

22/03/2002

ASS. REC. BY:

REF: CS/SMO19012945/Gcf3/2

Special Instruction:

Surveyor: GQ

ASSIGNMENT (Office)

From (Person): Thelma Choo

of

SMO

Date/Time: 23.7.19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SMG 264P

Insured:

FBA 8035T

at Workshop m/s Revol Carz Garage

Tel:

93222338

of Block 16 AMK Ind Part 2A # 02-18

Policy No: D19MTMC01001045

Claim No:

CNTD1903064

Sum Insured:

Excess:

Make of Veh:

D.O.A

25.6.19

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 23.7.19 10.57a.m

Person Contacted:

June

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	SMG 264P X
	FBA 8035T X
	Dismantle: 26/7/2019.

Surveyor

Gnl.

REF: SMO

PRS

ASSIGNMENT

From: _____ Date: 24.7.2019

Estimated Cost: _____

OD ☒ TP ☐ WS ☐ TP RES ☐ OD RES ☐ EVA ☐ INV ☐ MV

To Inspect Vehicle No: SMG 264P

at Workshop m/s Revol Carz Garage

of Block 10 Amk Ind Park 2A #02-18

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: After 10.00 a.m

(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: 3 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS "rmp"

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SMG 264P Yr Regn: 30 Nov 2018

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

Truck / Trailer or _____

Make: Toyota Prius plus c.c 1798

Colour: Grey A/C: Insured / Std / NI / NA

Sp. Reading: 29142 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTD8S3EU70J035613

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 A/Rim or _____

Tyre Size: F: 205/60 R16

R: "

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

TOYO / ☒ YOKO or _____

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.I. 24-07-19

Survey held at w/s 12:30pm

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

O/S Rear

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

Date / Time	Action / Instruction
	<u>\$1000 - \$2000</u>
	<u>25/7/2019</u>

Date/Time, File Pass to?

☐ : Preli. Report

☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 3Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format: PRE

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

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

100

60

11

171

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	26 Jun 2019		23 Jul 2019 10:46 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

Insured:

JUSTINE RAJ S/O MAZALAMANI, ID: S9734224E, Tel: +6582262175, Email: JUSTINE413@GMAIL.COM

Main Claimant:

POH KAI GUAN, PATRICK, ID: S8520240E

Vehicle Reg. No.:

SMG264P

Date of Loss:

25/06/2019 18:00 - :59

Claim Type:

TP / CMTD1903064

Policy/Cover Note No.:

D19MTMC01001045 (TP, Fire & Theft)

Vehicle Reg. No. (Insured):

FBA8035T

Policy No. (Claimant):

Excess:

Repairer:

Revol Carz Garage Pte Ltd (HQ) Block 10, Ang Mo Kio Ind Park 2A, #02-18, AMK Auto Point, 568047 Ang Mo Kio - Tel:

Handling Insurer:

Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Thelma Choo - 6322 4681]

Adjuster:

LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 01/08/2019]

Driver/Custodian (Insured):

JUSTINE RAJ S/O MAZALAMANI (21 / Male), NRIC: S9734224E, Tel: +6582262175 Email: JUSTINE413@GMAIL.COM

Adj Asg. Remarks:

WS: JUNE 93222338/ GAVIN 97406855

ASSOCIATED MAIL RECEIVED

[View All](#)
[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)
[Search Tasks](#)
[Create New Task](#)
[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	240E
Vehicle Details	
Vehicle No.:	SMG264P
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Jul 2019
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS PLUS (AUTO)
Primary Colour:	Grey
Manufacturing Year:	2018
Engine No.:	2ZR0C72291
Chassis No.:	JTDZS3EU70J035613
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$30,006.00
Original Registration Date:	30 Nov 2018
First Registration Date:	30 Nov 2018
Transfer Count:	0
Actual ARF Paid:	\$24,009.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Nov 2028
PARF Rebate Amount:	\$18,006.00
Intended COE Rebate Details	
COE Expiry Date:	29 Nov 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$31,101.00
COE Rebate Amount:	\$29,062.00
Total Rebate Amount:	\$47,068.00

The information contained herein is correct as at 25 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 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 26/06/2019 15:37
Date Of Accident 25/06/2019 18:40
Exact Location Of Accident JUNCTION OF UPP JURONG RD & JURONG WEST ST 93
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMG264P
Insured/Policyholder
Name Of Registered Owner POH KAI GUAN, PATRICK
NRIC No S8520240E
Email Address JULY_08@YAHOO.COM
Mobile Phone No (LOCAL) +65-90603013
Alternative Phone No Office-NOPHONE

Vehicle Particulars

Manufacturer TOYOTA
Model PRIUS PLUS-1.8 (A)

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number P2217677

Cover Note Number

Driver

Name of Driver POH KAI GUAN, PATRICK
NRIC No S8520240E
Date Of Birth 08/07/1985
Occupation INDOOR
Date Of Driving Pass 02/11/2005
Driving Experience 13 YEARS AND 7 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-90603013
Fax Number
Contact Number OFFICE-NOPHONE
Email Address JULY_08@YAHOO.COM
Address 15 WOODLANDS AVE 6
#09-12

Postcode	738995
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - 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: : HAYDEN Gender: : Male
Passenger 2	Name: : LOW HWEE INN Gender: : Female

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

ON 25/06/2019 AT ABOUT 1840 HRS. WHILE I WAS TRAVELLING ALONG UPP JURONG RD TOWARDS JURONG WEST ST 93. WHEN I REACH JUNCTION OF JURONG WEST ST 93. I SAW THAT HAD ONE BICYCLE CROSSING THE ROAD. I THEN STOP MY VEHICLE. SUDDENLY I FEEL AN IMPACT FROM MY REAR PORTION. I NOTICED THAT REAR RIGHT OF MY VEHICLE HAD COLLIDED BY VEHICLE B. NO ONE WAS INJURED.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBA8035T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	JUSTINE RAJ S/O MAZALAMANI
NRIC/Passport Number	S9734224E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

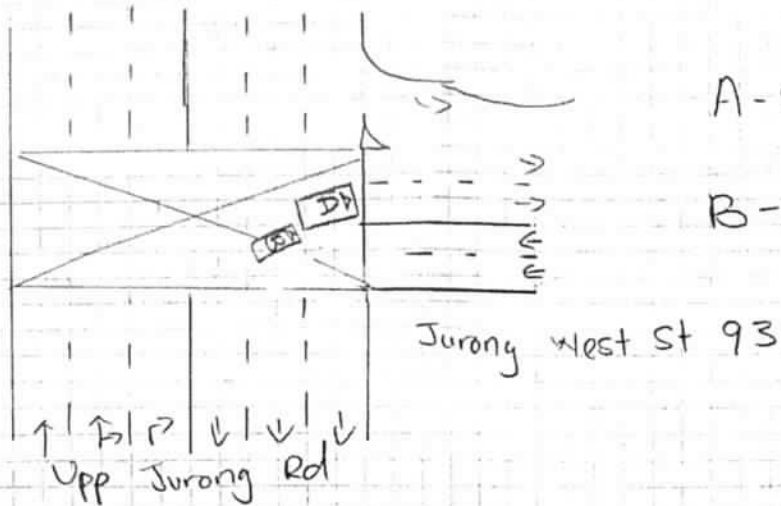
Policyholder's Signature
Date & Time:

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

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

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

SKETCH PLAN



A-SMG264P

B-FBA803ST

Jurong West St 93

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to circumstances

DECLARATION

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

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.:

- ☐ Claim own policy
- ☐ Claim third party
- ☒ Claim OD / TP at other works hop
- ☐ For record purpose

Policy No. P2217677
Insurer AXA Veh.No. SM 6264P

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	26 Jun 2019		23 Jul 2019 10:46 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	JUSTINE RAJ S/O MAZALAMANI, ID: S9734224E, Tel: +6582262175, Email: JUSTINE413@GMAIL.COM								
Main Claimant:	POH KAI GUAN, PATRICK, ID: S8520240E								
Vehicle Reg. No.:	SMG264P	Date of Loss:	25/06/2019 18:00 - :59 [6 Months and 26 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / CMTD1903064	Policy/Cover Note No.:	D19MTMC01001045 (TP, Fire & Theft)						
Vehicle Reg. No. (Insured):	FBA8035T	Policy No. (Claimant):							
		Excess:							
Repairer:	Revol Carz Garage Pte Ltd (HQ) Block 10, Ang Mo Kio Ind Park 2A, #02-18, AMK Auto Point, 568047 Ang Mo Kio - Tel:								
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Thelma Choo - 6322 4681]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 01/08/2019]								
Driver/Custodian (Insured):	JUSTINE RAJ S/O MAZALAMANI (21 / Male) , NRIC: S9734224E, Tel: +6582262175 Email: JUSTINE413@GMAIL.COM								
Adj Asg. Remarks:	WS: JUNE 93222338/ GAVIN 97406855								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

***SMG264P (CMTD1903064)**
[FBA8035T]
TP
POH KAI GUAN, PATRICK
Jun 25 2019 6:00PM
[JUSTINE RAJ S/O MAZALAMANI]
Revol Carz Garage Pte Ltd

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Video							1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)						Thumbnail	Print	
1	04/07/19 09:06	Video - Accident					1	Load MP4		
Assessment Reports							1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)						Thumbnail	Print	
1	23/07/19 10:47	Accident Statement From:SC - Reg. No: FBA8035T, Claimant: JUSTINE RAJ S/O MAZALAMANI					1	Load HTM		
Photos/Images							3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print	
1	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
2	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
3	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
4	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
5	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
6	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
7	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
8	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
9	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
10	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
11	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
12	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
13	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
14	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
15	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
16	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
17	29/07/19 12:53	General View					1	Load JPG	<input checked="" type="checkbox"/>	
18	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
19	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
20	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
21	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
22	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
23	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
24	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
25	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
26	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
27	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
28	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
29	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	
30	29/07/19 12:53	Photographs of Damaged Parts					1	Load JPG	<input checked="" type="checkbox"/>	

Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)		Thumbnail Print
31	29/07/19 12:53	Photographs of Damaged Parts		Load JPG <input checked="" type="checkbox"/>
32	29/07/19 12:53	Photographs of Damaged Parts		Load JPG <input checked="" type="checkbox"/>
33	29/07/19 12:53	Photographs of Damaged Parts		Load JPG <input checked="" type="checkbox"/>
34	29/07/19 12:53	Photographs of Damaged Parts		Load JPG <input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)		Thumbnail Print
1	23/07/19 10:19	Pre-Repair Survey + GIA		Load PDF
2	23/07/19 10:45	Pre-Repair Survey - ASSIGN LKK		Load PDF

Documents Checklist

DOCUMENTS CHECKLIST		Reset	Save	Print
There are no document checklists configured.				
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>				
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>				

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/SMO19012945/GCF3E2

Date: 30/07/2019

REFERENCE

Handling Insurer: Sompo Insurance Singapore Pte. Ltd. Policy No: D19MTMC01001045

Claimant Vehicle No : SMG264P **Insured Vehicle No :** FBA8035T

Date of Loss: 25/06/2019 Nature of Claim: TP Claim No: CMTD1903064

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SMG264P**
 Make & Model: TOYOTA PRIUS PLUS, 1.8 (A) Engine No: 2ZR0C72291
 Reg. Date: 30/11/2018 (Man. Year: 2018) Chassis No: JTDZS3EU70J035613
 Colour: Grey Odometer: 29142 km
 Engine Capacity: 1798 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): **Market Value/New Car Price**

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 205/60 R16 Rear Tyre Size: 205/60 R16
 Front Left Side: Yokohama 6 mm Rear Left Side: Yokohama 6 mm
 Front Right Side: Yokohama 6 mm Rear Right Side: Yokohama 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 23/07/2019

Date Inspected: 24/07/2019 Inspected At:

 Revol Carz Garage Pte Ltd (HQ)
 Block 10, Ang Mo Kio Ind Park 2A, #02-18,
 AMK Auto Point
 Singapore 568047

Estimated Period of Repair: 3.0 days

Adjuster: XING GUO QIANG

Manager: CELINE FONG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

A)THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.

B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.

C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$1,000.00 -\$2,000.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 30 Jul 2019)
Parts:	144	TOYOTA PRIUS PLUS 1.8 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SMG264P)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >