ASS. REC. BY: Kenneth | REF: TV /

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s TSR

of 157K

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: $140K

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 03 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: WD 6313P Yr Regn: 12, 22

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or Concrete Mixer

Make: CAMC HN531 c.c 11813

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

Sp.Reading 61928 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LZ5N2D2S5XNB005151

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

Brake: In order / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: Roadone 315/80 R22.5

R: 11/10

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM / TOYO / YOKO or Roadone Roadone

Front		Rear	
R/Bal.	4 5 mm	R/Bal.	66 88 mm
L/Bal.	4 5 mm	L/Bal.	66 88 mm
D.O.A.	21/11/12	D.O.I.	26/4/2024

Survey held at ✓

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: $ - RS. ___ SI

Parking _____

Others _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

TOTAL _____

Report Format :

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

TSR AUTOMOTIVE PTE LTD
160, SIN MING DRIVE , SIN MING AUTOCITY # 06-15
SINGAPORE 575722

Date : 25 Nov 2024 — Not Withstand — QUOTATION - THIRD PARTY CLAIM

INCOME INSURANCE — C/Lap & Resurvey After Paint 3days

CLAIM : THIRD PARTY CLAIM

DATE ACCIDENT : 21 Nov 2024

VEH. No WD 6313 P / CAMC

ATTN : MOTOR CLAIM DEPARTMENT

INSURE : INCOME INSURANCE

QTY	ITEM	AMOUNT	
	SLF 6313 P		
1	FRONT BUMPER	$ 2,985.00	X
1	HEADLAMP LH	$ 1,485.00	✓
1	SIGNAL LAMP LH	$ 859.00	✓
1	FRONT BUMPER OUTER NET / COVER	$ 580.00	✓
1	STEP PANEL HOUSING LH	$ 850.00	✓
1	STEP PANEL TOP LH	$ 335.00	X
1	STEP PANEL CENTER LH	$ 335.00	✓
1	STEP PANEL BOTTOM LH	$ 335.00	✓
1	STEP PANEL LOWER SUPPORT	$ 1,650.00	X
	TOTAL PARTS :	$ 9,414.00	
	LESS 10%	$ 941.40	
	TOTAL LIST PARTS :	**$ 8,472.60**	
	TOTAL PARTS PRICE :	**$ 8,472.60**	

AMOUNT BRING FORWARD :	**$ 8,472.60**	
Labour charges	$ 1,000.00	500
To do anti rust	$ 120.00	X
To check wiring system	$ 120.00	200
To do spray painting on accident affected area	$ 1,000.00	550
TOTAL LABOUR :	**$ 2,240.00**	
GRAND TOTAL PARTS AND LABOUR :	**$ 10,712.60**	

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: