

09/3/2018

SS REC BY:

REF:

CS/MS618017418/Urban2

Special Instruction:

Surveyor

MORUW.

ASSIGNMENT (Office)

From (Person):

Onhia Nyuk Pui

of

MSLH

Date/Time:

25092018 248pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GU 5434E

Insured:

SJT 825R

at Workshop m/s

1K motor

Tel:

6746 6896

of

Blk 1 Kaki Bukit Ave 6 #02-56

Policy No:

8275725639mp

Claim No:

570987

Sum Insured:

Excess:

Make of Veh:

D.O.A.

20092018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

25092018 320pm

Person Contacted:

Ah Keong

Vehicle: IN/OUT

Date/Time

Action/Instruction (✓) Estimate

GU 5434E - CS/TP13018518/Ackk3

DOA: 07032013

SJT 825R - CS/MS618017418/TLS13

DOA: 20192018

Report thru menimen

(08/11/13) wef

ASS. REC. BY: MORIS

REF:

MS16/
ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: 645434Eat Workshop m/s 712

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: 1660

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 5 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: 645434E Yr Regn: 31 01

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

Truck / Trailer or CarMake: KIA Frontier C.C. 2665Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 347157 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNCS0011217733760

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195 R14R: 155 R12

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

TOYO / YOKO or Firecents

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6/6 mmL/Bal. 6 mm L/Bal. 6/6 mmD.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

Rear

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

Date / Time Action / Instruction 30/3/202124/5 6/11 24/11/1010/18 confirmed 2/5 \$3000 with AM KeongRed: 2927, 491

RECEIVED 12 OCT 2018

Date/Time, File Pass to?

1) typist

Date/Time, File Return to?

2) _____

Report Format: TPLump Sum / t.B.I. (\$) 3000Days Of Repair: 5Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS: \$ _____

Photos

Others

TOTAL

150

10

160

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	21 Sep 2018		25 Sep 2018 14:48 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS <div style="float: right;">[Created by insurer]</div>									
Insured:		HO THIAM GUAN, ID: S7836289H, Tel: +6596467856, Email: RHOTG@YAHOO.COM.SG							
Main Claimant:		THYE WAREHOUSING & TRADING PTE LTD, Co. Reg. No.: 199308636R							
Vehicle Reg. No.:		GU5434E	Date of Loss:	20/09/2018 19:00 - :59 [209 Months and 20 Days From LTA Reg Date (Man Yr)]					
Claim Type:		TP / 570987	Policy/Cover Note No.:	B27572562SMP (Comprehensive) Coverage: 01/09/2018 - 31/08/2019					
Vehicle Reg. No. (Insured):		SJY8225R	Policy No. (Claimant):						
			Excess:	S\$750.00					
Repairer:		Tk Motor Workshop (HQ) Blk 1 Kaki Bukit Ave 6 #02-56, Autobay @ Kaki Bt, 417883 Kaki Bukit - Tel: 67466896							
Handling Insurer:		MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 26/09/2018]							
Driver/Custodian (Insured):		HO THIAM GUAN (39 / Male), NRIC: S7836289H, Tel: +6596467856							
Adj Asg. Remarks:		SURVEY AGREE ON SJE - REQ TO ASSIGN LKK (MARCUS CHUA) LIABILITY:50% CONTACT:9627 3323							
ASSOCIATED MAIL RECEIVED <div style="float: right;">View All Compose Case Mail</div>									
There are no mail for this case.									
ALL ASSOCIATED TASKS <div style="float: right;">View All Search Tasks Create New Task Complete</div>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

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: Chhia Nyuk Pui

Date: 12 Oct 2018

Preliminary Advice

Insured Vehicle No	: SJY8225R	Accident Date	: 20/09/2018
TP Vehicle No	: GU5434E	Assignment Date	: 25/09/2018
Make	: KIA FRONTIER	Est. Duration of Repair	: 5.00
Date of Inspection	: 25/09/2018		
Inspection At	: TK MOTOR WORKSHOP (HQ) BLK 1 KAKI BUKIT AVE 6 #02-56, AUTOBAY @ KAKI BT SINGAPORE 417883		

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\$	5,927.00
Revised Amount	:S\$	3,753.90
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,753.90

Lump Sum Repair	:S\$	3,000.00
-----------------	------	----------

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.

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	22/09/2018 12:38
Date Of Accident	20/09/2018 20:00
Exact Location Of Accident	JLN BOON LAY.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GU5434E
Insured/Policyholder	
Name Of Registered Owner	THYE WAREHOUSING & TRADING PTE LTD
Co Reg No	199308636R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62687717

Vehicle Particulars

Manufacturer	KIA
Model	FRONTIER
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	D18MTHCVE000572
Cover Note Number	

Driver

Name of Driver	LOW THIAM SEWE
NRIC No	S0485224I
Date Of Birth	01/01/1949
Occupation	INDOOR
Date Of Driving Pass	25/08/1973
Driving Experience	45 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94512069
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BKL 263 BUKIT BATOK EAST AVE 4 #03-263
Postcode	650263
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	RAINING
Road Surface	WET

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)	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

ON 20/09/2018 AT ABOUT 20:00 HRS, I WAS TRAVELING ALONG ENTERPRISE ROAD TOWARDS JALAN BOON LAY ON MY WAY HOME. IN FRONT OF ME VEHICLE STOP, SO I FOLLOW SUIT. SUDDENLY VEHICLE B SJY8225R HIT ONTO MY VEHICLE GU5434E REAR PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJY8225R
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	HO THIAM GUAN
NRIC/Passport Number	S7836289H
Contact Number	96467836
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan Pg. 1

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 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.

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.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

(A) GU 5434E

(B) SJY 8225R

Jln Boun Lay

Khong Guan Biscuit Fty(s) Pte

Enterprise Rd

Accident Sketch Plan Pg. 1

Describe Circumstances of the Accident

On 20/9/2018 at about 20:00, I was travelling along Enterprise road toward Jalan Boon Lay on my way home. In front of me vehicle stop, so I follow suit. Suddenly vehicle B SJY 8225 R hit onto my vehicle GU 5434 E rear portion.

Declaration

We declare the foregoing particulars are true in every respect.

Five Wares Trading Pte Ltd
五和贸易有限公司
100, Telok Ayer Street Singapore 069911
Tel: 6310 7605/7757

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Insurance Co.	Sompo Insurance Singapore Pte Ltd		
Vehicle NO.	GU 5434 E	Date Of Accident	20, 9, 2018
<input type="checkbox"/> Reporting Only <input type="checkbox"/> Own Damage Claim <input checked="" type="checkbox"/> Third Party Claim			

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 8636R

Vehicle Details

Vehicle No.: GU5434E

Vehicle to be Exported: No

Intended Deregistration Date: 26 Sep 2018

Vehicle Make: KIA

Vehicle Model: FRONTIER

Primary Colour: Green

Manufacturing Year: 2001

Engine No.: J2294871

Chassis No.: KNCSD011217733760

Maximum Power Output: -

Open Market Value: \$15,652.00

Original Registration Date: 31 Mar 2001

First Registration Date: 31 Mar 2001

Transfer Count: 0

Actual ARF Paid: \$783.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Mar 2021

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 5

PQP Paid: \$22,724.00

COE Rebate Amount: \$11,410.00

Total Rebate Amount: \$11,410.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 26 Sep 2018

OK



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Original Condition. View To
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SKL Automobile StarAd



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Advant

Make Model Price Depreciation Reg Date Eng Cap Mil

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Kia K2900

Any

Any

> 10 year(s)
old

Any



Kia K2900 (New 5-yr COE)

\$26,800

\$5,360 /yr

25-Apr-2008

2,902 cc

Fuel Type: Diesel

New 5 Years COE! Please Call To Arrange For Viewing, Thanks.

Posted: 19-Sep-2018

Tags: 2008 Kia K2900, 2008 kia k2900, Kia K2900, kia k2900, Kia, K2900, k2900, Used Kia

Save this search criteria, to get email alerts whenever a match is found.

Make Model Price Depreciation Reg Date Eng Cap Mil

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T K MOTOR WORKSHOP

1 KAKI BUKIT AVE 6 #02-56
SINGAPORE 417883
TEL: 96273323 FAX: 68442641
CO. REG NO :53049097L

Third party: MSIG.
Lump Sum: 6 day. 25/9/18

DATE: 20/09/2018

THYE WAREHOUSEING & TRADING PTE LTD
10 FAN YOONG RD
SINGAPORE 629788

DEAR SIR

ACCIDENT DATE: 20/09/2018

ESTIMATE COST OF REPAIRS BILL TO KIA FRONTIER CAR NO: GU5434E

- 1 PC REAR TAILGATE PANEL *both*
5 PC REAR TAILGATE STICKER *2*
1 PC REAR TAILGATE MOULDING *20.00*
2 PC REAR TAILGATE SIDE BRACKET *11*
1 PC REAR NO. PLATE *210*
2 PC REAR NO. PLATE LAMP *11*
4 PC REAR STOPPER *11*
2 PC REAR TAILLAMP *1/scene of 5.50*
2 PC REAR TAILLAMP PANEL *But/Buc*
1 PC REAR STEP PANEL *But*
1 PC REAR STEP PANEL BRACKET *11*
1 PC REAR CROSS MEMBER BEAM *11*
1 PC REAR EXHAUST PIPE *11*
3 PC REAR TAILGATE PANEL SCREW *11*
1 PC Rear No. plate Bracket *But*

S\$ 1,059.00	1,059.00	✓
300.00	300.00	S/NETT 250.00
60.00	60.00	S/NETT X
140.00	140.00	X
26.00	26.00	S/NETT 20.00
96.00	96.00	X
112.00	112.00	X
572.00	572.00	✓
304.00	304.00	✓
336.00	336.00	S/NETT 300.00
112.00	112.00	S/NETT X
478.00	478.00	S/NETT X
412.00	412.00	X
60.00	60.00	NETT X
	36.00	✓

- TO CHECK WRING.
TO SPRAY PAINTING.
TO REMOVE & REFIX REAR EXHAUST PIPE.
TO LABOUR CHARGE FOR PANEL BEATING, WELDING, REMOVING
ALL DAMAGED PARTS & REPLACING OF THR NEW PARTS ETC.
TO APPLY UNDERCOATING ON THE REPAIRED & REPLACED
PANEL FOR RUST PROTECTION.
TO CONDUCT REAR CHASSIS MEMBER ALIGHTMENT
AND MEARSUREMENT.

50.00	50.00	20
500.00	500.00	480
80.00	80.00	60
800.00	800.00	✓
150.00	150.00	50
280.00	280.00	X

TOTAL S\$

5,927.00

5963

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:

P-1971
117
1773.90
S. 24 570
1610 1410
37539

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/MSG18017418/URBN2

Date: 15/10/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	B27572562SMP
Claimant Vehicle No :	GU5434E	Insured Vehicle No :	SJY8225R
Date of Loss:	20/09/2018	Nature of Claim:	TP
		Claim No:	570987

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	GU5434E	Engine No:	J2294871
Make & Model:	KIA FRONTIER, 2.7 D (M)	Chassis No:	KNCS011217733760
Reg. Date:	31/03/2001 (Man. Year: 2001)	Odometer:	347157 km
Colour:	Blue		
Engine Capacity:	2665 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):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	195R14	Rear Tyre Size:	155R12 (D)
Front Left Side:	Firenza 6 mm	Rear Left Side:	Firenza 6/6 mm
Front Right Side:	Firenza 6 mm	Rear Right Side:	Firenza 6/6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,103.00	2,343.90	1,759.10	42.87
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,860.00	1,410.00	450.00	24.19
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,963.00	3,753.90	2,209.10	37.05
Approved Total (Overridden) (S\$)		3,000.00		
Nett Amount (S\$)	5,963.00	3,000.00	2,963.00	49.69

INSPECTION

Date of Assignment:	25/09/2018	
Date Inspected:	25/09/2018 Inspected At:	Tk Motor Workshop (HQ) Blk 1 Kaki Bukit Ave 6 #02-56, Autobay @ Kaki Bt Singapore 417883

Estimated Period of Repair: 5.0 days

Adjuster: MARCUS CHUA

Manager: Janice Lee Si Hua

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:	(Last Synchronised: 15 Oct 2018)	
Parts:	N/A	KIA FRONTIER 2.7 D (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GU5434E)	
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		*REAR TAILGATE PANEL	Badly Dented	1,059.00 F	*1,059.00 FL
2	2		*REAR TAILGATE SIDE BRACKET	Not Necessary	140.00 F	*- FL
3	2		*REAR NO PLATE LAMP	Not Necessary	96.00 F	*- FL
4	4		*REAR STOPPER	Not Necessary	112.00 F	*- FL
5	2		*REAR TAILLAMP	N/s Cracked/O/s Broken	572.00 F	*572.00 FL
6	2		*REAR TAILLAMP PANEL	Bent/Buckled	304.00 F	*304.00 FL
7	1		*REAR EXHAUST PIPE	Repair	412.00 F	*- FL
8	5		*REAR TAILGATE STICKER	Necessary	300.00 FS	*250.00 FS
9	1		*REAR TAILGATE MOULDING (TORN)	Not Consistent With The Impact	60.00 FS	*- FS
10	1		*REAR NO PLATE	Broken	26.00 FS	*20.00 FS
11	1		*REAR STEP PANEL	Bent	336.00 FS	*300.00 FS
12	1		*REAR STEP PANEL BRACKET	No such part	112.00 FS	*- FS
13	1		*REAR CROSS MEMBER BEAM	Repair	478.00 FS	*- FS
14	1		*REAR NO PLATE BRACKET	Bent	36.00 F	*36.00 FL
15	3		*REAR TAILGATE PANEL SCREW	Not Necessary	60.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	4,103.00	2,541.00
- List Item Discount on L Items 0.00/10.00% (S\$)	0.00	197.10
Total Parts (S\$)	4,103.00	2,343.90

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 CHECK WIRING	New	50.00	20.00
2	TO SPRAY PAINTING	New	500.00	480.00
3	TO REMOVE & REFIX REAR EXHAUST PIPE	New	80.00	60.00
4	TO LABOUR CHARGE FOR PANEL BEATING,WELDING,REMOVING ALL DAMAGED PARTS & REPLACING OF THE NEW PARTS ETC	New	800.00	800.00
5	TO APPLY UNDERCOATING ON THE REPAIRED & REPLACED PANEL FOR RUST PROTECTION	New	150.00	50.00
6	TO CONDUCT REAR CHASSIS MEMBER ALIGHTMENT AND MEASUREMENT	New	280.00	-
Gross Labour Cost (\$\$)			1,860.00	1,410.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >