

22/03/2002

ASS. REC. BY:

REF: CS/FCI18021233/ R1+d300

Special Instruction:

Supervisor:

Ragul

ASSIGNMENT (Office)

From (Person):

WS

May chuan

of

FCI

Date/Time:

23/11/18 @ 2:34pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No.:

SLZ 8501P

Insured:

SHC 7860C

at Workshop m/s

Httuehi Capital

Tel:

64663022

of

No. 8 Fourth Lok Yung Rd

Policy No.:

Claim No.:

D18008304MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

21/11/2018

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

H.O.D. Endorsement:

Date/Time:

3:18pm @ 23/11/18

Person Contacted:

Jiang How

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SLZ 8501P - X

SHC 7860C - CS3/FCI16003981/uth 3c2

D.O.A. 29/2/16

30/11 @

5:18pm

Revised via email. Preli advise.

28/11/19

Confirm final figure @ \$2747.75, 3 days



**MOTOR SURVEY ASSIGNMENT**

<b>Date</b>	22-11-2018	<b>Our Ref No.</b> D18008304MFSH
<b>Accident Date</b>	21-11-2018	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHC7860C	<b>Third Party Vehicle.</b> SLZ8501P
<b>Survey Location</b>	JUN TAIYO SERVICE CENTRE NO 8 FOURTH LOK YANG ROAD	
<b>Contact Person.</b>	NG JIONG HOW	
<b>Contact No.</b>	64663022/ 0	<b>Fax No.</b> 68966591
<b>Survey Type</b>	DIRECT SETTLEMENT:	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	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

<b>Cc : Workshop</b>	HITACHI CAPITAL ASIA PACIFIC PTE. LTD.	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	NA	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	MAY CHUA	

**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.

## Denise Tay (LKKAuto)

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**From:** Denise Tay (LKKAuto)  
**Sent:** Thursday, 28 February 2019 3:56 PM  
**To:** 'Jamilah, Binte MohdKassim'; Shiau Chan (LKKAuto); SUR; Taufikh (LKKAuto); Admin A; Rasul (LKKAuto); CS A Team; Poh Kin (LKKAuto)  
**Cc:** 関本崇 / Sekimoto, Takashi; HengCheong, Poon; Vonn, LM Siow; JiongHow, Ng  
**Subject:** RE: Finalisations

Dear Jamilah,

SLZ8501P/TP/ MS FC DOA: 21/11/2018

Confirm final figure at \$2747.75, 3days

Please submit all relevant documents to First capital insurance

Best Regards,

**Denise Tay** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

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

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**From:** Jamilah, Binte MohdKassim <jamilahbegum@hcspl.com.sg>  
**Sent:** Tuesday, 26 February 2019 6:05 PM  
**To:** Shiau Chan (LKKAuto) <siewsc@lkkauto.com>; SUR <sur@lkkauto.com>; Taufikh (LKKAuto) <Taufikh@lkkauto.com>; Admin A <admin-a@lkkauto.com>; Rasul (LKKAuto) <Rasul@lkkauto.com>; CS A Team <cs-a@lkkauto.com>; Poh Kin (LKKAuto) <pohkin@lkkauto.com>; Denise Tay (LKKAuto) <denisetay@lkkauto.com>  
**Cc:** 関本崇 / Sekimoto, Takashi <sekimoto@hcspl.com.sg>; HengCheong, Poon <poonhengcheong@hcspl.com.sg>; Vonn, LM Siow <vonnlm.siow@hcspl.com.sg>; JiongHow, Ng <jionghow.ng@hcspl.com.sg>  
**Subject:** RE: Finalisations

Dear LKK Team,

We have been chasing for the finalisation for the following cases.

SKW153R / TP/AXA DOA: 21/03/2018  
SLG4237D / TP/Lonpac DOA: 5/07/2018  
SJS3492A / TP/China Taiping DOA: 17/10/2018  
SLW8267G/ TP/India DOA: 11/10/2018  
SJH76X/ TP/AXA DOA: 12/09/2018  
SLS534J/ TP/Lonpac DOA: 14/09/2018  
SLE1460E/ TP/MS FC DOA: 3/01/2019  
SLZ8501P/TP/ MS FC DOA: 21/11/2018  
GBD6138C/TP/AXA DOA: 9/10/2018  
SLE9952A/TP/AXA DOA: 13/12/2018

We seek your understanding and cooperation for a prompt response by 28/02/2019.



Auto  
Consultants  
Pte Ltd

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

Your Ref: D18008304MFSH

Date: 30/11/2018

Our Ref: CS/FCI18021233/R1td3

The Motor Claims Department  
First Capital Insurance Ltd

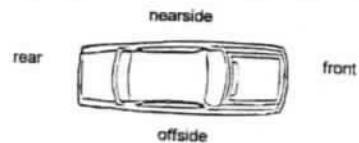
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SLZ 8501P

Please be informed that we had conducted the inspection of the abovementioned vehicle 27/11/2018 at the premises of M/s Hitachi Capital have the following to report: -

Workshop Estimate Amount	: S\$ <u>2,384.50</u>
Revised Estimate Amount	: S\$ <u>1,355.00</u>
"Check" Items Amount	: S\$ <u>43.50</u>
Market Value	: S\$ _____
LTA Reimbursement Value	: S\$ _____
Nett Value	: S\$ _____

Description of Damage:  
The vehicle sustained damages at the  
Rear O/S portion.



**Comments/ Present Status:**  
Damages Consistent.

Yours faithfully  
Rasul  
Automotive Assessor

## Denise Tay (LKKAuto)

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**From:** Denise Tay (LKKAuto)  
**Sent:** Friday, 30 November 2018 5:18 PM  
**To:** Admin-D (LKKAuto); 'CWS Motor Claims'; assignments  
**Cc:** 'May Chua Hui Chin'; SUR  
**Subject:** RE: SURVEY ASSESSMENT - D18008304MFSH/1  
**Attachments:** PRELI ADVISED SLZ 8501P.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle **SLZ 8501P**

Best Regards,

**Denise Tay** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

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

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**From:** Admin-D (LKKAuto)  
**Sent:** Friday, 23 November 2018 3:28 PM  
**To:** 'CWS Motor Claims' <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>  
**Cc:** 'May Chua Hui Chin' <[maychua@msfirstcapital.com.sg](mailto:maychua@msfirstcapital.com.sg)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Subject:** RE: SURVEY ASSESSMENT - D18008304MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not in the workshop, repairer will arrange.

BEST REGARDS,

**G.Nivitha** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

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

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**From:** CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]  
**Sent:** Friday, 23 November 2018 2:39 PM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** CWS Motor Claims <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; May Chua Hui Chin <[maychua@msfirstcapital.com.sg](mailto:maychua@msfirstcapital.com.sg)>  
**Subject:** PRI: SURVEY ASSESSMENT - D18008304MFSH/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.

## 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	21/11/2018 17:57
Date Of Accident	21/11/2018 14:25
Exact Location Of Accident	AYE TOWARDS TUAS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ8501P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NIPPON PILLAR SINGAPORE PTE LTD
Co Reg No	199300603N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68617138

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 ELEGANCE (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 PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	TAN WEI HONG
NRIC No	S7410119D
Date Of Birth	09/04/1974
Occupation	INDOOR
Date Of Driving Pass	27/10/1999
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94559662
Fax Number	
Contact Number	
Email Address	JONATHAN@PILLAR.COM.SG

Address	BLK 5 ST. GEORGE'S LANE #10-197
Postcode	320005
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO ATTACHMENT

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC7860C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	DHANABALAN S/O A GOPALKRISHNAN
NRIC/Passport Number	S6945259J
Contact Number	86228841
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:

*[Handwritten Signature]*

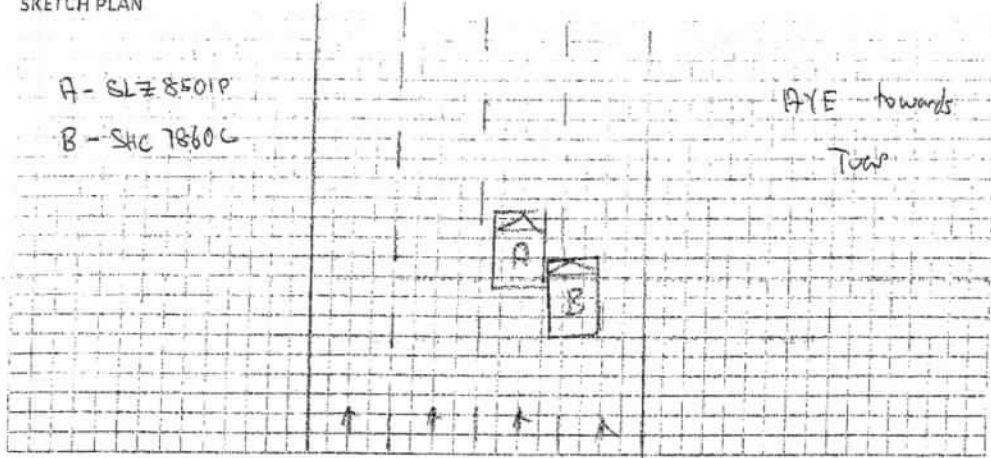
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



Reporting Centre (Retail) Signature  
Name:  
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Time estimated to be 14:20 on 21 Nov 2018, while I was driving along AYE heading (middle lane) with a speed of est 40 km/hr heading to meet a client, when all of a sudden I notice <sup>from rear</sup> yellow taxi rear mirror as well as side mirror that a yellow taxi <sup>which</sup> was driving very close <sup>to me</sup> on the extreme right lane ~~and~~ was cutting to the left lane <sup>where</sup> ~~which~~ I <sup>was</sup> ~~to~~ my vehicle was not even clear for him to cut into my lane, resulting to this accident of him ~~hitting~~ colliding onto my rear bumper as well as my rear right tyre and sports rim, time of this accident was to be 14:30.

We immediately stopped our vehicle near to Ex + 15 A extreme right lane to exchange our particulars <sup>so that I can</sup> make a claim against Mr DHANA driver of <sup>company</sup> taxi SHC 7860C.

DECLARATION

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



Policyholder's Signature  
Date & Time:

*[Handwritten Signature]*

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



Reporting Officer's Signature  
Name:  
NRIC/FIN No.:

**Hitachi Capital Asia Pacific Pte. Ltd.**  
**Jun Taiyo Service Centre**

No. 8 Fourth Lok Yang Road Singapore 629705  
 Tel : 64663022 Fax : 68966591  
 Co. Reg.No. 199400399N GST Reg.No. M2-011899-3

**VEHICLE ESTIMATE**

FCIL

QUOTE NO :  
 ACCIDENT DATE : 21/11/2018@1425HRS  
 VRN : SLZ8501P  
 MODEL : Toyota Altis Elegance  
 TP VRN : SHC7860C

ATTN: MOTOR CLAIMS DEPT

	<u>Qty</u>	<u>S\$ Unit</u>	<u>S\$ Amt</u>	<u>S\$ Labor</u>
<b><u>PARTS REPLACEMENT</u></b>				
<b><u>1. Body Repair</u></b>				
1 Rear Bumper <i>scr /</i>	1	\$ 485.00	\$ 485.00 ✓	
2 Rear Bumper Clips <i>na /</i>	10	\$ 5.50	\$ 55.00 ✓	
3 Rear Bumper Outer Bracket RH <i>X scr</i>	1	\$ 120.00	\$ 120.00 ✓	
4 Rear Bumper Reflector RH <i>? X scr</i>	1	\$ 58.00	\$ 58.00 ✓	
5 Rear Fender RH Repair	1	\$ -	\$ -	
6 Rear Fender Shield RH <i>X na</i>	1	\$ 55.00	\$ 55.00 ✓	
7 Rear Fender Shield Clips RH <i>X na</i>	6	\$ 5.50	\$ 33.00	
8 Rear Sport Rim 16" <i>scr /</i> sample	1	\$ -	\$ -	- 1857
Discount 25%			\$ (201.50)	
	<b>TOTAL</b>		\$ 604.50	

**2. Labor Charges**

- 1 Panel beat, cut, weld, re-align and replace of affected area
- 2 Putty & Spray painting of affected area
- 3 Remove & reinstall 2 pieces bumper parking sensors
- 4 Remove & reinstall rear reverse camera
- 5 Remove & balance rim/tyre

*350*  
 ✓ \$ 750.00  
~~\$500~~ 750.00  
 ✓ \$60 120.00  
*na* ✓ \$ X 120.00  
 ✓ \$ 40.00

*Rasul*  
*Hp 9000068*  
*3 days*  
*4s*  
*Resum after repair*

Sub Total : \$ 1,780.00  
 Grand Total : \$ 2,384.50  
 Add 7% GST : \$ 166.92  
 Nett Total : \$ 2,551.42

No. of repair days: \_\_\_\_\_ *A*

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before ~~the~~ 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: \_\_\_\_\_

*3777.25*

CUSTOMER SIGNATURE

HITACHI CAPITAL ASIA PACIFIC PTE LTD  
 (MANAGER)

Parts - 2397.00  
 -25% - 599.25

1797.75

Labour - 950.00

\$2747.75

Hitachi Capital Asia Pacific Pte. Ltd.  
 Jun Taiyo Service Centre

No. 8 Fourth Lok Yang Road Singapore 629705  
 Tel : 64663022 Fax : 68966591  
 Co. Reg.No. 199400399N GST Reg.No. M2-011899-3

**VEHICLE ESTIMATE**

FCIL

3 days

ATTN: MOTOR CLAIMS DEPT

QUOTE NO :  
 ACCIDENT DATE : 21/11/2018@1425HRS  
 VRN : SLZ8501P  
 MODEL : Toyota Altis Elegance  
 TP VRN : SHC7860C

Qty      S\$ Unit      S\$ Amt      S\$ Labor

**PARTS REPLACEMENT**

**1. Body Repair**

1 Rear Bumper <i>SCR /</i>	1	\$	485.00	\$	485.00 /
2 Rear Bumper Clips <i>new /</i>	10	\$	5.50	\$	55.00 /
3 Rear Bumper Outer Bracket RH <i>X succ</i>	1	\$	120.00	\$	120.00
4 Rear Bumper Reflector RH <i>? succ</i>	1	\$	58.00	\$	58.00
5 Rear Fender RH Repair	1	\$	-	\$	-
6 Rear Fender Shield RH <i>X</i>	1	\$	55.00	\$	55.00
7 Rear Fender Shield Clips RH <i>X</i>	6	\$	5.50	\$	33.00
8 Rear Sport Rim 16" <i>SCR /</i> sample	1	\$	1857	\$	1857 / 1857

Discount 25%      \$ (201.50)

68336265

TOTAL      \$ 604.50

**2. Labor Charges**

1 Panel beat, cut, weld, re-align and replace of affected area	\$	750.00
2 Putty & Spray painting of affected area	\$	<del>750.00</del> 350
3 Remove & reinstall 2 pieces bumper parking sensors	\$	<del>120.00</del> 60
4 Remove & reinstall rear reverse camera	\$	<del>120.00</del> X
5 Remove & balance rim/tyre	\$	40.00

*Rasuk*  
*Hp 90010068*

Sub Total : \$ 1,780.00

*3 days*

*45 P/P*

*Resum after repair P/P*

Grand Total : \$ 2,384.50  
 Add 7% GST : \$ 166.92  
 Nett Total : \$ 2,551.42

No. of repair days: \_\_\_\_\_

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: \_\_\_\_\_

CUSTOMER SIGNATURE

HITACHI CAPITAL ASIA PACIFIC PTE LTD  
 (MANAGER)




## 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/FCI18021233/R1td3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 04-03-2019	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 7860C	Veh. Inspected	SLZ 8501P
Policy No.		Coverage (\$)	0.00
Claim No.	D18008304MFSH	Excess (\$)	0.00
Assign From	MAY CHUA	Assign Date	23/11/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA COROLLA ALTIS (A)	c.c	1598
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	MR053REH604581897	Colour	GREY
Odometer	10805	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/45 R17	MICHELIN	6 mm
L/H Front Tyre	215/45 R17	MICHELIN	6 mm
R/H Rear Tyre	215/45 R17	MICHELIN	6 mm
L/H Rear Tyre	215/45 R17	MICHELIN	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	21/11/2018	Inspection Date	27/11/2018
Survey held at	HITACHI CAPITAL (S) PTE LTD JUN TAIYO SERVICE CENTRE NO. 8 FOURTH LOK YANG ROAD SINGAPORE 629705		
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:		3 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

Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLZ 8501P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	SCRATCHED	485.00	485.00
10	REAR BUMPER CLIPS @\$5.50	NECESSARY	55.00	55.00
1	REAR BUMPER OUTER BRACKET RH	SERVICEABLE	120.00	-
1	REAR BUMPER REFLECTOR RH	SERVICEABLE	58.00	-
1	REAR FENDER RH (NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR FENDER SHIELD RH	NOT NECESSARY	55.00	-
6	FRONT FENDER SHIELD CLIPS RH @\$5.50	NOT NECESSARY	33.00	-
1	REAR SPORT RIM 16" LESS 25% DISCOUNT	SCRATCHED	1,857.00 -665.75	1,857.00 -599.25
			1,997.25	1,797.75
<b>LABOUR</b>				
	PANEL BEAT, CUT, WELD, RE-ALIGN AND REPLACE OF AFFECTED AREA. INCLUSIVE OF THE REPAIR OF REAR FENDER RH.		750.00	350.00
	PUTTY & SPRAY PAINTING OF AFFECTED AREA.		750.00	500.00
	REMOVE & REINSTALL 2 PIECES BUMPER PARKING SENSORS.		120.00	60.00
	REMOVE & REINSTALL REAR REVERSE CAMERA.	NOT NECESSARY	120.00	-
	REMOVE & BALANCE RIM / TYRE.		40.00	40.00
			1,780.00	950.00
<b>GRAND TOTAL</b>			<b>3,777.25</b>	<b>2,747.75</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>2,747.75</b>

Report Ref No. CS/FC118021233/R1td3e2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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