

22/03/2002

ASS. REC. BY:

REF: CS/FC119005953/RI+d307 Special Instruction:

Surveyor: Rasu ASSIGNMENT (Office)CWS From (Person): SITHARA of FCI Date/Time: 3.4.19 5.39p.m

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKP 6731U Insured: SHC 0205Rat Workshop m/s Juzz Performance Tel: 63850303of 8 kati Bukit Ave 4 #03-51/52 premierPolicy No: Claim No: D19002255 MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 01.04.2019
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP" H.O.D. Endorsement:

Date/Time: 4.4.19 10.31a.m Person Contacted: Fira Vehicle IN/OUT: IN

Date/Time	Action/Instruction (✓) Estimate
	SKP 6731U - X
	SHC 0205R - X
09/4/19 @ 4.03pm revised to Sithara by email.	
Confirm lump sum \$17007 Cred: 17513.30; 71%.	

REF: FCI

88864

ASSIGNMENT

pls call before going.

From: Date: 8/4/19

Estimated Cost:

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

To Inspect Vehicle No: SKP 67314
at Workshop m/s: Juzz Performance
of: 8/Calci Bulat Ave 4 #03-51/52
Insured: Premier

Policy No.

Claims No.

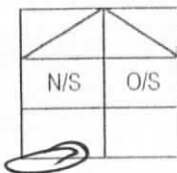
Sum Insured: Excess:

(Client's Record)

Make of Veh: 9640 89740 Anwar
After lunch

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 6 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS up

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SKP 67314 Yr Regn: 2014 / 10/4

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

Truck / Trailer or

Make: B.M.W X3 XDRIVE 201 C.C. 1997

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

Sp. Reading: 51778 T/Radio: Insured / Std / NI / NA

Eng/No: WX

C/No: WBA 320800B27910

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: 245/50R18
R:

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

TOYO / YOKO or

Front

Rear

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

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

D.O.A. 01/04/19 D.O.I. 08/04/19

Survey held at: JUZZ PERFORMANCE

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

REAR N/S

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

Date / Time Action / Instruction

Rasul, Pls check parts prices.

RECEIVED 24 APR 2019

10/4

Date/Time, File Pass to?

ally Tupist

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.I: (\$ 7000/-)

Days Of Repair: 6

Resurvey No. of Trip: 1

Add Fee: Site Insp (\$)

Interview (\$)

Tech. Invs (\$)

Weekend (\$)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

16 x 19 = 210

170 + 210

50

50

48

528

MOTOR SURVEY ASSIGNMENT

Date	03-04-2019	Our Ref No. D19002255MFSH
Accident Date	01-04-2019	Claim Type. Third Party
Insured Vehicle	SHC0205R	Third Party Vehicle. SKP6731U
Survey Location	8 KAKI BUKIT AVE 4 #03-51/52 PREMIER @ KAKI BUKIT	
Contact Person.	FIRA	
Contact No.	63850303/ 0	Fax No. 63857038
Survey Type	WITHOUT PREJUDICE:	10.319.4m V. out G. X P. Fira
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	JUZZ PERFORMANCE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	SITHARA	

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.

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Tuesday, 9 April 2019 4:03 PM
To: 'CWS Motor Claims'; assignments
Cc: 'Sithara'; SUR
Subject: RE: SURVEY ASSESSMENT - D19002255MFSH/1
Attachments: CSFCI19005953R1td3.pdf

Dear Sithara,

Enclosed herewith preliminary advice of SKP 6731U.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

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

From: Admin-D (LKKAUTO)
Sent: Thursday, 4 April 2019 10:37 AM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Sithara' <Sithara@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19002255MFSH/1

Dear Sir / Mdm,

Thank you for the assignment.

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

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]
Sent: Wednesday, 3 April, 2019 5:39 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Sithara <Sithara@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19002255MFSH/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.



Auto
Consultants
Pte Ltd

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

Your Ref: D19002255MFSH

Date: 09 April 2019

Our Ref: CS/FCI19005953/R1td3

The Motor Claims Department
MS First Capital Insurance Ltd

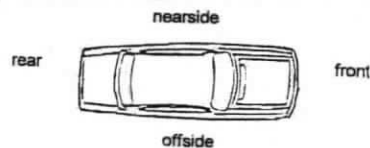
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SKP 6731U .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 08/04/2019 at the premises of M/s JUZZ PERFORMANCE. and have the following to report:-

Workshop Estimate Amount	: S\$ 24,513.30 .
Revised Estimate Amount	: S\$ 15,192.30 .
"Check" Items Amount	: S\$ - .
Market Value	: S\$ - .
LTA Reimbursement Value	: S\$ - .
Nett Value	: S\$ - .

Description of Damage:
The vehicle sustained damages
at the rear n/s portion.



Yours faithfully

Rasul
Automotive Assessor

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	02/04/2019 08:47
Date Of Accident	01/04/2019 16:00
Exact Location Of Accident	NORTH BRIDGE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP6731U
Insured/Policyholder	
Name Of Registered Owner	NOORJANNAH BTE ABOOBAKER
NRIC No	S7138886G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90061610
Alternative Phone No	OFFICE-90061610

Vehicle Particulars

Manufacturer	BMW
Model	X3 XDRIVE20I ABS 4WD HID DSC SR NAV
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	9VPCP1853510 (COMP)
Cover Note Number	

Driver

Name of Driver	NOORJANNAH BTE ABOOBAKER
NRIC No	S7138886G
Date Of Birth	10/11/1971
Occupation	INDOOR
Date Of Driving Pass	01/01/1999
Driving Experience	20 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90061610
Fax Number	
Contact Number	OFFICE-90061610
Email Address	NOEMAIL

Address	544 EAST COAST ROAD
Postcode	458972
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 - HEAD TO REAR
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	4
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

REFER TO SKETCH PLAN ATTACHED

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	SHC205R
Vehicle Make/Model/Colour	HYUNDAI I40 1.7L CRDI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLW7610E
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Vehicle Make/Model/Colour	BMW 318I
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)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKM707X
Vehicle Make/Model/Colour	TOYOTA VELLFIRE 2.4Z
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	
NRIC/Passport Number	
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.

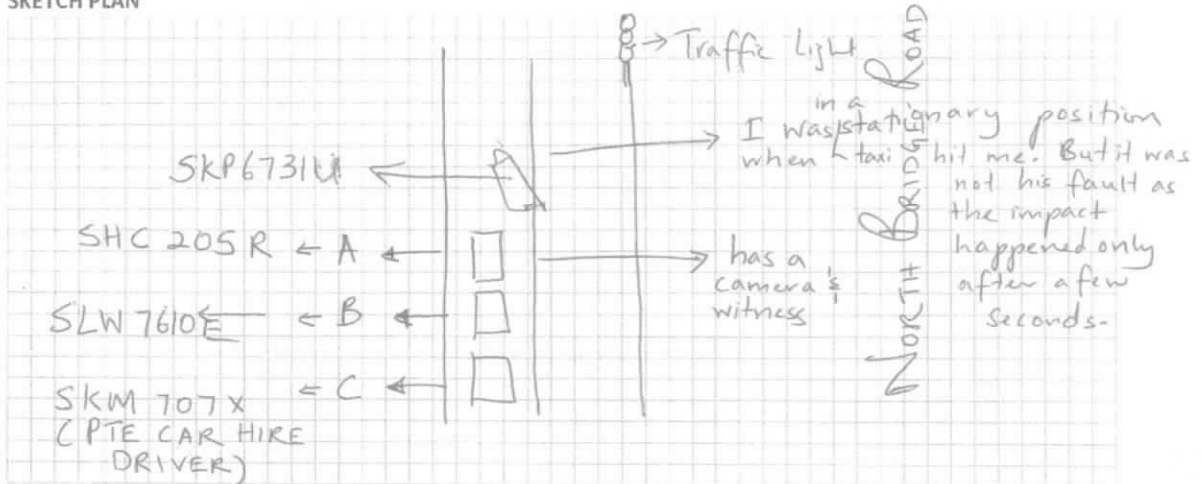
Policyholder's Signature
Date & Time:

- 2 APR 2019

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: workb@singast.com.sg
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 1 April 2019 at 4pm along North Bridge Road, I was driving in a normal way and in accordance to the required speed limit.

When approaching a traffic light, I slowed down and my car came to a complete stop as I filtered to my left lane.

I wish to write here categorically that I did not jam my brake. My car came to a complete stop due to the traffic lights.

Whilst my car was stationary for about 5 seconds, a taxi hit me from behind and after I stepped out, I saw there were two other cars behind the taxi driver. The taxi driver is Mr Liam and taxiplate no is SHC 205R.

The taxi driver did not hit me immediately when my car was first stationary but it hit me about 5 seconds AFTER as

DECLARATION

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

- 2 APR 2019

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.:

Describe Circumstances of the Accident

^{was} it caused by the impact from the other cars hitting the taxi from behind him. Hence, Mr Liam was not directly the party that hit my car.

Mr Liam the taxi driver has a camera in his car and it would show the sequence of what happened.

The car immediately behind Mr Liam is Ms Rosie's vehicle. Her licence plate no is SLW 7610E.

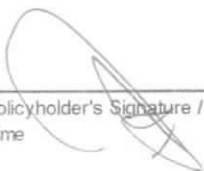
The car behind Ms Rosie is Kevin Tan Song Kim. Kevin is a private hire car driver.

Declaration

We declare the foregoing particulars are true in every respect.

- 2 APR 2019

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

Witnessed by Reporting Centre Personnel

JUZZPERFORMANCE

Co Reg No: 201534963C
8 Kaki Bukit Avenue 4
#03-51/52 Premier@Kaki Bukit
Singapore 415875
Email: admin@juzzperformance.com.sg /

TO	: First Capital Insurance Ltd	DATE	: 8-Apr-19
ATTENTION	: MOTOR CLAIMS DEPT	JOB TYPE	: T/P CLAIM
ESTIMATE REPORT	:		
OWNER'S PARTICULAR		VEHICLE DETAILS	
NAME	: NOORJANNAH BTE ABOOBAKER	VEHICLE NO	: SKP6731U
ADDRESS	: 544 EAST COAST ROAD Singapore 458972	MODEL	: BMW X3
TEL. NO.	: 90061610	CHASSIS NO	: OB27910
OWNER'S INSURANCE :			
ACCIDENT DETAILS	DATE : 1-Apr-19		
	TIME : 16:00		
THIRD PARTY REQUESTOR / CONTACT :			

QUOTATION SUMMARY

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	TAILGATE <i>BA</i>	1	\$ 3,125.80	\$ 3,125.80
2	TAILGATE UPPER LOCK <i>X nm</i>	1	\$ 321.00	\$ 321.00
3	TAILGATE LOGO <i>nm</i>	1	\$ 112.00	\$ 112.00
4	TAIL GATE EMBLEM 'X3' <i>nm</i>	1	\$ 98.00	\$ 98.00
5	TAILGATE WEATHER STRIP <i>cut</i>	1	\$ 298.00	\$ 298.00
6	TAILGATE INNER TRIM <i>X nm</i>	1	\$ 398.00	\$ 398.00
7	TAILGATE LOWER LOCK <i>X nm</i>	2	\$ 268.00	\$ 536.00
8	REAR BUMPER <i>DE</i>	1	\$ 1,989.00	\$ 1,989.00
9	REAR BUMPER (LOWER) <i>cut</i>	<i>1pc</i>	\$ 689.00	\$ 1,378.00
10	REAR BUMPER CENTER BRACKET <i>CR4</i>	1	\$ 298.50	\$ 298.50
11	REAR BUMPER SIDE BRACKET <i>CR4</i>	<i>1pc</i>	\$ 154.00	\$ 308.00
12	REAR BUMPER REINFORCEMENT <i>BA</i>	1	\$ 768.00	\$ 768.00
13	REAR BUMPER SIDE REATINER <i>X nm</i>	2	\$ 215.00	\$ 430.00
14	REAR BUMPER TOWING COVER <i>X nm</i>	2	\$ 52.00	\$ 104.00
15	REAR BUMPER REFLECTOR (LEFT HAND) <i>CR4</i>	1	\$ 48.00	\$ 48.00
16	TAILLAMP (LEFT HAND) <i>X nm</i>	1	\$ 589.00	\$ 589.00
17	TAILLAMP SIDE GARNISH (LEFT HAND) <i>X nm</i>	1	\$ 120.00	\$ 120.00

LH
LH

1765

68

61

1400

239

110

126

689

4804

2185

18	TAILLAMP LOWER BRACKET X nm	2	\$	185.00	\$	370.00
19	REAR FENDER INNER COWLING X nm	2	\$	190.00	\$	380.00
20	REAR FENDER INNER TRIM X nm	2	\$	750.00	\$	1,500.00
21	REAR FENDER OUTER WHEEL ARC (LEFT HAND) X nm	2	\$	321.00	\$	642.00
22	REAR END PANEL (OUTER) 64 ✓	1	\$	1,135.00	\$	1,135.00
23	REAR END PANEL TOP GARNISH X nm	1	\$	298.00	\$	298.00
24	REAR END PANEL FEXIBLE GARNISH (TOP) X nm	1	\$	398.00	\$	398.00
25	REAR EXHAUST MOUNTING cut ✓ 1pc ✓	2	\$	48.00	\$	96.00
26	REAR EXHAUST GARNISH X nm	1	\$	62.00	\$	124.00
27	REAR EXHAUST HEAT SHIELD 84 ✓	2	\$	324.00	\$	648.00
28	REAR EXHAUST PIPE 84 ✓	1	\$	2,948.00	\$	2,948.00

TOTAL PRICE \$19,460.30

LESS 0% \$ -

SUB TOTAL PRICE \$19,460.30

6989
596
6639.55

497

48

155
1485

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	REAR NUMBER PLATE X nm	1	\$50.00	\$50.00
2	REAR BUMPER CLIPS nm ✓	8	\$6.50	\$52.00
3	TAILGATE UPPER SEALANT X nm	1	\$80.00	\$80.00
4	TAILGATE LOWER SEALANT X nm	1	\$60.00	\$60.00
5	TAILGATE LOWER INNER TRIM CLIPS X nm	8	\$6.50	\$52.00
6	REAR FENDER INNER TRIM CLIPS X nm	20	\$6.50	\$130.00
7	REAR FENDER INNER COWLING CLIP X nm	18	\$6.50	\$117.00
8	REAR FENDER WHEEL ARC CLIPS X nm	12	\$6.50	\$78.00
9	REAR END PANEL TOP GARNISH CLIPS nm ✓	4	\$8.50	\$34.00
10	REAR END PANEL SEALANT nm ✓	1	\$150.00	\$150.00
11	REAR REVERSE SENSOR nm ✓	1	\$350.00	\$350.00

TOTAL \$1,153.00

60

250

345

CLAIM DETAILS: LABOUR AND SPRAY PAINTING

1	TO PANEL BEAT, REMOVE AND REPLACE PARTS	\$1,600.00	200800
2	TO SPRAY PAINT AFFECTED AREA	\$1,200.00	600700
3	TUFF COAT	\$250.00	40
4	WIRING AND BULB CHECK	\$80.00	X nm
5	REMOVE AND REFIX CUSHION SEAT/UPHOLSTRY TO FACILIATE REPAIR	\$300.00	80

6	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING	\$80.00	60	
7	TRANSFER TAILGATE MECHANISM (UPPER AND LOWER)	\$180.00	60	
8	CONDUCT WATER LEAKAGE TEST	\$80.00	X	
9	REMOVE AND REFIX REAR EXHAUST PIPE	\$150.00	60	

TOTAL

\$3,900.00

1800

ESTIMATE REPORT

TOTAL PARTS COST : \$20,613.30
TOTAL LABOUR COST : \$3,900.00
TOTAL REPAIR COST : \$24,513.30

APPROVED DETAILS

EXCESS :
NO. OF WORKING DAY: 6 days
RE-SURVEY :
PART BY PART OR LUMP SUM :
DATE & TIME OF SURVEY :
SURVEYED BY :
CONTACT NUMBER :
FAX NUMBER :

08/04/18 @ 1450
RASUL
90010068

10/4/19

Revy after repv

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:

6639.55

345.00

1800.00

8784.55

20%

7027.64

4/8-7000

6 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

Affiliated to Federation Internationale Des Experts En Automobile				
MS FIRST CAPITAL INSURANCE LTD			Ref : CS/FCI19005953/R1td3e2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 07-05-2019	
			Code : FCI2	
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SHC 205R	Veh. Inspected	SKP 6731U	
Policy No.		Coverage (\$)	0.00	
Claim No.	D19002255MFSH	Excess (\$)	0.00	
Assign From	SITHARA	Assign Date	03/04/2019	
2. Vehicle Particulars & Condition				
Make & Model	B.M.W. X3 XDRIVE20I	c.c	1997	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	WBAWX320800B27910	Colour	WHITE	
Odometer	51778	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	245/50 R18	PIRELLI	6 mm	
L/H Front Tyre	245/50 R18	PIRELLI	6 mm	
R/H Rear Tyre	245/50 R18	PIRELLI	6 mm	
L/H Rear Tyre	245/50 R18	PIRELLI	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	01/04/2019	Inspection Date	08/04/2019	
Survey held at	JUZZ PERFORMANCE PTE LTD 8 KAKI BUKIT AVENUE 4 #03-51/52 PREMIER @ KAKI BUKIT SINGAPORE 415875			
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

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

Page No.:1 of 3

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKP 6731U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	TAILGATE	BENT	3,125.80	1,765.00
1	TAILGATE UPPER LOCK	NOT NECESSARY	321.00	-
1	TAILGATE LOGO	NECESSARY	112.00	68.00
1	TAIL GATE EMBLEM 'X3'	NECESSARY	98.00	61.00
1	TAILGATE WEATHER STRIP	CUT	298.00	298.00
1	TAILGATE INNER TRIM	NOT NECESSARY	398.00	-
2	TAILGATE LOWER LOCK @\$268.00	NOT NECESSARY	536.00	-
1	REAR BUMPER	DEFORMED	1,989.00	1,400.00
2	REAR BUMPER (LOWER) @\$689.00	CUT-1PC ONLY	1,378.00	239.00
1	REAR BUMPER CENTER BRACKET	CRACKED	298.50	110.00
2	REAR BUMPER SIDE BRACKET @\$154.00	CRACKED-1PC ONLY	308.00	126.00
1	REAR BUMPER REINFORCEMENT	BENT	768.00	689.00
2	REAR BUMPER SIDE REATINER @\$215.00	NOT NECESSARY	430.00	-
2	REAR BUMPER TOWING COVER @\$52.00	NOT NECESSARY	104.00	-
1	REAR BUMPER REFLECTOR (LEFT HAND)	CRACKED	48.00	48.00
1	TAILLAMP (LEFT HAND)	NOT NECESSARY	589.00	-
1	TAILLAMP SIDE GARNISH (LEFT HAND)	NOT NECESSARY	120.00	-
2	TAILLAMP LOWER BRACKET @\$185.00	NOT NECESSARY	370.00	-
2	REAR FENDER INNER COWLING @\$190.00	NOT NECESSARY	380.00	-
2	REAR FENDER INNER TRIM @\$750.00	NOT NECESSARY	1,500.00	-
2	REAR FENDER OUTER WHEEL ARC (LEFT HAND) @\$321.00	NOT NECESSARY	642.00	-
1	REAR END PANEL (OUTER)	BENT	1,135.00	497.00
1	REAR END PANEL TOP GARNISH	NOT NECESSARY	298.00	-
1	REAR END PANEL FEXIBLE GARNISH (TOP)	NOT NECESSARY	398.00	-
2	REAR EXHAUST MOUNTING @\$48.00	CUT-1PC ONLY	96.00	48.00
1	REAR EXHAUST GARNISH	NOT NECESSARY	124.00	-
2	REAR EXHAUST HEAT SHIELD @\$324.00	BENT	648.00	155.00
1	REAR EXHAUST PIPE	BENT	2,948.00	1,485.00

Report Ref No. CS/FCI19005953/R1td3e2



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Page No.:2 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 5% DISCOUNT		-	-349.45
			19,460.30	6,639.55
	<u>SPECIAL NETT ITEMS</u>			
1	REAR NUMBER PLATE (SN)	NOT NECESSARY	50.00	-
8	REAR BUMPER CLIPS @\$6.50 (SN)	NECESSARY	52.00	52.00
1	TAILGATE UPPER SEALANT (SN)	NOT NECESSARY	80.00	-
1	TAILGATE LOWER SEALANT (SN)	NOT NECESSARY	60.00	-
8	TAILGATE LOWER INNER TRIM CLIPS @\$6.50 (SN)	NOT NECESSARY	52.00	-
20	REAR FENDER INNER TRIM CLIPS @\$6.50 (SN)	NOT NECESSARY	130.00	-
18	REAR FENDER INNER COWLING CLIP @\$6.50 (SN)	NOT NECESSARY	117.00	-
12	REAR FENDER WHEEL ARC CLIPS @\$6.50 (SN)	NOT NECESSARY	78.00	-
4	REAR END PANEL TOP GARNISH CLIPS @\$8.50 (SN)	NECESSARY	34.00	34.00
1	REAR END PANEL SEALANT (SN)	NECESSARY	150.00	60.00
1	REAR REVERSE SENSOR (SN)	NOT WORKING	350.00	250.00
			1,153.00	396.00
	<u>LABOUR</u>			
	TO PANEL BEAT, REMOVE AND REPLACE PARTS.		1,600.00	800.00
	TO SPRAY PAINT AFFECTED AREA.		1,200.00	700.00
	TUFF COAT.		250.00	40.00
	WIRING AND BULB CHECK.	NOT NECESSARY	80.00	-
	REMOVE AND REFIX CUSHION SEAT / UPHOLSTRY TO FACILITATE REPAIR.		300.00	80.00
	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING.		80.00	60.00
	TRANSFER TAILGATE MECHANISM (UPPER AND LOWER)		160.00	60.00
	CONDUCT WATER LEAKAGE TEST.	NOT NECESSARY	80.00	-
	REMOVE AND REFIX REAR EXHAUST PIPE.		150.00	60.00
			-	-
			-	-
			-	-
			3,900.00	1,800.00
	GRAND TOTAL		24,513.30	8,835.55

Report Ref No. CS/FCI19005953/R1td3e2



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				7,000.00
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Report Ref No. CS/FCI19005953/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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