

ASS. REC. BY:

REF:

CS/FCI18000137/Gcd322

Special Instruction:

Survivor:

ASSIGNMENT (Office)

From (Person):

Sithara

of

FCI

Date/Time:

2/1/2018

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKH 44B.

Insured:

SHC 943T

at Workshop m/s

Pai Cheng Motor

Tel:

64835595

of

BK10 AMC 20H-18

Policy No:

D-15072702MFSH

Claim No:

D17011431MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

9/12/2017

CA / REV / REP. / REV 24 HRS

DS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SKH 44B - CS/MSG16019746/Kgh3n2 DOA: 12/10/16.

SHC 943T - X.

REF: FCL

ASSIGNMENT

From: _____ Date: 03012018

Estimated Cost: _____

OD: ☒ WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SKH 44B

at Workshop m/s: Tai Cheng

of Blk 10 AMK Ind Park 2A #04-18

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____

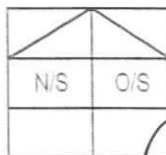
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____

IDAO Accident Report: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKH 44B Yr Regn: 02 Nov 2016

Type: ☒ M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Merce E200 c.c. 1991

Colour: Green A/C Insured / Std / NI / NA

Sp Reading: 23872 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WPD 230 422A 048616

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 275/35 R19

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. D.O.I. 03-01-18

Survey held at W/S 5:30pm

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

New o/s

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

Date / Time Action / Instruction

08/10 Finalized \$ 9729.1 with Hock.
Cred. 2185, 18.23

Date/Time File Pass to?

☐ : Preli. Report

Days Of Repair: 5

1) _____

☐ : Final Report

Resurvey No. of Trip: 3

Date/Time File Return to?

Survey Fee

2) _____

Add Fee: ☐ : Site Insp \$

Transportation

☐ : Interview \$

Photos

☐ : Tech. Invs \$

Other

☐ : Weekend \$

Report Format: TP

Lump Sum: 9729.10

170+15
50
50450+50
107
402

14/10



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

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18000137/Grb

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 03-01-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHC 943T	Veh. Inspected	SKH 44B
Policy No.	D-15072702MFSH	Coverage (\$)	0.00
Claim No.	D17011431MFSH	Excess (\$)	0.00
Assign From	CWS (SITHARA)	Assign Date	02/01/2018

2. Vehicle Particulars & Condition

Make & Model	c.c
Engine No.	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	09/12/2017	Inspection Date
Survey held at		

5a. Remarks

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First Capital Insurance Limited

A FAIRFAX Company

Company Reg. No. 195000106C

GST Reg. No. M2-0001676-9

MOTOR SURVEY ASSIGNMENT

Date	12-12-2017	Our Ref No. D17011431MFSH
Accident Date	09-12-2017	Claim Type. Third Party
Insured Vehicle	SHC0943T	Third Party Vehicle. SKH44B
Survey Location	BLK 10 ANG MO KIO INDUSTRIAL PARK 2A #04-18 ANG MO KIO AUTOPOINT	
Contact Person.	CHUA SEK HOW	
Contact No.	64835595/ 96365090	Fax No. 64835895
Survey Type	DIRECT SETTLEMENT:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

030117 @ 10.30am
Chua veh in

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	TAI CHENG MOTOR VEHICLE SPRAY PAINTING	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	SITHARA	

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.

Job Sheet (/ClaimWS/Surveyor/JobSheet/231768)



PRI Documents



Close



PRI Header Details

Claim No	D17011431MFSH	Policy No	D-15072702MFSH	Claimant S.No & Name	1 & TA
Workshop Name	TAI CHENG MOTOR VEHICLE SPRAY PAINTING (Contact Person : CHUA SEK HOW)	Survey Location & Contact Details	BLK 10 ANG MO KIO INDUSTRIAL PARK 2A #0 AUTOPOINT Mobile: 96365090 , Phone: 64835595 , Fax: EmailId: SHCHUA@TAICHENGMOTOR.COM		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHC0943T	TP Vehicle No	SKH441
PRI Recieved Date	29-12-2017 09:19:25 PM	Surveyor Appointed Date	02-01-2018 05:04:57 PM	Surveyor Accept Date	03-01-

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	03-01-2018	Upload Survey Report *:	<input type="text"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

<input type="button" value="Upload Multiple Documents"/>	
File Name	Action

Surveyor Job Remarks

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5331B
Vehicle Details	
Vehicle No.:	SKH44B
Vehicle to be Exported:	No
Intended De-registration Date:	04 Jan 2018
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	E200 AMG LINE (R19 LED)
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	27492030680096
Chassis No.:	WDD2130422A048616
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$54,213.00
Original Registration Date:	02 Nov 2016
First Registration Date:	02 Nov 2016
Transfer Count:	0
Actual ARF Paid:	\$69,584.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Nov 2026
PARF Rebate Amount:	\$52,188.00
Intended COE Rebate Details	
COE Expiry Date:	01 Nov 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)

COE Period(Years):	10
QP Paid:	\$56,500.00
COE Rebate Amount:	\$49,863.00
Total Rebate Amount:	\$102,051.00

The information contained herein is correct as at 04 Jan 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	11/12/2017 12:37
Date Of Accident	09/12/2017 21:00
Exact Location Of Accident	15 JALAN ELOK SINGAPORE 229053
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH44B
Insured/Policyholder	
Name Of Registered Owner	LIM AI LAY IRENE
NRIC No	S6935331B
Email Address	IRISLIM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91280788
Alternative Phone No	OFFICE-91280788

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200

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 CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100488320-01
Cover Note Number	

Driver

Name of Driver	LIM AI LAY IRENE
NRIC No	S6935331B
Date Of Birth	04/10/1969
Occupation	INDOOR
Date Of Driving Pass	23/12/2009
Driving Experience	7 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91280788
Fax Number	
Contact Number	OFFICE-91280788
E-Mail Address	IRISLIM@GMAIL.COM

Address	BLK 6 ST. GEORGE'S LANE #03-217
Postcode	320006
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC943T
Vehicle Make/Model/Colour	MERCEDES MAXI CAB
Details Of Properties	
Name of Driver	TAN CHYE HUAT
NRIC/Passport Number	S8237923A
Contact Number	84440098
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

SKETCH PLAN

NOTICE

1. I will not correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

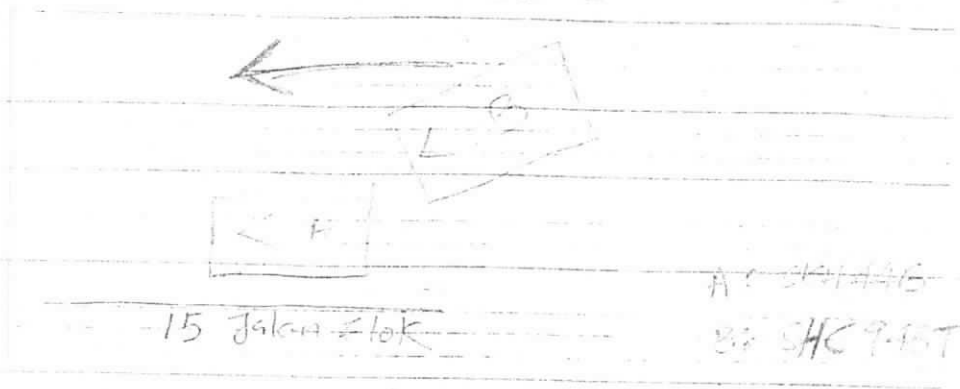
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages), and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

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

SKETCHPLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SKH44B was parked at the gate of 15 Jalan Elak
beside lamp post No. 3 when
SHC943T hit from rear.
The stationary vehicle fly forward resulted to
damages.

DECLARATION

I declare the foregoing particulars are true in every respect.

Policyholder's Signature

B. Time:

Driver's Signature

(If driver is not the policyholder)


Reporting Centre Personnel's Signature

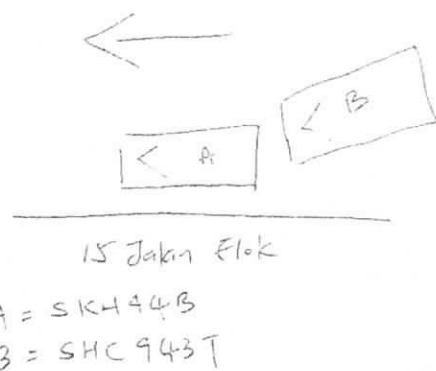
Name:

I, TAN Chye Huat of NRIC number S8237923A, driver of vehicle number SHC943T, White Maxi Mercedes Cab, was driving along Jalan Elok when I hit a stationary vehicle, SKH44B, grey Mercedes sedan which causes it to fly forward resulted to damages.

Stationary parked vehicle with
no passenger or motorist on
board.

Mr Tan Chye Huat
S8237923A


I am at fault.



TAI CHENG MOTOR VEHICLE SPRAY PAINTING

BLK 10 ANG MO KIO INDUSTRIAL PARK 2A #04-18

ANG MO KIO AUTOPOINT SINGAPORE 568047

TEL: 64835595 62547029 64835515 FAX: 64835895

Business Registration No: 234718/00E

GST Registration No: 23-471800-E

EMAIL: shchua@taichengmotor.com

YOUR REF:

OUR REF:

FIRST CAPITAL INSURANCE LTD**36 ROBINSON ROAD****16-01 CITY HOUSE****SINGAPORE 068877****ATTN: THE MOTOR CLAIM DEPT****THIRD PARTY****Accident Along 15 Jalan Elok Involving Vehicle SKH44B And SHC943T****On 09..12.17****Cost of repair to damage vehicle SKH44B claiming against your insured SHC943T**

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to final approval
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

DATE: **28.12.17**

Acknowledged by Repairer
Signature:
Date:

Description**QTY****Price**

rear bumper / Re	1	\$ 1,980.00 / 1880
rear bumper side retainer / Re	1	\$ 95.00 /
rear tail lamp / CRA	1	\$ 760.00 / 690
rear bumper top bracket / Re	1	\$ 98.00 /
rear bumper reflector / Scr	1	\$ 48.00 /
rear bumper parktronic sensor / DM IPC	2	\$ 980.00 / 360
rear bumper lower garnish / Cut	1	\$ 540.00 / 260
rear bumper reinforcement / BT	1	\$ 860.00 / 760
rear bumper reinforcement rubber / CRA	2	\$ 100.00 /
rear bumper tow hook cover / Cut	1	\$ 88.00 /
rear exhaust chrome / Scr	1	\$ 460.00 / 390
rear bumper lower chrome / BR	1	\$ 380.00 / 320
rear bumper lower side garnish / P / Re	1	\$ 89.00 /
rear exhaust chrome holder garnish bracket / P / Re	1	\$ 230.00 /
rear bumper inner base stiffener / P / Re	1	\$ 320.00 /
rear boot switching module / NW	1	\$ 780.00 /
exhaust chrome holder bracket side garnish / P / Re	1	\$ 75.00 /
rear bumper top centre retainer garnish / CRA	1	\$ 280.00 /
rear exhaust heat shield / BT	1	\$ 136.00 /
rear exhaust pipe / MT	1	\$ 1,970.00 / 2896 / 1800
rear parktronic sensor harness wire / Cut	1	\$ 480.00 / 306
		\$ 10,749.00 / 9099
parts less 10%		\$ 1,074.90 / 8189.1
		\$ 9,674.10

miscellaneous item:

supply of clips and rivets for rear bumper /	\$ 60.00 / 40
supply of sealant for panel joint /	\$ 60.00 / 40
	80

labour

to replace of exhaust and align of exhaust system	\$ 100.00	60
to remove of accident affected portion wiring, connector, enable repair fixing of same	\$ 30.00	/
to remove rear damaged parts, cutting of damaged panels, knocking flattening of dented panel welding, fixing and align of parts	\$ 780.00	400 650
to refix and reset rear parktronic and boot opening module sensor	\$ 160.00	40 80
to respray rear and side accident affected portion	\$ 850.00	600.
to anti rust rear accident portion	\$ 80.00	X NN
to remove rear interior compartment trim cushion, seats to enable repair	\$ 120.00	40
	\$ 11,914.10	1460

Total Dollars Estimated: Eleven Thousand Nine Hundred Fourteen And Cent Ten Only.

天進汽車噴漆廠
Tai Cheng Motor Vehicle Spray Painting
Blk 10 Ang Mo Kio Industrial Park 2A
#04-15 Ang Mo Kio Auto Point
Singapore 568047
Tel: 6483 5515 Fax: 6483 5895

me. Jara. 86365090

14/10/19

9729.1

part by part.

before paint photos.

Gino Q: ap - 8288 0282

5 Days.

03/1/18.



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

MS FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18000137/Gcd3e2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 15-10-2019



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHC 943T	Veh. Inspected	SKH 44B
Policy No.	D-15072702MFSH	Coverage (\$)	0.00
Claim No.	D17011431MFSH	Excess (\$)	0.00
Assign From	SITHARA	Assign Date	02/01/2018

2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ E200 AMG	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	WDD2130422A048616	Colour	GREY
Odometer	23872	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	275/35 R19	MICHELIN	6 mm
L/H Front Tyre	275/35 R19	MICHELIN	6 mm
R/H Rear Tyre	275/35 R19	MICHELIN	6 mm
L/H Rear Tyre	275/35 R19	MICHELIN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	09/12/2017	Inspection Date	03/01/2018
Survey held at	TAI CHENG MOTOR VEHICLE SPRAY PAINTING BLK 10 ANG MO KIO IND PK 2A #04-18 ANG MO KIO AUTOPOINT SINGAPORE 568047		

5a. Remarks

A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	5 Working Days
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LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKH 44B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Cost Price (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>					
1	REAR BUMPER	DEFORMED	1,980.00	-	1,880.00
1	REAR BUMPER SIDE RETAINER	NECESSARY	95.00	-	95.00
1	REAR TAIL LAMP	CRACKED	760.00	-	690.00
1	REAR BUMPER TOP BRACKET	DEFORMED	98.00	-	98.00
1	REAR BUMPER REFLECTOR	SCRATCHED	48.00	-	48.00
2	REAR BUMPER PARKTRONIC SENSOR	DAMAGED (1PC ONLY)	980.00	-	360.00
1	REAR BUMPER LOWER GARNISH	CUT	540.00	-	260.00
1	REAR BUMPER REINFORCEMENT	BENT	860.00	-	760.00
2	REAR BUMPER REINFORCEMENT RUBBER	CRACKED	100.00	-	100.00
1	REAR BUMPER TOW HOOK COVER	CUT	88.00	-	88.00
1	REAR EXHAUST CHROME	SCRATCHED	460.00	-	390.00
1	REAR BUMPER LOWER CHROME	BROKEN	380.00	-	320.00
1	REAR BUMPER LOWER SIDE GARNISH	DEFORMED	89.00	-	89.00
1	REAR EXHAUST CHROME HOLDER GARNISH BRACKET	DEFORMED	230.00	-	230.00
1	REAR BUMPER INNER BASE STIFFENER	DEFORMED	320.00	-	320.00
1	REAR BOOT SWITCHING MODULE	NOT WORKING	780.00	-	780.00
1	EXHAUST CHROME HOLDER BRACKET SIDE GARNISH	DEFORMED	75.00	-	75.00
1	REAR BUMPER TOP CENTRE RETAINER GARNISH	CRACKED	280.00	-	280.00
1	REAR EXHAUST HEAT SHIELD	BENT	136.00	-	136.00
1	REAR EXHAUST PIPE	BENT	1,970.00	-	1,800.00
1	REAR PARKTRONIC SENSOR HARNESS WIRE	CUT	480.00	-	300.00
	LESS 10% DISCOUNT		-1,074.90	-	-909.90
			9,674.10	-	8,189.10
<u>SPECIAL NETT ITEMS</u>					
1	CLIPS AND RIVETS FOR REAR BUMPER (SN)	NECESSARY	60.00	-	40.00



LKK Auto Consultants Pte Ltd

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Cost Price (\$)	Our Adjusted (\$)
1	SEALANT FOR PANEL JOINT (SN)	NECESSARY	60.00	-	40.00
			120.00	-	80.00
	LABOUR				
	TO REPLACE OF EXHAUST AND ALIGN OF EXHAUST SYSTEM.		100.00	-	60.00
	TO REMOVE OF ACCIDENT AFFECTED PORTION WIRING, CONNECTOR, ENABLE REPAIR FIXING OF SAME.		30.00	-	30.00
	TO REMOVE REAR DAMAGED PARTS, CUTTING OF DAMAGED PANELS, KNOCKING FLATTENING OF DENTED PANEL WELDING, FIXING AND ALIGN OF PARTS.		780.00	-	650.00
	TO REFIX AND RESET REAR PARKTRONIC AND BOOT OPENING MODULE SENSOR.		160.00	-	80.00
	TO RESPRAY REAR AND SIDE ACCIDENT AFFECTED PORTION.		850.00	-	600.00
	TO ANTI RUST REAR ACCIDENT PORTION.	NOT NECESSARY	80.00	-	-
	TO REMOVE REAR INTERIOR COMPARTMENT TRIM CUSHION, SEATS TO ENABLE REPAIR.		120.00	-	40.00
			2,120.00	-	1,460.00
GRAND TOTAL			11,914.10	-	9,729.10
RECOMMENDED COST OF REPAIRS					9,729.10

Report Ref No. CS/FC118000137/Gcd3e2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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