

Surveyor: Kelvin

REF:

NS/INC18018771/Klqbn2

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimate/Cost: \_\_\_\_\_

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

To Inspected Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: SKL 8864C

Policy No. 5095600584 04.11.17 - 28.12.18

Claims No. 111/1016123-001

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 Report: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Est. Repairs: ✓ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA' / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SHA 4236K Yr Regn: 16 Jan, 2016

Type: M/Car / M/Cycle / Bus / Van / Lorry / Q1 / Prime Mover /

Truck / Trailer or

Make: Hyundai Ix6 cc 168

Colour: Blue A/C: Insd / Std / NI / NA

Sp. Reading: 401869 T/Radio: Insd / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMHLB41464091390

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Ignored / Jammed / Leaked / Burnt or

Brake: Incident / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/60R16

R: \_\_\_\_\_

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

TOYO / YOKO or

Front

R/Bal. 7 mm

L/Bal. 7 mm

D.O.A. 15/10/18

Rear

R/Bal. 7 mm

L/Bal. 7 mm

D.O.I. 16/10/18

Survey held at

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

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

Date / Time Action / Instruction

SHA 4236K - (CS / CNL) 504350 / H1hg3m2

DUA: 200815 IM

SKL 8864C - x

17/10/18 Claimed 45 \$1000 / 2 Dgs. (Red 62994.77, 75%)

RECEIVED 18 OCT 2018

Date/Time, File Pass to?

1) 18/10 10:54

Date/Time, File Return to?

2) \_\_\_\_\_

Report Format:

Lump Sum / 1.2.1: (\$

: Prel. Report

: Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: \_\_\_\_\_

: Site Insp (\$

: Interview (\$

: Tech. Invs (\$

: Weekend (\$

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

TOTAL

160

**TP Claims against NTUC Income: Follow-Through Survey**

Date: 18/10/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	Tentative repair cost
1	MT/1015863-002	CITYCAB PTE LTD	SHA 9911L	GBF 4310Z	13/10/2018	\$ 3,382.82	\$ 2,500.00
2	MT/1015433-002	COMFORT TRANSPORTATION PTE LTD	SHA 7742X	SLG 4449J	12/10/2018	\$ 3,705.28	\$ 2,200.00
3	MT/1016123-001	COMFORT TRANSPORTATION PTE LTD	SHA 4236K	SKL 8864C	15/10/2018	\$ 3,994.77	\$ 1,000.00
4	MT/1015895-002	COMFORT TRANSPORTATION PTE LTD	SHD 4807Y	SJR 718A	15/10/2018	\$ 2,828.80	\$ 1,450.00
5	MT/1015552-002	COMFORT TRANSPORTATION PTE LTD	SHA 7854G	SDU 818A	11/10/2018	\$ 3,231.40	\$ 1,550.00

Claim received from LKK Auto

eBaoTech

General Claim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.  Date of Accident   
Vehicle No. (For Motor)  Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5095600584		J DRIVE	53322853L	GPC	drive CLASSIC	SKL8864C	SKL8864C	04/11/2017	28/12/2018

## 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 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. 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	16/10/2018 07:22
Date Of Accident	15/10/2018 14:30
Exact Location Of Accident	UPP SERANGOON CENTRAL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA4236K
<b>Insured/Policyholder</b>	
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	I40
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	TAXI

### Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

### Driver

Name of Driver	SEE HAN LIN
NRIC No	S1096440G
Date Of Birth	03/03/1954
Occupation	OUTDOOR
Date Of Driving Pass	16/05/1979
Driving Experience	39 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92324631
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	247 06-177 YISHUN AVENUE 9
Postcode	760247
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?	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

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	SKL8864C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZHUIY YI
NRIC/Passport Number	S8415661B
Contact Number	96339993
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LEFT FRT
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/10/18 at about 1430 hrs while I Veh A exited from the carpark after ensuring the main road was clear for me to move. While I moved, another taxi stopped at the extreme left lane and I too stopped. Veh B also exited from the carpark and collided on the right rear portion of my vehicle.

DECLARATION

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

INFORT TRANSPORTATION PTE LTD  
CO REG. NO. 199303821R

Policyholder's Signature

Driver's Signature

Reporting Centre Personnel's Signature

*R. Moorthy*  
CSO 15/10/18

# **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.

JMPORT TRANSPORTATION PTE LTD  
CO REG NO. 199303821R

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.:

*SR Moorthy* 5/10/18  
CSO

## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE

Date: 16.10.2018

Time: 08:25:57

Page: 1/2

NTUC-45

LKE - Kalvin

IS

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010045  
 ADDRESS : COMFORT TRANSPORTATION PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65508755

JOB NO : 305226480  
 REGN NO : SHA4236K  
 MILEAGE : 0000000000  
 MAKE : HYUNDAI  
 MODEL : I-40  
 DATE OF REGN : 16.06.2016  
 DATE/TIME IN : 15.10.2018 15:55  
 ACCIDENT DATE : 15.10.2018

## JOB / PARTS DESCRIPTION

## QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0103-0579-G	REAR BUMPER	1	553.00	20.00	442.40	—	Referend
0002 04-01-0103-0738-G	REAR BUMPER UNDER COVER	1	228.00	20.00	182.40	—	cut
0003 04-01-0103-0739-G	REAR BUMPER SPONGE	1	103.50	20.00	82.80	X	see
0004 04-01-0103-0740-G	REAR BUMPER REINFORCEMENT	1	428.40	20.00	342.72	X	see
0005 04-01-0103-0852-G	REAR BUMPER REFLECTOR RH	1	32.00	20.00	25.60	—	in
0006 04-01-0103-0783-G	REAR BUMPER SIDE BRKT RH	1	35.60	20.00	28.48	X	see
0007 04-01-0103-0743-G	REAR BUMPER REIN-BRKT RH	10	803.00	20.00	642.40	X	see
0008 02-01-0103-0054-G	EXHAUST MUFFLER RH	1	967.70	20.00	774.16	X	see
0009 02-01-0103-0086-G	EXHAUST CENTRE PIPE	1	730.10	20.00	584.08	X	see
0010 04-01-0103-1150-A	REAR BUMPER MAT	1	50.00	<del>2.00</del>	50.00	—	see
0011 04-01-0101-0111-G	REAR BUMPER CLIPS	10 L	22.00	20.00	17.60	—	see
0012 09-01-9999-0068-A	REVERSE SENSOR	1	135.70	10.00	122.13	—	sketch

SUB-TOTAL : 3,294.77

## JOB NATURE



COMFORTDELGRO ENGINEERING PTE LTD

Date: 16.10.2018

REPAIR ESTIMATE

Time: 08:25:57

Page: 2/2

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010045  
 ADDRESS : COMFORT TRANSPORTATION PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65508755

JOB NO : 305226480  
 REGN NO : SHA4236K  
 MILEAGE : 0000000000  
 MAKE : HYUNDAI  
 MODEL : I-40  
 DATE OF REGN : 16.06.2016  
 DATE/TIME IN : 15.10.2018 15:55  
 ACCIDENT DATE : 15.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0000 L	PANEL BEATING	220.00	200
0001 23-502	SPRAYPAINT ON AFFECTED AREA	220.00	200
0002 17-01	CHECK ALL LIGHTING	40.00	X 17
0003 L	R/I REVERSE SENSOR	120.00	30
0004 L	R/I EXHAUST SYSTEM	100.00	X 17

SUB-TOTAL : 700.00

TOTAL : 3,994.77

MVA NAME & SIGNATURE  
 DATE :

AUTHORISED : YES / NO  
 SURVEYOR NAME & SIGNATURE  
 DATE :

Kalvin LKK  
 16/10/18 1040  
 2 Pgs  
 4/5  
 After Repair p 4/5

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after repair/ painting
- To display damaged parts for survey
- Parts prices are not to be inflated
- Third party survey is not to be conducted
- No illegal modification to vehicle
- Supplier is subject to LKK Auto Consultants approval

Acknowledged by Repairer  
 Signature:  
 Date:

# COMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

## ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Mainline + 65 6383 6280 Facsimile + 65 6280 9755

### Workshops

59 Loyang Drive Singapore 508888

383 Sin Ming Drive Singapore 575717

45 Pandan Road Singapore 609286

320 Ubi Road 3 Singapore 640688

24 Senoko Loop Singapore 758158

7 Sungei Kadut Way Singapore 728791

501 Yishun Industrial Park A Singapore 768732

Date/Time: 16.10.2018 08:10

Page : 1

Team: ARC Repair TP(CLSO)1

## JOB CARD

Sales Order:

JC NO.: 305226480

COMFORT TRANSPORTATION PTE LTD  
7010045  
383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755 (O)

REGN NO.: SHA4236K

MILEAGE

MAKE: HYUNDAI

FUEL

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

MODEL I-40

DATE/TIME IN 15.10.2018 15:55

YR OF MANU 16.06.2016

TARGET DATE

CHASSIS CODE KMHLB41UMGU091390

COMPLETION DATE/TIME:

UNIT CARD NO.

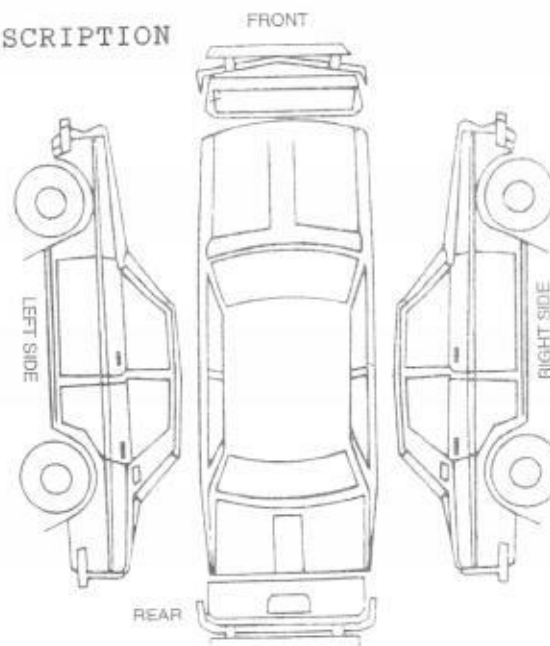
## JOB DESCRIPTION

Accident Date: 15.10.2018

NATURE: 3P 15.10.18

S/NO LABOR CODE

## DESCRIPTION



HECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

No.: SHA4236K

LIMITS

Vehicle No.:

SHA4236K

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305226480  
Date : 17/10/18

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK  
Attn : KALVIN ANG  
Vehicle Reg No. : SHA4236K

Fax :  
Date of Accident : 15-Oct-18

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


1. The repair job shall bill to: NTUC --- SKL8864C
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% \$1,000.00  
**Final Lumpsum Repair cost** \$1,000.00

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 : LIM T S  
Tel : 62148398  
Fax : 65468156

Signature :   
Name : KALVIN  
Date : 17/10/18

### 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		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

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



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18018771/K1qbn2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 19-10-2018	
Code: INC4				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SKL 8864C	Veh. Inspected	SHA 4236K	
Policy No.	5095600584	Coverage (\$)	0.00	
Claim No.	MT/1016123-001	Excess (\$)	0.00	
Assign From		Assign Date	16/10/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	KMHLB41UMGU091390	Colour	BLUE	
Odometer	401869	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/60 R16	HANKOOK	7 mm	
L/H Front Tyre	205/60 R16	HANKOOK	7 mm	
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm	
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	15/10/2018	Inspection Date	16/10/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
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

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



Page No.:1 of 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 4236K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	DEFORMED	553.00	553.00
1	REAR BUMPER UNDER COVER	CUT	228.00	228.00
1	REAR BUMPER SPONGE	SERVICEABLE	103.50	-
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	428.40	-
1	REAR BUMPER REFLECTOR RH	CRACKED	32.00	32.00
1	REAR BUMPER SIDE BRKT RH	SERVICEABLE	35.60	-
10	REAR BUMPER REIN-BRKT RH	SERVICEABLE	803.00	-
1	EXHAUST MUFFLER RH	SERVICEABLE	967.70	-
1	EXHAUST CENTRE PIPE	SERVICEABLE	730.10	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
	LESS 20% DISCOUNT		-780.66	-167.00
			3,122.64	668.00
<b><u>NETT ITEMS</u></b>				
1	REVERSE SENSOR (N)	SHORTED	135.70	135.70
	LESS 10% DISCOUNT		-13.57	-13.57
			122.13	122.13
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR BUMPER MAT (SN)	NECESSARY	50.00	50.00
			50.00	50.00
<b><u>LABOUR</u></b>				
	PANEL BEATING.		220.00	200.00
	SPRAYPAINT ON AFFECTED AREA.		220.00	200.00
	CHECK ALL LIGHTING	NOT NECESSARY	40.00	-
	R/I REVERSE SENSOR.		120.00	30.00
	R/I EXHAUST SYSTEM.	NOT NECESSARY	100.00	-
			700.00	430.00
<b>GRAND TOTAL</b>			<b>3,994.77</b>	<b>1,270.13</b>

Report Ref No. NS/INC18018771/K1qbn2

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,000.00
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Report Ref No. NS/INC18018771/K1qbn2



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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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.