

JOHN LAW CHAMBERS LLC

Advocates & Solicitors

Commissioner For Oaths and Notary Public UEN/GST REG. NO. 201938836C

08 APR 2022

Your Ref: TO BE ADVISED Our Ref: JLC.2022.3330.PD(I) We Do Not Accept Service of Court Documents by Fax or Email.

WITHOUT PREJUDICE SAVE AS TO COSTS

MS FIRST CAPITAL INSURANCE LTD 36, ROBINSON ROAD, #16-01 CITY HOUSE SINGAPORE 068877. BY PDX (8002)

Attn: Motor Claims Department

Dear Sir/Madam,

CLAIMANT: XU ZHICHENG

ACCIDENT INVOLVING MOTOR VEHICLES NO. SMZ1976L AND SHB5681X ALONG PUNGGOL FIELD TOWARDS PUNGGOL ROAD ON 24.02.2022 AT ABOUT 1015 HOURS.

- We act for <u>XU ZHICHENG</u>, the owner of vehicle No. SMZ1976L involved in the abovementioned road accident, in his claim for damages of the consequential property losses and expenses incurred as a result of the said accident.
- We are instructed that the accident was caused solely or contributed by your / your authorized driver's / your insured's authorized driver's negligent driving, use and/or management of motor vehicle No. SHB5681X.
- 3. Copies of the following supporting documents are enclosed herewith for your perusal: -

a.	Singapore Accident Statement / Police Report
b.	GIA / LTA
C.	Survey Report and Invoice
d.	Rental Agreement and Invoice

 As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows.

i.	Cost of Repair	S\$ 39,000.00
ii.	Pre-Inspection Days – 3 Days	S\$ 360.00
iii.	Rental / Loss of Use	S\$ 3,000.00
iv.	Survey Report Fee	S\$ 1,559.00
٧.	LTA and GIA Search Fees	S\$ 7.49
vi.	Incidentals	S\$ 150.00
vii.	Cost Contribution Inclusive of GST (at this stage)	S\$ 1,070.00

Page 1 of 2

133 NEW BRIDGE ROAD, #17-09 CHINATOWN POINT, SINGAPORE 059413

Tel: +65 6592 6983 Fax: +65 6592 6985 Email: general@johnlawchambers.com



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Total:

S\$ 45,146.49

- To the Defendants, please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurers.
- The demand herein is in respect of our client's claim for damages pertaining to his motor vehicle and any settlement following or subsequent to this demand shall not prejudice our clients claims in respects of damages and consequential loss in relation to his personal injuries.
- 7. Please note that you or your insurers should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter.
- 8. Please note that if you have a counterclaim against our client arising out of the accident, you/your insured are required to send us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 6 weeks of your receipt of this letter.
- 9. To the Insurers, pursuant to the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), we hereby give your Insurers/you, MS FIRST CAPITAL INSURANCE LTD, notice that we have our client's instructions to commence court proceedings against you/your insured driver without further notice should you fail to acknowledge receipt of this letter within 14 days and/or fail to reply substantively to the same within 8 weeks and/or to preserve our client's claim from being time-barred.
- 10. You may acknowledge receipt of this letter by email to: irene@johnlawchambers.com

11. Please revert.

Yours faithfully

JOHN/LAW/CHAMBERS LLC

cc: Clients

Tel: +65 6592 6983 Fax: +65 6592 6985 Email: general@johnlawchambers.com

Enquire Vehicle's Insurance Particulars (As At 24 Feb 2022 / 10:15:00)

Vehicle No.:

Make Description/Model:

SHB5681X

TOYOTA / PRIUS 5DR HATCHBACK (AUTO)

Insurance Company Name:

MS FIRST CAPITAL INSURANCE LIMITED

Business Transaction Reference No.:

20220224132222714149

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

SF0122200001 / FORZA AUTOHAUS PTE LTD ENTRY DATE & TIME: 24/02/2022 17:47 (SGT) SUBMITTED BY: FOO MEI MEI VERSION: 1 (24/02/2022 17:47 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

3. 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.

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 Submission 24/02/2022 17:47 (SGT) Date of Accident 24/02/2022 10:15 (SGT) Exact Location of Accident Singapore Additional Location Information PUNGGOL FIELD TOWARDS PUNGGOL ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMZ1976L

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **XU ZHICHENG** NRIC No SXXXX575G **Email Address** alankohzc@gmail.com Mobile Phone No (Phone) +65-91445722 Alternative Phone No +65-91445722

VEHICLE PARTICULARS

Manufacturer Mercedes Model C180 Variant Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1595

INSURANCE COMPANY

Name of Insurance Company ERGO Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number DMPG21006569 Cover Note Number 28/05/2021-27/05/2022

DRIVER

Name of Driver XU ZHICHENG

Date Of Birth	21/03/1981
Occupation	Indoor
Date Of Driving Pass	14/09/2006
Driving experience	15 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91445722
Alt. Phone Number	+65-91445722
Email Address	alankohzc@gmail.com
Address	BLK288A PUNGGOL PLACE #15-803
Address complement	-₹
Postcode	821288
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	-
insurance company of other verticle owned by briver	•
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Cross Junction
Weather Conditions	drizzling
Road Surface	Wet

OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	W-
Was notice of intended Prosecution given?	No
	No
If yes, against whom?	•
CIRCUMSTANCES OF ACCIDENT	
refer to sketch plan draft and report	
ATTACHMENT(S)	
Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number	SHB5681X
Vehicle Manufacturer	S. 15500 17

Vehicle Registration Number	SHB56
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	¥
Vehicle Colour	2
Vehicle Category	Taxi
Name of Driver	# CT CT CT CT CT CT CT CT
Contact Number	
Addrass	

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	
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 Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any will 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 haurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested puriles
- 7. By the indigement 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 mude available aforesaid.
- 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 haurers' lawyers/law firms, the Monetary Authority of Singaporo 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;
- (ii) 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 select, 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 GA to their third party service providers or agents (including their lawyers/law firms), which may be sted outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Tribe

Sketch Plan

A = SK71976 L

B : SH\$5681x

(SMALO CAP)

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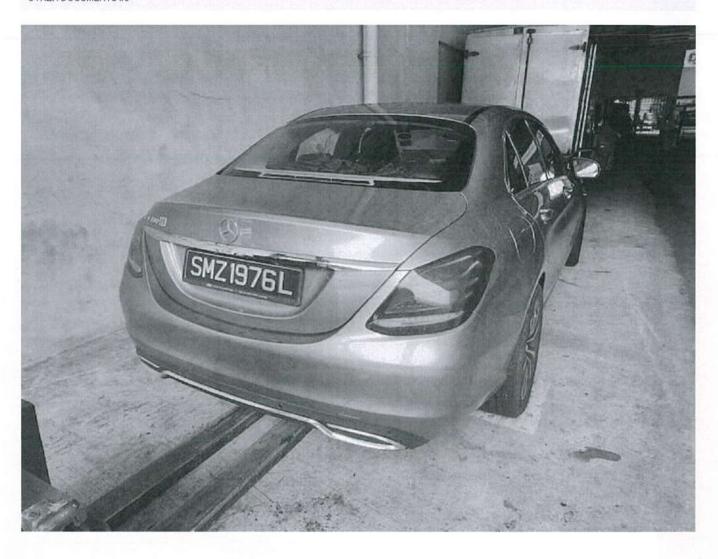
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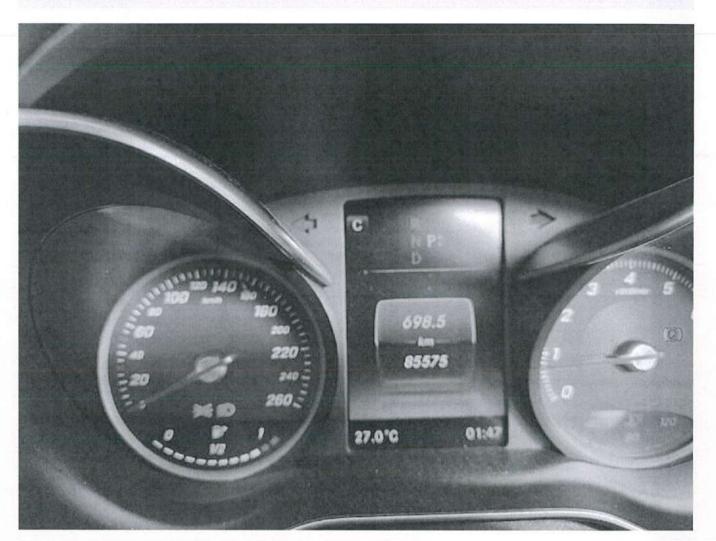












CARSMITH PRIVATE LIMITED

BARTLEY BIZ CENTRE
13 KAKI BUKIT ROAD 4 #01-20
Singapore 417807
+65 90910000
info@carsmith.biz

ADDRESS

SMZ1976L

DATE 30/03/2022

DATE SERVICE DESCRIPTION QTY RATE AMOUNT

LUMP SUM REPAIR AS RECOMMENDED & AGREED WITH SURVEYOR 1 39,000.00

39,000.00

TOTAL

\$\$39,000.00

Accepted By

Accepted Date

Company Registration No. 201910097E
Bank Account Details: DBS Bank: 07-2009261-9
All payments are transacted in Singapore dollars only.
All payments are non-refundable or exchangeable.
Thanks for your patronage.



TAX INVOICE

GST REG. NO.: 200106276D

Γ	DATE	INVOICE NO.
r	16/3/2022	A 44300

INVOICE TO.

XU ZHI CHENG C/O CARSMITH PRIVATE LIMITED 13 KAKI BUKIT ROAD 4 #01-20 BARTLEY BIZ CENTRE SINGAPORE 417807

	VHA NO.	DUE DATE	VEH NO.
	A 44300	16/3/2022	SNC 7371 B
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 24 FEBRUARY 2022 TO 11 MARCH 2022 YOUR REF: SMZ 1976 L	15	186.916	2,803.74
Account Name: BKW RENT A CAR PTE LTD Account No: 118-312-9991 Paynow UEN: 200106276D	Subtotal		\$2,803.74
Bank: UNITED OVERSEAS BANK LTD (UOB) Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG	GST @ 7%		\$196.26
All cheques must be made payable to BKW RENT A CAR PTE LTD. *Please indicate the invoice number and vehicle number in the reference.	TOTAL		\$3,000.00





BKW RENT A CAR PTE LTD

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6738 6666

ACRA No: 20-0106276-D GST Reg. No: 20-0106276-D

24 HOURS HELPLINE: 6223 1122

VEHICLE HIRING AGREEMENT

VHA NO: **A** 44300

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Name & Address of Emp		S(& Z	11284,	Daily \	CHARGES		\$
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Occupation	D-1		, 1	Weekly/Monthly	week @\$	Per week/Monthly	Doggo
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Name (as in I/C)	RIVER'S PARTICI	JLARS		OR No:			
NRIC/Passport No:			P	'etrol Level OUT E	1/4 /1/2	(A) SUB-TOTAL	13000
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9			Hire	r's Signature :		Additional Driver's	Signature
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WG APPRAISAL SERVICES

Blk 224B, Compassvalve Walk, #07-647. Singapore 542224 Email: Winsongkk@hotmail.com Contact: 9747 0063 Company Register No. 53326249J

Our Ref:

WG/TP/2022-69

Invoice No:

TP/CS/2022-69

Vehicle No:

SMZ1976L

Attn:

XU ZHICHENG

Company:

CARSMITH PRIVATE LIMITED

Address:

BARTLEY BIZ CENTRE, 13 KAKI BUKIT ROAD, #01-20. SINGAPORE 4178

Date 30 March 2022

Invoice

Surveyor Fee:

S\$1280

Re-inspection Fee:

S\$80

Transport:

S\$60

Photographs:

S\$139/- (@ \$1 per photo, total 139 photos)

Total:

S\$1559

Surveyor:

Signature:

Date:

WG APPRAISAL SERVICES

Blk 224B, Compassvalve Walk, #07-647. Singapore 542224 Email: winsongkk@hotmail.com Contact: 9747 0063 Company Register No. 53326249J

ACCIDENT DAMAGED VEHICLE INSPECTION REPORT

M/S: XU ZHICHENG

C/O CARSMITH PRIVATED LIMITED

BARTLEY BIZ CENTR, 13 KAKI BUKIT ROAD, #01-20

SINGAPORE 417807

Date

: 30 March 2022

: WG/TP/2022-69 Our Ref

REFERENCE PARTICULARS

Date of Accident : 24 February 2022

Type of Inspection : Third Party Claim

Date of Inspection : 24 February 2022

Date of Re-Inspn

: 01 March 2022

VEHICLE PARTICULARS

Registration No

: SMZ1976L

Engine No

: 27491030452015

Make

: MERCEDES BENZ : C180 AVANTGARDE (R17 LED) Chassis No Odometer

: 'WDD2050402R104494

Model Year

: 2015

Colour

: NA : Silver

CONDITION OF VEHICLE (STATIC CHECKS AT TIME OF INSPECTION ONLY)

Engine condition : Good

General Body Work : Good

Foot Brake

: Serviceable

Steering

: Serviceable

Hand Brake

: Serviceable

Lightings

: Serviceable

TYRE CONDITION (Remaining estimated life of tyre in mm)

Make

Size

Thread Balance

Front Near side

: Pirelli

225/55R17

5 mm

Front Off Side

Pirelli

225/55R17

5 mm

Rear Near Side Rear off Side

Pirelli : Pirelli 225/55R17 225/55R17

5 mm 5 mm

GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained damage at the front left portions..

For details, refer to assessment for repairs and photographs attached.

ASSESSMENT SUMMARY

Our assessment of the repair costs to pre-accident condition was \$\$39,000.00 nett at lump sum basis.(Subject to GST if applicable)

Under normal circumstances, estimated period required for repairs: Twelve (12) working days.

Enclosed One hundred and thirty-nine (139) photographs depicting damage to the vehicle.

Inspection conducted at: CARSMITH PRIVATED LIMITED

BARTLEY BIZ CENTR, 13 KAKI BUKIT ROAD, #01-20. SINGAPORE 417807

In accordance to your instruction, we have not authorise repairs and inspection was conducted strictly on a "WITHOUT PREJUDICE BASIS".

VEHICLE NO: SMZ1976L

MODEL : C180 AVANTGARDE (R17 LED)

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS

DESCRIPTION O	E PARTS AND N	ATURE OF REPAIRS

)	SPARE PARTS	QTY PC/SET	ASSESSED CONDITION		ORIGINAL OUOTATION	0	REVISE UOTATIO
) 	WHEEL HOUSE LH	1	COMPITION	S	1,044.00	S	
2	SIDE MEMBER LH	1	DENTED	S	556.00	\$	556.00
	STRUT LH	1	DENTED	S	834.00	\$	834.0
	FRONT CROSS MEMBER	1	DENTED	S	899.00	\$	899.0
	STIFFENING	i	DENTED	S	1,445.00	\$	1,445.0
	ABSORBER LH	1	DENTED	S	493.00	S	483.0
	FRONT HEADLAMP PANEL LH	1	DENTED	S	443.00	S	443.0
	FRONT FENDER LH	1	DENTED	S	894.00	S	894.0
	LH FRONT FENDER INNER SHIELD	i	CRACKED/DEFORMED	S	210.00	\$	210.0
	LH REAR FENDER INNER SHIELD	1	CRACKED/DEFORMED	S	193.00	\$	193.0
	FRONT BUMPER	1	CRACKED/DEFORMED	S	2,381.00	S	2,381.0
	FRONT BUMPER BRACKET LH	1	CRACKED	S	214.00	S	214.0
	FRONT BUMPER BRACKET RH	i	NECESSARY	S	214.00	S	214.0
	FRONT BUMPER RETAINER LH	1	CRACKED	S	157.00	S	157.0
	FRONT BUMPER RETAINER RH	1	NECESSARY	S	157.00	S	157.0
	FRONT BUMPER LOWER GRILLE	1	CRACKED	S	394.00	S	394.0
	FRONT BUMPER SIDE GRILLE LH	1	CRACKED	S	213.00	S	213.0
	FRONT BUMPER SIDE GRILLE RH	1	CRACKED	S	213.00	S	213.0
	FRONT BUMPER SIDE GRILLE CHROME	1	GRAZED	\$	446.00	\$	446.0
	COVER BUMPER FRONT	1	NOT NECESSARY	\$	95.00	S	-
	PDC SENSOR	6	MALFUNCTION	S	1,650.00	S	1,650.
	SENSOR WIRE HARNESS	1	MALFUNCTION	\$	743.00	\$	743.
	FRONT BUMPER INNER BRACKET	1	CRACKED	\$	309.00	\$	309.
	IMPACT ABSORBER	1	NOT NECESSARY	\$	201.00	S	-
		1	DENTED	S	2,122.00	\$	2,122.
	FRONT HOOD	1	BENT	\$	155.00	\$	155.
	HOOD HINGE LH HOOD HINGE RH	1	BENT	\$	155.00	\$	155.
	HOOD ACTUATOR LH	1	DEPLOY	\$	392.00	S	392.
		1	DEPLOY	S	392.00	\$	392.
	HOOD ACTUATOR RH	1	JAMMED	S	311.00	S	311.
	GAS PRESSURE STRUT LH	1	JAMMED	\$	311.00	S	311.
	GAS PRESSURE STRUT RH HOOD INSULATOR	1	DEFORMED	\$	133.00	5	133.
		1	NECESSARY	S	89.00	S	89.
	HOOD RUBBER	1	BENT	S	65.00	S	65.
	HOOD UPPER SAFETY CATCH	1		S	55.00	S	55.
	HOOD UPPER LATCH STRIKER	1	BENT	S	67.00	S	67.
	HOOD LOWER SAFETY CATCH	1	BENT	\$	103.00	S	103.
	HOOD EMBLEM	1	NECESSARY	\$	1,439.00	S	1,439.
	FRONT GRILLE ASSY	1	CRACKED	S	109.00	S	109.
	FRONT GRILLE EMBLEM	1	NECESSARY	\$	5,399.00	S	5,399.
	FRONT HEADLAMP LH	1	CRACKED	-	5,399.00	\$	5,399.
	FRONT HEADLAMP RH	1	CRACKED	\$ \$	1,611.00	S	1,611.
	AIRCON CONDENSER	1	BENT	\$	890.00	S	890.
	AIRCON FAN ASSY	1	MALFUNCTION	\$	310.00	5	310.
	AIRCON SUCTION PIPE	1	BENT			\$	244.
	AIRCON SUCTION HOSE	1	BENT	\$ \$	244.00	s S	384.
	AIRCON DISCHARGE HOSE	1	BENT		384.00	5	
	AIRCON LIQUID PIPE	1	BENT	\$	336.00		336. 342.
	AIRCON RECEIVER PIPE	1	BENT	S	342.00	\$	
	RADIATOR ASSY	1	PUNCTURED	S	1,939.00	S	1,539.
	RADIATOR TOP HOSE	1	NECESSARY	S	109.00	\$	109.
	RADIATOR HOSE BOTTOM	1	NECESSARY	S	98.00	\$	98.
	RADIATOR EXPANSION TANK	1	DEFORMED	S	273.00	S	273.
	AIR INTER COOLER	1	PUNCTURED	\$	942.00	S	942.
	AIR DUCT	1	CRACKED	\$	385.00	\$	385.
	AIR INTAKE HOSE	1	DEFORMED	S	109.00	S	109.

57	FRONT ENGINE UNDER COVER	1	CRACKED		\$	211.00	\$	211.00
58	RIM	1	GRAZED		\$	1,688.00	\$	1,688.00
59	FRONT SHOCK ABSORBER LH	1	BENT		S	1,023.00	S	1,023.00
60	ABSORBER TOP MOUNTING LH	1	NECESSARY		\$	132.00	S	132.00
61	ROD LH	1	BENT		\$	119.00	S	119.00
62	STEERING KNUCKLE LH	1	BENT		\$	782.00	\$	782.00
63	KNUCKLE BEARING LH	1	NECESSARY		\$	339.00	S	339.00
64	STRUT ROD LH	1	BENT		\$	590.00	5	590.00
65	CROSS STRUT LH	1	BENT		\$	899.00	\$	899.00
					\$	45,017.00	S	43,099.00
				Less 10%	\$	4,501.70	S	4,309.90
					\$	40,515.30	\$	38,789.10
B)	S/NETT ITEM				8	11751 12501	6901	
66	FRONT BUMPER CLIP	1 SET	NECESSARY		S	40.00	S	30.00
67	FRONT GRILLE CLIP	1 SET	NECESSARY		\$	30.00	\$	20.00
68	FRONT FENDER INNER SHIELD CLIP	1 SET	NECESSARY		S	40.00	S	30.00
69	FRONT NUMBER PLATE	1	BENT		S	100.00	S	90.00
70	COOLANT	1 BOT	NECESSARY		\$	80.00	S	70.00
					\$	290.00	\$	240.00
			Parts Total:		\$	40,805.30	\$	39,029.10
C)	LABOUR CHARGES & MISC							
71	CHECK FRONT WIRING AND LIGHTNING	SYSTEM			S	100.00	S	90.00
72	REMOVE, REFIT CONDENSER AND TOP U	PGAS			\$	200.00	S	180.00
73	REMOVE, REFIT RADIATOR AND TOP UP	COOLANT			\$	200.00	\$	180.00
74	DIAGNOIS CHECK AND CLEAR FAULT CO	DDE			S	150.00	\$	120.00
75	COMPUTERISED AND CHECK FRONT WH	EEL ALIGNN	MENT		\$	200.00	5	180.00
76	REMOVE AND REPLACE FRONT UNDERC	ARRIAGE P	ARTS		5	350.00	5	300.00
77	PANEL BEATING AND RENEW DAMAGE I	PARRTS ON	AFFECTED AREAS		S	1,800.00	S	1,600.00
78	SPRAY PAINTING ON AFFECTED AREAS				S	2,200.00	S	1,800.00
79	APPLY ANTO RUST ON AFFECTED AREAS	S			\$	120.00	\$	100.00
			Labour Total:		S	5,320.00	S	4,550.00
			Total Parts and Labour	re:	S	46,125.30	S	43,579.10
	FINAL LUMP SUM ADJUSTMENT						S	34,900.00
	PHALLOMI SUM ADJUSTMENT						1.595	,

POINT OF IMPACT

The impact was confined to the front portion of the vehicle.

The damages appeared to be consistent as per the accident report statement. Please refer the attached schedule and photographs for details.

ADJUSTMENT/RECOMMENDATIONS

We have thoroughly inspected each and every item on the repairer's estimates against the actual damaged found on the vehicle. We have listed the breakdown of our findings and recommendations as per assessment above.

CONCLUSION

The repairer has agreed to undertake repair the vehicle at a lump sum basis of \$\$39,000.00 nett corresponding to replacement of parts, spray painting and labour charges. We now revert for your decision on the above claim.

Yours faithfully WG APPRAISAL

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Winson Goh

Automotive Appraiser

PPRA







