REF: NS/TUCI800	7180/KlVbn2	
	GNMENT	
W. C.		Yr Regn; 27 Apr, 202
From: Date:		
Estimat Cost	Type: M.Car / M.Cycle / Bus / Van / Lorry /	1 20) / Prime Mover /
OD ITP WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	1001
To Inspetivehicle No:	Make: - Mynn det Son en	
at Work stop m/s	Parameter Company	/C: Insu@1/Std / NI / NA
of	Sp.Reading 2235/4	/Radio: Insu <b>@</b> d / Std / NI / NA
Insured: PC 2948Y	Eng/No:	
Policy Na 5070144147 - 03 170218	C/No: KA HET!	KIVM CA 824479
Claims EVI. MT 0990696 -002	Gen. Cond: Good Fair / Poor / Burnt	
Sumin sued: Excess:	Steering: Inorder / Jammed / Leaked / Bu	rnt or
(Client'sRecord)	Brake: Inorder Jammed / Leaked / Bu	mt or 1
Make of Veh:	Modi: Nil / S/Rim / STD ARim or	
= 2000	Tyre Size; F: 2/5/	60 NI 6
(Policy Condition)	R:	`
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / NIC	CLOHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or . h	Perlake
Ball or Market Value:	<u>Front</u>	Rear
ID AC Accident Rport: Consistent? : Yes or No	R/Bal mm	R/Bal. 7 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. } mm	L/Balmm
Est.Repais: days Res.: Yes or No	10/7/3	D.O.I. 17/4/·8
LumSum: % 3 Val.: Yes or No	Survey held at 4	14E (Loyeng)
CA / REV / REP. / 24 HRS  Vehicle: IN / OUT	Des. of Damages : Frt / Rear / O/Ś / N/	S / U/C / Rooftop or
Date:Person Contacted:	The U/C / Chassis frame / Body Str	ructure affected due to collision.
Date / Time   Action / Instruction		
9HD. 4138U - NG/INIC 17073786/K	lvbnz RA:131217	IM
2948 Y CS /UUT 1600 4545 / UV	19A2 DU 251216	45.
24/4/1 Cabrard L/s \$ 1850/ 2 Page.	(Red 967.32, 349)	
DECENTED A MADE	7011	
RECEIVED 2 4 APR	40 IV	
	1.	
Datellime, File Pass to? : Prell. Report	Days Of Repair: 2	
1) : Final Report	Resurvey No. of Trip:	Survey Fee: 160
Date/Time, File Return to?		Transportation: 35
2) >4 4- typist Add Fee	: Site Insp (\$)	S+RS,SI
1. 31	: Interview (\$	Photos
TP	- The state of the	195
LS \$ 1850 b	24.5	



# **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

ITUC INCOME INSU	JRANCE CO-OPERATIVE LTD	Ref:	NS/INC1800718	30/K1vb
3 BRAS BASAH RC 05-01 NTUC TRADI 89556	AD E UNION HOUSESINGAPORE	Date:	18-04-2018 INC4	
	Policy Particulars	:- THIR	D PARTY CLAIM	Exercise Sept.
Insured Veh.	PC 2948Y	Veh. Ir	nspected	SHD 4138U
Policy No.	5070144147-03	Cover	age (\$)	0.00
Claim No.		Exces	s (\$)	0.00
Assign From		Assign	n Date	17/04/2018
	Vehicle Parti	culars 8	& Condition	<b>治以其后,以及其</b>
Make & Model		c.c		0
Engine No.	HIDDEN	Year	of Reg.	
Chassis No.		Colou	r	
Odometer		Steeri	ng	
Brakes		Modif	ication	
General				
	Condit	ions of	Tyres	<b>从</b> 上,他们是一个一个一个
	Size	Make		Balance
R/H Front Tyre	9			mm
L/H Front Tyre	)			mm
R/H Rear Tyre				mm
L/H Rear Tyre				mm
	Descript	ion of D	amages	
	Genera	al Inforn	nation	
Accident Date	16/04/2018	Inspe	ction Date	17/04/2018
Survey held a	t COMFORTDELGRO ENGINEE	RING PT	E LTD	
	59 LOYANG DRIVE SINGAPORE 508969			
5a. 1989	F F	Remarks		
A)THE INSPEC B)IN ACCORDA	TION WAS CONDUCTED ON A"W NCE TO YOUR INSTRUCTIONS, \	THOUT I	PREJUDICE" BASIS NOT AUTHORISE	S. ED REPAIRS.

C/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	income venicle No.
-	MAT/0001340-002	COMFORT TRANSPORTATION PTE LTD	SH 7013A	SJL 3277S
+	WII/0991340-002	COMEON TRANSPORTATION PTE LTD	SHC 1833X	GBG 6935C
+	M1/0990420-002	COMEON TRANSPORTATION PTE LTD	SHB 4181D	SJF 4165G
	200-T001660/1W	SMRT TAXIS	SHB 5490E	SGN 2724A
+	MI/098/3/6-002	SMRT TAXIS	SHF 474P	SKP 1761R
-	MI/0988974-002	SMRT TAXIS	SHF 287M	SHD 1850R
+	MT/0000275_002	SMRT TAXIS	SHB 5737U	SKZ 9804X
+	MIT/00010E0 002	COMFORT TRANSPORTATION PTE LTD	SHD 6647D	SLM 4176P
+	MI / 0991030-002	COMFORT TRANSPORTATION PTE LTD	SH 9594B	SJF 8421R
+	TOO TOCOGOTIA	SMRT TAXIS	SHB 5445L	GZ 8719M
01	MII/0989297-002	SMRT TAXIS	SHB 668T	SLV 3014H
	MI/0989010-002	SMBT TAXIS	SHB 5515T	SLS 2028R
12	M1/0988555-002	SWOT IMPLE	SMB 8039Y	SJC 8146B
13	MT/0981124-002	SIVINI BOSES	X8CL8 3138X	GBG 2031L
14	MT/0991610-001	COMFORT TRANSPORTATION PIE LID	30.00.00	C2 1077E
15	MT/0991074-002	COMFORT TRANSPORTATION PTE LTD	SHC 2948S	170E 701E
16	MT/0990979-002	COMFORT TRANSPORTATION PTE LTD	SHD 6658Y	FBK /911
17	MT/0990696-002	COMFORT TRANSPORTATION PTE LTD	SHD 4138U	PC 2948Y
18	MT/0990960-002	COMFORT TRANSPORTATION PTE LTD	SHD 4928G	YP 64401

eBaoTech									Gener	alClaim
Hello, NAC_PAYA_UBI_80	0601						Change La	nguage	Change Password	l · Log Out
My Desktop	Polic	y Query								88
Notice of Loss	Policy N	0.				Date of Accid	dent	16/04	1/2018 14:31	
	Vehicle I	No.(For Motor)	PC2948Y							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5070144147-03	CHAN TRANSPORT SERVICE	504989003	GFT	Third Party, Fire & Theft	PC2948Y	PC2948Y	17/02/2018	
					- 1	Continue				

#### 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.
- Information provided must be as truthful and accurate 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.

Any false reporting may be referred to the Police for investigation.

- 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.

ACCI	DEN	гст	ATE	MENIT	۰
ACCI	DEN	01	AILEI	WI = 12	

Date Of Report

17/04/2018 10:36

Date Of Accident

16/04/2018 19:20

**Exact Location Of Accident** 

KHOO TECK PUAT HOSPITAL LOBBY DRIVE WAY.

Country/State of Loss

SINGAPORE

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SHD4138U

Insured/Policyholder

Name Of Registered Owner

COMFORT TRANSPORTATION PTE LTD

199303821R

Co Reg No Email Address

FLEETSAFETY@CDGTAXI.COM.SG

Mobile Phone No

Alternative Phone No

OFFICE-65508768

Vehicle Particulars

Manufacturer

HYUNDAI

Model

SONATA

Exact Purpose for which vehicle was being used at

time of accident

NO

Are you claiming under your own insurance policy for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

TAXI

Insurance Company

Name of Insurance Company

MS FIRST CAPITAL INSURANCE LTD

Type Of Coverage

THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

YES

Policy Number

D-18088936MFSH

Cover Note Number

Driver

Name of Driver

YIP MAIU SENG

NRIC No

S1671284A

Date Of Birth

16/04/1964

Occupation

OUTDOOR

Date Of Driving Pass

28/06/1985

**Driving Experience** 

32 YEARS AND 9 MONTHS

Gender

MALE

Mobile Number

Fax Number

Contact Number

**EMail Address** 

NOEMAIL

Address

330 13-375 SEMBAWANG CLOSE

Postcode

750330

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

PC2948Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

BUS

Name of Driver

MO KAM CHYE

NRIC/Passport Number

S2223404H

Contact Number

91729392

Address

Postcode

Insurance Company Name

Nature Of Damage

RHT FRT

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

SKETCH PLAN
A SEIDHISPU COO TECK PHO
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
00 16/4/18 (3) 1920 hrs. I Veh A was
drivinge along Khoo Teck Pucit Driveway  In My lane Suddenly Veh B closhed in
portion. No passenger on board &
no injury reported at the point of
DECLARATION  I/We declare the foregoing particulars are true in every respect.  COMFORT TRANSPORTATION PTE LID  CO REG. NO 199203821R  Yen Y
Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature

### 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.
- 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.
- 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.
- 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.
- 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 (all insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - 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.

UMPORT TRANSPORTATION PTE LI-CO. REG. NO. 199303821R

\_\_\_\_\_\_

Policyholder's Signature Date & Time: Driver's Signature

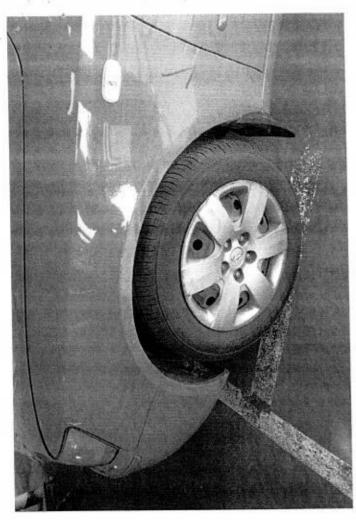
(If driver is not the policyholder)

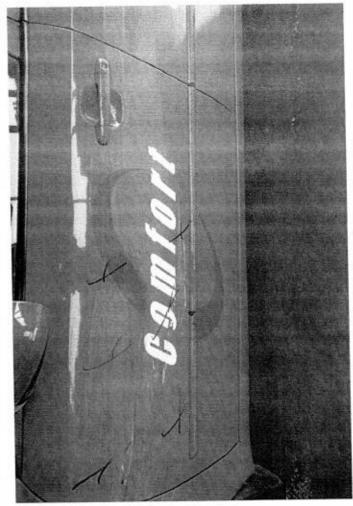
Date & Time:

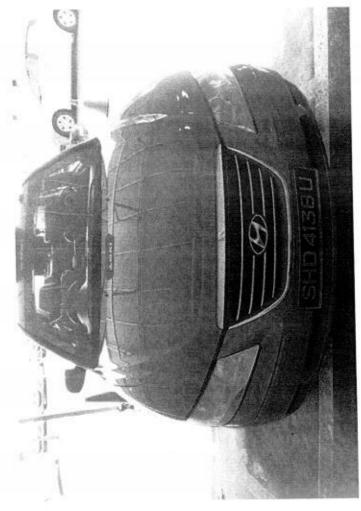
Reporting Centre Personnel's Signature

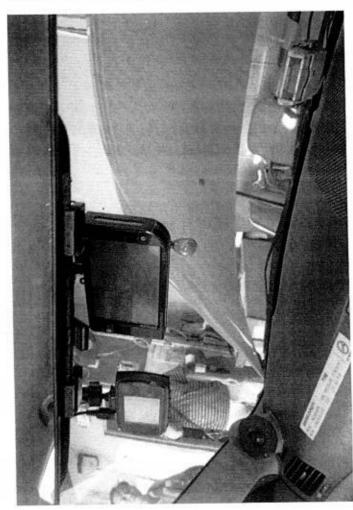
Name:

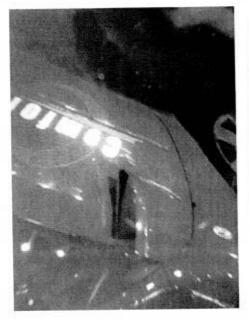
NRIC/FIN No.:





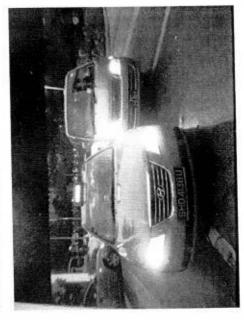














# OMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

## ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Maintine - 65 8383 6880, Facuritie - 65 8390 9755

Date/Time: 17.04.2018 11:20

Page : 1

JC NO305142970 JOB CARD Sales Order: 3818353 ARC Repair TP(CLSO)1 ∍am: REGN NO.: SHD4138U MILEAGE TOMER COMFORT TRANSPORTATION PTE LTD FUEL MAKE HYUNDAI **MS** E.....1/2..... 7010045 TOMER NO. 383 SIN MING DRIVE 17.04.2018 09:35 MODEL SONATA Singapore SINGAPORE 575717 (R) 65508755 TARGET DATE YR OF MANU 4. 2012 (0) (P) COMPLETION DATE/TIME: CHASSIS CODE 41VMCA824479 COUNT CARD NO.

JOB DESCRIPTION

ccident Date: 16.04.2018 ATURE: 3P 16.04.18 - NTUC

returned to Service Reception upon collection

/NO

LABOR CODE

DESCRIPTION

	na a constant a consta
ECKED & PASSED OUT BY:	<u> </u>
SERVICE ADVISOR	CUSTOMER'S SIGNATURE
wiedgement Slip	Exit Pass
: a.: SHD4138U FZ e No.:	Vehicle No.: SHD4138U
of Service Advisor Signature/Date  Signature/Date	Name of Service Advisor Date  To be kept by Security Guard

# COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO: SHD 4138U

DATE 17/4/2018 11:56

MAKE :

DDEL	: HYUNDAI SONATA		20.00	_		1
Qty	Parts Description/ Labour	Type	Unit Price	_	Amount	
	Front Door (LH)			S	1,345.00	
	Front Door Mirror (LH)			\$	545.50	
	Front Door Protector (LH)			\$	74.90	
	Front Door (LH)  Front Door Mirror (LH)  Front Door Protector (LH)  Front Door Protector (LH)  Front LH Fonder X Hepail  SUB TOTAL			\$	1,965.40	
	LESS 20%			\$	393.08	
	DISCOUNTED TOTAL			\$	1,572.32	1
	DISCOUNTED TOTAL				1,072.02	
	Front Door Comfort Logo (LH)	10	<sup>r</sup> L	s	75.00	N
	Labour Charge				200	
	Panel Beating			S	380.00	
	Spray Painting Charge-Door/Fender/Mirror			S	600.00	1
	Wiring Charge			\$	50.00	12
	Tuff Kote			\$	50.00	+;
	Transfer of Door			\$	120.00	1
	TOTAL LABOUR			\$	1,170.00	-
	ESTIMATE TOTAL			\$	2,817.32	
	Kalun /CKH		115	_	7	
	Kelun (CK) 17/4/18 15/0/12 2 Pm.	LKK Auto C the Repair	onsultants hence notify of the following: before latter spray painting samaged part(s) during resultant samaged part(s) during resultant	LA61	acia.	
	2/11.	To display  Parts price  Third part  No illeg	percusured part(s) during to amarged part(s) during to es are subject to confirmation es are subject to confirmation to survey is on a "Without Pri- survey is on a "Without Pri- survey is on a "Without Pri- survey is on a "Without Pri- pert to final approval from Inst- ect to final approval from Inst-	,	nd mpany	
	45 Report plato	Supple     is subj  Acknowled	ect to final appro-			
	o <b>€</b> nico 3030	Signa				
	This is an initial estimate based on a visual inspection of t	he above v	ehicle. The final repa	ir quan	tum will	1

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

## COMFORTDELGRO ENGINEERING

Our Job Ref No : ComfortDelGro Engineering Pte Ltd 23.04.2018 59 Loyang Drive Singapore 506969 Fax 6546 8156 FINALIZATION FORM LKK Fax: To : KALVIN Attn : Vehicle Reg No. : SHD4138U Date of Accident : 16.04.2018 The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-PC 2948Y The repair job shall bill to: NTUC 2. The finalized amount shall be: Spare Parts after List discount \$0.00 (a) \$0.00 Labour Charges (b) \$0.00 Total for Part-By-Part Repair Cost (c.) Lumpsum Repair (if applicable) \$1,850.00 Total for Lumpsum repair cost after Less: 20% Final Lumpsum Repair cost \$1,850.00 3. Estimated normal period for repairs: working days. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days We confirm the estimates and 5. Thank you for your assistance. finalized amount Signature: Signature: : FAUZY BIN MOKHTAR Name 24/4/-8 Tel : 62148319 Date : 65468156 Fax For Official Use Only Document Confirm By Remarks Attached Amount Item (Signature) Yes or No YES 1. Rental Rate P/Day N 2. Loss of Income Paid 3. Survey Fees 7.49 4. LTA Search Fee 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



VTUC	INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1800718	80/K1vbn2
3 BR 05-0 8955		) JINION HOUSESINGAPORE	Date:	26-04-2018 INC4	
		D. U. D. Marketon	(ACCOMMENT)	11502000000	
	Insured Veh.	Policy Particulars PC 2948Y	_	nspected	SHD 4138U
		5070144147-03	-	rage (\$)	0.00
	Policy No. Claim No.	MT/0990696-002	Exces		0.00
_	Assign From	WITTOODGOO GGE	-	n Date	17/04/2018
2013	Assign From	Vehicle Parti	_		
2.	Make & Model	HYUNDAI SONATA	c.c	a Jonation	1991
		HIDDEN		of Reg.	2012
	Engine No. Chassis No.	KMHET41VMCA824479	Color		BLUE
	Odometer	223514	Steer		IN ORDER
	Brakes	IN ORDER		fication	STANDARD ALLOY RIM
	General	GOOD			
3.	Control Control	Condit	ions of	Tyres	
•		Size	Make	tii	Balance
	R/H Front Tyre	215/60 R16	WEST	LAKE	7 mm
	L/H Front Tyre	215/60 R16	WEST	LAKE	7 mm
	R/H Rear Tyre	215/60 R16	WEST	LAKE	7 mm
	L/H Rear Tyre	215/60 R16	WEST	LAKE	7 mm
4.	CONTRACTOR OF STREET	Descript	ion of [	Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE N	S BODY	·.	
5.	DAMAGES SEE D		al Infor	mation	THE RESERVE AND ADDRESS OF THE PARTY OF THE
J.	Accident Date	16/04/2018	Inspe	ection Date	17/04/2018
	Survey held at	COMFORTDELGRO ENGINE	ERING P	TE LTD	
	Curvey note at	59 LOYANG DRIVE SINGAPORE 508969		1. 37 an in 18 an in	
5a.			Remark	The second second	10日的社会的基本的是
	A)THE INSPECTI B)IN ACCORDAN	ON WAS CONDUCTED ON A"W CE TO YOUR INSTRUCTIONS,	THOUT	PREJUDICE" BASI E NOT AUTHORIS	S. ED REPAIRS.
5b.		Estimat	e Days	of Repair	
5b.					



## **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4138U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT DOOR (LH)	DENTED	1,345.00	1,345.00
1	FRONT DOOR MIRROR (LH)	BROKEN	545.50	545.50
1	FRONT DOOR PROTECTOR (LH)	TO REPAIR	74.90	-
1	FRONT LH FENDER (NPA)	TO REPAIR	1	-
	LESS 20% DISCOUNT		-393.08	-378.10
	and the street of the street o		1,572.32	1,512.40
	NETT ITEMS			
1	FRONT DOOR COMFORT LOGO (LH)(N)	NECESSARY	75.00	75.00
	LESS 10% DISCOUNT			-7.50
	CONTRACT CONTRACTOR CONTRACTOR		75.00	67.50
	LABOUR			220021100000
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		520.00	270.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		650.00	470.00
			1,170.00	740.00
	GRAND TOTAL		2,817.32	2,319.90
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			1,850.00

RECOMMENDED COST OF LUMP SUM REPAIRS	1,850.00
(TO ITS PRE-ACCIDENT CONDITION)	
(CONFIRMED)	WATE SHOW

Report Ref No. NS/INC18007180/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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