Surveyor - HC	REF: CS/EGI17020359/Atbn2 Special Instruction: ASSIGNMENT (Office)
From (Person): Ye	U Pei Li of EGI Date/Time: 24/10/17 € 3-15pm
Estimated Cost:	Bill to:
OD / RP WS / TP R	ES / OD RES / EVA / INV / MV / CS
To Inspect Vehicle No	
at Workshop m/s	Modern Artamortica Til C712 1122
of 51K30231	4 ubi Rd 1 # 01-61
Policy No:	Claim No: DSMCV1702517
Sum Insured:	Excess:
Make of Veh:	D.O.A 20/10/2017
(Client's Record)	20/10/12/01
	25/10/17 (5) ATTER 10 AM
CA / REV / REP.	/ REV 24 HRS up' 25/10/17 O after 10 am H.O.D. Endorsement
CA / REV / REP. Date/Time: 24 101	
Date/Time: 24 1011	784 19 pm Person Contacted: Grace chin Vehicle IN OUT
Date/Time Action	78419pm Person Contacted: Grace Chin Vehicle IN OUT
Date/Time Action	78419pm Person Contacted: Grace Chin Vehicle IN OUT 1/Instruction () Estimate V9360C - (5/EGI/9006051/Ktbn2-D-0-A 227/03/2017
Date/Time Action	78419pm Person Contacted: Grace Chin Vehicle IN OUT
Date/Time Action	78419pm Person Contacted: Grace Chin Vehicle IN OUT) 1/Instruction () Estimate V9360C - (5/EGI/900605)/Ktbn2-D-0-A 227/03/2017



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

ERG	O INSURANCE P	TE LTD	Ref : CS/EGI170203	359/Atb	
#04-	MASEK BOULEVA		Date: 24-10-2017		
TO 10 10 10 10 10 10 10 10 10 10 10 10 10			Code: EGI		
1.		Policy Particula	rs :- THIRD PARTY CLA	IM	
	Insured Veh.	GT 5393U	Veh. Inspected	SGV 9360C	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	DSMCV1702517	Excess (\$)	0.00	
	Assign From	YEE PEI LI	Assign Date	24/10/2017	
2.		Vehicle Pa	rticulars & Condition		
	Make & Model	***************************************	c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
	Chassis No.		Colour		
	Odometer -		Steering		
	Brakes		Modification		
	General				
3.		Con	ditions 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.		Descri	ption of Damages		
5.	Engine No.	Gen	eral Information		
	Accident Date	20/10/2017	Inspection Date	de la companya de la	
	Survey held at	MODERN AUTOMOTIVE PT	ELTD		
		BLK 3023A UBI ROAD 1 #01-61 SINGAPORE 408717			
5a.		144.	Remarks	market state of the state of th	
	A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

Nivitha (LKK Auto)

From:

Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>

Sent:

Tuesday, 24 October, 2017 3:15 PM

To:

'admin-d@lkkauto.com'

Subject:

OI: GT5393U / TP: SGV9360C/LKK / DOA: 20.10.2017 (DSMCV1702517)

Attachments:

GT5393U - SAS.pdf; SGV9360C - SAS.pdf; SGV9360C - ESTIMATE.pdf; SGV9360C -

PRS FORM.pdf

Dear Catherine,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company **LKK AUTO CONSULTANTS PTE LTD** to be the "Single Joint Expert".

Please assist to conduct this survey from MODERN AUTOMOTIVE PTE LTD,

ADDRESS

: BLOCK 3023A UBI ROAD 1

#01-61

SINGAPORE 408717

PERSON TO CONTACT

GRACE CHIN @ 6748 4422

ERGO OFFICER-IN-CHARGE

: STEVE LIM

Note: To survey on without prejudice basis. Obtain estimate and advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.

Please fill up the necessary on ERGO PRS Form from workshop and return to us together on your update of the survey status via Survey.Report@ergo.com.sg.

Attached are insured and Third Party's SAS (note: reports not to be released to any Third Party). No estimate was provided.

Kindly acknowledge receipt of this email.

Thank you.

Best Regards
Yee Pei Li
Claims Assistant (Motor)
ERGO Insurance Pte. Ltd.
5 Temasek Boulevard
#04-01 Suntec Tower Five
Singapore 038985
DID: 65 6829 9194
Fax: 65 6829 9247
Website: www.ergo.com.sg



Have you tried our new travel insurance product yet?

TravelProtect comes with comprehensive benefits at some of the most affordable prices available in the market.

ERGO TravelProtect

your Global Safety Net

TraveProtectis underwritten by ERGO knisearce Phy. Ltd.



ERGO

Date:	24.10.20	017		Sent via Fax	
Our Reference:	DSMCV1	1702517/SE/pl			1.5
Your Reference:	SGV 936	ioc		or	
	-			Email	
To:	MODE	RN AUTOMOTIVE P	TE LTD		chin@modernautomotive.com.sg
Pre-Repair Su	urvey (PRS) Acknowledgement			
Vehicle For Insp	ection:	SGV 9360C			
nsured's Vehic	e:	GT 5393U			
Date Of Acciden	nt:	20.10.2017			
We acknowledg	ge receipt of	your request for PRS an:	23.10.201	17	
n compliance v	with "State (Courts Practice Directions	Amendment No	1 of 2016" do	relact on account from
				7.1 01 2016 , 00	
ne list below a	nd indicate	your selection in the box	marked *.		* LKK
AIS FTA	- Maria Control Control	e Inspection Services Pte Ltd			nsultants Pte Ltd
IAS		Consultancy Pte Ltd raisal Service	LKK	The state of the s	sultants Pte Ltd
JPK	JP Knights P		PS VAC	Priority Servic	es
	- Sandarias I	14.000	YAC	VICOIII Eta	
Your reque	est for inspec	ition does not have your clie	ent's complete GIA	report, kindly forw	vard a copy.
Your reque	est for inspec wiedge your		ent's complete GIA at, we will assess &	report, kindly forw	vard a copy.
Your reque	est for inspec wiedge your i ed's driver ha	tion does not have your clie interest for direct settlemen	ent's complete GIA at, we will assess &	report, kindly forw	vard a copy.
Your reque We acknow	est for inspec wiedge your i ed's driver ha	ction does not have your clie interest for direct settlemen s not reported the accident	ent's complete GIA at, we will assess &	report, kindly forw	vard a copy.
Vour reque We acknow Our Insure V Others:	est for inspec wiedge your i ed's driver ha	ction does not have your clie interest for direct settlemen s not reported the accident	ent's complete GIA at, we will assess &	report, kindly forw	vard a copy. receipt of estimate.
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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 witholding 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 20/10/2017 15:13

Date Of Accident 20/10/2017 08:55

Exact Location Of Accident SIMS DRIVE EXIT TO ALJUNIED ROAD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGV9360C

Insured/Policyholder

Name Of Registered Owner YANG KIM HOONG

NRIC No S7985453J

Email Address HONDAFIT9485@GMAIL.COM

Mobile Phone No (LOCAL) +65-93898969

Alternative Phone No OFFICE-93898969

Vehicle Particulars

Manufacturer HONDA

Model STREAM-1.8 (A)

Exact Purpose for which vehicle was being used at

time of accident

TO WORK

Are you claiming under your own insurance policy

for repair to your vehicle?

0.2153

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

LONPAC INSURANCE BHD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

Z17VP05014918

Cover Note Number

Driver

Name of Driver YANG KIM HOONG

 NRIC No
 \$7985453J

 Date Of Birth
 28/07/1979

 Occupation
 INDOOR

 Date Of Driving Pass
 01/01/2007

Driving Experience 10 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93898969

Fax Number

Contact Number OFFICE-93898969

EMail Address HONDAFIT9485@GMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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)

2

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

While I was driving along Sims Drive turning to Aljunied Road . I stop to give way to on coming vehicle. Suddenly vehicle no. GT5393U behind of me unable to stop in-time and knock onto my vehicle rear portion.

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

GT5393U

Vehicle Make/Model/Colour

HYUNDAI

Details Of Properties

Name of Driver

TAN BEE HUAT

NRIC/Passport Number

Contact Number

98971779

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

STATISH FLAM

Armol Soud

A . SH V 9360C

D. GT 53934

Sins

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

while I was driving along Sims drive turning to Aljunie Road. I stop to give way to oncoming vehicle Suddently vehicle No. Good 9753934 behade of me unable to stop in time and knock onto my rear portion.
of me unable to stop in time and knock onto my rear portion.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

A 1411hrs 20/10/17

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name:

NRIC/FIN NO .: 20/10/2017

IMPORTANT NOTICE

- Places repeat correctly the extrans of the accordent to specific the chains provide.
- The Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any wilful misreprisentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

poliphia Hilly

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .: 2 [10/17

MODERN AUTOMOTIVE PTE LTD BLK 3023A UBI ROAD 1 # 01-61 SINGAPORE 408717

Tel: 6748 4422/ 6745 4422 Fax: 6747-6720 REG NO 200501102H

			Quotation
Ergo Insurance Pte Ltd		DATE	: 25.10.2017
5 Temasek Boulevard		VEH NO	: SGV9360C
#04-01 Suntec Tower Five	Den se	MODEL	: Honda Stream
Singapore 038985		DOA	: 20.10.2017
Tel: 6829 - 9170		YR REF	: GT5393U

Fax: 6829 - 9247

Attn: Motor Claim Dept

(PIs arrange vehicle survey & check liability)

RE: ESTIMATE FOR ACCIDENT REPAIR SGV9360C (HONDA STREAM)

Item	Description	_ Qty	Amt
NO	LISTITEMS		
1	Honda Logo Not NIL	1	30.80 /
2	Stream Emblem , yeu	1	35.80
3	RSZ Emblem	1	38.80
4	Floor Panel Ton Board AV 1	2	533.00
6	Rear Fender Inner Trim Board LH Dela-d	2	577.20 000.60
7	Rear Fender Inner Trim Board Clips	1 set	60.00 30
8	Spare Tyre Carrier 8et	1	285.30 /
9	Rear Exhaust Pipe Sut	1	689.30
10	Rear Exhaust Mounting	1	45.00 ×
11	Rear Bumper Deforce	1	665.40
12	Rear Bumper Clips	1 set	80.00-30
13	Pear Rumper Side Holder	2	51.00
14	Rear Bumper Tow Cover	1	28.50
15	Rear Bumper Lower Bracket But	2	65.00
16	Rear End Panel Deuted	1	328.90 /
17		1	182.30
18	Rear End Panel Inner Member Rear End Panel Top Garnish	1	168.40
19	Tail Lamp Ut	2	677.60
20	Tailgate Devled	1	903.20
21	Tailgate Lock &	1	198.10
22	Tailgate Weatherstripe Cut	1	121.60
23	Tailgate Damper Not M	2	293.40
24	Tailgate Inner Trim Board De Tomed	1	285.40
25	Tailgate Inner Trim Board Clips ~	1 set	30.00 /
26	Tailgate Outer Garnish Not ~	1	184.50
27	Tailgate Glass Moulding HM	1	98.20

520140

6,656.70

RE: ESTIMATE FOR ACCIDENT REPAIR SGV9360C (HONDA STREAM)

		Less 20%		(1,331.34)		
			\$	5,325.36		
	S/NET ITEMS					
1	Tailgate Glass Sealant	*¶3		60.00		
2	Rear Exhaust Chrome Pipe Book	1		150.00 100		
3	Rear Number Plate 22	1		30.00 ×		
4	Rear Number Plate Holder	440 1		30.00		
5	Reverse Sensor Dog d	1		280-00 220		
6	Rear End Panel Scalant	1		60.00		
			s	610.00		
		Total Parts	\$	5,935.36		
	LABOUR CHARGE					
1	To knocking & pull out rear portion & r	enew above parts	s	1,200.00 8v		
2	To putty & spray up paint works		\$	1,000,00 800		
3	To check wiring system		\$	50.00 30		
4	To underseal		\$	150.00 60		
5	To remove reverse sensor	2,00	\$	50.00 60 150.00 60		
3	To remove upholstery		\$	150.00 80		
7	To remove taligate glass		s	180.00 /20 150.00 80		
8	To transfer tailgate fillings		\$	150.00 80		
9	To remove exhaust pipe		\$	150:00 80		
			\$	3,130.00		
		Grand Total	\$	9,065.36		

GST Will be reflected in the final bills

NOTE: -

PLEASE INFORM US WITHIN 14 DAYS, FROM THE DATE OF THIS LETTER, IN

THE LEVENTO THAT THE OWNER/DRIVER IS IN BREACH OF ITS POLICY

WITH YOUR GOMPANY, FAILING WHICH WIE SHALL HOLD YOUR COMPANY LIABLE

FOR ALL COSTS OF REPAIRS, LOSS OF USE AND ISTORAGE.

To display damaged part(s) during resurvey

Parts prices ar. 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:



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 Int	ernationale Des Experts En Autom	obile
ERGO INSURANCE F	TE LTD	Ref : CS/EGI1702035	59/Atbn2
5 TEMASEK BOULEV #04-01 SUNTEC TOV SINGAPORE 038985		Date : 29-11-2017	
	Policy Partic	ulars :- THIRD PARTY CLAI	M
Insured Veh.	GT 5393U	Veh. Inspected	SGV 9360C
Policy No.		Coverage (\$)	0.00
Claim No.	DSMCV1702517	Excess (\$)	0.00
Assign From	YEE PEI LI	Assign Date	24/10/2017
2.	Vehicle	Particulars & Condition	
Make & Model	HONDA STREAM	c.c	1799
Engine No.	HIDDEN	Year of Reg.	2007
Chassis No.	RN61034516	Colour	BLACK
Odometer	140083	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3.	C	onditions of Tyres	
	Size	Make	Balance
R/H Front Tyre	215/50 R17	MAXXIS	6 mm
L/H Front Tyre	215/50 R17	MAXXIS	6 mm
R/H Rear Tyre	215/50 R17	MAXXIS	6 mm
L/H Rear Tyre	215/50 R17	MAXXIS	6 mm
4.	110.000	scription of Damages	THE SHEW STATES
THE VEHICLE S	USTAINED DAMAGES AT T DETAILS.	HE REAR PORTION.	
5.		General Information	是是在1500mm (March
Accident Date	20/10/2017	Inspection Date	25/10/2017
Survey held at	MODERN AUTOMOTIVE	PTE LTD	
	BLK 3023A UBI ROAD 1 #01-61 SINGAPORE 408717		
5a.		Remarks	A CONTRACTOR OF THE PARTY OF TH
A)THE INSPECT B)IN ACCORDA	ION WAS CONDUCTED ON NCE TO YOUR INSTRUCTION	N A"WITHOUT PREJUDICE" BAS ONS, WE HAVE NOT AUTHORIS	SIS. SED REPAIRS.
5b.	Es	timate Days of Repair	
ESTIMATED NO	RMAL PERIOD FOR REPAI	R: 6 Working Day	ys



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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGV 9360C

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS		3	
1	HONDA LOGO	NOT NECESSARY	30.80	87
1	STREAM EMBLEM	NECESSARY	35.80	35.80
1	RSZ EMBLEM	NECESSARY	38.80	38.80
2	FLOOR PANEL TOP BOARD	NOT NECESSARY	533.00	8-
2	REAR FENDER INNER TRIM BOARD	N/S DEFORMED	577.20	288.60
1	SET REAR FENDER INNER TRIM BOARD CLIPS	NECESSARY	60.00	30.00
1	SPARE TYRE CARRIER	BENT	285.30	285.30
1	REAR EXHAUST PIPE	BENT	689.30	689.30
1	REAR EXHAUST MOUNTING	NOT NECESSARY	45.00	83
1	REAR BUMPER	DEFORMED	665.40	665.40
1	SET REAR BUMPER CLIPS	NECESSARY	80.00	30.00
2	REAR BUMPER SIDE HOLDER	NECESSARY	51.00	51.00
1	REAR BUMPER TOW COVER	DEFORMED	28.50	28.50
2	REAR BUMPER LOWER BRACKET	BENT	65.00	65.00
1	REAR END PANEL	DENTED	328.90	328.90
1	REAR END PANEL INNER MEMBER	BENT	182.30	182.30
1	REAR END PANEL TOP GARNISH	DEFORMED	168.40	168.40
2	TAIL LAMP	сит	677.60	677.60
1	TAILGATE	DENTED	903.20	903.20
1	TAILGATE LOCK	DAMAGED	198.10	198.10
1	TAILGATE WEATHERSTRIPE	сит	121.60	121.60
2	TAILGATE DAMPER	NOT NECESSARY	293.40	
1	TAILGATE INNER TRIM BOARD	DEFORMED	285.40	285.40
1	SET TAILGATE INNER TRIM BOARD CLIPS	NECESSARY	30.00	30.00
1	TAILGATE OUTER GARNISH	NOT NECESSARY	184.50	
1	TAILGATE GLASS MOULDING	NECESSARY	98.20	98.20
	LESS 20% DISCOUNT	0.00	-1,331.34	-1,040.28
			5,325.36	4,161.12
	SPECIAL NETT ITEMS			
1	TAILGATE GLASS SEALANT (SN)	NECESSARY	60.00	60.00

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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	REAR EXHAUST CHROME PIPE (SN)	BENT	150.00	100.00
1	REAR NUMBER PLATE (SN)	NOT NECESSARY	30.00	
1	REAR NUMBER PLATE HOLDER (SN)	NOT NECESSARY	30.00	7.4
1	REVERSE SENSOR (SN)	DAMAGED	280.00	220.00
1	REAR END PANEL SEALANT (SN)	NECESSARY	60.00	60.00
	NOT SECURE OF THE SECURE OF CONTROLLED SECURE OF A CONTROLLED OF SECURE OF SECURE OF A CONTROLLED OF SECURE OF A CONTROLLED OF SECURE OF S	200-0-00.000000000000000000000000000000	610.00	440.00
	LABOUR			
	TO KNOCKING & PULL OUT REAR PORTION & RENEW ABOVE PARTS.		1,200.00	800.00
	TO PUTTY & SPRAY UP PAINT WORKS.		1,000.00	800.00
	TO CHECK WIRING SYSTEM.	1	50.00	30.00
	TO UNDERSEAL.		150.00	60.00
	TO REMOVE REVERSE SENSOR.		100.00	50.00
	TO REMOVE UPHOLSTERY.		150.00	80.00
	TO REMOVE TAILGATE GLASS.		180.00	120.00
	TO TRANSFER TAILGATE FITTINGS.		150.00	80.00
	TO REMOVE EXHAUST PIPE.		150.00	80.00
			3,130.00	2,100.00
	GRAND TOTAL		9,065.36	6,701.12

RECOMMENDED COST OF LUMP SUM REPAIRS	5.350.00
RECOMMENDED COST OF LOWIP SOM REPAIRS	
(TO ITS PRE-ACCIDENT CONDITION)	

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ADRIAN LING WAI PING

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

Licensed Appraiser

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