	Surveyor: [MULTIEN]	ASSIGNMENT (Office)	
,	neighb Elizabeth Chew	of Jes	Date/Time: 20/8/2019(3)11-1507
	Estimated Cost:	Bill to:	
	OD (TP) WS / TP RES / OD RES / ET To Inspect Vehicle No:	3FW 5199K	Insured: SGT 4080D
	at Workshop m/s	Trans Eurokeis	Tel: '633106\$2 ·
		A duning a Ministr	■ 02
*** ***	Policy No:	Claim No:	DMPC 19002224/EC
	Sum Insured:	Excess:	
	Make of Veh; (Client's Record)		D.O.A. 21108/2019
2.2	Date/Time: 1-13pmg 2018/19	Person Contacted: Jobi _	H.O.D. Endorsement:
		1 - rounds	
	10/2/19 @238pm Jobi	sciid vehicle send	in repoilt on 11/9/19
	Jakla Final fig \$	2978.09 (Red	4154.43, 5890 Confirmed by Pr

.

Tanffin REF:	Ics	
Smissing 1	ASSIGNMENT	
	ASSIGNMENT	2.17 Amil.
From: Date:	Veh No. SFW 514	M. Yr Regn: 20/7, April.
Estimated Cost:	Type://www.car/M.Cycle/Bus/	Van / Lorry / Taxi / Prime Mover /
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Pruck / Trailer or	7 11191
To Inspect Vehicle No:	Make: 10/4/200	A/C: Insured / Std / NI / NA
et Workshop m/s	Colour Clut	A/C: Insured / Std / NI / NA
of	Sp.Reading (96	37 T/Radio: Insured / Std / NI / NA
Insured	Eng/No:	6BM424890346291
Policy No.	0/110.	
Claims No.	Gen. Cond. Good / Fair / Poo	
Sum Insured: Excess:	Steering: Inorder Jammed I	Leaked / Burnt or
(Client's Record)	Brake: Inorder Jammed /	Leaked / Burnt or
Make of Veh:	Modi: Nil / SIRim / STD	A/Rim or /
*	Tyre Size: F:	20 x / 60/RIL
(Policy Condition)	R:	11
Remark: The veh had commenced its N	S OS BSIDUNIEXNOVAIGYIE	S/LIZA/MIC/OHTSU/PIR/SUMI/
repair at the time of inspection.	TOYO/YOKO or	
Bal. or Market Value.	Front	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. m	m R/Bal 6 mm
GIA / PR Seen: Consistent? : Yes or No		nm L/Bal. G mm
Est. Repairs: days Res.: Yes or N	D.O.A.	0.01 23/8/190/030
Lum Sum: % 3 Val.: Yes or N	Survey held at	Transmoher
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Regie; IN / OUT	ar / O/S / N/S / U/C / Rooftop or
Date: Person Contacted:	The U/C / Chassis fram	ne / Body Structure affected due to collision.
Date / Time Action / Instruction		
	RECEIVED 2 3 SEP 2019	
	KEULIVLDZ	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 3	
i) : Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?		Transportation. 250
2) 38 9 - typist	Add Fee: Site Insp (\$)S+RS,SI
III CONTRACTOR CONTRACTOR CONTRACTOR	: Interview (\$) Photos
Report Format : Merimen	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$ 2978.09	: Weekend (\$)
		TOTAL 261

Catherine Chong (LKK Auto)

From:

Elizabeth Chew Ming Lai (ECICS, Claims) < Elizabeth_Chew@ecics.com.sg>

Sent:

Thursday, 22 August, 2019 11:39 AM

To:

jobithomas@eurokars.com.sg

Cc:

SUR; assignments; vion.lim@eurokars.com.sg; samuel.ng@eurokars.com.sg;

eva.kok@eurokars.com.sq

Subject:

FW: YOUR REF: SGT4080D / OUR REF: SFW5199K THIRD PARTY CLAIM

Attachments:

2632_001.pdf; SGT4080D.PDF

WITHOUT PREJUDICE SAVE AS TO COSTS

Dear Sir,

We refer to the above matter.

Without prejudice to any other related claims we agree to have a direct settlement with your company on behalf of our insured, subject to our surveyor's recommendation on costs of repair and number of days for LOU/LOR. As for quantum on the LOU/LOR we follow the NIMA Protocol Benchmark.

Kindly forward us all the supporting document to enable us to consider your client's claim.

Aside to LKK:

Please refer to the below email and conduct PRI.

Best regards

Elizabeth Chew

AVP | Claims



DID (65) 6303 0182

Tel (65) 6337 4779

Email elizabeth_chew@ecics.com.sg Web www.ecics.com.sg

Address 10 Euros Road 8, Singapore Post Centre, #09-04A, Singapore 408600.

From: ECICS Claims

Sent: Thursday, 22 August 2019 10:29 AM To: Elizabeth Chew Ming Lai (ECICS, Claims)

Cc: eva.kok@eurokars.com.sg; vion.lim@eurokars.com.sg; samuel.ng@eurokars.com.sg;

jobithomas@eurokars.com.sg

Subject: RE: YOUR REF: SGT4080D / OUR REF: SFW5199K THIRD PARTY CLAIM

Ref: DMPC1900222H/EC

Dear Eliz

FYNA

Best regards

Crystabelle Tan

Senior Associate | Claims



DID (65) 6303 0190

Tel (65) 6337 4779

Email crystabelle_tan@ecics.com.sg Web www.ecics.com.sg

Address 10 Euros Road 8, Singapore Post Centre, #09-04A, Singapore 408600.

From: jobithomas@eurokars.com.sg [mailto:jobithomas@eurokars.com.sg]

Sent: Thursday, 22 August, 2019 9:04 AM

To: ECICS Claims

Cc: eva.kok@eurokars.com.sg; vion.lim@eurokars.com.sg; samuel.ng@eurokars.com.sg

Subject: YOUR REF: SGT4080D / OUR REF: SFW5199K THIRD PARTY CLAIM

YOUR REF: SGT4080D / OUR REF: SFW5199K THIRD PARTY CLAIM

Dear Sir/Mdm.

Kindly arrange the survey of our client's vehicle ASAP at 27A Tanjong Penjuru.

Attached is the ESTIMATE & ACCIDENT REPORT for your perusal.

We would appreciate it if you can kindly let us know the liability/status of this case.

Best Regards.



Driving luxury experiences since 1985

Jobi Thomas

Senior Insurance Claims Executive 27A Tanjong Penjuru, Singapore 609042

T: (65) 6331 0680 D: (65) 6331 0682 F: (65) 6331 0690

E: jobithomas@eurokars.com.sg W: www.eurokarsgroup.com

This message may contain privileged and confidential information and is only intended for use by the addressee. No representation, warranty, guarantee or undertaking expressed or implied is made by ECICS Limited; as to the fairness, accuracy or completeness of any information, projections or opinions contained in this message. Any unauthorized disclosure, use or dissemination either in whole or in part is prohibited. If you are not the addressee indicated in his message (or responsible for delivery of the message to such person), you may not copy or deliver this message to anyone. In such case, you should destroy this message and kindly notify the sender by reply email. Opinions contained herein are the personal opinions of the sender and do not necessarily represent the views of ECICS Limited.

This message may contain privileged and confidential information and is only intended for use by the addressee. No representation, warranty, guarantee or undertaking expressed or implied is made by ECICS Limited; as to the fairness, accuracy or completeness of any information, projections or opinions contained in this message. Any unauthorized disclosure, use or dissemination either in whole or in part is prohibited. If you are not the addressee indicated in his message (or responsible for delivery of the message to such person), you may not copy or deliver this message to anyone. In such case, you should destroy this message and kindly notify the sender by reply email. Opinions contained herein are the personal opinions of the sender and do not necessarily represent the views of ECICS Limited.

Veron Chen (LKKAuto)

From:

Veron Chen (LKKAuto)

Sent:

Monday, 23 September 2019 9:32 AM

To:

Mei Kwan (LKKAuto); SUR; jessicahs@eurokars.com.sg

Cc:

insuranceclaims@eurokars.com.sg

Subject:

RE: Finalization TP ECICS SFW5199K

Dear Jessica,

WITHOUT PREJUDICE

Confirmed COR: \$2,978.09 before GST

3 repair days

Kindly send Final invoice and all supporting documents directly to ECICS INSURANCE

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)

From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>

Sent: Thursday, 19 September 2019 5:17 PM

To: SUR <sur@lkkauto.com>

Subject: FW: Finalization TP ECICS SFW5199K

CS/ICS19014811/T1vd3

From: jessicahs@eurokars.com.sg <jessicahs@eurokars.com.sg>

Sent: Thursday, 19 September, 2019 2:38 PM

To: Taufikh (LKKAuto) < Taufikh@lkkauto.com>; Admin A < admin-a@lkkauto.com>

Cc: insuranceclaims@eurokars.com.sg Subject: Finalization TP ECICS SFW5199K

Dear Taufikh,

Please find our computation attached for your agreement.

COR: \$2,978.09 before GST

3 repair days (not including preparation of estimate, wait for liability/wait for survey/authorization/spare parts, Sat/Sun/PH)

Appreciate your confirmation for this case.

Thank you very much.

Regards,

- Jessica Shastri

Admin Executive – Insurance Claims

27A, Tanjong Penjuru Singapore 609042

Dir: +65 6331 0691 | Fax: +65 6331 0690 | Email: jessicahs@eurokars.com.sg

Website: www.eurokarsgroup.com

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 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.
- 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.

NECTO 1975年504次基準機能的景	ACCIDENT STATEMENT	KHO NO
Date Of Report	21/08/2019 14:03	
Date Of Accident	21/08/2019 07:50	
Exact Location Of Accident	YUAN CHING ROAD	
Country/State of Loss	SINGAPORE	
CONTRACTOR OF THE PARTY OF THE	DETAILS OF OWN VEHICLE	the same

Vehicle Registration Number SFW5199K

Insured/Policyholder

Name Of Registered Owner LIM ENG SEONG

NRIC No S1814952D

Email Address VINCENTLES59@GMAIL.COM

Mobile Phone No (LOCAL) +65-96225818
Alternative Phone No OFFICE-96225818

Vehicle Particulars

 Manufacturer
 MAZDA

 Model
 3-1.5 L (A)

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

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

Cover Note Number

Driver

Name of Driver LIM ENG SEONG

 NRIC No
 \$1814952D

 Date Of Birth
 05/02/1967

 Occupation
 INDOOR

 Date Of Driving Pass
 05/05/1992

Driving Experience 27 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96225818

Fax Number

Contact Number OFFICE-96225818

EMail Address VINCENTLES59@GMAIL.COM

258 JURONG EAST STREET 24 Address

#07-365

600258 Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

CLEAR Weather Conditions DRY

Road Surface

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?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 2

NO

Number of Passengers (Including Driver)

Passenger 1

NAME:

: TAN AH LOI

: FEMALE GENDER:

COLLISION - HEAD TO REAR

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

KINDLY REFER TO THE ATTACHED SKETCH PLAN.

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

SGT4080D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

CHAN WAI YUAN

NRIC/Passport Number

S8322194A

Contact Number

91852312

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 12

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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: 21/8/19

1300

Driver's Signature

(If driver is not the policyholder)

Date & Time: 21/8/19

1300

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

00804702 JPP1ZWAZ Labeside Dr (10857 wg LICENSE PLATE NO: SFW5199K DESCRIBE CIRCUMSTANCES OF THE ACCIDENT CONTACT NUMBER: 96125818 21 AUG 2019 ACCIDENT DATE: EMAIL: vincenties 59@grail-com 0750 ACCIDENT TIME: YURNO CHINE ROAD LOCATION: I was driving out from bateside Or Furning right. Its the toappie jundion pedestrian is green, I stop the ved venicle to cross. A remirce SGT40801 pedestrian From behind Knoch NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLICY PLEASE CHECK YOUR POLICY FOR MORE INFORMATION ()REPORTING ONLY PLEASE STATE: () CLAIM OWN POLICY CLAIM THIRD PARTY DECLARATION I/We declare the foregoing particulars are true in every respect. Juan Driver's Signature Reporting Centre Personnel's Signature Policyholder's Signature Date & Time: >1/8/19 (If driver is not the policyholder) Name:

Date & Time: 2(19/19

1300

NRIC/FIN No .:

qualitate sharetain version, 93

1300

SKETCH PLAN



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Lim Eng Seong

Period of Insurance

: 03 Apr 2019 To 02 Apr 2020

Engine No.

: P520375011

Chassis No.

: JM6BM42A8G0346291

Vehicle No.

: SFW5199K

Policy No.

Issued Date

: 2100507998-02

Endorsement No.

: 05 Mar 2019

ABOUT THE COVER

Make/Model

: MAZDA 3 1.5 SKYACTIV

Engine Capacity/Tonnage: 1,496.00 CC

Sum Insured : Market Value

First Year of Registration : 2017

Driver Restriction

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

b) Any other person who is driving on the Policyholder's order or with his/her permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than vears' driving experience.

Age Condition

: All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving fultion, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Lim Eng Seong - \$600 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Trans Eurokars Pte Ltd. Add: 27A Tanjong Penjuru, Singapore 609042 63310608

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

I/We hereby certify that the policy to which this Certificate of insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part I/V of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503599190

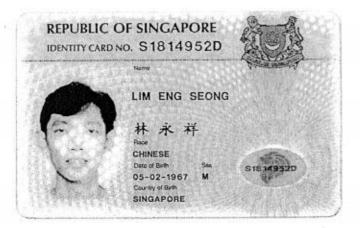
ARF (AP) PTE LTD - MAZDA

7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX

SINGAPORE 069111

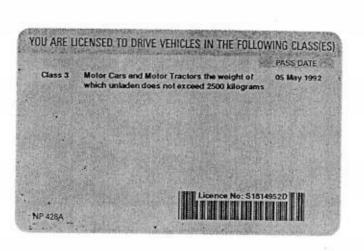
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE











TRANS EUROKARS PTE LTD



ESTIMATE COST OF REPAIRS

WIP: 49404 **ECICS LIMITED** Mr Lim Eng Seong NAME: EXCESS: ADDRESS: 258 Jurong East Street 24 7 Temasek Boulevard #07-365 DATE: 21-Aug-19 #10-01 Suntec Tower One Singapore 600258 Singapore 038987. TEL: 96225818 ATTN.: MOTOR CLAIMS FAX: Jobi 63310682 CONTACT PERSON: SFW5199K DATE IN: VEH NO: THIRD PARTY CLAIM TYPE OF CLAIM: JM6BM42A8G0346291 MILEAGE: CHASSIS NO: POLICY NO. : DATE REG.: 3-Apr-17 MODEL: MAZDA3 NATURE OF WORKS Parts Description REVISED PRICES QTY NO 40 \$ 996.70 1 MBPD8-50-221ABB REAR BUMPER 1 Zun \$ 5.40 1 MKD53-50-251 BRACKET CENTER 2 Znn \$ 53.00 MD350-51-5L0E 1 3 REFLECTOR LHS \$ 16.50 Xni TOWING COVER LHS 1 MBHN1-50-EL1 BB 4 \$ 36.40 2 MKD47-67-UC5A83 Xni RETAINER SIDE, SENSOR 5 Vin \$ 407.20 2 MKD47-67-UC1 83 SENSOR SIDE, ULTRASONIC 6 \$ 25.80 3 MGS1D-50-EM1A ne -7 TAPE PROTECTOR, SENSOR S Xun 564.20 REAR REINFORCEMENT 1 MB45A-50-260 8 4 MBHN1-50-0Z1A 121-\$ 10.80 9 GROMMET, REAR BUMPER M1 S 6.00 2 M9991-00-501 GROMMET, REAR BUMPER 10 \$ 18.00 RIVET, REAR BUMPER 4 MBBM4-50-355 well-11 \$ 12.00 MB45A-56-146A 4 m-12 FASTENER, REAR BUMPER 2 MGJ21-50-049 al-\$ 6.80 CLIP, REAR BUMPER 13 mi-\$ 22.00 1 MBHN1-51-163 GASKET LHS, TAILLAMP 14 W1-5 22.00 15 GASKET RHS, TAILLAMP 1 MBHN1-51-153 2,202.80 **TOTAL PARTS** 220.28 LESS 10% \$ \$ 1.982.52 TOTAL PARTS COST **Labour Description** TO REPLACE REAR BUMPER AND REAR REINFORCEMENT. TO REPAIR REAR END PANEL 1,980.00 1 MZ-BR-REAR02 660. AND ALL AREAS AFFECTED BY THE ACCIDENT. TO RESPRAY REAR BUMPER, REAR REINFORCEMENT AND REAR END PANEL. \$ 1.890.00 2 330.00 \$ TO TRANSFER REVERSE SENSORS. NETT 3 MZ-BR-REVSEN

4	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION	L		NY	X	\$	250.00
5	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER	R FUNCTIONING.	~	1	50	\$	250.00
6	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT RE	PAIR WORKS.	1	({	zv.	\$	350.00
7		TO SUPPLY BODY COATING.			N	ETT	ТВА	
8	MZ-BR-SUNDRI	SUNDRIES.		/	2 N	ی ETT	\$	100.00
	4		TOTAL LABOUR		\$		\$	5,150.00
			TOTAL PARTS		\$		\$	1,982.52
			TOTAL		\$		\$	7,132.52
			LESS EXCESS		\$	-	\$	-
			TOTAL AFTER EXCESS		\$	2		
			GST 7%		\$		\$	
			GRAND TOTAL		\$		\$	

REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400 WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.

TRANS EUROKARS PTE LTD

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 = odification(s) is allowed.

 Supplied entary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Authorised Signature

23/8/19 2 1030

sur @ (khaupan

SFW5199K Page 2 of 2



TRANS EUROKARS PTE LTD



FINALIZATION COST OF REPAIRS

ECICS LIMITED

NAME:

Mr Lim Eng Seong

Singapore 600258

WIP:

49404

7 Temasek Boulevard

ADDRESS: 258 Jurong East Street 24

EXCESS:

#10-01 Suntec Tower One

#07-365

DATE:

21-Aug-19

Singapore 038987.

TEL:

DATE IN:

96225818

FAX:

ATTN.:

MOTOR CLAIMS

Eva 63310683 CONTACT PERSON: TYPE OF CLAIM:

JM6BM42A8G0346291 MILEAGE: CHASSIS NO: 3-Apr-17

SFW5199K

POLICY NO. :

THIRD PARTY CLAIM

MODEL:

VEH NO:

DATE REG.: MAZDA3

		NATURE OF WO	RKS			
		Parts Descript	<u>ion</u>		v	
NO		QTY		REVISED		PRICES
1	REAR BUMPER	1	MBPD8-50-221ABB	\$ 996.70	\$	996.70
2	BRACKET CENTER	1	MKD53-50-251	\$ (+	\$	5.40
3	REFLECTOR LHS	1	MD350-51-5L0E	\$ •	\$	53.00
4	TOWING COVER	LHS 1	MBHN1-50-EL1 BB	\$	\$	16.50
5	RETAINER SIDE, S	ENSOR 2	MKD47-67-UC5A83	\$ 380	\$	36.40
6	SENSOR SIDE, UL	TRASONIC 2	MKD47-67-UC1 83	\$ 127	\$	407.20
7	TAPE PROTECTOR	R, SENSOR 3	MGS1D-50-EM1A	\$ 25.80	\$	25.80
8	REAR REINFORCE	MENT 1	MB45A-50-260	\$ 1(47)	\$	564.20
9	GROMMET, REAF	R BUMPER 4	MBHN1-50-0Z1A	\$ 10.80	\$	10.80
10	GROMMET, REAF	R BUMPER 2	M9991-00-501	\$ 6.00	\$	6.00
11	RIVET, REAR BUN	MPER 4	MBBM4-50-355	\$ 18.00	\$	18.00
12	FASTENER, REAR	BUMPER 4	MB45A-56-146A	\$ 12.00	\$	12.00
13	CLIP, REAR BUMP	PER 2	MGJ21-50-049	\$ 6.80	\$	6.80
14	GASKET LHS, TAIL	LIAMP 1	MBHN1-51-163	\$ 22.00	\$	22.00
15	GASKET RHS, TAI	LLAMP 1	MBHN1-51-153	\$ 22.00	\$	22.00
			TOTAL PARTS	\$ 1,120.10	\$	2,202.80
			LESS 10%	\$ 112.01	\$	220.28
			TOTAL PARTS COST	\$ 1,008.09	\$	1,982.52
		<u>Labour Descrip</u>	otion		_	
1	MZ-BR-REAR02	TO REPLACE REAR BUMPER AND REAR REINFORCEM AND ALL AREAS AFFECTED BY THE ACCIDENT.	ENT. TO REPAIR REAR END PANEL	\$ 660.00	\$	1,980.00
2		TO RESPRAY REAR BUMPER, REAR REINFORCEMENT	AND REAR END PANEL.	\$ 630.00	\$	1,890.00
3	MZ-BR-REVSEN	TO TRANSFER REVERSE SENSORS.		\$ 330.00	\$	330.00
					_	

*						_	
4	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION.		\$		\$	250.00
5	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		\$	150.00	\$	250.00
6	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REP	AIR WORKS.	\$	180.00	\$	350.00
7		TO SUPPLY BODY COATING.		\$	æ	тви	4
8	MZ-BR-SUNDRI	SUNDRIES.		\$	20.00	\$	100.0
			TOTAL LABOUR	\$	1,970.00	\$	5,150.00
			TOTAL PARTS	\$	1,008.09	5	1,982.52
			TOTAL	\$	2,978.09	\$	7,132.52
			LESS EXCESS	\$	- 1	\$	
			TOTAL AFTER EXCESS	\$	2,978.09		
			GST 7%	\$	208.47	\$	
			GRAND TOTAL	5	3,186.56	5	

NUMBER OF DAY: 3 WORKING DAYS (EXCLUDE WAITING FOR SURVEY, AUTHORIZATION, PARTS, SAT, SUN & PH)

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/ICS19014811/T1VD3N2

Date:

26/09/2019

REFERENCE

Handling Insurer:

ECICS Limited

Policy No:

Claimant

SFW5199K

Insured Vehicle No:

SGT4080D

TP

Vehicle No : Date of Loss:

21/08/2019

Nature of Claim:

Claim No:

DMPC1900222H/EC

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SFW5199K

Make & Model:

MAZDA 3, 1.5 L (A)

Engine No: Chassis No: Odometer: P520375011

19637 km

JM6BM42A8G0346291

Reg. Date: Colour: 03/04/2017 (Man. Year: 2016) Blue

Blu

1496 cc

Engine Capacity: Market Value/New Car

N/A

Price:

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side:

Toyo 6 mm

Rear Left Side:

Toyo 6 mm

Front Right Side:

Toyo 6 mm

Rear Right Side:

Toyo 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts Miscellaneous Items	Repairer's 2,082.52 0.00	Adjuster's 1,028.09 0.00	1,054.43 0.00	Diff % 50.63
Labour Paintwork Labour	5,050.00 0.00	1,950.00 0.00	3,100.00 0.00	61.39
Towing	0.00	0.00	0.00	
Gross Total (S\$)	7,132.52	2,978.09	4,154.43	58.25
+ GST 7.00/7.00% (S\$)	499.28	208.47	290.81	58.25
Nett Amount (S\$)	7,631.80	3,186.56	4,445.24	58.25

INSPECTION

Date of Assignment:

22/08/2019

Date Inspected:

23/08/2019 Inspected At:

Trans Eurokars Pte Ltd - Tanjong

Penjuru (HQ)

27A Tanjong Penjuru Singapore 609025

Estimated Period of Repair:

3.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

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

Referen		(Last Synchronised: 25 Sep 2019)
Parts:	N/A	MAZDA 3 1.5 L (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, n	o print-code for SFW5199K)
Validity:	These estimate numbers with th	s are valid only if they contain the print code (above) on all estimate pages, running page se END OF ESTIMATES marker on the last estimate page
Further Info	· Items/values no	t in reference catalogue are prefixed with an asterisk *.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Deformed	996.70 FL	*996.70 FL
2	1		*BRACKET CENTER	Not Necessary	5.40 FL	*-FL
3	1		*REFLECTOR LHS	Not Necessary	53.00 FL	*-FL
4	1		*TOWING COVER LHS	Not Necessary	16.50 FL	*-FL
5	2		*RETAINER SIDE,SENSOR	Not Necessary	36.40 FL	*-FL
6	2		*SENSOR SIDE, ULTRASONIC	Not Necessary	407.20 FL	*-FL
7	3		*TAPE PROTECTOR, SENSOR	Necessary	25.80 FL	*25.80 FL
8	1		*REAR REINFORCEMENT	Not Necessary	564.20 FL	*-FL
9	4		*GROMMET,REAR BUMPER	Necessary	10.80 FL	*10.80 FL
10	2		*GROMMET,REAR BUMPER	Necessary	6.00 FL	*6.00 FL
11	4		*RIVET,REAR BUMPER	Necessary	18.00 FL	*18.00 FL
12	4		*FASTENER,REAR BUMPER	Necessary	12.00 FL	*12.00 FL
13	2		*CLIP,REAR BUMPER	Necessary	6.80 FL	*6.80 FL
14	1		*GASKET LHS,TAILLAMP	Necessary	22.00 FL	*22.00 FL
15	1		*GASKET RHS,TAILLAMP	Necessary	22.00 FL	*22.00 FL
16	1		*SUNDRIES	Necessary	100.00 FS	*20.00 FS
F=Fr	anchise	part. S=SpcNe	ett. L=ListItemDisc.	_	J. W.	
				Sub Total (S\$)	2,302.80	1,140.10
			- List Item Discount on L	. Items 10.00/10.00% (S\$)	220.28	112.01
				Total Parts (S\$)	2,082.52	1,028.09

Recommended Miscellaneous Items There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items			
1	TO REPLACE REAR BUMPER AND REAR REINFORCEMENT.TO REPAIR REAR END PANEL AND ALL AREAS AFFECTED BY THE ACCIDENT	New	1,980.00	660.00
2	TO RESPRAY REAR BUMPER, REAR REINFORCEMENT AND REAR END PANEL	New	1,890.00	630.00
3	TO TRANSFER REVERSE SENSORS	New	330.00	330.00
4	TO CARRY-OUT BODY CAVITY PRESERVATION	New	250.00	0.00
5	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING	New	250.00	150.00
6	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS	New	350.00	180.00
7	TO SUPPLY BODY COATING (NPA)	New	0.00	0.00
	Gross Labo	ur Cost (S\$)	5,050.00	1,950.00
	Report was unsubmitted dur	ing this print-out.		

< END OF ESTIMATES >