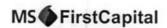
22/03/2000 - ABS. REC. BY:	REF: CS FCI 1900 9014 [Xsd30] Special Instruction:
Burreupr : ±	ASSIGNMENT (Office)
From (Person)	Date/Time: 5.49 pm 31/5
Estimated Cos	est:Bill to:
	STIP RES / OD RES / EVA / INV / MV / CS
To Inspect Ve	chicle No: SLE 91932 Insured: SH 8867M
at Workshop i	m/s My Car Consulty : Tel: 86668632
of	53 ubi tue 1 #01-25
Policy No:	Claim No: DIOCO3326MFSH
Sum Insured:	Excess:
Make of Veh: (Client's Record	
	/ REP. / REV 24 HRS (wp)
Date/Time: 1	1:43pm022/5/19 Person Contacted: Hui Qin Vehicle IN OUT
Date/Time	Action/Instruction Estimate (
	SLE 91937 - NA/INC 1910-8-12/13 DUA: 1915/2019
	8H 8887M- NA/INC19008842/13: DOA: 17/5/2019
28/05/19	@ 10:38 am revsed PA to Loame You via encil.
#	

.....

Lump Sim /!.B.I: (\$ 3, 500) - 45)

Report Format:



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. MZ-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor 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 21-05-2019 Our Ref No. D19003326MFSH

Accident Date

17-05-2019

Claim Type. Third Party

Insured Vehicle

SH8887M

Third Party Vehicle. SLE9193Z

Survey Location

53 UBI AVE 1 #01-25 PAYA UBI INDUSTRIAL PARK

Contact Person.

KAI LING

Contact No.

0/98686000

Fax No. 69255219

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

Cc: Workshop

MY CAR CONSULTANT

Attention, NIL

Cc: TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

JOANNEY

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.

. . > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	ASA ASSA CARACTER CAR
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	4017C
Vehicle No.:	SLE9193Z
Vehicle to be Exported:	No
Intended Deregistration Date:	23 May 2019
Vehicle Make:	TOYOTA
Vehicle Model:	HARRIER 2.0 ELEGANCE AT ABS D/AIRBAG 2WD
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	3ZRB829492
Chassis No.:	ZSU600083548
Maximum Power Output:	111.0 kW (148 bhp)
Open Market Value:	\$29,292.00
Original Registration Date:	05 Aug 2016
First Registration Date:	05 Aug 2016
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$28,009.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Aug 2026
PARF Rebate Amount: Intended COE Rebate Details	\$21,006.00
COE Expiry Date:	04 Aug 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$57,010.00
COE Rebate Amount:	\$41,041.00
Total Rebate Amount:	\$62,047.00

The information contained herein is correct as at 23 May 2019

ОК

Steve Chen (LKK Auto)

From:

My Car Consultant <admin@mycar.sg> Thursday, August 15, 2019 11:30 AM

Sent: To:

Steve Chen (LKK Auto)

Subject:

re: SLE9193Z

WITHOUT PREJUDICE

Dear Steve.

Pls close at the same.

Best Regards,

Huigin

Direct line: 88668832 | Fax: 69255219

My Car Consultant Pte Ltd

53 Ubi Avenue 1

Paya Ubi Industrial Park #01-33

Singapore 408934

This Email, including attached files, may contain confidential information and is intended only for the use of the individual and/or entity to which it is addressed. If you have received this message in error, please notify the sender of the error and delete the message. Thank you.

From: "Steve Chen (LKK Auto)" < SteveChen@lkkauto.com>

Sent: Thursday, August 15, 2019 10:29 AM To: "admin@mycar.sg" <admin@mycar.sg>

Subject: SLE9193Z

Dear HuiQin,

The above vehicle finalize \$3500 (L/S, before GST). 4 repair days.

Kindly confirm.

Thanks

Best Regards,

Steve Chen | Assistant Automotive Assessor

LKK Auto Consultants

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

From: My Car Consultant [mailto:admin@mycar.sg]
Sent: Wednesday, August 14, 2019 11:01 AM

To: Steve Chen (LKK Auto)

Cc: SUR

Subject: SLE9193Z

Shirley Hiew (LKK Auto)

From:

Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Sent:

Tuesday, 28 May 2019 10:38 AM

To:

'Joanne Yong Lai fong'; 'CWS Motor Claims'

Cc:

assignments; SUR; Admin-D (LKKAuto)

Subject:

RE: SURVEY ASSESSMENT - D19003326MFSH/1

Attachments:

SLE 9193Z - Preli Advise .pdf

Dear Joanne,

Enclosed preliminary revised of vehicle SLE 9193Z.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

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

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]

Sent: Wednesday, 22 May 2019 1:44 PM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Joanne Yong Lai fong' <Joanneyong@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D19003326MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

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: Tuesday, 21 May 2019 5:48 PM To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>; Joanne Yong Lai fong

<Joanneyong@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19003326MFSH/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.

This email has been checked for viruses by AVG antivirus software. www.avg.com

Company Registration No. 199607198R

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

Your Ref: D19003326MFSH

Date: 28 May 2019

Our Ref: CS/FCI19009014/Jsd3

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SLE 9193Z .

Please be informed that we had conducted the inspection of the abovementioned vehicle on $\underline{22/05/2019}$ at the premises of M/s $\underline{\text{My Car Consultant Pte Ltd}}$ and have the following to report:-

Workshop Estimate Amount	: <u>S\$</u>	14,107.61	
Revised Estimate Amount	: <u>S</u> \$	5,102.20	
"Check" Items Amount	: <u>S</u> \$	3,352.13	
Market Value	: <u>S</u> \$		
LTA Reimbursement Value	: <u>S</u> \$		
Nett Value	: <u>S</u> \$		

Description of Damage:

The vehicle sustained damages at the rear portion.

rear from from

Comments/ Present Status:

Damages Consistent. Repair days: 4 Days

Yours faithfully, Ong Hwee Jie Automotive Assessor

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> 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

TIVE LTD

Address

BLK 488D CHOA CHU KANG AVENUE 5

#10-173

Postcode

684488

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

CHAIN COLLISION

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

3

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190518/7002

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH WORKSHOP

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SH8887M

Vehicle Make/Model/Colour

HYUNDAI 140

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKC8069D

Vehicle Make/Model/Colour

TOYOTA PREVIA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

NGOI CHUN KIAT, FRANCIS (WEI JUNJIE)

Approximate Age

Injuries Sustain

SLIGHT

Injured person in which vehicle?

SLE9193Z

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report gazzactly the details of the sorbbent to speed up the claims process.
- This form must be completed by the Policinster and/or the Authorized Other.
- information provided must be as tradical and sources as possible. Any will of mirror esentation or withholding of material facts may allow insurance companies to papudiate policy liability.
- The lasue and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance.
- 5. And false reporting rows be referred to the folios for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurence Association of Singapore (SIA) for architeng and that copies of this seport will for a fee be made available upon application by interested parties
- 7. By the lodgment of this report to the leavers, you hereby consent to the entirely of this report at the centre and to copies of the report being made evallable aforesald.
- 8. Consent Linder the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and coreent that:

- kity 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 eccident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' is expect, flow firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - (i) processing, handling end/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the delive.
 - (ii) investigating the accident and/or my dains,
 - (III) carrying out end/or dealing with my instructions or responding to any enquiries by me:
 - (iv) administering my claims (including the realing 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, bandling and/or dealing with my claims. Icollectively the "Purpozaz")
- (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 perty service providers or agentallicituding 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(westigation and management in present and all future dalms.
- (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

(it) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature State & Time:

river is not the policyholder ide & Time

Reporting Centre Personnel's Manature

KRICHIN No.:

Accident Sketch Plan

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119



REPORT OF A TRAFFIC ACCIDENT



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20190518/7002

Date/Time Report Made: 18/05/2019 03:14	Vide Report No.:	Station Diary No
Informant's Particulars		Contraction in
Name of Informant: NGOI CHUN KIAT, FRANCIS	Address: APT BLK 488D CHOA CHU KANG AVE	NUE 5 #10-173

ID Type / ID No.:
NRIC NO / Sea00323C

Nationality:
SINGAPORE CITIZEN

Sex: Age: Date of Birth: Driver

Rape:

Rape: Language: Institution / School Name:

Race: Language: Institution / School Chinese English Institution / School English Driving Licence Information: Date of Expiry:

General Information of the Accident Non-Injury Attended by Police Date/Time of Accident: 17/05/2019 22:56 Drink. Type of Location: Straight Road Type of Accident: Drive: No. Location: PAN ISLAND EXPRESSWAY Weather: Clear Road Surface: Road Speed Limit Dry 90 Km/h Traffic Flow: One Way Traffic Volume Traffic Control: Not Controlled Light Type of Collision: Between Moving Vehicles - Head To Rear Anyone conveyed by ambulance: No

Doletic of V	ah da hyo	ivet)	STREET STREET	5200 To	STORE SELLEN	
William No.	180	(News)	Media	Gelor	Condition	No of Passanger
SLE9193Z	Car	1				0

Public dall'eran involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Individual Statement





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20190518/7002

CONTINUATION OF REPORT

Driver		100 Sept. 100	AT THE PARTY OF	(Sept. 1)	742° 44	
Name	NGOI CHUN KIAT, FRANCIS			ID No.		S8800323C
Related Vehicle	SLE9193Z (Car)			Conta	ct No.	91458324
Hospital/Clinic	NIL			Class Drivin Licent Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 17/5/2019, at about 22:55hrs, I was travelling on lane 4 along PIE (TUAS) after eng neo at lamppost 1131. Suddenly i felt a huge impact from my rear. I stop my vehicle and realise that I had gotten into a chain accident with 2 other vehicle. A vehicle bearing (SKC8069D) had collided into a taxl bearing (SH8887M) causing the taxl to collide onto the rear of my vehicle. We then exchange particulars and decided to proceed with insurance claims. I was given 7 days mc





Police Station Of Origin: Traffic Police 10 Ubl Avenue 3 SINGAPORE 408865 Tel No: 85470000

Report No. 7/20190518/7002

CONTINUATION OF REPORT

Driver	The Lower Property	Charles See	THE RESERVE	- Walnut	Charles of the	OF THE PARTY OF TH
Name	NGOI CHUN KIAT, FRANCIS			ID No.		S8800323C
Related Vehicle	SLE9193Z (Car)			Conta	ct No.	91458324
Hospital/Ginic	NIL			Class Drivin Licent Expiry	9 &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL De			harge	NIL	
No. of Days granted Medical Leave NIL			Degree o	finjury	NIL	

On 17/5/2019, at about 22:55hrs, I was traveling on lane 4 along PIE (TUAS) after engineo at imppost 1131. Suddenly ifelt a huge impact from my rear. I stop my vehicle and realize that I had gotten into a chain accident with 2 other vehicle. A vehicle bearing (SKC8069D) had collided into a taxi bearing (SH8887M) causing the taxi to collide onto the rear of my vehicle. We then exchange particulars and decided to proceed with insurance claims. I was given 7 days mo





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20190518/7002

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Data/Timex 18/05/2019 03:14
Officer In Charge Of Case: TP / TPHQ / NOR HIDAYU BINTE ABOUL SAMAD Contact No.: 85476423	Classification Of Case:
Authentication Stamp] [



MY CAR CONSULTANT PTE LTD

Reg no.: 201605878Z

Address: 53 Ubi Ave 1 #01-33 Paya Ubi Industrial Park Singapore 408934

HP: 9888885

Estimation

Date:

21 May 19

Vehicle:

SLE9193Z

Make / Model

TOYOTA/HARRIER

Chassis:

No.	Description	Unit	Unit Price	Amount
	Parts Replacement:			
1	REAR BUMPER DEF	1	\$ 1,343.20	\$ 1,343.20
2	REAR BUMPER LOWER COVER DEF	1	\$ 365.40	\$ 365.40
3	REAR BUMPER REFLECTOR ? X MM	2	\$ 56.90	\$ 113.80
4	REAR BUMPER LOWER CLIP / LC /	8	\$ 3.80	\$ -30.40
5	REAR BUMPER SIDE SUPPORT L/R ? / [R	21	\$ 65.00	\$ 130.00
6	REAR BUMPER RETAINER L/R ? / IR	21	\$ 94.80	\$ 189.60
7	REAR BUMPER ABSORBER CRA /	1	\$ 96.60	\$ 96.60
8	REAR BUMPER LOWER GARNISH	1	\$ 481.34	\$ 481.34
9	REAR TAILLAMP L/R ? (PH) (R	2/	\$ 480.60	\$ 961.20
10	REAR TAILLAMP SEALER L/R ? X M/I	2	\$ 20.00	\$ 40.00
11	TAILGATE BUC /	1	\$ 1,224.80	\$ 1,224.80
12	TAILGATE NO. PLATE GARNISH ASSY nn ×	1	\$ 620.60	\$ 620.60
13	TAILGATE INNER TRIM ? X M	1	\$ 453.70	\$ 453.70
14	TAILGATE INNER TRIM CLIP ? X M	12	\$ 2.10	\$ 25.20
15	TAILGATE LOCK ASSY / Shift	1	\$ 954.00	\$ 954.00
16	TAILGATE LOCK COVER SCK/	1	\$ 24.60	\$ 24.60
17	TAILGATE LOCK STRIKER NA X	1	\$ 47.50	\$ 47.50
18	TAILGATE WEATHERSTRIP NA X	1	\$ 353.40	\$ 353.40
19	REAR FENDER L/R NN ★	2	\$ 1,019.45	\$ 2,038.90
20	REAR FENDER INNER GARNISH L/R ~~ ×	2	\$ 563.30	\$ 1,126.60
21	REAR FENDER INNER GARNISH CLIP L/R any	12	\$ 2.10	\$ 25.20
22	REAR COMPARTMENT BOX nn ★	1	\$ 697.40	\$ 697.40
23	REAR SPARE TYRE TRAY nn L	1	\$ 614.00	\$ 614.00
24	REAR SPARE TYRE SUPPORT SPONGE unx	1	\$ 137.60	\$ 137.60
25	REAR END PANEL ? X R	1	\$ 715.30	\$ 715.30
26	REAR END PANEL GARNISH ? X MM	1	\$ 343.40	\$ 343.40
27	REAR END PANEL GARNISH CLIP ? X NM	4	\$ 2.10	\$ 8.40
28	REAR FLOOR PANEL ? × N/III	1	\$ 780.90	\$ 780.90
29	REAR FLOOR PANEL TRIM	1	\$ 278.50	\$ 278.50
30	REAR EXHAUST SILENCER LA X	1	\$ 628.60	\$ 628.60
				\$14,850.14
			Less 25%	\$ 3,712.54
			Total	\$11,137.61
	S/Nett items:		ag provided the	

	l .	Total Amount for Labour Total Amount		\$ 2,670.00	
21	Par	ts Replac	ement Amoui	\$11,437.61	
				\$ 2,070.00	1100
25	PANEL BEATING ON AFFECTED AREAS	1	\$ 1,200.00	\$ 1,200.00 \$ 2,670.00	500
24	SPRAY PAINTING ON AFFECTED AREAS	1	\$ 1,200.00	\$ 1,200.00	500
23	APPLY ANTI RUST ON AFFECTED AREAS	1	\$ 120.00	\$ 120.00	? 30.
22	TO RESPRAY UNDERCOATING	1	\$ 100.00	\$ 100.00	40
21	TO CHECK REAR ELECTRICAL WIRING	1	\$ 50.00	\$ 50.00-	30
_	Labour to:			\$ 300.00	200/
20	REAR END PANEL SEALANT ? /	// 1	\$ 50.00	\$ 50.00	X
19	REAR REVERSE SENSOR Should	/ 1 SE	\$ 250.00	\$ 250.00	200

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:

P- 3096 N- 200 L - 1100 4396 L/S - 3516.89 = 3500

HULL JIL-LKK 22/5/19



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 Inter	nationale Des Experts En Automo	obile
MS	FIRST CAPITAL IN	ISURANCE LTD	Ref : CS/FCI19009014	4/Esd3e2
	ROBINSON ROAD 101 CITY HOUSES	INGAPORE 068877	Date: 02-09-2019 Code: FCI2	
1.		Policy Particul	lars :- THIRD PARTY CLAIM	M .
	Insured Veh.	SH 8887M	Veh. Inspected	SLE 9193Z
	Policy No.		Coverage (\$)	0.00
	Claim No.	D19003326MFSH	Excess (\$)	0.00
	Assign From	JOANNE YONG	Assign Date	21/05/2019
2.		Vehicle P	articulars & Condition	
	Make & Model	TOYOTA HARRIER	c.c	1986
	Engine No.	HIDDEN	Year of Reg.	2016
	Chassis No.	ZSU600083548	Colour	WHITE
	Odometer	47149	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Cor	nditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	225/65 R17	MICHELIN	6 mm
	L/H Front Tyre	225/65 R17	MICHELIN	6 mm
	R/H Rear Tyre	225/65 R17	MICHELIN	6 mm
	L/H Rear Tyre	225/65 R17	MICHELIN	6 mm
4.		Desci	ription of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE	E REAR PORTION.	
5.	BUILDING		neral Information	
	Accident Date	17/05/2019	Inspection Date	22/05/2019
	Survey held at	53 UBI AVENUE 1 #01-25	<u> </u>	
	Repairer	MY CAR CONSULTANT PT	TE LTD	
5a.		DEPT THE REAL PROPERTY.	Remarks	
	B)THE INSPECTION		PORT. "WITHOUT PREJUDICE" BASI IS, WE HAVE NOT AUTHORISI	
5b.	Contract of the last	Estim	nate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	4 Working Days	3



LKK Auto Consultants Pte Ltd

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

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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLE 9193Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	DEFORMED	1,343.20	1,343.20
1	REAR BUMPER LOWER COVER	DEFORMED	365.40	365.40
2	REAR BUMPER REFLECTOR @\$56.90	NOT NECESSARY	113.80	-
8	REAR BUMPER LOWER CLIP @\$3.80	NECESSARY	30.40	15.00
2	REAR BUMPER SIDE SUPPORT L/R @\$65.00	BROKEN-1PC ONLY	130.00	65.00
2	REAR BUMPER RETAINER L/R @\$94.80	BROKEN-1PC ONLY	189.60	94.80
1	REAR BUMPER ABSORBER	CRACKED	96.60	96.60
1	REAR BUMPER LOWER GARNISH	NOT NECESSARY	481.34	-
2	REAR TAILLAMP L/R @\$480.60	O/S BROKEN	961.20	480.60
2	REAR TAILLAMP SEALER L/R @\$20.00	NOT NECESSARY	40.00	-
1	TAILGATE	BUCKLED	1,224.80	1,224.80
1	TAILGATE NO. PLATE GARNISH ASSY	NOT NECESSARY	620.60	-
1	TAILGATE INNER TRIM	NOT NECESSARY	453.70	-
12	TAILGATE INNER TRIM CLIP @\$2.10	NOT NECESSARY	25.20	
1	TAILGATE LOCK ASSY	SHORTED	954.00	418.00
1	TAILGATE LOCK COVER	SCRATCHED	24.60	24.60
1	TAILGATE LOCK STRIKER	NOT NECESSARY	47.50	-
1	TAILGATE WEATHERSTRIP	NOT NECESSARY	353.40	.=
2	REAR FENDER L/R @\$1019.45	NOT NECESSARY	2,038.90	3
2	REAR FENDER INNER GARNISH L/R @\$563.30	NOT NECESSARY	1,126.60	-
12	REAR FENDER INNER GARNISH CLIP L/R @\$2.10	NOT NECESSARY	25.20	-
1	REAR COMPARTMENT BOX	NOT NECESSARY	697.40	-
1	REAR SPARE TYRE TRAY	NOT NECESSARY	614.00	-
1	REAR SPARE TYRE SUPPORT SPONGE	NOT NECESSARY	137.60	-
1	REAR END PANEL	TO REPAIR SEE LABOUR	715.30	-
1	REAR END PANEL GARNISH	NOT NECESSARY	343.40	2
4	REAR END PANEL GARNISH CLIP @\$2.10	NOT NECESSARY	8.40	-
1	REAR FLOOR PANEL	NOT NECESSARY	780.90	-
1	REAR FLOOR PANEL TRIM	NOT NECESSARY	278.50	3
1	REAR EXHAUST SILENCER	NOT NECESSARY	628.60	9

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	LESS 25% DISCOUNT		-3,712.54	-1,032.00
			11,137.60	3,096.00
	SPECIAL NETT ITEMS			
1	SET REAR REVERSE SENSOR (SN)	SHORTED	250.00	200.00
1	REAR END PANEL SEALANT (SN)	NOT NECESSARY	50.00	=
	211 27		300.00	200.00
	LABOUR			
	TO CHECK REAR ELECTRICAL WIRING.		50.00	30.00
	TO RESPRAY UNDERCOATING.		100.00	40.00
	APPLY ANTI RUST ON AFFECTED AREAS.		120.00	30.00
	SPRAY PAINTING ON AFFECTED AREAS.		1,200.00	500.00
	PANEL BEATING ON AFFECTED AREAS. INCLUSIVE OF THE REPAIR OF REAR END PANEL.		1,200.00	500.00
			2,670.00	1,100.00
	GRAND TOTAL		14,107.60	4,396.00

RECOMMENDED COST OF LUMP SUM REPAIRS	3,500.00
(TO ITS PRE-ACCIDENT CONDITION)	

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1

CHEN TSUE YEE

Automotive Assessor

St. S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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