

ASS. REC. BY:

REF:

CS/CTI1802/155 / kvd3/n2

Special Instruction:

Surveyor:
Meunier

Kenneth

ASSIGNMENT (Office)

From (Person): Chong Boon Sen

of CTI

Date/Time: 22/11/18 @ 2:35 pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SGH 2569M

Insured:

SLC 8781T

at Workshop m/s

Wega Engineering

Tel:

64521493

of

176 Sin Ming Drive #04-16

Policy No:

DIRMTPVD1004744

Claim No:

8NM18D05419C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

16/11/18

CA / REV / REP. / REV 24 HRS (up)

After 1pm @ 26/11/18

H.O.D. Endorsement:

Date/Time:

2:55pm @ 22/11/18

Person Contacted:

Mr. Leang

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SGH 2569M - X
	SLC 8781T - X
11/12	61L, 8 260d Cam (Red 318H, 559)

REF: C11

ASSIGNMENT

From: _____ Date: 26/11/18

Estimated Cost: _____

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

To Inspect Vehicle No: SGH 2569M

at Workshop n/s: Wega Engineering

of: 176 Sin Ming Drive # 04-16

Insured: _____

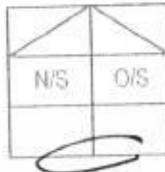
Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: after/pm



(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 06 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS ^{1up}

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGH 2569M Yr Regn: 06 06

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

Truck / Trailer or _____

Make: Honda City C.G. 1494

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

Sp. Reading: 179153 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR1H4086906P-010134

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt or

Brake: ☒ In order / Jammed / Leaked / Burnt or

Modi: Nil / ☒ R/Rim / STD A/Rim or

Tyre Size: F: Falken 175/65R14

R: Nexen

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

TOYO / YOKO or _____

Front	Rear
R/Bal. 4 mm	R/Bal. 5 mm
L/Bal. 6 mm	L/Bal. 5 mm
D.O.A. 16/11/18	D.O.I. 26/11/18
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
27/11	File 1951 to Catherine Davis

RECEIVED 11 DEC 2018

Date/Time, File Pass to? ☐ : Prel. Report1) ☐ : Final Report

Date/Time, File Return to?

2) 11/12 - typist

Report Format: merimen

Lump Sum / I.B.I: (\$ 26002)

Days Of Repair: 6

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

) 3 + RS, SI

) Photos

) Others

TOTAL

220

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	22 Nov 2018		22 Nov 2018 14:35 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	LIN WENWEI, ID: S8114539C		
Main Claimant:	LIM POH HENG, ID: S1588249B		
Vehicle Reg. No.:	SGH2569M	Date of Loss:	16/11/2018 07:00 - :59
Claim Type:	TP / SNM18D05419C02	Policy/Cover Note No.:	DMPCSN3117751701 (Comprehensive)
Vehicle Reg. No. (Insured):	SLC8781T	Policy No. (Claimant):	D18MTPV01004744
		Excess:	S\$0.00
Repairer:	Wega Engineering Pte Ltd (HQ) BLK 176 Sin Ming Drive #04-16, Sin Ming AutoCare, 57521 Sin Ming - Tel: 6452 1493		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Claimant's Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 03/12/2018]		
Driver/Custodian (Insured):	LIN WENWEI (37 / Male), NRIC: S8114539C		
Adj Asg. Remarks:	EST \$5254, ASSIGN KELVIN ANG AS SJE.		

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.									

21th NOV 2018

CHINA TAIPING INSURANCE

3 Anson Road, #16-00 Springleaf Tower Singapore 079909

Attention : Motor Vehicle Claim Department

Dear Sir / Mdm,

THIRD PARTY

We are currently assisting this Vehicle with the SGH2569M
to make accident claims
against SLC8781T which eventuated on 16/11/2018.
This vehicle is insured by China Taiping Insurance

We seek your co-operation to get the vehicle surveyed by your
Accereditd surveyors.

Once arrangement is being made, please do notify us to let us have the
Ample time to get things arranged for the surveyor.

Your Faithfully,

Wega Engineering Pte Ltd



Leong Chee Kwong
Claims Advisor
Mobile No: 84917768

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8249B
Vehicle Details	
Vehicle No.:	SGH2569M
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Dec 2018
Vehicle Make:	HONDA
Vehicle Model:	CITY CVT
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	L15A24802046
Chassis No.:	MRHGD86906P010134
Maximum Power Output:	65.0 kW (87 bhp)
Open Market Value:	\$15,192.00
Original Registration Date:	03 Jun 2006
First Registration Date:	03 Jun 2006
Transfer Count:	1
Actual ARF Paid:	\$16,712.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$22,789.00
COE Rebate Amount:	\$11,259.00
Total Rebate Amount:	\$11,259.00
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 11 Dec 2018

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 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	16/11/2018 14:53
Date Of Accident	16/11/2018 07:45
Exact Location Of Accident	BUANGKOK DRIVE TURN LEFT TO BUANGKOK GREEN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH2569M
Insured/Policyholder	
Name Of Registered Owner	LIM POH HENG
NRIC No	S1588249B
Email Address	POHHENGLIM@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-81805548
Alternative Phone No	OFFICE-81805548

Vehicle Particulars

Manufacturer	HONDA
Model	CITY CVT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MTPV01004744
Cover Note Number	

Driver

Name of Driver	LIM POH HENG
NRIC No	S1588249B
Date Of Birth	28/04/1963
Occupation	INDOOR
Date Of Driving Pass	27/02/1996
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81805548
Fax Number	
Contact Number	OFFICE-81805548
Email Address	POHHENGLIM@YAHOO.COM.SG

Gender	MALE
Mobile Number	(LOCAL) +65-81805548
Fax Number	
Contact Number	OFFICE-81805548
E-Mail Address	POHHENGLIM@YAHOO.COM.SG
Address	NIL
Postcode	
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?	YES
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

I (SGH2569M) was stationary at the slip road from Buangkok drive turning left to Buangkok green, giving way to oncoming traffic from the right, when suddenly a car (SLC8781T) hit me from the back. Slight injuries to my leg.

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	SLC8781T
Vehicle Make/Model/Colour	VOLKSWAGEN / JETTA / DARK GRAY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM WENWEI

11/27/2018

E-FILE

NRIC/Passport Number	S8114539C
Contact Number	93830715
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	LIM POH HENG
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SGH2569M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

1. Please report correctly the details of the accident to enable us to:
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or omission will constitute an offence under the Insurance Act.
4. Information provided must be as truthful and accurate as possible.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Insurance Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will be made available upon application by interested parties.
7. By the independent of this report to the insurers, you hereby consent to the archiving of this report at the centre and to other uses being made available to the insurers.
8. Consent under the Personal Data Protection Act (PDPA)
 - (a) I understand, acknowledge, agree and consent that:
 - (i) My insurer, my workshop and the General Insurance Association of Singapore (GIA) may be permitted to collect, use, disclose, 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 insurers 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:
 - (ii) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims.
 - (iii) investigating the accident and/or my claims.
 - (iv) carrying out and/or dealing with my instructions or responding to any enquiries by me.
 - (v) 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
 - (vi) complying with applicable law in administering, processing, handling and/or dealing with my claims.
 - (b) all insurers who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms may be 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 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.

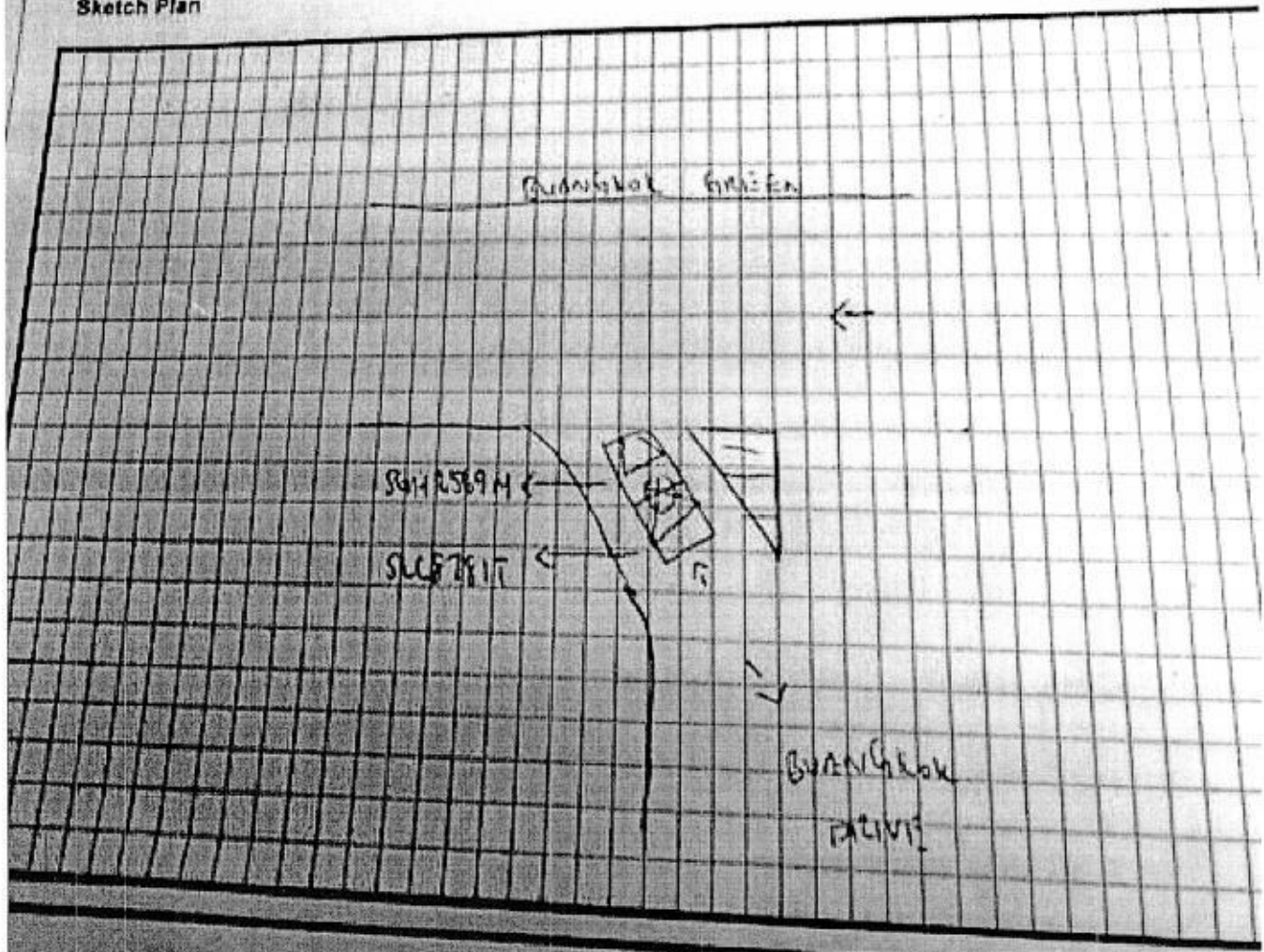
VERIFIED BY NIAH MARS
REPORTING OFFICER
MOHAMMAD SULHANDI BI
MOHD AFFANDI

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

I (SGH2569M) was stationary at the slip road from Buangkok drive turning left to Buangkok green, giving way to oncoming traffic from the right, when suddenly a car (SLC8781T) hit me from the back. Slight injuries to my leg.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MOHAMMAD SULHANDI BIN MOH AFFANDI

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

16 November 2018 at 2:28 PM

Date/Time:

16 November 2018 at 2:28 PM

Blk 176 Sin Ming Drive #04-16 Sin Ming Autocare Singapore 575721

Tel: 6452 1493

Fax: 6452 9153

GST Reg: 19-9900741 / Z

Claim Ref:

CHINA TAIPING INSURANCE

3 Anson Road, #16-00 Springleaf Tower Singapore 079909

Date : 21/11/2018

Vehicle No : SGH2569M
Chassis No : MRHGD86906P010134
Make/Model : HONDA CITY
Year :

Not Notarise
11 Sep @ 2600
Repair After Paint

6 days

S/N	Qty	Description	Unit Price	Amount
1	1pc	REAR BOOT LID	\$ 438.00	\$ 438.00
2	1pc	REAR BOOT LID HINGLE LH	\$ 52.00	\$ 52.00
3	1pc	REAR BOOT LID HINGLE RH	\$ 52.00	\$ 52.00
4	1pc	REAR BOOT LID LOCK	\$ 77.00	\$ 77.00
5	1pc	REAR BOOT WEATHER SHIP	\$ 105.00	\$ 105.00
6	1pc	REAR TAIL LAMP LH	\$ 331.00	\$ 331.00
7	1pc	REAR TAIL LAMP RH	\$ 331.00	\$ 331.00
8	1pc	REAR BOOT LID LAMP LH	\$ 233.00	\$ 233.00
9	1pc	REAR BOOT LID LAMP RH	\$ 233.00	\$ 233.00
10	1pc	REAR BUMPER	\$ 530.00	\$ 530.00
11	1pc	REAR BUMPER RETANNER RH	\$ 18.00	\$ 18.00
12	1pc	REAR END PANAL	\$ 503.00	\$ 503.00
13	1pc	REAR EMBLEM " CITY "	\$ 29.00	\$ 29.00
14	1pc	REAR EMBLEM " HONDA "	\$ 27.00	\$ 27.00
15	1pc	REAR EMBLEM " IDSI "	\$ 25.00	\$ 25.00
16	1pc	REAR REVERSE SENSOR	\$ 180.00	\$ 180.00
17	1pc	REAR END INNER GARNISH	\$ 150.00	\$ 150.00

Bu
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Sn
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Sn
Bu
DIT
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R
R
R
Sn
MSO.1

✓
X
X
✓
50% in 50-50
X
X
X
X
✓
✓
✓
✓
✓
X
✓

20%

Labour Charges

1 To check wiring and system function	\$ 120.00
2 To inspect rear mechanims & water test leaking	\$ 150.00
3 To knocking welding rear boot lid , rear bumper , rear end panal & rear fender RH	\$ 1,200.00
4 To respray rear boot lid , rear bumper bumper and rear end panal & rear fender RH	\$ 1,000.00

201
501
9001
8001

Grand Total

\$ 5,784.00

Wega Engineering Pte Ltd

Authorised Signature
Leong Chee Kwong
Mobile No: 84917768

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/CTI18021155/KVD3N2

Date: 17/12/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN3117751701
Claimant Vehicle No :	SGH2569M	Insured Vehicle No :	SLC8781T
Date of Loss:	16/11/2018	Nature of Claim:	TP
		Claim No:	SNM18D05419C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SGH2569M	Engine No:	L15A24802046
Make & Model:	HONDA CITY, 1.5 CVT (A)	Chassis No:	MRHGD86906P010134
Reg. Date:	03/06/2006 (Man. Year: 2006)	Odometer:	179153 km
Colour:	Metallic Silver		
Engine Capacity:	1497 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:	175/65R14	Rear Tyre Size:	175/65R14
Front Left Side:	Falken 4 mm	Rear Left Side:	Nexen 5 mm
Front Right Side:	Falken 4 mm	Rear Right Side:	Nexen 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	3,314.00	1,490.10	1,823.90	55.04
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,470.00	1,770.00	700.00	28.34
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	5,784.00	3,260.10	2,523.90	43.64
Approved Total (Overridden) (\$\$)		2,600.00		
(\$\$)	5,784.00	2,600.00	3,184.00	55.05
+ GST 7.00/7.00% (\$\$)	404.88	182.00	222.88	55.05
Nett Amount (\$\$)	6,188.88	2,782.00	3,406.88	55.05

INSPECTION

Date of Assignment:	22/11/2018	
Date Inspected:	26/11/2018 Inspected At:	Wega Engineering Pte Ltd (HQ) BLK 176 Sin Ming Drive #04-16, Sin Ming AutoCare Singapore 57521
Estimated Period of Repair:	6.0 days	

Adjuster: KENNETH KONG

Manager: VERON CHEN

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: 17 Dec 2018)
Parts:	143	HONDA CITY 1.5 CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SGH2569M)	
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 BOOT LID	Buckled	438.00 F	*438.00 FL
2	1		*REAR BOOT LID HINGLE RH	Repair	52.00 F	*- FL
3	1		*REAR BOOT LID HINGLE LH	Repair	52.00 F	*- FL
4	1		*REAR BOOT LID LOCK	Dented	77.00 F	*77.00 FL
5	1		*REAR TAIL LAMP LH	Serviceable	331.00 F	*- FL
6	1		*REAR TAILLAMP RH	Serviceable	331.00 F	*- FL
7	1		*REAR BOOT LID LAMP LH	Serviceable	233.00 F	*- FL
8	1		*REAR BOOTLID LAMP RH	Serviceable	233.00 F	*- FL
9	1		*REAR BUMPER	Buckled	530.00 F	*530.00 FL
10	1		*REAR BUMPER RETAINNER RH	Distorted	18.00 F	*18.00 FL
11	1		*REAR END PANEL	Bent	503.00 F	*503.00 FL
12	1		*REAR EMBLEM CITY	Necessary	29.00 F	*29.00 FL
13	1		*REAR EMBLEM HONDA	Necessary	27.00 F	*27.00 FL
14	1		*REAR EMBLEM IDSI	Necessary	25.00 F	*25.00 FL
15	1		*REAR REVERSE SENSOR	Serviceable	180.00 F	*- FL
16	1		*REAR END INNER GARNISH	Mtg Distorted	150.00 F	*150.00 FL
17	1		*REAR BOOT WEATHERSTRIP (50%)	Dented/Distorted	105.00 FS	*52.50 FS

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

Sub Total (\$\$)	3,314.00	1,849.50
- List Item Discount on L Items 0.00/20.00% (\$\$)	0.00	359.40
Total Parts (\$\$)	3,314.00	1,490.10

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
<u>Labour Items</u>				
1	TO CHECK WIRING AND SYSTEM FUNCTION	New	120.00	20.00
2	TO INSPECT REAR MECHANISMS & WATER TEST LEAKING	New	150.00	50.00
3	TO KNOCKING WELDING REAR BOOT LID,REAR BUMPER,REAR END PANEL & REAR FENDER RH	New	1,200.00	900.00
4	TO RESPRAY REAR BOOT LID,REAR BUMPER,BUMPER AND REAR END PANEL & REAR FENDER RH	New	1,000.00	800.00
Gross Labour Cost (S\$)			2,470.00	1,770.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >