

ASS. REC. BY:

REF:

CS3/C7118022392/Gcd36

Special Instruction:

Surveyor:

Mumen

Guoara

ASSIGNMENT (Office)

From (Person):

Catherine Thia

of

C71

Date/Time:

12/12/18 @ 5:12pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SMD 4699H

Insured:

SJL 7649B

at Workshop m/s

Twin Car Automotive

Tel:

6842 0051

of

2 Kaki Bkt Ave 2 # 01-17

Policy No:

DMPCSN3074851800

Claim No:

SNM18005697C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

06/12/2018

CA / REV / REP. / REV 24 HRS

lup)

13/12/18

H.O.D. Endorsement:

Date/Time:

5:20pm 12/12/18

Person Contacted:

Eileen

Vehicle ~~IN~~ OUT

Date/Time

Action/Instruction

(X) Estimate

SMD 4699H - NA/INC18022077/24

DUA: 6/12/2018

SJL 7649B - NA/INC18022077/24

DUA: 6/12/2018

PRS
XAL

REF: CTE

5377B

ASSIGNMENT

From: Date: 13/12/18

Estimated Cost:

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

To Inspect Vehicle No: SMD 4699H
at Workshop n/s Twincor Automotive
of 2 kaki Bkt Ave 2 # 01-17

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.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value:

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 ^{1up}

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SMD4699H Yr Regn: 01 Sep 2014

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

Truck / Trailer or

Make: Toyota Altis C.C. 1598

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

Sp. Reading: 84186 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MR053REH 1045 15 150

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt or

Brake: ☒ In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD ☒ A/Rim or

Tyre Size: F: 205/55R16

R: 11

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

TOYO / YOKO or

Front

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A.

Survey held at

Des. 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
\$2000 - \$3000

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Days Of Repair: 4

Resurvey No. of Trip: -

Survey Fee:

Transportation:

) S + RS. \$

) Photos

) Others

TOTAL

150

150

Report Format: PRS

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

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	12 Dec 2018		12 Dec 2018 17:12 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	MR NG YEOW FANG (HUANG YAOFENG), ID: S8730622D		
Main Claimant:	LING NGAIN CHOO, ID: S2625377B		
Vehicle Reg. No.:	SMD4699H	Date of Loss:	06/12/2018 17:00 - :59
Claim Type:	TP / SNM18D05697C02	Policy/Cover Note No.:	DMPCSN3074851800 (Comprehensive)
Vehicle Reg. No. (Insured):	SJL7649B	Policy No. (Claimant):	5103591032
		Excess:	S\$0.00
Repairer:	Twincar Automotive Pte Ltd (HQ) 2 KAKI BUKIT AVEUNE 2 #01-17, 417921 Kaki Bukit - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Catherine Thia]		
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:		
Adjuster:	KKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 21/12/2018]		
Driver/Custodian (Insured):	NG YEOW FANG (HUANG YAOFENG) (31 / Male), NRIC: S8730622D, Tel: +6588622868		
Adj Asg. Remarks:	NO EST, CASE W/O SJE.		

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.									

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5377B
Vehicle Details	
Vehicle No.:	SMD4699H
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA COROLLA ALTIS 1.6L CVT
Primary Colour:	Silver
Manufacturing Year:	2014
Engine No.:	1ZRY089657
Chassis No.:	MR053REH104515150
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$18,650.00
Original Registration Date:	01 Sep 2014
First Registration Date:	01 Sep 2014
Transfer Count:	1
Actual ARF Paid:	\$13,650.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Aug 2024
PARF Rebate Amount:	\$10,237.00
Intended COE Rebate Details	
COE Expiry Date:	31 Aug 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$62,890.00
COE Rebate Amount:	\$35,925.00
Total Rebate Amount:	\$46,162.00
Message	

The information contained herein is correct as at 14 Dec 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	07/12/2018 17:06
Date Of Accident	06/12/2018 17:25
Exact Location Of Accident	ORCHARD BLVD BEFORE ORCHARD TURN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD4699H
Insured/Policyholder	
Name Of Registered Owner	LING NGAIN CHOO
NRIC No	S2625377B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90869533
Alternative Phone No	OFFICE-90869533

Vehicle Particulars

Manufacturer	TOYOTA
Model	TOYOTA COROLLA ALTIS 1.6L CVT
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5103591032
Cover Note Number	

Driver

Name of Driver	GOH CHIN KOK
NRIC No	S2158937C
Date Of Birth	05/01/1955
Occupation	OUTDOOR
Date Of Driving Pass	20/10/2009
Driving Experience	9 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-84509779
Fax Number	
Contact Number	OFFICE-84509779
EMail Address	NOEMAIL

Address	BLK 196 RIVERVALE DRIVE #04-723
Postcode	540196
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - 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 STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJL7649B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

DETAILS OF INJURED PERSON 1

Name GOH CHIN KOK

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SMD4699H

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Accident Sketch Plan

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 willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes");
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims;
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders

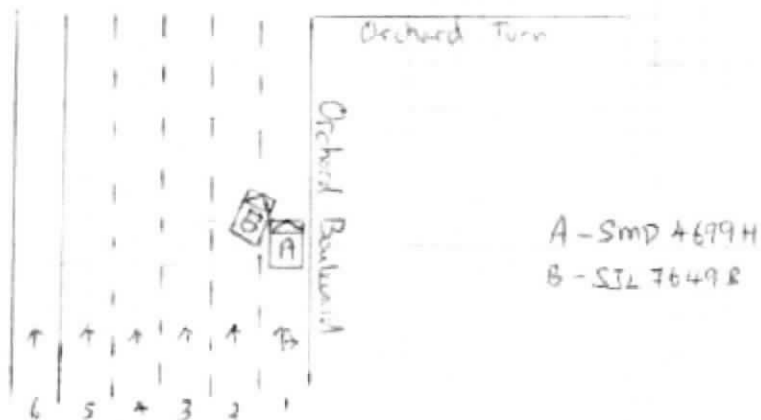
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above said date & time, I was travelling along Orchard Boulevard on the extreme right lane before Orchard Turn. Vehicle "B" travelling on my left side cut into my lane & hit onto my vehicle front left 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 Person's Signature
Name:
NRIC/FIN No.:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	12 Dec 2018		12 Dec 2018 17:12 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 insurer]									
Insured:	MR NG YEOW FANG (HUANG YAOFENG) , ID: S8730622D								
Main Claimant:	LING NGAIN CHOO , ID: S2625377B								
Vehicle Reg. No.:	SMD4699H	Date of Loss:	06/12/2018 17:00 - :59 [51 Months and 5 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D05697C02	Policy/Cover Note No.:	DMPCSN3074851800 (Comprehensive)						
Vehicle Reg. No. (Insured):	SJL7649B	Policy No. (Claimant):	5103591032						
		Excess:	S\$0.00						
Repairer:	Twincar Automotive Pte Ltd (HQ) 2 KAKI BUKIT AVEUNE 2 #01-17, 417921 Kaki Bukit - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Catherine Thia]								
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 21/12/2018]								
Driver/Custodian (Insured):	NG YEOW FANG (HUANG YAOFENG) (31 / Male), NRIC: S8730622D, Tel: +6588622868								
Adj Asg. Remarks:	NO EST, CASE W/O SJE.								
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

*SMD4699H (SNM18D05697C02)
[SJL7649B]
TP
LING NGAIN CHOO
Dec 6 2018 5:00PM
[MR NG YEOW FANG (HUANG YAOFENG)]
Twincar Automotive Pte Ltd

[Upload Documents](#)
[Upload Photos](#)
[Compose New Letter](#)

View View in Browser

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	National Assessment Centre Services (Ubi)		Thumbnail	Print
1	07/12/18 18:03	Accident Statement		Load HTM	

Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Finalized On	National Assessment Centre Services (Ubi)		Thumbnail	Print
1	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
2	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
3	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
4	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
5	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
6	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
7	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
8	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
9	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
10	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
11	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
12	07/12/18 17:11	Accident Photo <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>

No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	17/12/18 14:14	General View		Load PDF	

Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	12/12/18 17:11	PRS WITH TP GIA		Load PDF	
2	12/12/18 17:11	OI GIA		Load PDF	

No	Finalized On	National Assessment Centre Services (Ubi)		Thumbnail	Print
1	07/12/18 17:12	Accident Sketch Plan <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>
2	07/12/18 17:12	Accident Sketch Plan <small>[Linked Accident Report Documents]</small>		Load JPG	<input checked="" type="checkbox"/>

Linked Accident Report Documents

View View in Browser

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	National Assessment Centre Services (Ubi)		Thumbnail	Print
1	07/12/18 18:03	Accident Statement		Load HTM	

Photos/Images					
No	Finalized On	National Assessment Centre Services (Ubi)		Thumbnail	Print

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	National Assessment Centre Services (Ubi)	Thumbnail	Print
			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	National Assessment Centre Services (Ubi)	Thumbnail	Print
1	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
2	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
3	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
4	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
5	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
6	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
7	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
8	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
9	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
10	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
11	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
12	07/12/18 17:11	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	National Assessment Centre Services (Ubi)	Thumbnail	Print
1	07/12/18 17:12	Accident Sketch Plan	 Load JPG	<input checked="" type="checkbox"/>
2	07/12/18 17:12	Accident Sketch Plan	 Load JPG	<input checked="" type="checkbox"/>

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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/CTI18022392/GCD3E2

Date: 18/12/2018

REFERENCE

Handling Insurer: China Taiping Insurance
(Singapore) Pte. Ltd.

Policy No: DMPCSN3074851800

Claimant Vehicle
No: SMD4699HInsured Vehicle
No: SJL7649B

Date of Loss: 06/12/2018

Nature of Claim: TP

Claim
No: SNM18D05697C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SMD4699H

Make & Model: TOYOTA COROLLA ALTIS, 1.6 CVT (A)

Engine No: 1ZRY089657

Reg. Date: 01/09/2014 (Man. Year: 2014)

Chassis No: MR053REH104515150

Colour: Silver

Odometer: 84186 km

Engine Capacity: 1598 cc

Market Value/New Car Price: N/A

Sum Insured (\$\$): 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:	205/55 R16	Rear Tyre Size:	205/55 R16
Front Left Side:	Pirelli 6 mm	Rear Left Side:	Pirelli 6 mm
Front Right Side:	Pirelli 6 mm	Rear Right Side:	Pirelli 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 (\$\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 12/12/2018

Date Inspected: 13/12/2018 Inspected At:

Twincar Automotive Pte Ltd (HQ)
2 KAKI BUKIT AVEUNE 2 #01-17
Singapore 417921

Estimated Period of Repair: 4.0 days

Adjuster: XING GUO QIANG

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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,000.00 -\$3,000.00

REPAIR DETAILS

Reference		
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 18 Dec 2018)
Parts:	143	TOYOTA COROLLA ALTIS 1.6 CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SMD4699H)	
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 >