

22/03/2002

ASS. REC. BY:

REF: CS/MSG/7022430/Dub12

Special Instruction:

Supervisor:

Bryan

ASSIGNMENT (Office)

Merimen

From (Person):

Elaine Ngu

of

MSG

Date/Time:

24/1/17 @ 10.01a

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

STP 5629B

Insured:

SKF 6880L

at Workshop m/s

Teamwork Garage

Tel:

6844 2475

of

Policy No:

A29076434TMP

Claim No:

537919

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

22/11/17

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time

Action/Instruction () Estimate

STP 5629B / SKF 6880L NA/MIG/7022368/64 DOA 22/11/17

NBA/MSG/7022403/Y DOA 22/11/17

STP 5629B CC3/MIG/7022367/KR3 DOA 22/11/17

30/8/18

Send preli revised via merimen

Average

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle No: _____

at Workshop no/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

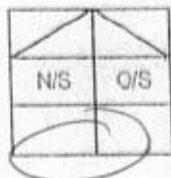
Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 5 days Res.: Yes or NoLum Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: 85P 5629 B Yr Regn: 2017, MarchType: M. Car M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hisson Dashgci C.C. 1197Colour: Brown A/C: Insured / Std / Nil / NASp. Reading: 20313 T/Radio: Insured / Std / Nil / NAEng/No: HR A2335085AC/No: SJHFEAJ11U1774133Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/60 R17R: — 11 —

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

TOYO / YOKO or Goodyear

Front

Rear

R/Bal. S mmR/Bal. S mmL/Bal. S mmL/Bal. S mmD.O.A. 22/11/2017D.O.I. 24/11/2017Survey held at Teamwork Paye UbiDes. of Damages: Front / Rear / O/S / N/S / U/C / Rooftop or.

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

Date / Time	Action / Instruction
	<u>MSIG SKF 6850L</u>
<u>30/08/18</u>	<u>Invoice 215 6500/- with 5 days gvw (Red 7940, 55%)</u>
RECEIVED 31 AUG 2018	
<u>30/9/2018</u>	

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

31/8 - typistReport Format: merimenLump Sum / I.B.I: (\$) 6500/2Days Of Repair: 5Resurvey No. of Trip: 2Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Invs (\$)☐ Weekend (\$)

Survey Fee:

Transportation:

) S + R.D. (\$)

) Photos

) Others

300

10

310

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	23 Nov 2017		24 Nov 2017 10:01 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
----------------------	---------------------------	-------------------------------	---------------------------	--------------------------

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	GAN BENG HOCK, ID: S0013824Z, Tel: +6598627361		
Main Claimant:	LIM BEE HOON, ID: S6839830D		
Vehicle Reg. No.:	SJP5629B	Date of Loss:	22/11/2017 19:00 - :59
Claim Type:	TP / 537919	Policy/Cover Note No.:	A29026434TMP (Third Party Only) Coverage: 22/10/2017 - 21/10/2018
Vehicle Reg. No. (Insured):	SKF6850L	Policy No. (Claimant):	
		Excess:	
Repairer:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 25/11/2017]		
Driver/Custodian (Insured):	CHERIE GAN LE SI (), NRIC: S9321630Z, Tel: +6597325935		
Adj Asg. Remarks:	*Do get the surveyor / surveyor office to check with us on the availability of the car at the workshop before sending their surveyor down for PRI survey.		

ASSOCIATED MAIL RECEIVED

[View All](#) [Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Bryan

(IN)

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To: MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way #21-01 SGX Centre 2 Singapore 068807	From: LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933
Attn: Elaine Ngu Siau Mei	Date: 30 Aug 2018
<u>Preliminary Advice</u>	

Insured Vehicle No	: SKF6850L	Accident Date	: 22/11/2017
TP Vehicle No	: SJP5629B	Assignment Date	: 24/11/2017
Make	: NISSAN QASHQAI	Est. Duration of Repair	: 5.00
Date of Inspection	: 24/11/2017		
Inspection At	: TEAMWORK GARAGE PTE LTD (HQ) 53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK SINGAPORE 408934		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	14,440.00
Revised Amount	:S\$	6,500.00 (lump sum)
Check Items (Estimated)	:S\$	0.00
Total	:S\$	6,500.00
Lump Sum Repair	:S\$	

Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

Remarks

<input type="checkbox"/>	The vehicle is economical/not economical for repair.
<input checked="" type="checkbox"/>	The above survey was conducted on a 'without prejudice' basis.

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	23/11/2017 14:02
Date Of Accident	22/11/2017 19:10
Exact Location Of Accident	BT TIMAH RD TWDS WOODLANDS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP5629B
Insured/Policyholder	
Name Of Registered Owner	LIM BEE HOON
NRIC No	S6839830D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98455113
Alternative Phone No	OTHERS-93871069

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NO
Policy Number	2100504443-00000
Cover Note Number	-

Driver

Name of Driver	LEE CHEE HUI
NRIC No	S1602894J
Date Of Birth	27/05/1963
Occupation	INDOOR
Date Of Driving Pass	03/08/1981
Driving Experience	36 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98455113
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	337 CHOA CHU KANG AVE 3 #03-15
Postcode	689872
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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?	YES
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

PLEASE REFER TO ATTACHED STATEMENT.

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	SKF6850L
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	CHERIE GAN LE SI
NRIC/Passport Number	S9321630Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name	LIM BEE HOON
Approximate Age	

Injuries Sustain	NECK
Injured person in which vehicle?	SJP5629B
Were seat belts worn?	YES
Was injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	LEE CHEE HUI
Approximate Age	
Injuries Sustain	NECK
Injured person in which vehicle?	SJP5629B
Were seat belts worn?	YES
Was injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

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 rescind 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 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:
 - (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.
- (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:
 - (i) 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
Date & Time:

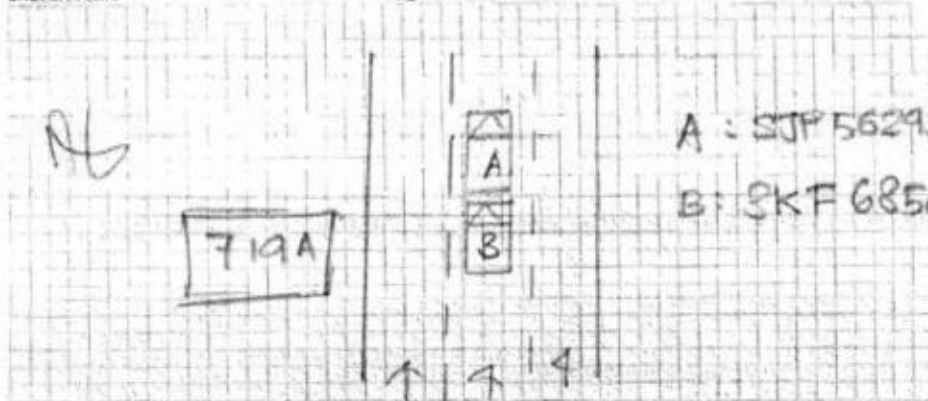
Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

Bukit Timah Rd trucks Woodlands



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Bukit Timah Rd trucks Woodlands at the 2nd Lane. Vehicle in front of me slowing down, therefore I also followed slowing down my car. All of a sudden, I felt an impact from my rear. I got off and found that vehicle B had hit onto my car rear portion.

DECLARATION

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

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.:

MSIG Insurance (Singapore) Pte Ltd
4 Shenton Way #21-01
SGX Centre 2
Singapore 068807

Vehicle number	:	SJP5629B
Make / Model	:	NISSAN/QASHQAI
Chassis number	:	SJNFEAJ11U1774133
Accident date	:	22 Noveber 2017
Reference	:	1711-52

Qty	Particulars	Unit Price - SGD \$
<u>PARTS REPLACEMENT - LIST ITEMS</u>		
1	TAILGATE <i>Dented</i>	2856.90 3526.56 ✓
1	TAILGATE INNER TRIM <i>HN</i>	411.45 X
1	END PANEL <i>Dented</i>	540.90 627.38 ✓
1	REAR COMPARTMENT COVER <i>HN</i>	513.11 X
1	COMPARTMENT STORAG SPONGE <i>HN</i>	312.00 X
1	REAR BUMPER <i>Dented</i>	717.00 932.10 ✓
1	REAR BUMPER CENTRE LAMP COVER <i>HN</i>	38.61 X
2	REAR BUMPER RETAINER <i>3pc</i>	92.04 X
2	REAR BUMPER BRACKET <i>HN</i>	4762.12 61.88 X
4	REAR BUMPER LOWER BRACKET <i>HN</i>	3333.48 327.60 X
1	REAR BUMPER SPONGE <i>form</i>	164.32 ✓
1	REAR FENDER ARCH GARNISH <i>W/S mounting crack</i>	483.00 579.60 ✓
2	REAR FENDER TRIM LINING <i>HN</i>	380.04 X
		7966.69
Less 30%		2390.00
		5576.69
2	TAILGATE HINGE <i>ro</i>	102.96 X
2	TAILGATE LIFE SUPPORT ABSORBER <i>HN</i>	501.36 X
1	TAILGATE WINDSCREEN MOULDING <i>Hec</i>	78.26 ✓
2	TAILGATE NO PLATE LAMP <i>HN</i>	92.69 X
1	TAILGATE EMBLEM (LOGO) <i>Hec</i>	77.61 ✓
1	TAILGATE EMBLEM (QASHQAI) <i>Hec</i>	113.10 ✓
1	TAILGATE LOCK <i>Dow</i>	151.71 ✓
1	TAILGATE LOCK STRIKER <i>ry</i>	53.00 X
1	TAILGATE WEATHERSTRIP <i>detained</i>	190.44 ✓
2	TAILGATE REFLECTOR LAMP <i>W/S mounting crack o/s HN</i>	259.08 518.16 ✓
2	REAR TAILLAMP <i>W/S mounting crack o/s HN</i>	388.44 776.88 ✓
1	REAR END PANEL GARNISH <i>detained</i>	82.55 ✓
1	REAR BUMPER REINFORCEMENT <i>Dented</i>	619.20 743.04 ✓
2	REAR BUMPER REFLECTOR <i>W/S mounting crack o/s HN</i>	66.00 132.00 ✓
1	REAR LOCK TRANSMITTER SENSOR <i>HN</i>	165.72 X

2	REAR FENDER COWLING <i>WH</i>	447.36 X
1	REAR EXHAUST SILENCER <i>fit</i>	553.67 ✓
1	REAR EXHAUST HEAT SHIELD <i>SVC</i>	152.16 X
1	REAR EXHAUST CENTRE PIPE <i>NH</i>	514.92 X
		5447.59
		544.75
		3813.31
		4902.83
		9390.00
		9390.00
		70.00 X
1	REAR NUMBER PLATE <i>WH</i>	60.00 ✓ 30/-
1 SET	REAR BUMPER CLIP <i>hlc</i>	60.00 X
1 SET	REAR FENDER INNER TRIM CLIP <i>SVC</i>	150.00 ✓ 40/-
1	JOINT SEALANT <i>hlc</i>	150.00 ✓ 40/-
1	WINDSCREEN SEALANT <i>hlc</i>	400.00 220/-
1 SET	REAR REVERSE SENSOR <i>Dem</i>	500.00 X
1	REAR REVERSE CAMERA <i>SVC</i>	
		330/-
		Subtotal
		1390.00
		10780.00
		10780.00
S/No	<u>LABOUR AND MISCELLANEOUS CHARGES</u>	
		60.00 30/-
1	CHECK REAR WIRING AND LIGHTNING	200.00 80/-
2	REMOVE AND REFIT REAR LINING, TRIM AND GARNISH	150.00 40/-
3	REMOVE AND RENEW REVERSE SENSOR	150.00 80/-
4	REMOVE AND RENEW EXHAUST ASSY	150.00 120/-
5	REMOVE AND REFIT REAR WINDSCREEN	200.00 80/-
6	TRANSFER PARTS, ATTACHMENT FROM OLD TAILGATE TO NEW	1400.00 900/-
7	PANEL BEATING ON AFFECTED AREAS	1200.00 800/-
8	SPRAY PAINTING ON AFFECTED AREAS	150.00 60/-
9	APPLY ANTI RUST ON AFFECTED AREAS	
		2190/-
		Subtotal
		3660.00
		15529.51
		Grand total
		14440.00
		8175.53
		4156500/-

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:

24/11/2017 @ 1000me

NH Auto

2/1/2018

5 days.

Ryan

LKK Auto

Check part prices.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG17022430/DVBN2

Date: 04/09/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	A29026434TMP
Claimant Vehicle No :	SJP5629B	Insured Vehicle No :	SKF6850L
Date of Loss:	22/11/2017	Nature of Claim:	TP
		Claim No:	537919

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SJP5629B		
Make & Model:	NISSAN QASHQAI, 1.2 DIG-T CVT ABS 2WD 5DR (A)	Engine No:	HRA2335085A
Reg. Date:	23/03/2017 (Man. Year: 2016)	Chassis No:	SJNFEAJ11U1774133
Colour:	Brown	Odometer:	20313 km
Engine Capacity:	1197 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	215/60R17	Rear Tyre Size:	215/60R17
Front Left Side:	Goodyear 5 mm	Rear Left Side:	Goodyear 5 mm
Front Right Side:	Goodyear 5 mm	Rear Right Side:	Goodyear 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	11,869.51	5,985.53	5,883.98	49.57
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,660.00	2,190.00	1,470.00	40.16
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	15,529.51	8,175.53	7,353.98	47.35
Approved Total (Overridden) (S\$)		6,500.00		
(S\$)	15,529.51	6,500.00	9,029.51	58.14
+ GST 7.00/7.00% (S\$)	1,087.07	455.00	632.07	58.14
Nett Amount (S\$)	16,616.58	6,955.00	9,661.58	58.14

INSPECTION

Date of Assignment:	24/11/2017	
Date Inspected:	24/11/2017 Inspected At:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park Singapore 408934

Estimated Period of Repair: 5.0 days

Adjuster: BRYAN TANI

Manager: VERON CHEN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 04 Sep 2018)
Parts:	M1-SUV	NISSAN QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SJP5629B)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
1	1	*TAILGATE	Dented	3,526.56 FL	*2,856.90 FL
2	1	*TAILGATE INNER TRIM	Not Necessary	411.45 FL	*- FL
3	1	*END PANEL	Dented	627.38 FL	*540.90 FL
4	1	*REAR COMPARTMENT COVER	Not Necessary	513.11 FL	*- FL
5	1	*COMPARTMENT STORAG SPONGE	Not Necessary	312.00 FL	*- FL
6	1	*REAR BUMPER	Dented	932.10 FL	*717.00 FL
7	1	*REAR BUMPER CENTRE LAMP COVER	Not Necessary	38.61 FL	*- FL
8	2	*REAR BUMPER RETAINER	Serviceable	92.04 FL	*- FL
9	2	*REAR BUMPER BRACKET	Not Necessary	61.88 FL	*- FL
10	4	*REAR BUMPER LOWER BRACKET	Not Necessary	327.60 FL	*- FL
11	1	*REAR BUMPER SPONGE	Torn	164.32 FL	*164.32 FL
12	1	*REAR FENDER ARCH GARNISH N/S	Mounting Cracked	579.60 FL	*483.00 FL
13	2	*REAR FENDER TRIM LINING	Not Necessary	380.04 FL	*- FL
14	2	*TAILGATE HINGE	Repair	102.96 FN	*- FN
15	2	*TAILGATE LIFE SUPPORT ABSORBER	Not Necessary	501.36 FN	*- FN
16	1	*TAILGATE WINDSCREEN MOULDING	Necessary	78.26 FN	*78.26 FN
17	2	*TAILGATE NO PLATE LAMP	Not Necessary	92.69 FN	*- FN
18	1	*TAILGATE EMBLEM (LOGO)	Necessary	77.61 FN	*77.61 FN
19	1	*TAILGATE EMBLEM (QASHQAI)	Necessary	113.10 FN	*113.10 FN
20	1	*TAILGATE LOCK	Damaged	151.71 FN	*151.71 FN
21	1	*TAILGATE LOCK STRIKER	Repair	53.00 FN	*- FN
22	1	*TAILGATE WEATHERSTRIP	Deformed	190.44 FN	*190.44 FN
23	1	*TAILGATE REFLECTOR LAMP (O/s Not Necessary)	N/s Mounting Cracked	518.16 FN	*259.08 FN
24	1	*REAR TAILLAMP (O/s Not Necessary)	N/s Mounting Cracked	776.88 FN	*388.44 FN
25	1	*REAR END PANEL GARNISH	Deformed	82.55 FN	*82.55 FN
26	1	*REAR BUMPER REINFORCEMENT	Dented	743.04 FN	*619.20 FN
27	1	*REAR BUMPER REFLECTOR (O/s Not Necessary)	N/s Mounting Cracked	132.00 FN	*66.00 FN
28	1	*REAR LOCK TRANSMITTER SENSOR	Not Necessary	165.72 FN	*- FN
29	2	*REAR FENDER COWLING	Not Necessary	447.36 FN	*- FN
30	1	*REAR EXHAUST SILENCER	Bent	553.67 FN	*553.67 FN
31	1	*REAR EXHAUST HEAT SHIELD	Serviceable	152.16 FN	*- FN
32	1	*REAR EXHAUST CENTRE PIPE	Not Necessary	514.92 FN	*- FN
33	1	*REAR NUMBER PLATE	Not Necessary	70.00 FS	*- FS
34	1	*SET REAR BUMPER CLIP	Necessary	60.00 FS	*30.00 FS
35	1	*SET REAR FENDER INNER TRIM CLIP	Serviceable	60.00 FS	*- FS
36	1	*JOINT SEALANT	Necessary	150.00 FS	*40.00 FS
37	1	*WINDSCREEN SEALANT	Necessary	150.00 FS	*40.00 FS
38	1	*SET REAR REVERSE SENSOR	Damaged	400.00 FS	*220.00 FS
39	1	*REAR REVERSE CAMERA	Serviceable	500.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc. N=NettItemDisc.

Sub Total (S\$) 14,804.28 7,672.18
 - List Item Discount on L Items 30.00/30.00% (S\$) 2,390.01 1,428.64

Report was unsubmitted during this print-out.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
- Nett Item Discount on N Items 10.00/10.00% (S\$)					544.76	258.01
Total Parts (S\$)					11,869.51	5,985.53

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	CHECK REAR WIRING AND LIGHTING	New	60.00	30.00
2	REMOVE AND REFIT REAR LINING, TRIM AND GARNISH	New	200.00	80.00
3	REMOVE AND RENEW REVERSE SENSOR	New	150.00	40.00
4	REMOVE AND RENEW EXHAUST ASSY	New	150.00	80.00
5	REMOVE AND REFIT REAR WINDSCREEN	New	150.00	120.00
6	TRANSFER PARTS, ATTACHMENT FROM OLD TAILGATE TO NEW	New	200.00	80.00
7	PANEL BEATING ON AFFECTED AREAS	New	1,400.00	900.00
8	SPRAY PAINTING ON AFFECTED AREAS	New	1,200.00	800.00
9	APPLY ANTI RUST ON AFFECTED AREAS	New	150.00	60.00
Gross Labour Cost (\$\$)			3,660.00	2,190.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >