ASS. PEC. BY:	REF:	111	CS/TP18	002081/Kdbn	2_	
rneth		AS	SIGNMEN	Ι		
From:	Date:		Veh No:	SKB 420	TPD.	05 1
Estimated Cost:			-	Y U Orale / Bus / Vas /	Yr Regn:	00, 11
OD I PINS I TP RES	/ OD RES / EVA / INV / N	n/		YM.Cycle / Bus / Van /	Lorry / Taxi / Prin	ne Mover /
To Inspect Vehicle No:	T VO INCOLENATION IN	n <u>v</u>	1 December 1	BNW 3	2.0	
at Workshop m/s		RC AVE	Make:			c.c 189
of		110/11/4	Colour	M-Blue		red / Std / NI / NA
Insured:			Sp.Reading	115774	T/Radio: Insu	ared / Std / NI / NA
Policy No.			Eng/No:	1 0 1		
Claims No.			C/No:	WBAPI=		754901
-			The second secon	600 Fair / Poor / Bur		
Sum Insured:	Excess:			der/ Jammed / Leaker		
(Client's Record)			A Company of the Comp	Ger / Jammed / Leaked		**************************************
Make of Veh:			Modi: NII /	S/RIM / STOWRIM	or .	
			Tyre Size:	F: 2	25/45	7R11
(Policy Condition)				R:		
Remark: The veh had co		N/S O/S	BS / DUN / EX	NOVA / GY / FS / LIZA	MICIOHTSUIS	PIR / SUMI /
repair at the tin	ne of inspection.		TOYOTYOK		C	ner somr
Bal. or Market Value:			Front	-	Rear	
DAC Accident Rport:	Consistent? : Ye	s or No	R/Bal.	( mm	R/Bal.	/
GIA / PR Seen:	Consistent?: Ye	s or No	L/Bal.	√ mm	L/Bal	O mm
st. Repairs: 3	days Res.: Ye	s or No	D.O.A. 3	11/118	DOI /	77/11
.um Sum:	% 3 Val.: Yes	or No	Survey held at	7.770		2/10
CA / REV / REP. /	24 UDG			ns : Ed / Days / 0/0		
	and the second	Vehicle: IN / OUT	Des. of Darlay	es: Frt   Rear   O/S	NISTUICTRO	oftop or
)ate:Per	rson Contacted:		The U/C /	Chassis frame / Body		
01.	Instruction		Water to the second		otroctore anecte	od due to comsion.
The second secon	pass to Cons	unu, est	no ray	;		
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te/Time, File Pass to?	: Prell. Report	D	ays Of Repair	: 3		October 1988
	: Final Report		esurvey No. o		C	
to/Time. File Return to?			- July 110. 0	. mp	Survey Fee	132
		Add Fee:	: Site Insp	. /\$	Transportation	50
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imp <b>®im</b> / I.B.I: (\$_∑)	400	ļ.	Tech Inv		) Others	80
	TW	L	Weekend	g (\$		
					TOTAL	330



L/H Rear Tyre

**Accident Date** 

Survey held at

31/01/2018

R C AUTO

SINGAPORE 575676

4.

5.

5a.

# 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 Inte		xperts En Automo	N/-b
1506EN	AUTO		Ref :	CS/TP18002081	
BLK	18 SIN MING INDU CTOR A #01-43	STRIAL ESTATE	Date :	02-02-2018	
SIN	GAPORE 575676			TP393	
1.		Policy Partic	ulars :- THIR	D PARTY CLAII	M
	Insured Veh.		2000	nspected	SKB 4207D
	Policy No.		Cover	age (\$)	0.00
	Claim No.		Exces	s (\$)	0.00
	Assign From		Assig	n Date	01/02/2018
2.		Vehicle	Particulars a	& Condition	647,06 R
	Make & Model	145 6 7 - 10 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	c.c		0
	Engine No.	HIDDEN	Year	of Reg.	
-	Chassis No.		Colou	ır	
-	Odometer	*	Steer	ing	
-	Brakes		Modi	fication	
	General				
3.	2 - W 5 4 1 5 a 5	(	Conditions of	Tyres	
-		Size	Make		Balance
-	R/H Front Tyre				mm
-	L/H Front Tyre				mm
	R/H Rear Tyre				mm
4	SATISFIES CONTRACTOR OF STREET				mm

**Description of Damages** 

**General Information** 

Remarks

BLK 18 SIN MING INDUSTRIAL ESTATE SECTOR A #01-43

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

Inspection Date

mm

01/02/2018

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

quire PARF/COE Rebate for Registered V	/ehicle
Vehicle Owner Particulars	Singapore NRIC
Owner ID Type:	7563B
Owner ID:	75050
Vehicle Details	SKB4207D
Vehicle No.:	No
Vehicle to be Exported:	18 Dec 2018
Intended Deregistration Date:	B.M.W.
Vehicle Make:	318I 2.0 AT D/AB 2WD 4DR GAS/D SR DRL
Vehicle Model:	100
Primary Colour:	Blue
Manufacturing Year:	2011 B221I930N46B20BZ
Engine No.:	WBAPF72020FG90186
Chassis No.:	100.0 kW (134 bhp)
Maximum Power Output:	
Open Market Value:	\$30,911.00
Original Registration Date:	27 May 2011
First Registration Date:	27 May 2011
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$30,911.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 May 2021
PARF Rebate Amount: Intended COE Rebate Details	\$18,546.00
COE Expiry Date:	26 May 2021
COE Category:	E - Open Category
COE Period(Years):	10
OP Paid:	\$56,001.00
COE Rebate Amount:	\$13,654.00
Total Rebate Amount:	\$32,200.00

The information contained herein is correct as at 18 Dec 2018

OK

MALS18016964 / Ah Lim Motor Company - Sin Ming ENTRY DATE & TIME: 01/02/2018 15:28 SUBMITTED BY: Teh Sal Gin

## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

- 1. 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.
- 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.

Any false reporting may be referred to the Police for investigation.

- 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.

ACCIDE	NT S	тат	ΕM	EN.	ī
ACCIDE		4		-	н

01/02/2018 15:28 Date Of Report 31/01/2018 18:30 Date Of Accident

TPE TWRDS SLE (NEAR TAMPINES AVE 12) Exact Location Of Accident

SINGAPORE Country/State of Loss

### DETAILS OF OWN VEHICLE

SKB4207D Vehicle Registration Number

Insured/Policyholder

CHAN HANJUN Name Of Registered Owner S8117563B

NRIC No CHAN.HANJUN@GMAIL.COM

Email Address (LOCAL) +65-97632768 Mobile Phone No OTHERS-NOPHONE Alternative Phone No

Vehicle Particulars

BMW Manufacturer 3181 Model

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?

THIRD PARTY If No. Please state action to be taken

Vehicle Category

PRIVATE CAR

NO

Insurance Company

FWD SINGAPORE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

PNPV2017-00003662 Policy Number

Cover Note Number

CHAN HANJUN Name of Driver S8117563B NRIC No 17/06/1981 Date Of Birth INDOOR Occupation 02/12/2002 Date Of Driving Pass

15 YEARS AND 1 MONTH **Driving Experience** 

MALE Gender

(LOCAL) +65-97632768 Mobile Number

Fax Number

OTHERS-NOPHONE Contact Number

CHAN.HANJUN@GMAIL.COM EMail Address

Address

BLK 588A ANG MO KIO ST 52 #14-201

Postcode

561588

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

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?

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 [OTHER]

BISHAN NPC

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE 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

WJB1941

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

ONG TZE WU

NRIC/Passport Number

Contact Number

98992656

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## IMPORTANT NOTICE

- 1. 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, involces, 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 daims. (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.
- 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:
  - 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 pr court orders.

Policyholder's Signature

Date & Time:

1915

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

	1: 3100 420	7.9 Vehic	8 30	hicle C/Others
			TPE -> SLE	
			BA	
			Centre Divider	
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emarks : F y worksho mail Addre Myself mail Addre ote : Pleas our own po ECLARATI We declare	Please forward a prices Consectate note that blicy. Kindly check on the foregoing particular that the foregoing particular tha	copy of my efile  Chan. harjun &  Uto SS  your insurer har  k with your own  ticulars are true in	e accident report to  Bgmail. com  S G G Moril COV  ve 14 days timeframe for you to insurer for more information.	submit own damage claim under





1 of 3

Report No. T/20180131/2148

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

REPORT	F A TRAFFIC	CACCIDENT	What is a selective way and a selective way an	
	ne Report M 018 19:58	fade:	Vide Report No.:	Station Diary No.: 67
Informa	nt's Partic	riare .	<b>司马利克姆马克特</b> [2]	· · · · · · · · · · · · · · · · · · ·
	f Informant:		Address: APT BLK 588A ANG MO KIO SINGAPORE 561588	STREET 52 #14-201
	/ ID No.: O / S81175	63B	Contact No.: Home/Office:	Mobile: 97632768
National	ity: ORE CITIZ	EN	Email:	74
Sex: Male	Age: 36	Date of Birth: 17/06/1981	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupa			Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 31/01/2018 18:30	Type of Location Straight Road
TAMPINES E SELETAR EX	Traveling Toward Road XPRESSWAY (PRESSWAY SLE (near Tampines Av		F	Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	13	Traffic Volume: Heavy
Type of Collis	sion: ring Vehicles - Head To	Rear	4	Anyone conveyed by ambulance: No

Vehicle No. 3	Type m 运送等	Make # PT 2	Model	COLOR	Condition	No of wassenge
SKB4207D	Car	BMW	318I 2.0 AT D/AB 2WD 4DR GAS/D SR DRL	Blue	Slightly Damaged	0
WJB1941	Car				Seriously Damaged	0

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Vehicle No. Insurance Company, a Insurance No Stiective Expiry Date
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Police Station Of Origin: Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

2 of 3

Report No. T/20180131/2148

CONTINUATION OF REPORT

Vehicle No.	16	rancele vincary an	中的种类	Insuran	4 - 120 - 100 miles		affective	CON Date
SKB4207D	FW	D Singapore Pte. Ltd	i	9NPV2 000036	10000		27/05/2017	26/05/2018
Details of Pa			是更大的	WARRANA AN		46.06	2016	10,143
Any Pedestri				Use of Pe	doctrion	Cross	ing: NA	
No. of Pedes	trian	s Injured: NIL	<b>科TRYSER</b> 5	Use of Per	Jesura:	01055	Market Service	3.4. K-10. +
Daver (* 1. Name	# IS	CHAN HANJUN	14. 建水色	Bright Distance	ID No		S8117563E	3
Related Vehi	cle	SKB4207D (Car)			Conta	ct No.	97632768	
Hospital/Clin	ic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Exp	oiry: NIL
Date Treatme	ent	NIL		Date Disc				
No. of Days	grant	ed Medical Leave	NIL	Degree of	Injury	NIL	HE PERSON NAMED IN	and the second second second
Driver Name			4-56		ID No	majori.	NIL	
Related Vehi	icle	WJB1941 (Car)			Conta	ct No.	98992656	
Hospital/Clin	ic	NIL			Class Drivin Licen Expir	g	Class: NIL Date of Ex	piry: NIL
Date Treatm	ent	NIL		Date Disc		NIL		
No. of Days	grant	ted Medical Leave	NIL	Degree o	Injury	NIL		

### Brief Details.

On 31.1.2018 at about 1830hrs, I was travelling along TPE towards SLE near Tampines Ave 12. I was driving on the extreme right lane and the traffic was quite heavy. While travelling, the vehicle in front of me came to a stop so I break my vehicle to a stop too. After which I felt a huge impact coming from the rear of my vehicle (SKB4207D). I then alighted and noted that my vehicle was hit by a Malaysian vehicle bearing WJB1941. I have an in built camera in my vehicle however it is only pointed to the front and not the rear. I wish to state that there was no one injured during the accident and we managed to exchange

I am lodging this report for insurance claim purposes.





Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999 Report No. T/20180131/2148

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 Rep E / Sgt 3 LIYANA BINTE MOHD RAZALI	March	
Signature Of Interpreter: Not applicable	Date/Time: 31/01/2018 19:58	
Officer In Charge Of Case: TP / AEIT / Sgt 2 YEO KIA HUAT	Classification Of Case:	
Contact No.: 684478325449988	1 SN 061	
Authentication Stamp NP168 SIGNATUR	E C	



#### CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2017-00003662 (Comprehensive - Classic Plan)

Car plate number: SKB4207D

Your name (As the policyholder): CHAN HANJUN

Coverage start date: 27/05/2017

Coverage end date: 26/05/2018

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company: UOB Limited

Shrie

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 30/04/2017

Abhishek Bhatia Chief Executive Officer FWD Singapore Pte Ltd Please immediately inform us at +65-6820-8888 or email us at contact.sg@fwd.com if any details in this Certificate of Insurance need to be changed.

### INS NRIC & DL Pg. 1



IDENTITY CARD NO. \$8117563B





CHAN HANJUN



陈汉的

17-06-1981 M SINGAPORE

131175655

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

Class 3 Mater Cars and Motor Tractors the weight of which unladen does not exceed 2000 kitograms.

PASS DATE 02 Dec 2002

24-06-2011

APT 6:K 588A ANG MB KID STREET 52 #14 - 201 SINGRPORE 561588 NRIC No: 581175538 Dafa: 23.04/2012 No. 7655529

4/14/011

10° 428A









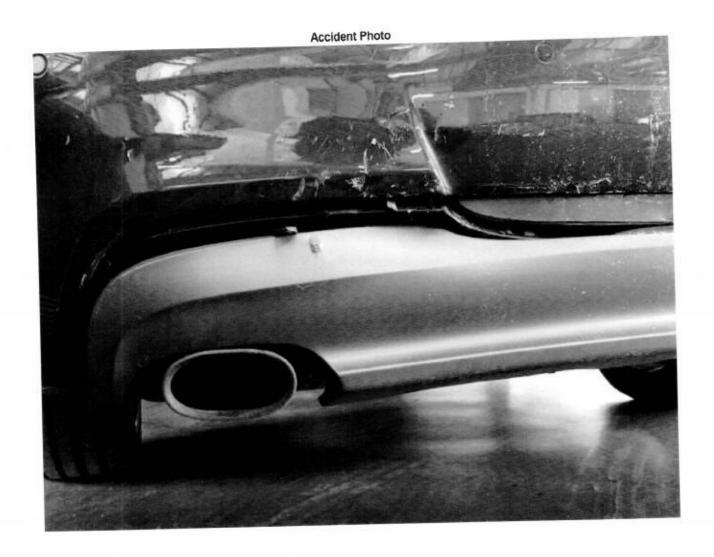














Not Nothand 1/Cm & 2400l. Rinny Afre Paint 3days

# ESTIMATE

# **RC AUTO**

160 Sin Ming Drive #06-20 Sin Ming Autocity Singapore 575722 Tel : 97619383 Email: rcauto5555@gmail.com Reg. No. 53199168K

		Unit Price	Amount
Quantity	Description/Particular	Unit Price	Ber 1,176.00
1 PC	REAR BUMPER	_	Bu 389.00
1 PC	REAR BUMPER BEAM		Ju 660.00
3 PCS	REAR BUMPER SENSOR @ 220 EA		124.00
2 PCS	REAR BUMPER SIDE BRACKET @ 62 EA		Ja 85.00
1 PC	REAR BUMPER CENTRE GANISH		Dallary 580.00
1 PC	REAR LOWER LID	7	750.00
1 PC	REAR EXHAUST	TOTAL:	3,764.00
		LESS 10%:	(376.40
		CC.II.S	
	CODAY DAINTING		600.00
	SPRAY PAINTING  LABOUR CHARGES TO REPLACE		700.00
	LABOUR TO DISMANTLE EXHAUST		100.00
	LKK Auto Consultants hence not the Repairer of the following:  To resurvey before after a pray painting:  To display damaged part(s) during resurvey prices are subject to confirmation:  That party survey is on a "Without Preject No illegal modification(s) is allowed:  Supplementary item(s) must be resurved is subject to final approval from Insurance.	hrey edice" basis	
	Acknowledged by Repairer	TOTAL	4,787.6
	Signature:		1
Ministra In Control	the above goods in good order and condition	for	RC AUTO



# 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 Interna	tionale Des Experts En Automo				
CAUTO		Ref : CS/TP18002081	1/Kcbn2			
K 18 SIN MING INDU	STRIAL ESTATE	Date: 24-12-2018				
ECTOR A #01-43SINGAPORE 575676 ON BEHALF OF CHAN HANJUN		Code: TP393	(A))(S)			
	Policy Particula	rs :- THIRD PARTY CLAI	M			
	Policy Fundament	Veh. Inspected	SKB 4207D			
	Insured Veh.		0.00			
Policy No.		Coverage (\$) Excess (\$)	0.00			
Claim No.		Assign Date	01/02/2018			
Assign From	Mahiala Dr	articulars & Condition				
		c.c	1995			
Make & Model	BMW 318 (A)	Year of Reg.	2011			
Engine No.	HIDDEN	Colour	METALLIC BLUE			
Chassis No.	WBAPF72020FG90186	Steering	IN ORDER			
Odometer	115774	Modification	STANDARD ALLOY RIM			
Brakes	IN ORDER	Modification	The Allew Paris Versa Virginia is invited			
General	GOOD	Ust of Types				
3.	Conditions of Tyres  Make Balance					
	Size	Make MICHELIN	6 mm			
R/H Front Tyre	225/45 ZR17	MICHELIN	6 mm			
L/H Front Tyre	225/45 ZR17	Choolayers territor in	6 mm			
R/H Rear Tyre	225/45 ZR17	MICHELIN	6 mm			
L/H Rear Tyre	225/45 ZR17	MICHELIN				
4.		ription of Damages				
THE VEHICLE SU	THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION.					
DAMAGES SEE	DAMAGES SEE DETAILS.					
5.	General Information					
Accident Date	31/01/2018	Inspection Date	01/02/2018			
Survey held at	R C AUTO					
	BLK 18 SIN MING INDUSTRIAL ESTATE SECTOR A #01-43 SINGAPORE 575676					
5a.	11 11 11 11 11 11 11 11 11 11 11 11 11	Remarks	ACIC			
A)THE INSPECT B)IN ACCORDA	ION WAS CONDUCTED ON NCE TO YOUR INSTRUCTIO	NO, WE THEE ITE	RISED REPAIRS.			
5b.	Est	mate Days of Repair				
ESTIMATED NO	RMAL PERIOD FOR REPAIR	3 Working I	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

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# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKB 4207D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			4.470.00
1	REAR BUMPER	BUCKLED	1,176.00	1,176.00 389.00
	REAR BUMPER BEAM	BUCKLED	389.00	552350
	REAR BUMPER SENSOR @\$220.00	SERVICEABLE TO REPAIR SEE LABOUR	660.00	
	REAR BUMPER SIDE BRACKET @\$62.00		124.00	
	REAR BUMPER CENTRE GARNISH	SERVICEABLE	85.00	1 1
	REAR LOWER LID	DENTED / DISTORTED	580.00	580.00
. === 1	LESS 10% DISCOUNT	100 FEE	-301.40	-214.50
	LESS 10% DISCOUNT		2,712.60	1,930.50
LI S L R	REAR EXHAUST (LOCAL REPAIR)(SN)	DENTED	750.00 -75.00	
	LESS 10% DISCOUNT		675.00	200.00
	LABOUR		600.0	450.00
	SPRAY PAINTING.		700.0	
	LABOUR CHARGES TO REPLACE.INCLUSIVE OF THE REPAIR OF REAR BUMPER SIDE BRACKET.		100.0	
	LABOUR TO DISMANTLE EXHAUST.		1,400.0	•
			4,787.6	
	GRAND TOTAL			
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,400.00

Report Ref No. CS/TP18002081/Kcbn2

KONG SENG CHEONG

Licensed Appraiser

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