

ASS. REC. BY:

REF:

CS/FCI18017201/Asd3er

Special Instruction:

Surveyor
WS

Adnan

ASSIGNMENT (Office)

From (Person):

Eileen Lee

of

FCI

Date/Time:

21/9/18 @ 10:01am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

PGM 6983

Insured:

8H 87784

at Workshop m/s

MG Solution

Tel:

67444165

of

23 kaki Bkt Ave 4 # 02-03

Policy No:

Claim No:

D18006856 MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

14/09/2018

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

10:03am @ 21/9/18

Person Contacted:

Ms. Hong

Vehicle: ☒ IN ☐ OUT

Date/Time

Action/Instruction

(✓) Estimate

PGM 6983-X

8H 87784 - CC3 / LER 17014094 / M/wb 3q2

DOA: 5/7/17

21/09/18

@ 17:29 p.m. revert pending estimate from repairer to Eileen via email.

Sprengel

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

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

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: PGM6983 Yr Regn: 2005 / Augst.Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Inova c.c. 1998Colour: Gold A/C: Insured / Std / NI / NASp. Reading: 142119 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: PN111NV4008601582Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/65R15R: 205/65R15

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 18/09/18Survey held at M6 SolutionDes. 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
	<u>TP 1st Cap.</u>
<u>02/11/18</u>	<u>Confirmed L/S \$ 3,700/- @ 6 days with Adrian.</u>
	<u>(\$ 8,412.15 Red- 70%)</u>
	<u>MV: 30K (CRM) ≈ 10K (Sing Dollar).</u>
	<u>MV - 10K</u>
	<u>PV - 1K</u>
	<u>Nett - 9K</u>
	<u>MV: 10K. 2</u>
	<u>PV: 1K. } Sing</u>
	<u>Nett: 9K. } dollar.</u>

RECEIVED 02 NOV 2018

Date/Time, File Pass to?

02/11/181) Typist

Date/Time, File Return to?

2) _____

☐ : Preli. Report☒ : Final ReportDays Of Repair: 6Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ _____) S + RS, SI☐ : Interview (\$ _____) Photos☐ : Tech. Invs (\$ _____) Others☐ : Weekend (\$ _____)Survey Fee: 170+30Transportation: 505024TOTAL 324

Report Format :

Lump Sum / I.B.I. (\$ 3,700/- L/S)

MOTOR SURVEY ASSIGNMENT

Date	17-09-2018	Our Ref No. D18006856MFSH
Accident Date	14-09-2018	Claim Type. Third Party
Insured Vehicle	SH8778U	Third Party Vehicle. PGM6983
Survey Location	23 KAKI BUKIT AVE 4 AAS KAKI BUKIT CENTRE#02-03	
Contact Person.	HONG	
Contact No.	67444165/ 0	Fax No. 67444604
Survey Type	WITHOUT PREJUDICE:	
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	MG SOLUTION 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.

Job Sheet (/ClaimWS/Surveyor/JobSheet/244264)



PRI Documents



Close



PRI Header Details

Claim No	D18006856MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & MG SOLU
Workshop Name	MG SOLUTION PTE LTD (Contact Person : HONG)	Survey Location & Contact Details	23 KAKI BUKIT AVE 4 AAS KAKI BUKIT CENTRE#02-03 Mobile: 0 , Phone: 67444165 , Fax: 67444604 EmailId: MG3SOLUTION@GMAIL.COM		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SH8778U	TP Vehicle No	PGM6983
PRI Recieved Date	17-09-2018 07:24:45 PM	Surveyor Appointed Date	21-09-2018 10:00:25 AM	Surveyor Accept Date	21-09-2018 1

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	21-09-2018	Upload Survey Report *:	<input type="button" value="Choose File"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select Year"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

<input type="button" value="Upload Multiple Documents"/>	
File Name	Action

Surveyor Job Remarks

Remarks	<input type="text"/>	<input type="button" value="Save"/>
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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/FCI18017201/Asd3

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 21-09-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SH 8778U	Veh. Inspected	PGM 6983
Policy No.		Coverage (\$)	0.00
Claim No.	D18006856MFSH	Excess (\$)	0.00
Assign From	CWS (EILEEN LEE)	Assign Date	21/09/2018

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	18/09/2018
Survey held at	MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933		

5a. Remarks

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

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Friday, 21 September 2018 5:29 PM
To: 'Claim Workflow System'
Cc: 'assignments@lkkauto.com'; 'EILEENLEE@MSFIRSTCAPITAL.COM.SG'
Subject: FW: SURVEY ASSESSMENT - D18006856MFSH/1
Attachments: Jobsheet_D18006856MFSH_TPD1.pdf

Dear Eileen,

Please be informed that we have inspected the vehicle PGM 6983 on 18/09/2018.

We are pending estimate from repairer.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@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, 21 September 2018 10:01 AM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; EILEENLEE@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18006856MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

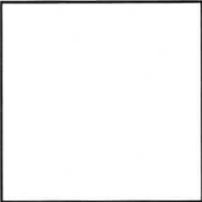
Please find attached the necessary documents for survey.

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
Motor Claims Department
MS First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.



This email has been checked for viruses by AVG antivirus software.
www.avg.com



Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/09/2018 16:28		Vide Report No.:		Station Diary No.: 61	
Informant's Particulars					
Name of Informant: MOHAMMAD NORSAIFUL BIN ABDUL HAMID			Address:		
ID Type / ID No.: NRIC NO / G2639787T			Contact No.: Home/Office: Mobile: 92438851		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 27	Date of Birth: 01/01/1991	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: DELIVERY MAN			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: 14/09/2018 12:10	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 LORONG 7 TOA PAYOH TOA PAYOH EAST Junction of LORONG 7 TOA PAYOH and TOA PAYOH EAST				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PGM6983						0
SH8778U		HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Blue		0



**SINGAPORE
POLICE FORCE**



T/20180914/2115

2 of 3

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

Report No. T/20180914/2115

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMMAD NORSAIFUL BIN ABDUL HAMID	ID No.	G2639787T
Related Vehicle	PGM6983	Contact No.	92438851
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	14/09/2018	Date Discharge	NIL
No. of Days granted Medical Leave	07	Degree of Injury	NIL

Brief Details.

On 14/09/2018 at about 1210hrs, I was driving my vehicle(PGM6983) at junction of Lor 7 Toa Payoh and Toa Payoh East.

At the point of time, my vehicle was travelling on the centre lane along Toa Payoh east and stop behind the traffic light with a vehicle (SH8778U). when the traffic light turn green, I started to make my left turn into Lor 7 toa payoh with my left signal on. Suddenly, I felt an impact from the left of my vehicle as such I alighted to make a check and discovered that my vehicle was hit by vehicle (SH8778U) .

I would wish to state that the lane that vehicle (SH8778U) proceeding straight at a turn left lane only. which resulting a collision to happen between my vehicle and vehicle (SH8778U).

I would wish to state that there was no police or ambulance attend to the accident. My vehicle does not have in-built camera.

Due to the accident, I felt pain on my neck and lower back as such I went to consult doctor and was given a seven days medical leaves.

I am lodging this report for insurance claim purpose.



Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

3 of 3

Report No. T/20180914/2115

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:

E /

Sgt 2 TAN CHIN SENG, JASON

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

14/09/2018 16:28

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED

MOHD SAID

Contact No.: 65476172

Authentication Stamp

NP168



SINGAPORE
POLICE FORCE

SN 070

SIGNATURE



Private Motor Car

RENEWAL POLICY SCHEDULE

STAMP
DUTY
PAID

The Policy Holder:		Policy Number (Certificate Number):	
JADE MICRON MALAYSIA SDN BHD NO 5, JALAN LAMAN SETIA 7/3,, TAMAN LAMAN SETIA, 81550 JOHOR BAHRU, JOHOR DARUL TAKZIM		1030928551	
		Currency:	
		Malaysian Ringgit	
		Period of Insurance:	
		From: Wednesday 11 April, 2018 Time: 12:01 AM	
		To: Wednesday 10 April, 2019 Time: Midnight	
		(Both Dates Inclusive)	
		Bank Reference:	Loan Number:

VEHICLE DETAILS:							
Registration Number	Vehicle Make	Vehicle Model	Year	Seats/ Capacity	C.C. Weight	Engine/Chassis Numbers	Insured Amount
PGM6983	TOYOTA	INNOVA (GK905A) INNOVA G TGN40R-GKPNKE 4 SP AUTOMATIC	2005	7	1998	1TR-6108819 PN111NV4008601582	33,000.00

NAMED DRIVER(S):	HIRE PURCHASE OWNER:
	NIL

PREMIUM DETAILS:			
Coverage Description	Limit	Excess	Premium
COMPREHENSIVE No Claims Bonus of 25.00% of Comprehensive Optional Benefits: All Driver (Company) Windscreen		NIL	1,287.00 - 321.75
	1200.00		50.00 180.00
PREMIUM			1,195.25
Stamp Duty			10.00
Plus Goods and Services Tax			71.72
TOTAL POLICY PREMIUM		RM	1,276.96

Your attention is drawn to Section E - Condition 2 (e) of the simplified Motor policy.

Subject to Endorsement(s): J6-01,J6-11,J6-47

Date Printed : 22-03-2018 Issuing Office : PENANG
Producing Office : PENANG Prev. Policy No. :
User ID : CNPGA00528 Batch No. :
Batch Date : Submission Date : 22-03-2018
Territory : WEST MALAYSIA Replacing Cover Note : 4922809
Remarks :

Issued by

AIG Malaysia

Producer Name : BETTER TOMORROW CONSULTANCY

NO. 85 1ST FLOOR PATANI ROAD 10150 PENANG

Producer Code : 0400351000

Contact No. : 04-228 6131,NA,012-473 9663,NA,04-229 9697
Fax No. : 04-229 9698Note: For your convenience, we have put up the Policy Wording into our website. You may view or reprint them at www.aig.my

This insurance policy is issued electronically pursuant to your purchase of a Motor insurance which is subject to the standard terms and conditions of the Motor policy as regulated by the Malaysian Motor Tariff. No signature is therefore required for this document.
In the meantime, please ensure that all particulars printed in the policy schedule are correct.
You have a duty to inform AIG Malaysia immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given is inaccurate or has changed.

The policy schedule and the policy wordings shall be read together to form an entire contract between AIG Malaysia and the policyholder/insured person.

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SIJIL PEMILIKAN KENDERAAN

JABATAN PENGANGKUTAN JALAN

Y3PFR9DU

No. Pendaftaran : PGM6983
No. ID : 1090182-7
Nama Pemunya Berdaftar : JADE MICRON MALAYSIA SDN BHD
Alamat : SETIA BUSINESS PARK 5 JALAN LAMAN SETIA 7/3 TAMAN
LAMAM SETIA
81550 GELANG PATAH JOHOR
No. Chasis/No. Enjin : PN111NV4008601582 / 1TR-6108819
Buatan>Nama Model : TOYOTA / INNOVA 2.0 G (A)
Keupayaan Enjin : 1998
Bahan Bakar : PETROL
Status Asal : PEMASANGAN TEMPATAN
Kelas Kegunaan : PERSENDIRIAN-MOTOKAR SYARIKAT
Jenis Badan/Tahun Dibuat : MOTOKAR PELBAGAI UTILITI / 2005
Tarikh Pendaftaran : 24/08/2005
B.D.M/B.G.K/BTM : -
Syarat Pendaftaran 1 : -
Syarat Pendaftaran 2 : -
Syarat Pendaftaran 3 : -

MG SOLUTION PTE LTD

23 Kaki Bukit Avenue 4 (South Wing) #02-03 Singapore 415933

Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376

Reg. No: 201427944N

Email : mg3solution@gmail.com

TO : FIRST CAPITAL DATE : 15/09/2018
ATTENTION : MOTOR CLAIMS DEPT JOB TYPE : T/P CLAIM
ESTIMATE REPORT :

VEHICLE DETAILS

VEHICLE NO : PGM6983
MODEL : TOYOTA INNOVA 2.0E
CHASSIS NO

Shirley

ACCIDENT DETAILS DATE : 14-Sep-18
TIME : 12:10HRS

THIRD PARTY REQUESTOR / CONTACT : JACK LI

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	FRONT DOOR LH <i>Dented</i>	1	\$ 1,133.50	\$ 1,133.50
2	ROCKER PANEL LH <i>Repair</i>	1	\$ 630.90	\$ 630.90
3	REAR DOOR LH <i>Distorted</i>	1	\$ 1,133.50	\$ 1,133.50
4	REAR DOOR OUTER PROTECTOR <i>new</i>	1	\$ 170.40	\$ 170.40
5	REAR DOOR OUTER PROTECTOR CHROME <i>new</i>	1	\$ 133.20	\$ 133.20
6	REAR DOOR LOCK <i>new</i>	1	\$ 320.10	\$ 320.10
7	REAR DOOR WEATHERSTRIP <i>new</i>	1	\$ 198.50	\$ 198.50
8	REAR DOOR INNER BOARD <i>new</i>	1	\$ 455.10	\$ 455.10
9	REAR FENDER LH <i>Repair</i>	1	\$ 1,366.90	\$ 1,366.90
10	REAR FENDER QUARTER GLASS MOULDING <i>new</i>	1	\$ 198.20	\$ 198.20
11	REAR SHOCK ABSORBER LH <i>new</i>	1	\$ 555.30	\$ 555.30
12	REAR WHEEL HUP WITH BEARING <i>new</i>	1	\$ 311.50	\$ 311.50
13	REAR KNUCKLE ARM <i>new</i>	1	\$ 366.20	\$ 366.20
14	REAR LOWER ARM <i>new</i>	1	\$ 322.60	\$ 322.60
15	REAR BUMPER <i>torn</i>	1	\$ 688.30	\$ 688.30
16	REAR BUMPER SIDE RETAINER <i>new</i>	1	\$ 72.00	\$ 72.00

333090

TOTAL PRICE \$ 8,056.20

2498.17

LESS 25% \$ 2,014.05

SUB TOTAL PRICE \$ 6,042.15

SPECIAL NETT ITEMS

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	REAR DOOR INNER BOARD CLIPS(SET) <i>new</i>	1	\$ 20.00	\$ 20.00 <i>x.</i>
2	REAR BUMPER CLIPS(SET) <i>new</i>	1	\$ 20.00	\$ 20.00 <i>✓</i>
3	STICKER <i>new</i>	1	\$ 180.00	\$ 180.00 <i>50.</i>
4	WHEEL TYRE <i>new</i>	1	\$ 420.00	\$ 420.00 <i>x</i>
5	WHEEL RIM <i>lit</i>	1	\$ 850.00	\$ 850.00 <i>400.</i>

470 TOTAL \$ 1,490.00

CLAIM DETAILS: LABOUR AND SPRAY PAINTING (REAR)

1	PANEL BEATING, REMOVING AND REPLACING PARTS	\$ 1,800.00	600	
2	SPRAY PAINTING TO AFFECTED AREA	\$ 1,400.00	800	
3	WIRING CHECK	\$ 150.00	30	
4	TUFF COAT	\$ 200.00	x.	
5	TO REMOVE AND REFIX FRONT & REAR DOOR <i>Settings</i>	\$ 280.00	160	
6	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING	\$ 180.00	50	
7	REMOVE AND REFIX QUARTER GLASS	\$ 120.00	x.	
8	REMOVE AND REFIX REAR UNDERCARRIAGE	\$350.00	x	
9	FOUR WHEEL ALIGHMENT	\$ 100.00	80	

TOTAL \$4,580.00 1720

ESTIMATE REPORT

TOTAL PARTS COST : \$ 7,532.15

TOTAL LABOUR COST : \$ 4,580.00

TOTAL REPAIR COST : \$ 12,112.15

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 subject to confirmation
- Third party survey is on a "Without Préjudice" basis
- No additional work order(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to approval from Insurance Company

APPROVED DETAILS

EXCESS

NO. OF WORKING DAYS :

RE-SURVEY

PART BY PART OR LUMP SUM :

Acknowledged By:
Signature:
Date:

Adrian Lim
w/s 18/09/18.
06 days.

total: 4688.17
w/s 37K.

DATE & TIME OF SURVEY :

SURVEYED BY :

CONTACT NUMBER :

FAX NUMBER :




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/FCI18017201/Asd3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 29-11-2018	
			Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SH 8778U	Veh. Inspected	PGM 6983	
Policy No.	D-18088936MFSH	Coverage (\$)	0.00	
Claim No.	D18006856MFSH	Excess (\$)	0.00	
Assign From	EILEEN LEE	Assign Date	21/09/2018	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA INNOVA	c.c	1998	
Engine No.	HIDDEN	Year of Reg.	2005	
Chassis No.	PN111NV4008601582	Colour	GOLD	
Odometer	142119	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	205/65 R15	BRIDGESTONE	6 mm	
L/H Front Tyre	205/65 R15	BRIDGESTONE	6 mm	
R/H Rear Tyre	205/65 R15	BRIDGESTONE	6 mm	
L/H Rear Tyre	205/65 R15	BRIDGESTONE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	14/09/2018	Inspection Date	18/09/2018	
Survey held at	MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933			
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:		6 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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PGM 6983

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT DOOR LH	DENTED	1,133.50	1,133.50
1	ROCKER PANEL LH	TO REPAIR SEE LABOUR	630.90	-
1	REAR DOOR LH	DISTORTED	1,133.50	1,133.50
1	REAR DOOR OUTER PROTECTOR	NECESSARY	170.40	170.40
1	REAR DOOR OUTER PROTECTOR CHROME	NECESSARY	133.20	133.20
1	REAR DOOR LOCK	NOT NECESSARY	320.10	-
1	REAR DOOR WEATHERSTRIP	NOT NECESSARY	198.50	-
1	REAR DOOR INNER BOARD	NOT NECESSARY	455.10	-
1	REAR FENDER LH	TO REPAIR SEE LABOUR	1,366.90	-
1	REAR FENDER QUARTER GLASS MOULDING	NOT NECESSARY	198.20	-
1	REAR SHOCK ABSORBER LH	NOT NECESSARY	555.30	-
1	REAR WHEEL HUB WITH BEARING	NOT NECESSARY	311.50	-
1	REAR KNUCKLE ARM	NOT NECESSARY	366.20	-
1	REAR LOWER ARM	NOT NECESSARY	322.60	-
1	REAR BUMPER	TORN	688.30	688.30
1	REAR BUMPER SIDE RETAINER	NECESSARY	72.00	72.00
	LESS 25% DISCOUNT		-2,014.05	-832.73
			6,042.15	2,498.17
<u>SPECIAL NETT ITEMS</u>				
1	SET REAR DOOR INNER BOARD CLIPS (SN)	NOT NECESSARY	20.00	-
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	20.00	20.00
1	STICKER (SN)	NECESSARY	180.00	50.00
1	WHEEL TYRE (SN)	NOT NECESSARY	420.00	-
1	WHEEL RIM (SN)	CUT	850.00	400.00
			1,490.00	470.00
<u>LABOUR</u>				
	PANEL BEATING, REMOVING AND REPLACING PARTS. INCLUSIVE OF THE REPAIR OF ROCKER PANEL LH AND REAR FENDER LH.		1,800.00	600.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	SPRAY PAINTING TO AFFECTED AREA.		1,400.00	800.00
	WIRING CHECK.		150.00	30.00
	TUFF COAT.	NOT NECESSARY	200.00	-
	TO REMOVE AND REFIX FRONT & REAR DOOR FITTINGS.		280.00	160.00
	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING.		180.00	50.00
	REMOVE AND REFIX QUARTER GLASS.	NOT NECESSARY	120.00	-
	REMOVE AND REFIX REAR UNDERCARRIAGE.	NOT NECESSARY	350.00	-
	FOUR WHEEL ALIGNMENT.		100.00	80.00
			4,580.00	1,720.00
GRAND TOTAL			12,112.15	4,688.17

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			3,700.00
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MARKET VALUE: \$10,000.00(EST)-PAPER VALUE: \$1,000.00=NETT VALUE: \$9,000.00

ADRIAN LING WAI PING

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

Licensed Appraiser

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