

A.S.S. REC. BY: Taukitch | RFP: MSG19015574/71503-1
 Courier: Maximen | Christina Wong of MS/G | Date/Time: 7.10.2019
 Estimated Cost: _____ Bill to: _____
 OD ☒ WS / TP RES / OD RES / EVA / INV / MV / CS
 To Inspect Vehicle No: SMN 5385D Insured: SLU 50777
 at Workshop n/s: prime Auto Tel: 68610908
 of: G Benoi place
 Policy No: MSD/vpcp/18-000001 Claim No: 604705
 Sum Insured: _____ Excess: _____
 Make of Veh: _____ D.O.A. 30/08/19
 (Client's Record)
 CA / REV / RFP. / REV 24 HRS
 Date/Time: 11:27am 23/9/19 Person Contacted: chussy H.O.D. Endorsement: _____
 Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction
	<u>SMN 5385D - X</u>
	<u>SLU 50777 - X</u>

Do Not Finalise

18/10/2019

(\$ 2,200/- Red - 22%)

11,479.00 10 days

RECEIVED 23 OCT 2019

18/10

Surveys

REF:

MS19

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lump Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMNS38SD Yr Regn: 2015 Aug
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Prius Hybrid cc 1797

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

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

Eng/No: _____

C/No: #VW 30045/482

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65R15

R: 175/65R15

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

TOYO / YOKO or

Front

Rear

R/Bal: 6 mm R/Bal: 6 mm

L/Bal: 6 mm L/Bal: 6 mm

D.O.A. _____ D.O.I. 3/1/10 4pm

Survey held at Prime Auto

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

Rear O/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time _____ Action / Instruction Battery much
No estimate.

outgoing @ 15:36 pm checked with Cherry, no estimate.

77000 - 88000, 8 days.

Date/Time, File Pass to?

☐ : Preli. Report

☐ : Final Report

1)

Date/Time, File Return to?

2)

Report Format :

PRS

Lump Sum / I.B.I. (\$) _____

Days Of Repair: 8

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS, SI

Photos

Others

TOTAL

120

11

131

Nivitha (LKK Auto)

From: Veron Chen (LKKAuto) <veronchen@lkkauto.com>
Sent: Tuesday, 8 October 2019 7:39 AM
To: assignments
Subject: FW: Our ref: M604705 Your ref: TP SMN5385D- please do paper survey.

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: Christina Wong <Christina_Wong@sg.msig-asia.com>
Sent: Monday, 7 October 2019 8:08 PM
To: Veron Chen (LKKAuto) <veronchen@lkkauto.com>
Subject: Our ref: M604705 Your ref: TP SMN5385D- please do paper survey.

Hi Veron

I have grant rights in Merimen for TP survey report & photos, please do paper survey.

Please note we did not receive the Prelim report.





Thanks

Best Regards

Christina Wong
Senior Executive, Claims Services (Motor)
Direct line +65 6643 1311 | Direct fax +65 6225 7402 | christina_wong@sg.msig-asia.com



MSIG

MSIG Insurance (Singapore) Pte. Ltd. 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | Tel +65 6220 9644 | Fax +65 6225 6371 | Co. Reg. No. 200412212G | <http://www.msig.com.sg/> | Follow us on    

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PAR Automotive Consultancy

Regn. No: 52986974L

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel : 645 31173, Fax : 645 36131.

Report No: 0398 -19-PA

11 September 2019

ACCIDENT VEHICLE SURVEY REPORT

Ng Ang Seng
Blk 683A Choa Chu Kang Crescent #07-402
Singapore 680683

VEHICLE INFORMATION:

Vehicle Reg No.:	SMN5385D	Odometer:	86492km
Make & Model:	Toyota Prius Hybrid 1.8L A	Colour:	Silver
Chassis number:	ZVW300451482	Date of accident:	30/08/2019
Year of Regn.:	17/08/2015	Date inspected:	30/08/2019
	Prime Auto Claims Service Pte Ltd		
	6 Benoi Place		
	Singapore 629927		

STATIC CHECKS, where applicable:

Steering :	serviceable
Footbrake :	serviceable
Handbrake :	serviceable
Paintwork :	Good
General condition :	Good

TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
Front:	6mm/Yokohama	6mm/Yokohama	195/65R15
Rear:	6mm/Yokohama	6mm/Yokohama	195/65R15

POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear RH portion.
Please see details as described in the Annex for parts and labour.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

Parts and Labour Assessment

Report No: 0398 -19-PA

Vehicle No: SMN5385D

Description of part	Qty	Condition as inspected	Repairer's estimate	Our adjustment
Rear bumper	1	squashed	481.90	481.90
Rear bumper end seal cover RH	1	fractured	172.45	172.45
Rear bumper reflector RH	1	fractured	132.25	132.25 <i>YNSD</i>
Rear bumper side retainer RH/LH	2	necessary	282.90	282.90
Rear end panel	1	buckled	781.70	781.70
Rear end panel inner top garnish	1	deformed	374.40	374.40
Rear exhasut gasket	1	bent	61.10	61.10
Rear exhaust rubber mounting	2	distorted	127.80	127.80
Rear exhaust silencer box	1	bent	781.10	781.10 <i>Rx</i>
Rear fender inner upholstery trim garnish RH	1	reuse	377.10	0.00
Rear fender RH	1	buckled	972.10	972.10
Rear fender air vent RH	1	fractured	172.40	172.40
Rear fender quarter glass moulding RH	1	necessary	182.25	182.25
Rear side tray garnish RH	1	squashed	371.85	371.85 <i>gph 3ve</i>
Rear sponge tray box	1	deformed	374.40	374.40
Rear sponge tray box top cover	1	deformed	372.45	372.45 <i>x gph 3ve</i>
Rear sponge tray box top cover RH	1	deformed	163.00	163.00 <i>x gph 3ve</i>
Tailgate	1	buckled	1,218.40	1,218.40
Tailgate emblem "Hybrid Synergy driver"	1	necessary	123.05	123.05
Tailgate embelm emblem "Prius "	1	necessary	61.10	61.10
Tailgate damper RH/LH	2	reuse	748.90	0.00
Tailgate hinge RH/LH	2	repair	763.80	0.00
Tailgate inner pull garnish	1	reuse	561.60	0.00
Tailgate inner upholstery trim garnish	1	reuse	374.45	0.00
Tailgate mechanism lock	1	bent	374.85	374.85
Tailgate outer garnish	1	reuse	781.10	0.00
Tailgate outer garnish logo "Toyota"	1	necessary	61.10	61.10
Tailgate weatherstrip	1	deformed	374.45	374.45
Tailgate windscreen sided moulding RH/LH	2	necessary	344.90	344.90
Tailgate windscreen upper moulding	1	necessary	182.95	182.95
Tailgate lower windscreen moulding with glass	1	necessary	979.20	979.20
Rear tail lamp rubber gasket RH/LH	2	necessary	122.20	122.20 <i>YNSD</i>
Rear tail lamp RH	1	broken	561.60	561.60

Rear tail lamp lower bracket RH	1 bent	132.25	132.25
	<i>Subtotal before discount</i>	13,947.05	10,340.10
<i>Percentage discount</i>	0% and 25%	0.00	2,585.03
	Sub-total 1	13,947.05	7,755.08
Battery	1 dented	380.00	380.00
Rear bumper reverse sensor	1 shorted	350.00	350.00
Rear fender quarter glass sealant RH	1 necessary	80.00	60.00
Tailgate windscreen sealant	1 necessary	100.00	80.00
	<i>Subtotal before discount</i>	910.00	870.00
<i>Percentage discount</i>	0% and 0%	0.00	0.00
	Sub-total 2	910.00	870.00
	Parts-total	14,857.05	8,625.08
LABOUR			
1. To straighten and panel beating rear door RH, rear fender LH, rear fender inner panel, rear spare tyre panel and rear frame members. To cut and weld rear end panel and rear fender RH. To remove and refit above parts.		2,000.00	1,750.00
2. To putty, re-spray painting and polish affected areas.		2,000.00	1,540.00
3. To check and rectify wiring system.		80.00	50.00
4. To remove and refit rear windscreen.		150.00	120.00
5. To remove and refit rear tailgate glass.		150.00	100.00
6. To remove and refit rear fender quarter glass.		150.00	80.00
7. To remove and refit rear seats, roof lining, speaker board, garnish, fittings and etc.		150.00	120.00
8. To remove and refit rear exhaust pipe.		150.00	120.00
9. To rust proof affected areas.		150.00	120.00
	Labour total	4,980.00	4,000.00
	Parts & Labour total	19,837.05	12,625.08

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on LUMP SUM repairs is :
and the recommended number of working days for the repairs is :

\$10,100.00

11

B J Loi (I Eng., MIMI, AIRTE)
Automotive Appraiser

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 30/08/2019 11:46
 Date Of Accident 30/08/2019 10:20
 Exact Location Of Accident EXIT 8A TO MANDAI RD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMN5385D

Insured/Policyholder

Name Of Registered Owner NG ANG SENG (HUANG HONGCHENG)
 NRIC No S7335367Z
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-96225190
 Alternative Phone No OFFICE-96225190

Vehicle Particulars

Manufacturer TOYOTA
 Model PRIUS
 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 COMPREHENSIVE
 Fleet Policy NO
 Policy Number 5111918341(CLASSIC)
 Cover Note Number

Driver

Name of Driver NG ANG SENG (HUANG HONGCHENG)
 NRIC No S7335367Z
 Date Of Birth 25/09/1973
 Occupation INDOOR
 Date Of Driving Pass 14/09/1998
 Driving Experience 20 YEARS AND 11 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-96225190
 Fax Number
 Contact Number OFFICE-96225190
 Email Address NOEMAIL

Address	BLK 683A CHOA CHU KANG CRESCENT #07-402
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	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?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER ATTACHED ACCIDENT REPORT FROM THE DRIVER.

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	SLU5077T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	NG ANG SENG
Approximate Age	
Injuries Sustain	REFER TO POLICE REPR
Injured person in which vehicle?	SMN5385D
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:

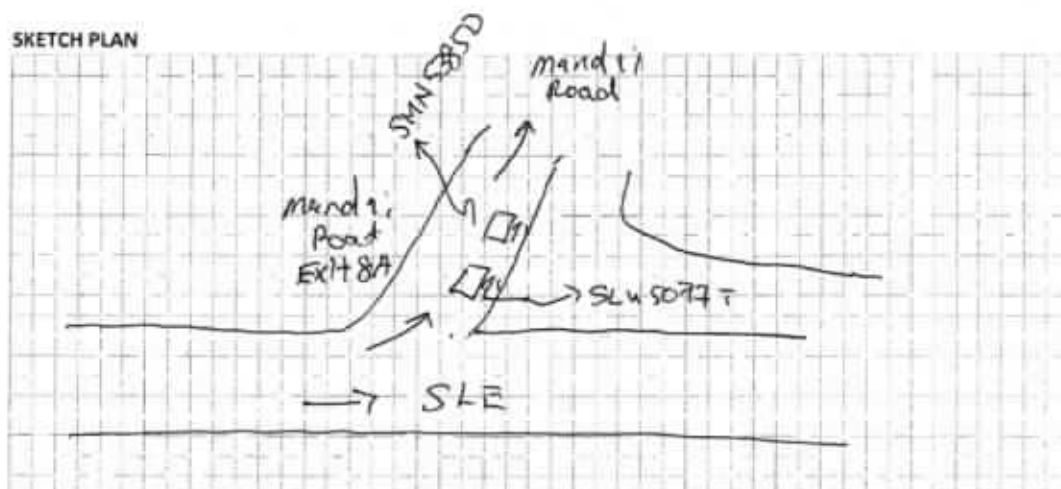
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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.

MATSEAN
 Policyholder's Signature
 Date & Time:
 30/08/19
 1155 am

MATSEAN
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 30/08/19
 1155 am

IDAC BUKIT BATOK (VAC)
 511 23
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Today, 30th Aug 2017, about 10.20am. No raining.
SMN538SD exit into Exit 8A inside this slip road, then
heard a loud bang from behind.

SLU5077 T knocked on SYN5385D.

Since no injury involved and to avoid hold up the traffic behind, we took photos and moved to a safe area for documentation.

DECLARATION

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

MUSEN.

Policyholder's Signature _____

Date & Time:

30/08/19

1155am

নামঃ

Driver's Signature _____

(if driver is not the policyholder)

Date & Time:

30/08/19

1155 am.

WAC BUKIT RATAK MACY

Reporting Centre Personnel's Signature

Name: _____

NRIC/EIN No.:



**SINGAPORE
POLICE FORCE**



T/20190831/2140

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

1 of 3

Report No. T/20190831/2140

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/08/2019 17:59	Vide Report No.:	Station Diary No.: 88
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Informant's Particulars

Name of Informant: NG ANG SENG			Address: APT BLK 683A CHOA CHU KANG CRESCENT #07-402 SINGAPORE 681683		
ID Type / ID No.: NRIC NO / S7335367Z			Contact No.: Home/Office: Mobile: 96225190		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 45	Date of Birth: 25/09/1973	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: ENGINEER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/08/2019 10:20	Type of Location: Slip Road
Location: Along Road 1 SELETAR EXPRESSWAY Exit 8A of SLE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Light
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
SLU5077T	Car	BLUECAR	BLUECAR	White	Slightly Damaged	0
SMN5385D	Car	TOYOTA	PRIUS HYBRID 1.8L A	Silver	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20190831/2140

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

2 of 3

Report No. T/20190831/2140

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SMN5385D	NTUC Income Insurance Co-Operative Limited	5111918341	15/08/2019	16/08/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHAN HAO YANG	ID No.	S9510409F
Related Vehicle	SLU5077T (Car)	Contact No.	91785185
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	NG ANG SENG	ID No.	S7335367Z
Related Vehicle	SMN5385D (Car)	Contact No.	96225190
Hospital/Clinic	CCK FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	31/08/2019	Date Discharge	31/08/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 30/8/2019 at about 1020hrs, I was driving SMN5385D along SLE exiting exit 8A when I got into an accident with SLU5077T. There was a car in front of me and because I was exiting the expressway, I slowed down. Suddenly, SLU5077T hit my car from behind. As it was a slip road and we did not want to jam up the slip road, hence we drove to a safer road and exchanged particulars.

On 31/8/2019 I woke up with back pain and stiff neck, whence went to see a doctor and was given 3 days mc.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20190831/2140

3 of 3

Report No. T/20190831/2140

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:

J /

Sgt 2 EDWINA CHEW HULLING



Signature Of Interpreter:

Not applicable

Signature : _____

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED
MOHD SAID

Contact No.: 65476172

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

31/08/2019 17:59

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S66500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: SMN5385D
 Name(as shown in NRIC) : Ng Ang Seng NRIC/FIN/Passport No : _____
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : _____ Singapore()
 Contact (Tel) : _____ Mobile No. : _____
 Email Address : _____
 Date of Accident : _____ Time of Accident : _____
 Place of Accident : _____
 Insurance Company: _____

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

change 'Reporting only' to 'Third Party'

Ng Ang Seng
 Policyholder / Driver's Signature
 Date: 30/08/19

IDAC BUKIT BATOK (VAC)
 Reporting Centre Personnel's Signature
 Name: _____
 NRIC/FIN No.: _____
 Date: _____



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
5 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: SMN5385D
Name (as shown in NRIC) : Ng Amy Seng NRIC/FIN/Passport No : S7333672
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 63A Chong Chuan Keng Crescent Singapore (GP/GP3)
Contact (Tel) : _____ Mobile No. : 82334266 / 96225190
Email Address : mtrainerng@hotmail.com
Date of Accident : 30/08/19 Time of Accident : 1020 am
Place of Accident : SLE Exit 8A to Mandal Rd.
Insurance Company : NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

After the accident on 30/08/19, I feel's backache &
stiff neck on the next day 31st Aug 19. seek medical
and was given 3 days of medical leave.
Subsequently, a ^{Police} report was made on 31st Aug 19.

- 2 SEP 2019

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 650540
Tel: 6560 3312 Fax: 6560 0722
Email: vacib@smynat.com.sg

Policyholder / Driver's Signature
Date: 02/09/19

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

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	02/09/2019 15:28
Date Of Accident	30/08/2019 10:30
Exact Location Of Accident	SLE EXIT 8A TO MANDAI ROAD (CIRCULAR BEND)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU5077T
Insured/Policyholder	
Name Of Registered Owner	BLUECAR EAST ASIA PTE LTD
Co Reg No	201617259H
Email Address	CLAIMS@BLUESG.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-31637900

Vehicle Particulars

Manufacturer	BLUECAR
Model	BLUECAR-(A)
Exact Purpose for which vehicle was being used at time of accident	CAR RENTAL BY OWNER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	MSD/VPCP/18-000001
Cover Note Number	

Driver

Name of Driver	CHAN HAO YANG
NRIC No	S9510409F
Date Of Birth	28/03/1995
Occupation	INDOOR
Date Of Driving Pass	28/03/2016
Driving Experience	3 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91785185
Fax Number	
Contact Number	
Email Address	CHANHAOYANG28@GMAIL.COM

Address	BLK 227 LORONG 8 TOA PAYOH #13-126 SINGAPORE 310227
Postcode	310227
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)	1

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

The accident occurred on Friday, 30th August 2019 at approximately 10.30 am. It occurred as I was exiting SLE on to Mandal road (Exit 8A), a circular bend with view obstructed partially by trees on the side. I was exiting the bend at 50 km/h and the car in front of me (SMN5385D) made a sudden brake. Due to the blind spot at the bend, I was not able to brake in time and hence collided with the vehicle in front. A schematic of the accident site has been attached. The rear right of SMN5385D was damaged. The front left of BlueSG SLU5077T was damaged.

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	SMN5385D
Vehicle Make/Model/Colour	TOYOTA PRIUS SILVER
Details Of Properties	REAR RIGHT PART OF THE CAR DAMAGED
Vehicle Category	PRIVATE CAR
Name of Driver	NG ANG SENG
NRIC/Passport Number	S7335367Z
Contact Number	96225190
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan

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 regulate 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.

Policyholder's Signature
Date & Time:

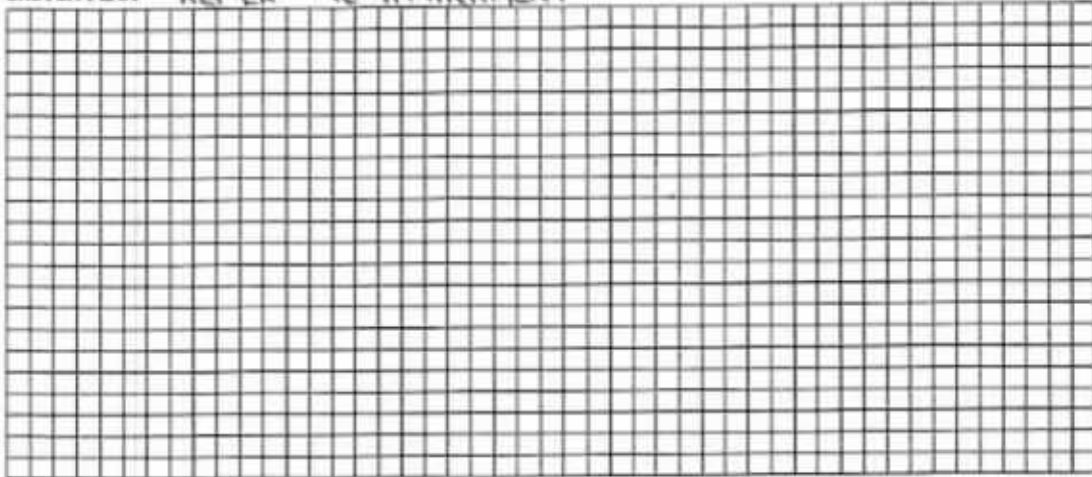
Driver's Signature
(If driver is not the policyholder)
Date & Time: 02/09/2019
1430 hrs

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



Sketch Plan #2

SKETCH PLAN REFER TO ATTACHMENT



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The accident occurred on ~~58~~ Friday, 30th August 2019 at approximately 10.30 a.m. It occurred as I was exiting SLE on to Nandoi Road (Exit 8A). A corner ~~road~~ bend with views obstructed partially by trees on the side. I was exiting the bend at 50 km/h and the car in front of me (8MN 5385D) made a sudden B break. Due to the blind spot at the bend, I was not able to brake in time and hence collided with the vehicle in front. A schematic of the accident site has been attached.

The rear right of 8MN 5385D was damaged.

The front left of Blue 36 SLU5047T was damaged.

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: 30/09/2019

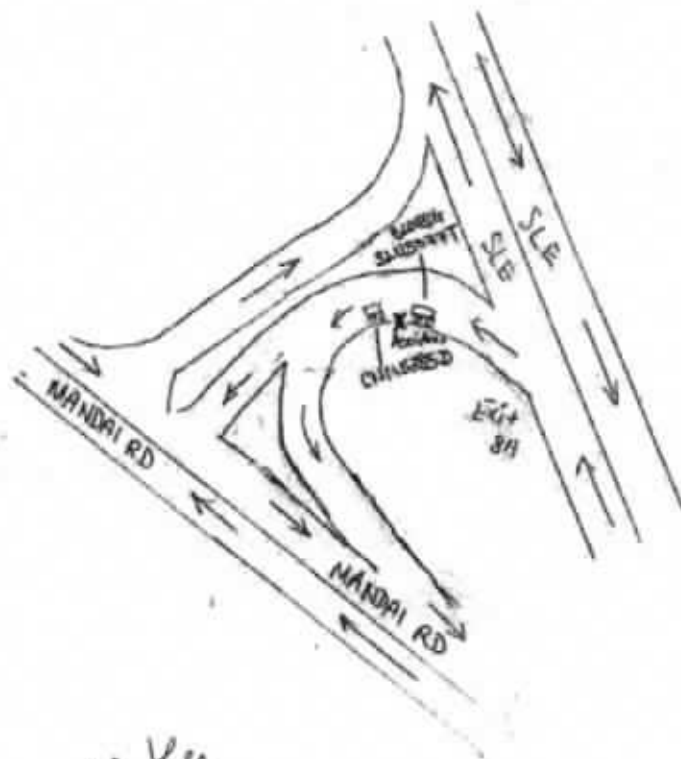
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

GIARAC SketchPlanForm_V3

1430 hrs



Schematic of accident site on 30/18/2019 10:30am.
between 3145285D and Blue 86 2145077T



1/19/20

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



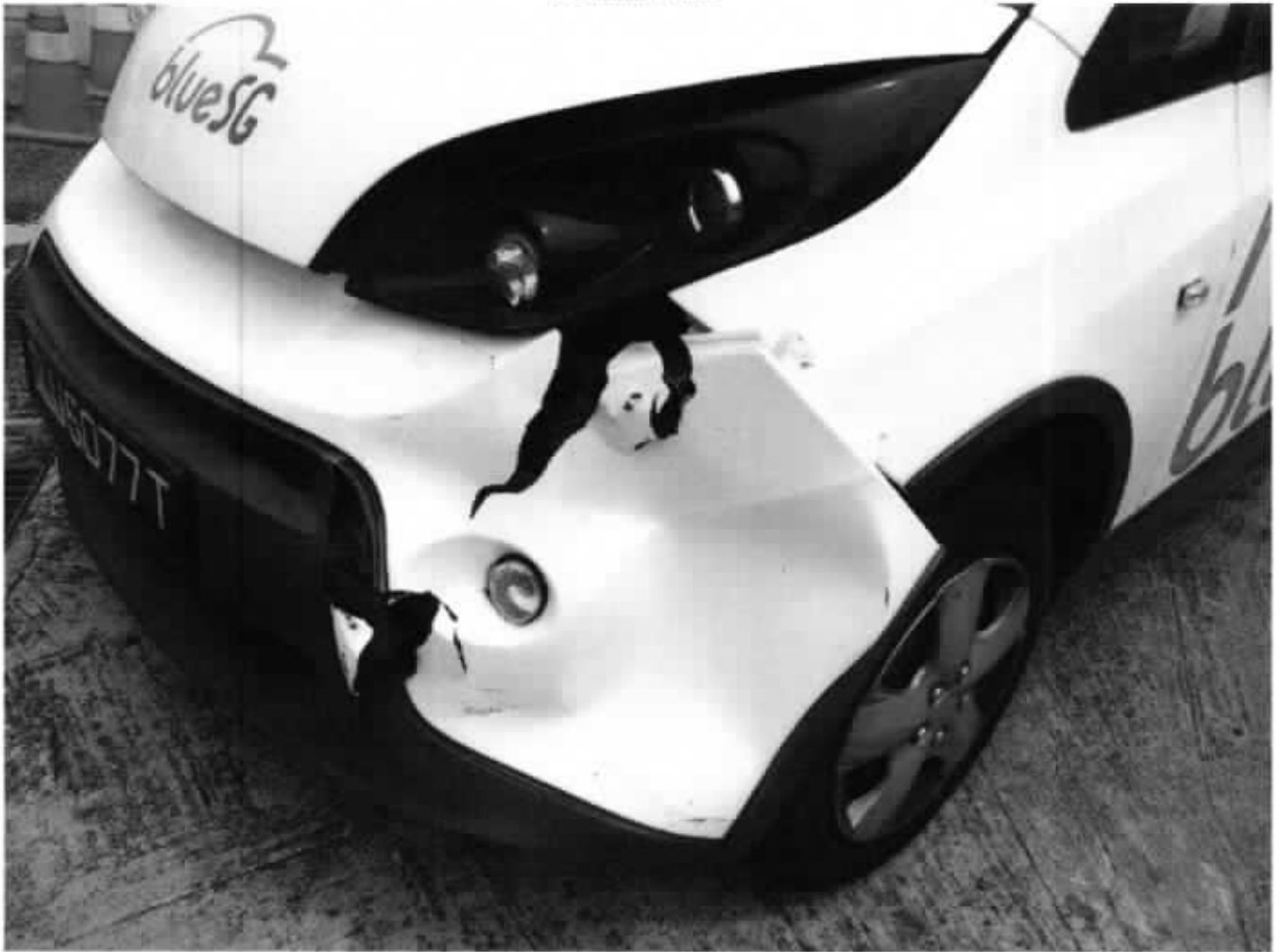
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

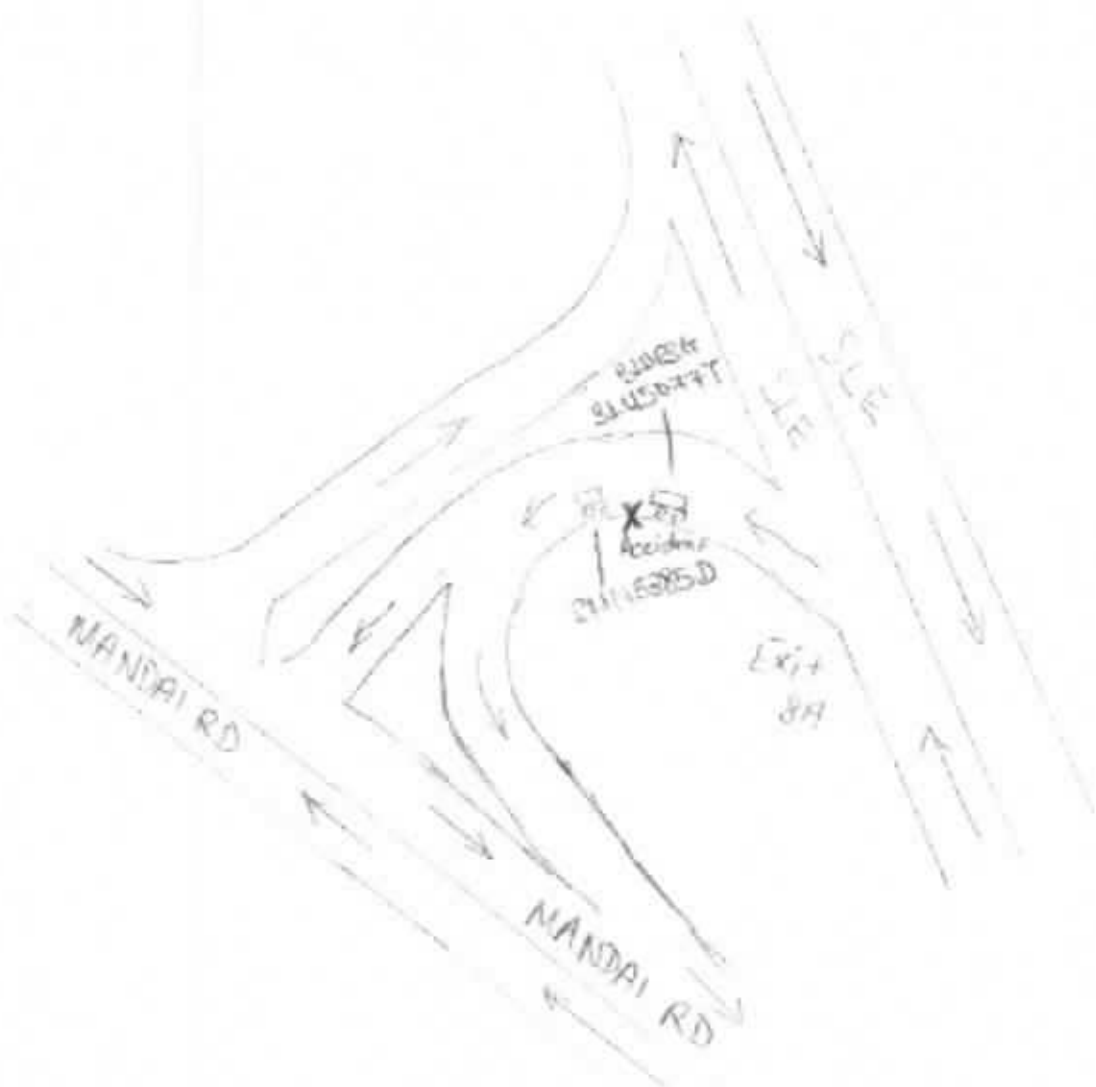


Accident Photo



Accident Photo

Schematic of accident site on 30/08/2019 1030am.
between MN5385D and BlueGr BLU5077T



Accident Photo



...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	02 Sep 2019		03 Sep 2019 14:55 Edit Adj Rpt	S\$7,900.00 Edit Estimates	S\$7,900.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured: BLUECAR EAST ASIA PTE LTD , Co. Reg. No.: 201617259H, Email: CLAIMS@BLUESG.COM.SG									
Main Claimant: NG ANG SENG (HUANG HONGCHENG) , ID: S7335367Z									
Vehicle Reg. No.:	SMN5385D	Date of Loss:	30/08/2019 10:00 - :59 [48 Months and 13 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 604705	Policy/Cover Note No.:	MSD/VPCP/18-000001 (Comprehensive) Coverage: 01/01/2019 - 31/12/2019						
Vehicle Reg. No. (Insured):	SLU5077T	Policy No. (Claimant):							
		Excess:	S\$2,000.00						
Repairer:	Prime Auto Claims Service Pte Ltd (HQ) 6 Benoi Place, 629927 Pioneer - Tel: 68610908								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 31/10/2019]								
Driver/Custodian (Insured):	CHAN HAO YANG (24 / Male), NRIC: S9510409F, Tel: +6591785185 Email: CHANHAOYANG28@GMAIL.COM								
Adj Asg. Remarks:	(Manual Assign). on WP. Liab: NR. Disagree on SJE. Assign: LKK Auto Consultants Pte Ltd. Contact: Simon Leong @ 9820 1595 / 6861 0908.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> MSIG_SG (29/10/2019): Report Send Back Alerts - SMN5385D (TP) 									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SMN5385D (604705)
[SLU5077T]
TP
NG ANG SENG (HUANG HONGCHENG)
Aug 30 2019 10:00AM
[BLUECAR EAST ASIA PTE LTD]
Prime Auto Claims Service Pte Ltd

Upload Documents			Upload Photos		Compose New Letter		View View in Browser	
Photos/Images							3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)					Thumbnail	Print
1	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
2	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
3	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
4	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
5	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
6	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
7	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
8	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
9	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
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11	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
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22	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
23	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
24	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
25	13/09/19 14:56	General View					Load JPG	<input checked="" type="checkbox"/>
Documentation							1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)					Thumbnail	Print
1	03/09/19 13:33	OI SLUS077T GIA REPORT					Load PDF	
2	03/09/19 13:33	TPD SMN5385D GIA REPORT					Load PDF	
3	03/09/19 13:33	TPD SMN5385D - PRI					Load PDF	
4	03/09/19 14:19	Disagree on SJE					Load PDF	
5	07/10/19 19:59	TP survey report & photos					Load PDF	
6	07/10/19 20:00	TP photos					Load PDF	
7	07/10/19 20:03	TP photos					Load PDF	
8	07/10/19 20:04	TP photos					Load PDF	
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (Internal Surveyor)					Thumbnail	Print
1	03/09/19 14:52	email - manual assign					Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)					Thumbnail	Print
1	29/10/19 12:53	PRS Invoice					Load PDF	
2	29/10/19 14:17	Colour Photo					Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
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There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

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: CS3/MSG19015574/T1SD3E2-1

Date: 29/10/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd. Policy No: MSD/VPCP/18-000001

Claimant Vehicle No: SMN5385D Insured Vehicle No: SLU5077T

Date of Loss: 30/08/2019 Nature of Claim: TP Claim No: 604705

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SMN5385D**
 Make & Model: TOYOTA PRIUS, 1.8 HYBRID CVT (A) Engine No: 2ZR6415452
 Reg. Date: 17/08/2015 (Man. Year: 2015) Chassis No: ZVW300451482
 Colour: Silver Odometer: 0 km
 Engine Capacity: 1797 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): **Market Value/New Car Price**

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 195/65 R15 Rear Tyre Size: 195/65 R15
 Front Left Side: Yokohama 6 mm Rear Left Side: Yokohama 6 mm
 Front Right Side: Yokohama 6 mm Rear Right Side: Yokohama 6 mm

The above values represent the remaining tyre tread depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	14,857.05	6,797.94	8,059.11	54.24
Miscellaneous Items	0.00	0.00	0.00	
Labour	4,980.00	3,110.00	1,870.00	37.55
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	19,837.05	9,907.94	9,929.11	50.05
Approved Total (Overridden) (S\$)		7,900.00		
(S\$)	19,837.05	7,900.00	11,937.05	60.18
+ GST 7.00/7.00% (S\$)	1,388.59	553.00	835.59	60.18
Nett Amount (S\$)	21,225.64	8,453.00	12,772.64	60.18

INSPECTION

Date of Assignment: 03/09/2019

Date Inspected: 03/09/2019 Inspected At:

Prime Auto Claims Service Pte Ltd
(HQ)
6 Benoi Place
Singapore 629927

Estimated Period of Repair: 10.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 29 Oct 2019)
Parts:	144	TOYOTA PRIUS 1.8 HYBRID CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SMN5385D)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Squashed	481.90 F	*481.90 FL
2	1		*REAR BUMPER END SEAL COVER RH	Fractured	172.45 F	*172.45 FL
3	1		*REAR BUMPER REFLECTOR RH	No such part	132.25 F	*- FL
4	2		*REAR BUMPER SIDE RETAINER RH / LH	Necessary	282.90 F	*282.90 FL
5	1		*REAR END PANEL	Buckled	781.70 F	*781.70 FL
6	1		*REAR END PANEL INNER TOP GARNISH	Deformed	374.40 F	*374.40 FL
7	1		*REAR EXHAUST GASKET	Bent	61.10 F	*61.10 FL
8	2		*REAR EXHAUST RUBBER MOUNTING	Distorted	127.80 F	*127.80 FL
9	1		*REAR EXHAUST SILENCER BOX	Repair	781.10 F	*- FL
10	1		*REAR FENDER INNER UPHOLSTERY TRIM GARNISH RH	Reuse	377.10 F	*- FL
11	1		*REAR FENDER RH	Buckled	972.10 F	*972.10 FL
12	1		*REAR FENDER AIR VENT RH	Fractured	172.40 F	*172.40 FL
13	1		*REAR FENDER QUARTER GLASS MOULDING RH	Necessary	182.25 F	*182.25 FL
14	1		*REAR SIDE TRAY GARNISH RH	Serviceable	371.85 F	*- FL
15	1		*REAR SPONGE TRAY BOX	Deformed	374.40 F	*374.40 FL
16	1		*REAR SPONGE TRAY BOX TOP COVER	Serviceable	372.45 F	*- FL
17	1		*REAR SPONGE TRAY BOX TOP COVER RH	Serviceable	163.00 F	*- FL
18	1		*TAILGATE	Buckled	1,218.40 F	*1,218.40 FL
19	1		*TAILGATE EMBLEM HYBRID SYNERGY DRIVER	Necessary	123.05 F	*123.05 FL
20	1		*TAILGATE EMBLEM PRIUS	Necessary	61.10 F	*61.10 FL
21	2		*TAILGATE DAMPER RH / LH	Reuse	748.90 F	*- FL
22	2		*TAILGATE HINGE RH / LH	Repair	763.80 F	*- FL
23	1		*TAILGATE INNER PULL GARNISH	Reuse	561.60 F	*- FL
24	1		*TAILGATE INNER UPHOLSTERY TRIM GARNISH	Reuse	374.45 F	*- FL
25	1		*TAILGATE MECHANISM LOCK	Bent	374.85 F	*374.85 FL
26	1		*TAILGATE OUTER GARNISH	Reuse	781.10 F	*- FL
27	1		*TAILGATE OUTER GARNISH LOGO TOYOTA	Necessary	61.10 F	*61.10 FL
28	1		*TAILGATE WEATHERSTRIP	Deformed	374.45 F	*374.45 FL
29	2		*TAILGATE WINDSCREEN SIDED MOULDING RH / LH	Necessary	344.90 F	*344.90 FL
30	1		*TAILGATE WINDSCREEN UPPER MOULDING	Necessary	182.95 F	*182.95 FL
31	1		*TAILGATE LOWER WINDSCREEN MOULDING WITH GLASS	Necessary	979.20 F	*979.20 FL
32	2		*REAR TAIL LAMP RUBBER GASKET RH / LH	Serviceable	122.20 F	*- FL
33	1		*REAR TAIL LAMP RH	Broken	561.60 F	*561.60 FL
34	1		*REAR TAIL LAMP LOWER BRACKET RH	Bent	132.25 F	*132.25 FL
35	1		*BATTERY	Dented	380.00 FS	*200.00 FS
36	1		*REAR BUMPER REVERSE SENSOR	Shorted	350.00 FS	*200.00 FS
37	1		*REAR FENDER QUARTER GLASS SEALANT RH	Necessary	80.00 FS	*40.00 FS
38	1		*TAILGATE WINDSCREEN SEALANT	Necessary	100.00 FS	*60.00 FS

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

Sub Total (\$\$) 14,857.05 8,897.25

Report was unsubmitted during this print-out.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
- List Item Discount on L Items 0.00/25.00% (S\$)					0.00	2,099.31
Total Parts (S\$)					14,857.05	6,797.94

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO STRAIGHTEN AND PANEL BEATING REAR DOOR RH, REAR FENDER LH, REAR FENDER INNER PANEL, REAR SPARE TYRE PANEL AND REAR FRAME MEMBERS. TO CUT AND WELD REAR END PANEL AND REAR FENDER RH. TO REMOVE AND REFIT ABOVE PARTS	New	2,000.00	1,300.00
2	TO PUTTY, RE-SPRAY PAINTING AND POLISH AFFECTED AREAS	New	2,000.00	1,300.00
3	TO CHECK AND RECTIFY WIRING SYSTEM	New	80.00	30.00
4	TO REMOVE AND REFIT REAR WINDSCREEN	New	150.00	120.00
5	TO REMOVE AND REFIT REAR TAILGATE GLASS	New	150.00	100.00
6	TO REMOVE AND REFIT REAR FENDER QUARTER GLASS	New	150.00	60.00
7	TO REMOVE AND REFIT REAR SEATS, ROOF LINING, SPEAKER BOARD, GARNISH, FITTINGS AND ETC	New	150.00	60.00
8	TO REMOVE AND REFIT REAR EXHAUST PIPE	New	150.00	80.00
9	TO RUST PROOF AFFECTED AREAS	New	150.00	60.00
Gross Labour Cost (S\$)			4,980.00	3,110.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >