

ASS. REC. BY:

REF: CS3/GAI18003998/Gd302

Special Instruction:

urgent

Surveyor:

Guo Qing

## ASSIGNMENT (Office)

From (Person):

Rachel Tan

of

GAI

Date/Time:

28/2/2018 @ 3:58pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

YN 6208J

Insured:

YP872U

at Workshop m/s

N-SI Automotive

Tel:

68420051

of

2 Kelki Bukit Ave 2 # 01-17

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

24/02/18

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

10:24am @ 11/3/18

Person Contacted:

ee lin

Vehicle IN / OUT

Date/Time	Action/Instruction ( X ) Estimate
	YN 6208J - X
	YP872U - X
	Dismantle: 6/3/2018

REF:

Surveyor:

## 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.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

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

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: YN 6208J Yr Regn: Sept / 14

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

Truck / Trailer or

Make: Mitsubishi Canter c.c. 2998Colour: White A/C: Insured / Std / NI / NASp. Reading: 195900 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: FEB21EA 00500Gen. Cond: Good / Fair / Poor / BurntSteering: Ind / Jammed / Leaked / Burnt orBrake: Ind / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/80 R 15

R: \_\_\_\_\_

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

TOYO / YOKO or

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. \_\_\_\_\_ D.O.I. 5/3/18 @ 0622pm

Survey held at \_\_\_\_\_

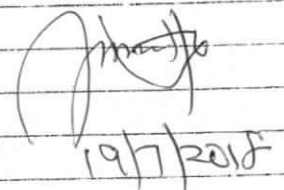
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

o/s

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

Date / Time Action / Instruction

Estimated repair range \$2,800 - \$3,500



Date/Time, File Pass to?

☐ : Preli. Report1) \_\_\_\_\_  
Date/Time, File Return to?☐ : Final Report

2) \_\_\_\_\_

Report Format: \_\_\_\_\_

Lump Sum / I.B.I. (\$) \_\_\_\_\_

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: 1

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

) Others \_\_\_\_\_

TOTAL

100
100

**Catherine Chong (LKK Auto)**

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**From:** Tan, Rachel <Rachel.Tan@sg.gaig.com>  
**Sent:** Wednesday, 28 February, 2018 3:58 PM  
**To:** Chin Hui Xin  
**Cc:** LKK Assignments  
**Subject:** RE: YN6208J & YP872U - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS  
**Attachments:** 28022018100614-0001.pdf

Without Prejudice

Dear Hui Xin  
We will arrange for LKK Auto to conduct Pre-repair inspection.

Dear LKK  
Please accept assignment to conduct PRI.

Thank you.

Regards  
Rachel Tan  
Executive, Motor Claims, Great American Insurance Company  
Tel: 6804 7846

**From:** Chin Hui Xin [mailto:huixin@n51.com.sg]  
**Sent:** Wednesday, February 28, 2018 3:17 PM  
**To:** Tan, Rachel <Rachel.Tan@sg.gaig.com>  
**Subject:** Re: YN6208J & YP872U - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Dear Sir/Madam,

We refer to your list of motor surveyors proposed.

We do not agree to your list of motor surveyors.

Please see attached.

Thank you

Regards,

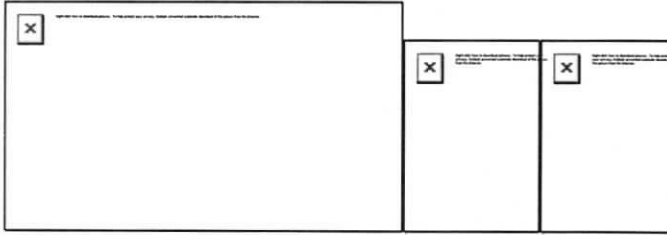
Melody Chin

N-51 Automotive Pte Ltd

Office : 6842 0051

Fax : 6741 0510

**www.n51.com.sg**



On Wed, Feb 28, 2018 at 3:00 PM, Tan, Rachel <[Rachel.Tan@sg.gaig.com](mailto:Rachel.Tan@sg.gaig.com)> wrote:

Without Prejudice

Hi

We append the following list of our panel surveyors:-

1. AJAX Adjusters & Surveyors Pte Ltd
2. L.B.S. Automotive Appraisal Pte Ltd
3. Priority Services
4. RT Appraisal Pte Ltd
5. LKK Auto Consultants
6. JP KNIGHTS PTE LTD

Kindly let us know which SJE is selected and furnish the estimates for the survey to be carried out.

Regards

Rachel Tan

Executive, Motor Claims, Great American Insurance Company

Tel: 6804 7846

**From:** Ong, Joanna **On Behalf Of** General Claims

**Sent:** Wednesday, February 28, 2018 1:59 PM

**To:** Tan, Rachel <Rachel.Tan@sg.gaig.com>

**Subject:** FW: YN6208J & YP872U - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Hi Rachel ~

FYNA. Thanks.

Joanna

**From:** Chin Hui Xin [<mailto:huixin@n51.com.sg>]

**Sent:** Wednesday, February 28, 2018 10:10 AM

**To:** General Claims <[GeneralClaims@sg.gaig.com](mailto:GeneralClaims@sg.gaig.com)>

**Subject:** YN6208J & YP872U - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Dear Sir/Madam,

As per above subject,

Please refer attachment and:-

Kindly propose / provide your 10 surveyors.

Thank you...

Regards,

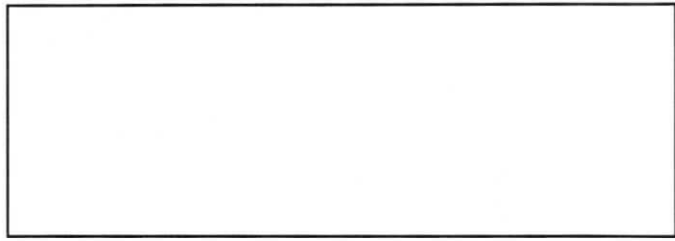
Melody Chin

TWINCAR Automotive Pte Ltd

Office : 6842 0051

Fax : 6741 0510

**[www.n51.com.sg](http://www.n51.com.sg)**



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# TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit Autohub

2 Kaki Bukit Ave 2, #01-17

Singapore 417921

Tel No. : +65 6744 0510 / 6842 0051 Fax No. : +65 6741 0510

Company Reg. No. : 200714616M

GST Registration No. : 200714616M

Our Ref: **YN 6208 J**

Your ref: **YP 872 U**

28 February 2018

## **GREAT AMERICAN INSURANCE COMPANY**

3 TEMASEK AVENUE

#16-01 CENTENNIAL TOWER

SINGAPORE 039190

Attn: Motor Claims Department

**BY FAX 6235-2616 & EMAIL :  
GeneralClaims@sg.gaig.com**

Dear Sir/Madam,

**DATE OF ACCIDENT: 24 Feb 2018**

**NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS**

**PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES**

We are instructed by **GUAN KEE BEAN CURD MANUFACTURERS** to notify you of a road traffic accident on **24 Feb 2018** at about **01:00 HOURS** At **YISHUN ST 22 OPEN CARPARK OF BLK 291** involving our client's vehicle **YN 6208 J & YP 872 U** driven by you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



.....  
**Twincar Automotive Pte Ltd**

## &gt; Back to OneMotoring

## Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	YN6208J		
Vehicle Type :	B30 - Goods (Open) Lorry (Wooden Body)		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	MITSUBISHI		
Vehicle Model :	CANTER FEB21ER4SDEB		
Chassis No. :	FEB21EA00500		
Propellant :	Diesel		
Engine No. :	4P10B21031		
Engine Capacity :	2998 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	5000 kg		
Unladen Weight :	2280 kg		
Year Of Manufacture :	2014		
Original Registration Date :	23 Sep 2014		
Lifespan Expiry Date :	22 Sep 2034		
COE Category :	C - Goods Vehicle & Bus		
PQP Paid :	\$40,548.00		
COE Expiry Date :	22 Sep 2024		
Road Tax Expiry Date :	22 Sep 2018		
Inspection Due Date :	22 Sep 2019		
Intended Transfer Date :	19 Jul 2018		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
The current road tax expiry is 22 Sep 2018. You may renew the road tax from 23 Jun 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 22 Sep 2018, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable (From 23 Sep 2018 to 22 Mar 2019)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	13.00	-	13.00
Total Amount Payable :			38.00
Amount Payable (From 23 Sep 2018 to 22 Sep 2019)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Business
Owner ID:	6500E
<b>Vehicle Details</b>	
Vehicle No.:	YN6208J
Vehicle to be Exported:	No
Intended De-registration Date:	19 Jul 2018
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEB21ER4SDEB
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	4P10B21031
Chassis No.:	FEB21EA00500
Maximum Power Output:	-
Open Market Value:	\$29,479.00
Original Registration Date:	23 Sep 2014
First Registration Date:	23 Sep 2014
Transfer Count:	0
Actual ARF Paid:	\$1,474.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	22 Sep 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$40,548.00
COE Rebate Amount:	\$25,038.00
<b>Total Rebate Amount:</b>	<b>\$25,038.00</b>

The information contained herein is correct as at 19 Jul 2018

OK

MSME18027054 / SME Motor Pte Ltd - Kaki Bukit  
ENTRY DATE & TIME: 26/02/2018 12:28  
SUBMITTED BY: Chia Pei Ying

## 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	26/02/2018 12:28
Date Of Accident	24/02/2018 01:00
Exact Location Of Accident	YISHUN ST 22 OPEN CARPARK OF BLK 291
Country/State of Loss	SINGAPORE

**DETAILS OF OWN VEHICLE**

Vehicle Registration Number	YN6208J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GUAN KEE BEAN CURD MANUFACTURERS
Co Reg No	26966500E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96308910
Alternative Phone No	OFFICE-96308910

**Vehicle Particulars**

Manufacturer	MITSUBISHI
Model	FUSO
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

**Insurance Company**

Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D17MTPCVE002206
Cover Note Number	

**Driver**

Name of Driver	ZHANG LONG
NRIC No	G2857847X
Date Of Birth	30/10/1978
Occupation	INDOOR
Date Of Driving Pass	07/02/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91988444
Fax Number	
Contact Number	
EMAIL Address	NOEMAIL

Address -  
 Postcode  
 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 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? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

MY VEHICLE WAS STATIONARY PARKED. AS I WAS UNLOADING GOODS TO BLK 291. AFTER UNLOADING AND WALKING BACK TO MY VEHICLE, WHILE WALKING BACK, I SAW A VEHICLE THE REAR GATE DOOR WAS NOT CLOSED AND THE TAIL GATE LEFT DOOR HIT ONTO THE RIGHT SIDE OF MY VEHICLE WHILE THE VEHICLE BEARING (YP872U) WSA MOVING FORWARD. THE WHOLE ACCIDENT FOOTAGE WAS TAKEN BY MY IN-CAR CAMERA.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: -  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YP872U  
 Vehicle Make/Model/Colour  
 Details Of Properties VEHICLE B  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

**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 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 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 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.



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.:

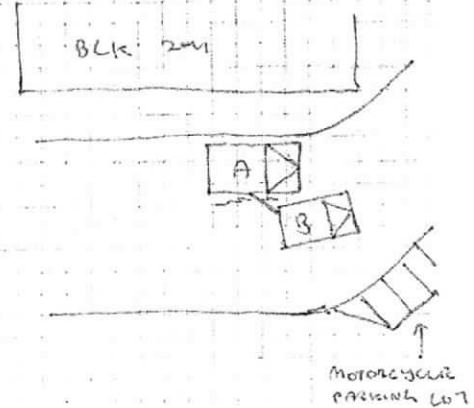
TWINE CTR

## Sketch Plan #2 Pg. 1

## SKETCH PLAN

VEHICLE A - YN6L083

VEHICLE B - YP872 U



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

MY VEHICLE WAS STATIONARY PARKED, AS I WAS UNLOADING  
GOODS TO BLK 201.

AFTER UNLOADING AND WALKING BACK TO MY VEHICLE, WHILE  
WORKING BACK, I SAW A VEHICLE THE REAR TAILGATE DOOR  
WAS NOT CLOSE, AND THE REAR TAILGATE LEFT DOOR  
HITTED ONTO THE RIGHT SIDE OF MY VEHICLE WHILE THE  
VEHICLE BARISH (YP872 U) WAS MOVING FORWARD.

THE WHOLE ACCIDENT FOOTAGE WAS TAKEN BY MY IN-CAR  
CAMERA.

VEHICLE A - YN62083

VEHICLE B - YP872 U

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

26/2/18 10:45AM


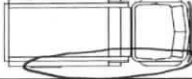
**LKK Auto Consultants Pte Ltd**

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 1

PRE-REPAIR INSPECTION REPORT				
GREAT AMERICAN INSURANCE COMPANY		Ref: CS3/GAI18003998/Gd3e2		
3 TEMASEK AVENUE #16-01 CENTENNIAL TOWER SINGAPORE 039190		Date: 20-07-2018		
Code: GAI				
<b>1. Policy Particulars :- (THIRD PARTY CLAIM)</b>				
Insured Veh.	YP 872U	Veh. Inspected	YN 6208J	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From	RACHEL TAN	Assign Date	28/02/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	MITSUBISHI CANTER		c.c	2998
Engine No.	HIDDEN		Year of Reg.	2014
Chassis No.	FEB21EA00500		Colour	WHITE
Odometer	195900 KM		Steering	IN ORDER
Brakes	IN ORDER		Modification	NIL
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/80 R15	YOKOHAMA	5 mm	
L/H Front Tyre	195/80 R15	YOKOHAMA	5 mm	
R/H Rear Tyre	195/80 R15	YOKOHAMA	5 mm	
L/H Rear Tyre	195/80 R15	YOKOHAMA	5 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.				
<b>5. General Information</b>				
Accident Date	24/02/2018	Inspect Date / Time	05/03/2018 ( 06:22 PM )	
Survey held at	N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921			
<b>5a. Remarks</b>				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,800-\$3,500				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		

Report Ref No. CS3/GAI18003998/Gd3e2

Inspected By



XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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