ASS, REC. BY:	REF: CS CTI 18011176 / Krd3 Special Instruction:
YUNVOUNT From (Person)	Nene Tay of CTI Date/Time: 20/06/180/11/19an
Estimated Cos	
	hicle No: SKF 5264R Insured: GBE 8986 C
at Workshop r	Ngiak Motor Works Tel: 9850 2253
Policy No: D	MCVSN 3034101801 Claim No: SNM18 D03035C02
Sum Insured:	Excess:
Make of Veh: (Client's Record	D.O.A. 13 06 208  Insp: Blk 7 8in Ming Rd, Sec. C # 01-84  H.O.D. Endorsement
Date/Time:	· 5/am @ 20/6/18 Person Contacted: Mr. Kwan Vehicle IN OUT
Date/Time	Action/Instruction ( ) Estimate
	SKE 5264R-X GBE 8 986 C CC3 EQTIFICO 3746/Klwa3q2 DOA 18/02/201
719	Uly 85900 encil & confirm
-	Red: 89175.16, 617.

ASS. REC. BY: REF: CIL	ASSIGNMENT
From: Date:	Veh No: SKE 5264 R Yr Regn: 03, 1
QD 17F WS 1 TP RES 1 OD RES / EVA / INV / MV	Taxi / Prime Mover /
To Inspect Vehicle No:	· · · · · · · · · · · · · · · · · · ·
at Workshop m/s Ngia/c	Tollisheles lourance 139
of	Colour hhite AC: Insured / Std / NI / NA
Insured:	Sp.Reading 193180 T/Radio: Insured / Std / N1 / N
Policy No.	Eng/No:
Claims No.	CANO: WUG ZZZITZEW O759
Sum Insured: Excess:	Gen. Cond. Good / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
fake of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
	Modi: NII / S/RIm / STD A/RIm or
(Policy Condition)	Tyre Size: F:
amark: The web bad	O/S PSIDINIFERENCE 225/407R1
repair at the time of inspection.	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC OHTSU / PIR / SUMI /
	TOYO / YOKO or
al or Market Value: 0 5 /K	Front
AC Accident Rport: Consistent? : Yes or No	R/Bal. 3 mm R/Bal. 2
A / PR Seen: Consistent? : Yes or No	L/Bal. 3 mm L/Bal 2
Repairs: days Res.: Yes or No	D.O.A. 13/6/18 DOI 20/6/19
m Sum: 20 % 3 Val.: Yes or No	Survey held at
/ REV / REP. / 24 HRS	
· Vehicle: IN	Des. of Damages : Frt   Rear   O/S   N/S   U/C   Rooftop or
Person Contacted:	
ate / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
21/6 Mle pass to Cotheine	- 16
RECEIVED	1_0_SEP_2018
1	
Prell. Report	Days Of Repair: 5
YPIS : Final Report	Position II. (P. 1
me, File Return to?	Transportation
	F00:     Cita I = 10
Add F	
	Interview (\$
Add F	: Interview (\$ ), Fixed s  Tech Invs (\$ ), Others

Task Group

ASSOCIATED MAIL RECEIVED

There are no mail for this case.

ALL ASSOCIATED TASKS

No results.

Due Date Priority Type

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj 5i	bmitted	Ins Auth'ed	Status	
Main	20 Jun 2018		20 Jun 2018 11:19 Assign					New Assi Cancel Ca	and the second s
	Main	Re	ference		Claim Details		Docume	nts	Show All
CLAIM SU	BFOLDER DE	TAILS	PONSESSI PER ENGLIS	***************************************	and the second second	[Crea	ted by insurer]	Grina Station As Call and	NATIONAL PARTICIPATION
Insured:									
Main Claimant:	минама	D HAZMI BIN MO	HAMAD ZIN,	ID: S83418	361C				
Vehicle Reg No.:	SKE526	4R			Date of Los	s: 13/06/	13/06/2018 15:00 - :59		
Claim Type	TP / SNN	418D03035C02			Policy/Cove Note No.:	DMCV	SN3034101801		
Vehicle Reg No. (Insured):	GBE8986	С			Policy No. (Claimant):	DMPP	HQ17-004786		
					Excess:	5\$0.0	0		
Repairer:	Ngiak Mo	tor Works (HQ)	Ghim Moh Roa	d, #10-194,	270006 Ghim	Moh - Tel	: 98502253		
Handling Insurer:	China Tai	ping Insurance (	Singapore) Pto	e. Ltd. (HQ	) - Tel: 6389 6	111 [H	andled by Irene Ta	y Hui Ping -	638986192]
Claimant's Insurer:	EQ Insura	nce Company Lt	d (HQ) - Tel: 6	223 9433			000000000000000000000000000000000000000		
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Final Rp	t due 29	9/06/2018]		
Adj Asg. Remarks:	PLEASE SU	JRVEY AND REVER	Т						

Subject Handler

Assigned By

View All | Compose Case Mail

Created On

Done?

View All Search Tasks Create New Task Complete

Completed On

#### Nivitha (LKK Auto)

From:

Irene Tay <irene.tay@sg.cntaiping.com>

Sent:

Wednesday, 20 June 2018 11:09 AM

To:

assignments@lkkauto.com

Cc:

weekwanchia@yahoo.com; tonygn tonygn

Subject:

CTP REF NO. SNM18D03035C02 WU LLC REF NO. SKE5264R - ACCIDENT

INVOLVING GBE8986C AND SKE5264R ON 13 JUNE 2018

Attachments:

priX850.NM.jpg

Importance:

High

Dear Sir/Mdm (LKK),

We refer to the above matter.

Please get your surveyor to liaise with Mr Kuan from Ngai Motor Works by today.

PRS has to be done by today.

Regards.

#### Irene Tay

Executive

Claims Department (Motor Division)

#### China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Direct (65) 6389 6192

Fax (65) 62247478/62247175

Email: claimsdept@sg.cntaiping.com

www.sg.cntaiping.com



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From: Jowyn Tay

Sent: Wednesday, 20 June, 2018 9:55 AM
To: Irene Tay <irene.tay@sg.cntaiping.com>

Cc: tonygn18@hotmail.com

Subject: FW: Reminder PRI - X 850 NM (REF: SNM18D03035/C02/6)

Importance: High

Dear Irene.

Please look into the matter and revert to Wu LLC.

Best Regards,

Jowyn Tay

Deputy Claims Executive Claims Department - Motor Division

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Direct (65) 6389 6174

Fax (65) 6224 7175 / 6224 7478 Email: claimsdept@sq.cntaiping.com Website: www.sq.cntaiping.com



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From: tonygn tonygn [mailto:tonygn18@hotmail.com]

Sent: Wednesday, 20 June, 2018 9:43 AM To: Jowyn Tay <jowyn.tay@sg.cntaiping.com>

Subject: Fw: Reminder PRI - X 850 NM

As spoken. Thank You

Sent from Outlook

From: tonygn tonygn <tonygn18@hotmail.com>

Sent: Tuesday, June 19, 2018 2:09 PM

To: claimsdept@sg.cntaiping.com; weekwanchia@yahoo.com

Subject: Fw: Reminder PRI - X 850 NM

Kindly let us your List Of Surveyor URGENTLY

Thank You

Sent from Outlook

From: tonygn tonygn < tonygn18@hotmail.com>

Sent: Tuesday, June 19, 2018 9:53 AM

To: claimsdept@sg.cntaiping.com; weekwanchia@yahoo.com

Subject: Reminder PRI - X 850 NM

We have not receive your List Of Surveyor.

Please reply Urgently.

Thank You

Sent from Outlook

This email has been scanned by the Symantec Email Security.cloud service. For more information please visit <a href="http://www.symanteccloud.com">http://www.symanteccloud.com</a>

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Gender

Mobile Number Fax Number

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.
- 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.
- ent 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

ALL YORK OF MANY PROPERTY AND	ACCIDENT STATEMENT
Date Of Report	14/06/2018 16:39
Date Of Accident	13/06/2018 15:30
Exact Location Of Accident	SLIP RD OF COMPASSVALE STREET TO PUNGGOL RD
Country/State of Loss	SINGAPORE
to 2000 and the property of	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKE5264R
Insured/Policyholder	
Name Of Registered Owner	MUHAMAD HAZMI BIN MOHAMAD ZIN
NRIC No	S8341861C
Email Address	HAZMIZIN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94577384
Alternative Phone No	OFFICE-94577384
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	TOURAN-1.4 TSI (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ17-004786
Cover Note Number	
Driver	
Name of Driver	MUHAMAD HAZMI BIN MOHAMAD ZIN
NRIC No	S8341861C
Date Of Birth	31/12/1983
Occupation	INDOOR
Date Of Driving Pass	05/08/2002
Driving Experience	15 YEARS AND 10 MONTHS

MALE

(LOCAL) +65-94577384

HAZMIZIN@GMAIL.COM

OFFICE-94577384

Address

**BLK 868 TAMPINES STREET 83** 

#02-203

Postcode

520868

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

\*

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

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

STATEMENT RECORDED BY SOO - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

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

GBE8986C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

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 correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyhalder 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.
- 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 erchiving of this report at the centre and to colpies of
  the report being made available aforesaid.
- S. Consent under the Personal Data Protection Act (PDPA)

t 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 postessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vabide(s) involved in this accident (all insurer(s) who have insured vabide(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)
  - paccessing, 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 apquiries 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 saternal cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively tire "Purposes")
- (b) all inscretis) who have insured vehicle(z) involved in this excident and the insurers' lawyers/few 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 cutside 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 freud 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 parsies that assist in evaluating, investigating, controlling or managing frauding platfors, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with regularments under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Oriver's Signature (if driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signatura Name: NRIC/FIN No.:

SIARMC SkytchFlanForm\_VS

#### Sketch Plan #2

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DECLARATIO I/Wa declare ti Please be advi	N	lars are true in every respect. er may have a 14 day clause whereby the te of occurrence. Kindly check your police		nust within the
I/We declare the Please be advi- atipulated time	N ne foregoing particul sed that your insure eframa from the da	iers are true in every respect, er may have a 14 day clause whereby th te of occurrence. Kindly check your polic	e claim against own policy for more details.	
	N ne foregoing particul sed that your insure eframa from the da		e claim against own policy for more details.	nust w made within the

## NGIAK MOTOR WORKS

Blk. 7, Sin Ming Industrial Estate C, #01 - 84, Singapore 575642 Fax: 6458 - 5589 | Email: weekwanchia@yahoo.com Date:- /6 / 6 / 2018 Motor Claims Department China Tailing Disurance (s) Pte. H 6224 - 7175 BYH Dear Sir, NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES We have been appointed by the Owner to repair his/her motor vehicle No.5KE 5264R on 13 - 6 - 18 with another vehicle No. GBE 8986 = along Slip fd of Compassivale Please be informed that the said vehicle can be inspected at:-Workshop: **NGIAK MOTOR WORKS** Contact Sector C, Bik. 7, #01 - 84 Sin Ming Road Singapore 575642 Fax 6458 - 5589 Contact Mr. Kwan / 9850 - 2253 Email : weekwanchia@yahoo.com

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Holiday. We will commence repairs thereafter without further reference to you.

Yours faithfully,

Wu LLC - Law Firm - Tony Gn
Our Ref: 18 - X 850

## NGIAK MOTOR WORKS

MAILING ADDRESS: BLK 6, GHIM MOH ROAD #10-194

SINGAPORE 270006

H/P: 9850 2253

Reg. No. 207300/00C

Not Notharked LILy & 5900/ Presony After Pany 016118 5days

20/6/18 Ips

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# NGIAK MOTOR WORKS MAILING ADDRESS: BLK 6, GHIM MOH ROAD #10-194

SINGAPORE 270006

H/P: 9850 2253

Reg. No. 207300/00C

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## **NGIAK MOTOR WORKS**

MAILING ADDRESS: BLK 6, GHIM MOH ROAD #10-194

SINGAPORE 270006

H/P: 9850 2253 Reg. No. 207300/00C

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	6/10	10,935-16
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To check wiring & do o	computerised	
resetting		) NN 120.00 7
To do computerised when	el alignment	nn 120.00 X
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To remove & repx rear	seats, upholsten	300.00 6
To instal reverse sense	~	100.00 5
To fix rear lid inner a	components	150.00 6
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Spray paining		1,800.00
	Total:	15,075-16

#### LKK Auto Consultants Pte Ltd (Co.Reg. No: 199607198R)

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

Email: sur@lkkauto.com;assignments@lkkauto.com Tel: 6256-3561 Fax: 6844-8805

#### VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/CTI18011176/KRD3N2

Date:

10/09/2018

REFERENCE

Handling Insurer:

China Taiping Insurance

(Singapore) Pte. Ltd.

Policy No:

DMCVSN3034101801

Claimant Vehicle No:

SKE5264R

Claim:

Insured Vehicle GBE8986C

No:

13/06/2018 Date of Loss:

Nature of

TP

Claim No:

SNM18D03035C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Rea No:

SKE5264R

Make & Model:

VOLKSWAGEN TOURAN, 1.4 TSI (A)

Engine No:

CAV383375

193180 km

Reg. Date:

09/03/2012 (Man. Year: 2012)

Chassis No: Odometer:

WVGZZZ1TZCW075468

Colour:

**Engine Capacity:** Market Value/New Car 1390 cc

N/A

Price: Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable): No Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

225/40 ZR18

Rear Tyre Size:

225/40 ZR18

Front Left Side: Front Right Side:

Michelin 3 mm Michelin 3 mm Rear Left Side: Rear Right Side: Michelin 2 mm Michelin 2 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts Miscellaneous Items	Repairer's 10,925.16 0.00	Adjuster's 5,763.46 0.00	5,161.70 0.00	Diff % 47.25
Labour Paintwork Labour	4,150.00 0.00	1,700.00 0.00	2,450.00 0.00	59.04
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$) Approved Total (Overridden) (S\$)	15,075.16	7,463.46 5,900.00	7,611.70	50.49
Nett Amount (S\$)	15,075.16	5,900.00	9,175.16	60.86

INSPECTION

Date of Assignment:

20/06/2018

Date Inspected:

20/06/2018 Inspected At:

Blk 7 Sin Ming Road Sec C #01-84 Repairer: Ngiak Motor Works (HQ)

6 Ghim Moh Road, #10-194

Singapore 270006

Estimated Period of Repair:

5.0 days

Adjuster: KENNETH KONG

Manager: Janice Lee Si Hua

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: 10 Sep 2018)

Parts: M1-MPV VOLKSWAGEN TOURAN 1.4 TSI (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SKE5264R)

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 \*.

R	econ	nmei	nded	Parts
	CUUI		IUEU	Falls

No.	Qty	Part No. Particulars		Condition	Repairer's	Amount
1	1	*REAR LID		Bent	1,958.95 FL	*1,532.00 FL
2	1	*REAR LID WINDSCREEN		Shattered	986.10 FL	*840.00 FL
3	1	*REAR WIPER MOTOR		Serviceable	350.45 FL	*-FL
4	1	*REAR WIPER ARM		Dented/Cut	85.30 FL	*85.30 FL
5	1	*REAR WIPER BLADE		Serviceable	38.90 FL	*- FL
6	1	*REAR LID VW LOGO		Necessary	96.60 FL	*96.60 FL
7	1	*REAR LID LOCK		Repair	239.15 FL	*- FL
8	1	*REAR LID RUBBER		Serviceable	363.90 FL	*- FL
9	1	*REAR LID REFLECTORS	ASSY	N/s Cracked	590.20 FL	*295.10 FL
10	1	*REAR LID 3RD BRAKE L	AMP ASSY	Serviceable	167.30 FL	*- FL
11	2	*REAR NUMBER PLATE L	AMP	Serviceable	170.00 FL	*- FL
12	1	*REAR LID SWITCH HAND	DLE	Serviceable	148.50 FL	*- FL
13	2	*REAR LID ABSORBERS		Serviceable	276.00 FL	*- FL
14	2	*REAR LID HINGES		Repair	173.00 FL	*- FL
15	1	*REAR LID INNER PLAST	IC COVER	Mtg Cracked	269.45 FL	*269.45 FL
16	1	*REAR LID INNER PLAST	IC COVER (UPPER)	Serviceable	150.00 FL	*- FL
17	1	*SET PLASTIC COVER CL	IPS	Not Necessary	45.00 FL	*- FL
18	1	*REAR LAMP ASSY		N/s Scratched	610.60 FL	*305.30 FL
19	1	*REAR BUMPER		Buckled	1,130.70 FL	*1,130.70 FL
20	1	*SET REAR BUMPER CLII	PS	Necessary	50.00 FL	*50.00 FL
21	2	*REAR BUMPER SIDE RE	TAINERS	Serviceable	106.00 FL	*-FL
22	1	*REAR BUMPER REINFOR	RCEMENT	Bent	498.80 FL	*498.80 FL
23	1	*REAR BUMPER INNER F	OAM	Serviceable	100.50 FL	
24	1	*REAR BUMPER TOP BRA	ACKET	Cracked	125.60 FL	*125.60 FL
25	1	*REAR END PANEL		Repair	469.20 FL	*-FL
26	1	*REAR END PANEL INNE	RTRIM	Dented/Cut	175.00 FL	*175.00 FL
27	1	*REAR BUMPER TOW CO	VER	Serviceable	30.60 FL	*-FL
28	1	*REAR TOOL TRAY		Serviceable	298.00 FL	*- FL
29	1	*REAR INNER TOP COVE	R	Serviceable	190.60 FL	*- FL
30	1	*REAR END PANEL CATO	Н	Repair	78.00 FL	*- FL
31	1	*REAR BUMPER LOWER	SPOILER	Buckled	1,000.00 FS	*500.00 FS
32	1	*SET REVERSE SENSOR		Dented	280.00 FS	*200.00 FS
33	1	*REAR LID STICKER		Necessary	160.00 FS	*40.00 FS
34	1	*REAR LID WINDSCREEN	V-KOOL PROTECTOR	Necessary	180.00 FS	*120.00 FS
35	1	*REAR LID WINDSCREEN	SEALANT	Necessary	160.00 FS	*40.00 FS
36	1	*REAR END PANEL SEAL		Not Necessary	120.00 FS	*-FS
37	1	*REAR NO PLATE		Serviceable	50.00 FS	*-FS
rra	ncnise	art. S=SpcNett. L=ListItemDisc.		Sub Total (S\$)	11.922.40	6,303.85
		- List Ite	m Discount on L Items 1		997.24	540.39
				Total Parts (S\$)		5,763.46

Report was unsubmitted during this print-out.

#### Recommended Miscellaneous Items

There are no new miscellaneous items selected.

#### Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	our Items	601		
1	TO CHECK WIRING & DO COMPUTERISED RESETTING	New	120.00	1.0
2	TO DO COMPUTERISED WHEEL ALIGNMENT	New	120.00	-
3	TO FIX REAR WINDSCREEN	New	200.00	120.00
4	TO REMOVE & REFIX REAR SEATS, UPHOLSTERY	New	300.00	60.00
5	TO INSTALL REVERSE SENSOR	New	100.00	50.00
6	TO FIX REAR LID INNER COMPONENTS	New	150.00	60.00
7	TO DO RUSTPROOFING	New	160.00	30.00
8	PANEL BEATING	New	1,200.00	500.00
9	SPRAY PAINTING	New	1,800.00	880.00
	Gross Labou	ur Cost (S\$)	4,150.00	1,700.00

< END OF ESTIMATES >