Tom (Person)	christna wong	of	MSIG	Date/Time: 25/7/180
Estimated Cos	t:		Bill to:	
OD (TP) WS To Inspect Ve	hicle No. S	A/INV/MY70		Insured: YN 7687C
t Workshop i		Auto		Tel: 97619383
f	160 Sin Mir	o Drive =	#06-20	
olicy No:	28 941443 M		Claim No:	3•3
um Insured:			Excess:	
Aake of Veh:			TES PER	D.O.A. 20 107 12018
Client's Record	REP. / REV 24 HRS	w ²		27107 208 H.O.D. Endorsement:
CA / REV /	0.29am 6 26/7118	lerson Contacted:	Ryan	Vehicle IN OUT
Date/Time: 10	8115/00 @mp/e.o	erson Contacted:	0	Vehicle IN OUT
Date/Time: 10	Action/Instruction (SLN 4479K -	erson Contacted: Estimate	0	Vehicle IN OUT
CA / REV / Date/Time: U	Action/Instruction (Person Contacted: Estimate	0	Vehicle IN OUT

(08/11/13) wef REF: MSIG	8		
ASS. REC. BY:	ASSIGNMENT		
From: Date: 27 0	P. C.	479/ _{C Yr Regn:} Og	
On TP WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: SLN 44791	Truck / Trailer or	A Stran RSZ	MPV 1798 Std/NI/NA
at Workshop m/s RC Auto of 160 8in Ming Drive # 06-2 Insured:	Sp.Reading 1859 Eng/No:	T/Radio: Insured /	
Policy No. Claims No. Sum Insured: Excess:	C/No: Gen. Cond: 2000 Fair / Poor / Steering: Inorder / Jammed / L		134466
(Client's Record) Make of Veh:	Brake: Inerder / Jammed / L. Modi: Nil / S/Rim / STD A/		
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection.	Tyre Size: F: Yok6 R: Arc BS / DUN / EXNOVA / GY / FS TOYO / YOKO or	215/50 /LIZA/MIC/OHTSU/PIR/	
Bal. or Market Value: IDAC Accident Rport: GIA / PR Seen: Consistent?: Yes or No. Consistent?: Yes or No. Consistent?: Yes or No. Consistent?: Yes or No.	b L/Bal. of mm	Rear R/Bal. L/Bal. D.O.I. 3 0 24	7 mm 7 mm 4/7/18
CA / REV / REP. / 24 HRS twp Vehice Date: Person Contacted:	Des. of Damages : Frt Rear	/ O/S / N/S / U/C / Roofte	
Date/Time Action/Instruction 31/7 Fike pass to Corposite 18 13/8/18 Send preli revised in RECEIVED	via merimen		
Date/Time, File Pass to7 : Prell. Report	Days Of Repair: 4 Resurvey No. of Trip:	Survey Fee:	
1) : Final Report Date/Time, File Return to?	Nosurvey no. or mp.	Transportation:	120
2) 13/8- typist	Add Fee: : Site Insp (\$: Interview (\$)S + RS,Sl) Photos	10
Report Format : Merimen	Tech. Invs (\$) Others	
Lump Sum / I.B.I: (\$ >050 2	:Weekend (\$		160
		TOTAL	



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 Internation	nale Des Experts En Autom	obile
MSIC	INSURANCE (SI	NGAPORE) PTE LTD	Ref : CS/MSG180136	632/Kvd3
	AFFLES QUAY 01 HONG LEONG	BLDG SINGAPORE 048581	Date: 26-07-2018 Code: MSG	
1.		Policy Particulars :	- THIRD PARTY CLAI	M
	Insured Veh.	YN 7687C	Veh. Inspected	SLN 4479K
	Policy No.	28941443MKC	Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From	MERIMEN (CHRISTINA WONG)	Assign Date	26/07/2018
2.		Vehicle Partic	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer		Steering	
	Brakes		Modification	
	General			
3.		Condition	ons 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	on of Damages	
5.		Genera	I Information	
٠.	Accident Date	20/07/2018	Inspection Date	30/07/2018
	Survey held at	160 SIN MING DRIVE # 06-20		MAKEN TRENCTOR
	Repairer	R C AUTO		
5a.	Action and the second	R	emarks	
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WIT	HOUT PREJUDICE" BAS	SIS. SED REPAIRS.

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

MSIG Insurance (Singapore) Pte. Ltd. To:

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:

Christina Wong

Date: 13 Aug 2018

Preliminary Advice

Insured Vehicle No	: YN7687C		
TP Vehicle No	: SLN4479K	Accident Date	: 20/07/2018
Make	: HONDA STREAM	Assignment Date	: 25/07/2018
Date of Inspection	: 30/07/2018	Est. Duration of Repair	: 4.00
Inspection At	: RC AUTO-160 SIN MING (HQ) 160 SIN MING DRIVE, #06-20 SIN SINGAPORE 575722	MING AUTOCITY	

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	3,328.24	
Revised Amount	:S\$	2,050.00 (Lump Sum)	
Check Items (Estimated)	:S\$	0.00	
Total	:S\$	2,050.00	
Total		2,000.00	

:S\$ Lump Sum Repair

Total Loss Consideration

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

Remarks

The vehicle is economical/not economical for repair.

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

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

Main	24 Jul 2018		25 Jul 2018 16:07 Assign					New Assignme Cancel Case	ent
	Main	Ref	erence	r	Claim Details		Document	ts	Show All
CLAIM SU	BFOLDER DE	TAILS			Name of the second	[Create	d by insurer1		
Insured:	BOK HUNG	TRANSPORT SE	RVICE, Co. R	eg. No.: 52	832854M	1.0			
Main Claimant:	Zulhilmi B	in Mohamed Yat	im, ID: 5842	4324H					
Vehicle Reg No.:	SLN4479	Zulhilmi Bin Mohamed Yatim, ID: S8424324H SLN4479K			Date of Loss:		018 00:00 - :59 nths and 4 Days F	rom LTA Reg Date	(Man Yr)]
Claim Type	: TP				Policy/Cover Note No.:	2894144			and the second second
Vehicle Reg No. (Insured):	YN7687C				Policy No. (Claimant):			,,03,2013	
					Excess:				
Repairer:	Rc Auto-1	60 Sin Ming (HQ) 160 SIN MING	DRIVE, #0	6-20 SIN MING A	AUTOCITY,	575722 Sin Ming -	Tel:	
Handling Insurer:	MSIG Inst	rance (Singapor	e) Pte. Ltd. (H	IQ) - Tel: +	65 6827 7888	[Handled	by Christina Wor	ng - 6643 1311]	
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Imm.Adv	ice due 2	26/07/2018]		
Adj Asg. Remarks:	on WP. Liab	ility unclear. Non I	Reporting, Conta	act Person:	Mr Tan / 9761 93	83.			
ASSOCIAT	ED MAIL REG	CEIVED						View All Compo	se Case Mai
There are n	o mail for this	case.					-		10000
ALL ASSO	CIATED TAS	KS-				View All	Search Tasks	Create New Task	Complete
Due Dati No results.	S. S	Type Task (froup Sub)	ect Har	idler Assign	red By	Completed On		

View Sent Message

This mail is associated with :

*SLN4479K (565611) [YN7687C] TP

Zulhilmi Bin Mohamed Yatim Jul 20 2018 12:00AM [BOK HUNG TRANSPORT SERVICE] Rc Auto-160 Sin Ming

View Recipients | Print Message | Delete Message | Forward Resend

From To

LKK Auto Consultants Pte Ltd (LKK_HQ), sent on 31/07/2018 11:31 AM. MSIG_CWSF1

TP SURVEY SLN 4479K Subject

Dear Christina,

Please be informed that we have inspected the vehicle SLN 4479K on 30/7/2018 .

We are pending estimate from repairer.

Best Regards, Veron Chen

DOCUMENTS SUMMARY

There are no documents.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

/ehicle Owner Particulars	THE STATE OF THE S
Owner ID Type:	Singapore NRIC
Owner ID:	4324H
/ehicle Details	W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
/ehicle No.:	SLN4479K
/ehicle to be Exported:	No
ntended De-registration Date:	31 Jul 2018
/ehicle Make:	HONDA
/ehicle Model:	STREAM 1.8 RSZ A
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	R18A1738684
Chassis No.:	RN61034464
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$20,098.00
Original Registration Date:	16 May 2007
First Registration Date:	16 May 2007
Transfer Count:	2
Actual ARF Paid: Intended PARF Rebate Details	\$22,108.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	15 May 2022
COE Category:	E - Open Category
COE Period(Years):	5
PQP Paid:	\$26,246.00
COE Rebate Amount:	\$19,896.00
Total Rebate Amount: Message	\$19,896.00
Please note that the 5-year COE for this vehicle cann the vehicle reaches its statutory lifespan (if applicable	ot be further renewed. The vehicle must be de-registered upon COE expiry or when

The information contained herein is correct as at 31 Jul 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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

100 mm	ACCIDENT STATEMENT
Date Of Report	20/07/2018 12:13
Date Of Accident	20/07/2018 07:10
Exact Location Of Accident	BUKIT BATOK RD TWDS JURONG TOWN HALL -LP119
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	

SLN4479K Vehicle Registration Number

Insured/Policyholder

ZULHILMI BIN MOHAMED YATIM Name Of Registered Owner

S8424324H NRIC No

SKS.ZULHILMI@GMAIL.COM Email Address

(LOCAL) +65-96340497 Mobile Phone No

OFFICE-NOPHONE Alternative Phone No

Vehicle Particulars

HONDA Manufacturer STREAM Model

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 PRIVATE CAR

Vehicle Category

Insurance Company

FWD SINGAPORE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

PNPV2018-00005718 Policy Number

Cover Note Number

Driver

ZULHILMI BIN MOHAMED YATIM Name of Driver

S8424324H NRIC No 09/08/1984 Date Of Birth OUTDOOR Occupation 22/10/2004 Date Of Driving Pass

13 YEARS AND 8 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-96340497 Mobile Number

Fax Number

OFFICE-NOPHONE Contact Number

SKS.ZULHILMI@GMAIL.COM EMail Address

Address

APT BLK 489A CHOA CHU KANG AVENUE 5 #12-187

Postcode

681489

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 - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

NO

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

3

Passenger 1

NAME:

: NADIYAH BTE SUHAIMI

GENDER:

: FEMALE

Passenger 2

NAME:

: IZZ FITRAS BIN ZULHIMI

: MALE GENDER:

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 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 Vehicle Make/Model/Colour

YN7687C

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

QU TIEWU

NRIC/Passport Number

G2197472U

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 18

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

FLOD Vehicle SLN 4479K

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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
- 7. 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 aforesaid.
- 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
- 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.
- 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.

Date & Time:

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

Reporting Centre Personnel's Signature

Name:

MRIC/FIN No.:

Sketch Plan Pg. 2

ehicle A: <u>SLN 4479</u> HPLAN	Vehicle B: N 768	1
	1 A A	4-3LN 4-4479K 3-4N 7637C
RIBE CIRCUMSTANCES C	OF THE ACCIDENT	
The	front I slo	w down due t
red light		1- 11+
A	losy from my	rear could my
5 tog 11	Time and	ni ohw my
regi	1 20 200 1200	revarded.
100	inford wise	
Claim OD/TP at Ah L	im Motor Claim (TP) t oth	er workshop Reporting Only
Remarks : Please forward	a copy of my efile accident report to:	
My workshop : RC	Auto	5 · 1 / · · ·
k myself : 5M Email address :	ail: regutossss 6	Jaman 1. LOW .
		for you to submit own damage claim under
you own policy. Kindly ch	eck with your own insurer for more info	ormation.
CLARATION Ve declare the foregoing part	SLN L	1479K AD
licyholder's Signature	Driver's Signature	Reporting Centre Personael's Signature
inchinance a affinishment		A A SOLUTION
te & Time: 20/7/18	(If driver is not the policyholder) Date & Time:	NRIC/FIN No.: MA U



CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2018-00005718 (Comprehensive - Classic Plan)

Car plate number: SLN4479K

Your name (As the policyholder): Zulhilmi Bin Mohamed Yatim

Coverage start date: 16/05/2018 Coverage end date: 15/05/2019

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company: Hong Leong Finance Limited

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

issued on: 24/04/2018

Abhishek Bhatia Chief Executive Officer

FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888 or email us at contact.sg@fwd.com if any details in this Certificate of Insurance need to be changed.

ESTIMATE RC AUTO

Wot Norharks Willy 82050h Reamy Athe Pain

Date:

30/7/2018

Eday,

160 Sin Ming Drive #06-20 Sin Ming Autocity Singapore 575722

Tel: 97619383 Email: rcauto5555@gmail.com

Reg. No. 53199168K

SLN 4479 K

Quantity		Description/Particular	Unit Price		Amount	
	REAR TAILGATE	903. a.		12	1170	00
	REAR BUMPER	688.96	Bu		980	00
	REAR WINDSCREEN	MOULDING	N	-	113	00
		N GLASS INNER SEAL		M		80
	REAR TAILGATE ST			m	38	00
	REAR TAILGATE LO			M	34	50
	RS.		TOTAL\$		2385	30
	, , ,	V	LESS20\$		1908	24
	REVERSE SENSOR			na	250	00
1 SET	TO REINSTATE REA	AR WINDSCREEN			120	00
	TO REPLACE ABOV				600	00
	TO RESPRAY JOB	E I Pillio			450	00
		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	\$		3328	2
Received t	he above goods in goo	No illegal modification(s) is allowed orderpand.condition(s) in allowed orderpand.condition(s) must be resurveyed and is subject to final approval from Insurance Company Acknowledged by Repairer Signature: Date:	#06-20 Sin), Sin A D Sin A gapor IP: 976	Ming Drive Ming AutoC e 575722 51 9323 5556 ginar	10.E.V
	Received by	E.&.O.E.	Aut	horise	ed Signati	ure

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/MSG18013632/KVD3N2

Date:

15/08/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

28941443MKC

Claimant Vehicle No :

SLN4479K

Insured Vehicle No:

YN7687C

Date of Loss:

20/07/2018

Nature of Claim:

TP

Claim No: 565611

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SLN4479K

Make & Model: Reg. Date: HONDA STREAM, 1.8 RSZ (A) 16/05/2007 (Man. Year: 2007)

Chassis No: Odometer:

Engine No:

R18A1738684 RN61034464

185414 km

Colour:

White

Engine Capacity: Market Value/New Car 1799 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):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES Yes Engine Modification:

Rear Tyre Size:

215/50ZR17

Front Tyre Size: Front Left Side: 215/50ZR17 Yokohama 8 mm

Rear Left Side: Rear Right Side:

Michelin 7 mm Michelin 7 mm

Front Right Side: Yokohama 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts Miscellaneous Items	Repairer's 2,158.24 0.00	Adjuster's 1,661.76 0.00	Difference 496.48 0.00	Diff % 23.00
Labour Paintwork Labour	1,170.00 0.00	940.00 0.00	230.00 0.00	19.66
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$) Approved Total (Overridden) (S\$)	3,328.24	2,601.76 2,050.00	726.48	21.83
Nett Amount (S\$)	3,328.24	2,050.00	1,278.24	38.41

INSPECTION

Date of Assignment:

25/07/2018

Date Inspected:

30/07/2018 Inspected At:

Rc Auto-160 Sin Ming (HQ)

160 SIN MING DRIVE, #06-20 SIN

MING AUTOCITY Singapore 575722

Estimated Period of Repair:

4.0 days

Adjuster: KENNETH KONG

Manager: VERON CHEN

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: 15 Aug 2018)

Parts:

M1-MPV

HONDA STREAM 1.8 RSZ (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SLN4479K)

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 *.

Recommend	led Pa	arts
-----------	--------	------

	*REAR TAILGATE	<u> </u>		
	NEAN TAILOATE	Bent	1,170.00 FL	*903.00 FL
	*REAR BUMPER	Buckled	980.00 FL	*688.90 FL
	*REAR WINDSCREEN MOULDING *REAR WINDSCREEN GLASS INNER SEAL	Necessary Necessary	113.00 FL 49.80 FL	*113.00 FL *49.80 FL
	*REAR TAILGATE STREAM EMBLEM *REAR TAILGATE RSZ LOGO	Necessary Necessary	38.00 FL 34.50 FL	*38.00 FL *34.50 FL
iee nad SaSnoN	*SET REVERSE SENSOR	Dented	250.00FS	*200.00 FS
iso part o opere		Sub Total (S\$)	2,635.30	2,027.20
	- List Item Discount on L Items 2	0.00/20.00% (S\$)	477.06	365.44
		Total Parts (S\$)	2,158.24	1,661.76
ise	part. S≃SpcN	*REAR TAILGATE STREAM EMBLEM *REAR TAILGATE RSZ LOGO *SET REVERSE SENSOR part. S=SpcNett. L=ListItemDisc.	*REAR TAILGATE STREAM EMBLEM *REAR TAILGATE RSZ LOGO Necessary *SET REVERSE SENSOR Dented part. S=SpcNett. L=ListItemDisc. Sub Total (S\$) - List Item Discount on L Items 20.00/20.00% (S\$)	*REAR TAILGATE STREAM EMBLEM Necessary 38.00 FL *REAR TAILGATE RSZ LOGO Necessary 34.50 FL *SET REVERSE SENSOR Dented 250.00 FS *part. S=SpcNett. L=ListItemDisc. Sub Total (S\$) 2,635.30 - List Item Discount on L Items 20.00/20.00% (S\$) 477.06

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TO REINSTATE REAR WINDSCREEN	New	120.00	120.00
2	TO REPLACE ABOVE PARTS	New	600.00	400.00
3	TO RESPRAY JOB	New	450.00	420.00
		Gross Labour Cost (S\$)	1,170.00	940.00
	Report was	unsubmitted during this print-out.		

< END OF ESTIMATES >