

22/03/2002

ASS. REC. BY:

REF: CS/FCI 19017282/ Fy3dr Special Instruction:

Survivor: Ram ASSIGNMENT (Office)

(WS)

From (Person): Marina Chin San San of FCI Date/Time: 1.10.19 4.00 p.m

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SLF 1824J Insured: SHB 2075 Rat Workshop m/s N-51 Automotive Tel: 68420051of 2 Kaki Bukit Ave 2 #01-18Policy No: _____ Claim No: D19 006276 MFSH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 29.9.2019
(Client's Record)CA / REV / REP. / REV 24 HRS
"rup" 2.10.19Date/Time: 1.10.19 4.00 p.m Person Contacted: Zi Ting H.O.D. Endorsement: _____
Vehicle: IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SLF 1824J - NBA/IN (17006222/4) R.O.A. - 29/03/2017
	SHB 2075 R - CS/FCI 19002771/Jtd302 R.O.A. - 07/02/2019
4/10/19	Sent Preli by email
10/10/19	Sent E-Mail to Confirm Amount \$3700/-

yeapK@NSI.com.sg
Zi Ting@NSI.com.sg

FC1

PRS

ASSIGNMENT

Date: 2.10.2019

Veh No: SLF 1824J Yr Regn: AUG 2016

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No: SLF 1824J

Make: Toyota corolla altis 1.6 c.c. 1598

at Workshop: m/s N-51 Automotiva

Colour: Grey A/C: Insured / Std / NI / NA

of 2 Kaki Bukit Bldg 2 #01-18

Sp. Reading: 175655 T/Radio: Insured / Std / NI / NA

Insured:

Eng/No: -

Policy No.:

C/No: MRO53 REH104556832

Claims No.:

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

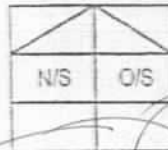
Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

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

(Policy Condition)

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



Btl. or Market Value:

Tyre Size: F: 205/55 R16

R: 205/55 R16

IDAC Accident Report: Consistent? : Yes or No

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

GIA / PR. Sent: Consistent? : Yes or No

TOYO / YOKO or

Achilles

Est. Repair: days Res.: Yes or No

Front

Rear

Lum Sum: % 3 Val: Yes or No

R/Bal. 3 mm R/Bal. 4 mm

L/Bal. 3 mm L/Bal. 4 mm

D.O.A. 29/09/2019 D.O.I. 2/10/19

CA / REV / REP. / 24 HRS

"up"

Survey held at: W-51 Automotiva

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

rear 2 O/S rear

Date: Person Contacted:

Vehicle: IN / OUT

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

\$3700/- L/S confirm with Yeo Poh on 9/10/19
 6 repair days (Red \$4408-03, 54%)

RECEIVED 10 OCT 2019

MV: \$62025

DV: \$45086

NV: \$16939

Date/Time File Pass



: Preli. Report

Days Of Repair: 6



: Final Report

Resurvey No. of Trip: 1

Date/Time File Pass

10/10/19 Typist

Add Fee:



: Site Insp \$



: Interview \$



: Tech. Insp \$



: Workshop \$

Date/Time File Pass

Date/Time File Pass

Date/Time File Pass

Date/Time File Pass

Date/Time File Pass

Date/Time File Pass

Survey Fee:

Transportation:

: \$ + \$ \$

: Phone

: Beer

: TOTAL

160

50

50

83

TOTAL

343

L/S \$3700/-

MOTOR SURVEY ASSIGNMENT

Date	01-10-2019	Our Ref No. D19006276MFSH
Accident Date	29-09-2019	Claim Type. Third Party
Insured Vehicle	SHB2075R	Third Party Vehicle. SLF1824J
Survey Location	2 KAKI BUKIT AVENUE 2 #01-18 KAKI BUKIT AUTOHUB	
Contact Person.	ZI TING	
Contact No.	68420051/ 0	Fax No. 67410510
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
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	N-51 AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	MERINA CHIA SAN SAN	

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.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D19006276MFSH

Date: 04 Oct 2019

Our Ref: CS/FCI19017282/Fyf3

The Motor Claims Department
MS First Capital Insurance Ltd

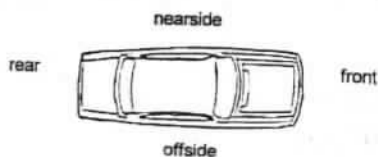
Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO. SLF1824J .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 02/10/2019 at N51 AUTOMOTIVE PTE LTD. and have the following to report:-

Workshop Estimate Amount	: S\$ 8,108.03 .
Revised Estimate Amount	: S\$ 5,067.77 .
"Check" Items Amount	: S\$.
Market Value	: S\$.
LTA Reimbursement Value	: S\$.
Nett Value	: S\$.

Description of Damage:
The vehicle sustained damages
At the rear & o/s rear portion..



Yours faithfully

PARASURAM S/O SHANMUGAM
Automotive Assessor

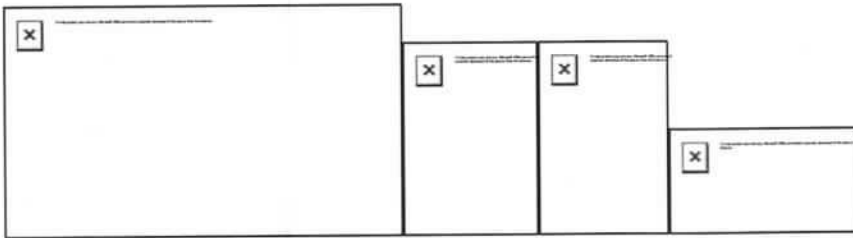
Yvonne Wong (LKK Auto)

From: Chio Ziting <ziting@n51.com.sg>
Sent: Thursday, October 10, 2019 9:42 AM
To: Yvonne Wong (LKK Auto)
Cc: yeopk@n51.com.sg; SUR
Subject: Re: SLF1824J Finalized Claim

Dear Yvonne,

Confirm \$3700.00 @ 6 working days.

Regards,
Zi Ting
N-51 Automotive Pte Ltd
Office: 6842 0051
Fax: 6741 0510
www.n51.com.sg



On Thu, Oct 10, 2019 at 9:38 AM Yvonne Wong (LKK Auto) <yvonne Wong@lkkauto.com> wrote:

Dear Mr Yeo and Ziting,

WITHOUT PREJUDICE

Confirmed amount \$3700.00 @ 6 working days,

Kindly send Final invoice and all supporting documents directly to MS FIRST CAPITAL INSURANCE

Please reply my email.

Thank you.

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

Yvonne Wong (LKK Auto)

From: Yvonne Wong (LKK Auto)
Sent: Friday, October 04, 2019 12:22 PM
To: 'CWS Motor Claims'; SUR
Cc: 'Merina Chia'
Subject: SURVEY ASSESSMENT - D19006276MFSH/1
Attachments: SLF1824J DOA 29092019 REVERT.pdf

Dear Sir/ Madam

Enclosed preliminary revised of vehicle SLF1824J
Date of survey : 02/10/2019
Number of days : 6 days
Thank you.

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAuto)

Sent: Tuesday, October 01, 2019 4:02 PM

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

Cc: 'Merina Chia' <MerinaChia@msfirstcapital.com.sg>

Subject: RE: SURVEY ASSESSMENT - D19006276MFSH/1

Dear Sir/Madam,

Thank you for your assignment.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>

Sent: Tuesday, 1 October, 2019 4:00 PM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Merina Chia <MerinaChia@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19006276MFSH/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.

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	01/10/2019 02:47
Date Of Accident	29/09/2019 15:50
Exact Location Of Accident	ALONG ARTILLERY AVENUE ROUNDABOUT OF ARTILLERY AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF1824J
Insured/Policyholder	
Name Of Registered Owner	GBAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS CLASSIC 1.6 CVT
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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 HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29114756MKF
Cover Note Number	

Driver

Name of Driver	CHIAM SWEE PHUANG
NRIC No	S2174943E
Date Of Birth	13/05/1959
Occupation	OUTDOOR
Date Of Driving Pass	21/12/1978
Driving Experience	40 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92700788
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : P1 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	CHANGKAT NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT NO. T/20190930/2083 LODGE AT CHANGKAT NPP ON THE 29/09/2019 AT ABOUT 1550HRS, I WAS DRIVING MY VEHICLE SLF1824J TOWARDS THE ROUND ABOUT AT ARTILLERY AVENUE, I WAS ON THE LEFT OF THE TWO LANE ROAD. AS I ENTERED THE ROUND ANOTHER VEHICLE SHB2075R WAS AT THE RIGHT LANE. AS I WAS MAKING WAY AT THE ROUND ABOUT. I FELT AND IMPACT FROM THE RIGHT REAR SIDE OF MY VEHICLE. I THEN DISCOVERED THAT THE VEHICLE SHB2075R HAD COLLIDED ONTO THE RIGHT REAR PORTION OF MY VEHICLE. NO ONE WAS INJURED DURING THE ACCIDENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	PENDING
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB2075R
Vehicle Make/Model/Colour	HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Details Of Properties	NA
Vehicle Category	PRIVATE CAR
Name of Driver	LIM KIW LING
NRIC/Passport Number	S0064825F

Contact Number

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**.
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.

**VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MUHAMMAD FAIZAL BIN PABILA**

Policyholder's Signature
Date & Time:

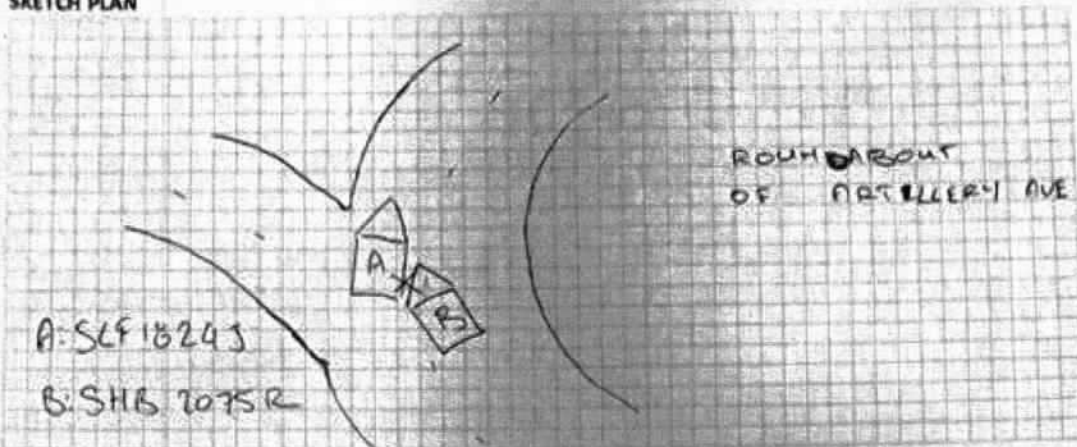
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

30/9/2019

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MUHAMMAD FAIZAL BIN PABILA

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



**SINGAPORE
POLICE FORCE**



T/20190930/2083

1 of 3

Report No. T/20190930/2083

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No. 1800-7819999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/09/2019 13:14	Vide Report No.:	Station Diary No.: 9
--------------------------------------------	------------------	-------------------------

Informant's Particulars

Name of Informant: CHIAM SWEE PHUANG		Address: APT BLK 351B ANCHORVALE ROAD #11-253 SINGAPORE 542351	
ID Type / ID No.: NRIC NO / S2174943E		Contact No.:	Mobile: 92700788
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 60	Date of Birth: 13/05/1959	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 29/09/2019 15:50	Type of Location: Straight Road
Location: Along Road 1 ARTILLERY AVENUE				
Roundabout of Artillery Avenue				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB2075R	TAXI					0
SLF1824J	Car					1

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



**SINGAPORE
POLICE FORCE**



T/20190930/2083

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999

2 of 3

Report No: T/20190930/2083

CONTINUATION OF REPORT

Driver			
Name	LIM KIW LING	ID No.	S0064825F
Related Vehicle	SHB2075R (TAXI)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHIAM SWEE PHUANG	ID No.	S2174943E
Related Vehicle	SLF1824J (Car)	Contact No.	92700788
Hospital/Clinic	STREET 11 CLINIC	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	30/09/2019	Date Discharge	30/09/2019
No. of Days granted Medical Leave	04	Degree of Injury	NIL

Brief Details.

On the 29/09/2019 at about 1550hrs, I was driving my vehicle (SLF1824J) towards the round about at Artillery Avenue. I was on the left of the two lane road. As I entered the round about another vehicle (SHB2075R) was at the right lane. As I was making way at the round about, I felt and impact from the right rear side of my vehicle. I then discovered that the vehicle (SHB2075R) had collided onto the right rear portion of my vehicle. No one was injured during the accident.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999



T/20190930/2083

3 of 3

Report No. T/20190930/2083

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 Report:
G /
Sgt 3 HASAN BIN SIDIK

Signature Of Interpreter:
Not applicable

Signature Of Informant:

Date/Time:
30/09/2019 13:14

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No: 65476151

SINGAPORE
POLICE FORCE
Auth. Station Stamp
NP168

SIGNATURE

Classification Of Case:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	200G
Vehicle Details	
Vehicle No.:	SLF1824J
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Oct 2019
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS CLASSIC 1.6 CVT
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	1ZRY328248
Chassis No.:	MR053REH104556832
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$16,800.00
Original Registration Date:	17 Aug 2016
First Registration Date:	17 Aug 2016
Transfer Count:	2
Actual ARF Paid:	\$16,800.00 $\times 50\% = \underline{\$8400}$
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Aug 2026
PARF Rebate Amount:	\$12,600.00
Intended COE Rebate Details	
COE Expiry Date:	16 Aug 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$47,300.00
COE Rebate Amount:	\$32,486.00
Total Rebate Amount:	\$45,086.00

The information contained herein is correct as at 03 Oct 2019

Remaining: 6 years 10 months 18 days (82.5)
Depri: \$1800/yearly \$650/monthly

OK

$$82.5 \times \$650 = \underline{\$53625}$$

$$\underline{\$53625} + 8400 = \underline{\$62025}$$

SMART ENOUGH TO KNOW ALL THE
OTHER DEALS AREN'T GOOD ENOUGH?
Cars@Expo | 5-6 October

SKODA


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Toyota Corolla Altis 1.6A

[Overview](#) [Financial](#) [Insurance](#) [Accessories](#) [Similar](#) [Research](#) [Photos](#) [Map](#)

CARQUOTZ *Nothing without Solution*

Price \$60,998

Depreciation [?] \$8,130 /yr
View models with similar depre

Reg Date 18-Jan-2016
(6yrs 3mths 14days COE left)

Mileage 75,118 km (20.2k /yr)

Manufactured [?] 2015

Road Tax [?] \$742 /yr

Transmission Auto

Dereg Value [?] \$48,879 as of today (change)

OMV [?] \$19,589

COE [?] \$54,301

ARF [?] \$19,589

Engine Cap 1,598 cc

Power 90.0 kW (120 bhp)

Curb Weight [?] 1,205 kg

No. of Owners [?] 2

Type of Vehicle Mid-Sized Sedan

Features

Reliable And Fuel Efficient 1.6L 4 Cylinder Inline Dual Vt-i Engine, CVT Transmission, ABS, SRS Airbags, Multi Function Steering. View specs of the Toyota Corolla Altis (2014)

Accessories

Reverse Camera, Factory Fitted Audio, Bluetooth, Auto Headlamps, Electric Driver Seat, Auto Climate Control, Sports Rims.

Description

Drive With Assurance! Fully Serviced By Agent, 100% Not PHV Usage! Genuine And Transparent Deal! Flexible Bank/In House Up To Loan \$58k Monthly Installment \$908, All Our Quality Consignment Cars Are Selling At The Most Reasonable Price With A Peace Of Mind! STA Inspection Welcome! No Repair Needed! 100% Impressive! View To Believe! Best Deal Assured! Daily 9AM To 9PM, Call Today!

Category

PARF Car

Status

Available

Resources



Car Valuation - Free

Find out the market value of your existing car for free. Get started

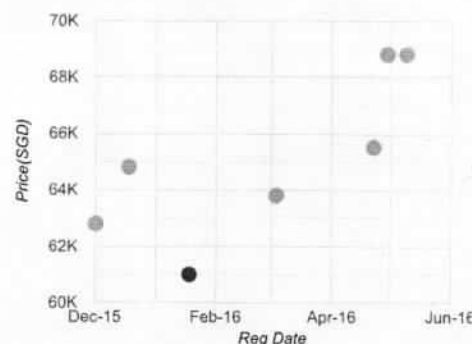
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Location Map

Price Chart

Summary



Click on the point to view the vehicle

[Shortlist](#)

[Compare](#)

[Add note](#)

[Report Error](#)

[More Actions](#)

Seller Information

Company

CarQuotz Singapore

» dealer's pricelist

» 247 vehs sold | 46 vehs available

Address

1 Kaki Bukit Road 1 #01-44

[Search cars nearby this location](#)

Location

Enterprise One

Contact Person(s)

Mr Koh

9232333:

Jason Koh

8456881:

N-51 AUTOMOTIVE PTE LTD

Kaki Bukit AutoHub
2 Kaki Bukit Ave 2
#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27
Singapore 417921 Tel No. : +65 6842 0051 Fax No. : +65 6741 0510
E-Mail : sales@n51.com.sg
Company Reg. No. : 200616038C
GST Registration No. : 200616038C

GRAB RENTALS PTE LTD
18 SIN MING LANE #01-08 MIDVIEW CITY
SINGAPORE 573960

Contact : 66550005-GRAB 92700788

John
3/10/19
Ram (LKK)
Rameshram@LKKauto.com
2/10/19 1630hrs
DIS matted
6 repair days
Required ~~at~~ ~~at~~

ESTIMATE

Repair Code : CLM15605

Date in : 30/09/2019

Vehicle Num. : SLF1824J

Model : TOYOTA COROLLA ALTIS CLASSIC 1.6 CVT

Chassis/Eng# : MR053REH104556832/1ZRY328248

Parts and Labour Assesment

Description of part	Qty	Unit Price	Amount
REAR AXLE	1	2355.00 ND	2,355.00 ND
REAR BUMPER	1	581.90	581.90 SL
REAR BUMPER END SEAL COVER RH	1	231.35 \$115	231.35 SL
REAR BUMPER RH REFLECTOR	1	141.45 \$51	141.45 SL
REAR BUMPER SIDE RETAINER L/R	2	65.00 \$65	130.00 SL
REAR RH FENDER	1	1084.00 \$977	1,084.00 SL
REAR RH SHOCK ABSORBER	1	155.00 ND	155.00 SL
REAR RH SPORT RIM	1	1250.00 \$1000	1,250.00 SL
REAR RH WHEEL BEARING	1	562.00 282	562.00 SL
Subtotal before discount		\$3351.90	6,490.70
Percentage discount 25%		\$2513.93	1,622.68
Sub-total 1			4,868.03
REAR BUMPER CLIPS - SET		80.00 \$55	80.00 SL
REAR RH 205/55R16 TYRE		280.00 XRM	280.00 SL
REAR WINDSCREEN SEAL		100.00 \$85	100.00 SL
REAR WINDSCREEN SEALANT		80.00 \$50	80.00 SL

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

*** This is a computer-generated document which requires no signature.***

Signature: _____
Date: _____



N-51 AUTOMOTIVE PTE LTD

Kaki Bukit AutoHub

2 Kaki Bukit Ave 2

#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27

Singapore 417921 Tel No. : +65 6842 0051 Fax No. : +65 6741 0510

E-Mail : sales@n51.com.sg

Company Reg. No. : 200616038C

GST Registration No. : 200616038C

GRAB RENTALS PTE LTD

18 SIN MING LANE #01-08 MIDVIEW CITY

SINGAPORE 573960

Contact : 66550005-GRAB 92700788

ESTIMATE

Repair Code : CLM15605

Date in : 30/09/2019

Vehicle Num. : SLF1824J

Model : TOYOTA COROLLA ALTIS CLASSIC 1.6 CVT

Chassis/Eng# : MR053REH104556832/1ZRY328248

Subtotal before discount	540.00
Percentage discount 0%	0.00
Sub-total 2	\$190 540.00
Parts-total	5,408.03

LABOUR

to remove, reinstall windscreen (REAR)

150.00 \$102

To remove, change rear suspension parts, axle carriage, absorber, lower arm, top arm, trailing arm, knuckle arm, wheel bearing, bearing hub and etc.

450.00 ~~\$350~~

To road test driving, check and resetting wheel alignments system.

140.00 ~~\$80~~

To remove, reinstall roof top trim upholstery, cushion seat, trim garnish, trim liner carpet. (to FR)

140.00 ~~\$50~~

To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.

800.00 ~~\$600~~

To provide labour, workmanship to change the above damaged bodyparts, repair, re-construct and re-align body structure, body alignments and damaged consistent to the accident.

900.00 ~~\$70~~

To apply anti-rust chemical on repaired and replaced panel.

120.00 ~~\$50~~

Labour Total

\$1930 2,700.00

Parts & Labour Total

\$4633.93 1,108.03

Net L/S = \$3700.00

LKK Auto Consultants hence notify the Repairer of the following:

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- Third party survey is on a computer generated document which requires no signature.***
- 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:

page 2

Ram (LKK)
10/10/2019 L/S
6 Repair days

KIM HOE TYRE & BATTERY
KAKI BUKIT AUTOHUB
01-10 SINGAPORE 417921
TEL:67472427

Customer

Vehicle ident no.

Repair order no.
R001178

Technician

Date
2.10.19

License plate no.
SLF1824J

First reg. date

Model

Toyota : Corolla Altis : 1ZZ-FE : 2009-

Odometer reading: km/miles

Complaints or reason for alignment check

			Before	Target Data	Actual
Rear axle	Camber	left		-1°26' +/-0°30'	-0°50' *
		right			-3°58' *
		cross		0°00' +/-0°30'	3°08' *
	Toe	left		0°06' +/-0°08'	0°14'
		right			6°36' *
		total		0°12' +/-0°16'	6°50' *
	Geometrical driving axis			0°00'	-3°11'
Front axle	Camber	left		-0°25' +/-0°45'	-0°24'
		right			-1°29' *
		cross		0°00' +/-0°30'	1°05' *
	Caster	left		2°52' +/-0°45'	
		right			
		cross		0°00' +/-0°30'	
	SAI	left		12°12'	
		right			
		cross		0°00'	
	Track differential angle	left			
		right			
	Toe	left		0°00' +/-0°06'	3°44' *
		right			-3°45' *
		total		0°00' +/-0°12'	-0°01'
	Setback			0°00'	
	Max steering lock	left steer	left	-38°30' +/-2°00'	
			right	33°04' +/-2°00'	
		right steer	left	33°04' +/-2°00'	
			right	-38°30' +/-2°00'	

* This value is not within specification. Tire wear, handling and safety problems may result.

**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/FCI19017282/Fyf3e2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 14-10-2019



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 2075R	Veh. Inspected	SLF 1824J
Policy No.		Coverage (\$)	0.00
Claim No.	D19006276MFSH	Excess (\$)	0.00
Assign From	MERINA CHIA SAN SAN	Assign Date	01/10/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA COROLLA ALTIS 1.6	c.c	1598
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	MR053REH104556832	Colour	GREY
Odometer	175655	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/55 R16	ACHILLES	3 mm
L/H Front Tyre	205/55 R16	ACHILLES	3 mm
R/H Rear Tyre	205/55 R16	ACHILLES	4 mm
L/H Rear Tyre	205/55 R16	ACHILLES	4 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR AND O/S REAR PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	29/09/2019	Inspection Date	02/10/2019
Survey held at	N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921		

5a. Remarks

A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	6 Working Days
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LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLF 1824J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR AXLE	NO DAMAGED	2,355.00	-
1	REAR BUMPER	SCRATCHED	581.90	581.90
1	REAR BUMPER END SEAL COVER RH	CRACKED	231.35	115.00
1	REAR BUMPER RH REFLECTOR	SCRATCHED	141.45	51.00
2	REAR BUMPER SIDE RETAINER L/R @\$65.00	NECESSARY (1PC ONLY)	130.00	65.00
1	REAR RH FENDER	BUCKLED	1,084.00	977.00
1	REAR RH SHOCK ABSORBER	NO DAMAGED	155.00	-
1	REAR RH SPORT RIM	SCRATCHED	1,250.00	1,000.00
1	REAR RH WHEEL BEARING	BENT	562.00	562.00
	LESS 25% DISCOUNT		-1,622.68	-837.98
			4,868.02	2,513.92
SPECIAL NETT ITEMS				
1	SET REAR BUMPER CLIPS (SN)	BURNT	80.00	55.00
1	REAR RH 205/55R16 TYRE (SN)	NOT NECESSARY	280.00	-
1	REAR WINDSCREEN SEAL (SN)	NECESSARY	100.00	85.00
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	80.00	50.00
			540.00	190.00
LABOUR				
	TO REMOVE, REINSTALL WINDSCREEN (REAR).		150.00	100.00
	TO REMOVE, CHANGE REAR SUSPENSION PARTS, AXLE CARRIAGE, ABSORBER, LOWER ARM, TOP ARM, TRAILING ARM, KNUCKLE ARM, WHEEL BEARING, BEARING HUB AND ETC.		450.00	350.00
	TO ROAD TEST DRIVING, CHECK AND RESETTNG WHEEL ALIGNMENTS SYSTEM.		140.00	80.00
	TO REMOVE, REINSTALL ROOF TOP TRIM UPHOLSTERY, CUSHION SEAT, TRIM GARNISH, TRIM LINER CARPET (TO FR).		140.00	50.00
	TO RE-SPRAY PAINTING ON THE CHANGE BODYPARTS, REPAIR PORTION, AND WHERE CONSISTENT TO THE ACCIDENT.		800.00	600.00

Report Ref No. CS/FCI19017282/Fyf3e2



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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO PROVIDE LABOUR, WORKMANSHIP TO CHANGE THE ABOVE DAMAGED BODYPARTS, REPAIR, RE-CONSTRUCT AND RE-ALIGN BODY STRUCTURE, BODY ALIGNMENTS AND DAMAGED CONSISTENT TO THE ACCIDENT.		900.00	700.00
	TO APPLY ANTI-RUST CHEMICAL ON REPAIRED AND REPLACED PANEL.		120.00	50.00
			2,700.00	1,930.00
GRAND TOTAL			8,108.02	4,633.92
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,700.00

Report Ref No. CS/FCI19017282/Fyf3e2

PARASURAM S/O SHANMUGAM

Asst. Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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