SUNVALOR From (Person):	Sithara of	MENT (Office)	Date/Time: 19.9.19 11.039.
OD TP/WS To Inspect Vel at Workshop r	TP RES / OD RES / EVA / INV / MV nicle No: SGB 5888 D		Insured: SHB 1991X Tel: 61623377
Policy No:	1	Claim No: _	019 005905 mps4
Sum Insured:		Excess:	
Make of Veh (Client's Record CA / REV Date/Time:	REP / REV 24 HRS	oted: Nabilah	D.O.A. 15.9. 2019  H.O.D. Endorsement:  Vehicle IN JOUT
Date/Time	Action/Instruction ( V ) Estin	nnte	DOA - 15709/2019
20/9/19	Email oreli revised	to FCI	
11/10/19	@ 219pm Avril Said	owner alrea	dy scrap the vehicle.



MS First Capital Insurance Limited CD.Reg. No. 195000106C CST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax (65) 6222 3547

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

## MOTOR SURVEY ASSIGNMENT

Date

17-09-2019

Our Ref No. D19005995MFSH

Accident Date

15-09-2019

Claim Type. Third Party

Insured Vehicle

SHB2991X

Third Party Vehicle. SGB5888D

Survey Location

15 FAN YOONG ROAD

Contact Person.

NABILAH SENIN

Contact No.

62623377/0

Fax No. 62643151

Survey Type

DIRECT SETTLEMENT:

Appointed

LKK AUTO CONSULTANTS PTE LTD

Surveyor 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

MOVA AUTOMOTIVE PTE

Attention. NIL

LTD NA

TP Solicitor Fax No. NA

Officer Incharge

Cc: TP Solicitor

SITHARA

#### 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)

From:

Veron Chen (LKKAuto)

Sent:

Friday, 20 September 2019 2:40 PM

To:

'CWS Motor Claims'

Cc:

'Sithara'; SUR

Subject:

RE: SURVEY ASSESSMENT - D19005995MFSH/1-SGB 5888D

Attachments:

SGB 5888D PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SGB 5888D

Date of survey: 19/9/2019

Number of days (estimated): 14 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)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com> Sent: Thursday, 19 September 2019 11:11 AM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Sithara' <Sithara@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D19005995MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Best Regards

#### G.NIVITHA

# LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: <u>assignments@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims [mailto:cwsmotorclaims@msfirstcapital.com.sg]

Sent: Thursday, 19 September 2019 11:03 AM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg >; Sithara < Sithara@msfirstcapital.com.sg >

Subject: PRI: SURVEY ASSESSMENT - D19005995MFSH/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

Company Registration No. 199607198R

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

Your ref:

D19005995MFSH

Our Ref:

CS/FCI19016542/R1vf3

Date: 20/9/2019

The Motor Claims Department

MS FIRST CAPITAL INSURANCE LTD

WITHOUT PREJUDICE

Dear Sir/Madam,

# INITIAL INSPECTION REPORT OF VEHICLE NO: SGB 5888D

We thank you for your instruction on 19/9/2019

Please be informed that we had conducted the inspection of the above mentioned

19/9/2019

at the premises of M/s

MOVA AUTOMOTIVE PTE LTD

and have the following to report:-

Workshop Estimate Amount

: \$\$30,713.50

Revised Estimate Amount

: S\$21,428.50

"Check" Items Amount

: S\$4,372.50

Market Value

: S\$

LTA Reimbursement Value

: S\$

Nett Value

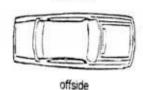
: S\$

Description of Damage:

The vehicle sustained damages at the

front and rear portion

rear



nearside

front

Comments/Present Status:

Damages Consistent

Yours faithfully,

MOHAMMED RASUL Automotive Assessor

# Veron Chen (LKKAuto)

From:

Alan Chng <tuckmeng@mova.com.sg>

Sent:

Friday, 20 September 2019 10:17 AM

To:

Rasul (LKKAuto)

Cc:

'Nabilah'; 'Suann'; avril@mova.com.sg; 'Jia Yu'

Subject:

RE: SGB 5888D DOA: 15/09/19

Dear Rasul,

Can you help to counter offer \$6500 lump sum limits repair ? Thanks!

Best Regards
Alan Chng
Claims Estimator
Mova Automotive Pte Ltd
H/P 9686 9276
Office No:6262 3377
Fax No:6264 3151

From: Rasul (LKKAuto) [mailto:Rasul@lkkauto.com]

Sent: Friday, 20 September 2019 9:41 AM

To: Alan Chng Cc: Nabilah

Subject: SGB 5888D DOA: 15/09/19

Hi Alan,

Kindly take note repair limit for this vehicle is 5K

Best Regards,

Rasul | Assessor

#### LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>Rasul@lkkauto.com</u> | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

I WIV

Auto Consultons

Save the Earth. Print only when necessary.

# Rasul (LKKAuto)

From:

Rasul (LKKAuto)

Sent:

Friday, 20 September, 2019 9:41 AM

To:

'Alan Chng'

Cc:

'Nabilah'

Subject:

SGB 5888D DOA: 15/09/19

Hi Alan,

Kindly take note repair limit for this vehicle is 5K

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>Rasul@lkkauto.com</u> | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Save the Earth. Print only when necessary.

## Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 17/09/2019 10:20

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. 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 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.

- 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	17/09/2019 09:14
Date Of Accident	15/09/2019 21:10
Exact Location Of Accident	AIRPORT BOULEVARD TOWARDS AIRPORT TERMINAL 3
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGB5888D
Insured/Policyholder	
Name Of Registered Owner	NARIMAH BINTE MOHAMED SALLEH
NRIC No	S1473446E
Email Address	NOEMAIL

(LOCAL) +65-94890883

OFFICE-NOPHONE

Alternative Phone No
Vehicle Particulars

Mobile Phone No

Manufacturer TOYOTA
Model WISH 1.8 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 NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 5047931256-08

Cover Note Number

Driver

Name of Driver QISTINA ANGEL BINTE JAMIL

 NRIC No
 S9407221B

 Date Of Birth
 02/03/1994

 Occupation
 INDOOR

 Date Of Driving Pass
 28/04/2015

Driving Experience 4 YEARS AND 4 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-82988241

Fax Number

Contact Number

EMail Address QISTINAANGEL@GMAIL.COM

APT BLK 333 KANG CHING ROAD Address

#13-264 610333

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Postcode

3.4

CHILDREN

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident CHAIN COLLISION

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

4

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s)

NO

2

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

Passenger 1

NAME:

: NARIMAH BINTE MOHAMED SALLEH

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

YES

JURONG WEST NPC

ROAD: 700 CORPORATION ROAD, POSTCODE: 649818, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TOP THE SKETCH PLAN

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SHB2991X

Vehicle Make/Model/Colour

**Details Of Properties** 

TAXI

Vehicle Category

Name of Driver

JOHN NEVILLE

NRIC/Passport Number

Contact Number

93869597

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

SHC2038T

Vehicle Make/Model/Colour

**Details Of Properties** 

TAXI

Vehicle Category Name of Driver

TAN PENG HUAT

NRIC/Passport Number

Contact Number

90064654

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

SMA3836B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

JEREMY LO

NRIC/Passport Number

S9145131Z

Contact Number

98892394

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### 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.
- 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.
- 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.
- 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 aforesald.
- 8 Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 Jawyers/Faw firms, the Idonetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
  - (i) processing, handling anti/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 indices 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 from, may/are permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes, and
- (e) ony Personal Information may/can be thirdered by any of the insurers and/or GIA to their third party service provides or agents (including their lawyers/law firms), which may be sited betside of Singapore, for one or more of the above Purposes.
- [8] my Personal Information will also be collected and used to compile claims history for the approve of fraud detection, investigation and management in pretent and all future claims.
- (c) the information to collected under (d) above may be shared / disclosed
  - to all insurers and/or any other third parties that assist in evaluating, it wastigating, controlling or managing fraud, regulators, low enforcement and government agencies as reasonably required for the purposes statled, or

(ii) for complying with requirements under any regulations, laws at court orders

Polityholder's Signature Date & Time: 16/4/1005

(isous)

Driver's Signature

(if driver is not the policyholder)

Date & Time 16 [4] (A (125044)

Reporting Centre Personnel's Signature

Name.

NRIC/FIN No

A: SGB5888D B: SHB2991X	BNACKOD
C: SHC20387	
	<del></del>
SCRIBE CIRCUMSTANCES OF THE AC	CCIDENT
ICENSE PLATE SG858880	ACCIDENT DATE & TIME 15/9/19 21:10
ONTACT NUMBER: 94890885	E-MAIL ADDRESS:
OCATION Airport Boulevard	Towards Terminal 3
	R INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN
	R INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN R DWN POLICY PLEASE CHECK YOUR POLICY FOR MORE INFORMATION
OWN DAMAGE CLAIM UNDER YOU	





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999 1 of 4 Report No. T/20190916/2037

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time 16/09/201	e Report N 19 12:07	fade:	Vide Report No.: P/20190915/0076	Station Diary No.: 86		
Informan	t's Partice	ulars				
	nformant: ANGEL B	INTE JAMIL	Address: APT BLK 333 KANG CI 610333	HING ROAD #13-264 SINGAPORE		
ID Type / ID No.: NRIC NO / S9407221B			Contact No.: Home/Office:	Mobile: 82988241		
	Nationality: SINGAPORE CITIZEN		Email:			
Sex: Age: Date of Birth: Female 25 02/03/1994			Type of Informant: Driver			
Race: Boyanese		Language: English	Institution / School Name:			
Occupation: GRAPHIC DESINGER		Driving Licence Information: Class: 3 Date of Expiry:				

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/09/2019 21:10	Type of Location Straight Road
Location: Along Road 1 AIRPORT BO  Along Airport Weather: Clear		Terminal 3 Road Surface:		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collis	sion.			Anyone conveyed by

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGB5888D	Car	ТОУОТА	WISH 1.8 A		Seriously Damaged	1
SHB2991X	Car	HYUNDAI	I40 1.7L CRDI AT ABS AIRBAG 4DR		Slightly Damaged	0
SHC2038T	Car	HYUNDAI	AE IONIQ HEV 1.6 DCT		Slightly Damaged	1





Police Station Of Origin; Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

. .

2 of 4 Report No. T/20190916/2037

CONTINUATION OF REPORT

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SMA3836B	Car	MAZDA	MAZDA3 SEDAN 1.5 AT LED EU6		Slightly Damaged	0

Any Pedestrian In	volved: No				
No. of Pedestrian	CONTRACTOR OF THE PARTY OF THE	Use of Per	destrian	Cross	ing: NA
Passenger	PERSONAL SECTION OF THE PROPERTY.			01000	
Name	NARIMAH BINTE MOHAMED SALLEH				S1473446E
Related Vehicle	SGB5888D (Car)		Conta	ct No.	NIL
Hospital/Clinic	CHANGI GENERAL HOSPITAL			of } e & Date	Class: NIL Date of Expiry: NIL
Date Treatment	15/09/2019	Date Disc		one market substant	/2019
	led Medical Leave   07	Degree of			
Driver			,,,,,	3010	
Name	QISTINA ANGEL BINTE JAMIL		ID No.		S9407221B
Related Vehicle	SGB5888D (Car)			ct No.	82988241
Hospital/Clinic	CHANGI GENERAL HOSPITAL			of g ce & Date	Class: 3 Date of Expiry: NIL
Date Treatment	15/09/2019	Date Disc	charge   16/09/2019		
	ted Medical Leave   02		Degree of Injury   NIL		
Driver		The second second			design and the
Name	JOHN NEVILLE		ID No.		NIL
Related Vehicle	SHB2991X (Car)		Contact No.		93869597
Hospital/Clinic	NIL			of g ce & / Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	and the second section in the second	-	
	ted Medical Leave NIL	Degree o			





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 3 of 4 Report No. T/20190916/2037

Tel No: 1800-2689999 CONTINUATION OF REPORT

Driver			ALS US	Miles I	
Name	TAN PENG HUAT		iD No.		NIL
Related Vehicle	SHC2038T (Car)		Contact No.		90064654
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge	NIL	
No. of Days gran		Degree of Injury NIL			
Driver				3/6/4	
Name	JEREMY LO		ID No		S9145131Z
Related Vehicle	SMA3836B (Car)		Contact No.		98892394
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	narge	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of		NIL	

#### Brief Details.

On 15/09/2019 at about 2110hrs, I was driving my vehicle (SGB5888D) along Airport Boulevard towards Airport Terminal 3 on the 4th lane of 5 lanes together with my mother.

Suddenly, the front vehicle (SHC2038T) applied e-brake which I follow through however unable to stop in time. My front vehicle then collided onto the rear of the front vehicle. Subsequently I felt an impact from the rear of my vehicle. I sustain injuries of chest pain and right toe laceration, my mother sustain injuries of right chest pain, right lower lips laceration and left forearm swelling.

I then alighted from my vehicle and discovered it was a chain collision consist of 4 vehicles. I managed to exchange particular with all involve driver. The first vehicle (SMA3836B) sustain slight damages to the rear of its vehicle. The second vehicle (SHC2038T) sustain slight damages on the front and rear of its vehicle. My vehicle is seriously damaged on the front and rear of the vehicle. The forth vehicle (SHB2991X) sustain slight damages on the front of the vehicle.

My mother was conveyed to Hospital and discharged on 16/09/2019. She was given to 2 days of medical certificate. I then went to the hospital on my own and was given 7 days of hospitalization leave. Both me and my mother went to Chang General Hospital.





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999 4 of 4 Report No. T/20190916/2037

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The J./ Sgt 1 IBRAHIM BIN ROSLI	Report.	. Signature Of Informant:
Signature Of Interpreter: Not applicable		Date/Time: 16/09/2019 12:07
Officer in Charge Of Case: TP / GIT / Sgt 3 MARIAH BINTE ZAKARIA		Classification Of Case:
Contact No.: 85476433	的前	/SN 126
Authentication Stamp NP168		ignature:

# > Back to OneMotoring

# **Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars Owner ID Type: Singapore NRIC Owner ID: 446E Vehicle Details Vehicle No.: SGB5888D Vehicle to be Exported: Yes Intended Deregistration Date: 17 Sep 2019 Vehicle Make: TOYOTA Vehicle Model: WISH 1.8 A Primary Colour: Black Manufacturing Year:

2005 Engine No.: 1ZZ2442280 Chassis No.: ZNE100280220 Maximum Power Output: 97.0 kW (130 bhp) Open Market Value: \$20,478.00 Original Registration Date: 18 Jan 2006 First Registration Date: 18 Jan 2006 Transfer Count: 1

Actual ARF Paid: \$22,526.00 Intended PARF Rebate Details

PARF Eligibility: Forfeited

PARF Eligibility Expiry Date: PARF Rebate Amount: \$0.00

Intended COE Rebate Details COE Expiry Date: 17 Jan 2021

COE Category: B - Car (1601cc & above) COE Period(Years): 5

PQP Paid: \$29,308.00 COE Rebate Amount: \$7,815.00 **Total Rebate Amount:** \$7,815.00 Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 17 Sep 2019

OK



Main Office:

Mova Building
No. 22, Jalan Kilang,
Singapore 159419
Tel: (65) 6476 3333
Fax: (65) 6271 5891
www.mova.com.sg

**Workshop Dept:** 

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

**Estimate** 

18/09/2019

MS FIRST CAPITAL INSURANCE LIMITED 36 Robinson Road

Singapore 068877.

#16-01 City House

Attention :- XA026

ACC. Date :- 15/09/19

Estimate# :- CK419704

:- SGB5888D

Veh Model :- TOYOTA WISH

- C.O.D Days Terms

Remarks :-

Page #

Veh#

Claim #

0.	Description	Qty		U.Price	Amounts S
	LIST ITEMS: A				500.0
1.	DEAD DUMBER AND	1	PC	599.00	599.0
2.	REAR BUMPER SIDE RETAINER	2	PCS	75.00	150.0
3.	REAR BUMPER CLIPS Nec - 7	10	PCS	3.00	30.0
4.	REAR BUMPER ABSORBER BRACKET .	2	PCS	70.00	140.0
5.	TAILGATE 140'F	1	PC	1,480.00	1,480.0
6.	TAILGATE LOGO NE	1	PC	40.00	40.0
7.	REAR WINDSCREEN MOULDING XSVC	1	SET	130.00	130.0
8.	FRONT BUMPER TOWN	1	PC	595.00	595.0
9.	FRONT BUMPER SIDE RETAINER	2	PCS	70.00	140.0
	FRONT BUMPER LOWER GRILLE	1	PC	190.00	190.0
10.	FOG LAMP CA	2	PCS	480.00	960.0
11.	FOG LAMP HOLDER	2	PCS	90.00	180.
12.	FRONT GRILLE O(A)	1	PC	230.00	230.
13. 14.	EDON'T DIMPER SPONGE (/N .	1	PC	110.00	
	FRONT BUMPER REINFORCEMENT	1	PC	330.00	330.
15.	FRONT BUMPER CLIPS AC	20	PCS	3.00	60.
16.	FRONT BUMPER UNDER COVER COVER	1	PC	160.00	160.
17.	PRONT BUMPER UNDER COVER COV	1	PC	799.00	
18.	BONNET M	2	PCS	80.00	2.00
19.	BONNET HINGE H	1	PC	230.00	
20.	BONNET TOP MOULDING SUL	1	PC	110.00	4.40
21.	BONNET LOCK JA	1	PC	45.00	
22.	BONNET SEAL REAL	1	PC	180.00	
23.	BONNET INSULATOR de	10	PCS	3.00	1 122
24.	INSULATOR CLIPS No.	10	PCS	2,300.00	
25.	HEADLAMP HID CON LA 11.4- repair	2	PCS	430.00	000
26.	FRONT FENDER AH H - LH - TON	2 2	PCS	190.00	200
27,	FRONT FENDER INNER SHIELD ( 000	20	PCS	3.00	
28.	INNER SHIELD CLIPS	1	PC	180.00	
29.	WASHER TANK de / De /	1	PC	180.00	
30.	RADIATOR SPARE TANK	1		130.00	
31.	FRONT SUPPORT PANEL TOP COVER OF	1	PC		
32.	FRONT SUPPORT PANEL ASSY SACE	1	PC	680.00	
33.	CONDENSER ST	1	PC	590.00	200
34.		1	PC	690.00	000
35.	AIR CON PIPE	3	PCS	300.00	
36.	RADIATOR HOSE, 7.	2	PCS	80.00	
37.	FAN COWLING :	1	PC	195.00	
38.	FAN BLADE ?	2	PCS	110.00	
39.	FAN MOTOR ?	2		280.00	The state of the s
40.	AIR INTAKE MANIFOLD *	1	PC	585.00	
41.	ALTERNATOR XSM	1	PC	1,300.0	
42.		1	PC	160.0	
43.	AIR CON COMPRESSOR /	1	PC	1,700.0	
44.	ENGINE COVER FOR	1	PC	250.0	24.00
45.	BATTERY TRAY	1	PC	160.0	100
46.	BATTERY TRAY 1.	1	PC	110.0	100
47.	AIR CLEANER BOX	1	PC	490.0	
48.		1	PC	110.0	
49.	AIR INTAKE HOSE 7	1	PC	80.0	
50.	AIR RESONATOR 1	1	PC	130.0	
51.	CA-/	1		1,430.0	0 1,430



Main Office:

Mova Building No. 22, Jalan Kilang, Singapore 159419 Tel: (65) 6476 3333

Fax: (65) 6271 5891 www.mova.com.sg

Workshop Dept:

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

160.00

230.00

1,780.00

1,300.00

1,600.00

380.00

440.00

1,500.00

1,100.00

32 458 00

-8,114.50

24.343.50

120.00

40.00

25.00

400.00

40.00 35 45:00

30.00

250 350.00

200 400:00

300.00 150 300.00

30.00

Page #

Veh#

:- SGB5888D

136161

1

PC

PC 1

Veh Model :- TOYOTA WISH

Estimate# :- CK419704

Claim #

ACC. Date :- 15/09/19

Terms

:- C.O.D Days

Remarks Attention :- XA026 Qty U.Price Amounts S\$ No. Description FRONT WINDSCREEN MOULDING No-C / 52. PC 160.00 1 FRONT WIPER COWLING X 800 53. 1 PC 230.00 PC 54. DASHBOARD TURN 1,780.00 1 DRIVER AIRBAG 44 55. PC 1 1.300.00 PASSENGER AIRBAG \*\*\* 56. PC 1 1,600.00 STEERING CLOCK SPRING / 57. 1 PC 380.00 AIRBAG IMPACT SENSOR MAY PCS 58 2 220.00 59. FRONT SEAT BELT THE ALL 2 PCS 750.00 AIRBAG CONTROL UNITS ALT 60. 1 PC 1,100.00 LIST TOTAL S\$ 25% DISCOUNT S\$ SPECIAL NET ITEMS : 1. BATTERY PC 120.00 1 FRONT WINDSCREEN SEALANT PC 2. 1 40.00 FRONT IU BRACKET 44 / PC 3. 1 25.00 FRONT BUMPER BODYKIT (M / PC 4. 1 350.00 FRONT BUMPER L & R BODYKIT CM / PCS 5. 2 200.00 REAR BUMPER L & R BODYKIT X SUC 6. 2 PCS 200.00 7. REAR WINDSCREEN SEALANT X AA PC 40.00 8. FRONT NUMBER PLATE ( / / PC 45.00

SPECIAL NET TOTAL S\$

RADIATOR COOLANT ~~/

FRONT WINDSCREEN SOLAR FILM ?

LABOUR :

9.

10.

Estimate

36 Robinson Road

#16-01 City House

Singapore 068877.

MS FIRST CAPITAL INSURANCE LIMITED

18/09/2019

TO INSPECT FRONT LIGHTING WATER & LEAKAGE TEST

TO REMOVE & INSTALL AIR CON CONDENSER. RADIATOR IN ORDER TO CUT OFF SUPPORT PANEL

TO REMOVE & INSTALL FRONT WINDSCREEN

TO REMOVE & INSTALL REAR WINDSCREEN

TO REMOVE & TRANSFER ITEMS TO NEW TAILGATE

TO REMOVE & INSTALL DASHBOARD

TO REMOVE & REPLACE AIRBAG DAMAGED PARTS & REPROGRAMMING AFTER REPLACE

TO REMOVE & INSTALL CARPET, SEAT & GARNISHES IN ORDER TO STRAIGHTEN END PANEL

TO CUT OFF FRONT SUPPORT PANEL & STRAIGHTEN

40.00

1,750.00

120.00

X 120.00

X 100.00

150 250.00



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Co. Reg. 198904033G GST Reg. M2-0088864-2

**Estimate** 

18/09/2019

MS FIRST CAPITAL INSURANCE LIMITED

36 Robinson Road #16-01 City House

Singapore 068877.

Estimate# :- CK419704

- SGB5888D

Veh Model :- TOYOTA WISH

:- 1

Claim #

ACC. Date :- 15/09/19

Terms

Page #

Veh#

:- C.O.D Days

Remarks :-

Attention :- XA026

No.

Description

Qty

U.Price Amounts S\$

AFFECTED PANEL AND RENEW ALL DAMAGED PARTS

TO APPLY BODY JOINT SEALANT ON CUTTING AREAS

TO APPLY RUST PROOF ON AFFECTED AREAS

TO SPRAY PAINT ON REPLACED, REPAIRED AREAS

LABOUR TOTAL S\$

136161

1300 1,600.00

30.00

150.00

4,620.00

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$ GST @ 7 %

30,713.50

2,149.95

32,863.45

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LT/D

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 reserveyed and is subject to final approval from Insurance Correctly

AMOUNT DUE S\$

19/09/19 @1210 Removes after repair

# Veron Chen (LKKAuto)

From:

AVRIL HO <avril@mova.com.sg>

Sent:

Thursday, 10 October 2019 8:44 AM

To:

Veron Chen (LKKAuto); Rasul (LKKAuto)

Cc:

'Nabilah'; 'Suann'; 'Jia Yu'; 'Alan Chng'; SUR

Subject:

RE: SGB 5888D DOA: 15/09/19

Dear Vernon,

We are waiting for the customer's scrap car documents.

Thank you!

Best Regards,

# **AVRIL HO**

Claims Asst.

Mova Automotive Pte Ltd

avril@mova.com.sg Address: Blk 1008 Bt Merah Lane 3

#01-04/06/08

Singapore 159722

Telephone: 6272 3892 Fax: 6270 8314



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From: Veron Chen (LKKAuto) [mailto:veronchen@lkkauto.com]

Sent: Tuesday, 8 October 2019 5:21 PM

To: Rasul (LKKAuto); AVRIL HO

Cc: 'Nabilah'; 'Suann'; 'Jia Yu'; 'Alan Chng'; SUR Subject: RE: SGB 5888D DOA: 15/09/19

Dear Avril,

Kindly advise vehicle status.

If vehicle has been repaired, please finalize with us.

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: Rasul (LKKAuto) < Rasul@lkkauto.com> Sent: Thursday, 26 September 2019 8:58 AM

To: AVRIL HO <avril@mova.com.sg>

Cc: 'Nabilah' <nabilah@mova.com.sg>; 'Suann' <suann@mova.com.sg>; 'Jia Yu' <jiayu@mova.com.sg>; 'Alan Chng'

<tuckmeng@mova.com.sg>; Veron Chen (LKKAuto) <veronchen@lkkauto.com>

Subject: RE: SGB 5888D DOA: 15/09/19

Hi Avril,

Repair limit for this case 6K

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

The Unit Save the Earth. Print only when necessary.

From: AVRIL HO [mailto:avril@mova.com.sg] Sent: Tuesday, 24 September, 2019 1:59 PM

To: Rasul (LKKAuto)

Cc: 'Nabilah'; 'Suann'; 'Jia Yu'; 'Alan Chng' Subject: RE: SGB 5888D DOA: 15/09/19

Dear Rasul,

Any update?

Thank you!

Best Regards,

#### **AVRIL HO**

Claims Asst.

Mova Automotive Pte Ltd avril@mova.com.sg Email: Address: Blk 1008 Bt Merah Lane 3

> #01-04/06/08 Singapore 159722

Telephone: 6272 3892 Fax: 6270 8314



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From: Alan Chng [mailto:tuckmeng@mova.com.sg]

Sent: Friday, 20 September 2019 10:59 AM

To: 'Rasul (LKKAuto)'

Cc: 'Nabilah'; 'Suann'; avril@mova.com.sg; 'Jia Yu'

Subject: RE: SGB 5888D DOA: 15/09/19

Thank you!

Best Regards Alan Chng Claims Estimator Mova Automotive Pte Ltd H/P 9686 9276 Office No:6262 3377 Fax No:6264 3151

From: Rasul (LKKAuto) [mailto:Rasul@lkkauto.com]

Sent: Friday, 20 September 2019 10:27 AM

To: Alan Chng

Cc: 'Nabilah'; 'Suann'; avril@mova.com.sg; 'Jia Yu'

Subject: RE: SGB 5888D DOA: 15/09/19

Hi Alan,

Let me check, will let u know

Best Regards,

Rasul | Assessor

#### LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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From: Alan Chng [mailto:tuckmeng@mova.com.sg]

Sent: Friday, 20 September, 2019 10:17 AM

To: Rasul (LKKAuto)

Cc: 'Nabilah'; 'Suann'; avril@mova.com.sg; 'Jia Yu'

Subject: RE: SGB 5888D DOA: 15/09/19

Dear Rasul,

Can you help to counter offer \$6500 lump sum limits repair?

Thanks!

Best Regards Alan Chng Claims Estimator Mova Automotive Pte Ltd H/P 9686 9276 Office No:6262 3377 Fax No:6264 3151

From: Rasul (LKKAuto) [mailto:Rasul@lkkauto.com]

Sent: Friday, 20 September 2019 9:41 AM

To: Alan Chng Cc: Nabilah

Subject: SGB 5888D DOA: 15/09/19

Hi Alan,

# Kindly take note repair limit for this vehicle is 5K

Best Regards,

Rasul | Assessor

## LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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#### **AVRIL HO**

Claims Asst.

Mova Automotive Pte Ltd Email: avril@mova.com.sg Address: Blk 1008 Bt Merah Lane 3

#01-04/06/08 Singapore 159722

Telephone: 6272 3892 Fax: 6270 8314



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