

22/03/2002

ASS. REC. BY:

REF:

CS/FCI18009387/Ktd3d

Special Instruction:

Surveyor:

CWS

ASSIGNMENT (Office)

From (Person):

Joanne Yong

of

FCI

Date/Time:

28/5/2018 @ 2:44pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLW 8290M

Insured:

SH 6437S

at Workshop m/s

Esteem Performance

Tel:

64841221

of

Blk 5033 AMK, Ind. Park 2 # 01-251/259

Policy No:

Claim No:

D18004097MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

19/05/2018

CA / REV / REP. / REV 24 HRS (wp)

H.O.D. Endorsement:

Date/Time:

2:54pm @ 23/5/18

Person Contacted:

jenny

Vehicle IN (OUT)

Date/Time

Action/Instruction (✓) Estimate

SLW 8290M-X

SH 6437S-CC3/AIG18002379/Klyb Bq2

DOA: 03/02/2018

13/6 L1 Rep 824501 confirmed by email (Red: 4114.64 / 62%)

ASS. REC. BY:

REF:

100 F021

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

04 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLW 8290

Yr Regn:

03, 18

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

Truck / Trailer or

Make:

Honda Shuttle

c.c.

1498

Colour:

M. Grey

A/C: Insured / Std / NI / NA

Sp. Reading

29486

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

GP7. 1207626

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

205/45R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

1/18

D.O.I.

30/5/18

Survey held at

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

31/5

File pass to Catherine

RECEIVED 14 JUN 2018

Date/Time, File Pass to?



: Prel. Report



: Final Report

Date/Time, File Return to?

Days Of Repair:

4

Resurvey No. of Trip:

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Survey Fee:

145

Transportation:

50

S + RS. \$

50

Photos

11

Others

TOTAL

256

Report Format:

TP

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

2450

MOTOR SURVEY ASSIGNMENT

Date	22-05-2018	Our Ref No. D18004097MFSH
Accident Date	19-05-2018	Claim Type. Third Party
Insured Vehicle	SH6437S	Third Party Vehicle. SLW8290M
Survey Location	BLK 5033 ANG MO KIO, IND PARK 2 #01-251/259	
Contact Person.	SERENCE CHEE	
Contact No.	64841221/ 0	Fax No. 0
Survey Type	DIRECT SETTLEMENT:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	ESTEEM PERFORMANCE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	JOANNEY	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Job Sheet (/ClaimWS/Surveyor/JobSheet/240650)



PRI Documents



Close



PRI Header Details

Claim No	D18004097MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & ESTEEM P
Workshop Name	ESTEEM PERFORMANCE PTE LTD (Contact Person : SERENCE CHEE)	Survey Location & Contact Details	BLK 5033 ANG MO KIO, IND PARK 2 #01-251/259 Mobile: 0 , Phone: 64841221 , Fax: 0 EmailId: SERENCE@ESTEEMPERF.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SH6437S	TP Vehicle No	SLW8290M
PRI Recieved Date	22-05-2018 08:14:48 PM	Surveyor Appointed Date	23-05-2018 02:43:15 PM	Surveyor Accept Date	23-05-2018 0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	23-05-2018	Upload Survey Report *:	<input type="button" value="Choose File"/>
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select Year"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Remarks

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	21/05/2018 11:07
Date Of Accident	19/05/2018 20:05
Exact Location Of Accident	RAFFLES AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW8290M
Insured/Policyholder	
Name Of Registered Owner	KOH LI WEI (XU LIWEI)
NRIC No	S7233594E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84442424
Alternative Phone No	OTHERS-84442424

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098339662 (DRIVO CLASSIC)
Cover Note Number	

Driver

Name of Driver	KOH LI WEI (XU LIWEI)
NRIC No	S7233594E
Date Of Birth	22/09/1972
Occupation	OUTDOOR
Date Of Driving Pass	07/10/1992
Driving Experience	25 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84442424
Fax Number	
Contact Number	OTHERS-84442424
EMail Address	NOEMAIL

Address	BLK 302B ANCHORVALE LINK #02-186
Postcode	542302
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SELF-EMPLOYED
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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	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

REFER TO STATEMENT ATTACHED. (ATTENDED BY CHRISTINA)

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	SH6437S
Vehicle Make/Model/Colour	MERCEDES
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	96503342
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

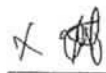
SKETCH PLAN


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.

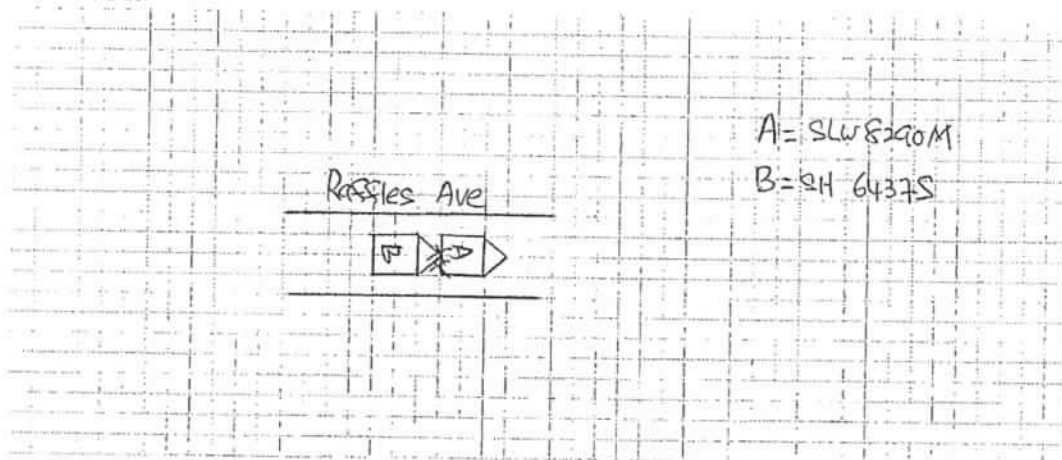

Policyholder's Signature
Date & Time:


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

21 MAY 2018


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 19/5/2018 @ 8:05pm, I was driving along Raffles Ave


All of sudden, vehicle SH 6437S behind of me hit onto my Rear portion.


*Remark : Prefer workshop "Esteem Performance Pte Ltd"

DECLARATION

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


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.:

monday call owner



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Repair Estimates

SLW 8290 M

Parts	(a) Cost / List Price Items	\$	4,230.80
	Plus/Less 20%	\$	846.16
	Total of Cost / List	\$	3,384.64
	(b) Nett Price Items		
	Less		
	Total of Nett Item		
	(c) Special Nett Items	\$	200.00
Total Parts Cost		\$	3,584.64
Labour		\$	2,980.00
Total		\$	6,564.64

Not Authorized
1-B1
Resurvey B4 pain

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:

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Kennerth
Company : LKK
Survey conducted on : 30/5/18 at _____

Remarks By Surveyor

(a) The repair of this vehicle is ~~authorized~~ / is not authorized until further notice.

(b) Recommended Days of Repair : 04 day(s)

(c) Resurvey : Required / ~~Not Required~~

(d) Excess : \$ _____

(e) Signature of surveyor : Le Date: 30/5/18



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Spare Parts

Vehicle No. : **SLW 8290 M** Submit By : **Carmen Lim**
Make & Model : **HONDA SHUTTLE** Year Manufacture : **2017**
Chassis No : **GP71201626** Engine No. :
Cost / List

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
1	Rear windscreen moulding	1	\$25.00		✓
2	Rear windscreen sealant	1	\$50.00		✓
3	Reverse sensor	2	\$200.00	S.N	✓
4	Rear bumper	1	\$1,180.60		✓
5	Rear bumper clip	10	\$40.00		✓
6	Rear bumper side retainer LH	1	\$26.50		X
7	Rear bumper side retainer RH	1	\$26.50		X
8	Rear bumper bracket LH	1	\$48.70		X
9	Rear bumper bracket RH	1	\$48.70		X
10	Rear bumper sponge	2	\$185.50		✓
11	Tail door	1	\$1,195.00		✓
12	Tail door lock	1	\$159.10		X
13	Tail door emblem	1	\$38.00		✓
14	Wording "SHUTTLE"	1	\$35.00		✓
15	Tail door chrome	1	\$387.20		X
16	Tail end panel	1	\$609.50		X
17	Tail end panel garnish	1	\$175.50		X
18					
19					
20					
21					
22					
23					

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536.
Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteemperf.com.sg

Labour

Vehicle No. : **SLW 8290 M** Submit By : **Carmen Lim**
Make & Model : **HONDA SHUTTLE** Year of Manufacture : **2017**

S/No	Labour Description	Estimated Price	Adjusted Price
1	TO RENEW DAMAGED PARTS & KNOCK OUT ACCIDENT REPAIR AREA. (REAR BUMPER, TAILDOOR, END PANEL, SPARE TYRE WELL PANEL)	\$1,200.00	400
2	TO PUTTY, RESPRAY PAINT FOR AFFECTED ACCIDENT REPAIR AREA. (REAR BUMPER, TAILDOOR, END PANEL, SPARE TYRE WELL PANEL)	\$1,000.00	400
3	To check wiring	\$50.00	15
4	To remove & refit reverse sensor	\$120.00	50
5	To tuff coat	\$100.00	30
6	To remove & refit spare tyre, spare tyre board, carpet trim to assist work load. ~	\$150.00	X
7	To remove & refit rear windscreen.	\$120.00	120
8	To transfer boot mechanism to new boot	\$120.00	60
9	To conduct water leakage tests to ensure proper air and sealing ~	\$120.00	X

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.



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

Affiliated to Federation Internationale Des Experts En Automobile

FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI18009387/Ktd3e2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 18-06-2018



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SH 6437S	Veh. Inspected	SLW 8290M
Policy No.	D-18088936MFSH	Coverage (\$)	0.00
Claim No.	D18004097MFSH	Excess (\$)	0.00
Assign From	JOANNE YONG	Assign Date	23/05/2018

2. Vehicle Particulars & Condition

Make & Model	HONDA SHUTTLE (A)	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	GP71201626	Colour	METALLIC GREY
Odometer	29486	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/45 R16	YOKOHAMA	9 mm
L/H Front Tyre	205/45 R16	YOKOHAMA	9 mm
R/H Rear Tyre	205/45 R16	YOKOHAMA	9 mm
L/H Rear Tyre	205/45 R16	YOKOHAMA	9 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	19/05/2018	Inspection Date	30/05/2018
Survey held at	ESTEEM PERFORMANCE PTE LTD BLK 5033 ANG MO KIO INDUSTRIAL PARK 2 #01-259 SINGAPORE 569536		

5a. Remarks

A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLW 8290M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR WINDSCREEN MOULDING	NECESSARY	25.00	25.00
1	REAR BUMPER	BUCKLED	1,180.60	1,180.60
10	REAR BUMPER CLIP	NECESSARY	40.00	40.00
1	REAR BUMPER SIDE RETAINER LH	SERVICEABLE	26.50	-
1	REAR BUMPER SIDE RETAINER RH	SERVICEABLE	26.50	-
1	REAR BUMPER BRACKET LH	TO REPAIR SEE LABOUR	48.70	-
1	REAR BUMPER BRACKET RH	TO REPAIR SEE LABOUR	48.70	-
2	REAR BUMPER SPONGE	SERVICEABLE	185.50	-
1	TAIL DOOR	BENT	1,195.00	1,195.00
1	TAIL DOOR LOCK	TO REPAIR SEE LABOUR	159.10	-
1	TAIL DOOR EMBLEM	NECESSARY	38.00	38.00
1	WORDING "SHUTTLE"	NECESSARY	35.00	35.00
1	TAIL DOOR CHROME	SERVICEABLE	387.20	-
1	TAIL END PANEL	TO REPAIR SEE LABOUR	609.50	-
1	TAIL END PANEL GARNISH	SERVICEABLE	175.50	-
	LESS 20% DISCOUNT		-836.16	-502.72
			3,344.64	2,010.88
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	50.00	40.00
	LESS 20% DISCOUNT		-10.00	-
			40.00	40.00
SPECIAL NETT ITEMS				
2	REVERSE SENSOR (SN)	SERVICEABLE	200.00	-
			200.00	-

Report Ref No. CS/FCI18009387/Ktd3e2



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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	TO RENEW DAMAGED PARTS & KNOCK OUT ACCIDENT REPAIR AREA.(REAR BUMPER,TAILOOR,END PANEL,SPARE TYRE WELL PANEL).INCLUSIVE OF THE REPAIR OF REAR BUMPER BRACKET LH,REAR BUMPER BRACKET RH, TAIL DOOR LOCK AND TAIL END PANEL.		1,200.00	400.00
	TO PUTTY,RESPRAY PAINT FOR AFFECTED ACCIDENT REPAIR AREA.(REAR BUMPER,TAILOOR,END PANEL,SPARE TYRE WELL PANEL).		1,000.00	400.00
	TO CHECK WIRING.		50.00	15.00
	TO REMOVE & REFIT REVERSE SENSOR.		120.00	50.00
	TO TUFF COAT.		100.00	30.00
	TO REMOVE & REFIT SPARE TYRE,SPARE TYRE BOARD,CARPET TRIM TO ASSIST WORK LOAD.	NOT NECESSARY	150.00	-
	TO REMOVE & REFIT REAR WINDSCREEN.		120.00	120.00
	TO TRANSFER BOOT MECHANISM TO NEW BOOT.		120.00	60.00
	TO CONDUCT WATER LEAKAGE TESTS TO ENSURE PROPER AIR AND SEALING.	NOT NECESSARY	120.00	-
			2,980.00	1,075.00
	GRAND TOTAL		6,564.64	3,125.88
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,450.00

Report Ref No. CS/FCI18009387/Ktd3e2

KONG SENG CHEONG

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.