

22/03/2002

ASS. RFC. BY:

REF: CS3/MSG19013884/KLCf3ep Special Instruction:

Surveyor: Kalvin

## ASSIGNMENT (Office)

From (Person): Christina Wong of MSG Date/Time: 7.8.19 16.19 p.m.

Estimated Cost: Bill to:

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

To Inspect Vehicle No: Ym 6528 R Insured: XB 8917H

at Workshop m/s Cosmopolitan Engineering  
of No 4 Loyang Walk Tel: 65457722

Policy No: MSD / VCC / 19-000308 Claim No: MSC / Y / 19-000960.

Sum Insured: Excess:

Make of Veh: D.O.A. 5.8.2019  
(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 7.8.19 4.32p.m. Person Contacted: Tin H.O.D. Endorsement:

Vehicle IN/OUT

Date/Time	Action/Instruction ( X ) Estimate
	Ym 6528 R - x
	XB 8917H - x

(08/11/13)

Surveyor: Kalvin

REF:

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / FD / WS / TP RES / OD RES / EVA / INV / MVTo Inspected Vehicle No: YM 6528Rat Workshop m/s Cosmopolitan Engineeringof 4, Layan Walk

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: YM 6528R Yr Regn: 25 Aug / 2007Type: M.Car / M.Cycle / Bus / Van / Lo / Taxi / Prime Mover /

Truck / Trailer or

Make: Nissan MK8 57BNHRA c.c. 784Colour: White A/C: Insured / Std / NI / NASp. Reading: 509088 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: M1CB37BN00083Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 22r / 90 1475

R: \_\_\_\_\_

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

TOYO / YOKO or OH754

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 5 mm R/Bal. 4xX mmL/Bal. 5 mm L/Bal. 4x4 mmD.O.A. 5/8/14 D.O.I. 8/1/19Survey held at 4, Layan Walk

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

Front 15

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

Date / Time	Action / Instruction
	<u>PRS</u>
	<u>No est</u>
	<u>\$55K - \$8.5K</u>
	<u>8/2/19</u>
	<u>14/8/2019</u>
	<u>RECEIVED 20 AUG 2019</u>
	<u>M574</u>

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 6

1)

☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

Survey Fee: 120

Transportation: \_\_\_\_\_

2)

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)

\_\_\_\_ S + RS \_\_\_\_ SI

☐ : Interview (\$ \_\_\_\_\_)

Photos

☐ : Tech. Invs (\$ \_\_\_\_\_)

Others

☐ : Weekend (\$ \_\_\_\_\_)Report Format: PRS

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

TOTAL

131

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	07 Aug 2019		07 Aug 2019 16:19 Assign				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>			<b>[Created by insurer]</b>						
Insured:	SG SAGAWA AMEROID PTE .LTD., Co. Reg. No.: 199100423D, Email: ZIV.ONG@SGH-GLOBAL.COM								
Main Claimant:	COSMOPOLITAN ENGINEERING SERVICES PTE LTD, Co. Reg. No.: 198401891K								
Vehicle Reg. No.:	YM6528R	Date of Loss:	05/08/2019 09:00 - :59 [146 Months and 11 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP	Policy/Cover Note No.:	MSD/VCC/19-000308 (Comprehensive) Coverage: 01/04/2019 - 31/03/2020						
Vehicle Reg. No. (Insured):	XB8917H	Policy No. (Claimant):							
		Excess:							
Repairer:	Cosmopolitan Engineering Services Pte Ltd (HQ) NO. 4 LOYANG WALK SE(508787), 508787 Loyang - Tel: 65467728								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 08/08/2019]								
Driver/Custodian (Insured):	WANG XUFEI (43 / Male) , NRIC: G6732963K, Tel: +6594882896 Email:								
Adj Asg. Remarks:	on WP. Liab: Unclear. Disagree on SJE. Assign: LKK Auto Consultants Pte Ltd. Contact: 6546 7728.								
<b>ASSOCIATED MAIL RECEIVED</b>			<a href="#">View All</a>	<a href="#">Compose Case Mail</a>					
There are no mail for this case.									
<div> </div>									
<b>ALL ASSOCIATED TASKS</b>									
<div> <div>View All</div> <div>Search Tasks</div> <div>Create New Task</div> <div>Complete</div> </div>									
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:	Company
Owner ID:	891K
Vehicle Details	
Vehicle No.:	YM6528R
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Aug 2019
Vehicle Make:	NISSAN
Vehicle Model:	MKB37BNHRA
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	J08EUC10231
Chassis No.:	MKB37BN00083
Maximum Power Output:	-
Open Market Value:	\$40,062.00
Original Registration Date:	25 May 2007
First Registration Date:	25 May 2007
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	24 May 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$22,263.00
COE Rebate Amount:	\$12,376.00
<b>Total Rebate Amount:</b>	<b>\$12,376.00</b>
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 13 Aug 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	05/08/2019 13:03
Date Of Accident	05/08/2019 09:50
Exact Location Of Accident	ALPS AVENUE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM6528R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COSMOPOLITAN ENGINEERING SERVICES PTE LTD
Co Reg No	198401891K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66029933

### Vehicle Particulars

Manufacturer	NISSAN
Model	MKB37BNHRA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI19V04845/VCZ/R12
Cover Note Number	

### Driver

Name of Driver	LI ZHONGGUO
Passport No/FIN	G8153188P
Date Of Birth	08/10/1978
Occupation	OUTDOOR
Date Of Driving Pass	04/03/2008
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91227388
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	1 CHANGI VILLAGE ROAD #01-2050
Postcode	500001
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - AUTHORIZED DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

I WAS STATIONARY IN THE Q, TRUCK B BESIDE WAS ABLE TO MOVE OFF, HE TURN TOO SHAPE AND HIT AGAINST MY DRIVER SIDE, I KEEP HORNED AND HE STILL MOVE FORWARD ABOUT 2 METER AND CAUSE MY FRONT BUMPER DAMAGED.

#### 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	XB8917H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	WANG XU FEI
NRIC/Passport Number	G6732963K
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### 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

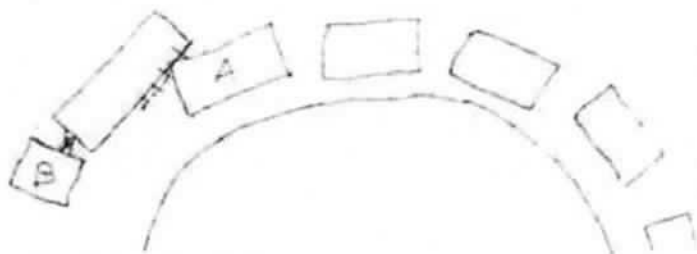
Reporting Centre Personnel's Signature  
Name  
NRIC/PIN No.

### Sketch Plan #2

### SKETCH PLAN

A: YM 6528R

B. XB 8917H

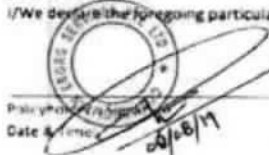


**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I was stationary in the W truck B ~~was~~ beside  
was able to "make out", he turn too sharp  
and hit against my driver side, I keep horned  
and he still miss <sup>missed</sup> about 2 meter and cause my  
front bumper damaged.

## DECLARATION

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



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



Reporting Centre Personnel's Signature  
Name: Chang Chee Sing  
NRIC/FIN No. 50248770W



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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	07 Aug 2019		07 Aug 2019 16:19 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS		[Created by Insurer]
Insured:	SG SAGAWA AMERIOD PTE .LTD., Co. Reg. No.: 199100423D, Email: ZIV.ONG@SGH-GLOBAL.COM	
Main Claimant:	COSMOPOLITAN ENGINEERING SERVICES PTE LTD, Co. Reg. No.: 198401891K	
Vehicle Reg. No.:	YM6528R	Date of Loss: 05/08/2019 09:00 - :59 [146 Months and 11 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / MSC/V/19-000960	Policy/Cover Note No.: MSD/VCC/19-000308-00 (Comprehensive) Coverage: 01/04/2019 - 31/03/2020
Vehicle Reg. No. (Insured):	XB8917H	Policy No. (Claimant): Excess:
Repairer:	Cosmopolitan Engineering Services Pte Ltd (HQ) NO. 4 LOYANG WALK SE(508787), 508787 Loyang - Tel: 65467728	
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]	
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN ] ... [Imm.Advice due 08/08/2019]	
Driver/Custodian (Insured):	WANG XUFEI (43 / Male) , NRIC: G6732963K, Tel: +6594882896 Email:	
Adj Asg. Remarks:	on WP. Liab: Unclear. Disagree on SJE. Assign: LKK Auto Consultants Pte Ltd. Contact: 6546 7728.	

ASSOCIATED MAIL RECEIVED	<a href="#">View All</a>	<a href="#">Compose Case Mail</a>
There are no mail for this case.		

ALL ASSOCIATED TASKS										<a href="#">View All</a>	<a href="#">Search Tasks</a>	<a href="#">Create New Task</a>	<a href="#">Complete</a>
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?				
No results.													

## Claim Documents

\*YM6528R (MSC/V/19-000960)

[XB8917H]

TP






COSMOPOLITAN ENGINEERING SERVICES PTE LTD

Aug 5 2019 9:00AM

[SG SAGAWA AMERIOD PTE .LTD.]

Cosmopolitan Engineering Services Pte Ltd

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Photos/Images							3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print	
1	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
2	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
3	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
4	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
5	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
6	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
7	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
8	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
9	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
10	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
11	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
12	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
13	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
14	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
15	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
16	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
17	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
18	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
19	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
20	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
21	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
22	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
23	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
24	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
25	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
26	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
27	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
28	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
29	13/08/19 08:35	General View						Load JPG	<input checked="" type="checkbox"/>	
30	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
31	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
32	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
33	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
34	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
35	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
36	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	
37	19/08/19 09:55	Reinspection Photo						Load JPG	<input checked="" type="checkbox"/>	

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	19/08/19 09:55	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	07/08/19 13:17	OI XB8917H GIA REPORT	 Load PDF	
2	07/08/19 13:17	TPD YM6528R GIA REPORT	 Load PDF	
3	07/08/19 13:17	TPD YM6528R - PRI	 Load PDF	
4	07/08/19 15:08	Disagree on SJE	 Load PDF	

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

### Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

## 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/MSG19013884/K1CF3E2

Date: 22/08/2019

## REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VCC/19-000308-00
Claimant Vehicle No :	YM6528R	Insured Vehicle No :	XB8917H
Date of Loss:	05/08/2019	Nature of Claim:	TP
		Claim No:	MSC/V/19-000960

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	YM6528R	Engine No:	J08EUC10231
Make & Model:	NISSAN MKB37BHHRA, 7.7 D (M)	Chassis No:	MKB37BN00083
Reg. Date:	25/05/2007 (Man. Year: 2007)	Odometer:	509088 km
Colour:	White		
Engine Capacity:	7684 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:	225/90 R17.5	Rear Tyre Size:	225/90 R17.5 (D)
Front Left Side:	OHTSU 5 mm	Rear Left Side:	OHTSU 4/4 mm
Front Right Side:	OHTSU 5 mm	Rear Right Side:	OHTSU 4/4 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	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

## INSPECTION

Date of Assignment:	07/08/2019	
Date Inspected:	08/08/2019 Inspected At:	Cosmopolitan Engineering Services Pte Ltd (HQ) NO. 4 LOYANG WALK SE(508787) Singapore 508787
Estimated Period of Repair:	6.0 days	

Adjuster: KALVIN ANG WEI KUN

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 \$5,500.00 - \$6,500.00

## REPAIR DETAILS

<b>Reference</b>		
<b>Part Source:</b>	(Last Synchronised: 22 Aug 2019)	
<b>Parts:</b>	N/A	NISSAN MKB37BHHRA 7.7 D (M) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for YM6528R)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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.
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< END OF ESTIMATES >