

ASS. REG. BY: Taufik

REF: U/G 124120420/Tnh3

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To inspect Vehicle No: _____
at Workshop m/s _____
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: \$25K
IDAC Accident Rpt: _____ Consistent? : Yes or No
GIA / PR Seer: _____ Consistent? : Yes or No
Est. Repairs: 2 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: SKZ5611L Yr Regn: 2014 01
Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: BMW 318i c.c. 1499
Colour: Black A/C: Insured / Std / NI / NA
Sp. Reading: 137892 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: WBA8E3L070NT59271
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modl: NI / S/Rim / STD A/Rim or
Tyre Size: F: 225/50R17
R: _____
BS / DUN / EXNOVA / GV / FS / LIZA / MIC / OHTSU / PR / SUMI /
TOYO / YOKO or
Front: _____ Rear: _____
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 2 mm
D.O.A. _____ D.O.I. 6/6/25
Survey held at Complete Vars
Des. of Damages: Frt / Rear / O/S / N/S / U/G / Rooftop or
The U/G / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Taufikh finalise lump sum \$1600 , 2 days.
	(red, \$3043.28, 65%)

Date/Time, File Pass to?

☐ : Prell. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

Report Format: _____

Lump Sum / I.B.L: ()



Liu Lu
315, Clementi Avenue 4, 10-141
Singapore 120315

Attention: Owner
Contact: 90040837

COMPLETE VMS PTE LTD

5 Soon Lee Street, #01-54, Pioneer Point, Singapore 627607
(Tel) 6555 6111 (Fax) 6554 0012 (Web) www.completevms.com.sg

The Premier One Stop Vehicle Accident Claims Centre

ESTIMATE

ES 012615

Date 5/20/2025
Vehicle Number SKZ5611L
Make / Model B.M.W. 318i SEDAN LED NAV
Engine Number F1951252B38B15A
Chassis Number WBA8E36070NT39271
Accident Date Dec 1, 2024
Policy Number 5147224767

Description	Qty	Unit Price	Amount
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Parts

List Items

Rear Bumper	1	S\$1,342.60	S\$1,275.47 <i>de</i>
Rear Bumper Moulding	1	S\$262.30	S\$249.19 <i>at</i>
Rear Bumper Tow Cover	1	S\$85.70	S\$81.42 <i>x</i>
Rear Bumper Reflector L/H	1	S\$257.00	S\$244.15 <i>x</i>
Rear Bumper Reflector R/H	1	S\$257.00	S\$244.15 <i>x</i>
Rear Bumper Sponge	1	S\$147.60	S\$140.22 <i>?</i>
Rear Bumper Reinforcement	1	S\$572.30	S\$543.69 <i>?</i>

Discount 5% applied \$2,778.28

Special Nett Items

Bumper Clip	10	S\$6.50	S\$65.00 <i>300</i>
			\$65.00

Labour

To Remove & Refit Damage Part To Facilitate Repair	1	S\$1,000.00	S\$1,000.00 <i>200</i>
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Spray Paint Damage Affect Area	1	S\$800.00	S\$800.00 <i>250</i>
			\$1,800.00

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 liability modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Total \$4,643.28

Pages

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This is only an estimate base on our preliminary inspection and does not cover additional parts and labour time which may be require after the work has begin