

22/03/2002

ASS. REC. BY:

REF:

CS3/ III 18018634/ Ucd36

Special Instruction:

Surveyor: Marcus

ASSIGNMENT (Office)

From (Person):

Jou Nah

of

III

Date/Time:

12/10/18 @ 3:07pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLF 8490S

Insured:

SHC 8252B

at Workshop m/s

Motor Intel

Tel:

8838 3318

of

13 kaki Bkt Rd 4 #01-20

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

07/10/2018

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

3:38pm @ 12/10/18

Person Contacted:

Wilson

Vehicle

IN / OUT

Date/Time	Action/Instruction (X) Estimate
	SLF 8490S - X
	SHC 8252B - NS/HNC17012506 / Gybe 2

DOA: 22/6/2017

(05/1/13)

REF:

TIT

Summary

ASSIGNMENT

From: _____ Date: 15/10/2018

Estimated Cost: _____

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

To Inspect Vehicle No: SLF 8490S

at Workshop m/s Motor Intel

of 13 Kaki Bkt Rd 4 #01-20

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: 14

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (up)

LYA 11258

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

30/4/2020

Veh No: SLF 8490S Yr Regn: 5-105

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

Truck / Trailer or

Make: Toyota Camry C.C. 1998

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

Sp. Reading: 315686 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MA053BK310601132

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: _____

R: 215/65R17

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

TOYO / YOKO or

Front

6

Rear

6

R/Bal. mm

R/Bal. mm

L/Bal. mm

L/Bal. mm

D.O.A. 7/10/18

D.O.I. 15/10/18

Survey held at _____

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

N/S R/L

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

Date / Time	Action / Instruction
	No Settlement. 1 yrs body.
	3-4 K
	N/S body a/c.

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 1

Report Format: PRG

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

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

Survey Fee: 120

Transportation:

S + RS. SI

Photos

Others 10

TOTAL

130

Nivitha (LKK Auto)

From: Motor Claim - III <motorclaim@iii.com.sg>
Sent: Friday, 12 October 2018 3:07 PM
To: Catherine Chong (LKK Auto)
Cc: 'Sales MIA'; jerdine.wang@alt.sg; vincent@alt.sg; jiamin.mak@alt.sg; Sherini Pillai;
Subject: MEKAVATHANAN SARANGAPANI
Attachments: RE: PRI - SLF 8490 S
shc8252b_20181011101013.pdf

Dear Sir / Mdm

This Pre-Repair Survey is on Without Prejudice Basis.

THIRD PARTY VEHICLE NO. : SLF 8490 S
III INSURED VEHICLE NO. : SHC8252B
DATE OF LOSS : 07/10/2018

We acknowledge receipt of your email.

In compliance to Pre-Action Protocol for NIMA cases, we note that

We disagree to the list of motor surveyors that you have proposed.

Therefore, we have appointed our surveyor LKK to conduct the pre-repair survey.

This claim is handled by **SHERINI**

Please let us have your client's accident report and repair estimate for our appointed surveyor to conclude his report.

****We would like to conduct a re-survey after spray painting. Please contact our surveyor to arrange.**
****Surveyor kindly upload this assignment to Merimen.**

Thank You.

Joel Nah

Motor Claims Department

India International Insurance Pte Ltd

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6100 Ext 206 Fax: 6224 4174

From: jiamin.mak@alt.sg [mailto:jiamin.mak@alt.sg]
Sent: Friday, 12 October, 2018 2:45 PM
To: Motor Claim - III <motorclaim@iii.com.sg>
Cc: 'Sales MIA' <sales@mia.com.sg>; jerdine.wang@alt.sg; vincent@alt.sg
Subject: RE: PRI - SLF 8490 S

Dear Sir/Madam,

We refer to your email dated 11 October 2018.

We have our client's instructions to reject your proposal on your Single Joint Expert.

We propose to use the motor surveyor(s) named in the list below to conduct the joint pre-repair survey as a Single Joint Expert:

1. Andrew How - Prominent Appraiser Services
2. S. Kumanam - S.K Auto Consultants
3. Alan Cheong - CL Appraiser

Kindly let us hear from you within 2 working days as per the new NIMA protocol failing which we will proceed with the necessary.

Thank you.

Best Regards,

Jiamin

For and on behalf of
Allister Lim

**ALLISTER LIM & THRUMURGAN
ADVOCATES & SOLICITORS**

111 North Bridge Road
#11-04 Peninsula Plaza
Singapore 179098
Telephone : 6422 2187
Facsimile : 6438 1211

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From: Motor Claim - III <motorclaim@iii.com.sg>

Sent: 12 October, 2018 2:10 PM

To: jiamin.mak@alt.sg; mail@alt.sg

Cc: 'Sales MIA' <sales@mia.com.sg>; jerdine.wang@alt.sg; allister@alt.sg; vincent@alt.sg

Subject: RE: PRI - SLF 8490 S

Dear Sirs,

We refer to the above.

We attach our reply dated 11.10.18 for your easy reference.

Best Regards,

Gabriel Wee

Motor Claims Dept.
India International Insurance Pte Ltd
64 Cecil Street | #05 IOB Building | Singapore 049711
Tel: 6347 6100, Ext - 248

From: jiamin.mak@alt.sg [mailto:jiamin.mak@alt.sg]
Sent: 12 October, 2018 12:26 PM
To: Motor Claim - III <motorclaim@iii.com.sg>
Cc: 'Sales MIA' <sales@mia.com.sg>; jerdine.wang@alt.sg; allister@alt.sg; vincent@alt.sg
Subject: PRI - SLF 8490 S

Dear Sir/Madam,

We refer to our PRI letter dated 12 October 2018 which was faxed over to your good office. A copy of the fax transmission receipt is attached.

Kindly let us have your reply by **3pm on 12 October 2018**, failing which we will commence repairs without further reference to you.

All our clients' rights are expressly reserved.

Best Regards,

Jiamin

For and on behalf of
Allister Lim

**ALLISTER LIM & THRUMURGAN
ADVOCATES & SOLICITORS**

111 North Bridge Road
#11-04 Peninsula Plaza
Singapore 179098
Telephone : 6422 2187
Facsimile : 6438 1211

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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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It may contain confidential and/or legally privileged information.

If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful. Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

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India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

DISCLAIMER:

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Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K



AL&T
ADVOCATES AND SOLICITORS

Your Ref: SHC 8252 B

Our Ref: AL.INS.2018.SLF8490S

10 October 2018

India International Insurance Pte Ltd
64 Cecil Street
#04/#05 IOB Building
Singapore 049711

BY HAND & FAX: 6224 4174 ONLY

Dear Sirs,

**ACCIDENT INVOLVING SLF 8490 S & SHC 8252 B ALONG HOUGANG AVENUE 1
TOWARDS LORONG AH SOO ON 7 OCTOBER 2018 AT ABOUT 1000 HOURS**

We act for the owner of vehicle no. SLF 8490 S.

We are instructed to claim damages against you in connection with the above accident.

Pursuant to NIMA protocol, we hereby give you notice to conduct a pre-repair inspection of our client's motor vehicle at the under-stated workshop:-

MOTOR INTEL AUTOMO PTE LTD
13 Kaki Bukit Road 4
#01-20 Bartley Biz Centre
Singapore 417807
Person In-Charge: Wilson / Tinie
Mobile Number: 8838 3318 / 6281 0087

TAKE NOTICE that you are required to respond to us within 2 working days (excluding Saturday, Sunday and Public Holiday) of receipt of this notice as to whether you wish to carry out or waive a pre-repair inspection. If we do not hear from you in this regard by the stipulated time, we shall construe your silence as waiver of the requirement for a pre-repair inspection and our client's repairers shall proceed to repair our client's vehicle.

Please contact our staff, Jiamin or Jerdine at 6422 2187 or email us at jiamin.mak@alt.sg / jerline.wang@alt.sg for future correspondences.

Yours faithfully


ALLISTER LIM

ALLISTER LIM & THRUMURGAN

111 North Bridge Road, #11-04 Peninsula Plaza, Singapore 179098 UEN & GST Reg. No.: 53130941W
Tel: 6438 3303 Fax: 6438 1211 (Not for service of court documents) Email: mail@alt.sg

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

Owner ID Type: Business

Owner ID: 6621K

Vehicle Details

Vehicle No.: SLF8490S

Vehicle to be Exported: No

Intended Deregistration Date: 15 Oct 2018

Vehicle Make: TOYOTA

Vehicle Model: CAMRY 2.0

Primary Colour: Black

Manufacturing Year: 2005

Engine No.: 1AZ3186463

Chassis No.: MR053BK3106011132

Maximum Power Output: 106.0 kW (142 bhp)

Open Market Value: \$27,690.00

Original Registration Date: 31 May 2005

First Registration Date: 31 May 2005

Transfer Count: 1

Actual ARF Paid: \$30,459.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Apr 2020

COE Category: B - Car (1601cc & above)

COE Period(Years): 5

PQP Paid: \$35,865.00

COE Rebate Amount: \$11,058.00

Total Rebate Amount: \$11,058.00**Message**

Please note that the 5-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 15 Oct 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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. 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	09/10/2018 17:47
Date Of Accident	07/10/2018 10:00
Exact Location Of Accident	LOR AH SOO
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF8490S
Insured/Policyholder	
Name Of Registered Owner	SEVEN SEA LOGISTICS AND LIMO SERVICES
Co Reg No	53316621K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83522119

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.0
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096305506
Cover Note Number	

Driver

Name of Driver	MOHAMAD RAFEES BIN HUSNI
NRIC No	S8607743D
Date Of Birth	01/04/1986
Occupation	OUTDOOR
Date Of Driving Pass	22/01/2016
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93973429
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 632A SENJA ROAD #03-165
Postcode	671632
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	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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	5
Passenger 1	NAME: : UNKNOWN GENDER: : MALE
Passenger 2	NAME: : UNKNOWN GENDER: : MALE
Passenger 3	NAME: : UNKNOWN GENDER: : MALE
Passenger 4	NAME: : UNKNOWN GENDER: : FEMALE

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 BELOW STATEMENT/SKETCH PLAN

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC8252B
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	TAXI

Name of Driver	WONG KIM HONG
NRIC/Passport Number	S1703712I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

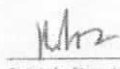
IMPORTANT NOTICE

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:

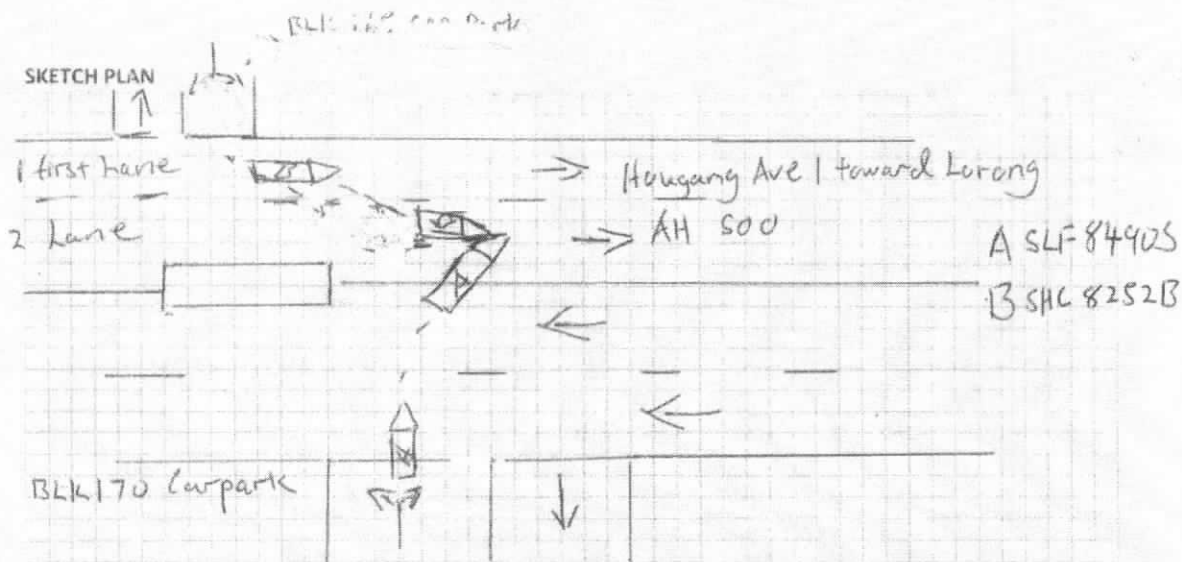
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: _____

IDAC KAKI BUKIT (VAC)
 23 KAKI BUKIT AVE 4
 Singapore 415933
 Reporting Centre Personnel's Signature
 Name: _____ Tel: 67416097
 Fax: 67492305
 NRIC/FIN No.: _____
 Email: vackb@singnet.com.sg

Sketch Plan #2 Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving out from hougang Ave 1 BLK 170 carpark turning to hougang Ave 1 toward Lorong AH 500 when the incoming traffic is clear and was in my lane suddenly I got a impact from my left side front bumper and I stopped my vehicle and alighted and saw vehicle B SHC 82523 which was driving on first lane suddenly shift to my lane and collided onto my vehicle.

DECLARATION

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:

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

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

PRI

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	16 Oct 2018 14:34 Edit Reg		12 Oct 2018 00:00 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	--------------------------

CLAIM SUBFOLDER DETAILS [Created by adjuster]

Insured: -, Co. Reg. No.: -	
Main Claimant: -	
Vehicle Reg. No.: SLF8490S	Date of Loss: 07/10/2018 00:00 - :59 [160 Months and 7 Days From LTA Reg Date (Man Yr)]
Claim Type: TP	Policy/Cover Note No.:
Vehicle Reg. No. (Insured): SHC8252B	Policy No. (Claimant):
	Excess:
Repairer: Motor Intel Automo Pte Ltd (HQ) Bartley Biz Centre, 13 Kakai Bukit Road 4, #01-20, 417807 Kaki Bukit - Tel:	
Handling Insurer: India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Sherini Pillai]	
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Final Rpt due 24/10/2018]	

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

There are no mail for this case.

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

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

Claim Documents

*SLF8490S
[SHC8252B]
TP
-
Oct 7 2018 12:00AM
[-]
Motor Intel Automo Pte Ltd

Upload Documents		Upload Photos		Compose New Letter		View		View in Browser	
Documentation							1 per page		<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)						Thumbnail	Print
1	16/10/18 09:18	Singapore Accident Statement						Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST

ResetSavePrint

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To:

☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/III18018634/UCD3E2

Date: 16/10/2018

REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

Claimant Vehicle No : SLF8490S

Insured Vehicle No : SHC8252B

Date of Loss: 07/10/2018

Nature of Claim: TP

Claim No: N/A

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SLF8490S

Make & Model: TOYOTA CAMRY, 2.0 (A)

Engine No: 1AZ3186463

Reg. Date: 31/05/2005 (Man. Year: 2005)

Chassis No: MR053BK3106011132

Colour: Black

Odometer: 315686 km

Engine Capacity: 1998 cc

Market Value/New Car Price: N/A

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

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable):

Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification:

No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 215/65 R17

Rear Tyre Size: 215/65 R17

Front Left Side: Bridgestone 6 mm

Rear Left Side: Bridgestone 6 mm

Front Right Side: Bridgestone 6 mm

Rear Right Side: Bridgestone 6 mm

The above values represent the remaining tyre treads depth

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

INSPECTION

Date of Assignment: 12/10/2018

Date Inspected: 15/10/2018 Inspected At:

Motor Intel Automo Pte Ltd (HQ)
Bartley Biz Centre, 13 Kakai Bukit Road
4, #01-20
Singapore 417807

Estimated Period of Repair: 4.0 days

Adjuster: MARCUS CHUA

Manager: CELINE FONG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

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

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 16 Oct 2018)
Parts:	143	TOYOTA CAMRY 2.0 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLF8490S)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >