

ASS. REC. BY:

REF:

SPF 24080135/Kgh3

C

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____ 176 245E

Insured: _____

Policy No. _____

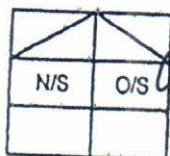
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: 31K

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 02 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: 11/27 Person Contacted: _____

Vehicle: IN / OUT

Veh No: SIFB 9027H Yr Regn: 11, 07

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

Truck / Trailer or _____ Wagon

Make: BMW X3 C.C. 2497

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

Sp. Reading: 219502 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBAPC 72070WC 60464

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

R: 235/50R18

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 4 mm

L/Bal. 5 mm L/Bal. 4 mm

D.O.A. 15/7/24 D.O.I. 20/1/2025

Survey held at _____

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

21/1/21 Rep @ 1350h. Calm (Red \$ 3161, 70%)

Date/Time, File Pass to?

Prell. Report

24/1/21 Rep

Final Report

Date/Time, File Return to?

2)

Report Format: 2P

Lump Sum / I.B.I. (\$) 1350

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: Site Insp (\$)

Interview (\$)

Tech Invs (\$)

Weekend (\$)

Survey Fee:

Transportation

S + RS. SI

Fees

Others

TOTAL

ABWIN SERVICE PTE LTD

176 SIN MING DRIVE

#01-11 SIN MING AUTOCARE, SINGAPORE 575721

Tel: 65179701 Fax: 65179704

Email: servicecentre@abwinm9.com Website: www.abwinm9.com

Company Reg. No: 201318685G GST Reg. No: 201318685G

ABWIN
Service Pte Ltd

M9 Automobile Pte Ltd

M9 International Pte Ltd

9691 0663

ESTIMATED COST: HQQ000999**TO : INCOME INSURANCE LIMITED**
ATTN : MOTOR CLAIM DEPARTMENT**SFB9027H****MOHAMED FAIROZ BIN MOHAMED RAHMAN**

CONTACT NO : 90456778

DATE	:	08-OCT-2024
MAKE	:	B.M.W.
MODEL	:	X3 2.5SI
CHASSIS NO	:	WBAPC72070WG60464
ENGINE NO	:	02276664N52B25AF
SERVICE ADVISOR	:	MIKAELA
PAGE	:	1 OF 1

QTY	DESCRIPTION	REPAIR AMOUNT (SGD)	SURVEYOR APP (SGD)
LIST ITEM			
1	SIDE MIRROR RH	1,258.00	
1	SIDE MIRROR COVER RH	356.00	X
1	SIDE MIRROR BRACKET RH	152.00	X
1	SIDE MIRROR GLASS RH	345.00	
	Sub Total	2,111.00	0.00

LABOUR

1	TO SPRAY PAINT ON AFFECTED AREAS	800.00	
1	TO DISMANTLE, REPLACE AND/OR REPAIR REVERSE SENSOR & TESTING	800.00	X
1	TO PANEL BEAT ON AFFECTED AREA	800.00	
	Sub Total	2,400.00	0.00

Not Authorized
Returning After Repair
2 day
L1Ry @ 1350h

SUB-TOTAL**GST - 9 %****TOTAL**

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

Supplier Item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

ABWIN SERVICE PTE LTD

Prepared By