Minun -	REF. CS 3 MSG 12  Richard ASSIGNME  ASSIGNME  On Stirra Way of MSG	NT (Office)	Date/Time: 16-11-2017
To Inspect V  Workshop	chicle No: \$1 72824	S	Insured PA 3097 G
Sun Insured	286 72151 MKC	Claim No: _ Excess: _	
A / REV	/ REP. / REV 24 HRS Person Contacted:		H.O.D. Endorsement  Vehicle (IN) OUT
)ale/Time	Action/Instruction (X) Estimate Dismantle Part 14082017 After repair: 16082017		Do Not Finglize
8/11/3/15/1	Subject US \$ 7050, 4	Mulman Lays	(Red & 1050, 34 %)

RECEIVED 1 2 DEC 2017

Weavend 3

- Sum / LB / 1 3



#### 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

. 13		Affiliated to Federation Internation	onale Des Experts En Auto	mobile
MSIC	INSURANCE (SI	NGAPORE) PTE LTD	Ref : CS3/MSG170	15432/qb-1
C100000	AFFLES QUAY 01 HONG LEONG	BLDG SINGAPORE 048581	Date: 12-12-2017 Code: MSG	
1.	407-100-100-100	Policy Particulars	:- THIRD PARTY CLA	MIA
	Insured Veh.	PA 3097G	Veh. Inspected	SFJ 7282H
	Policy No.	28622151MKC	Coverage (\$)	0.00
	Claim No.	525825	Excess (\$)	0.00
	Assign From	MERIMEN (CHRISTINA WONG	Assign Date	16/11/2017
2.		Vehicle Parti	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	*	Steering	
	Brakes		Modification	
	General			
3.		Condit	ions 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.		Descripti	on of Damages	
5.	- 1 - 2 - 3	Genera	al Information	
	Accident Date	07/08/2017	Inspection Date	12/12/2017
	Survey held at	VERVE AUTOCLINIC		
	*	BLK 25 KAKI BUKIT ROAD 4 #03-39 SYNERGY @ KB SINGAPORE 417800		
5a.		R	temarks	

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:

Veron Chen (LKKAuto) < veronchen@lkkauto.com>

Sent:

Tuesday, 12 December, 2017 12:48 PM

To:

Christina Wong; assignments

Subject:

RE: Our Ref:M525825 Your ref:SFJ7282H

Dear Christina,

Thank you for the email.

Dear Catherine,

FYNA-CS3/MSG17015432/Jbe2

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Christina Wong [mailto:Christina\_Wong@sg.msig-asia.com]

Sent: Tuesday, 12 December, 2017 12:39 PM

To: Veron Chen (LKKAuto) < veronchen@lkkauto.com>

Subject: Our Ref:M525825 Your ref:SFJ7282H

Hi Veron

Please assist, we have requested paper survey on 16.11.2017 to date we have not receive your report, please expedite as we have TP lawyers chasing for offer.

Thanks

Best Regards

Christina Wong
Senior Executive, Claims Services (Motor)
Direct line +65 6643 1311 | Direct fax +65 6225 7402 | christina\_wong@sg.msig-asia.com



MSIG Insurance (Singapore) Pte. Ltd. 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | Tel +65 6220 9644 | Fax +65 6225 6371 | Co. Reg. No. 200412212G | http://www.msig.com.sg/ | Follow us on | | | | | | | | | | | |

A medical of MSRAD INSURANCE GROUP

CONFIDENTIALITY NOTICE
This e-mail (including any attachments) may contain information that is privileged or confidential. The sending of this e-mail to any person other than the intended recipient is not a waiver of the privilege or confidentiality that attaches to it. If you are not the intended recipient, please notify the sender immediately, delete the email and do not copy, distribute or disclose its contents.

Merimen e-Claims

## ...CLAIM SUBFOLDER...(Pending for Payment)

Page 1 of 1

Paper Survey

LAIM SUE	BFOLDER TRAC	KING						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	10 Aug 2017		10 Aug 2017 11:11		20 Sep 2017 09:48 <b>S\$0.00</b> (S\$192.60)		Pending for Cancel Case	
	Main	Re	ference	CI	aim Details	Docum	nents	Show All
CLAIM S	UBFOLDER DET	TAILS		ALAN STATEMENT		[Created	by insurer]	
Insured:		E P RENO COI	NTRACTS PTE LT	D, Co. Reg.	No.: 200311480D			
Main Clai	mant:	TEO HAI HON	G, ID: 5697235	503				
Vehicle R	teg. No.:	SFJ7282H			ate of Loss:	07/08/201	7 00:00 - :59	
Claim Ty	pe:	<b>TP</b> / 525825			olicy/Cover Note N	10 1	28622151MKC Coverage: 01/04/2017 - 31/03/2018	
Vehicle R		PA3097G		p	olicy No. (Claimant	t):		
				E	xcess:			
Repairer	1	Verve Autocli	nic (HQ) No. 25	Kaki Bukit Roa	d 4, #03-39 Synergy	y@KB, 417800 Kak	d Bukit - Tel: 91	595951
Handling	Insurer:				() - Tel: +65 6827 7			
Adjuster	:	due 11/08/2		I (HQ) - Tel: (	5256-3561 [Handle	ed by Richard Ha	rjanto] [Im	m.Advice
ASSOCIA	ATED MAIL REC	CEIVED				View	All Compo	se Case Mail
There are	no mail for this o	case.						
-					Secretaria de la compa			
ALL ASS	OCIATED TASK	(S			View All Sea	arch Tasks C	reate New Task	Complete
Due Da	te Priority	Type Task 0	iroup Subjec	ct Handler	Assigned By	Completed 0	n Created	On Done?

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number

Contact Number EMail Address

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed</u> 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.

Date Of Report   08/08/2017 15:35   Date Of Accident   07/08/2017 22:50   Exact Location Of Accident   X JUNCTION OF YIO CHU KANG ROAD.	<b>建</b> 在中央共和国共和国的	ACCIDENT STATEMENT
Exact Location Of Accident X- JUNCTION OF YIO CHU KANG ROAD.  Country/State of Loss SINGAPORE    SINGAPORE	Date Of Report	08/08/2017 15:35
Country/State of Loss SINGAPORE  DETAILS OF OWN VEHICLE  Vehicle Registration Number SJF7282H  Insurad/Policyholder  Name Of Registered Owner TEO HAI HONG NRIC No S6872350J  Email Address NOEMAIL Mobile Phone No (LOCAL) +65-90050904  Alternative Phone No OFFICE-90050904  Vehicle Particulars  Manufacturer TOYOTA Model WISH  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?  If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company AXA INSURANCE PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number GA023693/1  Cover Note Number  Driver  Name of Driver TEO HAI HONG NRIC No S6972350J Date Of Birth O7/11/1969 Occupation INDOOR Date Of Driving Pass 22/09/1989 Driving Experience 27 YEARS AND 10 MONTHS MALE	Date Of Accident	07/08/2017 22:50
Vehicle Registration Number SJF7282H  Insurance Company Name of Disverse Company Name of Disverse Company Name of Disverse Company Name of Diriver Name of Diriver Name of Diriving Pass Note Mall Note Registered Owner NEC No Se972350J Se972350J Se972350J Se972350J NOEMAIL Nobile Phone No NOEMAIL Nobile Phone No NOEMAIL Nobile Phone No OFFICE-90050904 Vehicle Particulars Note Phone No Vehicle Particulars Note Phone No Vehicle Particulars Note Phone No No Note Phone No No Note Phone No No Note Note Note Note Note Note Note Note	Exact Location Of Accident	X- JUNCTION OF YIO CHU KANG ROAD.
Vehicle Registration Number SJF7282H  Insured/Policyholder  Name Of Registered Owner TEO HAI HONG NRIC No S6972350J Email Address NOEMAIL Mobile Phone No (LOCAL) +65-90050904 Alternative Phone No OFFICE-90050904  Vehicle Particulars  Manufacturer TOYOTA Model WISH 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? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR  Insurance Company Name of Insurance Company AXA INSURANCE PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number  Driver  Name of Driver TEO HAI HONG NRIC No S6972350J Date Of Birth O71/1/1969 Occupation Union Seed of Se	Country/State of Loss	SINGAPORE
Insured/Policyholder           Name Of Registered Owner         TEO HAI HONG           NRIC No         56972350J           Email Address         NOEMAIL           Mobile Phone No         (LOCAL) +65-90050904           Alternative Phone No         OFFICE-90050904           Vehicle Particulars           Manufacturer         TOYOTA           Model         WISH           Exact Purpose for which vehicle was being used at time of accident         THIRD PARTY           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         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TEO HAI HONG           NRIC No         \$6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS		DETAILS OF OWN VEHICLE
Name Of Registered Owner         TEO HAI HONG           NRIC No         \$68972350J           Email Address         NOEMAIL           Mobile Phone No         (LOCAL) +65-90050904           Alternative Phone No         OFFICE-90050904           Vehicle Particulars           Model         WISH           Exact Purpose for which vehicle was being used at time of accident         WISH           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         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TEO HAI HONG           NRIC No         \$6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender	Vehicle Registration Number	SJF7282H
NRIC No         S6972350J           Email Address         NOEMAIL           Mobile Phone No         (LOCAL) +65-90050904           Alternative Phone No         OFFICE-90050904           Vehicle Particulars           Manufacturer         TOYOTA           Model         WISH           Exact Purpose for which vehicle was being used at time of accident         WISH           Are you claiming under your own insurance policy or repair to your vehicle?         NO           If No, Please state action to be taken         THIRD PARTY           Vehicle Category         PRIVATE CAR           Insurance Company         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         GA023693/1           Cover Note Number         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender	Insured/Policyholder	
Email Address         NOEMAIL           Mobile Phone No         (LOCAL) +65-90050904           Alternative Phone No         OFFICE-90050904           Vehicle Particulars         TOYOTA           Model         WISH           Exact Purpose for which vehicle was being used at time of accident         WISH           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         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Name Of Registered Owner	TEO HAI HONG
Mobile Phone No         (LOCAL) +65-90050904           Alternative Phone No         OFFICE-90050904           Vehicle Particulars         TOYOTA           Manufacturer         TOYOTA           Model         WISH           Exact Purpose for which vehicle was being used at time of accident         The control 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         PRIVATE CAR           Insurance Company         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TO'ver           Driver         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	NRIC No	S6972350J
Alternative Phone No	Email Address	NOEMAIL
Vehicle Particulars       Manufacturer     TOYOTA       Model     WISH       Exact Purpose for which vehicle was being used at time of accident     THIRD PARTY       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     AXA INSURANCE PTE LTD       Type Of Coverage     COMPREHENSIVE       Fleet Policy     NO       Policy Number     GA023693/1       Cover Note Number     TEO HAI HONG       NRIC No     \$6972350J       Date Of Birth     07/11/1969       Occupation     INDOOR       Date Of Driving Pass     22/09/1989       Driving Experience     27 YEARS AND 10 MONTHS       Gender     MALE	Mobile Phone No	(LOCAL) +65-90050904
Manufacturer Model WISH  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?  If No, Please state action to be taken THIRD PARTY  Vehicle Category PRIVATE CAR  Insurance Company Name of Insurance Company AXA INSURANCE PTE LTD  Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number GA023693/1  Cover Note Number  Driver  Name of Driver TEO HAI HONG  NRIC No S6972350J  Date Of Birth O7/11/1969 Occupation Date Of Driving Pass Driving Experience Gender  MALE	Alternative Phone No	OFFICE-90050904
Model WISH  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?  If No, Please state action to be taken THIRD PARTY  Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company AXA INSURANCE PTE LTD  Type Of Coverage COMPREHENSIVE  Fleet Policy No  Policy Number GA023693/1  Cover Note Number  Driver  Name of Driver TEO HAI HONG  NRIC No S6972350J  Date Of Birth 07/11/1969  Occupation INDOOR  Date Of Driving Pass 22/09/1989  Driving Experience XALE AND 10 MONTHS  Gender	Vehicle Particulars	
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?  If No, Please state action to be taken  Vehicle Category  Insurance Company  Name of Insurance Company  AXA INSURANCE PTE LTD  Type Of Coverage  COMPREHENSIVE  Fleet Policy  NO  GA023693/1  Cover Note Number  Driver  Name of Driver  Name of Driver  TEO HAI HONG  NRIC No  S6972350J  Date Of Birth  O7/11/1969  Occupation  Date Of Driving Pass  Driving Experience  27 YEARS AND 10 MONTHS  Gender	Manufacturer	ТОУОТА
Are you claiming under your own insurance policy for repair to your vehicle?  If No, Please state action to be taken Vehicle Category PRIVATE CAR  Insurance Company Name of Insurance Company AXA INSURANCE PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number GA023693/1  Cover Note Number  Driver  Name of Driver NRIC No S6972350J Date Of Birth Occupation Date Of Driving Pass Driving Experience Gender  NO  THIRD PARTY NO CHIRD PARTY THIRD PARTY	Model	WISH
for repair to your vehicle?  If No, Please state action to be taken  Vehicle Category  PRIVATE CAR  Insurance Company  Name of Insurance Company  AXA INSURANCE PTE LTD  Type Of Coverage  COMPREHENSIVE  Fleet Policy  NO  Policy Number  GA023693/1  Cover Note Number  Driver  Name of Driver  Name of Driver  NEIC No  S6972350J  Date Of Birth  O7/11/1969  Occupation  Date Of Driving Pass  22/09/1989  Driving Experience  27 YEARS AND 10 MONTHS  Gender		
Vehicle Category         PRIVATE CAR           Insurance Company         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TEO HAI HONG           Name of Driver         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE		NO
Insurance Company         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TEO HAI HONG           Driver         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	If No, Please state action to be taken	THIRD PARTY
Name of Insurance Company         AXA INSURANCE PTE LTD           Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number         TEO HAI HONG           Name of Driver         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Vehicle Category	PRIVATE CAR
Type Of Coverage         COMPREHENSIVE           Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number           Driver           Name of Driver         TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Insurance Company	
Fleet Policy         NO           Policy Number         GA023693/1           Cover Note Number           Driver           TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Name of Insurance Company	AXA INSURANCE PTE LTD
Policy Number         GA023693/1           Cover Note Number           Driver           TEO HAI HONG           NRIC No         S6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Type Of Coverage	COMPREHENSIVE
Cover Note Number           Driver           Name of Driver         TEO HAI HONG           NRIC No         \$6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Fleet Policy	NO
Driver         TEO HAI HONG           NRIC No         \$6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Policy Number	GA023693/1
Name of Driver         TEO HAI HONG           NRIC No         \$6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Cover Note Number	
NRIC No         \$6972350J           Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Driver	
Date Of Birth         07/11/1969           Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	Name of Driver	TEO HAI HONG
Occupation         INDOOR           Date Of Driving Pass         22/09/1989           Driving Experience         27 YEARS AND 10 MONTHS           Gender         MALE	NRIC No	S6972350J
Date Of Driving Pass 22/09/1989 Driving Experience 27 YEARS AND 10 MONTHS Gender MALE	Date Of Birth	07/11/1969
Driving Experience 27 YEARS AND 10 MONTHS Gender MALE	Occupation	INDOOR
Gender MALE	Date Of Driving Pass	22/09/1989
	Driving Experience	27 YEARS AND 10 MONTHS
Mobile Number (LOCAL) +65-90050904	Gender	MALE
	Mobile Number	(LOCAL) +65-90050904

OFFICE-90050904

NOEMAIL

Address

BLK 311C ANCHORVALE LANE #13-34

Postcode

543311

OWNER

Was driver an employee of the Insured's Company NO

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

WHILST STATIONARY AT THE TRAFFIC JUNCTION SUDDENLY VEHICLE B COLLIDED ONTO MY REAR PORTION. I DO HAVE IN CAR VIDEO EVIDENCE OF THE ACCIDENT.

#### 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

PA3097G

Vehicle Make/Model/Colour

MERCEDES VITO

Details Of Properties

VEHICLE B

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **Details of Witness**

Name

Phone Number

Email Address

#### Accident Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Rease report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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)

Lunderstand, 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 law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan



## Accident Sketch Plan Pg. 1

-	FR PORTION . 1	no wale	MI-CAR UND	ENDENCE	OF THE	ACCIDEN	11		-
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- clarat	ion								
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	ion re the foregoing partic	ulars are true in	n every respe	ect				(4	
		ulars are true ir	n every respe					(4	
		ulars are true in	n every respe	ect				(4	
				(9)	) Staubalder) /		Witnessed N	by Reporting	
/	re the foregoing partic	170		(9)	, policyholder) /		Witnessed I Personnel	by Reporting	Centre
We declar		170			, policyholder) /		Witnessed I Personnel	by Reporting	
We declar	re the foregoing partic	170		(9)	policyholder) /		Witnessed I Personnel	by Reporting	Centre
Ve declar	re the foregoing partic	170		(9)	policyholder) /		Witnessed I Personnel	by Reporting	Centre
Ve declar	re the foregoing partic	170		(9)	policyholder) /		Witnessed I Personnel	by Reporting	Centre
Ve declar	re the foregoing partic	Driver's & Time		(9)	policyholder) /	Date	Personnel	1 5 5	Oentre 
Ve declar	re the foregoing partic	Driver's & Time	Signature (# c	driver is not the p	policyholder) /		Personnel		Centre
Ve declar	re the foregoing partic	Driver's & Time  AXIA  SET 188	Signature (# o	(9)	policyholder) /	Date	Personnel	1 5 5	Oentre 
Ve declar	er's Signature / Date &	Driver's & Time	Signature (# o	driver is not the p	policyholder) /	Date	Personnel	1 5 5	Oentre 

## LETTER OF UNDERTAKING

I/We, 160 HAI HONG	, the owner	of vehicl	e no. <u>W</u>	F7282H	
My/Our Insurance is under M/s AXA Ins to claim under my/our Policy or against to claim to M/s AXA Insurance Singapore F 14(fourteen) days of occurrence or	the Third l'arty and te Ltd with all rele	i ii the li vant fac	ormer 217	an submit	such a
My/Our Third Party claim is handle by my/			VERVE	Mohvu	36/17L
			Allegaer		
Signed and Acknowledge by:	糖				*
(33)				1	
Nric no. and signature of policyholder	Company Stamp	)	,	Date	*******

#### INVOICE

Mr Teo Hai Hong Blk 311C Anchorvale Lane #13-34 Singapore 543311

Invoice No.

: HA/1710-18

Date

: 12/10/2017

	Descriptions	Amount (SGD)
Services render	ed for appraiser / inspection report :-	
Survey Fee		
Photographs		
Transport Fees		
Re-inspection Fe	ees	
	Total:	SGD: \$ 412.00
SGD Dollar :	Four Hundred Twelve Dollars Only.	
Our Reference	: PAS/TP/0090817	
Vehicle No.	: SFJ7282H	
Make & Model	: Toyota Wish (A)	
Your Claim No.	: Third Party Claim	

All cheque payment should be Crossed and made payable to "PROMINENT APPRAISER SERVICES PTE LTD". Please indicate our "INVOICE NO." on the reverse side of the cheque. Should you have any enquiries, please do not hesitate to contact us.



For PROMINENT APPRAISER SERVICES PTE LTD

## PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers Correspondence Address 1 Simei St 3 #02-24 S(529890) Mobile 9295 2204 Fax 6722 8508 Email pasvos@hotmail.com

Business Reg. 201404434D

#### VEHICLE INSPECTION REPORT

Report No.: PAS/TP/0090817

Date of Report

: 12/10/2017

To: Mr Teo Hai Hong

Blk 311C Anchorvale Lane

#13-34

Singapore 543311

Date of Assignment

: 08/08/2017

Report requested by : Mr Teo Hai Hong

Date of Accident

: 07/08/2017

Date of Inspection

: 08/08/2017

Claim No.

: Third Party Claim

Policy No.

#### PARTICULARS OF DAMAGED VEHICLE

Vehicle Registration No.

: SFJ7282H

Make & Model

: Toyota Wish (A)

Date of Registration

Colour

: 28/12/2006 : Met. Grey

Mileage (km)

Engine Capacity (cc) : 1794cc

。 1985年 - 1985年 -

: 122835km Chassis / Frame No. : ZNE100337459

Engine No.

: 1ZZ2752943

#### TYRE CONDITION

Front LH

· 5 mm

Front RH

: 5 mm

: Michelin Make

Make

: Michelin

Rear LH

: 5 mm

Rear RH

: 5 mm

Make

: Dunlop

Make

: Dunlop

Road wheels Type: Alloy

(The above represents the approximate remaining life of tyre treads)

#### PRE-ACCIDENT CONDITION OF DAMAGED VEHICLE (Static tests only)

General Bodywork

: Good

Paintwork

: Good

Handbrake

: Serviceable

Footbrake

: Serviceable

Steering

: Serviceable

Apparent Engine Modification

: Nil

#### PLACE OF REPAIRER OFFICE/WORKSHOP

Location

M/s. Verve Autoclinic

25, Kaki Bukit Road 4, Synergy@KB, #03-39, Singapore 417800

#### ASSESSMENT

Repairer's Estimate

6,741.45 : \$

Revised Amount

: S 3,882.03

Less Excess

. S

Recommended Reserve

: S 3,100.00 (Lump Sum)

Estimated Normal Period of Repairs

: 5 Working Days

Discialmer: This report is intended for the exclusive use of the addresses solely in relation to the loss occurrence in which the assessed vehicle involved. No liability or responsibility whatsoever shall be held by PROMINENT APPRAISER SERVICES PTE LTD for any reliance on this report by any third party.

## PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers
Correspondence Address 1 Simei St 3 #02-24 S(529890)
Mobile 9295 2204 Fax 6722 8508 Email pasvos@hotmail.com

Business Reg 201404434D

Vehicle No: SFJ7282H

Report No.: PAS/TP/0090817

#### GENERAL REMARKS

WITHOUT PREJUDICE

## THE ASSIGNMENT

The survey was conducted at M/s. Verve Autoclinic, 25, Kaki Bukit Road 4, Synergy@KB, #03-39, Singapore 417800.

(Subsequent inspections have been conducted)

#### POINT OF IMPACT

At the rear portion.

#### DAMAGES

The tailgate, rear bumper, rear end panel, rear floor panel, rear chassis members, etc.

Other parts were also found damaged. (See schedule for details)

#### ADJUSTMENT / RECOMMENDATION

We have inspected thoroughly each and every item on the repairer's estimate against the actual damaged found on the vehicle. We list the breakdown of our findings and our recommendation as per schedule attached.

Our adjusted amount for the cost of repairs is SGD \$3,882.03.

#### CONCLUSION

The repairer has agreed to undertake the repairs at a lump sum of SGD \$3,100.00.

This inspection was conducted entirely on a 'Without Prejudice' basis. We have not given an authorization and/or instruction to the repairer to proceed with the repairs.

We hereby reverting the matter to you for your discretion on repairs.

Assuring you of our best services always.

Yours Truly,

Prominent Appraiser Services Pte Ltd

Andrew How

Automobile Appraiser

MSAAA

Licensed Appraiser



Vehicle No.: SFJ7282H

Report No.: PAS/TP/0090817

### APPRAISEMENT SCHEDULE

28698	a diam	5 5 5 5 5 5 5	Condition		Table Hotel	100000000	oairer's		15560	ur
S/No.	Qty	Parts Descriptions	Condition			Est	imate (S\$)	Asse	ssn	nent (S\$)
1	1 pc	Tailgate	Dented/Repair			S	1,415.50		\$	20
2	I pc	Tailgate emblem (Logo)	Necessary			\$	50.80		S	50.80
3	1 pc	Tailgate lock	Damaged			\$	470.40		\$	470.40 XSV
4	1 pc	Tailgate lock striker	Bent			\$	37.20		\$	37.20×5 V
5	1 pc	Rr weatherstrip	Torn/Necessary			\$	322.30		S	322.30 274
6	2 pcs		Refit	\$	581.50	\$	1,163.00		\$	- 105
7	1 pc	Rr bumper	Dented			\$	798.40		\$	798.40 695
8		Rr bumper retainer R/L	Necessary	\$	60.80	\$	121.60		\$	121.60
9		Rr bumper clip	Necessary	\$	3.50	S	14.00		\$	14.00
10	1 pc	Rr end panel	Dented/Distorted			\$	468.00		S	468.00 🗶 🔀
11	1 pc	Rr end panel garnish	Refit			\$	247.40		\$	
		T = 100 m				\$	5,108.60		\$	2,282.70
				Less	Discount: 25%	\$	1,277.15	25%	\$	570.68
		7	Lis	t Parts S	sub-Total:	S	3,831.45	10	S	1,712.03
1	1 cet	Rr reverse sensor (4pcs type)	Dented/Damaged		S/N	\$	280.00		S	280.00 200
2	1 set	Rr reverse camera	Dented/Damaged		S/N	\$	250.00		\$	250.00
3	1 pc	Rr end panel sealant	Necessary		S/N	S	50.00		\$	40.00 X M
	e culto es	. The stands of the standard residence that the standard section is the standard section of the standa	Specia	al Nett S	Sub-Total:	S	580.00		S	570.00
				Pa	rts Total :	-\$	4,411.45		\$	2,282.03



## PROMINENT APPRAISER SERVICES PTE LTD

Qualified Loss Adjusters And Motor Appraisers

Correspondence Address 1 Simei St 3 #02-24 S(529890) Mobile 9295 2204 Fax 6722 8508 Email pasvcs@hotmail.com

Business Reg 201404434D

Vehicle No. : SFJ7282H		Report No	. : PAS/TI	2/0090817
S/No. Labour Descriptions	2.12.24.25.00.20.04.6.E.10.00.00.00	pairer's timate (S\$)	O Assessm	ur ient (S\$)
1 To check rear electrical wiring system.	\$	50.00	\$	30.00
2 To remove and reinstall rear interior trims, garnishes, etc. for necessary repairs.	\$	100.00	\$	80.00
3 To remove, replace and reinstall rear reverse sensors & control unit.	\$	80.00	\$	60.00 5
4 To remove, replace and reinstall rear reverse camera.	\$	50.00	\$	40.00
5 To straighten, repair, realign on affected area and replace damaged parts.	s	1,000.00	s	660.00
6 To spray painting, blending on affected and adjacent area.	\$	1,000.00	\$	700.00
7 To spray anti-rust coating on new and affected panels.	\$	50.00	\$	30.00
Labour Tota	1: \$	2,330.00	S	1,600.00
Total (Parts & Labour	·): <u> </u>	6,741.45	\$	3,882,03

4 d.a. S.

#### For Lump Sum Repairs

The final adjusted Lump Sum contract amount is \$

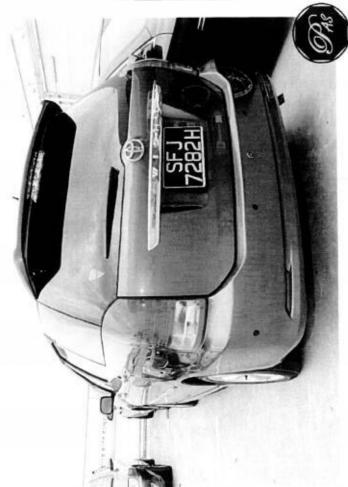
Under normal circumstances, the repairs should be completed within a reasonable period of 5 Working Days.

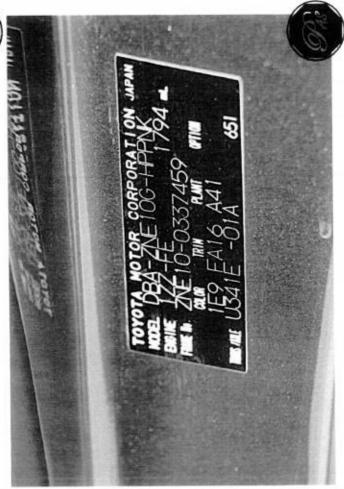
Photographs were taken at the time of inspection.

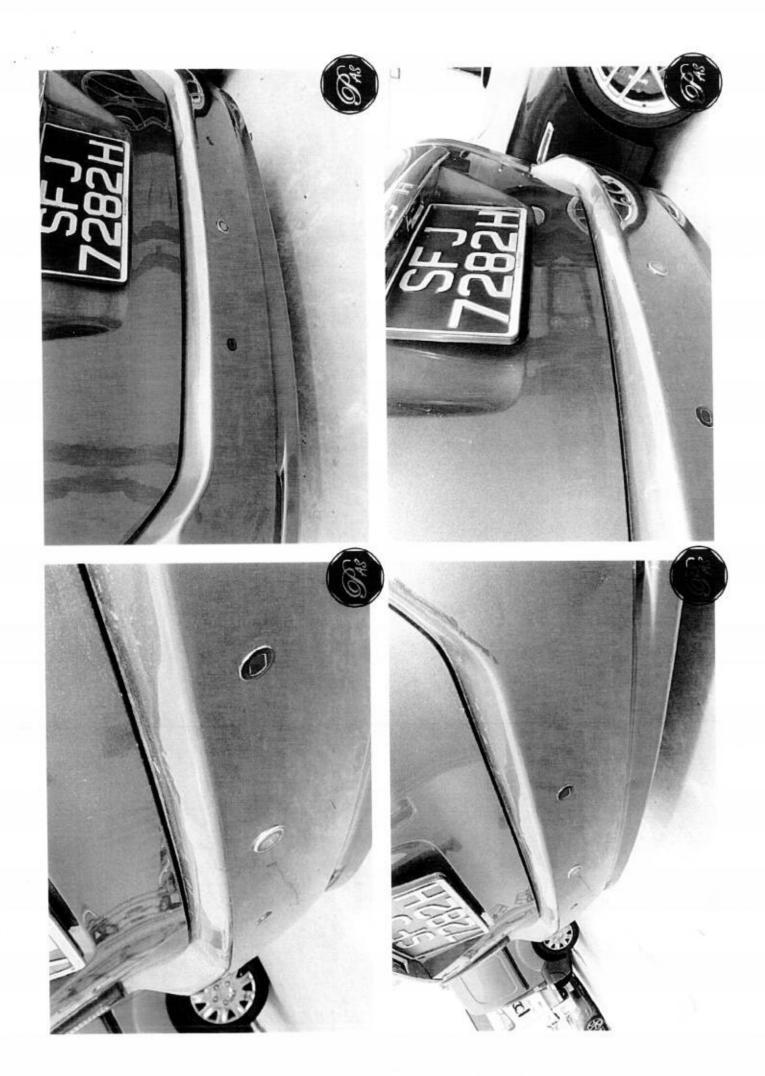
N.B: By accepting to carry out the repairs on a contract Lump Sum basis, the repairer shall has the prerogative and discretion to replace the damaged parts with new, used, OEM or reconditioned parts and/or to repair the vehicle on a roadworthy condition to the entire satisfaction of owner.

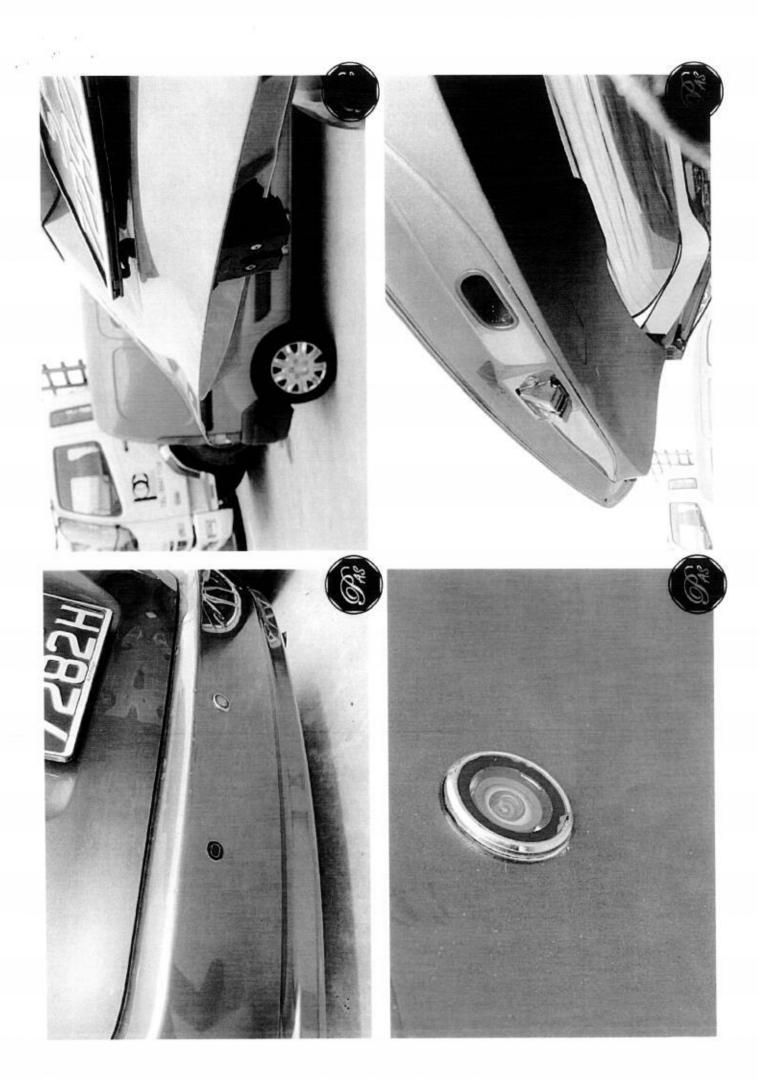


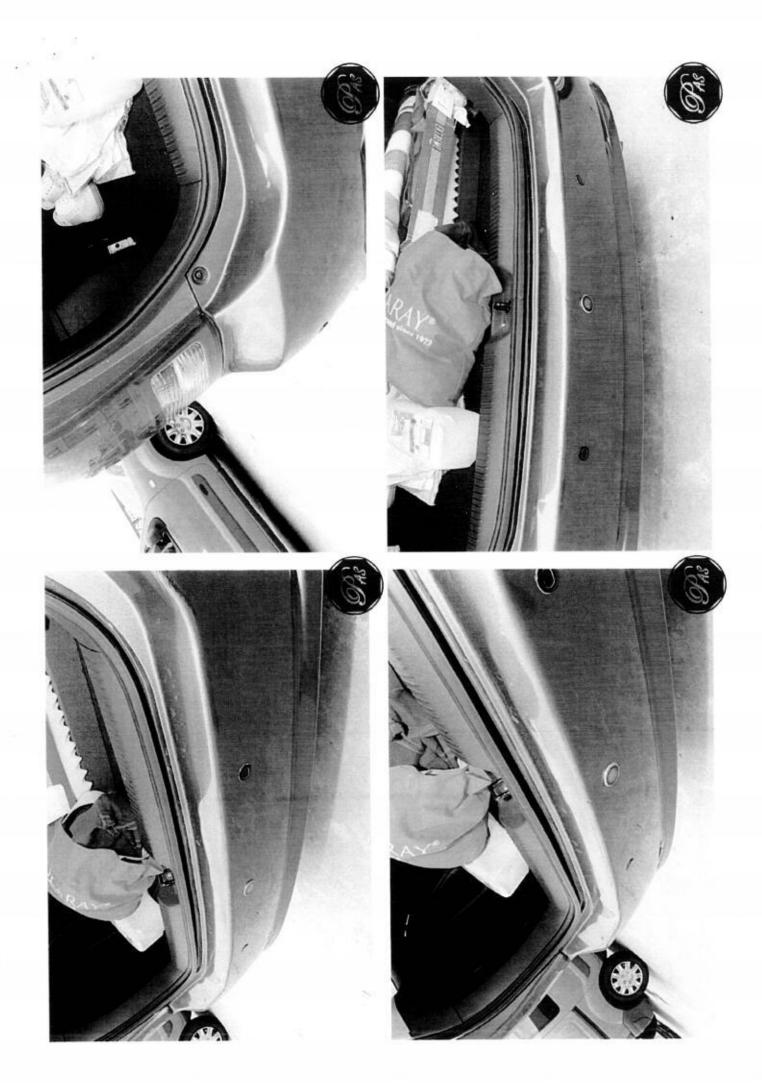






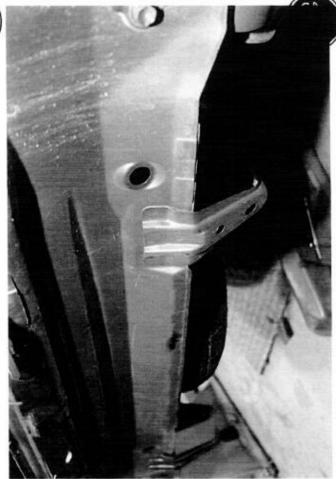






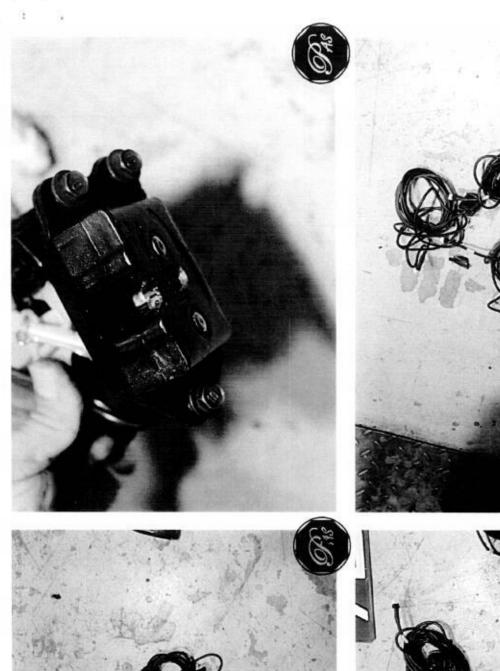


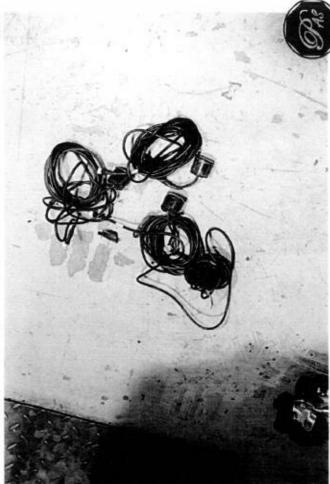




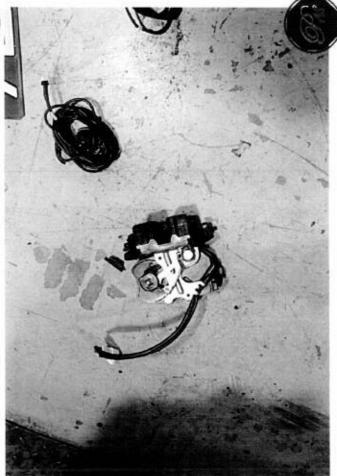




















## ...CLAIM SUBFOLDER...(Pending for Survey Report)

Paper Survey

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	10 Aug 2017		10 Aug 2017 11:11 Edit Adj Rpt	S\$2,050.00 Edit Estimates	S\$2,050.00 View Rpt		Pending for Survey Report Cancel Case
	Main	Refere	ence	Claim Detail	s	Documents	Show All
CLAIM S	UBFOLDER DET	TAILS		A DESIGNATION OF THE PERSON NAMED IN		[Created by in:	surer]
Insured:	8	E P RENO COM	TRACTS PTE LT	D, Co. Reg. No.:	200311480D		
Main Clai	imant:	TEO HAI HON	G, ID: S697235	(3)			
Vehicle F	Reg. No.:	SFJ7282H		Date of Lo	ss:	07/08/2017 00:0 28622151MKC	00 - :59
Claim Ty	pe:	<b>TP</b> / 525825		Policy/Co	Policy/Cover Note No.:		/2017 - 31/03/2018
Vehicle F		PA3097G		Policy No.	Policy No. (Claimant):		
(21130100	7.			Excess:			
Repairer		91595951		Kaki Bukit Road 4,	COLUMN SW	0, 10	
Handling	Insurer:	6643 1311]			Variable services and a service of the services of the service		Christina Wong -
Adjuster	i.	Rpt due 15/	sultants Pte Ltd 12/2017]	(HQ) - Tel: 6256	3561 [Handled	by Richard Harj	anto] [Final
ASSOCI	ATED MAIL REG	EIVED	The state of the s			View All	Compose Case Mail
MSIG_	SG (13/12/2017)	: Report Send B	ack Alerts - SFJ	7282H (TP)			
ALL ASS	SOCIATED TASI	cs		View All	Search Tasks	Create New	Task   Complete
ALL MOS	JUCIA ILU IASI			VICH PUL	Dearen rooms		

#### Claim Documents

\*SFJ7282H (525825) [PA3097G] TEO HAI HONG
Aug 7 2017 12:00AM
[E P RENO CONTRACTS PTE LTD] **Verve Autoclinic** 

Ass	sessment Reports	0	1 per	nage -	V
No	1000	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	1 per	Thumbnail	Print
1	16/11/17 16:58	Accident Statement From:SC - Reg. No: PA3097G, Claimant: E P RENO CONTRACTS PTE LTD	0	Load HTM	
Pho	otos/Images		3 per	page 🔻	V
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
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7	08/09/17 15:03	General View	0	Load JPG	V
8	08/09/17 15:03	General View	0	Load JPG	V
9	08/09/17 15:03	General View	0	Load JPG	<b>V</b>
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14	08/09/17 15:03	Odometer Reading	0	Load JPG	V
15	08/09/17 15:03	Chassis Number	0	Load JPG	V
16	08/09/17 15:03	General View	0	Load JPG	V
17	08/09/17 15:03	General View	0	Load JPG	<b>V</b>
18	08/09/17 15:03	General View	0	Load JPG	V
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29	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	V
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48	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	1
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50	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	1
51	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	V
52	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	V
53	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	V
54	08/09/17 15:03	Photographs of Damaged Parts	0	Load JPG	1
55	08/09/17 15:03	Photo After Spray	0	Load JPG	V
56	08/09/17 15:03	Photo After Spray	0	Load JPG	V
57	08/09/17 15:03	Photo After Spray	0	Load JPG	V
58	08/09/17 15:03	Photo After Spray	0	Load JPG	V
59	08/09/17 15:03	Photo After Spray	0	Load JPG	V
60	08/09/17 15:03	Photo After Spray	0	Load JPG	V
51	08/09/17 15:03	Photo After Spray	0	Load JPG	
52	08/09/17 15:03	Photo After Spray	0		V
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	again the particular strangers	Photo After Spray	0	Load JPG	V
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56	08/09/17 15:03	Photo After Spray	0	Load JPG	~
57	08/09/17 15:03	Photo After Spray	0	Load JPG	7
58	08/09/17 15:03	Photo After Spray	0	Load JPG	1
юс	umentation		1 per	page 🔻	V
Vo	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Prin
1	10/08/17 09:56	Email frm TP - PRI	0	Load PDF	
2	10/08/17 09:56	TP Details of Accident	0	Load PDF	
3	10/08/17 11:12	Email frm TP - Name of Workshop	0	Load PDF	
4	16/11/17 16:58	SJF7282H GIA RPT From:SC - Reg. No: PA3097G, Claimant: E P RENO CONTRACTS PTE LTD	0	Load PDF	
5	16/11/17 17:03	TP Police Rpt	0	Load PDF	
6	16/11/17 17:03	TP Survey Report	0	Load PDF	
lo	Relabel/Reorder			Thumbnail	Prin
1	13/12/17 09:19	Invoice	0	Load PDF	

### **Documents Checklist**

There are no document checklists configured.	DOCUMENTS CHECKLIST	Reset	Save	Print
	There are no document checklists configured.			
	<u> </u>			

Merimen e-Claims Page 3 of 3



#### 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:

CS3/MSG17015432/CQBE2-

Date:

13/12/2017

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

28622151MKC

Claimant Vehicle No: Date of Loss:

SFJ7282H 07/08/2017 Insured Vehicle No:

Nature of Claim:

PA3097G

TP

Claim No: 525825

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

SFJ7282H

Make & Model:

TOYOTA WISH, 1.8 (A) 28/12/2006 (Man. Year: 2006) Engine No:

1ZZ2752943

Reg. Date: Colour:

Grey

Chassis No: Odometer:

ZNE100337459 122835 km

**Engine Capacity:** Market Value/New Car Price:

1794 cc 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:

Pre-accident Condition:

**CONDITION OF TYRES** 

Front Tyre Size:

205/55 R16

Rear Tyre Size:

205/55 R16

Front Left Side:

Michelin 6 mm

Rear Left Side: Rear Right Side: Dunlop 5 mm

Front Right Side:

Michelin 6 mm

Dunlop 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
Parts		4,411.45	1,316.55	3,094.90	70.16
Miscellaneous Items		0.00	0.00	0.00	
Labour		2,330.00	1,280.00	1,050.00	45.06
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	6,741.45	2,596.55	4,144.90	61.48
A	oproved Total (Overridden) (S\$)		2,050.00		
	Nett Amount (SS)	6 741 45	2.050.00	4 691 45	69.59

INSPECTION

Date of Assignment:

10/08/2017

Date Inspected:

10/08/2017 Inspected At:

Verve Autoclinic (HQ)

No. 25 Kaki Bukit Road 4, #03-39

Synergy@KB

Singapore 417800

Estimated Period of Repair:

4.0 days

Adjuster: Richard Harjanto

Manager: CATHERINE CHONG KAI LING

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: 13 Dec 2017)

Parts:

M1-MPV

TOYOTA WISH 1.8 (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SFJ7282H)

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 \*.

		nended Parts Part No. Particulars	Condition	Repairer's	Amount
1	1	*TAILGATE	Repair	1,415.50 FL	*-FL
2	1	*TAILGATE EMBLEM (LOGO)	Necessary	50.80 FL	*50.80 FL
3	1	*TAILGATE LOCK	Serviceable	470.40 FL	*-FL
4	1	*TAILGATE LOCK STRIKER	Serviceable	37.20 FL	*-FL
5	1	*RR WEATHERSTRIP	Torn / Necessary	322.30 FL	*274.00 FL
6	2	*TAILLAMP R/L	Refit	1,163.00 FL	*-FL
7	1	*RR BUMPER	Dented	798.40 FL	*695.00 FL
8	2	*RR BUMPER RETAINER R/L	Necessary	121.60 FL	*121.60 FL
9	4	*RR BUMPER CLIP	Necessary	14.00 FL	*14.00 FL
10	1	*RR END PANEL	Repair	468.00 FL	*-FL
11	1	*RR END PANEL GARNISH	Refit	247.40 FL	*-FL
12	1	*SET RR REVERSE SENSOR (2PCS TYPE)	Dented / Damaged	280.00 FS	*200.00 FS
13	1	*SET RR REVERSE CAMERA	Dented / Damaged	250.00 FS	*250.00 FS
14	1	*RR END PANEL SEALANT	Not Necessary	50.00 FS	*-FS
F=Fr	anchise par	t, S=SpcNett. L=ListItemDisc.			
			Sub Total (S\$)	5,688.60	1,605.40
		- List Item Discount on L Ite	ems 25.00/25.00% (S\$)	1,277.15	288.85
			Total Parts (S\$)	4,411.45	1,316.55

Report was unsubmitted during this print-out.

# Recommended Miscellaneous Items There are no new miscellaneous items selected.

Recommended Labour

		Repairer's	Amoun
Items			
CHECK REAR ELECTRICAL WIRING SYSTEM	New	50.00	20.00
REMOVE AND REINSTALL REAR INTERIOR TRIMS	New	100.00	30.00 60.00
O REMOVE, REPLACE AND REINSTALL REAR EVERSE SENSORS & CONTROL UNIT	New	80.00	50.00
REMOVE, REPLACE AND REINSTALL REAR EVERSE CAMERA	New	50.00	40.00
STRAIGHTEN, REPAIR, REALIGN ON AFFECTED REA AND REPLACE DAMAGED PARTS	New	1,000.00	500.00
SPRAY PAINTING, BLENDING ON AFFECTED AND SJACENT AREA	New	1,000.00	600.00
SPRAY ANTI-RUST COATING ON NEW AND FECTED PANELS	New	50.00	0.00
Gross Labour	r Cost (S\$)	2,330.00	1,280.00
	CHECK REAR ELECTRICAL WIRING SYSTEM COREMOVE AND REINSTALL REAR INTERIOR TRIMS, ARNISHES, ETC FOR NECESSARY REPAIRS COREMOVE, REPLACE AND REINSTALL REAR EVERSE SENSORS & CONTROL UNIT COREMOVE, REPLACE AND REINSTALL REAR EVERSE CAMERA COSTRAIGHTEN, REPAIR, REALIGN ON AFFECTED REA AND REPLACE DAMAGED PARTS COSPRAY PAINTING, BLENDING ON AFFECTED AND COSPRAY ANTI-RUST COATING ON NEW AND COSPECTED PANELS	CHECK REAR ELECTRICAL WIRING SYSTEM  O REMOVE AND REINSTALL REAR INTERIOR TRIMS, ARNISHES, ETC FOR NECESSARY REPAIRS O REMOVE, REPLACE AND REINSTALL REAR EVERSE SENSORS & CONTROL UNIT O REMOVE, REPLACE AND REINSTALL REAR EVERSE CAMERA O STRAIGHTEN, REPAIR, REALIGN ON AFFECTED O SPRAY PAINTING, BLENDING ON AFFECTED AND O SPRAY ANTI-RUST COATING ON NEW AND	CHECK REAR ELECTRICAL WIRING SYSTEM  O REMOVE AND REINSTALL REAR INTERIOR TRIMS, New 100.00  ARNISHES, ETC FOR NECESSARY REPAIRS  O REMOVE, REPLACE AND REINSTALL REAR New 80.00  O REMOVE, REPLACE AND REINSTALL REAR New 50.00  O REMOVE, REPLACE AND REINSTALL REAR New 50.00  O STRAIGHTEN, REPAIR, REALIGN ON AFFECTED New 1,000.00  O STRAIGHTEN, REPAIR, REALIGN ON AFFECTED New 1,000.00  O SPRAY PAINTING, BLENDING ON AFFECTED AND New 1,000.00  O SPRAY ANTI-RUST COATING ON NEW AND New 50.00  FECTED PANELS

< END OF ESTIMATES >