22/03/2002 ASS. REC. BY:	REF:053/MSG17024045/W	Maga Special Instruction:
From (Person): Estimated Cost OD TP WS To Inspect Veh at Workshop m	Mison Assignment (Office) Monica Chung of MSIG Bill to: TYP RES / OD RES / EVA / INV / MV / CS sicle No: SDT 9642K Twin Car Automotive	
of BIK 2 Policy No: A Sum Insured: Make of Veh: (Client's Record) CA / REV /	Kaki Bukit # 01-17 [18] 217921 28 695028QMX Claim No: Excess:	D.O.A. 16/12/2017 H.O.D. Endorseasent
Date/Time	Action/Instruction (X) Estimate SDT9642K - NA INC 7023988/24 SJL 688C - NA INC 7023988/24 Dismantle Purt: 21122018	D:0:A : 16/12/17 D:0:A : 16/12/17

William William	
<u>.</u>	SSIGNMENT
From Date . Estimated Cost	Type M.Carl M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
To Inspect Vehicle No. SD7 9642K	Mars Dissoulation : 1498
et Workshop mis Town Com	Colcur AC Insured / Std / N/ NA
ph.	Sp Reading 218602 TRadio Insured / Std / NI / NA
Insured	Eng No
Policy No.	CNO INIBHACIIZSSS9063
Claims No.	Gen Cond Good (East Poor / Burnt
Sum Insured Excess	Steering Morder / Jammed / Leaked / Burnt or
(Client's Record)	Brake Inorder / Jammed / Leaked / Burnt or
Make of Veh.	Mode NifestRim I STD A/Rim or
V	Tyre Size F: 195/60215
(Palicy Condition)	N. 195/60RIT
Remark: The veh had commenced its N/S OR repair at the time of inspection.	- COLDON LEVINOAN OLI LES LIEM MIC LOUISO LEM SOMI
	TOYO/YOKO or Webstley
Ball of Market Value	Eront Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal 2 mm R/Bal 2 mm
GIA PR Seen Consistent?: Yes or No	L/Bal. 2 mm L/Bal. 2 mm
Est Repairs. days Res. Yes or No	DOA (6/12/201 20/12/201-
Lum Sum: % 3 Val Yes or No	Survey held at , As Alsoce
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear O/S N/S U/C Rooftop or
Date: Person Contacted	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction -	
Rouge \$	4900 - R 5900
	I Days Resource
	mante.
RECEIVED 0 6 APR	2018
: Preli. Report	Days Of Repair:
060LLM8 : Final Report	Resurvey No. of Trip: Survey Fee 120
Add F	
Addi	Interview (\$ Press
Report Format : PR9	Tech lavs \$ 100
Lump Sum / I.B.I: (\$	Weakend S

180

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

	FOLDER TRACK	Est Submitted	Adi Assigned	Adi Rpt	Adj Submit	tted 1	ns Auth ed	Status	
Main	18 Dec 2017	Lat Salutiness	19 Dec 2017 13:44 Assign					New As	signment Case
	Main	Refere	ence	Claim	Details	D	ocuments		Show All
CLAIM S	UBFOLDER DET	AILS					[Created	by insurer]	
Insured:		CHENG KOK	WAH, ID: S17	40183A, Te	l: +6597553289				
Main Clain	nant:	DAVID TPT	Co. Reg. No.:		CHANGE COUNTY		1	- +0.00 FO	
Vehicle Re	g. No.:	SDT96421	<	Dat	e of Loss:			7 10:00 - :59	CONTRACTOR
Claim Typ	e:	TP / 5413	48		cy/Cover Note No	100,00	A28695028QMX (Comprehensive) Coverage: 01/03/2017 - 28/02/20		
Vehicle Re	eg. No. (Insured):	SJL1688C		Poli	cy No. (Claimant)	:			
					ess:			DUNIT NUTON	ID 417031
Repairer:		Vaki Bukit -	Tel·		t) BLK 2 KAKI BU				
Handling	Insurer:	7hon - 6594	25521		(HQ) - Tel: +65 (
Adjuster:		LKK Auto C	onsultants Pte	Ltd (HQ) - To	el: 6256-3561	[Imm.A	dvice due	20/12/2017	1
Driver/Cu	stodian (Insured)		WAH (51 / Male)		740183A, Tel: +	+6597553	289		
Adj Asg. I	Remarks:	Third Party F	re-Repair Surve	У					
ASSOCI	ATED MAIL REC	EIVED					Vie	w All Compo	se Case Mail
There are	no mail for this o	ase.							
ALL ASS	OCIATED TASK	(SE			View A	II Searc	h Tasks C	reate New Task	Complete
Due Da			oup Subject	Handler	Assigned By	Con	pleted On	Created O	n Done

Margaret Loh

From:

Woon Choo Kwok

Sent:

Tuesday, 19 December, 2017 10:07 AM

To:

Monica Chung; Margaret Loh

Cc:

Christopher Chionh; Foo Ai Ngoh; Jason Sim

Subject:

FW: SDT9642K & SJL1688C - NOTICE TO INSURER TO CONDUCT PRE-REPAIR

INSPECTION WITHIN 3 WORKING DAYS

Attachments:

18122017174228-0001.pdf

Dear MC & ML,

FYA

Best Regards

Kwok Woon Choo

Senior Administrative Officer, Claims Services

Direct line +65 6643 1330 | Direct fax +65 6225 7402 | woonchoo_kwok@sg.msig-asia.com



MSIG



Insurer Claims Team of the Year

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220

9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg

A Member of MS&AD INSURANCE GROUP

From: Agnes Lee

Sent: Tuesday, December 19, 2017 9:30 AM

To: Woon Choo Kwok < WoonChoo_Kwok@sg.msig-asia.com>

Subject: FW: SDT9642K & SJL1688C - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3

WORKING DAYS

From: Chin Hui Xin [mailto:huixin@n51.com.sg]

Sent: 18 December 2017 17:47

To: Claims < claims@sg.msig-asia.com>

Subject: SDT9642K & SJL1688C - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING

DAYS

Dear Sir/Madam,

As per above subject,

Please refer attachment and:-

Kindly propose / provide your 10 surveyors.

Thank you...

Regards,	
Melody Chin	
TWINCAR Automotive Pte Ltd	
Office: 6842 0051	
Fax: 6741 0510	
www.n51.com.sg	
	1
L.	

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.

TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit Autohub

2 Kaki Bukit Ave 2, #01-17

Singapore 417921

Tel No.: +65 6744 0510 / 6842 0051 Fax No.: +65 6741 0510

Company Reg. No.: 200714616M GST Registration No.: 200714616M

Our Ref:

SDT 9642 K

Your ref:

SJL 1688 C

18 December 2017

MSIG INSURANCE(SINGAPORE) PTE LTD 4 SHENTON WAY #21-01 SGX CENTRE 2 SINGAPORE 068807 Attn: Motor Claims Department

BY FAX 6827-2708 & EMAIL : claims@sg.msig-asia.com

Dear Sir/Madam,

DATE OF ACCIDENT: 16 Dec 2017

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by DAVID TPT to notify you of a road traffic accident on 16 Dec 2017 at about 10:50 HOURS At BENCOOLEN ST MIDDLE RD (OUTSIDE BARLINGTON SQUARE) involving our client's vehicle SDT 9642 K & SJL 1688 C driven by you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,

OF PACHIA

Twincar Automotive Pte Ltd

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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.

- 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	18/12/2017 18:22
Date Of Accident	16/12/2017 10:50
Exact Location Of Accident	BENCOOLEN ST TWDS MIDDLE RD (OUTSIDE BURLINGTON)
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SDT9642K
Insured/Policyholder	
Name Of Registered Owner	DAVID TPT
Co Reg No	53324419J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91065441
Alternative Phone No	OFFICE-91065441
Vehicle Particulars	
Manufacturer	NISSAN
Model	LATIO 1.5L T
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088333907
Cover Note Number	

Driver

NG HENG HENG Name of Driver NRIC No S1731298G Date Of Birth 30/06/1965 OUTDOOR Occupation 06/11/1985 Date Of Driving Pass 32 YEARS AND 1 MONTH **Driving Experience** MALE Gender (LOCAL) +65-91012166 Mobile Number

Fax Number

Contact Number OFFICE-91012166

EMail Address NOEMAIL

Address

BLK 418 CHOA CHU KANG AVENUE 4

#04-294

Postcode

680418

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

23

Insurance Company of Driver's Own Vehicle

_

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident?

NO 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)

3

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

REFER TO 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

SJL1688C

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name

NG HENG HENG

Approximate Age

. . .

Injuries Sustain

BODY

Injured person in which vehicle?

SDT9642K

Were seat belts worn?

YES

Was injured conveyed to hospital by ambulance?

NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Drivet.
- 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
- 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
- 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,
 - (iii) investigating the accident and/or my claims;
 - (hii) 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 end/or dealing with my claims (collectively the Purposes 1
 - (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
 - 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/taw 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

DAVID TPT Reg: 53324419J

Policyholder's Signature Date & Time

Driver's Signature

(if driver is not the policyholder)

Date & Time:

el's Signature Reporting Centre P Name

NRIC/FIN NO.

Accident Sketch Plan

SKETCH PLAN	Benson	len st	Towns	d wadd	e Re	mel (Outside Bo	inlington	Signing).
-)						A-507 964	2.4.	
+	16	ď		t c		B-556 1688C		
4				<u>←</u>				

OF CIRCUMSTANCES OF THE ACCIDENT

.

On the above date	and there I was diving along Benevalon St town
Millie mul on te	I live of a 4 lanes read. Somewhere of Burlingto
Square, vehicle B.C.	SOL 1688() that was towelling on the left (on my
left side), Sulden.	y full-tered to the right, without my skynal than
encrouching into my	path I sounded the horn at vehicle (B) however,
volide (B) contigued	to filtered. As result, the right portion of vehicle/B
collided and the let	ff portion of my rehiale.
A-607 4642K	
B-576 1688C	

DECLARATION

Reg: 58324419J

Parentoiser's Signature "Date & Time:

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

Reporting Centre Personnet's Signature Name: NRIC/FIN No

Merimen e-Claims

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

Case N	otified	Est Submitted	Adj Assigned	Adj Rpt	Adj	Submitted	Ins Auth'ed	Status		
Main 1	8 Dec 2017		19 Dec 2017 13:44 Edit Adj Rpt	S\$0.00 Edit Estim	concessor District	0.00 liew Rpt		Report	Pending for Survey Report Cancel Case	
м	ain	R	eference	Clai	im Details		Documents		S	show All
CLAIM SUB	FOLDER DE	TAILS		William Property and the Parket		[Created	by insurer]			
Insured:	CHENG K	OK WAH, ID: S	1740183A, Tel: +6	5597553289						
Main Claimant:	DAVID TE	T, Co. Reg. No	: 533244193							
/ehicle Reg. No.:	SDT964	2K		D	ate of Loss:		7 10:00 - :59 hs and 2 Days Fro	m LTA Reg	Date (N	ا(۱۹۸ Yr
Claim Type:	TP / 541	348		100	olicy/Cover lote No.:		QMX (Compreher 01/03/2017 - 28/			
Vehicle Reg. No. (Insured):	SJL16880	:			olicy No. Claimant):					
Ayer on without the				E	xcess:					
Repairer:	Twincar /	Automotive Pte	Ltd (Kaki Bukit) Bl	K 2 KAKI BUK	IT, #01-17	/18 KAKI BUK	IT AUTOHUB, 41	7921 Kaki B	ukit - T	el:
Handling Insurer:			ore) Pte. Ltd. (HQ)							
Adjuster:	20/12/2		e Ltd (HQ) - Tel: 62	256-3561 [1	Handled by "	Teo Cheng M	ling Wilson] [Imm.Ad	vice d	ue
Driver/Custo dian (Insured):		OK WAH (51 / Mai	e), NRIC: S174018	83A, Tel: +6	597553289	(0)				
Adj Asg. Remarks:	Third Part	y Pre-Repair Surv	еу							
ASSOCIATE	D MAIL RE	CEIVED					Vie	ew All C	ompose	Case Ma
There are no	mail for this	case.								
ALL ASSOC	IATED TAS	sks⊟				View All S	Search Tasks C	reate New T	Task	Complet
Due Date	Priority	Type Tasi	k Group Subjec	ct Handle	Assig	ned By	Completed On	Creat	ed On	Done

Claim Documents

*SDT9642K (541348)

[SJL1688C]

TP

DAVID TPT

Dec 16 2017 10:00AM

[CHENG KOK WAH]

Twincar Automotive Pte Ltd

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9	06/04/18 11:08	General View	1 Load	IPG	✓
10	06/04/18 11:08	General View	1 Load	IPG	V
11	06/04/18 11:08	General View	1 Load	JPG	✓
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50	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	~
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52	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	4
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54	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	V
55	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	✓
56	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	V
57	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	V
1038	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	V
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	06/04/18 16:23	Photographs of Damaged Parts	0	Load JPG	V
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No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnai	
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2	19/12/17 12:01	TP PRI	•	-	+
3	19/12/17 13:43	TP LIST OF SJE & OUR REJECTION REPLY & NOMINATED LKK		Load PDF	A .
4	19/12/17 15:29	TP LETTER DD 19.12.17 OI VIDEOS IN X:\For Motor Section Only\Video\541348	0	Load PDF	

Documents Checklist

Reset	Save	Print
		-
		,
	- Nadas	Thurst Street

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/MSG17024045/WD3E2

Date:

09/04/2018

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

A28695028QMX

Claimant Vehicle SDT9642K No:

Insured Vehicle No:

SJL1688C

Date of Loss:

16/12/2017

Nature of Claim:

TP

Claim No: 541348

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SDT9642K

Make & Model:

NISSAN LATIO, 1.5 L (A)

Engine No:

HR15248648A

Reg. Date:

14/06/2008 (Man. Year: 2007)

Chassis No: Odometer:

JN1BAAC11Z0009063 218602 km

Colour:

White

1498 cc

Engine Capacity: 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):

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

195/60 R15

Rear Tyre Size:

195/60 R15

Front Left Side:

Michelin 2 mm

Rear Left Side:

Michelin 2 mm

Front Right Side:

Michelin 2 mm

Rear Right Side:

Michelin 2 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	110.007.00.07.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

19/12/2017

Date Inspected:

20/12/2017 Inspected At:

Twincar Automotive Pte Ltd (Kaki Bukit) BLK 2 KAKI BUKIT, #01-17/18 KAKI

BUKIT AUTOHUB Singapore 417921

Estimated Period of Repair:

0.0 days

Adjuster: Teo Cheng Ming Wilson Manager:

Nivitha Govindasamy

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.

Adjuster Report Page 2 of 4

A)THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.

B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.

THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.

C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$4,900.00 -\$5,900.00

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 09 Apr 2018)

Parts:

NISSAN LATIO 1.5 L (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SDT9642K)

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

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >