ASS. REC. BY: Kenneth

REF: FCL/2100426/Kr

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Kum Chew

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.

N/S	O/S

Bal. or Market Value: $93k

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 1-B-1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS DS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLE5430R Yr Regn: 05 16

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (A) : Wagon

Make: Volvo XC60 c.c 1969

Colour M. Brown A/C: Insured / Std / NI / NA

Sp.Reading 23685 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: YV1DZ40LDG 2847873

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: Winforce 235/60R18

R: Davanti

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	9 mm	R/Bal.	7 mm
L/Bal.	9 mm	L/Bal.	7 mm
D.O.A.	17/12/20	D.O.I.	11/1/2021

Survey held at ✓

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

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

Date / Time	Action / Instruction
/	Est not ready
3/2	C/Ly 85650

Date/Time, File Pass to? 1) _____

Date/Time, File Return to? 2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Report Format :

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

Survey Fee:	
Transportation: ___ $ x RS ___ SI	
Parts	
Others	
TOTAL	

KUM CHEW MOTOR WORKSHOP

160, SIN MING DRIVE #05-08
SIN MING AUTOCITY, SINGAPORE 575722.
Tel No. : 64536256/64563715 Fax No. : 64557754
E-Mail : kumchew1@singnet.com.sg
GST Reg.No. : M90367665T Buss. Reg. No. : 52865130K

M/S FIRST CAPITAL INSURANCE LTD
36. ROBINSON ROAD #16-01
CITY HOUSE, SINGAPORE 068877.
cwsmotorclaims@msfirstcapital.com.sg
Attention : Motor Claim Department
Contact : 62222311/65073848(C) 65073852 Fax No. : 62244174/65073849(C)

Not Authorised 11 Sep 8565d/- Primary After Paint 4 days

Estimate : ES005154

Date : 30/01/2021
Vehicle Num. : SLE 5430 R
Make/Model : VOLVO XC60
Chassis/Eng# :
Accident Date : 17/12/2020
Claim No. :
Reference : KC/TP5430/2101-01
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S$
		LIST ITEMS :		
1.	1 PC	FRT HEADLAMP NOZZLE COVER - R/H		48.00
2.	1 PC	FRT HEADLAMP NOZZLE ARM - R/H		98.00
3.	1 PC	FRT BUMPER 1624		1,682.00
4.	1 PC	FRT BUMPER SPONGE		180.00
5.	1 PC	FRT BUMPER REINFORCEMENT 1210		1,260.00
6.	1 PC	FRT BUMPER TOW COVER		70.00
7.	1 PC	FRT FENDER DUST COVER - RH		180.00
8.	18 PCS	FRT FENDER DUST COVER CLIPS	3.80	68.40
9.	1 PC	FOG LAMP		385.00
10.		POWER STEERING PUMP (CHECK) Oil leak 870.00		
11.	1 PC	HEADLAMP - R/H 2465.32		2,800.00
12.	1 PC	NOZZLE COVER BRACKET - R/H		85.00
13.	1 PC	NOZZLE COVER PLATE		40.00
14.	1 PC	NOZZLE COVER		7.00
15.	1 PC	REAR BUMPER RETAINER - R/H		78.00
		List TotalS$:		6,981.40
		10.00% Discount S$:		698.14
				6,283.26
		LABOUR :		300
		TO PULL, KNOCK ON ACCIDENT PORTION & CHANGE ABOVE PART.		550.00
		TO SPRAY & PAINT ON ACCIDENT PORTION.	400	600.00

CONTINUE / ...

LKK Auto Consultants hence notify
the Repairer of the following:
- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

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Date : 30/01/2021
Vehicle Num. : SLE 5430 R
Make/Model : VOLVO XC60
Chassis/Eng# :
Accident Date : 17/12/2020
Claim No. :
Reference : KC/TP5430/2101-01
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S$
		TO CHECK HEADLAMP FUNCTIONS.		60.00
		Labour Total S$:		1,210.00

SingDollars : Seven Thousand Four Hundred Ninety-Three & Cents Twenty-Six Only

Total S$: 7,493.26

KUM CHEW MOTOR WORKSHOP