

1081 (1/1/3)  
Kalin

REF: NS/INC18010099/K19b n2

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspected Vehicle No: \_\_\_\_\_

at Workshop no/s \_\_\_\_\_

of \_\_\_\_\_

Insured: SJK 4437 X

Policy No: 5093539178 - 01 270218

Claims No: M7/0997402 - 02

Surplus: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / .REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SHA31024 Yr Regn: 30 May 2015

Type: M.Car / M.Cycle / Bus / Van / Lorry / T~~O~~ / Prime Mover /

Truck / Trailer or

Make: Hyundai I40 c.c. 1685

Colour: Blue A/C: Ins / Std / NI / NA

Sp. Reading: 238165 T/Radio: Ins / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMHCB414446069396

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In / Jammed / Leaked / Burnt or

Brake: In / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / ST~~O~~ / Rim or

Tyre Size; F: 205/60R16

R: \_\_\_\_\_

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

TOYO / YOKO or Hankook

Front: \_\_\_\_\_ Rear: \_\_\_\_\_

R/Bal. 7 mm R/Bal. 1 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 3/6/8 D.O.I. 4/6/8

Survey held at CPGE (Loyang)

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

Rear sp.

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

Date / Time Action / Instruction

SHA 31024 - CC3/TP15019470/K19b n2 DCA: 13.11.15 INC

SJK 4437 X - X 4

6/6/8 Contract 418450 / 2 Pgs. (Ref 81987.58, 817.)

RECEIVED 8 JUN 2010

Date/Time, File Pass to?  : Prell. Report

1) 08/6/15 Kalin  : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:	
Transportation:	
\$ + RS. \$	
Photos	
Others	
TOTAL	<u>160</u>

- Add Fee:
- : Site Insp (\$ \_\_\_\_\_)
  - : Interview (\$ \_\_\_\_\_)
  - : Tech. Invs (\$ \_\_\_\_\_)
  - : Weekend (\$ \_\_\_\_\_)

Report Format: 7P

Lump Sum / I.B.I: (\$) 450



# National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

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



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18010099/K1qb			
73 BRAS BASAH ROAD		Date: 04-06-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Code: INC4	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SJK 4437X	Veh. Inspected	SHA 3102U
Policy No.	5083539178-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	04/06/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	03/06/2018	Inspection Date	04/06/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

Hello, NAC\_PAYA\_UBI\_800601

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[Notice of Loss](#)

**Policy Query**

Policy No.  Date of Accident   
Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5083539178-01	AC CAR RENTAL PTE. LTD.	201613097D	GFT	drive CLASSIC	SJK4437X	SJK4437X	27/02/2018	

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	Tentative repair cost
1	MT/0997402-002	COMFORT TRANSPORTATION PTE LTD	SHA 3102U	SJK 4437X	03/06/2018	\$ 2,431.58	\$ 450.00
2	MT/0996966-002	CITYCAB PTE LTD	SHA 8202G	SJF 5615T	01/06/2018	\$ 2,077.44	\$ 1,100.00
3	MT/0997824-001	CITYCAB PTE LTD	SHA 811B	SLH 5573X	30/05/2018	\$ 3,265.96	\$ 2,850.00
4	MT/0994720-002	SMRT TAXI PTE LTD	SHB 5571E	GU 5967J	15/05/2018	\$ 6,170.40	\$ 2,240.23
5	MT/0992549-002	SMRT TAXI PTE LTD	SHF 441J	SHB 8401T	01/05/2018	\$ 26,621.94	\$ 8,100.00
6	MT/0994278-002	SMRT TAXI PTE LTD	SHC 4212T	XE 565B	13/05/2018	\$ 21,016.42	\$ 4,600.00
7	MT/0997827-001	SMRT TAXI PTE LTD	SHC 4382K	SKT 1790K	19/05/2018	\$ 1,449.70	\$ 300.00
8	MT/0994682-002	SMRT TAXI PTE LTD	SHC 4536J	GBD 5726L	14/05/2018	\$ 5,555.30	\$ 950.00
9	MT/0997288-002	COMFORT TRANSPORTATION PTE LTD	SHD 3230S	SJN 6185T	02/06/2018	\$ 2,736.58	\$ 1,302.98
10	MT/0997833-001	COMFORT TRANSPORTATION PTE LTD	SHC 1781L	SJT 1714T	03/06/2018	\$ 5,712.98	\$ 2,300.00
11	MT/0997524-002	COMFORT TRANSPORTATION PTE LTD	SHA 3460K	GBG 4353U	05/06/2018	\$ 2,752.02	\$ 900.00
12	MT/0997717-002	COMFORT TRANSPORTATION PTE LTD	SHC 2931P	GBC 3789Z	05/06/2018	\$ 2,751.20	\$ 1,250.00
13	MT/0996973-002	COMFORT TRANSPORTATION PTE LTD	SHA 3075P	FBE 3401G	01/06/2018	\$ 1,087.44	\$ 508.00
14	MT/0997835-001	COMFORT TRANSPORTATION PTE LTD	SHA 3514P	SJA 2496R	04/06/2018	\$ 2,836.58	\$ 800.00

Claim received from LKK Auto

## 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	04/06/2018 12:02
Date Of Accident	03/06/2018 14:45
Exact Location Of Accident	FARRER RD TWDS HOLLAND RD NEAR SPANISH CONDO.
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA3102U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I40
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

### Insurance Company

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

### Driver

Name of Driver	TAN KHING SAN
NRIC No	S7046031I
Date Of Birth	22/12/1970
Occupation	OUTDOOR
Date Of Driving Pass	08/07/1988
Driving Experience	29 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81800960
Fax Number	
Contact Number	
EMail Address	ATKS1336@GMAIL.COM

Address	BLK 148 RIVERVALE CRESCENT #13-36
Postcode	540148
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	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 ATTACHED

#### 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	SJK4437X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT
No. Of Passenger (Including Driver)	

## Sketch Plan Pg. 1

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

*V or*  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*Willa 7 4/6*  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

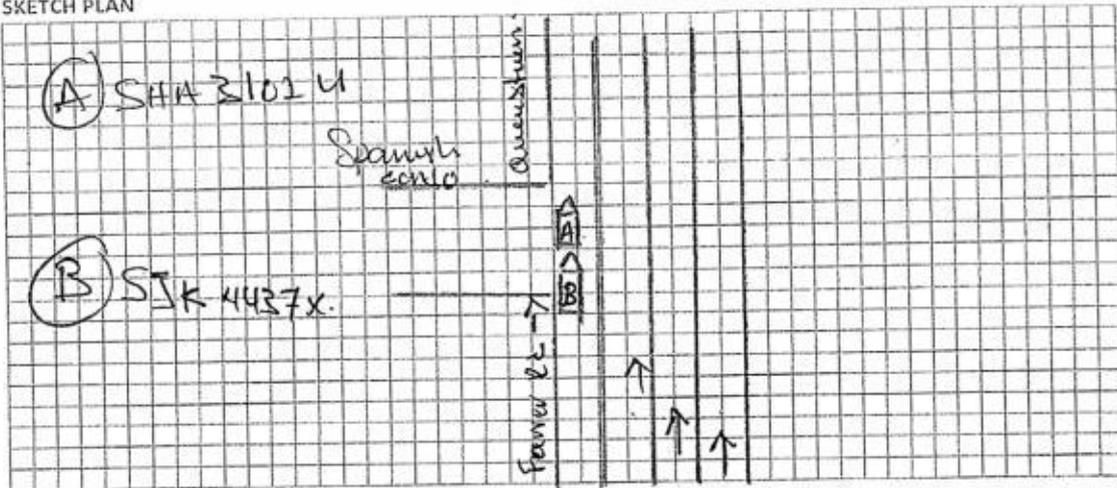
GIA/RMC SketchPlanForm\_V3



1

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 5 June @ 14.45 hrs 2018 I VEH -

(A) was driving along Farrer Rd towards Holland. along the way I VEH (A) slow down to stop to pick up passenger on the left lane. Suddenly VEH (B) from the left lot VEH (A) Rear. at the point of accident no passenger on VEH (A).

DECLARATION

I/We declare the foregoing particulars are true in every respect.  
 COMFORT TRAINING CORPORATION PTE LTD  
 CO. REG. NO. 1303821R

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.:

*(Signature)* 4/6



NTUC - 4Sum - TS

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SHA 3102U

DATE 4/6/2018

MAKE :

LKK - kalvin

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>X repair</i>			\$ 603.60
	Rear Bumper Reinforcement <i>X sec</i>			\$ 504.35
	Rear Bumper Reinforcement Bracket (LH/RH) <i>X sec</i>		\$ 180.00	\$ 360.00
	Rear Bumper Side Bracket <i>X sec</i>			\$ 49.00
	Rear Bumper Clips <i>X "</i>			\$ 22.00
	Rear Bumper Sponge <i>X "</i>			\$ 143.40
	Rear Bumper Under Cover <i>— wd</i>			\$ 225.00
	<b>SUB TOTAL</b>			<b>\$ 1,907.35</b>
	<b>LESS 20%</b>			<b>\$ 381.47</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,525.88</b>
	Rear Bumper Reverse Sensor <i>X sec</i>			\$ 135.70
				<b>\$ 135.70</b> <i>Nett</i>
	<b>Labour Charge</b>			
	Panel Beating			\$ <del>350.00</del> <i>200</i>
	Spray Painting Charge			\$ <del>250.00</del> <i>200</i>
	Wiring Charge			\$ <del>50.00</del> <i>X "</i>
	R/Refix Reverse Sensor			\$ <del>120.00</del> <i>X "</i>
	<b>TOTAL LABOUR</b>			<b>\$ 770.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,431.58</b>

*Kalvin (LKK)*  
*4/6/18 1500hr.*  
*2 Pags.*  
*4/5*  
*After Repair photo*

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:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305169340  
Date : 06/06/18

## FINALIZATION FORM

To : LKK Fax : \_\_\_\_\_  
Attn : KALVIN ANG  
Vehicle Reg No. : SHA3102U Date of Accident : 03-Jun-18

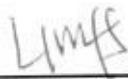
The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: NTUC --- SJK4437X
2. The finalized amount shall be:
 

(a) Spare Parts after List discount	
(b) Labour Charges	
<b>Total for Part-By-Part Repair Cost</b>	
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	<u>\$450.00</u>
<b>Final Lumpsum Repair cost</b>	<b><u>\$450.00</u></b>

3. Estimated normal period for repairs: 2 working days.
4. **We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature :   
Name : LIM T S  
Tel : 62148398  
Fax : 65468156

Signature :   
Name : KALVIN  
Date : 6/6/18

### For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees	-----			
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



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18010099/K1qbn2	
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556	Date: 14-06-2018
Code: INC4	



### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJK 4437X	Veh. Inspected	SHA 3102U
Policy No.	5083539178-01	Coverage (\$)	0.00
Claim No.	MT/0997402-002	Excess (\$)	0.00
Assign From		Assign Date	04/06/2018

### 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMFU069396	Colour	BLUE
Odometer	238165	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.  
DAMAGES SEE DETAILS.

### 5. General Information

Accident Date	03/06/2018	Inspection Date	04/06/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

### 5a. Remarks

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

### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: **2 Working Days**

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 3102U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	TO REPAIR SEE LABOUR	603.60	-
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	504.35	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$180.00	SERVICEABLE	360.00	-
1	REAR BUMPER SIDE BRACKET	SERVICEABLE	49.00	-
10	REAR BUMPER CLIPS	NOT NECESSARY	22.00	-
1	REAR BUMPER SPONGE	SERVICEABLE	143.40	-
1	REAR BUMPER UNDER COVER	CUT	225.00	225.00
	LESS 20% DISCOUNT		-381.47	-45.00
			1,525.88	180.00
<b>SPECIAL NETT ITEMS</b>				
1	REAR BUMPER REVERSE SENSOR (SN)	SERVICEABLE	135.70	-
			135.70	-
<b>LABOUR</b>				
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR BUMPER.		350.00	200.00
	SPRAY PAINTING CHARGE.		250.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	R/REFIX REVERSE SENSOR.	NOT NECESSARY	120.00	-
			770.00	400.00
<b>GRAND TOTAL</b>			<b>2,431.58</b>	<b>580.00</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>450.00</b>

Report Ref No. NS/INC18010099/K1qbn2



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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