21/02/2001	REL CSIMEG	800 8900 Kg d	Special technicion		
SULVEYOU VO	alvin assig	MSIG Bill to:	Date/Time 16	15/1801.25pm	
Estimated Cost:	ESTOD RESTEVATINUM		nsured: N25	22C	
		3B Auto	Tel: 62148	300	
nt Workshop in/s of	Trans-Cab No. 2 AMK 31	63 Claim No:	558307		
Policy No. B2	9066531 MKF	Excess:	D.O.A111	05/2018	
Make of Vehr (Client's Record) CA / REV / RE	P. / REV 24 HRS (wp)	Gun	H.O.D. Endorses	nent:	
Date/Tung. 2.0	2pm@16/5/18 Person C	ontacted:			
Date/Time A	OI's driver repor	stimate ted CNU collisio	n) with taxi	DOA: 26/5/16	
	YN-2522C - CS LPC @ 15:38 p.m. Reus	1 7A TO Tren	e Tan Gek Ing	via meimen.	
18/05/18	(15:38 pm. Kus	See 21	1 1/40	Lit at the to X	
05/08/3	Investigation Repor	+ , file pass	to NAZ		-

Qureyr: Kalvin REF:	10
7	SSIGNMENT
	Clin 92.30 160 211
From: Date:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Text / Prime Mover /
EstimatedCost	
OD ITP WS ITP RES I OD RES I EVA I INV I MV	Make: Cherlet E. Tri C.C. (88)
To Insped Vehicle No:	
at Workshop m/s	
of	op.i.veading
Insured:	CNO: KLILA 89RJ 81 05 89/x
Policy No.	
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum In swed: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder/Jammed/Leaked/Burnt or
Make of Veh;	Modi: Nil / S/Rim / STDA/RIm or Tyre Size; F: /95/67 R/5
(Pollcy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No Consistent?: Yes or No Est Repairs: Consistent?: Yes or No Est Repairs: Adays Res.: Yes or No Lum Sum: Whicle: 'IN / Date: Person Contacted: Date / Time Action / Instruction Consistent?: Yes or No Wehicle: 'IN / Date: Person Contacted: Date / Time Action / Instruction Consistent?: Yes or No Lum Sum: Wehicle: 'IN / Date: Person Contacted: Date / Time Action / Instruction	R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. R/
	,1(1011/11)
	M Sec
Date/Time, File Page to? O 1/10/12 1) Typit Date/Time, File Return to? : Prell. Report : Final Report	Days Of Repair: 2 Resurvey No. of Trip: Survey Fee: 7 Transportation:
	Fee: : Site Insp (\$)s+Rssi
	: Interview (\$ Photos
Report Format:	: Tech. Invs (\$ 00 Others
Lump Sum / 1.B.1: (\$ 1,600 /- 4/5)	:Weekend (\$)
The state of the s	9 2018 10 1800



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

tan a		Affiliated to Federation Internation			
MSIG	INSURANCE (SI	NGAPORE) PTE LTD	Ref : CS/MSG180089	900/K18303	
16 R. #24-0	AFFLES QUAY 01 HONG LEONG	BLDG SINGAPORE 048581	Date: 16-05-2018 Code: MSG		
1.		Policy Particulars	:- THIRD PARTY CLAI	M	
	Insured Veh.	YN 2522C	Veh. Inspected	SHD 9303B	
	Policy No.	B29066531MKF	Coverage (\$)	0.00	
	Claim No.	558307	Excess (\$)	0.00	
	Assign From	MERIMEN (IRENE TAN)	Assign Date	16/05/2018	
2.		Vehicle Parti	culars & Condition		
	Make & Model		c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
	Chassis No.		Colour		
	Odometer		Steering		
	Brakes		Modification		
	General				
3.		Condit	tions 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.		Descript	ion of Damages		
5.		Gener	al Information	WOOD STREET	
J.	Accident Date	11/05/2018	Inspection Date	16/05/2018	
_	Survey held at				
	Survey neiu at	NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a.	OTHERD		Remarks		
	A)THE INSPECTI B)IN ACCORDAN	ON WAS CONDUCTED ON A"W CE TO YOUR INSTRUCTIONS, V	ITHOUT PREJUDICE" BA WE HAVE NOT AUTHORI	SIS. SED REPAIRS.	

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

	BFOLDER TRA	Est Submitted	Adj Assigned	Adv Rpt	Adj Submitted	Inc Authred	Status	
Main	14 May 2018	CSL SGUIIIWG	16 May 2018 13:52 Assign				New Assignm Cancel Case	ent
	Main	Re	eference	Cla	aim Details	Docume	nts	Show All
		PRODUCTION OF THE PARTY OF THE	ACTION OF THE PARTY	The second second	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	Table 1		
CLAIM S	SUBFOLDER DE	TAILS			[Cre	eated by insurer]		

Ма	in]	Reference	c	laim Details		Documents	51	now All
CLAIM SUBF	OLDER DETAIL	S			[Created t	y insurer]		
Insured:	ISS FACILITY	SERVICES PRIVATE LIM	IITED, Co. Reg	. No.: 19720048	88G			
Main Claimant:	The second secon	RVICES PTE LTD, Co.						
Vehicle Reg. No.:	SHD9303B		Date of Loss:	[76 Months and 25 Days From Lin Reg Date (Field 17)]		(an Yr)		
Claim Type:	TP / 558307			Policy/Cover Note No.:	B29066531 Coverage: (MKF (Comprehens 01/01/2018 - 31/1	(2/2018	
Vehicle Reg. No. (Insured):	YN2522C			Policy No. (Claimant):				
(Insureu).				Excess:	\$\$1,000.00			
Repairer:	Trans-cab Aut	o Services (HQ) NO. 2 A	NG MO KIO ST	53, 569111 Ang	Mo Kio - Tel:			
Handling Insurer:	MSIG Insuran	ce (Singapore) Pte. Ltd	. (HQ) - Tel: +6	5 6827 7888	[Handled by	Irene Tan Gek	ing - 6594 2541]	
Adjuster:	LKK Auto Cons	sultants Pte Ltd (HQ) -	Tel: 6256-3561	[Imm.Adv	ice due 17	/05/2018]		
Driver/Custo dian (Insured):	YEW NOOR EDI	(), NRIC: S8440630I,	Tel: +6592993	859			CASE LE	CAL
Adj Asg. Remarks:	OI'S DRIVER RE ACTION.	EPORTED "NO COLLISION	WITH TAXI, SP	ECIAL REQUEST	BY IRENE: 1	TO OUTSOURCE TO	J LKK IN CASE LE	JAL
ASSOCIATE	D MAIL RECEIV	/ED				V	iew All Compose	Case Mail
There are no	mail for this case							
ALL ASSOC	IATED TASKS				View All	Search Tasks	Create New Task	Complete
Due Date No results.			Subject Han	dler Assig	ned By	Completed On	Created On	Done

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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Attn:

Irene Tan Gek Ing

18 May 2018

Preliminary Advice

Insured Vehicle No : YN2522C

TP Vehicle No

: SHD9303B

Accident Date

: 11/05/2018

Make

: CHEVROLET EPICA

Assignment Date

: 16/05/2018

Date of Inspection : 16/05/2018

Est. Duration of Repair

: 2 days

Inspection At

: Trans-cab Auto Services (HQ) NO. 2 ANG MO KIO ST 63

Singapore 569111

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	20,817.43
Revised Amount	:S\$	2,233,566
Check Items (Estimated)	:S\$	573.714
Total	:S\$	2,807.28

:S\$ Lump Sum Repair

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

() Th	e vehicle is	economical/not	economical 1	for repair.
---	------	--------------	----------------	--------------	-------------

(X) The above survey was conducted on a 'without prejudice' basis.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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.

· · · · · · · · · · · · · · · · · · ·	ACCIDENT STATEMENT
Date Of Report	11/05/2018 16:48
Date Of Accident	11/05/2018 15:30
Exact Location Of Accident	JALAN BOON LAY SLIP ROAD TOWARDS BUKIT BATOK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD9303B
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	CHEVROLET
Model	EPICA-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND 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	TAXI
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	
Driver	
Name of Driver	LAU OUI WAH
NRIC No	S0298482B
Date Of Birth	27/12/1946
Occupation	OUTDOOR
Date Of Driving Pass	14/05/1966
Driving Experience	51 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98166811
Fax Number	

NOEMAIL

BLK 186 BUKIT BATOK WEST AVENUE 6

#08-173

Postcode 650186

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

Address

------- Company of Drivaria Cum Vahiala

*

Insurance Company of Driver's Own Vehicle

0

NO

NO.

NO

1

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?

Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

? YES

Was any other material or property damaged?

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

NO

If Yes, against whom?

Circumstances of Accident

On 11/5/18 at about 1530 hours, I was travelling straight along Jalan Boon Lay slip road towards Bukit Batok when i made a stop to check for oncoming vehicle. While stationary, Suddenly I felt an impact. Vehicle B (YN2522C) hit onto my taxi's rear portion.

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

YN2522C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

LAU OUI WAH

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SHD9303B

YES

NO

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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:
 - 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.

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Uz

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.

Sketch Plan #2 Pg. 1

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		1	p= VN2522C	-
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SCRIBE CIRCUMSTANCE	S OF THE ACCIDENT			
SCRIBE CIRCUIVISTAINCE				
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CLABATION		- 355		
	ticulars are true in every respect	2385		
	ticulars are true in every respect.	288		
ECLARATION We declare the foregoing par			Lory	
Ne declare the foregoing par	-Laus-		Lory	
			Low Y Reporting Centre Personnel's Signature Name:	

StARME SketchPlanForm_V9

2

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	icle
Owner ID Type:	Company
Owner ID: Vehicle Details	3878K
Vehicle No.:	SHD9303B
Vehicle to be Exported:	Yes
Intended De-registration Date:	11 May 2018
Vehicle Make:	CHEVROLET
Vehicle Model:	EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO
Primary Colour:	Red
Manufacturing Year:	2011
Engine No.:	Z20S1443787K
Chassis No.:	KL1LA69RJBB058914
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$14,052.00
Original Registration Date:	16 Dec 2011
First Registration Date:	16 Dec 2011
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$14,052.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Dec 2019
PARF Rebate Amount: Intended COE Rebate Details:	\$9,133.00
COE Expiry Date:	15 Dec 2019
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
QP Paid:	\$38,405.00
COE Rebate Amount:	\$7,652.00
Total Rebate Amount: Message	\$16,785.00
	ther renewed. The vehicle must be de-registered upon COE expiry or when the

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 11 May 2018

ОК

MSAT18062175 / Sng Ah Tee Motor & Panel Service Pte Ltd - Pioneer ENTRY DATE & TIME: 14/05/2018 10:53 SUBMITTED BY: JOYCE TAN LAI CHIN

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 14/05/2018 17:44

SINGAPORE ACCIDENT STATEMENT

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 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.
- 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.

foresaid.	ACCIDENT STATEMENT
Date Of Report	14/05/2018 10:53
Date Of Accident	11/03/2018 15:30
Exact Location Of Accident	ALONG BOON LAY AVE TOWARDS JLN BOON LAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	YN2522C
Insured/Policyholder	
Name Of Registered Owner	ISS FACILITY SERVICES PRIVATE LIMITED
Co Reg No	197200488G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-62279541
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FE84BE6SRDEA-3.0 D B30 (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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO NO
Policy Number	B29066531MKF
Cover Note Number	
Driver	
Name of Driver	YEW NOOR EDI
NRIC No	S8440630I
	25/12/1984

25/12/1984 Date Of Birth OUTDOOR Occupation 31/08/2015 Date Of Driving Pass

2 YEARS AND 6 MONTHS **Driving Experience**

Gender

Mobile Number

MALE

(LOCAL) +65-92993859

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

NIL

Postcode

Was driver an employee of the Insured's Company

YES

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

NO COLLISION

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

ON 11/05/2018 AT ABOUT 1530 HRS. MY VEHICLE IS TRAVELLING ALONG BOON LAY AVE TOWARDS JLN BOON LAY. VEHICLE B IS IN FRONT OF ME. WHEN VEHICLE B IS STOP AT SLIP ROAD OF BOON LAY AVE. I THEN APPLY MY BRAKE AND STOP IN TIME VEHICLE B COME DOWN FROM HIS VEHICLE, AND ASK ME WANT TO PAY OR GO MAKE AN ACCIDENT REPORT. BUT MY VEHICLE DIDN'T TOUCH ONTO VEHICLE B. REAR OF VEHICLE B DIDN'T HAVE ANY DAMAGE.

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

SHD9303B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the dalms process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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:
 - 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")
- 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:
 - 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.

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

(If driver is not the policyholder)

Date & Time:

Reporting Confre Personnel's Signature

Name:

NRIC/FIN No.:

I AM AWARED THAT MY IN SURER MAY HAVE A 14 DAY'S TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY, I WILL CHECK MY POLICY FOR MORE DETAILS.

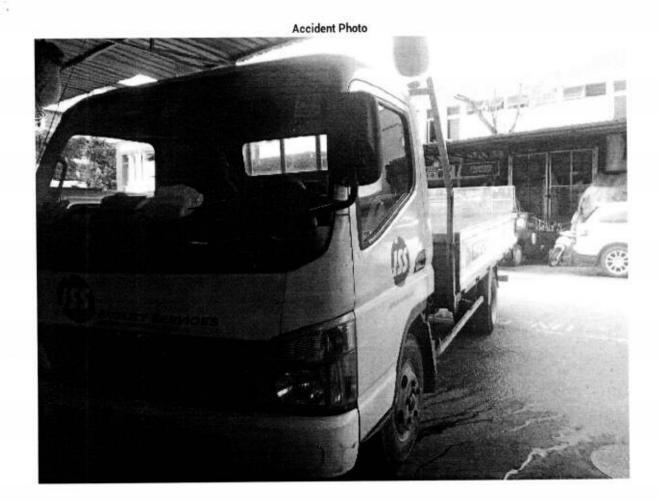
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		Claim own policy Claim third party
		Claim third party Claim OD / TP at other works hop
		For record purpose
ECLARATION		Policy No. 829 0 6655174 (C. 18) Insurer 17/5/67 Veh No. 7/7/352
We declare the foregoing part	ticulars are true in every respect.	Insurer_//(316) VernoVerno
	Yo e	
olicyholder's Signature	Dower's Signature	Reporting Centre Carsonnel's Signature
Date & Time:	(If driver is not the policyholder)	Name: NRIC/FIN No.:
	Date & Time!	the state of the s

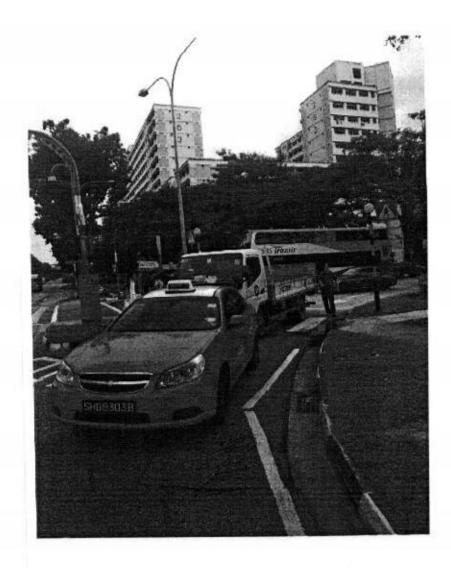
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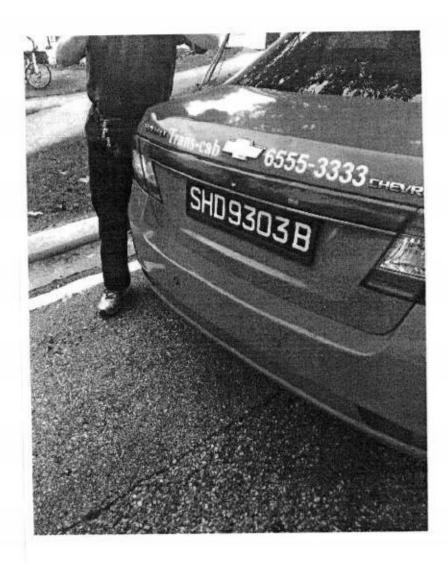
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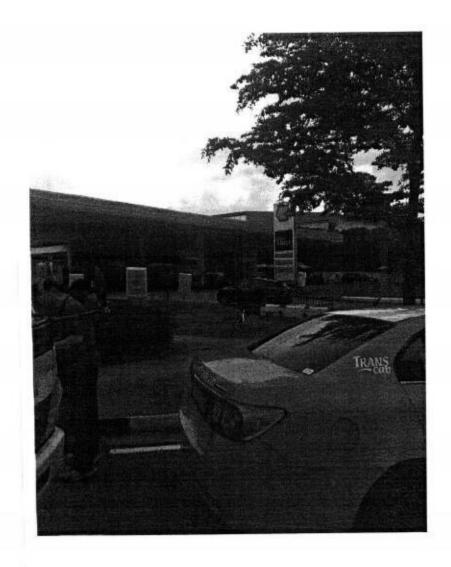












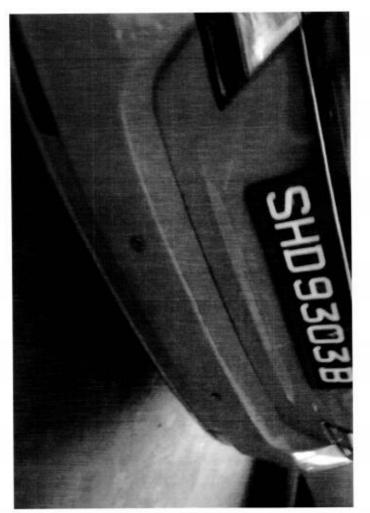


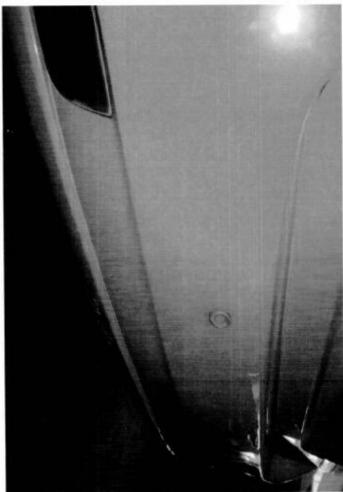


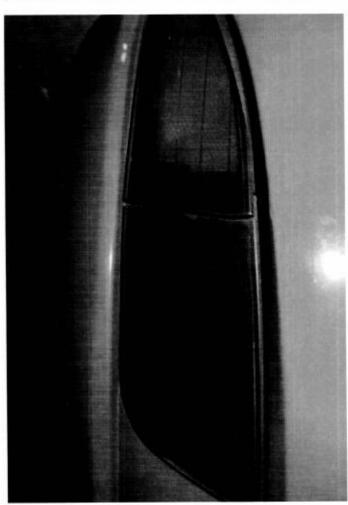












Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No.: 6287 6666

Fax No.: 6257 1330

CO./GST Reg. No. 201019626G

SHD 9303B

4s Hon plys

Vehicle No.:	SHD 9303B
Chassis No.:	KL1LA69RJBB058914
Vehicle Make:	CHEVROLET
Vehicle Model:	EPICA 2.0
Date of Accident :	11.5.2018
Third Party Insurer:	MSIG

		PART	LIST
1	1	Rear Bumper Admid	\$ 1,202.00
2	1	Rear Bumper Beam XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$ 239.94
3	1	Rear Bumper Centre Absorber	\$ 260.00
4	1	Rear Bumper Side Retainer RH ***	\$ 68.76
5	1	Rear Bumper Side Retainer LH	\$ 68.76
6	1	Rear Bumper Reflectors RH X AND Andre	\$ 119.74
7	1	Rear Bumper Reflectors LH	\$ 119.74
8	1	Rear Bumper Tow Hook Cover 🔀 🚈	\$ 93.00
9	1	Rear End Panel Outer X 14.2	\$ 623.76
10	1	Rear End Panel Inner Trim 🗴 💃	\$ 263.84
11	1	Rear Luggage Floor Panel 😕	\$ 973.00
12	1	Rear Luggage Floor Panel Insulator	\$ 63.50
13	1	Rear Luggage Floor Panel Trim Board	\$ 378.00
14	1	Bootlid × Sv	\$ 973.00
15	1	Bootlid inner trim board X 300	\$ 400.00
16	1	Bootlid Weatherstrip × 5	\$ 344.28
17	1	Bootlid Lock - Top 🗴 🗡	\$ 466.56
18	1	Bootlid 'CHEVROLET' Badge	\$ 120.62
19	1	Bootlid Logo × 14	\$ 138.84
20	1	Bootlid 'EPICA LT' Badge ★ 45	\$ 119.84
21	1	Bootlid Reflector Centre ✓ ✓ ✓	\$ 217.97
22	1	Bootlid Reflector RH & JM	\$ 128.40
23	1	Bootlid Reflector LH ⋟ 50-	\$ 128.40
24	1	Rear Tail Lamp RH 🗡	\$ 479.30
25	1	Rear Tail Lamp LH 😕 🧬	\$ 479.30
26	1	Rear Exhaust Box (Muffler A-EXH,RR) * 500	\$ 1,110.00
27	1	Rear Fender RH 🗴 🔊	\$ 1,145.00
28	1	Rear Fender Inner Trim RH ℃ 5~	\$ 418.44
29	1	Rear Fender LH 🗴	\$ 1,145.00

No. 2 Ang Mo Kio Street 63 Singapore 569111

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SHD 9303B

30	1	Rear Fender Inner Trim LH 🗶 💃	\$ 418.44
		TOTAL	\$ 12,707.43
		10%	\$ 1,270.74
		1000000	\$ 11,436.69
		Specical Nett	*
1	1Set	Bootlid inner trim board Clip × st. de	\$ 40.00
2	1Set	Rear Bumper Parking Sensor	\$ 300.00 250
3	1Set	Rear Bumper Fastener Clip /	\$ 44.00
4	1Set	Rear Fender Inner Trim Clip LH 🗶 😁	\$ 30.00
5	1Set	1	\$ 30.00
6	1	Rear Exhaust Mounting × 1	\$ 300.00
7	2	Rear Windscreen Sealant × 41	\$ 80.00
8	1	Rear Windscreen Inner Sponge Seal 😾 😘	\$ 100.00
9	1	Spare Tyre 🗴 🏸	\$ 180.00
10	1	Spare Wheel Rim 🗴	\$ 126.74
		TOTAL	\$ 1,230.74
		TOTAL PARTS	\$ 12,667.43
		Panel Beating, Knocking And Straightening The	
		Necessary Portion, Remove And Renewal Of	
		Parts, Adjust And Realign The Same	\$ 3,500.00 300
		To Check Electrical Lighting Concerned.	\$ 170.00 ×
		To Rust-Proofing Of The Affected Areas.	\$ 170.00 ×
		Putty And Spray Painting Of The Affected	_300
		Portion.	\$ 3,200.00 20 170.00 20
		To reinstall rear bumper parking sensor.	\$ 170.00 20

Trans-cab Auto Services Pte Ltd

AAD1805-111

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No.: 6287 6666

Fax No.: 6257 1330

CO./GST Reg. No. 201019626G

SHD 9303B

TOTAL	\$ 20,817.43
	\$ 8,150.00
To check steering geometry and computer wheel alignment	\$ 229.00 5
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$ 380.00 50
To transfer of boot fittings and conduct water seepage test.	\$ 170.00 × 11
To transfer of end panel fittings and conduct water seepage test.	\$ 170.00 > 11

Repair Days (LUMP SUM)

10 Days

Kahi (((K)

16/5/18 1415/18

2 lys.

Lump In Repeir

After Auto Conjultants hence in the Repairer of the following:

• To resurvey before after spray paint

- 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:

...CLAIM SUBFOLDER...(Pending for Survey Report)

THE RESIDENCE OF THE PARTY OF T	OLDER TRA	Est Submitted	Adi Assigned	Adj Rpt	Adj Subi	mitted	Ins Auth'ed	Status		
	Notified 14 May 2018	Est Subaminos	16 May 2018 13:52 Edit Adj Rpt	S\$1,600.00 Edit Estimate	5\$1,60 View R	Charles & Charle		Pending for Survey Report Cancel Case		rey
1-	tain	Re	ference	Cla	aim Details	\prod	Docume	nts		how All
CLAIM SUI	SFOLDER DE	TAILS					ed by insurer]			
Insured:	ISS FACIL	ITY SERVICES P	RIVATE LIMIT	ED, Co. Reg.	No.: 1972004	88G				
Main Claimant:		TRANS-CAB SERVICES PTE LTD, Co. Reg. No.: 200303878K								
Vehicle Reg. No.:	SHD930	3B			Date of Loss:	11/05/2018 15:00 - :59 [76 Months and 25 Days From LTA Reg Date (Man			Man Yr)]	
Claim Type:	TP / 558	307			Policy/Cover Note No.:	B29066531MKF (Comprehensive) Coverage: 01/01/2018 - 31/12/2018				
Vehicle Reg No. (Insured):	YN2522C				Policy No. (Claimant):					
(Insureu).					Excess:	5\$1,00				
Repairer:	Trans-ca	b Auto Services	(HQ) NO. 2 ANG	MO KIO ST 63	, 569111 Ang	Mo Kio -	Tel:			
Handling Insurer:	MSIG Ins	urance (Singapo	ore) Pte. Ltd. (HQ) - Tel: +65	6827 7888	. [Handle	d by Irene Tan G	ek Ing - 65	94 2541]	
Adjuster:	15/06/2	Consultants Pte 018]	ttd (HQ) - Tel	: 6256-3561	. [Handled by	KALVIN	ANG WEI KUN]	[Final	KPt due	
Driver/Cust dian (Insured):	YEW NOO	GREENIN CONTRACTOR		el: +65929938			TO OUTCOUR	F TO LVV !!	CASELE	GAL
Adj Asg. Remarks:	OI'S DRIV	ER REPORTED "NO	COLLISION" W	/ITH TAXI. SPE	CIAL REQUEST	F BY IREN	NE: TO OUTSOURC	E IO LKK II		
ASSOCIA	TED MAIL RI	ECEIVED						View All	Compos	e Case Mai
There are r	o mail for this	s case.								
ALL ASSO	CIATED TA	sks=				View	All Search Task	Create	New Task	Complete
Due Dat			Group Sut	oject Hand	ler Assig	ned By	Completed	On Cr	eated On	Done

Claim Documents

*SHD9303B (558307) [YN2522C]

TRANS-CAB SERVICES PTE LTD May 11 2018 3:00PM [ISS FACILITY SERVICES PRIVATE LIMITED] Trans-cab Auto Services

Uple	oad Documents Uplo	ad Photos Compose New Letter	View	View in Brows	ser *
Asse	essment Reports		1 per	page ▼	•
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	16/05/18 13:19	Accident Statement From:SC - Reg. No: YN2522C, Claimant: ISS FACILITY SERVICES PRIVATE LIMITED	0	Load HTM	
2	16/05/18 13:19	Addendum Sheet From:SC - Reg. No: YN2522C, Claimant: ISS FACILITY SERVICES PRIVATE LIMITED	0	Load TIF	
3	16/05/18 13:19	Accident Statement Addm. #1 From:SC - Reg. No: YN2522C, Claimant: ISS FACILITY SERVICES PRIVATE LIMITED	0	Load HTM	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	-	Thumbnail	Print
1	18/05/18 15:38	Adjuster Immediate Advice	0	Load HTM	
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No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	0	Load JPG	
1	17/05/18 08:17	General View		7 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	•
2	17/05/18 08:17	General View	0	Load JPG	
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6	17/05/18 08:17	General View	0	Load JPG	•
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17	17/05/18 08:17	General View	0	Load JPG	•
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19	17/05/18 08:17	General View			
Do	cumentation		1 pe	rpage ▼	•
No	Finalized On	MSIG Insurance (Singapore) Pte, Ltd. (HQ)		Thumbnail	Print
1	16/05/18 13:19	TP ACCIDENT REPORT SHD9303B From:SC - Reg. No: YN2522C, Claimant: ISS FACILITY SERVICES PRIVATE LIMITED	0		
2	30/08/18 13:57	LOD & SUPPORTING DOCUMENTS	0		1
3	30/08/18 20:03	instruction to LKK to prepare consistency damage report	0		
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnai Load PDF	-
1	01/10/18 14:27	INVESTIGATION REPORT	0	LOSO PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other parties.	

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/MSG18008900/K1SD3S2

Date:

01/10/2018

REFERENCE

MSIG Insurance (Singapore) Pte. Ltd. Handling Insurer:

Policy No:

B29066531MKF

Claimant Vehicle

SHD9303B

Insured Vehicle No:

YN2522C

No: Date of Loss: 11/05/2018

Nature of Claim:

TP

Claim No: 558307

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHD9303B

CHEVROLET EPICA, 2.0 2.0DSL AT ABS D/AB 2WD

Engine No:

Z20S1443787K

Make & Model: Reg. Date:

4DR TUR (A) 16/12/2011 (Man. Year: 2011)

Chassis No:

KL1LA69RJBB058914

Colour:

Red

Odometer:

632217 km

Engine Capacity:

1991 cc

Market Value/New Car Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Fair

Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable):

Engine Modification: Yes

Pre-accident Condition: No

CONDITION OF TYRES

Front Tyre Size:

195/65R15

Rear Tyre Size:

195/65R15

Front Left Side:

Linglong 7 mm Linglong 7 mm Rear Left Side: Rear Right Side: Linglong 7 mm Linglong 7 mm

Front Right Side: The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
	12.667.43	1,405.80	11,261.63	88.90
Parts Miscellaneous Items	0.00	0.00	0.00	
	8,150.00	620.00	7,530.00	92.39
Labour Paintwork Labour	0.00	0.00	0.00	
	0.00	0.00	0.00	
Towing		2,025.80	18,791.63	90.27
Calculated Gross Total (S\$)	20,817.43		10,731.03	55.2.
Approved Total (Overridden) (S\$)		1,600.00		
(S\$)	20,817.43	1,600.00	19,217.43	92.31
+ GST 7.00/7.00% (S\$)	1,457.22	112.00	1,345,22	92.31
Nett Amount (S\$)	22,274.65	1,712.00	20,562.65	92.31

INSPECTION

Date of Assignment:

16/05/2018

Date Inspected:

16/05/2018

Trans-cab Auto Services (HQ) NO. 2 ANG MO KIO ST 63

Singapore 569111

Estimated Period of Repair:

2.0 days

KALVIN ANG WEI KUN Adjuster:

Manager:

Hiew May Fung

Inspected At:

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

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 01 Oct 2018)

Parts: 143 CHEVROLET EPICA 2.0 2.0DSL AT ABS D/AB 2WD 4DR TUR (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SHD9303B)

Validity: 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

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

	COMMENDE Qty Part No.		Condition	Repairer's	Amount
1	1	*REAR BUMPER	Deformed	1,202.00 FL	*1,202.00 FL
2	1	REAR BUMPER BEAM	Serviceable	239.94 FL	*-FL
3	1	*REAR BUMPER CENTRE ABSORBER	Serviceable	260.00 FL	*-FL
4	1	*REAR BUMPER SIDE RETAINER RH	Serviceable	68.76 FL	*-FL
5	1	*REAR BUMPER SIDE RETAINER LH	Serviceable	68.76 FL	*-FL
6	1	*REAR BUMPER REFLECTORS RH	Serviceable	119.74 FL	*-FL
7	1	*REAR BUMPER REFLECTORS LH	Serviceable	119.74 FL	*- FL
8	1	*REAR BUMPER TOW HOOK COVER	Serviceable	93.00 FL	*-FL
9	1	*REAR END PANEL OUTER	Repair	623.76 FL	*- FL
10	1	*REAR END PANEL INNER TRIM	Serviceable	263,84 FL	*-FL
11	1	*REAR LUGGAGE FLOOR PANEL	Serviceable	973.00 FL	*- FL
12	1	*REAR LUGGAGE FLOOR PANEL INSULATOR	Serviceable	63.50 FL	*-FL
13	1	*REAR LUGGAGE FLOOR PANEL TRIM BOARD	Serviceable	378.00 FL	*-FL
14	1	*BOOTLID	Serviceable	973.00 FL	*-FL
15	1	*BOOTLID INNER TRIM BOARD	Serviceable	400.00 FL	*-FL
16	1	*BOOTLID WEATHERSTRIP	Serviceable	344.28 FL	*-FL
17	1	*BOOTLID LOCK - TOP	Serviceable	466.56 FL	*-FL
18	1	*BOOTLID CHEVROLET BADGE	Not Necessary	120.62 FL	*-FL
19	1	*BOOTLID LOGO	Not Necessary	138.84 FL	*-FL
20	1	*BOOTLID EPICA LT BADGE	Not Necessary	119.84 FL	*-FL
21	1	*BOOTLID REFLECTOR CENTRE	Serviceable	217.97 FL	*-FL
22	1	*BOOTLID REFLECTOR RH	Serviceable	128.40 FL	*-FL
23	1	*BOOTLID REFLECTOR LH	Serviceable	128.40 FL	*-FL
24	1	*REAR TAIL LAMP RH	Serviceable	479.30 FL	*-FL
25	1	*REAR TAIL LAMP LH	Serviceable	479.30 FL	*-FL
26	1	*REAR EXHAUST BOX (MUFFLER A-EXH,RR)	Serviceable	1,110.00 FL	*-FL
27	1	*REAR FENDER RH	Serviceable	1,145.00 FL	*-FL
28	1	*REAR FENDER INNER TRIM RH	Serviceable	418.44 FL	*-FL
29	1	*REAR FENDER LH	Serviceable	1,145.00 FL	*-FL
30	1	*REAR FENDER INNER TRIM LH	Serviceable	418.44 FL	*-FL
31	1	*SET BOOTLID INNER TRIM BOARD CLIP	Not Necessary	40.00 FS	*-FS
32	1	*SET REAR BUMPER PARKING SENSOR	Shorted	300.00 FS	*250.00 FS
33	1	*SET REAR BUMPER FASTENER CLIP	Necessary	44.00 FS	*44.00 FS
34	1	*SET REAR FENDER INNER TRIM CLIP LH	Not Necessary	30.00 FS	*-FS
35	1	*SET REAR BUMPER END DUST COVER CLIP	Necessary	30.00 FS	*30.00 FS
36	1	*REAR EXHAUST MOUNTING	Not Necessary	300.00 FS	*-FS
37	2	*REAR WINDSCREEN SEALANT	Not Necessary	80.00 FS	*-FS
38	1	*REAR WINDSCREEN INNER SPONGE SEAL	Not Necessary	100.00 FS	*-FS
39	1	*SPARE TYRE	Serviceable	180.00 FS	*-FS
40	1	*SPARE WHEEL RIM	Serviceable	126.74 FS	*-FS
		cNett, L=ListItemDisc.			

/1/2018			Adjuster Report		
lo. Qty	Part No.	Particulars	Condition	Repairer's	Amount
			- List Item Discount on L Items 10.00/10.00% (S\$)	1,270.74	120.20
			Total Parts (S\$)	12,667.43	1,405.80

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recor	mmor	hohe	l ahou	ır
Recor	mmer	icieci	Labor	

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items			
1	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME.	New	3,500.00	300.00
2	TO CHECK ELECTRICAL LIGHTING CONCERNED.	New	170.00	0.00
3	TO RUST-PROOFING OF THE AFFECTED AREAS.	New	170.00	0.00
4	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.	New	3,200.00	300.00
5	TO REINSTALL REAR BUMPER PARKING SENSOR.	New	170.00	20.00
6	TO TRANSFER OF END PANEL FITTINGS AND CONDUCT WATER SEEPAGE TEST.	New	170.00	0.00
7	TO TRANSFER OF BOOT FITTINGS AND CONDUCT WATER SEEPAGE TEST.	New	170.00	0.00
8	TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR.	New	380.00	0.00
9	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	New	220.00	0.00
	Gross Labou	ır Cost (S\$)	8,150.00	620.00

Report was unsubmitted during this print-out. < END OF ESTIMATES >