ASS. REC. BY: Marcus REF: CS/SMR2	10/0866/Uuf3
ASSI	GNMENT
From: Date:	Veh No: 68B 68644 Yr Regn: 03/11/09
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 (M)
	The same of the sa
To Inspect Vehicle No: (733 696 Y U at Workshop m/s	Make: Leyota hiace c.c 29f? Colour A/C: Insured / Std / NI / NA
of	12 MW
Insured: SHB 5876S	Sp.Reading 3 6653/ T/Radio: Insured / Std / NI / NA
Policy No.	Elig/No:
Claims No. TAX/10/21/2016	C/No: JTFHT02°20004723(Gen. Cond Good / Fair / Poor / Burnt
2,0000.	Steering: Increer / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
Make Of Veri.	Modi : (Nij) / S/Rim / STD A/Rim or
	Tyre Size: F: 195 15
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
	TOYO/YOKO or Austone.
Bal. or Market Value: 4/8/4.	Front Rear
IDAC Accident Rport: Consistent?: Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: 2 days Res.: Yes or No	D.O.A. 8/10/2/ D.O.I. 13/10/2/
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	Reer of C
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	0011
coe until 31-10-2024 27A&?	
\$10/4 confirmed by \$1000 mg	% C.C.
	1 30367 . 2 repair days
(RED \$1779.50; 64%)	
APP 1 1 1 APP 1 APP 1	

Date/Time, File Pass to? : Preli. Report Days Of Repair: 2 Resurvey No. of Trip: 1 : Final Report 1) 15/10 TYPIST Survey Fee: Date/Time, File Return to? Transportation: Add Fee: : Site Insp (\$ 2)) __S + RS,__SI Interview (\$) Photos Report Format: TP Tech. Invs (\$) Others Lump Sum / 1.B.1: (\$ 1000 Weekend (\$ TOTAL



LIU'S BROTHER AUTO ENGINEERING WORKSHOP

Invoice/Ref No: GBB6964U211008

. 1 Kaki Bukit Avenue 6 #01-01 Auto Bay @ Kaki Bukit Singapore 417883		_
OB No: 53291793J . Tel: 6741-1730 / 731 . Email: liusbro@ymail.com	Estimate	_
		-

Customer 12-10-21 Date: Name: MS First Capital Insurance Limited GBB6964U Vehicle No: Address: Motor Claims Department Model/Make: Toyota Hiace 36 Robinson Road #16-01 Manual

Singapore 068877 City House Revised Original Item Ouotation / Ouotation / **Descriptions Of Parts** No. Cost Of Repair Estimation 816 365.10 1 Rear Rh Tail Lamp 376.50 2 Corner Panel 3 Corner Panel Bracket 1/1 31.50 Roor Bumper 496.40 4 Rev Bumper Clips 1 set 48.00 5 Ree' Bumper Bracket als 202.00 6 Rev "Corporate" Advertisement & Artwork Sticker 7 200.00 To check all wiring & electrical component for proper function 30.00 Labor for Panel Beating, Cut, Weld, Straighten & Replacing Parts Etcs 500.00 500.00 To putty & spray painting & including touch up paint on accident affected \$ To apply Rust Proofing, reseal tuff-coating treatment on accident area 30.00

Total Parts & Labour of estimate for damaged vehicle

\$ 2,779.50

Total amount in Lump Sum Basis for repaired vehicle

SDLS:

M/s Liu's Bro Auto Engrg Wks

Submit to insurance.

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:



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

12 Oct 2021 / 15:33:07

Receipt Date/Time :

12 Oct 2021 / 15:32:46

Tax Invoice/Receipt

Receipt No.: ITNET-00000-211012-002607

Previous Receipt No.:

Trevious receipt No				
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHB5576S As at 08 Oct 2021/18:30:00 Insurance Co: MS FIRST CAPITAL INSURANC 1 Insurance Enquiry - SHB5576S	EE LIMITED			
Enquiry Fee 20211012153103224489		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	426588XXXXXX1485	eNETS (Credit Card	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehic	uire PARF/COE Re	oate for Reg	istered \	Vehicle
--	------------------	--------------	-----------	----------------

Wner ID Type:	Company	
owner ID: Yehicle Details	196N	
éhicle No.:	GBB6964U	
ehicle to be Exported:	No	
ntended Deregistration Date:	12 Oct 2021	
ehicle Make:	TOYOTA	
/ehicle Model:	HIACE MANUAL	
Primary Colour:	White	
Manufacturing Year:	2009	
Engine No.:	1KD1948600	
Chassis No.:	JTFHT02P200047235	
Maximum Power Output:	•	
Open Market Value:	\$25,387.00	
Original Registration Date:	03 Nov 2009	
First Registration Date:	03 Nov 2009	
Fransfer Count:	1	
Actual ARF Paid: ntended PARF Rebate Details	\$1,270.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	•	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	31 Oct 2024	
COE Category:	C - Goods Vehicle & Bus	
COE Period(Years):	5	
PQP Paid:	\$12,921.00	
COE Rebate Amount:	\$7,884.00	
Total Rebate Amount: Message	\$7,884.00 only be for a 5-year period, subject to the statutory lifespan (if appl	

The information contained herein is correct as at 12 Oct 2021

OK

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Toyota Hiace 3.0A DX (COE till

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04/2024) Fuel Type: Diesel

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\$20.800

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Toyota Hiace 3.0M DX (COE till \$22,800

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