ASS. REC. BY Surveyor CWS

REF CS$FCI19001539/Uvd3-1 Special Instruction:

ASSIGNMENT (Office)

From (Person): Karen Tan of PCI Date/Time: ~~4:31pm@23/1/19~~ 28/3/2019.

Estimated Cost: Bill to:

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

To Inspect Vehicle No. SLU718K Insured: SHD3126K

at Workshop m/s TCK Hui Motor Tel: 6842 9089

of Ikaki Bkt Ave 6 # 01-54

Policy No: Claim No: D19000615MFSH

Sum Insured: Excess:

Make of Veh (Client's Record): D.O.A. 20/01/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 12:19pm@23/1/19 Person Contacted: Connie Vehicle IN / OUT

Date/Time	Action/Instruction
	(X) Estimate
	SLU718K - X
	SHD3126K - CS$FCI19001154/Rlqbm2 DOA 27/12/2016
27/3/19	LS $5300 confirmed (Red 11,782.20, 6990), 4 days

RECEIVED 2 8 MAR 2019

ASS. REC. BY Marcus | REF: Fa /

ASSIGNMENT

From: Date:
Estimated Cost:
OD / TP / WS / TP RES / OD RES / EVA / INV / NA
To Inspect Vehicle No: SLU718K
at Workshop nam: Tuck Lin
of:
Insured:
Policy No:
Claims No:
Sum Insured: Excess:
(Client's Report)
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: 426K
IDAC Accident Rport: Consistent? : Yes or No
GIA / IPR Seen: Consistent? : Yes or No
Est. Repairs: days RES: Yes Or No
Lum Sum: % S.Val: Yes or No
CA / REV / REP. / 24 HRS LTA121843
Vehicle: IN / OUT
Date: Person Contacted:

Veh No: SLU718K Yr Regn: 1/1/17
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / (A) Truck / Trailer or
Make: Porsche 718 cayman S-A 1988
Colour: Blue A/C: Insured / Std / NI / NA
Sp Reading: 23583 T/Radio: Insured / Std / NI / NA
Eng No:
Chas: WP0ZZZ98ZJK250680
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: 245/30ZR21
R: 265/30ZR21
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

	Front		Rear	
R/Bal	7	mm	7	mm
L/Bal	7	mm	7	mm
	D.O.A. 20/1/19		D.O.I. 23/1/19	

Survey held at:
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or O/S Rear
The U/C / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	Ms Cheryl
	original result out.

Date/Time File Pass to? : Prell. Report
: Final Report
Date/Time File Return to?

Days Of Repair:
Resurvey No. of Trip: 1

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

Survey Fee
Transportation
__S + RS__S
Photos
Others
TOTAL

Report Format: PRE
Lump Sum / I.B.I: (S$)

MSME19008854 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 21/01/2019 15:48
SUBMITTED BY: Chia Pei Ying

SINGAPORE ACCIDENT STATEMENT

159 Tick Hai Motor

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy 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	21/01/2019 15:48
Date Of Accident	20/01/2019 15:35
Exact Location Of Accident	ORCHARD RD /BUYONG RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU718K
Insured/Policyholder	
Name Of Registered Owner	KEEVE TAN BOON KIN
NRIC No	S8334045B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91068913
Alternative Phone No	OFFICE-91068913
Vehicle Particulars	
Manufacturer	PORSCHE
Model	718 CAYMAN S-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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2017-00008612-01
Cover Note Number	
Driver	
Name of Driver	KEEVE TAN BOON KIN
NRIC No	S8334045B
Date Of Birth	08/11/1983
Occupation	INDOOR
Date Of Driving Pass	29/08/2003
Driving Experience	15 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91068913
Fax Number	
Contact Number	OFFICE-91068913
EMail Address	NOEMAIL

Address	BLK 310A PUNGGOL WALK #11-534
Postcode	821310
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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 (including own vehicle) 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)	2
Passenger 1	NAME: : ELSIE TAN YU ROU 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

I WAS DRIVING ALONG BUYONG ROAD. SUDDENLY, VEHICLE B CUT INTO MY LANE RESULTING IN HITTING ONTO THE REAR RIGHT FENDER AND RIM OF MY VEHICLE.

Attachment(s)

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

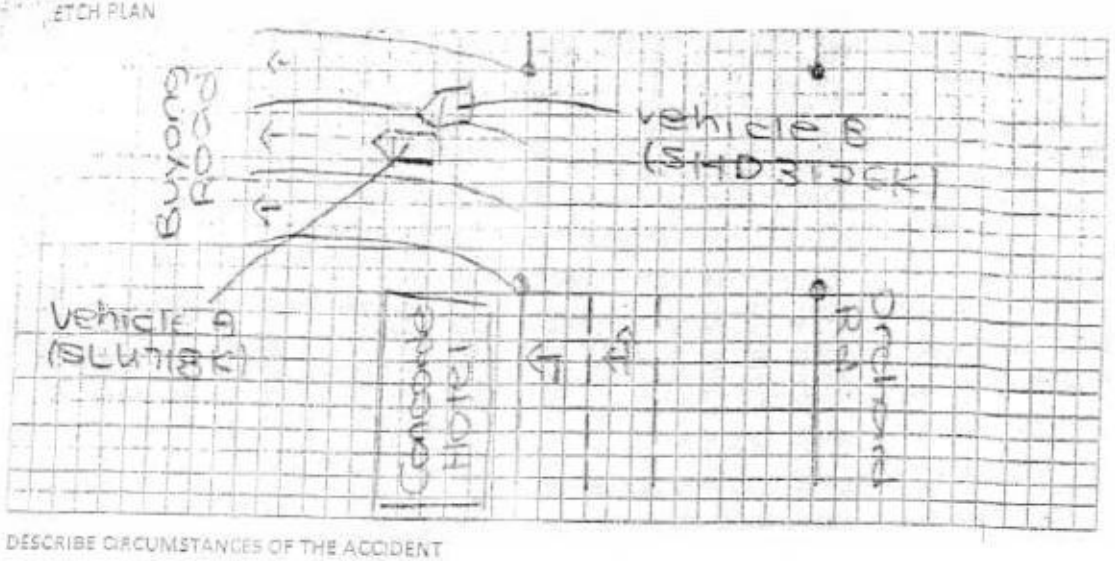
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD3126K
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	TAXI
Name of Driver	ANG CHIEW KOON
NRIC/Passport Number	S7012932I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Buyong Rd Suddenly, vehicle B cut into my lane resulting in hitting onto the rear right hand fender and rim of my vehicle

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:

21/1/19 @ 10.40AM
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 1

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 police 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 Personnel's Signature
Name:
NRIC/FIN No.:

ACO HAI

159 TICK HAI MOTOR
1 KAKI BUKIT AVE 6 #01-20 SINGAPORE 417883
TEL: 6842 9089 FAX: 6841 2869
REG NO : 53033608A

Vehicle Number: SLU718K
Vehicle Model : Porsche 718 Cayman S-A
Manufacturing Year : 2017
Chassis : WP0ZZZ98ZJK250680

S/N.	Item Description		Amount ($)
1	Rear Tie Rod (RH)		$ 609.90
2	Rear Track Control Arm (RH)		$ 1,524.75
3	Rear Upper Arm (RH)		$ 1,316.10
4	Rear Knuckle Arm (RH)		$ 1,605.00
5	Rear Knuckle Bearing (RH)		$ 256.80
6	Rear Shock Absorber Assy (RH)		$ 1,990.20
7	Rear Linkage (RH)		$ 296.93
8	Rear Side Skirt (RH)		$ 866.70
9	Rear Side Skirt Grille (RH)		$ 296.93
10	Rear Fender Inner Garnish (RH)		$ 288.90
		Total :	**$ 9,052.20**

S/N	Special Nett Item		Amount ($)
1	Rear Tyre (RH)		$ 950.00
2	Tyre Rim (RH)		$ 2,800.00
3	Car Sticker x 2 pcs		$ 1,500.00
		Amount :	**$ 5,250.00**

Labour	Amount ($)
To conduct 4-wheel alignment ~~x 2 times~~	$ 240.00
To use computer diagnostic and resetting	$ 380.00
To remove & reinstall rear undercarriage	$ 680.00
Labour to remove, cut, change & panel beating	$ 980.00
To putty and respray affected areas	$ 500.00
Labour Total :	**$ 2,780.00**
Total (Parts & Labour)	**$ 17,082.20**

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 : CS3/FCI19001539/Uvd3s2-1

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 29-03-2019

Code : FCI2

1.	Policy Particulars :- THIRD PARTY CLAIM			
	Insured Veh.	SHD 3126K	**Veh. Inspected**	SLU 718K
	Policy No.		**Coverage ($)**	0.00
	Claim No.	D19000615MFSH	**Excess ($)**	0.00
	Assign From	KAREN TAN	**Assign Date**	28/03/2019

2.	Vehicle Particulars & Condition			
	Make & Model	PORSCHE 718 CAYMAN S-A	**c.c**	1988
	Engine No.	HIDDEN	**Year of Reg.**	2017
	Chassis No.	WP0ZZZ98ZJK250680	**Colour**	BLUE
	Odometer	23583	**Steering**	IN ORDER
	Brakes	IN ORDER	**Modification**	SPORTS RIM
	General	GOOD		

3.	Conditions of Tyres			
		Size	**Make**	**Balance**
	R/H Front Tyre	245/30ZR21	MICHELIN	7 mm
	L/H Front Tyre	245/30ZR21	MICHELIN	7 mm
	R/H Rear Tyre	265/30ZR21	MICHELIN	7 mm
	L/H Rear Tyre	265/30ZR21	MICHELIN	7 mm

4.	Description of Damages
	THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. THE UNDERCARRIAGE AFFECTED DUE TO COLLISION. DAMAGES SEE DETAILS.

5.	General Information			
	Accident Date	20/01/2019	**Inspection Date**	23/01/2019
	Survey held at	TICK HAI MOTOR & WELDING SERVICES BLK 1 KAKI BUKIT AVE 6 #01-54 AUTOBAY @ KAKI BUKIT SINGAPORE 417883		

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:	**4 Working Days**

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLU 718K

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR TIE ROD (RH)	TWISTED	609.90	609.90
1	REAR TRACK CONTROL ARM (RH)	NOT NECESSARY	1,524.75	-
1	REAR UPPER ARM (RH)	NOT NECESSARY	1,316.10	-
1	REAR KNUCKLE ARM (RH)	BENT	1,605.00	1,605.00
1	REAR KNUCKLE BEARING (RH)	DAMAGED	256.80	256.80
1	REAR SHOCK ABSORBER ASSY (RH)	SERVICEABLE	1,990.20	-
1	REAR LINKAGE (RH)	NOT NECESSARY	296.93	-
1	REAR SIDE SKIRT (RH)	CUT / CRACKED	866.70	866.70
1	REAR SIDE SKIRT GRILLE (RH)	SCRATCHED	296.93	296.93
1	REAR FENDER INNER GARNISH (RH)	NOT NECESSARY	288.90	-
	LESS 10% DISCOUNT		-	-363.53
			9,052.21	3,271.80
	SPECIAL NETT ITEMS			
1	REAR TYRE (RH) (LOCAL PURCHASE) (@ $500.00 DISC 70%) (SN)	CUT	950.00	350.00
1	TYRE RIM (RH) (21 INCH) (SN)	DENTED / BENT	2,800.00	1,200.00
2	CAR STICKER (SN)	NECESSARY	1,500.00	600.00
			5,250.00	2,150.00
	LABOUR			
	TO CONDUCT 4-WHEEL ALIGNMENT.		240.00	120.00
	TO USE COMPUTER DIAGNOSTIC AND RESETTING.		380.00	80.00
	TO REMOVE & REINSTALL REAR UNDERCARRIAGE.		680.00	150.00
	LABOUR TO REMOVE, CUT, CHANGE & PANEL BEATING.		980.00	600.00
	TO PUTTY AND RESPRAY AFFECTED AREAS.		500.00	300.00
			-	-
			-	-
			-	-
			2,780.00	1,250.00
	GRAND TOTAL		**17,082.21**	**6,671.80**

Report Ref No. CS3/FCI19001539/Uvd3s2-1

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**5,300.00**

Report Ref No. CS3/FCI19001539/Uvd3s2-1

CHUA KANG SENG

Licensed Appraiser