

ISS. CASE OWNER:

lv  
K. Min

CC 3 / <sup>UR</sup> ~~AB~~ 1800 4625, F2W639

LKK:

IDAC:

Surveyor:

DOI:

ASSIGNMENT

9/2/18

Date / Time:

9/2/18

Registered in Merimen:

12/2/18

Pre-assign / CCU / FTE:



Insured Vehicle No.:

SLF 2184R

Name of Insured:

URP

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

8/2/18

Is driver the owner?

( YES / ☒ NO )

Nature of Accident:

If NO, Driver Name / Age:

um Kumb

Driver Tel No.:

(V/L / YES / NO)

Claim No.:

568264660954

Policy No.:

AAAAA006

Make / Model:

MTS URBNI

Place of Accident:

TAMPON RUMRO / FORT RO

OI GIA REPORT: ☒ YES / NO : TP GIA REPORT: ☒ YES / NO

Insured Liability:

%

Final ? Yes / No

SHB 4346X



INSRS:

WSP:

Tel:

Liability:

RMKS:

URP  
lv



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

14/7/18  
min

SHB 4346X - CS/PL/1804/18 (18/04/18) 01:14/18/18  
18/04/18

STAGE DATE / PIC

Non-Reporting Itr (1st):

Non-Reporting Itr (2nd):

Non-Reporting Itr (Final):

Notification Itr (if non-pickup):

Call OI:

After call Itr to OI:

16/3/18 email  
viva

Documentation Check List: Handler Typist

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 10 APR 2018

man  
oliva  
16/4/18

|                           |                          |                         |                                   |
|---------------------------|--------------------------|-------------------------|-----------------------------------|
| <b>PRELIMINARY ADVICE</b> |                          | Date/Time:              | Sent By:                          |
| <b>FINALIZATION</b>       |                          | Date/Time:              | Confirm with:                     |
| Repair Cost:              | SS                       | ( days)                 | Reduction:                        |
| <b>FINAL SETTLEMENT</b>   |                          | Date/Time:              | Confirm with:                     |
| Final Liability:          | %                        | 50                      | (Agreed / Assessed) BOLA S/N No.: |
| Repair Cost:              | SS                       |                         |                                   |
| Loss of Rental (LOR):     | SS                       | ( days)                 |                                   |
| Loss of Use (LOU):        | SS                       | (S x days)              |                                   |
| Loss of Income (LOI):     | SS                       | (S x days)              |                                   |
| LOR only                  | <input type="checkbox"/> | LOU only                | <input type="checkbox"/>          |
| LOR + LOU                 | <input type="checkbox"/> | LOR + LOI               | <input 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:          |                                   |
| <b>FINAL PAYMENT</b>      |                          | Date/Time:              | Confirm with:                     |
| Payee 1:                  | SS                       | Name 1:                 |                                   |
| Payee 2: (Strike if N.A.) | SS                       | Name 2:                 |                                   |
| Payee 3: (Strike if N.A.) | SS                       | Name 3:                 |                                   |

CONFIDENTIAL

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

370.00

Barreille: Kalvin

## ASSIGNMENT

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

(Client's Record)

(Policy Condition)

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

|     |     |
|-----|-----|
|     |     |
|     |     |
| N/S | O/S |
|     |     |

|          |        |   |                  |
|----------|--------|---|------------------|
| Lum Sum: | 1.8.2- | % | 3 Val: Yes or No |
|----------|--------|---|------------------|

CA / REV / REP. / 24 HRS

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

| Date / Time | Action / Instruction |
|-------------|----------------------|
|-------------|----------------------|

Truck / Trailer or

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

TOYO / YOKO or *Wes / Jone*

Survey held at (PHE (Logans)

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

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

| Date / Time | Action / Instruction |
|-------------|----------------------|
|-------------|----------------------|

|         |      |                   |
|---------|------|-------------------|
| 12/3/18 | Cash | *1P \$600 / 2 hrs |
|---------|------|-------------------|

AZ 4  
4x

(Pd. \$ 815.12  
55.1)

DateTime, File Pass to?

☐: Prell. Report

11

: Final Report

Date/Time: File Returns to?

2)

Report Format :

2000-2001 (1.8.11.13)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:  : Site Insp (\$

☐ : Site Insp (\$

☐ Interview (S)

Tech. Invs. (\$

1994年12月

Survey Fee:

Transportation:

$$\varepsilon + RS \rightarrow S$$

Phytol

Others

TOTAL



# 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

AIG ASIA PACIFIC INSURANCE PTE LTD

Ref : CC3/LCR18004625/K1wb3

78 SHENTON WAY #08-16  
CHARTIS BUILDINGS SINGAPORE 079120

Date : 12-03-2018



Code : LCR

## 1. Policy Particulars :- THIRD PARTY CLAIM

|              |           |                |            |
|--------------|-----------|----------------|------------|
| Insured Veh. | SLF 2184R | Veh. Inspected | SHB 4346X  |
| Policy No.   |           | Coverage (\$)  | 0.00       |
| Claim No.    |           | Excess (\$)    | 0.00       |
| Assign From  |           | Assign Date    | 12/03/2018 |

## 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  | 08/03/2018   | Inspection Date | 09/03/2018 |
| Survey held at | COMFORTDELGRO ENGINEERING PTE LTD<br>59 LOYANG DRIVE<br>SINGAPORE 508969 |                 |            |

## 5a. Remarks

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

eam: ARC Repair TP(CLSO)1

**JOB CARD** Sales Order:

JC NO. 305123260

|   |              |                   |                               |
|---|--------------|-------------------|-------------------------------|
| TOMER<br>VS COMFORT TRANSPORTATION PTE LTD<br>7010045<br>TOMER NO.<br>383 SIN MING DRIVE<br>RESS Singapore SINGAPORE 575717<br>65508755<br>(R) (C)<br>(P)<br>COUNT CARD NO. | REGN NO.     | SHB4346X          | MILEAGE                       |
|   | MAKE         | HYUNDAI           | FUEL<br>E 1/2 F               |
|   | MODEL        | I-40              | DATE/TIME IN 08.03.2018 14:30 |
|   | YR OF MANU   | 29.01.2015        | TARGET DATE                   |
|   | CHASSIS CODE | KMHLB41UMFU065729 | COMPLETION DATE/TIME          |

### JOB DESCRIPTION

Accident Date: 08.03.2018  
NATURE: 3P 08.03.2018

| S/NO | LABOR CODE | DESCRIPTION |
|------|------------|-------------|
|------|------------|-------------|

|   |  |                              |  |
|---|--|------------------------------|--|
| CHECKED & PASSED OUT BY: _____                      |  | _____                        |  |
| SERVICE ADVISOR                                     |  | CUSTOMER'S SIGNATURE         |  |
| Knowledge Slip                                      |  | Exit Pass                    |  |
| me:   |  | Vehicle No.:                 |  |
| i No.: SHB4346X                                     |  | SHB4346X                     |  |
| hicle No.:  |  | CHIANG @                     |  |
| _____   |  | _____                        |  |
| Signature/Date                                      |  | Date                         |  |
| Name of Service Advisor                             |  | To be kept by Security Guard |  |
| Date  |  | _____                        |  |
| To be returned to Service Reception upon collection |  | _____                        |  |

REPAIR ESTIMATE\*

VEHICLE NO : SHB 4346X

DATE 8/3/2018 14:45

MAKE :

MODEL : HYUNDAI i40

| Qty  | Parts Description/ Labour                   | Type | Unit Price | Amount                          |
|--|---|------|------------|---------------------------------|
|  | Front Bumper Cover <i>X rpr</i>             |      |            | \$ 562.30                       |
|  | Front Bumper Bracket Top (LH) <i>X 502</i>  |      |            | \$ 22.40                        |
|  | Front Bumper Retainer Mounting <i>X 502</i> |      |            | \$ 9.20                         |
|  | <i>Front Fender (LH) X repair</i>           |      |            |                                 |
|  | SUB TOTAL                                   |      |            | \$ 593.90                       |
|  | LESS 20%                                    |      |            | \$ 118.78                       |
|  | DISCOUNTED TOTAL                            |      |            | \$ 475.12                       |
|  | Labour Charge                               |      |            |                                 |
|  | Panel Beating                               |      |            | \$ <del>550.00</del> <i>300</i> |
|  | Spray Painting Charge                       |      |            | \$ <del>400.00</del> <i>360</i> |
|  | Tuff Kote                                   |      |            | \$ <del>50.00</del> <i>X</i>    |
|  | TOTAL LABOUR                                |      |            | \$ 1,000.00                     |
|  | ESTIMATE TOTAL                              |      |            | \$ 1,475.12                     |
| <p><i>Kah21111111</i></p> <p><i>1/3/18 10:10 AM</i></p> <p><i>2 R-71</i></p> <p><i>4/5</i></p> <p><i>After Repair p44</i></p>  |   |      |            |                                 |
| <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>• To resurvey the damaged area</li> <li>• To display the damaged area</li> <li>• To provide the damaged area</li> <li>• To provide the damaged area</li> <li>• To provide the damaged area</li> </ul> <p>Approved by: _____</p> <p>Accepted by: _____</p> |   |      |            |                                 |
| 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.   |   |      |            |                                 |

**Vivian Lau (LKKAUTO)**

---

**From:** Vivian Lau (LKKAUTO)  
**Sent:** Friday, 16 March, 2018 2:14 PM  
**To:** 'eyap@lioncityrentals.com.sg'  
**Cc:** Hsiao Tong (LKKAUTO); Joy Irene (LKKAUTO)  
**Subject:** ACCIDENT INVOLVING SLF 2184R AND SHB 4346X ON 08/03/2018

**Our Ref: CC3/LCR18004625/K1wb3**

16 March 2018

**LION CITY RENTALS PTE LTD**

Dear Sir/Madam,

**ACCIDENT INVOLVING SLF 2184R AND SHB 4346X ON 08/03/2018**

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.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

If you have evidence/information to prove that we should not settle the third party claim, kindly let us have them in writing within 7 days i.e. by **27/03/2018**, after we shall proceed with negotiation with Third Party claimant on the **without prejudice basis** and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

Please call us if you have further queries.

Thank you

Best Regards,

**Vivian Lau** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841-8625 | email: [Vivianlau@lkkauto.com](mailto:Vivianlau@lkkauto.com) | fax: 6741-4108

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

Our Ref : T 0318 / SHB4346X /CL(st)  
Your Ref: \_\_\_\_\_  
Date : 16-Mar-18

**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 SHB4346X YOUR INSURED SLF2184R**  
**AND OTHER ON 08.03.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHB4346X** 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 **SLF2184R** we are submitting these claim for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

|                    |   |                  |
|--------------------|---|------------------|
| 1                  | Cost of Repair                            | \$ 706.20        |
| 2                  | 2 days Loss of Rental @ \$ 115.00 per day | \$ 230.00        |
| 3                  | Survey Report Fees (Surveyed by M/s LKK)  | \$ -             |
| 4                  | GIA / LTA Search Fees                     | \$ 7.49          |
| 5                  | GIA / Police Report Fees                  | \$ -             |
| 6                  | Towing / Medical / Transporation          | \$ -             |
| <b>Sub Total :</b> |   | <b>\$ 943.69</b> |

**HIRER'S CLAIM**

|                       |   |                    |
|-----------------------|---|--------------------|
| 7                     | 2 days Loss of Income @ \$ 80.00 per days | \$ 160.00          |
| <b>Total Claims :</b> |   | <b>\$ 1,103.69</b> |

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

- a) Original repair bill and photocopies of photographs : 9 pcs.  
b) LTA search slip/s of : SLF2184R  
c) GIA / Police report/s of : SHB4346X  
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.

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

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198001040001

Workshops

Braddell  
205 Braddell Road  
Singapore 579701

Loyang  
59 Loyang Drive  
Singapore 508969

Sin Ming  
383 Sin Ming Drive  
Singapore 575717

Pandan  
46 Pandan Road  
Singapore 609286

Ubi  
320 Ubi Road 3  
Singapore 408649

Senoko  
24 Senoko Loop  
Singapore 758156

Sungei Kadut  
7 Sungei Kadut Way  
Singapore 728791

Yishun  
501 Yishun Industrial Park A  
Singapore 768732

## TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 1

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

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

CONTACT NO: 64193000 3225094

VEHICLE NO  
SH84346X

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
29.01.2015

CHASSIS CODE  
KMH1841UMPU065729

INV. NO/DATE  
91361845 13.03.2018

JOB NO.  
305123260

CHECKBOOK READING

DATE/TIME IN  
08.03.2018 14:30

Description : 3P 08.03.2018

| S/No             | Part No. | Qty                         | Unit Price | %Disc | Net    |
|------------------|----------|-----------------------------|------------|-------|--------|
| PART REQUISITION |          |                             |            |       |        |
| SUB-TOTAL :      |          |                             |            |       | 0.00   |
| JOB NATURE       |          |                             |            |       |        |
| 0001             | L        | PANEL BEATING               | 300.00     |       | 300.00 |
| 0002             | 23-502   | SPRAYPAINT ON AFFECTED AREA | 360.00     |       | 360.00 |
| SUB-TOTAL :      |          |                             |            |       | 660.00 |

|                   |        |
|-------------------|--------|
| Items total       | 660.00 |
| Add GST @ 7.000 % | 46.20  |
| Invoice amount    | 706.20 |

WHILE TAKING ALL REASONABLE PRECAUTIONS, WE ACCEPT NO LIABILITY FOR DAMAGE OR OTHER INCIDENTS BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AT OWNERS' RISK.  
CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS THEREAFTER ADVISE WORKSHOP NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE SHALL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.  
INTEREST 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. 15TH OF EACH MONTH THE MONTH FOR THE PERIOD OF DEFAULT.  
PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY IN 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     | 91361845    | 706.20 |              |
|             |             |        |              |
|             |             |        |              |



## TAX INVOICE

COMPANY REG. NO.: 199506048W  
Page: 2

8010004

AIG ASIA PACIFIC INSURANCE PTE LTD

#08-16 78 SHENTON WAY, CHARTER BUILDING  
SINGAPORE SG 079120

CONTACT NO: 64193000 3225094

VEHICLE NO  
SHB4346X

MAKE  
HYUNDAI

MODEL  
I-40

DATE OF REG  
29.01.2015

CHASSIS CODE  
KMHLR41UMFU065729

INV. NO/DATE  
91361845 13.03.2018

JOB NO.  
305123260

ODOMETER READING

DATE/TIME IN  
08.03.2018 14:30

Issued by : KATHERINETAN 13.03.2018 11:13:05  
Repair type : CLSO/57/57  
Payment Type/Term: /Credit 30 days

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEY ACCEPT NO RESPONSIBILITY FOR LOSS OR DAMAGE TO OR OF ANY VEHICLE OR OTHER PROPERTY BELONGING TO CUSTOMERS AND OWNERS AND OWNERS' RISK.

CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT PAID AND DUE TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.

PLEASE EXAMINE 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     | 91361845    | 706.20 |              |
|             |             |        |              |
|             |             |        |              |
|             |             |        |              |

Our Ref: CT18030247

Date: 13 March 2018



## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON                      08/03/2018    @   11:40 hrs  
ALONG                              TANJONG RHU TWDS FWD RD  
INVOLVING                      SLF2184R

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 **SHB4346X** (the "Taxi"). The Taxi was hired to **GHAZALI B A HASAN IC NO S2001462H** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$115.00** 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.

| MILEAGE READING | HOURS OPERATED (TIME) |            | MILEAGE TRAVELLED (KM) |
|-----------------|-----------------------|------------|------------------------|
|                 | FROM                  | TO         |                        |
| 39871           | 17:00                 | 02:50      | 246 KM                 |
| 39898           | 06:30h                | 16:40      | 265 KM                 |
| 39916           | 17:30                 | 00:23      | 177 KM                 |
| 39943           | 06:30h                | 16:40h     | 273 KM                 |
| 39959           | 17:00                 | 23:45      | 166 KM                 |
| 39982           | 06:30h                | 16:40h     | 222 KM                 |
| 39990           | 18:00                 | 23:15      | 84 KM                  |
| 1430 hrs        | daying                | accident   |                        |
| st-Loagst Rd    | X Bedok South Ave 1   |            |                        |
| 40013           | out from              | to geylang |                        |
| 40032           |                       |            | 187 KM                 |

| MILEAGE READING | NAME OF DRIVER | DATE      | MILEAGE TRAVELLED (KM) |        | HOURS OPERATED (TIME) |
|-----------------|----------------|-----------|------------------------|--------|-----------------------|
|                 |                |           | FROM                   | TO     |                       |
| 40062           | ehazali        | 28/2/2018 | 297 KM                 | 06:30h | 18:00h                |
| 40095           | ehazali        | 29/2/2018 | 329 KM                 | 06:30h | 19:30h                |
| 40125           | ehazali        | 2/3/2018  | 305 KM                 | 06:30h | 17:00h                |
| 40171           | Reno           | 03/03/18  | 456.8 KM               | 06:30h | 01:30                 |
| 40196           | ehazali        | 4/3/2018  | 234 KM                 | 06:30h | 1:00h                 |
| 40227           | ehazali        | 5/3/2018  | 216 KM                 | 06:30h | 1:00h                 |
| 40260           | ehazali        | 6/3/2018  | 328 KM                 | 06:30h | 1:00h                 |
| 40295           | Celestial      | 7/3/2018  | 347 KM                 | 06:30h | 1:00h                 |
|                 | ehazali        | 8/3/2018  |                        | 06:30h |                       |
|                 | 7              | 08/02/18  | 1843.66 km             | 14:30  | -                     |
|                 | 7              | 09/03/18  | 1843.66 km             | -      | 17:15                 |

## LETTER OF AUTHORISATION

(NAF / PAF) ACCIDENT INVOLVING  
ALONGi 40 SHB4346X , SLF2148R  
TANJONG RHU TWDS FWD RD

ON 08-Mar-18 11:40

I / We

GHAZALI B A HASAN

(Hirer) NRIC No.: S2001462H

and/or

(Relief) NRIC No.:

Taxi Number

SHB4346X

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

08-Mar-2018

Name of Hirer

GHAZALI B A HASAN

Hirer NRIC

S2001462H

Signature :



Address

246 BANGKIT ROAD #04-296  
670246

Contact No.

96892376

**Enquire Vehicle Insurer**

| Vehicle No. | Incident Date/Time     | Search Status | Insurance Company Code | Insurance Company Name               |
|-------------|------------------------|---------------|------------------------|--------------------------------------|
| SLF2184R    | 08 Mar 2018 / 11:40:00 | Successful    | A04                    | AIG ASIA PACIFIC INSURANCE PTE. LTD. |

[Previous](#)[OK](#)

SHBUB 46X



## Vivian Lau (LKKAUTO)

---

**From:** Yong, Ivy-AV <Ivy-AV.Yong@aig.com>  
**Sent:** Friday, 16 March, 2018 2:38 PM  
**To:** Vivian Lau (LKKAUTO)  
**Cc:** Joy Irene (LKKAUTO); Hsiao Tong (LKKAUTO)  
**Subject:** RE: Your ref: 5682646609SG, Our Ref: CC3/LCR18004625/K1wb3, Accident involving Vehicle SLF 25184R & SHB 4346X on 08/03/2018

Hi Vivian,

Video footage uploaded in merimen,

Please reject TP claim.

Thank you

Ivy Yong  
AIG  
Complex Claims Examiner  
Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way AIG Building #08-16 Singapore 079120  
Tel +64191637 | Fax +68357416  
[Ivy-AV.Yong@aig.com](mailto:Ivy-AV.Yong@aig.com) | [www.aig.com.sg](http://www.aig.com.sg)

### IMPORTANT NOTICE:

*The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by AIG for any loss or damage arising in any way from its use.*

---

**From:** Vivian Lau (LKKAUTO) [mailto:vivianlau@lkkauto.com]  
**Sent:** Friday, March 16, 2018 2:13 PM  
**To:** Yong, Ivy-AV  
**Cc:** Joy Irene (LKKAUTO); Hsiao Tong (LKKAUTO)  
**Subject:** Your ref: 5682646609SG, Our Ref: CC3/LCR18004625/K1wb3, Accident involving Vehicle SLF 25184R & SHB 4346X on 08/03/2018

Your ref: 5682646609SG  
Our Ref: CC3/LCR18004625/K1wb3

Dear Ivy,

**Accident involving Vehicle SLF 25184R & SHB 4346X on 08/03/2018**

We refer to the above matter.

Based on the accident report and accident scenario, is conflicting versions

Kindly advise if there is any video footage (stated in GIA report) submitted by OI/OID to you good office.

Thank you

Best Regards,

**Vivian Lau** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841-8625 | email: [Vivianlau@lkkauto.com](mailto:Vivianlau@lkkauto.com) | fax: 6741-4108

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

**IMPORTANT NOTICE:**

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by American International Group, Inc. or its subsidiaries or affiliates either jointly or severally, for any loss or damage arising in any way from its use.

## Vivian Lau (LKKAUTO)

---

**From:** Vivian Lau (LKKAUTO)  
**Sent:** Tuesday, 17 April, 2018 5:28 PM  
**To:** 'Cecilia Lee Peng Geok'  
**Cc:** Joy Irene (LKKAUTO); Hsiao Tong (LKKAUTO)  
**Subject:** Your Ref: T0318/ SHB 4346X /CL(st) ,Our Ref: CC3/LCR18004625/K1wb3,Accident involving SHB 4346X & SLF 2184R ON 08/03/2018  
**Attachments:** Sketch Plan .pdf; SLF 2184R.MP4

WITHOUT PREJUDICE

Your Ref: T0318/ SHB 4346X /CL(st)  
Our Ref: CC3/LCR18004625/K1wb3

Dear Sir/Madam,

### **Accident involving SHB 4346X & SLF 2184R ON 08/03/2018**

We refer to the above matter

Our insured driver has reiterated that the accident was caused due to the entire negligence of your client. Your client swerved into our Insured's lane

We attached herewith our insured's accident report and our insured's video for your perusal.

Under such circumstances, we have our principal's instruction to deny liability of your client's claim.

As such, we will close the matter at our end.

*Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.*

*In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement.*

Thank you

Best Regards,

**Vivian Lau** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841-8625 | email: [Vivianlau@lkkauto.com](mailto:Vivianlau@lkkauto.com) | fax: 6741-4108

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



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

Revoked / No settlement

#### CLAIM SUBFOLDER TRACKING

| Case | Notified                                | Est Submitted | Adj Assigned                                      | Adj Rpt  | Adj Submitted                                | Ins Auth'd | Status  |
|------|---|---------------|---|--|--|------------|---|
| Main | 12 Mar 2018<br><a href="#">Edit Reg</a> |               | 09 Mar 2018 00:00<br><a href="#">Edit Adj Rpt</a> | <b>\$5660.00</b><br><a href="#">Edit Estimates</a> | <b>\$5660.00</b><br><a href="#">View Rpt</a> |            | <b>Pending for Survey Report</b><br><a href="#">Cancel Case</a> |

| Main  | Reference | Claim Details   | Documents  | Show All |         |             |              |            |       |
|---|-----------|---|------------|----------|---------|-------------|--------------|------------|-------|
| <b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>   |           |   |            |          |         |             |              |            |       |
| Insured: <b>LCRF Pte Ltd</b> , Co. Reg. No.: NA   |           |   |            |          |         |             |              |            |       |
| Main Claimant: <b>COMFORT TRANSPORTATION PTE LTD</b> , Co. Reg. No.: 199303821R   |           |   |            |          |         |             |              |            |       |
| Vehicle Reg. No.: <b>SHB4346X</b>   |           | Date of Loss: 08/03/2018 11:00 - :59<br>[37 Months and 8 Days From LTA Reg Date (Man Yr)] |            |          |         |             |              |            |       |
| Claim Type: <b>TP / 5682646609SG</b>  |           | Policy/Cover Note No.: 0999994792   |            |          |         |             |              |            |       |
| Vehicle Reg. No. (Insured): <b>SLF2184R</b>   |           | Policy No. (Claimant): D-18088936MFSH   |            |          |         |             |              |            |       |
|   |           | Excess:   |            |          |         |             |              |            |       |
| Repairer: <b>ComfortDelGro Engineering Pte Ltd (Loyang)</b> 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300   |           |   |            |          |         |             |              |            |       |
| Handling Insurer: <b>AIG Asia Pacific Insurance Pte. Ltd. (Express)</b> - Tel: 65-6419-3000 ... [Handled by <b>Yong, Ivy-AV</b> ] ivy-VA.Yong@aig.com                         |           |   |            |          |         |             |              |            |       |
| Claimant's Insurer: <b>MS First Capital Insurance Ltd (HQ)</b> - Tel: 62222311  |           |   |            |          |         |             |              |            |       |
| Adjuster: <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>KALVIN ANG WEI KUN</b> ] ... [Final Rpt due 21/03/2018]                                |           |   |            |          |         |             |              |            |       |
| <b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>   |           |   |            |          |         |             |              |            |       |
| There are no mail for this case.  |           |   |            |          |         |             |              |            |       |
| <b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span> |           |   |            |          |         |             |              |            |       |
| Due Date  | Priority  | Type  | Task Group | Subject  | Handler | Assigned By | Completed On | Created On | Done? |
| No results.   |           |   |            |          |         |             |              |            |       |

## Claim Documents

**\*SHB4346X (5682646609SG)**  
**[SLF2184R]**

TP

COMFORT TRANSPORTATION PTE LTD

Mar 8 2018 11:00AM

[LCRF Pte Ltd]

**ComfortDelGro Engineering Pte Ltd**

| Upload Documents          |                 |   | Upload Photos |  | Compose New Letter |  | Upload Video |  | Upload Audio |  | View |            | View in Browser                     |                                     |  |  |  |  |  |  |  |  |
|---------------------------|-----------------|---|---------------|--|--------------------|--|--------------|--|--------------|--|------|------------|-------------------------------------|-------------------------------------|--|--|--|--|--|--|--|--|
| <b>Video</b>              |                 |   |               |  |                    |  |              |  |              |  |      | 1 per page | <input checked="" type="checkbox"/> |                                     |  |  |  |  |  |  |  |  |
| No                        | Finalized On    | AIG Asia Pacific Insurance Pte. Ltd. (SG)   |               |  |                    |  |              |  |              |  |      |            | Thumbnail                           | Print                               |  |  |  |  |  |  |  |  |
| 1                         | 16/03/18 14:36  | Video - Accident  |               |  |                    |  |              |  |              |  |      | 1          | Load MP4                            |                                     |  |  |  |  |  |  |  |  |
| <b>Assessment Reports</b> |                 |   |               |  |                    |  |              |  |              |  |      | 1 per page | <input checked="" type="checkbox"/> |                                     |  |  |  |  |  |  |  |  |
| No                        | Finalized On    | AIG Asia Pacific Insurance Pte. Ltd. (SG)   |               |  |                    |  |              |  |              |  |      |            | Thumbnail                           | Print                               |  |  |  |  |  |  |  |  |
| 1                         | 13/03/18 14:34  | <b>Accident Statement</b><br>From: SC - Reg. No: SLF2184R, Claimant: LCRF PTE LTD |               |  |                    |  |              |  |              |  |      | 1          | Load HTM                            |                                     |  |  |  |  |  |  |  |  |
| <b>Photos/Images</b>      |                 |   |               |  |                    |  |              |  |              |  |      | 3 per page | <input checked="" type="checkbox"/> |                                     |  |  |  |  |  |  |  |  |
| No                        | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ)   |               |  |                    |  |              |  |              |  |      |            | Thumbnail                           | Print                               |  |  |  |  |  |  |  |  |
| 1                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 2                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 3                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 4                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 5                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 6                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 7                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 8                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 9                         | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 10                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 11                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 12                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 13                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 14                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 15                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 16                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 17                        | 12/03/18 17:37  | General View  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 18                        | 13/03/18 08:28  | Reinspection Photo  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
| 19                        | 13/03/18 08:28  | Reinspection Photo  |               |  |                    |  |              |  |              |  |      | 1          | Load JPG                            | <input checked="" type="checkbox"/> |  |  |  |  |  |  |  |  |
|                           |                 |   |               |  |                    |  |              |  |              |  |      |            |                                     |                                     |  |  |  |  |  |  |  |  |

## Documents Checklist

**DOCUMENTS CHECKLIST**[Reset](#)[Save](#)[Print](#)

There are no document checklists configured.

**Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)****Show Remarks To:** ☐ Handling InsurerNote: 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, 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/LCR18004625/K1WB3Q2

Date: 19/04/2018

## REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 0999994792  
**Claimant Vehicle No :** SHB4346X **Insured Vehicle No :** SLF2184R  
 Date of Loss: 08/03/2018 Nature of Claim: TP Claim No: 5682646609SG

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: **SHB4346X**  
 Make & Model: HYUNDAI I40, 1.7 D (A) Engine No: D4FDFU595972  
 Reg. Date: 29/01/2015 (Man. Year: 2014) Chassis No: KMHLB41UMFU065729  
 Colour: Blue Odometer: 403187 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:

## CONDITION OF TYRES

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

The above values represent the remaining tyre treads depth

| COST OF CLAIMS                     | Repairer's      | Adjuster's    | Difference    | Diff %       |
|------------------------------------|-----------------|---------------|---------------|--------------|
| Parts                              | 475.12          | 0.00          | 475.12        | 100.00       |
| Miscellaneous Items                | 0.00            | 0.00          | 0.00          |              |
| Labour                             | 1,000.00        | 660.00        | 340.00        | 34.00        |
| Paintwork Labour                   | 0.00            | 0.00          | 0.00          |              |
| Towing                             | 0.00            | 0.00          | 0.00          |              |
| <b>Gross Total (S\$)</b>           | <b>1,475.12</b> | <b>660.00</b> | <b>815.12</b> | <b>55.26</b> |
| <b>+ GST 7.00/7.00% (S\$)</b>      | <b>103.26</b>   | <b>46.20</b>  | <b>57.06</b>  | <b>55.26</b> |
| <b>Nett Amount (S\$)</b>           | <b>1,578.38</b> | <b>706.20</b> | <b>872.18</b> | <b>55.26</b> |
| <b>Global Sum Settlement (S\$)</b> |                 | <b>0.00</b>   |               |              |

## INSPECTION

Date of Assignment: 09/03/2018  
 Date Inspected: 09/03/2018 Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang)  
 59 Loyang Drive  
 Singapore 508969  
 Estimated Period of Repair: 2.0 days

**Adjuster:** KALVIN ANG WEI KUN

**Manager:** VIVIAN LAU PEI FENG

*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   |          | *FRONT BUMPER COVER             | Repair   | 562.30 FL  | *- FL  |
| 2   | 1   |          | *FRONT BUMPER BRACKET TOP (LH)  | Serviceable  | 22.40 FL   | *- FL  |
| 3   | 1   |          | *FRONT BUMPER RETAINER MOUNTING | Serviceable  | 9.20 FL    | *- FL  |
| 4   | 1   |          | *FRONT FENDER (LH)<br>(NPA)     | Repair   | 0.00 FL    | *- FL  |
|     |     |          |                                 |  |            |        |
|     |     |          |                                 | Sub Total (S\$)                                    | 593.90     | 0.00   |
|     |     |          |                                 | - List Item Discount on L Items 20.00/20.00% (S\$) | 118.78     | 0.00   |
|     |     |          |                                 | Total Parts (S\$)                                  | 475.12     | 0.00   |

F=Franchise part. L=ListItemDisc.

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        |
|---------------------------------|----------------|----------|-----------------|---------------|
| <b>Labour Items</b>             |                |          |                 |               |
| 1                               | PANEL BEATING  | New      | 550.00          | 300.00        |
| 2                               | SPRAY PAINTING | New      | 400.00          | 360.00        |
| 3                               | TUFF KOTE      | New      | 50.00           | 0.00          |
| <b>Gross Labour Cost (\$\$)</b> |                |          | <b>1,000.00</b> | <b>660.00</b> |

Report was unsubmitted during this print-out.

< END OF ESTIMATES >