

Survivor: Amk

ASSIGNMENT
DOI: 2/1/18

Date / Time: 26/1/18

Registered in Merimen: 3/1/18

Pre-assign / CCU / FTE



Insured Vehicle No.: SLQ 5095L
Name of Insured: Moresafe
Insured Tel No.: _____ HP: _____
Excess Sec II :SS _____ D.O.A.: 29/12/17

Claim No.: 078 580428956
Policy No.: 12000 28326
Make / Model: GIA MEO
Place of Accident: Have lock rd going to turn Key Meow St.

Is driver the owner? (YES / NO) _____ Nature of Accident: _____
If NO, Driver Name / Age: Lim Ka Shun
Driver Tel No.: 98261886 (V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability: % _____ Final? Yes / No

SHD 4642E



INSRS: _____
WSP: 0066 (0404)
Tel: _____
Liability: _____
RMKS: _____



INSRS: _____
WSP: _____
Tel: _____
Liability: _____
RMKS: _____



INSRS: _____
WSP: _____
Tel: _____
Liability: _____
RMKS: _____



INSRS: _____
WSP: _____
Tel: _____
Liability: _____
RMKS: _____

Date/Time	STAGE	DATE / PIC
<u>5/1/18</u>	Non-Reporting ltr (1st):	
<u>26/1</u>	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
<u>11/01/2018 @ 12:30 pm</u>	Call OI: <u>3 11 01 2818</u>	
	After call ltr to OI: _____	
<u>29/01/2018</u>	Documentation Check List:	Handler Typist
	Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
	After call ltr to OI:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Authorisation To Act:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Towing Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	LTA / GIA:	<input checked="" type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD:	<input type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>

RECEIVED 5 JAN 2018

PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____
FINALIZATION	Date/Time: _____	Confirm with: _____
Repair Cost: S\$ _____	(_____ days) Reduction: _____ %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: <u>26-01-2018</u>	Confirm with: <u>CE0119</u>
Final Liability: % <u>100</u>	(Agreed / Assessed) BOLA S/N No.: <u>15</u>	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Repair Cost: (with ST) S\$ <u>3,156.50</u>		If NO or B 28, Ass. Lia: <u>OIO changed ions and worked with TP</u>
Loss of Rental (LOR): S\$ <u>490.28</u>	(<u>4.5</u> days) x <u>108.95</u>	
Loss of Use (LOU): S\$ _____	(\$ _____ x _____ days)	
Loss of Income (LOI): S\$ <u>225.00</u>	(<u>50.00</u> x <u>4.5</u> days)	
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input checked="" type="checkbox"/>	[Tick only one]	
GIA/LTA Search: S\$ <u>7.99</u>		
Medical: S\$ _____		
Disbursement: S\$ _____	(e.g. Tow/Independent)	1) Claim status: <u>Normal/Reject/Private Settle</u>
Legal Cost: S\$ _____		2) Report Format: <u>TP</u>
Total: S\$ <u>3,879.27</u>	Global Sum S\$: <u>3,270.00</u>	3) Survey fee: <u>1320 + \$ 20.00</u>
FINAL PAYMENT	Date/Time: <u>26-01-2018</u>	Confirm with: <u>CE0119</u>
Payee 1: S\$ <u>3,870.00</u>	Name 1: <u>Comfast Design Engineering Pte Ltd.</u>	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Payee 2: (Strike if N.A.) S\$ _____	Name 2: _____	
Payee 3: (Strike if N.A.) S\$ _____	Name 3: _____	

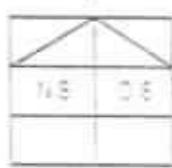
30/01/18

Kalvin

ASSIGNMENT

SHD 4642E 6 Jun 2013

Make: _____
 Model: _____
 Year: _____
 Color: _____
 VIN: _____
 License: _____
 Mileage: _____
 Date: _____
 Time: _____
 Location: _____
 Inspector: _____
 Status: _____
 Remarks: _____
 Policy No: _____
 Claim No: _____
 Sum Insured: _____
 Excess: _____
 Date of Loss: _____
 Policy Condition: _____
 Remark: The veh had commenced its repair at the time of inspection.



Type: Sedan / Coupe / Bus / Van / Utility / Truck / Trailer
 Year: 1997
 Color: Blue
 By Reading: 292963
 Eng No: _____
 O No: KMHET41VMOA8J46K7
 Gen. Cond: Good / Poor / Burnt
 Steering: Inop / Jammed / Leaked / Burnt
 Brakes: Inop / Jammed / Leaked / Burnt
 Mod: Nil / S/Rim / S/D / A/Rim
 Type Gas: 215/60R16
 BS / DUN / EXNOVA / GY / PS / LIZA / M / O / HTS / PR / SUW / TOYO / YOKO
 Tires: 7 (Front) / 7 (Rear)
 LUB: 7
 D.O.A: 29/12/7
 Survey recd: (NE (L))
 Date of Damages: Front / Rear / OS / NS / UO / Roofed
 The UO / Chassis frame / Body Structure affected due to collision

Ball or Wheel: _____
 DAD Accident: _____ Consistent? Yes or No
 SA - RR Seen: _____ Consistent? Yes or No
 Est. Repair: 2 days Res: Yes or No
 LUB: 20 % Oil: Yes or No
 QA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

(L sum: \$ 2,750.00 / Red: \$ 3,027.44 / 51% ^{Ask 4%})

surveyor's recommended days (2 days) + (1 public holiday) + (2 weekends) = 5 days.

See The Report: Prel. Report Final Report
 Days Of Repair: _____
 Resurvey No. of Trip: _____
 Add Fee: _____
 Repair Format: _____
 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

Affiliated to Federation Internationale Des Experts En Automobile			
AIG ASIA PACIFIC INSURANCE PTE LTD		Ref : CC3/AIG18000129/K1ka3	
78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120		Date : 03-01-2018	
		Code : AIG	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLQ 5095L	Veh. Inspected	SHD 4642E
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	03/01/2018
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			
5. General Information			
Accident Date	29/12/2017	Inspection Date	02/01/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

Our Job Ref No : 305102661

Date : 02/01/18

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHD4642 E

29/12/2017

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: AIG SLQ5095L

2. The finalized amount shall be:

(a) Spare Parts after List discount: _____

(b) Labour Charges: _____

Total for Part-By-Part Repair Cost _____

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20% _____

Final Lumpsum Repair cost \$2,950.00

3. Estimated normal period for repairs: 2 working days.

4. **We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature :  _____

Signature :  _____

Name : CHIANG

Name : Kalvin

Tel : 62148314

Date : 10/1/18

Fax : 65468156

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

AigAsia - (45)
 DATE 2/1/2018 10:19

LC

VEHICLE NO : SHD 4642E

MAKE :

LKK - Kalvin

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bonnet <i>- part</i>			\$ 1,151.80
	Front Bumper Cover <i>- part</i>			\$ 538.80
	Front Bumper Sponge <i>X₁₀₀</i>			\$ 136.30
	Front Bumper Reinforcement <i>X₁₀₀</i>			\$ 504.10
	Front Bumper Grille (RH) <i>X₁₀₀</i>			\$ 17.60
	Front Bumper Bracket Top (RH) <i>X₁₀₀</i>			\$ 22.40
	Front Bumper Protector (RH) <i>- 14</i>			\$ 29.20
	Headlamp Support Panel Assy <i>X₁₀₀</i>			\$ 1,023.00
	Headlamp (RH) <i>- front front</i>			\$ 797.90
	Front Fender (RH) <i>- part</i>			\$ 593.00
	Front Fender Shield (RH) <i>X₁₀₀</i>			\$ 86.00
	Front Fender Retainer <i>X₁₀₀</i>			\$ 9.20
	SUB TOTAL			\$ 4,909.30
	LESS 20%			\$ 981.86
	DISCOUNTED TOTAL			\$ 3,927.44
	Labour Charge			<i>600</i>
	Panel Beating			\$ 1,200.00
	Spray Painting Charge			\$ 600.00 <i>540</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	Tuff Kote			\$ 50.00 <i>20</i>
	Remove/Refix Aircon & Refill Gas			\$ 150.00 <i>X₁₀₀</i>
	TOTAL LABOUR			\$ 2,050.00
	ESTIMATE TOTAL			\$ 5,977.44

*Kalvin LKK
 A 2/1/18 14:00hr.
 2 Days
 45
 After Repair photo*

LKK Auto Consultants hence notify the Repairer of the following:
 • To involve in the after spray painting
 • To do daily detail work during recovery
 • Parts prices are correct through market
 • Third party surveyor's (Motor) must be there
 • No insurance claim after 3 days
 • Supplemental claim must be submitted
 is subject to the insurance policy conditions

Acknowledged: _____
 Signature: _____

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

LKK

member of COMFORT DELGRO

Date/Time: 02:01:2018 08:25 Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO:305102661

TOMER VS COMFORT TRANSPORTATION PTE LTD TOMER NO 7010045 ADDRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (R) (C) (P)	REGN NO. SHD4642E	MILEAGE
	MAKE HYUNDAI	FUEL E.....1/2.....F
	MODEL SONATA 30	DATE/TIME IN 12.2017 03:25
	YR OF MANU 06.06.2013	TARGET DATE
	CHASSIS CODE KMHE141VMDA834647	COMPLETION DATE/TIME:

JOINT CARD NO.

JOB DESCRIPTION

Accident Date: 29.12.2017
NATURE: 3P 29.12.17

ATG

1/NO LABOR CODE DESCRIPTION

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR		CUSTOMER'S SIGNATURE	
Wedgement Slip No.: SHD4642E CHIANG	Exit Pass Vehicle No.: SHD4642E		
Signature/Date returned to Service Reception upon collection	Name of Service Advisor To be kept by Security Guard	Date	

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

AigaAsia - 45

LC

VEHICLE NO : SHD 4642E

DATE 2/1/2018 10:19

MAKE :

LKK - Kalvin

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bonnet ✓			\$ 1,151.80
	Front Bumper Cover ✓			\$ 538.80
	Front Bumper Sponge ?			\$ 136.30
	Front Bumper Reinforcement ?			\$ 504.10
	Front Bumper Grille (RH) ?			\$ 17.60
	Front Bumper Bracket Top (RH) ?			\$ 22.40
	Front Bumper Protector (RH) ✓			\$ 29.20
	Headlamp Support Panel Assy ?			\$ 1,023.00
	Headlamp (RH) ✓			\$ 797.90
	Front Fender (RH) ✓			\$ 593.00
	Front Fender Shield (RH) ✗			\$ 86.00
	Front Fender Retainer ✗			\$ 9.20
	SUB TOTAL			\$ 4,909.30
	LESS 20%			\$ 981.86
	DISCOUNTED TOTAL			\$ 3,927.44
	Labour Charge			
	Panel Beating			\$ 1,200.00 ⁶⁰⁰
	Spray Painting Charge			\$ 600.00 ⁵⁴⁰
	Wiring Charge			\$ 50.00 ²⁰
	Tuff Kote			\$ 50.00 ²⁰
	Remove/Refix Aircon & Refill Gas			\$ 150.00 [!]
	TOTAL LABOUR			\$ 2,050.00
	ESTIMATE TOTAL			\$ 5,977.44

Kalvin LKK
2/1/18 1410hrs
2 Days
45
After Repair photo

LKK Auto Consultants hence notify the Repairer of the following:

- To reserve del. when spray painting
- To display damage to parts during survey
- Parts prices are fixed to market rate
- Third party survey is a matter of opinion based
- No illegal practices are allowed
- Supplemental repair work is subject to final approval of the insurance company

Acknowledged by Repairer

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition		
1. Date: <u>30.12.2017</u> Time Received: _____ 2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : <u>AZALI BIN ERUDAGAN</u> Contact No. <u>98179427</u> Vehicle No. <u>SHD4642E</u> Make/Model/Colour : <u>sonata</u> Email : _____	3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up
7. Location: <u>798 Yishun King Rd</u>	5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	6. Parts Replaced/Remarks: _____ _____
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____	8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi	
10. Odometer Reading : _____ Fuel Level : <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E	11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested	<p># : Cracked X : Dented / : Scratched O : Missing</p>
Job Attended		
12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input type="checkbox"/> QA <input type="checkbox"/> GAO <input type="checkbox"/> TZ <input checked="" type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS Name of Driver : <u>Fang Jim Lie</u> Vehicle No. : <u>Y1284801</u> Time Dispatch : <u>3:28</u> Time of Arrival : <u>3:47</u> Time Completed : <u>4:22</u>		TOWING <p>Signature of Customer</p>
Cash Invoice Details (if applicable)		
13. Cash Invoice No. : _____		
Customer Acknowledgement		
a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc. b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses. c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.		
<u>30.12.2017</u> Date	<u>4:00</u> Time	<p>Signature of Customer</p>
14. WORKSHOP		
_____ Name of Attending Staff/Guard	_____ Date & Time of Arrival	_____ Signature of Attending Staff/Guard

Our Ref : T 1217 / SHD4642E /CL(st)
 Your Ref: _____
 Date : 16-Jan-18

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road Singapore 579701

CDGE Taxi Claims Dept
 59 Loyang Drive 4th Flr
 Singapore 508969

Mainline +65 6383 6280
 Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199600489V

Workshops

Braddell
 205 Braddell Road
 Singapore 579701

Loyang
 59 Loyang Drive
 Singapore 508969

Sin Ming
 383 Sin Ming Drive
 Singapore 575717

Pandan
 45 Pandan Road
 Singapore 609286

Ubi
 320 Ubi Road 3
 Singapore 408649

Senoko
 24 Senoko Loop
 Singapore 758158

Sungei Kadut
 7 Sungei Kadut Way
 Singapore 728791

Yishun
 501 Yishun Industrial Park A
 Singapore 769732

AIG ASIA PACIFIC INSURANCE PTE LTD
CHARTIS Buliding
 78 Shenton Way
 #07-16
 Singapore 079120

Attn : Motor Claims Department WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHD4642E YOUR INSURED SLQ5095L
 AND OTHER _____ ON 29.12.17**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHD4642E which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving SLQ5095L we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$	3,156.50
2	<u>5</u> days Loss of Rental @ \$ 108.95 per day	\$	544.75
3	Survey Report Fees <i>(Surveyed by M/s LKK)</i>	\$	-
4	GIA / LTA Search Fees	\$	7.49
5	GIA / Police Report Fees	\$	-
6	Towing / Medical / Transporation	\$	-
Sub Total :			\$ 3,708.74

HIRER'S CLAIM

7	<u>5</u> days Loss of Income @ \$ 80.00 per days	\$	400.00
Total Claims :			\$ 4,108.74

We enclosed herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs : 9 pcs.
- b) LTA search slip/s of : SLQ5095L
- c) GIA / Police report/s of : SHD4642E
- d) Letter of authority from owner / hirer / operator
 - (X) Photograph/s of Accident Scene () Certificate of Insurance
 - () Witness statement/s (x) Downtime/Mileage record

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

Cecilia Lee

Executive

CDGE Claims Department

Tel : 6214 8354 Fax: 6214 1843 Email : cecilialee@sparkcarcare.com

This is a computer generated letter. No signature is required.

A member of

COMFORTDELGRO



Zaini (LKK Auto)

From: Cecilia Lee Peng Geok <cecilialee@sparkcarcare.com>
Sent: Monday, 29 January 2018 8:04 AM
To: Zaini (LKK Auto)
Cc: Hsiao Tong (LKKAuto); jasminecai@cdge.com.sg
Subject: Re: SHD 4642E SLQ 5095L CC3/AIG18000129/K1ka3 29/12/2017
Zaini

Follow Up Flag: Follow up
Flag Status: Flagged

Without Prejudice

Dear Sir/Madam

Strictly on the basis of without admission of any liability and without prejudice to any other claims arising out of this accident, we confirm acceptance of your offer at \$3870/-

Please note that this settlement is strictly on a without prejudice basis and only in relation to the claim of vehicle damages. It shall not include other claims which the driver and/or the passenger(s) may have against you and/or your insured for their damages in relation to their bodily injuries arising out of this accident, even if the medical expenses claimed herewith formed part of settlement reached.

Please forward Discharge Voucher for execution and your cheque made payable to : COMFORTDELGRO ENGINEERING PTE LTD

Thank you.

Best Regards
Cecilia Lee
Claims Department | ComfortDelGro Engineering Pte Ltd
Off: 6214 8354 | Fax:
6214 1843

From: "Zaini (LKK Auto)" <Zaini@lkkauto.com>
To: "jasminecai@cdge.com.sg" <jasminecai@cdge.com.sg>, "cecilialee@sparkcarcare.com" <cecilialee@sparkcarcare.com>
Cc: "Hsiao Tong (LKKAuto)" <chewht@lkkauto.com>
Date: 26/01/2018 03:00 PM
Subject: SHD 4642E SLQ 5095L CC3/AIG18000129/K1ka3 29/12/2017 Zaini

WITHOUT PREJUDICE

Your Ref: T 1217 / SHD4642E / CL(st)
Our Ref: CC3/AIG18000129/K1ka3

Dear Cecilia,

ACCIDENT INVOLVING SLQ 5095L & SHD 4642E ON 29/12/2017

We refer to the above matter

For a quick and amicable settlement, we offer to settle global sum at **SS 3,870.00 (all in)**

Kindly confirm acceptance.

du

MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
	FROM	TO
267	1725	0445
202	0810	1655
143	0925	1610
272	1630	0358
176	0740	1505
248	1615	0207
185	0735	1515
283	1645	0419
172	0820	1340
291	1645	0510
188	0750	1630

DATE	NAME OF DRIVER	MILEAGE READING			MILEAGE TRAVELLED (KM)	HOURS OPERATED (TIME)	
		292	963			FROM	TO
29/12/2017	Azhar	292	963	201	1700	0255	
30/12							
30/12	Accident repair			74	0325		
3/1				Out		1315	

SFD 4642E



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

Our Ref: CC3/AIG18000129/K1ka3

15 JANUARY 2018

MOVESAFE
447 JURONG WEST STREET 42
#09-296
SINGAPORE 640447
ATTN: HR / MANAGEMENT

Dear Sir/Madam,

ACCIDENT INVOLVING SLQ 5095L AND SHD 4642E ON 29.12.2017

We refer to the above accident where we are acting for AIG Asia Pacific Insurance Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,


Zaini
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: Zaini@lkkauto.com

c.c. *AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)*

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****SONATA SHD4642E , SLQ 5095 L
HAVELOCK ROAD X KENG CHEOW ST****ON 29-Dec-17 23:15**

I / We

MD SHAH BIN EBUDAEN (Hirer) NRIC No.: S0943935H

and/or

AZALI BIN EBUDAEN (Relief) NRIC No.: S1494007C

Taxi Number

SHD4642E

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of **"ComfortDelGro Engineering Pte Ltd"**.

Date

30-Dec-2017

Name of Hirer

MD SHAH BIN EBUDAEN

Hirer NRIC

S0943935H

Signature :



Address

**798 YISHUN RING ROAD #07-3338
760798**

Contact No.

96387645

Name of Relief

AZALI BIN EBUDAEN

Relief NRIC

S1494007C

Signature :



Address

**244 JURONG EAST STREET 24 04-599
600244**

Contact No.

98179427

RELEASE VOUCHER
(AIG Asia Pacific - Express Third Party Claim)

"We/I, **COMFORTDELGRO ENGINEERING PTE LTD** ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **S\$3,870.00** (Global Sum) for vehicle no. **SHD 4642E** that was damaged pursuant to the accident which occurred on **29/12/2017** (date) along **HAVELOCK ROAD TOWARDS KENG CHEOW STREET** (location) involving vehicle no/s **SLQ 5095L**.

This is pursuant to the inspection conducted on **02/01/2018** (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner **COMFORT TRANSPORTATION PTE LTD** ("the third party claimant") of vehicle no. **SHD 4642E** make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to **SHD 4642E** (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

29 JAN 2018

Dated this _____ (day) of _____ (month) 20__ (year)



Signed by appointed surveyor

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
205 BRADDELL ROAD
SINGAPORE 579701

Signed by "the workshop" (with chop)

*The contents of this document apply to vehicle damages only.
All personal injuries and damages arising therefrom are excluded
from the ambit and application of this document*

Please forward your cheque made payable to:-
COMFORTDELGRO ENGINEERING PTE LTD

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
 Mailing + 65 6387 6286 Facsimile + 65 6290 8733
Workshops
 55 Loring Drive Singapore 539860 34 Serangoon Loop Singapore 739196
 385 Tin Ming Drive Singapore 570211 7 Bungei Road May Singapore 728791
 43 Pandan Road Singapore 800280 6 Defu Avenue 1 Singapore 529537
 300 Loh Road 3 Singapore 400648

COMPANY REG. NO.: 199506048W
 Page: 1

TAX INVOICE

8010004
 AIG ASIA PACIFIC INSURANCE PTE LTD
 #08-16 78 SHERTON WAY, CHARTIS BUILD
 SINGAPORE 079120
 CONTACT NO: 64193000 3225094

VEHICLE NO
 SHD4642K
 MAKE
 HYUNDAI
 MODEL
 SONATA
 DATE OF REG
 06.06.2013
 CHASSIS CODE
 KMHT41VM0A834647

INV. NO/DATE
 91351240 12.01.2018
 JOB NO.
 305102661
 ODOMETER READING

 JOB TYPR

Description : 3P 29.12.17

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt		2,950.00
Add GST @ 7.000 %		206.50
Total Invoice amount:		3,156.50

Issued by : KATHERINE TAN 12.01.2018 14:15:15
 Repair type : CL80/57/57
 Payment type/Term : /Credit 30 days

WE HEREBY TAKE THE FULL RESPONSIBILITY FOR THE QUALITY OF THE REPAIRS AND THE CONDITION OF THE VEHICLE AFTER THE REPAIRS. WE WILL NOT BE RESPONSIBLE FOR ANY DAMAGE TO THE VEHICLE OR TO THE DRIVER OR PASSENGERS OF THE VEHICLE WHICH MAY OCCUR AS A RESULT OF THE REPAIRS. WE WILL NOT BE RESPONSIBLE FOR ANY DAMAGE TO THE VEHICLE OR TO THE DRIVER OR PASSENGERS OF THE VEHICLE WHICH MAY OCCUR AS A RESULT OF THE REPAIRS. WE WILL NOT BE RESPONSIBLE FOR ANY DAMAGE TO THE VEHICLE OR TO THE DRIVER OR PASSENGERS OF THE VEHICLE WHICH MAY OCCUR AS A RESULT OF THE REPAIRS.

ComfortDelGro Engineering Pte Ltd
 A member of COMFORTDELGRO

Head Office:
 205 Braddell Road
 Singapore 579701

Kindly note that no receipt shall be issued unless requested.
 CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHO

Our Ref: CT17121036



Date: 10 January 2018

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 29/12/2017 @ 23:15 hrs
ALONG HAVELOCK ROAD X KENG CHEOW ST
INVOLVING SLQ 5095 L

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHD4642E** (the "Taxi"). The Taxi was hired to **MD SHAH BIN EBUDAEN IC NO S0943935H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$108.95** per day (inclusive of GST).

Please be advised that the Taxi was insured with **India International Insurance Pte Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Executive, Fleet Safety

This is a computer generated letter. No signature is required.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLQ5095L	29 Dec 2017 / 23:15:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

[Previous](#)[OK](#)

Thank you



Goh Cheng Chuan Andrew Cornelius has successfully logged out.

Your last login date and time was 30 Dec 2017, 12:38:58.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

<u>S/No.</u>	<u>Asset Type</u>	<u>Asset ID</u>	<u>Asset Owner ID</u>	<u>Transaction Type</u>	<u>Transaction Amount(S\$)</u>	<u>Log Date/Time</u>
1	Vehicle	SLQ5095L	-	18.32 Insurance Enquiry (GIRO Payment)	7.99	30 Dec 2017 / 12:39:13

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

Express

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	03 Jan 2018 Edit Reg		02 Jan 2018 00:00 Edit Adj Rpt	S\$2,950.00 Edit Estimates	S\$2,950.00 View Rpt		Pending for Survey Report Cancel Case

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

CLAIM SUBFOLDER DETAILS [Created by adjuster]

Insured: **MOVESAFE**, Co. Reg. No.: 53314720D

Main Claimant: **COMFORT TRANSPORTATION PTE LTD**, Co. Reg. No.: 199303821R

Vehicle Reg. No.:	SHD4642E	Date of Loss:	29/12/2017 23:00 - :59
Claim Type:	TP / 0785504289SG	Policy/Cover Note No.:	1700025326 (Comprehensive)
Vehicle Reg. No. (Insured):	SLQ5095L	Policy No. (Claimant):	MCOM0016
		Excess:	

Repairer: **ComfortDelGro Engineering Pte Ltd (Loyang)** 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300

Handling Insurer: **AIG Asia Pacific Insurance Pte. Ltd. (Express)** - Tel: 65-6419-3000 ... [Handled by **Loh, Chee-Heng**] Chee-Heng.Loh@aig.com

Claimant's Insurer: **India International Insurance Pte Ltd (HQ)** - Tel: 63476100

Adjuster: **LKK Auto Consultants Pte Ltd (HQ)** - Tel: 6256-3561 ... [Handled by **KALVIN ANG WEI KUN**] ... [Final Rpt due 12/01/2018]

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

- AIG_SG (04/01/2018): **NO TP GIA REPORT**

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

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

Claim Documents

*SHD4642E (0785504289SG)
 [SLQ5095L]
 TP
 COMFORT TRANSPORTATION PTE LTD
 Dec 29 2017 11:00PM
 [MOVESAFE]
 ComfortDelGro Engineering Pte Ltd

Upload Documents		Upload Photos		Compose New Letter		Upload Video		Upload Audio		View View in Browser	
Letters/Correspondences										1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	(Draft)	Third Party Express Settlement - Payment Breakdown						1	Edit		
Assessment Reports										1 per page	<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)						Thumbnail	Print		
1	04/01/18 11:42	Accident Statement <small>From:DD - Reg. No: SLQ5095L, Claimant: MOVESAFE</small>						1	Load HTM		
Photos/Images										3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
2	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
3	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
4	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
5	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
6	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
7	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
8	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
9	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
10	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
11	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
12	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
13	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
14	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
15	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
16	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
17	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
18	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
19	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
20	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
21	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
22	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
23	03/01/18 16:56	General View						1	Load JPG	<input checked="" type="checkbox"/>	
24	03/01/18 17:03	Reinspection Photo						1	Load JPG	<input checked="" type="checkbox"/>	
25	03/01/18 17:03	Reinspection Photo						1	Load JPG	<input checked="" type="checkbox"/>	
26	03/01/18 17:03	Reinspection Photo						1	Load JPG	<input checked="" type="checkbox"/>	
27	03/01/18 17:03	Reinspection Photo						1	Load JPG	<input checked="" type="checkbox"/>	
28	03/01/18 17:03	Reinspection Photo						1	Load JPG	<input checked="" type="checkbox"/>	

Documentation			1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	08/01/18 09:10	TP ESTIMATE + TOWING	 Load PDF	
2	08/01/18 09:10	TP GIA REPORT	 Load PDF	
3	05/02/18 08:20	WORKSHOP INVOICE	 Load PDF	
4	05/02/18 08:20	AUTHORISATION TO ACT FORM	 Load PDF	
5	05/02/18 08:20	Release Voucher	 Load PDF	
6	05/02/18 08:20	RENTAL RECEIPT	 Load PDF	
7	05/02/18 08:20	LTA SEARCH	 Load PDF	
8	05/02/18 08:20	LETTER TO OI	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

**THIRD PARTY EXPRESS SETTLEMENT
(PAYMENT BREAKDOWN)**

Vehicle No:	SLQ5095L (Insd veh)	Model:	HYUNDAI SONATA 2.0 D CRDI TURBO (NF) (A)
	SHD4642E (TP veh)		
Date of Accident:	29/12/2017		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	6,395.86
Final Repair Cost	:	\$	3,870.00
Loss of Use	:	\$	4.50 days at \$50.00 per day
Rental (if any)	:	\$	4.50 days
LTA / GIA Search Fee	:	\$	
Others:	:	\$	
	:	\$	
Final Settlement Sum (Global Sum)	:	\$	3,870.00
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A) For <u>Non GIA Registered Workshop</u> :		Agreed Liability _____(%)	
B) For <u>GIA Registered Workshop</u> :		BOLA Applicable: Yes/ No BOLA Scenario No: __15__	
BOLA Liability: __100__ (%)		Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks _____			

Payment Instruction: Payee's Breakdown			
1)	ComfortDelGro Engineering Pte Ltd	:	\$ 3,870.00
2)		:	\$
3)		:	\$
4)		:	\$
5)		:	\$

JOANNE LEE KHANG MIN

LKK Auto Consultants Pte Ltd

05 Feb
2018

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

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: CC3/AIG18000129/K1KA3Q2

Date: 05/02/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 1700025326
 Claimant Vehicle No: SHD4642E Insured Vehicle No: SLQ5095L
 Date of Loss: 29/12/2017 Nature of Claim: TP Claim No: 0785504289SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHD4642E
 Make & Model: HYUNDAI SONATA, 2.0 D CRDi Turbo (NF) (A) Engine No: D4EAD310967
 Reg. Date: 06/06/2013 (Man. Year: 2013) Chassis No: KMHET41VMDA834647
 Colour: Blue Odometer: 292963 km
 Engine Capacity: 1991 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

Front Tyre Size: 215/60 R16 Rear Tyre Size: 215/60 R16
 Front Left Side: West Lake 7 mm Rear Left Side: West Lake 7 mm
 Front Right Side: West Lake 7 mm Rear Right Side: West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,927.44	2,488.56	1,438.88	36.64
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,050.00	1,180.00	870.00	42.44
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,977.44	3,668.56	2,308.88	38.63
Approved Total (Overridden) (S\$)		2,950.00		
(S\$)	5,977.44	2,950.00	3,027.44	50.65
+ GST 7.00/7.00% (S\$)	418.42	206.50	211.92	50.65
Nett Amount (S\$)	6,395.86	3,156.50	3,239.36	50.65
+ Loss of Use (4.5 x S\$50.00/day) (S\$)		225.00		
+ Car Rental (4.5 x S\$108.95/day) (S\$)		490.28		
+ Doc/Search Fee (S\$)		7.49		
Nett Liability (S\$)		3,879.27		
Global Sum Settlement (S\$)		3,870.00		

INSPECTION

Date of Assignment: 02/01/2018

Date Inspected: 02/01/2018 Inspected At: ComfortDelGro Engineering Pte Ltd
(Loyang)
59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: KALVIN ANG WEI KUN

Manager: Zaini Bin Kusaini

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

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BONNET	Dented	1,151.80 FL	*1,151.80 FL
2	1		*FRONT BUMPER COVER	Deformed	538.80 FL	*538.80 FL
3	1		*FRONT BUMPER SPONGE	Serviceable	136.30 FL	*- FL
4	1		*FRONT BUMPER REINFORCEMENT	Serviceable	504.10 FL	*- FL
5	1		*FRONT BUMPER GRILLE (RH)	Serviceable	17.60 FL	*- FL
6	1		*FRONT BUMPER BRACKET TOP (RH)	Serviceable	22.40 FL	*- FL
7	1		*FRONT BUMPER PROTECTOR (RH)	Cut	29.20 FL	*29.20 FL
8	1		*HEADLAMP SUPPORT PANEL ASSY	Serviceable	1,023.00 FL	*- FL
9	1		*HEADLAMP (RH)	Grazed	797.90 FL	*797.90 FL
10	1		*FRONT FENDER (RH)	Dented	593.00 FL	*593.00 FL
11	1		*FRONT FENDER SHIELD (RH)	Serviceable	86.00 FL	*- FL
12	1		*FRONT FENDER RETAINER	Serviceable	9.20 FL	*- FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	4,909.30	3,110.70
- List Item Discount on L Items 20.00/20.00% (S\$)	981.86	622.14
Total Parts (S\$)	3,927.44	2,488.56

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	1,200.00	600.00
2	SPRAY PAINTING CHARGE	New	600.00	540.00
3	WIRING CHARGE	New	50.00	20.00
4	TUFF KOTE	New	50.00	20.00
5	REMOVE/REFIX AIRCON & REFILL GAS	New	150.00	0.00
			<hr/>	
			Gross Labour Cost (\$\$)	2,050.00
				1,180.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >