	ASS. REC. BY: REF: CS/FCI1702 4015 / Ard302 Special Instruction:
	Adrian Assignment (Office)
	From (Person): Lurene aw of FCI Date/Time: 5:19pm@ 18/12/1
`	Estimated Cost: Bill to:
	OD (TP) WS / TP RES / OD RES / EVA / INV / MV / CS
	To Inspect Vehicle No: SIC 1927 K Insured: SHA 8109 T
	at Workshop in/sMG Solution Tel: 67414165
	of 23 kaki Bukit Ave 4 # 02-03
	Policy No: Claim No: D1701159 6 MFSH
	Sum Insured: Excess:
	Make of Veh: (Client's Record) D.O.A. H 2 7
	CA / REV / REP. / REV 24 HRS (wp)
-	Date/Time: 10 15am@ 1910/12 Person Contacted: Ms. Heng Vehicle CODUT
	Date/Time Action/Instruction (TENAT
	Pending 10's VF to be submitted for Viewing
	Sic 19 24 K - X
	= SHA 8109 T - CS/GW09006915/TIc91 De A:14/10/17
	Sent preli through email
	lonfirm LIS \$1000, 5 days

From Deaz 1910 19 Vehicle S J C 1927 K A For Door Feb. Signature Cost Of Philis S J C 1927 K A For Door Feb. Truck 1 Trailler or Tr	REF: FCI						
Front: Date: 19/10/19 Edimercal Cost. 90 (FPMS) TPRES / OD RES / EVA / INV / INV To rispect Vehicle No. SIC 1927 K. As Signature Mover / Truck / Trailer or Truck / Truck / Trailer or Truck / Truck / T	Survivo	ASSIG	NMENT			Ø١	12 08.
Eginnated Cost. Description of Cost Substitution of Substitut	From: 19/12/17			SICK	727K 6	_{Rear.} ეებ	8 feb.
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Spreading JK T75 Seadin Insured Spreading JK T75			=	_			
Eng/No: Claim No. Claim				281775	TRa	idio: Insured /	Std / NI / NA
Claims No. Sum insured: Excess: Steering Morser Jammed Leaked Burnt or Mill SIRIM STO Alkin or Tyre Size: F: 2 05 60 Pul or Tyre Size: F: 2 05 or Tyre Size: F: 2 05 or Tyre Size: F: 2 05 or Tyre Size: F:	•	·	Eng/No:	1			
Steering Morder Jammed / Leaked / Burnt or Brake of Veh: Collegets Record Brake Mode of Veh; Profiler Jammed / Leaked / Burnt or	Policy No.		C/No:	JSA	94A 21500	116757	4
Collect's Record	Claims No.		Gen. Cond	ody Fair / Poo	r / Burnt	····	
Make of Ven: Pending 10 'S VF to be submitted for Viewing Tyre Size: F: 205 60 FL to	Sum insured: Excess:		Steering: Mord	er Jammed /	Leaked / Burnt	or	
Tyre Size: F: 205 60 ft 6 10 10 10 10 10 10 10	(Client's Record)		Brake: Frord	er Jammed /	Leaked / Burnt	or	
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Remark: The veh had commenced its repair at the time of inspection. Ball or Market Value: IDAC Accident Rport: 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 Person Contacted: Vehicle: IN / OUT Date Person Contacted: MV: 24 SK PV: 7.31C About 1 K Report Prefix Report Days Of Repair: Cets. Time Resears: Add Fee: Survey Rep. / Steins (S) Luza / Mic OHTSU / PIR / SUMI / TOYO / YOKO or Front Rear Rear R.Bal. D.O.A. DOI. / 9 12 17 DO.A. Doi. / 9 12 17 Des. of Damages: Frt / Rear / OIS / NIS / UIC / Rooftop or Front # S. UIC / Rooftop or The UIC / Chassis frame / Body Structure affected due to collision. MV: 24 SK PV: 7.31C About 1 K Researce Structure affected due to collision. Cets. Time Report Cets. Time Researce Structure Add Fee: Stress of Structure Tresscorator Tresscorator Structure Structure Add Fee: Stress of Structure Tresscorator Tresscorator Tresscorator Structure Structure Add Fee: Stress of Structure Tresscorator Tresscora	flending 10's VF to be submitted for vice	ewing	Tyre Size:	F:	205/6	0616	
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First Capital Insurance Limited

Company Reg. No. 195000106C GST Reg. No. M2-0001676-9

A FAIRFAX Company

MOTOR SURVEY ASSIGNMENT

Date

18-12-2017

Our Ref No. D17011596MFSH

Accident Date

14-12-2017

Claim Type. Third Party

Insured Vehicle

SHA8109T

Third Party Vehicle. SJC1927K

Survey Location

23 KAKI BUKIT AVE 4 AAS KAKI BUKIT CENTRE#02-03

Contact Person.

HENG YOKE HONG

Contact No.

67444165/0

Fax No. 67444604

Survey Type

WITHOUT PREJUDICE: LIABILITY UNCLEAR: PENDING ID'S VF TO BE

SUBMITTTED FOR OUR VIEWING.

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

MG SOLUTION PTE LTD

Attention, NIL

Cc: TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

LURENE

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

• •					
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Job Sḥeet (/(ClaimWS/Surveyor/JobSheet/	232031) 🚣 PF	RI Documents 😃 Close 🗶		
			PRI Header Details		
Claim No	D17011596MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & MG SOLUT
Workshop Name	MG SOLUTION PTE LTD (Contact Person : HENG YOKE HONG)	Survey Location & Contact Details	23 KAKI BUKIT AVE 4 AAS Mobile: 0 , Phone: 67444: EmailId: MG3SOLUTION@	165 , Fax: 67	
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: LIAE FOR OUR VIEWING.	BILITY UNCLE	AR: PENDING II
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHA8109T	TP Vehicle No	SJC1927K
PRI Recieved Date	18-12-2017 04:28:44 PM	Surveyor Appointed Date	18-12-2017 05:18:22 PM	Surveyor Accept Date	19-12-2017 10
			Survey Report Upload		
Surveyor Inspection Date *:		Surveyor Report Date	19-12-2017	Upload Survey Report *:	Choose File
			Vehicle Particulars	<u> </u>	, , me nam
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Surveyor Jo	ob Remarks				
Remarks			**************************************	Save	70.0



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

	ST CAPITAL INSU	RANCE LTD	Ref : CS/FCI17024015	/Ard3
	ROBINSON ROAD -01 CITY HOUSES	SINGAPORE 068877	Date: 19-12-2017	
	0,000		Code: FCI2	DY EN BYLORY BY A 10 TO 41 BYDD ALS 911
		Policy Particulars	:- THIRD PARTY CLAIM	
	Insured Veh.	SHA 8109T	Veh. Inspected	SJC 1927K
	Policy No.		Coverage (\$)	0.00
	Claim No.	D17011596MFSH	Excess (\$)	0.00
	Assign From	CWS (LURENE JAW)	Assign Date	19/12/2017
		Vehicle Parti	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	-	Steering	
	Brakes		Modification	· · · · · · · · · · · · · · · · · · ·
	General			, , , , , , , , , , , , , , , , , , ,
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	L/H Front Tyre			mm
	L/H Front Tyre R/H Rear Tyre	Descripti	on of Damages	mm mm mm
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	L/H Front Tyre R/H Rear Tyre L/H Rear Tyre	Description		mm mm
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	L/H Front Tyre R/H Rear Tyre L/H Rear Tyre	Genera	I Information	mm mm mm
	L/H Front Tyre R/H Rear Tyre L/H Rear Tyre Accident Date	Genera 14/12/2017	I Information	mm mm mm
	L/H Front Tyre R/H Rear Tyre L/H Rear Tyre Accident Date Survey held at	Genera 14/12/2017 MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933	I Information	mm mm mm

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Your Ref: <u>D17011596MFSH</u>

Our Ref: CS/FCI17024015/Ard3

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. <u>SJC 1927K</u>.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 19/12/2017 at the premises of M/s MG SOLUTION PTE LTD and have the following to report:-

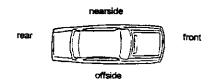
Workshop Estimate Amount Revised Estimate Amount "Check" Items Amount	: <u>S\$ 5,919.65 .</u> : <u>S\$ 3,799.65 .</u> : <u>S</u> \$.
Market Value	: <u>S\$</u>
LTA Reimbursement Value	: <u>\$\$</u>
Nett Value	: <u>S\$</u>

Description of Damage:

<u>The vehicle sustained damages</u>

<u>at front n/s portion. The undercarriage</u>

<u>affected due to collision.</u>



Yours faithfully ADRIAN LING Automotive Assessor

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 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.

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 Date Of Report
 15/12/2017 16:24

 Date Of Accident
 14/12/2017 23:45

Exact Location Of Accident FULLERTON CIRCLE TOWARDS CONNAUGHT DRIVE

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJC1927K

Insured/Policyholder

Name Of Registered Owner GLOWING ILLUSIONS

Co Reg No 53258778B
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-98711153
Alternative Phone No OFFICE-98711153

Vehicle Particulars

Manufacturer SUZUKI

Model SX4-1.6 HB (A)

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 PRIVATE HIRE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage THIRD PARTY

Fleet Policy NO

Policy Number 5082251004-01

Cover Note Number

Driver

 Name of Driver
 LI GUOWEI

 NRIC No
 \$8704120D

 Date Of Birth
 10/02/1987

 Occupation
 OUTDOOR

 Date Of Driving Pass
 15/11/2011

Driving Experience 6 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87481042

Fax Number

Contact Number OFFICE-87481042

EMail Address NOEMAIL

Address

Postcode

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

PAID DRIVER

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - HEAD ON COLLISION

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? NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.
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

ON 14.12.2017 AT ABOUT 2345 HRS AT FULLERTON CIRCLE TOWARDS CONNAUGHT DRIVE AT FULLERTON ROAD, I WAS TRAVELLING ON THE ABOVE MENTIONED CIRCLE TOWARDS CONNAUGHT DRIVE AND SUDDENLY A VEED ONTO MY VEHICLE (B) SHA8109T EXITED OUT FROM FULLERTON ROAD WITHOUT GIVING AND WITHOUT STOPPING FOR MY ON COMING TRAFFIC AND HENCE COLLIDED TO MY VEHICD ONTO MY LEFT FRONT PORTION OF MY VEHICLE CAUSING DAMAGES TO MY VEHICLE I HAVE 1 PASENGER INSIDE MY VEHICLE

Attachment(s)

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

Sketch Plan Pg. 1

SKETCH PLAN

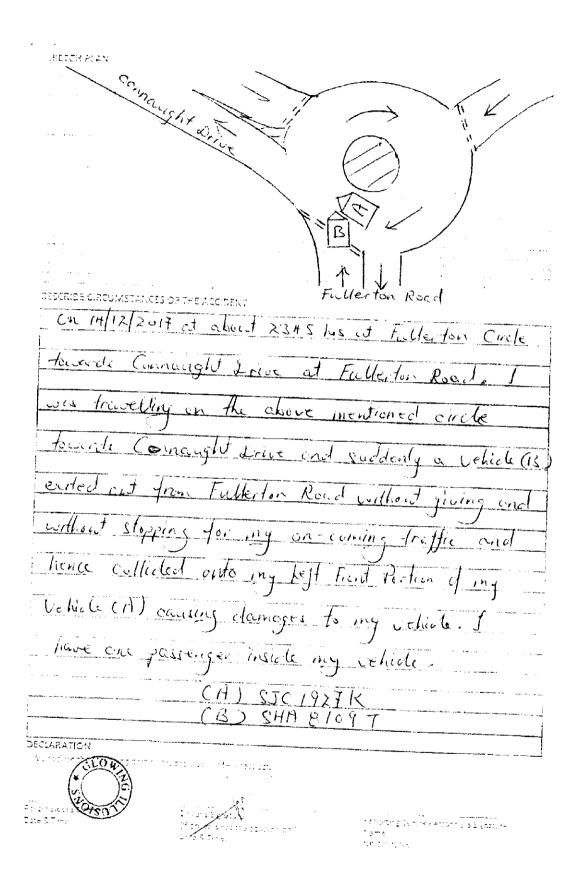
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 - Ing My insurer, my workshop and the General insurer se Association of Singapore (IGIA*) may are permitted to sallest use. disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided 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)
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ويروج وزاعاتك يستخشرون . Gio ⊈ Times

NEXT SINK



Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Owner ID Type: **Business** Owner ID: 8778B Vehicle Details Vehicle No.: SJC1927K Vehicle to be Exported: Yes Intended De-registration Date: 19 Dec 2017 Vehicle Make: **SUZUKI** Vehicle Model: SX4 1.6HB AT Primary Colour: Grey Manufacturing Year: 2007 Engine No.: M16A1344572 Chassis No.: JSAGYA21S00116757 Maximum Power Output: 75.0 kW (100 bhp) Open Market Value: \$13,348.00 Original Registration Date: 01 Feb 2008 First Registration Date: 01 Feb 2008 Transfer Count: 1 Actual ARF Paid: \$14,683.00 Intended PARF Rebate Details PARF Eligibility: Yes PARF Eligibility Expiry Date: 31 Jan 2018 PARF Rebate Amount: \$7,341.00 Intended COE Rebate Details 31 Jan 2018 **COE Expiry Date:** COE Category: A - Car (1600cc & below) COE Period(Years): 10 QP Paid: \$14,001.00 COE Rebate Amount: \$161.00 \$7,502.00 **Total Rebate Amount:**

The information contained herein is correct as at 19 Dec 2017

MG SOLUTION PTE LTD

23 Kaki Bukit Avenue 4 (South Wing) #02-03 Singapore 415933

Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376

Reg. No: 201427944N

Email: mg3solution@gmail.com

TO : FIRST CAPITAL INSURANCE LIMITED DATE : 16/12/2017

ATTENTION : MOTOR CLAIMS DEPT JOB TYPE : T/P CLAIM

ESTIMATE REPORT :

VEHICLE DETAILS

VEHICLE NO : SJC1927K

Janice

MODEL : SUZUKI SX4 1.6

CHASSIS NO

ACCIDENT DETAILS DATE : 14-Dec-17

TIME : 23:45HRS

THIRD PARTY REQUESTOR / CONTACT : JACK

CLAIM DETAIL: PARTS

S/N	DESCRIPTION	QTY	i	NIT LIST PRICE		TAL LIST PRICE	
1	FRONT BUMPER THE	1	\$	630.00	\$	630.00	_
2	FRONT BUMPER SIDE RETAINER	1	\$	55.00	\$	55.00	-
3	FRONT BUMPER GUARD De L	1	\$	162.00	\$	162.00	۷.
4	HEADLAMP Could	1	\$	355.20	: \$	355.20	L
5	FRONT FENDER TELES	1	. \$	288.00	\$	288.00	۔
6	FRONT FENDER INNER COWLING Det	1_	\$	60.00	\$	60.00	
7	FRONT FENDER GUARD	1	\$	180.00	\$	180.00	_
8	FRONT KNUCKLE ARM	1	\$	260.00	\$	260.00	س
9	FRONT KNUCKLE ARM BEARING 196	1	\$	133.00	\$	133.00	_
10	FRONT SHOCK ABSORBER Bet	1	\$	280.00	\$	280.00	_
11	FRONT LOWER ARM	1	\$	230.00	\$	230.00	_
12	FRONT WHEEL HUP Ford	1	\$	233.00	\$	233.00	_

TOTAL PRICE \$ 2,866.20

LESS 25% \$ 716.55

SUB TOTAL PRICE \$ (2,149.65

SPECIAL NETT ITEMS

S/N DESCRIPTION QTY UNIT S/NETT TOTAL S/NETT

1 FRONT BUMPER CLIPS(SET) ~~	1 1	\$ 20.00 \$	20.00
2 FRONT FENDER INNER COWLING CLIPS(SET) ~~	1	\$ 20.00 \$	20.00
3 FRONT WHEEL TYRE	1	\$ 550.00 \$	550.00
4 FRONT WHEEL RIM المعادلة	1	\$ 800.00 \$	800.00 400

24)

TOTAL

\$

1,390.00

CLAIM DETAILS: LABOUR AND SPRAY PAINTING

	PANEL BEATING, REMOVING AND REPLACING PARTS	\$800.00	500	
2	SPRAY PAINTING TO AFFECTED AREA	\$1,000.00	400	
3	WIRING CHECK	\$100,00	1 30	
4	TUFF COAT	\$ 120.00	×	
5	REMOVE AND REFIX UNDERCARRIAGE	\$280.00	(د پ	
6	FOUR WHEEL ALIGNMENT	\$ 80.00	/	

TOTAL

\$2,380.00

1210

ESTIMATE REPORT

TOTAL PARTS COST : \$ 3,539.65 TOTAL LABOUR COST : \$ 2,380.00 TOTAL REPAIR COST : \$ 5,919.65 Adrin Lij 19/12/17. 1/s 1k. 050mp

+951 -

APPROVED DETAILS

EXCESS NO. OF DAYS RE-SURVEY

PART BY PART OR LUMP SUM :

DATE & TIME OF SURVEY SURVEYED BY CONTACT NUMBER FAX NUMBER

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display dan lated partis- during resurvey
- Parts prices a spect to confirmation.
- Third party survey is on a "Without Frejudice" basis.
- No allegar modification spis altriwed.
- Supplementary item is industrie resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



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

in the		Affiliated to Federation Internal	ionale Des Experts En Auton	nobile
FIRS	T CAPITAL INSU	RANCE LTD	Ref: CS/FCI170240	15/Ard3e2
	OBINSON ROAD 01 CITY HOUSES	INGAPORE 068877	Date: 25-01-2018 Code: FCI2	
134		Policy Particular	s:-THIRD PARTY CLA	M: 3 3 3 3 4 7 3 4
	Insured Veh.	SHA 8109T	Veh. Inspected	SJC 1927K
	Policy No.	D-15072702MFSH	Coverage (\$)	0.00
	Claim No.	D17011596MFSH	Excess (\$)	0.00
	Assign From	LURENE JAW	Assign Date	18/12/2017
2.		Vehicle Par	ticulars & Condition	
	Make & Model	SUZUKI SX4	c.c	1586
	Engine No.	HIDDEN	Year of Reg.	2008
	Chassis No.	JSAGYA21S00116757	Colour	GREY
	Odometer	281775	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	GOOD	-	
3.		Cond	itions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	205/60 R16	MICHELIN	6 mm
	L/H Front Tyre	205/60 R16	MICHELIN	6 mm
	R/H Rear Tyre	205/60 R16	MICHELIN	6 mm
	L/H Rear Tyre	205/60 R16	MICHELIN	6 mm
4.1			tion of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE F	RONT N/S AND UNDERCA	ARRIAGE PORTION.
	DAMAGES SEE D			
5.		Genei	ral Information	
	Accident Date	14/12/2017	Inspection Date	19/12/2017
	Survey held at	MG SOLUTION PTE LTD		
		23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRI SINGAPORE 415933	E, 	_
5a.			Remarks	
	A)DAMAGES CON B)THE INSPECTION	ISISTENT TO ACCIDENT REPO ON WAS CONDUCTED ON A'W CE TO YOUR INSTRUCTIONS,	(ITHOUT PREJUDICE" BAS	SIS. SED REPAIRS.
5b.		The state of the s	e Days of Repair	
	TECTIMATED NOD	MAL PERIOD FOR REPAIR:	5 Working Day	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJC 1927K

Qty,	Description of Parts	Condition:	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	DEFORMED	630.00	630.00
1	FRONT BUMPER SIDE RETAINER	DAMAGED	55.00	55.00
1	FRONT BUMPER GUARD	DEFORMED	162.00	162.00
1	HEADLAMP	CRACKED	355.20	355.20
1	FRONT FENDER	DISTORTED	288.00	288.00
1	FRONT FENDER INNER COWLING	DEFORMED	60.00	60.00
1	FRONT FENDER GUARD	DEFORMED	180.00	180.00
1	FRONT KNUCKLE ARM	BENT	260.00	260.00
1	FRONT KNUCKLE ARM BEARING	NECESSARY	133.00	133.00
1	FRONT SHOCK ABSORBER	BENT	280.00	280.00
1	FRONT LOWER ARM	BENT	230.00	230.00
1	FRONT WHEEL HUP	DAMAGED	233.00	233.00
	LESS 25% DISCOUNT		-716.55	-716.55
			2,149.65	2,149.65
	SPECIAL NETT ITEMS			
1	SET FRONT BUMPER CLIPS (SN)	NECESSARY	20.00	20.00
1	SET FRONT FENDER INNER COWLING CLIPS (SN)	NECESSARY	20.00	20.00
1	FRONT WHEEL TYRE (SN)	NOT NECESSARY	550.00	-
1	FRONT WHEEL RIM (SN)	СИТ	800.00	400.00
			1,390.00	440.00
	LABOUR			
	PANEL BEATING, REMOVING AND REPLACING PARTS.		800.00	500.00
	SPRAY PAINTING TO AFFECTED AREA.		1,000.00	400.00
	WIRING CHECK.		100.00	30.00
	TUFF COAT.	NOT NECESSARY	120.00	-
	REMOVE AND REFIX UNDERCARRIAGE.		280.00	200.00
	FOUR WHEEL ALIGNMENT.		80.00	80.00
			2,380.00	1,210.00
	GRAND TOTAL		5,919.65	3,799.65

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RECOMMENDED COST OF LUMP SUM REPAIRS (1000,000) (TO ITS PRE-ACCIDENT CONDITION)

Report Ref No. CS/FCI17024015/Ard3e2

MARKET VALUE: \$8,500.00 (EST)-PAPER VALUE: \$7,500.00=NETT VALUE: \$1,000.00



ADRIAN LING WAI PING

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

Licensed Appraiser

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