

105/11/3

Surrey: Kelvin

REF:

NS/INC 18007027/Klvb02

ASSIGNMENT

From: _____ Date: _____

Estimate Cost: _____

OD / TP / INS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: _____

at Work stop m/s _____

of _____

Insured: SJJ 5341LPolicy No. 5091685867 11.12.2017Claims No. MT/0991016-001

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: _____ days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHB 4465K Yr Regn: 20 Dec, 2017

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

Truck / Trailer or

Make: Hyundai 240 c.c. 1605Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 36183 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KA HLBKX14AH4100004

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: 205/60R6

R: _____

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

TOYO / YOKO or HyundaiFront 7 mmR/Bal. 7 mmL/Bal. 7 mmD.O.A. 14/4/8 D.O.I. 16/4/8Survey held at CD4E (Loyang)

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

Front & s

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

Date / Time Action / Instruction

SHB 4465K-XSJJ 5341L - 003 / 11/12/2017 / 01/12/201718/4/18 Carve # 1/P 2795/44/3 Rps (Red 2353.44, 469)

RECEIVED 20 APR 2018

Date/Time, File Pass to?

☐ : Prell. ReportDays Of Repair: 3

1)

☐ : Final ReportResurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS: \$

Photos

Date/Time, File Return to?

2) 20/4 - typistAdd Fee: ☐ : Site Insp (\$)☐ : Interview (\$)

160

35

195

TP
P/P \$ 2795.44



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18007027/K1vb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 16-04-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJJ 5341L	Veh. Inspected	SHB 4465K
Policy No.	5091685867	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	16/04/2018

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	14/04/2018	Inspection Date	16/04/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

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

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
1	MT/0991009-001	COMFORT TRANSPORTATION	SH 9400C	CB 7499C	15/4/2018
2	MT/0990416-002	COMFORT TRANSPORTATION	SHA 4513K	GBE 3953E	13/4/2018
3	MT/0990629-002	COMFORT TRANSPORTATION	SHC8422C	SCH 377K	14/4/2018
4	MT/0990685-002	CITYCAB PTE LTD	SHA 352J	SKD 22K	12/4/2018
5	MT/0991013-001	COMFORT TRANSPORTATION	SHC 8829M	SJM 1869S	13/4/2018
6	MT/0990856-002	COMFORT TRANSPORTATION	SHA 7278U	FBG 9719R	16/4/2018
7	MT/0990054-002	COMFORT TRANSPORTATION	SHD 3199A	SJF 8842J	11/4/2018
8	MT/0990358-002	COMFORT TRANSPORTATION	SHD 3085U	SGS 8799T	13/4/2018
9	MT/0991016-001	COMFORT TRANSPORTATION	SHB 4465K	SJJ 5341L	14/4/2018
10	MT/0990602-002	COMFORT TRANSPORTATION	SHA 5005D	XD 8050Y	14/4/2018

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5091685867	HAPPY DRIVE PTE LTD	201710903K	GFT	Third Party	SJJ5341L	SJJ5341L	11/12/2017	

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 16/04/2018 07:29
 Date Of Accident 14/04/2018 13:30
 Exact Location Of Accident TANGLIN ROAD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB4465K
Insured/Policyholder
 Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD
 Co Reg No 199303821R
 Email Address FLEETSAFETY@CDGTAXI.COM.SG
 Mobile Phone No
 Alternative Phone No OFFICE-65508768

Vehicle Particulars

Manufacturer HYUNDAI
 Model I40
 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 TAXI

Insurance Company

Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD
 Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
 Fleet Policy YES
 Policy Number MCOM0015
 Cover Note Number

Driver

Name of Driver LOH ENG GIAP
 NRIC No S0212528E
 Date Of Birth 24/04/1954
 Occupation OUTDOOR
 Date Of Driving Pass 18/07/1974
 Driving Experience 43 YEARS AND 8 MONTHS
 Gender MALE
 Mobile Number
 Fax Number
 Contact Number
 EMail Address NOEMAIL

Address	537 09-4068 ANG MO KIO AVENUE 5
Postcode	560537
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
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	
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)	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

SEE ATTACH.

Attachment(s)

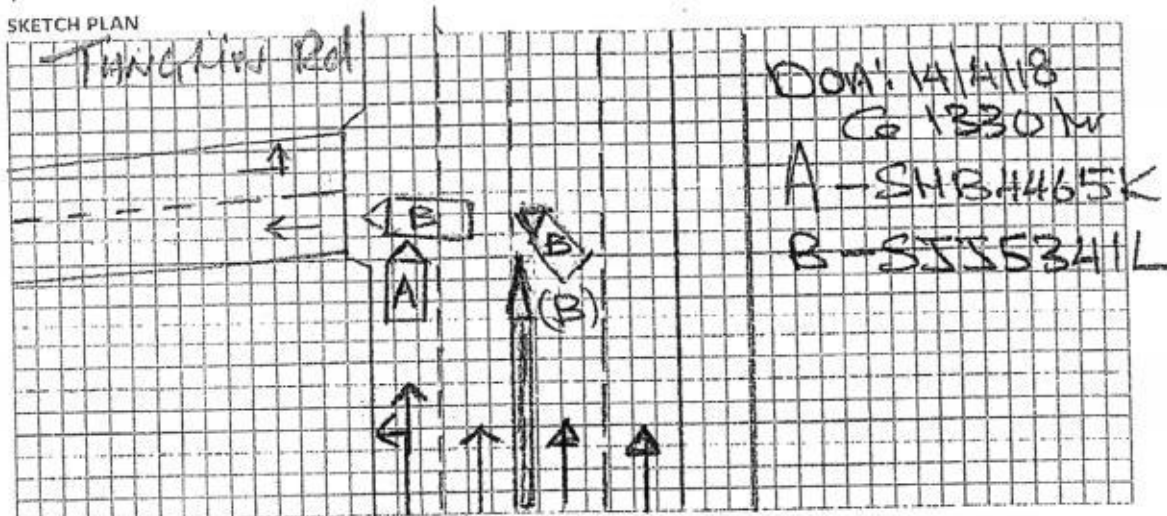
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJJ5341L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN QIN PENG, PEARL YN
NRIC/Passport Number	S9241885E
Contact Number	97319302
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR LEFT DOOR
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 14/4/2018 G 1330hr, I was driving along Tonglin Road towards City. Suddenly Vehicle (B) SJS 5341L from 3rd lane make A sudden left turn towards my lane front cause the veh (B) collision with my taxi.

There is no injury on the scene.

There is video footage on the scene.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO REG. NO 199303821R

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SIARAC SketchPlanForm_V3

Sketch Plan Pg. 2

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 lodgment 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:

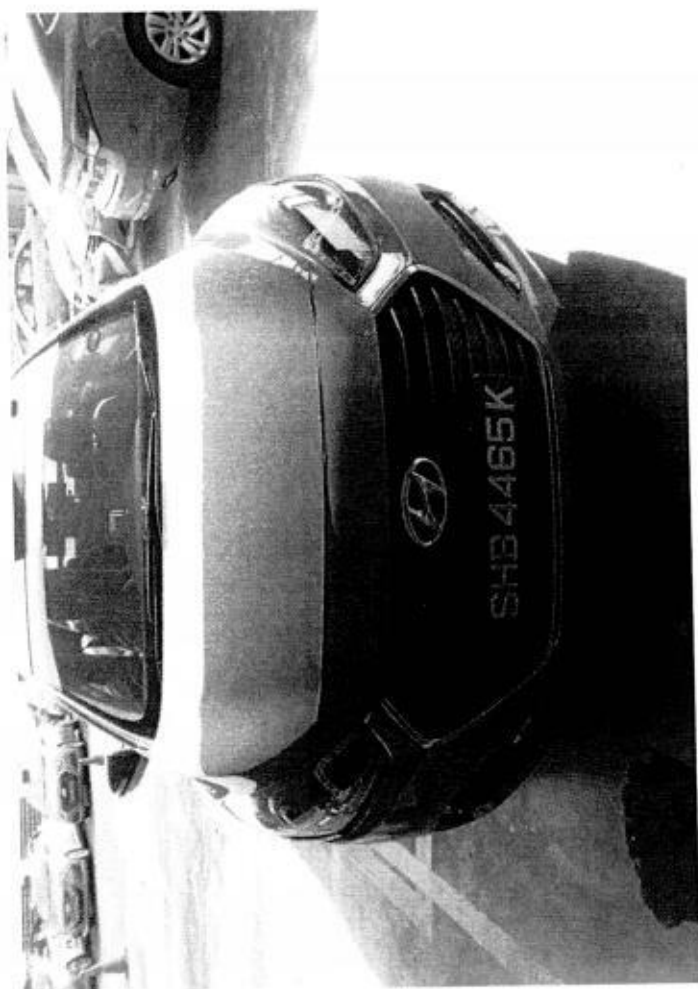
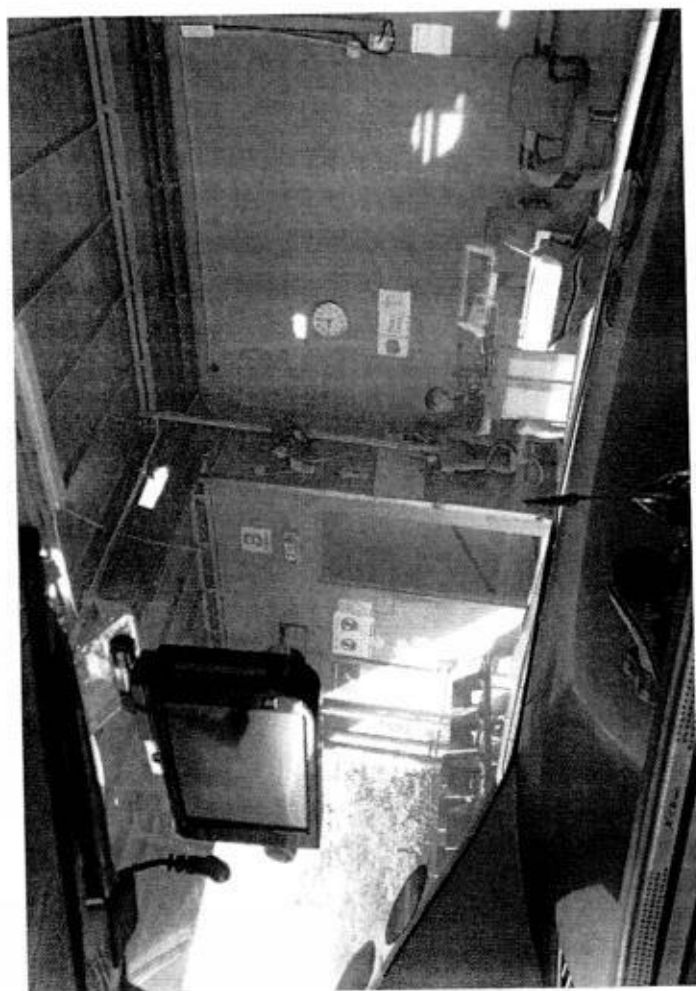
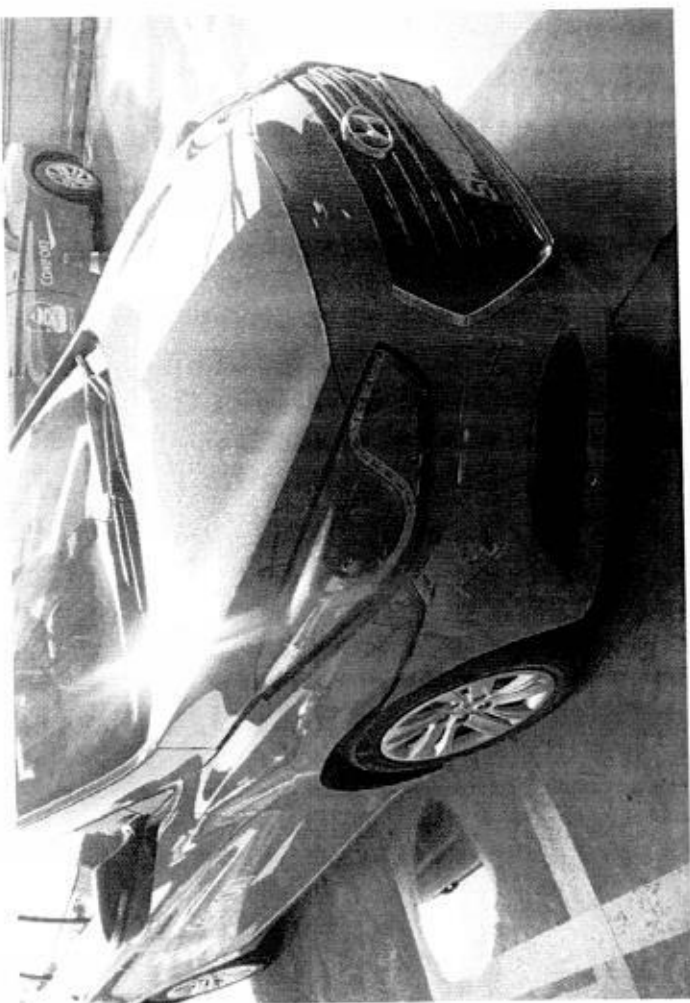
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present 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 fraud, 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.

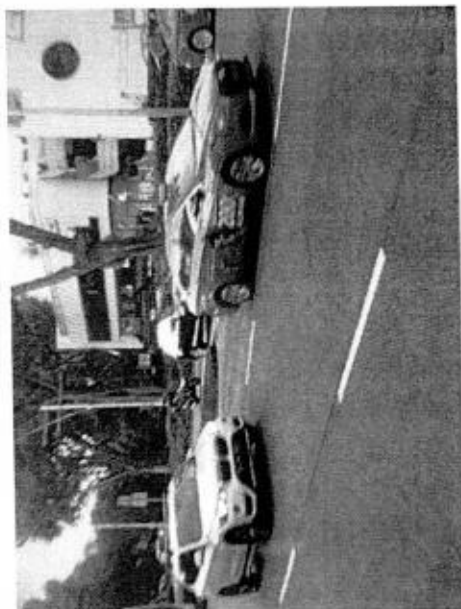
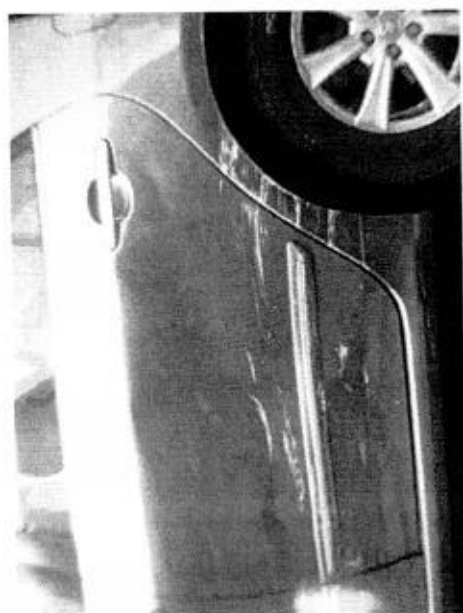
COMFORT TRANSPORTATION PTE LTD
CO REG. NO. 199303821R

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:





Date/Time: 16.04.2018 09:09

Page : 1

JOB CARD Sales Order: 3817837

JC NO305141798

Team: ARC Repair TP(CLSO)1

CUSTOMER
MS COMFORT TRANSPORTATION PTE LTD
CUSTOMER NO 7010045
ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65508755 (O)

REG NO: SHB4465K	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 14.04.2018 14:10
YR OF MANU. 20.12.2017	TARGET DATE
CHASSIS CODE KMHLB41UMHU100004	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 14.04.2018
NATURE: 3P 14.04.18/B > NTUC

NTUC

/NO LABOR CODE DESCRIPTION

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Wedge Slip

Exit Pass

Vehicle No.: **SHB4465K** **FZ**

Vehicle No.: **SHB4465K**

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

VEHICLE NO : SHB 4465K

DATE 16/4/2018 10:48

MAKE :

MODEL : HYUNDAI i40

NTUC
FRONT RIGHT

Fz

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover — <i>Ref</i>			\$ 562.30
	Front Bumper Sponge <i>Xsu</i>			\$ 142.20
	Front Bumper Reinforcement <i>Xsu</i>			\$ 526.10
	Front Bumper Grille (RH) <i>Xsu</i>			\$ 40.30
	Front Bumper Bracket Top (RH) <i>Xsu</i>			\$ 22.40
	Front Bumper Side Bracket <i>Xsu</i>			\$ 14.30
	Headlamp Support Panel Assy <i>Xsu</i>			\$ 1,067.50
	Headlamp (RH) — <i>cy</i>			\$ 1,388.00
	Front Fender (RH) — <i>Ref</i>			\$ 619.00
	Front Fender Shield (RH) <i>Xsu</i>			\$ 169.80
	Front Fender Retainer <i>Xsu</i>			\$ 9.20
	SUB TOTAL			\$ 4,561.10
	LESS 20%			\$ 912.22
	DISCOUNTED TOTAL			\$ 3,648.88
	Labour Charge			300
	Panel Beating			\$ 750.00
	Spray Painting Charge	400		\$ 500.00
	Wiring Charge	20		\$ 50.00
	Tuff Kote	20		\$ 50.00
	Remove/Refix Aircon & Refill Gas	17 X		\$ 150.00
	TOTAL LABOUR			\$ 1,500.00
	ESTIMATE TOTAL			\$ 5,148.88
<i>Ka Loh 16/4/18</i> <i>16/4/18 12:00h.</i> <i>3 Pys</i> <i>PIP</i> <i>Before Paint p L6</i>				
LKK Auto Consultants hence notify the Repairer of the following: • To resurvey before/after spray painting • To display damaged parts if necessary • Parts prices are subject to confirmation • Third party claims on "Without Prejudice" basis • No illegal interference • Supplemental charges and costs and is subject to approval from LKK Auto Consultants Acknowledged by Repairer Signature: _____ Date: _____				
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				

COMFORTDELGRO ENGINEERING PTE LTD

Date: 17.04.2018

REPAIR ESTIMATE

Time: 18:05:09

Page: 1

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

JOB NO : 305141798
REGN NO : SHB4465K
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 20.12.2017
DATE/TIME IN : 14.04.2018 14:10
ACCIDENT DATE : 14.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-2322-A	I40V3 BUMPER W LIP & FOG	1	562.30	20.00	449.84
0002 04-01-0103-0782-A	I40V2 LAMP ASSY-HEAD RH#	1	1,388.00	20.00	1,110.40
0003 04-01-0103-0573-G	I40VC PANEL-FENDER RH#	1	619.00	20.00	495.20

SUB-TOTAL : 2,055.44

JOB NATURE

0000 L	PANEL BEATING	300.00
0001 L	SPRAY PAINTING CHARGE	400.00
0002 L	WIRING CHARGE	20.00
0003 L	TUFF KOTE	20.00

SUB-TOTAL : 740.00

TOTAL : 2,795.44

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

Our Job Ref No : 305141798
Date : 17.04.2018

COMFORTDELGRO ENGINEERING

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

FINALIZATION FORM

To : LKK
Attn : KALVIN

Fax :

Vehicle Reg No. : SHB4465K Date of Accident : 14.04.2018

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

1. The repair job shall bill to: NTUC --- SJJ5341L
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$2,055.44
 - (b) Labour Charges \$740.00
 - Total for Part-By-Part Repair Cost \$2,795.44
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$0.00
Final Lumpsum Repair cost \$0.00

3. Estimated normal period for repairs: 3 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : FAUZY BIN MOKHTAR

Tel : 62148319

Fax : 65468156

Signature : 

Name : K. Kalvin

Date : 18/4/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

**National Assessment Centre Services**


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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Thatcham escribe

NTUC INCOME INSURANCE CO-OPERATIVE LTD		Ref: NS/INC18007027/K1vbn2	
73 BRAS BASAH ROAD		Date: 26-04-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE			
189556		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJJ 5341L	Veh. Inspected	SHB 4465K
Policy No.	5091685867	Coverage (\$)	0.00
Claim No.	MT/0991016-001	Excess (\$)	0.00
Assign From		Assign Date	16/04/2018
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	KMHLB41UMHU100004	Colour	BLUE
Odometer	36183	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION.			
DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	14/04/2018	Inspection Date	16/04/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days	



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 4465K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER COVER	DEFORMED	562.30	562.30
1	FRONT BUMPER SPONGE	SERVICEABLE	142.20	-
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	526.10	-
1	FRONT BUMPER GRILLE (RH)	SERVICEABLE	40.30	-
1	FRONT BUMPER BRACKET TOP (RH)	SERVICEABLE	22.40	-
1	FRONT BUMPER SIDE BRACKET	SERVICEABLE	14.30	-
1	HEADLAMP SUPPORT PANEL ASSY	SERVICEABLE	1,067.50	-
1	HEADLAMP (RH)	CUT	1,388.00	1,388.00
1	FRONT FENDER (RH)	DENTED	619.00	619.00
1	FRONT FENDER SHIELD (RH)	SERVICEABLE	169.80	-
1	FRONT FENDER RETAINER	SERVICEABLE	9.20	-
	LESS 20% DISCOUNT		-912.22	-513.86
			3,648.88	2,055.44
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		950.00	320.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		550.00	420.00
			1,500.00	740.00
GRAND TOTAL			5,148.88	2,795.44
RECOMMENDED COST OF REPAIRS (CONFIRMED)				2,795.44

Report Ref No. NS/INC18007027/K1vbn2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE,
MinstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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