

ASS. REC. BY:

REF:

CS/SFF 18001797 / Gvbent

Special Instruction:

Surveyor:

GG

ASSIGNMENT (Office)

From (Person):

Abdul Rahman

of

SFF

Date/Time:

30012018

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

9KG 1925H

Insured:

QX 619M

at Workshop m/s

Kan Fook Sing Motor

Tel:

6747 9560

of

61 Defu Lane 12

Policy No:

Claim No:

AEMD / 105 / 009 / 2018 / 007

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

28012018

CA / REV / REP. / REV 24 HRS w/p

H.O.D. Endorsement:

Date/Time:

30012018 10:42am

Person Contacted:

Ah Tan

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SK- 1925H x

QX 619M x

said

28/5/18

@ 3:55pm Ah Tan vehicle convert to OD claim

Survey Department Check List (Case Handler)

Reference No.: CS | SPF 18001797 | 61vb
 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

		Case Handler		Typist	
		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

		Case Handler		Typist	
		Y-Date	N-Date	Y-Date	N-Date
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	✓			
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(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				
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Check By: VERON 28/5/18
 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			
AUTOMOTIVE ENGINEERING & MGT DIVISION		Ref : CS/SPF18001797/Gvb	
ACCIDENT CLAIM SECTION (SINGAPORE POLICE FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD POLICE ACADEMYSINGAPORE 298333		Date : 30-01-2018	
Code : SPF			
1. Policy Particulars - THIRD PARTY CLAIM			
Insured Veh.	QX 619M	Veh. Inspected	SKG 1925H
Policy No.		Coverage (\$)	0.00
Claim No.	AEMD/105/009/2018/007	Excess (\$)	0.00
Assign From	ABDUL RAHMAN	Assign Date	30/01/2018
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	28/01/2018	Inspection Date	30/01/2018
Survey held at	KAN FOOK SING MOTOR WORKSHOP 61 DEFU LANE 12 SINGAPORE 539147		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			



SINGAPORE POLICE FORCE

SPF Accidents Claims Section
Automotive Engg & Mgmt Div
Police Logistics Department
No. 1 Mount Pleasant Road
Block 8 Old Police Academy
#02-12 Singapore 298333

Your Ref : SKG1925H

Our Ref : AEMD/105/009/2018/007

Date : 30 January 2018

Tel: 64784840

Fax: 64784848

M/s LKK Auto Consultants Pte Ltd
Paya Ubi Industrial Park
51 Ubi Avenue 1 #01/02-25
Singapore 408933

Via Fax only: 62564315

Dear Sir/Madam,

ACCIDENT ON 28 JANUARY 2018 INVOLVING GOVT VEH QX619M AND OTHER VEH SKG1925H

We refer to the above matter.

- 2 Please arrange for a Pre Repair Inspection of vehicle no. **SKG1925H** at **M/s Kan Fook Sing Motor Workshop of 61 Defu Lane 12, Singapore 539147.**
- 3 For appointment kindly contact Tel: **67479560.**
- 4 Estimates were provided by the workshop.
- 5 Thank you.

Yours faithfully,

Abdul Rahman
Accident Claims Officer
for ASST DIRECTOR

A FORCE FOR THE NATION

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
 Owner ID: 2606I

Vehicle Details

Vehicle No.: SKG1925H
 Vehicle to be Exported: No
 Intended De-registration Date: 31 Jan 2018
 Vehicle Make: AUDI
 Vehicle Model: A1 1.4 TFSI S-TRONIC
 Primary Colour: White
 Manufacturing Year: 2010
 Engine No.: CAX711530
 Chassis No.: WAUZZZ8X1BB052440
 Maximum Power Output: 90.0 kW (120 bhp)
 Open Market Value: \$27,352.00
 Original Registration Date: 14 Apr 2011
 First Registration Date: 14 Apr 2011
 Transfer Count: 1
 Actual ARF Paid: \$27,352.00

Intended PARF Rebate Details

PARF Eligibility: Yes
 PARF Eligibility Expiry Date: 13 Apr 2021
 PARF Rebate Amount: \$17,778.00

Intended COE Rebate Details

COE Expiry Date: 13 Apr 2021
 COE Category: A - Car (1600cc & below)
 COE Period(Years): 10
 QP Paid: \$43,813.00
 COE Rebate Amount: \$14,032.00
Total Rebate Amount: \$31,810.00

The information contained herein is correct as at 31 Jan 2018

OK

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	29/01/2018 15:15
Date Of Accident	28/01/2018 17:15
Exact Location Of Accident	X OF MARINA COAST DR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG1925H
Insured/Policyholder	
Name Of Registered Owner	THAM SAI LIANG
NRIC No	S8582606I
Email Address	KEITHAM20@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94596420
Alternative Phone No	OFFICE-94596420

Vehicle Particulars

Manufacturer	AUDI
Model	A1
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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
------------------	-------------

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	S28936767 SMA
Cover Note Number	

Driver

Name of Driver	THAM SAI LIANG
NRIC No	S8582606I
Date Of Birth	20/12/1985
Occupation	INDOOR
Date Of Driving Pass	14/09/2009
Driving Experience	8 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94596420
Fax Number	
Contact Number	OFFICE-94596420
EMail Address	KEITHAM20@GMAIL.COM

Address 33 FORT #05-01 S439092
Postcode
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 - CROSS JUNCTION
Weather Conditions RAINING
Road Surface WET

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? YES
If Yes, Please state which Police Station
Police Station Name MARINA BAY N.P.C
Police Station Address ROAD: 1 PRINCE EDWARD LINK , POSTCODE: 078872 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: - FAX NO:
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED 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

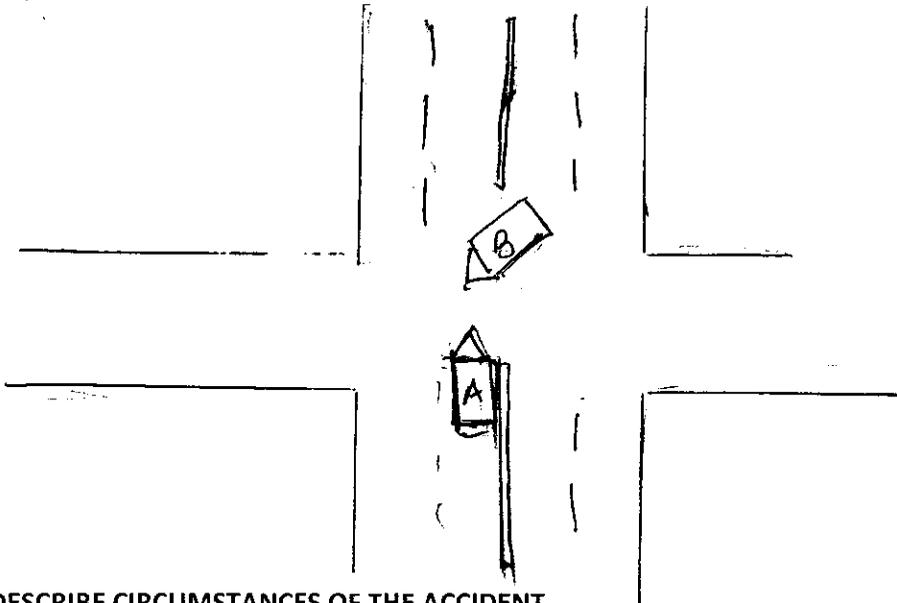
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number QX619M
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category GOVERNMENT
Name of Driver MOHAN KUMAR LIMBU
NRIC/Passport Number F2710239P
Contact Number 93621931
Address NA
NA
Postcode NA
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

4

SKETCH PLAN



A: SKG 1925H

B: QX 619 M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to attached police report

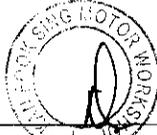
	Insurance Co. <u>MSIG</u>
	Vehicle No. <u>SKG 1925H</u> Date of Accident <u>28/1/18</u>
	<input type="checkbox"/> Reporting Only
	<input checked="" type="checkbox"/> Own Damage Claim
	<input type="checkbox"/> Third Party Claim
	<input type="checkbox"/> Other Workshop
	<u>KFS</u>

DECLARATION

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


 Policyholder's Signature
 Date & Time: 29/1/18
2:30 PM


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 29/1/18
2:20 PM


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



Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

Report No. T/20180128/2090

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/01/2018 18:40	Vide Report No.:	Station Diary No.: 51
--	------------------	--------------------------

Informant's Particulars			
Name of Informant: THAM SAI LIANG		Address: 33 FORT ROAD #05-01 SINGAPORE 439092	
ID Type / ID No.: NRIC NO / S8582606I		Contact No.: Home/Office: Mobile: 94596420	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 32	Date of Birth: 20/12/1985	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: BANKER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 28/01/2018 17:15	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 MARINA COASTAL DRIVE heading towards Marina Financial Centre				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
QX619M	Jeep				Slightly Damaged	3
SKG1925H	Car	AUDI	A1	White	Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

CONTINUATION OF REPORT

Driver			
Name	MOHAN KUMAR LIMBU	ID No.	F2710239P
Related Vehicle	QX619M (Jeep)	Contact No.	93621931
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	THAM SAI LIANG	ID No.	S8582606I
Related Vehicle	SKG1925H (Car)	Contact No.	94596420
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 28/01/2018 at about 1715 hours, I was driving my white Audi A1 (SKG1925H) towards Marina Bay Financial Centre. I was heading straight down Marina Link and the traffic light signal was green. However, as I reached the X-junction of Marina Link and Marina Coastal Drive, I saw a Jeep (QX619M) making a right turn into Marina Coastal Drive from the opposite road. The front part of the Jeep was within the lane I was travelling in and there was no space for my vehicle to pass through without colliding. I tried to apply my emergency brake but the road conditions were slippery and I did not manage to stop my vehicle in time. Therefore, my vehicle collided with the Jeep.

I did not sustain any injuries but the right front headlight and the left front bumper of my vehicle were damaged from the collision.



**SINGAPORE
POLICE FORCE**



T/20180128/2090

Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

3 of 3

Report No. T/20180128/2090

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan



IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: A / Staff Sgt JENNIFER JELLY NAH JOELLE SGT Salminah
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430

Signature Of Informant:
Date/Time: 28/01/2018 18:40
Classification Of Case: SN 173

Authentication Stamp
NP168



Signature:

Singapore Police Force



簡福星嘍嘍工廠

KAN FOOK SING MOTOR WORKSHOP

Headquater: 61 Defu Lane 12 Singapore 539147
 Tel: (65) 6747 9560, 6473 5344 Fax: (65) 6748 1006, 6281 8428
 E-mail: ryan@kanfs.net/ patricia@kanfs.net
 Branch: 1 Kaki Bukit Avenue 6 #01-108 Singapore 417883
 Tel: (65) 6481 5150 Fax: (65) 6481 8683

ATTORNEY GENERAL CHAMBERS
 1 COLEMAN STREET #10-00 S(0617)

DATE : 29-01-2018

VEHICLE NO. : SKG1925H
 ACCIDENT DATE : 28-01-2018 17:15
 THIRD PARTY REF. : QX619M

ATTN: ATTORNEY GENERAL CHAMBERS

ESTIMATE COST OF REPAIR TO VEICLE SKG1925H AUDI A1

#	QTY	PARTS DESCRIPTION	AMOUNT (SG\$)
1	1	FRONT BONNET <i>- Bnc.</i>	1305.00
2	2	FRONT BONNET HINGES@\$92.00 <i>- BT</i>	184.00
3	1	FRONT BONNET LOCK CENTRE TOP <i>- 4BT</i>	42.00
4	1	FRONT BONNET LOCK LOWER RH <i>- 4BT</i>	128.00
5	1	FRONT BONNET STOPPER RH	14.00
6	1	FRONT SUPPORT PANEL <i>- CEA</i>	630.00
7	1	FRONT HEADLAMP RH <i>- CEA</i>	1140.00
8	1	FRONT HEADLAMP LOWER BRACKET RH <i>?</i>	64.00
9	1	FRONT GRILLE <i>- CEA</i>	360.00
10	1	FRONT FENDER RH <i>X repair.</i>	548.00
11	10	FRONT FENDER SHIELD CLIP@\$3.00 <i>- NEU</i>	30.00
12	1	FRONT BUMPER RH <i>- R</i>	450.00
13	1	FRONT BUMPER WIPER NOZZLE RH <i>- DM</i>	118.00
14	1	FRONT BUMPER FOAM <i>?</i>	70.00
15	1	FRONT BUMPER REINFORCEMENT <i>?</i>	408.00
16	1	WASHER TANK <i>?</i>	135.00
17	1	AIR CON CONDENSER <i>?</i>	480.00
18	1	RADIATOR <i>?</i>	350.00
			<hr/>
			6,456.00
			LESS 10 %
			<hr/>
			645.60
			<hr/>
			TOTAL (A)
			<hr/>
			5,810.40

LABOUR CHARGES

1 1 TO CHECK WIRING SYSTEM */* 30.00



簡福星噴呀王廠

KAN FOOK SING MOTOR WORKSHOP

Headquater: 61 Defu Lane 12 Singapore 539147
 Tel: (65) 6747 9560, 6473 5344 Fax: (65) 6748 1006, 6281 8428
 E-mail: ryan@kanfs.net/ patricia@kanfs.net
 Branch: 1 Kaki Bukit Avenue 6 #01-108 Singapore 417883
 Tel: (65) 6481 5150 Fax: (65) 6481 8683

VEHICLE NO. : SKG1925H
 ACCIDENT DATE : 28-01-2018 17:15
 THIRD PARTY REF. : QX619M

#	QTY	PARTS DESCRIPTION	AMOUNT (SG\$)
2	1	TO REMOVE/REFIT/REFILL AIR CON GAS	80.00 <i>81</i>
3	1	TO REMOVE ALL NECESSARY AFFECTED PARTS WELD CUT PANEL BEAT AND FITTING NEW PARTS	720.00 <i>600</i>
4	1	SPRAYPAINTING CHARGES	880.00 <i>750.</i>
TOTAL (D)			1,710.00
ESTIMATE TOTAL			7,520.40

5 Days.

part by part.

before part photos.

Eno Ai ap - 82689282

30/1/18.

[Signature]
11/2/18

LKX 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 Rep:
 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

AUTOMOTIVE ENGINEERING & MGT DIVISION Ref : CS/SPF18001797/Gvbe2

ACCIDENT CLAIM SECTIO (SINGAPORE POLICE
FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD
POLICE ACADEMY SINGAPORE 298333

Date : 30-05-2018



ATTN : ABDUL RAHMAN

Code : SPF

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	QX 619M	Veh. Inspected	SKG 1925H
Policy No.		Coverage (\$)	0.00
Claim No.	AEMD/105/009/2018/007	Excess (\$)	0.00
Assign From	ABDUL RAHMAN	Assign Date	30/01/2018

2. Vehicle Particulars & Condition

Make & Model	AUDI A1	c.c	1390
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	WAUZZZ8X1BB052440	Colour	WHITE
Odometer	120119	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/40 R17	GOODYEAR	6 mm
L/H Front Tyre	215/40 R17	GOODYEAR	6 mm
R/H Rear Tyre	215/40 R17	GOODYEAR	6 mm
L/H Rear Tyre	215/40 R17	GOODYEAR	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION.
DAMAGES SEE DETAILS.

5. General information

Accident Date	28/01/2018	Inspection Date	30/01/2018
Survey held at	KAN FOOK SING MOTOR WORKSHOP 61 DEFU LANE 12 SINGAPORE 539147		

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. SKG 1925H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BONNET	BUCKLED	1,305.00	1,305.00
2	FRONT BONNET HINGES @\$92.00	BENT	184.00	184.00
1	FRONT BONNET LOCK CENTRE TOP	BENT	42.00	42.00
1	FRONT BONNET LOCK LOWER RH	BENT	128.00	128.00
1	FRONT BONNET STOPPER RH	MISSING	14.00	14.00
1	FRONT SUPPORT PANEL	CRACKED	630.00	630.00
1	FRONT HEADLAMP RH	CRACKED	1,140.00	1,140.00
1	FRONT HEADLAMP LOWER BRACKET RH	* CHECK	64.00	-
1	FRONT GRILLE	CRACKED	360.00	360.00
1	FRONT FENDER RH	TO REPAIR SEE LABOUR	548.00	-
10	FRONT FENDER SHIELD CLIP @\$3.00	NECESSARY	30.00	30.00
1	FRONT BUMPER RH	DEFORMED	450.00	450.00
1	FRONT BUMPER WIPER NOZZLE RH	DAMAGED	118.00	118.00
1	FRONT BUMPER FOAM	* CHECK	70.00	-
1	FRONT BUMPER REINFORCEMENT	* CHECK	408.00	-
1	WASHER TANK	* CHECK	135.00	-
1	AIR CON CONDENSER	* CHECK	480.00	-
1	RADIATOR	* CHECK	350.00	-
	LESS 10% DISCOUNT		-645.60	-440.10
			5,810.40	3,960.90
LABOUR				
	TO CHECK WIRING SYSTEM.		30.00	30.00
	TO REMOVE / REFIT / REFILL AIR CON GAS.		80.00	80.00
	TO REMOVE ALL NECESSARY AFFECTED PARTS WELD CUT PANEL BEAT AND FITTING NEW PARTS. INCLUSIVE OF THE REPAIR OF FRONT FENDER RH.		720.00	600.00
	SPRAY PAINTING CHARGES.		880.00	750.00
			-	-
			-	-
			-	-
			1,710.00	1,460.00
GRAND TOTAL			7,520.40	5,420.90



RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE) (EXCLUDE CHECK ITEMS S\$1,356.30 NETT)			5,420.90
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Report Ref No. CS/SPF18001797/Gvbe2

XING GUO QIANG
M.MATAI, AMSAE-A
Automotive Assessor

ADRIAN LING WAI PING
B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI
Licensed Appraiser

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