

22/03/2001

ASS. REC. BY:

REF: CS/CTI 18006710/Uvd3<sup>n2</sup> Special Instruction:

Surveyor:

Menimen

ASSIGNMENT (Office)

From (Person):

Irene Tay

of

CTI

Date/Time:

11/4/18 @ 3:56pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLR 4118G

Insured:

SKN 1096M

at Workshop m/s

Pegasus @ SME

Tel:

8338 8418

of

1 Kaki Bukit Ave 6 #02-15

Policy No:

DMPCSN3038231700

Claim No:

SNM18D01810C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 05/04/2018

CA / REV / REP. / REV 24 HRS

wp

H.O.D. Endorsement:

Date/Time:

4:05pm @ 11/4/18

Person Contacted:

Gary

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SLR 4118G - X

SKN 1096M - X

(08/11/13) wef

REF:

ASS. REC. BY: Marcus

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: SLR41186

at Workshop m/s Pegasus

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

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

IDAC Accident Report Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 3 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

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

Veh No: SLR41186 Yr Regn: 8, 17

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

Truck / Trailer or CA /

Make: Honda Vezel C.C. 1496

Colour: 3.1.1.1 A/C: Insured / Std / NI / NA

Sp. Reading: 89586 T/Radio: Insured / Std / NI / NA

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

C/No: RU31254291

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: 215/60R16

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

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

TOYO / YOKO or Triangle

Front Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 5/4/18 D.O.I. 6/7/18

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

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

6/5 Lf.

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

Date / Time

Action / Instruction

26/7/18 1/5 \$1500 confirmed with AH Yang. (Red 2347-76, 619)

RECEIVED 27 JUL 2018

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: 3

1)

☐ : Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ ) S + RS, SI☐ : Interview (\$ ) Photos☐ : Tech. Invs (\$ ) Others☐ : Weekend (\$ )

TOTAL

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

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

220

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Apr 2018		11 Apr 2018 15:56 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
------	-----------	---------------	-----------	--------------------------

#### CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	THIAN BOON PIN CHRISTOPHER, ID: S1735104D		
Main Claimant:	GRAB RENTALS PTE LTD, Co. Reg. No.: 201617200G		
Vehicle Reg. No.:	SLR4118G	Date of Loss:	05/04/2018 20:00 - :59
Claim Type:	TP / SNM18D01810C02	Policy/Cover Note No.:	DMPCSN3038231700 (Comprehensive)
Vehicle Reg. No. (Insured):	SKN1096M	Policy No. (Claimant):	A29069766MKF
		Excess:	S\$0.00
Repairer:	Pegasus @ Sme (HQ) 1 Kaki Bukit Ave 6 #02-15, Autobay @ Kaki bukit, 417883 Kaki Bukit - Tel: 83388418		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]		
Claimant's Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 20/04/2018]		
Driver/Custodian (Insured):	THIAN BOON PIN CHRISTOPHER (51 / Male), NRIC: S1735104D		
Adj Asg. Remarks:	EST \$4117.10, ASSIGN MARCUS CHUA AS SJE.		

#### 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.									

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Company

Owner ID: 7200G

**Vehicle Details**

Vehicle No.: SLR4118G

Vehicle to be Exported: No

Intended De-registration Date: 06 Jul 2018

Vehicle Make: HONDA

Vehicle Model: VEZEL HYBRID 1.5X AUTO

Primary Colour: Silver

Manufacturing Year: 2017

Engine No.: LEB5954308

Chassis No.: RU31254291

Maximum Power Output: 112.0 kW (150 bhp)

Open Market Value: \$24,756.00

Original Registration Date: 15 Aug 2017

First Registration Date: 15 Aug 2017

Transfer Count: 0

Actual ARF Paid: \$5,000.00

**Intended PARF Rebate Details**

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 14 Aug 2027

PARF Rebate Amount: \$3,750.00

**Intended COE Rebate Details**

COE Expiry Date: 14 Aug 2027

COE Category: B - Car above 1600cc or 97kW (130bhp)

COE Period(Years): 10

QP Paid: \$47,501.00

COE Rebate Amount: \$43,248.00

**Total Rebate Amount: \$46,998.00**

The information contained herein is correct as at 06 Jul 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	06/04/2018 17:40
Date Of Accident	05/04/2018 20:20
Exact Location Of Accident	JUNCT OF SENGKANG EAST RD AND ANCHORVALE ST
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR4118G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL HYBRID
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
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 HIRE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29069766MKF
Cover Note Number	

### Driver

Name of Driver	JOLENE YEO BABY
NRIC No	S1800509C
Date Of Birth	02/03/1967
Occupation	INDOOR
Date Of Driving Pass	07/12/1987
Driving Experience	30 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	96693339.
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NA
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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)	2
Passenger 1	NAME: : EMDICKY
	GENDER: : MALE

#### 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

UPON REACHING THE MENTIONED JUNCTION, TRAFFIC WAS RED AND ALL VEHICLE WAS STOPPED STATIONARY INCLUDING MY VEHICLE IN THE LANE. OUT OF A SUDDEN, VEHICLE B FROM MY RIGHT HAD FILTER OUT WITHOUT CHECKING AND COLLIDED ONTO THE FRONT SIDE PORTION OF MY VEHICLE. AFTER THE IMPACT, WE ALIGHTED TO EXCHANGE DETAILS AND TOOK SOME PHOTOS BEFORE WE MOVE OFF. THERE IS NO INJURIES AT THE SCENE, HOWEVER, I WILL SEEK FOR MEDICAL ATTENTION IF NEEDED. THERE IS A PASSENGER WITH ME AND HE IS WILLING TO BE MY WITNESS IF NEEDED,

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKN1096M
Vehicle Make/Model/Colour	MERCEDES BENZ/A200 (SR)
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHRIS
NRIC/Passport Number	
Contact Number	96942662
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

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

Policyholder's Signature / Date &amp; Time

Sketch Plan

ANCHORVALE

ST.

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

6/4/2018 1607hrs

VERIFIED BY AJAX MARS  
REPORTING OFFICER  
EUGENE KOHWitnessed by Reporting Centre  
PersonnelJUNCT. OF SENGKANG  
EAST RD & ANCHORVALE  
ST.A) SLR 4118 G  
B) SKN 1096 M



ACCIDENT STATEMENT (2000 characters)

UPON REACHING THE MENTIONED JUNCTION, TRAFFIC WAS RED AND ALL VEHICLE WAS STOPPED STATIONARY INCLUDING MY VEHICLE IN THE LANE. OUT OF A SUDDEN, VEHICLE B FROM MY RIGHT HAD FILTER OUT WITHOUT CHECKING AND COLLIDED ONTO THE FRONT SIDE PORTION OF MY VEHICLE. AFTER THE IMPACT, WE ALIGHTED TO EXCHANGE DETAILS AND TOOK SOME PHOTOS BEFORE WE MOVE OFF. THERE IS NO INJURIES AT THE SCENE, HOWEVER, I WILL SEEK FOR MEDICAL ATTENTION IF NEEDED. THERE IS A PASSENGER WITH ME AND HE IS WILLING TO BE MY WITNESS IF NEEDED,

Taxi Voucher No.:

Are you claiming your own insurance policy for the repair of your vehicle?

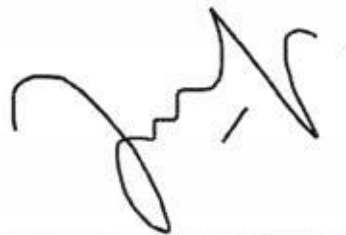
No, Claim 3rd party

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
EUGENE KOH YEW KIAT

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

6 April, 2018 4:12 pm

Date/Time:

6 April, 2018 4:12 pm



GST / ROC Company No :

201101753C

Third Party Insurer :

CHINA

Insured's Veh No :

SKN1096M

Date of accident :

05/04/2018

Grab Rentals Pte Ltd  
18 Sin Ming Lane  
#01-08 Midview City  
Singapore 573960

Quotation No : AR/QO18/04-1057  
Quotation Date : 09/04/2018

### Estimate To Repair

### HONDA VEZEL HYBRID 1.5X AUTO

Vehicle No :

SLR4118G

Chassis No :

RU3-1254291

Pages : 1 of 1

S/NO	QUANTITY	DESCRIPTION	AMOUNT
<b>LIST ITEM</b>			
1	1PC	FRT BUMPER <i>Repatch</i>	\$840.00 ✓
2	1PC	FRT BUMPER RETAINER RH <i>3rd</i>	\$30.00 ✓
3	10PC	FRT BUMPER CLIPS @\$5.50 <i>rec</i>	\$55.00 ✓
4	1PC	FRT FENDER PROTECTOR RH <i>De/cut</i>	\$205.00 ✓
5	8PC	PROTECTOR CLIPS @\$5.90 <i>rec</i>	\$47.20 ✓
6	1PC	FRT BUMPER LOWER SPOILER <i>R</i>	\$410.00 X
7	1PC	HEADLAMP RH <i>11</i>	\$1,850.00 X
8	1PC	FRT FENDER "HYBRID" PLATE RH <i>rec</i>	\$85.00 ✓
			\$3,522.20 <i>1262.2</i>
LESS 20%			\$704.44 <i>1009.76</i>
			\$2,817.76
<b>LABOUR &amp; MISC. CHARGES</b>			
1		WIRE CHECKING	\$30.00 <i>20</i>
2		LABOUR CHARGE	\$500.00 <i>\$ 350</i>
3		SPRAY PAINTING	\$500.00 ✓
Total			\$1,030.00 <i>1879.76</i>
<b>Sub Total</b>			\$3,847.76
<b>GST (7.00%)</b>			\$269.34
<b>Total</b>			\$4,117.10

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- 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

Acknowledged by Repairer

Signature:

Date:

Please conduct the survey at

Pegasus Engineering @ SME c/o 1 Kaki Bukit Ave 6 Autobay@Kaki Bukit #02-15/16/17/18, Singapore 417883  
GARY 8338 8418

## 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/CT118006710/UVD3N2

Date: 01/08/2018

## REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN3038231700
Claimant Vehicle No :	SLR4118G	Insured Vehicle No :	SKN1096M
Date of Loss:	05/04/2018	Nature of Claim:	TP
		Claim No:	SNM18D01810C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	SLR4118G	Engine No:	LEB5954308
Make & Model:	HONDA VEZEL, 1.5 HYBRID (A)	Chassis No:	RU31254291
Reg. Date:	15/08/2017 (Man. Year: 2017)	Odometer:	89586 km
Colour:	Silver		
Engine Capacity:	1496 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	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:	215/60R16	Rear Tyre Size:	215/60R16
Front Left Side:	Triangle 6 mm	Rear Left Side:	Triangle 6 mm
Front Right Side:	Triangle 6 mm	Rear Right Side:	Triangle 6 mm

The above values represent the remaining tyre treads depth

## COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	2,817.76	1,009.76	1,808.00	64.16
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,030.00	870.00	160.00	15.53
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (\$\$)</b>	<b>3,847.76</b>	<b>1,879.76</b>	<b>1,968.00</b>	<b>51.15</b>
<b>Approved Total (Overridden) (\$\$)</b>		<b>1,500.00</b>		
<b>(\$\$)</b>	3,847.76	1,500.00	2,347.76	61.02
<b>+ GST 7.00/7.00% (\$\$)</b>	269.34	105.00	164.34	61.02
<b>Nett Amount (\$\$)</b>	<b>4,117.10</b>	<b>1,605.00</b>	<b>2,512.10</b>	<b>61.02</b>

## INSPECTION

Date of Assignment:	11/04/2018	
Date Inspected:	06/07/2018 Inspected At:	Pegasus @ Sme (HQ) 1 Kaki Bukit Ave 6 #02-15, Autobay @ Kaki bukit Singapore 417883

Estimated Period of Repair: 3.0 days

Adjuster: MARCUS CHUA

Manager: VERON CHEN

*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

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 01 Aug 2018)
<b>Parts:</b> M1-SUV	HONDA VEZEL 1.5 HYBRID (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SLR4118G)
<b>Validity:</b>	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
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRT BUMPER	Deep Cut	840.00 FL	*840.00 FL
2	1		*FRT BUMPER RETAINER RH	Bent	30.00 FL	*30.00 FL
3	10		*FRT BUMPER CLIPS	Necessary	55.00 FL	*55.00 FL
4	1		*FRT FENDER PROTECTOR RH	Deformed/Cut	205.00 FL	*205.00 FL
5	8		*PROTECTOR CLIPS	Necessary	47.20 FL	*47.20 FL
6	1		*FRT BUMPER LOWER SPOILER	Repair	410.00 FL	*. FL
7	1		*HEADLAMP RH	Not Necessary	1,850.00 FL	*. FL
8	1		*FRT FENDER HYBRID PLATE RH	Necessary	85.00 FL	*85.00 FL

F=Franchise part. L=ListItemDisc.

<b>Sub Total (\$\$)</b>	<b>3,522.20</b>	<b>1,262.20</b>
<b>- List Item Discount on L Items 20.00/20.00% (\$\$)</b>	<b>704.44</b>	<b>252.44</b>
<b>Total Parts (\$\$)</b>	<b>2,817.76</b>	<b>1,009.76</b>

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
<u>Labour Items</u>				
1	WIRE CHECKING	New	30.00	20.00
2	LABOUR CHARGE	New	500.00	350.00
3	SPRAY PAINTING	New	500.00	500.00
Gross Labour Cost (S\$)			1,030.00	870.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >