

22/03/2019

ASS. REC. BY:

REF: CS/MSG 19014094 (Dkt 3¹⁷)

Special Instruction:

Survivor: Bryan

ASSIGNMENT (Office)

wrtin

From (Person): Chha Muk Au

of MSG

Date/Time: 13.8.19 17.43 PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SHC 7144 S

Insured: XE 4515U

at Workshop m/s Sron Hook motor

Tel: 65425119

of Blk 10 Amk Industrial Park 29 A 01-05

Policy No: MSD / VCT / 18 - 0010 4

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A. 88.19

(Client's Record)

CA / REV / REP. / REV 24 HRS

mp

H.O.D. Endorsement:

Date/Time: 14.8.2019

Person Contacted: Lynn

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SHC 7144S - CS/FCI 19004094/Ktd3n2 XE 4515U - <
	DOA - 21/01/2019
20/8/19	Send preli revised via meriman

Bryan

REF:

ASSIGNMENT

OB July 2024

From _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SHC 71943 Yr Regn: 2016 July
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Prime Mover /
 Truck / Trailer or _____
 Make: Hyundai 140 cc 1685
 Colour: Yellow A/C: Insured / Std / NI / NA
 Sp. Reading: 34775 T/Radio: Insured / Std / NI / NA
 Eng/No: D4FDGU661862
 C/No: KMHLB41UMGU092490
 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: — 11 —

N/S	O/S

(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 / FR Seen: _____ Consistent?: Yes or No
 Est. Repairs: 108 days Res: Yes or No
 Lum Sum: 20 % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Campeon
 Front Rear
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 08/08/2019 D.O.I. 14/08/2019
 Survey held at Chunni AMK
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or .
0/2 Rev 4 0/2 Body
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>MSG XE 4515U</u>
<u>12/09/19</u>	<u>Invoice 1/5 12500/- with 10 days of rep (Ref 859688, 419)</u>
<u>RECEIVED 12 SEP 2019</u>	

Date/Time. File Pass to? : Preli. Report
 : Final Report
 1) _____
 Date/Time. File Return to? _____
 2) 12/9 - fypst

Days Of Repair: 10
 Resurvey No. of Trip: 3

Report Format: Merimen
 Lump Sum / I.B.I: (\$ 12,500/2)

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

Survey Fee: _____
 Transportation: 200
 3 * RR: 11
 Phone: _____
 Other: _____
 TOTAL: 211

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	08 Aug 2019		13 Aug 2019 17:43 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS		[Created by insurer]	
Insured:	WATT WAH PETROLEUM HAULAGE PTE LTD, Co. Reg. No.: 199803115D		
Main Claimant:	CITYCAB PTE LTD, Co. Reg. No.: 199502839G		
Vehicle Reg. No.:	SHC7194S	Date of Loss:	08/08/2019 08:00 - :59 [36 Months and 11 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP	Policy/Cover Note No.:	MSD/VCT/18-001016 (Comprehensive) Coverage: 11/09/2018 - 31/12/2019
Vehicle Reg. No. (Insured):	XE4515U	Policy No. (Claimant):	
		Excess:	
Repairer:	Soon Hock Motor Pte Ltd (HQ) Blk 10 Ang Mo Kio Industrial Park 2A, #01-05/06 AMK Autopoint, 568047 Ang Mo Kio - Tel: 64836016		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pul - 6594 2521]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ..., [Imm.Advice due 14/08/2019]		
Driver/Custodian (Insured):	SIVANATHAN TAMBIL CHALON (36 / Male), NRIC: G2313454W Email:		
Adj. Asp. Remarks:	on WP. Liab: Dispute. Agree on SJE. Assign: LKK Auto Consultants Pte Ltd. Contact: Ms Lynn or Ms irene @ 6542 5119 / 6542 7162.		

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?
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No results.

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Chhia Nyuk Pui

Date: 20 Aug 2019

Preliminary Advice

Insured Vehicle No	: XE4515U	Accident Date	: 08/08/2019
TP Vehicle No	: SHC7194S	Assignment Date	: 13/08/2019
Make	: HYUNDAI I40	Est. Duration of Repair	: 8.00
Date of Inspection	: 14/08/2019		
Inspection At	: BLK 10 ANG MO KIO INDUSTRIAL PARK 2A, #01-05/06 AMK AUTOPOINT SINGAPORE 568047 REPAIRER: CHUNNI MOTOR WORK PTE LTD		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s rear portion and o/s body and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	21,096.88
Revised Amount	:S\$	14,254.88
Check Items (Estimated)	:S\$	0.00
Total	:S\$	14,254.88

Lump Sum Repair	:S\$	
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Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

Remarks

() The vehicle is economical/not economical for repair.

(X) The above survey was conducted on a 'without prejudice' basis.

MCD619104321 / ComfortDelGro Engineering Pte Ltd - Layan
 ENTRY DATE & TIME: 08/08/2019 15:52
 SUBMITTED BY: Catherine Por May Juan

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	08/08/2019 15:52
Date Of Accident	08/08/2019 08:40
Exact Location Of Accident	PIE TWDS AIRPORT AFTER ENG NEO EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7194S
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
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	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	
Driver	
Name of Driver	SUKARMAN B AHMED
NRIC No	S0161037F
Date Of Birth	04/08/1951
Occupation	OUTDOOR
Date Of Driving Pass	03/03/1980
Driving Experience	39 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96847769
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 620 #12-34 CHOA CHU KANG STREET 62
 Postcode 680620
 Was driver an employoe 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? YES
 Remarks/ Reasons: -
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XE4515U
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver SIVANATHAN TAMBAL CHALON
 NRIC/Passport Number
 Contact Number 98838298
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage FRT LEFT

No. Of Passenger (Including Drivor)

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.

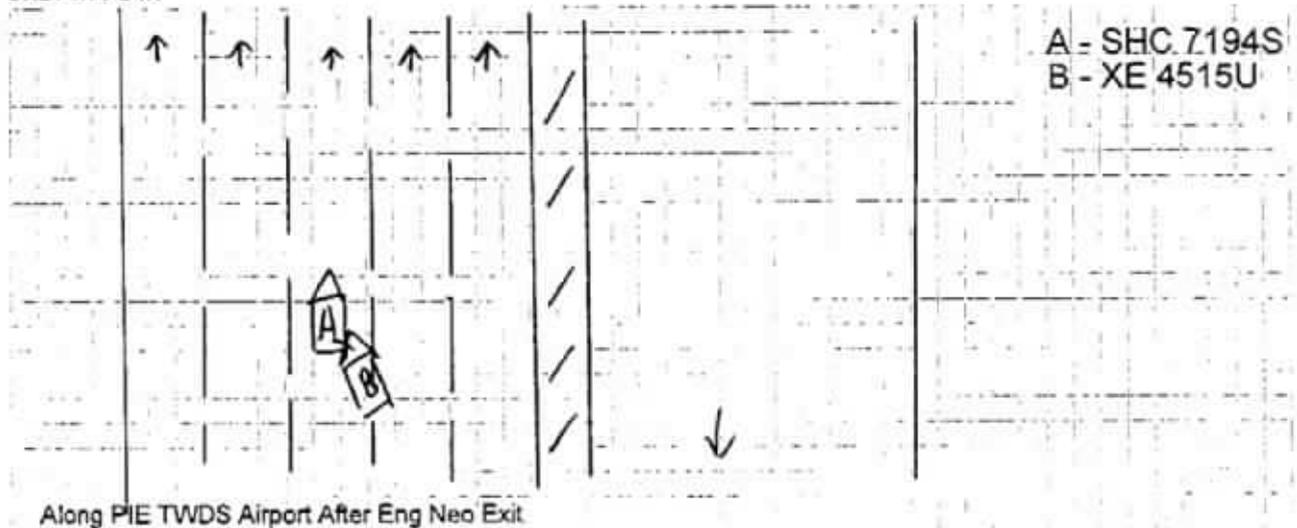
CITYCAB PTE LTD
CO. REG. NO. 199502839C

Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 08.08.2019
@ 15:30 hrs


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

SKETCH PLAN



Along PIE TWDS Airport After Eng Neo Exit

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 08.08.2019 at about 08:40 hours I was travelling along PIE TWDS Airport After Eng Neo Exit with One
Male Passenger onboard .
While travelling on the 3rd lane from the right , suddenly veh B (XE 4515U) lose control and collided into my
Taxi A - Right Rear Portion .
As it took place too fast I could not take evasive action to prevent the accident
I have company photo and videos at scene to support my claims .
No injury in this accident .
Veh B (XE 4515U) - Mr Sivanathan Tambi Chalon H/P : 9883 8298

DECLARATION

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

CITYCAB PTE LTD
CO. REG. NO. 199502839G

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 08.08.2019
@ 15:30 hrs

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

CHUNNI MOTOR WORK PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 7194S

DATE : 08.08.2019

MAKE :

TEL : 6542 5119

MODEL : HYUNDAI i40

FAX : 6542 6039 MSIG / FCI

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper <i>Dented</i>			S 553.00	✓
	Rear Bumper Clip 10 pcs <i>NCC</i>			S 22.00	✓
	Rear Fender With Housing (RH) <i>Exc</i>			S 4,736.80	✓
	Rear Fender Inner Lining (RH) <i>tone</i>			S 169.30	✓
	Rear Fender Mudflap (RH) <i>NCC</i>			S 15.80	X
	Rear Windscreen Moulding <i>NCC</i>			S 28.30	✓
	Rear Door (RH) <i>Dented</i>			S 2,201.10	✓
	Rear Door Gear/Regulator (RH) <i>NCC</i>			S 242.80	X
	Rear Door Hinge Upper (RH) <i>NCC</i>			S 45.90	X
	Rear Door Hinge Lower (RH) <i>NCC</i>			S 45.90	X
	Rocker Panel Inner (RH) <i>NCC</i>			S 1,285.50	X
	Rocker Panel Outer Garnish (RH) <i>Kit [partly broken]</i>			S 341.40	✓
	Rear Tyre Rim (RH) <i>Kit</i>			S 325.30	✓
	Rear Wheel Hup-Cap (RH) <i>broken</i>			S 107.10	✓
	Rear Wheelbearing ING & Hub (RH) <i>Done</i>			S 362.00	✓
	Rear Trailing Arm (RH) <i>Re-distorted</i>			S 192.00	✓
	Rear Assist (RH) <i>Re-distorted</i>			S 145.70	✓
	Rear Shock Absorber (RH) <i>Re-distorted</i>			S 276.30	✓
	Rear Shock Absorber Mounting (RH) <i>NCC</i>			S 81.30	X
	Rear Crossmember <i>Re-distorted</i>			S 1,021.50	✓
	Stabilizer Bar <i>Re-distorted</i>	S	199.60	S 399.20	✓
	Stabilizer Link <i>Re-distorted</i>	S	85.90	S 171.80	✓
	Rear Upper Arm (RH) <i>Re-distorted</i>			S 333.75	✓
	Rear Lower Arm (RH) <i>Re-distorted</i>			S 353.80	✓
	Rear Knuckle Arm (RH) <i>Re-distorted</i>			S 545.60	✓
	Front Door (RH) <i>Dented</i>			S 2,256.40	✓
	Door Centre Pillar Outer (RH) <i>Re-Dented</i>			S 2,527.80	✓
				SUB TOTAL	
				LESS 20%	
				DISCOUNTED TOTAL	
				S 18,787.35	
				S 3,757.47	
				S 15,029.88	
	Rear Bumper Advertisement Logo <i>NCC</i>			S 50.00	Nett ✓
	Rear Windscreen Sealant <i>NCC</i>			S 46.00	Nett ✓
	Rear Door Advertisement Logo (RH) <i>NCC</i>			S 100.00	Nett ✓
	Rear Door Comfortdelgro & Apps Sticker (RH) <i>NCC</i>			S 80.00	Nett ✓
	Front Door Coloured Comfort Logo (RH) <i>NCC</i>			S 75.00	Nett ✓
	Front Door Advertisement Logo (RH) <i>NCC</i>			S 100.00	Nett ✓
	Rear Tyre (RH) <i>2/c</i>			S 216.00	Nett X
	Front Fender Advertisement Logo (RH) <i>NCC</i>			S 100.00	Nett XXXX
				TOTAL	
				S 767.00	

17070.18
13656.14

451.00

Qty	Parts Description/ Labour	Type	Unit Price	SHC 7194S Amount
	Labour Charge			
	Panel Beating			S 2,500.00 800/-
	Spray Painting Charge			S 1,750.00 700/-
	Wiring Charge			S 50.00 20/-
	Tuff Kote			S 50.00 40/-
	Remove/Refix Cushion & Upholstery Rear			S 150.00 80/-
	Remove/Refix Rear Windscreen Glass			S 120.00 80/-
	Remove/Refix Reverse Sensor			S 120.00 40/-
	Remove/Refix Undercarriage (Rear)			S 200.00 150/-
	Transfer of Door			S 240.00 120/-
	Rear Wheel Alignment			S 120.00 60/-
			2070.00	
	TOTAL LABOUR		16177.14	S 5,300.00
	ESTIMATE TOTAL		4/S 12500/-	S 21,096.88

[Handwritten Signature]
20/8/19

14/08/2019 @ 1400hr
not Aucton 10
2/Sun 2 days.
1 Max
LKK Auto

LKK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer
Signature:
Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

NAME
ADDRESS

Home Tel.:
VIN:
Registration: SHC 7194 S
Technician:
Mileage: 347775
Time Printed 14.8.19 3:16 PM

HYUNDAI I40

Front : Left

Actual	BEFORE	Specified Range
-1°01'		-3°00' 3°00'
4°50'		-0°19' 5°41'
-0°04'		-1°30' 1°30'
14°27'		
13°25'		

Front : Right

Actual	BEFORE	Specified Range
0°19'		-3°00' 3°00'
4°45'		-0°19' 5°41'
-0°26'		-1°30' 1°30'
18°32'		
18°51'		

Camber
Caster
Toe
SAI
Included Angle
Turning Angle Diff.

Front

Cross Camber
Cross Caster
Cross SAI
Total Toe
Cross Turn Diff.

Actual	BEFORE	Specified Range
-1°20'		-3°00' 3°00'
0°04'		-3°00' 3°00'
-4°06'		-3°00' 3°00'
-0°30'		-3°00' 3°00'

Rear : Left

Actual	BEFORE	Specified Range
-2°33'		-3°30' 2°30'
0°09'		-1°30' 1°30'

Rear : Right

Actual	BEFORE	Specified Range
-1°20'		-3°30' 2°30'
-3°15'		-1°30' 1°30'

Camber
Toe

Rear

Cross Camber
Total Toe
Thrust Angle

Actual	BEFORE	Specified Range
-1°13'		-3°00' 3°00'
-3°06'		-3°00' 3°00'
1°42'		-3°00' 3°00'

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: CS/MSG19014094/DVF3N2

Date: 17/09/2019

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VCT/18-001016-05	Claim No:	MSC/V/19-001017
Claimant Vehicle No :	SHC7194S	Insured Vehicle No :	XE4515U		
Date of Loss:	08/08/2019	Nature of Claim:	TP		

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHC7194S	Engine No:	D4FDGU661862
Make & Model:	HYUNDAI I40, 1.7 D (A)	Chassis No:	KMHLB41UMGU092490
Reg. Date:	28/07/2016 (Man. Year: 2016)	Odometer:	347775 km
Colour:	Yellow		
Engine Capacity:	1685 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:	205/60R16	Rear Tyre Size:	205/60R16
Front Left Side:	Campeon 5 mm	Rear Left Side:	Campeon 5 mm
Front Right Side:	Campeon 5 mm	Rear Right Side:	Campeon 5 mm

The above values represent the remaining tyre treads depth.

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %	
Parts	15,796.88	14,107.12	1,689.76	10.70	
Miscellaneous Items	0.00	0.00	0.00		
Labour	5,300.00	2,070.00	3,230.00	60.94	
Paintwork Labour	0.00	0.00	0.00		
Towing	0.00	0.00	0.00		
Calculated Gross Total (S\$)	21,096.88	16,177.12	4,919.76	23.32	
Approved Total (Overridden) (S\$)		12,500.00			
	(S\$)	21,096.88	12,500.00	8,596.88	40.75
+ GST 7.00/7.00% (S\$)	1,476.78	875.00	601.78	40.75	
Nett Amount (S\$)	22,573.66	13,375.00	9,198.66	40.75	

INSPECTION

Date of Assignment:	13/08/2019		
Date Inspected:	14/08/2019	Inspected At:	Blk 10 Ang Mo Kio Industrial Park 2A, #01-05/06 AMK Autopoint Singapore 568047 Repairer: Chunni Motor Work Pte Ltd
Estimated Period of Repair:	10.0 days		

Adjuster: BRYAN TANI

Manager: VERON CHEN

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.

REPAIR DETAILS

Reference	
Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 17 Sep 2019)
Parts: 143	HYUNDAI I40 1.7 D (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SHC7194S)	
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

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Dented	553.00 FL	*553.00 FL
2	10		*REAR BUMPER CLIP	Necessary	22.00 FL	*22.00 FL
3	1		*REAR FENDER WITH HOUSING (RH)	Buckled	4,736.80 FL	*4,736.80 FL
4	1		*REAR FENDER INNER LINING (RH)	Torn	169.30 FL	*169.30 FL
5	1		*REAR FENDER MUDFLAP (RH)	Not Necessary	15.80 FL	*- FL
6	1		*REAR WINDSCREEN MOULDING	Necessary	28.30 FL	*28.30 FL
7	1		*REAR DOOR (RH)	Dented	2,201.10 FL	*2,201.10 FL
8	1		*REAR DOOR GEAR/REGULATOR (RH)	Not Necessary	242.80 FL	*- FL
9	1		*REAR DOOR HINGE UPPER (RH)	Not Necessary	45.90 FL	*- FL
10	1		*REAR DOOR HINGE LOWER (RH)	Not Necessary	45.90 FL	*- FL
11	1		*ROCKER PANEL INNER (RH)	Not Necessary	1,285.50 FL	*- FL
12	1		*ROCKER PANEL OUTER GARNISH (RH)	Bent/Mounting Broken	341.40 FL	*341.40 FL
13	1		*REAR TYRE RIM (RH)	Bent	325.30 FL	*325.30 FL
14	1		*REAR WHEEL HUP-CAP (RH)	Broken	107.10 FL	*107.10 FL
15	1		*REAR WHEELBEARING ING & HUB (RH)	Damaged	362.00 FL	*362.00 FL
16	1		*REAR TRAILING ARM (RH)	Distorted	192.00 FL	*192.00 FL
17	1		*REAR ASSIST (RH)	Distorted	145.70 FL	*145.70 FL
18	1		*REAR SHOCK ABSORBER (RH)	Distorted	276.30 FL	*276.30 FL
19	1		*REAR SHOCK ABSORBER MOUNTING (RH)	Not Necessary	81.30 FL	*- FL
20	1		*REAR CROSSMEMBER	Distorted	1,021.50 FL	*1,021.50 FL
21	2		*STABILIZER BAR	Distorted	399.20 FL	*399.20 FL
22	2		*STABILIZER LINK	Distorted	171.80 FL	*171.80 FL
23	1		*REAR UPPER ARM (RH)	Distorted	333.75 FL	*333.75 FL
24	1		*REAR LOWER ARM (RH)	Distorted	353.80 FL	*353.80 FL
25	1		*REAR KNUCKLE ARM (RH)	Distorted	545.60 FL	*545.60 FL
26	1		*FRONT DOOR (RH)	Dented	2,256.40 FL	*2,256.40 FL
27	1		*DOOR CENTRE PILLAR OUTER (RH)	Dented	2,527.80 FL	*2,527.80 FL
28	1		*REAR BUMPER ADVERTISEMENT LOGO	Necessary	50.00 FS	*50.00 FS
29	1		*REAR WINDSCREEN SEALANT	Necessary	46.00 FS	*46.00 FS
30	1		*REAR DOOR ADVERTISEMENT LOGO (RH)	Necessary	100.00 FS	*100.00 FS
31	1		*REAR DOOR COMFORTDELGRO & APPS STICKER (RH)	Necessary	80.00 FS	*80.00 FS
32	1		*FRONT DOOR COLOURED COMFORT LOGO (RH)	Necessary	75.00 FS	*75.00 FS
33	1		*FRONT DOOR ADVERTISEMENT LOGO (RH)	Necessary	100.00 FS	*100.00 FS
34	1		*REAR TYRE (RH)	Serviceable	216.00 FS	*- FS
35	1		*FRONT FENDER ADVERTISEMENT LOGO (RH)	Not Necessary	100.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (\$\$) 19,554.35 17,521.15
 - List Item Discount on L Items 20.00/20.00% (\$\$) 3,757.47 3,414.03

Total Parts (\$\$) 15,796.88 14,107.12

Report was unsubmitted during this print-out.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
Report was unsubmitted during this print-out.						

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	2,500.00	800.00
2	SPRAY PAINTING CHARGE	New	1,750.00	700.00
3	WIRING CHARGE	New	50.00	0.00
4	TUFF KOTE	New	50.00	40.00
5	REMOVE/REFIX CUSHION & UPHOLSTERY REAR	New	150.00	80.00
6	REMOVE/REFIX REAR WINDSCREEN GLASS	New	120.00	80.00
7	REMOVE/REFIX REVERSE SENSOR	New	120.00	40.00
8	REMOVE/REFIX UNDERCARRIAGE (REAR)	New	200.00	150.00
9	TRANSFER OF DOOR	New	240.00	120.00
10	REAR WHEEL ALIGNMENT	New	120.00	60.00
Gross Labour Cost (S\$)			5,300.00	2,070.00

Report was unsubmitted during this print-out.

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