

23/03/2011

ASS. REC. BY:

REF:

C8/FCI/9014018/R1v d3

Special Instruction:

Surveyor: Rasul

ASSIGNMENT (Office)

aws

From (Person):

Joanne Yong

of

FCI

Date/Time: 9:18am 12/8/11

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLH 9709X

Insured:

SHD 68779

at Workshop m/s

Performance

Tel:

6319 0174

of

303 Alexandra Road

Policy No:

Claim No:

D19005136 MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 6/8/2019

CA / REV / REP. / REV 24 HRS (DS)

H.O.D. Endorsement:

Date/Time: 10:12am 12/8/11

Person Contacted:

Caroline

Vehicle IN / OUT

Date/Time

Action/Instruction

Island 1 ✓

SLH 9709X-X

SHD 68779-X

27/8/11

Email preli revised to FCI

9/10/11

Final fig \$ 2057 confirmed by email (Red 1865.65, 4890)

ASS. REC. BY:

REF:

FCI

105w

## ASSIGNMENT

From:

Date:

28/8/19

Estimated Cost:

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

To Inspect Vehicle No:

SLH 9709X

at Workshop m/s

performance

of

303 Almond Road

Insured:

Policy No.:

Claims No.:

Sum Insured:

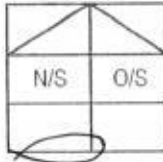
Excess:

(Client's Record)

Make of Veh:

Before 12pm  
Inthiran

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt:

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

(DS)

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLH 9709X

Yr Regn:

2016 / NOV

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

Truck / Trailer or

Make:

B.M.W 116D

C.C

1496

Colour

BLACK

A/C:

Insured / Std / NI / NA

Sp. Reading

41988

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WBA 1V72040V 725242

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/55R16

R:

1.1

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.

06/08/19

D.O.I.

26/08/19

Survey held at

Performance

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

Rear N/S

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

Date / Time

Action / Instruction

RECEIVED 09 OCT 2019

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2) 9/10 - typist

Days Of Repair:

3

Resurvey No. of Trip:

1

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Week end (\$)

Survey Fee:

Transportation:

S + RS: SI

Flares

Others

TOTAL

Report Format:

aws

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

2057



Auto  
Consultants  
Pte Ltd

Company Registration No. 199507198R

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

Your ref: D19005136MFSH

Our Ref: CS/FCI19014018/R1vd3

Date : 27/8/2019

The Motor Claims Department  
MS FIRST CAPITAL INSURANCE LTD

WITHOUT PREJUDICE

Dear Sir/Madam,

**INITIAL INSPECTION REPORT OF VEHICLE NO: SLH 9709X**

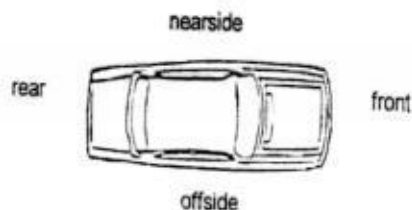
We thank you for your instruction on 13/8/2019

Please be informed that we had conducted the inspection of the above mentioned  
26/8/2019 at the premises of M/s PERFORMANCE MOTORS LIMITED  
and have the following to report:-

Workshop Estimate Amount	: S\$3,839.65
Revised Estimate Amount	: S\$2,084.00
"Check" Items Amount	: S\$157.65
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

**Description of Damage:**

The vehicle sustained damages at the  
rear n/s portion



Comments/Present Status:  
Damages Consistent

Yours faithfully,

**MOHAMMED RASUL**  
Automotive Assessor

**MOTOR SURVEY ASSIGNMENT**

Date	07-08-2019	Our Ref No. D19005136MFSH
Accident Date	06-08-2019	Claim Type. Third Party
Insured Vehicle	SHD6877G	Third Party Vehicle. SLH9709X
Survey Location	303 ALEXANDRA ROAD SIME DARBY PERFORMANCE CENTRE	
Contact Person.	CAROLINE	
Contact No.	63190174/ 0	Fax No. 64794601
Survey Type	DIRECT SETTLEMENT:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

**FOR DIRECT SETTLEMENT**

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

**THIRD PARTY SURVEY REQUEST**

Cc : Workshop	PERFORMANCE MOTORS LIMITED	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	JOANNEY	

**IMPORTANT NOTE**

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

**Veron Chen (LKKAUTO)**

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**From:** Veron Chen (LKKAUTO)  
**Sent:** Tuesday, 27 August 2019 12:32 PM  
**To:** 'CWS Motor Claims'  
**Cc:** 'Joanne Yong'; SUR  
**Subject:** RE: SURVEY ASSESSMENT - D19005136MFSH/1-SLH 9709X  
**Attachments:** SLH 9709X PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SLH 9709X  
Date of survey: 26/8/2019  
Number of days (estimated) : 3 days

Best Regards,

**Veron Chen** | Case Handler

**LKK Auto Consultants Pte Ltd**

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

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

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**From:** Admin-D (LKKAUTO) <admin-d@lkkauto.com>  
**Sent:** Tuesday, 13 August 2019 4:36 PM  
**To:** 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** 'Joanne Yong' <JoanneYong@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>  
**Subject:** RE: SURVEY ASSESSMENT - D19005136MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

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

Best Regards

**G.NIVITHA**

**LKK Auto Consultants Pte Ltd**

Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

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

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**From:** CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]  
**Sent:** Tuesday, 13 August 2019 9:18 AM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** CWS Motor Claims <[cwsmotorclaims@msfirstcapital.com.sg](mailto:cwsmotorclaims@msfirstcapital.com.sg)>; Joanne Yong

<Joanheyong@msfirstcapital.com.sg>

**Subject:** PRI: SURVEY ASSESSMENT - D19005136MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

**Note: All the accident reports are uploaded into CWS for your perusal.**

Best Regards,

Admin Team

Claim Workflow System

Motor Claims Department

MS First Capital Insurance Limited

Tel : 6507 3848

Fax : 6507 3849

**PS: This is a system generated mail. Please do not reply to this mail.**



This email has been checked for viruses by AVG antivirus software.  
[www.avg.com](http://www.avg.com)

**Veron Chen (LKKAUTO)**

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**From:** Veron Chen (LKKAUTO)  
**Sent:** Wednesday, 9 October 2019 9:11 AM  
**To:** Sharon Heng L K; Rasul (LKKAUTO); SUR  
**Subject:** RE: DIRECT SETTLEMENT FINAL REPORT - SLH9709X

Dear Sharon,

WITHOUT PREJUDICE

Confirmed amount \$2057.00 before GST @ 3 working days.

**Kindly send Final invoice and all supporting documents directly to First Capital Ins Ltd.**

Best Regards,  
Veron Chen | Case Handler  
LKK Auto Consultants Pte Ltd  
Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

-----Original Message-----

From: Sharon Heng L K <sharon.heng.leekun@sime-darby.com.sg>  
Sent: Tuesday, 8 October 2019 8:00 PM  
To: Rasul (LKKAUTO) <Rasul@lkkauto.com>  
Subject: DIRECT SETTLEMENT FINAL REPORT - SLH9709X

Dear Rasul

For your perusal :

Labour	\$2057.00
Part	Nil
Total	\$2057.00

Owner is claiming      LOSS OF USE = \$80 X 3 DAYS.

Note : 3 working days.

Please reply me directly.

Best Regards

Sharon Heng  
Performance Motors Ltd  
Body & Paint  
DID : 63190123  
Fax : 64743229

"This electronic mail content and any accompanying attachments ("the Message") is intended only for the named addressee ("the Recipient") and may contain information that is confidential, privileged and/or proprietary to the Sime Darby group of companies ("Sime Darby") and/or protected under applicable laws. If you are not the intended Recipient, you are strictly prohibited from using, disseminating, forwarding and/or printing the Message. Please notify the sender immediately by return e-mail and permanently delete all copies of the Message. Sime Darby disclaims all liability for any error, loss or damage arising from the Message being infected by computer virus or other malicious software. Any views and/or opinions expressed in the Message are solely those of the author's and do not necessarily represent those of Sime Darby's."

-----Original Message-----

From: service.pml@simedarby.com.sg [mailto:service.pml@simedarby.com.sg]

Sent: Tuesday, 8 October, 2019 5:47 PM

To: Sharon Heng L K

Subject: Message from KM\_C458



## 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	06/08/2019 17:25
Date Of Accident	06/08/2019 14:30
Exact Location Of Accident	JURONG EAST AVE 1 FILTER LANE EXITING TO TOWN HALL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH9709X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MAQROMA PTE LTD
Co Reg No	201019105W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90174283
Alternative Phone No	OFFICE-68424600

### Vehicle Particulars

Manufacturer	BMW
Model	116D
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	TEO ZI YANG
NRIC No	S8811346B
Date Of Birth	03/04/1988
Occupation	INDOOR
Date Of Driving Pass	22/11/2010
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90174283
Fax Number	(LOCAL) +65-68424600
Contact Number	

Address	BLK 539 JURONG WEST AVENUE 1 #10-1032
Postcode	640539
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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)	2
Passenger 1	NAME: : TEO KOK KIAN
	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 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	SHD6877G
Vehicle Make/Model/Colour	BLUE TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ONG THIAN TEE
NRIC/Passport Number	S0236489A
Contact Number	
Address	BLK 625 SENJA ROAD #05-146
Postcode	670625
Insurance Company Name	MS FIRST CAPITAL INSURANCE LTD
Notion Of Damage	FRONT

**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)**

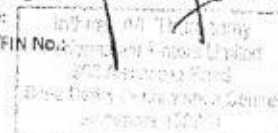
I understand, acknowledge, agree and consent that:

- (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.

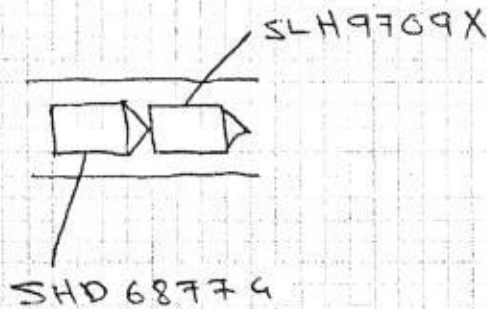
Policyholder's Signature  
Date & Time:

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

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



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was waiting for oncoming traffic at Jurong Town hall to clear before moving out from the filter. Subsequently the blue taxi hit my vehicle from the back.

We then move off to a nearby area for further discussion.

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: 06/08/2014  
17:05 pm

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

BMW Dealer

**Performance Motors Limited**

A Sime Darby Motors Company  
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X  
Toll-Free Number (1800-2255269)

303, Alexandra Road  
Sime Darby Performance Centre  
Singapore 159941  
Fax. 64747770

280, Kampong Arang Road  
East Coast Centre  
Singapore 438180  
Fax. 63449773

315, Alexandra Road  
Sime Darby Business Centre  
Singapore 159944  
Fax. 64796601 (AfterSales)  
64796624 (Motorrad)



GST REG. NO : M2 - 0020081 - X

07 AUG 2019

**E S T I M A T E**

Estimate No. : b1 52255  
Date Estimated : 07/08/2019  
Prepared By : Inthiran A/L Thurasamy

Page No. : 1 of 4

**- ESTIMATE REPAIR FOR -**

Maqroma Pte. Ltd.  
71 Toh Guan Road East  
#06-07 TCH Techcentre  
Singapore 608598

**- ACCOUNT - 303**

MS First Capital Insurance Limited  
6 Raffles Quay  
#21-00  
Singapore 048580

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLH9709X	V725242	24/11/2016	116d	0

**DESCRIPTION**

To replace rear bumper and attachments.

Painting rear bumper.

To check electrical wiring systems and lightings at the rear section for proper function.

To remove old PDC assembly, replace damaged parts and reconnect to new bumper including conduct checks for proper function.

Sundries.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer  
Signature

**VALUE**

✓ 850 1,278.00

✓ 934 1,038.00

✓ 150 177.00

n/x 150 177.00

nec 40 / ? 80.00

Total Labour 1: 2,747.00

**DESCRIPTION**

REAR BUMPER PRIMED (RFC)  
REAR PDC HOLDER SET  
(DG/SL) ADHESIVE SET K6

QTY	PRIC	VALUE
1	1,015.00	1,015.00
1	24.60	24.60
1	53.05	53.05

Total Parts : 1,092.65

Claims OD / 3rd Party / Uninsured losses / Direct Settlement

3922.65

Regn No. 26/08/19 @ 1210  
Date & Time  
Surveyor's Name R. R. R.  
Surveyor's Tel 90010068  
Authorised Date  
RESURVEY PARTS P. QTD B. SURVEYED Yes / No PML Yes / No  
Surveyor's Email 3 days

Labour 1	:	2,747.00
Parts	:	1,092.65
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	268.78
Grand Total	:	4,108.43

\*\* THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY \*\*

\*\* PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE \*\*

# Performance Motors Limited

A member of the Sims Darby Group  
Co. Reg. No. 197401559W, GST Reg. No. M2-0020081-X



## Final Report

Estimate No. : **b1 52255**  
Date Estimated : **07/08/2019**  
Prepared By : **Inthiran A/L Thurasamy**

### - ESTIMATE REPAIR FOR -

**Maqroma Pte. Ltd.**  
**71 Toh Guan Road East**  
**#06-07 TCH Techcentre**

**Singapore 608598**

### - ACCOUNT - 303

**MS First Capital Insurance Limited**  
**6 Raffles Quay**  
**#21-00**  
**Singapore 048580**

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
<b>SLH9709X</b>	<b>WBA1V72040V7252</b>	<b>24/11/2016</b>	<b>116d</b>	<b>0</b>

DESCRIPTION	ACCOUNT: ORIGINAL PRICE	DISC. %	NETT
To make good rear bumper including to remove and install body parts in order to carry out painting job	850.00	0	850.00
To respray rear bumper	934.00	0	934.00
To check electrical wiring systems and lightings at the rear section for proper function.	150.00	0	150.00
Sundries.	40.00	0	40.00
# To supply rear number plate	83.00	0	83.00

DESCRIPTION	UNIT PRICE	QTY	DISC. %	NETT
-------------	------------	-----	---------	------

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Total Labour :	2,057.00
Total Parts :	
Total Repair Costs less Excess:	2,057.00
GST @7%:	143.99
Grand Total :	2,200.99

DD	21/10/19	3
FAX TO FAX NO	Rasul LKK	3
FAX TO FAX NO		
FAX TO FAX NO		
CONFIRMED DATE		

LOSS OF USE = \$80 X 3 DAYS



# Performance Motors Limited

A member of the Sime Darby Group  
Co. Reg. No. 197401559W. GST Reg. No. M2-0020081-X



## Supplementary

Estimate No. : **b1 52255**  
Date Estimated : **07/08/2019**  
Prepared By : **Inthiran A/L Thurasamy**

### - ESTIMATE REPAIR FOR -

**Maqroma Pte. Ltd.**  
**71 Toh Guan Road East**  
**#06-07 TCH Techcentre**

**Singapore 608598**

### - ACCOUNT -

**303**

**MS First Capital Insurance Limited**  
**6 Raffles Quay**  
**#21-00**  
**Singapore 048580**

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
<b>SLH9709X</b>	<b>WBA1V72040V7252</b>	<b>24/11/2016</b>	<b>116d</b>	<b>0</b>

DESCRIPTION	ACCOUNT:		DISC. %	NETT
	ORIGINAL PRICE			
# To supply rear number plate <i>sub</i>	83.00	0		83.00

DESCRIPTION	UNIT PRICE	QTY	DISC. %	NETT
<hr/>				

Total Labour :	83.00
Total Parts :	
Total Repair Costs less Excess:	83.00