

ASS. REC. BY:

REF:

CS/MSG18017393/Usd3ⁿ²

Special Instruction:

Survivor's
mermen

Marcus

ASSIGNMENT (Office)

From (Person):

Elaine Ngu

of

M81G

Date/Time:

25/9/18 @ 9:38am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJO 5075T

Insured:

GBH 5110S

at Workshop n/z:

Perfect Werkz

Tel:

92712214

of

No. 25 Kaki Bkt Rd 4 # 06-51

Policy No:

A29087318MKC

Claim No:

571010

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

20/09/18

CA / REV / REP. / REV 24 HRS

lup

H.O.D. Endorsement:

Date/Time:

10:10am 25/9/18

Person Contacted:

Chris

Vehicle

IN

OUT

Date/Time	Action/Instruction (✓) Estimate
	SJO 5075T-CC4/EQT15016854/pg3XX DOA: 1/10/15
	GBH 5110S-X
26/09/18	@ 14:24 p.m. revised IA to Elaine Ngu via mermen.

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

MS16/

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: 59Q 5075T

at Workshop m/s 981 rect mudge

of 06-57

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: 21

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 8818

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: 59Q 5075T Yr Regn: 5-109

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

Truck / Trailer or CA

Make: Volkswagen Tiguan c.c. 1984

Colour: Silver A/C: Insured / Std / NI / NA

Sp. Reading: 181496 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WVG2221-N29W088115

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

R: 235/55 R17

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 20/9/18 D.O.I. 25/9/18

Survey held at _____

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

2x O/S.

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

Date / Time Action / Instruction

LTA 16260 7 months plus. Depole next 4740

5/10/18 confirmed L/S \$2600 with Chris.

05/10/18 confirmed L/S \$2,600/- @ 3 days with Marcus
(\$7,405.40 Red - 74%)

RECEIVED 05 OCT 2018

Date/Time, File Pass to?

05/10/18

1) 2424

Date/Time, File Return to?

2)

☐ : Preli. Report☒ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

200

10

210

Report Format :

Lump Sum / I.B.I. (\$ 2,600/- L/S)




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			
MSIG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG18017392/Usd3	
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 25-09-2018	
		Code : MSG	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	GBH 5110S	Veh. Inspected	SJQ 5075T
Policy No.	A29087318MKC	Coverage (\$)	0.00
Claim No.	571010	Excess (\$)	0.00
Assign From	MERIMEN (ELAINE NGU)	Assign Date	25/09/2018
2. Vehicle Particulars & Condition			
Make & Model	c.c		
Engine No.	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			
5. General Information			
Accident Date	20/09/2018	Inspection Date	
Survey held at			
5a. Remarks			

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

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

Singapore 408933

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

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: Elaine Ngu Siau Mei

Date: 26 Sep 2018

Preliminary Advice

Insured Vehicle No	: GBH5110S	Accident Date	: 20/09/2018
TP Vehicle No	: SJQ5075T	Assignment Date	: 25/09/2018
Make	: VOLKSWAGEN TIGUAN	Est. Duration of Repair	: 3 days
Date of Inspection	: 25/09/2018		
Inspection At	: Perfect Werkz (HQ) NO. 25 KAKI BUKIT ROAD 4 #06-51 SYNERGY @ KB Singapore 417800		

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	10,005.40
Revised Amount	:S\$	3,587.19
Check Items (Estimated)	:S\$	47.50
Total	:S\$	3,634.69

Lump Sum Repair :S\$

Total Loss Consideration

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

Remarks

- () The vehicle is economical/not economical for repair.
- (X) The above survey was conducted on a 'without prejudice' basis.

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	24 Sep 2018		25 Sep 2018 09:38 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	CFI TRANSPORT PTE LTD, Co. Reg. No.: 201806390H		
Main Claimant:	NG LU SHENG LUKE, ID: S8718818C		
Vehicle Reg. No.:	SJQ5075T	Date of Loss:	20/09/2018 13:00 - :59 [112 Months and 6 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 571010	Policy/Cover Note No.:	A29087318MKC(COMP) (Comprehensive) Coverage: 30/06/2018 - 29/06/2019
Vehicle Reg. No. (Insured):	GBH5110S	Policy No. (Claimant):	
		Excess:	
Repairer:	Perfect Werkz (HQ) NO. 25 KAKI BUKIT ROAD 4 #06-51 SYNERGY @ KB, 417800 Kaki Bukit - Tel: 87788855		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 26/09/2018]		
Driver/Custodian (Insured):	LEONG MING YANG (), NRIC: S1817949J, Tel: +6588165122		
Adj Asg. Remarks:	Liability 100%. TP agree to use LKK as the SJE. Contact Person: Chris Chan / 9271 2214.		

ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 8818C

Vehicle Details

Vehicle No.: SJQ5075T
Vehicle to be Exported: No
Intended Deregistration Date: 26 Sep 2018
Vehicle Make: VOLKSWAGEN
Vehicle Model: TIGUAN 2.0T AUTO 5N12V3 4WD
Primary Colour: Silver
Manufacturing Year: 2009
Engine No.: CAW048901
Chassis No.: WVGZZZ5NZ9W088115
Maximum Power Output: 147.0 kW (197 bhp)
Open Market Value: \$31,577.00
Original Registration Date: 14 May 2009
First Registration Date: 14 May 2009
Transfer Count: 2
Actual ARF Paid: \$31,577.00 15788

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 13 May 2019
PARF Rebate Amount: \$15,788.00

Intended COE Rebate Details

COE Expiry Date: 13 May 2019
COE Category: B - Car (1601cc & above)
COE Period(Years): 10
QP Paid: \$7,501.00
COE Rebate Amount: \$472.00
Total Rebate Amount: \$16,260.00

The information contained herein is correct as at 26 Sep 2018

OK

Enquire P/RF/COE Rebate for Registered Vehicle

Total Rebate: \$1,000.00

\$16,270.00

OK

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	21/09/2018 13:29
Date Of Accident	20/09/2018 13:10
Exact Location Of Accident	THE ANCHORAGE CONDOMINIUM
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJQ5075T
Insured/Policyholder	
Name Of Registered Owner	NG LU SHENG LUKE
NRIC No	S8718818C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97419841
Alternative Phone No	OFFICE-97419841
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	TIGUAN 2.0T AUTO 5N12V3 4WD
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
Policy Number	5092043998-01
Cover Note Number	
Driver	
Name of Driver	NG LU SHENG LUKE
NRIC No	S8718818C
Date Of Birth	26/06/1987
Occupation	INDOOR
Date Of Driving Pass	30/11/2010
Driving Experience	7 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97419841
Fax Number	
Contact Number	OFFICE-97419841
Email Address	NOEMAIL

Address	BLK 405 HOUGANG AVE 10 #05-1140
Postcode	530405
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?	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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED

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	GBH5110S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LEONG MING YANG
NRIC/Passport Number	S1817949J
Contact Number	88165122
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan


SKETCH PLAN

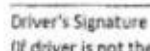
IMPORTANT NOTICE


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.
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 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.

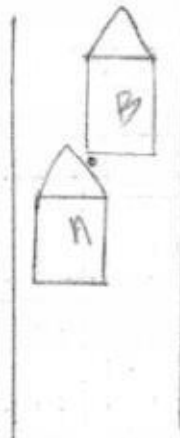

Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2

SKETCH PLAN



Vehicle A: SJQ 5075T

Vehicle B: GBH 5110 S

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling behind a van, GBH 5110 S when the van braked and reversed without hazard light indication and hit onto the front of my vehicle.

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.:

PERFECT WERKZ

Block 25 Kaki Bukit Road 4 #06-51 Synergy@KB Singapore 417800
 HP: 92712214 Fax: (65) 69664526 ROC: 53364512C

NG LU SHENG LUKE
 Bk 25 Kaki Bukit Rd 4
 # 06-51 SYNERGY @KB
 Singapore 417800

24th SEPTEMBER 2018

Estimated repair cost for vehicle no: SJQ5075T VOLKSWAGEN TIGUAN 2.0 '09
 Accident date: 20th SEPTEMBER 2018

S/n	Qty	Items/Nett	U/price	Amount	
1	1	Front bonnet		\$955.80	X
2	1	Front bonnet emble logo		\$95.00	X
3	1	Front bonnet lock		\$114.50	X
4	1	Front bonnet lock panel		\$95.20	X
5	2	Front headlamp	\$950.00	\$1,900.00	tpc
6	1	front support panel		\$1,051.20	X
7	1	front support panel lock		\$110.20	X
8	1	Front Grille		\$374.20	2
9	1	Front Grille garnish		\$274.20	X
10	1	Front bumper	20/20.1	\$1,175.10	✓
11	10	Front bumper clips	\$7.80	\$78.00	✓
12	1	Front bumper reinforcement		\$551.20	X
13	1	Front bumper inner sponge		\$125.00	2
14	1	Front bumper center cover lower garnish		\$325.80	X
15	2	Front bumper fog lamp	\$212.50	\$425.00	X
16	2	Front bumper fog lamp cover	\$137.50	\$275.00	X
17	2	Front Bumper Side Bracket	\$65.00	\$130.00	X
18	1	Front Bumper number plate		\$50.00	X

Subtotal :- \$8,105.40

not Allowed

2600

1/50

300

25/9/18

1.000 per After repair

Labour charges

To Remove & refix cushion

11 \$120.00 X

Tuff kote

11 \$120.00 X

To Check Wiring System

20 \$60.00

Panel beating.

400 \$800.00

Spray painting

600 \$800.00

Subtotal :- \$1,900.00

Total:- \$10,005.40

1020

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:

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG18017392/USD3N2

Date: 08/10/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	A29087318MKC (COMP)
Claimant Vehicle No :	SJQ5075T	Insured Vehicle No :	GBH5110S
Date of Loss:	20/09/2018	Nature of Claim:	TP
		Claim No:	571010

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SJQ5075T	Engine No:	CAW048901
Make & Model:	VOLKSWAGEN TIGUAN, 2.0 TSI (A)	Chassis No:	WVGZZZ5NZ9W088115
Reg. Date:	14/05/2009 (Man. Year: 2009)	Odometer:	181496 km
Colour:	Silver		
Engine Capacity:	1984 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	235/55R17	Rear Tyre Size:	235/55R17
Front Left Side:	Michelin 6 mm	Rear Left Side:	Michelin 6 mm
Front Right Side:	Michelin 6 mm	Rear Right Side:	Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	8,105.40	2,535.83	5,569.57	68.71
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,900.00	1,020.00	880.00	46.32
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	10,005.40	3,555.83	6,449.57	64.46
Approved Total (Overridden) (\$\$)		2,600.00		
Nett Amount (\$\$)	10,005.40	2,600.00	7,405.40	74.01

INSPECTION

Date of Assignment:	25/09/2018	
Date Inspected:	25/09/2018 Inspected At:	Perfect Werkz (HQ) NO. 25 KAKI BUKIT ROAD 4 #06-51 SYNERGY @ KB Singapore 417800

Estimated Period of Repair: 3.0 days

Adjuster: MARCUS CHUA

Manager: Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 08 Oct 2018)
Parts:	M1-SUV	VOLKSWAGEN TIGUAN 2.0 TSI (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SJQ5075T)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
1	1	*FRONT BONNET	Repair	955.80 F	*- FL
2	1	*FRONT BONNET EMBLEM LOGO	Not Necessary	95.00 F	*- FL
3	1	*FRONT BONNET LOCK	Not Necessary	114.50 F	*- FL
4	1	*FRONT BONNET LOCK PANEL	Not Necessary	95.20 F	*- FL
5	1	*FRONT HEADLAMP	O/s Broken	1,900.00 F	*950.00 FL
6	1	*FRONT SUPPORT PANEL	Not Necessary	1,051.20 F	*- FL
7	1	*FRONT SUPPORT PANEL LOCK	Not Necessary	110.20 F	*- FL
8	1	*FRONT GRILLE	Cracked	374.20 F	*374.20 FL
9	1	*FRONT GRILLE GARNISH	Not Necessary	274.20 F	*- FL
10	1	*FRONT BUMPER	Dented/Torn	1,175.10 F	*1,175.10 FL
11	10	*FRONT BUMPER CLIPS	Necessary	78.00 F	*45.00 FL
12	1	*FRONT BUMPER REINFORCEMENT	Repair	551.20 F	*- FL
13	1	*FRONT BUMPER INNER SPONGE	Torn	125.00 F	*125.00 FL
14	1	*FRONT BUMPER CENTER COVER LOWER GARNISH	Not Necessary	325.80 F	*- FL
15	2	*FRONT BUMPER FOG LAMP	Not Necessary	425.00 F	*- FL
16	2	*FRONT BUMPER FOG LAMP COVER	Not Necessary	275.00 F	*- FL
17	2	*FRONT BUMPER SIDE BRACKET	Not Necessary	130.00 F	*- FL
18	1	*FRONT BUMPER NUMBER PLATE	Not Necessary	50.00 F	*- FL

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	8,105.40	2,669.30
- List Item Discount on L Items 0.00/5.00% (\$\$)	0.00	133.47
Total Parts (\$\$)	8,105.40	2,535.83

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO REMOVE & REFIX CUSHION	New	120.00	-
2	TUFF KOTE	New	120.00	-
3	TO CHECK WIRING SYSTEM	New	60.00	20.00
4	PANEL BEATING	New	800.00	400.00
5	SPRAY PAINTING	New	800.00	600.00
Gross Labour Cost (\$\$)			1,900.00	1,020.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >