

Our Reference: SLJ7069L/7013632

Your Reference: SJM4861T

By Email / Mail

07 June 2018

MSIG INSURANCE (SINGAPORE) PTE LTD C/O LKK AUTO CONSULTANTS

Attn: Third Party Claim Department -

ACCIDENT INVOLVING SLJ7069L & SJM4861T ON 24 Mar 2018.

Dear Officer,

We wish to inform you that the repairs to our client vehicle have been completed.

We hereby submit the claims as follows:

Details	Remarks	Amount (SGD)
Cost of Repairs		2,942.50
Loss Of Rental	192.60 x 3 days	577.80
Others		
TOTAL		3,520.30

Kindly let us have your offer to Christine.yow@wearnes.com

Your soonest reply is much appreciated. Thank you.



Yours faithfully Christine Yow D (65) 6430 4899 Wearnes Automotive Pte Ltd Bodyshop and Paint Division 249 Alexandra Road Singapore 159935

This is a computer generated printout, no signature is required.

(PAYMENT BREAKDOWN)

Global Sum Settlement : YES NO Liability :	Vehicle No	1:	St	17069/m	(Insd v	eh) N	lodel	:	WW XC90
Global Sum Settlement : Payee's Breakdown I Date of Accident : DATO 2008 PARCED SUM Settlement : Payee's Breakdown I Date of Accident : DATO 2008 I Down Settlement : Payee's Breakdown I Date of Accident : DATO 2008 I DATO 3008 I DATO 3008		1: 8	Ta	148617	(TP vel	1)			
Repair Estimate : \$ 10577-\$0 Final Repair Cost : \$ 29 \ 3.50 Loss of Use : \$ days at \$ per day Rental (if any) : \$ 577-\$0 Others : \$	Date of Accident		5	14/03/2018					
Repair Estimate : \$ 10577-\$0 Final Repair Cost : \$ 29 \ 3.50 Loss of Use : \$ days at \$ per day Rental (if any) : \$ 577-\$0 Others : \$									
Repair Estimate : \$ 10577.80 Final Repair Cost : \$ 2963.50 Loss of Use : \$ days at \$ per day Rental (if any) : \$577.80 3 days at \$ 193.60 (incls of GST) per day Others : \$: \$: \$: \$: \$: \$: \$: \$: \$:	Global Sum Settler	ment	:	□ YES		NO			
Final Repair Cost : \$ J976-50 Loss of Use : \$ days at \$ per day Rental (if any) : \$ \$ J77-80	Liability		:	100	%	(Agree	d/Ass	sess	sed)
Final Repair Cost : \$ J976-50 Loss of Use : \$ days at \$ per day Rental (if any) : \$ \$ J77-80	Repair Estimate		:	\$105773	2				
Loss of Use : \$ days at \$ per day Rental (if any) : \$ \$ 77 - \$ 3 days at \$ 193 - 60 (incls of GST) per day Others : \$: \$: \$ Final Settlement Sum : \$ 3500 30 , Remarks:	Final Repair Cost		:						
Others : \$: \$: \$: \$ Final Settlement Sum : \$ 3500.30, Remarks: Payment Instruction: Payee's Breakdown 1) Wallas Mismary Pittin : \$ 3500.30. 2) : \$	Loss of Use		:			days a	ıt\$		per day
: \$: \$: \$ Final Settlement Sum : \$ 3500.30, Remarks: Payment Instruction: Payee's Breakdown 1) Walas Mamorus Pittin : \$ 350030. 2) : \$	Rental (if any)		*	\$577.80	3	days a	nt \$ /9	7-1	(incls of GST) per day
: \$: \$ Final Settlement Sum : \$ 3500.30, Remarks: Payment Instruction: Payee's Breakdown 1) Wheats Augustur Piritio : \$ 350030. 2) : \$	Others		:						
Settlement Sum Sett									
Final Settlement Sum : \$ 3500.30, Remarks: Payment Instruction: Payee's Breakdown 1) When Manne Manne Production: \$ 3500.30. 2) : \$			-						
Payment Instruction: Payee's Breakdown 1) Wallas Mississipport PTF(11) : \$ 353030 . 2) : \$	Final Settlement Su	ım			0,				
Payment Instruction: Payee's Breakdown 1) Wheals Mulanotur Pirito : \$ 353030. 2) : \$									
1) WHERE AUTOMOTIVE PTE (TO) : \$ 352030. 2) : \$	Telliarks.								
1) WHERE AUTOMOTIVE PTE (TO) : \$ 352030. 2) : \$						1			
2) : \$							6	2	2x
		W 70	N/	TIVY PTF	71)		_	55	3030·
2)									
4) : \$									



SERVICE TAX INVOICE

0 - A00003 SL: MSIG INSURANCE (SINGAPORE) PTE. LTD

MSIG INSURANCE (SINGAPORE) PTE. LTD. GST Reg.No:M28920628X

4 SHENTON WAY #21-01 Inv.No. . : B&P 7013632 Page 1 SGX CENTRE 2 Inv.date . : 28/05/2018

SGX CENTRE 2 Inv.date.: 28/05/2018 SINGAPORE 068807 WIP No. : 52638

Veh.In/Out: 03/05/2018 10/05/2018

*Tel.No. . : 68277888 Reg.No. . : SLJ7069L Reg.date .: 21/12/201

Closed by: Richmond Ho Reg.date .: 21/12/2016 Syc Consultant : ACC Mileage ..: 26,820

Remarks : Mr Stuart Alexander Chassis No: YV1LF10ACH1117551

Mech Qty Price Disc% Pkg Amount G Parts/Op.No Description 1600.00 0 1,600.00 S 802 TO REPLACE FRONT BUMPER, FRT 0 BRACKET, FRT GRILL, ETC 700.00 0 700,00 S 800 TO PUTTY SPRAY PAINT ON FRT 0 BUMPER 450.00 S 0 450.00 0 TO CHECK WIRING INCLUDE RESETTING OF ALL ELECTRICAL MODULES

		Gross Total.	2,750.00
Late our Farts Parts	 2,750.00 0.00 0.00	Net GST @ 7.0% Total Paid	2,750.00 192.50 2,942.50 0.00 2,942.50

GST: S=StdRated; O=OutOfScope; Z=ZeroRated Enquiries must be lodged within 14 days from the invoice date This is a computer generated invoice. No signature is required.

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 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.

aloi esalu.		
	ACCIDENT STATEMENT	
Date Of Report	26/03/2018 16:24	
Date Of Accident	24/03/2018 06:30	40
Exact Location Of Accident	PORTSDOWN ROAD	(2)
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLJ7069L	
Insured/Policyholder		
Name Of Registered Owner	STUART ALEXANDER COOK	
NRIC No	G5354699X	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-85331061	### F
Alternative Phone No	OTHERS-85331061	
Vehicle Particulars		
Manufacturer	VOLVO	
Model	XC90-2.0 T5 (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	
f 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	2100495143-01	
Cover Note Number		
Driver		
Name of Driver	CAROLINE ELIZABETH COOK	

 NRIC No
 G5359002R

 Date Of Birth
 25/05/1971

 Occupation
 INDOOR

 Date Of Driving Pass
 19/06/2013

Driving Experience 4 YEARS AND 9 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-85331061

Fax Number

Contact Number

EMail Address NOEMAIL

Address 6 SUNSET SQUARE

Postcode 597304

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

=

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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?

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.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

KINDLY REFER THE STATEMENT.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

NO

1

Was there any audio recorded?

NO NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJM4861T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver SUSAN MELANIE BURRIDGE

NRIC/Passport Number S7060696H Contact Number 96377069

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder

: STUART ALEXANDER COOK

Period of Insurance Engine No.

: 21 Dec 2017 To 20 Dec 2018

Chassis No.

: B4204T231705394 : YV1LF10ACH1117551 Vehicle No.

: SLJ7069L : 2100495143-01

Policy No.

Endorsement No. Issued Date

: 06 Dec 2017

ABOUT THE COVER

Make/Model

: VOLVO XC90 T5 Momentum

Engine Capacity/Tonnage: 1,969.00 CC

Sum Insured # Market Value

First Year of Registration : 2016

Driver Restriction

Off Peak Car : No

: NA

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

b) Any other person who is driving on the Policyholder's order or with his/her permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition

: All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business, This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

EXCESS

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

STUART ALEXANDER COOK - \$800 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1 Wearnes Automotive Pte Ltd. Add: 249 Alexandra Road Singapore 159935 64304890 63789350

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency holline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503485716

Pacific I

Asia

AIG /

Copyright @ 2016

201009404M

WEARNES AUTOMOTIVE - RL (V) 45 LENG KEE ROAD

SINGAPORE 159103

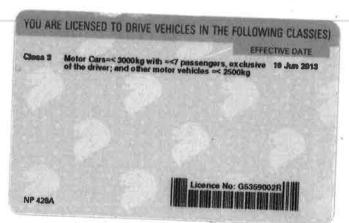
Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE









AUTHORIZATION TO ACT

I, STUART ASPXANDER CODIC ("the third part	ty Claimant")
of 6 SUNSET SQUARE S(597304)	(address),
of 6 SUNSET SQUARE S(597304) owner of SLJ 7969L hereby authorize WARNES AUTOMOTIVE ATEC	(vehicle no.)
hereby authorize WALNES AUTOMOTIVE PIECE	"The workshap")
to act for me with respect to my claim for repair costs and / or rental and /	or loss of use
("claim") for my Vehicle No. SLJ 7069L that	it was damaged
pursuant to the accident which occurred on PAIS DOWN RD. involving Vehicle No/s	(date) along
MORTS DOWN RD.	(location)
involving Vehicle No/s SW 486/1.	("The accident").
I further authorize the workshop to sign the discharge voucher on my be mentioned claim in a manner that they deem fit and the workshop is furt payment further to settlement of my claim with payment cheque/s being workshop.	her authorized to receive
I further acknowledge that any settlement the workshop may reach on reprejudice and without admission of liability basis insofar as the driver / ow vehicle/s is concerned.	
Date this 3 day of May (month) 20 (8	(year)
Strit Gol Com	
Signed by "the third party claimant" Signed by "the wor	kshop" 314

Steve Chen Tsue Yee

From:

Lionel Tan < lionel tan@sq.msig-asia.com>

Sent:

Wednesday, 25 April, 2018 4:32 PM

To:

Steve Chen Tsue Yee

Cc:

Iryani Amin

Subject:

RE: Direct Settlement - Our Ref: SLJ7069L; Your Insured: SJM4861T; DOA:

24/03/2018

Hi Steve

Liability is clear.

Please advise when vehicle is available for survey.

Regards,

Lionel Tan

Executive, Claims Services (Motor)

D: +65 6643 1307 | F: +65 6225 7402 | lionel_tan@sg.msig-asia.com

From: Steve Chen Tsue Yee [mailto:steve.chen@wearnes.com]

Sent: Wednesday, 25 April, 2018 4:25 PM
To: Lionel Tan lionel_tan@sg.msig-asia.com>

Subject: Direct Settlement - Our Ref: SLJ7069L; Your Insured: SJM4861T; DOA: 24/03/2018

Dear Lionel,

Any status of the above vehicle.

Thanks

Best Regards,

Steve Chen

Service Consultant Bodyshop & Paint



Wearnes Automotive Pte Ltd 249 Alexandra Road Singapore 159935 M (65) 9818 7217

www.wearnes.com

steve.chen@wearnes.com

This email, including any attachment, is confidential and may also be privileged.

If you have received it in error, please notify us immediately by reply email and then delete this message from your system. Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.

From: Steve Chen Tsue Yee

Sent: Friday, 20 April, 2018 9:08 AM

To: 'Lionel Tan'

Subject: Direct Settlement - Our Ref: SLJ7069L; Your Insured: SJM4861T; DOA: 24/03/2018

Hi Lionel,

Kindly follow up the liability is clear.

SINGAPORE ACCIDENT STATEMENT MEPORTANT NOTICE 1. Commission and submit this Form to Allied World's Authorised Resorting Centre ("ARC") for ediling Please report <u>correctly</u> the details of the accident to speed up the claims process. 3. This Form must be conscious by the Pollumbolder and for the Authorised Driver. 4. Information provided must be as initial and accords as accords. Any wiful misrepresentation or withholding of meterial facts may allow insurance companies to repudiate policy liability. 5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies. 4. Any fates respecting many has referred to the Traffic Police Department for investigation. **ACCIDENT STATEMENT** Date and Time of Accident **Exact Location of Accident** DETAILS OF OWN VEHICLE Vehicle Registration Number 7069L INSURED / POLICYHOLDER (OWN VEHICLE) Name of Registered Owner (See Insurance Cart.) Stuart Axexander Cook Personal Identification - NRIC (Singaporean/PR) - FIN/Passport Number - Not Applicable VEHICLE PARTICULARS (OWN VEHICLE) Vehicle Make / Model _ Model _ X(Type of Vehicle* Saloon MPV OCRV Ovan O Lony Bus Micycle Others, Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to Yes No (If No,Pis select: Third Party Reporting) your vehicle? Vehicle Catagory* Private Commercial Motorcycle INSURANCE COMPANY (OWN VEHICLE) Name of Insurance Company * Type of Policy Fleet Policy Yes No Policy Number 2100495147-01 Motor CI DRIVER Same as insured above Name of Driver Caroline Elizabeth Cook Personal Identification - NRIC (Singaporean/PR) G 5359102R - FIN/Paseport Number Date of Birth 25 dds Q5 mm/ 197/byy **Driving Date Pass** 19 dd 06 mm/2013 byy Year of Driving Experience Month(s) Occupation Indoor Outdoor Male Female Contact Number / Mobile Phone / Fax No.

	1 4 6
Acidress of Driver	6 SUNSET SQUAKE
Email Address	Poetcode (597304
Was driver an employee of the Insured's Company?	Yes No
If No, Relationship of the Driver with the insured	
Vehicle Registration Number of Driver's Own	Yes No
Vehicle Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Collision (Eg. Chain collison, Head-On collision, Side Swipe, Front to Rear)	fart 110 a
Weather Conditions	Clear Raining Others,
Roud Surface	Dry Wet Others
OTHER INFORMATION	
Was any foreign vehicle involved in this accident?	O Yes O No
Was any body injured in the accident?	O Yes Q No
Vas any other vehicle or property damaged?	Ø Yea ○ No
Ves there any video captured by Car Camera?	Yes No
lumber of Passengers (Including Driver)	
DETAILS OF POLICE ACTION	c
as the Accident reported to the Police?	Yes No (If Yes, please state which Police Station.)
olice Station Name	
folice Station Address	77-114
olice Station Contact	Tel No. Fax No.
as notice of intended Prosecution given?	Yes No (If Yes, against whom?)
ETAILS OF OTHER VEHICLE / PROPERTY 1	
hicle Registration Number	STM WEST
hicle Make/ Model/ Colour	55111 44011
tails of Properties	
me of Driver	Cusas Melagle R. Chr.
sonal Identification - NRIC (Singaporean/PR)	Swan Melanle Buringe S7060696H
- FIN/Passport Number	3770001071
ntact Number	9637 7069
ress	- LV~ (1~ V)
ne of Insurance Company	
re of Demage	
of Passenger (Including Driver)	
e - Please use page 6 if you need to add more vehicles)	(0

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process
- 2. This Form must be completed by the Policificides and/or the Authorised Briver.
- Information provided must be as triability and accurate an operation. Any willul micropresentation or withholding of material facts may allow insurance companies to requified paticy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy tieblity on the part of the insurance companies.
- 6. Any false reporting may be referred to the Traffic Police Department for lowestication.
- This report will be forwarded by the insurers to the GIA Records Mengement Centre establised by the General Insurence Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested perties.
- By the lodgement of this report to the insurers, you haveby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 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 grocess my personal detaipersonal information set out in this (form) and affly other personal information provided by me or possessed by my insurer (collectively the "Personal teformation") and disclose and transfer-such Pertonal 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' tew yers/law firms, the Monetary Authority of Singapore and any relevant government agency/suchority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or deeling with my claims including the settlement of the claims and my necessary investigations relating to the claims;
- (II) investigating the accident and/or my claims;
- (II) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the making 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 envolopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. a (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this socident 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 sted outside of Singapore, for one or more of the above Pusposes.

Policyholder's Signature / Date & Time Diver's Signature (If diver is not the policyholder) / Date

A Time: Z 6 | 3 | 18 2 pm

Sketch Plan

SL570

PORTSPONN RD

Describe Circumstance of the Accident

24/3/18 0630 cm. My car was stationery and the other car revessed into my car robal Location: Tanglin Trost School

Portsdown Road.

IMPORTANT NOTE

Under General Condition - Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

Declaration

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

Policyholder's Signeture / Date & Time

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

26/3/18 2pm

Witnessed by Reporting Centre Personnel

Page 5



SERVICE ESTIMATE

	to he had not the the heart		Herita II III.		
	001 SL: SERVICE SALES - lexander Cook		GST Reg.	No:M28920)628X
Blk 168 Jal	an Bukit Merah	Inv.No Inv.date.	: B&P	0 Pag	je 1
#17-01		WIP No	52638	,,,,,	
Singapore 1	50168	<pre>Veh.In/Out *Tel.No</pre>		331061 Mi	^S
Closed by	: Steve Chen Tsue Yee		* SLJ7069L		
Svc Consult	ant :	Mileage	. : 0		
Remarks	: Mr Stuart Alexander	Chassis No	o: YV1LF10A	ACH111755	L
Op.No	Description	Mech Qty	Price Dis	sc% Pkg Ai	nount G
802 TO	REPLACE FRONT BUMPER, FRT GRILL, ETC PUTTY SPRAY PAINT ON FRT	0	2400.00	0 2,9	0.00 s 1600
BRACKET, FRT 800 TO	GRILL,ETC PUTTY SPRAY PAINT ON FRT	0	1000.00	0 1,0	0.00 s 700
BUMPER	CHECK WIRING INCLUDE	Λ	450.00	0 4	50.00 S
RESETTING OF	ALL ELECTRICAL	•	400100		
MODULES	BUMPER COVER FRT XC9	1.0 EA	1714.40	1,7	14.40 s Repair
	BUMPER GRILLE RH CHR	1.0 EA		3.	17.20 SX
	BUMPER BRACKET LHF X	1.0 EA	79.10		79.10 SX
	BUMPER BRACKET RHF X BUMPER FOAM FRT XC90 WIPER GRILLE CLIP XC	1.0 EA	79.10	7	79.10 8
	BUMPER FOAM FRI XC90	1.0 EA	385.40	- 3i	35.40 5 X
	WIPER GRILLE ULIP XU	10.0 EA	7.10		71.00 S X
	EXPANDING NUT XC40 1	10.0 64	5.40	2 3	15 KN 9 🕊
	HEADLAMP RH XC90 16- H/LAMP DRIVE UNIT XC	1.0 EH	2313.00	2,0	35 90 S X
	HEADLAMP DRIVE UNIT	1.0 EA	250.50	2	50.50 S X



SERVICE ESTIMATE

71710 - C00001

SL: SERVICE SALES - PC

Mr Stuart Alexander Cook

GST Reg.No:M28920628X O Page 2

Blk 168 Jalan Bukit Merah

Inv.No. : B&P

#17-01

Inv.date.: 28/03/2018

WIP No. . : 52638

Singapore 150168

Yeh.In/Out:

*Tel.No. . : Home: 85331061 Mrs

Reg.No. . : SLJ7069L

Closed by : Steve Chen Tsue Yee

Reg.date.: 21/12/2016

Svc Consultant :

Mileage . :

Remarks : Mr Stuart Alexander

Chassis No: YV1LF10ACH1117551

oK.q0

Description

Mech Qty Price Disc% Pkg Amount G

BLIND RIVET 4.0*21MM BUMPER CLIP PLASTIC RIVET P/W RA BUMPER INSTALLING MT *D* ADHESIVE CHEMICA

10.0 EA 3.00 10.0 EA 4.80 30.00 s X 48.00 SX 6.90 10.0 EA 69.00 SX 83,40 1.0 EA 83.40 SX 1.0 EA 303.20 303.20 S X

range maken " range makenga " a

Page 194 But 1

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:

(Pasu	ب						
1	HP	૧	ool	N	(ع	1	

Les estes este est	- Totel	3,850.00	Ne
Parts	s Trottell	6,035.80	GS [*]
Package	e Total	0.00	To
			Pa

Net.	9,885.80
GST @ 7.0%	692.01
Total **********	10,577.80
Paid	0.00
Please Pay.	10,577.80

Gross Total 9,885,80

GST: S=StdRated; O=OutOfScope; Z=ZeroRated