

INS. CASE OWNER: Angie | CC 3 ^{WR} / AIG 1800 4482, #1pb39 | LKK: | IDAC:

Surveyor: Kalvin | DOI: 8/2/18 | Date / Time: 7/2/18
 Registered in Meritum: 8/2/18

Pre-assign / CCU / FTE
 Insured Vehicle No. : SLG 3590P | Claim No. : 081910663756
 Name of Insured : URP | Policy No. : 900000174
 Insured Tel No. : _____ | HP: _____ | Make / Model : THYTA
 Excess Sec II : SS | D.O.A : 06/07/18 | Place of Accident : RANSON RD EXIT TO CE
 Is driver the owner? (YES / NO) | Nature of Accident : _____
 If NO, Driver Name / Age : THANG MENFU, 18 | OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO
 Driver Tel No. : _____ | (V/L: YES / NO) | Insured Liability: % | Final ? Yes / No

SHC 10985 → → → → →
 INSR: WSP: Tel: Liability: RMKS: WTE 4
 INSR: WSP: Tel: Liability: RMKS: _____
 INSR: WSP: Tel: Liability: RMKS: _____
 INSR: WSP: Tel: Liability: RMKS: _____

Date/Time	STAGE	DATE / PIC
14/7/18	Non-Reporting Itr (1st):	
	Non-Reporting Itr (2nd):	
	Non-Reporting Itr (Final):	
	Notification Itr (if non-pickup):	
19/3/18	Call OI:	<u>Hsiao/19/3/18</u>
	After call Itr to OI:	<u>by email</u>
11/5/18	Documentation Check List:	
15/5/18	Notification Itr (if non-pickup):	
	After call Itr to OI:	
	Authorisation To Act:	
	Release Voucher:	
	Final Repair Bill:	
	Car Rental Invoice:	
	Towing Invoice:	
	LTA / GIA :	
	Medical Bill:	
	PIR:	
	Mandate/Reject Instruction:	
	LOD:	
	Payment Breakdown Form:	
	Post-Repair Photos:	
	Others:	

RECEIVED 15 MAY 2018

PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	SS	days Reduction:	% Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/> <u>RTM</u>
Final Liability:	%	(Agreed / Assessed) BOLA S/N No.:	
Repair Cost:	SS		
Loss of Rental (LOR):	SS	(3 days)	<u>XB 117.00</u>
Loss of Use (LOU):	SS	(5 - x - days)	
Loss of Income (LOI):	SS	150.00 x 3 days	
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/>		LOR + LOU <input type="checkbox"/> LOR + LOI <input checked="" type="checkbox"/>	[Tick only one]
GIA/LTA Search:	SS		
Medical:	SS		
Disbursement:	SS	(e.g. Tow/Independent)	
Legal Cost:	SS		
Total:	SS	Global Sum SS:	
FINAL PAYMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/> <u>PTM</u>
Payee 1:	SS	Name 1:	<u>Contortdelgro Engineering Pte Ltd</u>
Payee 2: (Strike if N.A.)	SS	Name 2:	
Payee 3: (Strike if N.A.)	SS	Name 3:	

- checked by Hsiao/19/3/18
 - CIA
 + 15/5/18.
 1) Claim status: TP / Reject/Private Settle
 2) Report Format: TP
 3) Survey fee: #320 + #20

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

Arg Asia - C/P/P IS

VEHICLE NO : SHC 1058S

DATE 7/3/2018

MAKE :

LKE - Kalvin

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>total</i>			\$ 603.60
	Rear Bumper Reinforcement <i>x 500</i>			\$ 504.35
	Rear Bumper Reinforcement Bracket (LH/RH) <i>x 2</i>	\$	180.00	\$ 360.00
	Rear Bumper Side Bracket <i>x 2</i>			\$ 49.00
	Rear Bumper Clips <i>2</i>			\$ 22.00
	Rear Bumper Sponge <i>x 2</i>			\$ 143.40
	Rear Bumper Under Cover <i>2</i>			\$ 225.00
	Rear Bumper Reflector Lamp (LH/RH) <i>x 2</i>	\$	32.00	\$ 64.00
	<i>Rear End Panel + repair</i>			
	Exhaust LH <i>part \$954</i>			\$ 1,971.35
	Exhaust centre pipe <i>part \$1150.3</i>			\$ 394.27
	DISCOUNTED TOTAL			\$ 1,577.08
	<i>4075.65</i>			
	<i>3260.52</i>			
	Rear Bumper Reverse Sensor <i>still</i>			\$ 135.70
	Rear No. Plate <i>2</i>			\$ 25.00
	License Plate Cover <i>2</i>			\$ 100.00
	Rear Fender Advertisement Logo (LH/RH) <i>2</i>	\$	100.00	\$ 200.00
	<i>Nett</i>			
				\$ 460.70
	Labour Charge			
	Panel Beating			\$ 380.00
	Spray Painting Charge			\$ 380.00 <i>200.00</i>
	Wiring Charge			\$ 50.00 <i>x 2</i>
	R/Refix Reverse Sensor			\$ 120.00 <i>x 2</i>
	<i>Timing \$50</i>			
	<i>Remove/Refix exhaust system \$50</i>			
	TOTAL LABOUR			\$ 750.00
	ESTIMATE TOTAL			\$ 2,787.78
	<i>4871.2</i>			

Kalvin LKE
M 7/3/18 1535hr
3 Dyo
P/P
Before Paint photo

LKK Auto Consultants hereby notify the Repairer of the following:

- To survey before and after spray painting
- To display damaged parts during survey
- Parts prices are subject to market price
- Third party survey work is on "no prejudice" basis
- No illegal modification to vehicle
- Supplementary work must be surveyed and is subject to New Approval from Insurance Company

Acknowledged: _____
 Signature: _____
 Date: _____

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

ALG
LKK

COMFORT DELGRO ENGINEERING
 25 Selegie Road, Singapore 118240
 25 Selegie Road, Singapore 118240
 25 Selegie Road, Singapore 118240
 25 Selegie Road, Singapore 118240

COMFORT DELGRO ENGINEERING

Member of COMFORT DELGRO

Date/Time: 07:03:2018-11:30 Page : 1

Job: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO: 305122919

IMER COMFORT TRANSPORTATION PTE LTD 7010045 IMER NO: 383 SIN MING DRIVE SS Singapore SINGAPORE 575717 65508755 (P) (C) (P) UNIT CARD NO.	REGN NO: SHC1058S	MILEAGE
	MAKE: HYUNDAI	FUEL E 1/2 F
	MODEL: I-40	DATE/TIME IN: 06.03.2018 21:00
	YR OF MANU: 11.01.2017	TARGET DATE
	CHASSIS CODE: KMHLB41UMHU098244	COMPLETION DATE/TIME

JOB DESCRIPTION

cident Date: 06.03.2018
 TURE: 3P 06.03.18/C

NO LABOR CODE DESCRIPTION

RECEIVED & PASSED OUT BY: _____

 SERVICE ADVISOR

 CUSTOMER'S SIGNATURE

Exit Pass

Exit Pass

Vehicle No.: SHC1058S LIMTS

Vehicle No.: SHC1058S

Signature/Date

Signature/Date

Name of Service Advisor

Date

To be kept by Security Guard

To be kept by Security Guard



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: <u>6/3/18</u> Time Received: <u>2200</u>	3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : Contact No. : <u>Teo</u> Vehicle No. : <u>97223349</u> Make/Model/Colour : <u>SHC 1058S</u> Email :	5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	6. Parts Replaced/Remarks: _____ _____ _____

7. Location: <u>1 HALIFX RD (OSCP)</u>	8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____	

10. Odometer Reading : _____ Fuel Level : <table border="1" style="display: inline-table; text-align: center;"><tr><td>F</td><td>1/4</td><td>1/2</td><td>3/4</td><td>E</td></tr></table>	F	1/4	1/2	3/4	E	11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested	 #: Cracked X: Dented /: Scatched O: Missing
F	1/4	1/2	3/4	E			

Job Attended 12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input checked="" type="checkbox"/> QA <input type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS TOWING Name of Driver : <u>JAY</u> Vehicle No. : <u>Ym 6680H</u> Time Dispatch : _____ Time of Arrival : _____ Time Completed : _____	Signature of Customer _____
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Cash Invoice Details (if applicable)
 13. Cash Invoice No. : _____

Customer Acknowledgement

a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.

b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.

c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

6/3/18 Date _____ Time _____ Signature of Customer _____

14. WORKSHOP

Name of Attending Staff/Guard _____	Date & Time of Arrival _____	Signature of Attending Staff/Guard _____
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Our Ref : T 0318 / SHC1058S /CL(st)
 Your Ref: _____
 Date : 11-Apr-18

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road Singapore 579701

CDGE Taxi Claims Dept
 59 Loyang Drive 4th Floor
 Singapore 508969

Mainline +65 6383 6280
 Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No. 1920000287

Workshops

Braddell
 205 Braddell Road
 Singapore 579701

Loyang
 59 Loyang Drive
 Singapore 508969

Sin Ming
 383 Sin Ming Drive
 Singapore 575717

Pandan
 45 Pandan Road
 Singapore 600286

Ubi
 320 Ubi Road 3
 Singapore 408648

Senoko
 24 Senoko Loop
 Singapore 758155

Sungei Kadut
 7 Sungei Kadut Way
 Singapore 725791

Yishun
 501 Yishun Industrial Park A
 Singapore 768732

AIG ASIA PACIFIC INSURANCE PTE LTD
CHARTIS Buliding
78 Shenton Way
#07-16
Singapore 079120

Attn : Motor Claims Department WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHC1058S YOUR INSURED SLG3590P
 AND OTHER _____ ON 06.03.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHC1058S** which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving **SLG3590P** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 3,856.94
2	<u>3.5</u> days Loss of Rental @ \$ 117.00 per day	\$ 409.50
3	Survey Report Fees (<i>Surveyed by M/s LKK</i>)	\$ -
4	GIA / LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation	\$ -
Sub Total :		\$ 4,273.93

HIRER'S CLAIM

7	<u>3.5</u> days Loss of Income @ \$ 80.00 per days	\$ 280.00
Total Claims :		\$ 4,553.93

We enclosed herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs : 4 pcs.
- b) LTA search slip/s of : SLG3590P
- c) GIA / Police report/s of : SHC1058S
- d) Letter of authority from owner / hirer / operator
 - (X) Photograph/s of Accident Scene () Certificate of Insurance
 - () Witness statement/s (x) Downtime/Mileage record

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

Cecilia Lee

Executive

CDGE Claims Department

Tel : 6214 8354 Fax: 6214 1843 Email : cecilialee@sparkcarcare.com

This is a computer generated letter. No signature is required.

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

Our Job Ref No : 305122919
Date : 09/03/18

FINALIZATION FORM

To : LKK
Attn : KALVIN ANG

Fax :

Vehicle Reg No. : SHC1058S Date of Accident : 06-Mar-18

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: AIG ASIA --- SLG3590P
2. The finalized amount shall be:

(a) Spare Parts after List discount	\$2,524.62
(b) Labour Charges	\$1,080.00
Total for Part-By-Part Repair Cost	\$3,604.62
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	_____
Final Lumpsum Repair cost	_____

3. Estimated normal period for repairs: 3 working days.
4. **We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : LIM T S
Tel : 62148398
Fax : 65468156

Signature : 
Name : KALVIN
Date : 9/3/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees	-----			
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305122919
 REGN NO : SHC1058S
 MILEAGE : 000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 11.01.2017
 DATE/TIME IN : 06.03.2018 21:00
 ACCIDENT DATE : 06.03.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0103-0579-G	REAR BUMPER	1	603.60	20.00	482.88
0002	04-01-0101-0111-G	REAR BUMPER CLIPS	10 L	22.00	20.00	17.60
0003	04-01-0103-0738-G	REAR BUMPER UNDER COVER	1	225.00	20.00	180.00
0004	02-01-0103-0053-G	EXHAUST MUFFLER LH**	1	954.00	20.00	763.20
0005	02-01-0103-0086-G	EXHAUST CENTRE PIPE**	1	1,150.30	20.00	920.24
0006	09-01-9999-0068-A	REVERSE SENSOR	1	135.70		135.70
0007	FNPS	NO PLATE(S)	1 N	25.00		25.00

SUB-TOTAL : 2,524.62

JOB NATURE

0000	20-05	LICENCE PLATE COVER				100.00
0001	20-05	Rear Fender Adv.Sticker RH/LH				200.00
0002	L	PANEL BEATING				300.00
0003	23-502	SPRAYPAINT ON AFFECTED AREA				360.00

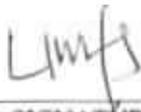
COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305122919
 REGN NO : SHC1058S
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 11.01.2017
 DATE/TIME IN : 06.03.2018 21:00
 ACCIDENT DATE : 06.03.2018

JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0004 L	R/I REVERSE SENSOR	20.00				
0005 23-01	TOWING FEE	50.00				
0006 L	R/I EXHAUST SYSTEM**	50.00				

SUB-TOTAL : 1,080.00

TOTAL : 3,604.62


 MVA NAME & SIGNATURE
 DATE :

 SURVEYOR NAME & SIGNATURE
 DATE : AUTHORIZED : YES / NO

Hsiao Tong (LKKAuto)

From: Hsiao Tong (LKKAuto)
Sent: Monday, 19 March 2018 4:55 PM
To: 'Eileen, May Hwee Yap'
Subject: ACCIDENT INVOLVING SLG 3590P(AIG) & SHC 1058S ON 06/03/2018

Your Ref: **SLG 3590P**
Our Ref: CC3/LCR18004482/K1pb3

Dear Sirs/Madam,

ACCIDENT INVOLVING SLG 3590P(AIG) & SHC 1058S ON 06/03/2018

We refer to the above accident where we are acting for AIG Asia Pacific Insurance Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

We have received a claim from SHC 1058S against your insurance policy.

Based on the accident report and accident scenario, liability is down against us.
We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

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

LETTER OF AUTHORISATION

(NAF / PAF) ၀/၃

ACCIDENT INVOLVING
ALONG140 SHC1058S , SLG3592P
CTE(CITY) FROM RANGOON RD

ON 06-Mar-18 21:00

I / We

NG MUI SIONG LAWRE... (Hirer) NRIC No.: S1786843H

and/or

(Relief) NRIC No.:

Taxi Number

SHC1058S

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "ComfortDelGro Engineering Pte Ltd".

Date

07-Mar-2018

Name of Hirer

NG MUI SIONG LAWRENCE

Hirer NRIC

S1786843H

Signature :



Address

231 SIMEI STREET 4 #09-122
520231

Contact No.

97223349

RELEASE VOUCHER
(AIG Asia Pacific - Express Third Party Claim)

"We/I, **COMFORTDELGRO ENGINEERING PTE LTD** ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **SS 4,760.00** (Global Sum) for vehicle no. **SHC 1058S** that was damaged pursuant to the accident which occurred on **06/03/2018** (date) along **CTE (CITY) FROM RANGOON ROAD** (location) involving vehicle no/s **SLG 3590P**.

This is pursuant to the inspection conducted on **07/03/2018** (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner **COMFORT TRANSPORTATION PTE LTD** ("the third party claimant") of vehicle no. **SHC 1058S** make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to **SHC 1058S** (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this 11th (day) of May (month) **20** 18 (year)



AUX

Signed by appointed surveyor

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
205 BRADDELL ROAD
SINGAPORE 579701

Signed by "the workshop" (with chop)

Please forward your cheque made payable to:-
COMFORTDELGRO ENGINEERING PTE LTD

"The contents of this document apply to vehicle damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document."

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 1

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#08-16 78 SHENTON WAY, CHARTIS BUILD
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO
SHC1058S

INV. NO/DATE
91364517 27.03.2018

MAKE
HYUNDAI

JOB NO.
305122919

MODEL
I-40

ODOMETER READING

DATE OF REG
11.01.2017

DATE/TIME IN
06.03.2018 21:00

CHASSIS CODE
KMHLB41UMHU098244

Description : 3P 06.03.18

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0579	I40VC COVER ASSY-RR BUMPE	1	603.60	20.00	482.88
0002	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP	10	2.20	20.00	17.60
0003	04-01-0103-0738	I40VC COVER-RR BUMPER LWR	1	225.00	20.00	180.00
0004	02-01-0103-0053	I40VC MUFFLER ASSY-LH	1	954.00	20.00	763.20
0005	02-01-0103-0086	I40VC PIPE-EXHAUST FR	1	1,150.30	20.00	920.24
0006	09-01-9999-0068	HYUNDAI REVERSE SENSOR AS	1	135.70	0.00	135.70
0007	FNPS	NO PLATE(S)	1	25.00	0.00	25.00
SUB-TOTAL						2,524.62

JOB NATURE

0001	20-05	LICENCE PLATE COVER	100.00	100.00	
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I/WE HEREBY TAKING ALL NECESSARY PRECAUTIONS, WARRANT THIS, THEFT OR ACCIDENTAL DAMAGE THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OR DAMAGE TO THE VEHICLE BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TOWED AT OWNERS' RISK.

CUSTOMERS SHALL INSPECT THESE VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 14 DAYS FROM DATE DELIVERY ADVISE BY WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

INTEREST OF 1% PER MONTH SHALL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY ACCOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OR PAYMENT 2% LATER IN DAYS FROM THE DUE DATE FOR THE PERIOD OF DEFAULT.

PLEASE RETURN THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY STAMPS OR DECLARATIONS WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS COMPLETELY PAID INVOICE.

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010004	91364517	3,856.94	

Workshops

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
 Page: 2

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#08-16 78 SHENTON WAY, CHARTIS BUILD
 SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO
 SHC10588

INV. NO/DATE
 91364517 27.03.2018

MAKE
 HYUNDAI

JOB NO.
 305122919

MODEL
 I-40

ODOMETER READING

DATE OF REG
 11.01.2017

DATE/TIME IN
 06.03.2018 21:00

CHASSIS CODE
 KMHLB41UMHU098244

S/No	Part No.		Qty	Unit Price	%Disc	Net
0002	20-05	Rear Fender Adv.Sticker RH/LH	200.00			200.00
0003	L	PANEL BEATING	300.00			300.00
0004	23-502	SPRAYPAINT ON AFFECTED AREA	360.00			360.00
0005	L	R/I REVERSE SENSOR	20.00			20.00
0006	23-01	TOWING FEE	50.00			50.00
0007	L	R/I EXHAUST SYSTEM**	50.00			50.00
SUB-TOTAL :						1,080.00

Items total	3,604.62
Add GST @ 7.000 %	252.32
Invoice amount	3,856.94

Issued by : CHEWEELENG 27.03.2018 14:33:49
 Repair type : CLSO/57/57

I hereby certify that the above described work was done on the vehicle described in this invoice for ACCIDENTAL DAMAGE. THE COMPANY ACCEPTS NO RESPONSIBILITY FOR LOSS OF OR DAMAGE TO THE VEHICLE OR CONTENTS BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND PARKED AT CUSTOMER'S RISK.
 I CERTIFY THAT I HAVE INSPECTED THE VEHICLE IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM DELIVERY DATE NOTIFY IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE, THE WORKERS WILL BE THOUGHT TO HAVE BEEN ACCURATE IN GOOD ORDER.
 INTEREST OF 1% PER MONTH WILL BE CHARGED FOR A DAY TO EVERY DOLLAR BY REQUEST OF ANY AMOUNT DUE AND PAYABLE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT OR AFTER 30 DAYS FROM THE INVOICE DATE THE PERIOD OF DEFAULT.
 I HEREBY WARRANT THE WORKS IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY DEFECTS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THE WORK AS COMPLETE AND BINDING.

ComfortDelGro Engineering Pte Ltd
 A member of COMFORTDELGRO

Head Office:
 205 Braddell Road
 Singapore 579701

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHO No.
8010004	91364517	3,856.94	

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

TAX INVOICE

8010004
 AIG ASIA PACIFIC INSURANCE PTE LTD
 #08-16 78 SHENTON WAY, CHARTIS BUILD
 SINGAPORE SG 079120
 CONTACT NO: 64193000 3225094

VEHICLE NO SHC1058S	INV. NO/DATE 91364517 27.03.2018
MAKE HYUNDAI	JOB NO. 305122919
MODEL I-40	ODOMETER READING
DATE OF REG 11.01.2017	DATE/TIME IN 06.03.2018 21:00
CHASSIS CODE KMHLB41UMHU098244	

Payment Type/Term: /Credit 30 days

VEHICLE TAKES ALL RESPONSIBILITY FOR ALL DAMAGE CLAIMS AND THIRD OR ACCIDENTAL DAMAGE. THE COMPANY ACCEPTS NO RESPONSIBILITY FOR DAMAGE OR DAMAGE INCIDENTS BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED BY COMPANY DRIVERS.
 CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SIGN WITHIN 3 DAYS FROM SUCH DELIVERY (NO NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, SYMPTOMS, THE VEHICLE WILL BE DEEMED TO HAVE TAKEN ACCIDENT OR GOOD EXIDEN
 INTENSITY OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT I.E. AFTER 30 DAYS FROM THE DATED FOR THE PERIOD OF DEFALTY
 PLEASE SIGN AND THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd
 A member of COMFORTDELGRO

Head Office:
 205 Braddell Road
 Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010004	91364517	3,856.94	

Our Ref: CT18030200

Date: 13 March 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 06/03/2018 @ 21:00 hrs
ALONG CTE(CITY) FROM RANGOON RD
INVOLVING SLG3590P

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHC1058S** (the "Taxi"). The Taxi was hired to **NG MUI SIONG LAWRENCE IC NO S1786843H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$117.00** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

DATE	NAME OF DRIVER	MILEAGE READING		MILEAGE TRAVELLED (KM)	HOURS OPERATED (TM)		DATE	NAME
		237464	237697		FROM	TO		
0403	Nh	237464	237697	459	0710	1155		
5/3	H0	237697	238051	216	0503	1455		
0503	Nh	238051	238278	371	1210	1440		
6/3	H0	238278		227	2100	/		
9/3	Accident repair			21	1100	/		

SHC 10585

Handwritten signature

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SLG3590P	06 Mar 2018 / 21:00:00	Successful	A04	AIG ASIA PACIFIC INSURANCE PTE. LTD.

Previous

OK

success

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

Express

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	09 Mar 2018 Edit Reg		07 Mar 2018 00:00 Edit Adj Rpt	S\$3,604.62 Edit Estimates	S\$3,604.62 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured:	LCRF Pte Ltd, Co. Reg. No.: NA								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHC1058S	Date of Loss:	06/03/2018 21:00 - :59 [13 Months and 23 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 0819196633SG	Policy/Cover Note No.:	0999994762 (Comprehensive)						
Vehicle Reg. No. (Insured):	SLG3590P	Policy No. (Claimant):	D-18088936MFSH						
		Excess:							
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Gan, Angle-GL] Angiegeokling.Gan@aig.com								
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 19/03/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL 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 results.									

Claim Documents

***SHC1058S (0819196633SG)**
[SLG3590P]
TP
COMFORT TRANSPORTATION PTE LTD
Mar 6 2018 9:00PM
[LCRF Pte Ltd]
ComfortDelGro Engineering Pte Ltd

Upload Documents		Upload Photos		Compose New Letter		Upload Video		Upload Audio		View <input type="button" value="View in Browser"/>	
Letters/Correspondences										1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	(Draft)	Third Party Express Settlement - Payment Breakdown							Edit		
Photos/Images										3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
2	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
3	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
4	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
5	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
6	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
7	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
8	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
9	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
10	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
11	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
12	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
13	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
14	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
15	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
16	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
17	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
18	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
19	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
20	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
21	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
22	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
23	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
24	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
25	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
26	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
27	08/03/18 17:47	General View							Load JPG	<input checked="" type="checkbox"/>	
28	12/03/18 08:46	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	
29	12/03/18 08:47	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	
30	12/03/18 08:47	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	
31	12/03/18 08:47	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	
32	12/03/18 08:47	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	
33	12/03/18 08:47	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	
34	12/03/18 08:47	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>	

Letters / Correspondences			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
				<input checked="" type="checkbox"/>
35	12/03/18 08:47	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	08/03/18 17:31	TP ESTIMATE- MARKED	 Load PDF	
2	08/03/18 17:31	TP GIA REPORT	 Load PDF	
3	16/05/18 10:16	WORKSHOP INVOICE	 Load PDF	
4	16/05/18 10:16	AUTHORISATION TO ACT FORM	 Load PDF	
5	16/05/18 10:16	Release Voucher	 Load PDF	
6	16/05/18 10:16	RENTAL RECEIPT	 Load PDF	
7	16/05/18 10:16	LTA SEARCH	 Load PDF	
8	16/05/18 10:16	LETTER TO OI	 Load PDF	
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	09/03/18 09:23	OI GIA report	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

**THIRD PARTY EXPRESS SETTLEMENT
(PAYMENT BREAKDOWN)**

Vehicle No:	SLG3590P (Insd veh)	Model:	HYUNDAI I40 1.7 D (A)
	SHC1058S (TP veh)		
Date of Accident:	06/03/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	5,212.21
Final Repair Cost	:	\$	4,360.00
Loss of Use	:	\$	3.00 days at \$50.00 per day
Rental (if any)	:	\$	3 days
LTA / GIA Search Fee	:	\$	
Others:	:	\$	
	:	\$	
Final Settlement Sum (Global Sum)	:	\$	4,360.00
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A) For Non GIA Registered Workshop:		Agreed Liability _____(%)	
B) For GIA Registered Workshop:		BOLA Applicable: Yes/ No BOLA Scenario No: _____	
BOLA Liability: _____100_____(%)		Assessed Liability (*): _____(%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks _____			

Payment Instruction: Payee's Breakdown			
1)	ComfortDelGro Engineering Pte Ltd	:	\$ 4,360.00
2)		:	\$
3)		:	\$
4)		:	\$
5)		:	\$

JOANNE LEE KHANG MIN

16 May
2018

LKK Auto Consultants Pte Ltd

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

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: CC3/LCR18004482/K1PB3Q2

Date: 16/05/2018

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 0999994762
Claimant Vehicle No : SHC1058S **Insured Vehicle No :** SLG3590P
 Date of Loss: 06/03/2018 Nature of Claim: TP Claim No: 0819196633SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SHC1058S**
 Make & Model: HYUNDAI I40, 1.7 D (A) Engine No: D4FDGU706457
 Reg. Date: 11/01/2017 (Man. Year: 2016) Chassis No: KMHLB41UMHU098244
 Colour: Blue Odometer: 238368 km
 Engine Capacity: 1685 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: Yes

CONDITION OF TYRES

Front Tyre Size: 205/60 R16 Rear Tyre Size: 205/60 R16
 Front Left Side: Hankook 7 mm Rear Left Side: Hankook 7 mm
 Front Right Side: Hankook 7 mm Rear Right Side: Hankook 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,721.22	2,824.62	896.60	24.09
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,150.00	780.00	370.00	32.17
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,871.22	3,604.62	1,266.60	26.00
+ GST 7.00/7.00% (S\$)	340.99	252.32	88.67	26.00
Nett Amount (S\$)	5,212.21	3,856.94	1,355.27	26.00
+ Loss of Use (3.0 x S\$50.00/day) (S\$)		150.00		
+ Car Rental (3.0 x S\$117.00/day) (S\$)		351.00		
+ Doc/Search Fee (S\$)		7.49		
Nett Liability (S\$)		4,365.43		
Global Sum Settlement (S\$)		4,360.00		

INSPECTION

Date of Assignment: 07/03/2018
 Date Inspected: 07/03/2018 Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang)

59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 3.0 days

Adjuster: KALVIN ANG WEI KUN

Manager: CHEW HSIAO TONG

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

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Deformed	603.60 FL	*603.60 FL
2	1		*REAR BUMPER REINFORCEMENT	Serviceable	504.35 FL	*- FL
3	2		*REAR BUMPER REINFORCEMENT BRACKET (LH/RH)	Serviceable	360.00 FL	*- FL
4	1		*REAR BUMPER SIDE BRACKET	Serviceable	49.00 FL	*- FL
5	1		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
6	1		*REAR BUMPER SPONGE	Serviceable	143.40 FL	*- FL
7	1		*REAR BUMPER UNDER COVER	Cracked	225.00 FL	*225.00 FL
8	2		*REAR BUMPER REFLECTOR LAMP (LH/RH)	Serviceable	64.00 FL	*- FL
9	1		*REAR END PANEL (NPA)	Repair	0.00 FL	*- FL
10	1		*EXHAUST LH	Bent	954.00 FL	*954.00 FL
11	1		*EXHAUST CENTRE PIPE	Bent	1,150.30 FL	*1,150.30 FL
12	1		*REAR BUMPER REVERSE SENSOR	Shorted	135.70 FS	*135.70 FS
13	1		*REAR NO.PLATE	Cracked	25.00 FS	*25.00 FS
14	1		*LICENSE PLATE COVER	Cracked	100.00 FS	*100.00 FS
15	2		*REAR FENDER ADVERTISEMENT LOGO (LH/RH)	Necessary	200.00 FS	*200.00 FS

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

Sub Total (\$\$)	4,536.35	3,415.60
- List Item Discount on L Items 20.00/20.00% (\$\$)	815.13	590.98
Total Parts (\$\$)	3,721.22	2,824.62

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	PANEL BEATING	New	380.00	300.00
2	SPRAY PAINTING CHARGE	New	500.00	360.00
3	WIRING CHARGE	New	50.00	0.00
4	R/REFIX REVERSE SENSOR	New	120.00	20.00
5	TOWING	New	50.00	50.00
6	REMOVE/REFIX EXHAUST SYSTEM	New	50.00	50.00
Gross Labour Cost (\$\$)			1,150.00	780.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >