

22/01/2018

ASS. REC. BY:

REF: CS/FCI 18002039/49d3ⁿ²

Special Instructions:

Surveyor: Marcel

ASSIGNMENT (Office)

CWS

From (Person): Lurene jaw

of: FCI

Date/Time: 31/1/18 @ 5:09pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: FR 70167

Insured: SHB 2179A

at Workshop n/s: Hua Ho Trading

Tel: 6284 4487

of Blk G, Defu Lane 10 # 01-540 Defu Ind. Pk C

Policy No: P18088937MFSH

Claim No: D18000910MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 28/01/2018

02/02/2018

CA / REV / REP. / REV 24 HRS 1wp

H.O.D. Endorsement:

Date/Time: 9:29am @ 1/2/18

Person Contacted: Mr. Lee

Vehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>FR 70167-X</u>
	<u>SHB 2179A-NA/MSG 1800/690/h4</u>
<u>05/2/18 @ 4:20pm</u>	<u>revised to Lurene by email.</u>

D.O.A.: 28/01/2018

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: FR 70167
 at Workshop m/s hna ho
 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.

Bal. or Market Value: 2800

IDAC Accident Report Consistent? : Yes or No

CA / PR Seen: Consistent? : Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Date/Time

Action / Instruction

12/2/18 2/5 2200 confirmed with Marine
CRD 01690, 43%

Veh No: FR 70167 Yr Regn: 12, 99

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

Truck / Trailer or

Make: Honda CB400 c.c. 399Colour: Black A/C: Insured / Std / NI / NASp. Reading: 29395 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NC 311 600721Gen. Cond: Good / Fair / Poor / BurntSteering: Good / Jammed / Leaked / Burnt orBrake: Good / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 110/70-17R: 140/60-17

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

TOYO / YOKO or

Front

R/Bal. 6 mm

L/Bal. mm

D.O.A.

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S, 1/5 Body.

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to? ☐ : Preli. Report1) 23/2 1400 ☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format: 74Lump Sum / I.B.I. (\$) 2700Days Of Repair: 3Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$) S + RS \$☐ : Interview (\$) Photos☐ : Tech. Invs (\$) Others☐ : Weekend (\$)

Survey Fee:

Transportation:

TOTAL

130

50

50

69

299

RECEIVED 23 FEB 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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18002039/Uqd3

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 01-02-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 2179A	Veh. Inspected	FR 7016T
Policy No.		Coverage (\$)	0.00
Claim No.	D18000910MFSH	Excess (\$)	0.00
Assign From	CWS (LURENE JAW)	Assign Date	01/02/2018

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

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5. General Information

Accident Date	28/01/2018	Inspection Date
Survey held at	HUA HO TRADING BLK 6 DEFU LANE 10 #01-540 SINGAPORE 539537	

5a. Remarks

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



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D18000910MFSH

Date: 05 February 2018

Our Ref: CS/FCI18002039/Uqd3

The Motor Claims Department
First Capital Insurance Ltd

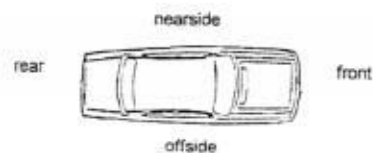
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. FR 7016T

Please be informed that we had conducted the inspection of the abovementioned vehicle on 02/02/2018 at the premises of M/s HUA HO TRADING, and have the following to report:-

Workshop Estimate Amount	: S\$ 4,490.00 .
Revised Estimate Amount	: S\$ 2,974.80 .
"Check" Items Amount	: S\$ - .
Market Value	: S\$ - .
LTA Reimbursement Value	: S\$ - .
Nett Value	: S\$ - .

Description of Damage:
The vehicle sustained damages
at the o/s, n/s body.



Yours faithfully

CHUA KANG SENG
Licensed Appraiser

Survey Department Check List (Case Handler)

Reference No. : *CP/18002039/119d3*
 Policy Type: OD / TP / TP RES / TL / EVA

FR 70167

Case Handler

Typist

Admin (*Nithya*): 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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Customer Code	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
N Assign From	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Assign Date	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Veh No (Inspected)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Veh No (Insured)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C D.O.A	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Policy No	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Claim No	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Insurance Authorisation (CA /REV/REP)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Report Type	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Weekend Charges	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
N Survey held at/Repairer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
C Excess	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

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

(1) Assignment Form

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

(2) System - (Views/Merimen)

C Damaged Vehicle Photographs Uploaded	<input checked="" type="checkbox"/>			
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(3) Workshop Estimate/Assignment Form

N ALL Parts condition	<input checked="" type="checkbox"/>			
C Market Value for OD cases	<input checked="" type="checkbox"/>			
C Estimate Repair Cost for PRI (RSI, TMI, MSIG)	<input checked="" type="checkbox"/>			
C Days of repair	<input checked="" type="checkbox"/>			
C Finalised Amount	<input checked="" type="checkbox"/>			
C Re-inspection Cases to Finalize within 5 Days	<input checked="" type="checkbox"/>			

(4) System - (Views/Merimen)

C Resurvey photo Uploaded	<input checked="" type="checkbox"/>			
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Check By:

Ch *23/7/18*
 Case Handler Date

*C: Critical *N: Non-Critical

21/05/2014

MOTOR SURVEY ASSIGNMENT

Date	30-01-2018	Our Ref No. D18000910MFSH
Accident Date	28-01-2018	Claim Type. Third Party
Insured Vehicle	SHB2179A	Third Party Vehicle. FR7016T
Survey Location	BLK 6 DEFU LANE 10 #01-540DEFU IND PARK C	
Contact Person.	NA	
Contact No.	62844487/ 0	Fax No. 0
Survey Type	WITHOUT PREJUDICE:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	HUA HO TRADING	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	LURENE	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Job Sheet (/ClaimWS/Surveyor/JobSheet/234471)



PRI Documents



Close



PRI Header Details

Claim No	D18000910MFSH	Policy No	D-18088937MFSH	Claimant S.No & Name	1 & HUA HO T
Workshop Name	HUA HO TRADING (Contact Person : NA)	Survey Location & Contact Details	BLK 6 DEFU LANE 10 #01-540DEFU IND PARK C Mobile: 0 , Phone: 62844487 , Fax: 0 EmailId: HUAHOTRADING@YAHOO.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHB2179A	TP Vehicle No	FR7016T
PRI Recieved Date	30-01-2018 05:28:26 PM	Surveyor Appointed Date	31-01-2018 05:07:50 PM	Surveyor Accept Date	01-02-2018 1

Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	01-02-2018	Upload Survey Report *:	<input type="button" value="Choose File"/>
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Vehicle Particulars

Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year ▼
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Remarks

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Monday, 5 February 2018 4:20 PM
To: 'Claim Workflow System'; assignments
Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG; SUR
Subject: RE: SURVEY ASSESSMENT - D18000910MFSH/2
Attachments: CSFCI18002039Uqd3.pdf

Dear Lurene,

Enclosed herewith preliminary advice of FR 7016T.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)

Sent: Thursday, 1 February 2018 12:42 PM

To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: LURENEJAW@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D18000910MFSH/2

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not in workshop, repairer arrange on 02/02/2018.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Claim Workflow System [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]

Sent: Wednesday, 31 January 2018 5:12 PM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; LURENEJAW@MSFIRSTCAPITAL.COM.SG

Subject: PRI: SURVEY ASSESSMENT - D18000910MFSH/2

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Best Regards,
Admin Team

Enquire Transfer Fee

Vehicle Details

Vehicle No. :	FR7016T
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	HONDA
Vehicle Model :	CB400F3WYB
Chassis No. :	NC311600721
Propellant :	Petrol
Engine No. :	NC23E1950722
Engine Capacity :	399 cc
Maximum Power Output :	-
Maximum Laden Weight :	-
Unladen Weight :	-
Year Of Manufacture :	1998
Original Registration Date :	13 Dec 1999
Lifespan Expiry Date :	-
COE Category :	D - Motorcycle
PQP Paid :	\$921.00
COE Expiry Date :	31 Oct 2019

Enquire PARE/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	1449B
Vehicle Details	
Vehicle No.:	FR7016T
Vehicle to be Exported:	No
Intended De-registration Date:	02 Feb 2018
Vehicle Make:	HONDA
Vehicle Model:	CB400F3WYB
Primary Colour:	White
Manufacturing Year:	1998
Engine No.:	NC23E1950722
Chassis No.:	NC311600721
Maximum Power Output:	-
Open Market Value:	\$7,650.00
Original Registration Date:	13 Dec 1999
First Registration Date:	13 Dec 1999
Transfer Count:	9
Actual ARF Paid:	\$1,148.00
Intended PARE Rebate Details	
PARE Eligibility:	No
PARE Eligibility Expiry Date:	-
PARE Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Oct 2019
COE Category:	D - Motorcycle
COE Period(Years):	10
PQP Paid:	\$921.00
COE Rebate Amount:	\$185.00
Total Rebate Amount:	\$185.00

The information contained herein is correct as at 02 Feb 2018

OK

Honda CB400 Super 4 Spec 1

Listing Type	Paid Ad
Brand	Honda (/listing/usedbike/brand/honda/)
Model	Honda CB400 Super 4 Spec 1 (/listing/usedbike/model/honda-cb400-super-4-spec-1/)
Engine Capacity	399cc
Classification	2A
Registration Date	17/07/1999
COE Expiry Date	16/07/2019 (1 years 5 months left)
Mileage	-
No. of owners	-
Type of Vehicle	Street Bikes (/listing/usedbikes/listing/?bike_type=7)

Price: SGD\$4200

Details

Honda CB400 VTEC 1 for sale! Viewing at Soon Hin Motors Pte Ltd. Address: Yishun Industrial Park A Block 1018 S768760. Tel 67524893. We accept Trade in and many other brands new and used models available for sale. Installment plans available No early settlement penalty.

Wishing you good fortune and 28% off
Motorcycle Insurance Premiums.

PROMO CODE

HUAT28

Valid till 18 February only.

fwd.com.sg
FWD
insurance

Similar Bikes

[View All \(/listing/usedbikes/listing/\)](/listing/usedbikes/listing/)

和 好 贸 易

HUA HO TRADING

新加坡德福工業區C德福十巷大牌6號門牌#01-540
Blk 6, Defu Lane 10, #01-540 Defu Industrial Estate Park C,
Singapore 539187, Tel: 62844487 Fax: 62898180

Dear Sir,

Estimate cost repair for the accident motorcycle Vehicle No: FR7016T

Items	Price
Number Plate x	\$38 <i>bel 205.2</i>
Rear Box + Rack	\$380 <i>one</i>
Tail Box	\$368 <i>one</i>
2 Signal Light X 2 <i>Rear</i>	\$130 <i>2/20/20.1</i>
Exhaust Pipe	\$788 <i>2/20/20.1</i>
Side Stand	\$75 <i>2 X</i>
Rear Fender	\$197 <i>one</i>
2 Front Signal light/ Mirror	\$150 <i>1/20/20.1</i>
Engine Guard	\$180 <i>20/20/20 X</i>
Helmet GPR	\$65 <i>one</i>
Fuel Tank	\$850 <i>20</i>
200/s Two Box Cover	\$89 <i>20.3</i>
Towing Fee	\$50 <i>35</i>
Seat Repair	\$80 <i>20/20</i>
Radiator <i>pipe</i>	\$680 <i>80</i>
Radiator water <i>Coolant</i>	\$20 <i>11 X</i>
Labour Charge	\$350 <i>200</i>
Total	\$4490

3022
2719.8
2974.8
2329

102

Not Ackd

20

2/s #2200/2

3 day

2/2/18

To be photo Attached
Tel: 62563561

Lee Yew Ho



HUA HO TRADING
LEE YEW HO

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:




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				
FIRST CAPITAL INSURANCE LTD		Ref : CS/FCI18002039/Uqd3n2		
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 26-02-2018		
		Code : FCI2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHB 2179A	Veh. Inspected	FR 7016T	
Policy No.	D-18088937MFSH	Coverage (\$)	0.00	
Claim No.	D18000910MFSH	Excess (\$)	0.00	
Assign From	LURENE	Assign Date	31/01/2018	
2. Vehicle Particulars & Condition				
Make & Model	HONDA CB400	c.c	399	
Engine No.	HIDDEN	Year of Reg.	1999	
Chassis No.	NC311600721	Colour	BLACK	
Odometer	29395	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	110/70-17	BRIDGESTONE	6 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	140/60-17	BRIDGESTONE	6 mm	
L/H Rear Tyre			mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S AND N/S BODY. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	28/01/2018	Inspection Date	02/02/2018	
Survey held at	HUA HO TRADING BLK 6 DEFU LANE 10 #01-540 SINGAPORE 539537			
5a. Remarks				
A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 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. FR 7016T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BOX + RACK	CRACKED	380.00	380.00
1	TAIL BOX	CRACKED	368.00	368.00
2	REAR SIGNAL LIGHT	BROKEN / TWISTED	130.00	130.00
1	EXHAUST PIPE	DENTED / BENT	788.00	788.00
1	SIDE STAND	TO REPAIR SEE LABOUR	75.00	-
1	REAR FENDER	CRACKED	197.00	197.00
2	FRONT SIGNAL LIGHT	N/S CRACKED	150.00	75.00
1	ENGINE GUARD (DENTED)	NOT CONSISTENT WITH THE IMPACT	180.00	-
1	HELMET GPR	CRACKED	65.00	65.00
1	FUEL TANK	DENTED	850.00	850.00
1	TOOLS BOX COVER	MISSING	89.00	89.00
1	SEAT REPAIR	TORN	80.00	80.00
	LESS 10% DISCOUNT		-	-302.20
			3,352.00	2,719.80
SPECIAL NETT ITEMS				
1	NUMBER PLATE (SN)	BENT	38.00	20.00
1	RADIATOR PIPE (DAMAGED)	NOT CONSISTENT WITH THE IMPACT	80.00	-
1	RADIATOR COOLANT (SN)	NOT NECESSARY	20.00	-
			138.00	20.00
LABOUR				
	TOWING FEE.		50.00	35.00
	LABOUR CHARGE.INCLUSIVE OF THE REPAIR OF SIDE STAND.		350.00	200.00
			400.00	235.00
GRAND TOTAL			3,890.00	2,974.80
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,200.00

Report Ref No. CS/FCI18002039/Uqd3n2



Report Ref No. CS/FCI18002039/Uqd3n2

A handwritten signature in black ink, appearing to be 'Chua' followed by a stylized 'K' and 'S'.

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.