

(08/11/13) wel

ASS. REC. BY:

REF: CS/CT/24110594/Rgh3

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SMB3537J

at Workshop m/s Towel Trans

of Bullin Dr

Insured:

CTI

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:

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

7

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SMB3537J

Yr Regn:

2014, OCT

Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

ALEXANDRA DUNN ENVIRO

c.c. 8849

Colour

MULTI

AC: Insured / Std / NI / NA

Sp. Reading

675518

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

SF076URSENTL3467

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

305/70R225

R:

D/O

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

TOYO / YOKO or

FIRENZA

Front

Rear

R/Bal.

8

mm

R/Bal.

8/8

mm

L/Bal.

8

mm

L/Bal.

8/8

mm

D.O.A.

23/11/24

D.O.I.

29/11/24

Survey held at

BULLIN DR

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

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

Date / Time Action / Instruction

Rasul finalised final fig \$11541.18, 7 days (Red \$5190, 31%)

Date/Time, File Pass to?

☐

Prel. Report

1) 27/12 Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

7

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

B + RS \$

Photos

Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format: EZCLAIMS-TP

Comp Sum / L.B.I. (\$) 11541.18

ESTIMATED ACCIDENT REPAIR COST



TOWER TRANSIT

Co. / GST Reg No. 201419417K

ACCIDENT TIME REPORTED	13:20 HRS
ACCIDENT DATE	23-Nov-24
BUS CAPTAIN NAME	GOONASAKAREI S/O MARUTHIAPPAN
THIRD PARTY CLAIM AGAINST	China Taiping Insurance

BUS REGISTRATION NUMBER	SMB3537J
BUS TYPE (SD/DD)	DD
BUS ROUTE NO.	
BUS ADVERT (Y/N)	N

SECTION 1 : PARTS & CONSUMABLE ITEMS (MATERIAL COST)

NO.	Part or Item Description	Quantity	Total Cost
1	EXT PANEL RHS 4 <i>bf</i> ✓	1	\$ 1,075.32
2	EXT PANEL RHS 5 <i>bf</i> ✓	1	\$ 1,171.61
3	DOOR FUEL FILLER ACCESS <i>scr</i> ✓	1	\$ 1,478.03
4	UREA COWL FRAME <i>scr</i> ✓	1	\$ 515.02
5	SIKAFLEX BLACK <i>n</i> ✓	6	\$ 211.20
		9% GST	\$ 400.61
		PARTS TOTAL COST	\$ 4,851.78

SECTION 2 : ASSESSMENT / REPAIR / SPRAY PAINT (LABOUR COST)

LABOUR ITEM (PLEASE SPECIFY IF ITS ASSESSMENT, REPAIR OR SPRAY PAINT)	TOTAL COST
TO DISMANTLE & REPLACE :- • DISMANTLE AND REPLACE ITEM NO :1-5	\$ 3,250.00
TO REMOVE & INSTALL PARTS SO AS TO PERFORM REPAIR WORKS :- • NO 4 PANEL • NO 5 PANEL • NSRF WHEELARCH PANEL • NSRR WHEELARCH PANEL • ACCESS DOOR PANEL • OS SIDE PANEL • OSR LIGHT POD	3250 \$ 4,550.00
SPRAY PAINTING :- • NO 4 PANEL • NO 5 PANEL • NSRF WHEELARCH PANEL • NSRR WHEELARCH PANEL • ACCESS DOOR PANEL • OS SIDE PANEL • OSR LIGHT POD	3840 \$ 4,480.00
SPRAY PAINTING \$640 PER PANEL	9% GST \$ 1,105.20
LABOUR CHARGES \$650 PER DAY	LABOUR TOTAL COST \$ 13,385.20

ESTIMATED ACCIDENT REPAIR COST



TOWER TRANSIT

Co. / GST Reg No. 201419417K

SECTION 3 : RECOVERY OF ACCIDENT BUS (TOWING COST)

TOTAL TOWING COST	-
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SECTION 4 : NUMBER OF DAYS BUS IN WORKSHOP FOR SURVEY & REPAIRS

		DATE IN	23/Nov/2024
		DATE & TIME SURVEY	
		DATE OUT	
BUS TYPE (SD / DD)	DD	TOTAL NUMBER OF DAYS	8
LOSS OF USE COST		\$3,200.00	

SUMMARY	
SECTION NO.	COST
1	\$ 4,851.78
2	\$ 13,385.20
3	-
4	\$ 3,200.00
TOTAL	\$ 21,436.98

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:

Rasul
Hp 90012568
7 days
29/11/24
Reg 50 part