

ASS. REC. BY:

REP CS/FCI18015458/R/rd302

Surveyor

CWS

Rahul

ASSIGNMENT (Office)

From (Person)

Lerene jaw

of

FCI

Date/Time

23/8/18 @ 3-4pm

Estimated Cost

Bill to

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

To Inspect Vehicle No.

SDV 1694C

Insured:

SHC 7455P

at Workshop in/s

Botuk Dee Auto

Tel:

902 62662

of

Bk 10, Amk Ind. park 2A # 04-11

Policy No.

Claim No:

DIB006226MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

19/08/2018

CA / REV / REP. / REV 24 HRS

Cup

H.O.D. Endorsement

Date/Time:

9:55am @ 24/8/18

Person Contacted:

An Tee

Vehicle

IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SDV 1694C-X

SHC 7455P-CS/TPR16004203/Dgbc

D.O.A: 2/3/16

09/11/18

Revert 1A via email

Paul confirm with L/S. \$3600 @ 8 days (Red. \$4207.10, 54%).

Susan

(08/11/18) wef

ASS. REC. BY:

REF:

FCI

19620

COE XPIRY: 2022/2024

ASSIGNMENT

From:

Date:

24/8/18

Estimated Cost:

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

To inspect Vehicle No:

SDV 1694C

at Workshop m/s

Botak Dee Auto

of BIK 10 AMK Ind. Park 2A #04-11

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

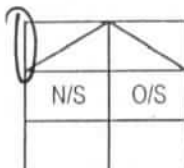
(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.



Bal. or Market Value:

23K

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 (up)

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SDV 1694C

Yr Regn:

2007 / July

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

Truck / Trailer or

Make:

Honda 2422 1-4 A

c.c 1339

Colour:

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

181954

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JH MAD 185 07S 224188

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/55R15

R:

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

TOYO / YOKO or

Falken

Front

Rear

R/Bal.

S

mm

R/Bal.

S

mm

L/Bal.

S

mm

L/Bal.

S

mm

D.O.A.

19/08/18

D.O.I.

24/08/18

Survey held at

Botak Dee

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

N/S Frt

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

Date / Time

Action / Instruction

MV: \$ 23K, LTA: \$ 17,833.00, NV: \$ 5,167.00

RECEIVED 09 NOV 2018

Date/Time, File Pass to?



Preli. Report

1) typist



Final Report

Date/Time, File Return to?

2)

Days Of Repair:

8

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

150

Transportation:

50

S + RS, SI

50

Photos

66

Others

TOTAL

316

Report Format:

TP

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

3600.00

MOTOR SURVEY ASSIGNMENT

Date	20-08-2018	Our Ref No. D18006226MFSH
Accident Date	19-08-2018	Claim Type. Third Party
Insured Vehicle	SHC7455P	Third Party Vehicle. SDV1694C
Survey Location	BLK 10 ANG MO KIO IND PARK 2A#04-01 ANG MO KIO AUTOPOINT	
Contact Person.	AH TEE	
Contact No.	0/ 90262662	Fax No. 0
Survey Type	WITHOUT PREJUDICE:	
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	BOTAK DEE AUTO	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.




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/FCI18015458/R1rd3	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 24-08-2018	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 7455P	Veh. Inspected	SDV 1694C
Policy No.		Coverage (\$)	0.00
Claim No.	D18006226MFSH	Excess (\$)	0.00
Assign From	CWS (LURENE JAW)	Assign Date	24/08/2018
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	19/08/2018	Inspection Date	24/08/2018
Survey held at	BOTAK DEE AUTO- BLK 10AMK IND PARK 2A# 04-11		
Repairer	-		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			



Auto
Consultants
Pte Ltd

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

Your Ref: D18006226MFSH

Date: 9 November 2018

Our Ref: CS/FCI18015458/R1rd3

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

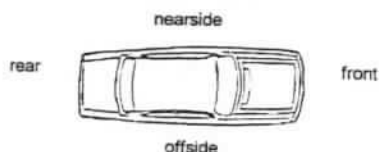
INITIAL INSPECTION REPORT OF VEHICLE NO. SDV 1694C .

Please be informed that we had conducted the inspection of the above mentioned vehicle on 24/08/2018 at the premises of M/s BOTAK DEE AUTO and have the following to report:-

Workshop Estimate Amount	: S\$ <u>7,807.10</u> .
Revised Estimate Amount	: S\$ <u>4,497.12</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 n/s front portion.



Yours faithfully

RASUL
Automotive Assessor

Janice Lee (LKKAUTO)

From: Janice Lee (LKKAUTO)
Sent: Friday, November 09, 2018 9:47 AM
To: 'Claim Workflow System'
Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG
Subject: RE: SURVEY ASSESSMENT - D18006226MFSH/1
Attachments: SDV 1694C.pdf

Dear Sir/Madam,

Enclosed preliminary revised for SDV 1694C.

Thank you.

Best Regards,

Jannice Lee (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Friday, August 24, 2018 10:00 AM
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 - D18006226MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Claim Workflow System [mailto:cwsmotorclaims@msfirstcapital.com.sg]
Sent: Thursday, 23 August 2018 3:41 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; LURENEJAW@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18006226MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

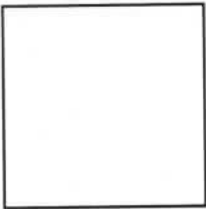
Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

Best Regards,
Admin Team
Claim Workflow System
Motor Claims Department
MS First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849

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



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

[> Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details

Vehicle No.:	SDV1694C
Vehicle Type:	P11 - Passenger Station Wagon/Jeep/Land Rover
Vehicle Attachment 1:	No Attachment
Vehicle Scheme:	Normal
Vehicle Make:	HONDA
Vehicle Model:	JAZZ 1.4A
Chassis No.:	JHMGD18507S224188
Propellant:	Petrol
Engine No.:	L13A54002261
Engine Capacity:	1339 cc
Maximum Power Output:	60.0 kW (80 bhp)
Maximum Laden Weight:	1490 kg
Unladen Weight:	1040 kg
Year Of Manufacture:	2007
Original Registration Date:	11 Jul 2007
Lifespan Expiry Date:	-
COE Category:	A - Car (1600cc & below)
PQP Paid:	\$24,100.00
COE Expiry Date:	10 Jul 2022
Road Tax Expiry Date:	10 Jan 2019
Inspection Due Date:	10 Jul 2019
Intended Transfer Date:	27 Aug 2018
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

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

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

You may print this page for reference.

OK

Print

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	20/08/2018 15:45
Date Of Accident	19/08/2018 18:25
Exact Location Of Accident	ARDMORE PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDV1694C
-----------------------------	----------

Insured/Policyholder

Name Of Registered Owner	ONG CHING HSIEN, MARCIA
NRIC No	S8111969D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91016020
Alternative Phone No	OFFICE-91016020

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ 1.4A

Exact Purpose for which vehicle was being used at time of accident	PRIVATE
--	---------

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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
---------------------------	--

Type Of Coverage	COMPREHENSIVE
------------------	---------------

Fleet Policy	NO
--------------	----

Policy Number	5097204311
---------------	------------

Cover Note Number	
-------------------	--

Driver

Name of Driver	BENJAMIN SARAH HUANG DAIYUAN
----------------	------------------------------

NRIC No	S8905767A
---------	-----------

Date Of Birth	14/02/1989
---------------	------------

Occupation	OUTDOOR
------------	---------

Date Of Driving Pass	22/07/2008
----------------------	------------

Driving Experience	10 YEARS AND 0 MONTHS
--------------------	-----------------------

Gender	FEMALE
--------	--------

Mobile Number	(LOCAL) +65-93695440
---------------	----------------------

Fax Number	
------------	--

Contact Number	
----------------	--

EMail Address	SARAHBENJAMIN@GMAIL.COM
---------------	-------------------------

Address	1 TOH YI ROAD
Postcode	596484
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - PARTNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - U-TURN
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)	3
Passenger 1	NAME: : ONG CHING HSIEN, MARCIA GENDER: : FEMALE
Passenger 2	NAME: : CHOW PEILING GENDER: : FEMALE

Details of Police Action

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

Circumstances of Accident

REFER TO ATTACHED SKETCH PLAN. CAR WILL BE REPAIR UNDER BOTAK DEE AUTO.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	PASS TO PREFERED WORKSHOP
Was there any audio recorded?	NO

Details of Witness 1

Name	ADDY
Phone Number	88200864
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC7455P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN TAI TIEN

NRIC/Passport Number	S1530245C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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 lodging of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile a claim history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared/disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulatory, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulatory law or court orders.

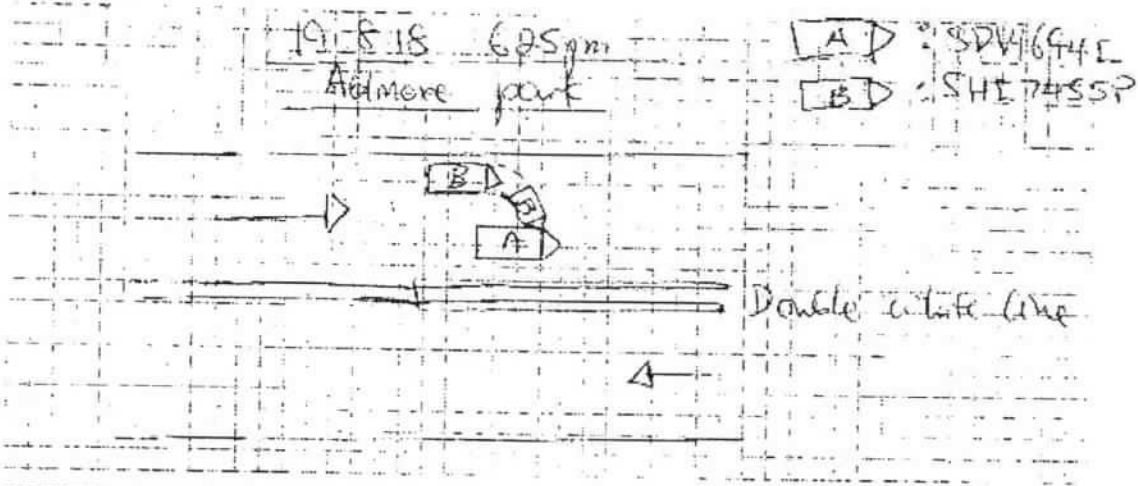
Policyholder's Signature
Date & Time

Driver's Signature
(If driver is not the policyholder)
Date & Time: 20/8/2018

Authorising Centre Personnel's Signature
Date
GIA CHM M01

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 19-8-18 at about 6:25pm,
 I was driving along Admore park.
 I was traveling straight in my own lane
 at a safe speed. The taxi SHE745SP
 suddenly made an illegal U-turn
 and hit my car, causing damages to
 my car.

There were 2 passengers in my car at the time of
 the accident. Their names are below:
 Front passenger seat: Cag Lany Hien Merida
 Back seat: Chari Peeling

* I have video footage.

* preferred workshop: Budget Dee Auto

DECLARATION

I/we declare the foregoing particulars are true to the best of my/our belief.

Police Officer's Signature
 Date & Time:

Driver's Signature
 I/we declare the following is/are
 Date & Time: 20/8/2018

Reporting Officer's Signature
 Name:
 I.R.C./T.A. No.:

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	1969D
Vehicle Details	
Vehicle No.:	SDV1694C
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Oct 2018
Vehicle Make:	HONDA
Vehicle Model:	JAZZ 1.4A
Primary Colour:	Black
Manufacturing Year:	2007
Engine No.:	L13A54002261
Chassis No.:	JHMGD18507S224188
Maximum Power Output:	60.0 kW (80 bhp)
Open Market Value:	\$13,863.00
Original Registration Date:	11 Jul 2007
First Registration Date:	11 Jul 2007
Transfer Count:	1
Actual ARF Paid:	\$15,250.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	10 Jul 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$24,100.00
COE Rebate Amount:	\$17,883.00
Total Rebate Amount:	\$17,883.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 24 Oct 2018

OK

23,000
17,883

5,117

BOTAK DEE AUTO

Repair for all kinds of Motor Vehicle
 Workshop : No. 10 Industrial Park 2A #04-11
 Ang Mo Kio Autopoint Singapore 568047
 Company Reg No. 53203907J Hp 91004390 / Hp 91254449 Fax 64841482
 Email : botakbeeauto@gmail.com

M/s	First Capital Insurance Ltd	DATE	21.08.2018
	36 Robinson Road #16-01 City House	CAR NO	SDV 1694 C
	Singapore 068877	MAKE	Honda Jazz

ESTIMATE COST OF REPAIR FOR THE ABOVE MENTIONED VEHICLE.

YOUR INSURED : ~~SKD 15300~~ SHC 7455 P

Pc	Pcs	Description	UNIT PRICE	AMOUNT
1	pc	Front bumper		\$530.50 DE
1	pc	Front bumper bracket (left)		\$26.70 DE
1	pc	Front bumper side retainer (left)		\$10.40 DE
10	pcs	Front bumper clips	\$3.80	\$38.00 DE
1	pc	Front tow hook cover		\$14.10 DE
1	pc	Front bumper spacer (left)		\$10.40 DE
1	pc	Front bumper reinforcement		\$154.80 DE
1	pc	Front bumper center grille		\$121.60 DE
1	pc	Front bumper lower grille		\$121.60 DE
10	pcs	Front grille clips	\$3.80	\$38.00 DE
1	pc	Front honda emblem		\$24.00 DE
1	pc	Front support panel		\$374.60 DE
1	pc	Front left side fender		\$375.60 DE
1	pc	Front left side fender inner cowling		\$78.10 DE
8	pcs	Front left side fender inner cowling clips	\$3.80	\$30.40 DE
1	pc	Front left wheel hup		\$149.70 DE
1	pc	Front left bearing		\$102.20 DE
1	pc	Front left side knuckle arm		\$245.00 DE
1	pc	Front left side lower arm		\$237.00 DE
1	pc	Front spring stabilizer		\$99.00 DE
1	pc	Front left side stabilizer link		\$70.10 DE
1	pc	Front left side quarter glass		\$116.90 DE
1	pc	Front left side head lamp		\$486.20 DE
1	pc	Front left side tyre		\$235.00 DE
1	pc	Front left side tyre rim		\$717.20 DE
			Total	

Pg 1 of 2

BOTAK DEE AUTO.

BOTAK DEE AUTO

Repair for all kinds of Motor Vehicle
Workshop : No. 10 Industrial Park 2A #04-11
Ang Mo Kio Autopoint Singapore 568047

Company Reg No. 53203907J Hp 91004390 / Hp 91254449 Fax 64841482
Email : botakbeeauto@gmail.com

M/s	First Capital Insurance Ltd	DATE	21.08.2018
	36 Robinson Road #16-01 City House	CAR NO	SDV 1694 C
	Singapore 068877	MAKE	Honda Jazz

ESTIMATE COST OF REPAIR FOR THE ABOVE MENTIONED VEHICLE.

YOUR INSURED : ~~SKD 1534D~~ SHC 7455 P

Pc	Pcs	Description	UNIT PRICE	AMOUNT
		Continue from page one.		\$4,407.10
		Remove and replace front bumper, cut and replace new left front fender & support panel, panel beat and realign front bonnet and all accident affected portion into correct position.		\$1,400.00 800
		Respray painting for front bonnet cover, front bumper, front support panel, front brace panel and front left side fender.	2030	\$1,200.00 900
		Computer alignment and jack camber.		\$120.00 60
		To check head lamp electrical wiring system include performing water leakage test.		\$80.00 30
		Check electrical wiring and head lamp focusing for proper functions.		\$100.00 30
		To spray anti-rust coating on new & affected panels.		\$150.00 60
		Remove and replace new under carriage parts such as knuckle arm, lower arm, wheel hub & bearing and etc.		\$350.00 150
		Rasul Hp 90010068		
		8 days		
		4/5		
		24/08/18 @ 1600		
		Resum after repair		
		Pg 2 of 2	Total	7,807.10

BOTAK DEE AUTO.

2167.12
300
2030
4497.12
200
3597.69

4/5 - 3,600 8 days




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/FCI18015458/R1rd3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 29-11-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHC 7455P		Veh. Inspected	SDV 1694C
Policy No.			Coverage (\$)	0.00
Claim No.	D18006226MFSH		Excess (\$)	0.00
Assign From	LURENE JAW		Assign Date	23/08/2018
2. Vehicle Particulars & Condition				
Make & Model	HONDA JAZZ 1.4A		c.c	1339
Engine No.	HIDDEN		Year of Reg.	2007
Chassis No.	JHMGD18507S224188		Colour	BLACK
Odometer	181954		Steering	IN ORDER
Brakes	IN ORDER		Modification	SPORTS RIM
General	FAIR			
3. Conditions of Tyres				
		Size	Make	Balance
R/H Front Tyre		195/55 R15	FALKEN	5 mm
L/H Front Tyre		195/55 R15	FALKEN	5 mm
R/H Rear Tyre		195/55 R15	FALKEN	5 mm
L/H Rear Tyre		195/55 R15	FALKEN	5 mm
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	19/08/2018		Inspection Date	24/08/2018
Survey held at	BOTAK DEE AUTO- BLK 10AMK IND PARK 2A# 04-11			
Repairer	-			
5a. Remarks				
A)DAMAGES CONSISTENT TO ACCIDENT REPORT. B)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. C)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:			8 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SDV 1694C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	DEFORMED	530.50	530.50
1	FRONT BUMPER BRACKET (LEFT)	NECESSARY	26.70	26.70
1	FRONT BUMPER SIDE RETAINER (LEFT)	NECESSARY	10.40	10.40
10	FRONT BUMPER CLIPS @\$3.80	NECESSARY	38.00	38.00
1	FRONT TOW HOOK COVER	CUT	14.10	14.10
1	FRONT BUMPER SPACER (LEFT)	NECESSARY	10.40	10.40
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	154.80	-
1	FRONT BUMPER CENTER GRILLE	SERVICEABLE	121.60	-
1	FRONT BUMPER LOWER GRILLE	SERVICEABLE	121.60	-
10	FRONT GRILLE CLIPS @\$3.80	SERVICEABLE	38.00	-
1	FRONT HONDA EMBLEM	SERVICEABLE	24.00	-
1	FRONT SUPPORT PANEL	BENT	374.60	374.60
1	FRONT LEFT SIDE FENDER	BUCKLED	375.60	375.60
1	FRONT LEFT SIDE FENDER INNER COWLING	DEFORMED	78.10	78.10
8	FRONT LEFT SIDE FENDER INNER COWLING CLIPS @\$3.80	NECESSARY	30.40	30.40
1	FRONT LEFT WHEEL HUP	BENT	149.70	149.70
1	FRONT LEFT BEARING	NECESSARY	102.20	102.20
1	FRONT LEFT SIDE KNUCKLE ARM	BENT	245.00	245.00
1	FRONT LEFT SIDE LOWER ARM	BENT	237.00	237.00
1	FRONT SPRING STABILIZER	SERVICEABLE	99.00	-
1	FRONT LEFT SIDE STABILIZER LINK	SERVICEABLE	70.10	-
1	FRONT LEFT SIDE QUARTER GLASS	SERVICEABLE	116.90	-
1	FRONT LEFT SIDE HEAD LAMP	BROKEN	486.20	486.20
1	FRONT LEFT SIDE TYRE	SERVICEABLE	235.00	-
	LESS 20% DISCOUNT		-	-541.78
			3,689.90	2,167.12
<u>SPECIAL NETT ITEMS</u>				
1	FRONT LEFT SIDE TYRE RIM (SN)	CUT	717.20	300.00
			717.20	300.00

Report Ref No. CS/FCI18015458/R1rd3e2

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	REMOVE AND REPLACE FRONT BUMPER, CUT AND REPLACE NEW LEFT FRONT FENDER & SUPPORT PANEL, PANEL BEAT AND REALIGN FRONT BONNET AND ALL ACCIDENT AFFECTED PORTION INTO CORRECT POSTION.		1,400.00	800.00
	RESPRAY PAINTING FOR FRONT BONNET COVER, FRONT BUMPER, FRONT SUPPORT PANEL, FRONT BRACE PANEL AND FRONT LEFT SIDE FENDER.		1,200.00	900.00
	COMPUTER ALIGNMENT AND JACK CAMBER.		120.00	60.00
	TO CHECK HEAD LAMP ELECTRICAL WIRING SYSTEM INCLUDE PERFORMING WATER LEAKAGE TEST.		80.00	30.00
	CHECK ELECTRICAL WIRING AND HEAD LAMP FOCUSING FOR PROPER FUNCTIONS.		100.00	30.00
	TO SPRAY ANTI-RUST COATING ON NEW & AFFECTED PANELS.		150.00	60.00
	REMOVE AND REPLACE NEW UNDER CARRIAGE PARTS SUCH AS KNUCKLE ARM, LOWER ARM, WHEEL HUB & BEARING AND ETC.		350.00	150.00
			3,400.00	2,030.00
	GRAND TOTAL		7,807.10	4,497.12
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,600.00

Report Ref No. CS/FCI18015458/R1rd3e2

MARKET VALUE: \$23,000.00(EST)-LTA REIMBURSEMENT VALUE: \$17,833.00=NETT VALUE: \$5,167.00

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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