From (Person)	1 (01.10)	of MSIG	Detc/Tir	13/07/180
Estimated Cost	TT RES / OD RES / EV.	Bill 6: _ A / INV / MV / C8		
_		SIG 5003D	Insured S1	K 7578D
	Compl			55 0012
of	176 Sin Ming C	DAVE # 03-14		0
Policy No:	28884730 QMY	Claim	No:	
Sum Insured		Exe	oss:	
Make of Veh (Client's Record			D.O.A	06/07/2018
	REP. / REV 24 HRS W 53pm 13/7/18 Pe	rson Contacted:	11.0.D. Hui Vehicle I	Endorsement:
Date/Time	Action/Instruction (✓) Estimate		
		3/II/80/2396 CC3/III/80/2396	1 -	DOA: 6/7/ NA: 6/7/18
19/07/18	@ 17:04 pm	revised In to	Morica chang	via meine

160

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

Case /	lotified	Est Submitted	Ad) Assigned	Ad) Rpt	Adj :	Submitted	Ins Authled	Status		
Main	6 Jul 2018		13 Jul 2018 17:09 Assign					New Ass	The State of the S	t
М	ain	R	eference		Claim Detai	s	Document	s		show All
CLAIM SUB	FOLDER DE	TAILS				[Create	d by insurer]	Total and Theorem		Contract Contract
Insured:	SIME DA	RBY SERVICES F	TE LTD, Co. Re	g. No.: 197	601291E					
Main Claimant:	PANIR SE	ELVAM S/O NAR	AINASAMY, II): S131751	9E					
Vehicle Reg. No.:	SJG500	3D			Date of Lo	ee.	18 13:00 - :59 hths and 3 Days F	rom LTA Re	g Date (I	Man Yr)]
Claim Type:	TP				Policy/Cov Note No.:		28884730QMY (Comprehensive) Coverage: 25/01/2018 - 24/01/2019			
Vehicle Reg. No. (Insured):	SLK7578	D			Policy No. (Claimant	e				
					Excess:			-		
Repairer: Handling	COMPLET	E VMS PTE LTD	(HQ) 176 Sin Mi	ng Drive #0	3-14 Sin Ming	Autocare Cor	nplex, 575721 Sin	Ming - Tel:	6455 00	012
nandling Insurer:	MSIG Ins	urance (Singap	ore) Pte. Ltd. (F	(Q) - Tel: +	65 6827 7888	[Handled	by Monica Chung	Pei Zhen	- 6594 2	552]
Adjuster:	LKK Auto	Consultants Pt	e Ltd (HQ) - Tel:	6256-3561	[Imm.A	dvice due 1	14/07/2018]			
Driver/Custo dian (Insured):		PENG (/ Male),	NRIC: S7906506	D						
Adj Asg. Remarks:	Liability -	not clear SJE agre	ee - LKK Contact	: Li Hui at 6	455 0012					
ASSOCIATI	D MAIL RE	CEIVED						/iew All	Compose	Case Ma
There are no	mail for this	case.								
ALL ASSO	IATED TAS	SKS=				View All	Search Tasks	Create Ne	w Task	Complet
Due Date No results.	Priority	Type Task	Group Sub	ject Har	ndler Ass	igned By	Completed On	Crea	ted On	Done



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

nsured Veh. Policy No. Claim No. Assign From Make & Model Engine No. Chassis No.	Policy Particulars SLK 7578D 28884730QMY MERIMEN (MONICA CHUNG) Vehicle Parti	Veh. Ir Cover Exces Assign culars 8	D PARTY CLAII nspected age (\$) s (\$) n Date	M SJG 5003D 0.00 0.00 13/07/2018
Policy No. Claim No. Assign From Make & Model Engine No. Chassis No. Odometer	SLK 7578D 28884730QMY MERIMEN (MONICA CHUNG) Vehicle Parti	Veh. Ir Cover Exces Assign culars 8	nspected age (\$) s (\$) n Date	SJG 5003D 0.00 0.00
Policy No. Claim No. Assign From Make & Model Engine No. Chassis No. Odometer	28884730QMY MERIMEN (MONICA CHUNG) Vehicle Parti	Coverage Exces Assignment Assignm	age (\$) s (\$) n Date	0.00
Make & Model Engine No. Chassis No. Odometer	MERIMEN (MONICA CHUNG) Vehicle Parti	Exces Assign culars 8	s (\$) n Date	0.00
Make & Model Engine No. Chassis No.	Vehicle Parti	Assign culars 8	n Date	
Make & Model Engine No. Chassis No.	Vehicle Parti	culars 8	Trust (Street	13/07/2018
ingine No. Chassis No. Odometer		c.c	Condition	
ingine No. Chassis No. Odometer	HIDDEN	12.25.23		
Chassis No. Odometer	HIDDEN			0
Odometer	AN AN ALTHOUGH WAT	Year o	f Reg.	
		Colou	r	
		Steeri	ng	
Brakes		Modifi	cation	
General				
a Pakerasa	Condit	ions of	Tyres	
	Size	Make		Balance
R/H Front Tyre				mm
/H Front Tyre				mm
R/H Rear Tyre				mm
/H Rear Tyre				mm
	Descripti	on of D	amages	
	Genera	al Inform	nation	
Accident Date	06/07/2018	Inspe	ction Date	
	COMPLETE VMS PTE LTD			
•	BLK 176 SIN MING DRIVE #03-14	EX SING	APORE 575721	
	R	Remarks		
_	CCIDENT DATE	General Coldent Date 06/07/2018 Urvey held at COMPLETE VMS PTE LTD BLK 176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLETE INSPECTION WAS CONDUCTED ON A"WI	Description of Date O6/07/2018 Inspector of Sin Ming Drive #03-14 SIN MING AUTOCARE COMPLEX SING Remarks OTHE INSPECTION WAS CONDUCTED ON A"WITHOUT P	Description of Damages General Information ccident Date 06/07/2018 Inspection Date urvey held at COMPLETE VMS PTE LTD BLK 176 SIN MING DRIVE

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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Attn:

Monica Chung Pei Zhen

Date:

19 Jul 2018

Preliminary Advice

Insured Vehicle No : SLK7578D

TP Vehicle No

: SJG5003D

Accident Date

: 06/07/2018

Make

: 13/07/2018

: TOYOTA PICNIC

Assignment Date

Date of Inspection : 18/07/2018

Est. Duration of Repair

: 3 days

Inspection At

: COMPLETE VMS PTE LTD (HQ) 176 Sin Ming Drive #03-14 Sin Ming Autocare Complex

Singapore 575721

Point of Impact / General Description of Damages

The vehicle sustained impact / damages n/s front portion and parts claimed are consistent to the accident.

		0 070 75
Repairer's Estimate (Gross)	:S\$	6,372.75
Revised Amount	:S\$	1,651.25
Check Items (Estimated)	:S\$	531.00
Total	:S\$	2,182.25
	117	

Lump Sum Repair

:5\$

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

8 7)	The	vehicle	is	economical/not	economical	for	repair.
-----	---	-----	---------	----	----------------	------------	-----	---------

The above survey was conducted on a 'without prejudice' basis.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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.

- 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.

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А	u	u	υ	ΕВ	01	м	-117	1-1	1

Date Of Report

09/07/2018 10:39

Date Of Accident

06/07/2018 13:30

Exact Location Of Accident

FROM PIE TOWARDS TOH TUCK AVE

Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJG5003D

SINGAPORE

Insured/Policyholder

Name Of Registered Owner

PANIR SELVAM S/O NARAINASAMY

NRIC No

S1317519E

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-90102169

Alternative Phone No

OFFICE-97126757

Vehicle Particulars

Manufacturer

TOYOTA

Model

PICNIC

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

INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

D18MPC0000573

Cover Note Number

Driver

Name of Driver

PANIR SELVAM S/O NARAINASAMY

NRIC No

S1317519E

Date Of Birth

26/09/1958

Occupation

INDOOR

Date Of Driving Pass

Driving Experience

27/06/2006 12 YEARS AND 0 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-90102169

Fax Number

Contact Number

OFFICE-97126757

EMail Address

NOEMAIL

Address

APT BLK 624 HOUGANG AVENUE 8

#04-202 SINGAPORE

Postcode

530624

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 - CHANGE/CROSS LANE

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

NO

ambulance?

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:

: SURYA N

GENDER:

: MALE

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

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

SLK7578D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR NG KIAN PENG

Name of Driver

NRIC/Passport Number

S7906506D

Contact Number

96588988

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 15

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 archiving of this report at the centre and to copies of the report being made available aforesald.
- 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 the purpose(s).
 - 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
- (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.
- (d) 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:
 - 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.

Policyloider's Signature Date & Time: Driver Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

inck Art. Vinich B wif my valucle. Dozakolowa and
ick AM. Vinicu B wit my valucle. Izveakalown and
inck Arr. Vinica B wif my which. Irregalown and
ick Arr. Vinicu B Wif my vahicle. Izveakolowa and
ick Arr. Vinicu B Vif my vahicle. Dreakdown and
ick Arr. Vinice B wif my which. Irregkolown and
ick Art. Vinicu B Wif my vahicle. Izveakolown and
uck Avr. Vrnicu B Wif vny vzhicle. Izrzakolowa aud
uck Avr. Vrnice B Wif my vahicle. Izveakolown and
ick Art. Vinich B Wif my vahicle. Izveakalown and
ick Avr. Vrnicu B Vif vny vzhicle. Izrzakolowa aud
inck Art. Vinich B Wif my Which. Izreakolown and
hif my vahicle. Izvegledown and
loreatdown and
Contre Personnel's Signature



COMPLETE VMS PTE LTD. The Premier One-Stop Vehicle Accident Claims Centre. 176 Sin Ming Drive, #03-14, Sin Ming Autocare Complex, Singapore 575721 (Tel) 6455 0012 (Fax) 6554 0012 (Web) www.completevms.dom.sg

> Email: darren@completevms.com.sg (lily@completevms.com.sg (lihui@completevms.com.sg (

Mon Northerns

11 Sn 8 15501 Estimate: ES006399

Date: 06/07/2018

White Num: SJG5003D

Make/Model: TOYOTA PICNIC-2008

Chassis/Fng#: JTEGH23B800025787/

Chassis/Eng#: JTEGH23B800025787/1AZ5784104

Accident Date: 06/07/2018

Claim No.: Reference: Policy No.: 0

Attention: THE OWNER

Contact: 90102169

SINGAPORE 530624

S/N Quantity

Particular

PANIR SELVAM S/O NARAINASAMY BLK 624 HOUGANG AVE 8 #04-202

Unit Price

Amount S\$

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	1 1 1 1 1 1 1 1 8 1 1 1 1 1	LIST ITEMS: HEADLAMP L/H HEADLAMP BRACKET L/H FRONT BUMPER FRONT BUMPER BRACKET L/H FRONT BUMPER SIDE RETAINER L/H FRONT BUMPER FOG LAMP L/H FRONT BUMPER FOG LAMP BRACKET L/H FRONT BUMPER CLIP FRONT FENDER L/H FRONT FENDER INNER SHIELD L/H FRONT LOWER ARM L/H FRONT KNUCKLE ARM L/H FRONT SHOCK ABSORBER L/H FRONT WHEEL BEARING L/H	7.00 7 920.00 7 7.00 7 920.00 7 300.00 7 441.00 7 185.00 7 185.00 7
		List TotalS\$: 25.00% Discount S\$:	5,517.00 1,379.25
			4,137.75
		LABOUR:	300(

LABOUR: SPRAY PAINT DAMAGED AREA AFFECTED CHECK LIGHTING COMPUTER WHEEL ALIGNMENT RUST PROOFING TREATMENT REMOVE & REINSTALL FRONT SUSPENSION L/H TO KNOCK OUT DENT ON FRONT CHASSIS FRAME AND CHANGE ALL NECESSARY PARTS

Labour Total S\$:

Total S\$:

6.372.75

900.00

120.00 X

100.00 X

2,235.00

250.00 X

65.00 20

800.00 3001

SingDollars: Six Thousand Three Hundred Seventy-Two & Cents Seventy-Five Only

COMPLETÉ VMS PTE LTD

This is only an estimate bases on our preliminary inspection and does not cover additional parts survey is on a "Without Prejudice" basis may be required after the work has begun

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation

- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

I KK 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/MSG18012790/KSD3N2

Date:

23/08/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

B28884730QMY

Claimant

SJG5003D

Insured Vehicle No:

SLK7578D

Vehicle No: Date of Loss:

06/07/2018

Nature of Claim:

TP

Claim No: 564507

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SJG5003D

Make & Model:

TOYOTA PICNIC, 2.0 W/O ROOF RACK (A)

Engine No:

1AZ5784104

Reg. Date:

03/07/2008 (Man. Year: 2008)

Chassis No: Odometer:

JTEGH23B800025787 232586 km

Colour:

Metallic Silver

Engine Capacity: Market Value/New Car 1998 cc

Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable): **CONDITION OF TYRES**

Yes Engine Modification:

Pre-accident Condition:

205/60R16

Front Tyre Size: Front Left Side:

205/60R16 Dunlop 9 mm Rear Tyre Size: Rear Left Side: Rear Right Side:

Dunlop 9 mm Dunlop 9 mm

Front Right Side: Dunlop 9 mm The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,137.75	1,311.22	2,826.53	68.31
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,235.00	620.00	1,615.00	72.26
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	6,372.75	1,931.22	4,441.53	69.70
Approved Total (Overridden) (S\$)		1,550.00		
(S\$)	6,372.75	1,550.00	4,822.75	75.68
+ GST 7.00/7.00% (S\$)	446.09	108.50	337.59	75.68
Nett Amount (S\$)	6,818.84	1,658.50	5,160.34	75.68

INSPECTION

Date of Assignment:

13/07/2018

Date Inspected:

18/07/2018 Inspected At:

COMPLETE VMS PTE LTD (HQ) 176 Sin Ming Drive #03-14 Sin Ming

Autocare Complex Singapore 575721

Estimated Period of Repair:

3.0 days

Manager: Hiew May Fung Adjuster: KENNETH KONG

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: 23 Aug 2018)

Parts: M1-MPV TOYOTA PICNIC 2.0 W/O ROOF RACK (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SJG5003D)

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 *.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*HEADLAMP L/H	Cut	695.00 FL	*630.00 FL
2	1		*HEADLAMP BRACKET L/H	Serviceable	98.00 FL	*- FL
3	1		*FRONT BUMPER	Cracked	568.00 FL	*568.00 FL
4	1		*FRONT BUMPER BRACKET L/H	Cracked	55.00 FL	*55.00 FL
5	1		*FRONT BUMPER SIDE RETAINER L/H	Distorted	56.00 FL	*56.00 FL
6	1		*FRONT BUMPER FOG LAMP L/H	Cracked	430.00 FL	*383.30 FL
7	1		*FRONT BUMPER FOG LAMP BRACKET L/H	Repair	125.00 FL	*- FL
8	8		*FRONT BUMPER CLIP	Necessary	56.00 FL	*56.00 FL
9	1		*FRONT FENDER L/H	Repair	920.00 FL	*- FL
10	1		*FRONT FENDER INNER SHIELD L/H	Serviceable	300.00 FL	*- FL
11	1		*FRONT LOWER ARM L/H	Serviceable	1,010.00 FL	*- FL
12	1		*FRONT KNUCKLE ARM L/H	Serviceable	441.00 FL	*- FL
13	1		*FRONT SHOCK ABSORBER L/H	Serviceable	578.00 FL	*- FL
14	1		*FRONT WHEEL BEARING L/H	Serviceable	185.00 FL	*-FL
F=Fr	anchise	part L=ListIt	emDisc.	-		
		***************************************		Sub Total (S\$)	5,517.00	1,748.30
			- List Item Discount on L Items	ere Bellin Chical Head, United State (1985) - 120 (1985) - 1	1,379.25	437.08
				Total Parts (S\$)	4,137.75	1,311.22

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

Repairer's	Amount
	W. D. W.
900.00	300.00
65.00	20.00
120.00	-
100.00	97
250.00	
800.00	300.00
2,235.00	620.00
	2,235.00

< END OF ESTIMATES >