

Minim

Guo Qiang
Stanley Lai

083/III19006547/0903-01

ASSIGNMENT (Office)

III

Date/Time 29/05/2019

Particulars of Case

OD / TP / WS / TP RES / OD RES / CVA / INV / MY / CS

To Inspect Vehicle No.

SLV 344A

Insured SHC 88617

at Work/Shop/nd

Apex Motoring

Tel 6842 4992

at

25 Kaki Bukit Rd 4 # 01-55 Synergy

Policy No.

AICOM 0015

Claim No.

MCT 19040313

Sum Insured

Reason

Make of Veh

(Client's Record)

DOA 10/04/2019

CA / REV / REP. / REV 24 HRS

HOI Endorsement

Date/Time

12:03pm @ 12/4/19

Person Contacted

Ms. Kim

Vehicle

IN OFF

Date/Time

Action/Instruction (x) Estimate

SLV 344A - NS/INC 19 003-29 / 7/18/23

Don 19/2/19

SHC 88617 - 083/AICOM 001 708/H/12/19 24

Don 24/01/2011

Dismantle: 15/4/2019 04:43pm

\$ 1950, 5 Days.

2550.
(P & 7350, 48%)

24/6/2019

RECEIVED 25 JUN 2019

290-130=120+10

= 130

ASSIGNMENT

From: Date: 12/4/19
Estimated Cost:
OD: TP / VS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SLV 344A
at Workshop m/s: Apex Motoring
of: 25 kaki Bukit Rd 4 # 01-55 Synergy
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 Report: Consistent? : Yes or No
GIA / PR Seen: Consistent? : Yes or No
Est. Repairs: 8 days Res: Yes or No
Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS ^{app}

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SLV 344A Yr Regn: Dec / 17
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or: Hybrid
Make: Toyota C-HR cc 1797
Colour: silver A/C: Insured / Std / NI / NA
Sp. Reading: 101352 T/Radio: Insured / Std / NI / NA
Eng/No:
C/No: 8YX102088901
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modi: Nil / SiRim / STD / R/Rim or
Tyre Size: F: 215/60R17
R: 215/60R17
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Kapsun
Front: Rear:
R/Bal: 6 mm R/Bal: 6 mm
L/Bal: 6 mm L/Bal: 6 mm
D.O.A.: D.O.L: 12-04-19
Survey held at: w/s 5:30pm
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

| Date / Time | Action / Instruction |
|-------------|------------------------------|
| | \$3000 - \$4000 16/4/2019 |

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report

1) Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip: 1

Report Format: PR5

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

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

Survey Fee:

Transportation:

1) \$ + RE \$

2) Photos

3) Others:

TOTAL

| |
|-----|
| 120 |
| 10 |
| 130 |

Nivitha (LKK Auto)

From: Stanley Lai <stanley.lai@iii.com.sg>
Sent: Wednesday, 29 May 2019 5:35 PM
To: admin-d@lkkauto.com; 'sur@lkkauto.com'
Cc: Zuhaidah Samsuri; Mekavathanan Sarangapani; Hsiao Tong (chewht@lkkauto.com); Olivia Lau (olivialau@lkkauto.com)
Subject: RE: MCT19040313

Dear Sir/Mdm,

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

TP Veh No. : SLV344A

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: Tuesday, 28 May, 2019 12:27 PM
To: Hsiao Tong (chewht@lkkauto.com) <chewht@lkkauto.com>; Olivia Lau (olivialau@lkkauto.com) <olivialau@lkkauto.com>
Cc: Zuhaidah Samsuri <aida@iii.com.sg>; Stanley Lai <stanley.lai@iii.com.sg>
Subject: MCT19040313

Paper survey please – 2017 vehicle

Meka

Nivitha (LKK Auto)

From: Do-Not-Reply <do-not-reply@merimen.com>
Sent: Wednesday, 29 May 2019 6:40 PM
To: sur@lkkauto.com; assignments@lkkauto.com
Subject: Incoming New Document for SLV344A

This mail is associated with :
***SLV344A (MCT19040313)**
[SHC8861T]
TP

-
Apr 10 2019 12:00AM

[-]
Apex Motoring

The following new document(s) has been shared with you by India International Insurance for SLV344A :

- Letter of Demand from Third Party

This is an auto-generated email. Do not reply to this email.

Sent by : Zuhaidah Bte Samsuri (India International Insurance Pte Ltd)



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

1710-11/9040513.

| | | | |
|-------------------|----------|-----|--------|
| RESERVES | | | |
| TPPD | PRESERVE | JK. | 420.00 |
| TPPI | PRESERVE | | |
| UNINSURED LOSS | PRESERVE | | |
| SUBRO | PRESERVE | | |
| LPPN | PS- | | |
| INVESTIGATION FEE | | | |
| SURVEY FEES | | | |
| LEGAL FEES | | | |
| OTHERS | | | |
| FRAUD CHECK | | | |
| UPLOAD TO MERIMEN | | | |
| GRANT RIGHTS | | | |

 *** TX REPORT ***

TRANSMISSION OK

TX/RX NO 0800
 RECIPIENT ADDRESS 64380111
 DESTINATION ID
 ST. TIME 15/05 15:00
 TIME USE 00'31
 PAGES SENT 2
 RESULT OK

FAXED
 15 MAY 2019
 MOTCLM DEPT.

Non-Anc

CATHERINE LIM LLC

林 ADVOCATES & SOLICITORS
 璽 NOTARY PUBLIC - 公証官
 玲 COMMISSIONER FOR OATHS - 宣誓官
 律師 CATHERINE C. LIM
 館 DIRECTOR
 LL.B (HONS) SINGAPORE - 法律系 - 律師
 M.B.A. (BUSINESS LAW) - 商業系 - 碩士



20 Havelock Road #03-01
 Central Square Singapore 059765
 UEN No. 201310922K

Tel: (65) 6438 5500
 Fax: (65) 6438 0111
 www.catherinelimllc.com
 Email: info@catherinelimllc.com
 CATHERINE LIM LLC is a law
 corporation with limited liability

Our Ref: CL/190518/T/APEX.sg

10 May 2019

India International Insurance Pte Ltd
 64 Cecil Street #04-05
 IOB Building
 Singapore 049711
 Attn: Motor Claims Dept

Comfort Transportation Pte Ltd
 383 Sin Min Drive
 GAS Building
 Singapore 575717

Dear Sir

ACCIDENT INVOLVING SLV 344A / SHC 8861T ON 10.04.2019 ALONG CLARKE QUAY TURNING IN LIANG COURT

We act for Asia Express Car Rental Pte Ltd, the owner of motor vehicle No. SLV 344A, which was involved in the above accident.

Our client has suffered loss and damage as a result of your Insured's negligence in the driving of motor vehicle No. SHC 8861T.

We quantify our client's claim as follows:-

| | |
|--|------------|
| 1. Cost of Repair | \$4,900.00 |
| 2. Rental | \$ 700.00 |
| 3. Survey fee | \$ 560.00 |
| 4. LTA search fee | \$ 16.00 |
| 5. Incidentals, transport & photocopying etc | \$ 53.50 |
| 6. Cost contribution | \$ 749.00 |

CC 078 50

WITHOUT PREJUDICE

(to the personal injury claim)

BY HAND

CERTIFICATE OF POSTING

(Please be informed that all supporting documents
 have been forwarded to your insurer.)

We are in receipt of a letter from India, which is receiving our attention.
 We shall revert shortly. Kindly note that we are preserving our
 rights to conduct a medical re-examination on your client where
 necessary.

Our Ref:

Name:

Date:

India International Insurance P.L.

MCT/19040313

Aid

12/1/2019

Noting x/c

CATHERINE LIM LLC

林 林 ADVOCATES & SOLICITORS
翠 NOTARY PUBLIC - 公証官
玲 COMMISSIONER FOR OATHS - 宣誓官
律
師 CATHERINE C.L.LIM
館 DIRECTOR
LL.B (HONS) SINGAPORE-法律系-律師
M.B.A. (BUSINESS LAW)-商业系-碩士



20 Havelock Road #03-01
Central Square Singapore 059765
UEN No. 201310922X

Tel: (65) 6438 5500
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www.catherinelimllc.com
Email: info@catherinelimllc.com
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10 May 2019

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64 Cecil Street #04-05
IOB Building
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Attn: Motor Claims Dept

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Comfort Transportation Pte Ltd
383 Sin Min Drive
GAS Building
Singapore 575717

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We act for Asia Express Car Rental Pte Ltd, the owner of motor vehicle No. SLV 344A, which was involved in
the above accident.

Our client has suffered loss and damage as a result of your Insured's negligence in the driving of motor vehicle No.
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| 4. LTA search fee | \$ 16.00 |
| 5. Incidentals, transport & photocopying etc | \$ 53.50 |
| 6. Cost contribution | \$ 749.00 |
| | ----- |
| | \$6,978.50 |
| | ----- |

We are in receipt of your letter, which is regarding the above claim.
We shall revert shortly. Kindly note that we are preserving our
rights to conduct a medical re-examination on your claim should
necessary.

Our Ref: MCT/19040313
Name: A/c
Date: 15/5/2019
India International Insurance P L

We enclose herewith photocopies of our client's accident report, LTA search, rental bill, final repair bill, survey fee,
survey report and colour photographs of our client's damaged vehicle for your immediate attention.

Please let us know within the next 14 days from the receipt of this letter, whether you are prepared to admit liability
and revert with a settlement proposal, failing which our clients shall have no alternative but to commence legal
proceedings against your insured.

Yours faithfully

Encs
cc: clients

(Please note that if your motor vehicle was not driven by you, there is a presumption in law that the said driver was driving as your agent/ servant
unless you let us know the particulars of your driver if your motor vehicle was not driven by you.)

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 | 11/04/2019 13:26 |
| Date Of Accident | 10/04/2019 18:15 |
| Exact Location Of Accident | CLARKE QUAY TURNING IN LIANG COURT |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------------------|
| Vehicle Registration Number | SLV344A |
| Insured/Policyholder | |
| Name Of Registered Owner | ASIA EXPRESS CAR RENTAL PTE LTD |
| Co Reg No | 201116882D |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98417246 |
| Alternative Phone No | OFFICE-98417246 |

Vehicle Particulars

| | |
|--|--------------|
| Manufacturer | TOYOTA |
| Model | CHR |
| Exact Purpose for which vehicle was being used at time of accident | HIRER USE |
| 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 | MSIG INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | B29119902MCX |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | TAN WEE JOO RON |
| NRIC No | S8341210J |
| Date Of Birth | 28/12/1983 |
| Occupation | INDOOR |
| Date Of Driving Pass | 29/04/2003 |
| Driving Experience | 15 YEARS AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-98417246 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |



| | |
|---|-------------------------------------|
| Address | BLK 124 BUKIT BATOK CENTRAL #04-371 |
| Postcode | 650124 |
| 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 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? | NO |
| 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. | NO |
| Number of Passengers (Including Driver) | 3 |
| Passenger 1 | NAME: : UNKNOWN GENDER: : FEMALE |
| Passenger 2 | NAME: : UNKNOWN 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

REFER TO ATTACHED

Attachment(s)

| | |
|---|------------------|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Remarks/ Reasons: | VIDEO WITH OWNER |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SHC8861T |
| 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

3. Please report correctly the details of the accident to speed up the claim process.

4. This form must be completed by the Policyholder and/or the Authorized Person.

5. Any information collected in this form will be used solely for the purpose of processing the claim and will not be used for any other purpose.

6. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance companies.

7. Any facts repeating may be referred to the Police for investigation.

8. The report will be forwarded by the insurers to the Risk Record Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will also be made available upon application by interested parties.

9. By the lodging 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 if needed.

10. **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.

Reporting Centre Personnel: Signature
Name:
e/RAC/Full text:

Sketch Plan #2

SKETCH PLAN

CLARK AVE

LEAH COURT

TAXI STAND



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

NEW BRIDGE ROAD TURNING IN TO LEAH COURT. TAXI AT LEAH COURT REVERSED AND ON MAIN ROAD SUDDENLY AND INTO MY CAR.

DECLARATION

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

Policyholder's Signature:

Date & Time: 11/4/19 11:44

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

Date & Time: 11/4/19 11:44

Reporting Centre Personnel's Signature:

Name: NRIC/FIN No.:

Enquire Vehicle & Owner Information (Vehicle No. SHC8861T As At 10 Apr 2019 / 18:15:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: 190518

Current Owner Details

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: 575717

Current Vehicle Details

Vehicle No.: SHC8861T

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

Insurance Company Name: INDIA INT'L INS PTE LTD

Land Transport Authority

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 11 Apr 2019 / 13:39:28

Receipt Date/Time : 11 Apr 2019 / 13:39:28

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190411-001491

Previous Receipt No. :

| S/N | Item Description/ Business Transaction Reference No. | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
|---|---|---------------------------------|------------------------|------------------------------|
| Result of Insurance Enquiry - SHC8861T As at 10 Apr 2019/18:15:00 Insurance Co: INDIA INT'L INS PTE LTD | | | | |
| 1 | Insurance Enquiry - SHC8861T Enquiry Fee 20190411133849184379 | 7.00 | 0.49 | 7.49 |
| Sub-Total | | 7.00 | 0.49 | 7.49 |
| Total Before Rounding | | 7.00 | 0.49 | 7.49 |
| Rounding Difference | | | | 0.04 |
| Total Amount Payable | | | | 7.45 |
| Paid By | | | | |
| | xxxxxxxxxxxx9400 | Credit Card: Visa/MasterCard | | 7.45 |
| Total | | | | 7.45 |
| Cash Change | | | | 0.00 |
| Tendered Amount | | | | 7.45 |
| Excess Refundable Amount | | | | 0.00 |

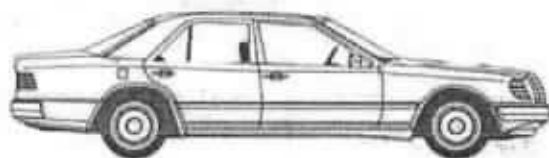
THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

VEHICLE HIRING AGREEMENT

6747 4649 : EMERGENCY BREAKDOWN SERVICE (24 HOURS)

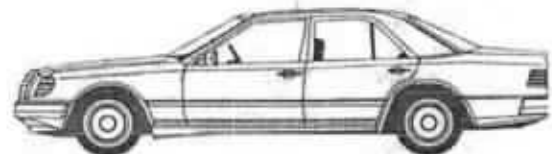
| | |
|---|---|
| Vehicle No: <u>SLP355R</u> <u>SLT3024P</u> | Vehicle Out Date: <u>11/4/19</u> <u>1230</u> |
| Make & Model: <u>Tripstar CHR</u> <u>Honda Vezel</u> | Vehicle In Date: <u>18/04/2019</u> <u>1.30pm</u> |
| THIRD PARTY INSURANCE NON WAIVER EXCESS: | Total Charges: <u>7days x \$100</u> <u>= \$700</u> |
| HIRER'S PARTICULARS | ADDITIONAL DRIVER'S PARTICULARS |
| Name (as in I/C): <u>Tan Wee Jon Ron</u> | Name (as in I/C): |
| NRIC / Passport No: <u>S8341210J</u> | NRIC / Passport No: |
| Date of Birth: | Date of Birth: |
| Address: | Address: |
| Employment Details: | Employment Details: |
| Driving License Passed Date: | Driving License Passed Date: |
| Tel: HP H O | Tel: HP H O |



RIGHT



TOP



LEFT



FRONT



BACK

PETROL LEVEL (OUT)

(LOW) | 1/8 | 1/4 | 3/8 | 1/2 | 5/8 | 3/4 | 7/8 | FULL

D : DENT | C : CRACK | S : SCRATCH | G : GAP | P : PAINT OFF

IMPORTANT

- Only persons above 21 & below 65 years of age and signing this agreement may drive the vehicle.
- Vehicle is strictly for use in Singapore only and may not be driven out of Singapore without the prior written consent of Asia Express Car Rental Pte Ltd.
- All vehicles are fitted with anti theft device which will respond to the RF at the Singapore customs. Hirer will be fully liable for all cost and charge incurred in event that the immobiliser is being activated at the Singapore customs. There will be no refund of unused rental and the hirer shall bear the cost of the following charges i) S\$300.00 for towing from Singapore Customs ii) S\$200.00 for resetting of immobiliser.
- Use of vehicle for illegal purposes (e.g. In connection with theft, drug pedaling or trafficking, smuggling) is strictly prohibited.
- In case of accident, the hirer shall report to the rental office immediately. If there are bodily injuries, a police report must be made within 24 hours.
- Punctured tyres, empty petrol tank, flat battery due to negligence, loss of vehicle's key or locked key inside the vehicle, by itself does not constitute a breakdown and that in the event, the Owner's 24 hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at S\$50 per trip (from 8AM to 10.59PM) and S\$80 per trip (from 11PM to 7.59AM). Punctured and damaged tyres that cannot be reused will be charged accordingly from S\$90-S\$250 per tyre.
- Emergency Breakdown and Towing Service is only available up to 400km from the Malaysia Custom, excluding Genting Highlands.
- All vehicles are supplied with petrol and should be returned with petrol level likewise. There will be no refund for excess petrol.
- The hirer shall be liable for late return charges at rate shown per hour per day. Latest returning time is 6pm.
- Windscreen and windows damages are not covered under insurance.
- No Smoking, Durians and Transportation of Pets are allowed. Hirer is responsible for a penalty of S\$300.

I have read and agree to the terms and conditions on both sides of this agreement. All information I have provided Asia Express Car Rental Pte Ltd in connection with this agreement is true.

Tan Wee Jon Ron

S8341210J



25 Kaki Bukit Road 4 #01-55 S417800

S/no AX-5438

| S/no | Description | Amount |
|--------|--|---------|
| 1 | Parts and labour for repair of Toyota Chr Hybrid SLV344A (Lump Sum) | \$4,900 |
| Total: | | \$4,900 |

Vehicle No: SLV344A
Date: 26 April 2019

Apex Motoring



Claim Reference : -
Insured Vehicle No. : -
Thirty Party Veh No. : -
Officer-In-Charge : -

Our Reference : KAAS/TA/5438/0344/TP/04.19
Invoice No. : 5438
Date : 26 April 2019

To: Asia Express Car Rental Pte Ltd
c/o 25 Kaki Bukit Road 4
#01-55, Synergy @ Kaki Bukit
Singapore 417800

INVOICE

| PARTICULARS | AMOUNT |
|---|-------------------|
| Vehicle No. : SLV 344A Make/Model : Toyota C-HR Hybrid 1.8S CVT <input checked="" type="checkbox"/> Inspection of Vehicle <input checked="" type="checkbox"/> Appraisal Report <input checked="" type="checkbox"/> 40 Colored Photographs <input checked="" type="checkbox"/> Transport charges <input checked="" type="checkbox"/> Re-inspection <input type="checkbox"/> Others (Specify) | SGD 560.00 |
| Total | SGD 560.00 |

Dollars: **Five Hundred and Sixty Only**

(Cheque should be crossed and make payable to "Kelvin Automotive Appraising Services")



Kelvin Automotive Appraising Services



kelvin automotive appraising services

6 tampines st 73, #01-03, singapore 528825

tel: 6746 2118 fax: 6746 1148

reg no: 53058468m

Claim Reference : -

Insured Vehicle No. : -

Thirty Party Veh No. : -

Officer-In-Charge : -

Our Reference : KAAS/TA/5438/0344/TP/04.19

Date : 26 April 2019

To: Asia Express Car Rental Pte Ltd
c/o 25 Kaki Bukit Road 4
#01-55, Synergy @ Kaki Bukit
Singapore 417800

VEHICLE APPRAISAL REPORT

Name of Workshop : Apex Motoring
Place of inspection : 25 Kaki Bukit Road 4 #01-55, Synergy @ Kaki Bukit, Singapore 417800
Date of Assignment : 13 April 2019
Date of Accident : 10 April 2019
Date of inspection : 13 April 2019

WULY

PARTICULARS OF INSPECTED VEHICLE

| | | | |
|-------------------------|-------------------------------|------------------------|-----------------|
| Registration No. | : SLV344A | Chassis Frame No. | : ZYX10-2088901 |
| Make / Model | : Toyota C-HR Hybrid 1.8S CVT | Engine No. (Logcard) | : 22R8260935 |
| Year of Manufacture/Reg | : 2017 | Odometer Reading | : 101,352 KM |
| Colour | : Silver | | |
| Class / Type | : SUV | | |

CONDITION OF VEHICLE DURING SURVEY (Visual & Static Check Only)

General Condition : Excellent
Paintwork : Excellent
Market Value : -
Scrap Value : -

CONDITION OF TYRES ON VEHICLE

| | <u>Make/Size</u> | <u>Thread Balance</u> |
|-----------|---------------------|-----------------------|
| Front L/H | KAPSEN 215 / 60 R17 | 8 mm |
| Front R/H | KAPSEN 215 / 60 R17 | 8 mm |
| Rear L/H | KAPSEN 215 / 60 R17 | 8 mm |
| Rear R/H | KAPSEN 215 / 60 R17 | 8 mm |

*The above is an estimate of the remaining life of the tyre thread in millimeters

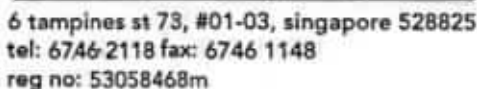
The information contained in these documents may be privileged and confidential, and is intended for the exclusive use of the addressee designation. If you are not the addressee, any enclosure, reproduction, distribution or other dissemination or use of this communication is strictly prohibited. If you have received this survey report in error, please contact us immediately by phone so that we can arrange for its return.



tel: 6746 2118 fax: 6746 1148

SLV 344A -

| S/N | Qty | Descriptions | Conditions | Repairer's Estimate | Revised Amount |
|----------------------|-------|---|--------------|---------------------|----------------|
| LIST ITEMS:- | | | | | |
| 1 | 1 pc | RH rear door | Buckled | \$ 1,004.95 | \$ 1,004.95 |
| 2 | 1 pc | RH rear door inner lock | Jammed | \$ 509.10 | \$ 509.10 |
| 3 | 1 pc | RH rear door window regulator w/ motor | Not Working | \$ 477.00 | \$ 477.00 |
| 4 | 1 pc | RH rear door outer moulding | Deformed | \$ 351.40 | \$ 351.40 |
| 5 | 1 set | RH rear door outer moulding fasteners | Necessary | \$ 35.00 | \$ 35.00 |
| 6 | 1 pc | RH rear door inner trim board | Dislodged | \$ 768.00 | Reuse |
| 7 | 1 set | RH rear door inner trim board fasteners | Necessary | \$ 35.00 | \$ 35.00 |
| 8 | 1 pc | RH rear door weatherstrip | Deformed | \$ 241.00 | \$ 241.00 |
| 9 | 1 pc | RH side skirt | Deformed | \$ 790.00 | \$ 790.00 |
| 10 | 1 pc | RH rear fender | Buckled | \$ 806.10 | Repair |
| 11 | 1 pc | RH rear fender arch moulding | Scratched | \$ 201.35 | \$ 201.35 |
| 12 | 1 set | RH rear fender arch moulding fasteners | Necessary | \$ 24.00 | \$ 24.00 |
| | | Less 25% | 2051.3 | \$ 5,242.90 | \$ 3,668.80 |
| | | | 25% = 1528.6 | \$ 5,242.90 | \$ 917.20 |
| | | | | \$ 5,242.90 | \$ 2,751.60 |
| SPECIAL NETT ITEMS:- | | | | | |
| 13 | 1 pc | RH rear sports rim | Scratched | \$ 745.00 | \$ 550 745.00 |
| 14 | 1 pc | RH rear wheel tyre @50% depreciation— | Scratched | \$ 380.00 | \$ 190.00 |
| | | | | \$ 1,125.00 | \$ 935.00 |
| Sub - Total | | | | \$ 6,367.90 | \$ 3,686.60 |



KAAS/TA/5438/0344/TP/04.19
SLV 344A

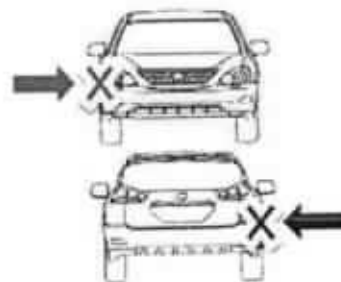
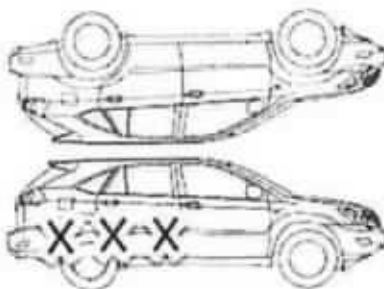
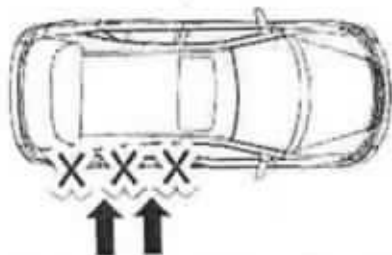
| S/N | Qty | Descriptions | Conditions | Repairer's Estimate | Revised Amount |
|-----|-----|---|-------------|---------------------|---------------------------|
| | | B/F | | \$ 6,367.90 | \$ 3,686.60 |
| | | LABOUR & OTHER CHARGES:- | | | |
| 1 | | To panel beat and renewal of all necessary damaged body parts | | \$ 1,400.00 | \$ 400 1,200.00 +100 D |
| 2 | | To check wiring and rewire | | \$ 60.00 | \$ 111 X 50.00 |
| 3 | | To remove and reinstall rh rear door components | | \$ 80.00 | \$ 60.00 |
| 4 | | To remove and reinstall rear seat cushion | | \$ 240.00 | \$ 60 200.00 |
| 5 | | To perform 4 wheel alignment | | \$ 120.00 | \$ 60 100.00 |
| 6 | | To apply anti-rust | | \$ 120.00 | \$ 60 100.00 |
| 7 | | To putty and spray-paint of affected areas | | \$ 800.00 | \$ 400 700.00 |
| | | | | \$ 2,820.00 | \$ 2,410.00 1440 |
| | | 9,228.47 25% = 2550 | | | |
| | | | Sub - Total | \$ 9,187.90 | \$ 6,096.60 |

ASSESSMENT SUMMARY

Damages sustained were consistent with the subject vehicle being involved in a collision with another vehicle and the impact was delivered

Squarely to the RH Side

portion of the vehicle.



The general area of damages is at the

RH Side portion

(Please refer to the parts list and photographs as attached for more information)

ASSESSOR'S RECOMMENDATIONS

The estimated repair costs submitted by Messrs

Apex Motoring

is \$ 9,187.90

We have adjusted the cost to \$ 6,096.60 and the repairer has agreed to undertake the repairs at a

Contract Lump Sum of \$ 4,900.00 to a acceptable quality and standards.

However, we have not given authorization and instruction to the repairer to proceed with the repairs.

The repairs should be completed within a reasonable period of 6 working days.

40 photographs were taken at the time of static inspection.

This report is strictly done in a **Without Prejudice Basis**.

We are reverting the matter to you a decision.

We enclose herewith our Invoice No. 5438
we thank you for engaging our services.

for our services rendered and

KELVIN TEO
PRINCIPAL SURVEYOR
Licensed Automotive Appraiser
Nitec in Automotive Technology
Cert. Crash Investigation & Reconstruction
Dip MS
MSAAA, AM SAE-A

TERRENCE HONG
SENIOR SURVEYOR
Dip Engineering (SP) DECC
Certs Automotive Technology (NP)
Cert. Crash Investigation & Reconstruction
Cert SCI (General Insurance)
AMSAAA, AM SAE-A

NOTE : This revised estimate was from a visual inspection. Should there be any discrepancy or unseen items not listed in this survey, kindly notify the company within Seven (7) days from the date hereof. Otherwise this revised amount shall be treated as valid.

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 | 11/04/2019 12:07 |
| Date Of Accident | 10/04/2019 18:20 |
| Exact Location Of Accident | RIVER VALLEY RD INFRONT LIANG COURT |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--------------------------------|
| Vehicle Registration Number | SHC8861T |
| 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 | I40 |
| 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 | 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 | YES |
| Policy Number | MCOM0015 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | TAN AI CHYE KANO |
| NRIC No | S1452035Z |
| Date Of Birth | 12/09/1960 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 28/04/1978 |
| Driving Experience | 40 YEARS AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-97200017 |
| Fax Number | |
| Contact Number | |
| EMail Address | TAYCPENG@GMAIL.COM |

| | |
|---|----------------------------------|
| Address | 15 #04-1067 UPPER BOON KENG ROAD |
| Postcode | 380015 |
| 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 | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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? | NO |
| 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) | 2 |
| Passenger 1 | 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.

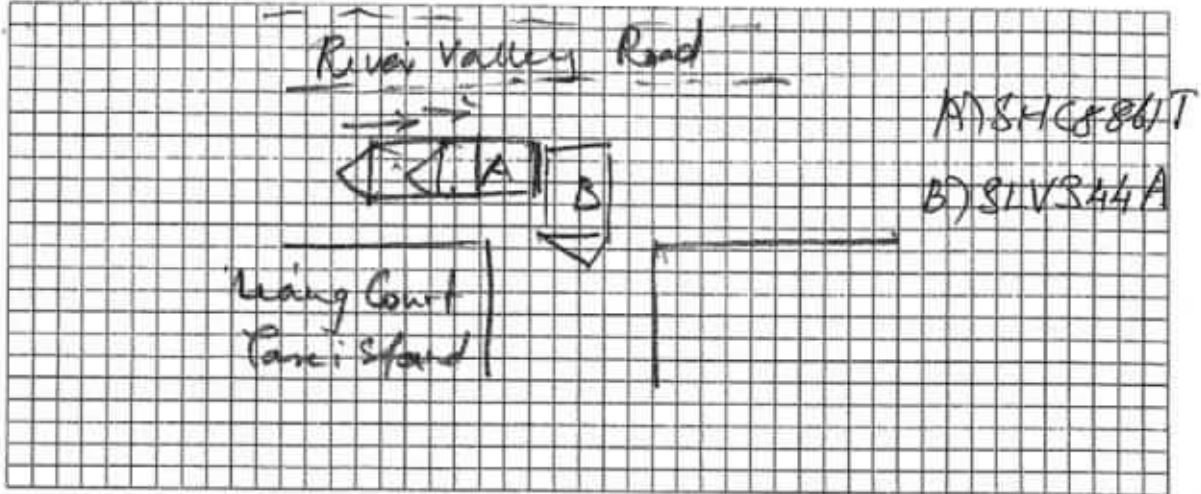
Attachment(s)

| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | NO |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-------------------------------------|---------------|
| Vehicle Registration Number | SLV344A |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | REAR RHT DOOR |
| No. Of Passenger (Including Driver) | |

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/4/19 at about 1820hrs while I Veh A
 reversed at the taxi stand, collided onto Veh B
 that was ~~at~~ entering the side road.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD

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.:

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.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident 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 | | | | |
|--|---|-----------------------|--------------------------------|---|
| INDIA INTERNATIONAL INSURANCE PL | | | Ref : CS3/III19006547/Gqd3e2-1 | |
| 64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711 | | | Date : 25-06-2019 |  |
| | | | Code : III2 | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | | |
| Insured Veh. | SHC 8861T | Veh. Inspected | SLV 344A | |
| Policy No. | MCOM0015 | Coverage (\$) | 0.00 | |
| Claim No. | MCT19040313 | Excess (\$) | 0.00 | |
| Assign From | STANLEY LAI | Assign Date | 29/05/2019 | |
| 2. Vehicle Particulars & Condition | | | | |
| Make & Model | TOYOTA C-HR HYBRID | c.c | 1797 | |
| Engine No. | HIDDEN | Year of Reg. | 2017 | |
| Chassis No. | ZYX102088901 | Colour | SILVER | |
| Odometer | 101352 | Steering | IN ORDER | |
| Brakes | IN ORDER | Modification | STANDARD ALLOY RIM | |
| General | GOOD | | | |
| 3. Conditions of Tyres | | | | |
| | Size | Make | Balance | |
| R/H Front Tyre | 215/60 R17 | KAPSEN | 6 mm | |
| L/H Front Tyre | 215/60 R17 | KAPSEN | 6 mm | |
| R/H Rear Tyre | 215/60 R17 | KAPSEN | 6 mm | |
| L/H Rear Tyre | 215/60 R17 | KAPSEN | 6 mm | |
| 4. Description of Damages | | | | |
| THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS. | | | | |
| 5. General Information | | | | |
| Accident Date | 10/04/2019 | Inspection Date | 12/04/2019 | |
| Survey held at | APEX MOTORING 25 KAKI BUKIT ROAD 4 #01-55 SYNERGY @ KB SINGAPORE 417800. | | | |
| 5a. Remarks | | | | |
| A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. | | | | |
| 5b. Estimate Days of Repair | | | | |
| ESTIMATED NORMAL PERIOD FOR REPAIR: | | 5 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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLV 344A

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|------------------------------------|--|----------------------|---------------------------|-------------------|
| <u>REPLACEMENT OF PARTS</u> | | | | |
| 1 | RH REAR DOOR | BUCKLED | 1,004.95 | 1,004.95 |
| 1 | RH REAR DOOR INNER LOCK | NOT NECESSARY | 509.10 | - |
| 1 | RH REAR DOOR WINDOW REGULATOR W/MOTOR | BENT | 477.00 | 477.00 |
| 1 | RH REAR DOOR OUTER MOULDING | DEFORMED | 351.40 | 274.00 |
| 1 | SET RH REAR DOOR OUTER MOULDING FASTENERS | NECESSARY | 35.00 | 35.00 |
| 1 | RH REAR DOOR INNER TRIM BOARD | REUSE | 768.00 | - |
| 1 | SET RH REAR DOOR INNER TRIM BOARD FASTENERS | NECESSARY | 35.00 | 35.00 |
| 1 | RH REAR DOOR WEATHERSTRIP | NOT NECESSARY | 241.00 | - |
| 1 | RH SIDE SKIRT | NOT NECESSARY | 790.00 | - |
| 1 | RH REAR FENDER | TO REPAIR SEE LABOUR | 806.10 | - |
| 1 | RH REAR FENDER ARCH MOULDING | SCRATCHED | 201.35 | 201.35 |
| 1 | SET RH REAR FENDER ARCH MOULDING FASTENERS | NECESSARY | 24.00 | 24.00 |
| | LESS 25% DISCOUNT | | - | -512.83 |
| | | | 5,242.90 | 1,538.47 |
| <u>SPECIAL NETT ITEMS</u> | | | | |
| 1 | RH REAR SPORTS RIM (SN) | SCRATCHED | 745.00 | 550.00 |
| 1 | RH REAR WHEEL TYRE (SN) | NOT NECESSARY | 380.00 | - |
| | | | 1,125.00 | 550.00 |
| <u>LABOUR</u> | | | | |
| | TO PANEL BEAT AND RENEWAL OF ALL NECESSARY DAMAGED BODY PARTS.INCLUSIVE OF THE REPAIR OF RH REAR FENDER. | | 1,400.00 | 500.00 |
| | TO CHECK WIRING AND REWIRE. | NOT NECESSARY | 60.00 | - |
| | TO REMOVE AND REINSTALL RH REAR DOOR COMPONENTS. | | 80.00 | 60.00 |
| | TO REMOVE AND REINSTALL REAR SEAT CUSHION. | | 240.00 | 60.00 |
| | TO PERFORM 4 WHEEL ALIGNMENT. | | 120.00 | 60.00 |
| | TO APPLY ANTI-RUST. | | 120.00 | 60.00 |
| | TO PUTTY AND SPRAY-PAINT OF AFFECTED AREAS. | | 800.00 | 400.00 |
| | | | 2,820.00 | 1,140.00 |

Report Ref No. CS3/III19006547/Gqd3e2-1



| | | | |
|---|--|----------|----------|
| GRAND TOTAL | | 9,187.90 | 3,228.47 |
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) | | | 2,550.00 |

Report Ref No. CS3/III19006547/Gqd3e2-1

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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