* ASS. REC. B)		REF: C	SFCI 1801	6444 N	cd3 er	al lestruction:
From (Person Estimated Co	Joanne Joanne	Yorg	ASSIGNMENT OF	FCI (Office)		ate/Time: 7/9/18@ 5.22pr
OD/FPW	S/TP RES/O	D RES / EVA	/ INV / MV 7 CS	Bill to:		
To Inspect V	ehicle No:	12	GILLAR		Insured:	SHC 2477)
at Workshop	m/s	WOW	1d Auto			63621776
of		47 Jula	n pemimpin	#01-6.	2/03	
Policy No:)	1			05012 MFSH
Sum Insured:				· Excess:		
Make of Veh: (Client's Record					D.	O.A. 23/06/2018
	REP. / REV				lhs	P: No 1 Kranj i toop
Date/Time: 10	0.089MO 1	Olale Perso	on Contacted:	Aines	ر Vehi	cle(IN)OUT
Date/Time	Action/Instruc	tion ()	Estimate			
	SLG112		- William			
	1		F-C115010	0236/1	Jubel	BOA:15/12/2012
149/18	sem preli	thm em	ai\			
			,			



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

36 R		RANCE LTD	Ref : CS/FCI180164	44/Nrd3			
	36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date: 10-09-2018 Code: FCI2				
1.		Policy Particula	rs :- THIRD PARTY CLAI	IM			
	Insured Veh.	SHC 2477J	Veh. Inspected	SLG 1124R			
	Policy No.		Coverage (\$)	0.00			
	Claim No.	D18005012MFSH	Excess (\$)	0.00			
	Assign From	CWS (JOANNE YONG)	Assign Date	10/09/2018			
2.		Vehicle Pa	rticulars & Condition				
	Make & Model		c.c	0			
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour				
	Odometer	*	Steering				
	Brakes		Modification				
	General						
3.		Cond	litions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre			mm			
	L/H Front Tyre			mm			
	R/H Rear Tyre			mm			
A TOUR	L/H Rear Tyre			mm			
		Descrip	tion of Damages				
	Fundes No.	HIDE N Gene	ral Information				
	Accident Date	23/06/2018	Inspection Date	10/09/2018			
	Survey held at	NO. 1 KRANJI LOOP					
	Repairer WORLD AUTO PTE LTD						
a.	General		Remarks				
	A)THE INSPECTIO	ON WAS CONDUCTED ON A"W CE TO YOUR INSTRUCTIONS,	ITHOUT PREJUDICE" BASI	IS.			



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Hotor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

26-06-2018

Our Ref No. D18005012MFSH

Accident Date

23-06-2018

Claim Type. Third Party

Insured Vehicle

SHC2477J

Third Party Vehicle. SLG1124R

Survey Location

47 JALAN PEMIMPIN #01-02/03 HALCYON 2 BLDG

Contact Person.

AINEE

Contact No.

63621776/0

Fax No. 63631250

Survey Type

WITHOUT PREJUDICE: LIABILITY UNCLEAR:

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

WORLD AUTO PTE LTD

Attention, NIL

Cc: TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

JOANNEY

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.



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

Your Ref: D18005012MFSH

Our Ref: CS/FCI18016444/Nrd3

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

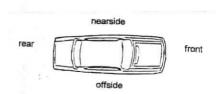
INITIAL INSPECTION REPORT OF VEHICLE NO. SLG 1124R .

Please be informed that we had conducted the inspection of the above mentioned vehicle on 10.09.2018 at the premises of M/s WORLD AUTO PTE LTD and have the following to report:-

Workshop Estimate Amount	: <u>S\$ 4,160.00</u> .
Revised Estimate Amount	: <u>S\$ 1,900.00</u> .
"Check" Items Amount	: <u>S</u> \$.
Market Value	: <u>S</u> \$.
LTA Reimbursement Value	: <u>S</u> \$
Nett Value	: S\$

Description of Damage:

<u>The vehicle sustained damages</u> at rear and n/s rear portion.



Yours faithfully

NAZRIL Automotive Assessor

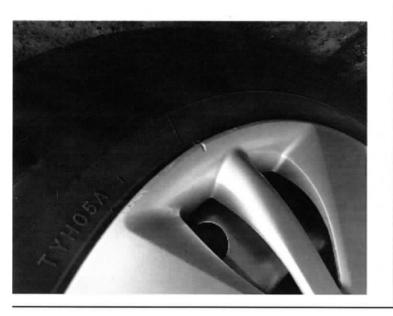
51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

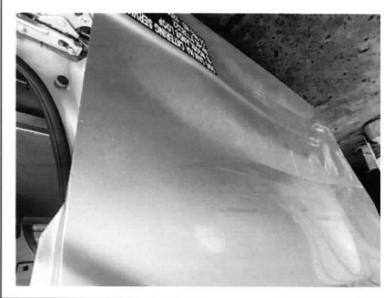
TEL: 6256 3561 FAX: 6256 4315

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









> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle Vehicle Owner Particulars Company Owner ID Type: 4597K Owner ID: **Vehicle Details** SLG1124R Vehicle No.: Vehicle to be Exported: 17 Dec 2018 Intended Deregistration Date: HONDA Vehicle Make: VEZEL 1.5X CVT Vehicle Model: White Primary Colour: 2016 Manufacturing Year: L15B4034289 Engine No.: RU11114284 Chassis No.: 96.0 kW (128 bhp) Maximum Power Output: \$22,244.00 Open Market Value: 21 Sep 2016 Original Registration Date: 21 Sep 2016 First Registration Date: 1 Transfer Count: \$13,142.00 Actual ARF Paid: Intended PARF Rebate Details Yes PARF Eligibility: 20 Sep 2026 PARF Eligibility Expiry Date: \$9,856.00 PARF Rebate Amount: Intended COE Rebate Details 20 Sep 2026 COE Expiry Date: A - Car up to 1600cc & 97kW (130bhp) COE Category: 10 COE Period(Years): \$53,334.00 QP Paid: \$41,378.00 COE Rebate Amount: \$51,234.00 **Total Rebate Amount:**

The information contained herein is correct as at 17 Dec 2018

OK

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.

By the lodgement of this report to the insurers, you aforesaid.	ou hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	25/06/2018 11:02
Date Of Accident	23/06/2018 16:20
Exact Location Of Accident	SENTOSA GATEWAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLG1124R
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-62414992

Vehicle Particulars

Manufacturer HONDA

Model VEZEL-1.5 (A)

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No. Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

Type Of Coverage

COMPREHENSIVE

Fleet Policy

YES

Policy Number

Name of Driver

999995174

Cover Note Number

Driver

CHUA ENG HOE

NRIC No S1134479H Date Of Birth 21/03/1955 Occupation OUTDOOR Date Of Driving Pass 31/12/1973

44 YEARS AND 5 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-85338899

Fax Number

Contact Number

EMail Address NOEMAIL Address NOADDRESS

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PAID DRIVER

Vehicle Registration Number of Driver's Own

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name CHOA CHU KANG NPC

Police Station Address ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 ,

NO

COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

---i--t--t---2

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: VIDEO OVERWRITTEN

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC2477J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report porrectly the details of the accident to speed up the claims process.
- 2. This Formmust 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 Formby insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 5. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GLA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims:
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the melling 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(a) who have insured vehicle(s) involved in this accident and the insurers' taw yers/law firms, may/are permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's-Signature / Date & Time

Sketch Plan

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

muelell

Personnel

Witnessed by Reporting Centre

A: 506 11340

B: SHC 24 777

Sketch Plan #2

	mostances of the Accident 311344794, CHUN ENG HOE, a Grab driver driving a rent
Habiela	from Lion City Car Reital, SLG1124R.
O CHILD E	from you city car retion, scyllage.
On 12	June 2018 at about 4: 20pm. I was on my way to
Dick up	a rider at vivo city. I enter from Telok Blangas Ri
40 Sent	tosa Gateway and make a Uturn, while approachis
to Vivas	ity ther thas a yellow innotion have and there
Were 1	shicles infront therefore I stopped and whit for
them to	ity ther was a yellow junction box and there selected infront therefore I stopped and wait for a clear while waiting, about 8-9 Seconds, I
felt m	y vehicle hit by a taxi on the near left. The
taxi n	Limber SHC 2477 G.
Atthe	e time of accident the weather was good and the
Visibility	was also good (Not raining). Nobody was
injural	was also good (Not raining). No body was
my ve	hicle suffered damaged at rear left bumper a
resport	left tender. The taxi suffered front right bump
ound n	end lamp damaged
	+

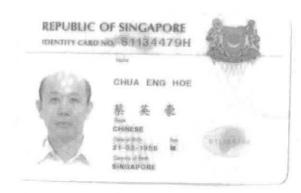
I/We declare the foregoing particulars are true in every respect.

Rollcyholder's Signature / Dela & Time

Driver's Signature (If driverys not the policyholder) / Date 8. Time

Winessed by Reporting Centre Personnel

Sketch Plan #3









WORLD AUTO PTE LTD

47 Jalan Pemimpin #01-02/03 Halcyon 2, S'pore 577200

Tel No.: 6451 3933 Fax No.: 6455 7576 E-Mail: worldaut@singnet.com.sg Website: www.worldauto.com.sg

Tax Reg. No.: 200006765-H Buss. Reg. No.: 200006765H

MSIG INSURANCE (SINGAPORE) PTE LTD

4 SHENTON WAY #21-01 SGX CENTRE 2

068807

Attention: Motor Claim Department

Contact: 68277888

Estimate: ES000331

Date: 06/09/2018

Vehicle Num. : SLG 1124R (LCR) Make/Model : HONDA VEZEL

Chassis/Eng#:

Accident Date: 23/06/2018

Claim No. : Reference : Policy No. :

/N	Quantity	Particular	Unit Price	Amount S\$
		LIST ITEMS :		
ĝ	1	REAR SIDE BUMPER - LH		250.00
	1	REAR BUMPER		900.00
	1	REAR BUMPER REFLECTOR LENS - LH		250.00 X SV C
	1	REAR TAIL LAMP - LH		700.00 XSV C
	1	REAR FENDER WHEEL ARCH MOULDING LH		250.00
		Lint TatalOft	1150	2,350.00
		List TotalS\$: 20.00% Discount S\$:	130	470.00
		20.00% Discount 55 :		470.00
			920	1.880.00
		SPECIAL NETT ITEMS :		1
	1	REAR BUMPER CLIP		40.00
en es	1	REAR TAILLAMP CLIPS		40.00 × 11
	1	REAR WHEEL ARCH MOULDING CLIPS		40.00
			80	
		Special Nett Total S\$:	0	120.00
		LABOUR:		
		TO APPLY RUSTPROOFING/ TUFFCOATING TREATMENT TO		180.00
		REPLACED PARTS.		
				E.
		TO CHECK REAR WIRES, CONNECTORS, REPLACE DAMAGED LAMPS		480.00 50
		REVERSE SENSORS AND START/STOP UNIT CAPACITORS		
				- 7
		TO DISMANTLE REAR DAMAGE PARTS, CUT AND WELD REAR		900.00 400
		SUPPORT PANEL, KNOCK, STRAIGHTEN AND RESHAPE O/S REAR		
		CHASSIS FRAME AND REPLACE RECOMMENDED PARTS.		
		,		

CONTINUE / ...

WORLD AUTO PTE LTD

47 Jalan Pemimpin #01-02/03 Halcyon, 2, S'pore 577200

Tel No.: 6451 3933 Fax No.: 6455 7576 E-Mail: worldaut@singnet.com.sg

Website: www.worldauto.com.sg

Tax Reg. No.: 200006765-H Buss. Reg. No.: 200006765H

MSIG INSURANCE (SINGAPORE) PTE LTD

4 SHENTON WAY #21-01 SGX CENTRE 2

068807

Attention: Motor Claim Department

Contact: 68277888

Estimate: ES000331

Date: 06/09/2018

Vehicle Num. : SLG 1124R (LCR) Make/Model: HONDA VEZEL

Chassis/Eng#:

Accident Date: 23/06/2018

Claim No.: Reference: Policy No.:

S/N Quantity

Particular

Unit Price

Amount S\$

PUTTY & SPRAY PAINTING ON AFFECTED AREAS (INNER/OUTER)

900

900.00

400

Labour Total S\$:

2.160.00

NAZ LKK 10/9/18 1600-APTER PEPAIR PHOTO

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:

E. & O.E.

Total S\$:

4.160.00

for WORLD AUTO PTE LTD

PARTS \$1,150 SNETT

CONFIRMED PART BY PART REPAIR \$1,900.00 / 2DAYS



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 Intern	ationale Des Experts En Automo	obile
MS I	FIRST CAPITAL IN	ISURANCE LTD	Ref : CS/FCI18016444	4/Ncd3e2
	OBINSON ROAD 01 CITY HOUSES	INGAPORE 068877	Date: 18-12-2018 Code: FCI2	
1.		Policy Particula	rs :- THIRD PARTY CLAIN	
	Insured Veh.	SHC 2477J	Veh. Inspected	SLG 1124R
	Policy No.		Coverage (\$)	0.00
	Claim No.	D18005012MFSH	Excess (\$)	0.00
	Assign From	JOANNE YONG	Assign Date	07/09/2018
2.		Vehicle Pa	rticulars & Condition	
	Make & Model	HONDA VEZEL	c.c	1496
	Engine No.	HIDDEN	Year of Reg.	2016
	Chassis No.	RU11114284	Colour	WHITE
	Odometer	120633	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	FAIR		
3.		Con	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	215/60 R16	GITI	6 mm
	L/H Front Tyre	215/60 R16	GITI	6 mm
	R/H Rear Tyre	215/60 R16	DUNLOP	6 mm
	L/H Rear Tyre	215/60 R16	DUNLOP	6 mm
4.		Descri	ption of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE	REAR AND N/S REAR PORTI	ION.
	DAMAGES SEE D	ETAILS.		
5.		Gen	eral Information	
	Accident Date	23/06/2018	Inspection Date	10/09/2018
	Survey held at	NO. 1 KRANJI LOOP		
	Repairer	WORLD AUTO PTE LTD		
5a. Remarks				Market Balletin
	B)THE INSPECTION	NSISTENT TO ACCIDENT REF ON WAS CONDUCTED ON A'' CE TO YOUR INSTRUCTIONS	WITHOUT PREJUDICE" BASI	
5b.		Estima	ate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	2 Working Days	3



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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLG 1124R

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			- 11 //
1	REAR SIDE BUMPER - LH	TO REPAIR SEE LABOUR	250.00	-
1	REAR BUMPER	CRACKED	900.00	900.00
1	REAR BUMPER REFLECTOR LENS - LH	SERVICEABLE	250.00	1-
1	REAR TAIL LAMP - LH	SERVICEABLE	700.00	2-
1	REAR FENDER WHEEL ARCH MOULDING LH	SCRATCHED	250.00	250.00
	LESS 20% DISCOUNT		-470.00	-230.00
			1,880.00	920.00
	SPECIAL NETT ITEMS			
1	REAR BUMPER CLIP (SN)	NECESSARY	40.00	40.00
1	REAR TAILLAMP CLIPS (SN)	NOT NECESSARY	40.00	-
1	REAR WHEEL ARCH MOULDING CLIPS (SN)	NECESSARY	40.00	40.00
			120.00	80.00
	LABOUR			
	TO APPLY RUSTPROOFING / TUFFCOATING TREATMENT TO REPLACED PARTS.		180.00	50.00
	TO CHECK REAR WIRES, CONNECTORS, REPLACE DAMAGED LAMPS REVERSE SENSORS AND START / STOP UNIT CAPACITORS.		180.00	50.00
	TO DISMANTLE REAR DAMAGE PARTS, CUT AND WELD REAR SUPPORT PANEL, KNOCK, STRAIGHTEN AND RESHAPE O/S REAR CHASSIS FRAME AND REPLACE RECOMMENDED PARTS. INCLUSIVE OF THE REPAIR OF REAR SIDE BUMPER - LH.		900.00	400.00
	PUTTY & SPRAY PAINTING ON AFFECTED AREAS (INNER / OUTER)		900.00	400.00
			=	-
			-	-
			2,160.00	900.00
	GRAND TOTAL		4,160.00	1,900.00

Report Ref No. CS/FCI18016444/Ncd3e2



Page No.:2 of 2

RECOMMENDED COST OF REPAIRS 1,900.00

Report Ref No. CS/FCI18016444/Ncd3e2

1

MUHAMMAD NAZRIL BIN ABDULLAH

Automotive Assessor

St. S.

ADRIAN LING WAI PING

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

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.