

11/01/2018

ASS. SEC. BY

REF: CS/MSG18000762/K1rd3n2

Calvin

ASSIGNMENT (Office)

Menimen

From (Person)

Jasmine tok

MSIG

Date Time

12/01/2018 @ 2:35pm

Estimated Cost

Bill to

OD (TP) WS / TP RES / OD RES / EVA / ENV / MV / CS

To Inspect Vehicle No.

SHB 80242

Insured

GBE 44Z

at Workshop to

Premier Taxis

Tel

6544 6676

of

23 Changi South Ave 2 #03-02

Policy No

28876563MKC

Claim No

515612

Sum Insured

Excess

Make of Veh

(Client's Record)

D.O.A.

11/01/2018

CA / REV / REP. / REV 24 HRS

'wp'

RAD Information

Date/Time

3:11pm @ 12/01/2018

Person Contacted

Vineent

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓) Estimate

SHB 80242 - CC4 / AXA16020047/M/hg3y2

D.O.A : 19/10/16

GBE 44Z - X

Sent preli through menimen

Summary

Kalvin

REF:

ASSIGNMENT

From _____ Date _____
 Estimated Cost _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No. _____
 at Workshop m/s _____
 of _____
 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.

N/S	O/S

Ball. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? Yes or No
 GIA / PR Seen: _____ Consistent? Yes or No
 Est. Repairs: _____ days Res: Yes or No
 Lump Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No. **SHB 80242** Regn **2200 215**
 Type M.Car / M.Cycle / Bus / Van / Lorry / T.B. / Prime Mover /
 Truck / Trailer or
 Make **KIA Optima** cc **1685**
 Colour **Silver** A.C. Insured / Std / NI / NA
 Sp Reading **391371** T-Radio Insured / Std / NI / NA
 Eng No. _____
 C No. **KNAH M 44MF5639257**
 Gen Cond. Good / Fair / Poor / Burnt
 Steering In order / Jammed / Leaked / Burnt or
 Brake In order / Jammed / Leaked / Burnt or
 Modi: Nil / SiRim / STD A/Rim or
 Tyre Size F: **205/65 R16**
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Motex**
 Front _____ Rear _____
 R/Bal **7** mm R/Bal **7** mm
 L/Bal **7** mm L/Bal **7** mm
 D.O.A **11/1/8** D.O.I **12/1/8**
 Survey held at **Premier**
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
M/S frame
 The U/C / Chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction
12/1/8 **Continued up to 1200 / 3 Pm**
Red: \$1632.75, 581.

RECEIVED 19 JAN 2018

Date/Time File Pass to: ☐ : Preli. Report
☒ : Final Report
 Date/Time File Return to:

Days Of Repair: **3**
 Resurvey No. of Trip: **1**

Survey Fee
 Transportation

Report Format: **TP**
 Lump Sum / +B: **1200**

Add Fee: ☐ Site Insp: \$
☐ Inter. Insp: \$
☐ Tech. Insp: \$
☐ Wash & Dry: \$

200
10
210

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	12 Jan 2018		12 Jan 2018 14:35 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	DESIST, Co. Reg. No.: NA		
Main Claimant:	PREMIER TAXIS PTE LTD, Co. Reg. No.: 200304975H		
Vehicle Reg. No.:	SHB8024Z	Date of Loss:	11/01/2018 00:00 - :59
Claim Type:	TP / 545612	Policy/Cover Note No.:	28876563MKC (TP, Fire & Theft) Coverage: 11/01/2018 - 10/01/2019
Vehicle Reg. No. (Insured):	GBE44Z	Policy No. (Claimant):	
		Excess:	
Repairer:	Premier Taxis Pte Ltd - Changi (HQ) 23 Changi South Ave 2 #03-02, 486443 Changi - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jasmine Lok Kheng Kwei - 6594 2550]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 13/01/2018]		
Driver/Custodian (Insured):	JOHN NG KIM CHUA (), NRIC: S1166794E		
Adj Asg. Remarks:	ON WP		

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.									




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				
MSG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG18000762/K1rd3		
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 12-01-2018		
		Code : MSG		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBE 44Z	Veh. Inspected	SHB 8024Z	
Policy No.	28876563MKC	Coverage (\$)	0.00	
Claim No.	545612	Excess (\$)	0.00	
Assign From	MERIMEN (JASMINE LOK)	Assign Date	12/01/2018	
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	11/01/2018	Inspection Date	12/01/2018	
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.				

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Jasmine Lok Kheng Kwei

Date: 18 Jan 2018

Preliminary Advice

Insured Vehicle No	: GBE44Z	Accident Date	: 11/01/2018
TP Vehicle No	: SHB8024Z	Assignment Date	: 12/01/2018
Make	: KIA OPTIMA	Est. Duration of Repair	: 3.00
Date of Inspection	: 12/01/2018		
Inspection At	: PREMIER TAXIS PTE LTD - CHANGI (HQ) 23 CHANGI SOUTH AVE 2 #03-02 SINGAPORE 486443		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages n/s front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	2,832.75
Revised Amount	:S\$	1,528.55
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,528.55

Lump Sum Repair	:S\$
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Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

- () The vehicle is economical/not economical for repair.
- (X) The above survey was conducted on a 'without prejudice' basis.

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	12/01/2018 10:43
Date Of Accident	11/01/2018 16:50
Exact Location Of Accident	BEACH ROAD - IN FRONT OF ST JOHN HEADQUARTERS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB8024Z
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

Driver

Name of Driver	CHONG WHYE LEONG
NRIC No	S6804958Z
Date Of Birth	29/01/1968
Occupation	OUTDOOR
Date Of Driving Pass	13/05/1998
Driving Experience	19 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96968130
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 38C #14-848 BENDEMEER ROAD
Postcode	333038
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	4
Passenger 1	NAME: : FOREIGNER GENDER: : MALE
Passenger 2	NAME: : FOREIGNER GENDER: : FEMALE
Passenger 3	NAME: : FOREIGNER - CHILD GENDER: : MALE

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

VEH. A - 3 PAX VEH. B - NO PAX

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	GBE44Z
Vehicle Make/Model/Colour	LAND ROVER
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	JOHN NG KIM CHUA
NRIC/Passport Number	S1166794E
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

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.



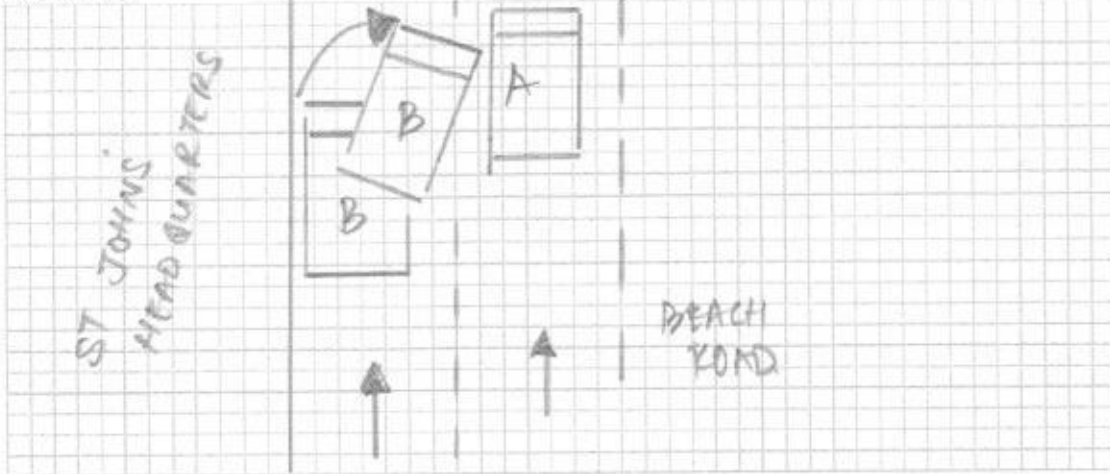
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 12 JAN 2018
10:55AM

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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHIP 80242.

B: GBE 442

DECLARATION

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



Policyholder's Signature _____
Date & Time: _____

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

12 JAN 2018

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

Text size + -

Enquire Transaction History**Transaction History Details**

Log Date/Time:	22 Oct 2015 / 08:33:16	Receipt No.:	AACCK001-AX239-151022-000003
Asset Type:	Vehicle	Transaction Amount:	\$68,676.00
Asset ID:	SHB8024Z	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20151022083316899440		

Vehicle No.:	SHB8024Z
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Scheme:	Taxi (Company)
First Registration Date:	22 Oct 2015
Original Registration Date:	22 Oct 2015
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414MF5639357
Engine No.:	D4FDEH313449
Motor No.:	-
Trailer Chassis No.:	-
Propellant:	Diesel
Passenger Capacity:	4
Engine Capacity:	1685
Power Rating:	-
Unladen Weight:	1584
Maximum Laden Weight:	2050
Primary Color:	Silver
Secondary Color:	-
Manufacturing Year:	2015
Open Market Value:	\$22,212.00
Minimum PARF Benefit:	\$13,858.00
PARF Eligibility:	Y
No. of Transfer:	0
Effective Ownership Date/Time:	22 Oct 2015 08:33:16
COE No.:	2015102201003713H
COE Expiry Date:	21 Oct 2023
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$45,439.00
Lifespan Expiry Date:	21 Oct 2023

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511
CO. REG:200707743D GST REG:200707743D

12-Jan-18

ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHB 8024 Z

1 pc	Front n/s wheel cover	— <i>brake</i>	\$	116.00
1 pc	Front n/s fender	— <i>brake</i>	\$	384.00
1 pc	Front n/s fender inner shield	— <i>brake</i>	\$	120.00
1 pc	Front bumper	— <i>brake</i>	\$	531.00
1 pc	Front bumper n/s side retainer	@ \$16.00 — <i>brake</i>	\$	16.00
1 pc	n/s head lamp	— <i>brake</i>	\$	1,028.00
			\$	2,195.00
Less 35%			\$	768.25
			\$	1,426.75

S/NETT

1 set	Front n/s fender inner shield clips	— <i>brake</i>	\$	28.00
1 set	Front bumper clips	— <i>brake</i>	\$	48.00
1 pc	Front n/s fender sticker	— <i>brake</i>	\$	30.00
Sundry <i>new</i>			\$	50.00 20
To check wheel alignment			\$	80.00 <i>brake</i>
To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the same			\$	650.00 400
To putty and spray painting on front bumper, front n/s fender			\$	400.00 360
To apply rustproofing on the repaired and replaced panels.			\$	120.00 20
			\$	2,832.75

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

LNK 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 confirmation
- 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

Acknowledged by Repairer

Signature:

Date:

Kevin (CLK)
12/1/18 1635hr
3 Days
PIP
Before Paint photo

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: CS/MSG18000762/K1RD3N2

Date: 22/01/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	28876563MKC
Claimant Vehicle No :	SHB8024Z	Insured Vehicle No :	GBE44Z
Date of Loss:	11/01/2018	Nature of Claim:	TP
		Claim No:	545612

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHB8024Z	Engine No:	D4FDEH313449
Make & Model:	KIA OPTIMA, 1.7 D (A)	Chassis No:	KNAGM414MF5639357
Reg. Date:	22/10/2015 (Man. Year: 2015)	Odometer:	391371 km
Colour:	Silver		
Engine Capacity:	1685 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:	205/65R16	Rear Tyre Size:	205/65R16
Front Left Side:	Maxxis 7 mm	Rear Left Side:	Maxxis 7 mm
Front Right Side:	Maxxis 7 mm	Rear Right Side:	Maxxis 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	1,582.75	748.55	834.20	52.71
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,250.00	780.00	470.00	37.60
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	2,832.75	1,528.55	1,304.20	46.04
Approved Total (Overridden) (S\$)		1,200.00		
(S\$)	2,832.75	1,200.00	1,632.75	57.64
+ GST 7.00/7.00% (S\$)	198.29	84.00	114.29	57.64
Nett Amount (S\$)	3,031.04	1,284.00	1,747.04	57.64

INSPECTION

Date of Assignment:	12/01/2018	
Date Inspected:	12/01/2018	Inspected At: Premier Taxis Pte Ltd - Changi (HQ) 23 Changi South Ave 2 #03-02 Singapore 486443
Estimated Period of Repair:	3.0 days	

Adjuster: KALVIN ANG WEI KUN

Manager: Janice Lee Si Hua

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

Reference

Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 22 Jan 2018)
Parts: 143	KIA OPTIMA 1.7 D (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SHB8024Z)	
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

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT N/S WHEEL COVER	Grazed	116.00 FL	*116.00 FL
2	1		*FRONT N/S FENDER	Dented	384.00 FL	*384.00 FL
3	1		*FRONT N/S FENDER INNER SHIELD	Serviceable	120.00 FL	*- FL
4	1		*FRONT BUMPER	Deformed	531.00 FL	*531.00 FL
5	1		*FRONT BUMPER N/S SIDE RETAINER	Cracked	16.00 FL	*16.00 FL
6	1		*N/S HEAD LAMP	Serviceable	1,028.00 FL	*- FL
7	1		*SET FRONT N/S FENDER INNER SHIELD CLIPS	Not Necessary	28.00 FS	*- FS
8	1		*SET FRONT BUMPER CLIPS	Necessary	48.00 FS	*48.00 FS
9	1		*FRONT N/S FENDER STICKER	Not Necessary	30.00 FS	*- FS
10	1		*SUNDRY	Necessary	50.00 FS	*20.00 FS

F=Franchise part, S=SpcNett, L=ListItemDisc.

Sub Total (\$\$)	2,351.00	1,115.00
- List Item Discount on L Items 35.00/35.00% (\$\$)	768.25	366.45
Total Parts (\$\$)	1,582.75	748.55

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
Labour Items				
1	TO CHECK WHEEL ALIGNMENT	New	80.00	-
2	TO LABOUR CHARGE FOR DISMANTLE AND RENEW THE ACCIDENT DAMAGED PARTS.INCLUDING KNOCK-OUT,STRAIGHTEN,REPAIR,RESHAPE AND ADJUST OF THE SAME	New	650.00	400.00
3	TO PUTTY AND SPRAY PAINTING ON FRONT BUMPER,FRONT N/S FENDER	New	400.00	360.00
4	TO APPLY RUSTPROOFING ON THE REPAIRED AND REPLACED PANELS	New	120.00	20.00
Gross Labour Cost (S\$)			1,250.00	780.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >