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To Inspect Vehicle No				Tel	6758	
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of		Hoboullands Invi		. ઇન	191	1-1-1-1
Policy No: A	MO90742MKC				111	
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Estimated Cost:  OD IF PWS ITPRES I OD RES   EVA   INV   MV To inspect Vehicle No:  at Workshop m/s  of Insured:  Policy No.  Claims No.  Sum Insured:  Excess:  (Clein's Record)  Make of Veh:  (Policy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Bal. or Market Value:  B3 HC  IDAC Accident Rport:  Consistent? 'Yes or No  GIA / PR Soon:  Consistent? 'Yes or No  Sum SI Veh No:  Veh No:  IVeh No:  IVeh No:  IVeh No:  IVeh Mcycle / Bus I Van / Lorry   Taxl   Prime Mover I  Truck / Trailler or  Make:  Toy Strime cc 236  Colour A. P. WA: T. AC: Insured / Stid / NI / NA  Eng-No:  Colour A. P. WA: T. AC: Insured / Stid / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Cono:  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NA  Eng-No.  Colour A. P. WA: T. AC:  Insured 15td / NI / NI  NE Do.  Colour A. P. WA: T. AC:  Insured 15td / NI / NI  NE Do.  Bake: Ing-Mai J. T. AC:  Insured 15td / NI / NI  Insured:  Tyre Stre: F:  1797  NS Do.  1798  BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTS U / PR / SUMI /  Toy O / YOKO or  Tyre Stre: F:  1798  BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTS U / PR / SUMI /  Toy O / YOKO or  Tank Action / Insured 15td / NI / NI  Toy O / YOKO or  Tank Action / Insured / Std / NI / NI  Toy O / YOKO or  Tank Action / Insured / Std / NI / NI  Toy O / YOKO or  Tank Action / Insured / Std / NI / NI  Toy O / YOKO or  Tank Action / Insured / Std / NI / NI  Toy O / YOKO or  Tank Action / Insured / Std / NI / NI  Toy O / YOKO or	Front:  Date:  Estimated Cost:  OUTP WAS IT PRES IOD RES   FVA   INV   IMV To insped Vehicle No:  at Workshop m/s  of Instance:  Policy No.  Claims No.  Cloims Record)  Make of Veh:  No.  (Cloor's Record)  Make of Veh:  No.  No.  (Cloor's Record)  Make of Veh:  No.  (Cloor's Record)  Make of Veh:  No.  No.  (Cloor's Record)  Make of Veh:  N	//	EF: MIG	28		
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To hisped vehicle No:  at Workshop mis  of  insured:  Insured:  Policy No.  Claims No.  Claims No.  Som Insured:  Excess:  (Clion's Record)  Make:  To Make:	To inspect Vehicle No:  at Workshop m/s  of Insured: Insured: Policy No. Claims No. Consistent? Yea or No Cons	Estimated Cost:	•	Veh No: Sku Type: M.Car / M.Cycle / E	/ 5225 JYr Regn Bus / Van / Lorry / Taxi / P	1 06, 0
at Workshop mis  of linsured: Insured: Insured: Insured: Policy No.  Claims No.  Con. Cond. Good   Fair   Foor   Burnt   Steering Inopetial Jammed   Leaked   Burnt or   Brake: Inopetial Jammed   Leaked   Burnt or   Brake: Inopetial Jammed   Leaked   Burnt or   Brake: Inopetial Jammed   Leaked   Burnt or   Remark: The veh had commenced its   repair at the time of inspection.  Bat or Market Value:  B 3 HC  Consistent?: Yes or No   Consistent Yes or No   Consistent Yes or No	at Workshop m/s  of Insured: Insured: Insured: So, Reading I P S 93 I Tradic: Insured I Std I MI I NA I P S 94 I P S 95 I Tradic: Insured I Std I MI I NA I NII I SIRI I STD A P I S 95 I To A ST I MI I SIRI I S 95 I To A ST I MI I SIRI I SI SI I MI I NI I TOYO I YOKO or I Tradic: Insured I Std I MI I NA I Toyo I YOKO I Tradic: Insured I Std I MI I NA I Toyo I YOKO I Tradic: Insured I Std I MI I NA I Toyo I YOKO I Tradic: Insured I Std I MI I NI I Toyo I YOKO I Tradic: Insured I Std I MI I NI I Toyo I YOKO I Tradic: Insured I Std I MI I NI I Toyo I YOKO I Tradic: Insured I Std I MI I NI I Toyo I YOKO I Tradic: Insured I Std I MI I NI I Toyo I YOKO I Tradic: Insured I Std I MI I NI I Toyo I Yoko I Toyo I Yoko I Toyo I Y	To Inspect Vehicle No:	Y/MV	Truck / Trailer or		
Insured: Policy No. Claims No. Claims No. Sum Insured: Excess: (Clent's Record) Make of Veh:  (Policy Condition) Pomark: The veh had commenced its repair at the time of inspection.  Ball or Market Value:  Ball or Market Value:  Sam Seen:  Consistent?: Yes or No  Est. Repairs:  CA   REV   REP.   24 HRS  Data:  Person Contacted:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  CA   REV   REP.   24 HRS  Data:  Person Contacted:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  CA   REV   REP.   24 HRS  Data:  Person Contacted:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  CA   REV   REP.   24 HRS  Data:  Person Contacted:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  Ball or Market Value:  The UIC / Chassis frame / Body Structure affected due to collision.  REPAIR ACTION / Instruction  Ball or Market Value:  Data / Time   Acdion / Instruction  Ball or Market Value:  The UIC / Chassis frame / Body Structure affected due to collision.  REPAIR ACTION / Instruction  CA   REV   REP.   24 HRS  CA   REV   REP.   25 Pol   Acquains frame / Body Structure affected due to collision.  Ball or Market Value:  The UIC / Chassis frame / Body Structure affected due to collision.  Add Fee: Site Insp (S)   Sees Site Insp	So.Reading   72 \$5 3   TiRadic Insured   Stid   Ni   NA		hen Itoe	107		
Policy No. Claims No. Claims No. Sum Instruct:  (Clent's Record)  Make of Veh:  (Pokey Condition)  Permark: The veh had commenced its repair at the time of Inspection.  Ball or Market Value:  (DAC Accident Rport:  Consistent?: Yes or No.  GIA / PR Soon:  CONSISTENT Y So or No.  CA / REV / REP. / 24 HRS  Data / Time   Action / Instruction  Data / Time   Action / Instruction  Data / Time   Action / Instruction  Action / Instruction  CF A S 37 7 6 Red / Instruction  RECEIVED / UCT 2018  CONSISTENT Y Source (Sile Insp. 1)  Province, Fish Pass 107  Add Fee:  Sile Insp. (S.)  Sile Insp. (S.)  Parch   Parcol Condition    Consistent?: Yes or No.  Do. A 2/9///  Do. A 2/9///  The UC / Chassis frame / Body Structure affected due to collision.  Add Fee:  Sile Insp. (S.)  Parcel Insp	Policy No. Claims No. Claims No. Sum Insured:  (Clain's Record)  Make of Veh:  (Clain's Record)  Make of Veh:  (Peley Condition)  Remark: The veh had commenced its repair at the time of Inspection.  Bat or Market Value:  (DAC Accident Root:  Consistent?: Yes or No.  GLA / PR Sean:  Consistent?: Yes or No.  CLA / REV / REP. / 24 HRS  Data:  Person Contacted:  Vehicle: IN / OUT  Date / Time Action / Instruction  Date / Time Action / Instruction  Action / Instruction  Action / Instruction  RECEIVED / OUT 2018  CONS:  ACR 90 / Bat / Part / Consistent?  Add Fee:  Stell Repairs:  Days Of Repair:  The UIC / Chassis frame / Body Structure affected due to collision.  The UIC / Chassis frame / Body Structure affected due to collision.  RECEIVED / OUT 2018  Add Fee:  Stell Rep 1:  Stell Report  The UIC / Chassis frame / Body Structure affected due to collision.  Add Fee:  Stell Rep 1:  Stell Rep 1:  Stell Rep 1:  Survey Fee:  Transportation:  Tansburg (S.)   Parts		J	Sp.Reading 12 4		
Sum insured:    Steering: Inogder   Jammed   Leaked   Burnt or	Sum Nauros:  Excess:  (Client's Record)  Make of Veh:  Make of Veh:  Modi: NII I SIRIm I STD ARIM or  Tyre Size: F: 205/55RIP  Remark: The veh had commenced its repair at the time of Inspection.  Bail or Market Value:  Consistent?: Yes or No  GLA I PREP. I 24 HRS  CAL I REP. I 24 HRS  Date:  Person Contacted:  Vehicle: IN I OUT  Date / Time  Action / Instruction  Action / Instruction  CAL I REP. I 24 HRS  Date:  Person Contacted:  Vehicle: IN I OUT  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Structure  CAL I REP. I Structure  Action / Instruction  CAL I REP. I Structure  CAL I REP. I Structure  Action / Instruction  CAL I REP. I Structure  CAL I REP. I Report  Action / Instruction  CAL I REP. I Report  Action / Instruction  CAL I REP. I Report  Action / Instruction  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  CAL I REP. I Structure  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP	Policy No.				
Sum insured:    Steering: Inogder   Jammed   Leaked   Burnt or	Sum Nauros:  Excess:  (Client's Record)  Make of Veh:  Make of Veh:  Modi: NII I SIRIm I STD ARIM or  Tyre Size: F: 205/55RIP  Remark: The veh had commenced its repair at the time of Inspection.  Bail or Market Value:  Consistent?: Yes or No  GLA I PREP. I 24 HRS  CAL I REP. I 24 HRS  Date:  Person Contacted:  Vehicle: IN I OUT  Date / Time  Action / Instruction  Action / Instruction  CAL I REP. I 24 HRS  Date:  Person Contacted:  Vehicle: IN I OUT  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Structure  CAL I REP. I Structure  Action / Instruction  CAL I REP. I Structure  CAL I REP. I Structure  Action / Instruction  CAL I REP. I Structure  CAL I REP. I Report  Action / Instruction  CAL I REP. I Report  Action / Instruction  CAL I REP. I Report  Action / Instruction  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  CAL I REP. I Structure  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP. I Report  The UIC / Chassis frame / Body Structure affected due to collision.  CAL I REP	Claims No.		Gen Condi 2 7	ACR 50.	003269
Brake: Ingreder / Jammed / Leaked / Burnt or Modi: NII / SIRIM / STD A/RIM or Tyre Stze: F: 105/55/1/Rim repairs the time of inspection.  Bai. or Market Value: B 3 HC  IDAC Accident Root: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: Of days Res.: Yes or No Lum Sum: 20 % 3 Val.: Yes or No CA / REV / REP. / 24 HRS  120 Date: Time Action / Instruction  Date / Time Action / Instruction  CA / REV / REP. / 24 HRS  121  Date: Person Contacted: Vehicle: IN / OUT  Date: Person Contacted: Date / Time Action / Instruction  B / Province / Provin	Brake: Inpreser/ Jammed / Leaked / Burnt or Modi: NII / SRIm / STD ARRIM or Tyre Size: F: 205/55R/P  Remark: The veh had commenced its repair at the time of inspection.  Bal or Market Value: B 3 HC  IDAC Accident Rport: Consistent?: Yes or No  GIA / PR Seen: Consistent?: Yes or No  GIA / PR Seen: Consistent?: Yes or No  CA / REV / REP. / 24 HRS  Data: Person Confacted: IN / OUT  The UIC / Chassis frame / Body Structure affected due to collision.  C	Sum Insured: Excess:		200g/rail/p	oor / Burnt	
Modi: NII / SRIM / STD A/RIM or Tyre Size: F: 205/55/1/ Remark: The veh had commenced its repair at the time of inspection.  Bal. or Market Value: B 3 HC  IDAC Accident Rport: Consistent?: Yes or No GLA / PR Seen: Consistent?: Yes or No Lum Sum: 20 % 3 Val.: Yes or No CA / REV / REP. / 24 HRS  12 U  Date: Person Contacted: Vehicle: IN / OUT  Date: Person Contacted: Vehicle: IN / OUT  Date: Time: Action / instruction  6 / 8 Fix pers To Conkerve  I Alloha Confirmed Hs F. Suo / O + degree with keareth  RECEIVED / UUT 2018  Modi: NII / SRIM / STD A/RIM or Tyre Size: F: 205/55/1/  BS / DUN / EXNOVA / GY / FS / LiZA / MIC / OHTS U / PIR / SUMI / TOYO / YOKO or    Hank oak	Modi: NII / SRIM   STD ARIM or Tyre Size: F: 205/55R/P	(Client's Record)		Brake: Inches !	d/Leaked/Burnt or	_
Tyre Size: F:   225/55RIP	Pelicy Condition   Pemark: The veh had commenced its repair at the time of inspection.   NS Ors	Make of Veh:		Modi: Nil 1879	Leaked/Burnt or	
Remark: The veh had commenced its repair at the time of inspection.  Ball or Market Value:  Ball or Market Value:  Ball or Market Value:  DAC Accident Roort  Consistent?: Yes or No GIA / PR Soon:  Consistent?: Yes or No Consistent.: Yes or No Consistent.: Yes or No Consistent.: Yes or No Consist	Remark: The veh had commenced its repair at the time of inspection.  Bal, or Market Value: B 3 HC  IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Lum Sum: 20 % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Data: Person Contacted: Vehicle: IN / OUT  Data / Time Action / Instruction  Data / Time Action / Instruction  Data / Time Action / Instruction  C \$ A \ \$ 37 \ 7 \ 6 \			Modi: Nil / S/Rlm / STE	A/Rim or	
Bail or Market Value:  Consistent?: Yes or No  Consistent?: Yes or No  Consistent?: Yes or No  Bail or Market Value:  Consistent?: Yes or No  Bail or Market Value:  Bail or Market Val	Bal or Market Value: B 3 HC  Bal or Market Value: B 3 HC  Bal or Market Value: B 3 HC  DAC Accident Rport: Consistent?: Yes or No  GIA / PR Seen: Consistent?: Yes or No  CIA / PR Seen: Consistent?: Yes or No  CIA / PR Seen: Consistent?: Yes or No  CIA / REV / REP. / 24 HRS  Data: Person Contacted: Vehicle: IN / OUT  Person Contacted: Vehicle: IN / OUT  Data: Time Action / Instruction  C A / REV / REP. / 24 HRS  Data: Person Contacted: The UIC / Chassis frame / Body Structure affected due to collision.  Data: Time Action / Instruction  C A / REV / REP. / Contacted: The UIC / Chassis frame / Body Structure affected due to collision.  Data: Time Action / Instruction  C A / REV / REP. / 24 HRS  Description: The UIC / Chassis frame / Body Structure affected due to collision.  RECEIVED / OUT 2018  RECEIVED / OUT 2018  Add Fee: Site Insp (\$ ) Survey Fee: Inspection framework of the province of the provin	(Policy Condition)			115/55	RIP
repair at the time of Inspection.  Bail, or Market Value: \$3 HC  IDAC Accident Rport: Consistent? : Yes or No  GA / PR Seen: Consistent? : Yes or No  Est. Repairs: \$\int_{\text{days}} \text{Res} \text{days} \text{Res}. \text{ Yes or No}  Lum Sum: \$\int_{\text{C}} \text{ 3 Val.: Yes or No} \text{ No. } \text{ Survey held at } \text{ mm. } \text{ UBail } \text{ mm. } \text{ UBail } \text{ mm. } \text{ No. } \text{ Survey held at } \text{ The U/C / Chassis frame / Body Structure affected due to collision.} \text{ Date / Time } \text{ Action / Instruction } \text{ Consistent? : Yes or No. } \text{ Des. of Damages : Frt.   Rear   O/S   N/S   U/C   Reoftop or } \text{ Date / Time } \text{ Action / Instruction } \text{ The U/C / Chassis frame / Body Structure affected due to collision.} \text{ Date / Time } \text{ Action / Instruction } \text{ Action / Instruction } \text{ Constants} \text{ Prof. } \text{ Constants} \text{ Prof. } \text{ Constants} \text{ Action / Instruction } \text{ Constants} \text{ Prof. } \text{ Constants} \text{ Rear / O/S   N/S   U/C   Reoftop or } \text{ Prof. } \text{ Prof. } \text{ Prof. } \text{ Constants} \text{ Prof. } \tex	repair at the time of inspection.  Ball or Market Value: B 3 HC  IDAC Accident Rport: Consistent?: Yes or No  GIA / PR Soon: Consistent?: Yes or No  GIA / PR Soon: Consistent?: Yes or No  Lum Sum: 2 C % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date / Time Action / instruction  Date / Time Action / instruction  CA / REV / CA / REV / CA / REV / REP. / Contacted: No Contacted:	Remark: The veh had commenced its	N/S CVS			_
Date / Time Action / Instruction  C \$ 4. \$ 37.7 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Date of the Party to Part   Consistent? Yes or No   CA   REV   REP.   24 HRS   Des. of Damages: Frt   Rear   O/S   N/S   U/C   Rooftop or	repair at the time of inspection.	100	BS / DUN / EXNOVA / GY /	FS / LIZA / MIC / OHTSU /	PIR / SUMI /
IDAC Accident Roort: Consistent? : Yes or No GIA / PR Seen: Consistent? : Yes or No Est. Repairs: Of days Res.: Yes or No Lum Sum: 2C % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Person Contacted: IN / OUT  Date: Person Contacted: IN / OUT  Date: / Time Action / Instruction  Date / Time Action / Instruction  C \$ 4 , 5 37 . 7 6	IDAC Accident Rport  Consistent?: Yes or No  GIA / PR Seen:  Consistent?: Yes or No  Est. Repairs:  Of days Ress.: Yes or No  Lum Sum:  20 % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  Date:  Person Contacted:  Person Contacted:  Person Contacted:  The U/C / Chassis frame / Body Structure affected due to collision.  Date / Time Action / Instruction  Date / Time Action / Instruction  C f Reserved:  Reserved:  Person Contacted:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  Received:  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure affected due to collision.  The U/C / Chassis frame / Body Structure a	Bal. or Market Value: 8376				tankock
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Est. Repairs: Of days Res.: Yes or No  Lum Sum: 20 % 3 Val.: Yes or No  CA   REV   REP.   24 HRS   Vehicle: IN   OUT  Date: Person Contacted: Vehicle: IN   OUT  Date   Time   Action   Instruction   Action   Instruction   O.   Action   O.   Action   Instruction   O.   Action   Instruction   O.   Action   Instruction   O.   Action   O.   Action   Instruction   O.   Action   O.   Action   Instruction   O.   Action   O.	Est. Repairs: Of days Res.: Yes or No  Lum Sum: 20 % 3 Val.: Yes or No  CA   REV   REP.   24 HRS   Vehicle: IN   OUT  Date: Person Contacted: Vehicle: IN   OUT  Date   Time   Action   Instruction   Action   Instruction   The UIC   Chassis frame   Body Structure affected due to collision.    17   10   17   17   18   19   19   19   19   19   19   19	Approximation in the second se	V	m	m R/Ba!,	d mm
Lum Sum: 20 % 3 Val.: Yes or No  CA   REV   REP.   24 HRS  Date: Person Contacted: Vehicle: IN   OUT   Des. of Damages: Fit   Rear   O/S   N/S   U/C   Rooftop or    Date   Time   Action   Instruction   Action   Instruction   The U/C   Chassis frame   Body Structure affected due to collision.  6 / 8 Fit pers To Cartering  14   10   RECEIVED   7 UCT 2018  RECEIVED   7 UCT 2018  DOAD 1   10   10   10   10   10   10   10	Lum Sum: 20 % 3 Val.: Yes or No  CA   REV   REP.   24 HRS   Person Contacted:  Date: Person Contacted:  Date: Time   Action   Instruction   Action   Instruction      Action   Instruction   Action   Instruction	545		0 m	m L/Bal.	P
Date: Person Contacted: Vehicle: IN / OUT  Date: Person Contacted: Vehicle: IN / OUT  Date: Time   Action / Instruction   Action / Instruction   Action / Instruction   The U/C / Chassis frame / Body Structure affected due to collision.    1   10   12   Canfirmed   Action / Instruction   Action / I	CA   REV   REP.   24 HRS   121   Person Contacted:  Date   Time   Action   Instruction		(00 or No	- 1110	0.0.1	19/18
Date / Time   Action / Instruction   The U/C / Chassis frame / Body Structure affected due to collision.    Action / Instruction   Action / Instruction	Date / Time Action / Instruction    Action / Instruction	1111	Į i	Des. of Damages : Ert / Page	/ O/S / N/S / U/C / Ro	poftop or
The pass to Carkened   Sks. 500   - @ # days with knowth   C # 4, 5 37 .7 6   Red - 45 % )	Add Fee: Site Insp (\$ ) Service   Standard	. craon comacted:				
Technology   September   Site   Sit	Thiolize   Confirmed   Als & s. soo/- @ + days with knowth   Confirmed   February	7	,	oro / Chassis frame	/ Body Structure affects	ed due to collision.
RECEIVED 17 OCT 2018    Received 17 OCT 2018	RECEIVED 17 DCT 2018  RECEIVED 17 DCT 2018  Days Of Repair: 7  Resurvey No. of Trip: 2 Survey Fee: 1  Transportation: 200  Add Fee: Site Insp (\$ ) 5 - RS St 10  port Format: 1 Tech Invs (\$ ) Fixos  Tech Invs (\$ ) Others  Weekend (\$ )  Weekend (\$ )	of the pass to Ca	thenke			
Add Fee: Site Insp (\$ ) SHOTS   Short	te/Time, File Pass to?    14/10/12   : Prell. Report   Days Of Repair:   7   Tup Sty     : Final Report   Resurvey No. of Trip:   2     Survey Fee:	17/10/18 Confirmed 2/5 \$ C\$4,537.76 R	1.500/- Q d - 45%)	+ days with 1	Seareth (	met
Days Of Repair: 7    Trus   Final Report   Days Of Repair: 7   Resurvey No. of Trip: 2   Survey Fee:	Days Of Repair: 7  Typist : Final Report		RECEIVED 1	7 001 2018		tho boil.
Resurvey No. of Trip: 2 Survey Fee:    Add Fee: : Site Insp (\$ ) _ \$ + RS _ \$I   10	Add Fee: Site Insp (\$ ) _ \$ -RS_SI   [0]  port Format : Tech Invs (\$ ) Others  Weekend (\$ )  Weekend (\$ )	17/10/13 Prell. Report	Day	Of Repair:		
Add Fee: :Site Insp (\$ ) _ \$ - RS _ SI 10  port Format :	Add Fee: : Site Insp (\$ ) _ \$ - RS _ SI	to/Time, Fig. Return 107			Survey Fee:	
port Format : : Interview (\$ ) Fixes  mp Sum / I.B.I: (\$ C = / 1/c : Tech Invs (\$ ): Others	Interview (\$ ) Fixes   Tech Invs (\$ ) Others   Weekend (\$ )		Add Fee:	: Site Insp (\$		
mp Sum / I.B.I: (S to / // Tech Invs (\$ ) Others	mp Sum / I.B.I: (S 5,500/- Hs ) Tech Invs (\$ ) Others  Weekend (\$ )	nort Format .		: Interview (\$	I	
mp Sum / 1.8.1: (5 t = / // c = / // c = / // c = / // c =	Weekend (S )			Tech Invs (\$		
		mp sum / 1.8.1: (5 5,500/- Hs	1	F	/ Oriens	



## 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

	FIRE PUBLISHED AND	Affiliated to Federation Internation		THE RESERVE THE PARTY OF THE PA
MSI	G INSURANCE (SI	NGAPORE) PTE LTD	Ref: CS/MSG18016	146/Ksb
	AFFLES QUAY 01 HONG LEONG	BLDG SINGAPORE 048581	Date: 04-09-2018 Code: MSG	
1.		Policy Particulars	:- THIRD PARTY CLAI	M
	Insured Veh.	YP 9103Y	Veh. Inspected	SKW 5225J
	Policy No.	A29090742MKC	Coverage (\$)	0.00
	Claim No.	569191	Excess (\$)	0.00
	Assign From	MERIMEN (KATHERINE WONG)	Assign Date	04/09/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	9	Steering	
	Brakes		Modification	
	General			
3.		Condit	ions 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.		Descripti	ion of Damages	
44707				
5.	amaine to		al Information	
	Accident Date	02/09/2018	Inspection Date	04/09/2018
	Survey held at	CHENG HOE MOTOR PL	BIBLES WEST TOTAL	
		38 WOODLANDS INDUSTRIAL SINGAPORE 757700	. PARK E1 #05-04/05	
5a.		R	Remarks	

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

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park Singapore 408933 Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Attn:

Katherine Wong Chew Shong

Date: 06 Sep 2018

## Preliminary Advice

Insured Vehicle No : YP9103Y

TP Vehicle No

: SKW5225J

Accident Date

: 02/09/2018

Make

: TOYOTA ESTIMA

Assignment Date

: 04/09/2018

Date of Inspection : 05/09/2018

Est. Duration of Repair

: 6-7 days

Inspection At

: Cheng Hoe Motor Pte Ltd (Woodlands)

38 Woodlands Industrial Park E1, #05-04/05

Singapore 757700

### Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	9,727.65
Revised Amount	:S\$	5,286.06
Check Items (Estimated)	:S\$	4,007.17
Total	:S\$	9,293.23

:S\$ Lump Sum Repair

#### **Total Loss Consideration**

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

#### Remarks

( )	The vehicle	is economical/no	t economica	for repa	ur,
-----	-------------	------------------	-------------	----------	-----

( X ) The above survey was conducted on a 'without prejudice' basis.

# ...CLAIM SUBFOLDER...(New Assignment)

Case	Notified	Est Submitte	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	03 Sep 2018		04 Sep 2018 15:55 Assign				New Assignm Cancel Case	C19400011
	Main		Reference	CI	aim Details	Doc	uments	Show All
CLAIM S	UBFOLDER DE	TAILS	The Roll Woman St. Co.	Marie Control of the	CONTRACTOR OF THE PARTY OF THE	1	Created by ins	surer1
Insured:		B-N	ech Engineering P	te Ltd, Co. Re	g. No.: 199907733			
Main Clair	mant:	СН	JA YONG BOON JU	STIN, ID: 58	215554F			
Vehicle Ro	eg. No.:	sk	W52253	D	ate of Loss:	1	02/09/2018 17:0 134 Months and Reg Date (Man Yr	4 Days From LTA
Claim Typ	e:	TP	/ 569191	P	olicy/Cover Note No	).: C	129090742MKC ( Coverage: 01/08, 11/07/2019	Comprehensive) /2018 -
Vehicle Re	eg. No. (Insured)	YPS	103Y	Pi	olicy No. (Claimant)		2,01,2022	
					ccess:			
Repairer:		Che Tel:	ng Hoe Motor Pte 6765 6142	Ltd (Woodland	is) 38 Woodlands I	ndustrial Park E1,	#05-04/05, 757	700 Woodlands -
Handling ]	insurer:	MS: Sho	G Insurance (Sing ng - 6594 2544)	apore) Pte. Lt	d. (HQ) - Tel: +65	6827 7888 [Ha	ndled by Kather	rine Wong Chew
Adjuster:		LKK	<b>Auto Consultants</b>	Pte Ltd (HQ)	Tel: 6256-3561	[Imm.Advice	due 05/09/20	181
	stodian (Insured)	: SUB	RAMANIAN NALLAIY	A @ SURENDRA	N (32 / Male), NF	RIC: G6522077L		
Adj Asg. R	temarks;	SJE	AGREE LKK - Kennet	th Kong. Pls con	tact June Phua @ 6	7556142. Liability	100%	
ASSOCIA	TED MAIL REC	EIVED				Vie	ew All   Com	npose Case Mail
There are	no mail for this c	ase.						proc code rial
8								
ALL ASS	OCIATED TASK	s			View All	Search Tasks	Create New Tas	k   Complete
Due Da	te Priority	Type Tas	k Group Subje	ct Handler	Assigned By	Completed	On Create	

SKW YYYY

# , > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle	
V. Lista Company Destinations	

Vehicle Owner Particulars		71/MS16
Owner ID Type:	Singapore NRIC	11/11/10/10/1
Owner ID:	5554F	
Vehicle Details		
Vehicle No.:	SKW5225J	
Vehicle to be Exported:	No	
Intended Deregistration Date:	03 Sep 2018	
Vehicle Make:	TOYOTA	
Vehicle Model:	ESTIMA 2.4 A	
Primary Colour:	White	
Manufacturing Year:	2007	
Engine No.:	2AZF017706	
Chassis No.:	ACR500032698	
Maximum Power Output:	125.0 kW (167 bhp)	
Open Market Value:	\$26,784.00	
Original Registration Date:	29 Jun 2007	
First Registration Date:	29 Jun 2007	
Transfer Count:	4	
Actual ARF Paid:	\$29,463.00	
Intended PARF Rebate Details		
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:	4	
PARF Rebate Amount:	\$0.00	
Intended COE Rebate Details		
COE Expiry Date:	28 Jun 2022	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	5	
PQP Paid:	\$27,044.00	
COE Rebate Amount:	\$20,658.00	
Total Rebate Amount: Message	\$20,658.00	

upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier. The information contained herein is correct as at 03 Sep 2018

OK

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered

# Enquire Vehicle & Owner Information (Vehicle No. YP9103Y As At 02 Sep 2018 / 18:10:00)

Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

CHM-SKW5225

**Current Owner Details** 

Owner ID Type:

Company

Owner ID:

199907733D

Owner Name:

**B-MECH ENGINEERING PTE LTD** 

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.:50

Registered Street Name:

**TUAS AVENUE 11** 

Registered Unit No.:

#02-01

Registered Building Name: TUAS LOT Registered Postal Code:

639107

Current Vehicle Details

Vehicle No.:

YP9103Y

Make Description/Model:

ISUZU / NPR85UH5A 3.0 MT

Insurance Company Name: MSIG INSURANCE (SINGAPORE) PTE LTD

#### 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 witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the 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.

	ACCIDENT STATEMENT
Date Of Report	03/09/2018 12:45
Date Of Accident	02/09/2018 18:10
Exact Location Of Accident	CHINESE GARDEN TEMPORARY CARPARK
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKW5225J
Insured/Policyholder	
Name Of Registered Owner	CHUA YONG BOON, JUSTIN
NRIC No	S8215554F
Email Address	THEANGRYDYNAMO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97398079
Alternative Phone No	OTHERS-97398079
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ESTIMA 2.4A
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	16/11/17 - 15/11/18
Cover Note Number	DMPCSN3088481700
Driver	
Name of Driver	CHUA YONG BOON, JUSTIN
NRIC No	S8215554F
Date Of Birth	19/05/1982
Occupation	INDOOR
Date Of Driving Pass	10/04/2003

10/04/2003 Date Of Driving Pass

15 YEARS AND 4 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-97398079 Mobile Number

Fax Number

OTHERS-97398079 Contact Number

THEANGRYDYNAMO@GMAIL.COM EMail Address

Address

BLK 211 CHOA CHU KANG CENTRAL #08-124

Postcode

680211

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

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

NO

ambulance? Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

0

**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 park my car at the temporary carpark of Chinese Garden at about 5.30pm and went for my walk with family. When I came back about 6.30pm, I notice that my right side of the car is badly crashed. The right side (driver side) and the headlight is shattered into many pieces. The front bonnet is also slightly damaged. The Toyota Logo is on the floor. My family members were with me at 6.30pm. I saw a note and a namecard and the note said he saw someone hit my car and ran off. I called the person and he give me details of the foreign worker. Foreign worker send me his details and admitted he was the driver. I recorded down the conversation as he admitted to it via whatsapp.

### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO NO

Was there any audio recorded?

Name

AH CHAI

Phone Number

**Details of Witness 1** 

82632225

Email Address

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YP9103Y

Vehicle Make/Model/Colour

**Details Of Properties** 

COMMERCIAL VEHICLE

Vehicle Category

SUBRAMANIAN NALLAIYA ALSOKNOWNAS SURENDRAN

Name of Driver

NRIC/Passport Number

G6522077L

Contact Number Address

82847914

Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

#### Sketch Plan

SKETCH PLAN

VEHICLE NO .: SKW 5225 J

INSURER : CF
DATE & TIME: 2/9

219/18 6-10 P.M

### IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- By the lodgment 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:

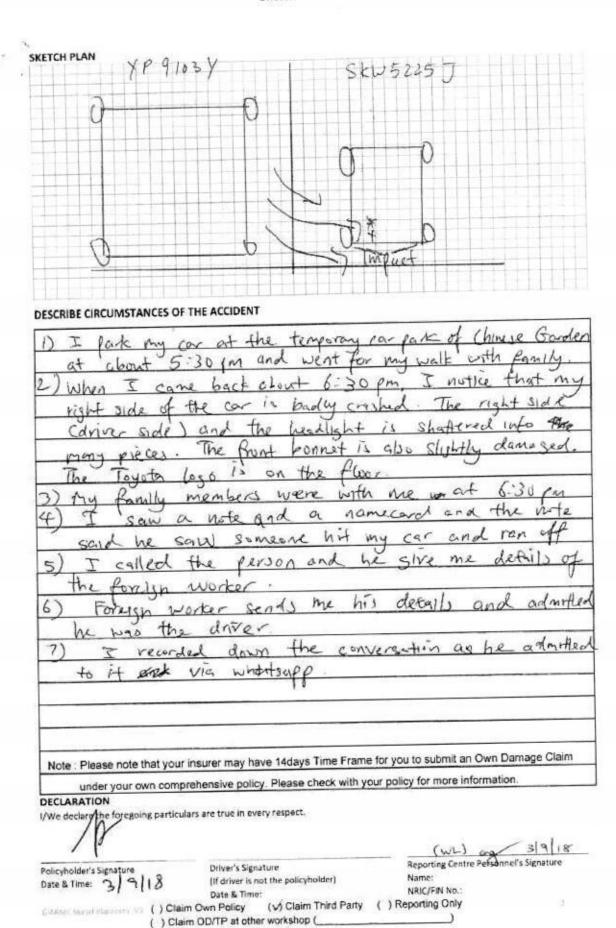
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
  - 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 claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (c) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

3/1/18

Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:



I see People crashing into your car, Please call me for more details. My number

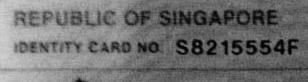
@2632225

# **Fixmate Auto Pte Ltd**

Ah Chai 8263 2225 9372 7000 Ah Loon 9049 1522

8 Kaki Bukit Ave 4 #02-37 Premier © Keki Bukit Singapore 415875 Email: sales@fixmateauto.com









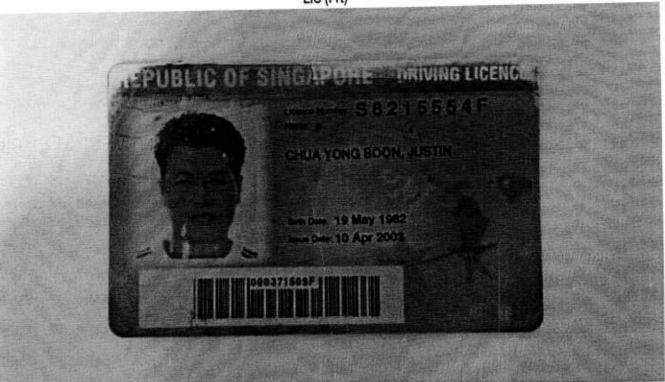
CHUA YONG BOON, JUSTIN

蔡永文 Ruce CHINESE

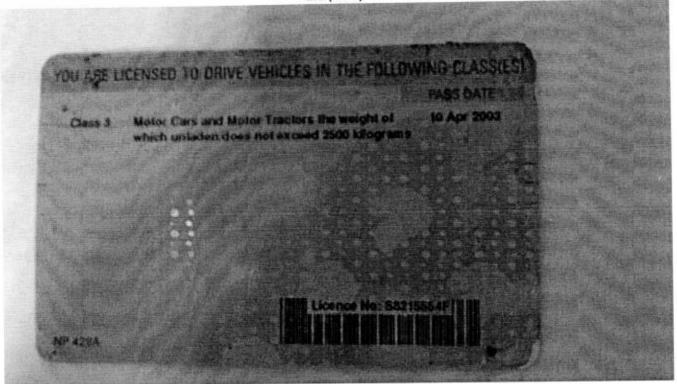
19-05-1982 Country of Sirth SINGAPORE



LIC (Frt)



## LIC (Back)



# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg GST:201001158E RCB NO:201001158E

MSIG INSURANCE (S) PTE LTD (SGX) M/S:

16 RAFFLES QUAY

#24-01 HONG LEONG BUILDING

SINGAPORE 048581

68277660 TEL:

FAX: 62257402

ATTN: Motor Claim Department

WS Ref: Claim Type: TP/MSIG/WL Third Party

Accident Date: TP Veh Reg No: 02/09/2018

YP9103Y

Not Northanisa

CIFIN 8 ? Renny Afre Pains

Estimate No:

Date:

ES1891019/WL

04 Sep 2018

Policy No:

DMPCSN3088481700

Veh Reg No:

SKW5225J

Make/Model:

TOYOTA ESTIMA 2.4 A

Chassis No:

ACR500032698

Engine No: Reg. Date:

6-7day

2AZF017706 29/06/2007

Estimate Repair Cost to Vehicle No :SKW5225J

Descr	iption	U/Price	Quantity	List Price	Amount
Descr	· puo			<u>S\$</u>	SS
List P	rice			By 55168	
1 FRON	T BUMPER	551.68	1 PC	331.00	
	T BUMPER RH SIDE RETAINER	82.80	1 PC	Ory 82.80	
	T BUMPER TOP BEAM	133.49	1 PC	R 133.49	1
	T BUMPER REINFORCEMENT	388.98	1 PC	388.98	-
	IT BUMPER RH INNER SPONGE	38.90	1 PC	Si 38.90	CONTROL COLUMN
	IT BUMPER CENTRE SPONGE	99.10	1 PC	CM 99.10	~
	T BUMPER RH FOG LAMP	248.20	1 PC	Br 248.20	7
8 FRON	T BUMPER RH FOG LAMP GARNISH	99.54	1 PC	Mcm 99.54	2
	T BUMPER CENTRE LOWER GRILLE	121.85	1 PC	121.85	X
	T BUMPER CENTRE UNDER LOWER COVER	129.81	1 PC	CM 129.81	_
	T BUMPER CENTRE UNDER LOWER COVER CLIPS	3.50	6 PCS	m 21.00	_
12 BONN		599.30	1 PC	By 599.30	
	NET INNER LOCK	95.80	1 PC	2 95.80	*
	NET HINGES	55.50	2 PCS	B-17012 111.00	_
	NET SPONGE REL	m 226.07	1 PC	226.07	2
- "하게 네 (S. S. S	NET SPONGE CLIPS	3.50	6 PCS	May 21.00	
	NET INNER RUBBER	45.90	1 PC	45.90	×
	NT RH FENDER	654.88	1 PC	By 654.88	-
	NT RH FENDER INNER SHIELD	253.83	1 PC	CM 253.83	7
	NT RH FENDER INNER SHIELD CLIPS	3.50	6 PCS	May 21.00	7
	DLAMP RH	896.40	1 PC	Br 896,40	
	DLAMP RH CLIP	17.60	1 PC	Ma 17.60	_
-	DLAMP PANEL	255.10	1 PC	Bu 255.10	_
	DLAMP LH	896.40	1 PC	mjem 896.40	_
	NT TOP PANEL	262.90	1 PC	Bu 262.90	1
	NT WIPER GARNISH RH EXTENSION	55.30	1 PC	MIY 55.30	_
	NT TOP PANEL GARNISH	281.00		CPA 281.00	_
	NT TOP PANEL GANRISH CLIPS	3.50		Na 14.00	_
	CON CONDENSER	1,405.30		5~ 1,405.30	
	IATOR	1,947.93		ام 1,947.93	
		74.14		cm 74.14	
31 RAD	IATOR TOP GARNISH			10,050.20	
			Less 25%	2,512.55	

# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg GST:201001158E RCB NO:201001158E

MSIG INSURANCE (S) PTE LTD (SGX) M/S:

16 RAFFLES QUAY

#24-01 HONG LEONG BUILDING

SINGAPORE 048581

TEL:

68277660

FAX: 62257402

ATTN: Motor Claim Department WS Ref:

TP/MSIG/WL

Claim Type: Accident Date: Third Party 02/09/2018

TP Veh Reg No:

YP9103Y

Estimate No:

ES1891019/WL

Date:

04 Sep 2018

Policy No:

DMPCSN3088481700

Veh Reg No:

SKW5225J

Make/Model:

TOYOTA ESTIMA 2.4 A

Chassis No:

ACR500032698

Engine No:

2AZF017706

Reg. Date:

29/06/2007

Estimate Repair Cost to Vehicle No :SKW5225J

	Description	U/Price	Quantity	List Price	Amount
	Description			<u>S\$</u>	<u>SS</u>
32	Labour REMOVE AND REFIX AIRCON, CHECK, VACUUM & REFILL	100.00	1 LA	100.00	~
33	GAS REMOVE & REFIX FRT BUMPER ASSY, HEADLAMPS, GRILLE, FRT FENDERS, BONNET &	1,000.00	1 LA	1,000.00	7001
34	ATTACHMENT, RADIATOR & MOTOR, STRAIGHTEN, KNOCK & REPAIR FRT CHASSIS, FRT RH FENDER INNER PANEL, RENIEW FRT SUPPORT PANEL & REALIGN THE SAME PUTTY & RESPRAY ON FRT RH FENDER INNER	1,000.00	1 LA	1,000.00	God
35	PANEL,BONNET,FRT SUPPORT PANEL,FRT BUMPER,REINFORCEMENT & ALL AFFECTED AREAS(PEARL WHITE) RUSTPROOFING	90.00	1 LA	90.00	~
. 55	ROSTROSTANG	13	190	2,190.00	2,190.00
			7.00	Total	S\$ 9,727.65
			Add GS	ST @ 7%	680.94

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:

For Cheng Hoe Motor Pte Ltd

Total Amount Payable

AUTHORISED SIGNATURE

10,037.76

S\$ 10,408.59

# Cheng Hoe Motor Pte Ltd

SKW SONSJ

M/S: MSIG INSURANCE (S) PTE LTD (SGX)

16 RAFFLES QUAY

#24-01 HONG LEONG BUILDING

SINGAPORE 048581

TEL: 68277660

FAX: 62257402

ATTN: Motor Claim Department

WS Ref: Claim Type: TP/MSIG/WL Third Party

Accident Date:

02/09/2018

TP Veh Reg No:

YP9103Y

Estimate No:

ES1891019/WL

Date:

07 Sep 2018

Policy No:

DMPCSN3088481700

Veh Reg No:

SKW5225J

Make/Model:

TOYOTA ESTIMA 2.4 A

Chassis No:

ACR500032698

Engine No:

2AZF017706

Reg. Date:

29/06/2007

Estimate Repair Cost to Vehicle No :SKW5225J

Description	U/Price	Quantity List P		st Price	Amount
Description				<u>S\$</u>	SS
	Supplementary 1				
List Price		mg			
1 FRONT GRILLE	413.48	1 PC	cm	413.48	
1 TROM ORDER				413.48	
		Less 25%		103.37	310.11
			Tota	al	S\$ 310.11
		G	GST Amount		S\$ 21.71
		Total Amo	unt Payab	le	S\$ 331.82

For Cheng Hoe Motor Pte Ltd

AUTHORISED SIGNATURE

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

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

Singapore 408933

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

## VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/MSG18016146/KSBN2

Date:

19/10/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

A29090742MKC

Claimant Vehicle No :

SKW5225J

Insured Vehicle No: YP9103Y

9103Y

Date of Loss:

02/09/2018

Nature of Claim:

TP Claim No: 569191

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

SKW5225J

Make & Model:

TOYOTA ESTIMA, 2.4 (A) 29/06/2007 (Man. Year: 2007)

Engine No: Chassis No: 2AZF017706 ACR500032698

Reg. Date: Colour:

Metallic Pearl White

Odometer:

124543 km

Engine Capacity:

Market Value/New Car

N/A

2362 cc

Price: Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

225/55R18

Rear Tyre Size:

225/55R18

Front Left Side:

Hankook 8 mm

Rear Left Side: Rear Right Side: Hankook 8 mm Hankook 8 mm

Front Right Side: Hankook 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	7,847.76	5,106.00	2,741.76	34.94
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,190.00	1,790.00	400.00	18.26
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	10,037.76	6,896.00	3,141.76	31.30
Approved Total (Overridden) (S\$)		5,500.00		
(S\$)	10,037.76	5,500.00	4,537.76	45.21
+ GST 7.00/7.00% (S\$)	702.64	385.00	317.64	45.21
Nett Amount (S\$)	10,740.40	5,885.00	4,855.40	45.21

INSPECTION

Date of Assignment:

04/09/2018

Date Inspected:

05/09/2018 Inspected At:

BLK 1019 YISHUN IND. PARK A

#01-374/382

SINGAPORE 768761

REPAIRER: CHENG HOE MOTOR

PTE LTD

Estimated Period of Repair:

7.0 days

Adjuster: KENNETH KONG

Manager: Hiew May Fung

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

## REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 19 Oct 2018)

Parts:

M1-MPV

TOYOTA ESTIMA 2.4 (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SKW5225J)

Validity:

These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk \*.

Recommended Parts

No.	o. Qty Part		Part Particulars Co		Repairer's	Amount
4	1		*FRONT BUMPER	Bent		*551.68 FL
1	1		*FRONT BUMPER RH SIDE RETAINER	Distorted	82.80 FL	*82.80 FL
3	1		*FRONT BUMPER TOP BEAM	Bent		*133.49 FL
4	1		*FRONT BUMPER REINFORCEMENT	Bent		*388.98 FL
5	1		*FRONT BUMPER RH INNER SPONGE	Serviceable	38.90 FL	*- FL
6	1		*FRONT BUMPER CENTRE SPONGE	Cracked	99.10 FL	
7	1		*FRONT BUMPER RH FOG LAMP	Broken		*248.20 FL
8	1		*FRONT BUMPER RH FOG LAMP GARNISH	Mtg Cracked	99.54 FL	
			*FRONT BUMPER CENTRE LOWER GRILLE	Serviceable	121.85 FL	
9	1		*FRONT BUMPER CENTRE UNDER LOWER COVER	Cracked	129.81 FL	*129.81 FL
10 11	6		*FRONT BUMPER CENTRE UNDER LOWER COVER	Necessary	21.00 FL	*21.00 FL
	25		CLIPS	Bent	599.30 FL	*599.30 FL
12	1		*BONNET	Repair	95.80 FL	*-FL
13	1		*BONNET INNER LOCK *BONNET HINGES	Bent/Distorte	d 111.00 FL	*111.00 FL
14	2			Deformed		*226.07 FL
15	1		*BONNET SPONGE CLIPS	Necessary	21.00 FL	
16	6		*BONNET SPONGE CLIPS *BONNET INNER RUBBER	Serviceable	45.90 FL	*- FL
17	1			Bent	654.88 FL	*654.88 FL
18	1		*FRONT RH FENDER *FRONT RH FENDER INNER SHIELD	Cracked		*253.83 FL
19	1		*FRONT RH FENDER INNER SHIELD *FRONT RH FENDER INNER SHIELD CLIPS	Necessary	21.00 FL	
20	6			Broken		*896.40 FL
21	1		*HEADLAMP RH	Necessary	17.60 FL	
22	1		*HEADLAMP RH CLIP	Buckled		*255.10 FL
23	1		*HEADLAMP PANEL	Mtg Cracked		*896.40 FL
24	1		*HEADLAMP LH	Buckled		*262.90 FL
25	1		*FRONT TOP PANEL	Missing	55.30 FI	
26	1		*FRONT WIPER GARNISH RH EXTENSION	Cracked		*281.00 FL
27	1		*FRONT TOP PANEL GARNISH	Necessary	14.00 FI	
28	4		*FRONT TOP PANEL GARNISH CLIPS	Serviceable	1,405.30 FI	
29	1		*AIR-CON CONDENSER		1,947.93 F	
30	1		*RADIATOR	Serviceable	74.14F	
31	1		*RADIATOR TOP GARNISH	Cracked		L *413.48 Fl
32	1		*FRONT GRILLE	Mtg Cracked	413.40	L 413.4011

Sub Total (S\$) 10,463.68 6,808.00

- List Item Discount on L Items 25.00/25.00% (S\$) 2,615.92 1,702.00

Total Parts (S\$) 7,847.76

5,106.00

Report was unsubmitted during this print-out.

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended	Labour
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Red	commended Labour	Lab.Type	Repairer's	Amount
No	Particulars	Lab. Type	Nopular C	1000101000000
Labo	our Items	(A. A	100.00	100.00
1	REMOVE AND REFIX AIRCON, CHECK, VACUUM & REFILL	New	100.00	100.00
2	REMOVE & REFIX FRT BUMPER ASSY, HEADLAMPS, GRILLE, FRT FENDERS, BONNET & ATTACHMENT, RADIATOR & MOTOR, STRAIGHTEN, KNOCK & REPAIR FRT CHASSIS, FRT RH FENDER INNER PANEL, RENEW FRT SUPPORT PANEL & REALIGN THE SAME	New	1,000.00	700.00
3	PUTTY & RESPRAY ON FRT RH FENDER, INNER PANEL, BONNET, FRT SUPPORT PANEL, FRT BUMPER, REINFORCEMENT & ALL AFFECTED AREAS (PEARL WHITE)	New	1,000.00	900.00
4	RUSTPROOFING	New	90.00	90.00
	Gross Labou	r Cost (S\$)	2,190.00	1,790.00
	Report was unsubmitted during	ng this print-out.		

< END OF ESTIMATES >