

ASS. REC. BY:

REF: CS3/MSG18000498/Wd3er

range

Special Instructions

Surveyor:

ASSIGNMENT (Office)

Merimen

From (Person):

Elaine Ngu

of

MSIG

Date/Time: 08/01/2018 @ 12:06pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKT 13514

Insured:

YN 3835T

at Workshop m/s

Continental Klasse

Tel:

97243110

of

G8 kaki Bkt Ave 6 #04-07

Policy No:

A28930670MKC

Claim No:

544134

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A:

03/01/2018

CA / REV / REP. / REV 24 HRS

wp

H.O.D. Endorsement:

Date/Time:

9:40am @ 09/01/18

Person Contacted:

Derrick

Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (X) Estimate	
	SKT 13514 - NA/MSG18000168/24	D.O.A: 03/01/2018
	YN 3835T - NA/MSG18000168/24	D.O.A: 03/01/2018

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV: _____
 To Inspect Vehicle No: SKT1351 U.
 at Workshop m/s Continental Klasse
 of 68 Kaler Bulat Ave 6
 Insured #34-57
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record) Damage: 97243110
 Make of Veh: _____
 (Policy Condition) ?
 Remark: The veh had commenced its repair at the time of inspection.
 Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

4	
N/S	O/S

Veh No: SKT13514 Regn: 10/6/2010
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: BMW 335 cc 2979
 Colour: white AC Insured / Std / NI / NA
 Sp. Reading: 6774 T. Ratio: Insured / Std / NI / NA
 Eng. No: _____
 C/No: WBAWL2060P285531
 Gen. Cond: (Good) Fair / Poor / Burnt
 Steering: (Inorder) Jammed / Leaked / Burnt or
 Brake: (Inorder) Jammed / Leaked / Burnt or
 Mod: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 235/35 ZR19
 R: 275/30 ZR19
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front: _____ Rear: _____
 R/Bal: 4 mm R/Bal: 4 mm
 L/Bal: 4 mm L/Bal: 4 mm
 D.O.A: _____ D.O.I: 10/1/2018
 Survey held at: ?
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
 ?
 The U/C / Chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction
 01/12/2018 Accident Report Not Given,
 workshop informed that bumper
 Repaired Not Related.

Range \$3500 - \$4000

RECEIVED 06 APR 2018

4 Days Repairs

Date/Time File Pass to: 06/04/2018
☐ : Preli. Report
☐ : Final Report

Days Of Repair: _____
 Resurvey No. of Trip: _____

Date/Time File Returning: _____

Add Fee: ☐ Site Insp IS
☐ Interview IS
☐ Tech. Insp IS
☐ Weekend IS

Report Format: PRS
 Lump Sum / I.B.I: (\$)

Signature: [Signature] 4/4/2018

Survey Fee
 Transponder

120
10
130

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Jan 2018		08 Jan 2018 12:06 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:

K_FORCE TRADING PTE LTD, Co. Reg. No.: 200907357H

Main Claimant:

TEO MEI LING, ID: S7506596E

Vehicle Reg. No.:

SKT1351U

Date of Loss:

03/01/2018 09:00 - :59

Claim Type:

TP / 544134

Policy/Cover Note No.:

A28930670MKC (Comprehensive)
Coverage: 16/05/2017 - 15/05/2018

Vehicle Reg. No. (Insured):

YN3835T

Policy No. (Claimant):

Excess:

S\$850.00

Repairer:

Continental Klasse Pte Ltd (Kaki Bukit) 68 Kaki Bukit Avenue 6, # 04-07 ARK @ KB, 417896 Kaki Bukit - Tel: 97243110

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]

Adjuster:

LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 09/01/2018]

Driver/Custodian (Insured):

GOH THIAM CHEE (WU TIANZHI) (), NRIC: S7329473H, Tel: +6589336385

ASSOCIATED MAIL RECEIVED

View All

Compose Case Mail

There are no mail for this case.

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.									

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	03/01/2018 17:47
Date Of Accident	03/01/2018 09:30
Exact Location Of Accident	68 KAKI BUKIT AVE 6 #04-07
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT1351U
Insured/Policyholder	
Name Of Registered Owner	TEO MEI LING
NRIC No	S7506596E
Email Address	TEOANNIE9@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93808677
Alternative Phone No	OFFICE-93808677

Vehicle Particulars

Manufacturer	BMW
Model	335I
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	2100414855
Cover Note Number	

Driver

Name of Driver	TEO MEI LING
NRIC No	S7506596E
Date Of Birth	31/01/1975
Occupation	INDOOR
Date Of Driving Pass	26/07/1996
Driving Experience	21 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93808677
Fax Number	
Contact Number	OFFICE-93808677
EMail Address	TEOANNIE9@HOTMAIL.COM

Address	BLK 462 JURONG WEST ST 41 #02-594
Postcode	640462
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

CAR WAS SENT TO WORKSHOP FOR SPRAY PAINTING. AT THE WORKSHOP, WHILE THE CAR WAS PARKED IN A DESIGNATED PROPER PARKING LOT, A LORRY (YN3835T) REVERSED WITHOUT CLOSING IT'S TAIL GATE AND CRASH INTO MY CAR.

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	YN3835T
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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)	

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:

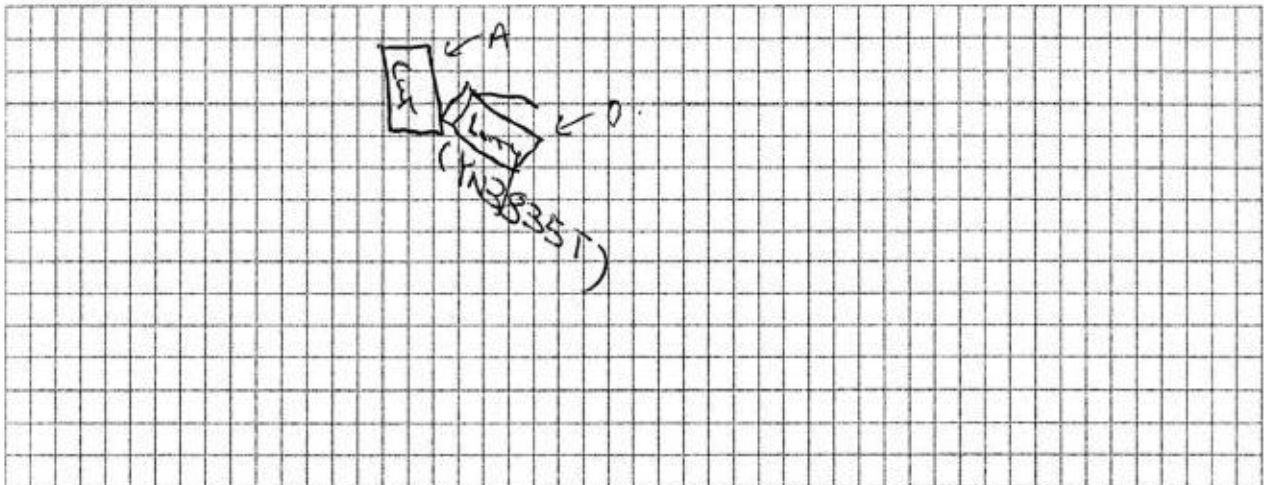
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car was sent to workshop for paint spraying. At the workshop while the car was parked in a designated proper parking lot, a lorry (YN3835T) reversed without closing its tailgate & crash into my car.

Important:
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- Reporting Only
- Claim OD
- Claim TP
- Claim OD/ TP at other workshop

DECLARATION

I/WE declare the foregoing particulars are true in every respect.

Policyholder's signature
Date & Time

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

Reporting Centre Personnel's Signature
Name:
Nric/Fin No.

RECEIVED
04 JUN 2011

BY:

Driving License



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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Jan 2018		08 Jan 2018 12:06 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
<div>CLAIM SUBFOLDER DETAILS [Created by insurer]</div> <div> <div>Insured:</div> <div>Main Claimant:</div> <div>Vehicle Reg. No.:</div> <div>Claim Type:</div> <div>Vehicle Reg. No. (Insured):</div> <div>Repairer:</div> <div>Handling Insurer:</div> <div>Adjuster:</div> <div>Driver/Custodian (Insured):</div> </div> <div> <div>K_FORCE TRADING PTE LTD, Co. Reg. No.: 200907357H</div> <div>TEO MEI LING, ID: S7506596E</div> <div>SKT1351U</div> <div>TP / 544134</div> <div>YN3835T</div> <div>Continental Klasse Pte Ltd (Kaki Bukit) 68 Kaki Bukit Avenue 6, # 04-07 ARK @ KB, 417896 Kaki Bukit - Tel: 97243110</div> <div>MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]</div> <div>LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Teo Cheng Ming Wilson] ... [Imm.Advice due 09/01/2018]</div> <div>GOH THIAM CHEE (WU TIANZHI) (), NRIC: S7329473H, Tel: +6589336385</div> </div> <div> <div>Date of Loss:</div> <div>Policy/Cover Note No.:</div> <div>Policy No. (Claimant):</div> <div>Excess:</div> </div> <div> <div>03/01/2018 09:00 - :59</div> <div>A28930670MKC (Comprehensive)</div> <div></div> <div>S\$850.00</div> </div> <div>Coverage: 16/05/2017 - 15/05/2018</div> <div>View All Compose Case Mail</div>				

ASSOCIATED MAIL RECEIVED

There are no mail for this case.

ALL ASSOCIATED TASKS

View All

Search Tasks

Create New Task

Complete

Claim Documents

*SKT1351U (544134)
[YN3835T]
TP
TEO MEI LING
Jan 3 2018 9:00AM
[K_FORCE TRADING PTE LTD]
Continental Klasse Pte Ltd

[Upload Documents](#)
[Upload Photos](#)
[Compose New Letter](#)

View View in Browser

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	08/01/18 12:06	Accident Statement <small>From: SC - Reg. No: YN3835T, Claimant: K_FORCE TRADING PTE LTD</small>		Load HTM	

Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
2	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
3	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
4	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
5	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
6	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
7	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
8	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
9	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
10	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
11	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
12	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
13	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
14	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
15	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
16	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
17	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
18	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
19	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
20	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
21	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
22	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
23	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>
24	05/04/18 19:12	General View		Load JPG	<input checked="" type="checkbox"/>

Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	05/01/18 17:41	EMAIL TP FOR 10 SURYVEORS -SKT1351U		Load PDF	
2	05/01/18 17:41	EMAIL FROM CT VISION - SKT1351U.		Load PDF	
3	05/01/18 17:41	PRI FROM TP - SKT1351U.		Load PDF	
4	08/01/18 12:05	Disagree on SJE		Load PDF	
5	08/01/18 12:05	Reply on Disagree of SJE		Load PDF	
6	08/01/18 12:06	TP GIA REPORT <small>From: SC - Reg. No: YN3835T, Claimant: K_FORCE TRADING PTE LTD</small>		Load PDF	
7	08/01/18 14:50	Fax From Third Party		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></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer			
<small>Note: Remarks are private unless you show it to other parties.</small>			

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/MSG18000498/WD3E2
Date: 09/04/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	A28930670MKC
Claimant Vehicle No :	SKT1351U	Insured Vehicle No :	YN3835T
Date of Loss:	03/01/2018	Nature of Claim:	TP
		Claim No:	544134

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SKT1351U	Engine No:	09067338N54B30A
Make & Model:	BMW 335i, 3.0 (A)	Chassis No:	WBAWL72060PZ85531
Reg. Date:	10/06/2010 (Man. Year: 2010)	Odometer:	67774 km
Colour:	White		
Engine Capacity:	2979 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:

CONDITION OF TYRES

Front Tyre Size:	235/35Z R19	Rear Tyre Size:	275/30Z R19
Front Left Side:	Michelin 4 mm	Rear Left Side:	Michelin 4 mm
Front Right Side:	Michelin 4 mm	Rear Right Side:	Michelin 4 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	
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:	08/01/2018	
Date Inspected:	10/01/2018 Inspected At:	Continental Klasse Pte Ltd (Kaki Bukit) 68 Kaki Bukit Avenue 6, # 04-07 ARK @ KB Singapore 417896
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.

- 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 \$3,500.00 - \$4,000.00

REPAIR DETAILS

Reference

Part Source: MRM-SG **Version:** 1.0 (Last Synchronised: 09 Apr 2018)

Parts: 143 BMW 335I 3.0 (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SKT1351U)

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 >