ASS. REC. BY:	REF (s MSG 18001672	Kladanz III III III III III III III III III I
Memmen rene 74r		Dete/Time 26/1/1804-58pm
Estimated Cost	Bill to:	
OD TP WS / TP RES / OD I	SHB 6383A	Insured SIH 4802R
of 6q for	fort Delaro	Tel 6214 6300
Policy No: 804196	79 amx Claim	To: 547701
Sum Insured	Exce	ss
Make of Vehr (Chent's Record) CA / REV / REP. / REV 2-	HRS wp	D.O.A. 26/01/2018 29/01/2018 11.O.D. Endorsement:
Date/Time Action/Instruction	IIS Person Contacted juncal	M Vehisla (IN 20 UT
SHB 638	3E - CC4] LPC 16024685	
30 1180 4.42pm re	R- 606/A1G11001283/ Word to Irane 7an 1	Marken D. 1. 04/04/2010

SHB 6383A 29/1/18 Merels Beat E720 2143 SHB 6383A Comfort Delgro WPP2120022 A7 62 788 ter lers term b to the Greening one 🕼 cammed Leaves Earn 10: N S = 571 D 205/60K16 A DUN ENNOVA OF TO LOW WILL OFFISH FIREM Pamery They'er had commenced its Salt Name (194) Consistent? Yes thing 1.0 Aprilan Foot (Ph & Cloques, 01 RE REP 21-RS WP) ence in out Chasa sirama - Booy Structure affected

31/1/18 (notral c/5\$ 2150/ 3 Pags (Red & 6610-48, 75%)

L/s,

RECEIVED 3 1 JAN 2018



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

MSIC	INSURANCE (SI	NGAPORE) PTE LTD	Ref : CS/MSG18001	672/K1qd3
WIOIC	110011/1102 (01	NON ONE) I TEELD		
	AFFLES QUAY 01 HONG LEONG	BLDG SINGAPORE 048581	Date: 29-01-2018	
			Code: MSG	
1.		Policy Particulars	:- THIRD PARTY CLAI	M
	Insured Veh.	SJH 4802R	Veh. Inspected	SHB 6383A
	Policy No.	80419079QMX	Coverage (\$)	0.00
	Claim No.	547701	Excess (\$)	0.00
	Assign From	MERIMEN (IRENE TAN)	Assign Date	29/01/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	5	Steering	
	Brakes		Modification	
	General			
3.		Condit	ions 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.		Descript	ion of Damages	STATE OF THE PARTY.
5.	Engine No.	TOUR PROPERTY OF	al Information	20/04/2049
	Accident Date	26/01/2018	Inspection Date	29/01/2018
	Survey held at	COMFORTDELGRO ENGINEE	KING PTE LTD	
		59 LOYANG DRIVE SINGAPORE 508969		
5a.	CERTIFIC CONTRACTOR	A Second	Remarks	
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WI	THOUT PREJUDICE" BAS	SIS. SED REPAIRS

Note: This document has not been finalised.

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:

Irene Tan Gek Ing

Date:

30 Jan 2018

Preliminary Advice

Insured Vehicle No : SJH4802R

TP Vehicle No

: SHB6383A

Accident Date

: 26/01/2018

Make

: MERCEDES-BENZ E220

Assignment Date

: 26/01/2018

Est. Duration of Repair

Date of Inspection : 29/01/2018

: 3.00

Inspection At

: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

59 LOYANG DRIVE

SINGAPORE 508969

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	8,760.48
Revised Amount	:S\$	2,692.48
Check Items (Estimated)	:S\$	1,744.00
Total	:S\$	4,436.48

Lump Sum Repair

:S\$

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.
---	---	----------------	----------------	------------	-----	---------

The above survey was conducted on a 'without prejudice' basis.

Reference No.: C3 MSG18091677 Klgd3
Policy Type: OD /TP) TP RES / TL / EVA Case Handler Admin (Nivither): Case handler to make sure all Information created by the assignment team are ACCURATE. Y-Date N-Date Y-Date N-Date (1) Office Assign Form C Reference No. Customer Code 0 Assign From N C Assign Date C Veh No (Inspected) Veh No (Insured) C C D.O.A Policy No C C Claim No Insurance Authorisation (CA /REV/REP) C Report Type C Weekend Charges C Survey held at/Repairer N C Excess Surveyor (Calvin): Case handler to make sure the surveryor completed all required information. (1) Assignment Form C Vehicle No Regn Month/Year C N . Vehicle Type Make & Model Engine Capacity. (C.C) C N Colour Odometer. (Sp.Reading) Chassis No. General Condition N Steering N Brake N Modification (Modi) N C Tyre Size Tyre Make Tyre Balance C Date of Inspection C Survey held Des.of Damages (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form ALL Parts condition N Market Value for OD cases C Estimate Repair Cost for PRI (RSI, TMI, MSIG) C Days of repair Finalised Amount Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo ploaded Check By:

Date

Case Handler

Survey Department Check List (Case Handler)

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	26 Jan 2018		26 Jan 2018 16:58 Assign				New Assignment Cancel Case	
	Main	Refere	nce	Claim Deta	nils	Documents	Show All	
CLAIM SI	UBFOLDER DETA	ILS				[Created by	insurer]	
Insured:		NAGAPPAN S	SUBRAMANIAN	, ID: S26537862	7			
Main Clain					. Reg. No.: 199303			
Vehicle Re	g. No.:	SHB6383A		Date of	Loss:	26/01/2018 (
Claim Type	e:	TP / 54770	1	Policy/C	over Note No.:	80419079QMX Coverage: 12/11/2017 - 07/02/2018		
Vehicle Re	g. No. (Insured):	SJH4802R		Policy N	o. (Claimant):			
				Excess:				
Repairer:		ComfortDelC	iro Engineering	Pte Ltd (Loyan	g) 59 Loyang Drive	, 508969 Loyang -	Tel: 6214 8300	
Handling I	nsurer:	MSIG Insura 6594 2541]	ince (Singapor	e) Pte. Ltd. (HQ	- Tel: +65 6827 7	388 [Handled b	y Irene Tan Gek Ing -	
Adjuster:		LKK Auto Co	nsultants Pte I	.td (HQ) - Tel: 62	56-3561 [Imm	.Advice due 2	7/01/2018]	
ASSOCIA	TED MAIL RECE	IVED				View A	All Compose Case Mail	
There are	no mail for this ca	se.						
ALL ASS	OCIATED TASKS	8			View All Se	arch Tasks Crea	te New Task Complete	
Due Day	te Priority T	vpe Task Gro	up Subject	Handler A	signed By Co	ompleted On	Created On Done's	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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 witholding 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	26/01/2018 11:30
Date Of Accident	26/01/2018 06:45
Exact Location Of Accident	BUKIT BATOK ST 25 TWDS BT BATOK EAST AVE 3
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB6383A
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E220
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy	NO

Are you claiming under yo 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

INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage

THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

YES

Policy Number

MCOM0015

Cover Note Number

Driver

GO TECK CHOON Name of Driver

S1614864D NRIC No 25/01/1963 Date Of Birth OUTDOOR Occupation 31/03/1983 Date Of Driving Pass

Driving Experience

34 YEARS AND 9 MONTHS

Gender

MALE

Mobile Number

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 288E BUKIT BATOK STREET 25

#05-70

Postcode

654288

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - TAXI DRIVER

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

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?
Was any other material or property damaged?

YES

I have been approached by unknown person(s)

TES

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

.

GENDER:

: FEMALE

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

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJH4802R

Vehicle Make/Model/Colour

Details Of Properties

NAGAPPAN SUBRAMANIAM

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

S2653786Z

Contact Number

Address

Addiess

Postcode

Insurance Company Name

Nature Of Damage

FRONT

Page 2 of 18

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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 on Moofus

(ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

> 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.:

STATUME ShouthFlantum_V3

: 1

Sketch Plan Pg. 2

KETCH PLAN	1	
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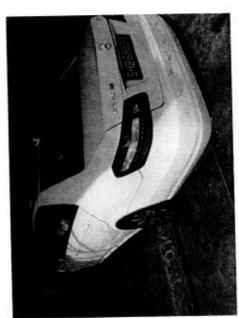
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DECLARATION I/We declare the foregoing partic	ulars are true in every respect.	() Learney
FORT TRANSPORTATION F		W Passell 18
CO. REG. NO. 109363621	K	1110 301
	4-97	Describe Contro Borrannol's Signature
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature Name:
Date & Time:	(If driver is not the policyholder) Date & Time:	NRIC/FIN No.:
CANTERN STATES DESCRIPTION FOR		* * * * * * * * * * * * * * * * * * * *
AND THE PROPERTY OF THE PROPER		(A)

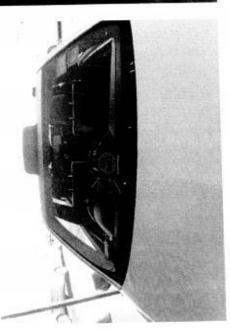
Page 5 of 18













per of COMFORTULERO

turned to Service Reception upon collection

	70. 0	Date/Time:	26.01.2018	12:00	Page : 1
m: ARC Repair TF	P(CLSO)1	JOB CARD Sal	es Order:		JC NO.305110838
MER			REGN NO.: SHB6383A		MILEAGE
MER NO. 7010045	PORTATION PTE LTI		MAKE: MERCEDES BE	INZ	FUEL1/2
ss 383 SIN MING Singapore SIN		11	MODEL E220CDI(E5)	26.	DATE/TIME IN 01.2018 09:50
R) 65508755 P)	(O)		YR OF MANU. 20.03.2014		TARGET DATE
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MILL STREET, TO AND THE REAL PROPERTY OF THE PARTY OF THE					
Service Advisor	Signature/Date	Name of Service Advis	or	Date	

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHB 6383A

DATE 26/1/2018 13:45

MS16-(PIP)

MAKE

ODEL Qty	: MERCEDES BENZ Parts Description/ Labour	Type	Unit	Price	1	Mount
	Boot Lid X/4-2			The second second	\$	2,470.00
	Boot Lid Rubber × June				\$	170.00
	Boot Lid Lock ✓				S	275.00
	Boot Lid Lock Lower Catch				S	35.00
	Boot Lid Lock Sticker - **		1		\$	17.00
	Boot Lid 'E220' Emblem —				\$	54.30
	Boot Lid Star Logo			/	S	45.00
	Boot Lid 'CDI' Emblem				S	54.30
	Rear Bumper				S	1,510.00
	XXX				s	1,150.00
	Rear Bumper Reinforcement Rear Bumper Bracket Lower (LH/RH) Rear Bumper Bracket Top (LH/RH)		s	135.00	S	270.00
	Rear Bumper Bracket Lower (LH/RH)		\$	125.00	\$	250.00
	Trem sumper summer of the summ		\$	115.00	S	230.00
	Rear Bumper Retainer Mounting (LH/RH)		3	115.00	S	1,380.00
	Rear Panel End				0	240.00
	Rear Panel Inner Garnish & 100				2	
	Rear Panel Inner Garnish Clip (10pcs)				\$	40.00
		1			-	0 100 60
	SUB TOTAL	1			S	8,190.60
	LESS 20%	1			S	1,638.12
	DISCOUNTED TOTAL	4			\$	6,552.48
	Rear Bumper Sensor	8			S	388.00
	Labour Charge Panel Beating Spray Painting Charge Wiring Charge Tuff Kote (q	,				
	Labour Charge	900				85 0.00
	Panel Beating 3 Py				\$	
	Spray Painting Charge				S	250.00
	Wiring Charge	In al	A		S	50.00
	Tuff Kote Afth 14	7-1	58		\$	59.00
	Remove/Refix Reverse Sensor				\$	120.00
	LKK Auto Consu	Itants hence	enotify			
	TOTALLABOU	after spray pa	inting		S	1,820.00
	 To display damage 	d part (s) during	resurvey			
	* Paris prices are sure STIMATE TOTAL	o ect to confirm	tation (Freudice" has	2	\$	8,760.48
	 No illegal modificat 	on(s) is allowed	ed			
	Supplementary item Supplementary item	n(s) must be re optoval from In	surveyed and	200		
	15.500005.700000.20	THE RESERVE OF SPICE SHAPE	STREET, GOTTING	and the same of th	_	
	This is an initial estimate based on a visual inspection of	-	vehicle. The	final repair		

COMFORTDELGRO ENGINEERING

	Job Ref No : 305110838				ENGINEERING					
ate		:	30.	01.18		ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156				
NA	LIZATI	ON FO	RM				Pax. O	040 0 100		
0	: _		1	KK			Fax:			
ttn	:		k	KALVIN						
ehic	de Reg	No.	: SHB63	383A		Date	of Accident :_	26.01.18		
he s	survey	and est	imates of th	ne repairs of the	above-me	entloned	vehicle are as	follows:-		
	The r	epair jo	b shall bill	to:	MSIG			SJH4802R		
		2000	amount sl	53308			144			
	(a)	742		r List discount						
	(b)		r Charges			###				
	(0)			y-Part Repair C	ost	1000				
	(c.)	Total	for Lumpsu	r (if applicable) um repair cost a Repair cost	fter Less:	20%		\$2,150.00		
				d for repairs: _	200			ie no moly from you		
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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/MSG18001672/K1QD3N2

Date:

02/02/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

80419079QMX

Claimant

SHB6383A Vehicle No:

Insured Vehicle No:

SJH4802R

Date of Loss:

26/01/2018

Nature of Claim:

TP

Claim No: 547701

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHB6383A

Make & Model:

MERCEDES-BENZ E220, 2.1 D CDI BlueEFFICIENCY

Engine No: 65192431516719

20/03/2014 (Man. Year: 2013)

Chassis No:

WDD2120022A762744

Reg. Date: Colour:

White

2143 cc

Engine Capacity: Market Value/New Car

N/A

(A)

Price:

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

75.46

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size: Front Left Side:

205/60 R16

Rear Tyre Size:

9,373.71

205/60 R16

Odometer: 753268 km

Bridgestone 7 mm Bridgestone 7 mm Rear Left Side: Rear Right Side: Bridgestone 7 mm Bridgestone 7 mm

Front Right Side: The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	6,940.48	1,732.48	5,208.00	75.04
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,820.00	960.00	860.00	47.25
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S	8,760.48	2,692.48	6,068.00	69.27
Approved Total (Overridden) (S		2,150.00		
(S	8,760.48	2,150.00	6,610.48	75.46
+ GST 7.00/7.00% (S		150.50	462.73	75.46

INSPECTION

Date of Assignment:

26/01/2018

Date Inspected:

29/01/2018 Inspected At:

Nett Amount (S\$)

ComfortDelGro Engineering Pte Ltd

7,073.21

(Loyang)

2,300.50

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

3.0 days

Adjuster: KALVIN ANG WEI KUN

Manager: SHIAU CHAN

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 Version: 1.0 (Last Synchronised: 02 Feb 2018) Part Source: MRM-SG

MERCEDES-BENZ E220 2.1 D CDI BlueEFFICIENCY (A) (Catalogue:Merimen Singapore 143 Parts:

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

Print Code: (Unsubmitted, no print-code for SHB6383A)

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 Validity:

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

No.		mended Parts Part No. Particulars	Condition	Repairer's	Amount
	77.00	POR 7011100 POR 7010 PRINTED STORES	Danais	2,470.00 FL	*-FL
1	1	*BOOT LID	Repair Serviceable	170.00 FL	*-FL
2	1	*BOOT LID RUBBER		275.00 FL	*-FL
3	1	*BOOT LID LOCK	Serviceable		*-FL
4	1	*BOOT LID LOCK LOWER CATCH	Serviceable	35.00 FL	
5	1	*BOOT LID LOCK STICKER	Necessary	17.00 FL	
6	1	*BOOT LID E220 EMBLEM	Necessary	54.30 FL	*54.30 FL
7	1	*BOOT LID STAR LOGO	Necessary	45.00 FL	*45.00 FL
8	1	*BOOT LID CDI EMBLEM	Necessary	54.30 FL	*54.30 FL
9	1	*REAR BUMPER	Deformed	1,510.00 FL	*1,510.00 FL
10	1	*REAR BUMPER REINFORCEMENT	Repair	1,150.00 FL	*-FL
		*REAR BUMPER BRACKET LOWER (LH/RH)	Serviceable	270.00 FL	*-FL
11	2	*REAR BUMPER BRACKET TOP (LH/RH)	Serviceable	250.00 FL	*- FL
12		*REAR BUMPER RETAINER MOUNTING (LH/RH	Serviceable	230.00 FL	*- FL
13	2	*REAR PANEL END	Repair	1,380.00 FL	*- FL
14	1		Serviceable	240.00 FL	*-FL
15	1	*REAR PANEL INNER GARNISH	Not Necessary	40.00 FL	*- FL
16	10	*REAR PANEL INNER GARNISH CLIP	Shorted	388.00 FS	
17	1	*REAR BUMPER SENSOR	Shorted	300.0010	000.001
F=Fr	anchise	part. S=SpcNett. L=ListItemDisc.		0.570.00	2,068.60
			Sub Total (S\$)		
		- List Item Discount on L Items	20.00/20.00% (S\$)	1,638.12	336.12
			Total Parts (S\$)	6,940.48	1,732.48

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommer	nded	Labou	ır
RECUIIIIIEI	lucu	Labor	41.

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	850.00	400.00
2	SPRAY PAINTING CHARGE	New	750.00	540.00
3	WIRING CHARGE	New	50.00	
4	TUFF KOTE	New	50.00	-
5	REMOVE/REFIX REVERSE SENSOR	New	120.00	20.00
		Gross Labour Cost (S\$)	1,820.00	960.00
	Report was	s unsubmitted during this print-out.		

< END OF ESTIMATES >