

22/03/2002

ASS. REC. BY:

REF:

CS/FCU18016807/Kqber

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person):

CWS Eileen Lee

of

FCU

Date/Time:

14/09/2018 1004am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHB 99466

Insured:

SH 6238A

at Workshop m/s

Trans - Cab

Tel:

of

No. 2 Amk St 63

Policy No:

Claim No:

D18006674MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A.

05/09/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'WP'

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Amanda

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SHB 99466 - CS/m3615003202/Kqbd1

DUA: 16/02/2015

SH 6238A - CS/ALH18008722/Kluts

DUA: 30/04/2018

18/9/18 @ 5:30pm revised to Eileen Lee by email.

11 Pym @ 13,900 (red B 30965.86, 69%)

ASS. REC. BY:

REF:

F02 /

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

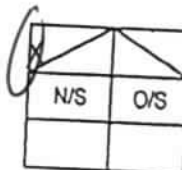
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

04

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHB 99466 Yr Regn: 09, 13

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

Truck / Trailer or

Make:

Perant Latitude C.C. 1PP5

Colour:

White / Red

A/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

VIA BL 15 AUC. 273368

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: M / S / Rim / STD A / Rim or

Tyre Size:

F:

215/60R16

R:

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

Giti

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

5/9/18

D.O.I.

14/9/18

Survey held at

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

N/S Frt & U/C

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

Date / Time

Action / Instruction

17/9

File pass to Catherine, est not ready. Return Stat.
86177-90??

RECEIVED 09 JAN 2019

Date/Time, File Pass to?



: Prell. Report



: Final Report

Date/Time, File Return to?

Days Of Repair:

4

Resurvey No. of Trip:

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Survey Fee:

350

Transportation:

S - RS. SI

: Photos

: Others

TOTAL

350

Report Format :

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

71

13900

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

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3878K
Vehicle Details	
Vehicle No.:	SHB9946G
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Jan 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2013
Engine No.:	M9R8839C000414
Chassis No.:	VF1ABL15AUC273368
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	16 Sep 2013
First Registration Date:	16 Sep 2013
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Sep 2021
PARF Rebate Amount:	\$8,748.00
Intended COE Rebate Details	
COE Expiry Date:	15 Sep 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$58,144.00
COE Rebate Amount:	\$19,623.00
Total Rebate Amount:	\$28,371.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 03 Jan 2019

OK

MOTOR SURVEY ASSIGNMENT

Date	07-09-2018	Our Ref No. D18006674MFSH
Accident Date	05-09-2018	Claim Type. Third Party
Insured Vehicle	SH6238A	Third Party Vehicle. SHB9946G
Survey Location	NO. 2 ANG MO KIO STREET 63	
Contact Person.	AMANDA TAY	
Contact No.	62876666/ 0	Fax No. 62571330
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	TRANS-CAB AUTO SERVICES PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	EILEEN LEE	

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.

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Tuesday, 18 September 2018 5:39 PM
To: 'Claim Workflow System'; assignments
Cc: EILEENLEE@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18006674MFSH/1
Attachments: CSFC18016807Kqb.pdf

Dear Eileen,

Enclosed herewith preliminary advice of SHB 9946G.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Friday, 14 September 2018 10:18 AM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: EILEENLEE@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18006674MFSH/1

Dear Sir / Madam,

Thank you for the assignment.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Claim Workflow System [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]
Sent: Friday, 14 September, 2018 10:04 AM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; EILEENLEE@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18006674MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

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

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

Best Regards,

Admin Team

Claim Workflow System



Auto
Consultants
Pte Ltd

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

Your Ref: D18006674MFSH

Date: 18 September 2018

Our Ref: CS/FCI18016807/Kqb

The Motor Claims Department
First Capital Insurance Ltd

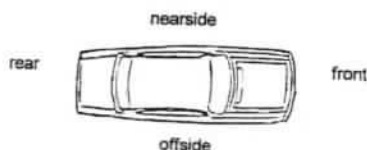
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SHB 9946G .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 14/09/2018 at the premises of M/s TRANS-CAB. and have the following to report:-

Workshop Estimate Amount	: <u>S\$ 44,865.86</u> .
Revised Estimate Amount	: <u>S\$ 17,401.49</u> .
"Check" Items Amount	: <u>S\$ 2,652.26</u> .
Market Value	: <u>S\$ -</u> .
LTA Reimbursement Value	: <u>S\$ -</u> .
Nett Value	: <u>S\$ -</u> .

Description of Damage:
The vehicle sustained damages
at the n/s front portion.



Yours faithfully

KONG SENG CHEONG
Licensed Appraiser

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	06/09/2018 08:40
Date Of Accident	05/09/2018 15:45
Exact Location Of Accident	MARINA BOULEVARD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB9946G
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666

Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 L (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	

Driver

Name of Driver	SIM THIAM HWA
NRIC No	S0178721G
Date Of Birth	17/08/1951
Occupation	OUTDOOR
Date Of Driving Pass	05/10/1972
Driving Experience	45 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94508757
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 725 WOODLANDS AVENUE 6 #11-486
Postcode	730725
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	YES
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Please see the police report T/20180906/2001

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO BIG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH6238A
Vehicle Make/Model/Colour	COMFORT DELGRO
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	WONG LIN FOOK
NRIC/Passport Number	S1331007F
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

SIM THIAM HWA

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHB9946G

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN


IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any 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:


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


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN

Marina
Boulevard

A: SHB9746G

B: SHG238A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see the attach police report

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Amanda
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20180906/2001

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

1 of 3

Report No. T/20180906/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/09/2018 00:24		Vide Report No.:		Station Diary No.: 15	
Informant's Particulars					
Name of Informant: SIM THIAM HWA			Address: APT BLK 725 WOODLANDS AVENUE 6 #11-486 SINGAPORE 730725		
ID Type / ID No.: NRIC NO / S0178721G			Contact No.: Home/Office: Mobile: 94508757		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 67	Date of Birth: 17/08/1951	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/09/2018 15:45	Type of Location:
Location: Along Road 1 MARINA BOULEVARD				
Junction of Marina Boulevard and Sheares Avenue.				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SH6238A	TAXI (COMFORT DELGRO)				Slightly Damaged	0
SHB9946G	TAXI (TRANSCAB)				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180906/2001

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

2 of 3

Report No. T/20180906/2001

CONTINUATION OF REPORT

Driver			
Name	SIM THIAM HWA		ID No. S0178721G
Related Vehicle	NIL		Contact No. 94508757
Hospital/Clinic	MY FAMILY CLINIC (WOODLANDS)		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	05/09/2018	Date Discharge	05/09/2018
No. of Days granted Medical Leave	05	Degree of Injury	NIL
Driver			
Name	WONG LIN FOOK		ID No. S1331007F
Related Vehicle	NIL		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 05/09/2018 at about 1548hrs, I was driving along Marina Boulevard intending to send a passenger to Amber Garden. Approaching the junction of Marina Boulevard and Sheares Avenue, there is about 6 lanes on Marina Boulevard and I was travelling on the 3rd lane from the left. I wish to inform the the 1st, 2nd and 3rd lane from the left only can turn into Sheares Avenue.

I was travelling on the 3rd lane of Marina Boulevard and intend to turn left into Sheares Avenue as such I signaled left and made the left turn, and was hit by another taxi (Comfort Delgro) from the 2nd lane from Marina Boulevard. The hit caused the whole of the front bumper damaged (front left, right and grill of the front bumper.). No traffic police or ambulance came to scene. Both the other taxi driver and myself exchanged particulars.

I seek for medical attention at My Family Clinic (Woodlands), I suffered neck strained, back and chest pain and giddiness from the impact of the accident. I was given 5 days of sick leave. I wish to inform that I have a in car camera and have the video recordings with me.



**SINGAPORE
POLICE FORCE**



T/20180906/2001

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

3 of 3

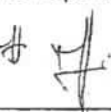
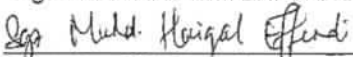
Report No. T/20180906/2001

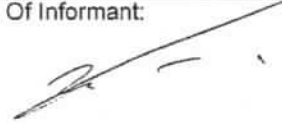
CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report: J / Sgt 3 EDWARD SIM ZHI CHAO  
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact No.: 65476404

Signature Of Informant: 
Date/Time: 06/09/2018 00:24
Classification Of Case:



Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHB 9946G**AAD1809-035**

Not Authorized
11 Sep @ 13, Pook

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

SHB 9946G

VF1ABL15AUC273368

RENAULT

LATITUDE

5.9.2018

FCIL

PART		LIST	
1	BUMPER COVER FRT	\$	<i>Bt/crm</i> 1,259.42 ✓
1	BUMPER SPOILER FRT	\$	<i>Sm</i> 181.75 X
1	BUMPER ABSORBER FRT	\$	<i>crm</i> 394.68 ✓
1	BUMPER RETAINER FRT LH	\$	<i>my</i> 151.41 ✓
1	BUMPER SUPPORT FRT	\$	<i>Sm</i> 123.88 X
1	BUMPER RETAINER FRT RH	\$	<i>Sm</i> 150.77 ✓
1	BUMPER SUPPORT FRT	\$	<i>Sm</i> 123.88 X
1	BUMPER UNDERTRAY FRT	\$	<i>Sm</i> 472.83 X
1	BUMPER GRILLE LOWER FRT	\$	<i>Sm</i> 266.80 X
1	BUMPER FOG LAMP GRILLE LH	\$	<i>my</i> 207.21 ✓
1	BUMPER BEAM FRT	\$	<i>Bt</i> 914.08 ✓
1	HEADLAMP LH	\$	<i>crm</i> 1,184.43 ✓
1	HEADLAMP PANEL FRT LH	\$	<i>rc</i> 152.15 X
1	FENDER PANEL FRT LH	\$	<i>Bt</i> 783.83 ✓
1	WHEELARCH FRT LH	\$	<i>crm</i> 278.84 ✓
1	FENDER BRACKET LOWER LH	\$	<i>my</i> 15.79 ✓
1	FENDER INSULATOR LH	\$	<i>Sm</i> 130.84 X
1	RADIATOR GRILLE	\$	<i>my/crm</i> 1,707.78 ✓
1	RADIATOR GRILLE BADGE 'RENAULT'	\$	<i>rc</i> 225.36 ✓
1	RADIATOR GRILLE FRAME	\$	<i>crm</i> 1,353.75 ✓
1	RADIATOR FAN COWLING	\$	<i>Sm</i> 820.54 X
1	RADIATOR FAN MOTOR LH	\$	<i>Sm</i> 967.36 X
1	RADIATOR FAN MOTOR RH	\$	<i>Sm</i> 1,479.46 X
1	RADIATOR GRILLE FRAME	\$	<i>Physion</i> 1,353.75 X
1	FRAME FULL SUPPORT PANEL	\$	<i>crm</i> 615.90 ✓
1	FRAME FULL SUPPORT BRACKET	\$	<i>rc</i> 89.79 X
1	AIR CLEANER BOX	\$	<i>Sm</i> 464.20 X
1	AIR CLEANER HOSE	\$	<i>Sm</i> 175.85 X

Trans-cab Auto Services Pte Ltd**AAD1809-035**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHB 9946G

1	LOWER ARM LH L70Y	\$	685.76	}
1	KUNCKLE ARM LH L70Y	\$	846.98	
1	ABSORBER FRT LH L70Y	\$	360.54	
1	DOOR PANEL FRT LH	\$	2,844.66	
1	DOOR HINGE UPPER LH	\$	261.28	
1	DOOR HINGE LOWER LH	\$	300.55	
1	DOOR CHECK FRT LH	\$	194.77	
1	DOOR LOCK FRT LH	\$	908.75	
1	DOOR CATCH FRT LH	\$	131.23	
1	DOOR HANDLE OUTER FRT LH	\$	477.76	
1	DOOR HANDLE COVER FRT LH	\$	13.22	
1	DOOR HANDLE MODULE FRT LH	\$	133.60	
1	DOOR REGULATOR FRT LH	\$	505.19	
1	DOOR REGUALTOR MOTOR FRT LH	\$	796.46	
1	DOOR REGULATOR GUIDE FRT LH	\$	120.97	
1	DOOR HARNESS WIRE	\$	2,670.00	

TOTAL	\$	27,298.07
10%	\$	2,729.81
	\$	24,568.26

Specical Nett

1SET	BUMPER CLIP FRT	\$	66.00	✓
1	BUMPER BRACKET CLIP FRT LH	\$	12.00	X
1	BUMPER SUPPORT CLIP FRT LH	\$	10.50	X
1SET	BUMPER GRILLE LOWER CLIP	\$	69.00	X
1SET	FRAME FULL SUPPORT PANEL CLIP	\$	70.00	X
2	FRAME FULL SUPPORT PANEL NUT	\$	20.00	X
2	FRAME FULL SUPPORT PANEL STUD	\$	30.00	X
1SET	WHEELARCH CLIP FRT RH	\$	30.50	✓
1	FRONT LEFT TYRE	\$	300.00	X
1	FRONT LEFT TYRE RIM	\$	380.00	X
1	FRONT DOOR STICKER 'Trans-cab'	\$	80.00	X
1	FRONT DOOR STICKER 'Chassis'	\$	50.00	X
1	DOOR CHECK BOLT	\$	22.69	X
1	DOOR GUIDE SCREW	\$	10.85	X
1	DOOR HINGE BOLT	\$	10.85	X

Trans-cab Auto Services Pte Ltd**AAD1809-035**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHB 9946G

1	DOOR HINGE NUT RH	\$	<i>nn</i> 14.60 X
1	DOOR CHECK BOLT	\$	<i>nn</i> 22.69 X
1	DOOR CHECK NUT	\$	<i>nn</i> 3.75 X
1	DOOR LOCK SCREW L70Y	\$	<i>nn</i> 6.12 X
1	DOOR CATCH SCREW L70Y	\$	<i>nn</i> 10.06 X

\$	1,219.63
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TOTAL PARTS	\$ 25,787.89
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LABOUR

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	\$	<i>500</i> 3,500.00
Putty and spray painting of the affected portion.	\$	3,000.00 <i>660</i>
To rust-proofing of the affected areas.	\$	170.00 <i>300</i>
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	<i>nn</i> 380.00 X
To check steering geometry and computer wheel alignment	\$	<i>nn</i> 220.00 X
To transfer of tire, rim and on wheel balancing.	\$	<i>nn</i> 170.00 X
To Check Electrical Lighting Concerned.	\$	170.00 <i>200</i>
To transfer of front fender fittings, attachment and perform water seepage test.	\$	<i>nn</i> 380.00 X
To vacuum, replace, refix and recharge air condenser	\$	<i>nn</i> 380.00 X
To replace, refix and top up coolant for radiator	\$	<i>nn</i> 170.00 X

Trans-cab Auto Services Pte Ltd

AAD1809-035

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SHB 9946G

To vacuum, replace, refix and recharge Air

Intercooler

\$

170.00 X

To transfer of front door fittings, attachment and
perform water seepage test.

\$

380.00 X

TOTAL \$ 9,090.00**Over All Total \$ 34,877.89****LUMP SUM (REPAIR DAY)**~~10 DAYS~~

4 days

34877.85

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:

44865.86

44865.82

Trans-cab Auto Services Pte Ltd**AAD1809-035**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHB 9946G

Vehicle No.:

SHB 9946G

Chassis No.:

VF1ABL15AUC273368

Vehicle Make:

RENAULT

Vehicle Model:

LATITUDE

Date of Accident :

5.9.2018

Third Party Insurer :

FCIL**SUPPLEMENTARY ESTIMATE**

PART		LIST	
1	INJECTION COMPUTER	\$	<i>cm</i> 4,706.30 <i>—</i>
1	ENGINE HARNESS WIRE	\$	<i>cm</i> 4,084.54 <i>—</i>
1	STEERING PUMP ELECTRIC	\$	<i>sn</i> 2,306.90 <i>X</i>
TOTAL		\$	11,097.74
10%		\$	1,109.77
		\$	9,987.97



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

MS FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18016807/Kqbe2

36 ROBINSON ROAD
#16-01 CITY HOUSES SINGAPORE 068877

Date : 10-01-2019



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SH 6238A	Veh. Inspected	SHB 9946G
Policy No.		Coverage (\$)	0.00
Claim No.	D18006674MFSH	Excess (\$)	0.00
Assign From	EILEEN LEE	Assign Date	14/09/2018

2. Vehicle Particulars & Condition

Make & Model	RENAULT LATITUDE (A)	c.c	1995
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	VF1ABL15AUC273368	Colour	METALLIC WHITE / RED
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	GITI	9 mm
L/H Front Tyre	215/60 R16	GITI	9 mm
R/H Rear Tyre	215/60 R16	GITI	9 mm
L/H Rear Tyre	215/60 R16	GITI	9 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT AND UNDERCARRIAGE PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	05/09/2018	Inspection Date	14/09/2018
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 9946G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BUMPER COVER FRT	BENT / CRACKED	1,259.42	1,259.42
1	BUMPER SPOILER FRT	SERVICEABLE	181.75	-
1	BUMPER ABSORBER FRT	CRACKED	394.68	394.68
1	BUMPER RETAINER FRT LH	DISTORTED	151.41	151.41
1	BUMPER SUPPORT FRT	SERVICEABLE	123.88	-
1	BUMPER RETAINER FRT RH	SERVICEABLE	150.77	-
1	BUMPER SUPPORT FRT	SERVICEABLE	123.88	-
1	BUMPER UNDERTRAY FRT	SERVICEABLE	472.83	-
1	BUMPER GRILLE LOWER FRT	SERVICEABLE	266.80	-
1	BUMPER FOG LAMP GRILLE LH	DISTORTED	207.21	207.21
1	BUMPER BEAM FRT	BENT	914.08	914.08
1	HEADLAMP LH	CRACKED	1,184.43	1,184.43
1	HEADLAMP PANEL FRT LH	TO REPAIR SEE LABOUR	152.15	-
1	FENDER PANEL FRT LH	BENT	783.83	783.83
1	WHEELARCH FRT LH	CRACKED	278.84	278.84
1	FENDER BRACKET LOWER LH	DISTORTED	15.79	15.79
1	FENDER INSULATOR LH	SERVICEABLE	130.84	-
1	RADIATOR GRILLE	MTG CRACKED	1,707.78	1,707.78
1	RADIATOR GRILLE BADGE 'RENAULT'	NECESSARY	225.36	225.36
1	RADIATOR GRILLE FRAME	CRACKED	1,353.75	1,353.75
1	RADIATOR FAN COWLING	SERVICEABLE	820.54	-
1	RADIATOR FAN MOTOR LH	SERVICEABLE	967.36	-
1	RADIATOR FAN MOTOR RH	SERVICEABLE	1,479.46	-
1	RADIATOR GRILLE FRAME	REPEATED	1,353.75	-
1	FRAME FULL SUPPORT PANEL	CRACKED	615.90	615.90
1	FRAME FULL SUPPORT BRACKET	TO REPAIR SEE LABOUR	89.79	-
1	AIR CLEANER BOX	SERVICEABLE	464.20	-
1	AIR CLEANER HOSE	SERVICEABLE	175.85	-
1	LOWER ARM LH L70Y	SERVICEABLE	685.76	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	KUNCKLE ARM LH L70Y	SERVICEABLE	846.98	-
1	ABSORBER FRT LH L70Y	SERVICEABLE	360.54	-
1	DOOR PANEL FRT LH	TO REPAIR SEE LABOUR	2,844.66	-
1	DOOR HINGE UPPER LH	TO REPAIR SEE LABOUR	261.28	-
1	DOOR HINGE LOWER LH	TO REPAIR SEE LABOUR	300.55	-
1	DOOR CHECK FRT LH	TO REPAIR SEE LABOUR	194.77	-
1	DOOR LOCK FRT LH	TO REPAIR SEE LABOUR	908.75	-
1	DOOR CATCH FRT LH	SERVICEABLE	131.23	-
1	DOOR HANDLE OUTER FRT LH	SERVICEABLE	477.76	-
1	DOOR HANDLE COVER FRT LH	SERVICEABLE	13.22	-
1	DOOR HANDLE MODULE FRT LH	SERVICEABLE	133.60	-
1	DOOR REGULATOR FRT LH	SERVICEABLE	505.19	-
1	DOOR REGULATOR MOTOR FRT LH	SERVICEABLE	796.46	-
1	DOOR REGULATOR GUIDE FRT LH	SERVICEABLE	120.97	-
1	DOOR HARNESS WIRE	SERVICEABLE	2,670.00	-
1	INJECTION COMPUTER (ADDITIONAL)	CRACKED	4,706.30	4,706.30
1	ENGINE HARNESS WIRE (ADDITIONAL)	CRACKED	4,084.54	4,084.54
1	STEERING PUMP ELECTRIC (ADDITIONAL)	SERVICEABLE	2,306.90	-
	LESS 10% DISCOUNT		-3,839.58	-1,788.33
			34,556.21	16,094.99
	<u>SPECIAL NETT ITEMS</u>			
1	SET BUMPER CLIP FRT (SN)	NECESSARY	66.00	66.00
1	BUMPER BRACKET CLIP FRT LH (SN)	NOT NECESSARY	12.00	-
1	BUMPER SUPPORT CLIP FRT LH (SN)	NOT NECESSARY	10.50	-
1	SET BUMPER GRILLE LOWER CLIP (SN)	NOT NECESSARY	69.00	-
1	SET FRAME FULL SUPPORT PANEL CLIP (SN)	NOT NECESSARY	70.00	-
2	FRAME FULL SUPPORT PANEL NUT (SN)	NOT NECESSARY	20.00	-
2	FRAME FULL SUPPORT PANEL STUD (SN)	NOT NECESSARY	30.00	-
1	SET WHEELARCH CLIP FRT RH (SN)	NECESSARY	30.50	30.50

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	FRONT LEFT TYRE (SN)	SERVICEABLE	300.00	-
1	FRONT LEFT TYRE RIM (SN)	SERVICEABLE	380.00	-
1	FRONT DOOR STICKER 'TRANS-CAB' (SN)	NOT NECESSARY	80.00	-
1	FRONT DOOR STICKER 'CHASSIS' (SN)	NOT NECESSARY	50.00	-
1	DOOR CHECK BOLT (SN)	NOT NECESSARY	22.69	-
1	DOOR GUIDE SCREW (SN)	NOT NECESSARY	10.85	-
1	DOOR HINGE BOLT (SN)	NOT NECESSARY	10.85	-
1	DOOR HINGE NUT RH (SN)	NOT NECESSARY	14.60	-
1	DOOR CHECK BOLT (SN)	NOT NECESSARY	22.69	-
1	DOOR CHECK NUT (SN)	NOT NECESSARY	3.75	-
1	DOOR LOCK SCREW L70Y (SN)	NOT NECESSARY	6.12	-
1	DOOR CATCH SCREW L70Y (SN)	NOT NECESSARY	10.06	-
			1,219.61	96.50
	LABOUR			
	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF HEADLAMP PANEL FRT LH, FRAME FULL SUPPORT BRACKET, DOOR PANEL FRT LH, DOOR HINGE UPPER LH, DOOR HINGE LOWER LH, DOOR CHECK FRT LH AND DOOR LOCK FRT LH.		3,500.00	500.00
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		3,000.00	660.00
	TO RUST-PROOFING OF THE AFFECTED AREAS.		170.00	30.00
	TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHERS, TO ENABLE REPAIR.	NOT NECESSARY	380.00	-
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	-
	TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	-
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	20.00
	TO TRANSFER OF FRONT FENDER FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	-
	TO VACUUM, REPLACE, REFIX AND RECHARGE AIR CONDENSER.	NOT NECESSARY	380.00	-
	TO REPLACE, REFIX AND TOP UP COOLANT FOR RADIATOR.	NOT NECESSARY	170.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO VACUUM, REPLACE, REFIX AND RECHARGE AIR INTERCOOLER.	NOT NECESSARY	170.00	-
	TO TRANSFER OF FRONT DOOR FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	-
			9,090.00	1,210.00
GRAND TOTAL			44,865.82	17,401.49

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				13,900.00
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Report Ref No. CS/FCI18016807/Kqbe2

KONG SENG CHEONG

Licensed Appraiser

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