

ASS. REC. BY:

REF:

CS/AWA17011487/Ricobob

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person):

Haw Lee Fong

of

AWA

Date/Time:

13062017 328pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLB 4086Z

Insured:

SKT 6129M

at Workshop m/s

Cycle & Carriage Automotive

Tel:

9181 9978

of

209 Pandan Garden

Policy No:

BVPPSB 0534 74 1600

Claim No:

NSV 1700714 / HLF

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

11062017

CA / REV / REP. / REV 24 HRS WP

H.O.D. Endorsement:

Date/Time:

13062017 335pm

Person Contacted:

Edwin

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓)

Estimate

SLB 4086Z - x

SKT 6129M - x

Suzuki

Pam

REF:

Y62K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SLB 4086Z

at Workshop m/s CRC

of PAMMOR LRON

Insured: ANA / up

Policy No. _____

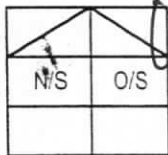
Claims No. _____

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: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: _____ 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: SLB 4086Z Yr Regn: _____

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

Truck / Trailer or

Make: MITSUBISHI ATTARANG 1.2 c.c. 1193

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

Sp. Reading: 107529 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MM BSTA 13A FH 018846

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: 185/55R15

R: _____

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

TOYO / YOKO or NEUTON

Front _____ Rear _____

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

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

D.O.A. 11/06/17 D.O.I. 14/06/17

Survey held at CRC (PH)

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

o/s frt

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

Date / Time Action / Instruction

8/4 Submit preli report. (Preli Sig & 4, 709, Check Items: \$282/-)

Date/Time. File Pass to?

☒ : Preli. Report☐ : Final Report

1)

Date/Time. File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____) S + RS _____ \$☐ : Interview (\$ _____) Photos☐ : Tech. Invs (\$ _____) Others☐ : Weekend (\$ _____)

TOTAL

200

Report Format : TP

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



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

ALLIED WORLD ASSURANCE COMPANY LTD

Ref : CS/AWA17011487/R1rb

(SINGAPORE BRANCH)
60 ANSON ROAD, #08-01 (9th FLOOR)
MAPLETREE ANSON
SINGAPORE 079914

Date : 13-06-2017



Code : AWA

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKT 6129M	Veh. Inspected	SLB 4086Z
Policy No.	BVPPSB0534741600	Coverage (\$)	0.00
Claim No.	NSV1700714/HLF	Excess (\$)	0.00
Assign From	HEW LEE FONG	Assign Date	13/06/2017

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

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5. General Information

Accident Date	11/06/2017	Inspection Date
Survey held at	CYCLE & CARRIAGE AUTOMOTIVE PTE LTD 209 PANDAN GARDENS SINGAPORE 609339	

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

Catherine Chong (LKK Auto)

From: Hew, LeeFong <LeeFong.Hew@awac.com> on behalf of Motorsurvey <Motorsurvey@awac.com>
Sent: Tuesday, 13 June, 2017 3:28 PM
To: SUR (sur@lkkauto.com)
Cc: LKK (assignments@lkkauto.com); edwin.caina@cyclecarriage.com.sg
Subject: TP Survey assignment for SLB 4086Z DOA: 11.06.2017 Our ref: NSV1700714/HLF

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us do have consensus in the appointment of **Mr Mohamad Taufikh**, as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	SLB 4086 Z		
Insured Vehicle	:	SKT 6129 M		
Policy Number	:	BVPPSB0534741600		
Name of Workshop	:	Cycle & Carriage Automotive Pte Ltd		
Contact Number	:	6568 4501		
Person to Contact	:	Edwin Caina		
Estimated Cost of repairs	:	\$ 7,877.34		

Regards,
Claims Division

Copy to Cycle & Carriage Automotive Pte Ltd via Email

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9205225G

Name YAP KAI FENG

Birth Date: 17 Feb 1992

Issue Date: 12 Jan 2015

002384830A

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9205225G

Name YAP KAI FENG

叶 凯 丰

Race CHINESE

Date of birth 17-02-1992 Sex M

Country of birth SINGAPORE

4002984

FOR C&C USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

EFFECTIVE DATE 12 Jan 2015

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

NP 428A

Licence No: S9205225G

FOR C&C USE ONLY

4002984

NRIC No: S9205225G

Date of issue 15-02-2007

APT BLK 524 ANG MO KIO AVENUE 5 #02-4158
SINGAPORE 560524

NRIC No: S9205225G Date: 15/05/2014

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
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 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 Report	12/06/2017 11:39
Date Of Accident	11/06/2017 09:45
Exact Location Of Accident	SENTOSA C ROUNDABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB4086Z
Insured/Policyholder	
Name Of Registered Owner	LION CITY RENTALS PTE LTD
Co Reg No	201504621K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83887675
Alternative Phone No	OFFICE-83887675

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 (A)
Exact Purpose for which vehicle was being used at time of accident	SMOVE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	

Driver

Name of Driver	YAP KAI FENG
NRIC No	S9205225G
Date Of Birth	17/02/1992
Occupation	OUTDOOR
Date Of Driving Pass	12/01/2015
Driving Experience	2 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83887675
Fax Number	
Contact Number	
EMail Address	KAIFENG2307@GMAIL.COM

Address	BLK 524 ANG MO KIO AVE 5 #02-4156
Postcode	560524
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE- SAME DIRECTION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	4

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKT6129M
Vehicle Make/Model/Colour	SUBARU FORESTER BLACK
Details Of Properties	
Name of Driver	WILSON MATTEW DAVID
NRIC/Passport Number	
Contact Number	91384758
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	SIDE COLLISION MARK (PASSENGER SEAT)
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful 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 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.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, 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 Insurers' lawyers/law firms, the Monetary Authority of Singapore 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;

(iii) 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 collect, 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 GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



[Signature]



[Signature]

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

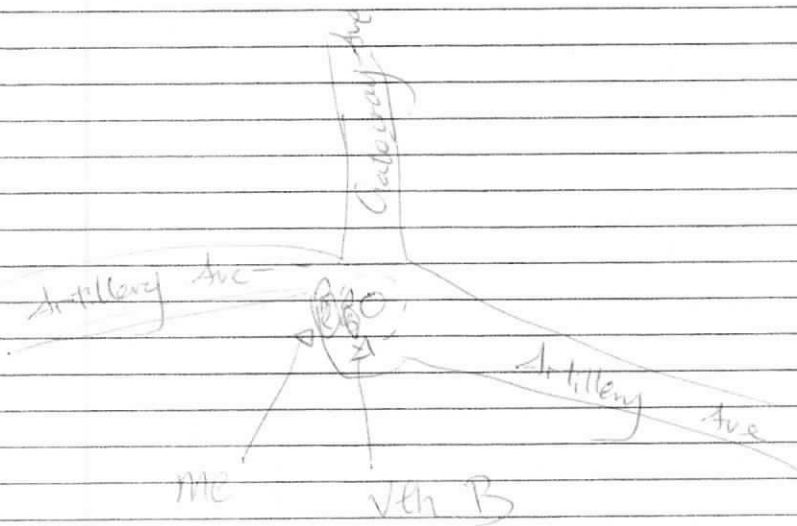
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

11/06/17, About 9:45 - 10:00am I was leaving
 Sentosa toward city, Artillery Ave Roundabout. I was at
 the most outer lane of the Roundabout & vehicle B, SKT
 6129M, was at the inner Roundabout. He cut through into my
 lane & turn left, when I was at the outer lane going
 towards Parkway Ave (city). And he hit onto my vehicle Right
 front. He insist that my lane only turn left, no going straight
 & blaming me hitting onto his vehicle. Sentosa officer (Ranger)
 came & explain to him about the rule of Roundabout & he told me
 that there is CCTV footage. So I wanted to Request the CCTV footage.
 As evidence of vehicle B is in the fault to clear my innocent



Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
 Time

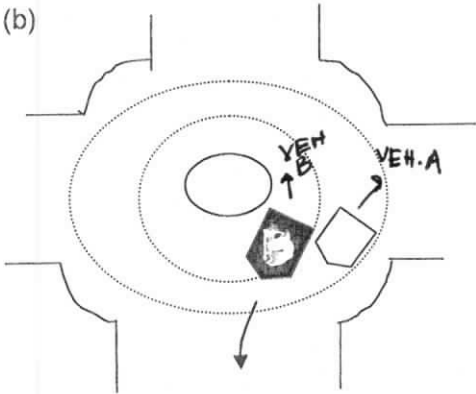
[Signature]

Driver's Signature (If driver is not the policyholder) / Date
 & Time



[Signature]

Witnessed by Reporting Centre
 Personnel

13.	(b)		<p>Vehicle X –Exiting Vehicle Y – Moving along</p> <p>Reason: Vehicle exiting should do it at the outer lane</p>	100%	0%
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CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED. PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056

MITSUBISHI
MOTORS

Co Reg No : 197701469G

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Lion City Rentals Pte Ltd	Cust No/Name KL000023/Lion City Rentals Pte Ltd
60 Anson Road	Reg No/Reg Date SLB4086Z / 06/04/201
Mapletree Anson Level 11-01	Date In/Mileage / 107529
Singapore 079914	Chassis No MMBSTA13AFH018846
Contact No Mobile: 67420984	Engine No 3A92UCT8959
	Make/Model MIT/ATTRAGE 1.2 CVT MIVEC
	Colour/Trim T06 / BK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
CSM00004	Cash	12/06/2017/ 15:05	QUE	261 / Edwin Caina	63234
Description of Goods / Services		Qty	Unit Price	Disc%	Amount
E PNT88000	RENEW & RE-ALIGN ACCIDENT DAMAGED PORTION: RENEW RHF FENDER & FRT BUMPER				1100 2200.00
E PNT98000	RESpray FRT BUMPER , RHF FENDER , BONNET & RH WINGMIRROR				920 1680.00
M SUNDRY	RENEW RHF SPORT RIM & TRANSFER TYRE				30 50.00
A 54900099	CHECK WIRING & ADJUST HEADLAMP AIM				30 50.00
A 54900099	CONDUCT DIAGNOSTIC CHECK ON VEHICLE SYSTEM				200.00
A WHEELALIGNMENTBP	To Conduct Computerize Full Wheel Alignment				120.00
M SUNDRY	APPLY BODY SEALANT & ANTI CORROSION ON AFFECTED AREAS				80 100.00
M SUNDRY	SUNDRIES				30.00
M HEADLAMP ASSY,RH		1.00	644.00	00.00	CRA 644.00
M FENDER,FR RH		1.00	451.00	00.00	R 451.00
M FACE,FR BUMPER		1.00	686.00	00.00	VB 686.00
M BRACKET,FR BUMPER,RH		1.00	13.00	00.00	na 13.00
M GARNISH,FR BUMPER,RH		1.00	124.00	00.00	scr 124.00
M LAMP ASSY,FOG,FR LH RH		1.00	282.00	00.00	? 282.00
M WHEEL,DISC		1.00	732.00	00.00	scr 732.00
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • 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 </div> <div style="margin-top: 10px;"> <p>Confirm & accepted by</p> <p>Acknowledged by Repairer</p> <p>Signature:</p> <p>Date:</p> </div>					
<p>7% GST on</p> <p>Nett</p> <p>Total Payable</p>					<p>7,362.00</p> <p>515.34</p> <p>7,877.34</p>
Authorized signatory and company stamp					

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
ALLIED WORLD ASSURANCE COMPANY LTD		Ref : CS/AWA17011487/R1cbe2		
(SINGAPORE BRANCH) 60 ANSON ROAD ,#08-01 (9th FLOOR) MAPLETREE ANSON SINGAPORE 079914		Date : 09-04-2019		
Code : AWA				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SKT 6129M	Veh. Inspected	SLB 4086Z	
Policy No.	BVPPSB0534741600	Coverage (\$)	0.00	
Claim No.	NSV1700714/HLF	Excess (\$)	0.00	
Assign From	HEW LEE FONG	Assign Date	13/06/2017	
2. Vehicle Particulars & Condition				
Make & Model	MITSUBISHI ATTRAGE 1.2	c.c	1193	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.	MMBSTA13AFH018846	Colour	BLUE	
Odometer	107529	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	185/55 R15	NEUTON	5 mm	
L/H Front Tyre	185/55 R15	NEUTON	5 mm	
R/H Rear Tyre	185/55 R15	NEUTON	5 mm	
L/H Rear Tyre	185/55 R15	NEUTON	5 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	11/06/2017	Inspection Date	14/06/2017	
Survey held at	CYCLE & CARRIAGE AUTOMOTIVE PTE LTD 209 PANDAN GARDENS SINGAPORE 609339			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLB 4086Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	SUNDRIES (SN)	NECESSARY	30.00	30.00
1	HEADLAMP ASSY, RH (SN)	CRACKED	644.00	644.00
1	FENDER, FR RH (SN)	TO REPAIR SEE LABOUR	451.00	-
1	FACE, FR BUMPER (SN)	DEFORMED	686.00	686.00
1	BRACKET, FR BUMPER, RH (SN)	NECESSARY	13.00	13.00
1	GARNISH, FR BUMPER, RH (SN)	SCRATCHED	124.00	124.00
1	LAMP ASSY, FOG, FR RH (SN)	* CHECK	282.00	-
1	WHEEL, DISC (SN)	SCRATCHED	732.00	732.00
			2,962.00	2,229.00
	<u>LABOUR</u>			
	RENEW & RE-ALIGN ACCIDENT DAMAGED PORTION : RENEW RHF FENDER & FRT BUMPER. INCLUSIVE OF THE REPAIR OF FENDER, FR RH.		2,200.00	1,100.00
	RESPRAY FRT BUMPER, RHF FENDER, BONNET & RH WINGMIRROR.		1,680.00	920.00
	RENEW RHF SPORT RIM & TRANSFER TYRE.		50.00	30.00
	CHECK WIRING & ADJUST HEADLAMP AIM.		50.00	30.00
	CONDUCT DIAGNOSTIC CHECK ON VEHICLE SYSTEM.		200.00	200.00
	TO CONDUCT COMPUTERIZE FULL WHEEL ALIGNMENT.		120.00	120.00
	APPLY BODY SEALANT & ANTI CORROSION ON AFFECTED AREAS.		100.00	80.00
			4,400.00	2,480.00
	GRAND TOTAL		7,362.00	4,709.00
	RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE) (EXCLUDE CHECK ITEMS S\$282.00 NETT)			4,709.00

Report Ref No. CS/AWA17011487/R1cbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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