Estimated Co	il striley deu	D23 D2/ Jq LENT (Office) Billing	d34 = 101 harmonium [1012] [1012] 9 4 2019	- 1
To Inspect V at Workshop of	chicle No. SIT 256- Hendon Av. 280 woodlends Ind. P	os D Yomofixe ok 65# 0	Tel 9459285	
Sum Instruct. Make of Veh	Total American	Clum No:	M 07 (8/2067)	
CA / REV Date/Time: 5	1 REP. 7 REV 24 HRS Up? 5-38pm (3) 6/12/18 Person Contacted	Lynn	D.O.A 22/12/18 27/12/18 H.O.D. Endorment Vehicle (18) OUT	
Date/Time	Action/Instruction () Estimate SLT0564D - ×		venice (Gyr.Dill)	
vlylin	Dismontle 25/12/2018 @ 2. Fulorust 64 & 3700, 6 des	3.5pm 12 (Red \$	718, 24. B	Hu
	MV 812-5Klest); yr:	8640 , NV	\$ 3860	

ENVIRON AME di	REF:					
PRS (Meximen		25016	17/11/28			
Estimated Cost	FG etal		per MO / M. Cycle / Bus		Prime Mover I	
OD (TV) WS / TP RES / O			Truck / Trailer or		cz 158	0/
To inspect Vehicle No.	817 256	54D M	like Suzuki	Swift	Insured / Std /	
ut.Workshop.nvs	Hendon A	atomotive o	ricur Yellow	betani	Insured / Std	
of Deal Modeling	s Ind-park Es =	101-19	p Reading 12535	.7		1017.000
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Chime No.			ion Cont Good Fair / Po			
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(Client's Record)		В	(/-	/Leaked/Burnt or		
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(Poicy Condition)			R:			
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GIA / PR Seen	Consistent? : Yo	W. 307 (8.507)	7 7	mm L/Bat.	Ь	mm
Est. Repairs:	days Res Ye	s or No	DOA 22 12 18	0.01		& esistpu
Lum Sum	% 3 Val. Yes		Survey hold at	Hendon Auto		
CA / REV / REP.	24 HRS CLUPS	Vehicle IN / OUT	Des. of Damages : Frt 1 K			
Diale: P	erson Contacted		The U/C / Chassis fra	me / Body Structur	e affected due l	io collision
	/ Instruction					
	\$12,500					
	#8640 #3860					
NV-	42800					
	-					
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b:		74	4110,00031			
	PEG	*	Tech boys (\$	1.000	1	10
Report Format :	PRS	2-			1	10

Nivitha (LKK Auto)

From:

Stanley Lai <stanley.lai@iii.com.sg>

Sent:

Tuesday, 9 April 2019 2:34 PM

To:

Admin-D (LKKAuto); 'sur@lkkauto.com'

Cc:

Sherini Pillai; Mekavathanan Sarangapani; Hsiao Tong (chewht@lkkauto.com); Olivia

Lau (olivialau@lkkauto.com)

Subject:

RE: MCT18120671

Dear Sir/Mdm,

Rights granted in Merimen for the above LOD. Kindly proceed with the paper survey.

TP Veh No.: SLT2564D

Warmest regards, Stanley Lai

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

S&P 'A-' rated Company



From: Mekavathanan Sarangapani Sent: Monday, 8 April, 2019 8:20 AM

To: Hsiao Tong (chewht@lkkauto.com) <chewht@lkkauto.com>; Olivia Lau (olivialau@lkkauto.com)

<olivialau@lkkauto.com>

Cc: Stanley Lai <stanley.lai@iii.com.sg>; Sherini Pillai <sherini@iii.com.sg>

Subject: MCT18120671

LOD from TP lwyer Advance Law

Paper survey please

TP asking fo S\$ 5K odd ?? 2008 vehicle

Meka

met/18/20671

RESERVES	7,0,	17130071	
TPPD	PRESERVE	(414)	
TPPI	PRESERVE		
UNINSURED LOSS	PRESERVE		
SUBRO	PRESERVE		
LPPN		P 5~y	
INVESTIGATION FEE			
SURVEY FEES			
LEGAL FEES			
OTHERS			
FRAUD CHECK			
UPLOAD TO MERIMEN			
GRANT RIGHTS			

************* TX REPORT ****************

TRANSMISSION OK

TX/RX NO RECIPIENT ADDRESS

DESTINATION ID

ST. TIME TIME USE PAGES SENT RESULT

0357 62585521

27/03 14:40

00'22 1 OK

FAXED 2 7 MAR 2019 MOTCLM DEPT

430 Larong 6 Toe Payo #11-01 Orangetee Building Singapore 319402

Tel: (65) 6323 5488 (5 lines) (65) 6258 5521 (65) 6225 7738

s Hours: Mon to Fri

BELLIVED

2 0 MAR 2019

9.00am to 6.00pm

Directors: DANNY TEO KIM SOON (MD) DAVID HK FONES

SIM HUI SHIEN, ADELINE

TAN SHU HUA VANESSA

Consultanta WONG CHEE MUN

BY HAND

frinsured

SHD 4832ZZ

DT/mlc/100709/PD(st)(Hendor)

19 March 2019

India International Insurance Singapore 64 Cecil Street #04/05 & 06/02 IOB Building Singapore 049711

Attn: Motor Claims Department

Dear Sir

ACCIDENT INVOLVING SLT 2564D & SHD 4832ZZ ALONG CTE ON 22.12.18

We act for BAN KOK POH, the owner of SLT 2564D at the material time of the said accident.

We are instructed that the accident was caused by your/your insured's driver's negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

1. Costs of repairs (LUMP SUM) \$5,900.00 2. Loss of use (PRI - \$60 x 2) 120.00 \$ 900.00 3. Loss of use (\$60 x 15) 7.49 4. LTA search fee 698.00 Survey fee Costs \$ 700.00 80.00 Incidentals \$8,405,49

We enclose the following documents:-

- LTA search fee;
- Repair bill;
- Survey report together with invoice;

167/18/2067/. Aid 2067/.



Advocates & Solicitors Commissioner for Oaths Notary Public

UEN/GST Reg no.: 2013/0208H

N

our insured

Our ref

SHD 4832ZZ

DT/mlc/100709/PD(st)(Hendor)

19 March 2019

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430 Lorong 6 Toa Payoh

#11-01 Orangetee Building Singapore 319402

(65) 6225 7738

Business Hours: Mon to Fri

9.00am to 6.00pm

Tel: (65) 6323 5488 (5 lines) Fax: (65) 6258 5521

 Costs of repairs (LUMP SUM) \$5,900.00 Loss of use (PRI - \$60 x 2) S 120.00 Loss of use (\$60 x 15) S 900.00 LTA search fee S 7.49 Survey fee \$ 698.00 Costs 6. 700.00 S Incidentals 80.00 \$8,405.49

We enclose the following documents:-

LTA search fee;

Repair bill;

3. Survey report together with invoice;

Colour-scan photos of the damaged motorcar;

GIA and traffic report

Please note that you or your insured driver should send us an acknowledgement of receipt within 14 days of your receipt of your letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully,

ADVANCE LAW LLC

Directors: DANNY TEO KIM SOON (MD) DAVID HK FONES

Senior Associates: SIM HUI SHIEN, ADELINE

Associates:

TAN SHU HUA VANESSA

Consultant: WONG CHEE MUN

We do not accept service of sourt documents by fax transmission.

Ze 1 100152 128 33

2 C MAR 2019

BY HAND

NCT/1/1 2067 Asel 8herin

27/3/2019

Enquire Vehicle & Owner Information (Vehicle No. SHD4832Z As At 22 Dec 2018 / 10:45:00)

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

Company of Details

100709

Owner ID Type:

Company

Owner ID:

199303821R

Owner Name:

COMFORT TRANSPORTATION PTE LTD

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 383

Registered Street Name:

SIN MING DRIVE

Registered Unit No.:

Registered Building Name: GAS BUILDING

Registered Postal Code: DESCRIPTION OF THE PROPERTY. 575717

Vehicle No.:

5HD4832Z

) Make Description/Model: HYUNDAI / I40 1.7L CRDI AT ABS AIRBAG 4DR

Insurance Company Name: INDIA INT'L INS PTE LTD

HENDON AUTOMOTIVE PTE LTD

280 Woodlands Industrial Park E5, #01-19 Harvest @ Woodlands (S) 757322 Tel: 9459 2885 Fax: 6334 5178

Email: hendon.automotive@gmail.com

Date: 02/03/2019

OUR REF: TP/SLT 2564D/19

M/S :BAN KOK POH

BLK 181 PASIR RIS STREET 11

#06-16

SINGAPORE 510818

Statement Of Claim On Veh No: SLT 2564D

MODEL: SUZUKI SWIFT

LUMP SUM OF REPAIR

INCLUDING SUPPLY OF PARTS & LABOUR

PANEL BEATING & SPRAY PAINTING

\$5,900.00



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

0598B

Vehicle Details

Vehicle No:

SLT2564D

Vehicle to be Exported:

No

Intended Deregistration Date:

28 Dec 2018

Vehicle Make:

SUZUKI

Vehicle Model:

SWIFT 1.6 AT

Primary Colour:

Yellow

Manufacturing Year:

2008

Engine No.:

M16A1434871

Chassis No.:

JSAEZC31S00203409

Maximum Power Output:

92.0 kW (123 bhp)

Open Market Value:

\$17,252.00

Original Registration Date:

19 Feb 2009 19 Feb 2009

First Registration Date:

Transfer Count:

Actual ARF Paid:

\$17,252.00

862C

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

18 Feb 2019

PARF Rebate Amount:

\$8,626.00

Intended COE Rebate Details

COE Expiry Date:

18 Feb 2019

COE Category:

A - Car (1600cc & below)

COE Period(Years):

10

QP Paid:

\$1,020,00

COE Rebate Amount:

\$14.00

Total Rebate Amount:

\$8,640,00

The information contained herein is correct as at 28 Dec 2018

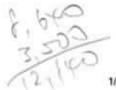
\$28800 (Sur LOE) - 48626= #20114

20174 - 60 = 336

672 + 8626 = 9298

9298-8640=#658(NU)

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.
- 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.
- 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

	ACCIDENT STATEMENT	
Date Of Report	24/12/2018 16:25	
Date Of Accident	22/12/2018 10:45	
Exact Location Of Accident	CENTRAL EXPRESSWAY	
Country/State of Loss	SINGAPORE	
Country/State of Loss	SINGAPORE	

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLT2564D

Insured/Pollcyholder

 Name Of Registered Owner
 BAN KOK POH

 NRIC No
 \$7210598B

 Email Address
 NOEMAIL

Mobile Phone No (LOCAL) +65-91904224
Alternative Phone No OFFICE-NOPHONE

Vehicle Particulars

Manufacturer SUZUKI
Model SWIFT 1.6 AT

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?

If No, Please state action to be taken THIRD PARTY
Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 170086648

Cover Note Number

Driver

Name of Driver GERMAINE BAN FANGYU

 NRIC No
 \$9608699G

 Date Of Birth
 17/02/1996

 Occupation
 INDOOR

 Date Of Driving Pass
 30/11/2017

Driving Experience 1 YEAR AND 0 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96548422

Fax Number Contact Number

EMail Address GERMAINEBAN@HOTMAIL.COM

Address

APT BLK 181 PASIR RIS STREET 11

#06-16

Postcode

510818

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

CHILDREN

General Information of the Accident

Insurance Company of Driver's Own Vehicle

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

YES

Was any body injured in the Accident?

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)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678

Police Station Address

ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO THE SKETCH PLAN

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

SHD4832Z

Vehicle Make/Model/Colour

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)

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.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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- 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.
- 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:
 - 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:
 - 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 34 (13/3018

4.30PM.

Reporting Centre Personnel's Signature Name:

NRIC/FIN No :

SKETCH PLAN

A: SLT 25640. B: SHD 48322	A	()	
	1 (1).	(K : 1	r k.
ESCRIBE CIRCUMSTANCES OF	W		. , , /

LICENSE PLATE: SLT 35440 ACCIDENT DATE & TIME: 32/13/18 10:45am CONTACT NUMBER: 96548422 E-MAIL ADDRESS: germainenan@hormail.com LOCATION: (Please refer to police report) NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION Please state: () Claim Own Policy () Claim Third Party Claim STP at other workshop () Reporting Only

DECLARATION

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

(If driver is not the policyholder) Date & Time: 84(18/2018

Reporting Centre Personnel's Signature Name:

NRIC/FIN No :





Police Station Of Origin:

Rochor N.P.C

11 Kampong Kapor Road SINGAPORE

208878

Tel No: 1800-2949999

1 of 3 Report No. T/20181224/2080

REPORT OF A TRAFFIC ACCIDENT

24/12/2018 15:33		nade:	Vide Report No.:	Station Diary No.: 118
Informan	t's Partice	ulars	2 1 - 27 1	
	nformant: NE BAN F		Address: APT BLK 181 PASIR RIS STI 510181	REET 11 #06-16 SINGAPORE
ID Type / NRIC NO	ID No.: / S960869	99G	Contact No.: Home/Office:	Mobile: 96548422
Nationality SINGAPO	y: DRE CITIZ	EN	Email:	
Sex: Female	Age: 22	Date of Birth: 17/02/1996	Type of Informant: Driver	-
Race: Chinese			Language:	Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3	Date of Expiry

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 22/12/2018 10:45	Type of Location Straight Road
Location: Along Road 1 CENTRAL EX Weather: Cloudy	Traveling Toward Ro KPRESSWAY	Road Surface:	R	oad Speed Limit
CIDUOY	Traffic Flow: Traffic Control:			
Traffic Flow:		Traffic Control: Not Controlled		raffic Volume:

Details of V	ehicle Invo	lved		1 00-		
Vehicle No.		Make	Model	Color	Condition	No of Passenger
SHD4832Z		HYUNDAI		Blue	Slightly Damaged	0
SLT2564D	Car	SUZUKI	Swift 1.6	Yellow	Seriously Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999 2 of 3 Report No. T/20161224/2060

CONTINUATION OF REPORT

Driver						
Name	GERMAINE BAN FANGYU			ID No	-	S9608699G
Related Vehicle	SLT2564D (Car)			Conta	ct No.	96548422
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			Class Drivin Licene Expin	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	23/12/2018	23/12/2018 Date Disc			23/12	2/2018
No. of Days gran	ted Medical Leave	05	Degree o		NIL	

Brief Details.

On 22/12/2018 I was travelling from my residential address to Park Infinia since 1015hrs. I was travelling about 20km/h along CTE (City) and was joining the merging lane towards Exit 7C from Seletar (TPE/SLE) Towards AYE Near Moulmein on the second lane. The vehicle in front of me was slowing down and as such, I had follow sult. Thereafter I felt an impact from the rear of my vehicle and my vehicle had inch forward about 1.5-2 meters away. However, my vehicle did not hit onto the rear of any vehicle in front of me

I then step out of my vehicle and made a check on my vehicle damaged. My vehicle exhaust pipe was shifted, the rear bumper clip was lose and my vehicle registration plate number was dented. In addition, the plate number holder was lose and the grill to rear had fallen apart.

The taxi driver (HP No: 98528285) had initially wanted to compensate S\$50 but I refused to. We had then exchanged numbers. On the day of the incident, no one was injured and no one was conveyed via ambulance. I had felt sharp pain on my back and as such went to the Ng Teng Fong General Hospital on 23/12/2018 and was issued with a outpatient sick leave from 23/12/2018 to 27/12/2018.

The taxi vehicle front plate registration were slightly cracked. I would like to state that I have installed in-car camera but I am not sure if it was recording.





Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999

3 of 3 Report No. T/20181224/2080

CONTINUATION OF REPORT

S	ke	tol	h	PI	ar	•
•	me	~				

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the <u>report number</u> as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
Sgt 3 NURUL ASHIGIN BINTI MOHD SHUKOR	Jacky
Signature Of Interpreter: Not applicable	Date/Time: 24/12/2018 15:33
Officer In Charge Of Case: TP / GIA /	Classification Of Case:
Staff Sgt WONG SIEU LUI Contact No.: 65476151	
Authentication Stamp	_
	-11/2

9 Joo Chiat Place Singapore 427743 HP: (65) 9833 1618 Fax: (65) 6747 1017 Email: treasureappraisal@gmail.com

Reg No: 53218791A



TAX INVOICE

Bill to: Ban Kok Poh

C/O : Hendon Automotive Pte Ltd

280 Woodlands Industrial Park E5 #01-19

Harvest @ Woodlands Singapore 757322

Tel: 9459 2885

Fax: 6334 5178

Contact: Lynn Sim

HP:

Invoice No : TAS-1812-1173 Date : 31-Dec-18

Report No : T-HD-181224/2564D

Terms : COD

S/N	Descriptions	An	nount (S\$)
1	Service Rendered In Respect of:	5	698.00
	Vehicle Number : SLT 2564 D		
	Vehicle Make/Model : Suzuki Swift		
	Date of Inspection : 26-Dec-18		
	Date of Accident : 22-Dec-18		
	Appraisal fees include transportation and follow-up inspection.		
	Submission of appraisal report by hand.		
	Photography services including storage of media and submission of color photograph copies by hand.		
	SINGAPORE DOLLARS SIX HUNDRED AND NINETY-EIGHT ONLY		
	Total	\$	698.00

E. ROF

All cheques should be crossed and made payable to "Treasure Appraisal Services".
All cheques should indicate our "Invoice No" on the reverse side of the cheque.

for Treasure Appraisal Services

9 Joo Chiat Place Singapore 427743 HP: (65) 9833 1618 Fax: (65) 6747 1017 Email: treasureappraisal@gmail.com

Reg No: 53218791A



VEHICLE ASSESSMENT REPORT

Report No

: T-HD-181224/2564D

Date

: 31-Dec-18

REFERENCE

Assigned By

: Ban Kok Poh

Name of Workshop

: Hendon Automotive Pte Ltd

Place of Inspection

: 280 Woodlands Industrial Park E5 #01-19 Harvest @ Woodlands Singapore 757322

Date of Assignment

: 24-Dec-18

Date of Accident

: 22-Dec-18

Date of Inspection

: 26-Dec-18

PARTICULARS OF DAMAGED VEHICLE

Vehicle Reg No

: SLT 2564 D

Chassis No

: JSAEZC31500203409

Year of Reg

: Feb-09

Odometer/km

: 125359

Make/Model

Engine No

: M16A1434871

Vehicle Colour

: Suzuki Swift

Engine Capacity

: 1586 cc

Vehicle Type

: Yellow : Hatchback

Transmission Type

: Auto

PRE-ACCIDENT CONDITION OF VEHICLE (STATIC TESTS ONLY)

General Condition

: Good

Body Paint Work

: Good

Footbrake

: Serviceable

Steering

: Serviceable

Handbrake

: Serviceable

Front Undercarriage

: Serviceable

Rear Undercarriage

: Serviceable

TIRES CONDITION		Tire Brand		Size	Tread Balance
Front RH	123	Yokohama	3	205/45 R17	80%
Rear RH	:	Yokohama	:	205/45 R17	80%
Front LH	:	Yokohama	18	205/45 R17	80%
Rear LH	:	Yokohama	12	205/45 R17	80%

Road Wheels Type

: Sport Rim

Note: The above percentages represent the estimated remaining balance of the tire treads in mm.

SYNOPSIS OF DAMAGES

At the time of survey, we noted that the vehicle has sustained an impact damages on the rear portions.

For further detail of the damages, please refer to our schedule and 178 pcs of surveyed photograph attached.

^{*} Denotes damaged components.

9 Joo Chiat Place Singapore 427743 HP: (65) 9833 1618 Fax: (65) 6747 1017 Email: treasureappraisal@gmail.com

Reg No: 53218791A



RECOMMENDATIONS

We referred to your instruction to appraise the above vehicle SLT 2564 D on 26-Dec-18 and in the accordance, we have carried out a physical assessment at your appointed workshop.

A static inspection was carried out and report is enclosed for your reference. The estimated repair cost submitted by the repairer for SGD 9,370.52 as per attached schedule has been scrutinised and revised by us against the actual damages found on the vehicle and we recommended the replacements and rectifications accordingly.

The repair cost has been revised to SGD 7,403.53 and therefore in the consideration of the repairer giving a further 20% even discount, it was agreed that the repairs to be carried out at a contractual lump sum of SGD 5,900.00 nett.

In such event, the repairer shall has the prerogative to either use new, OEM, re-conditioned parts and/or repair any damaged body parts that the repairer is confident and capable of repairing as long as the vehicle is put on the road in its pre-accident and road worthy condition and to the entire satisfaction of the owner.

Under normal circumstances, the estimated period of repairs is Eight (8) working days.

Pursuant to your instructions, we have NOT AUTHORISED to carry out the repairs on your behalf and we are submitting this report for your consideration.

This survey and/or appraisement was carried out to the best of our knowledge, ability and on a "STRICTLY WITHOUT PREJUDICE" basis to any party concern.

We are reverting the matter to you for your discretion.

Yours Truly,

Treasure Appraisal Services

Dixon Yeo W

Automobile Appraiser

The revised estimate was made from a visual inspection. Any discrepancies or unseen damage/s should be notified to the company within Fourteen (14) days from the date thereof. Otherwise, the revised amount should deem to be valid.

This report is strictly confidential and is given for the use of client and their authorised assigned agent and any disclosure or publication of it or part or whole shall be the responsibility of such person and no liability shall be attached to TREASURE APPRAISAL SERVICES thereof.

Treasure Appraisal Services

9 Joo Chiat Place Singapore 427743

HP: (65) 9833 1618 Fax: (65) 6747 1017 Email: treasureappraisal@gmail.com

Reg No: 53218791A



APPRAISEMENT SCHEDULE

Vehicle Registration No: SLT 2564 D

Report No: T-HD-181224/2564D

S/N	Descriptions	Condition	Qty	Repairer's Estimate		Our Assessment	
	LIST ITEMS				Latimate		ssessment
1	Tailgate panel 90 /	Damaged	1 pc	\$	528.75	\$	528.75
2	Tailgate "S" emblem	Necessary	1 pc	\$	14.00	Š	14.00
3	Tailgate "SWIFT" emblem	Necessary	1 pc	\$	18.60	Š	18.60
4	Tailgate "Sports" emblem	Necessary	1 pc	\$	17.35	Š	17.35
5	Tailgate outer handle	Reusable	1 pc	\$	57.60	Š	17.33
6	Tailgate outer handle opening switch	Reusable	1 pc	\$	65.30	\$	
7	Tailgate RH hinge	Repaired	1 pc	\$	30.00	Š	
8	Tailgate LH hinge	Repaired	1 pc	\$	30.00	\$	
9	Tailgate RH damper	Damaged	1 pc	\$	89.50	Š	89.50
0	Tailgate LH damper	Damaged	1 pc	5	89.50	Š	89.50
11	Tailgate lock assy	Damaged	1 pc	5	130.99	5	130.99
12	Tailgate trim board	Reusable	1 pc	\$	102.35	5	
13	Tailgate weather strip DEF	Damaged	1 pc	\$	66.65	5	66.65
14	RH tail lamp assy	Damaged	1 pc	S	227.05	\$	227.05
5	LH tail lamp assy	Damaged	1 pc	\$	227.05	\$	227.05
6	RH tail lamp panel	Repaired	1 pc	\$	206.05	\$	227.03
7	LH tail lamp panel	Repaired	1 pc	5	206.05	\$	2
8	Rear bumper cover DEF	Damaged	1 pc	\$	518.75	\$	518.75
9	Number plate lamp assy CRA / C	Damaged	1 set	\$	34.50	\$	34.50
0	Rear RH bumper impact bracket 612	Damaged	1 pc	5	23.50	\$	23.50
1	Rear LH bumper impact bracket 577	Damaged	1 pc	\$	23.50	s	23.50
2	Rear bumper top holder	Necessary	1 pc	\$	18.20	\$	18.20
3	Rear bumper clip	Necessary	1 set	5	28.00	\$	28.00
4	Rear RH bumper side retainer	Damaged	1 pc	\$	28.00	s	28.00
	Rear LH bumper side retainer	Damaged	1 pc	5	28.00	\$	28.00
	Rear end panel	Damaged	1 pc	5	199.90	\$	199.90
	Rear end panel air vent CAR	Damaged	1 pc	\$	26.65	\$	26.65
	Rear end panel garnish	Damaged	1 pc	5	62.00	S	62.00
	Keyless antenna assy	Damaged	1 pc	\$	55.70	5	55.70
	Spare tire board	Damaged	1 pc	\$	98.90	\$	98.90
	Spare tire panel 800/	Damaged	1 pc	\$	270.25	5	270.25
	Spare tire tool sponge tray	Reusable	1 pc	5	169.70	\$	
	Rear exhaust silencer	Damaged	1 pc	\$	411.95	Š	411.95
4	Rear exhaust mounting	Damaged	3 pcs	\$	37.50	5	37.50
			10. 19	5	4,141.79	5	3,274.74
		Less Discount:	15%	\$	621.27	\$	491.21
	List Pa	arts Sub-Total :		5	3,520.52	\$	2,783.53
	SPECIAL NETT ITEMS						
	Rear number plate with holder 804	Damaged	1 set	5	50.00	5	50.00
	Reverse sensor assy	Damaged	1 set	s	350.00	Š	280.00

Treasure Appraisal Services
9 Joo Chiat Place Singapore 427743
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Email: treasureappraisal@gmail.com

Reg No: 53218791A



S/N	Descriptions	Condition	Qty		Repairer's Estimate	Δ.	Our	
	SPECIAL NETT ITEMS				- Schillace		330331110111	-
3	Reverse camera assy	Damaged	1 set	S	450.00	S	350.00	
4	Tailgate glass sealant	Necessary	1 pc	s	150.00	5	120.00	
5	Tailgate glass seal form	Necessary	1 pc	5	120.00	Š	100.00	
	Sp	pecial Nett Parts Total		\$	1,120.00	\$	900.00	
		Parts Total	:	\$	4,640.52	\$	3,683.53	
S/N	Labour Desc	criotions		R	lepairer's		Our	7
				E	stimate	A:	ssessment	_
1	To furnish towing service to worksh	nop.		5	150.00	\$	60.00	×
2	Diagnose, replace and/or repair system for proper functioning.	to rectify rear electr	rical	\$	60.00	\$	40.00	30
3	Transfer boot lid / tailgate mech facilitate body repairs.	nanism and wiring assy	y to	\$	150.00	\$	80.00	50
4	Dismantle, replace and/or re-insta rectify for proper functioning.	all reverse sensor assy	and	\$	150.00	\$	80.00	30
5	Dismantle, replace and/or re-instal rectify for proper functioning.	ll reverse camera assy	and	\$	150.00	\$	120.00	×
6	Dismantle replace and/or re-installgate glass assy to facilitate body		1 /	\$	150.00	\$	120.00	/
7	Dismantle and re-install rear inte and garnish/es to facilitate body re		ning	\$	200.00	\$	180.00	40
	To carry out accident body repairs part/s, dismember affected damage and/or repair, re-construction, we vehicle body structures to pre-accident	ged body panel/s, repl eld to re-join and re-a	lace	\$	1,500.00	\$	1,300.00	100
	Dismantle, replace, repair and/or remuffler assy.	e-install rear exhaust p	oipe	\$	150.00	S	120.00	×
	Dismantle, replace, repair and/o tailgate spoiler assy.	or re-install boot lid	or	\$	150.00	\$	120.00	X
	To furnish, putty, sanding, maskin & toning, complete cleaning, sp waxing on affected areas.			\$	1,500.00	\$	1,200.00	8.0
	To furnish and apply under-sealing accident affected area.	& rust proofing coats	on	\$	300.00	\$	240.00	9

9 Joo Chiat Place Singapore 427743 HP: (65) 9833 1618 Fax: (65) 6747 1017 Email: treasureappraisal@gmail.com

Reg No: 53218791A



S/N	Labour Descriptions Repairer's Estimate			Our Assessment		
13	Conduct water leakage tests to ensure proper air and water sealing.	\$	120.00	\$	60.00 3	
	Labour Total :	\$	4,730.00	\$	3,720.00	
	Parts & Labour Total:	\$	9,370.52	\$	7,403.53	

Note: The repairer has agreed to undertake the repairs at our adjusted amount of SGD 5,900.00 on a *Contractual Lump Sum Basis corresponding to supply of all parts, labour and spray painting charges.

N.B: *Under Contractual Lump Sum Basis, the repairer shall has the prerogative to either use new, OEM, re-conditioned parts and/or repair any damaged body parts that the repairer is confident and capable of repairing as long as the vehicle is put on the road in its pre-accident and road worthy condition and to the entire satisfaction of the owner.

Under normal circumstances, the estimated period of repairs is **Eight (8)** working days. Pursuant to your instruction, we have NOT AUTHORISED the repairs on your behalf.

Treasure Appraisal Services

Automobile Appraiser

L/S \$3800/ 6days

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 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

aidresaid,	
THE RESERVE OF THE PARTY AND	ACCIDENT STATEMENT
Date Of Report	24/12/2018 13:53
Date Of Accident	22/12/2018 11:30
Exact Location Of Accident	SLIP RD FROM PIE TO CTE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD4832Z
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	140
Exact Purpose for which vehicle was being used at time of accident	t
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	VES

Fleet Policy YES Policy Number MCOM0015 Cover Note Number

Driver

Name of Driver CHUA TECK LAI NRIC No S1590189F Date Of Birth 21/01/1963 Occupation OUTDOOR Date Of Driving Pass 12/12/1983

Driving Experience 35 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98528285

Fax Number

Contact Number

EMail Address CTECKLAI@YAHOO.COM Address 82 07-947 WHAMPOA DRIVE

Postcode 320082

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - TAXI DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

THER - TAXI DRIVER

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 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.

Number of Passengers (Including Driver)

Passenger 1 NAME: : -

GENDER: : MALE

4

Passenger 2 NAME: : -

GENDER: : FEMALE

Passenger 3 NAME: : -

GENDER: : MALE

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

SEE ATTACH.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons:

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLT2564D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Address Postcode

Insurance Company Name

Nature Of Damage

REAR

No. Of Passenger (Including Driver)

	DETAILS OF INJURED PERSON 1	
Name	PASSENGER	_
Approximate Age		
Injuries Sustain	NECK	
Injured person in which vehicle?	SHD4832Z	
Were seat belts wom?		
Was this injured conveyed to hospital by ambulance?	NO	

KETCH PLAN
1 A 3 Sh 1 D 4 8 S 3 7
B-OIT NEW WILLIAM
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT
0 2/11/10 25 ab 1 11/2 = 1
On 22/12/18 of about 11:30 hrs, I was dru
at above said location. Suddenly "Veh B infront
build a same of the day of the
bruked to stupped, I immediately applied brothe.
) 11
upon seeing this. However it was too late, my
The state of the s
c. Death with all (1)
text front portion colleded but the near partien
of veh B.
102 200 11
03 passingers on board my texi. Mu
injum reported at the scene. Afra that the make
DEPOLOR OF STREET IS CITED IN I
passanger claim that his children was injured.
ECLARATION
We deciare the foregoing particulars are true in every respect
MFORT TRANSPORTATION PIE . Low Wei Yieng
CO. REG. NO. 199303821R ×
olicyholder's Signature Personnel's Signature ste & Time: (If driver is not the policyholder) Name:
Date & Time: (If driver is not the policyholder) Name: SPIC/FIN No.: SPIC/FIN No.:

CHARGE Search (No Form VC)

Sketch Plan Pg. 2

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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.
- 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:
 - 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

-OMFORT TRANSPORTATION HIELT.

1002038219

Date & Time:

Driver's Signature

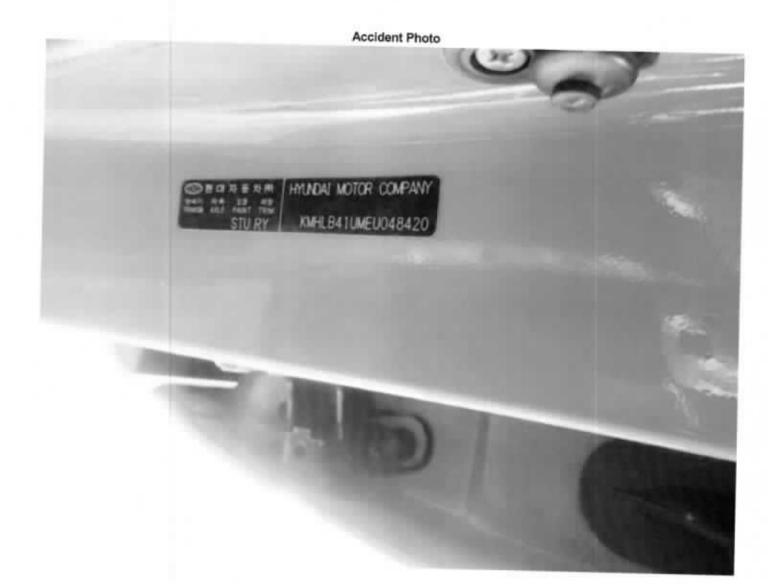
(if driver is not the policyholder)

Date & Time:

Reporting Centre Personne's Signature

NRIC/FIN No.:

GIARMC SheichPlanForm_V3











Accident Photo





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

1101	A INTERNATIONA		nationale Des Experts En Auton		
NDI	AINTERNATIONA	AL INSURANCE PL	Ref : CS3/III1802312	22/Jqd3e2-1	
	ECIL STREET 02 IOB BUILDING	SINGAPORE 049711	Date: 16-04-2019 Code: III2		
١.		Policy Particul	ars :- THIRD PARTY CLAI	М	
	Insured Veh.	SHD 4832Z	Veh. Inspected	SLT 2564D	
	Policy No.	MCOM0015	Coverage (\$)	0.00	
	Claim No.	MCT18120671	Excess (\$)	0.00	
	Assign From	STANLEY LAI	Assign Date	09/04/2019	
2.		Vehicle P	articulars & Condition		
	Make & Model	SUZUKI SWIFT	c.c	1586	
	Engine No.	HIDDEN	Year of Reg.	2009	
	Chassis No.	JSAEZC31S00203409	Colour	YELLOW	
	Odometer	125359	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	SPORTS RIM	
	General	GOOD			
3.		Cor	ditions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre	205/45 R17	DUNLOP	6 mm	
	L/H Front Tyre	205/45 R17	DUNLOP	6 mm	
	R/H Rear Tyre	205/45 R17	DUNLOP	6 mm	
	L/H Rear Tyre	205/45 R17	DUNLOP	6 mm	
4.		Descr	iption of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE	REAR PORTION.		
	DAMAGES SEE D	ETAILS.			
5.		Ger	eral Information	CONTROL OF	
	Accident Date	22/12/2018	Inspection Date	27/12/2018	
	Survey held at	HENDON AUTOMOTIVE			
		280 WOODLANDS IND PAR #01-11 SINGAPORE 75732			
5a.		STATE OF STREET	Remarks		
		ON WAS CONDUCTED ON A CE TO YOUR INSTRUCTION			
5b.		Estim	ate Days of Repair	PER	
	ESTIMATED NORMAL PERIOD FOR REPAIR: 6 Working Days				



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 3

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLT 2564D

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	TAILGATE PANEL	DENTED	528.75	528.75
1	TAILGATE "S" EMBLEM	NECESSARY	14.00	14.00
1	TAILGATE "SWIFT" EMBLEM	NECESSARY	18.60	18.60
1	TAILGATE "SPORTS" EMBLEM	NECESSARY	17.35	17.38
1	TAILGATE OUTER HANDLE	NOT NECESSARY	57.60	20
1	TAILGATE OUTER HANDLE OPENING SWITCH	NOT NECESSARY	65.30	
1	TAILGATE RH HINGE	NOT NECESSARY	30.00	
1	TAILGATE LH HINGE	NOT NECESSARY	30.00	
1	TAILGATE RH DAMPER	NOT NECESSARY	89.50	
1	TAILGATE LH DAMPER	NOT NECESSARY	89.50	
1	TAILGATE LOCK ASSY	JAMMED	130.99	130.99
1	TAILGATE TRIM BOARD	NOT NECESSARY	102.35	
1	TAILGATE WEATHER STRIP	DEFORMED	66.65	66.6
1	RH TAIL LAMP ASSY	CRACKED	227.05	227.0
1	LH TAIL LAMP ASSY	CRACKED	227.05	227.0
1	RH TAIL LAMP PANEL	TO REPAIR SEE LABOUR	206.05	
1	LH TAIL LAMP PANEL	TO REPAIR SEE LABOUR	206.05	
1	REAR BUMPER COVER	DEFORMED	518.75	518.7
1	SET NUMBER PLATE LAMP ASSY	CRACKED	34.50	34.5
-1	REAR RH BUMPER IMPACT BRACKET	BENT	23.50	23.5
1	REAR LH BUMPER IMPACT BRACKET	BENT	23.50	23.5
:1	REAR BUMPER TOP HOLDER	NECESSARY	18.20	18.20
1	SET REAR BUMPER CLIP	NECESSARY	28.00	28.0
-1	REAR RH BUMPER SIDE RETAINER	CRACKED	28.00	28.0
1	REAR LH BUMPER SIDE RETAINER	CRACKED	28.00	28.0
-1	REAR END PANEL	DENTED	199.90	199.9
1	REAR END PANEL AIR VENT	CRACKED	26.65	26.6
1	REAR END PANEL GARNISH	CRACKED	62.00	62.0
1	KEYLESS ANTENNA ASSY	NOT NECESSARY	55.70	

Report Ref No. CS3/III18023122/Jqd3e2-1



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.:2 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	SPARE TIRE BOARD	BENT	98.90	98.90
1	SPARE TIRE PANEL	BUCKLED	270.25	270.25
1	SPARE TIRE TOOL SPONGE TRAY	NOT NECESSARY	169.70	- 3
1	REAR EXHAUST SILENCER	NOT NECESSARY	411.95	
3	REAR EXHAUST MOUNTING	NOT NECESSARY	37.50	
	LESS 15% DISCOUNT		-621.27 3.520.52	-388.59 2.202.00
	SPECIAL NETT ITEMS		3,520.52	2,202.00
- 1	SET REAR NUMBER PLATE WITH HOLDER (SN)	BUCKLED	50.00	40.00
1	SET REVERSE SENSOR ASSY (SN)	SHORTED	350.00	200.00
1	SET REVERSE CAMERA ASSY (SN)	NOT NECESSARY	450.00	
1	TAILGATE GLASS SEALANT (SN)	NECESSARY	150.00	60.00
9	TAILGATE GLASS SEAL FORM (SN)	NECESSARY	120.00	40.00
		Commission Commission Commission	1,120.00	340.00
	LABOUR			
	TO FURNISH TOWING SERVICE TO WORKSHOP.	NOT NECESSARY	150.00	
	DIAGNOSE, REPLACE AND / OR REPAIR TO RECTIFY REAR ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		60.00	30.00
	TRANSFER BOOT LID / TAILGATE MECHANISM AND WIRING ASSY TO FACILITATE BODY REPAIRS.		150.00	50.00
	DISMANTLE, REPLACE AND / OR RE-INSTALL REVERSE SENSOR ASSY AND RECTIFY FOR PROPER FUNCTIONING.		150.00	30.00
	DISMANTLE, REPLACE AND / OR RE-INSTALL REVERSE CAMERA ASSY AND RECTIFY FOR PROPER FUNCTIONING.	NOT NECESSARY	150.00	
	DISMANTLE REPLACE AND / OR RE-INSTALL REAR WINDSCREEN / TAILGATE GLASS ASSY TO FACILITATE BODY REPAIRS.		150.00	120.00
	DISMANTLE AND RE-INSTALL REAR INTERIOR UPHOLSTERY; TRIMMING AND GARNISH / ES TO FACILITATE BODY REPAIRS.		200.00	40.00

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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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	TO CARRY OUT ACCIDENT BODY REPAIRS; DISMANTLE VEHICLE BODY PART/S, DISMEMBER AFFECTED DAMAGED BODY PANEL/S, REPLACE AND / OR REPAIR, RE-CONSTRUCTION, WELD TO RE-JOIN AND RE-ALIGN VEHICLE BODY STRUCTURES TO PRE-ACCIDENT CONDITION. INCLUSIVE OF THE REPAIR OF RH TAIL LAMP PANEL AND LH TAIL LAMP PANEL.		1,500.00	1,000.00
	DISMANTLE, REPLACE, REPAIR AND / OR RE-INSTALL REAR EXHAUST PIPE MUFFLER ASSY.	NOT NECESSARY	150.00	-
	DISMANTLE, REPLACE, REPAIR AND / OR RE-INSTALL BOOT LID OR TAILGATE SPOILER ASSY.	NOT NECESSARY	150.00	-
	TO FURNISH, PUTTY, SANDING, MASKING, PREPARE PAINT MIXTURE & TONING, COMPLETE CLEANING, SPRAY PAINT, POLISHING AND WAXING ON AFFECTED AREAS.		1,500.00	800.00
	TO FURNISH AND APPLY UNDER-SEALING & RUST PROOFING COATS ON ACCIDENT AFFECTED AREA.		300.00	90.00
	CONDUCT WATER LEAKAGE TESTS TO ENSURE PROPER AIR AND WATER SEALING.		120.00	30.00
			4,730.00	2,190.00
	GRAND TOTAL		9,370.52	4,732.00

RECOMMENDED COST OF LUMP SUM REPAIRS	3,800.00
(TO ITS PRE-ACCIDENT CONDITION)	

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MARKET VALUE: \$12,500.00(EST)-LTA REIMBURSEMENT VALUE: \$8,640.00=NETT VALUE: \$3,860.00

ONG HWEE JIE

Automotive Assessor

St. S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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