

2203/2002

ASS. REC. BY:

REF:

CS/GAL18017056/Tlcd3^{S2}

Special instruction:

SURVIVOR :

Taufik

ASSIGNMENT (Office)

From (Person):

Kelbyna

of

695

Date/Time:

17092018 11:01am

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SLU 4217m

Insured:

at Workshop m/s

Motor Image

Tel:

9073 2232

of

25 Leng Kee Rd

Policy No:

Claim No:

CLMOMVP00000845

Sum Insured:

Excess:

NDL

Make of Veh:

D.O.A.

12052018

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

19092018 11:07 am

Person Contacted:

Test

Vehicle/~~IN~~/OUT

IN/OUT

[illegible]

五 GAI

TOTAL

250



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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI18017056/T1rb

3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
SINGAPORE 039190

Date : 19-09-2018



Code : GAI

1. Policy Particulars :- OWN DAMAGE

Insured Veh.	Veh. Inspected	SLU 4217M
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From KELVYNA	Assign Date	19/09/2018

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No. HIDDEN	Year of Reg.	
Chassis No.	Colour	
Odometer -	Steering	
Brakes	Modification	
General		

3. Conditions 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 of Damages

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5. General Information

Accident Date	12/09/2018	Inspection Date	19/09/2018
Survey held at	25 LENG KEE ROAD		
Repairer	MOTOR IMAGE ENTERPRISES PTE LTD		

5a. Remarks

- A) THE MARKET VALUE IS S\$----- (EST. AVERAGE)
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.

Celine Fong (LKKAUTO)

From: Ngian, Kelvyna <Kelvyna.Ngian@sg.gaig.com>
Sent: Tuesday, 25 June 2019 4:02 PM
To: Celine Fong (LKKAUTO)
Cc: SUR
Subject: RE: OD survey today - insd SLU4217M & SLW 4465C along Punggol East towards KPE on 12 September 2018.

CLMOMVP000000845

From: Celine Fong (LKKAUTO) <celinefong@lkkauto.com>
Sent: Tuesday, June 25, 2019 4:01 PM
To: Ngian, Kelvyna <Kelvyna.Ngian@sg.gaig.com>
Cc: SUR <sur@lkkauto.com>
Subject: [External] RE: OD survey today - insd SLU4217M & SLW 4465C along Punggol East towards KPE on 12 September 2018.

Dear Kelvyna,

Please provide claim number for this case.

Thank you.

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ngian, Kelvyna <Kelvyna.Ngian@sg.gaig.com>
Sent: Wednesday, 19 September 2018 11:01 AM
To: Admin-D (LKKAUTO) <admin-d@lkkauto.com>; Admin A <admin-a@lkkauto.com>; Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Subject: OD survey today - insd SLU4217M & SLW 4465C along Punggol East towards KPE on 12 September 2018.

Hi Catherine

As spoken, please conduct OD survey at 2pm today at following workshop, authorise if consistent and below \$5,000. Nil excess :

Please liaise with:

Jeff Teh

Service Advisor
Motor Image Enterprises Pte Ltd
25 Leng Kee Road
Singapore 159097
DID:(65)6703 8631
HP:(65)9073 2232
FAX:(65)6479 1137
Email:tengchuen@motorimage.net

Catherine Chong (LKK Auto)

From: Ngian, Kelvyna <Kelvyna.Ngian@sg.gaig.com>
Sent: Wednesday, 19 September, 2018 11:01 AM
To: Nivitha (LKK Auto); 'Admin A'; Catherine Chong (LKK Auto)
Subject: OD survey today - insd SLU4217M & SLW 4465C along Punggol East towards KPE on 12 September 2018.

Hi Catherine

As spoken, please conduct OD survey at 2pm today at following workshop, authorise if consistent and below \$5,000. Nil excess :

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Service Advisor
Motor Image Enterprises Pte Ltd
25 Leng Kee Road
Singapore 159097
DID:(65)6703 8631
HP:(65)9073 2232
FAX:(65)6479 1137
Email:tengchuen@motorimage.net

Thanks
Kelvyna

The content of this e-mail message and any attachments are confidential and may be legally privileged, intended solely for the addressee. If you are not the intended recipient, be advised that any use, dissemination, distribution, or copying of this e-mail is strictly prohibited. If you receive this message in error, please notify the sender immediately by reply email and destroy the message and its attachments.

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 withholding 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.
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.

ACCIDENT STATEMENT

Date Of Report	12/09/2018 10:22
Date Of Accident	12/09/2018 08:20
Exact Location Of Accident	FILTER LANE INTO ENTRANCE TOWARDS KPE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU4217M
Insured/Policyholder	
Name Of Registered Owner	LIM SHUNJIE,BENJAMIN
NRIC No	S8943856Z
Email Address	SHUNJIE_SAILI@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98331464
Alternative Phone No	OTHERS-98331464

Vehicle Particulars

Manufacturer	SUBARU
Model	XV 1.6I-S AWD CVT

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	LIM SHUNJIE,BENJAMIN
NRIC No	S8943856Z
Date Of Birth	02/12/1989
Occupation	INDOOR
Date Of Driving Pass	22/07/2008
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98331464
Fax Number	
Contact Number	OTHERS-98331464
Email Address	SHUNJIE_SAILI@HOTMAIL.COM

Address	APT BLK 669A EDGEFIELD PLAINS #05-654
Postcode	821669
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 - 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?	NO
Was any injured conveyed to hospital by 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: : TAN SAI LI, SAILI 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

PLEASE REFER TO THE SKETCH PLAN

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	SLW4465C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


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 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.
5. Any false reporting may be referred to the Police for investigation.
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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.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all Insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (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
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (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.


Policyholder's Signature
Date & Time:


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

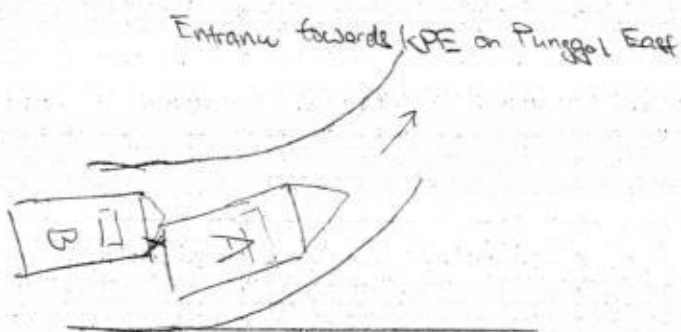

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN

A. 8LU 4217 M

B. 8LW 4465 C.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: 8LU 4217 M	ACCIDENT DATE & TIME: 12 Sept 2018, around 8:20 am
CONTACT NUMBER: 98331464	E-MAIL ADDRESS: Shunye-Saili@hotmail.com
LOCATION: Filter lane into entrance towards KPE on Punggol East.	
<p>I (Car A) was driving along Punggol East on 12 Sept 2018, at around 8:20 am and was switching lane into the filter lane into the entrance towards KPE on Punggol East. Just as I entered the filter lane, a car ahead of me stopped abruptly and I stopped. The car behind me (Car B) came into contact and collided into the back of my car.</p>	
<p>PAX: Tan Sai Li, Saili</p>	
<p>NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION</p>	
<p>Please state:</p>	
<p><input type="checkbox"/> Claim Own Policy <input checked="" type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input type="checkbox"/> Reporting Only</p>	

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

ESTIMATE : ACCIDENT/BODY REPAIRS
WORKSHOP : LENG KEE
CONTACT NO :
REFERENCE : INS/IC/LHI/059/2018
DATE : 13-SEP-2018

GREAT AMERICAN INSURANCE COMPANY
3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
S(039190)
TEL : 6804 6000
FAX : 6235 2616

OWNER'S NAME : LIM SHUNJIE, BENJAMIN
ADDRESS : APT BLK 669A EDGEFIELD PLAINS
#05-654
S(821669)
TELEPHONE NO : 9833 1464

TYPE OF CLAIM : COMPREHENSIVE CLAIM
POLICY NO : 1
VEHICLE NO : SLU4217M
MODEL CODE : GT3BKGC
MODEL/YEAR : SUBARU XV 1.6I-S AWD CVT
ENGINE NO : FB16YB77473
CHASSIS NO : JF1GT3KC5JG024341
MILEAGE : 1 KM
DATE IN : 13/09/2018
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : JEFF TEH TENG CHUEN
ACCIDENT DATE : 13/09/2018

Print Date : 18/09/2018
Print Time : 18:51:35

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
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Tanjiah 97495749

Authorised

Ex: NIL

Resurvey before paint

03 day.

sur@lkkauto.com

19/9/18 150pm

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SLU4217M

S/NO	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	REVERSE2	TO SUPPLY AND INSTALL 2-POINT REVERSE SENSOR	400.00	na ✓
2	ZZ/001	TO SUPPLY AND REPLACE REAR BUMPER ASSY	1120.00	560. ✓
3	ZZ/002	TO RESPRAY REAR BUMPER ASSY AND BUMPER BEAM	880.00	440. + beam 220 ? 660 ✓
4	ZZ/003	SUNDRIES	50.00	20. ✓
TOTAL LABOUR CHARGES			2450.00	

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SLU4217M

		DAMAGED PARTS & PRICES				
S/NO	PARTS DESCRIPTION	PARTS NUMBER	NETT	LIST	S/NETT	S/LIST REMARKS
1	BUMPER FACE R XV	57704FL250	601.50	de ✓		
2	BRKT LWR R	57707FL510	12.60	X Coa ✓		
3	BEAM COMPL R EU	57711FL0419P	203.00	? bt ✓		
4	COVER HOOK R XV	57731FL570NN	9.75	de ✓		
SUB TOTAL			826.85	0.00	0.00	0.00
LESS DISCOUNT (NETT-20 %)			165.37	0.00	0.00	0.00
GRAND TOTAL			661.48	0.00	0.00	0.00
OVERALL TOTAL			661.48			

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SLU4217M

TOTAL LABOUR CHARGES	2450.00
TOTAL SPARE PARTS CHARGES	661.48
GRAND TOTAL	3111.48 *

* All charges do2 not include GST.

SURVEYOR'S PARTICULARS

NAME	:	
SURVEYED DATE	:	
AUTHORIZED DATE	:	
EXCESS CLAUSE	:	0.00
LIABILITY	:	0.00
REMARKS	:	

PLS NOTE : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

FINALIZED : ACCIDENT/BODY REPAIRS
WORKSHOP : LENG KEE
CONTACT NO :
REFERENCE : INS/IC/LHI/059/2018
DATE : 13-SEP-2018

GREAT AMERICAN INSURANCE COMPANY
3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
S(039190)
TEL : 6804 6000
FAX : 6235 2616

OWNER'S NAME : LIM SHUNJIE, BENJAMIN
ADDRESS : APT BLK 669A EDGEFIELD PLAINS
#05-654
S(821669)
TELEPHONE NO : 9833 1464

TYPE OF CLAIM : COMPREHENSIVE CLAIM
POLICY NO : 1
VEHICLE NO : SLU4217M
MODEL CODE : GT3BKGC
MODEL/YEAR : SUBARU XV 1.6I-S AWD CVT
ENGINE NO : FB16YB77473
CHASSIS NO : JF1GT3KC5JG024341
MILEAGE : 1 KM
DATE IN : 13/09/2018
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : JEFF TEH TENG CHUEN
ACCIDENT DATE : 13/09/2018

Print Date : 25/04/2019
Print Time : 20:45:14

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SLU4217M

S/NO	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	REVERSE2	TO SUPPLY AND INSTALL 2-POINT REVERSE SENSOR	400.00	400.00
2	ZZ/001	TO SUPPLY AND REPLACE REAR BUMPER ASSY	1120.00	560.00
3	ZZ/002	TO RESPRAY REAR BUMPER ASSY AND BUMPER BEAM	880.00	660.00
4	ZZ/003	SUNDRIES	50.00	20.00
TOTAL LABOUR CHARGES			2450.00	1640.00

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SLU4217M

S/NO PARTS DESCRIPTION	PARTS NUMBER	DAMAGED PARTS & PRICES			S/LIST REMARKS
		NETT	LIST	S/NETT	
1 BUMPER FACE R XV	57704FL250	601.50			OK
2 BRKT LWR R (SUPP)	57707FL510	12.60			OK
3 BEAM COMPL R EU (SUPP)	57711FL0419P	203.00			OK
4 COVER HOOK R XV	57731FL570NN	9.75			OK
SUB TOTAL		826.85	0.00	0.00	0.00
LESS DISCOUNT (NETT-20 %)		165.37	0.00	0.00	0.00
GRAND TOTAL		661.48 ✓	0.00	0.00	0.00
OVERALL TOTAL		661.48			

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

MOTORIMAGE ENTERPRISES PTE. LTD.
25 LENG KEE ROAD
SINGAPORE 159097

SUMMARY OF OVERALL CHARGES FOR VEHICLE REGN NO SLU4217M

NETT ITEM 826.85
LESS 20 % -165.37
NETT AMOUNT 661.48

LIST ITEM 0.00
LESS 50 % 0.00
LIST AMOUNT 0.00

SPECIAL NETT AMOUNT 0.00

S/LIST ITEM 0.00
LESS 30 % 0.00
S/LIST AMOUNT 0.00

TOTAL LABOUR CHARGES 1640.00
TOTAL SPARE PARTS CHARGES 661.48

TOTAL CHARGES 2301.48 ✓
ADD 7 % GST 161.10

GRAND TOTAL 2462.58



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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI18017056/T1cd3s2

3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
SINGAPORE 039190

Date : 26-06-2019



Code : GAI

1. Policy Particulars :- OWN DAMAGE

Insured Veh.		Veh. Inspected	SLU 4217M
Policy No.		Coverage (\$)	0.00
Claim No.	CLMOMVP000000845	Excess (\$)	0.00
Assign From	KELVYNA	Assign Date	19/09/2018

2. Vehicle Particulars & Condition

Make & Model	SUBARU XV 1.6	c.c	1600
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JF1GT3KC5JG024341	Colour	BLUE
Odometer	16046	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	225/60R17	YOKOHAMA	6 mm
L/H Front Tyre	225/60R17	YOKOHAMA	6 mm
R/H Rear Tyre	225/60R17	YOKOHAMA	6 mm
L/H Rear Tyre	225/60R17	YOKOHAMA	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	12/09/2018	Inspection Date	19/09/2018
Survey held at	25 LENG KEE ROAD		
Repairer	MOTOR IMAGE ENTERPRISES PTE LTD		

5a. Remarks

A) THE MARKET VALUE IS S\$84,000.00 (EST. AVERAGE) B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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**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. SLU 4217M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BUMPER FACE R XV (N)	DEFORMED	601.50	601.50
1	BRKT LWR R (N)	CRACKED	12.60	12.60
1	BEAM COMPL R EU (N)	BENT	203.00	203.00
1	COVER HOOK R XV (N)	DEFORMED	9.75	9.75
	LESS 20% DISCOUNT		-165.37	-165.37
			661.48	661.48
<u>SPECIAL NETT ITEMS</u>				
1	2 POINT REVERSE SENSOR (SN)	NOT WORKING	400.00	400.00
1	SUNDRIES (SN)	NECESSARY	50.00	20.00
			450.00	420.00
<u>LABOUR</u>				
	TO SUPPLY AND REPLACE REAR BUMPER ASSY.		1,120.00	560.00
	TO RESPRAY REAR BUMPER ASSY AND BUMPER BEAM.		880.00	660.00
			2,000.00	1,220.00
GRAND TOTAL			3,111.48	2,301.48
RECOMMENDED COST OF REPAIRS				2,301.48

Report Ref No. CS/GAI18017056/T1cd3s2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.