

ASS. REC. BY:

REF:

CS3/CTI/8016207/ Gcd3

Special Instruction:

Surveyor
men men

Guo Qianen

ASSIGNMENT (Office)

From (Person):

Chang Baosen

of

C7I

Date/Time:

5/9/18 2.44pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: _____

SGN 4958Y

Insured:

GU1518P

at Workshop m/s

JK Auto Service

Tel:

9188 5495

of

Blk 3006 Ubi Rd 1 # 01-346

Policy No:

DMCVSN 3004001802

Claim No:

SNM18D04295C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

03/09/2018

CA / REV / REP. / REV 24 HRS

1 up2

619118

H.O.D. Endorsement:

Date/Time:

3:43 pm 05/09/18

Person Contacted:

Ah tay

Vehicle IN/OUT

Date/Time	Action/Instruction (x) Estimate
	SGN 4958Y - X
	GU 1518p - x.

(08/11/13) wef
ASS. REC. BY:

PRS
Xml

REF: CT1

ASSIGNMENT

(-2026)

From: _____ Date: 6/9/18
Estimated Cost: _____
Of: ☒ TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SGN 4958Y
at Workshop m/s: JL Auto Service
of: BIK 3006 Ubi Rd 1 # 01-346
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: \$50K
IDAC Accident Rpt: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: 4 days Res.: Yes or No
Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS up

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGN 4958D Yr Regn: 20 Nov 2006
Type: ☒ M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Toyota Camry c.c 2362
Colour: Silver A/C: Insured / Std / NI / NA
Sp. Reading: 191744 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: ACU403054825
Gen. Cond: Good / Fair / Poor / Burnt
Steering: ☒ In order / Jammed / Leaked / Burnt or
Brake: ☒ In order / Jammed / Leaked / Burnt or
Modi: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 25/60 R16
R: N

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

Front Rear
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. _____ D.O.I. 06-09-18
Survey held at WS 1:30pm
Des. of Damages: ☒ Frt Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
	\$3acc - \$4000

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

Report Format: PRE

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

Days Of Repair: 4

Resurvey No. of Trip: -

Add Fee:

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

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

150

150

**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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CS3/CTI18016207/Gcd3

3 ANSON ROAD #16-00
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 05-09-2018



Code : CTI

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	GU 1518P	Veh. Inspected	SGN 4958Y
Policy No.	DMCVSN3004001802	Coverage (\$)	0.00
Claim No.	SNM18D04295C02	Excess (\$)	0.00
Assign From	MERIMEN (CHONG BOON SEN)	Assign Date	05/09/2018

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	03/09/2018	Inspection Date	06/09/2018
Survey held at	JL AUTO-BLK 3006 UBI ROAD 1 #01-346		
Repairer	-		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
 B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
 THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
 C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	05 Sep 2018		05 Sep 2018 14:44 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	CHAI CHEE HONG		
Vehicle Reg. No.:	SGN4958Y	Date of Loss:	03/09/2018 00:00 - :59
Claim Type:	TP / SNM18D04295C02	Policy/Cover Note No.:	DMCVSN3004001802
Vehicle Reg. No. (Insured):	GU1581P	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	JI Auto Services Pte Ltd (HQ) Blk 3006 UBI ROAD 1 #01-346, 408700 Ubi - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 14/09/2018]		

ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									



883 North Bridge Road
#19-05 Southbank
Singapore 188785
T: 6292 5838
F: 6292 5938
(UEN No. 201333127N)
(GST Reg No. 201333127N)

Our Ref : CY.SGN4958D.18.JLA(HW).wp(Lh)

Your Ref : Your insured vehicle GU 1581P

05 September 2018

J-KHO ENGINEERING P L

c/o The Motor Claims Department
China Taiping Insurance (Singapore) Pte Ltd
105 Cecil Street
#20-00 The Octagon
Singapore 069534

BY FAX (6224 7478) ONLY

Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PRE-ACTION PROTOCOL FOR NON INJURY MOTOR ACCIDENT CASES ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES SGN 4958D & GU 1581P ON 03.09.2018 @ 15:40HRS ALONG ANG MO KIO INDUSTRIAL PARK 2

We are instructed by CHAI CHEE HONG to notify you of a road traffic accident on 03.09.2018 @ 15:40hrs along Ang Mo Kio Industrial Park 2 involving our client's customer's vehicle registration number SGN 4958D and vehicle registration number GU 1581P driven by you at the material time. A copy of the Singapore accident statement report is enclosed.

As the result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully,


C. Yogarajah LLC
Enc

Cc: M/s JL Auto Service Pte Ltd
Block 3006 Ubi Road 1
#01 - 346
Mr. Ah Tay (9188 5495)
Fax no : 6310 7269

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

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	3672Z
Vehicle Details	
Vehicle No.:	SGN4958D
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Sep 2018
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY 2.4 A
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	2AZC085293
Chassis No.:	ACV403054825
Maximum Power Output:	123.0 kW (164 bhp)
Open Market Value:	\$28,766.00
Original Registration Date:	20 Nov 2006
First Registration Date:	20 Nov 2006
Transfer Count:	3
Actual ARF Paid:	\$31,643.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	19 Nov 2026
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$56,053.00
COE Rebate Amount:	\$45,979.00
Total Rebate Amount:	\$45,979.00

The information contained herein is correct as at 06 Sep 2018

OK

MPA218114763 / Progressive Car Care Pte Ltd - HQ
 ENTRY DATE & TIME: 04/09/2018 16:33
 SUBMITTED BY: Ng Pei Wen

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 04/09/2018 16:33
 Date Of Accident 03/09/2018 15:40
 Exact Location Of Accident ANG MO KIO INDUSTRIAL PARK 2
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGN4958D
Insured/Policyholder
 Name Of Registered Owner CHAI CHEE HONG
 NRIC No S7183672Z
 Email Address RICHTECH.CHA1@YAHOO.COM
 Mobile Phone No (LOCAL) +65-90256083
 Alternative Phone No OTHERS-90256083

Vehicle Particulars

Manufacturer TOYOTA
 Model CAMRY-2.4 (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 AXA INSURANCE PTE LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number GA281582/1

Cover Note Number

Driver

Name of Driver CHAI CHEE HONG
 NRIC No S7183672Z
 Date Of Birth 16/07/1971
 Occupation INDOOR
 Date Of Driving Pass 10/11/1997
 Driving Experience 20 YEARS AND 9 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-90256083
 Fax Number
 Contact Number OTHERS-90256083
 EMail Address RICHTECH.CHA1@YAHOO.COM

Address BLK 154 ANG MO KIO AVENUE 5 #08-3118
SINGAPORE
Postcode 560154
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 -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
Number of vehicles involved in the accident 2
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) 1

Details of Police Action

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

Circumstances of Accident

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE AUTOMOTIVE PTE LTD TEL 6741 5336

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GU1581P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the 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:
 - (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 claims 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, 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: 4/9/18
3:50pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

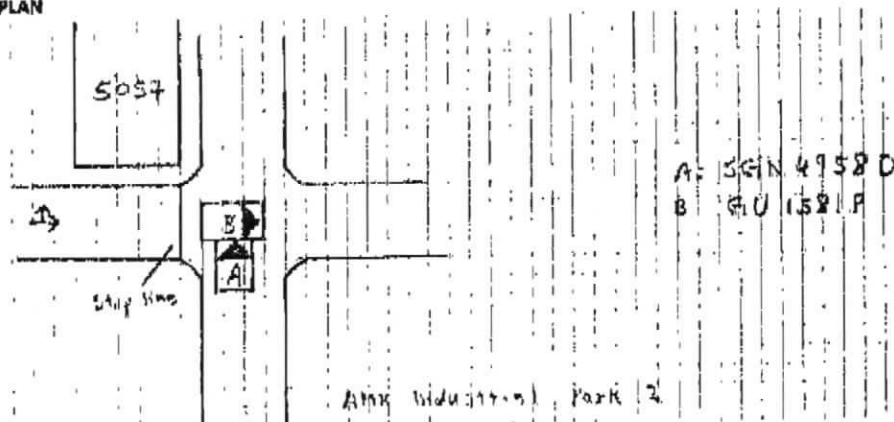
Reporting Centre Personnel's Signature

Name:
NIC/TIN No.:

PRIVEM

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I am Chai Che Hong, I driving along the Road when reaching JCT-Junction, Suddenly a Truck did not stop and crossed the road, supposed the truck have to stopped. I am unable to stop and crashed the truck (GU 1581P).

Time/Date 3/9/18 3.28pm.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

1/9/18 3:50pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

PERWEN

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	05 Sep 2018		05 Sep 2018 14:44 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	-, Co. Reg. No.: -								
Main Claimant:	CHAI CHEE HONG								
Vehicle Reg. No.:	SGN4958Y	Date of Loss:	03/09/2018 00:00 - :59 [141 Months and 14 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D04295C02	Policy/Cover Note No.:	DMCVSN3004001802						
Vehicle Reg. No. (Insured):	GU1581P	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	Jl Auto Services Pte Ltd (HQ) Blk 3006 UBI ROAD 1 #01-346, 408700 Ubi - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 14/09/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

***SGN4958Y (SNM18D04295C02)**
[GU1581P]
TP
CHAI CHEE HONG
Sep 3 2018 12:00AM
[-]
JI Auto Services Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
2	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
3	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
4	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
5	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
6	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
7	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
8	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
9	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
10	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
11	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
12	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
13	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
14	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
15	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
16	06/09/18 18:53	General View	Load JPG	<input checked="" type="checkbox"/>
17	06/09/18 18:54	Chassis Number	Load JPG	<input checked="" type="checkbox"/>
18	06/09/18 18:54	Odometer Reading	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	05/09/18 14:44	PRS CONTACT	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>	

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: CS3/CTI18016207/GCD3E2

Date: 07/09/2018

REFERENCE

Handling Insurer: China Taiping Insurance
(Singapore) Pte. Ltd.

Policy No: DMCVSN3004001802

Claimant Vehicle
No : SGN4958YInsured Vehicle
No : GU1581P

Date of Loss: 03/09/2018

Nature of Claim: TP

Claim
No: SNM18D04295C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SGN4958Y

Make & Model: TOYOTA CAMRY, 2.4 (A)

Reg. Date: 20/11/2006 (Man. Year: 2006)

Colour: Silver

Engine Capacity: 2362 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

Engine No: 2AZC085293

Chassis No: ACV403054825

Odometer: 191744 km

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: 215/60 R16

Front Left Side: Yokohama 6 mm

Front Right Side: Yokohama 6 mm

Rear Tyre Size: 215/60 R16

Rear Left Side: Yokohama 6 mm

Rear Right Side: Yokohama 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 05/09/2018

Date Inspected: 06/09/2018 Inspected At:

 JI Auto Services Pte Ltd (HQ)
 Blk 3006 UBI ROAD 1 #01-346
 Singapore 408700

Estimated Period of Repair: 4.0 days

Adjuster: XING GUO QIANG

Manager: CELINE FONG

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.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$3,000.00 -\$4,000.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 07 Sep 2018)
Parts:	143	TOYOTA CAMRY 2.4 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SGN4958Y)	
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

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >