

Receipt

Kalin

REF:

NS/WC 18011221 / Klvbnz

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

ABE 2572C

Policy No:

5074863750-02 15-10-2017

Claims No:

MT/0999812-001

Sum Insured:

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:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHC 2368R

Yr Regn:

3rd In 2011

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

Truck / Trailer or

Make:

Hyundai Santa

C.C

199

Colour

Blue

A/C

Insured / Std / NI / NA

Sp. Reading

593403

T/Radio

Insured / Std / NI / NA

Eng/No:

C/No:

KMHE741VABA812661

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size:

F:

215/60R16

R:

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

TOYO / YOKO or

Maxxis

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

18/6/18

D.O.I.

20/6/18

Survey held at

CDHE (Loyang)

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

o/s Body.

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

Date / Time

Action / Instruction

SHC 2368R - CB / ALH 16009716 / H1wb3g2

DAF: 240516

IM

ABE 2572C - X

22/6/18

Labour 415 \$1550 / 2 hrs. (Reel 870.52, 3670)

4/

RECEIVED 25 JUN 2018

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 25/6 - typist

Report Format:

TP

LS \$1550k

Days Of Repair:

2

Resurvey No. of Trip:

1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

Survey Fee:

Transportation:

) S+RS, SI

) Photos

) Others

160



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/INC18011221/K1vb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 20-06-2018	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBE 2572C	Veh. Inspected	SHC 2368R	
Policy No.	5074863750-02	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	20/06/2018	
2. Vehicle Particulars & Condition				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions 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. Description of Damages				
5. General Information				
Accident Date	18/06/2018	Inspection Date	20/06/2018	
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.				

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/0999285-002	COMFORT TRANSPORTATION PTE LTD	SHD 4182R	SLP 4094B	18/06/2018	\$ 3,738.64	\$ 900.00
2	MT/0999426-002	CITYCAB PTE LTD	SHC 276K	SKR 5223R	19/06/2018	\$ 2,686.00	\$ 1,200.00
3	MT/0999510-003	COMFORT TRANSPORTATION PTE LTD	SH 8839C	SHB 8865M	20/6/2018	\$ 1,603.13	\$ 400.00
4	MT/0999812-001	COMFORT TRANSPORTATION PTE LTD	SHC 2368R	GBE 2572C	18/6/2018	\$ 2,420.52	\$ 1,550.00
5	MT/0998569-002	COMFORT TRANSPORTATION PTE LTD	SHD 3594S	SLU 6879P	13/6/2018	\$ 7,568.23	\$ 5,702.63

Claim received from LKK Auto

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[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"/>	5074663750-02	PAN PACIFIC VAN & TRUCK LEASING PTE LTD	201511635R	GFT	Comprehensive	GBE2572C	GBE2572C	15/10/2017	

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	19/06/2018 15:13
Date Of Accident	18/06/2018 22:35
Exact Location Of Accident	T JUNCTION OF ANG MO KIO AVE 8 AND ANG MO KIO AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC2368R
Insured/Policyholder	
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	SONATA
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
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

Driver

Name of Driver	TAN THUAN NAM
NRIC No	S0934955C
Date Of Birth	21/10/1944
Occupation	OUTDOOR
Date Of Driving Pass	29/04/1965
Driving Experience	53 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91125932
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address 616 09-563 WOODLANDS AVENUE 4
 Postcode 730616
 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 SIDE SWIPE
 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? YES
 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) 2
 Passenger 1 NAME: : -
 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 POLICE STATION NAME [OTHER] CHANGI NPC
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

SEE POLICE REPORT.

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 GBE2572C
 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

LEFT FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN THUAN NAM

Approximate Age 74

Injuries Sustain NECK, BACK

Injured person in which vehicle? SHC2368R

Were seat belts worn? YES

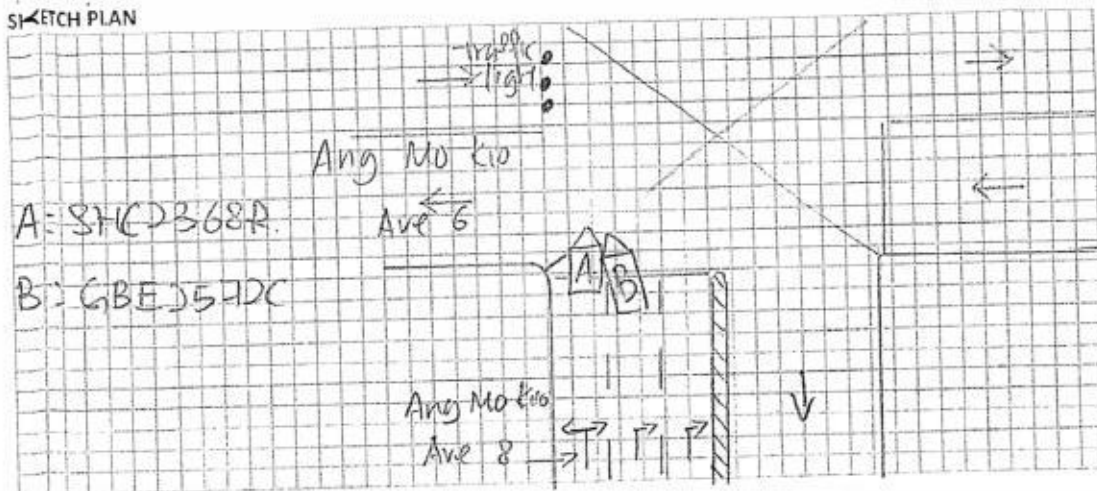
Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached police report
T/20180619/2085

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CC REG NO 16002824R

Policyholder's Signature
Date & Time:

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

Loke Wei Yieng

Reporting Centre Personnel's Signature
Name:



**SINGAPORE
POLICE FORCE**



T/20180619/2085

1 of 3

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No. T/20180619/2085

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/06/2018 13:47		Vide Report No.:		Station Diary No.: 39	
Informant's Particulars					
Name of Informant: TAN THUAN NAM			Address: APT BLK 616 WOODLANDS AVENUE 4 #09-563 SINGAPORE 730616		
ID Type / ID No.: NRIC NO / S0934955C			Contact No.: Home/Office: Mobile: 91125932		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 73	Date of Birth: 21/10/1944	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/06/2018 22:35	Type of Location: T-Junction
Location: Along Road 1 ANG MO KIO AVENUE 8 ANG MO KIO AVENUE 6				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE2572C	Van	TOYOTA	TOYOTA HIACE VAN TURBO 5 DR MANUAL	Silver	Slightly Damaged	0
SHC2368R	Car	HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Blue	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999



T/20180619/2085

2 of 3

Report No. T/20180619/2085

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN THUAN NAM	ID No.	S0934955C
Related Vehicle	SHC2368R (Car)	Contact No.	91125932
Hospital/Clinic	STREET 11 CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	19/06/2018	Date Discharge	19/06/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the 18/06/2018 at 2230hrs, while I was driving my taxi SHC2368R along Ang Mo Kio Avenue 8 towards Ang Mo Kio Ave 6, I approached the traffic light T-Junction on the left lane with the intention to turn right. As the lane I was on have the option to turn right or left. The lane next to mine is only allowed to turn right. When the traffic light turn green I proceed to make my my right turn. When I made the right turn, a Van GBE2572C hit onto my taxi from the right side. We then went out of our respective vehicles, made a check and agreed to make a police report on our own and went on our way as there was no immediate need for medical attention. I then left. The damage to my car were to both my right doors. I suffered some discomfort to my back and neck as a result of the accident. I then went to the doctor and was given 3 days of medical leave.



**SINGAPORE
POLICE FORCE**



T/20180619/2085

3 of 3

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No. T/20180619/2085

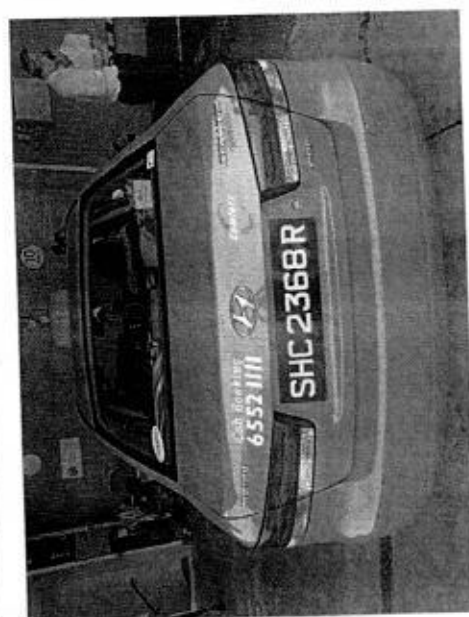
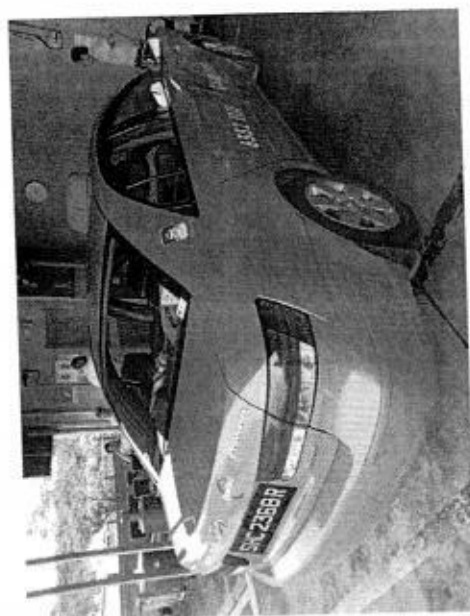
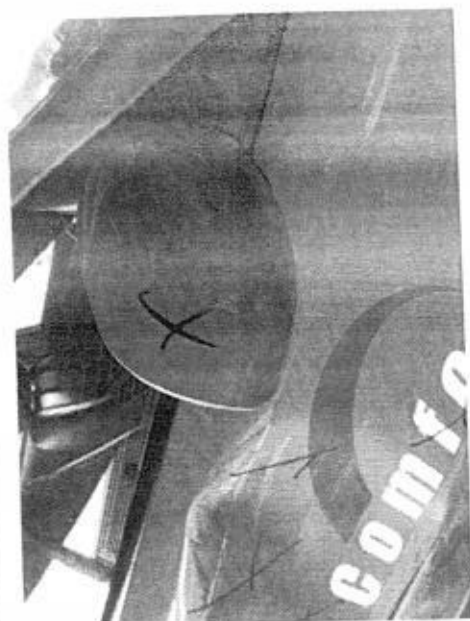
CONTINUATION OF REPORT

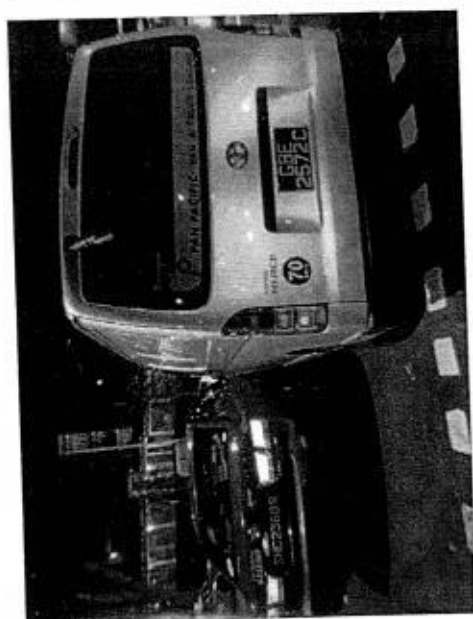
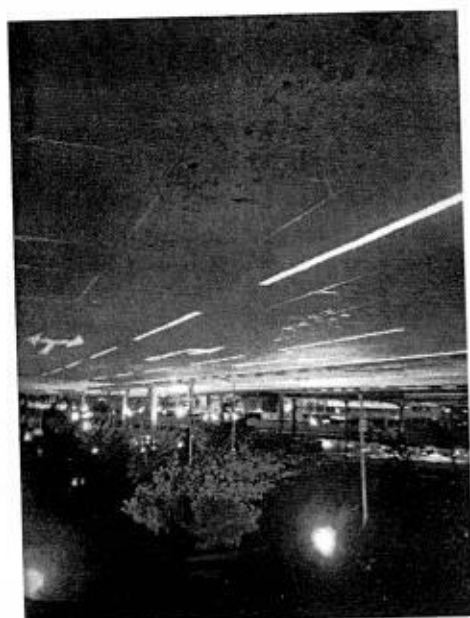
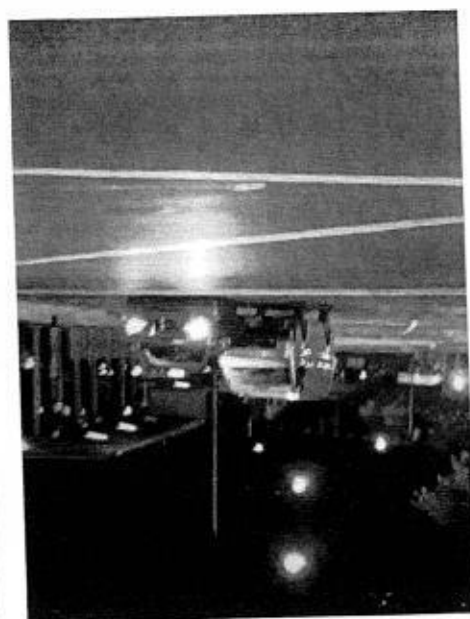
Sketch Plan

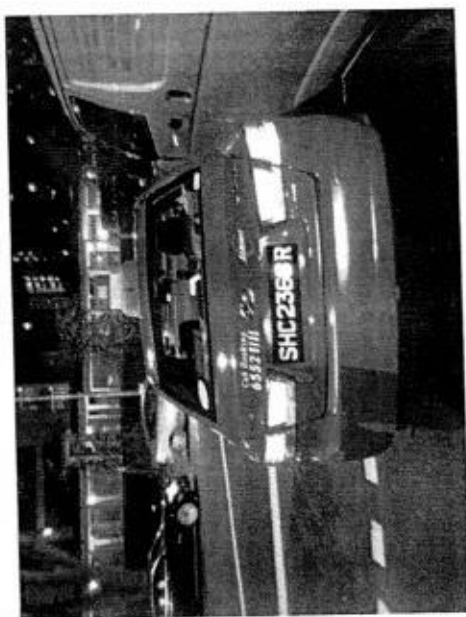
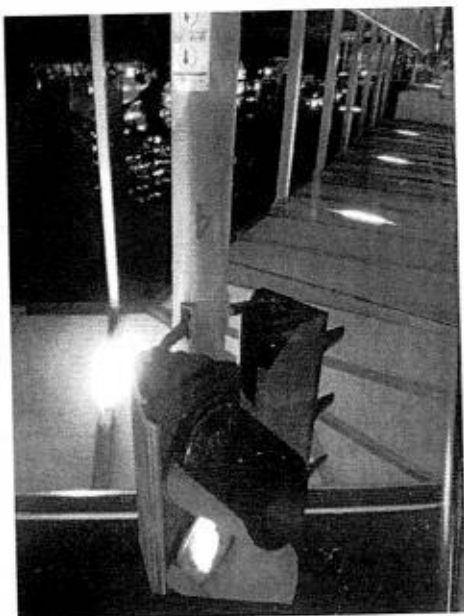
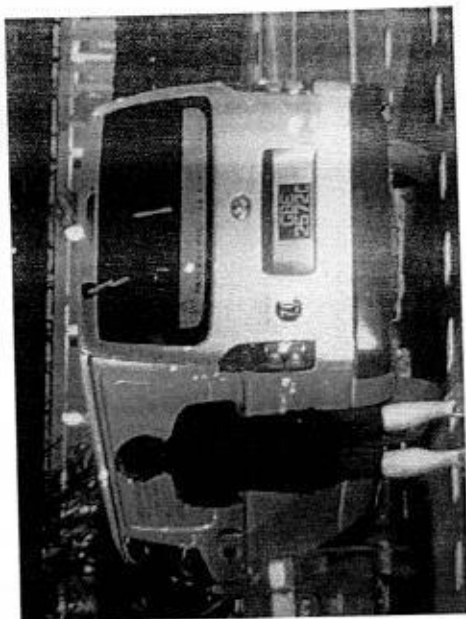
Informant is not able to provide sketch plan

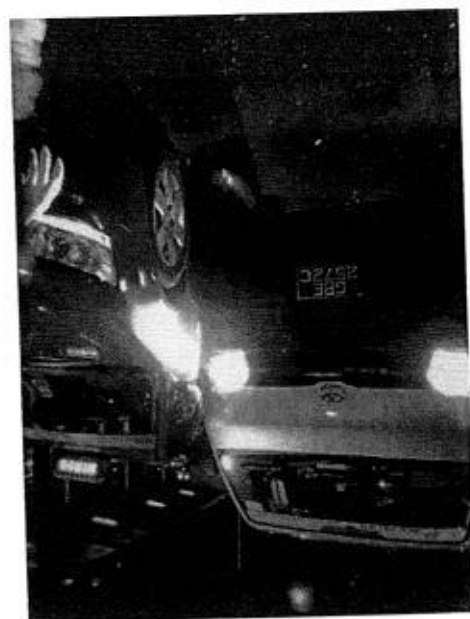
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sgt 3 MUHAMAD ZHAFRI BIN REJAB		Signature Of Informant: 	
Signature Of Interpreter: Not applicable		Date/Time: 19/06/2018 13:47	
Officer In Charge Of Case: TP / AEIT / SIANG YI TING, STEPHANIE Contact No.: 65476414		Classification Of Case:	
Authentication Stamp NP168		SIGNATURE	









Date/Time: 19.06.2018 18:28

JOB CARD Sales Order:

JC NO: 305177412

Team: ARC Repair TP(CLSO)1

CUSTOMER

COMFORT TRANSPORTATION PTE LTD

VARs

VMS 7010045

CUSTOMER NO. 383 SIN MING DRIVE

ADDRESS Singapore SINGAPORE 575717

65508755

L (R) (O)

(P)

REGN NO. SHC2368R

MILEAGE

MAKE HYUNDAI

FUEL

E.....1/2.....F

MODEL SONATA

DATE/TIME IN 19.06.2018 14:10

YR OF MANU. 30.06.2011

TARGET DATE

CHASSIS CODE KMHE141VMB813661

COMPLETION DATE/TIME:

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 18.06.2018

NATURE: 3P 18.06.2018

S/NO LABOR CODE DESCRIPTION

NTUC - taxi Right side
LKK/Kalun

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Signature

Id.: SHC2368R LARRY

Id No.: SHC2368R

Larry Ng

Signature of Service Advisor

Signature/Date

Returned to Service Reception upon collection

Exit Pass

Vehicle No.: SHC2368R

Name of Service Advisor

Date

To be kept by Security Guard

REPAIR ESTIMATE*

VEHICLE NO : SHC 2368R

DATE 20/6/2018 8:35

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Front Door (RH) — <i>Bad</i>			\$ 1,345.00	
	Front Door Outer Handle (RH) <i>x repair</i>			\$ 37.00	
	Front Door Protector (RH) — <i>CR</i>			\$ 74.90	
	<i>Rear Door (RH) x repair</i>				
	SUB TOTAL			\$ 1,456.90	
	LESS 20%			\$ 291.38	
	DISCOUNTED TOTAL			\$ 1,165.52	
	Front Door Comfort Logo (RH) — <i>nc</i>			\$ 75.00	Nett
	Rear Door Tel No. Sticker (RH) — <i>nc</i>			\$ 10.00	Nett
				\$ 85.00	
	Labour Charge				
	Panel Beating			\$ 350.00 ²⁰⁰	
	Spray Painting Charge-Doors x 2/Mirror			\$ 600.00	450
	Wiring Charge			\$ 50.00	x 11
	Tuff Kote			\$ 50.00	20
	Transfer of Door			\$ 120.00	50
	TOTAL LABOUR			\$ 1,170.00	
	ESTIMATE TOTAL			\$ 2,420.52	
<i>Kalin (LKK)</i> <i>20/6/18 1420hrs.</i> <i>2 Rys</i> <i>L/S</i> <i>After Repair photo</i>					
<div> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • 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 <p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p> </div>					
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.					

Larry Ng

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305177412
Date : 22. Jun. 2018

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SHC2368R

Fax :

Date of Accident: 18.06.2018

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

1. The repair job shall bill to: NTUC GBE2572C
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges
 - Total for Part-By-Part Repair Cost**
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less:
Final Lumpsum Repair cost \$1,550.00
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 : Larry Ng
Name : Larry Ng
Tel : 6214 8316
Fax : 6546 8156

Signature : Kalvin
Name : Kalvin
Date : 22/6/18

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/INC18011221/K1vbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 27-06-2018



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBE 2572C	Veh. Inspected	SHC 2368R
Policy No.	5074863750-02	Coverage (\$)	0.00
Claim No.	MT/0999812-001	Excess (\$)	0.00
Assign From		Assign Date	20/06/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA813661	Colour	BLUE
Odometer	593403	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	MAXXIS	7 mm
L/H Front Tyre	215/60 R16	MAXXIS	7 mm
R/H Rear Tyre	215/60 R16	MAXXIS	7 mm
L/H Rear Tyre	215/60 R16	MAXXIS	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	18/06/2018	Inspection Date	20/06/2018
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



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



Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 2368R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT DOOR (RH)	DENTED	1,345.00	1,345.00
1	FRONT DOOR OUTER HANDLE (RH)	TO REPAIR SEE LABOUR	37.00	-
1	FRONT DOOR PROTECTOR (RH)	CRACKED	74.90	74.90
1	REAR DOOR (RH)(NPA)	TO REPAIR SEE LABOUR	-	-
LESS 20% DISCOUNT			-291.38	-283.98
			1,165.52	1,135.92
<u>SPECIAL NETT ITEMS</u>				
1	FRONT DOOR COMFORT LOGO (RH)(SN)	NECESSARY	75.00	75.00
1	REAR DOOR TEL NO STICKER (RH)(SN)	NECESSARY	10.00	10.00
			85.00	85.00
<u>LABOUR</u>				
PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT DOOR OUTER HANDLE (RH) AND REAR DOOR (RH).			350.00	200.00
SPRAY PAINTING CHARGE-DOORS X2/MIRROR.			600.00	450.00
WIRING CHARGE.			50.00	-
TUFF KOTE.			50.00	20.00
TRANSFER OF DOOR.			120.00	50.00
			1,170.00	720.00
GRAND TOTAL			2,420.52	1,940.92
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,550.00

Report Ref No. NS/INC18011221/K1vbn2

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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