

22/03/2002

ASS. REC. BY:

REF:

CS/AGZ/8001494/Umbn

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person):

Albert Hong

of

AGZ

Date/Time:

25/01/2018 3:07pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLL 3525C

Insured:

SKA 9503X

at Workshop m/s

Abwin Service

Tel:

9751 9596

of

8 Kaki Bukit Ave 4 #07-48

Policy No:

Claim No:

C10001303

Sum Insured:

Excess:

Make of Veh:

D.O.A.

23/01/2018

(Client's Record)

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

H.O.D. Endorsement:

Date/Time:

25/01/2018

Person Contacted:

Linda

Vehicle:

IN OUT

Date/Time	Action/Instruction (✓) Estimate
	SKA 9503A - X
	SLL 3525C - X

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

AG1
ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SL23525Cat Workshop m/s Abw.n

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 5 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

9903H

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SL23525C Yr Regn: 2, 17

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

Truck / Trailer or CAMake: Toyota corolla Altis c.c 1588Colour: White A/C: Insured / Std / NI / NASp. Reading: 30439 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MRO53REH104551267Gen. Cond: Good / Fair / Poor / BurntSteering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215 / 45 R.7

R: _____

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

TOYO / YOKO or

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 23/1/18

Survey held at _____

Rear

R/Bal. 6 mmL/Bal. 6 mmD.O.I. 25/1/18

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

9/2/18 n/s diff difference case. claims NTAC
confirm d/s & 2800 with under. (Red 5403.48, 66%)

RECEIVED 00 FEB 2018

Date/Time, File Pass to? ☐

: Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 9/2- typistReport Format: TPLump Sum / I.B.I. (\$) 2800/2Days Of Repair: 5Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

250

Survey Department Check List (Case Handler)

Reference No.: CS | AGI 18001494 | Uvb
Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

Admin (): Case handler to make sure all Information created by the assignment team are ACCURATE.

(1) Office Assign Form

		Y-Date	N-Date	Y-Date	N-Date
C	Reference No.	✓			
C	Customer Code				
N	Assign From	✓			
C	Assign Date	✓			
C	Veh No (Inspected)	✓			
C	Veh No (Insured)	✓			
C	D.O.A	✓			
C	Policy No	✓			
C	Claim No				
C	Insurance Authorisation (CA /REV/REP)	✓			
C	Report Type				
C	Weekend Charges	✓			
N	Survey held at/Repairer				
C	Excess				

Surveyor (): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

C	Vehicle No	✓			
C	Regn Month/Year	✓			
N	Vehicle Type	✓			
N	Make & Model	✓			
C	Engine Capacity. (C.C)	✓			
N	Colour	✓			
C	Odometer. (Sp.Reading)	✓			
C	Chassis No	✓			
N	General Condition	✓			
N	Steering	✓			
N	Brake	✓			
N	Modification (Modi)	✓			
C	Tyre Size	✓			
N	Tyre Make	✓			
C	Tyre Balance	✓			
C	Date of Inspection	✓			
N	Survey held	✓			
N	Des.of Damages	✓			

(2) System - (Views/Merimen)

C	Damaged Vehicle Photographs Uploaded	✓			
---	--------------------------------------	---	--	--	--

(3) Workshop Estimate/Assignment Form

N	ALL Parts condition	✓			
C	Market Value for OD cases				
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
C	Days of repair	✓			
C	Finalised Amount	✓			
C	Re-inspection Cases to Finalize within 5 Days				

(4) System - (Views/Merimen)

C	Resurvey photo Uploaded	✓			
---	-------------------------	---	--	--	--

Check By: **VERON** | 9/2/18
Case Handler | Date

*C: Critical *N: Non-Critical

21/05/2014



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

AUTO & GENERAL INSURANCE (S) PL

Ref : CS/AGI18001494/Uvb

(BUDGET DIRECT INSURANCE)

190 CLEMENCEAU AVENUE #03-01

SINGAPORE SHOPPING CENTRESINGAPORE

239924

Date : 25-01-2018



Code : AGI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKA 9503X	Veh. Inspected	SLL 3525C
Policy No.		Coverage (\$)	0.00
Claim No.	C10001303	Excess (\$)	0.00
Assign From	ALBERT HONG	Assign Date	25/01/2018

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	23/01/2018	Inspection Date	25/01/2018
Survey held at	ABWIN SERVICE PTE LTD No. 8 KAKI BUKIT AVENUE 4 #07-48 PREMIER@KAKI BUKIT GATE 2 SINGAPORE 415875		

5a. Remarks

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

Catherine Chong (LKK Auto)

From: Albert Hong <albert.hong@budgetdirect.com.sg>
Sent: Thursday, 25 January, 2018 3:07 PM
To: assignments
Cc: SUR; Julie Mangubat
Subject: Appoint LKK to conduct TP survey; Our Ref: C10001303
Attachments: FAX_20180125_1516853748_24.pdf

On behalf of Julie,

Hi Team,

Please accept survey assignment and liaise with TP workshop.

Thank you.

Regards,

Albert Hong
Senior Executive, Claims

T +65 6540 2182
F +65 6725 0853
E albert.hong@budgetdirect.com.sg

**Budget
Direct**
insurance

Customer Care: +65 6221 2111
Claims: +65 6221 2199
Claims (Int.): +65 6540 2199

190 Clemenceau Avenue
#03-01, Singapore Shopping Centre
Singapore 239924
budgetdirect.com.sg

Auto & General Insurance (Singapore) Pte. Limited (co. Reg. No. 201626103G) trading as Budget Direct Insurance.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	9903H
Vehicle Details	
Vehicle No.:	SLL3525C
Vehicle to be Exported:	No
Intended De-registration Date:	25 Jan 2018
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 CVT
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	1ZRY293715
Chassis No.:	MR053REH104551267
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$19,990.00
Original Registration Date:	22 Feb 2017
First Registration Date:	22 Feb 2017
Transfer Count:	0
Actual ARF Paid:	\$19,990.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Feb 2027
PARF Rebate Amount:	\$14,992.00
Intended COE Rebate Details	
COE Expiry Date:	21 Feb 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,889.00
COE Rebate Amount:	\$46,200.00
Total Rebate Amount:	\$61,192.00

The information contained herein is correct as at 25 Jan 2018

OK

MSME18012113 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 24/01/2018 16:43
SUBMITTED BY: Chia Pei Ying

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 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	24/01/2018 16:43
Date Of Accident	23/01/2018 23:30
Exact Location Of Accident	SLE TWDS WOODLANDS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL3525C
Insured/Policyholder	
Name Of Registered Owner	WANG YAO
NRIC No	S2719903H
Email Address	WENBUILTPTLTD@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91381212
Alternative Phone No	OFFICE-91381212

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
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	2100501846
Cover Note Number	

Driver

Name of Driver	WANG YAO
NRIC No	S2719903H
Date Of Birth	26/03/1966
Occupation	INDOOR
Date Of Driving Pass	30/04/2009
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91381212
Fax Number	
Contact Number	OFFICE-91381212
Email Address	WENBUILTPTLTD@GMAIL.COM

Address 46 WOODLANDS DRIVE 16 #12-51
 Postcode 737777
 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 COLLISION - HEAD TO REAR
 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) 2
 Passenger 1 NAME: : JUNG SHENGMAN
 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

ON 23/01/2018 AT ABOUT 2330HRS, I STOPPED MY CAR ALONG SLE TOWARDS WOODLANDS DUE TO PREVIOUS ACCIDENT. SUEDONLY, VEHICLE B HAD HIT ONTO MY CAR'S REAR PORTION.

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 SKA9503X
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category PRIVATE CAR
 Name of Driver PAMELA WONG
 NRIC/Passport Number S8700168G
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

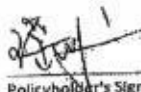
Sketch Plan Pg. 1

SKETCH PLANIMPORTANT 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 willful 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.

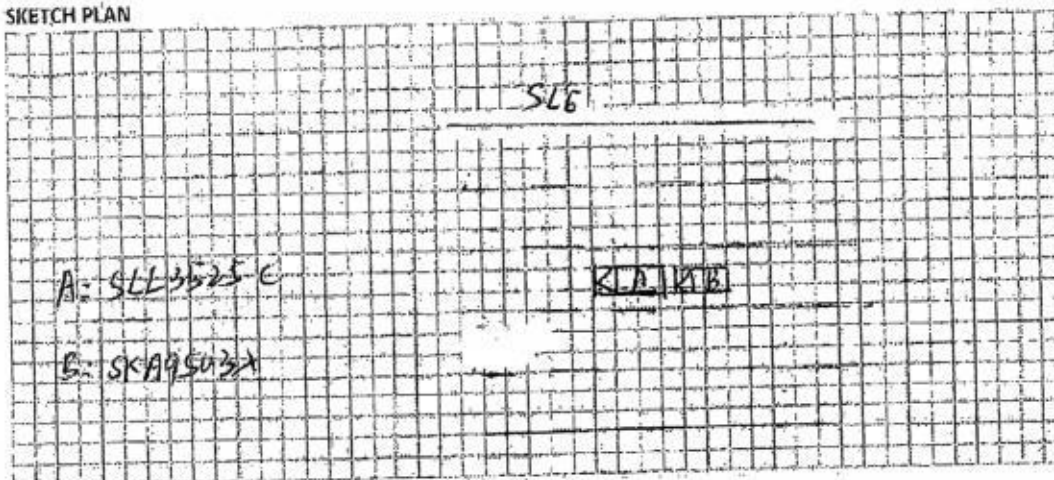

Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23/07/18 at about 2330 Hrs, I stopped my car along
 SLE towards Woodlands due to the previous accident.
 Suddenly the vehicle B had hit onto my car's rear portion.

DECLARATION

(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:

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

GIARDMC SketchPlanForm_V3

Please arrange to survey vehicle at
8 KAKI BUKIT AVENUE 4 - GATE 2
#07-48 PREMIER @ KAKI BUKIT
SINGAPORE 415875

ABWIN 諭輝

Date : 25/01/2018
TP Vehicle No. : SKA-9503-X
To : **AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED**
Attn : **Motor Claim Department**

LINDA LIAO
ABWIN SERVICE PTE LTD
DID: 67139417
Fax: 67139415
HP: 97519596

Owner : WANG YAO
AIG ASIA PACIFIC INSURANCE PTE LTD
Certificate No. : 2100501846-00000
Vehicle No. : SLL-3525-C
Make & Model : TOYOTA COROLLA ALTIS 1.6L CVT

Accident Date: 23/01/2018

ESTIMATED REPAIR COST DETAILS

QTY	DESCRIPTION	REPAIR AMOUNT	SURVEYOR APP.
-----	-------------	---------------	---------------

List Item

- 1 REAR BUMPER
- 1 REAR BUMPER BRACKET RH
- 1 REAR BUMPER BRACKET LH
- 1 REAR BUMPER RETAINER RH 68.10
- 1 REAR BUMPER RETAINER LH 68.10
- 1 REAR BUMPER REINFORCEMENT
- 10 REAR BUMPER CLIPS
- 1 REAR BUMPER REFLECTOR RH
- 1 REAR BUMPER REFLECTOR LH
- 1 LH TAILLAMP BRACKET
- 1 RH TAILLAMP BRACKET
- 1 LH TAILLAMP
- 1 RH TAILLAMP
- 1 BOOT LID
- 1 BOOT LID MOULDING CHROME
- 1 BOOT LID LOCK
- 1 BOOT LID LOCK CATCH
- 1 BOOTLID INNER MOULDING
- 1 REAR END PANEL 630.30
- 1 REAR END PANEL TOP GARNISH
- 10 REAR END PANEL TOP GARNISH CLIPS

Sub Total

Discount 25% on Parts

DP \$501.70 ✓
11 \$95.60 X
11 \$95.60 X
11 \$71.60 ✓
11 \$71.60 ✓
11 \$386.90 ✓
11 \$50.00 ✓
11 \$57.80 X
11 \$57.80 X
11 \$66.70 X
11 \$66.70 X
11 \$390.47 X
11 \$390.47 X
11 \$801.70 X
11 \$265.90 X
11 \$337.60 ✓
11 \$25.40 X
11 \$679.20 X
11 \$679.20 ✓
11 \$242.70 X
11 \$50.00 X
\$5,384.64
(\$1,346.16)
\$4,038.48

2042.7
15-3202

Special Nett

- 1 REAR NUMBER PLATE WITH CASING
- 1 REAR BUMPER REVERSE SENSOR

Sub Total

11 \$65.00 X
11 \$350.00 2005.0
\$415.00

Date : 25/01/2018
 TP Vehicle No. : SKA-9503-X
 To : **AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED**
 Attn : **Motor Claim Department**

LINDA LIAO
 ABWIN SERVICE PTE LTD
 DID: 67139417
 Fax: 67139415
 HP: 97519596

Owner : WANG YAO
 AIG ASIA PACIFIC INSURANCE PTE LTD
 Certificate No. : 2100501846-00000
 Vehicle No. : SLL-3525-C
 Make & Model : TOYOTA COROLLA ALTIS 1.6L CVT

Accident Date: 23/01/2018

ESTIMATED REPAIR COST DETAILS

QTY	DESCRIPTION	REPAIR AMOUNT	SURVEYOR APP.
Labour & Misc			
	TO STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	\$1,600.00	800
	TO SPRAY PAINT ON AFFECTED AREAS	\$1,600.00	900
	TO CHECK ALL NECESSARY WIRINGS	\$150.00	30
	TO TRANSFER ALL REAR BOOTLID FITTING	11 \$250.00	X
	TO DETACH & RENEW REVERSE SENSOR	\$150.00	50
	Sub Total	\$3,750.00	3512.02
	Sub Total	\$8,203.48	
	GST 7%	\$574.24	
	Total	\$8,777.72	

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 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:



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

AUTO & GENERAL INSURANCE (S) PL

Ref : CS/AGI18001494/Uvbn2

(BUDGET DIRECT INSURANCE)
190 CLEMENCEAU AVENUE #03-01
SINGAPORE SHOPPING CENTRESINGAPORE
239924

Date : 12-02-2018



Code : AGI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKA 9503X	Veh. Inspected	SLL 3525C
Policy No.		Coverage (\$)	0.00
Claim No.	C10001303	Excess (\$)	0.00
Assign From	ALBERT HONG	Assign Date	25/01/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA COROLLA ALTIS (A)	c.c	1598
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	MR053REH104551267	Colour	WHITE
Odometer	30439	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/45 R17	MICHELIN	6 mm
L/H Front Tyre	215/45 R17	MICHELIN	6 mm
R/H Rear Tyre	215/45 R17	MICHELIN	6 mm
L/H Rear Tyre	215/45 R17	MICHELIN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	23/01/2018	Inspection Date	25/01/2018
Survey held at	ABWIN SERVICE PTE LTD No. 8 KAKI BUKIT AVENUE 4 #07-48 PREMIER@KAKI BUKIT GATE 2 SINGAPORE 415875		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	5 Working Days
-------------------------------------	----------------



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. SLL 3525C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BUMPER	DENTED	501.70	501.70
1	REAR BUMPER BRACKET RH	NOT NECESSARY	95.60	-
1	REAR BUMPER BRACKET LH	NOT NECESSARY	95.60	-
1	REAR BUMPER RETAINER RH	BENT	71.60	68.10
1	REAR BUMPER RETAINER LH	BENT	71.60	68.10
1	REAR BUMPER REINFORCEMENT	DENTED	386.90	386.90
10	REAR BUMPER CLIPS	NECESSARY	50.00	50.00
1	REAR BUMPER REFLECTOR RH	NOT NECESSARY	57.80	-
1	REAR BUMPER REFLECTOR LH	NOT NECESSARY	57.80	-
1	LH TAILLAMP BRACKET	NOT NECESSARY	66.70	-
1	RH TAILLAMP BRACKET	NOT NECESSARY	66.70	-
1	LH TAILLAMP	NOT NECESSARY	390.47	-
1	RH TAILLAMP	NOT NECESSARY	390.47	-
1	BOOT LID	TO REPAIR SEE LABOUR	801.70	-
1	BOOT LID MOULDING CHROME	NOT NECESSARY	265.90	-
1	BOOT LID LOCK	TWISTED	337.60	337.60
1	BOOT LID LOCK CATCH	NOT NECESSARY	25.40	-
1	BOOTLID INNER MOULDING	NOT NECESSARY	679.20	-
1	REAR END PANEL	BADLY DENTED	679.20	630.30
1	REAR END PANEL TOP GARNISH	NOT NECESSARY	242.70	-
10	REAR END PANEL TOP GARNISH CLIPS	NOT NECESSARY	50.00	-
	LESS 25% DISCOUNT		-1,346.16	-510.68
			4,038.48	1,532.02
<u>SPECIAL NETT ITEMS</u>				
1	REAR NUMBER PLATE WITH CASING (SN)	NOT NECESSARY	65.00	-
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	350.00	200.00
			415.00	200.00
<u>LABOUR</u>				
	TO STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS.INCLUSIVE OF THE REPAIR OF BOOT LID.		1,600.00	800.00
	TO SPRAY PAINT ON AFFECTED AREAS.		1,600.00	900.00
	TO CHECK ALL NECESSARY WIRINGS.		150.00	30.00

Report Ref No. CS/AGI18001494/Uvbn2



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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO TRANSFER ALL REAR BOOTLID FITTING.	NOT NECESSARY	250.00	-
	TO DETACH & RENEW REVERSE SENSOR.		150.00	50.00
			3,750.00	1,780.00
GRAND TOTAL			8,203.48	3,512.02
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,800.00

Report Ref No. CS/AGI18001494/Uvbn2

CHUA KANG SENG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.