

ASS. REC. BY:

REF:

CS/MS618011291/As b<sup>n2</sup>

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person):

Fievel Foo

of

MSL

Date/Time: 21062018 3pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKV 7095Z

Insured:

FBM 1749A

at Workshop n/s

People's Vehicle

Tel:

6743 3246

of

Blk 3023A Ubi Rd 1 #01-60

Policy No:

MSD/VMS /17-985327 - WTT

Claim No:

MSC/V/18-000819

Sum Insured:

Excess:

Make of Veh:

D.O.A. 17062018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

21062018 354pm

Person Contacted:

Junet

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SKV 7095Z - X

FBM 1749A - X

25/06/18 @ 15:14 p.m. revert pending estimate from repairer to Fievel Foo  
via messenger.

REF:

ASS. REQ. BY: Adrian King

## 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.

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

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SKV72952

Yr Regn:

2015, Sept.

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

Truck / Trailer or

Make:

Honda City

C.C. 1497

Colour

Brown

A/C: Insured / Std / NI / NA

Sp. Reading

66744

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

MRHGM66606P000257

Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

185/55R16

R:

185/55R16

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

Front

R/Bal.

86

mm

L/Bal.

86

mm

D.O.A.

Rear

R/Bal.

86

mm

L/Bal.

86

mm

D.O.I.

22/06/18

Survey held at

People

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

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

Date / Time

Action / Instruction

TP MS16,

\* Part prices checked by Adrian

(\$ 2,511.80 Red - 61%)

RECEIVED 25 JUL 2018

Date/Time, File Pass to?

25/07/18

1)

Typ. 3+

Date/Time, File Return to?

2)



: Preli. Report



: Final Report

Days Of Repair:

4

Resurvey No. of Trip:

1

Add Fee:



: Site Insp. (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

150

10

160

Report Format:

Lump Sum / L.B.I. (\$ 1,600.00 1/5)

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	18 Jun 2018		21 Jun 2018 15:00 Assign				<b>New Assignment</b> Cancel Case

Main	Reference	Claim Details	Documents	Show All
<div>CLAIM SUBFOLDER DETAILS</div> <div> <div>Insured:</div> <div>Main Claimant:</div> <div>Vehicle Reg. No.:</div> <div>Claim Type:</div> <div>Vehicle Reg. No. (Insured):</div> <div>Repairer:</div> <div>Handling Insurer:</div> <div>Adjuster:</div> <div>Driver/Custodian (Insured):</div> <div>Adj Asg. Remarks:</div> </div> <div> <div>ANG ENG SIONG, ID: S0194457F, Tel: +6583362039, Email: NOEMAIL</div> <div>TAN KIM NEI MICHAEL, ID: S0101539G</div> <div>SKV7295Z</div> <div>TP / MSC/V/18-000819</div> <div>FBM1749A</div> <div>People's Vehicle Recovery Service (HQ) Blk 3023A Ubi Rd 1, #01-60, 408717 Ubi - Tel: 67433246</div> <div>MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Fievel Foo Wenyao - 6643 1316]</div> <div>LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 22/06/2018]</div> <div>ANG ENG SIONG (63 / Male), NRIC: S0194457F, Tel: +6583362039</div> <div>SURVEY AGREE ON SJE - REQUEST TO ASSIGN LKK (ADRIAN LING) LIABILITY: 100% CONTACT: JANET 6743 3246</div> </div> <div> <div>Date of Loss:</div> <div>Policy/Cover Note No.:</div> <div>Policy No. (Claimant):</div> <div>Excess:</div> </div> <div> <div>17/06/2018 10:00 - :59 [32 Months and 18 Days From LTA Reg Date (Man Yr)]</div> <div>MSD/VMS/17-985327-WTT (TP, Fire &amp; Theft) Coverage: 10/08/2017 - 09/08/2018</div> </div>				

View All

Compose Case Mail

Surveyor Report

## 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 18/06/2018 14:52  
Date Of Accident 17/06/2018 10:15  
Exact Location Of Accident SLIP ROAD OF BEDOK NORTH AVE 4, TO UPPER CHANGI RD  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SKV7295Z  
**Insured/Policyholder**  
Name Of Registered Owner TAN KIM NEI MICHAEL  
NRIC No S0101539G  
Email Address MICHAELTANGO147@GMAIL.COM  
Mobile Phone No (LOCAL) +65-96276270  
Alternative Phone No OFFICE-96276270  
**Vehicle Particulars**  
Manufacturer HONDA  
Model CITY-1.5 SV CVT (A)  
Exact Purpose for which vehicle was being used at time of accident PERSONAL USE  
Are you claiming under your own insurance policy for repair to your vehicle? YES  
If No, Please state action to be taken  
Vehicle Category PRIVATE CAR  
**Insurance Company**  
Name of Insurance Company TOKIO MARINE INSURANCE SINGAPORE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number 17-MW008723-R02  
Cover Note Number  
**Driver**  
Name of Driver TAN KIM NEI MICHAEL  
NRIC No S0101539G  
Date Of Birth 07/08/1947  
Occupation INDOOR  
Date Of Driving Pass 31/08/1972  
Driving Experience 45 YEARS AND 9 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-96276270  
Fax Number  
Contact Number OFFICE-96276270  
EMail Address MICHAELTANGO147@GMAIL.COM

Address	147 JALAN BATALONG EAST
Postcode	509639
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	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 ATTACHED STATEMENT - OWN DAMAGE LATER REVERT.

#### 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	FBM1749A
Vehicle Make/Model/Colour	SYM/JOYRIDE/DARK GREY
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	ANG ENG SIONG
NRIC/Passport Number	S0194457F
Contact Number	
Address	BLK 303 SERANGOON AVENUE 2 #06-266
Postcode	550303
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan Pg. 2

Vehicle No SKV 7295 Z

Annex E

Describe Circumstances of the Accident

Refer to attached →

Declaration

We declare the foregoing particulars are true in every respect.

 18/06/2018  
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Vehicle No SKV 7295 Z**SKETCH PLAN**

Annex D

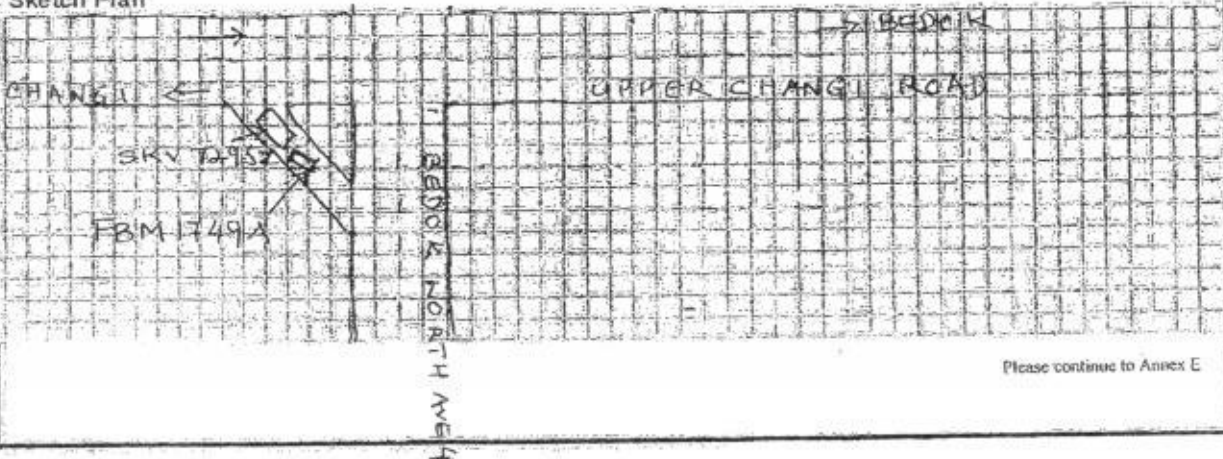
**IMPORTANT NOTICE**

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 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.
  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.

18/06/2018  
 Policyholder's Signature / Date &  
 Time

Driver's Signature (if driver is not the policyholder) / Date  
 & Time

Witnessed by Reporting Centre  
 Personnel

**Sketch Plan**



## NOTICE OF REPORTING NON-INJURY TRAFFIC ACCIDENT

This is to confirm that Tan Kim Nei Michael; NRIC: S0101539G, residing at 147 Jalan Batalong East S(509639), HP: 96276270, has reported to the Police a non-injury traffic accident which occurred along slip road of Bedok North Avenue 4 towards Upper Changi Road on 17/06/18 at about 1015hrs involving the following vehicles: SKV7295Z and FBM1749A

On 17/06/18, at about 1015hrs, while driving my vehicle (SKV7295Z) along the slip road from Bedok North Avenue 4 towards Upper Changi Road, as there were oncoming vehicles, my vehicle came to a stop. While stationary, I felt an impact from the back. When I alighted from my vehicle, I saw that the rider of FBM1749A was alighting from his motorcycle. At that point of time, both the rider and motorcycle was upright. I realized that the motorcycle had collided with the rear of my vehicle. There were damages to the bumper and boots. After the accident, we exchanged particulars and took photos of the damages on our vehicles respectively and the accident scene before moving off.

I would like to state that there were no traffic police or ambulance at scene. There were no visible injuries on either parties as well. The particulars of the other party: Ang Eng Siong, S0194457F, residing at Block 303 Serangoon Avenue 2 #06-266 S(550303)

I am lodging this report for my own record purposes.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(3) Jonathan Lim


Date: 19/06/18

Time: 1234hrs

S/D Ref: 2

Police Post/Unit: Tampines East NPP

**Tampines East NPP**  
Block 263 Tampines St 21  
#01-138 Singapore 520263  
Tel: 1800-7839999

  
S 0101539G



Sketch Plan Pg. 3

Accident Report

Vehicles involved:

- 1 SKV7295Z (self) – Honda City
- 2 FBM1749A (Other Party) – Motorcycle (SYM Joyride 2001).

Particulars of Other Party:

Name: Ang Eng Siong

NRIC: S0194457F

Address: Blk 303 Serangoon Avenue 2 #06-266

Singapore 550303

Date of Accident: 17 June 2018

Time: 10.15 am

Location: Slip Road of Bedok North Avenue 4 to Upper Changi Road

Damage to Motorcycle: slight crack lines on the right lamp.

Damage to Vehicle (Honda City): Scratches and paint on the left side of rear bumper. Bumper and booth lid dislocated.

Brief description of Accident:

On approaching the slip road of Bedok North Avenue 4 and Upper Changi Road, I slowed to a stop at the junction.

A few moment later, I felt and heard a bump at the rear of my vehicle. I got out of my vehicle and saw Mr. Ang Eng Siong (rider of the motorcycle that bumped into my car) got off his motorcycle. Both Mr. Ang Eng Siong and his motorcycle were in upright position. We inspected the damages to our vehicles and exchanged our particulars (NRIC). There were no injuries to both parties.



18/06/2018

# PEOPLE'S VEHICLE RECOVERY SERVICE

BLK 3023-A UBI ROAD 1 #01-60 SINGAPORE 408717

Tel No. : 67433246/ 67438552 Fax No. : 67430013

E-Mail : PEOPLEVEHICLE@GMAIL.COM

Tax Reg. No. : M90001895E Buss. Reg. No. : 31800200X

MSIG INSURANCE (SINGAPORE) PTE LTD  
4 SHENTON WAY #21-01  
SGX CENTRE 2 (S) 068807

Attention : Motor Claim Department

Contact : 68277888 Fax No. : 6827 7800

Slidey.

Estimate : ES18015

Date : 22/06/2018

Vehicle Num. : SKV 7295 Z

Make/Model : HONDA CITY

Chassis/Eng# :

Accident Date : 17/06/2018

Claim No. : TP 305-18

Reference : FBM 1749 A

Policy No. : TOKIO MARINE 17-MW008723-R02

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

LIST ITEMS:				
1.	1	BOOTLID <i>Dented</i>		475.00 ✓
2.	1	BOOTLID H EMBLEM		14.50 ✓
3.	1	BOOTLID CITY EMBLEM		15.30 ✓
4.	1	BOOTLID I-VTEC EMBLEM		14.90 ✓
5.	1	BOOTLID MOULDING <i>new</i>		98.50 x
6.	1	BOOTLID INNER LOCK <i>new</i>		90.30 x
7.	1	BOOTLID RUBBER		71.60 x
8.	1	BUMPER REAR <i>Dented</i>		463.70 ✓
9.	1	BUMPER SIDE RETAINER REAR <i>new</i>		11.50 ✓
10.	1	BUMPER BRACKET REAR <i>new</i>		14.50 x
11.	1	BOOTLID LAMP L/H <i>new</i>		72.80 x
12.	1	TAIL LAMP L/H <i>new</i>		205.70 x
13.	1	END PANEL REAR <i>Repair</i>		395.00 x

994.9  
795.92

List Total S\$ :

15.00% Discount S\$ :

20 %

1,943.30

291.50

1,651.80

SPECIAL NETT ITEMS :

1. 1 REVERSE SENSOR *Dmgd*

Special Nett Total S\$ :

480.00 *200,*

480.00

CONTINUE / ...

# PEOPLE'S VEHICLE RECOVERY SERVICE

BLK 3023-A UBI ROAD 1 #01-60 SINGAPORE 408717  
 Tel No. : 67433246/ 67438552 Fax No. : 67430013  
 E-Mail : PEOPLEVEHICLE@GMAIL.COM  
 Tax Reg. No. : M90001895E Buss. Reg. No. : 31800200X

MSIG INSURANCE (SINGAPORE) PTE LTD  
 4 SHENTON WAY #21-01  
 SGX CENTRE 2 (S) 068807

Attention : Motor Claim Department  
 Contact : 68277888 Fax No. : 6827 7800

Estimate : ES18015

Date : 22/06/2018  
 Vehicle Num. : SKV 7295 Z  
 Make/Model : HONDA CITY  
 Chassis/Eng# :  
 Accident Date : 17/06/2018  
 Claim No. : TP 305-18  
 Reference : FBM 1749 A  
 Policy No. : TOKIO MARINE 17-MW008723-R02

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

LABOUR :  
 REMOVE & REPLACE ACCIDENT DAMAGED PARTS  
 SPRAY PAINTING ACCIDENT EFFECT PARTS  
 CHECKING WIRING  
 UNDERCOAT

1030

~~850.00~~ 400  
~~850.00~~ 600  
~~60.00~~ 30  
 120.00 X

Labour Total S\$ :

1,980.00

total: 2025.52

L/s: 1.6K

SingDollars : Four Thousand One Hundred Eleven & Cents Eighty Only

E. & O.E.

Total S\$ : 4,111.80

LKK Auto Consultants hence notify  
 for PEOPLE'S VEHICLE RECOVERY SERVICE  
 Computer Generated Invoice No. 180601895E

• To resurvey before/after spray painting  
 • To display damaged parts Required 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:

Adrian G  
 L/s 22/06/18  
 OA Rys

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

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

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

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG18011291/ASBN2  
Date: 30/07/2018

### REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VMS/17-985327-WTT	
Claimant Vehicle No :	SKV7295Z	Insured Vehicle No :	FBM1749A	
Date of Loss:	17/06/2018	Nature of Claim:	TP	Claim No: MSC/V/18-000819

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SKV7295Z	Engine No:	L15Z12712442
Make & Model:	HONDA CITY, 1.5 CVT (A)	Chassis No:	MRHGM6660GP000257
Reg. Date:	30/09/2015 (Man. Year: 2015)	Odometer:	66744 km
Colour:	Brown		
Engine Capacity:	1497 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size:	185/55R16	Rear Tyre Size:	185/55R16
Front Left Side:	Dunlop 6 mm	Rear Left Side:	Dunlop 6 mm
Front Right Side:	Dunlop 6 mm	Rear Right Side:	Dunlop 6 mm

The above values represent the remaining tyre treads depth

### COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	2,131.80	995.92	1,135.88	53.28
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,980.00	1,030.00	950.00	47.98
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (\$\$)</b>	<b>4,111.80</b>	<b>2,025.92</b>	<b>2,085.88</b>	<b>50.73</b>
<b>Approved Total (Overridden) (\$\$)</b>		<b>1,600.00</b>		
<b>(\$\$)</b>	<b>4,111.80</b>	<b>1,600.00</b>	<b>2,511.80</b>	<b>61.09</b>
<b>+ GST 7.00/7.00% (\$\$)</b>	<b>287.83</b>	<b>112.00</b>	<b>175.83</b>	<b>61.09</b>
<b>Nett Amount (\$\$)</b>	<b>4,399.63</b>	<b>1,712.00</b>	<b>2,687.63</b>	<b>61.09</b>

### INSPECTION

Date of Assignment: 21/06/2018  
Date Inspected: 22/06/2018 Inspected At:

People's Vehicle Recovery Service  
(HQ)  
Blk 3023A Ubi Rd 1, #01-60  
Singapore 408717

Estimated Period of Repair: 4.0 days

Adjuster: ADRIAN LING

Manager: Hiew May Fung

*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: 30 Jul 2018)  
 Parts: 143 HONDA CITY 1.5 CVT (A) (Catalogue:Merimen Singapore 1.0)  
 Labour: Repairer's (Price-denominated Standard List)  
 Print Code: (Unsubmitted, no print-code for SKV7295Z)  
 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 \*.

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BOOTLID	Dented	475.00 FL	*475.00 FL
2	1		*BOOTLID H EMBLEM	Necessary	14.50 FL	*14.50 FL
3	1		*BOOTLID CITY EMBLEM	Necessary	15.30 FL	*15.30 FL
4	1		*BOOTLID I-VTEC EMBLEM	Necessary	14.90 FL	*14.90 FL
5	1		*BOOTLID MOULDING	Not Necessary	98.50 FL	*- FL
6	1		*BOOTLID INNER LOCK	Not Necessary	90.30 FL	*- FL
7	1		*BOOTLID RUBBER	Not Necessary	71.60 FL	*- FL
8	1		*BUMPER REAR	Deformed	463.70 FL	*463.70 FL
9	1		*BUMPER SIDE RETAINER REAR	Necessary	11.50 FL	*11.50 FL
10	1		*BUMPER BRACKET REAR	Not Necessary	14.50 FL	*- FL
11	1		*BOOTLID LAMP L/H	Not Necessary	72.80 FL	*- FL
12	1		*TAIL LAMP L/H	Not Necessary	205.70 FL	*- FL
13	1		*END PANEL REAR	Repair	395.00 FL	*- FL
14	1		*REVERSE SENSOR	Damaged	480.00 FS	*200.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (\$\$)	2,423.30	1,194.90
- List Item Discount on L Items 15.00/20.00% (\$\$)	291.50	198.98
Total Parts (\$\$)	2,131.80	995.92

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
<u>Labour Items</u>				
1	REMOVE & REPLACE ACCIDENT DAMAGED PARTS	New	950.00	400.00
2	SPRAY PAINTING ACCIDENT EFFECT PARTS	New	850.00	600.00
3	CHECKING WIRING	New	60.00	30.00
4	UNDERCOAT	New	120.00	-
Gross Labour Cost (\$\$)			1,980.00	1,030.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >