23/07/2002

S. REC. BY: | REF: CS/FCL18016892/TLgb324 Special Instruction:

Surveyor: Tanfich

ASSIGNMENT (Office)

From (Person): CWS Karen Tan of FCL Date/Time: 16/8/2018 5:46pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SHB 3226R Insured: SHA 4376P

at Workshop m/s Ding Auto Tel:

of 31 Conjunction Rd

Policy No: Claim No: D1800635MTSH

Sum Insured: Excess:

Make of Veh: D.O.A. 14/8/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS / DS

H.O.D. Endorsement:

Date/Time: 17/8/2018 1048am Person Contacted: Ah Guang Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SHB 3226R - CS/FCL/TO 139465 / M16b82 DOA: 150717
22/8/18@	12.04p revised to Keven Tan by email.
22/8/18@	1.15p confirmed with Mr Guang VS $3550, 5 days.
	Cred $ 7343.20, 67%)

Insurance: Tawfik | REF: FC/

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.

N/S	O/S
	X

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SHB3226R Yr Regn: 2017 ; Dec

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

Make: Hyundai 140 c.c 1685

Colour Yellow A/C: Insured / Std / NI / NA

Sp.Reading 100509 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KMHLB41GMHA099993

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/70R16

R:

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	19/9/18 1715

Survey held at Ding Auto

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

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

Date / Time	Action / Instruction
	RECEIVED 27 SEP 2018
	27/9/2018

Date/Time. File Pass to? 27/9 [ ] : Preli. Report [ ] : Final Report

Date/Time. File Return to?

Days Of Repair: 5

Resurvey No. of Trip: 2

Add Fee: [ ] : Site Insp ($) [ ] : Interview ($) [ ] : Tech. Invs ($) [ ] : Weekend ($)

Survey Fee: 170

Transportation: 50

S + RS: 50 + 50

Photos:

Others: 63

TOTAL: 383

Report Format : TP

Lump Sum / I.B.I: 3550

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18016892/T1qb

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 17-09-2018

Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SHA 4376P	Veh. Inspected	SHB 3226R
	Policy No.		Coverage ($)	0.00
	Claim No.	D18006835MFSH	Excess ($)	0.00
	Assign From	CWS (KAREN TAN)	Assign Date	14/09/2018

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	14/09/2018	Inspection Date	17/09/2018
	Survey held at	31 CORPORATION RD		
	Repairer	DING AUTO PTE LTD		

5a. Remarks

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

MS FirstCapital

MS First Capital Insurance Limited Co.Reg. No. 199000106C GST Reg. No. M2-0001676-9
6 Raffles Quay #21-00 Singapore 048580
Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor 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	14-09-2018	**Our Ref No.**	D18006835MFSH
Accident Date	14-09-2018	**Claim Type.**	Third Party
Insured Vehicle	SHA4376P	**Third Party Vehicle.**	SHB3226R
Survey Location	BLK 10 SIN MING INDUSTRIAL ESTATE SECTOR C#01-20		
Contact Person.	ALEX KHONG		
Contact No.	62657130/ 83039508	**Fax No.**	64520614
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:		
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	DING AUTOMOTIVE PTE LTD	**Attention.**	NIL
Cc : TP Solicitor	NA	**TP Solicitor Fax No.**	NA
Officer Incharge	KARENT		

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: taxiscs@stengg.com
Sent: Thursday, 27 September 2018 1:15 PM
To: Shiau Chan (LKKAuto)
Cc: ACCOUNTS@DINGAUTO.SG; ADMIN@DINGAUTOMOTIVE.COM.SG; Admin A; Asher Sng (LKKAuto); Carlor.chan@dingauto.sg; CS A Team; SUR; Taufikh (LKKAuto); Thin Thin (LKKAuto); Vivian Lau (LKKAuto)
Subject: RE: SHB3226R - Finalize Amount & After Repair Photo & Question Mark Item Photo

Hi Ms.Shiau Chan ,

We accept this amount . Thank You.

Best Regards
Ding Automotive Pte Ltd
Mr.Guang
Hp : 62657130 / 94669828

From: "Shiau Chan (LKKAuto)" <siewsc@lkkauto.com>
To: Taxis Customer Service/KAS/CBG/ST Kinetics@ST Engineering, "Taufikh (LKKAuto)" <Taufikh@lkkauto.com>, "SUR" <sur@lkkauto.com>
Cc: "ACCOUNTS@DINGAUTO.SG" <ACCOUNTS@DINGAUTO.SG>, "ADMIN@DINGAUTOMOTIVE.COM.SG" <ADMIN@DINGAUTOMOTIVE.COM.SG>, "Carlor.chan@dingauto.sg" <Carlor.chan@dingauto.sg>, "Thin Thin (LKKAuto)" <thinthin@lkkauto.com>, "Vivian Lau (LKKAuto)" <vivianlau@lkkauto.com>, "Asher Sng (LKKAuto)" <AsherSng@lkkauto.com>, "CS A Team" <cs-a@lkkauto.com>, "Admin A" <admin-a@lkkauto.com>
Date: Thu 27 Sep 2018 01:07 PM
Subject: RE: SHB3226R - Finalize Amount & After Repair Photo & Question Mark Item Photo .

*****WARNING! THIS EMAIL ORIGINATES FROM OUTSIDE ST ENGINEERING.*****
Dear Mr Guang,

WITHOUT PREJUDISE

Offer Lump Sum $3,550.00 and 5 repair days.

Kindly confirm.

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: taxiscs@stengg.com <taxiscs@stengg.com>
Sent: Monday, 24 September 2018 7:29 PM
To: Taufikh (LKKAuto) <Taufikh@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: ACCOUNTS@DINGAUTO.SG; ADMIN@DINGAUTOMOTIVE.COM.SG; Carlor.chan@dingauto.sg; Thin Thin (LKKAuto) <thinthin@lkkauto.com>; Vivian Lau (LKKAuto) <vivianlau@lkkauto.com>; Asher Sng (LKKAuto) <AsherSng@lkkauto.com>; CS A Team <cs-a@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: SHB3226R - Finalize Amount & After Repair Photo & Question Mark Item Photo .

Dear Taufikh ,

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Thursday, 27 September 2018 12:09 PM
To: 'Claim Workflow System'; assignments
Cc: KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18006835MFSH/1
Attachments: CSFCI18016892T1qb.pdf

Dear Karen,

Enclosed herewith preliminary advice of SHB 3226R.

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: Monday, 17 September 2018 10:49 AM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: KARENTAN@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18006835MFSH/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 5:46 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; KARENTAN@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18006835MFSH/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

LKK Auto Consultants Pte Ltd

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

Your Ref: D18006835MFSH

Date: 27 September 2018

Our Ref: CS/FCI18016892/T1qb

The Motor Claims Department
First Capital Insurance Ltd

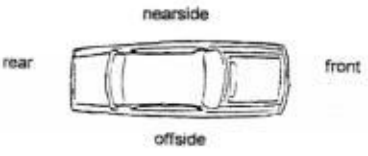
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SHB 3226R .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 19/09/2018 at the premises of M/s DING AUTO. and have the following to report:-

Workshop Estimate Amount	: S$ 10,893.20 .
Revised Estimate Amount	: S$ 3,565.38 .
"Check" Items Amount	: S$ 1,274.02 .
Market Value	: S$ - .
LTA Reimbursement Value	: S$ - .
Nett Value	: S$ - .

Description of Damage:
The vehicle sustained damages at the rear o/s portion.



Yours faithfully

Taufikh
Automotive Assessor

MSK118119205 / Singapore Technologies Kinetics Ltd - Jalan Boon Lay
ENTRY DATE & TIME: 14/09/2018 09:22
SUBMITTED BY: WONG SIEW KEONG

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.
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	14/09/2018 09:22
Date Of Accident	14/09/2018 03:45
Exact Location Of Accident	ALONG NORTH BRIDGE ROAD (ELGIN BRIDGE)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHB3226R
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	I40-1.7 D CRDI (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	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	
Driver	
Name of Driver	LEE BOON CHONG DESMOND
NRIC No	S7705054Z
Date Of Birth	21/02/1977
Occupation	OUTDOOR
Date Of Driving Pass	17/11/2000
Driving Experience	17 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87989731
Fax Number	
Contact Number	
EMail Address	DLBC88@GMAIL.COM

Address	APT BLK 415 ANG MO KIO AVENUE 10 #10-971 SINGAPORE
Postcode	560415
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF
Vehicle Registration Number of Driver's Own Vehicle	- - -
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?	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)	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 ATTACH STATEMENT .

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE NOT SUITABLE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA4376P
Vehicle Make/Model/Colour	TOYOTA PRUIS
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	S1172016A
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	LEE BOON CHONG DESMOND

Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SHB3226R
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

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

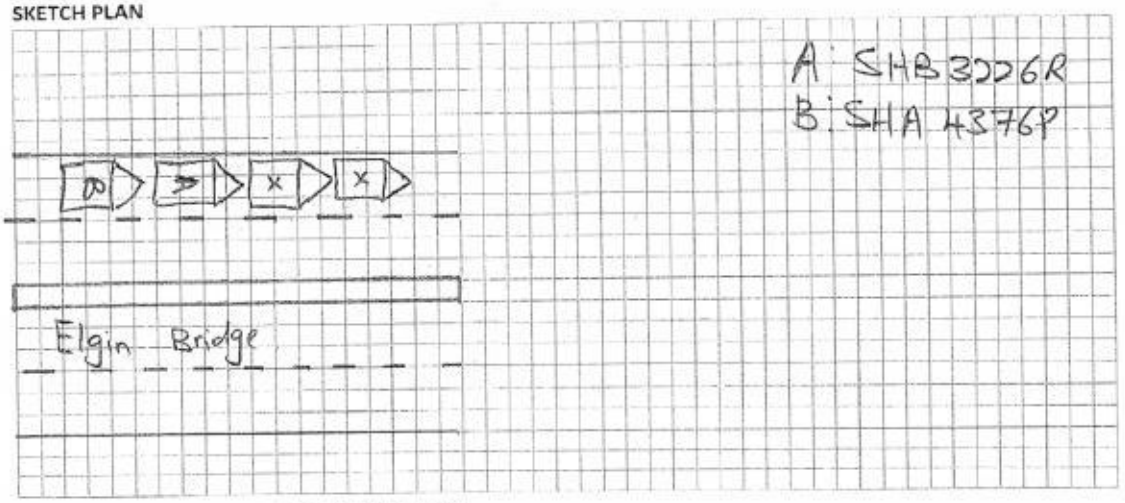
   (ii) for complying with requirements under any regulations, laws or court orders.

14 SEP '18 9:10

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.:

Accident Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14 Sep 2018 at or about 0345 hours, while I was travelling along North bridge Road towards South bridge Road, I stopped my vehicle SH B 3226 R at the extreme left lane on Elgin bridge behind two stationary vehicles. Suddenly vehicle SHA 4376 P hit onto the rear of my vehicle SH B 3226 R, causing damage to my rear portion.

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

GIARMC SketchPlanForm_V3

DING AUTOMOTIVE PTE LTD
Blk 10 Sin Ming Industrial Estate Sector C
#01-20
Singapore 575645
Tel: 6452 1208 Fax: 6452 0614

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

17/09/2018 15:18
JOB-NO: 50110949

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet) CONTACT: 65533880
ADDRESS: 383 SIN MING DRIVE 64739522
SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHB3226R TRANS: AUTO CHASSIS: KMHLB41UMHU099993
MAKE / MODEL: HYUNDAI / I40 ENGINE: D4FDHU730222
OWNER'S INSURER: MS First Capital Insurance Limited
JOB-CODE: TP SA: Ding Auto User 1

CLAIM DETAILS

	DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
LABOUR								
1	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	750.00	0.00	750.00		Y	46 DD
2	R&R REVERSE SENSOR	1.00	80.00	0.00	80.00		Y	30
3	RESPRAY REAR BUMPER	1.00	230.00	0.00	230.00		Y	200
4	RESPRAY REAR BUMPER DIFFUSER	1.00	200.00	0.00	200.00		Y	120.
5	RESPRAY END PANEL	1.00	200.00	0.00	200.00		Y	200.
6	RESPRAY REVERSE SENSOR	1.00	60.00	0.00	60.00		Y	30? X nn
7	RESPRAY BOOTLID	1.00	230.00	0.00	230.00		Y	X nn
8	RUST PROOFING	1.00	100.00	0.00	100.00		Y	X nn
9	SUNDRIES	1.00	50.00	0.00	50.00		Y	30. nil
10	R&R SPARE TYRE BOARD/ CARPET/ TRIM	1.00	150.00	0.00	150.00		Y	60.
11	R&R REAR PASSENGER SEAT & SEAT BELT & REAR QUOTA GLASS RH & ROOF LINING	1.00	250.00	0.00	250.00		Y	X nn
12	R&R REAR EXHAUST PIPE & MUFFLER	1.00	150.00	0.00	150.00		Y	100 ✓ photo. ✓
13	R&R REAR WINDSCREEN GLASS	1.00	120.00	0.00	120.00		Y	X nn.
14	CHECK & REPAIR WIRING SYSTEM & DIAGNOSTIC (CLEAR FAULT CODE)	1.00	150.00	0.00	150.00		Y	100.
15	MOUNT WORKBENCH	1.00	350.00	0.00	350.00		Y	X nn.
16	TO RESETTING AND RECODING TAIL LAMP (LED)	1.00	100.00	0.00	100.00		Y	X nn
17	ALIGNMENT BOOTLID	1.00	80.00	0.00	80.00		Y	X nn
18	RESPRAY REAR FENDER RH	1.00	230.00	0.00	230.00		Y	$200
19	TO ALIGNMENT CHASSIS	1.00	300.00	0.00	300.00		Y	X nn
	TOTAL:		3,780.00	0.00	3,780.00			
MATERIALS								
1	REAR BUMPER	1.00	559.50	111.90	447.60	L	Y	can ✓
2	REAR BUMPER RETAINER RHS	1.00	48.63	9.73	38.90	L	Y	nil ✓
3	REAR BUMPER RETAINER LHS	1.00	48.63	9.73	38.90	L	Y	X nn
4	REAR BUMPER REFLECTOR RHS	1.00	44.85	8.97	35.88	L	Y	? X nn
5	REAR BUMPER DIFFUSER	1.00	318.40	63.68	254.72	L	Y	aut ✓
6	REAR BUMPER REINFORCEMENT	1.00	488.40	97.68	390.72	L	Y	can ✓
7	REAR BUMPER REINFORCEMENT BRACKET RHS	1.00	85.63	17.13	68.50	L	Y	bl ✓
8	REAR BUMPER REINFORCEMENT SPONGE	1.00	89.62	17.92	71.70	L	Y	do ✓
9	REAR END PANEL	1.00	629.95	125.99	503.96	L	Y	RX
10	TAIL LAMP RHS	1.00	697.80	139.56	558.24	L	Y	can ✓
11	EXHAUST PIPE RHS	1.00	967.22	193.44	773.78	L	Y	X photo nn
12	BOOTLID GARNISH	1.00	774.50	154.90	619.60	L	Y	X nn

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
13 BOOTLID EMBLEM-CRDI	1.00	36.50	7.30	29.20	L	Y	X
14 BOOTLID EMBLEM-I40	1.00	33.55	6.71	26.84	L	Y	X
15 BOOTLID EMBLEM-LOGO	1.00	28.67	5.73	22.94	L	Y	X
16 BOOTLID GARNISH CHROME	1.00	214.23	42.85	171.38	L	Y	X
17 REAR FENDER RH	1.00	2,171.50	434.30	1,737.20	L	Y	X R
18 REAR EXHAUST PIPE & MUFFLER GASKET RH	1.00	42.95	8.59	34.36	L	Y	? X nn
19 REAR EXHAUST PIPE & MUFFLER RH	1.00	967.22	193.44	773.78	L	Y	? photo
20 REAR BUMPER PROTECTOR PAD	1.00	160.00	0.00	160.00	S	Y	na
21 REAR BUMPER REVERSE SENSOR	1.00	220.00	0.00	220.00	S	Y	200 ? X nn
22 REAR BUMPER CLIP	1.00	35.00	0.00	35.00	S	Y	na
23 REAR FENDER SEALANT RH	1.00	50.00	0.00	50.00	S	Y	X nn
24 REAR WINDSCREEN GLASS SEALANT	1.00	50.00	0.00	50.00	S	Y	X nn.
TOTAL:		8,762.75	649.55	7,113.20			
TOTAL PARTS & LABOUR :		12,542.75	1,649.55	10,893.20			

EXCESS/LOADING:S$ 0.00

No. Of Day: 5

RE-SURVEY: BEFORE/AFTER PAINTING

PART-BY-PART OR LUMP SUM: S$

DATE OF SURVEY: 19 / 9 / 19

SURVEYED BY: Tan

CONTACT NO: [illegible] FAX NO:

Resurvey after repair
sur @ lkkauto.com.

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001

Ding Auto User 1

ESTIMATOR

STA AUTOCENTRE

TEL: FAX:

LKK Auto Consultants here notify
the Repairer of
• To resurvey be
• To display damaged
• Parts
• Third
• No
• Supple
is subject

Acknowledge
Signature:
Date:

DING AUTOMOTIVE PTE LTD

Blk 10 Sin Ming Industrial Estate Sector C
#01-20
Singapore 575645
Tel: 6452 1208 Fax: 6452 0614

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

17/09/2018 15:18
JOB-NO: 50110949

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet) CONTACT: 65533880
ADDRESS: 383 SIN MING DRIVE 64739522
SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHB3226R TRANS: AUTO CHASSIS: KMHLB41UMHU099993
MAKE / MODEL: HYUNDAI / I40 ENGINE: D4FDHU730222
OWNER'S INSURER: MS First Capital Insurance Limited
JOB-CODE: TP SA: Ding Auto User 1

CLAIM DETAILS

	DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
	LABOUR							
1	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	750.00	0.00	750.00		Y	460 00
2	R&R REVERSE SENSOR	1.00	80.00	0.00	80.00		Y	30
3	RESPRAY REAR BUMPER	1.00	230.00	0.00	230.00		Y	200
4	RESPRAY REAR BUMPER DIFFUSER	1.00	200.00	0.00	200.00		Y	120.
5	RESPRAY END PANEL	1.00	200.00	0.00	200.00		Y	200.
6	RESPRAY REVERSE SENSOR	1.00	60.00	0.00	60.00		Y	30 X
7	RESPRAY BOOTLID	1.00	230.00	0.00	230.00		Y	X
8	RUST PROOFING	1.00	100.00	0.00	100.00		Y	X
9	SUNDRIES	1.00	50.00	0.00	50.00		Y	30.
10	R&R SPARE TYRE BOARD/ CARPET/ TRIM	1.00	150.00	0.00	150.00		Y	60.
11	R&R REAR PASSENGER SEAT & SEAT BELT & REAR QUOTA GLASS RH & ROOF LINING	1.00	250.00	0.00	250.00		Y	X
12	R&R REAR EXHAUST PIPE & MUFFLER	1.00	150.00	0.00	150.00		Y	100 ? photo.
13	R&R REAR WINDSCREEN GLASS	1.00	120.00	0.00	120.00		Y	X
14	CHECK & REPAIR WIRING SYSTEM & DIAGNOSTIC (CLEAR FAULT CODE)	1.00	150.00	0.00	150.00		Y	100.
15	MOUNT WORKBENCH	1.00	350.00	0.00	350.00		Y	X
16	TO RESETTING AND RECODING TAIL LAMP (LED)	1.00	100.00	0.00	100.00		Y	X
17	ALIGNMENT BOOTLID	1.00	80.00	0.00	80.00		Y	X
18	RESPRAY REAR FENDER RH	1.00	230.00	0.00	230.00		Y	$200
19	TO ALIGNMENT CHASSIS	1.00	300.00	0.00	300.00		Y	X
	TOTAL:		3,780.00	0.00	3,780.00			
	MATERIALS							
1	REAR BUMPER	1.00	559.50	111.90	447.60	L	Y	ok
2	REAR BUMPER RETAINER RHS	1.00	48.63	9.73	38.90	L	Y	ok
3	REAR BUMPER RETAINER LHS	1.00	48.63	9.73	38.90	L	Y	X
4	REAR BUMPER REFLECTOR RHS	1.00	44.85	8.97	35.88	L	Y	X
5	REAR BUMPER DIFFUSER	1.00	318.40	63.68	254.72	L	Y	ok
6	REAR BUMPER REINFORCEMENT	1.00	488.40	97.68	390.72	L	Y	ok
7	REAR BUMPER REINFORCEMENT BRACKET RHS	1.00	85.63	17.13	68.50	L		bl
8	REAR BUMPER REINFORCEMENT SPONGE	1.00	89.62	17.92	71.70	L	Y	ok
9	REAR END PANEL	1.00	629.95	125.99	503.96	L	Y	Rx
10	TAIL LAMP RHS	1.00	697.80	139.56	558.24	L	Y	ok
11	EXHAUST PIPE RHS	1.00	967.22	193.44	773.78	L	Y	X photo.
12	BOOTLID GARNISH	1.00	774.50	154.90	619.60	L	Y	X

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
13 BOOTLID EMBLEM-CRDI	1.00	36.50	7.30	29.20	L	Y	X
14 BOOTLID EMBLEM-I40	1.00	33.55	6.71	26.84	L	Y	X
15 BOOTLID EMBLEM-LOGO	1.00	28.67	5.73	22.94	L	Y	X
16 BOOTLID GARNISH CHROME	1.00	214.23	42.85	171.38	L	Y	X
17 REAR FENDER RH	1.00	2,171.50	434.30	1,737.20	L	Y	X R
18 REAR EXHAUST PIPE & MUFFLER GASKET RH	1.00	42.95	8.59	34.36	L	Y	? X
19 REAR EXHAUST PIPE & MUFFLER RH	1.00	967.22	193.44	773.78	L	Y	? plastic ✓
20 REAR BUMPER PROTECTOR PAD	1.00	160.00	0.00	160.00	S	Y	na
21 REAR BUMPER REVERSE SENSOR	1.00	220.00	0.00	220.00	S	Y	200 ? X
22 REAR BUMPER CLIP	1.00	35.00	0.00	35.00	S	Y	nil
23 REAR FENDER SEALANT RH	1.00	50.00	0.00	50.00	S	Y	X
24 REAR WINDSCREEN GLASS SEALANT	1.00	50.00	0.00	50.00	S	Y	X
TOTAL:		8,762.75	649.55	7,113.20			
TOTAL PARTS & LABOUR :		12,542.75	1,649.55	10,893.20			

EXCESS/LOADING:S$ 0.00

No. Of Day: 4 5

RE-SURVEY: BEFORE/AFTER PAINTING

PART-BY-PART OR LUMP SUM: S$

DATE OF SURVEY: 19 / 9 / 19

SURVEYED BY: Tan

CONTACT NO: 97499749 FAX NO:

Resurvey after repair
sur @ Ithleauto.com

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001

Ding Auto User 1

ESTIMATOR

STA AUTOCENTRE

TEL: FAX:

Labour $1640
S/A $195
Parts after 20% $2604.14
L+S+P $4439.16 - 20% lump sum
total $3551.328

TO :

FAX NO:

APPROVAL REPORT 1ST Quotation

24/09/2018 19:07

JOB-NO: 50110949

PAGE: 1 of 1

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet) CONTACT: 65533880

ADDRESS: 383 SIN MING DRIVE 64739522

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHB3226R TRANS: AUTO CHASSIS: KMHLB41UMHU099993

MAKE / MODEL: HYUNDAI / i40 ENGINE: D4FDHU730222

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP SA: Ding Auto User 1

CLAIM DETAILS

	DESCRIPTION	QTY	QUOTED COSTS	REV PRICE	APPROVAL
LABOUR					
1	RESPRAY REAR BUMPER	1.00	230.00	200.00	Yes
2	RESPRAY REAR FENDER RH	1.00	230.00	200.00	Yes
3	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	750.00	600.00	Yes
4	R&R REVERSE SENSOR	1.00	80.00	30.00	Yes
5	R&R REAR EXHAUST PIPE & MUFFLER	1.00	150.00	100.00	Yes
6	CHECK & REPAIR WIRING SYSTEM & DIAGNOSTIC (CLEAR FAULT CODE)	1.00	150.00	100.00	Yes
7	RESPRAY REAR BUMPER DIFFUSER	1.00	200.00	120.00	Yes
8	RESPRAY END PANEL	1.00	200.00	200.00	Yes
9	SUNDRIES	1.00	50.00	30.00	Yes
10	R&R SPARE TYRE BOARD/ CARPET/ TRIM	1.00	150.00	60.00	Yes
11	TO RESETTING AND RECODING TAIL LAMP (LED)	1.00	100.00	0.00	No
12	R&R REAR WINDSCREEN GLASS	1.00	120.00	0.00	No
13	RESPRAY REVERSE SENSOR	1.00	60.00	0.00	No
14	TO ALIGNMENT CHASSIS	1.00	300.00	0.00	No
15	RUST PROOFING	1.00	100.00	0.00	No
16	RESPRAY BOOTLID	1.00	230.00	0.00	No
17	ALIGNMENT BOOTLID	1.00	80.00	0.00	No
18	MOUNT WORKBENCH	1.00	350.00	0.00	No
19	R&R REAR PASSENGER SEAT & SEAT BELT & REAR QUOTA GLASS RH & ROOF LINING	1.00	250.00	0.00	No
	TOTAL:		3,780.00	1,640.00	
MATERIALS					
1	REAR EXHAUST PIPE & MUFFLER RH	1.00	773.78	773.78	Yes
2	REAR BUMPER REINFORCEMENT SPONGE	1.00	71.70	71.70	Yes
3	REAR BUMPER REINFORCEMENT BRACKET RHS	1.00	68.50	68.50	Yes
4	REAR BUMPER CLIP	1.00	35.00	35.00	Yes
5	REAR BUMPER DIFFUSER	1.00	254.72	254.72	Yes
6	REAR BUMPER RETAINER RHS	1.00	38.90	38.90	Yes
7	REAR BUMPER	1.00	447.60	447.60	Yes
8	TAIL LAMP RHS	1.00	558.24	558.24	Yes
9	REAR BUMPER REINFORCEMENT	1.00	390.72	390.72	Yes

TO :

FAX NO:
24/09/2018 19:07
JOB-NO: 50110949
PAGE: 1 of 1

APPROVAL REPORT 1ST Quotation

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet) CONTACT: 65533880
64739522

ADDRESS: 383 SIN MING DRIVE
SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHB3226R TRANS: AUTO CHASSIS: KMHLB41UMHU099993
MAKE / MODEL: HYUNDAI / I40 ENGINE: D4FDHU730222
OWNER'S INSURER: MS First Capital Insurance Limited
JOB-CODE: TP SA: Ding Auto User 1

CLAIM DETAILS

	DESCRIPTION	QTY	QUOTED COSTS	REV PRICE	APPROVAL
10	REAR BUMPER PROTECTOR PAD	1.00	160.00	160.00	Yes
11	REAR BUMPER RETAINER LHS	1.00	38.90	0.00	No
12	BOOTLID EMBLEM-LOGO	1.00	22.94	0.00	No
13	REAR FENDER SEALANT RH	1.00	50.00	0.00	No
14	BOOTLID EMBLEM-CRDI	1.00	29.20	0.00	No
15	BOOTLID GARNISH	1.00	619.60	0.00	No
16	BOOTLID GARNISH CHROME	1.00	171.38	0.00	No
17	REAR BUMPER REVERSE SENSOR	1.00	220.00	0.00	No
18	REAR WINDSCREEN GLASS SEALANT	1.00	50.00	0.00	No
19	REAR BUMPER REFLECTOR RHS	1.00	35.88	0.00	No
20	BOOTLID EMBLEM-I40	1.00	26.84	0.00	No
21	EXHAUST PIPE RHS	1.00	773.78	0.00	No
22	REAR EXHAUST PIPE & MUFFLER GASKET RH	1.00	34.36	0.00	No
23	REAR END PANEL	1.00	503.96	0.00	Repair
24	REAR FENDER RH	1.00	1,737.20	0.00	Repair
	TOTAL:		7,113.20	2,799.16	

TOTAL PARTS & LABOUR : **10,893.20** **4,439.16**

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Ref : CS/FCI18016892/T1qbs2

Date : 02-10-2018

Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SHA 4376P	**Veh. Inspected**	SHB 3226R
	Policy No.		**Coverage ($)**	0.00
	Claim No.	D18006835MFSH	**Excess ($)**	0.00
	Assign From	KAREN TAN	**Assign Date**	14/09/2018

2. Vehicle Particulars & Condition

	Make & Model	HYUNDAI I40	**c.c**	1685
	Engine No.	HIDDEN	**Year of Reg.**	2017
	Chassis No.	KMHLB41UMHU099993	**Colour**	YELLOW
	Odometer	100509	**Steering**	IN ORDER
	Brakes	IN ORDER	**Modification**	SPORTS RIM
	General	GOOD		

3. Conditions of Tyres

		Size	**Make**	**Balance**
	R/H Front Tyre	215/70R16	WEST LAKE	6 mm
	L/H Front Tyre	215/70R16	WEST LAKE	6 mm
	R/H Rear Tyre	215/70R16	WEST LAKE	6 mm
	L/H Rear Tyre	215/70R16	WEST LAKE	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	14/09/2018	**Inspection Date**	19/09/2018
	Survey held at	31 CORPORATION RD		
	Repairer	DING AUTO PTE LTD		

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: **5 Working Days**

LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933
TEL: 6256 3561 FAX: 6256 4315
Reg. No: 199607198R GST Reg. No. 19-9607198-R

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 3226R

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	CRACKED	559.50	559.50
1	REAR BUMPER REATINER RHS	NECESSARY	48.63	48.63
1	REAR BUMPER RETAINER LHS	NOT NECESSARY	48.63	-
1	REAR BUMPER REFLECTOR RHS	NOT NECESSARY	44.85	-
1	REAR BUMPER DIFFUSER	CUT	318.40	318.40
1	REAR BUMPER REINFORCEMENT	CRACKED	488.40	488.40
1	REAR BUMPER REINFORCEMENT BRACKET RHS	BENT	85.63	85.63
1	REAR BUMPER REINFORCEMENT SPONGE	DEFORMED	89.62	89.62
1	REAR END PANEL	TO REPAIR SEE LABOUR	629.95	-
1	TAIL LAMP RHS	CRACKED	697.80	697.80
1	EXHAUST PIPE RHS	NOT NECESSARY	967.22	-
1	BOOTLID GARNISH	NOT NECESSARY	774.50	-
1	BOOTLID EMBLEM - CRDI	NOT NECESSARY	36.50	-
1	BOOTLID EMBLEM - I40	NOT NECESSARY	33.55	-
1	BOOTLID EMBLEM - LOGO	NOT NECESSARY	28.67	-
1	BOOTLID GARNISH CHROME	NOT NECESSARY	214.23	-
1	REAR FENDER RH	TO REPAIR SEE LABOUR	2,171.50	-
1	REAR EXHAUST PIPE & MUFFLER GASKET RH	NOT NECESSARY	42.95	-
1	REAR EXHAUST PIPE & MUFFLER RH	BENT	967.22	967.22
	LESS 20% DISCOUNT		-1,649.55	-651.04
			6,598.20	2,604.16
	SPECIAL NETT ITEMS			
1	REAR BUMPER PROTECTOR PAD (SN)	NECESSARY	160.00	160.00
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	220.00	-
1	REAR BUMPER CLIP (SN)	NECESSARY	35.00	35.00
1	REAR FENDER SEALANT RH (SN)	NOT NECESSARY	50.00	-
1	REAR WINDSCREEN GLASS SEALANT (SN)	NOT NECESSARY	50.00	-
1	SUNDRIES (SN)	NECESSARY	50.00	30.00
			565.00	225.00

Report Ref No. CS/FCI18016892/T1qbs2

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

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	LABOUR			
	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS. INCLUSIVE OF THE REPAIR OF REAR END PANEL AND REAR FENDER RH.		750.00	600.00
	R&R REVERSE SENSOR.		80.00	30.00
	RESPRAY REAR BUMPER.		230.00	200.00
	RESPRAY REAR BUMPER DIFFUSER.		200.00	120.00
	RESPRAY END PANEL.		200.00	200.00
	RESPRAY REVERSE SENSOR.	NOT NECESSARY	60.00	-
	RESPRAY BOOTLID.	NOT NECESSARY	230.00	-
	RUST PROOFING.	NOT NECESSARY	100.00	-
	R&R SPARE TYRE BOARD / CARPET / TRIM.		150.00	60.00
	R&R REAR PASSENGER SEAT & SEAT BELT & REAR QUOTA GLASS RH & ROOF LINING.	NOT NECESSARY	250.00	-
	R&R REAR EXHAUST PIPE & MUFFLER.		150.00	100.00
	R&R REAR WINDSCREEN GLASS.	NOT NECESSARY	120.00	-
	CHECK & REPAIR WIRING SYSTEM & DIAGNOSTIC (CLEAR FAULT CODE).		150.00	100.00
	MOUNT WORKBENCH.	NOT NECESSARY	350.00	-
	TO RESETTING AND RECODING TAIL LAMP (LED)	NOT NECESSARY	100.00	-
	ALIGNMENT BOOTLID.	NOT NECESSARY	80.00	-
	RESPRAY REAR FENDER RH.		230.00	200.00
	TO ALIGNMENT CHASSIS.	NOT NECESSARY	300.00	-
			3,730.00	1,610.00
	GRAND TOTAL		**10,893.20**	**4,439.16**

	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**3,550.00**

Report Ref No. CS/FCI18016892/T1qbs2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser