runen	INPLIAN OF CTI Detertime 18/2/16
Estimated Co	st Bill to:
OD (II)	S/TP RES / OD RES / EVA / INV / MV 7 CS
	ehicle No: GBF 9625H Insured: SJC 7797D
at Workshop	Eco trutomobile Tel 63847515
of	13 Kaki Rukit PN 4 # 13-29
Policy No:	DM HCSN 17 56 201700 Claim No: SNM 18 00086 2002
Sum Insured	Excess:
Make of Veh (Client's Recer	
	1
Ca / KEV	REP. / REV 24 HRS WP H.O.D. Endorsement.
Date/Time	ISI218011:34am Person Contacted - Vehicle IN/OUT
Date/Time	Action/Instruction (x) Estimate No answer Wesp closed for CA
	GBF 9635 H-X
	SICHAR D-CS3/CTT16001992/d3 NOA: 28/0

REF:

Survey Department Check List (Case Handler)

Reference No.: C9 CTI 18003156 MIrds. Policy Type: OD /TP / TP RES / TL / EVA Case Handler Typist): Case handler to make sure all Information created by the assignment team are ACCURATE. Admin (Nivitia Y-Date N-Date Y-Date N-Date (1) Office Assign Form Reference No. C 1 C Customer Code Assign From N Assign Date C C Veh No (Inspected) C Veh No (Insured) C D.O.A Policy No C Claim No C Insurance Authorisation (CA /REV/REP) C C Report Type C Weekend Charges Survey held at/Repairer N C Excess): Case handler to make sure the surveryor completed all required information. Surveyor (Ma (1) Assignment Form Vehicle No C C Regn Month/Year N Vehicle Type Make & Model N C Engine Capacity. (C.C) Colour N Odometer. (Sp.Reading) C C Chassis No General Condition N Steering N N Brake . Modification (Modi) N C Tyre Size Tyre Make N C Tyre Balance Date of Inspection C N 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 C **Finalised Amount** Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo Uploaded

2110

Date

*C: Critical *N: Non-Critical

Check By:

Case Handler

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

Case.	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adl Submitted	Ins Authred	Status
Main	14 Feb 2018		15 Feb 2018 09:09				New Assignment
			Assign				Cancel Case

Main	Reference	Claim Details	Documents Show All
CLAIM SUBFOLDER DETA	ILS		[Created by insurer]
Insured:	SPR REALTY PTE LTD, Co. Reg	No.: 200604094Z	farence of matreil
Main Claimant:	CA FASHION		
Vehicle Reg. No.:	GBF9625H	Date of Loss:	12/02/2018 12:00 - :59
Claim Type:	TP / SNM18D00862C02	Policy/Cover Note No.:	DMHCSN1756201700 (Comprehensive)
Vehicle Reg. No. (Insured):	5JC7797D	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Eco Automobile Claims And Re Tel:	pair Pte Ltd (HQ) 13 KAKI BUK	IT ROAD 4, #03-29, 417807 Kaki Bukit -
Handling Insurer:	China Taiping Insurance (Sing Ping - 638986192]	apore) Pte. Ltd. (HQ) - Tel: 638	9 6111 [Handled by Irene Tay Hul
	LVV Auto Consultanta Dia Lini	Uni Tale core occa. Inter-1	
Adjuster:	LAK Auto Consultants Pte Ltd (HQ1 - IEI: 6256-3561 I FINAI	Rot due 27/02/20181
	EST \$3943.75, ASSIGN MARCUS (HQ) - 161: 6256-3561 [FINAI CHUA AS SJE	Rpt due 27/02/2018]
Adjuster: Adj Asg. Remarks: ASSOCIATED MAIL RECEI	EST \$3943.75, ASSIGN MARCUS (HUA AS SJE	In the control of the
Adj Asg. Remarks:	EST \$3943.75, ASSIGN MARCUS (HUA AS SJE	In the second se
Adj Asg. Remarks: ASSOCIATED MAIL RECEI	EST \$3943.75, ASSIGN MARCUS (VED e.	CHUA AS SJE	View All Compose Case Mai
Adj Asg. Remarks: ASSOCIATED MAIL RECEI There are no mail for this case	EST \$3943.75, ASSIGN MARCUS (VED e.	CHUA AS SJE	In the control of the



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 Intern	ationale Des Experts En Auton	nobile
CHI	NA TAIPING INSU	JRANCE (S) PTE LTD	Ref : CS3/CTI18003	126/M1d3
	NSON ROAD #16- RINGLEAF TOWER	00 RSINGAPORE 079909	Date: 19-02-2018 Code: CTI	
1.		Policy Particula	rs :- (THIRD PARTY CLA	IM)
	Insured Veh.	SJC 7797D	Veh. Inspected	GBF 9625H
	Policy No.	DMHCSN1756201700	Coverage (\$)	0.00
	Claim No.	SNM18D00862C02	Excess (\$)	0.00
	Assign From	MERIMEN (IRENE TAY)	Assign Date	19/02/2018
2.		Vehicle Pa	articulars & Condition	ATT AND IN THE REAL PROPERTY.
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	ě	Steering	
	Brakes		Modification	
	General			
3.		Con	ditions of Tyres	The second second
		Size	Make	Balance
	R/H Front Tyre			mm
	L/H Front Tyre			mm
	R/H Rear Tyre			mm
	L/H Rear Tyre			mm
4.		Descri	ption of Damages	
5.	The same to the same of the	Gene	eral Information	
	Accident Date	12/02/2018	Inspection Date	
	Survey held at	AUTOMORPHINGS		
	**************************************	13 KAKI BUKIT ROAD 4 #03-29 BARTLEY BI SINGAPORE 417807		
ā.		NAME OF TAXABLE PARTY.	Remarks	THE RESIDENCE IN
	B) THE REPAIR ES THE REPAIRER W	ON WAS CONDUCTED ON A" STIMATE WAS NOT PRESENT /AS TOLD TO PREPARE THE I EASE FIND DAMAGED VEHIC	ED AT THE TIME OF INSPE ESTIMATE.	SIS. CTION.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Business	
Owner ID: Vehicle Details	9859E	
Vehicle No.:	GBF9625H	
Vehicle to be Exported:	No	
Intended De-registration Date:	26 Apr 2018	
Vehicle Make:	TOYOTA	
Vehicle Model:	DYNA 150 5MT	
Primary Colour:	Silver	
Manufacturing Year:	2017	
Engine No.:	1KD2692939	
Chassis No.:	JTFAT35Y50K207801	
Maximum Power Output:	(¥)	
Open Market Value:	\$26,436.00	
Original Registration Date:	24 Apr 2017	
First Registration Date:	24 Apr 2017	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$1,322.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	•	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	23 Apr 2027	
COE Category:	C - Goods Vehicle & Bus	
COE Period(Years):	10	
PQP Paid:	\$14,093.00	
COE Rebate Amount:	\$12,675.00	
Total Rebate Amount:	\$12,675.00	

The information contained herein is correct as at 26 Apr 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 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
	ACCIDENT STATEMENT
Date Of Report	12/02/2018 16:57
Date Of Accident	12/02/2018 12:35
Exact Location Of Accident	CARPARK AT BLK 442 PASIR RIS DRIVE 06
Country/State of Loss	SINGAPORE
0	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBF9625H
Insured/Policyholder	
Name Of Registered Owner	CA FASHION
Co Reg No	53069859E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90000000
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No. Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5090643141
Cover Note Number	
Driver	
Name of Driver	ONG KOK BENG

Driver	
Name of Driver	ONG KOK BENG
NRIC No	S1538107H
Date Of Birth	28/08/1962
Occupation	OUTDOOR
Date Of Driving Pass	19/06/1980
Driving Experience	37 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96398582
Fax Number	
Contact Number	

NOEMAIL

Address

BLK 411 HOUGANG AVE 10 #08-1010

Postcode

530411

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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

NO

ambulance?

YES

Was any other material or property damaged? 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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO BELOW STATEMENT/SKETCH PLAN

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

SJC7797D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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 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
- Any false reporting 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 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 insurence 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;
 - (lv) 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, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

1 2 FED 2018

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time:

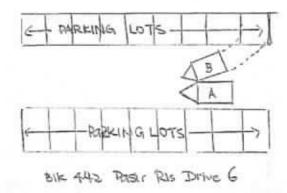
Reporting Centre Personnel's Signature Name

IDAC KAKEBURGIOVACE

NRIC/FIN NO.

Emply visibiliting our coming

SKETCH PLAN



velocle A : GBF 96254 Vehicle B = SJC7797D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

0+	12/02/18 at	about 1235 pm	I was state	onary in the ,	carpark at
BIK 441	Pasir Ric Drive.	6, whiting to	r a parking le	t Suddenly	vehide B,
ऽउ८२२१२१	veversed and borning	listo the front right	t portion of m	y vehide, GBF	9625 <u>H.</u>
- 34					
			-		

DECLARATION

I/We declare the foregoing particulars are frue

1 2 FEB 2018 IDAC KAKI BUKIT(VAC) DI KAKI BURIT AVE 4 Sequence 15933

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.:

ECO Automobile Claims & Repair Pte Ltd 13 Kaki Bukit Road 4 #03-29 Bartley Biz Centre S417807 T: 6384 7515 F: 6702 4202 E: ecoautoclaims@gmail.com

Co. Reg No. 201632730M



Your ref. SJC7797D Our ref. GBF9625H Date: 12-02-18 To: China Taiping Insurance (S) Pte Ltd From: Alfie Chong 67024202 Fax: CC Motor Claims Dept Contact: 91765733 Make / Model: TOYOTA DYNA Email Chassis No.: JTFAT35Y50K207801 1KD-FTV 2982 Fax Engine No.: LKK Auto Consultants hence notify Accident Date: 12-02-18 the Repairer of the following: ESTIMATE FOR VEHICLE NO. : GBF9625Hny beforelatter spray painting To display damaged part(s) during resurvey Parts prices are subject to confirmation. LIST PRICE 792-0 DESCRIPTION Third party survey is on a "Without Prejudice" basis QTY . No illegal modification(s) is allowed Front bumper * Supplementary item(s) must be resurveyed and Front bumper bracket RH is subject to final approval from Insurance Company \$ 80.00 1 \$ 80.00 Front bumper spotllight cover RHiged by Repairer Signature: 180.00 Front fender RH Date: 350.00 Front wiper panel Headlamp RH 180.00 Front grille V 10.00 10 Front grille clips 65.00 Front grille logo X 450.00 Front panel RH 6 \$ 6.00 Front panel screw 35.00 Carplate Total: \$ 3.386.00 Less 25%: \$ (846.50)2,539.50 Parts Total: \$ LABOUR 00 _800.00 To remove & install damage area 80.00 \$ To rust proofing damage area 700:00 \$ To spray painting on affected area 50:00 To check wiring & lighting 4.169.50 7% GST: \$ 291.87 4,461.37 Grand Total: \$

Please survey the vehicle at 13 Kaki Bukit Road 4 Bartley Biz Center #03-29 S417807

(Kindly contact us @ 9176 5733)

...CLAIM SUBFOLDER...(Pending for Survey Report)

Case	Natified	Est Submitted	Adj Assigned	Ad) Rpt	Adj Su	ubmitted	Ins Auth'ed	Status	
Main	14 Feb 2018		15 Feb 2018 09:09 Edit Adj Rpt	S\$1,200.00 Edit Estimates	A	200.00 Rpt		Pending Report Cancel C	for Survey
	Main	R	eference	Claim De	tails		Documents		Show All
CLAIM SU	BFOLDER DE	TAILS			1	Created I	by insurer]		
Insured:	SPR REAL	TY PTE LTD, Co	. Reg. No.: 200604	094Z					
Main Claimant:	CA FASHI	ON							
Vehicle Reg No.:	GBF962	5H		Date of			12:00 - :59 and 19 Days From	LTA Reg Date	e (Man Yr)]
Claim Type:	TP / SN	Policy/Cover DMHCSN1756201700 (Comprehensive)		ehensive)					
Vehicle Reg. No. (Insured):	53C77970			Policy N (Claima					
				Excess		\$\$0.00			
Repairer:	Eco Autor	nobile Claims An	d Repair Pte Ltd	(HQ) 13 KAKI BUKT	FROAD 4	4, #03-29,	417807 Kaki Buki	t - Tel:	
Handling Insurer:	China Tai	ping Insurance (Singapore) Pte. L	td. (HQ) - Tel: 638	9 6111	[Handled	by Irene Tay Hu	ii Ping - 638	986192]
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561 [Handle	d by MA	CHIN FO	OK] [Final Rp	t due 27/0	2/2018]
Adj Asg. Remarks:	EST \$3943	.75, ASSIGN MAR	CUS CHUA AS SJE						
ASSOCIAT	ED MAIL RE	CEIVED					Vie	w All Com	pose Case Ma
There are no	mail for this	case.							
ALL ASSO	CIATED TAS	ks⊟			Vie	rw All S	earch Tasks Cr	eate New Tasi	Complet
Due Date	Priority	Type Task	Group Subjec	t Handler	Assigned		Completed On	Created	On Done

Claim Documents

*GBF9625H (SNM18D00862C02)

[SJC7797D]

TP

CA FASHION

Feb 12 2018 12:00PM

[SPR REALTY PTE LTD]

Eco Automobile Claims And Repair Pte Ltd

Acc	sessment Reports		1 000	page V	E8
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1	13/02/18 16:20	Accident Statement	U	Load HTM	-
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Vo.	Finalized On 13/02/18 16:13	Car City Auto Centre Pte Ltd (HQ) Sketch Plan [Linked Accident Report Documents]	0	Thumbnail Load TIF	Print
2	13/02/18 16:13	Sketch Plan #2 [Linked Accident Report Documents]	0	Load TIF	
3	13/02/18 16:14	RENTAL AGREEMENT	0	Load TIF	

Ass	essment Reports			rage V	S
No	Finalized On	Car City Auto Centre Pte Ltd (HQ)		Thumbnail	Print
		[Linked Accident Report Documents]			
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Linked Accident Report Documents

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3	13/02/18 16:17	ACCIDENT SCENE	a to	nd JPG	N
4	13/02/18 16:17	ACCIDENT SCENE	3 Lo	ad JPG	V
5	13/02/18 16:17	ACCIDENT SCENE	8 Lo	ad 3PG	V
6	13/02/18 16:17	INSURED CAR	6 Lo	ad JPG	₩
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8	13/02/18 16:17	INSURED CAR CHASSIS NUMBER	0 Lo	ad JPG	Ø
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11	13/02/18 16:17	INSURED CAR	0 Lo	ad 3PG	V
12	13/02/18 16:17	INSURED CAR	O Lo	ad 3PG	V
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No.	13/02/18 16:13	Car City Auto Centre Pte Ltd (HQ) Sketch Plan		ad TIF	Print
2	13/02/18 16:13	Sketch Plan #2		ad TIF	
3	13/02/18 16:14	RENTAL AGREEMENT		ad TIF	
4	13/02/18 16:14	CI		ad TIF	
5	13/02/18 16:14	HIRER IC N DL		ad TIF	
Б	13/02/18 16:14	HIRER VDL		ad TIF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
	^
	~

Merimen e-Claims Page 3 of 3

Show Remarks To: Handling Insurer
Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd (Co. Reg. No. 199607198R)

51 Ubi Ave 1 #01-25, Pava 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/CTI18003126/M1RD3Q2

Date:

04/05/2018

REFERENCE

Handling Insurer:

China Taiping Insurance (Singapore) Pte. Ltd.

Policy No:

DMHCSN1756201700

Claimant Vehicle

GBF9625H No:

Insured Vehicle No:

SJC7797D

Date of Loss:

12/02/2018

Nature of Claim: TP

Claim No:

SNM18D00862C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

GBF9625H

Make & Model:

TOYOTA DYNA 150, 3.0 D (M)

Engine No:

1KD2692939

Reg. Date:

24/04/2017 (Man. Year: 2017)

Chassis No: Odometer:

JTFAT35Y50K207801 13563 km

Colour

Silver

2982 cc

Engine Capacity: 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 Engine Modification:

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195/75 R15

Rear Tyre Size:

155 R12

Pre-accident Condition:

Front Left Side:

Bridgestone 8 mm

Rear Left Side:

Bridgestone 8 mm

Front Right Side:

Bridgestone 8 mm

Rear Right Side:

Bridgestone 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,539.50	1,079.02	1,460.48	57.51
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,630.00	430.00	1,200.00	73.62
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	4,169.50	1,509.02	2,660.48	63.81
Approved Total (Overridden) (S\$)		1,200.00		
(S\$)	4,169.50	1,200.00	2,969.50	71.22
+ GST 7.00/7.00% (S\$)	291.87	84.00	207.87	71.22
Nett Amount (S\$)	4,461.37	1,284.00	3,177.37	71.22
Parameter and the property of				

INSPECTION

Date of Assignment:

15/02/2018

Date Inspected:

19/03/2018 Inspected At:

Eco Automobile Claims And Repair Pte Ltd

(HQ)

13 KAKI BUKIT ROAD 4, #03-29

Singapore 417807

Estimated Period of Repair:

2.0 days

Adjuster: MA CHIN FOOK 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.

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REPAIR DETAILS

Referen	ce			
Part Source	:	(Last Synchronised: 04 May 2018)		
Parts:	N/A	TOYOTA DYNA 150 3.0 D (M) (Model not available in database)		
Labour:	Repairer's	(Price-denominated Standard List)		
Print Code:	(Unsubmitted, no print-code for GBF9625H)			
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	er 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		*FRONT BUMPER	Deformed	1,200.00 FL	*792.88 FL
2	1		*FRONT BUMPER BRACKET RH	Repair	80.00 FL	*-FL
3	1		*FRONT BUMPER SPOTLLIGHT COVER RH	Repair	80.00 FL	*-FL
4	1		*FRONT FENDER RH	Serviceable	180.00 FL	*-FL
5	1		*FRONT WIPER PANEL	Serviceable	350.00 FL	*-FL
6	1		*HEADLAMP RH	Cut	750.00 FL	*645.81 FL
7	1		*FRONT GRILLE	Serviceable	180.00 FL	*-FL
8	10		*FRONT GRILLE CLIPS	Not Necessary	10.00 FL	*-FL
9	1		*FRONT GRILLE LOGO	Not Necessary	65.00 FL	*-FL
10	1		*FRONT PANEL RH	Serviceable	450.00 FL	*-FL
11	6		*FRONT PANEL SCREW	Not Necessary	6.00 FL	*-FL
12	1		*CARPLATE	Not Necessary	35:00 FL	*-FL
F=Fra	nchise	part. L=ListIt	emDisc		CONTRACTOR CONTRACTOR	construction and a
				Sub Total (S\$)	3,386.00	1,438.69
			- List Item Discount on L Item	ns 25.00/25.00% (S\$)	846.50	359.67
				Total Parts (S\$)	2,539.50	1,079.02

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

& INSTALL DAMAGE AREA	New	800.00	200.00
	New	800.00	200.00
COTING DAMAGE AREA		000.00	200.00
OOFING DAMAGE AREA	New	80.00	0.00
AINTING ON AFFECTED AREA	New	700.00	200.00
VIRING & LIGHTING	New	50.00	30.00
	Gross Labour Cost (S\$)	1,630.00	430.00
		/IRING & LIGHTING New	VIRING & LIGHTING New 50.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >