From (Person) Eng +	wound Assign	MENT (Office) MS IG	Date/Time: 1018/2018@10.300
- Coat		Dill to:	
OD (FP) WS / TP RES / O To Inspect Vehicle No:	S/V 132	T Ins	ured: SIN 4125G
OI DIK	5007 Ubi Rd 1	+ Trading	Tel: 6747 4006
Policy No: A29069:	766 MKF	Claim No: 56	6688
Sum Insured:		Excess:	
Make of Veh: (Client's Record)			8106 80 FO A.O.D
(Client's Record) CA / REV / REP. / REV	24 HRS 140)		D.O.A. 07/08/2018 15/8/180 Before 12pm. H.O.D. Endorsement:
(Client's Record)	24 HRS W) 8 8 Person Contacted	Ah hua	15/8/18@ Before 12pm.
(Client's Record) CA / REV / REP. / REV Date/Time: 4.340m 6 13	8 8 Person Contacted		15/8/18@ Before 12pm.
(Client's Record) CA / REV / REP. / REV Date/Time: 4.340m 6 13 Date/Time Action/Instruc	8 108 Person Contacted		15/8/18@ Before 12pm.
(Client's Record) CA / REV / REP. / REV Date/Time: 4:340m @ 13 Date/Time Action/Instruc	8 108 Person Contacted Stion () Estima T - ×	te	H.O.D. Endorsement: Vehicle IN/ (III)
(Client's Record) CA / REV / REP. / REV Date/Time: 4.340m @ 13 Date/Time Action/Instruct SIV 137	Person Contacted Stion () Estima T - × 25 G - CCA AS	te M18010490/	H.O.D. Endorsement: Vehicle IN/ GUT Veh
CA / REV / REP. / REV Date/Time: 9:340m @ 13 Date/Time Action/Instruct SIV 137 LS 8 (80 4.20m ln	Person Contacted Stion () Estima T - × 25 G - CCA AS	te M18010490/	H.O.D. Endorsement: Vehicle IN/ GUTD Kub3 DOA: 28/5/18 Ending extinute from vegasing

ASSIGNMENT

From: Date:	Veh No: SJV 1327. Yr Regn: 2010 / Jan
Estimated Cost:	Type M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Toyota Estima. c.c 2362
at Workshop m/s	Make: Toyota Estima. c.c 2362 Colour Blue. A/C: Insured/Std/NI/NA
of	Sp.Reading 136906 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: ACR50009 3923.
Claims No.	Gen. Cond Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering norder Jammed / Leaked / Burnt or
(Client's Record)	Brake: morder Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil S/Rim / STD A/Rim or
	Tyre Size: F: 2/5/55R17.
(Policy Condition)	Tyre Size: F: 215/55R17. R: 15/55R17.
Remark: The veh had commenced its N/S O/S	BS (DUN) EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 06 mm L/Bal. 06 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. D.O.I. 14/08/18.
Lum Sum: % 3 Val.: Yes or No	Survey held at Kai Molor.
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear V O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / OU'	T C:
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
TP MSG. MV: 35K PV: 20.7K Nett: 14.3K	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 3
1) III Funish : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: 150
Add Fe	ee: : Site Insp (\$) _ s+RSSI
hark -70	: Interview (\$) Photos
Report Format: MCL-7P	Tech. Invs (\$) others. 10
ump Sum / 1.54: (3 1400	:Weekend (\$)
	160 IATOTAL



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	onale Des Experts En Automo	obile
MS	G INSURANCE (S	INGAPORE) PTE LTD	Ref : CS/MSG180146	41/Gqd3
	RAFFLES QUAY -01 HONG LEONG	B BLDG SINGAPORE 048581	Date: 13-08-2018 Code: MSG	
1.		Policy Particulars	:- THIRD PARTY CLAIM	И
	Insured Veh.	SLN 4125G	Veh. Inspected	SJV 132T
	Policy No.	A29069766MKF	Coverage (\$)	0.00
	Claim No.	566688	Excess (\$)	0.00
	Assign From	MERIMEN (ENG HUEY NI)	Assign Date	13/08/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer		Steering	
	Brakes		Modification	
	General			
3.		Condit	ions 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.		Descripti	on of Damages	
5.	of the same NAC VIII	Genera	I Information	
	Accident Date	07/08/2018	Inspection Date	14/08/2018
		KAI MOTOR TRADING		
		BLK 3007 UBI ROAD 1 #01-434 SINGAPORE 408701		
5a.		R	emarks	
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT PREJUDICE" BASIS	S. D REPAIRS.

. 1

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Sub	mitted	Ins Auth'ed	Status	
Main	07 Aug 2018		10 Aug 2018 10:20 Assign						ssignment Case
ħ	lain	Re	ference		Claim Details		Docume	nts	Show All
CLAIM SU	FOLDER DE	TAILS				[Create	ed by insurer]		
Insured:	GRAB RE	NTALS PTE LTD,	Co. Reg. No.: 2	01617200G		Levent	co by mourcij		
Main Claimant:		SHENG (HE SHU							
Vehicle Reg. No.:	SJV1321	r			Date of Loss:	The state of the s	018 15:00 - :59 onths From LTA Re	g Date (Mai	n Yr)]
Claim Type:		688	88		Policy/Cover Note No.:	cy/Cover A29069766MKF (Comprehensive)			
Vehicle Reg, No. (Insured):	SLN41250	G			Policy No. (Claimant):				
					Excess:	S\$2,000			
Repairer: Handling	KAI MOTO	OR TRADING (HQ) BLK 3007 UBI	ROAD 1, #0	01-440, 408701	Ubi - Tel:			
Insurer:	MSIG Inst	urance (Singapoi	re) Pte. Ltd. (H	Q) - Tel: +6	55 6827 7888	[Handled	by Eng Huey Ni	- 6643 1314	4]
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Imm.Advi	ice due	11/08/20181		
Driver/Custo dian (Insured):	0.		IC: S0209341C,				,,,		
Adj Asg. Remarks:	SURVEY AC	GREE ON SJE - REC	QUEST TO ASSIG	N LKK (ADR	IAN LING) LIABI	LITY:100	% CONTACT MS K	YM 6747 40	06
ASSOCIATI	D MAIL REG	CEIVED						View All I	C
There are no	mail for this	case.						View All	Compose Case Ma
ALL ASSO	CIATED TAS	KS⊟				View A	II Search Tasks	Create Ne	ew Task Comple
Due Date	Priority	Type Task 0	Group Subje	ect Han	dler Assign		Completed O		ited On Done

Note: This document has not been finalised.

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

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

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

Singapore 408933

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:

Eng Huey Ni

Date:

11 Jan 2019

Preliminary Advice

Insured Vehicle No : SLN4125G

TP Vehicle No

: SJV132T

Accident Date

: 07/08/2018

Make

: TOYOTA ESTIMA

Assignment Date

: 10/08/2018

Date of Inspection

: 14/08/2018

Est. Duration of Repair

: 3.00

Inspection At

: KAI MOTOR TRADING (HQ)

BLK 3007 UBI ROAD 1, #01-440

SINGAPORE 408701

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\$	4,250.45
Revised Amount	:S\$	1,765.69
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,765.69
Lump Sum Repair	:S\$	1,400.00

Total Loss Consideration

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

Remarks

1)	The	vehicle	is	economical/not	economical	for	repair
---	---	-----	---------	----	----------------	------------	-----	--------

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

Shiau Chan (LKKAuto)

From:

Do-Not-Reply <do-not-reply@merimen.com>

Sent:

Wednesday, 15 August 2018 4:20 PM

To:

do-not-reply@merimen.com

Cc:

SUR

Subject:

VEHICLE SJV 132T (YOUR REF: 566688)

This mail is associated with:

*SJV132T (566688)

[SLN4125G]

TP

HOO SOO SHENG (HE SHUSHENG)
Aug 7 2018 3:00PM
[GRAB RENTALS PTE LTD]
KAI MOTOR TRADING

Dear Huey Ni,

Please be informed that we have inspected the vehicle SJV 132T on 14/08/2018.

We are pending for estimate from repairer.

Thanks & Regards,

Shiau Chan (Ms) LKK Auto Consultants Pte Ltd Tel: 6256 3561

This is an auto-generated email. Do not reply to this email.

Sent by: SHIAU CHAN (LKK Auto Consultants Pte Ltd)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:		
Owner ID:	Singapore NRIC	
Vehicle Details	5121Z	
Vehicle No.:		
Vehicle to be Exported:	SJV132T	
Intended De-registration Date:	Yes	
Vehicle Make:	15 Aug 2018	
Vehicle Model:	TOYOTA	
Primary Colour:	ESTIMA 2.4X A	
Manufacturing Year:	Blue	
Engine No.:	2009	
Chassis No.:	2AZC632302	
Maximum Power Output:	ACR500093923	
Open Market Value:	125.0 kW (167 bhp)	
Original Registration Date:	\$32,766.00	
First Registration Date:	07 Jan 2010	
ransfer Count:	07 Jan 2010	
Actual ARF Paid:	3	
ntended PARF Renate Details	\$32,766.00	
ARF Eligibility:		THE RE
ARF Eligibility Expiry Date:	Yes	
ARF Rebate Amount:	06 Jan 2020	
itended COE Repate Details	\$18,021.00	
OE Expiry Date:		
OE Category:	06 Jan 2020	
OE Period(Years):	B - Car (1601cc & above)	
P Paid:	10	
OE Rebate Amount:	\$19,190.00	
etal Rebate Amount:	\$2,672.00	
nformation contained herein is correct as at 15 Aug 201	\$20,693.00	

MNII19102369: NT IC Income Insurance Co-operative Lis - HO ENTRY DATE & TIME 07/08/2018 16:29 SUBMITTED BY Chen Jun Liang

Nivitha (LKK) 68411972

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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.
- 3. Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or witholding of material facts may allow insurance companies to
- 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.
- 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.	issent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	07/08/2018 16:29
Date Of Accident	07/08/2018 15:10
Exact Location Of Accident	BUKIT TIMAH ROAD OPPOSITE ESSO PETROL KIOSK
Country/State of Loss	SINGAPORE
HALL THE CALL THE THE RESIDENCE	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJV132T
Insured/Policyholder	
Name Of Registered Owner	HO SOO SHENG (HE SHUSHENG)
NRIC No	S8135121Z
Email Address	SHO2002_@MSN.COM
Mobile Phone No	(LOCAL) +65-98506455
Alternative Phone No	OTHERS-98506455
Vehicle Particulars	011ENO-3000455
Manufacturer	TOYOTA
Model	ESTIMA-2.4 (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 NO
Policy Number	5087797149-01
Cover Note Number	09/02/2018 - 06/01/2019
Driver	00/02/2019 - 00/01/2019
Name of Driver	HO SOO SHENG HE SHIPLEN
NRIC No	HO SOO SHENG (HE SHUSHENG) S8135121Z
Date Of Birth	20/10/1981
Occupation	INDOOR
Date Of Driving Pass	13/08/2002
Driving Experience	
Condo:	15 YEARS AND 11 MONTHS
Johila Niverhan	MALE
ax Number	(LOCAL) +65-98506455
contact Number	OTHERS DEFORMES
A A TALL A TALL	OTHERS-98506455

SHO2002_@MSN.COM

Address

BLK 624B PUNGGOL CENTRAL #07-310

Postcode

822624

Logicode

Was driver an employee of the Insured's Company NO If No, Relationship of the Driver with the Insured OW

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

NO

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

YES

I have been approached by unknown person(s soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

HO SOO TONG

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

MY VEHICLE WAS STOPPED STATIONARY ALONG THE RIGHT LANE OF BUKIT TIMAH ROAD, OPPOSITE ESSO PETROL KIOSK, A FEW SECONDS LATER, I FELT AN IMPACT ON MY VEHICLE REAR PORTION AND VEHICLE B HAD HIT ONTO MY VEHICLE, NO ONE WAS INJURED.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLN4125G

Vehicle Make/Model/Colour

TOYOTA PRIUS

Details Of Properties

FRONT PORTION

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

MSIE LTA

Nature Of Damage

Sketch Plan Pg. 1

237

			101761		
ell'i Incine Moto Server		Vehicle No.	Btmz	Report Dine water	Statt have 4.35 PM
topert No. M.I.	BOAT 8 D	Make Medel	CHINA	Rapidone Type	ted free

SKETCH PLAN

MPORTANT 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 truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liebility.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation
- fi. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Sindapore (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
- 5. Consent under the Personal Data Protection Act (PDPA)
- Lunderstand, 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 mansfer such Personal information to all insurer(s) who have insured vehiclets) involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets) involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s). When the insurer is accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s). When the insurer is accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s). When the insurer is accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s). When the insurer is accident fall insurer(s) who have insured vehiclets involved in this accident fall insurer(s). When the insurer is accident fall insurer(s) who have insured vehiclets in the insurer(s) who have insured vehiclets in the insurer(s) who have insured vehiclets in the insured vehiclets in the insurer(s) who have insured vehiclets in the insurer insurer (s) which is a single vehiclets in the insurer (s) which is a single vehiclet (s) whi
 - (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, recorts or notices to me which could myolve disclosure of certain personal data about me to bring about belivery 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: lawversitax firms, maybre permitted to collect use, disclose and/or process my Personal information for one or more of the above Purposes; and
- (c) my Personal Information maybe the disclosed by any of the Insurers and or GIA to their third party service providers or apents. (including their lewers 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 ourpose of fraud detection. Investigation and all future claims.
- (e) the information so collected under (f) above may be shared i disclosed
- (i) to all insurers and/or any other third parties that assot in evaluating, investigating, controlling or managing flaud, requisitors have suborcement and government appropriate associative required for the purposes stated, or

(iii) for complying with requirements under any requiations, law or court orders

8/7/2018 16:36

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

8/7/2016 16:36

Reporting Centre Personne's Signature Name Chemitinitians NRC/ Fig/No. 5990765

Sketch Plan Pg. 2

ETCH PLAN				
_	O D	(0)		
	Q	<u> </u>		
			-	
The same of the sa			-	
O				
4				
	BUKIT TIMAH ROAD OF	POSITE ESSO PETROL KIOSK		
Vehicle A: SIV1321	Vehicle B: SI N4125G			
SCRIBE CIRCUMSTANCES	OF THE ACCIDENT			
VEHICLE WAS STOPPED	STATIONARY ALONG THE	RIGHT LANE OF BUKIT 1	IMAH ROAD, OPPOSITE	ESSO
ROL KIOSK, A FEW SECO	NDS LATER I FELT AN IMP	ACT ON MY VEHICLE RE	AR PORTION AND VEHIC	TE B HAD
ONTO MY VEHICLE NO	ONE WAS INJURED.			
CLARATION				
	True in eyery respect.			
	True in eyery respect		,	
	True in eyeny respect			
	True in mysry respect		<i>A</i>	
	true in every respect.		A	
CLARATION declars the foregoing particulars are	true in every respect.	8.7/2018 16:36	Ah	
dictars the foregoing particulars are			Ah	
dictars the foregoing particulars are	True in every respect. Driver's Signature (If driver a Date & Time		Reporting Centril Personne Name Open April lang NRICE Pia Noy Septime	€'s 5-gnature



Ggd3.

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

07 Aug 2018 / 17:14:01

Receipt Date/Time:

07 Aug 2018 / 17:14:00

Tax Invoice/Receipt

Receipt No.: ITNET-00000-180807-001784

Previous Receipt No. :

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SLN4125G As at 07 Aug 2018/15:10:00 Insurance Co: MSIG INSURANCE (SINGAPOR 1 Insurance Enquiry - SLN4125G Enquiry Fee 20180807171236155987	RE) PTE LTD	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	2018080717124862	Direct Debit: eN (Internet Ba	ETS Debit anking)	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

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 witholding of material facts may allow insurance companies to
- 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

min varia.	and to copies of the report being made available
WELL BOOK SECTION OF THE SECTION OF	ACCIDENT STATEMENT
Date Of Report	07/08/2018 16:29
Date Of Accident	07/08/2018 15:10
Exact Location Of Accident	BUKIT TIMAH ROAD OPPOSITE ESSO PETROL KIOSK
Country/State of Loss	SINGAPORE
STATE AND ASSESSMENT OF THE PARTY OF THE PAR	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJV132T
Insured/Policyholder	G MCS/ NOT HITE MANUSCRIPT HOTEL STATE OF THE STATE OF TH
Name Of Registered Owner	
NRIC No	HO SOO SHENG (HE SHUSHENG) S8135121Z
Email Address	SH02002_@MSN.COM
Mobile Phone No	(LOCAL) +65-98506455
Alternative Phone No	OTHERS-98506455
Vehicle Particulars	A THE COSCIONATION OF THE
Manufacturer	TOYOTA
Model	ESTIMA-2.4 (A)
Exact Purpose for which vehicle was being used time of accident	at PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO 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	5087797149-01
Cover Note Number	09/02/2018 - 06/01/2019
Driver	
Name of Driver	HO SOO SHENG (HE SHUSHENG)
NRIC No	S8135121Z
Date Of Birth	20/10/1981
Occupation	INDOOR
Date Of Driving Pass	13/08/2002
Driving Experience	15 YEARS AND 11 MONTHS
Sender	MALE
Mobile Number	(LOCAL) +65-98506455
ax Number	1
Contact Number	OTHERS-98506455
EMail Address	SHO2002_@MSN.COM

Address

BLK 624B PUNGGOL CENTRAL #07-310

Postcode

822624

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

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:

: HO SOO TONG

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

MY VEHICLE WAS STOPPED STATIONARY ALONG THE RIGHT LANE OF BUKIT TIMAH ROAD, OPPOSITE ESSO PETROL KIOSK, A FEW SECONDS LATER, I FELT AN IMPACT ON MY VEHICLE REAR PORTION AND VEHICLE B HAD HIT ONTO MY VEHICLE, NO ONE WAS INJURED.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLN4125G

Vehicle Make/Model/Colour

TOYOTA PRIUS

Details Of Properties

FRONT PORTION

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

MSIE LTA

Nature Of Damage

Page 2 of 14

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

REPORT NO ME DATA & 18

SJU1327

Report Date: \$7 2015 Sun Time: 4,56 PM Reporting Type Eind Time:

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 wiful 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
- 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 injuriers, 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") maxiate permitted to collect, use, disclose and/or process my personal data/personal information set out in this florm) 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 at 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 golice), 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 aggident 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 cersonal 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 mayican be disclosed by any of the insumers and/or GIA to their third party service providers or agents (including their lawvers/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 fisud detection, investigation 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 found regulators, law antiorcement and government agencies as reasonable required for the purposes stated, or

till for complying with requirements under any regulations, law or court orders.

8/7/2018 16:36

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

8/7/2018 16:36

Reporting Gentre Per Name: Chem Jünklist tra Personnel's Bignature

Page 4 of 14

Sketch Plan Pg. 2

Vehicle A. SJV132T ESCRIBE CIRCUMSTANCES EY VEHICLE WAS STOPPED ETROL KIOSK, A FEW SECO	BUKIT TIMAH ROAD O		-
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ESCRIBE CIRCUMSTANCES Y VEHICLE WAS STOPPED		PPOSITE ESSO PETROL KIOSK	
ESCRIBE CIRCUMSTANCES Y VEHICLE WAS STOPPED	Vehicle B: SLN4125G		
Y VEHICLE WAS STOPPED		han figures	
Y VEHICLE WAS STOPPED	OF THE ACCIDENT		
CLARATION			
declars the foregoing particulars are	This in every respect.		
	AND THE PARTY OF T		19
1			6
8/7/2018 16:36		Andrew Share	11/11
/		8/7/2018 16:36	1711
cyholder's Signature		not the policyholder)	



凱摩哆服務

KAI MOTOR TRADING

BLK 3007 UBI ROAD 1 #01-440, SINGAPORE 408701. TEL: 6747 4006 FAX: 6743 7591 EMAIL: kalmotor@gmail.com BUS. REG. NO: 44223100L GST NO: M90371531Y

專業服務:汽車意外保險陪價·拖車·汽車修理及維修服務·打嗎唧·喷漆。 Specialist in: Accidents Insurance Claim, Towing Service, Motor Vehicle Repairing, Panel Beating, Spray Painting.

xico ther.

WITHOUT PREJUDICE

(By Email Only)

Date: 15/08/2018

Attn: The Motor Claims Department

Your Insured veh no : SLN 4125 G

MSIG Insurance (S) Pte Ltd

4 Shenton Way

#21-01 SGX Centre 2

Tel: 6827 7888

Singapore 068807

Fax: 6827 7809

Dear Sir / Madam

Estimate Cost repair Bill To Toyota Estima No SJV 132 T & SLN 4125 G on 07/08/2018

	A COLUMN TO A COLU							
To Supp	oly:-		0	_				
1pc 1pc 1pc 1pc 1pc	Rear boot cover "Estima" emblem Rear logo Rear boot cover "AERAS" emblem Rear bumper	,	914.2		\$ 6 8	10.35 × 74.30 × 59.25 × 39.10		
8pcs	Rear bumper clips	Ś	23.10			9.40		
2pcs	Rear bumper side retainer		66.10			17.20 30		
	of the state of th	4	00.10			2.20		
				25%	\$ 2,48			
				23/0	\$ 1,86			
					\$ 1,00	1.35		
1pc	Rear windscreen glass seal 7				\$ 11	0.00 s/nett	*	
1pc	Rear number plate Not New		300 .			5.00 s/nett		
1pc	Rear number plate holder	10				5.00 s/nett		
1set	Rear number plate Rear number plate holder Rear bumper reverse sensor	d				9-10 s/nett		
To dism	anite & replace damage parts, panel beat wh		essary.			e.60 300		
To putty	,apply primer & spray paint on the affecte p	ortion.			\$ 72	2.00 400	, .	
To check	k wiring functions.				\$ 8	200 30	780	
labour c	harge to remove & refix windscreen. LKK Auto Consultant	ts hence	notify	\neg	\$ 12	0.00 ×	,	
To remo	the Repairer of the fo • To resurvey before/after • To display damaged par • Parts prices are subject	ollowing: r spray pai rt(s) during	nting resurvey		\$ 10 \$ 4,25	0.00 50 . 0.45		

Acknowledged by Repairer

No illegal modification(s) is allowed.

Third party survey is on a "Without Prejudice" basis

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

Signature:

Date:

total: 176568 HS: 1.4K 030mp.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	A	j Submitted	Ins Auth'ed	Status	3	
Main	07 Aug 2018		10 Aug 2018 10:20 Edit Adj Rpt	S\$1,400 Edit Esti	1	\$1,400.00 View Rpt		Repor	Pending for Survey Report Cancel Case	
	1ain	R	eference	Cia	im Details		Document	s	Sho	w All
CLAIM SUI	BFOLDER DE	TAILS				[Created	by insurer]			
Insured:	GRAB RE	NTALS PTE LTD,	Co. Reg. No.: 201	617200G						
Main Claimant:	ноо soo	SHENG (HE SH	JSHENG), ID: S8	135121Z						
Vehicle Reg. No.:	SJV132	SJV132T			Date of Los	[103 Mont	8 15:00 - :59 hs From LTA Reg		Yr)]	
Claim Type:	TP / 566	688			Policy/Cove Note No.:		A29069766MKF (Comprehensive) Coverage: 01/02/2018 - 31/01/2019			
Vehicle Reg. No. (Insured):	SLN4125	G			Policy No. (Claimant):					
					Excess:	S\$2,000.00	0			
Repairer:	KAI MOTO	DR TRADING (H	Q) BLK 3007 UBI RC	OAD 1, #01-4	40, 408701	Ubi - Tel:				
Handling Insurer:	MSIG Ins	urance (Singapo	ore) Pte. Ltd. (HQ)	- Tel: +65 6	827 7888 .	[Handled by	Eng Huey Ni - 6	643 1314]		
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561	Handled by	XING GUO Q	IANG] [Fina	I Rpt due	09/09/2	018]
Driver/Custo dian (Insured):		IN DIMAN (), N	RIC: S0209341C,	Tel: +65900	60340					
Adj Asg. Remarks:	SURVEY A	GREE ON SJE - RE	QUEST TO ASSIGN	LKK (ADRIA	LING) LIA	BILITY:100%	CONTACT MS KYM	1 6747 400	6	
ASSOCIAT	ED MAIL RE	CEIVED					Vie	ew All	Compose Ca	se Mai
There are n	o mail for this	case.								
ALL ASSO	CIATED TAS	SKS⊟				View All	Search Tasks	Create New	Task Co	omplet
Due Date	Priority	Type Task	Group Subject	t Handle	er Assi	gned By	Completed On	Crea	ted On	Done

Claim Documents

*SJV132T (566688)

[SLN4125G]

TP

HOO SOO SHENG (HE SHUSHENG)

Aug 7 2018 3:00PM

[GRAB RENTALS PTE LTD]

KAI MOTOR TRADING

A55	essment Reports		1 per page	
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnai	l Print
1	08/08/18 09:46	Accident Statement From:SC - Reg. No: SLN4125G, Claimant: GRAB RENTALS PTE LTD	1 Load HTM	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnai	-
1	11/01/19 14:25	Adjuster Immediate Advice	1 Load HTM	4
Pho	otos/Images		3 per page	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbna	l Prin
1	10/01/19 15:54	General View	1 Load JPG	✓
2	10/01/19 15:54	General View	Load JPG	✓
3	10/01/19 15:54	General View	Load JPG	V
4	10/01/19 15:54	General View	Load JPG	V
5	10/01/19 15:54	General View	1 Load JPG	✓
6	10/01/19 15:54	General View	1 Load JPG	V
7	10/01/19 15:54	General View	1 Load JPG	~
8	10/01/19 15:54	General View	1 Load JPG	V
9	10/01/19 15:54	General View	1 Load JPG	~
10	10/01/19 15:54	General View	1 Load JPG	V
11	10/01/19 15:54	General View	1 Load JPG	V
12	10/01/19 15:54	General View	1 Load JPG	V
13	10/01/19 15:54	General View	1 Load JPG	V
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19	10/01/19 15:54	General View	1 Load JPG	V
20	10/01/19 15:54	General View	Load JPG	V
21	10/01/19 15:54	Reinspection Photo	■ Load JPG	V
22	10/01/19 15:54	Reinspection Photo	1 Load JPG	V
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31	10/01/19 15:54	Reinspection Photo	■ Load JPG	-

Merimen e-Claims Page 2 of 2

Ass	essment Reports		1 per p	page 🔻	V
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
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33	10/01/19 15:54	Reinspection Photo	0	Load JPG	✓
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1	08/08/18 09:46	MSIG Insurance (Singapore) Pte. Ltd. (HQ) SJV132T TP E-FILE REPORT From:SC - Reg. No: SLN4125G, Claimant: GRAB RENTALS PTE LTD	Ð	Load PDF	
1 2	22/12/20/20/20/20/20/20/20/20/20/20/20/20/20	SJV132T TP E-FILE REPORT	0		

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
			^
			~

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

51 Ubi Ave 1 #01-25, Pava 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/MSG18014641/AGQD3E2

Date:

15/01/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

A29069766MKF

Claimant Vehicle

SJV132T

Insured Vehicle No:

SLN4125G

No: Date of Loss:

07/08/2018

Nature of Claim:

TP

Claim No: 566688

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SJV132T

Make & Model:

TOYOTA ESTIMA, 2.4 E X (A) 07/01/2010 (Man. Year: 2009)

Engine No:

2AZC632302

Reg. Date: Colour:

Chassis No: Odometer:

ACR500093923 136906 km

Engine Capacity:

2362 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:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Engine Modification:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

215/55 R17

Rear Tyre Size:

215/55 R17

Front Left Side: Front Right Side: Dunlop 6 mm

Rear Left Side: Rear Right Side: Dunlop 6 mm Dunlop 6 mm

Dunlop 6 mm The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,610.45	985.69	1,624.76	62.24
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,640.00	780.00	860.00	52.44
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	4,250.45	1,765.69	2,484.76	58.46
Approved Total (Overridden) (S\$)		1,400.00		
(S\$)	4,250.45	1,400.00	2,850.45	67.06
+ GST 7.00/7.00% (S\$)	297.53	98.00	199.53	67.06
Nett Amount (S\$)	4,547.98	1,498.00	3,049.98	67.06

INSPECTION

Date of Assignment: Date Inspected:

10/08/2018

14/08/2018

Inspected At:

KAI MOTOR TRADING (HQ) BLK 3007 UBI ROAD 1, #01-440

Singapore 408701

Estimated Period of Repair:

3.0 days

Adjuster: XING GUO QIANG

Manager: SHIAU CHAN

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.

Adjuster Report Page 3 of 4

REPAIR DETAILS

Referen	ce				
Part Source:	: MRM-SG	Version: 1.0 (Last Synchronised: 15 Jan 2019)			
Parts:	M1-MPV	TOYOTA ESTIMA 2.4 E X (A) (Catalogue:Merimen Singapore 1.0)			
Labour:	Repairer's	(Price-denominated Standard List)			
Print Code:	(Unsubmitted,	no print-code for SJV132T)			
Validity:		nese estimates are valid only if they contain the print code (above) on all estimate pages, running page umbers with the END OF ESTIMATES marker on the last estimate page			
Further Info	: Items/values r	ot in reference catalogue are prefixed with an asterisk *.			

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BOOT COVER	Repair	1,410.35 FL	*- FL
2	1		*REAR BOOT COVER ESTIMA EMBLEM	Necessary	74.30 FL	*74.30 FL
3	1		*REAR LOGO	Necessary	69.25 FL	*69.25 FL
4	1		*REAR BOOT COVER AERAS EMBLEM	Necessary	89.10 FL	*89.10 FL
5	1		*REAR BUMPER	Deformed	519.40 FL	*519.40 FL
6	8		*REAR BUMPER CLIPS	Necessary	187.20 FL	*30.00 FL
7	2		*REAR BUMPER SIDE RETAINER	Necessary	132.20 FL	*132.20 FL
8	1		*REAR WINDSCREEN GLASS SEAL	Not Necessary	110.00 FS	*-FS
9	1		*REAR NUMBER PLATE	Not Necessary	65.00 FS	*-FS
10	1		*REAR NUMBER PLATE HOLDER	Not Necessary	65.00 FS	*-FS
11	1		*SET REAR BUMPER REVERSE SENSOR	Damaged	509.10 FS	*300.00 FS
F=Fra	anchise	part. S=SpcN	Nett. L=ListItemDisc.	Sub Total (S\$)	3,230.90	1,214.25
			- List Item Discount on L Ite	ms 25.00/25.00% (S\$)	620.45	228.56
				Total Parts (S\$)	2,610.45	985.69
			Report was unsubmitted during	g this print-out.		

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

Particulars	Lab.Type	Repairer's	Amount
our Items			
TO DISMANTLE & REPLACE DAMAGE PARTS, PANEL BEAT WHERE NECESSARY	New	620.00	300.00
TO PUTTY, APPLY PRIMER & SPRAY PAINT ON THE AFFECTE PORTION	New	720.00	400.00
TO CHECK WIRING FUNCTIONS	New	80.00	30.00
LABOUR CHARGE TO REMOVE & REFIX WINDSCREEN	New	120.00	0.00
TO REMOVE REVERSE SENSOR	New	100.00	50.00
Gross Labo	ur Cost (S\$)	1,640.00	780.00
	TO DISMANTLE & REPLACE DAMAGE PARTS, PANEL BEAT WHERE NECESSARY TO PUTTY, APPLY PRIMER & SPRAY PAINT ON THE AFFECTE PORTION TO CHECK WIRING FUNCTIONS LABOUR CHARGE TO REMOVE & REFIX WINDSCREEN TO REMOVE REVERSE SENSOR Gross Labo	TO DISMANTLE & REPLACE DAMAGE PARTS, PANEL BEAT New WHERE NECESSARY TO PUTTY, APPLY PRIMER & SPRAY PAINT ON THE New AFFECTE PORTION TO CHECK WIRING FUNCTIONS New LABOUR CHARGE TO REMOVE & REFIX WINDSCREEN New	TO DISMANTLE & REPLACE DAMAGE PARTS, PANEL BEAT New WHERE NECESSARY TO PUTTY, APPLY PRIMER & SPRAY PAINT ON THE New 720.00 AFFECTE PORTION TO CHECK WIRING FUNCTIONS New 80.00 LABOUR CHARGE TO REMOVE & REFIX WINDSCREEN New 120.00 TO REMOVE REVERSE SENSOR New 100.00 Gross Labour Cost (S\$) 1,640.00

< END OF ESTIMATES >