(cus)	From (Person): Karint	ASSIGNMENT (Office)	Date/Time: 15.5.19 4.20 p. M
	Retireated Costs	Bill to:	Date Time.
	To Inspect Vehicle No: GBH	CVA/INV/MV/CS	Insured: SH 6496A
	of 56 LOYang Way #06-07	or	Tel: 83824486
	Policy No:	Claim No:	D19003216 MFS4
	Sum Insured:	Excess:	
	Make of Veh: (Client's Record)		D.O.A. 10.05.2019
	CA / REV / REP. / REV 24 HRS Date/Time: 15.5. 19 5.07 M	Person Contacted: RIZan	H.O.D. Endorsement: Vehicle_IN LOUT
	Date/Time Action/Instruction (GBH 6034 P- x	x) Estimate	
	SH 6896A - NA	11NC1B016399/123	D. UA - 08/09/2018
	29/7009/06am- veniled	I via proli advise.	email-

(08/11/13)*	1
Gineum Kalvin REF:	
ASSI	GNMENT
From: Date:	Veh No: 684 6037P Yr Regn: 2574 218
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Insped Vehicle No:	N. W.252
at Workshop m/s	Colour A/C: Insufied / Std / NI / NA
of	Sp.Reading 4 5 445 T/Radio: Insuged / Std / NI / NA
Insured:	Eng/No;
Policy No.	C/No: JN/M CZ E26 7 000 8836
Claims No.	Gen. Cond: Good / Far / Poor / Burnt
Sum In sured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh;	Modi: Nil / S/Rim / STD &Rim or
	Tyre Size; F: 195 Kis C
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO OF Rear Fire Max - Frost
Bal. or Market Value;	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 7 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 7 mm L/Bal. 7 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 6/5/19 D.O.I. 25/7/19
Lum Sum: % 3 Val.: Yes or No	Survey held at E threight Atra
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	Front of
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	(001,000,000)
20/9/19 CSI PIP \$ 28/6.23 / 3 Bys.	(Hed: 300! 9.6%) FCZ
	monto
RECEIVED 2 · 1	OCT 2019
	105/10/2019
	7
Date/Time, File Pass to? : Prell. Report	Days Of Repair: 3
2 1 T U = .	Resurvey No. of Trip: Survey Fee: 130
Date/Time, File Return to?	Transportation: 90
2) Add Fee:	
	Interview (\$) Photos
Report Format:	: Tech. Invs (\$) Others
Lump Sum / 161: (\$ 2316.23)	:Weekend (\$

TOTAL



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580

Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Hotor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

15-05-2019

Our Ref No. D19003216MFSH

Accident Date

10-05-2019

Claim Type. Third Party

Insured Vehicle

SH6896A

Third Party Vehicle. GBH6037P

Survey Location

56 LOYANG WAY #06-07LOYANG ENTERPRISE BUILDING

Contact Person.

RIZAN

Contact No.

62840827/82824486

Fax No. 63416758

Survey Type

WITHOUT PREJUDICE:

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

EFFICIENT MOTOR &

Cc: Workshop

ENGINEERING WORKS

Attention, NIL

PTE LTD

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.



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

Your Ref: D19003216MFSH

Date: 26/7/2019

Our Ref: CS/FCI19008638/K1td3

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. GBH 6037P

Please be informed that we had conducted the inspection of the abovementioned vehicle 25/7/2019 at the premises of M/s Efficent Motor have the following to report: -

Workshop Estimate Amount	: S\$	4,108.90
Revised Estimate Amount	: S\$	3,478.01
"Check" Items Amount	: S\$	0.00
Market Value	: <u>S\$</u>	
LTA Reimbursement Value	: <u>S</u> \$	
Nett Value	: S\$	

Description of Damage:

The vehicle sustained damages at the front o/s portion

nearside

Comments/ Present Status:

Damages Consistent.

Yours faithfully Kalvin Automotive Assessor

Denise Tay (LKKAuto)

From:

Denise Tay (LKKAuto)

Sent:

Friday, 26 July 2019 5:50 PM

To:

Admin-D (LKKAuto); 'Karen Tan'; assignments

Cc:

SUR

Subject:

RE: SURVEYOR APPOINTED; OUR REF: D19003216MFSH; YOUR REF: GBH6037P

Attachments:

PRELI ADVISED OF GBH 6037P.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle GBH 6037P

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>denisetay@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>

Sent: Thursday, 25 July 2019 2:19 PM

To: 'Karen Tan' <karentan@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: SUR <sur@lkkauto.com>

Subject: RE: SURVEYOR APPOINTED; OUR REF: D19003216MFSH; YOUR REF: GBH6037P

Dear Karen.

Noted with thanks.

We will arrange for the survey today.

Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Karen Tan < karentan@msfirstcapital.com.sg>

Sent: Thursday, 25 July 2019 2:11 PM

To: SUR < sur@lkkauto.com >

Cc: efficient loyang < efficientloyang@gmail.com >

Subject: RE: SURVEYOR APPOINTED; OUR REF: D19003216MFSH; YOUR REF: GBH6037P

Dear LKK,

> Back to OneMotoring

Enquire Transfer Fee

Vehicle Details	STATE OF THE STATE		
Vehicle No. :	GBH6037P		
Vehicle Type :	A50 - Goods (Closed) Van/Van Panel (Del	very)	
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	NISSAN		
Vehicle Model :	NV350 PANEL VAN 2.5 5MT 5DR		
Chassis No.:	JN1MC2E26Z0008836		
Propellant:	Diesel		
Engine No.:	YD25424383A		
Engine Capacity :	2488 cc		
Maximum Power Output:			
Maximum Laden Weight:	3300 kg		
Unladen Weight ;	1780 kg		
Year Of Manufacture :	2017		
Original Registration Date :	25 Jul 2018		
Lifespan Expiry Date :	24 Jul 2038		
COE Category :	C - Goods Vehicle & Bus		
Quota Premium :	\$31,092.00		
COE Expiry Date :	24 Jul 2028		
Road Tax Expiry Date :	24 Jul 2020		
Inspection Due Date :	24 Jul 2020		
Intended Transfer Date :	22 Jul 2019		
CO2 Emission :	232.00 (g/km)		-
CEV/VES Rebate Utilised Amount:	•		
CO Emission :	0.142000 (g/km)		
HC Emission :	0.007500 (g/km)		
NOx Emission :	0.072000 (g/km)		
PM Emission :	0.000000 (mg/km)		
Late renewal fee(s) will be impo	sed if road tax / lay-up has expired. Please use	Enquire Road Tax Payable for fee	(s) payable.
Road tax, including Over Payme transferred. Amount Payable	ent (if any), of a vehicle will follow the vehicle to	the new registered owner when	its ownership is being
	Amount Before GST	GST Amount	Amount After GS
	(S\$)	(S\$)	(S\$
Transfer Fee :	25.00		25.00
Total Amount Payable :			25.0

You may print this page for reference.

OK

Print

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle Vehicle Owner Particulars Company Owner ID Type: 635R Owner ID: Vehicle Details GBH6037P Vehicle No.: No Vehicle to be Exported: 26 Jul 2019 Intended Deregistration Date: NISSAN Vehicle Make: NV350 PANEL VAN 2.5 5MT 5DR Vehicle Model: Grey Primary Colour: 2017 Manufacturing Year: YD25424383A Engine No.: JN1MC2E26Z0008836 Chassis No.: Maximum Power Output: \$25,062.00 Open Market Value: 25 Jul 2018 Original Registration Date: 25 Jul 2018 First Registration Date: 0 Transfer Count: \$1,254.00 Actual ARF Paid: Intended PARF Rebate Details No PARF Eligibility: PARF Eligibility Expiry Date: \$0.00 PARF Rebate Amount: Intended COE Rebate Details 24 Jul 2028 COE Expiry Date: C - Goods Vehicle & Bus COE Category: 10 COE Period(Years): \$31,092.00 QP Paid: \$27,958.00 COE Rebate Amount: \$27,958.00 Total Rebate Amount:

The information contained herein is correct as at 26 Jul 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

	ACCIDENT STATEMENT	
Date Of Report	13/05/2019 14:49	
Date Of Accident	10/05/2019 17:00	
Exact Location Of Accident	UBI ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBH6037P

Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner PAN PACIFIC VAN & TRUCK LEASING PTE LTD

201511635R Co Reg No

Email Address EFFICIENTLOYANG@GMAIL.COM

Mobile Phone No

Alternative Phone No OFFICE-64404428

Vehicle Particulars

Manufacturer NISSAN Model NV350

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

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company EQ INSURANCE COMPANY LTD

Type Of Coverage COMPREHENSIVE

NO Fleet Policy

Policy Number DMCFHQ18-000139

Cover Note Number

Driver

MOHAMAD SODIKIN BIN RITBAN Name of Driver

NRIC No S7711147F Date Of Birth 26/04/1977 Occupation INDOOR

Date Of Driving Pass 19/08/2004

14 YEARS AND 8 MONTHS **Driving Experience**

MALE Gender

Mobile Number (LOCAL) +65-91200169

Fax Number

Contact Number

EMail Address NOEMAIL Address

APT BLK 561 ANG MO KIO AVENUE 10 #11-1814 S 560561

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

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 ON COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

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

NO

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 THE 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

SH6896A

Vehicle Make/Model/Colour

TAXI

Details Of Properties

TAXI

Vehicle Category Name of Driver

YEE KWAN CHEONG

NRIC/Passport Number

S7621440I

Contact Number

91280060

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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:
 - 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 Driver's Signature

Date & Time: (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

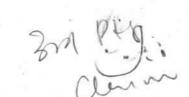
NRIC/FIN No .:

Accident Sketch Plan Pg. 1

SKETCH PLAN		
		GB46037P
	172-1	
	14	
	A	
	X -	
	SH / \	
	6896A	
DESCRIBE CIRCUMSTANCES OF T		
Approaching the	e 'STOP' line I	dus chance
I say & +	exi eproprime m	y direction
	. 11.	3
Before I ca	en it is ab lot	me taxi
SH 68964 L	those sort who the	of y vehicle
		7
-		F- =
110111111111111111111111111111111111111		
		INSURER: EQ INS
		VEHICLE: GBH 60379
		DOA: 10 5.2019
		CLAIM TYPE: Third Party
		WORKSHOP: TBA
DECLARATION		\$7.5s
I/We declare the foregoing particulars	are true in every respect.	\mathcal{L}
	ABollon 1445	
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:

ACCIDENT VEHICLE RPICE LIST

VEHICLE NUMBER: GBH 6037 P MODEL: NV 350 CHASSIS: TN1 M C2E26700



/NO:	ITEM	PRICE S\$	PRICE S\$		
		COST	LIST		
01	FRONT BOMPER / CA	\$ 280	\$514.70		
02	R/4 FOGLIGHT / or	\$210	\$311.80 N		
03	R H HEADLAMP / COT	\$ 230	\$360.80N		
04	R/H INTER COOLER. Bulle.	\$1500	\$2121.60		
	less 7-	1/			
	LABOUR	\$ 480	300		
	PAINTING	# 400	200		
	huleage:	- 40495			
	tyre & 2e 195 RIS / 1951		316.23		
	Type Brand DUNC	o P			
	(red 70% 30	Repairer of time following results the confirmation of the confirm	ey exis		
		REPAILER Detoreration 500 to confirmation of the source of	naves Coubsus		
	Kah 1 (1/19 20)	Third year modification is approval from	Sur		
	// 25/7/19 12 wh.	Supplement to final and supplement to supplement to final and supplement to fi	1 200		
	2 /2	1	45		
	SOM		-		

Efficient Motor & Engineering Works Pte Ltd (Co.Reg.No:201511708E) 56 Loyang Way #06-07, Loyang Enterprise Building Singapore 508775 Tel: 63416758 / 62840827 Email: efficientloyang@gmail.com

TP INSURER:

MS First Capital Insurance Ltd (HQ)

YEE KWAN CHEONG

Singapore

PARTICULARS OF C	LAIM		
Claim Type:	THIRD PARTY	Ref. No:	**
Policy No:	*	Date of Loss:	10/05/2019
Vehicle Reg. No.:	GBH6037P	Driveable?	
Party At Fault:	UNKNOWN .	4.0	(4)
Make/Model:	NISSAN NV350, 2.5 D PANEL	Vehicle Reg. Da	te: 25/07/2018
	VAN (M)		1
Vehicle Colour:	GREY		*!
Engine No:	YD25424383A	Chassis No:	JN1MC2E26Z0008836
Odometer:	40495 KM		
Paint Type:			
List Item Discount:	30.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	5		
Present Location:	EFFICIENT MOTOR & ENGINE	ERING WORKS P	TE LTD (HQ)

2	Amount
	2,316.23
	0.00
	400.00
	400.00
	0.00
Gross Total (S\$)	3,116.23
+ GST 7.00% (S\$)	218.14
Nett Amount (S\$)	3,334.37
	+ GST 7.00% (S\$)

This claim is handled by: MAS ARIANTI SALEHAN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR 1	DETAILS			
Referen	ce			
Part Source	:	(Last Synchronised: 29 Jul 2019)		
Parts: N/A		NISSAN NV350 2.5 D Panel Van (M) (Model not available in database)		
Labour:	Repairer's	(Price-denominated Standard List)		
Print Code:	(Unsubmitted,	, no print-code for GBH6037P)		
Validity:		tes are valid only if they contain the print code (above) on all est the END OF ESTIMATES marker on the last estimate page	timate pages, running page	
Further Info	: Items/values r	not in reference catalogue are prefixed with an asterisk *.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRONT BUMPER	30.00	. 0.00	*514.70 FL
2	1		*FRONT RH FOGLIGHT	30.00	. 0.00	*311.80 FL
3	1		*HEADLAMP RH	30.00	0.00	*360.80 FL
4	1		*INTER-COOLER RH	30.00	0.00	*2,121.60 FL
-116	1101100	part. L=Listli		b Total (S\$) L Items (S\$)	i i	3,308.90 992.67
			Tot	al Parts (S\$)		2,316.23
			Report was unsubmitted d	uring this print-out.		

Estimates on Miscellaneous Items There are no new miscellaneous Items selected.

Estimates on Labour

No	Particulars	Lab.Type	Amount
Pair	twork Labour		
1	TO RESPRAY PAINT TO AFFECTED AREA	New	400.00
Lab	our Items		
2	TO REMOVE DAMAGED PARTS AND INSTALL NEW PARTS, INCLUDING PANEL BEATING	New	400.00
	· Gross La	bour Cost (S\$)	800.00

< END OF ESTIMATES >



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 Intern	ationale Des Experts En Automo	obile		
MS	FIRST CAPITAL IN	ISURANCE LTD	Ref : CS/FCI1900863	Ref : CS/FCI19008638/K1td3e2		
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877			Date: 06-11-2019 Code: FCI2			
1.		Policy Particula	ars :- THIRD PARTY CLAIM	V		
	Insured Veh.	SH 6896A	Veh. Inspected	GBH 6037P		
	Policy No.		Coverage (\$)	0.00		
	Claim No.	D19003216MFSH	Excess (\$)	0.00		
	Assign From	KAREN TAN	Assign Date	15/05/2019		
2.		Vehicle Pa	articulars & Condition			
	Make & Model	NISSAN NV350	c.c	2488		
	Engine No.	HIDDEN	Year of Reg.	2018		
	Chassis No.	JN1MC2E26Z0008836	Colour	GREY		
	Odometer	40495	Steering	IN ORDER		
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM		
	General	FAIR				
3.		Con	ditions of Tyres			
		Size	Make	Balance		
	R/H Front Tyre	195 R15C	FIREMAX	7 mm		
	L/H Front Tyre	195 R15C	FIREMAX	7 mm		
	R/H Rear Tyre	195 R15C	DUNLOP	7 mm		
	L/H Rear Tyre	195 R15C	DUNLOP	7 mm		
4.	4. Description of Damages					
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION.						
	DAMAGES SEE D	ETAILS.				
5.	General Information					
	Accident Date	10/05/2019	Inspection Date	25/07/2019		
	Survey held at	EFFICIENT MOTOR & ENG	NEERING WORKS PTE. LTD			
		56 LOYANG WAY #06-07 LC	DYANG ENTERPRISE BUILDI	NG SINGAPORE 508775		
5a.			Remarks			
	B)THE INSPECTION	ISISTENT TO ACCIDENT REP ON WAS CONDUCTED ON A" CE TO YOUR INSTRUCTIONS	PORT. WITHOUT PREJUDICE" BASI S, WE HAVE NOT AUTHORIS	S. ED REPAIRS.		
5b.		Estima	ate Days of Repair			
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	3 Working Days	3		



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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBH 6037P

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	CRACKED	514.70	514.70
1	R/H FOGLIGHT	CRACKED	311.80	311.80
1	R/H HEADLAMP	CUT	360.80	360.80
1	R/H INTER COOLER	BUCKLED	2,121.60	2,121.60
	LESS 30% DISCOUNT		-992.67	-992.67
			2,316.23	2,316.23
	LABOUR			
	LABOUR.		400.00	300.00
	PAINTING.		400.00	200.00
			800.00	500.00
	GRAND TOTAL		3,116.23	2,816.23

RECOMMENDED COST OF REPAIRS	2,816.23
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Report Ref No. CS/FCI19008638/K1td3e2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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