

ASS. REC. BY:

REF: CS / FCI 1100 8733 / Kgd3 / 12

Special Instruction:

Surveyor:

AWS

ASSIGNMENT (Office)

From (Person):

Eileen Lee

of

FCI

Date/Time: 3:39pm @ 16/5/19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 1492R

Insured:

SH 7588H

at Workshop m/s

Premier Automotive

Tel:

6214 8880

of

23 Cheng South Ave 2 # 03-02

Policy No:

Claim No:

D19003154 MP8H

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 13/05/2019

CA / REV / REP. / REV 24 HRS

'DS'

H.O.D. Endorsement:

Date/Time:

4:23pm @ 16/5/19

Person Contacted:

Vincent

Vehicle IN / OUT

Date/Time

Action/Instruction

Estimate ✓

SHD 1492R - CC4 / PWD 18008948 / K1ea392

D.A. 16/5/2018

SH 7588H - X

17/5/19 @ 3:39pm

Revised to Eileen Lee by email

(08/11/13)

Surveyor: Kalvin

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 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: SHD 1492 R Yr Regn: 4 Oct, 2017

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

Truck / Trailer or

Make: Hyundai i30 C.C. 1582Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 212541 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: TM AD 2814VHJ/4/899

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or Maxx

Front

Rear

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 13/5/19 D.O.I. 21/5/19Survey held at Premise

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

O/S B.L.

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

Date / Time	Action / Instruction
<u>23/5/19</u>	<u>Chkd R/P \$500/2h. (Per \$380, 43%)</u>

RECEIVED 24 MAY 2019

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 2

1)

☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

2)

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

Survey Fee:

Transportation:

S + RS SI

Photos

Others

TOTAL

Report Format: 71Lump Sum / I.B.I. (\$) 500

90
50
50
15
205



Auto
Consultants
Pte Ltd

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

Your Ref: D19003154MFSH
Our Ref: CS/FCI19008733/Eqd3

Date: 22 May 2019

The Motor Claims Department
MS First Capital Insurance Ltd

Dear Sir/Madam,

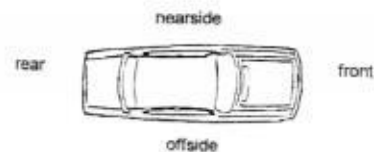
INITIAL INSPECTION REPORT OF VEHICLE NO. SHD 1492R .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 21/05/2019 at the premises of M/s PREMIER AUTOMOTIVE, and have the following to report:-

Workshop Estimate Amount	: S\$ <u>880.00</u> .
Revised Estimate Amount	: S\$ <u>500.00</u> .
"Check" Items Amount	: S\$ <u>-</u> .
Market Value	: S\$ <u>-</u> .
LTA Reimbursement Value	: S\$ <u>-</u> .
Nett Value	: S\$ <u>-</u> .

Description of Damage:

The vehicle sustained damages at the o/s body.



Yours faithfully

Kalvin
Automotive Assessor

MOTOR SURVEY ASSIGNMENT

Date	13-05-2019	Our Ref No. D19003154MFSH
Accident Date	13-05-2019	Claim Type. Third Party
Insured Vehicle	SH7588H	Third Party Vehicle. SHD1492R
Survey Location	23 CHANGI SOUTH AVENUE 2 #03-02	
Contact Person.	GOH WEE DEK	
Contact No.	62148880/ 0	Fax No. 62141511
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
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	PREMIER AUTOMOTIVE SERVICES PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	EILEEN LEE	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Wednesday, 22 May 2019 3:39 PM
To: 'CWS Motor Claims'; assignments
Cc: 'Eileen Lee'; SUR
Subject: RE: SURVEY ASSESSMENT - D19003154MFSH/1
Attachments: CSFCI19008733Eqd3.pdf

Dear Eileen,

Enclosed herewith preliminary advice of SHD 1492R.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Thursday, 16 May 2019 4:24 PM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Eileen Lee' <EileenLee@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19003154MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

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

Best Regards,

G.Nivitha | Admin

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: CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]
Sent: Thursday, 16 May 2019 3:39 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Eileen Lee <EileenLee@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19003154MFSH/1

Dear Sir/Mdm,

Enquire Vehicle Registration Details**Owner Particulars**

NRIC/Passport/Company Cert No.: 200304975H
 Owner ID Type: Company
 Owner Name: PREMIER TAXIS PTE. LTD.
 Registered Address: 23 CHANGI SOUTH AVENUE 2 #04-03 SINGAPORE 486443
 Mailing Address: -
 Birth Date: -

Vehicle Particulars

Vehicle No.: SHD1492R
 Previous Vehicle No.: -
 Effective Date of Ownership: 04 Oct 2017
 Original Regn Date: 04 Oct 2017
 Registration Date: 04 Oct 2017
 Year of Manufacture: 2017
 Vehicle Type: Public Transport Taxi (Motor Car)
 Vehicle Scheme: Taxi (Company)
 Vehicle Attachment 1: Air-Con (Taxi)
 Vehicle Attachment 2: -
 Vehicle Attachment 3: -
 Vehicle Make: HYUNDAI
 Vehicle Model: I30 GDH 1.6 TCI 5DR DCT
 Primary Colour: Silver
 Secondary Colour: -
 Passenger Capacity: 4
 Chassis No.: TMAD281UVHJ141899
 Engine No.: D4FBHZ172592
 Engine Capacity/Power Rating: 1582 cc / -
 Maximum Power Output: 100.0 kW (134 bhp)
 Propellant: Diesel
 Max Unladen Weight: 1496 kg
 Maximum Laden Weight: 1940 kg
 Open Market Value: \$19,970.00
 PARF Eligibility: Yes
 PARF Eligibility Expiry Date: 03 Oct 2025
 Minimum PARF Benefit: \$7,482.00
 No. of Transfers: 0
 IU Label No.: 1050709931
 COE No.: 2017100401003686E
 COE Expiry Date: 03 Oct 2025
 COE Category: A - Car up to 1600cc & 97kW (130bhp)
 COE Registration Category: A - Car up to 1600cc & 97kW (130bhp)
 Quota Premium (QP) / Prevailing Quota Premium: - / \$42,564.00
 PQP Paid: \$34,052.00
 QP (Regn Cat): -
 OPC Cash Rebate Eligibility: No

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02

SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511

CO. REG:200707743D GST REG:200707743D

13-May-19

ESTIMATE REPAIR BILL FOR HYUNDAI I30A (A) REGN NO: SHD 1492 R

S/NETT

1 set	o/s door stickers ✓ <i>mu</i>	\$ 100.00
	Sundry <i>nel</i>	\$ 50.00 20
	To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the rear o/s door	\$ 400.00 200
	To putty and spray painting on rear o/s door	\$ 250.00 180
	To apply rustproofing on the repaired and replaced panels.	\$ 80.00 <i>x m</i>
		<u>\$ 880.00</u>

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

Ka hui 11/11/14

✓

21/5/19 1700 L

2 Dgs

PIP

After Repair photo





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/FCI19008733/K1qd3n2	
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 27-05-2019	
		Code : FCI2	
1. Policy Particulars :- THIRD PARTY CLAIM			
	Insured Veh.	SH 7588H	Veh. Inspected
	Policy No.		Coverage (\$)
	Claim No.	D19003154MFSH	Excess (\$)
	Assign From	EILEEN LEE	Assign Date
			16/05/2019
2. Vehicle Particulars & Condition			
	Make & Model	HYUNDAI I30	c.c
	Engine No.	HIDDEN	Year of Reg.
	Chassis No.	TMAD281UVHJ141899	Colour
	Odometer	212541	Steering
	Brakes	IN ORDER	Modification
	General	FAIR	STANDARD ALLOY RIM
3. Conditions of Tyres			
		Size	Make
	R/H Front Tyre	195/65 R15	MAXXIS
	L/H Front Tyre	195/65 R15	MAXXIS
	R/H Rear Tyre	195/65 R15	MAXXIS
	L/H Rear Tyre	195/65 R15	MAXXIS
			Balance
			7 mm
			7 mm
			7 mm
			7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS.			
5. General Information			
	Accident Date	13/05/2019	Inspection Date
	Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443	
5a. Remarks			
A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
		ESTIMATED NORMAL PERIOD FOR REPAIR:	
		2 Working Days	



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 1492R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	SET O/S DOOR STICKERS (SN)	NECESSARY	100.00	100.00
1	SUNDRY (SN)	NECESSARY	50.00	20.00
			150.00	120.00
	LABOUR			
	TO LABOUR CHARGE FOR DISMANTLE AND RENEW THE ACCIDENT DAMAGED PARTS.INCLUDING KNOCK-OUT,STRAIGHTEN,REPAIR,RESHAPE AND ADJUST OF THE REAR O/S DOOR.		400.00	200.00
	TO PUTTY AND SPRAY PAINTING ON REAR O/S DOOR.		250.00	180.00
	TO APPLY RUSTPROOFING ON THE REPAIRED AND REPLACED PANELS.	NOT NECESSARY	80.00	-
			730.00	380.00
	GRAND TOTAL		880.00	500.00
	RECOMMENDED COST OF REPAIRS			500.00

Report Ref No. CS/FCI19008733/K1qd3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

ADRIAN LING WAI PING

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

Licensed Appraiser

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