

ASS. RES. BY

REF

CS/FCI19007231/R1vd3n2

Special Instruction:

Surveyor

RASH

ASSIGNMENT (Office)

From (Person):

Karent (CWS)

of

FCI

Date/Time:

23/4/2019

Estimated Cost:

Bill to:

OD / ☒ WS / TP RES / OD RES / EVA / INV / MY / CS

To Inspect Vehicle No:

SDX 9988S.

Insured:

SHA 4226P.

at Workshop no:

Falcon-Air

Tel:

67795665.

of Blk 8 Pandan Loop

Policy No:

Claim No:

D19002665MF8H

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

18/4/2019

CA / REV / REP / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

24/4.

Person Contacted:

Vehicle:

☒ DIT

Date/Time

Action/Instruction (✓) Estimate

SDX 9988S-X

SHA 4226P-X

25/4/19

Email preli revised to FCI

9/5/19

LS \$ 1550 confirmed by email (Red 1639.30, 5190)  
mv: \$ 45K (EST) LTA: \$ 36,138 NV: \$ 8862

Signature: *[Signature]*

REF:

PC1

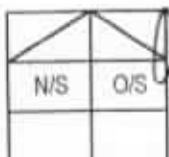
# ASSIGNMENT

COG: 2027/Nov

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: SDX 9988S  
 at Workshop n/s Falcon-Air  
 of No. 8 Pandan Loop Bkt  
 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.



Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: \_\_\_\_\_ days Res: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SDX 9988S Yr Regn: 2006 MAR  
 Type: M.Cdr / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: TOYOTA VIOS E Auto C.C. 1457  
 Colour: Grey A/C: Insured / Std / NI / NA  
 Sp. Reading: 270950 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: MRO53H49305056199  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / Jammed / Leaked / Burnt or  
 Modi: Nil / 8Rim / STD A/Rim or  
 Tyre Size: F: 185/60R15  
 R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or

Front		Rear	
R/Bal.	<u>5</u> mm	R/Bal.	<u>5</u> mm
L/Bal.	<u>5</u> mm	L/Bal.	<u>5</u> mm
D.O.A.	<u>18/04/19</u>	D.O.I.	<u>24/04/19</u>
Survey held at <u>FALCON-AIR</u>			

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

O/S Frt

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

Date / Time Action / Instruction

RECEIVED 09 MAY 2019

Date/Time, File Pass to?

☐ : Prel. Report  
☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Date/Time, File Return to?

2)

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

Survey Fee:

Transportation:

3 + RS. \$

Photos

Others

TOTAL

130
50
50
33
263

Report Format :

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



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: D19002665MFSH

Our Ref: CS/FCI19007231/R1vd3

Date : 25/4/2019

The Motor Claims Department  
MS FIRST CAPITAL INSURANCE LTD

WITHOUT PREJUDICE

Dear Sir/Madam,

**INITIAL INSPECTION REPORT OF VEHICLE NO. SDX 9988S**

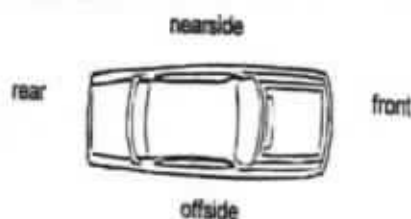
We thank you for your instruction on 23/4/2019

Please be informed that we had conducted the inspection of the above mentioned  
24/4/2019 at the premises of M/s FALCON-AIR AUTO SERVICES PTE LTD  
and have the following to report:-

Workshop Estimate Amount	: S\$3,189.30
Revised Estimate Amount	: S\$2,107.78
"Check" Items Amount	: S\$431.45
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

**Description of Damage:**

The vehicle sustained damages at the  
o/s front poriton



**Comments/Present Status:**  
Damages Consistent

Yours faithfully,

**MOHAMMED RASUL**  
Automotive Assessor

### MOTOR SURVEY ASSIGNMENT

Date	22-04-2019	Our Ref No. D19002665MFSH
Accident Date	18-04-2019	Claim Type. Third Party
Insured Vehicle	SHA4226P	Third Party Vehicle. SDX9988S
Survey Location	NO.8 PANDAN LOOP (BLK 1 / BLK K)	
Contact Person.	ANDY	
Contact No.	67795665/ 0	Fax No. 67791110
Survey Type	DIRECT SETTLEMENT:	
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	FALCON-AIR AUTO SERVICES PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	KARENT	

### 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.

*Veh In*  
*Rasul*

**Veron Chen (LKKAUTO)**

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**From:** Veron Chen (LKKAUTO)  
**Sent:** Thursday, 9 May 2019 11:39 AM  
**To:** ANDY; Rasul (LKKAUTO)  
**Cc:** SUR  
**Subject:** RE: SDX9988S FINALISE

Dear Andy,

WITHOUT PREJUDICE

Confirm finalise L/S \$ 1550.00 @ 4 days

**Kindly send Final invoice and all supporting documents directly to First Capital Ins Ltd.**

Best Regards,  
Veron Chen | Case Handler  
LKK Auto Consultants Pte Ltd  
Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

-----Original Message-----

From: ANDY <andy@falconair.com.sg>  
Sent: Wednesday, 8 May 2019 2:47 PM  
To: Rasul (LKKAUTO) <Rasul@lkkauto.com>  
Cc: SUR <sur@lkkauto.com>  
Subject: SDX9988S FINALISE

Sir

Please confirm finalise L/S \$ 1550.00 4 days

Thanks  
Andy  
Tel # 67795665

Your message is ready to be sent with the following file or link attachments:

SDX9988S FINALISE

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.

## Veron Chen (LKKAUTO)

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**From:** Veron Chen (LKKAUTO)  
**Sent:** Thursday, 25 April 2019 12:55 PM  
**To:** SUR; 'CWS Motor Claims'  
**Cc:** 'KARENTAN@FIRST-INSURANCE.COM.SG'  
**Subject:** RE: SURVEY ASSESSMENT - D19002665MFSH/1, SDX 9988S  
**Attachments:** SDX 9988S PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SDX 9988S  
Date of survey: 24/4/2019  
Number of days : 4 days

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

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

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

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**From:** CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]  
**Sent:** Tuesday, 23 April 2019 5:47 PM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** CWS Motor Claims <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; Karen Tan <[karentan@msfirstcapital.com.sg](mailto:karentan@msfirstcapital.com.sg)>  
**Subject:** PRI: SURVEY ASSESSMENT - D19002665MFSH/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.**

Best Regards,  
Admin Team  
Claim Workflow System  
Motor Claims Department  
MS First Capital Insurance Limited  
Tel : 6507 3848  
Fax : 6507 3849

**PS: This is a system generated mail. Please do not reply to this mail.**

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	5765B
<b>Vehicle Details</b>	
Vehicle No.:	SDX99885
Vehicle to be Exported:	Yes
Intended Deregistration Date:	22 Apr 2019
Vehicle Make:	TOYOTA
Vehicle Model:	VIOS E AUTO
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	1NZX723334
Chassis No.:	MR053HY9305056199
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$12,498.00
Original Registration Date:	31 Mar 2008
First Registration Date:	31 Mar 2008
Transfer Count:	1
Actual ARF Paid:	\$12,498.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	30 Nov 2027
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$41,994.00
COE Rebate Amount:	\$36,138.00
<b>Total Rebate Amount:</b>	<b>\$36,138.00</b>

The information contained herein is correct as at 22 Apr 2019

OK

45,000  
36,138  

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8,862  

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## 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	22/04/2019 11:40
Date Of Accident	18/04/2019 17:00
Exact Location Of Accident	MARINA FINANCIAL TOWER 3
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDX9988S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WANG CHIAW YONG
NRIC No	S1845765B
Email Address	PLATINUM1954@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96618123
Alternative Phone No	OFFICE-96618123

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS-1.5 (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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108400018
Cover Note Number	

### Driver

Name of Driver	WANG CHIAW YONG
NRIC No	S1845765B
Date Of Birth	07/01/1954
Occupation	OUTDOOR
Date Of Driving Pass	28/06/1977
Driving Experience	41 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96618123
Fax Number	
Contact Number	OFFICE-96618123
Email Address	PLATINUM1954@GMAIL.COM



Address	BLK 339 JURONG EAST AVE 1 #08-1538
Postcode	600339
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 - OPENING DOOR OF VEHICLE
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?	
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 PLANS

#### 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	SHA4226P
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

Refer to Sketch Plan Attached.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to sketch Plan attached.

DECLARATION

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



Policyholder's Signature

Date & Time: 21/4/2019  
@ 1125 hrs.

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Person's Signature

Name:

NIUC/FIN No.:

**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.

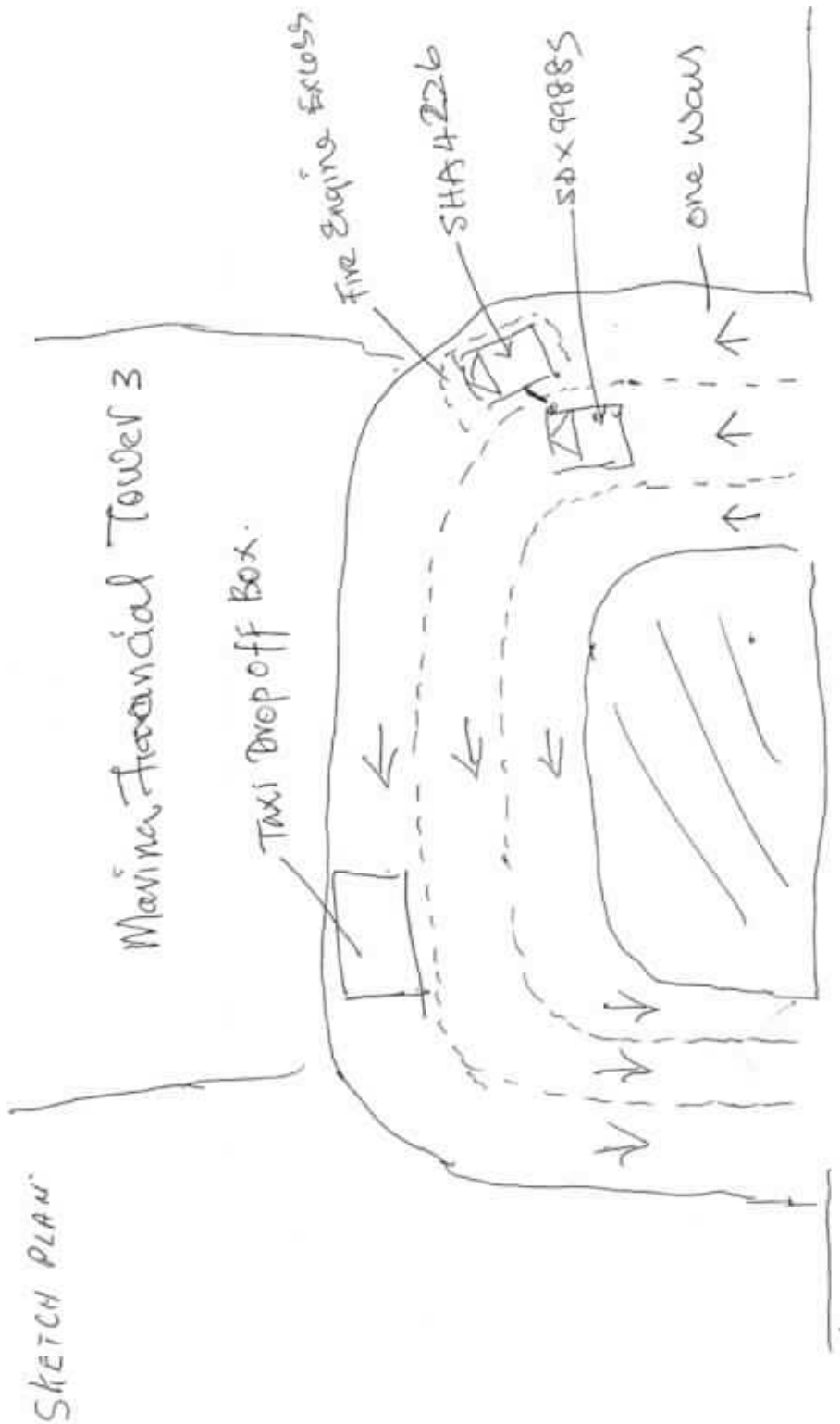


Policyholder's Signature  
Date & Time:

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



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



→ Marina Way



*[Signature]*  
 Wang Chuan Yong  
 S 1845765-B



FALCON-AIR

WANG CHIAW YONG  
BLK 339 JURONG EAST AVE 1 #08-1538  
SINGAPORE 600339

Attention : Motor Claim Department

Contact : 96618123

FALCON-AIR AUTO SERVICES PTE LTD

CO. REG. NO.: 1995-01140-D

GST REG. NO.: 19-9501140-D

Estimate : ES003436

Date : 22/04/2019

Vehicle Num. : SDX9988S

Make/Model : TOYOTA VIOS-30 NOV 2027

Chassis/Eng# : MR053HY9305056199

Accident Date : 18/04/2019

Claim No. :

Reference : TP NTUC VS MSFCI

Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
1.	1	LIST ITEMS :		
2.	1	RH SIDE MIRROR <i>Bro /</i>		1,035.00
3.	1	RH SIDE MIRROR BACK COVER <i>MIS /</i>		65.30
4.	1	RH FRONT FENDER <i>repair X AN</i>		320.10
5.	1	RH FRONT DOOR GLASS		470.40
6.	1	RH FRONT FENDER GARNISH <i>sch /</i>		83.40
		VVTI EMBLEM <i>✓ new /</i>		38.20
		List TotalS\$ :		2,012.40
		25.00% Discount S\$ :		503.10
				1,509.30
1.	1	SPECIAL NETT ITEMS :		
		RH FRONT DOOR GLASS SOLAR FILM <i>new / X AN</i>		150.00
		Special Nett Total S\$ :		150.00
		LABOUR :		
		TO RESPRAY ACCIDENT DAMAGED AREAS		
		TO REMOVE/REPLACE REAR DOOR GLASS <i>(FAT) X AN</i>		
		TO REPAIR, RH FRONT WINDSCREEN PILLAR, RH FRONT DOOR		
		RH REAR DOOR INCLUDES KNOCKING & REPLACEMENT OF PARTS		

CONTINUE / ...

FALCON-AIR AUTO SERVICES PTE LTD

(a subsidiary of Falcon-Air Holdings Pte Ltd)

Head Office: 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare Singapore 575721 Tel: 6452-0880/6458-0880 Fax: 6454-7862

Branches: Tampines St 93 Blk 9006 #01-200 S(528840) Tel: 6789-7997 Fax: 6788-7997 • No. 8 Pandan Loop (Blk I / Blk K) S(128226) Tel: 6779-5665 Fax: 6779-1110

Websites: www.falconair.com.sg E-mail: email@falconair.com.sg



FALCON-AIR

WANG CHIAW YONG  
BLK 339 JURONG EAST AVE 1 #08-1538  
SINGAPORE 600339

Attention : Motor Claim Department

Contact : 96618123

FALCON-AIR AUTO SERVICES PTE LTD

CO. REG. NO.: 1995-01140-D

GST REG. NO.: 19-9501140-D

Estimate : ES003436

Date : 22/04/2019  
Vehicle Num. : SDX9988S  
Make/Model : TOYOTA VIOS-30 NOV 2007  
Chassis/Eng#: MR053HY9305056199  
Accident Date : 18/04/2019  
Claim No. :  
Reference : TP NTUC VS MSFCI  
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
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TO RECTIFY ELECTRICAL MALFUNCTION

Labour Total S\$ :

*Handwritten:* 25/4/19, 130.00, 70, 1,530.00

*Handwritten:* 14p 90010068

*Handwritten:* 4 days

*Handwritten:* 4/5

*Handwritten:* 28/04/19 @ 1510

*Handwritten:* Reey after repair



for FALCON AIR AUTO SERVICES PTE LTD

E. & O.E.

Total S\$ : 3,180.30

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:

FALCON-AIR AUTO SERVICES PTE LTD

(a subsidiary of Falcon Air Holdings Pte Ltd)

Head Office: 176 Sin Ming Drive #01-06/07/13, #05-17 Sin Ming Autocare Singapore 575721 Tel: 6452-0880/6458-0880 Fax: 6454-7862

Branches: Tampines St. 93 Blk 9006 #01-200 S(528840) Tel: 6789-7997 Fax: 6788-7997 • No. 8 Pandan Loop (Blk 1 / Blk K) S(128226) Tel: 6779-5665 Fax: 6779-1110

Websites: www.falconair.com.sg E-mail: email@falconair.com.sg

MS FIRST CAPITAL INSURANCE LTD  
36 ROBINSON ROAD #16-01 CITY HOUSE  
SINGAPORE 068877

Attention : Motor Claim Department  
Contact : 62222311 Fax No. : 65073849

Estimate : ES003436

Date : 22/04/2019  
Vehicle Num. : SDX9988S  
Make/Model : TOYOTA VIOS-30 NOV 2027  
Chassis/Eng# : MR053HY9305056199  
Accident Date : 18/04/2019  
Claim No. :  
Reference : TP NTUC VS MSFCI  
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
LIST ITEMS :				
1.	1	RH SIDE MIRROR		1,035.00
2.	1	RH SIDE MIRROR BACK COVER		65.30
3.	1	<del>RH FRONT FENDER</del>		<del>X</del>
4.	1	<del>RH FRONT DOOR GLASS</del>		<del>X</del>
5.	1	RH FRONT FENDER GARNISH		83.40
6.	1	VVTI EMBLEM		38.20
List Total S\$ :				1,221.90
25.00% Discount S\$ :				305.48
				916.42
SPECIAL NETT ITEMS :				
1.	1	RH FRONT DOOR GLASS SOLAR FILM		
Special Nett Total S\$ :				
LABOUR :				
TO RESPRAY ACCIDENT DAMAGED AREAS				700.00
<del>TO REMOVE/REPLACE REAR DOOR GLASS</del>				<del>X</del>
TO REPAIR , RH FRONT WINDSCREEN PILLAR, RH FRONT DOOR RH REAR DOOR RH REAR FENDER INCLUDES				300.00

CONTINUE / ...

MS FIRST CAPITAL INSURANCE LTD  
36 ROBINSON ROAD #16-01 CITY HOUSE  
SINGAPORE 068877

Attention : Motor Claim Department

Contact : 62222311 Fax No. : 65073849

Estimate : ES003436

Date : 22/04/2019  
Vehicle Num. : SDX9988S  
Make/Model : TOYOTA VIOS-30 NOV 2027  
Chassis/Eng# : MR053HY9305056199  
Accident Date : 18/04/2019  
Claim No. :  
Reference : TP NTUC VS MSFCI  
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
		TO RECTIFY ELECTRICAL MALFUNCTION		70.00
		Labour Total S\$ :		1,070.00

E. & O.E.

Total S\$ : 1,986.42

for FALCON AIR AUTO SERVICES PTE LTD

less 20%

397.20

1588.80

L/S 1550.00






## 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/FCI19007231/R1vd3n2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date : 17-05-2019	
			Code : FCI2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHA 4226P	Veh. Inspected	SDX 9988S	
Policy No.		Coverage (\$)	0.00	
Claim No.	D19002665MFSH	Excess (\$)	0.00	
Assign From	KARENT	Assign Date	23/04/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	TOYOTA VIOS E AUTO	c.c	1497	
Engine No.	HIDDEN	Year of Reg.	2008	
Chassis No.	MR053HY9305056199	Colour	GREY	
Odometer	270950	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	185/60 R15	MICHELIN	5 mm	
L/H Front Tyre	185/60 R15	MICHELIN	5 mm	
R/H Rear Tyre	185/60 R15	MICHELIN	5 mm	
L/H Rear Tyre	185/60 R15	MICHELIN	5 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	18/04/2019	Inspection Date	24/04/2019	
Survey held at	FALCON-AIR AUTO SERVICES PTE LTD BLK 8 PANDAN LOOP SINGAPORE 128226			
<b>5a. Remarks</b>				
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.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		

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**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SDX 9988S**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	RH SIDE MIRROR	BROKEN	1,035.00	1,035.00
1	RH SIDE MIRROR BACK COVER	MISSING	65.30	65.30
1	RH FRONT FENDER	TO REPAIR SEE LABOUR	320.10	-
1	RH FRONT DOOR GLASS	NOT NECESSARY	470.40	-
1	RH FRONT FENDER GARNISH	SCRATCHED	83.40	83.40
1	VVTI EMBLEM	NECESSARY	38.20	38.20
	LESS 25% DISCOUNT		-503.10	-305.48
			1,509.30	916.42
<b>SPECIAL NETT ITEMS</b>				
1	RH FRONT DOOR GLASS SOLAR FILM (SN)	NOT NECESSARY	150.00	-
			150.00	-
<b>LABOUR</b>				
	TO RESPRAY ACCIDENT DAMAGED AREAS.		900.00	700.00
	TO REMOVE/REPLACE FRONT DOOR GLASS.	NOT NECESSARY	50.00	-
	TO REPAIR,RH FRONT WINDSCREEN PILLAR,RH FRONT DOOR.,RH REAR DOOR INCLUDES KNOCKING & REPLACEMENT OF PARTS.INCLUSIVE OF THE REPAIR OF RH FRONT FENDER.		450.00	300.00
	TO RECTIFY ELECTRICAL MALFUNCTION.		130.00	70.00
			1,530.00	1,070.00
<b>GRAND TOTAL</b>			<b>3,189.30</b>	<b>1,986.42</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>1,550.00</b>

Report Ref No. CS/FC19007231/R1vd3n2

MARKET VALUE: \$45,000.00 (EST)-LTA REIMBURSEMENT VALUE: \$36,138.00=NETT VALUE: \$8,862.00

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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