

INS. CASE OWNER:

CC3, total 180 16283, Plwa332

LKK:

IDAC:

Surveyor:

Ank

DOI:

ASSIGNMENT

5/1/18

Date / Time:

5/1/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SGF 6108 U

Name of Insured:

Foo Pann Yaw Pannel

Insured Tel No.:

HP:

Claim No.:

M-18170 02388, JH

Excess Sec II :SS

D.O.A: 4/9/18

Policy No.:

Make / Model:

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHA 7480 B



INSRS:

WSP:

Tel:

Liability:

RMKS:

OPW 10443



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time:

Date / Time	STAGE	DATE / PIC
	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	Documentation Check List: Handler Typist	
	Notification ltr (if non-pickup)	
	After call ltr to OI:	
	Authorisation To Act:	
	Release Voucher:	
	Final Repair Bill:	
	Car Rental Invoice:	
	Towing Invoice	
	LTA / GIA:	
	Medical Bill:	
	PIR:	
	Mandate/Reject Instruction:	
	LOD Vivian	
	Payment Breakdown Form:	
	Post-Report	
	Others:	

PRELIMINARY ADVICE

Date/Time:

7/1

Sent By:

Ank

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No.:

If NO or B 28, Ass. Lia:

Repair Cost:

S\$

Loss of Rental (LOR):

S\$

(days)

Loss of Use (LOU):

S\$

(\$ x days)

Loss of Income (LOI):

S\$

(\$ x days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

28/5/19

COMPLIMENT

1) Claim status: Normal/Reject/Private Settle

2) Report Format: reject

3) Survey fee: \$400.00

(08/11/13)

Surveyor: Kalvin

REF: _____

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / INS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHA 7480B Yr Regn: 25 Jun 2015

Type: M.Car / M.Cycle / Bus / Van / Lorry / T/Tr / Prime Mover /

Truck / Trailer or

Make: Hyundai Ix0 cc 1685Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 437787 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHLD414M407X982

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/60R16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Hoan Kook

Front: _____ Rear: _____

R/Bal. 2 mm R/Bal. 2 mmL/Bal. 2 mm L/Bal. 2 mmD.O.A. 4/9/8 D.O.I. 5/9/8Survey held at CHE (Layang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S Front.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

21/5/19 Confirm US \$1900 with 2 working days

EQ
4s(Ref) = \$1377.92
(42%)

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Report Format: _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

☐

: Weekend (\$ _____)

Survey Fee:

Transportation:

____ \$ + RS ____ \$

Photos

Others

TOTAL

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305208538

OMER

COMFORT TRANSPORTATION PTE LTD

7010045

IS

OMER NO.

TESS

383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (O)

(R)

(P)

COUNT CARD NO.

REGN NO.: SHA7480B

MILEAGE

MAKE: HYUNDAI

FUEL

E.....1/2.....F

MODEL I-40

DATE/TIME IN 04.09.2018 16:25

YR OF MANU 25.06.2015

TARGET DATE

CHASSIS CODE KMHLB41UMGU074982

COMPLETION DATE/TIME:

JOB DESCRIPTION

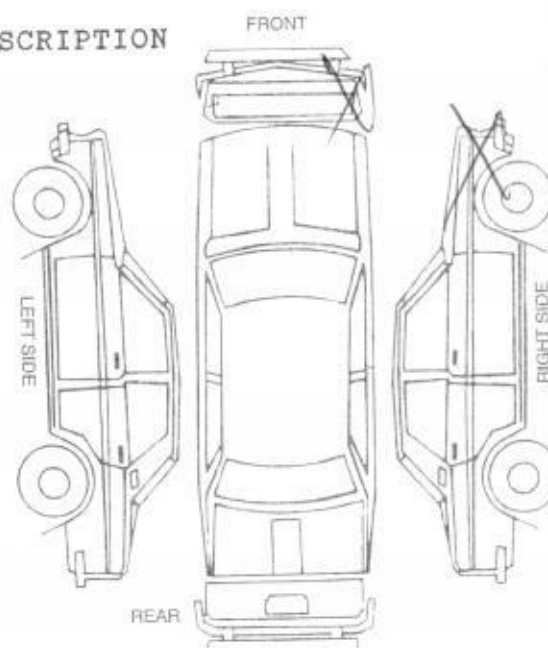
Accident Date: 04.09.2018

NATURE: 3P 04.09.18

S/NO

LABOR CODE

DESCRIPTION



WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Redemption Slip

Exit Pass

No.:

SHA7480B

JU EQ

Vehicle No.:

SHA7480B

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

DATE 5/9/2018 9:57

MAKE :

MODEL : HYUNDAI i40

MODEL : HYUNDAI i40		Qty	Parts Description/ Labour	Type	Unit Price	Amount
			Front Bumper Cover /			\$ 544.50
			Front Bumper Sponge ?			\$ 99.20
			Front Bumper Reinforcement ?			\$ 402.10
			Front Bumper Grille (RH) X			\$ 41.60
			Front Bumper Bracket Top (RH) X			\$ 22.40
			Front Bumper Bracket (RH) ?			\$ 24.60
			Headlamp (RH) /			\$ 1,388.00
			<i>Front fender (RH) repair</i>			\$ 2,522.40
			SUB TOTAL			\$ 504.48
			LESS 20%			\$ 2,017.92
			DISCOUNTED TOTAL			
			Frt Fender Advertisement Logo (RH) /			\$ 100.00
						\$ 100.00
			Labour Charge			
			Panel Beating-Repair Fender			\$ 500.00 300
			Spray Painting Charge			\$ 500.00 400
			Wiring			\$ 50.00 20
			Tuff Kote			\$ 50.00 X
			TOTAL LABOUR			\$ 1,160.00
			ESTIMATE TOTAL			\$ 3,277.92

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305208538
Date : 07/08/19

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6548 8156

FINALIZATION FORM

To : LKK
Attn : KALVIN
: SHA7480B

Fax :

Date of Accident : 04/09/18

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

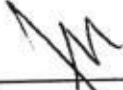
1. The repair job shall bill to: EQ --- SGF6108U
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges ###
 - Total for Part-By-Part Repair Cost
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$1,900.00
Final Lumpsum Repair cost


3. Estimated normal period for repairs: 2 working days

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature : 
Name : K9/m
Date : 7/9/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

DATE 5/9/2018 9:57

VEHICLE NO : SHA 7480B

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover / <i>Return</i>			\$ 544.50
	Front Bumper Sponge <i>Xsu</i>			\$ 99.20
	Front Bumper Reinforcement <i>Xsu</i>			\$ 402.10
	Front Bumper Grille (RH) <i>Xsu</i>			\$ 41.60
	Front Bumper Bracket Top (RH) <i>Xme</i>			\$ 22.40
	Front Bumper Bracket (RH) <i>Xsu</i>			\$ 24.60
	Headlamp (RH) / <i>hotted</i>			\$ 1,388.00
	<i>Front fender (RH) Xme</i>			
	SUB TOTAL			\$ 2,522.40
	LESS 20%			\$ 504.48
	DISCOUNTED TOTAL			\$ 2,017.92
	Frt Fender Advertisement Logo (RH) / <i>me</i>			\$ 100.00
				\$ 100.00
	Labour Charge			\$ 300
	Panel Beating-Repair-Fender			\$ 560.00
	Spray Painting Charge			\$ 500.00
	Wiring			\$ 50.00
	Tuff Kote			\$ 50.00
				\$ 1,160.00
	TOTAL LABOUR			\$ 1,160.00
	ESTIMATE TOTAL			\$ 3,277.92

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey on a "without Prejudice" basis
- No illegal modification allowed
- Supplemental repairs must be insured and is subject to approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

Kalvin (LKK)
5/9/18 1045h
2 By,
4/5
After repair photo

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: TBA
Our ref: CC3/EQI18016283/K1wa3

Date: 07.09.2018

The Motor Claims Department
M/s EQ INSURANCE COMPANY LTD

PRELIMINARY ADVICE OF VEHICLE NO.

SHA 7480B

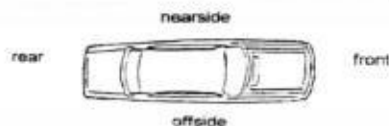
We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 05.09.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) have the following to report:-

Workshop Estimate Amount	: S\$	3,277.92
Revised Estimate Amount	: S\$	1,900.00
"Check" Items Amount	: S\$	-
Total (Including Check Items)	: S\$	1,900.00
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the
O/S Front portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2.0 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

Our Ref : T 0918 / SHA7480B / JW(st)
Your ref : _____
Date : 12-Sep-18

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 198506348W

EQ Insurance Company Limited
5 Maxwell Road, MND Complex
#17-00 Tower Block
Singapore 069110

Attn : Motor Claims Department
Dear Sir

WITHOUT PREJUDICE

**ACCIDENT INVOLVING OUR TAXI SHA7480B YOUR INSURED SGF6108U
AND OTHER _____ ON 05.09.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SHA7480B which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving SGF6108U we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

- 1 Cost of Repair
- 2 3 days Loss of Rental @ \$ 119.28 per day
- 3 Survey Report Fees (Surveyed by M/s LKK)
- 4 LTA Search Fees
- 5 GIA / Police Report Fees
- 6 Towing / Medical / Transportation Fees

\$ 2,033.00

\$ 357.84

\$ -

\$ 7.49

\$ -

\$ -

Sub Total : \$ 2,398.33

HIRER'S CLAIM

- 7 3 days Loss of Income @ \$ 80.00 per day

\$ 240.00

Total Claims: \$ 2,638.33

We enclose herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs: 6 pcs.
- b) LTA search slip/s of : SGF6108U
- c) GIA / Police report/s of : SHA7480B
- d) Letter of authority from owner / hirer / operator
- () Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
- (X) Photograph/s of Accident Scene (x) Downtime/Mileage record (x) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

Jim Wong

Deputy Manager

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

This is a computer generated letter. No signature is required.

Workshops

Braddell
205 Braddell Road
Singapore 579701

Loyang
59 Loyang Drive
Singapore 508969

Sin Ming
383 Sin Ming Drive
Singapore 575717

Pandan
45 Pandan Road
Singapore 609286

Ubi
320 Ubi Road 3
Singapore 408649

Senoko
24 Senoko Loop
Singapore 758158

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
501 Yishun Industrial Park A
Singapore 768732

(NAF / PAF)

ON 04-Sep-18 15:30

(Hirer) NRIC No.: **S1512840B**

(Relief) NRIC No.:

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

- 98360807

TAX INVOICE

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00
SINGAPORE 069110

CONTACT NO: 62239433

VEHICLE NO
SHA7480B

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
25.06.2015

CHASSIS CODE
KMHLB41UMGU074982

NO/DATE
91395170 11.09.2018

JOB NO.
305208538

ODOMETER READING

JOB TYPE

Description : 3P 04.09.18

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	1,900.00
Add GST @ 7.000 %	133.00
Total Invoice amount.	2,033.00

Issued by : KATHERINETAN 11.09.2018 16:36:08
Repair Type : CLSO/57/57
Payment Type/Term : /Credit 30 days

- WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 3 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

Our Ref: CT18090091

Date: 11 September 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	04/09/2018 @ 15:30 hrs
ALONG	JUNCTION OF ORCHARD ROAD AND MOUNT
	ELIZABETH
INVOLVING	SGF6108U

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA7480B** (the "Taxi"). The Taxi was hired to **CHAN CHUEN SUM IC NO S1512840B** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$119.28** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

Enquire Vehicle Insurer

Vehicle No. **Incident Date/Time**

SGF6108U 04 Sep 2018 / 15:30:00

Search Status

Successful

Insurance Company Code

E04

Insurance Company Name

EQ INSURANCE COMPANY LTD

[Previous](#)

[OK](#)



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

EQ INSURANCE COMPANY LTD

Ref : CC3/EQI18016283/K1wa3s2

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEX SINGAPORE 069110

Date : 21-06-2019



Code : EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SGF 6108U	Veh. Inspected	SHA 7480B
Policy No.	DMPPHQ17-004529	Coverage (\$)	0.00
Claim No.	DM18HO02388-JG	Excess (\$)	0.00
Assign From		Assign Date	05/09/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMGU074982	Colour	BLUE
Odometer	437787	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60R16	HANKOOK	7 mm
L/H Front Tyre	205/60R16	HANKOOK	7 mm
R/H Rear Tyre	205/60R16	HANKOOK	7 mm
L/H Rear Tyre	205/60R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	04/09/2018	Inspection Date	05/09/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
-------------------------------------	----------------



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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 7480B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER COVER	DEFORMED	544.50	544.50
1	FRONT BUMPER SPONGE	SERVICEABLE	99.20	-
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	402.10	-
1	FRONT BUMPER GRILLE (RH)	SERVICEABLE	41.60	-
1	FRONT BUMPER BRACKET TOP (RH)	SERVICEABLE	22.40	-
1	FRONT BUMPER BRACKET (RH)	SERVICEABLE	24.60	-
1	HEADLAMP (RH)	GRAZED	1,388.00	1,388.00
1	FRONT FENDER (RH) (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-504.48	-386.50
			2,017.92	1,546.00
SPECIAL NETT ITEMS				
1	FRT FENDER ADVERTISEMENT LOGO (RH) (SN)	NECESSARY	100.00	100.00
			100.00	100.00
LABOUR				
	PANEL BEATING INCLUSIVE OF THE REPAIR OF FRONT FENDER (RH).		560.00	300.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING.		50.00	30.00
	TUFF KOTE.	NOT NECESSARY	50.00	-
			1,160.00	730.00
			3,277.92	2,376.00
GRAND TOTAL				
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,900.00

Report Ref No. CC3/EQ118016283/K1wa3s2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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