

ASS. REC. BY:

REF: CS/CTI18004636/Dgd3/72

Special Instruction:

Surveyor: Bryan
~~Monner~~

ASSIGNMENT (Office)

From (Person): Jayn Tey

of CTI

Date/Time: 12/31/18 @ 10:44am

Estimated Cost:

Bill to:

OD TP WS TP RES OD RES EVA INV MV CS

To Inspect Vehicle No: SDG 2283C

Insured: PC9003C

at Workshop m/s Teamwork Garage

Tel: 6844 2475

of 53 Ubi Ave | # 01-24

Policy No: DMB1S N1659241701

Claim No: 8NM18D 01256C02

Sum Insured:

Excess:

Make of Veh:
(Client's Record)

D.O.A. 08/03/2018

CA / REV / REP. / REV 24 HRS ^{'wp'}

H.O.D. Endorsement:

Date/Time: 11:55am @ 12/31/18

Person Contacted: Alison

Vehicle IN OUT

Date/Time	Action/Instruction
	(<input checked="" type="checkbox"/>) Estimate Check consistency of the damage
	SDG 2283C - NA / AIG 18004472 / 24 D.O.A: 8/3/18
	PC-9003C - NA / AIG 18004472 / 24 D.O.A: 8/3/18

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____ of _____

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Veh No: SDG 2283C Yr Regn: 2008/June

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

Make: Subaru Legacy C.C. 2457

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

Sp. Reading: 148311 T/Radio: Insured / Std / NI / NA

Eng/No: EJ25D293939

C/No: JF1BL9KV58G037354

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

Brake: In order / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: 225/40 R18
R: _____

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

Front	Rear
R/Bal. <u>5</u> mm	R/Bal. <u>5</u> mm
L/Bal. <u>5</u> mm	L/Bal. <u>5</u> mm
D.O.A. <u>08/03/2018</u>	D.O.I. <u>09/03/2018</u>

Survey held at Teamwork Page Ubi

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

N/S Front 7 0/S Front

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

Date / Time	Action / Instruction
	<u>China Teiping PC 9003C</u>
<u>29/04/19</u>	<u>inspect 2/3 4650/- with 5 days of rev (Red/B 8206.47, 64%)</u>

RECEIVED 29 APR 2019

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

1) 23/4 _____
Date/Time, File Return to? _____

2) _____

Report Format: MEM-T

Lump Sum / I.B.X. (\$) 4650

Days Of Repair: 5

Resurvey No. of Trip: 2

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

Survey Fee:	
Transportation:	
S + RS, SI	
Photos	
Others	
TOTAL	<u>220</u>

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	12 Mar 2018		12 Mar 2018 10:44 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS				[Created by insurer]					
Insured:	M/S K.H.NG BUS TRANSPORT PTE LTD								
Main Claimant:	TAN SER HONG COLIN, ID: S6831789D								
Vehicle Reg. No.:	SDG2283G	Date of Loss:	08/03/2018 07:00 - :59						
Claim Type:	TP / SNM18D01256C02	Policy/Cover Note No.:	DMB1SN1659241701						
Vehicle Reg. No. (Insured):	PC9003C	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 21/03/2018]								
Adj Asg. Remarks:	PLEASE CONDUCT THIRD PARTY SURVEY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLE LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NO ESTIMATE PROVIDED DURING PRE REPAIR.								
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.									

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
 Owner ID: 1789D

Vehicle Details

Vehicle No.: SDG2283C
 Vehicle to be Exported: Yes
 Intended De-registration Date: 08 Mar 2018
 Vehicle Make: SUBARU
 Vehicle Model: LEGACY SEDAN 2.5GT AWD 5AT ABS
 Primary Colour: Grey
 Manufacturing Year: 2008
 Engine No.: EJ25D293939
 Chassis No.: JF1BL9KV58G037354
 Maximum Power Output: 184.0 kW (246 bhp)
 Open Market Value: \$30,876.00
 Original Registration Date: 02 Jun 2008
 First Registration Date: 02 Jun 2008
 Transfer Count: 0
 Actual ARF Paid: \$30,876.00

Intended PARF Rebate Details

PARF Eligibility: Yes
 PARF Eligibility Expiry Date: 01 Jun 2018
 PARF Rebate Amount: \$15,438.00

Intended COE Rebate Details

COE Expiry Date: 01 Jun 2018
 COE Category: B - Car (1601cc & above)

08/03/2018

PARF/COE Rebate Enquiry

COE Period(Years):	10
QP Paid:	\$17,510.00
COE Rebate Amount:	\$404.00
Total Rebate Amount:	\$15,842.00

The information contained herein is correct as at 08 Mar 2018

OK

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	08/03/2018 13:58
Date Of Accident	08/03/2018 07:35
Exact Location Of Accident	BARTLEY RD TWDS UPPER PAYA LEBAR RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDG2283C
Insured/Policyholder	
Name Of Registered Owner	TAN SER HONG COLIN
NRIC No	S6831789D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90715633
Alternative Phone No	OFFICE-90715633
Vehicle Particulars	
Manufacturer	SUBARU
Model	LEGACY SEDAN 2.5GT AWD 5AT ABS
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100258183-06000
Cover Note Number	
Driver	
Name of Driver	TAN SER HONG COLIN
NRIC No	S6831789D
Date Of Birth	26/08/1968
Occupation	INDOOR
Date Of Driving Pass	15/05/1986
Driving Experience	31 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90715633
Fax Number	
Contact Number	OFFICE-90715633
EMail Address	NOEMAIL

Address	4 STONE AVENUE
Postcode	588226
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC9003C
Vehicle Make/Model/Colour	K.H. NG BUS TRANSPORT PTE LTD
Details Of Properties	
Vehicle Category	BUS
Name of Driver	WANG MOHAI
NRIC/Passport Number	G5266996R
Contact Number	96659003
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please **fill in 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 willful misrepresentation or withholding of material facts may allow us to give our opinion to **repudiate policy liability**.
4. The above does not constitute an offer of insurance and parties should be advised that it is a legal 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 to the Civil Incident Management Centre established by the General Insurance Association of Singapore (GIAS) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the signing of this report to the insurers, you hereby consent to the archiving of the report at the Centre and to copies of the report being made available wherever.
8. **Consent under the Personal Data Protection Act (PDPA)**

I/We understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIAS") 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 insured(s) who have insured vehicle(s) involved in this accident (all insured(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 regulatory authority (such as the police) for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of my claims and any related investigation relating to the claims;
 - (ii) investigating the accident and/or my claim(s);
 - (iii) carrying out and/or dealing with my instructions or responding to my enquiries to the;
 - (iv) administering my claims (including the making of correspondence, statements, reports or notices to me which could involve disclosure of certain personal data about me to know about delivery of the same as well as on the external cover of envelopes/mail packages), and/or
 - (v) complying with applicable law or administering, processing, handling and/or dealing with my claim(s) (collectively the "Purposes").
- (b) all insured(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/are be disclosed by any of the Insurers and/or GIAS to their third party service providers or agents (including their lawyers/law firms), which may be used outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to manage claims history for the purpose of fraud detection, investigation and management in process 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 fund 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
Name & Title


Insurer's Signature
(if drawn to not the policyholder)
Name & Title


Reporting Centre Personnel's Signature
Name
NRIC/IN No.

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car was travelling straight along Bartley Road towards Upper Paya Lebar at the left most lanes. Vehicle B was travelling on my right which is the middle lane. While my car was travelling along the curve bend, vehicle B all of a sudden recklessly swerved into my lane without any signal or warning and hit onto the right side portion of my car and the impact from vehicle B pushed my car towards the left side of the road which caused my car wheel to strike along the kerb. I wish to state that I've signal my horn to warn the driver of his reckless action but the driver of vehicle B ignored my warning to him. I further state that due to the accident caused by vehicle B, my car right front rim, right side portion, right side mirror and my car left front rim were damage.

DECLARATION

I/We declare the foregoing particulars are true in every respect

 Police Officer's Signature
 Date & Time

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

 Reporting Officer/Inspector's Signature
 Name
 INEC if N/A



TeamWork Garage Pte Ltd
 53 Ubi Avenue 1 #01-23/24 Spore 408934
 Paya Ubi Industrial Park
 Tel : 6844-2475

E-mail : claims@teamworkgarage.com

Register number : 201015366H

3RD PARTY CLAIM ESTIMATION

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

LKK Auto Consultants hence notified
 the Repairer of the following:
 • To resurvey before/after spray painting
 • To display parts prices are subject to confirmation
 • Third party survey is on a "Without Prejudice" basis
 • No illegal modification(s) is allowed
 • Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Vehicle number SDG2283C
 Make / Model SUBARU / LEGACY
 Chassis number JF1BL9KV58G037354
 Accident date 08 March 2018
 Reference 1803-09

Qty Particulars Unit Price - SGD \$

Qty	Particulars	Unit Price - SGD \$
<u>PARTS REPLACEMENT - LIST ITEMS</u>		
1	FRONT RH HEADLAMP NH	2840.45 X
1	FRONT RH FENDER Dent	364.82 ✓
2	FRONT FENDER INNER SHIELD SVL	138.64 X
1	FRONT RH DOOR PANEL St	976.31 ✓
1	FRONT RH DOOR TOP MOULDING NH	134.20 X
2	FRONT RH DOOR HINGE NH	116.80 X
1	FRONT RH DOOR CHECKER NH	65.61 X
1	FRONT RH LOCK ASSY NH	368.56 X
1	FRONT RH POWER REGULATOR ASSY NH	450.63 X
1	FRONT RH DOOR INNER TRIM NH	720.54 X
1	FRONT RH DOOR WING MIRROR Cut/Dem	932.27 ✓
2	FRONT KNUCKLE o/s distorted n/s NH	336.64 Lt 168.32
2	FRONT KNUCKLE BERING o/s Dem n/s NH	255.33 Lt 127.66
2	FRONT LOWER ARM distorted	628.52 ✓
2	FRONT SHOCK ABSORBER NH	580.26 X
		8909.58
		Less 20%
		1781.91
		Subtotal
		7127.67
		Balance C/F
		7127.67
<u>PARTS REPLACEMENT - SPECIAL NETT ITEMS</u>		
		Balance B/F
		7127.67
1 SET	FRONT BUMPER CLIP H/c	60.00 30/-
1 SET	FRONT FENDER INNER TRIM CLIP NH	50.00 X
2	RIM Cut	2400.00 900/-
		930.00
		Subtotal
		2510.00
		Balance C/F
		9637.67
S/No	<u>LABOUR AND MISCELLANEOUS CHARGES</u>	
		Balance B/F
		9637.67
1	CHECK WIRING AND LIGHTNING SYSTEM	60.00 NH
2	CHECK FRONT WHEEL ALIGNMENT	150.00 60/-
3	REMOVE AND REPLACE FRONT UNDER CARRIAGE PARTS	200.00 150/-
4	TRANSFER PARTS, ATTACHMENT FROM OLD DOOR TO NEW	200.00 60/-
5	PANEL BEATING ON AFFECTED AREAS PANEL	800.00 700/-
6	SPRAY PAINTING O AFFECTED	1000.00 700/-
7	APPLY ANTI RUST ON AFFECTED AREAS	150.00 40/-
		1710.00
		Subtotal
		2560.00
		Grand total
		12197.67

09/03/2018 @ 1600hrs 5 days.
 N/A Andrew

[Handwritten signature]
 L/Smm LKK And

12896.47

5198.32
 Supp 658.80
 5857.12
 L/S 4650/-



TeamWork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Spore 408934
Paya Ubi Industrial Park
Tel : 6844 2475
E-mail : claims@teamworkgarage.com
Register number : 201015366H
3RD PARTY CLAIM ESTIMATION

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

Vehicle number	SDG2283C
Make / Model	SUBARU/LEGACY
Chassis number	JF1BL9KV58G037354
Accident date	08 March 2018
Reference	1803-09

Qty	Particulars	Unit Price - SGD \$
	<u>PARTS REPLACEMENT - LIST ITEMS</u>	
1	FRONT BUMPER Cwt	823.50 ✓
		823.50
	Less 20%	164.70
	Subtotal	658.80
		658.80

28K And

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

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
Singapore 408933
Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CTI18004636/DQD3N2
Date: 22/05/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMB1SN1659241701
Claimant Vehicle No :	SDG2283C	Insured Vehicle No :	PC9003C
Date of Loss:	08/03/2018	Nature of Claim:	TP
		Claim No:	SNM18D01256C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SDG2283C	Engine No:	EJ25D293939
Make & Model:	SUBARU LEGACY, 2.5 GT AWD ABS (A)	Chassis No:	JF1BL9KV58G037354
Reg. Date:	02/06/2008 (Man. Year: 2008)	Odometer:	148311 km
Colour:	Grey		
Engine Capacity:	2457 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

Front Tyre Size:	225/40 R18	Rear Tyre Size:	225/40 R18
Front Left Side:	Bridgestone 5 mm	Rear Left Side:	Bridgestone 5 mm
Front Right Side:	Bridgestone 5 mm	Rear Right Side:	Bridgestone 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	10,296.46	4,147.12	6,149.34	59.72
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,560.00	1,710.00	850.00	33.20
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	12,856.46	5,857.12	6,999.34	54.44
Approved Total (Overridden) (S\$)		4,650.00		
(S\$)	12,856.46	4,650.00	8,206.46	63.83
+ GST 7.00/7.00% (S\$)	899.95	325.50	574.45	63.83
Nett Amount (S\$)	13,756.41	4,975.50	8,780.91	63.83

INSPECTION

Date of Assignment:	12/03/2018	
Date Inspected:	09/03/2018 Inspected At:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park Singapore 408934

Estimated Period of Repair: 5.0 days

Adjuster: BRYAN TANI

Manager: SHIAU CHAN

Adjuster Report

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 22 May 2019)
Parts: 143	SUBARU LEGACY 2.5 GT AWD ABS (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SDG2283C)
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT RH HEADLAMP	Not Necessary	2,840.45 FL	*- FL
2	1		*FRONT RH FENDER	Dented	364.82 FL	*364.82 FL
3	2		*FRONT FENDER INNER SHIELD	Serviceable	138.64 FL	*- FL
4	1		*FRONT RH DOOR PANEL	Bent	976.31 FL	*976.31 FL
5	1		*FRONT RH DOOR TOP MOULDING	Not Necessary	134.20 FL	*- FL
6	2		*FRONT RH DOOR HINGE	Not Necessary	116.80 FL	*- FL
7	1		*FRONT RH DOOR CHECKER	Not Necessary	65.61 FL	*- FL
8	1		*FRONT RH LOCK ASSY	Not Necessary	368.56 FL	*- FL
9	1		*FRONT RH POWER REGULATOR ASSY	Not Necessary	450.63 FL	*- FL
10	1		*FRONT RH DOOR INNER TRIM	Not Necessary	720.54 FL	*- FL
11	1		*FRONT RH DOOR WING MIRROR	Cut / Damaged	932.27 FL	*932.27 FL
12	1		*FRONT KNUCKLE	OS Distorted/Ns Not Necessary	336.64 FL	*168.32 FL
13	1		*FRONT KNUCKLE BEARING	OS Damaged/Ns Not Necessary	255.33 FL	*127.66 FL
14	2		*FRONT LOWER ARM	Distorted	628.52 FL	*628.52 FL
15	2		*FRONT SHOCK ABSORBER	Not Necessary	580.26 FL	*- FL
16	1		*FRONT BUMPER	Cut	823.50 FL	*823.50 FL
17	1		*SET FRONT BUMPER CLIP	Necessary	60.00 FS	*30.00 FS
18	1		*SET FRONT FENDER INNER TRIM CLIP	Not Necessary	50.00 FS	*- FS
19	2		*RIM	Cut	2,400.00 FS	*900.00 FS

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

Sub Total (S\$) **12,243.08** **4,951.40**
 - List Item Discount on L Items 20.00/20.00% (S\$) 1,946.62 804.28

Total Parts (S\$) 10,296.46 4,147.12

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	CHECK WIRING AND LIGHTNING SYSTEM.	New	60.00	0.00
2	CHECK FRONT WHEEL ALIGNMENT.	New	150.00	60.00
3	REMOVE AND REPLACE FRONT UNDER CARRIAGE PARTS.	New	200.00	150.00
4	TRANSFER PARTS, ATTACHMENT FROM OLD DOOR TO NEW.	New	200.00	60.00
5	PANEL BEATING ON AFFECTED AREAS PANEL.	New	800.00	700.00
6	SPRAY PAINTING ON AFFECTED.	New	1,000.00	700.00
7	APPLY ANTI RUST ON AFFECTED AREAS.	New	150.00	40.00
Gross Labour Cost (\$\$)			2,560.00	1,710.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >