22/05/2002	21	611	•	
Surreupr: STEVE	QS FCT 19014670,	Ed3 (Voiet Instruction:		
CITC	ASSIGNMENT (Office	ce)		1.
From (Person); Karen Tun	of FCI	Date/Time:	alle Omgpec	110
Estimated Cost:	Bill to:			
OD THE WEST TO REST OD REST EV	ATINVIMVICS			
To Inspect Vehicle No:	PC 7401A	Insured: SH	D47669	
at Workshop m/s	SMRT	Tel: 885	83566	
60 W	oodlends Ind. pc	ric ex		
Policy No:		o: D1900534	RMFSH	
Sum Insured:	Exces		1	
Make of Veh: (Client's Record)		D.O.A. &	18/2019	
CA / REV / REP. / REV 24 HRS	upo	H.O.D. End	orsement	
Date/Time: 347pmoollelia p	erson Contacted: Mr. P	2h Vehicle IV	out	
Date/Time Action/Instruction				_
PC 7401A-X	1111111	-	*	-
	FEI 19010190/Ks	13n2 D	LOA' 5/6/2019	
20/11/19 @ 5.35p checke	I work her Pets.	he will can from	WILL TP OWNER	whethe
Still want to cla	im,	- CE 0 111 CON TIVICE	7-11-01	
10 m				

Burnjur Steve	REF: FC		
	A55	IGNMENT	
From:	Date:		11/0/18
Estimated Cost:	Date.	Veh No: PC 7401A	Yr Regn: 21/Y/18
OD / TP / WS / TP RES / OD RES		Type: M.Car / M.Cycle / Bus / Van / Lor	ry / Taxi / Prime Mover /
To Inspect Vehicle No:	CEAN MAINA	Make: Mercedes Par Splinter	ONG
at Workshop m/s		Colour While	. c.c /173
ol	,	Sp.Reading 64575	T/Radio: Insured / Std / NI / NA
Insured.	40.00	op.resemg 01-1-	Treado, insured / Sta / RI / RA
Policy No.		Eng/No:089066572	011111378
Claims No.		Gen. Cond: Good / Fair / Poor / Burnt	P41751.0
Sum Insured:	Excess:	Steering: Inorder / Jammed / Loaked / B	Usent as
(Client's Record)		Brake: Inorder / Jammed / Leaked / B	
Make of Veh:		○ ·	orne or
		200	TRIKC
(Policy Condition)		Tyre Size: F: /03	//38/00
Remark: The veh had commenced	Its Wish Ols	R: -	
repair at the time of Inap	ا بينا الملكاني	BS/ DUN / EXNOVA / GY / FS / LIZA / M	IIC / OHTSU / PIR / SUMI /
2-1-11-1-17-1			· · · · · · · · · · · · · · · · · · ·
Bal. or Market Value:		Eron	Rear
** * * *	onsistent? : Yes or No	R/Bal. mm	R/Bal. 2 mm
		L/Bal. S mm	L/Bal.) mm
Est. Repairs: days	Res.: Yes or No 3 Val.: Yes or No	0.0.A. 8/8/19	0.0.1. 93/19/19
Lum Sum: %	3 val.: 103 or No	Survey held at	
CA / REV / REP. / 24 HRS		Dos. of Damages (Frt) / Rear / O/S / N	I/S / U/C / Rooftop or
Date:, Person Conta		The UlC / Chassis frame / Body St	ructure affected due to collision.
Dale / Time Action / Instruction 27/12/19 Findix \$30	, I dys (Peh) Q	ed: 3781.10; 99°(2)	
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d year to		500 50 50	(41)4 el el
/ p · 1 ·			
Date/Time, File Piss lo? : Pro	II. Report	Days Of Repair:	
\- ' \\-' '	al Report F	Resurvey No. of Trip:	Survey Fee: 135
Date/Timo, File Return to?		1 1	Ironsportation: 50
2)	Add Fee:		s + RS, SI 50
70			Pisobe 7
Réport Format :	Ĭ.	N-00-	Othors
Lump Sum / I.B.: (\$ 30	\- I	: Weekend. (\$	· · · · · · · · · · · · · · · · · · ·
	- ×		70141 2/17-



MS First Capital Insurance Limited co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580

Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

20-08-2019

Our Ref No. D19005398MFSH

Accident Date

08-08-2019

Claim Type. Third Party

Insured Vehicle

SHD4766G

Third Party Vehicle. PC7401A

Survey Location

60, WOODLANDS INDUSTRIAL PARK E4

Contact Person.

PEH ENG HOCK

Contact No.

68662673/88583566

Fax No. 0

Survey Type

WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:

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

SMRT AUTOMOTIVE

SERVICES PTE LTD

Attention. NIL

Cc: TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

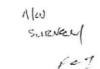
KARENT

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.

68/18/19/2002





SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Perk E4, Singapore 757705
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

Date Generated : 20/08/2019

SARATE ENGLAND SERVICE	Section A - Accid	lent Detaile as as in the speciment against a secretary	Control Tours	
Registration Number	AND SERVICE SERVICES			
Case Reference Number	PC7401A	7		
Registration Date	BPS/08/19/3002			
Inches Paris and Control of the Cont	8/21/2018			
Company Type	Bus-Plus Services Pte Ltd			
Make	MERCEDES BENZ			
Model	SPRINTER 516CDI/4325 EL	AT ABS		
Name of Driver	Suliman Bin Zainal			
Type of Accident	Rear To Head			
Accident Date and Time	8/8/2019 12:10 PM			
Accident Reported Date and Time	8/8/2019 2:56 PM			
Is Surveyor Required?	No			
Survey by				
Vehicle is Towed Back?	No			
Towed Back Date and Time				
Replacement Vehicle issued?	No			
Job Card Number	24102925			
Special Instruction to ARC, if any	PC7401A-FRONT PORTION			
Prepared Date and Time	SHD4766G (TP) INSURED 8/20/2019 10:35 AM	WITH FCI		
Chassis Number				
Mileage				
Work Shop	-			
Repair Completion Date and Time	Section B - Summary of I	Repair Estimates		23/12/19, 1.00pm
Repair Completion Date and Time	Section B - Summary of I	Repair Estimates Adjusted by Surveyor, if applicable		23/12/19, 1.00pm
Repair Completion Date and Time Summary of Repair Estimates		Adjusted by Surveyor, if applicable	Steve (LKK)	23/12/19, 1.00pm WH Arive
Repair Completion Date and Time Summary of Repair Estimates	Quotation from ARC	Adjusted by Surveyor, if applicable S0.00	Sten CLKK)	23/12/19, 1.00pm WH Arive
Repair Completion Date and Time Summary of Repair Estimates Total Labour Cost Total Spray Cost	Quotation from ARC \$300.00 \$300.00	Adjusted by Surveyor, if applicable \$0.00 \$0.00	Sten CLKK)	23/12/19, 1.00pm WH Mirc
Repair Completion Date and Time Summary of Repair Estimates Fotal Labour Cost Fotal Spray Cost Fotal Spray Part Cost	Quotation from ARC \$300.00 \$300.00 \$3,455,60	Adjusted by Surveyor, if applicable 50.00 \$0.00 \$0.00	Steve CLKK)	23/12/19,1.00pm WHL Ariv
Repair Completion Date and Time Summary of Repair Estimates Total Labour Cost Total Spray Cost Total Spray Part Cost Total Other Cost	Guotation from ARC \$300.00 \$300.00 \$3,455.60 \$60.00	Adjusted by Surveyor, if applicable 50.00 \$0.00 \$0.00 \$0.00 \$0.00	Steve CLKK)	1 day
Repair Completion Date and Time Summary of Repair Estimates Fotal Labour Cost Fotal Spray Cost Fotal Spray Part Cost Fotal Other Cost FOTAL COST	Guotation from ARC \$300.00 \$300.00 \$3,455.80 \$60.00 \$4,135.50	Adjusted by Surveyor, if applicable 50.00 50.00 50.00 50.00 \$0.00	Steve CLKK)	1 day
Repair Completion Date and Time Summary of Repair Estimates Fotal Labour Cost Fotal Spray Cost Fotal Spray Part Cost Fotal Other Cost	Guotation from ARC \$300.00 \$300.00 \$3,455.60 \$60.00	Adjusted by Surveyor, if applicable 50.00 \$0.00 \$0.00 \$0.00 \$0.00	Steve CLKK)	1 day
Repair Completion Date and Time Summary of Repair Estimates Cotal Labour Cost Cotal Spare Cost Cotal Spare Part Cost cotal Other Cost OTAL COST ump Sum Total lumber of Repair Days	Guotation from ARC \$300.00 \$300.00 \$3,455,60 \$80.00 \$4,135,50 \$0.00	Adjusted by Surveyor, if applicable 50.00 50.00 50.00 50.00 \$0.00	Sten (LKK)	1 day
Repair Completion Date and Time Summary of Repair Estimates Fotal Labour Cost Total Spray Cost Total Spray Part Cost Total Other Cost OTAL COST Lump Sum Total Jumber of Repair Days Prepared / Adjusted By	Guotation from ARC \$300.00 \$300.00 \$3,455.80 \$60.00 \$4,135.50	Adjusted by Surveyor, if applicable 50.00 50.00 50.00 50.00 \$0.00	Sten CLKK)	1 day
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Repair Completion Date and Time Summary of Repair Estimates Fotal Labour Cost Fotal Spare Part Cost Fotal Other Cost Fotal Cost	Guotation from ARC \$300.00 \$300.00 \$3,455,60 \$80.00 \$4,135,50 \$0.00	Adjusted by Surveyor, if applicable 50.00 50.00 50.00 50.00 \$0.00	Steve CLKK)	1 day
Work Shop Repair Completion Date and Time Summary of Repair Estimates Total Labour Cost Total Spray Cost Total Spray Cost Total Spray Part Cost Total Other Cost Total Other Cost TOTAL COST Lump Sum Total Number of Repair Days Prepared / Adjusted By NRC / Surveyor Sign Off Date Signature	Quotation from ARC \$300.00 \$300.00 \$3,455.60 \$50.00 \$4,135.60 \$60.00 Peh Eng Hock	Adjusted by Surveyor, if applicable \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Steve CLKK)	1 day
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Repair Completion Date and Time Summary of Ropair Estimates Total Labour Cost Total Spray Cost Total Spray Part Cost Total Other Cost TOTAL COST Lump Sum Total Number of Repair Days Prepared / Adjusted By RRC / Surveyor Sign Off Date Signature	Quotation from ARC \$300.00 \$300.00 \$3,455.80 \$80.00 \$4,135.50 \$60.00 Peh Eng Hock \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$	Adjusted by Surveyor, if applicable \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Sten CLKK)	1 day
Repair Completion Date and Time Summary of Repair Estimates Fotal Labour Cost Fotal Spare Part Cost Fotal Other Cost Fotal Other Cost Fotal Other Cost Fotal Spare Part Total Jumber of Repair Days Prepared / Adjusted By IRC / Surveyor Sign Off Date Elignature Lemarks	Quotation from ARC \$300.00 \$300.00 \$3,455.80 \$80.00 \$4,135.60 \$60.00 Peh Eng Hock	Adjusted by Surveyor, if applicable \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Sten CLKK)	1 day



SMRT Accident Vehicle Repair Estimates

Pte Ltd
k E4, Singapore 757705
r: 68662623
: 68662672
֡

Date Generated : 20/08/2019
User ID : PehEngHoo

Nation 1	de la		Sect	ion D - Deta	alls of Repair	Estimates		10 To 10	SHOWER TO PLANT WEST
Part 1 - Labo	ur Works								
Job Scope				Quotation fr	rom AR			Adjusted by Survey	or, if applicable
TO REMOVE &	INSTALL ALL RE	EPLACE ITEMS :	REPAIR FRONT PORTION	\$300,00	V			Mark Control of the C	Philipping and the control of the co
Total Labour				\$300.00					
Part 2 - Spray	Painting & Pa	nel Beating Rel	ated Works		建筑等设备设施	at manufacture			AND RESIDENCE OF THE SECOND
Job Scope				Quotation fr	rom ARC			Adjusted by Survey	or if applicable
TO RESPRAY	ALL AFFECTED	ARFA		\$300.00	V		是地位的	100000000000000000000000000000000000000	
	inting & Panel B			\$300.00	_X				
		-	t Repair Related Expens						
Job Scope	COSIS - ACCIDE	mt and Acciden	I Repair Related Expens	Quotation fr					经模型数据包括
	La de de de la			Quotation in	om ARC			Adjusted by Survey	or, if applicable
	EFIX FRT DAMA	GE PARTS		\$80.00	V				
Total Other Co				\$80,00	^				
	Parts / Materia	Section and desired Arrange		固備流流		TO SERVICE	10/2005		Name and Associated
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
			FRONT BUMPER	1.00	\$2,043.80	0.00	\$2,043.80	Replace	X 1////
			FRONT BUMPER REINFORCEMENT	1.00	\$712.80	0.00	\$712.80	Replace	X NM
			FRONT BUMPER PARKING SENSOR	2.00	\$324.50	0.00	\$649.00	Replace	X MV
			FRONT NUMBER PLATE	1.00	\$50.00	0.00	\$50.00 3()	Replace	/ 100
Total					\$3,131.10		\$3,455,60		
dded Spare	Parts / Material	Usage After Su	rveyor Signed off						
art Number	Portion	Stock Number	Part Name	Quantity	List Price \$	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
otal	- A D S G P S G S G	WANTER DUTHAN STREET	PROCESSION CONTRACTOR STATES	の名字の子の子の	an analysis of the series	THE LINE SHEETS AND A	STATISTICS.	18/00日海州四周市	CONTRACTOR OF THE

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:

P/P-\$30

3311-10

4135.60

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number EMail Address

- Please report <u>correctly</u> 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 witholding 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.
- 5. Any raise reporting may be referred to the Folice for investigation.

 5. 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.

atoresaio,	
	ACCIDENT STATEMENT
Date Of Report	08/08/2019 15:50
Date Of Accident	08/08/2019 12:10
Exact Location Of Accident	SERANGOON CENTRAL PICK-UP POINT (BLK 414)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	PC7401A
Insured/Policyholder	
Name Of Registered Owner	BUS-PLUS SERVICES PTE LTD
Co Reg No	1XXXXX524H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	SPRINTER 516CDI/4325 EL AT ABS
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	BUS
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-18090232 MFBP
Cover Note Number	
Driver	
Name of Driver	SULIMAN BIN ZAINAL
NRIC No	SXXXX950J
Date Of Birth	19/11/1963
Occupation	OUTDOOR
Date Of Driving Pass	25/03/1995
Driving Experience	24 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
- continue a copyr amegica	Morant spectrum brown sampagestic fortis

NOEMAIL

Address

NO ADDRESS

Postcode

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

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)

icie

involved in the accident

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)

-

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

While my bus PC7401A was stationary at Serangoon Central pick-up point (blk 414), a comfort taxi (SHD4766G) in front of my bus suddenly roll back and hit onto front portion of my bus. No injury reported. That's all.

Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

PENDING DOWNLOAD

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHD4766G

Vehicle Make/Model/Colour

Details Of Properties

TAXI

Vehicle Category Name of Driver

MR CHIA

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

MS FIRST CAPITAL INSURANCE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 2

Reporting Center Personal Adjusture	1/We declo Ene foreign particulars are true in every respect.
	DECLARA TOMES
	Mr Aug Ving Hee
	Mr. Chia Ho 98153788
	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
	PCTHEN SHOUTEL
e.	SKEIGHPOWN ST. A. I.

PC 7401 A 8 PS/08/19/3002.

- Please report correctly the details of the accident to speed up the claims process.
- 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 regudiate policy flability.
- 4. The issue and acceptance of this Form by incurance companies is not an admission of policy liability on the part of the insurance

Any false reporting may be referred to the Police for Investigation,

- The report will be forwarded by the insurers of the GIA Records Nanagament Centre established by the General Insurance Association of Singuorie (GIA) for archiving and that capies of this record will for a fee be made available upon application by
- 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)

lunderstand, a cknowledge, agree and consent that:

- (a) the water, any workship and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose a radior process any personal data/personal information set out in this (form) and any other personal information provided by me or passessed by any insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) which have insured vehicle(s) involved in this secident shall be collectively referred to as the "insurers"), the insured transfer such whitle(s) involved in this secident shall be collectively referred to as the "insurers"), the insurers' by the insured whitle(s) involved in this secident shall be collectively referred to as the "insurers"), the insurers' byte insured whitle(s) involved in this secident shall be collectively referred to as the "insurers"), the insurers' byte insured with the police), for the purpose(s) in the insurers' byte insured white police), for the purpose(s) in the police), for the purpose(s) in the police).
- 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 enquirtes by me;

(by) administrating my claims (including the mailing of correspondence, statements, invokes, 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")

- 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. 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
- 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.

9 3

- 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.

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Name: Las Sing Bod Name: Las Sing Bod Name: Las Sing Bod

Page 3 of 4

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	524H
Vehicle No.:	PC7401A
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Dec 2019
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	SPRINTER 516CDI/4325 EL AT ABS
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	65195534136002
Chassis No.:	WDB9066572P414378
Maximum Power Output:	
Open Market Value:	\$88,264.00
Original Registration Date:	21 Aug 2018
First Registration Date:	21 Aug 2018
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$4,414.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	20 Aug 2028
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$30,389.00
COE Rebate Amount:	\$26,279.00
Total Rebate Amount:	\$26,279.00

The information contained herein is correct as at 27 Dec 2019

OK



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

MS FIRST CAPITAL INSURANCE LTD

Ref: CS/FCI19014670/Etd3e2

SE PORINGON ROAD

	OBINSON ROAD	INGAPORE 068877	Date: 07-01-2020	
			Code: FCI2	
.00		Policy Particular	s :- THIRD PARTY CLAI	M
	Insured Veh.	SHD 4766G	Veh. Inspected	PC 7401A
	Policy No.		Coverage (\$)	0.00
	Claim No.	D19005398MFSH	Excess (\$)	0.00
	Assign From	KAREN TAN	Assign Date	21/08/2019
2.		Vehicle Par	ticulars & Condition	
	Make & Model	MERCEDES BENZ SPRINTE	R c.c	2143
	Engine No.	HIDDEN	Year of Reg.	2018
	Chassis No.	WDB9066572P414378	Colour	WHITE
	Odometer	64575	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	GOOD		
3.		Cond	litions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	205/75 R16C	BRIDGESTONE	5 mm
	L/H Front Tyre	205/75 R16C	BRIDGESTONE	5 mm
	R/H Rear Tyre	205/75 R16C	BRIDGESTONE	5 mm
	L/H Rear Tyre	205/75 R16C	BRIDGESTONE	5 mm
١.		Descrip	otion of Damages	是10年,10年中间,10年,20日,20日,20日,20日,20日,20日,20日,20日,20日,20日
	THE VEHICLE SU	STAINED DAMAGES AT THE F	FRONT PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		Gene	ral Information	
	Accident Date	08/08/2019	Inspection Date	23/12/2019
	Survey held at	SMRT AUTOMOTIVE SERVIO	CES PTE LTD	
		60 WOODLANDS INDUSTRIA	AL PARK E4 SINGAPORE 7	57705
ā.	THE SOUTH BE		Remarks	
	B)THE INSPECTION	ISISTENT TO ACCIDENT REP ON WAS CONDUCTED ON A"V CE TO YOUR INSTRUCTIONS,	VITHOUT PREJUDICE" BAS	SIS. SED REPAIRS.
5b.		Estima	te Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	1 Working Day	/S



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PC 7401A

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER (SN)	NOT NECESSARY	2,043.80	:=
1	FRONT BUMPER REINFORCEMENT (SN)	NOT NECESSARY	712.80	
2	FRONT BUMPER PARKING SENSOR @\$324.50 (SN)	NOT NECESSARY	649.00	
1	FRONT NUMBER PLATE (SN)	DENTED	50.00	30.00
			3,455.60	30.00
	LABOUR			
	TO REMOVE & INSTALL ALL REPLACE ITEMS ; REPAIR FRONT PORTION.	NOT NECESSARY	300.00	-
	TO RESPRAY ALL AFFECTED AREA.	NOT NECESSARY	300.00	88
	TO REMOVE / REFIX FRT DAMAGE PARTS.	NOT NECESSARY	80.00	
			680.00	12
	GRAND TOTAL		4,135.60	30.00

RECOMMENDED COST OF REPAIRS	题 课程 经营业		30.00
THE OF THE PER COUNTY OF THE PARTY		CONTRACTOR OF THE PARTY OF THE	00.00

Report Ref No. CS/FCI19014670/Etd3e2



CHEN TSUE YEE

Automotive Assessor

St. S.

ADRIAN LING WAI PING

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

Licensed Appraiser

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