18:23 AM
Service Advisor: NG SIN HAI

ITEM	DESCRIPTION	QTY	UNIT PRICE	DISC %	AMOUNT	7% GST Amount	Amount incld GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER:GERALDINE GWEE XIAO FEN OWNER INSURER:TOKIO MARINE ACC DATE:12/08/2018 SURVEYED BY:rasul DATE:05/09/2018 REF NO: TP INSURER:MS FIRST CAPITAL INSURANCE LIMITED TP VEH:SHA943D ADDITIONAL PART						
91505-TM8-003	CLIPBUMPER	28	2.00	25	42.00	2.94	44.94
04711-T7A-N00ZZ	FACE,FR.BUMPER	1	466.20	25	349.65	24.48	374.13
71193-T7A-J00	SPACER,R.FR.BUMPER SIDE	1	11.00	25	8.25	0.58	8.83
71198-T7A-J00	SPACER,L.FR.BUMPER SIDE	1	11.00	25	8.25	0.58	8.83
74107-T7A-J01ZS	PROTECTOR,R.FR.WHEEL ARCH (A) CRX ✓	1	147.60	25	110.70	7.75	118.45
	SUM PARTS:				518.85	36.33	555.18
BOSUN	0701 SUNDRIES	1	30.00		30.00	2.10	32.10
BML01I	1729 INSPECT FR LIGHTING MECHANISMS & FOCUS HEADLIGHTS.(N)	1	180.00		180.00	12.60	192.60
BKBH01S	1729 STRAGHTEN ALIGN BULKHEAD & RENEW DAMAGE PARTS.	1	840.00		840.00	58.80	898.80
BP01R	1718 SPRAY PAINTING ON REPAIRED OR REPLACED AREAS.(1P)	1	900.00		900.00	63.00	963.00
	SUM LABOUR:				1,950.00	136.50	2,086.50
	TOTAL SGD				2,468.85	172.83	2,641.68
	Total Payable (SGD)						2,641.68

GST Amount is calculated from individual line(s)



QUOTATION

KAH MOTOR CO. SDN. BHD.
(A Member of the Oriental Holdings Berhad)

GST Reg No.: M200050223
Company Ref. No.: S60FC1380G

Service and Body Repair

Tel: +65 6841 3838

Website: www.honda.com.sg

For 24-hours Roadside Assistance, Call 98203838

Customer : MS FIRST CAPITAL INSURANCE
 36 ROBINSON ROAD
 #16-01 CITY HOUSE
 SINGAPORE 068877

Registration No : SLW5714C

Chassis No : JHMRU1830GX203696

Model : HRV LX-SIN CVT YM 2016

Owner's Name : GERALDINE GWEE XIAO FEN

Ins Policy No. :

Date of Accident :

Document No. : SQT18003769 Page 1

Date : 7. Sep 2018

Customer No. : WZF002

Svc Advisor :

Engine No : L15B4533696

Date | Time : 7. Sep 2018 6:35:49 PM

Surveyor Name :

Survey Date :

Authorisation Date :

Item	Description	Qty	Unit Price	Disc %	Amount	0% GST Amount	Amount incl GST
	TP DIRECT SETTLEMENT (J/NO:) OWNER: OWNER INSURER: ACC DATE: SURVEYED BY: DATE: REF NO: TP INSURER: TP VEH: supplementary						
74107-T7A-J01ZS	PROTECTOR,R.FR.WHEEL ARCH <i>CRA (A)</i>	1	147.60	25	110.70	7.75	118.45
				Sum Item	110.70	7.75	118.45

Survey By _____

Date & Time _____

Excess _____

Status _____

Signature _____

Total Amount 110.70 7.75 118.45

Total (Inclusive of GST) 118.45

Printed on 7/9/2018 6:36:51 PM

This is a computer generated invoice. No signature is required.

Part prices are subjected to change without notice.

The above estimated cost of repair do not include any unforeseen damages.

GST Amount is calculated from individual line(s)

Janice Lee (LKKAuto)

From: Ng Sin Hai <shng@kahmotor.onmicrosoft.com>
Sent: Friday, September 07, 2018 6:39 PM
To: Rasul (LKKAuto); SUR
Subject: RE: Submission Pre-Invoice for vehicle SLW5714C
Attachments: 4468_001.pdf; DSCF9285.jpg; DSCF9286.jpg; DSCF9287.jpg; DSCF9288.jpg; DSCF9289.jpg; DSCF9291.jpg; DSCF9284.jpg

Dear Rasul,

Kindly refer to the attached pdf for the pre-invoice final repair cost amount for abovementioned vehicle .

Cost of repair : \$2,468.85 (before GST)
No of working days : 03 days. (LOU)

We will proceed for closing after 1 week of submission to you.
Kindly contact me if there is any discrepancy.

Thank you and have a nice day,☺

Warmest Regards,

Ng Sin Hai
Kah Motor Co. Sdn. Bhd
(A member of Oriental Holdings Berhad)
Body Repair & Paint Centre
255 Alexandra Road
Singapore 159937
DID: 6471 5419
HP: 9072 1769
E-mail: shng@honda.com.sg



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OUR CHILDREN



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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile			
MS FIRST CAPITAL INSURANCE LTD		Ref : CS/FCI18014955/R1rd3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 29-11-2018	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHA 943D	Veh. Inspected	SLW 5714C
Policy No.		Coverage (\$)	0.00
Claim No.	D18006150MFSH	Excess (\$)	0.00
Assign From	SITHARA	Assign Date	16/08/2018
2. Vehicle Particulars & Condition			
Make & Model	HONDA HRV 1.5 LX CVT	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	JHMRU1830GX203696	Colour	RED
Odometer	6136	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/60 R16	DUNLOP	6 mm
L/H Front Tyre	215/60 R16	DUNLOP	6 mm
R/H Rear Tyre	215/60 R16	DUNLOP	6 mm
L/H Rear Tyre	215/60 R16	DUNLOP	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	12/08/2018	Inspection Date	05/09/2018
Survey held at	KAH MOTOR CO SDN BERHAD NO. 255 ALEXANDRA ROAD SINGAPORE 159937		
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:		3 Working Days	



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TEL: 6256 3561 FAX: 6256 4315

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Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLW 5714C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
28	CLIPBUMPER (SN)	NECESSARY	42.00	42.00
1	MOLDINGFR.GRILLE (SN)	SERVICEABLE	32.10	-
1	MOLDINGFR.GRILLE UPPER (SN)	SERVICEABLE	139.57	-
1	EMBLEMFR. (SN)	NOT NECESSARY	19.42	-
2	NUT, CLIP 6MM (SN)	NOT NECESSARY	4.20	-
1	SET, FR.GRILLE ASSY (SN)	SERVICEABLE	199.12	-
1	FACE,FR.BUMPER (SN)	SCRATCHED	349.65	349.65
1	BEAM COMP,FR.BUMPER (SN)	SERVICEABLE	177.45	-
1	GRILLEFR.BUMPER (SN)	SERVICEABLE	58.12	-
1	SPACER,R.FR.BUMPER SIDE (SN)	NECESSARY	8.25	8.25
1	SPACER,L.FR.BUMPER SIDE (SN)	NECESSARY	8.25	8.25
1	HEADLIGHT ASSY,R. (SN)	SERVICEABLE	1,245.75	-
1	SUNDRIES (SN)	NECESSARY	100.00	30.00
1	PROTECTOR,R.FR.WHEEL ARCH (SN) (ADDITIONAL)	CRACKED	110.70	110.70
			2,494.58	548.85
LABOUR				
INSPECT FR LIGHTING MECHANISMS & FOCUS.			180.00	180.00
STRAIGHTEN ALIGN BULKHEAD & RENEW DAMAGE PARTS.			1,800.00	840.00
SPRAY PAINTING ON REPAIRED OR REPLACED AREAS (1P)			1,200.00	900.00
			3,180.00	1,920.00
GRAND TOTAL			5,674.58	2,468.85
RECOMMENDED COST OF REPAIRS				2,468.85

Report Ref No. CS/FCI18014955/R1rd3e2

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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