

22/03/2018

ASS. REC. BY:

REF:

CS3/SMO18000481/R1d3

Special Instruction:

Punch &amp; drop

Submitted:

Recall

ASSIGNMENT (Office)

From (Person):

Gmee Teo

of

SMO

Date/Time:

08/01/2018 @ 5:38pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBD8833R

Insured:

GBD4877R

at Workshop m/s

Paul Hoe Buffonies &amp; Motor Services

of

7 Kalei, Bkt Ave 6 #01-109 Autobay

Policy No:

Claim No:

CMTD1800134 / THE

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

05/01/2018

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

8:58am @ 09/01/18

Person Contacted:

paul

Vehicle: IN OUT

Date/Time

Action/Instruction ( X ) Estimate

GBD8833R - NA / EGT18000364/h4

D.O.A. 05/01/2018

GBD4877R - NA / EGT18000364/h4

D.O.A. 05/01/2018

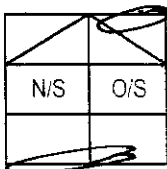
After repair 29.01.2018.

Signature: K. Paul

REF:

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: GBD 88 33R  
 at Workshop m/s Paul Hore  
 of Anthony # 01-109  
 Insured: SMD / PRS  
 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: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: 9 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: GBD 88 33R Yr Regn: \_\_\_\_\_  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: NISSAN CABSTAR C.O. \_\_\_\_\_  
 Colour: GOLD A.O. Insured / Std / NI / NA  
 Sp. Reading: 145171 T. Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: JN18C2F2420855603  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / Jammed / Leaked / Burnt or  
 Mod: N / S/Rim / STD A/Rim or  
 Tyre Size: F: 195/80R15  
 R: 155R15L  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or  
 Front \_\_\_\_\_ Rear \_\_\_\_\_  
 R/Bal. 7 mm R/Bal. 6/6 mm  
 L/Bal. 7 mm L/Bal. 6/6 mm  
 D.O.A. 05/01/18 D.O.I. 09/01/18  
 Survey held at Paul Hore  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
FRT O/S & REAR  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

\$9,800 - \$11,000

4/4/2018

Date/Time. File Pass to?

☐

: Preli. Report

Days Of Repair: \_\_\_\_\_

1) \_\_\_\_\_  
 Date/Time. File Return to?

☐

: Final Report

Resurvey No. of Trip: \_\_\_\_\_

2) \_\_\_\_\_

Add Fee:

☐

: Site Insp. \$

☐

: Interview \$

☐

: Technician \$

☐

: Weekend \$

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

\_\_\_\_\_ S - PR, \_\_\_\_\_ SI

Photos \_\_\_\_\_

Other \_\_\_\_\_

Report Format: PRQ

Lump Sum / I.B.I: \$ \_\_\_\_\_

TOTAL

**Catherine Chong (LKK Auto)**

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**From:** Teo, Grace <grace.teo@sompo.com.sg>  
**Sent:** Monday, 8 January, 2018 5:38 PM  
**To:** Kelly Cheng; admin-d@lkkauto.com; assignments@lkkauto.com  
**Cc:** Choo, Thelma; Henry, Irene James  
**Subject:** CMTD1800134/THE - ACCIDENT INVOLVING GBD4877R & GBD8833R ON 05.01.2018  
**Attachments:** TKS.pdf

Our Reference: CMTD1800134/THE  
Your Reference: TKS/P566-ACC-39605.18/kc

**Without Prejudice**

Date: 8<sup>th</sup> January 2018

**Attention:**  
**M/S TEO KENG SIANG LLC**

Dear Kelly,

**ACCIDENT INVOLVING GBD4877R & GBD8833R ON 05.01.2018**

We refer to your email reply dated 08/01/2018.

We do not agree to your list of surveyors.

As such, we will be appointing our motor surveyor, **LKK AUTO CONSULTANTS** to conduct the pre-repair survey of your client's vehicle.

The pre-repair survey will include a survey of the vehicle when its damaged parts are being dismantled prior to the commencement of repairs.

We would like our motor surveyor to conduct a post repair inspection once your client's vehicle has been repaired.

The survey is conducted on a without Prejudice basis and without any admission of liability.

Yours faithfully,

Best Regards  
**Grace Teo**  
Claims Division  
D: 6329 5170 | T: 6461 6555 | F: 6221 3147



Innovation for Wellbeing

**SOMPO**

**A Century of Trust**

**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

**Website:** [www.sompo.com.sg](http://www.sompo.com.sg) | **Facebook:** [www.facebook.com/SompoSG](https://www.facebook.com/SompoSG)

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**From:** Kelly Cheng [mailto:kelly.cheng@ksteoptr.com]

**Sent:** Monday, January 08, 2018 5:18 PM

**To:** Teo, Grace

**Subject:** Re: CMTD1800134/THE - ACCIDENT INVOLVING GBD4877R & GBD8833R ON 05.01.2018

**WITHOUT PREJUDICE**

Dear Grace,

We refer to the above matter and to your email dated 8 January 2018.

We have our client's instructions to reject your proposal on your Single Joint Expert.

We enclosed herewith the list of our client's proposal on single joint expert for your necessary action.

Kindly let us hear from you within the stipulated time frame as per the new NIMA protocol failing which we will proceed with the necessary.

Thank you.

On Mon, Jan 8, 2018 at 3:23 PM, Teo, Grace <[grace.teo@sompo.com.sg](mailto:grace.teo@sompo.com.sg)> wrote:

Our Reference: CMTD1800134/THE

Your Reference: TKS/P566-ACC-39605.18/kc

**Without Prejudice**

Date: 8<sup>th</sup> January 2018

**EMAIL ONLY**

**Attention:**

**M/S TEO KENG SIANG LLC**

Dear Kelly,

**ACCIDENT INVOLVING GBD4877R & GBD8833R ON 05.01.2018**

We refer to your Notice of Accident dated 08/01/2018.

Please be informed that Thelma Choo the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert.

**Pre-Repair Survey**

	<b>Motor Surveyor</b>	<b>Surveyor</b>	<b>Selection (Indicate as tick)</b>
1	Raleigh Services	Andrew Ow Yong	
		Vincent Ng	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffery Ong	
4	JP Knights Adjusters & Surveyors	Jason Lek	
5	In House surveyor	Teo See Ling	

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Yours faithfully,

Best Regards

**Grace Teo**

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147



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**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

**Website:** [www.sompo.com.sg](http://www.sompo.com.sg) | **Facebook:** [www.facebook.com/SompoSG](https://www.facebook.com/SompoSG)

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--

Best Regards,

· Kelly Cheng  
· Tel: 6333 4222 ext 72  
Fax: 6333 5675

**Teo Keng Siang LLC**  
111 North Bridge Road  
Peninsula Plaza, #29-07/08  
Singapore 179098

CM10 1800134/THE

张景祥  
大律師樓  
(律師公會及金獎)

# TEO KENG SIANG LLC

Advocates & Solicitors • Notary Public • Commissioner For Oaths

111 North Bridge Road #29-07/08 Peninsula Plaza Singapore 179098. Tel: 6333 4222 Fax: 6333 5676/5688

ROC: 201510228C

GST Reg No.: 201510228C

Email: KSTEOCO@singnet.com.sg

(FAX - NOT FOR SERVICE OF COURT DOCUMENTS)

Our Ref : TKS/P566-ACC-39605.18/kc  
Your Ref : **GBD 4877 R**  
Date : 8<sup>th</sup> January 2018

Secretary in charge: Kelly

Tel: 6333 4222 (ext 72)

Fax: 6333 5676 / 5688

Email: [Kelly.cheng@ksteoptr.com](mailto:Kelly.cheng@ksteoptr.com)

BY PDX #8174 & FAX: 6221 3147

**Sompo Insurance Singapore Pte Ltd**  
50 Raffles Place  
#05-01/06, Singapore Land Tower  
Singapore 048623  
Attn: Motor Claims Dept/

**PDX Intercompany Exchange Pte Ltd**



010808283488

FROM **TEO KENG SIANG LLC**

PDX Box No. **8802**

BY POST

**ETHOZ GROUP LTD**  
30 Bukit Batok Crescent  
Singapore 658075

Dear Sirs

## NOTIFICATION OF ACCIDENT

**RE: ACCIDENT INVOLVING GBD 8833 R / GBD 4877 R / GW 5689 B / YP 5798 T / GBE 5883 K / GBD 6866 J ON 5<sup>th</sup> JANUARY 2018 ALONG CTE TOWARDS SLE**

We act for **S C INTEGRATED ENGINEERING PTE LTD** in the accident above.

We are instructed by the abovenamed Claimant to notify you of a road traffic accident on **5<sup>th</sup> JANUARY 2018 at 14:00PM along CTE TOWARDS SLE** involving our client's motor vehicle **GBD 8833 R** and motor vehicle **GBD 4877 R** driven by you or your authorized driver at the material time. A copy of the GIA/Traffic Police Report is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before we proceed to repair the damage 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, we shall proceed to repair the vehicle without further reference to you.

Please note that our client's motor vehicle **GBD 8833 R** is now at the following workshop: -

## **PAUL HOE BATTERIES & MOTOR SERVICES**

1 Kaki Bukit Avenue 6

#01-109, AutoBay@Kaki Bukit

Singapore 417883

Person I/C : Paul Hoe  
Contact : 9623 5068

Yours faithfully,

  
**M/S TEO KENG SIANG LLC**  
cc. Clients - By Fax 6747 6918

Teo Keng Siang  
LL.M (Singapore),  
LL.B (Hons) (Singapore)

Wong Yong Sheng, Kenneth  
LL.B (Hons) University of Bristol

Joseph Tan Chin Aik  
LL.B (Hons) Singapore  
PGDE (NTU/NIE)

08 JAN 2018



## 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	06/01/2018 15:13
Date Of Accident	05/01/2018 14:00
Exact Location Of Accident	CTE TWDS SLE AT 10KM MARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD8833R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SC INTEGRATED ENGINEERING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68173856

### Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ17-001263
Cover Note Number	-

### Driver

Name of Driver	SELVARAJ KALIARAJU
Passport No/FIN	G7961507U
Date Of Birth	10/05/1984
Occupation	OUTDOOR
Date Of Driving Pass	16/08/2017
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92991887
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	70 TUAS SOUTH AVE 1 TUAS VIEW DORMITORY
Postcode	637285
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	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	EUNOS NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 629 BEDOK RESERVOIR ROAD #01-1620 , POSTCODE: 470629 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4439999 - FAX NO: 62444376
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	GBD4877R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GW5689B  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category COMMERCIAL VEHICLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number YP5798T  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category COMMERCIAL VEHICLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number GBE5883K  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category COMMERCIAL VEHICLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number GBD6866J  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category COMMERCIAL VEHICLE  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name SELVARAJ KALIARAJU

Approximate Age

Injuries Sustain LEG

Injured person in which vehicle? GBD8833R

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

## SKETCH PLAN

### 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 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:

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

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

...the ... ..

Please Refer to Police Report

holder's Signature

Date & Time:

Date & Time:

NRIC/FIN No.:

S. + in. S. kaliraju.




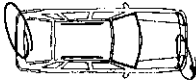
**LKK Auto Consultants Pte Ltd**

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 1

PRE-REPAIR INSPECTION REPORT				
SOMPO INSURANCE SINGAPORE PL		Ref: CS3/SMO18000481/R1d3e2		
50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWERSINGAPORE 048623		Date: 05-04-2018		
Code: SMO				
<b>1. Policy Particulars :- (THIRD PARTY CLAIM)</b>				
Insured Veh.	GBD 4877R	Veh. Inspected	GBD 8833R	
Policy No.		Coverage (\$)	0.00	
Claim No.	CMTD1800134/THE	Excess (\$)	0.00	
Assign From	GRACE TEO	Assign Date	09/01/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	NISSAN CABSTAR	c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.	JN1SC2F24Z0855603	Colour	GOLD	
Odometer	145171 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/80 R15	YOKOHAMA	7 mm	
L/H Front Tyre	195/80 R15	YOKOHAMA	7 mm	
R/H Rear Tyre	155 R15C (D)	YOKOHAMA	6/6 mm	
L/H Rear Tyre	155 R15C (D)	YOKOHAMA	6/6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S AND REAR PORTION.				
<b>5. General Information</b>				
Accident Date	05/01/2018	Inspect Date / Time	09/01/2018 ( 12:24 PM )	
Survey held at	PAUL HOE BATTERIES & MOTOR SERVICES BLK 1 KAKI BUKIT AVE 6 #01-109 AUTOBAY SINGAPORE 417833			
<b>5a. Remarks</b>				
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. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$9,800-\$11,000				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		9 Working Days		

Report Ref No. CS3/SMO18000481/R1d3e2

Inspected By



MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MinstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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