

22/03/2002

200

ASS. REC. BY:

REF:

CS/GA17022602/Adber

Special Instruction:

Surveyor:

Adrian

ASSIGNMENT (Office)

From (Person):

Sharon Ng

of

GAL

Date/Time:

27/12/07 6:40 pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBF 967TH

Insured:

GZ 2015

at Workshop m/s

Precise Auto

Tel:

6745 7367

of

Blk 1 Kaki Bukit Ave 6 #02-34

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A.

12/11/2017

(Client's Record)

CA / REV / REP. / REV 24 HRS wpi

H.O.D. Endorsement:

Date/Time:

28/12/07 9:56 am

Person Contacted:

Anne

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

GBF 967TH - X

GZ 2015 - NA / INC12007015/02

DOA: 090412

08/11/17  
Surrey

REF:

# 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: \_\_\_\_\_  
 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: GBF 9677H Yr Regn: 2017 May  
 Type: M.Car / M.Cycle / Bus / Van / Lorry Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: Toyota Dyna C.C. 2982  
 Colour: White A/C: Insured / Std / NI / NA  
 Sp. Reading: 16488 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: JTFAT35Y10K208/84  
 Gen. Cond: Good Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or  
 Brake: Inorder / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD A/Rim or  
 Tyre Size: F: 195/75R154  
 R: 155R12C  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or  
 Front 06 mm Rear 06 mm  
 R/Bal. 06 mm L/Bal. 06 mm  
 D.O.A. \_\_\_\_\_ D.O.I. 29/11/17  
 Survey held at Precise  
 Des. of Damages: Frt Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
	TP Great American.
15/12	Adrian confirmed LS \$5,300 and 7 days with repainer. (Ref 5089.33, 48%)

RECEIVED 17 DEC 2018

Date/Time, File Pass to?

☐ : Preli. Report  
☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 7

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

Photos

Others

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

Report Format: TP

Lump Sum / I.B.I: (\$ 5300)

350

350



# 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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI17022602/Arb

3 TEMASEK AVENUE  
#16-01 CENTENNIAL TOWER  
SINGAPORE 039190

Date : 28-11-2017



Code : GAI

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GZ 201S	Veh. Inspected	GBF 9677H
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	27/11/2017

## 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	19/11/2017	Inspection Date
Survey held at	PRECISE AUTO SERVICE NO.1 KAKI BUKIT AVE 6 #02-34/36 SINGAPORE 417883	

## 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:** Ng, Sharon <Sharon.Ng@sg.gaig.com>  
**Sent:** Monday, 27 November, 2017 6:40 PM  
**To:** SUR; Admin-D (LKKAuto)  
**Subject:** SJE-LKK for TP survey to GBF 9677H ; Your Insured Vehicle no : GZ 201S - DOA: 19/11/17  
**Attachments:** Insd - GZ201S.PDF; TP - GBF9677H.PDF

Dear Catherine

Please conduct TP survey to GBF9677H.  
Both reports attached for your attention.

Regards  
Sharon  
GAIC

**From:** Precise Auto Service [mailto:support@preciseauto.sg]  
**Sent:** Monday, November 27, 2017 3:48 PM  
**To:** Ng, Sharon <Sharon.Ng@sg.gaig.com>  
**Subject:** Re: FW: Pre-repair Inspection for GBF 9677H ; Your Insured Vehicle no : GZ 201S

Dear Sharon,

We refer to your email on dated 27 Nov 2017. Please noted that we would like to select LKK Auto consultancy as our accident case SJE.

Please assign LKK Auto to come survey our client vehicle.

Thank You.

Best Regards  
Arine  
Best Regards  
Arine

--

**T :** 6745 7367 | **F :** 6841 3390  
**E :** [support@preciseauto.sg](mailto:support@preciseauto.sg)  
**W :** [www.preciseauto.sg](http://www.preciseauto.sg)

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> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Business
Owner ID:	4200L
<b>Vehicle Details</b>	
Vehicle No.:	GBF9677H
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 150 5MT
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	1KD2708078
Chassis No.:	JTFAT35Y10K208184
Maximum Power Output:	-
Open Market Value:	\$26,436.00
Original Registration Date:	03 May 2017
First Registration Date:	03 May 2017
Transfer Count:	0
Actual ARF Paid:	\$1,322.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	02 May 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$45,906.00
COE Rebate Amount:	\$38,445.00
<b>Total Rebate Amount:</b>	<b>\$38,445.00</b>

The information contained herein is correct as at 17 Dec 2018

OK

## 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	21/11/2017 16:27
Date Of Accident	20/11/2017 09:50
Exact Location Of Accident	ALONG NO.22 UBI AVE 3 #04-45 FRONTIER
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF9677H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HENG LIP AWNING INSTALLATION CONTRACTOR
Co Reg No	40954200L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67417370

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P1932595
Cover Note Number	

### Driver

Name of Driver	LIM SIEW HOCK
NRIC No	S1601066I
Date Of Birth	11/08/1963
Occupation	INDOOR
Date Of Driving Pass	14/09/1983
Driving Experience	34 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98282829
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address BLK 167 BISHAN STREET 13 #09-206  
 Postcode 570167  
 Was driver an employee of the Insured's Company YES  
 If No, Relationship of the Driver with the Insured  
 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) 1

### 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

ON 20/11/2017 AT ABOUT 0950HRS, I PARKED MY LORRY (GBF9677H) OUTSIDE OF NO.52 UBI AVE 3 (FRONTIER) AND I WAS PURCHASING GOODS IN THE SHOP LOT. WHILE I WAS STILL IN SHOP LOT, I SAW VEHICLE B (GZ201S) REVERSING AND THEN COLLIDED ONTO FRONT PORTION OF MY LORRY. HENCE, I HERE TO LODGE THIS ACCIDENT REPORT TO CLAIM VEHICLE B (GZ201S) INSURANCE FOR MY ACCIDENT DAMAGES.

### 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 GZ201S  
 Vehicle Make/Model/Colour  
 Details Of Properties VEHICLE B  
 Name of Driver ABDUR ROSHID (RAJU) JOYNAL ABEDIN  
 NRIC/Passport Number  
 Contact Number 86787367  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

### Details of Witness

Name  
 Phone Number  
 Email Address

## Sketch Plan Pg. 1

**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 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:

21/11/17  
9:47am

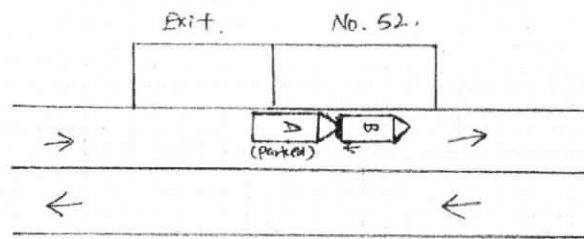
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



## Sketch Plan #2 Pg. 1

## SKETCH PLAN



(A) GBF 9677H

(B) GZ 2018

Along No 52 Cibi Ave 3  
# 04-45 Frontier

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 20-11-2017 @ about 0930hrs, I was parked my lorry (GBF 9677H) outside of No. 52 Cibi Ave 3 (Frontier) and I was purchase goods in the shop lot. While I still in the shop lot I saw Vehicle B (GZ 2018) reversing and then collided onto front portion of my lorry. Hence I hereby lodge this accident report to claim Vehicle B (GZ 2018)'s Insurance for my accident damages.

## DECLARATION

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

Policyholder's Signature

Date & Time:

21/11/17  
9:47am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

PRECEB

## Sketch Plan #3 Pg. 1

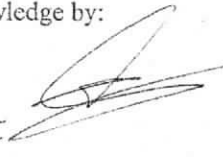
LETTER OF UNDERTAKING

I/We, Heng Lip Aunng Installation, the owner of vehicle no. GABF9677H

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, Precise Auto Service

Signed and Acknowledge by:

1601066/I   
Nric no. and signature of policyholder



Company Stamp

21/11/17  
Date

# PRECISE AUTO SERVICE

NO. 1 KAKI BUKIT AVE 6 #02-34/36 AUTOBAY SINGAPORE 417883

TEL : 67457367 FAX : 68413390

CO. REG. NO. : 35766600C

GST REG. NO. : 35766600C

30-05-18

Date Of Accident : 20-11-17

OUR REF : GBF 9677H/T/17

Heng Lip Awning Instaallation Contractor

272 Macpherson Road

#01-01/02

Singapore 348597

Adrian

Date in/out: 28/11/17 to 06/12/17

TP Great American

Janice

**ESTIMATE BILL ON VEH. NO. : GBF 9677H**

**VEHICLE MODEL : TOYOTA DYNA**

**CHASSIS NO. : JTFAT35Y10K208184**

## LIST ITEM

Front Bumper Fascia	Best		371.45	✓
Front Bumper Bracket	Best		345.70	✓
Front Bumper Fog Lamp Cover	Not new		171.45	✗
Head Lamp	crack	2pcs @ 781.45	1,562.90	✓
Front Grille	crack		374.85	✓
Front Grille Badge	new		171.45	✓
Front Grille Clips	new	6pcs @ 12.90	77.40	20 ✗
Wiper Panel	Repair		581.60	✗
Wiper Panel Clips	Not new	6pcs @ 12.90	77.40	✗
Wiper Panel Bracket	new	2pcs @ 171.45	342.90	✗
Front Panel	Dented		972.10	✓
Front Panel Emblum "Dyna"	new		171.85	✓
Front Windscreen Glass Rubber	new	5625.85 4218.38	374.45	✓
Air Cond Heater	new		2,728.10	✗
Air Cond Blower	crack		974.10	✓
Air Cond Cooling Coil	new		681.40	✗
Air Cond Discharge Pipe	Dented	287	9,979.10	✓
25% Less Discount			2,494.78	
			7,484.33	

### SPECIAL NETT ITEM

Front Number Plate

Bent

35

35.00 ✓

### LABOUR CHARGE

To remove & refit front windscreen glass

100.00 ✓

To tuff-coat affected areas

80.00 ✓ 40

To check electrical system

2370

80.00 30

To remove & refit dashboard fascia

380.00 220

To renew aircon evaporator unit, blower & top up gas

180.00 180

To renew damaged parts and aligned all parts

1,200.00 1000

To respray affected areas

850.00 800

TOTAL :	10,389.33
GST 7 % :	727.25
AMOUNT DUE :	<u><u>11,116.58</u></u>

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:

total 6624.38  
H/s: 5.3K 07 Days

10604.57

**LKK Auto Consultants Pte Ltd**

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

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Affiliated to Federation Internationale Des Experts En Automobile

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI17022602/Acbe2

3 TEMASEK AVENUE  
#16-01 CENTENNIAL TOWER  
SINGAPORE 039190

Date : 28-12-2018



Code : GAI

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	GZ 201S	Veh. Inspected	GBF 9677H
Policy No.		Coverage (\$)	0.00
Claim No.	CLMOMVC000001892	Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	27/11/2017

**2. Vehicle Particulars & Condition**

Make & Model	TOYOTA DYNA	c.c	2982
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTFAT35Y10K208184	Colour	WHITE
Odometer	16488	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	195/75 R15	BRIDGESTONE	6 mm
L/H Front Tyre	195/75 R15	BRIDGESTONE	6 mm
R/H Rear Tyre	155 R12C	BRIDGESTONE	6 mm
L/H Rear Tyre	155 R12C	BRIDGESTONE	6 mm

**4. Description of Damages**THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION.  
DAMAGES SEE DETAILS.**5. General Information**

Accident Date	20/11/2017	Inspection Date	29/11/2017
Survey held at	PRECISE AUTO SERVICE NO.1 KAKI BUKIT AVE 6 #02-34/36 SINGAPORE 417883		

**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:	<b>7 Working Days</b>
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# 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 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBF 9677H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	FRONT BUMPER FASCIA	BENT	371.45	371.45
1	FRONT BUMPER BRACKET	BENT	345.70	345.70
1	FRONT BUMPER FOG LAMP COVER	NOT NECESSARY	171.45	-
2	HEAD LAMP @\$781.45	CRACKED	1,562.90	1,562.90
1	FRONT GRILLE	CRACKED	374.85	374.85
1	FRONT GRILLE BADGE	NECESSARY	171.45	171.45
6	FRONT GRILLE CLIPS @\$12.90	NECESSARY	77.40	20.00
1	WIPER PANEL	TO REPAIR SEE LABOUR	581.60	-
6	WIPER PANEL CLIPS @\$12.90	NOT NECESSARY	77.40	-
2	WIPER PANEL BRACKET @\$171.45	NOT NECESSARY	342.90	-
1	FRONT PANEL	DENTED	972.10	972.10
1	FRONT PANEL EMBLUM "DYNA"	NECESSARY	171.85	171.85
1	FRONT WINDSCREEN GLASS RUBBER	NECESSARY	374.45	374.45
1	AIR COND HATER	NOT NECESSARY	2,728.10	-
1	AIR COND BLOWER	CRACKED	974.10	974.10
1	AIR COND COOLING OIL	NOT NECESSARY	681.40	-
1	AIR COND DISCHARGE PIPE	DENTED	287.00	287.00
	LESS 25% DISCOUNT		-2,566.53	-1,406.46
			7,699.57	4,219.39
<b><u>SPECIAL NETT ITEMS</u></b>				
1	FRONT NUMBER PLATE (SN)	BENT	35.00	35.00
			35.00	35.00
<b><u>LABOUR</u></b>				
	TO REMOVE & REFIT FRONT WINDSCREEN GLASS.		100.00	100.00
	TO TUFF COAT AFFECTED AREAS.		80.00	40.00
	TO CHECK ELECTRICAL SYSTEM.		80.00	30.00
	TO REMOVE & REFIT DASHBOARD FASCIA.		380.00	220.00
	TO RENEW AIRCON EVAPORATOR UNIT, BLOWER & TOP UP GAS.		180.00	180.00

Report Ref No. CS/GAI17022602/Acbe2



## 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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO RENEW DAMAGED PARTS AND ALIGNED ALL PARTS. INCLUSIVE OF THE REPAIR OF WIPER PANEL. TO RESPRAY AFFECTED AREAS.		1,200.00	1,000.00
			850.00	800.00
			2,870.00	2,370.00
GRAND TOTAL			10,604.57	6,624.39
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				5,300.00

Report Ref No. CS/GAI17022602/Acbe2

ADRIAN LING WAI PING

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

Licensed Appraiser

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