22/03/2002

ASS. REC. BY: | REF: CS/CT1180029 97/Drd3 n2 | Special Instruction:

Surveyor: Bryan Menmen

ASSIGNMENT (Office)

From (Person): Adeline Chng of: CTI Date/Time: 13/02/2018

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKB 9907J Insured: SJH 1912B

at Workshop m/s: Teamwork Garage Tel: 6844 2475

of: 53 Ubi Ave 1 #01-24

Policy No: DMTPSN1754741700 Claim No: SNM18D00835C02

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A: 09/02/2018

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

Date/Time: 10.27am 9/4/2/18 Person Contacted: H.O.D. Endorsement: Vehicle IN / OUT

Date/Time	Action/Instruction
	(✓) Estimate check consistency of the damages
	SKB 9907J - NA INC1800 2761/h1 D.O.A: 9/2/18
	SJH 1912B - NA INC1800 2761/h1 D.O.A: 9/2/18
	Confirm L/S $4550, 4 days
	Red. $8668.65, 65%.

REF:

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

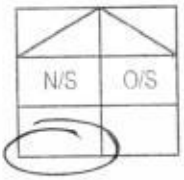
Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SKB 9907J Yr Regn: Dec 2008

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

Make: BMW 525 c.c 2497

Colour Bronze A/C: Insured / Std / NI / NA

Sp.Reading 186718 T/Radio: Insured / Std / NI / NA

Eng/No: 78994378 N52B25AF

C/No: WBAHU52030C289783

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/30 R19

R: —"—

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Goodyear

Front		Rear	
R/Bal.	5' mm	R/Bal.	5' mm
L/Bal.	5' mm	L/Bal.	5' mm

D.O.A. 09/02/2018 D.O.I. 13/02/2018

Survey held at Teamwork Pte Ubi

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

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

Date / Time	Action / Instruction
	Chua Taiping SSH1912B
	MV 35K
	LTA 25.5K
	HL 9.5K

RECEIVED 20 APR 2018

Date/Time, File Pass to? ☐ : Preli. Report

1) typist ☑ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

Transportation: $ + RS SI

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

TOTAL: 220

Report Format : TP

Lump Sum / ~~I&A~~ ($ 4550)

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

CHINA TAIPING INSURANCE (S) PTE LTD

3 ANSON ROAD #16-00
SPRINGLEAF TOWERSINGAPORE 079909

Ref : CS/CTI18002997/Drd3

Date : 14-02-2018

Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SJH 1912B	Veh. Inspected	SKB 9907J
	Policy No.	DMTPSN1754741700	Coverage ($)	0.00
	Claim No.	SNM18D00835C02	Excess ($)	0.00
	Assign From	MERIMEN (ADELINE CHNG)	Assign Date	14/02/2018

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

5. General Information

	Accident Date	09/02/2018	Inspection Date	14/02/2018
	Survey held at	TEAMWORK GARAGE PTE LTD 53 UBI AVENUE 1 #01-24 SINGAPORE 408934.		

5a. Remarks

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

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	13 Feb 2018		13 Feb 2018 20:11 Assign				**New Assignment** Cancel Case

Main | Reference | Claim Details | Documents | Show All

CLAIM SUBFOLDER DETAILS **[Created by insurer]**

Insured:	**SKYLINK AUTO PTE LTD**		
Main Claimant:	**OBB LUXURIOUS LEASING**, Co. Reg. No.: 53371534B		
Vehicle Reg. No.:	**SKB9907J**	Date of Loss:	09/02/2018 16:00 - :59
Claim Type:	**TP** / SNM18D00835C02	Policy/Cover Note No.:	DMTPSN1754741700
Vehicle Reg. No. (Insured):	**SJH1912B**	Policy No. (Claimant):	
		Excess:	S$0.00
Repairer:	**Teamwork Garage Pte Ltd (HQ)** 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475		
Handling Insurer:	**China Taiping Insurance (Singapore) Pte. Ltd. (HQ)** - Tel: 6389 6111 ... [Handled by **Adeline Chng Pei Wen**]		
Adjuster:	**LKK Auto Consultants Pte Ltd (HQ)** - Tel: 6256-3561 ... [**Final Rpt** due 23/02/2018]		
Adjuster Remarks:	PLEASE SURVEY THIRD PARTY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLY LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NOT ESTIMAE PROVIDED DURING PRE REPAIR.		

ASSOCIATED MAIL RECEIVED View All | Compose Case Mail

There are no mail for this case.

ASSOCIATED TASKS View All | Search Tasks | Create New Task | Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?

No tasks.

MNA118021263 / National Assessment Centre Services - Ubi
ENTRY DATE & TIME: 12/02/2018 14:38
SUBMITTED BY: Liew Shan Hui

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 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	12/02/2018 14:38
Date Of Accident	09/02/2018 16:10
Exact Location Of Accident	PIE TWDS CHANGI B4 ENG NEO RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB9907J

Insured/Policyholder

Name Of Registered Owner	OBB LUXURIOUS LEASING
Co Reg No	53371534B
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97517778

Vehicle Particulars

Manufacturer	BMW
Model	525I XL
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095462897
Cover Note Number	-

Driver

Name of Driver	MUHAMMAD JUSMAN BIN NASIMAN
NRIC No	S8638226A
Date Of Birth	24/12/1986
Occupation	INDOOR
Date Of Driving Pass	17/03/2009
Driving Experience	8 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91900669
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	75 ROSEWOOD DR #05-22
Postcode	737785
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	
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)	3
Passenger 1	NAME: : NUR AISAH GENDER: : FEMALE
Passenger 2	NAME: : IFFAH FARAISYAH 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

PLEASE REFER TO ATTACHED STATEMENT.

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	SJH1912B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	FONG KAH LAY
NRIC/Passport Number	G2463337W
Contact Number	87781581
Address	
Postcode	
Insurance Company Name	

Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2	
Vehicle Registration Number	SDG95S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96753255
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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 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 report(s) 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 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.
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 in order 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.

CBD LUXURIOUS DRIVING

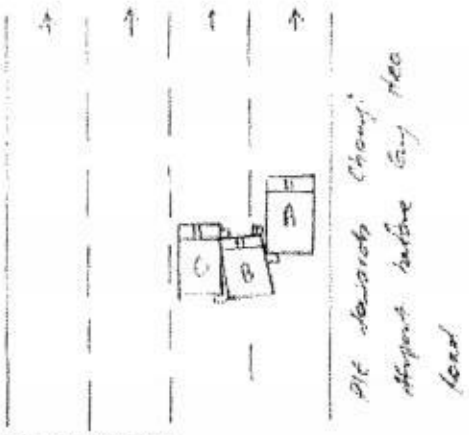
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 10/1/10 [illegible]

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

Accident Sketch Plan

SKETCH PLAN



A. SKA 99077

B. SJH 1713 B

C. PDG 95 C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling straight along PIE towards Changi Airport before Exit Road. All the vehicles are slow moving. Out of suddens, I felt an impact from my vehicle rear portion. After the collision, I immediately stop my vehicle and check what happened. From my side mirror, I saw that vehicle (B) was on the middle of the lane. When I got down, I realised that vehicle (B) had also hit onto vehicle (C) who was travelling on the second lane.

DECLARATION

I/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:
10/2/18 10:30am

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

TeamWork Garage Pte Ltd

TeamWork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Spore 408934
Paya Ubi Industrial Park
Tel : 6844 2475
E-mail : claims@teamworkgarage.com
Register number : 201015366H

3RD PARTY CLAIM ESTIMATION

China Taiping Insurance (Singapore) Pte Ltd
105 Cecil Street #19-00
The Octagon
Singapore 069534

Vehicle number	*SKB9907J*
Make / Model	*BMW/525I*
Chassis number	*WBANU52030CZ89783*
Accident date	*09 February 2018*
Reference	*1802-10*

Qty	Particulars	Unit Price - SGD $
	PARTS REPLACEMENT - LIST ITEMS	
4	REAR BUMPER PDC SENSOR Dam 2pc 2pc svc	430.00 860.00
4	REAR BUMPER PDC HOLDER SENSOR svc	120.00 ×
2	REAR BUMPER SIDE BRACKET svc	350.00 ×
1	REAR BUMPER INNER GUIDE	275.00
1	REAR BUMPER REINFORCMENT	640.93 ~~710.00~~
1	END PANRL Dented 2146.88	800.95 ~~912.00~~
1	EXHAUST HEAT SHIELD SIDE svc 1932.19	140.00 ×
		3367.00
	10% Less ~~5%~~	168.35
	Subtotal	3198.65
	Balance C/F	3198.65
	PARTS REPLACEMENT - SPECIAL NETT ITEMS	
	Balance B/F	3198.65
1	REAR BUMPER broken	~~2500.00~~ 1200/-
1	REAR EXHAUST	~~3500.00~~ 1000/-
1 SET	REAR BUMPER CLIP 2270/-	~~60.00~~ 30/-
1	JOINT SEALANT	~~150.00~~ 40/-
	Subtotal	6210.00
	Balance C/F	9408.65
S/No	*LABOUR AND MISCELLANEOUS CHARGES*	
	Balance B/F	9408.65
1	CHECK REAR WIRING AND LIGHTNING SYSTEM	60.00 NA
2	REMOVE AND REFIT REAR LINING, TRIM AND GARNISH	~~200.00~~ 80/-
3	REMOVE AND RENEW REAR EXHAUST	~~150.00~~ 60/-
4	DIAGNOIS CHECK AND CLEAR FAULT CODE	300.00 NA
5	REMOVE AND RENEW REAR REVERSE SENSOR	~~150.00~~ 40/-
6	PANEL BEATING ON AFFECTED AREAS 1520/-	~~1400.00~~ 600/-
7	SPRAY PAINTING ON AFFECTED AREAS	~~1400.00~~ 700/-
8	APPLY ANTI RUST ON AFFECTED AREAS	~~150.00~~ 40/-
	13/02/2018 @ 1500hrs Subtotal	3810.00
	Not Attend 45mm Grand total	13218.65

Acknowledged by Repairer
Signature:
Date:

4 days.
LKK Auto
5722.19
L/S 4550/-

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/CTI18002997/DRD3N2
Date: 24/04/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	**Policy No:**	DMTPSN1754741700		
Claimant Vehicle No :	SKB9907J	**Insured Vehicle No :**	SJH1912B		
Date of Loss:	09/02/2018	**Nature of Claim:**	TP	**Claim No:**	SNM18D00835C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	**SKB9907J**		
Make & Model:	BMW 525I, 2.5 XL (A)	**Engine No:**	78994378N52B25AF
Reg. Date:	24/12/2008 (Man. Year: 2008)	**Chassis No:**	WBANU52030CZ89783
Colour:	Bronze	**Odometer:**	186718 km
Engine Capacity:	2497 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S$):	**Market Value/New Car Price**		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:		**Steering (Serviceable):**	Yes	**Footbrake (Serviceable):**	Yes
Handbrake (Serviceable):	Yes	**Engine Modification:**	No	**Pre-accident Condition:**	

CONDITION OF TYRES

Front Tyre Size:	225/30R19	**Rear Tyre Size:**	225/30R19
Front Left Side:	Goodyear 5 mm	**Rear Left Side:**	Goodyear 5 mm
Front Right Side:	Goodyear 5 mm	**Rear Right Side:**	Goodyear 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	**Repairer's**	**Adjuster's**	**Difference**	**Diff %**
Parts	9,408.65	4,202.19	5,206.46	55.34
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,810.00	1,520.00	2,290.00	60.10
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S$)	**13,218.65**	**5,722.19**	**7,496.46**	**56.71**
Approved Total (Overridden) (S$)		**4,550.00**		
(S$)	13,218.65	4,550.00	8,668.65	65.58
+ GST 7.00/7.00% (S$)	925.31	318.50	606.81	65.58
Nett Amount (S$)	**14,143.96**	**4,868.50**	**9,275.46**	**65.58**

INSPECTION

Date of Assignment: 13/02/2018
Date Inspected: 13/02/2018 **Inspected At:** Teamwork Garage Pte Ltd (HQ)
53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park
Singapore 408934

Estimated Period of Repair: 4.0 days

Adjuster: BRYAN TANI

Manager: Janice Lee Si Hua

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

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 24 Apr 2018)
Parts:	143	BMW 525I 2.5 XL (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SKB9907J)	
Validity:	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	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		***REAR BUMPER PDC SENSOR** (4 Pcs)	2Pcs Damaged/2Pcs Serviceable	860.00 FL	*430.00 FL
2	4		***REAR BUMPER PDC HOLDER SENSOR**	Serviceable	120.00 FL	*- FL
3	2		***REAR BUMPER SIDE BRACKET**	Serviceable	350.00 FL	*- FL
4	1		***REAR BUMPER INNER GUIDE**	Cracked	275.00 FL	*275.00 FL
5	1		***REAR BUMPER REINFORCEMENT**	Bent	710.00 FL	*640.93 FL
6	1		***END PANEL**	Dented	912.00 FL	*800.95 FL
7	1		***EXHAUST HEAT SHIELD SIDE**	Serviceable	140.00 FL	*- FL
8	1		***REAR BUMPER**	Broken	2,500.00 FS	*1,200.00 FS
9	1		***REAR EXHAUST**	Bent	3,500.00 FS	*1,000.00 FS
10	1		***SET REAR BUMPER CLIP**	Necessary	60.00 FS	*30.00 FS
11	1		***JOINT SEALANT**	Necessary	150.00 FS	*40.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S$)	**9,577.00**	**4,416.88**
- List Item Discount on L Items 5.00/10.00% (S$)	168.35	214.69
Total Parts (S$)	**9,408.65**	**4,202.19**

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	CHECK REAR WIRING AND LIGHTING SYSTEM	New	60.00	-
2	REMOVE AND REFIT REAR LINING,TRIM AND GARNISH	New	200.00	80.00
3	REMOVE AND RENEW REAR EXHAUST	New	150.00	60.00
4	DIAGNOIS CHECK AND CLEAR FAULT CODE	New	300.00	-
5	REMOVE AND RENEW REAR REVERSE SENSOR	New	150.00	40.00
6	PANEL BEATING ON AFFECTED AREAS	New	1,400.00	600.00
7	SPRAY PAINTING ON AFFECTED AREAS	New	1,400.00	700.00
8	APPLY ANTI RUST ON AFFECTED AREAS	New	150.00	40.00
	Gross Labour Cost (S$)		**3,810.00**	**1,520.00**

Report was unsubmitted during this print-out.

< END OF ESTIMATES >