Kalin	REF: N9/1H(18010746 /K	lvbn2		
remor Kalnn	A	SSIGNMENT		,,	
		Catable.	SHC 84	697 Yr Regn. 19 Nov	2015
	ate	Veh No.		/ Lorry / T 6 / Prime Move	
imated Cost:			Trailer or	, 0	
/TP/WS/TP RES/OD RES/EVA	/ INV / MV			7 Z40 00	1685
Inspect Vehicle No:		Make:	Many	7 Z 40 0.0 A/C. Insul G / St	
Vorkshop m/s		Colour			
		Sp.Reading	412431	L I/Radio, msu ca / s	MI NII NA
red \$JE 30060		Eng/No:	15 44	111041411	1-6
icy No. 50 81192 1639-0	1 33.13.14	C/No:		HLBY14M6408	03 02
ims No. MT 0998	484 -002		ood / Fay / Poor / E		
m Insured: E	Excess:	570	rd øl l Jammed I Lea		
Client's Record)		Brake: Inor	der / Jammed / Lea	aked / Burnt or	
ke of Veh:		Modi : Nil i	SIRim / SO		
		Tyre Size:	F:	201/60A16	
Policy Condition)			R;	` `	
mark: The veh had commenced its	s N/S	O/S BS/DUN/E	XNOVA / GY / FS /	LIZA / MIC / OHTSU / PIR / S	SUMI /
repair at the time of inspec	tion.	TOYO / YO	KO or	Westlike	
I, or Market Value:	-	Front	0	Rear	
	sistent? : Yes or No	R/Bal.	d mm	R/Bal. 1	mm
	sistent?: Yes or No	L/Bal.	+ mm	L/Bal. 7	mm
A TTN Occil.	Res.: Yes or No	D.O.A. #	16/18	D.O.L. 12/6/6	8
	3 Val.: Yes or No	Survey held	at	(DAE (Loyans)	
ım Sum: % A / REV / REP. / 24 HRS		Des. of Dam		O/S / N/S / U/C / Roofto	p or
ate: Person Contac	Vehicle: IN sted:		/ Chassis frame	Body Structure affected d	ue to collision
Date / Time Action / Instruction SM(SUNGT - STE SUNGT - US	(13 /AXA 12418518 NS /TNC 16011713 /	/HIHG /HIHbnz (Red 342)	s.so, नमी)	DOA: 21092012. ZA DOA: 22062016 43	<
	RECEIVED) 1 8 JUN 201	8		
Intelligina Etia Bene in 3	di Pancit	Days Of Re	epair:		
	li. Report		No. of Trip:	Survey Fee:	
Date/Time, File Return to?	al Report	Resulvey	To at tripe	Transportation	
State eth i i resource e differentiate e	Ad	ld Fee: Site	e Insp (\$)S+RSSI	
1816-typist	2.00	h	erview (\$ -) Photos	
Report Format : TP	12	Accessor	ch Invs (\$) Others	100
zahore rounar.	b 1	-			160



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18010746/K1vb			6/K1vb		
		D JNION HOUSESINGAPORE	Date:	12-06-2018 INC4	
١.		Policy Particulars	3233	_000748	
	Insured Veh.	SJE 5006G	100	spected	SHC 8469T
	Policy No.	5084926639-01		age (\$)	0.00
	Claim No.	and the second s	Exces		0.00
	Assign From		Assign	100 (500 K)	12/06/2018
		Vehicle Parti	culars 8	Condition	
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year o	of Reg.	
	Chassis No.		Colou	r	
	Odometer	.al	Steeri	ng	
	Brakes		Modifi	cation	
	General		22		
		Condit	ions 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
١.		Descript	ion of Da	amages	
5.		Genera	al Inform	nation	
	Accident Date	11/06/2018	SOUTH SECTION	ction Date	12/06/2018
	Survey held at	COMFORTDELGRO ENGINEE			
	Ja. 10, 11014 41	59 LOYANG DRIVE SINGAPORE 508969			
5a.	ARRONAL CO.	The state of the s	Remarks		
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WI	THOUT F	REJUDICE" BASIS	S. D REPAIRS.

TP Claims against NTUC Income: Follow-Through Survey

5/No inco 1 MT/ 2 MT/ 3 MT/	Income Keterence	Company (Township)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	lentative repair cost
1 MT/ 2 MT/ 3 MT,	1/0007000/1	Claiman (Owner / Taxi Company)	200	000 000	0100/30/00	\$ A 432 08	~
2 MT/ 3 MT,		COMFORT TRANSPORTATION PTE LTD	2HB 42b2D	TH SSTAN	00/00/2010	Correct's	
3 MT,	1,000,000,000	OTHER PRESENTATION PTE LTD	SHC 8469T	SJE 5006G	11/06/2018	\$ 4,423.50	1,000.00
3 MT/	WII/0338484-002	COMPONE TO SOCIAL PROPERTY OF THE PROPERTY OF	23100 200	SII 8794K	12/06/2018	\$ 4,846.50	s
	MT/0998302-002	COMPORT TRANSPORTATION PIE LID	3HC 04100	300 000	200 /20	1 1 1 1 1 1	1
A RAT	7/0000000000000000000000000000000000000	COMPONE TRANSPORTATION PTF LTD	SHA 1516Y	SLV 1256P	09/06/2018	\$ 6,632.76	^
4 1011,	INI / 0996092-002	COMIT OF THE PROPERTY OF THE P	400000000000000000000000000000000000000	Tours or	00/00/3010	C 6 25 2 5	
TAA	70027943-002	COMFORT TRANSPORTATION PTE LTD	SHA 73255	YL /5502	08/06/2010	+C:305'0 C	2
O C	200 545 1660/1	Chi Lac in Citata Control Control	CUA 70050	VI SOSO7	08/06/2018	\$ 5.255.52	\$ 3,150
MI	MT/0998908-001	COMFORT TRANSPORTATION PIELID	DESCY ATIC	70000	oron loo loo		
TAA PAAT	C00 111 000 114 VV	CITYCAR PTF LTD	SHB 2173R	SJL 2667G	11/06/2018	\$ 2,761.58	\$
/ INI	1/0338411-004			ACOCCIO	13/06/3018	\$ 2596.80	v
MI	MT/0998911-001	COMFORT TRANSPORTATION PTE LTD	SHA 1/84P	SJI 2/02A	12/00/2018	ממימכיים ה	1

Claim received from LKK Auto

eBaoTech									Gene	ralClaim
Hello, NAC_PAYA_UBI_80	0601					,	Change La	nguage	Change Passwor	d • Log Out
My Desktop	Poli	cy Query								
Notice of Loss	Policy N	io.				Date of Acc	ident	11/06/	/2018 18:31	
	Vehicle	No.(For Motor)	SJES006G							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5084926639-01	SONG AUTO PTE LTD	201610577C	GFT	drivo CLASSIC	SJE5006G	53E5006G	22/12/2017	
					1	Continue				

MCD613075555 / ComfortDelGro Engineering Pte Ltd - Loyang ENTRÝ DATE & TIME: 11/06/2018 14:48 SUBMITTED BY: Huang XiaoYan

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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.
- 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.
- 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.

aror cause.		
	ACCIDENT STATEMENT	
Date Of Report	11/06/2018 14:48	
Date Of Accident	11/06/2018 12:05	
Exact Location Of Accident	ANG MO KIO AVE 8 X ANG MO KIO ST 31	
Country/State of Loss	SINGAPORE	

Country/State of Loss		
	DETAILS OF OWN VEHICLE	

Vehicle Registration Number

SHC8469T

Insured/Policyholder

Name Of Registered Owner

COMFORT TRANSPORTATION PTE LTD

199303821R Co Reg No

Email Address

FLEETSAFETY@CDGTAXI.COM.SG

Mobile Phone No

Alternative Phone No

OFFICE-65508768

Vehicle Particulars

HYUNDAI Manufacturer 140 Model

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

MS FIRST CAPITAL INSURANCE LTD THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage

Fleet Policy Policy Number

D-18088936MFSH

Cover Note Number

Driver

ANG SEE FICK Name of Driver S2168447C NRIC No 27/01/1957 Date Of Birth

Occupation

OUTDOOR

Date Of Driving Pass

10/08/2001

Driving Experience

16 YEARS AND 10 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-91008195

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 334C ANCHORVALE CRESCENT #11-12

Postcode

54334

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

NO

Was any body injured in the Accident? 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)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

GENDER:

: FEMALE

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

PLS REFER TO 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

SJE5006G

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

TYE KWANG NIANG

NRIC/Passport Number

S7576064G

Contact Number

Address

Postcode Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

FRT RIGHT

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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.
- 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)
 - (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")
- 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
- 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.
- 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 LT CO. REG. NO. 199303821R

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

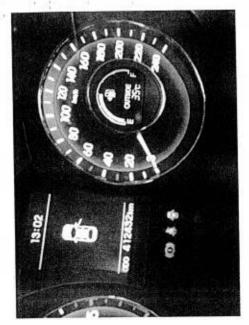
GIARMIC SketchPlanForm_V3

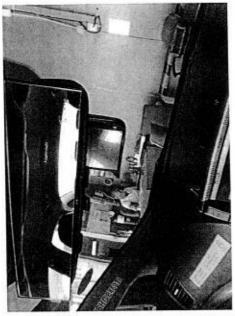
Sketch Plan Pg. 2

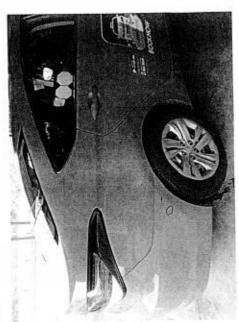
	N R		
4 1 1		Sketch Plan Pg. 2	
	P	OKCIOTI IMIT 5	
1		1539	
		Ang No Lio St 31, V	El Obl Ajust The B collided
			A
	DECLARATION 1/We declare the foregoing particulars	are true in every respect.	BR/Moot:
	COMFORT TRANSPORTATION PTE CO. REG. NO. 199303821R	LTD AY	9996/18
	Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

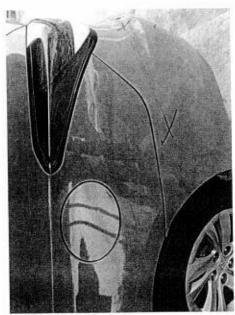
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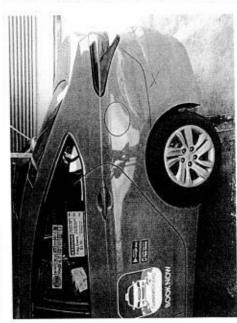
Page 5 of 20



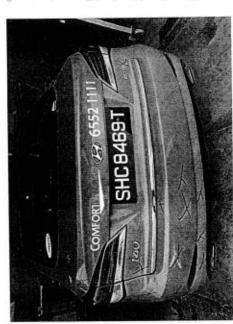


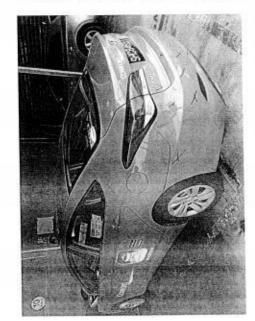






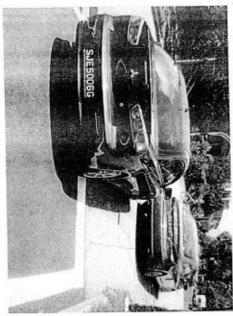


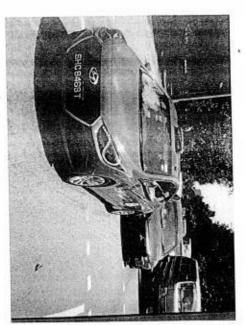


















COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

Date/Time: 3TT.063.20180876:10 Page: 1

Team: ARC Repair TP(CLSO)1 JOB CA	ARD Sales Order:	JC NO305173844
Team: ARC Repair TP(CLSO)1	REGN NO. SHC8469T	MILEAGE
RMS COMFORT TRANSPORTATION PTE LTD 7010045	MAKE HYUNDAI	FUEL E1/2F
STOMER NO. 7010045 DRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717	MODEL 1-40 11.	06.2018 N3:00
L (R) 65508755 (O)	YR OF MANU 1.2015	TARGET DATE
(P)	CHASSIS CODE KMHLB41UMGU080562	COMPLETION DATE/TIME:
SCOUNT CARD NO.		
100 DECC	DIRTION	

Accident Date: 11.06.2018

NATURE: 3P 11.06.2018

LABOR CODE

DESCRIPTION

ECKED & PASSED OUT BY:			
SERVICE A	DVISOR		ÇUSTOMER'S SIGNATURE
owledgement Slip		Exit Pass	
o.: o.: sle No.: SHC8469T	CHIANG	Vehicle No.: SHC8469T	
e of Service Advisor	Signature/Date	Name of Service Advisor To be kept by Security Guard	Date

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHC 8469T

MAKE :

MODEL : HYUNDAI i40

LEP/ Nome DATE 11/6/2018 15:12

ariano

Qty	Parts Description/ Labour	Type	Unit	t Price	. 1	Mount	
X.0	Rear Rumper / LL				\$	603.60	
	Rear Rumper Reinforcement				\$	504.35	
	Rear Bumper Reinforcement Bracket (LH/RH)		\$	180.00	s	360.00	
	Rear Bumper Side Bracket		S	49.00	\$	98.00	
	Rear Rumner Clins				\$	22.00	
	Rear Rumner Sponge				S	143.40	
	Rear Bumper Under Cover				S	225.00	
	Rear Bumper Order Cover				S	32.00	
	Rear Bumper Reflector Lamp (LH)				\$	58.55	
	Exhaust Pipe Insulator, LH				S	954.00	
	Exhaust Silencer,LH				S	58.55	
	Exhaust Pipe Hanger, LH Exhaust Pipe Centre				\$	1,150.30	
	Exhaust 1 pc cente				3500		
	SUB TOTAL	L			S	4,209.75	
	LESS 20%	6			\$	841.95	-
	DISCOUNTED TOTAL	L			\$	3,367.80	
	Rear Bumper Reverse Sensor / 5 Whole				\$	135.70 135.70	N
	Labour Charge Panel Beating	consultants her of the followy beforelatter so damaged parts as BIE Subject With Survey is on a siling of the following the foll	currentiation currentiation current Preju	ey dice" basis	s s s	200 350:00 250:00 50:00	
	11 mg c.m. 8c		1		\\s	120.00	-
	Remove/Refix Exhaust Pipe Signatu				s	150.00	-
	V / Clay TOTAL LABOU	R			s	920.00	-
	ESTIMATE TOTAL LABOUR 12/6/8 1005 L 2/8/1 L/S After Plays , Ll	L			\$	4,423.50	
	This is an initial estimate based on a visual inspection of	f the above	vehicle Th	e final repair	ouan	tum will	-

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

COMFORTDELGRO ENGINEERING

305173844 Our Job Ref No : ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156 12/06/18 Date FINALIZATION FORM Fax: LKK To KALVIN Attn 11/06/18 Vehicle Reg No. : SHC8469T The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-SJE5006G NTUC The repair job shall bill to: The finalized amount shall be: Spare Parts after List discount (a) Labour Charges (b) Total for Part-By-Part Repair Cost Lumpsum Repair (if applicable) \$1000 .00 Total for Lumpsum repair cost after Less: Final Lumpsum Repair cost working days. Estimated normal period for repairs: 3. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days We confirm the estimates and Thank you for your assistance. 5. finalized amount Signature: Signature : Name CHIANG Date 62148314 Tel 65468156 Fax For Official Use Only Document Confirm By Remarks Attached Amount Item (Signature) Yes or No YES Rental Rate P/Day N Loss of Income Paid Survey Fees 7.49 4. LTA Search Fee Medical Fees (on behalf of driver, if applicable) 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



NS/INC18010746/K1vbn2 NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: 73 BRAS BASAH ROAD 20-06-2018 #05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 189556 Code: INC4 Policy Particulars :- THIRD PARTY CLAIM 1. SHC 8469T Veh. Inspected SJE 5006G Insured Veh. 0.00 Coverage (\$) 5084926639-01 Policy No. 0.00 MT/0998484-002 Excess (\$) Claim No. 12/06/2018 **Assign Date** Assign From Vehicle Particulars & Condition 2. 1685 **HYUNDAI 140** C.C Make & Model 2015 Year of Reg. HIDDEN Engine No. BLUE KMHLB41UMGU080562 Colour Chassis No. IN ORDER Steering 412432 Odometer STANDARD ALLOY RIM Modification IN ORDER Brakes FAIR General **Conditions of Tyres** 3. Balance Make Size 7 mm WEST LAKE 205/60 R16 R/H Front Tyre 7 mm WEST LAKE 205/60 R16 L/H Front Tyre 7 mm WEST LAKE 205/60 R16 R/H Rear Tyre 7 mm WEST LAKE 205/60 R16 L/H Rear Tyre **Description of Damages** 4. THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS. General Information 5. 12/06/2018 Inspection Date 11/06/2018 Accident Date COMFORTDELGRO ENGINEERING PTE LTD Survey held at 59 LOYANG DRIVE SINGAPORE 508969 Remarks 5a. A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. **Estimate Days of Repair** 5b.

ESTIMATED NORMAL PERIOD FOR REPAIR:

2 Working Days



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



ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 8469T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	DEFORMED	603.60	603.60
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	504.35	
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$180.00	SERVICEABLE	360.00	-
2	REAR BUMPER SIDE BRACKET @\$49.00	SERVICEABLE	98.00	
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	143.40	35
1	REAR BUMPER UNDER COVER	CUT	225.00	225.00
1	REAR BUMPER REFLECTOR LAMP (LH)	CRACKED	32.00	32.00
1	EXHAUST PIPE INSULATOR,LH	SERVICEABLE	58.55	
1	EXHAUST SILENCER,LH	SERVICEABLE	954.00	-
1	EXHAUST PIPE HANGER,LH	SERVICEABLE	58.55	-
1	EXHAUST PIPE CENTRE	SERVICEABLE	1,150.30	-
	LESS 20% DISCOUNT		-841.95	-176.52
			3,367.80	706.08
	SPECIAL NETT ITEMS			
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
	55 76		135.70	135.70
	LABOUR			
	PANEL BEATING.		350.00	200.00
	SPRAY PAINTING CHARGE.		250.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	
	REMOVE/REFIX REVERSE SENSOR.		120.00	30.00
	REMOVE/REFIX EXHAUST PIPE.	NOT NECESSARY	150.00	
			920.00	430.00
	GRAND TOTAL		4,423.50	1,271.78
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,000.00

Report Ref No. NS/INC18010746/K1vbn2





Report Ref No. NS/INC18010746/K1vbn2

KALVIN ANG WEI KUN

KALVIII AND WEI NOW

Automotive Assessor / Investigator

KK LAUCPI

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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