

S. REC. BY:

REF: CS3/CT118012131/G246ST

Special Instruction:

Surveyor

GK

ASSIGNMENT (Office)

From (Person):

Chong Boon Sen

of

CTL

Date/Time: 08072018 4.16pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SGR 4876D

Insured:

YP 2814A

at Workshop m/s:

Autowerke Automotiv

Tel:

9630 1281

of

Blk 8 Kaki Bukit Ave 4 #05-01

Policy No:

DMCVSN173611700

Claim No:

SNM12D03283CD

Sum Insured:

Excess:

Make of Veh:

D.O.A. 30062018

(Client's Record)

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

H.O.D. Endorsement:

Date/Time:

04072018 948am

Person Contacted:

Alex

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

SGR 4876D -X

YP 2814A -X

5/7/18

Dismantled

PRs
MELMEL

REF: CTL

ASSIGNMENT

(-2021)=

From: Date: 04/07/2018

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: SCIE 4876D

at Workshop m/s Autowerke Automotive

of Blk 8 Kaki Bukit Ave 4 #05-01

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.

Bal. or Market Value: \$16k

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: 56E4876D Yr Regn: 18 Mar 2006

Type: M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Toyota Vios c.c. 1497

Colour: Black A/C: Insured / Std / NI / NA

Sp. Reading: 162062 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MR053HY 4204173649

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60 R14 R: 1

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

Front Rear

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. 5 mm L/Bal. 5 mm

D.O.A. D.O.I. 04-07-18

Survey held at w/s 4:20pm

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
	\$2000 - \$3000.
7/7/18	Submit PRS report.
RECEIVED 09 JUL 2018	

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2)

Report Format :

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

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ Site Insp. (\$)

☐ Interview (\$)

☐ Tech. Invs (\$)

☐ Weekend (\$)

Survey Fee: ☐ \$ + RS \$

Transportation: ☐ Photos

☐ Others

TOTAL

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Jul 2018		03 Jul 2018 16:16 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

Show All

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	TAT LEE SANITARY & PLUMBING PTE LTD, Co. Reg. No.: -		
Main Claimant:	LI SI YU, ID: G2452388N		
Vehicle Reg. No.:	SGE4876D	Date of Loss:	30/06/2018 19:00 - :59
Claim Type:	TP / SNM18D03283C02	Policy/Cover Note No.:	DMCVSN173611700 (Comprehensive)
Vehicle Reg. No. (Insured):	YP2814A	Policy No. (Claimant):	5098527706
		Excess:	S\$0.00
Repairer:	Autowerke Automotive Pte Ltd (HQ) 8 Kaki Bukit Ave 4, #05-01/02, Premier Building, 415875 Kaki Bukit - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 12/07/2018]		
Driver/Custodian (Insured):	SUBBIAH KARNAN (41 / Male), NRIC: F8308105T, Tel: +6584026182		
Adj Asg. Remarks:	NO EST, CASE W/O SJE.		

ASSOCIATED MAIL RECEIVED

View All

Compose Case Mail

There are no mail for this case.



ALL ASSOCIATED TASKS

Due Date Priority Type Task Group Subject Handler View All Search Tasks Create New Task Complete
Assigned By Completed On Created On Done?

No results.

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	02/07/2018 17:44
Date Of Accident	30/06/2018 19:30
Exact Location Of Accident	AYE SLIP RD TO CLEMENTI AVE 06
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGE4876D
Insured/Policyholder	
Name Of Registered Owner	LI SI YU
NRIC No	G2452388N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98986455
Alternative Phone No	OTHERS-98986455

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS-1.5 J (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098527706
Cover Note Number	

Driver

Name of Driver	LI SI YU
NRIC No	G2452388N
Date Of Birth	25/04/1991
Occupation	INDOOR
Date Of Driving Pass	02/08/2017
Driving Experience	0 YEAR AND 10 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-98986455
Fax Number	
Contact Number	OTHERS-98986455
Email Address	NOEMAIL

Address	1 GEYLANG EAST AVENUE 1 #14-12 CENTRAL GROVE
Postcode	389778
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 BELOW STATEMENT/SKETCH PLAN

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	YP2814A
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

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 lodging 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/are 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 situated outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claim 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.

Policyholder's Signature
Date & Time:

Insurer's Signature
(If driver is not the policyholder)
Date & Time:

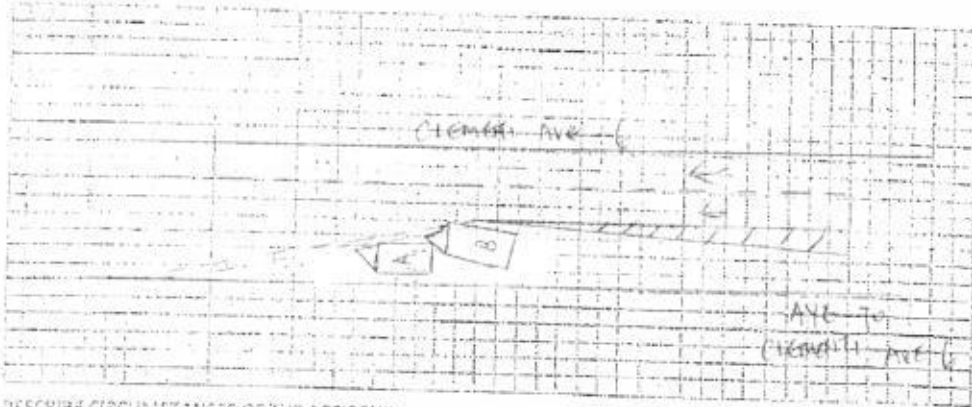
IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Reporting Centre Personnel's Office
Singapore 415953
Name: _____
Tel: 67416697 Fax: 67492305
Email: yackb@sinonet.com.sg

Accident Sketch Plan Pg. 1

A SHE 4876D

B YP 2314A

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE STATED TIME AND DATE, I WAS TRAVELLING ALONG
STATED VENUE, WHEN I REACHED THE GIVE WAY LINE GIVING
WAY TO THE MAJOR ROAD I STOPPED AS THERE WERE ~~TO~~ INCOMING
TRAFFIC WAITING FOR A SAFE DISTANCE BEFORE I EXIT. SUDDENLY
I FELT A HUGE IMPACT FROM THE REAR. I ALIGHTED AND
REALISED VEHICLE B (YP2314A) HAD COLLIDED ONTO MY REAR (SHE4876D),
CAUSING DAMAGES WE EXCHANGED PARTICULARS AND LEFT THE SCENE

DECLARATION

I/We declare the information provided is true and correct.

SJ
Policyholder's Signature
Date: 5.7.15

Driver's Signature
(If driver is not the policyholder)
Date & Time:

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Reporting Centre Personnel's Signature
Singapore 415933
Name:
NRIC/ID No:
Tel: 67416697 Fax: 67492305
Email: vackb@sinanet.com.sg

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Foreign Identification Number
Owner ID:	2388N

Vehicle Details

Vehicle No.:	SGE4876D
Vehicle to be Exported:	No
Intended De-registration Date:	05 Jul 2018
Vehicle Make:	TOYOTA
Vehicle Model:	VIOS 1.5E A
Primary Colour:	Black
Manufacturing Year:	2006
Engine No.:	1NZX373099
Chassis No.:	MR053HY4204173649
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$13,040.00
Original Registration Date:	18 Mar 2006
First Registration Date:	18 Mar 2006
Transfer Count:	1
Actual ARF Paid:	\$11,417.00

Intended PARF Rebate Details

PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	17 Mar 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$24,771.00
COE Rebate Amount:	\$13,371.00
Total Rebate Amount:	\$13,371.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 05 Jul 2018

OK

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Jul 2018		03 Jul 2018 16:16 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	TAT LEE SANITARY & PLUMBING PTE LTD, Co. Reg. No.: -		
Main Claimant:	LI SI YU, ID: G2452388N		
Vehicle Reg. No.:	SGE4876D	Date of Loss:	30/06/2018 19:00 - :59 [147 Months and 12 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / SNM18D03283C02	Policy/Cover Note No.:	DMCVSN173611700 (Comprehensive)
Vehicle Reg. No. (Insured):	YP2814A	Policy No. (Claimant):	5098527706
		Excess:	S\$0.00
Repairer:	Autowerke Automotive Pte Ltd (HQ) 8 Kaki Bukit Ave 4, #05-01/02, Premier Building, 415875 Kaki Bukit - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 12/07/2018]		
Driver/Custodian (Insured):	SUBBIAH KARNAN (41 / Male), NRIC: F8308105T, Tel: +6584026182		
Adj Asg. Remarks:	NO EST, CASE W/O SJE.		

ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

***SGE4876D (SNM18D03283C02)**
[YP2814A]
TP
LI SI YU
Jun 30 2018 7:00PM
[TAT LEE SANITARY & PLUMBING PTE LTD]
Autowerke Automotive Pte Ltd

[Upload Documents](#)
[Upload Photos](#)
[Compose New Letter](#)

View [View in Browser](#)

Assessment Reports			1 per page	☒
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print
1	02/07/18 17:54	Accident Statement	Load HTM	
2	03/07/18 08:59	Addendum Sheet	Load TIF	
3	03/07/18 09:00	Accident Statement Addm. #1	Load HTM	
Photos/Images			3 per page	☒
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print
1	02/07/18 17:53	Driving License [Linked Accident Report Documents]	Load JPG	☒
2	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
3	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
4	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
5	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
6	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
7	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
8	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
9	02/07/18 17:53	Accident Photo [Linked Accident Report Documents]	Load JPG	☒
Documentation			1 per page	☒
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	03/07/18 16:15	PRS	Load PDF	
2	03/07/18 16:16	OI GIA	Load PDF	
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print
1	02/07/18 17:54	Accident Sketch Plan [Linked Accident Report Documents]	Load TIF	
2	02/07/18 17:54	Accident Sketch Plan [Linked Accident Report Documents]	Load TIF	

Linked Accident Report Documents

Assessment Reports			1 per page	☒
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print
1	02/07/18 17:54	Accident Statement	Load HTM	
2	03/07/18 08:59	Addendum Sheet	Load TIF	
3	03/07/18 09:00	Accident Statement Addm. #1	Load HTM	
Photos/Images			3 per page	☒
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print

Assessment Reports				✓
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print
1	02/07/18 17:53	Driving License	 Load JPG	✓
2	02/07/18 17:53	Accident Photo	 Load JPG	✓
3	02/07/18 17:53	Accident Photo	 Load JPG	✓
4	02/07/18 17:53	Accident Photo	 Load JPG	✓
5	02/07/18 17:53	Accident Photo	 Load JPG	✓
6	02/07/18 17:53	Accident Photo	 Load JPG	✓
7	02/07/18 17:53	Accident Photo	 Load JPG	✓
8	02/07/18 17:53	Accident Photo	 Load JPG	✓
9	02/07/18 17:53	Accident Photo	 Load JPG	✓
Documentation			1 per page	✓
No	Finalized On	VAC (Kaki Bukit)	Thumbnail	Print
1	02/07/18 17:54	Accident Sketch Plan	 Load TIF	
2	02/07/18 17:54	Accident Sketch Plan	 Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

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: CS3/CT118012131/GZ4BS2

Date: 09/07/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN173611700
Claimant Vehicle No :	SGE4876D	Insured Vehicle No :	YP2814A
Date of Loss:	30/06/2018	Nature of Claim:	TP
		Claim No:	SNM18D03283C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SGE4876D	Engine No:	1NZX373099
Make & Model:	TOYOTA VIOS, 1.5 J (A)	Chassis No:	MR053HY4204173649
Reg. Date:	18/03/2006 (Man. Year: 2006)	Odometer:	162062 km
Colour:	Black		
Engine Capacity:	1497 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

Front Tyre Size:	185/60R14	Rear Tyre Size:	185/60R14
Front Left Side:	Goodyear 5 mm	Rear Left Side:	Goodyear 5 mm
Front Right Side:	Goodyear 5 mm	Rear Right Side:	Goodyear 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:	03/07/2018	
Date Inspected:	04/07/2018	Inspected At: Autowerke Automotive Pte Ltd (HQ) 8 Kaki Bukit Ave 4, #05-01/02, Premier Building Singapore 415875
Estimated Period of Repair:	4.0 days	

Adjuster: XING GUO QIANG

Manager: Ho Zhao Tian

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.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,000.00 - \$3,000.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 09 Jul 2018)
Parts:	143	TOYOTA VIOS 1.5 J (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SGE4876D)	
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

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >