and the second of the second o	Medical research	LCOTON	N ICC		
		ASSIGNME	NI	1 3-1	- 0
rom;	Date:	- Veh No:	SHCSO	55 L <sub>Yr Regn:</sub> <u>I</u> 4	1 318
stimated Cost		Type: M	Car / M.Cycle / Bus / Var	n / Lorry / Tall Prime Mov	ver l
DITPIWS ITPRES ! OD RES ! EN	VA / INV / MV	Т	ruck / Trailer or		
o Insped Vehicle No:		Make:	Hand	Zonig 0.0	1580 1.
t Workshop m/s		Galour	Bhe	A/C: Insu <b>G</b> ed i	Std/NI/NA
f		Sp.Rea	sing 29215	T/Radio: Insered /	AM/IN/bts
nsured: PC 3197 P		Eng/No			
Policy Na 5084387025	81400) ID-	- 090419 C/No:	Kul	UESTIC.UJ	4/03 × 19
Claims No. MT/100937	3-001	Gen. C	ond: Good / F 🐼 Poor / !	Burnt	
Sum Insured: .	Excess:	Steerin	g: Inorder / Jammed / Le	aked/Burnt or	
(Client's Record)	0	Brake:	Ino der/ Jammed / Le	aked / Burnt or.	
Make of Veh;		Modi ;	NIL / S/Rim ./ SKD A/R	im or	
	TO	Tyre S	ze; F:.	195/61R	C3=
(Policy Condition)			R:		
Remark: The veh had commenced	its N	IS OIS BSID	UN / EXNOVA / GY / FS /	LIZA / MIC / OHTSU / PIR	/SUMI/
tepair at the time of Inspe	ection.	TOY	/YOKO or	Nexe	
Bal, or Market Value:		Front	10	Rear	
IDAC Accident Rport: C	consistent? : Yes or No		7 mm	R/Bal.	) mm
	Consistent? : Yes or No	b L/Bal.		L/Bal.	mm
Est, Repairs: days	Res.: Yes or N	10 D.O.A		D.O.I. 21/	8/18
Lum Sum: %	3 Val.: Yes or N	lo Surve		( DhE ( Loyan	9)
		1		OIS, I NIS I VIC I ROOM	9
CA' / REV / REP. / 24 HRS		icle: IN/OUT	A Damages . Fit / Acar )	Rea	on the contract
			e U/C / Chassis frame	/ Body Structure affected	due to collision.
Dale:Person Conf	itacted:				
Date / Time   Action / Instruction					
	on		1 12	INC	
Date / Time Action / Instruction SIC 3055L	on	· YVF62		INC 17122018 111	
Date / Time Action / Instruction of the Action of the Acti	on -X NBA/ INC   SUO PIP\$1095	46/2/2			
Date / Time Action / Instruction of the Action of the Acti	on -x NBA/ INC   SUO	46/2/2			
Date / Time Action / Instruction of the Action of the Acti	on -X NBA/ INC   800 PIP\$1095 0 Ped - 33	46 /2h			
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Date / Time Action / Instruction SI C 30551	on -X NBA/ TNC   800 PIP\$1095 0 Red - 33 RE	CEIVED 3 0	AUG 2018	M: 17122018 111	7
Date / Time Action / Instruction  SIC 30551  PC 3157 P  29/8/8 C# 528. 2  Date/Time, File Pass to 2  20/08/18 : P	on -X NBA/ INC   800 PIP\$1095 0 Red - 33 RE	CEIVED 3 0	AUG 2018  Of Repair: 2	M: 17122018 111	J
Date / Time Action / Instruction  SIC 30551  PC 3157 P  29/8/8 C# 538. 2  Date/Time, File Pass to? 20/08/18 V: F  Date/Time, File Return to?	on -X NBA/ TNC   800 PIP\$1095 0 Red - 33 RE	CEIVED 3 0	AUG 2018  Of Repair: 2	M: 1710 2018 ///	7
Date / Time Action / Instruction  SIC 30551  PC 3197 P  29/8/8 Cff 528. 2  Date/Time, File Pass to? 30/08/18 : P  1) Typist V: F	on -X NBA/ TNC   800 PIP\$1095 0 Red - 33 RE	CEIVED 3 0 Days Resu	AUG 2018  Of Repair: 2	Survey Fee: Transportation:	7
Date / Time Action / Instruction  SIC 30551  PC 3177 P  29/8/8 Cf 528. 2  Date/Time, File Pass to? 30/08/18 : P  Typist Date/Time, File Return to?	on -X NBA/ TNC   800 PIP\$1095 0 Red - 33 RE	CEIVED 3 0 Days Resu	Of Repair: 2_rvey No. of Trip:	Survey Fee:   Transportation:   S+RS_SI	7



### **National Assessment Centre Services**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





NTU	C INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1801526	59/K1sb
		D UNION HOUSESINGAPORE	Date:	23-08-2018	
			Code:	INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	PC 3697P	Veh. I	nspected	SHC 3055L
	Policy No.	5089387025-01	Cover	age (\$)	0.00
	Claim No.		Exces	s (\$)	0.00
	Assign From		Assig	n Date	21/08/2018
2.		Vehicle Parti	culars &	& Condition	
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year o	of Reg.	
	Chassis No.		Colou	r	
	Odometer		Steeri	ng	
	Brakes		Modif	ication	
	General				
3.		Condit	ions of	Tyres	
		Size	Make	<u> </u>	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 D	amages	
5.	SANTANA SEA	Genera	al Inform	nation	
	Accident Date	19/08/2018	Inspe	ction Date	21/08/2018
	Survey held at	COMFORTDELGRO ENGINEE	RING PT	E LTD	
		59 LOYANG DRIVE SINGAPORE 508969	2411		
5a.	(Seneral	R	Remarks		
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WI	THOUT F	PREJUDICE" BASIS NOT AUTHORISE	S. D REPAIRS.

<b>eBao</b> Tech			- DESIGN	Please State of				NAME OF TAXABLE PARTY.	OIL HOSE	Genera	11-21-21111
Hello, NAC_PAYA_UBI_80	0601						Change Li	inguage	+ Chan	ge Password	+ Log Ou
My Desktop	Polic	y Query									
Notice of Lass	Policy N	io.				Date o	of Accident	1	9/08/2018 0	9:25	
	Vehicle	No.(For Motor)	PC3697	P		Certifi	cate Number	E			
					13	Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5089387025- 01		VIN'S EXCITE TOURS PRIVATE LIMITED	201537834H	GBS	Comprehensive	PC3697F	PC3697P	10/04/2018	09/04/2019

L		Company (Campor / Tayl Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	lentative repair cost
S/No	Income Reference	Claimant (Owner / Taxi Company)	CHC 30551	PC 3697P	19/8/2018	\$ 1,623.66	\$ 1,095.46
	MT/1009373-001	COMPORT I KANSPORTATION FIELD	30000000	SEE 3060B	28/8/2018	\$ 2,892.18	\$ 800.00
	MT/1009185-002	COMFORT TRANSPORTATION PTE LID	SHC 88232	SPE ZUUUN	0707/0/07	-	
	100 1000001	CONVECTE TRANSPORTATION PTF LTD	SH 8358Z	RD 6187X	27/8/2018	\$ 2,089.88	\$ 814.45
	MI/1009007-002	COMPOSITION OF TRANSPORTED AND THE LTD	SHA 4428Z	SJV 6885P	24/8/2018	\$ 6,595.38	\$ 5,236.10
	M1/100908/-002	COMPONI INSINSFORIZION LICENSE	SHC 7877E	CIA 3866B	24/8/2018	\$ 2,219.36	\$ 950.00
	MT/1008717-002	CIIYCABPIELID	3HC /8//C	300000000000000000000000000000000000000	0100/0/20	C 6 844 97	\$ 1,510.06
L	MT/1009120-002	COMFORT TRANSPORTATION PTE LTD	SHD 3624P	SJL 6504S	20/0/2010	20,440,0	,
1	200 0210001/11	OT LATO MOLTATAGORA TO THE LITE	SH 7842Z	FBK 6778T	22/8/2018	\$ 1,473.20	\$ 1,273.20
	MI/10084/1-002	COMPONE INCIDENCE OF THE PROPERTY OF THE PROPE	LONC ALLS	DC 62AAT	23/8/2018	\$ 1,679.16	300.00
	MT/1008626-002	COMFORT IRANSPORTATION PIE LID	SHA 2402L	1000	10/00		1
1	AAT/1000154 000	CITYCAR PTF LTD	SHA 9452U	SJE 7737S	24/8/2018	\$ 2,731.58	\$
1	INIT TOOSTS - OOS	CITYCAD DIE LTD	SHA 621H	YN 8044B	26/8/2018	\$ 4,685.68	\$ 2,950.00
	MT/1008987-002	CHICABILLID	1100000	0,000 07	0100/0/20	¢ 824846	\$ 1.500.00
	MT/1008975-007	CITYCAB PTE LTD	SHA 881Z	YP ZUUBK	0102/0/02	0,540.40	1
1	200 C/C000T/IM	OTI 3TO NOITATOONAGE TOOLAGO	SHC 3331P	SLK 2650K	23/8/2018	\$ 3,696.80	\$ 2,050.00
_	M1/1008414-002	COMPONI INGINSPONIATION DE LES	CHA 3850T	FBK 1449B	17/8/2018	\$ 2,745.13	\$ 1,282.00
	MT/1008095-002	COMPORT I KANSPORTATION TIE LID	10000 1110				

Claim received from LKK Auto

# OMFORTDELGRO ENGINEERING

member of COMFORIDELGRO

#### ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsmille + 65 6280 9755

Workshops

Date/Time: 20.08.2018 15:41 Page: 1

JOB CARD Sales Order: JC NO.: 305202190 ARC Repair TP(CLSO)1 Team: REGN NO.: SHC3055L MILEAGE OMER COMFORT TRANSPORTATION PTE LTD FUEL 7010045 HYUNDAI OMERNO. 383 SIN MING DRIVE E.....1/2.. 20.08.2018 11:30 MODEL Singapore SINGAPORE 575717 IONIQ(G2) 65508755 YR OF MANU, 03.07.2018 TARGET DATE CHASSIS CODE KMAC851CVJU103419 COMPLETION DATE/TIME: DUNT CARD NO.

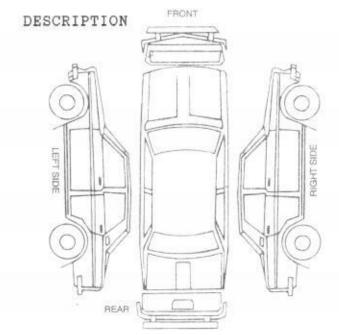
JOB DESCRIPTION

Accident Date: 19.08.2018

NATURE: 3P 19.08.18

S/NO

LABOR CODE



(ED & PASSED (	OUT BY:				
SE	RVICE ADVISOR		_	CUSTOMER'S SIGNATURE	
adgement Slip			Exit Pass		
o.: SH	C3055L	JU NTUC LKK	Vehicle No.:	SHC3055L	
Service Advisor		Signature/Date	Name of Service Advisor	Date	

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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 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.

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.
- you hereby consent to the archiving of this report at the centre and to copies of the report being made available

7. By the lodgement of this report to the insurers, you hereby constances alores and	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	20/08/2018 14:59
Date Of Accident	19/08/2018 03:10
Exact Location Of Accident	RIVER VALLY TWDS LOWER DELTA
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC3055L
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	IONIQ HYBRID
Exact Purpose for which vehicle was being used a time of accident	t
Are you claiming under your own insurance policy for repair to your vehicle?	NO
	TUIDD BARTY

If No, Please state action to be taken

THIRD PARTY

TAXI Vehicle Category

Insurance Company

Name of Insurance Company

INDIA INTERNATIONAL INSURANCE PTE LTD

THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

YES Fleet Policy

MCOM0015 Policy Number

Cover Note Number

Driver

ONG KIAN YING Name of Driver

S2021664F NRIC No 08/10/1951 Date Of Birth OUTDOOR Occupation 21/11/1970 Date Of Driving Pass

47 YEARS AND 8 MONTHS **Driving Experience** 

MALE Gender

+65-87987109 Mobile Number

Fax Number

Contact Number

NOEMAIL EMail Address

Address

341 09-24 CHOA CHU KANG AVENUE 3

Postcode

689874

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

OTHER - TAXI DRIVER

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

Was any body injured in the Accident?

YES

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)

2

Passenger 1

NAME:

GENDER:

: FEMALE

**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

SEE ATTACH.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

PC3697P

Vehicle Make/Model/Colour

**Details Of Properties** 

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

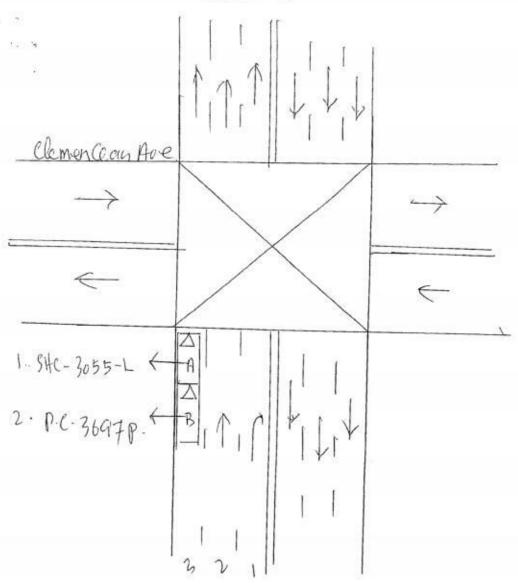
FRT

# Name Approximate Age Injuries Sustain Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance? Address Postcode DETAILS OF INJURED PERSON 1 ONG KIAN YING 67 NECK,BACK SHC3055L YES NO

#### Sketch Plan Pg. 1

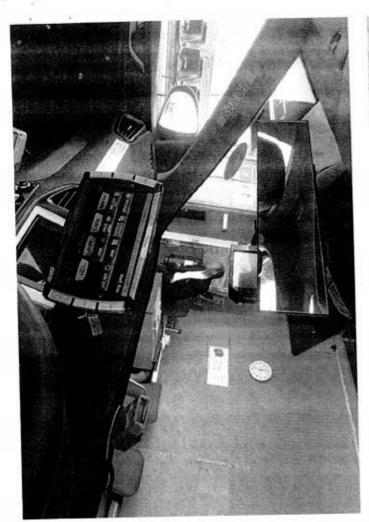
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				1111111	111
			+++++	++++++	111
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++++++	Diego P	2			
INDA CO	C 8022 C-				-
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	3697P				
R PC	36977	++++++			
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	afenale	DHX elu	was or		
	- terrer	1 110			
		The state of the s			_
CIARATION					
	ng particulars are true in every re	espect.			300
CLARATION Ve declare the foregoi	ng particulars are true in every re	espect.	^	, I	Λ
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ve declare the foregoi	SPORTATION A	espect.	()	Man	Se
Ve declare the foregoi		۲.	Reporting	.Na. 4 Centre Personnel's Signa	Soluture

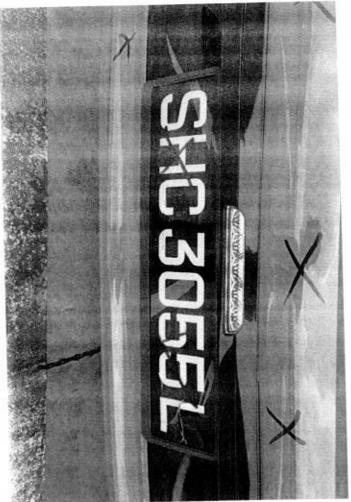


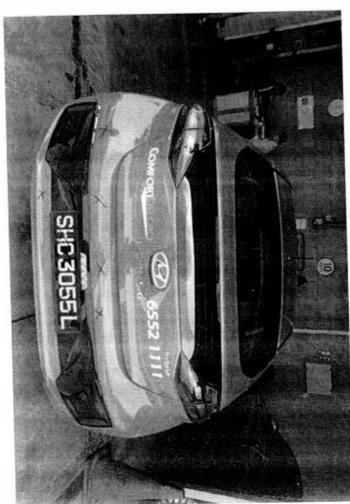


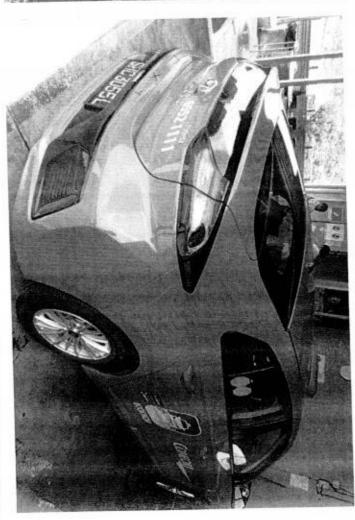
Sketch by MV-ONG.

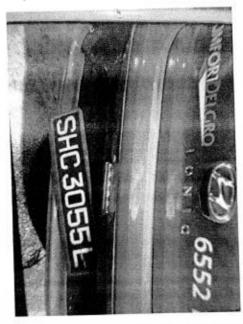
River Valley Road



















# COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO: SHC 3055L

:

MAKE

DATE 20/8/2018 14:53

W

DEL Qty	: HYUNDAI IONIQ  Parts Description/ Labour	Type	Unit Price	_	ount	
Qij	Rear Bumper _ how!			45	9.40	
	Rear Bumper Reinforcement			(7)	165	
	Rear Bumper Reimorcement		1	22.	60	
	Rear Bumper Clip	- 1	1			
	Rear Bumper Sponge		1	_		
	Rear Bumper Under Cover			42	,2.3-	
	Rear Bumper Garnish (Black)					
	SUB TOTAL			\$	-	
	LESS 20%			\$		
	DISCOUNTED TOTAL			s	*	
	Rear Bumper Reverse Sensor × 542  Rev Number plots — 44			s	135.70	Nett
	No be place	10	1. \$25	lex-		1
	fler francisco	(225)		s	135.70	
	Labour Charge				200	
	Panel Beating			\$	400.00	240
	Spray Painting Charge			S	259.00	
	Wiring Charge			\$	50.00	X
	Remove/Refix Reverse Sensor			\$	120.00	7.
	TOTAL LABOUR			\$	820.00	
	ESTIMATE TOTAL			S	955.70	
				1,	623.66	
	1. 11.		onsultants hence notify		7	
	Kabi UKG 12/8/18 1185h 2Br	• To resurve) • To display	peformatiki seneralang peformatiki seneralang pirasa pirasa duning librurye	y V		
	2Br. PP Petre Ist PU	Third carry     No illegal	sen i t.A. en o sen via on a vive of Prejudi solida i i in si e co vied st. Vive over en tronsinsurance o to i i i i i i popularia.	Sand.	1	
	Before lost pl		ed by Repairer			
	This is an initial estimate based on a visual inspection of t				1077	4

#### COMFORTDELGRO ENGINEERING PTE LTD

Date: 29.08.2018 Time: 16:19:18

REPAIR ESTIMATE

Page: 1

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO

: 305202190 : SHC3055L

MILEAGE MAKE

: 0000000000 : HYUNDAI

MODEL

: IONIQ(G2)

DATE OF REGN : 03.07.2018

DATE/TIME IN

: 20.08.2018 11:30

ACCIDENT DATE : 19.08.2018

JOB / PARTS DESCRIPTION

OTY IND UNIT-PRICE DISC% AMOUNT

#### PART REQUISITION

0001 FNPS

NO PLATE(S)

1 N 25.00 10.00 22.50

0002 04-01-0104-2533-G IONIQV2 MOULDING ASSY-RR 1 322.30 20.00 257.84

0003 04-01-0104-2282-G IONIQVC COVER-RR BUMPER# 1 459.40 20.00 367.52

0004 04-01-0101-0111-G HYUNDAI BUMPER COVER CLIP 10 L 22.00 20.00 17.60

SUB-TOTAL: 665.46

#### JOB NATURE

0000 L

PANEL BEATING- REAR

200.00

0001 23-502

SPRAYPAINT ON AFFECTED AREA

200.00

0002 L

REMOVE/REFIX REVERSE SENSOR

30.00

SUB-TOTAL: 430.00

TOTAL : 1,095.46

AUTHORISED: YES / NO SURVEYOR NAME & SIGNATURE

MVA NAME & SIGNATURE

DATE:

DATE:

COMFORTDELGRO ENGINEERING

ır Job l	Ref No :	3052021	90		-	TOIL TEETTING
te	6	29/08/20	18		Comfort0 59 Loyar Fax: 654	DelGro Engineering Pte Ltd ng Drive Singapore 508969
ΔΙ 17	ATION FORM	Ď			FBX: 034	0.0130
		LKK			Fax:	
n :		KALV	/IN			
		SHC3055L		Date of	of Accident :	19/08/2018
e surv	vey and estima	ates of the re	pairs of the at	oove-mentioned	vehicle are as f	ollows:-
	he repair job s			NTUC	25.20	PC 3697P
	he finalized ar		e:		###	
		arts after List				\$665.46
1000	b) Labour (			###		\$430.00
0,0			rt Repair Co	st		\$1,095.46
(0	Total for	m Repair (if a r Lumpsum re umpsum Rep	epair cost afte	rLess: 20%		
	Estimated norm	1000 1490 UV 1000-1 EP60		2wor		
٧	We shall treat within 7 worki	the above a	mount as Co	errect and Confi	rmed if there is	s no reply from you
٦	Thank you for	your assistar	nce.		confirm the es	timates and
	Signature : _		M	Sig	nature :	Kalu
Ì	Name : <u>J</u>	UMANI		<u></u> 4 2007	me :	
	Tel :_	6217	4 8315	Da	te :	29/8/1
1	Fax : _	654	68156			
or Of	ficial Use On	ly		965	147	
	Item		Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
. Rer	ntal Rate P/Da	ay		YES		
. Los	s of Income P	Paid		N		
. Sur	rvey Fees					
. Me	A Search Fee dical Fees (on driver, if applic	behalf (able)	\$7.49			
1000000	errun					

Remarks:



# **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTU	C INCOME INSURA	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1801526	39/K1sbn2
#05-0	73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date:	05-09-2018 INC4	
1.	THE SHADOW NAMED	Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	PC 3697P	Veh. I	nspected	SHC 3055L
	Policy No.	5089387025-01	Cover	age (\$)	0.00
	Claim No.	MT/1009373-001	Exces	is (\$)	0.00
	Assign From		Assign Date		21/08/2018
2.		Vehicle Parti	culars	& Condition	
	Make & Model HYUNDAI IONIQ		c.c		1580
	Engine No.	HIDDEN	Year	of Reg.	2018
	Chassis No.	KMHC851CVJU103419	Colour		BLUE
	Odometer	29285	Steering		IN ORDER
-	Brakes	IN ORDER			STANDARD ALLOY RIM
-	General	FAIR			
3.		Condi	ions of	Tyres	
		Size	Make	08	Balance
	R/H Front Tyre	195/65 R15	NEXE	N	7 mm
-	L/H Front Tyre	195/65 R15	NEXE	N	7 mm
	R/H Rear Tyre	195/65 R15	NEXE	N	7 mm
	L/H Rear Tyre	195/65 R15	NEXE	N	7 mm
4.		Descript	ion of D	amages	
	THE VEHICLE SU	STAINED DAMAGES AT THE R	EAR PO	RTION.	
5.	DAMAGES SEE D		al Infor	mation	NAME OF THE PERSON OF THE PERS
٥.	Accident Date	19/08/2018		ection Date	21/08/2018
	Survey held at	COMFORTDELGRO ENGINE	100000		
	ourvey note at	59 LOYANG DRIVE SINGAPORE 508969			
5a.			Remark		
	A)THE INSPECTION	ON WAS CONDUCTED ON A"W CE TO YOUR INSTRUCTIONS,	WE HAV	E NOT AUTHORIS	S. ED REPAIRS.
5b.		Estimat	e Days	of Repair	

ESTIMATED NORMAL PERIOD FOR REPAIR:

2 Working Days



# **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 3055L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	DEFORMED	459.40	459.40
1	REAR BUMPER REINFORCEMENT (NPA)	SERVICEABLE		14
	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE (NPA)	SERVICEABLE	-	-
-1	REAR BUMPER UNDER COVER (NPA)	SERVICEABLE	-	15
1	REAR BUMPER GARNISH (BLACK)	CRACKED	322.30	
	LESS 20% DISCOUNT		-160.74	
			642.96	642.96
	NETT ITEMS			
1	REAR BUMPER REVERSE SENSOR (N)	SERVICEABLE	135.70	1
	REAR NUMBER PLATE (N)	CRACKED	25.00	
	LESS 10% DISCOUNT		8-	-2.50
			160.70	22.50
	LABOUR			
	PANEL BEATING.		400.00	
	SPRAY PAINTING CHARGE.		250.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	.1
	REMOVE/REFIX REVERSE SENSOR.		120.00	
	1 miles (miles and miles and 2009) AN 2000 (Miles and 2000) (Miles and Miles		820.00	430.00
	GRAND TOTAL		1,623.66	1,095.40

RECOMMENDED COST OF REPAIRS (CONFIRMED)	1,095.46
KECOMMETADED COC. C. HELLING (	

Report Ref No. NS/INC18015269/K1sbn2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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