

22/03/2002

S.S. REC. BY:

REF:

CS3 / ALH18023086 / Ncbcr

Special Instruction:

Surveyor:

Mullin

ASSIGNMENT (Office)

From (Person):

Chin Lee Ying

of

ALH

Date/Time:

26.12.2018 11:45am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GZ 8579A

Insured:

G8F 2858Z

at Workshop m/s

Em-1 Auto

Tel:

9666 6556.

of

Blk 8 Sin Ming Ind Est #01-68

Policy No:

2100479445

Claim No:

467343462886

Sum Insured:

Excess:

Make of Veh:

D.O.A.

21.12.2018

(Client's Record)

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

H.O.D. Endorsement:

Date/Time:

26.12.2018 1:58pm

Person Contacted:

Mr. Chia

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

GZ 8579A - X

G8F 2858Z - ALH / ALH18023086 / 13

DA: 21.12.2018

Demantle: 27/12/2018

PRS
Survivor N/AZ

REF: All

ASSIGNMENT

From: Date: 26/12/2018

Estimated Cost:

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

To inspect Vehicle No: GZ 8579A

at Workshop m/s Em-1 Auto

of 8sin ming Ind Est #01-68

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:

IDAC Accident Rpt: Consistent?: Yes or No

GIA / PR Seen: Consistent?: Yes or No

Est. Repairs: 6 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: GZ 8579A Yr Regn: 28 NOV 2003

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

Truck / Trailer or

Make: TOYOTA HIACE C.C. 2,985

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

Sp. Reading: 139,152 T/Radio: Insured / Std / NI / NA

Eng/No:

C/N: L11172-1036499

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: 195 / R156

R: 11

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

TOYO / YOKO or

Front

R/Bal. 5 mm (MIC) R/Bal. 5 mm (DUN)

L/Bal. 5 mm (BS) L/Bal. 5 mm (TOYO)

D.O.A. 21/12/18 D.O.I. 26/12/18

Survey held at EM1

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
O/E Exp 21/9/2021

AIG L/s

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 6

Resurvey No. of Trip: 1

Survey Fee: 180

Transportation:

) S + RS SI

) Photos

) Others

10

TOTAL

190

Report Format: DAR

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

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

- PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURE...

From: Chin, Lee-Ying
To: assignments, admin-a@lkkauto.com
Cc: Fong, Andy-SY
Sent: 26/12/2018 11:45:42 AM
Attachments:  NEW PRI - GBF2858Z AND GZ8579A.PDF

Hi LKK,

Kindly assist to survey, vehicle in workshop.

Thanks.

Best Regards

Lee Ying, Chin

AIG

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1947

Lee-Ying.Chin@aig.com | www.aig.sg

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by American International Group, Inc. or its subsidiaries or affiliates either jointly or severally, for any loss or damage arising in any way from its use.

EM-1 AUTO PTE LTD

BLK 8 SIN MING INDUSTRIAL ESTATE SECTOR C

#01-68, SINGAPORE 575643

Contact Number: 6452 3298 (O) 9666 6556 (H/P) 6457 5776 (F)

Email Address: em1autopteltd@gmail.com

COMPANY / GST REG. NO: 201316380R

Your Vehicle: GBF 2858Z (3rd Party Vehicle)

Our Vehicle: G28579A

Date: 21/12/18

M/s AIG Asia Pacific Insurance Pte Ltd

AIG Building

78 Shenton Way

#07-16

Singapore 079120

By fax 6415 3727 only

Dear Sir/Madam,

ACCIDENT INVOLVING G28579A & GBF 2858Z ON 21/12/18

We refer to the above matter.

I hereby give you 2 days' notice to conduct a pre-repair inspection of vehicle
G28579A at my premises.

Yours faithfully

Cwe

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	24/12/2018 12:54
Date Of Accident	21/12/2018 14:40
Exact Location Of Accident	CTE TOWARDS AYE BEFORE BALESTIER ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ8579A
Insured/Policyholder	
Name Of Registered Owner	HANDYMAN
Co Reg No	52919624K
Email Address	HANDYMAN0023@YAHOO.COM
Mobile Phone No	
Alternative Phone No	OFFICE-91002300

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE

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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN1659271802
Cover Note Number	

Driver

Name of Driver	QUAH KAH SAN
NRIC No	S7310110G
Date Of Birth	20/03/1973
Occupation	OUTDOOR
Date Of Driving Pass	10/06/1993
Driving Experience	25 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91002300
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 115 BUKIT PURMEI ROAD #07-260
Postcode	090115
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	4
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

PLEASE REFER TO SKETCH PLAN.

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	GBF2858Z
Vehicle Make/Model/Colour	TOYOTA DYNA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GT547B
-----------------------------	--------

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

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKT84Y
Vehicle Make/Model/Colour	MERCEDES BENZ
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 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 willful 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.


handyman
Blk 146 Jln Bukit Merah
#05-1066, Singapore 160146
Hp: 91002300
email: handyman0023@yahoo.com
Reg No: 52919624K
24 DEC 2018
12-5848


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

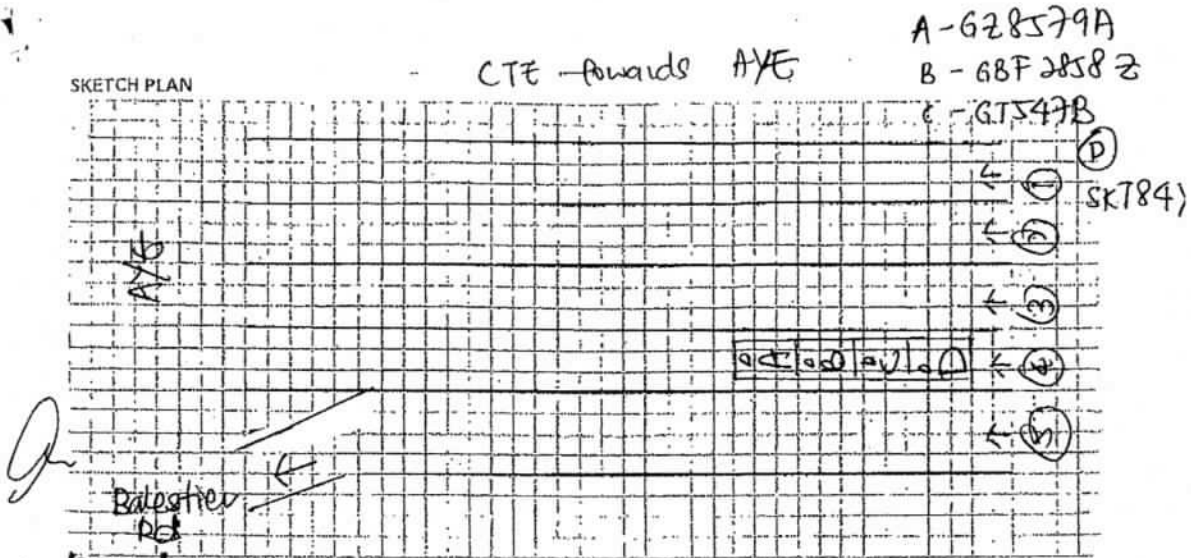
24 DEC 2018

12-5848


Reporting Centre Personnel's Signature
Name: Poh Kwee Choo
NRIC/FIN No.: S6840583A

Sketch Plan Pg. 2

SKETCH PLAN



DECLARATION OF CIRCUMSTANCES OF THE ACCIDENT

Handyman
Blk 146, Jln Euli Merah
#05-1088, Singapore 160148
Hp: 61002300
email: handyman023@yahoo.com
Reg No: 52919624K

I was travelling along CTE towards AYE before Balestier Rd exit on lane 4. Due to the front vehicle stopped, I follow suit (stationary). Suddenly vehicle B hit onto my vehicle rear portion. When I step down from my vehicle I realised is total 4 vehicles involved in this accident.

Handyman
Blk 146 Jln Euli Merah
#05-1088, Singapore 160148
Hp: 61002300
email: handyman023@yahoo.com
Reg No: 52919624K

Note I felt my neck and back pain

DECLARATION

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

Handyman
Blk 146 Jln Euli Merah
#05-1088, Singapore 160148
Hp: 61002300
email: handyman023@yahoo.com
Reg No: 52919624K
24 DEC 2018

Driver's Signature
(If driver is not the policyholder)
Date & Time: 24 DEC 2018

Reporting Centre Personnel's Signature
Name: Poh Kwee Choo
NRIC/FIN No.: S6840583A

(01) Bent (02) Dented (03) Distorted (04) Cracked (05) Cut (06) Scratched
(07) Deformed (08) Shifted (09) Buckled (10) Broken (11) Necessary
(12) Missing (13) Torn (14) Unconfirmed (15) Not Working

(1) Replace (✓) (2) Repair (X) (3) Check ()
 (4) Not Consistent (NC)

Vehicle No:

Tailgate tim board

[illegible]

31/12/2018

...CLAIM SUBFOLDER...(Pending for Survey Report)

PRI

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	26 Dec 2018 Edit Reg		26 Dec 2018 00:00 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [Created by adjuster]

Insured:	JOAQUIM FLORIST & GIFTS PTE LTD, Co. Reg. No.: 199303010R		
Main Claimant:	HANDYMAN, Co. Reg. No.: 52919624K		
Vehicle Reg. No.:	GZ8579A	Date of Loss:	21/12/2018 14:00 - :59 [180 Months and 23 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 4673434628SG	Policy/Cover Note No.:	2100479445 (Comprehensive)
Vehicle Reg. No. (Insured):	GBF2858Z	Policy No. (Claimant):	
		Excess:	
Repairer:	Em-1 Auto Pte Ltd (HQ) Blk 8 Sin Ming Industrial Estate Sector C, #01-68, 575643 Sin Ming - Tel: 64523298		
Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (Express) - Tel: 65-6419-3000 ... [Handled by Syed-Yusoff, Saliha] Saliha.Syed-Yusoff@aig.com		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Muhammad Nazril Bin Abdullah] ... [Final Rpt due 08/01/2019]		

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

- AIG_SG (28/12/2018): TP GIA REPORT


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.									






















Claim Documents

*GZ8579A (4673434628SG)
[GBF2858Z]
TP
HANDYMAN
Dec 21 2018 2:00PM
[JOAQUIM FLORIST & GIFTS PTE LTD]
Em-1 Auto Pte Ltd

Upload Documents		Upload Photos	Compose New Letter	Upload Video	Upload Audio	View View in Browser <input type="button" value="v"/>
Assessment Reports <div style="float: right;"> 1 per page <input type="button" value="v"/> <input checked="" type="checkbox"/> </div>						
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)			Thumbnail	Print
1	28/12/18 11:50	Accident Statement <small>From: SC - Reg. No: GBF2858Z, Claimant: JOAQUIM FLORIST & GIFTS PTE LTD</small>			Load HTM	<input type="checkbox"/>
Photos/Images <div style="float: right;"> 3 per page <input type="button" value="v"/> <input checked="" type="checkbox"/> </div>						
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)			Thumbnail	Print
1	28/12/18 10:29	General View			Load JPG	<input checked="" type="checkbox"/>
2	28/12/18 10:29	General View			Load JPG	<input checked="" type="checkbox"/>
3	28/12/18 10:29	General View			Load JPG	<input checked="" type="checkbox"/>
4	28/12/18 10:29	General View			Load JPG	<input checked="" type="checkbox"/>
5	28/12/18 10:29	General View			Load JPG	<input checked="" type="checkbox"/>
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32	28/12/18 10:30	General View			Load JPG	<input checked="" type="checkbox"/>
33	28/12/18 10:30	General View			Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
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36	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
37	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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63	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
64	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
65	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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67	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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71	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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73	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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78	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
79	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
80	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
81	31/12/18 13:05	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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Assessment Reports			1 per page	<input checked="" type="checkbox"/>
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Documents Checklist

DOCUMENTS CHECKLIST Reset Save Print
There are no document checklists configured.
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div>
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

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: CS3/AIG18023086/NCBE2

Date: 02/01/2019

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100479445
Claimant Vehicle No : GZ8579A **Insured Vehicle No :** GBF2858Z
 Date of Loss: 21/12/2018 Nature of Claim: TP Claim No: 4673434628SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **GZ8579A**
 Make & Model: TOYOTA HIACE, 3.0 (A) Engine No: 5L5391356
 Reg. Date: 28/11/2003 (Man. Year: 2003) Chassis No: LH1721036499
 Colour: Green Odometer: 139152 km
 Engine Capacity: 2985 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: Yes

CONDITION OF TYRES

Front Tyre Size: 195 R15C Rear Tyre Size: 195 R15C
 Front Left Side: Bridgestone 5 mm Rear Left Side: Toyo 5 mm
 Front Right Side: Michelin 5 mm Rear Right Side: Dunlop 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 26/12/2018
 Date Inspected: 26/12/2018 Inspected At: Em-1 Auto Pte Ltd (HQ)
 Blk 8 Sin Ming Industrial Estate Sector C,
 #01-68
 Singapore 575643
 Estimated Period of Repair: 6.0 days

Adjuster: Muhammad Nazril Bin Abdullah

Manager: CELINE FONG

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

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR NUMBER PLATE	Distorted	0.00 F	*- F
2	2		*REAR NUMBER PLATE LAMP	Cracked	0.00 F	*- F
3	1		*REAR BUMPER	Dented	0.00 F	*- F
4	1		*REAR BUMPER STEP PANEL	Distorted	0.00 F	*- F
5	1		*REAR BUMPER STEP GARNISH	Distorted	0.00 F	*- F
6	1		*REAR BUMPER CLIPS	Necessary	0.00 F	*- F
7	2		*REAR BUMPER BRACKET	Dented	0.00 F	*- F
8	2		*REAR BUMPER SIDE RETAINER	Distorted	0.00 F	*- F
9	1		*REAR BUMPER REINFORCEMENT	Bent	0.00 F	*- F
10	1		*REAR END PANEL	Dented	0.00 F	*- F
11	1		*REAR END PANEL TOP GARNISH	Bent	0.00 F	*- F
12	1		*REAR LH TAILLAMP	Cracked	0.00 F	*- F
13	1		*REAR RH TAILLAMP	Cracked	0.00 F	*- F
14	1		*TAILGATE	Dented	0.00 F	*- F
15	2		*TAILGATE EMBLEM	Necessary	0.00 F	*- F
16	1		*TAILGATE GARNISH	Broken	0.00 F	*- F
17	3		*TAILGATE STICKER	Necessary	0.00 F	*- F
18	1		*TAILGATE LOCK STICKER	Bent	0.00 F	*- F
19	1		*TAILGATE WIPER ARM	* Check	0.00 F	*- F
20	1		*TAILGATE WIPER MOTOR	* Check	0.00 F	*- F
21	1		*TAILGATE GLASS RUBBER	Necessary	0.00 F	*- F
22	1		*TAILGATE LOCK	Bent	0.00 F	*- F
23	1		*TAILGATE RUBBER	Bent	0.00 F	*- F
24	1		*TAILGATE TRIM BOARD	Cracked	0.00 F	*- F
25	1		*SPARE TYRE BRACKET	Bent	0.00 F	*- F
26	1		*SPARE TYRE LOCK SCREW	Bent	0.00 F	*- F
27	1		*REAR EXHAUST PIPE	Bent	0.00 F	*- F
28	2		*REAR EXHAUST MOUNTING	Torn	0.00 F	*- F
29	1		*FUEL TANK	Dented	0.00 F	*- F
30	1		*FUEL TANK BRACKET	Bent	0.00 F	*- F
31	1		*REAR VIEW MIRROR BRACKET	Bent	0.00 F	*- F
32	1		*REAR VIEW MIRROR	* Check	0.00 F	*- F
Total Parts (\$\$)					0.00	0.00

F=Franchise part.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >