ASS. REC. BY:	Tautikh	E CS/AWA 180	05340/TI	1d302	d Instruction:	
From (Person) Estimated Cos	Ben Tung			D	ete/lime:_	20/2/18 @ 1.06pm
OD / P)WS To Inspect Vel	TTP RES / OD RES / I	KN 6651C	France	Insured:	FX 6568	75564 24501
OI	AVMCSBOO189	209 pandan	Gardens Claim No: Excess:			
	REP. / REV 24 HRS				O.A. 13	3/02/2018 sement
	20pm@ 20/2/18			Velı	icle IN/Q	(II)
Date/Time	Action/Instruction (. SKN 6651C- FX 7556U->	X				
2	Part by Pa (Red:	rt \$454 1020; 137	-7 '00			

Nivitha (LKK Auto)

From:

Tang, Ben <Ben.Tang@awac.com> on behalf of Motorsurvey

<Motorsurvey@awac.com>

Sent:

Tuesday, 20 February 2018 4:06 PM

To:

assignments@lkkauto.com

Cc:

SUR; 'Coco Lu Ting'

Subject:

TP Survey assignment for SKN 6551C - DOA: 13/02/2018 Our ref: FX 7556U/BT

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us **do** have consensus in the appointment of <u>Mr Mohamad Taufikh / Mr Mohammed Rasul</u> as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

:	······	
3 rd Party Vehicle	:	SKN 6651 C
Insured Vehicle	:	FX 7556 U
Policy Number	:	AVMCSB0018911702
Name of Workshop	:	Cycle & Carriage France Pte. Limited
Contact Number	:	6568 4501
Person to Contact	:	Coco Lu Ting
Estimated Cost of repairs	:	\$ 5,562.00

Regards, Claims Division

Copy to Cycle & Carriage France Pte. Limited via Email

Note -

(x)

- 1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
- Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.
- Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
- 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards Motor Claims Claims Group

Global Market

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto 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 Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.



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

- 1 (1 to 1	A SETUL-A - A A - F - A - A - A - A - A - A - A			
ALLIED MODERA AGO	Affiliated to Federation Internat	THE RESIDENCE OF THE PARTY OF T		
ALLIED WORLD ASS	URANCE COMPANY LTD	Ref : CS/AWA180053	340/T1td3	
SINGAPORE BRANC 60 ANSON ROAD #08 MAPLETREE ANSON SINGAPORE 079914	3-01 (8th FLOOR)	Date: 22-03-2018 Code: AWA		
Distance of the second	Policy Particular	s :- THIRD PARTY CLAII	M	
Insured Veh.	FX 7556U	Veh. Inspected	SKN 6651C	
Policy No.		Coverage (\$)	0.00	
Claim No.	FX 7556U/BT	Excess (\$)	0.00	
Assign From	BEN TANG	Assign Date	22/03/2018	
	Vehicle Par	ticulars & Condition	NATIONAL TRANSPORT	
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	- Steering			
Brakes		Modification		
General				
	Condi	tions of Tyres	A. E	
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
	Descrip	tion of Damages		
i. 4. Ending Ma	Gener	al Information		
Accident Date	13/02/2018	Inspection Date		
Survey held at	CYCLE & CARRIAGE FRANC			
our vey neid at	209 PANDAN GARDENS SINGAPORE 609339			
āa.		Remarks		

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.

B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

	ACCIDENT STATEMENT
Date Of Report	14/02/2018 15:42
Date Of Accident	13/02/2018 17:30
Exact Location Of Accident	LORNIE RD/ADAM RD NEAR BUS STOP 41141
Country/State of Loss	SINGAPORE
All the second of the second o	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKN6651C
Insured/Policyholder	
Name Of Registered Owner	CYCLE & CARRIAG FRANCE PTE.LIMITED
Co Reg No	200609327M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98567363
Vehicle Particulars	
Manufacturer	CITROEN
Model	C4 GRAND PICASSO-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	
Driver	

Driver

 Name of Driver
 CHOW LIN YING

 NRIC No
 \$8738690B

 Date Of Birth
 29/11/1987

Occupation INDOOR
Date Of Driving Pass 10/12/2009

Driving Experience 8 YEARS AND 2 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-91542974

Fax Number Contact Number

EMail Address YALOW11@HOTMAIL.COM

98\$6 7363

Address

BLK 435B FERNVALE ROAD #06-220

OTHER - WIFE OF EMPLOYEE

Postcode

792435

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

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

FX7556U

Vehicle Make/Model/Colour

HONDA CB400

Vehicle Category

Details Of Properties

MOTORCYCLE

Name of Driver

MUHAMMAD HAMZAH BIN HUSSIN

NRIC/Passport Number

S8917156C

Contact Number

92262156

Address

Postcode

Insurance Company Name

ALLIED WORLD ASSURANCE COMPANY, LTD

Nature Of Damage

DAMAGED MIRROR

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims:
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

Sketch Plan

Adam Pd / Lornie Rd

A: CKN 66511 R· IX 7556好U Describe Circumstances of the Accident along Lorale Road on the

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre

Personnel

GE	NERAL INFORMATIO	N OF THE ACCIDENT	VIII BE WELFSTER WILLIAM
TYPE OF ACCIDENT		TOT THE ACCIDENT	SECONDER COMMUNICATION COMMUNICATION
Weather Condition	Clear Raining	g 🗆 Other	
Road Surface	☐ Wet ☐ Dry If Others please state the co	☐ Other	
OTHER INFORMATION	 		
Was anyone injured in the accid	ient?	□ No □ Yes	
Was there any video captured b			
Was any foreign vehicle involve			
Was any others vehicle or prope	erty damaged?	□ No □ Yes	_
(Including 3rd party / Witness)	orty damaged;	□ No Yes	
Was the accident reported to the	e police?	□ No □Yes	7
Name of the police station			
Was notice of intended Procecu	tion given?	□/Ño □ Yes	
Circumstances Of Accident			
Refer attachment			
	THE PARKET		
DETAIL OF OTHER VEHICLE	THIRD PARTY VEH	IICLE DETAIL	
Vehicle Registration No.	FX 75564		
Vehicle Make/Model/Colour	Honda Ch 400s	Luter 3	
Detail of properties	110.003	O VICE D	
Name Of Driver	muhammad Ha	meah Bin Hussin	
Driver's NRIC		IIC No Passport No)/Fin
	529171566		
Contact Number	9226 215	lo .	
Name of Insurance Company	Allied world	assurance insu	irunce
Nature Of Damage	damaged mi	Mon	
Detail of Witness - Name			
Detail of Witness - Phone			
Detail of Witness - Email			
8	Vehicle Regn No or		Phone or Handphone
Damages to other vehicles &	details of property	Names Of The Driver	Number
property (Other than Vehicles A			
DETAIL OF INJURED PERSON	人民共享		
njury sustained			
njured person is on which vehicle?			000000000000000000000000000000000000000
Vere seat belts worn?	☐Yes ☐No		
Vas injured conveyed to hospital by mbulance?	Yes No		

GAPORE DRIVING LICENCE Licence Number: S8738690B

CHOW LIN YING (ZHOU LINYING)

Birth Date: 29 Nov 1987 issue Date 10 Dec 2009

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8738690B





CHOW LIN YING (ZHOU LINYING)

琳

CHINESE

29-11-1987

SINGAPORE

YOU ARE DELISED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(EC)

PASS DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive 10 Dec 2009 of the driver; and other motor vehicles =< 2500kg

FOR C&C USE

29-11-2002

S8738690B

APT 3LK 435B FERNVALE ROAD #06-220 SINGAPORE 792435

NRIC No: \$8738690B

Date: 21/10/2012

No: 7142825

3269238

NP 428A

Licence No: S8738690B



CYCLE & CARRIAGE FRANCE PTE. LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens, Singapore 609339 Tel: (65) 6568 4501 Fax: (65) 6565 1240

ESTIMATE

Company Reg No. 200609327M GST Reg No. MR-8500111-X

	Inve	oice Name & Address		Owner I	Name & Vehicle	Info			
	Jardine Cyc	cle & Carriage Limited	Cust No/Name Reg No/Reg Date	FC000812/J SKN6651C	ardine Cycle		riage Li	mite	
239 Alexandra Road Singapore 159930			Date In/Mileage Chassis No		SKN6651C / 14/12/2015 / 0 VF73ABHZTFJ755562				
	Contact No	Work: 6470 8111		Engine No Make/Model Colour/Trim	10JBHD3012 CIT/GC4P 1 ZRM	.6 BLUEHDI E	AT6 CON	NFORT	
Account No	Terms	Date/Time Printed	CSE	Operator		WIP No			
SM00073	Cash	14/02/2018/ 13:24		442 / CocoLu		13246			
		Description of Goods / S	Services		Qty	Unit Price	Disc%	An	nount
SIDE SI 54900099 TO CHEC 54900099 TO CONI 1 SUNDRY Sundry	AY PAINT FOR ILL LH, WIND 9 CK WIRING & 9 DUCT DIAGNOS	ELECTRICAL SYSTEM STIC CHECK FOR THE CAR S	SYSTEM	TRT DOOR LH		692.00	0.00		2100.00 50.00 300.00 20.00 -692.00
		SURVEYOR NAM SURVEYOR SIGN DATE:2 REMARKS:	NATURE:	Taught 97/6 Personal before the like and the works	2-	LKK Auto Con the Repairer of To resurvey before are To display dama Parts prices are Third party surven No illegal modifies Supplementary is subject to final Acknowledged by Signature:	of the follower of the follower of the saged part(set to set is on a dication(s) in item(s) mulal approval	pray paintin s) during res confirmatio Without Pros s allowed	g survey on ejudice" bas
Confirm 8	accepted by				Parts	Date:			692.0
Commit &	accepted by				Labour Standard I Specialis Diagnostic	t Job			4,850.0 0.0 0.0
Authorized	I signatory and	company stamp			Sundry/Otl Total (w/o				20.0 5,562.0

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



Exceptional Journeys

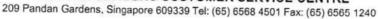
Surveyor : Taufikh Company : LKK

	VEHICLE NO	: SKN665	1C		
	MODEL	Γ6 CONFOR	Т		
	WIP	: 13246			
	Material	: \$	692.00		Email :
	Labour	: \$	3,850.00		
	Sub-Total	: \$	4,542.00		
		:			
	Less Excess	: \$	-		
	Total	: \$	4,542.00		
	GST 7%	: \$	317.94		
	Grand Total	: \$	4,859.94		
	Finalise By/Date	: JoJo dtd	1 07/08/2018		
✓	REVERT BACK V		AYS, ED WITH INVOICING	3	
	SURVEYOR'S RE	PORT REQ	UIRED		
			_		
	REPAIR TOOK		ORKING DAYS +	2 Days	(_1_) Weekends
	TOTA	AL DAYS R	EPAIR TOOK =	Days	() Public Holiday
✓	TP Claim AW	'AC - FX755	56U		
\checkmark	Claim GIA / LTA	fee \$	2.00		
	Claim Loss	Use	Rental		
	Claim Medical Fee	/ Others			
	Third Party Report				



CYCLE & CARRIAGE FRANCE PTE. LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE





PRO-FORMA INVOICE

Company Reg No. 200609327M GST Reg No. MR-8500111-X

Invoice Name & Address ALLIED WORLD ASSURANCE COMPANY, LTD MOTOR CLAIM DEPARTMENT 60 ANSON ROAD #09-01 MAPLETREE ANSON SINGAPORE 079914 Contact No 62201188Main			Owner Name & Vehicle Info					
			Cust No/Name Reg No/Reg Date Date In/Mileage Chassis/Package Engine No Make/Model Colour/Trim	FC000812/ALLIED WORLD ASSURANT SKN6651C / 14/12/2015 23/03/2018/ 29981 VF73ABHZTFJ755562 10JBHD3012911 CIT/GC4P 1.6 BLUEHDI EAT6 CONF				
Account No	Terms	Date/Time Printed	CSE	Operator		WIP No	Invoice/	Credit Note No
FAX00005	Credit	07/08/2018/ 15:25	TLC	881 / Jojo Cheng		13246		0
		Description of Goods	s / Services		Qty	Unit Price		Amount
FRONT DO E PNT98000 RESPRAY SIDE SILI A 54900099 TO CHECK A 54900099 TO CONDUI M SUNDRY SUNDRY X EXT VIEW Z TEXT AWAC TP DOA: 13/0	OR LH, SID REAR FENDE L LH, WIND WIRING & CT DIAGNOS MIRROR LH CLAIM FX75 02/2018		RONT DOOR		1.00	692.00	0.00	/1800.00 /1680.00 /50.00 /300.00 /20.00 /692.00

"Guarantee your warranty, maintain with Cycle & Carriage."

692.00

0.00

0.00

0.00

20.00

4,542.00

3,830.00

Payment should be made strictly by cash, NETS or credit cards. Thank you.

Parts

Labour

Standard Menu

Specialist Job

Diagnostics Job

Sundry/Others

Total (w/o GST)

Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.

4,542.00

4,859.94

4,859.94

0.00

317.94

Nett

Paid

Total Due

4542.00

Total Payable

7% GST on



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

ALLIED WORLD ASSURANCE COMPANY LTD

Ref: CS/AWA18005340/T1td3e2

(SINGAPORE BRANCH)

60 ANSON ROAD #08-01 (8th FLOOR)

Date: 12-09-2018



	ETREE ANSON APORE 079914	, , , , , , , , , , , , , , , , , , , ,	Date: 12-09-2018	
SING	AFORE 0/9914		Code: AWA	
1.		Policy Particula	ars :- THIRD PARTY CLA	.IM
	Insured Veh.	FX 7556U	Veh. Inspected	SKN 6651C
	Policy No.		Coverage (\$)	0.00
	Claim No.	FX 7556U/BT	Excess (\$)	0.00
	Assign From	BEN TANG	Assign Date	20/02/2018
2.		Vehicle Pa	articulars & Condition	
	Make & Model	CITROEN GRAND C4	c.c	1560
	Engine No.	HIDDEN	Year of Reg.	2015
	Chassis No.	VF73ABHZTFJ755562	Colour	SILVER
	Odometer	33287	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Con	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	205/60 R16	MICHELIN	6 mm
	L/H Front Tyre	205/60 R16	MICHELIN	6 mm
	R/H Rear Tyre	205/60 R16	MICHELIN	6 mm
	L/H Rear Tyre	205/60 R16	MICHELIN	6 mm
4.		Descr	iption of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE	N/S BODY.	
	DAMAGES SEE D	ETAILS.		
5.		Gen	eral Information	
	Accident Date	13/02/2018	Inspection Date	22/03/2018
	Survey held at	CYCLE & CARRIAGE FRAN	ICE PTE LTD	
		209 PANDAN GARDENS SINGAPORE 609339		
5a.			Remarks	
	A)THE INSPECTION B)IN ACCORDANG	ON WAS CONDUCTED ON A'CE TO YOUR INSTRUCTION	'WITHOUT PREJUDICE" BA S, WE HAVE NOT AUTHORI	SIS. SED REPAIRS.
5b.		Estim	ate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	7 Working Da	ys



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

4,542.00

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKN 6651C

RECOMMENDED COST OF REPAIRS

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	SUNDRY (SN)	NECESSARY	20.00	20.00
1	EXT VIEW MIRROR LH (SN)	CRACKED	692.00	692.00
			712.00	712.00
	LABOUR			
	TO RENEW WINDMIRROR LH, REPAIR REAR FENDER LH, REAR DOOR LH, FRT DOOR LH, SIDE SILL LH.		2,400.00	1,800.00
	TO SPRAY PAINT FOR REAR FENDER LH, REAR DOOR LH, FRT DOOR LH, SIDE SILL LH, WINDMIRROR LH.		2,100.00	1,680.00
	TO CHECK WIRING & ELECTRICAL SYSTEM.		50.00	50.00
	TO CONDUCT DIAGNOSTIC CHECK FOR THE CAR SYSTEM.		300.00	300.00
			4,850.00	3,830.00
	GRAND TOTAL		5,562.00	4,542.00

Report Ref No. CS/AWA18005340/T1td3e2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.