

ASS. REC. BY:

REF: CS/MSG18023120/ Ugd3/02

Special Instruction:

Survivor:  
Mentmen

Moray

ASSIGNMENT (Office)

From (Person):

Monica chung

of

MS16

Date/Time:

26/12/18 @ 4:19pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

G2 4806X

Insured:

8KD 2588G

at Workshop m/s

Zoom Autowerks

Tel:

9450 7920

of

15 Kalki Bukit Rd 4 # 01-53

Policy No:

A80437844QMX

Claim No:

579958

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

24/12/2018

27/12/18

H.O.D. Endorsement:

CA / REV / REP. / REV 24 HRS

(up)

Date/Time:

5:19pm 26/12/18

Person Contacted:

Elin

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓) Estimate

G2 4806X - NA/INC18023053/13

DOA: 24/12/18

8KD2588G - NA/INC18023053/13

DOA: 24/12/18

28/12/18 @

11:40am Informed Monica chung, we are pending estimate from repairer.

04/1/19 @

12:10pm revised to Monica Chung via Mentmen.

REF: MSIG

## ASSIGNMENT

From: Date: 27/12/18

Estimated Cost:

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

To inspect Vehicle No: GZ 4806X  
at Workshop m/s: Zoom Autowerks  
of: 15 kaki Bukit Rd 4 # 01-53

Insured

Policy No.

Claims No.

Sum Insured:

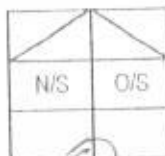
Excess:

(Client's Record)

Make of Veh:

Eling 9450 7920

(Policy Condition)

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

Bal. or Market Value:

17500

IDAC Accident Rpt:

Consistent? Yes or No

GIA / PR Seen:

Consistent? Yes or No

Est. Repairs:

7

days

Res.: Yes or No

Lump Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS<sup>up</sup>

6103E

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No: GZ 4806X Yt Regn: 5-106  
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or Car /

Make:

Ford connect

C.C. 175-3

Colour:

s. blue

A/C

Insured / Std / NI / NA

Sp. Reading:

93579

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WFOTXX-TTP T 6L77278

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:

195/65R15

R:

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

TOYO / YOKO or

74+adere

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

24/12/18

D.O.I.

27/12/18

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

LTA 10689

2 yrs. Veh. ref 6811

4/1/19

confirmed L/S @ 6800 with Eling. (Ref to 10710.32, 611/-)  
MV-81750 (ASH) LTA - 10689; MS 6811

RECEIVED 09 JAN 2019

*[Signature]*  
4/1/2019

Date/Time, File Pass to?



Preli. Report

11/01/19 turnip



Final Report

Date/Time, File Return to?

3)

Days Of Repair:

7

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Survey Fee:

Transportation

) \$ + RS. \$1

) Photos

) Others

TOTAL

Report Format:

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

net-TP  
6800

200  
10

210

Note: This document has not been finalised.

# 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: Monica Chung Pei Zhen

Date: 04 Jan 2019

## Preliminary Advice

Insured Vehicle No	: SKD2588G	Accident Date	: 24/12/2018
TP Vehicle No	: GZ4806X	Assignment Date	: 26/12/2018
Make	: FORD FIESTA	Est. Duration of Repair	: 7
Date of Inspection	: 27/12/2018		
Inspection At	: ZOOM AUTOWERKS		

### 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\$	17,566.32
Revised Amount	:S\$	8,526.32
Check Items (Estimated)	:S\$	0.00
Total	:S\$	8,526.32
Lump Sum Repair	:S\$	6,800.00

### **Total Loss Consideration**

New for Old Value	:S\$	
Pre-Accident Value	:S\$	17,500.00
COE / PARF Rebate	:S\$	10,689.00
Salvage Value	:S\$	
Margin for Repair	:S\$	6,811.00

### Remarks

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

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	24 Dec 2018		26 Dec 2018 16:19 <a href="#">Edit Adj Rpt</a>				<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
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#### CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	DU XILIANG, ID: S8462598A		
Main Claimant:	VITAL HEALTHCARE PTE LTD, Co. Reg. No.: 201026103E		
Vehicle Reg. No.:	GZ4806X	Date of Loss:	24/12/2018 13:00 - :59 [151 Months and 19 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 579958	Policy/Cover Note No.:	A80437844QMX (Comprehensive) Coverage: 22/07/2017 - 19/08/2019
Vehicle Reg. No. (Insured):	SKD2588G	Policy No. (Claimant):	
		Excess:	
Repairer:	Zoom Autowerks Pte Ltd (HQ) 15 Kaki Bukit Road 4, #01-53, 417808 Kaki Bukit - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Monica Chung Pei Zhen - 6594 2552]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Imm.Advice due 27/12/2018]		
Driver/Custodian (Insured):	WEN HEPING (), NRIC: G6510928Q, Tel: +6585900886		
Adj Asg. Remarks:	SJE AGREE LKK - Marcus Chua. LIAB 100%. Pls contact Elin Chai @ @ 9450 7920		

#### 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.									

**Shiau Chan (LKKAuto)**

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**From:** Do-Not-Reply <do-not-reply@merimen.com>  
**Sent:** Friday, 28 December 2018 11:40 AM  
**To:** do-not-reply@merimen.com  
**Cc:** SUR  
**Subject:** VEHICLE GZ 4806X (YOUR REF: 579958)

This mail is associated with :

**\*GZ4806X (579958)**

**[SKD2588G]**

TP

VITAL HEALTHCARE PTE LTD

Dec 24 2018 1:00PM

[DU XILIANG]

Zoom Autowerks Pte Ltd

Dear Monica,

Please be informed that we have inspected the vehicle GZ 4806X on 27/12/2018.

We are pending estimate from repairer.

Thanks & Regards,

Shiau Chan (Ms)  
LKK Auto Consultants Pte Ltd  
Tel: 6256 3561

This is an auto-generated email. Do not reply to this email.

Sent by : SHIAU CHAN (LKK Auto Consultants Pte Ltd)



This email has been checked for viruses by AVG antivirus software.  
[www.avg.com](http://www.avg.com)

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:	Company
Owner ID:	6103E

**Vehicle Details**

Vehicle No.:	GZ4806X
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Dec 2018
Vehicle Make:	FORD
Vehicle Model:	CONNECTLWB90
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	6L77278
Chassis No.:	WF0TXXTTPT6L77278
Maximum Power Output:	-
Open Market Value:	\$19,621.00
Original Registration Date:	05 May 2006
First Registration Date:	05 May 2006
Transfer Count:	1
Actual ARF Paid:	\$982.00

**Intended PARF Rebate Details**

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

**Intended COE Rebate Details**

COE Expiry Date:	04 May 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$22,721.00
COE Rebate Amount:	\$10,689.00
<b>Total Rebate Amount:</b>	<b>\$10,689.00</b>

**Message**

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 27 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	26/12/2018 09:38
Date Of Accident	24/12/2018 12:15
Exact Location Of Accident	CTE(SLE)AFT JLN BAHAGIA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ4806X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	VITAL HEALTHCARE PTE LTD
Co Reg No	201026103E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-93617898

### Vehicle Particulars

Manufacturer	FORD
Model	CONNECT LWB90
Exact Purpose for which vehicle was being used at time of accident	WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5049047015-07
Cover Note Number	

### Driver

Name of Driver	LUO LI MIN
NRIC No	S2635639C
Date Of Birth	17/06/1960
Occupation	OUTDOOR
Date Of Driving Pass	26/05/1999
Driving Experience	19 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93617898
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 727 ANG MO KIO AVE 6
	#01-4260
Postcode	560727
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	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	5
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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

PLS REFER TO THE ATTACHED STATEMENT.

#### Attachment(s)

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



## Accident 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 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.
  - (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:

# Individual Statement

## SKETCH PLAN

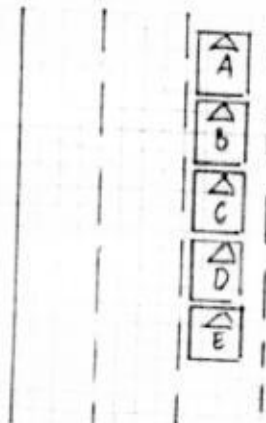
Vehicle A: 4Z 4806X

Vehicle B: SD 2588G

Vehicle C: SK 0269B

Vehicle D: SL 2597J

Vehicle E: SLH 2412Y



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I, vehicle A, 4Z 4806X, was travelling straight along the stated venue. Front vehicle stopped and I stopped as well. About 1-2 seconds later, I felt an impact on my vehicle's rear portion. I then realised I was involved in a chain collision of 5 vehicles.

## 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:



# ZOOM AUTOWERKS PTE LTD

130 Bedok Reservoir Road  
#08-1339 Singapore 470130  
Tel: 9450 7920  
\* zoomautowerks@gmail.com

27 DECEMBER 2018

REG NO.: GZ 4806 X  
MAKE/MODEL: FORD CONNECT

## ESTIMATED REPAIR COST FOR THE VEHICLE MENTIONED ABOVE

QTY	DESCRIPTION	AMT(\$)
	<u>LIST ITEMS</u>	
1	Rear door - RH 1450	\$ 1,685.00
1	Rear door glass inner seal - RH	\$ 115.00 X
2	Rear door hinges - RH	\$ 170.00 X
1	Rear door inner board - RH	\$ 460.00 X
1	Rear door lower lock - RH	\$ 145.00
1	Rear door outer handle - RH	\$ 85.00 X
1	Rear door rubber - RH	\$ 165.00 X
1	Rear door checker - RH	\$ 95.00 X
1	Rear door - LH 1480	\$ 1,685.00
1	Rear door glass inner seal - LH	\$ 115.00 X
2	Rear door hinges - LH	\$ 170.00 X
1	Rear door inner board - LH	\$ 385.00 X
1	Rear door centre lock - LH	\$ 245.00 X
1	Rear door lower lock - LH	\$ 145.00
1	Rear door rubber - LH	\$ 189.80
1	Rear door "TRANSIT" emblem - LH	\$ 117.00
1	Rear door "CONNECT" emblem - LH	\$ 98.00
2	Rear taillamps	\$ 876.00 X
1	Rear end panel top garnish	\$ 255.00 X
1	Rear centre end panel	\$ 575.00
1	Rear centre inner member	\$ 700.00 X
1	Rear bumper	\$ 865.00
2	Rear bumper brackets	\$ 312.60
1	Rear bumper centre inner garnish	\$ 192.00
1	Rear bumper clip (1 set)	\$ 65.00
1	Rear bumper reinforcement	\$ 488.30 X
2	Rear bumper side holders	\$ 96.00 X
2	Rear bumper side	\$ 590.00
2	Rear number plate lamps	\$ 150.00 X
1	Rear floor panel	\$ 1,399.70 X
1	Rear spare tyre carriage chain	\$ 376.00
1	Rear spare tyre lock catch bracket	\$ 115.00
1	Rear exhaust pipe	\$ 855.00
2	Rear exhaust mountings	\$ 90.00 X
		\$ 14,070.40

7570.4  
202  
6056.32

LIST ITEMS

1	Rear side panel wheel arch garnish	\$	su	355.00	X
1	Glove box cover	\$	su	225.00	X
		\$		14,650.40	
	Less 20%	\$		2,930.08	
		\$		11,720.32	

SPECIAL NETT ITEMS

1	Rear door glass sealant -RH	\$	su	80.00	40
1	Rear door "6PAX" sticker -RH	\$	su	28.00	10
1	Rear door glass sealant -LH	\$	su	80.00	40
1	Rear door "70KM/H" sticker -LH	\$	su	28.00	10
1	Rear number plate with holder	\$	su	50.00	X
1	Rear reverse sensor (1 set)	\$	shuts	350.00	200
1	Radio CD player set	\$	su	800.00	X
		\$		1,416.00	

S/NLABOUR CHARGES

1	To remove, replaced damaged lamps and check up rear wiring.	\$		80.00	30
2	To remove and refit inner garnishes.	\$	11	150.00	X
3	To remove and refit rear reverse sensor.	\$		150.00	50
4	To transfer rear doors mechanism and wiring assembly.	\$		120.00	✓
5	To remove and refit rear windscreen glass.	\$		180.00	✓
6	To remove, refit and replace exhaust silencer and mountings.	\$		150.00	60
7	To apply undercoating.	\$		200.00	80
8	Panel beating.	\$		1,800.00	900
9	To re-spray painting on the affected areas.	\$		1,600.00	750
		\$		4,430.00	

**GRAND TOTAL :****\$ 17,566.32**

A26.32

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey damaged parts (spray painting)
- To ensure damaged part(s) during resurvey
- Repair costs are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No legal work (reports) is allowed
- Supplemental claim(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/MSG18023120/UQD3N2

Date: 09/01/2019

**REFERENCE**

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	A80437844QMX
Claimant Vehicle No :	GZ4806X	Insured Vehicle No :	SKD2588G
Date of Loss:	24/12/2018	Nature of Claim:	TP
		Claim No:	579958

**DESCRIPTION & IDENTIFICATION OF VEHICLE**

Reg No:	GZ4806X	Engine No:	6L77278
Make & Model:	FORD TRANSIT CONNECT, 1.8 D (M)	Chassis No:	WF0TXXTTPT6L77278
Reg. Date:	05/05/2006 (Man. Year: 2006)	Odometer:	93579 km
Colour:	Silver		
Engine Capacity:	1753 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:	195/65R15	Rear Tyre Size:	195/65R15
Front Left Side:	Thunderer 5 mm	Rear Left Side:	Thunderer 5 mm
Front Right Side:	Thunderer 5 mm	Rear Right Side:	Thunderer 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	13,136.32	6,356.32	6,780.00	51.61
Miscellaneous Items	0.00	0.00	0.00	
Labour	4,430.00	2,170.00	2,260.00	51.02
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>17,566.32</b>	<b>8,526.32</b>	<b>9,040.00</b>	<b>51.46</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>6,800.00</b>		
<b>Nett Amount (S\$)</b>	<b>17,566.32</b>	<b>6,800.00</b>	<b>10,766.32</b>	<b>61.29</b>

**INSPECTION**

Date of Assignment:	26/12/2018		
Date Inspected:	27/12/2018	Inspected At:	Zoom Autowerks Pte Ltd (HQ) 15 Kaki Bukit Road 4, #01-53 Singapore 417808

Estimated Period of Repair: 7.0 days

Adjuster: MARCUS CHUA

Manager: SHIAU CHAN

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

<b>Reference</b>		
<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 09 Jan 2019)
<b>Parts:</b>	N/A	FORD TRANSIT CONNECT 1.8 D (M) (Catalogue:Merimen Singapore 1.0) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for GZ4806X)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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 DOOR-RH	Dented/Bent	1,685.00 FL	*1,450.00 FL
2	1		*REAR DOOR GLASS INNER SEAL-RH	No such part	115.00 FL	*- FL
3	2		*REAR DOOR HINGES-RH	Not Necessary	170.00 FL	*- FL
4	1		*REAR DOOR INNER BOARD-RH	Not Necessary	460.00 FL	*- FL
5	1		*REAR DOOR LOWER LOCK-RH	Twisted/Shorted	145.00 FL	*145.00 FL
6	1		*REAR DOOR OUTER HANDLE-RH	Not Necessary	85.00 FL	*- FL
7	1		*REAR DOOR RUBBER-RH	Not Necessary	165.00 FL	*- FL
8	1		*REAR DOOR CHECKER-RH	Not Necessary	95.00 FL	*- FL
9	1		*REAR DOOR-LH	Dented/Bent	1,685.00 FL	*1,480.00 FL
10	1		*REAR DOOR GLASS INNER SEAL-LH	No such part	115.00 FL	*- FL
11	2		*REAR DOOR HINGES-LH	Not Necessary	170.00 FL	*- FL
12	1		*REAR DOOR INNER BOARD-LH	Not Necessary	385.00 FL	*- FL
13	1		*REAR DOOR CENTRE LOCK-LH	Not Necessary	245.00 FL	*- FL
14	1		*REAR DOOR LOWER LOCK-LH	Twisted/Shorted	145.00 FL	*145.00 FL
15	1		*REAR DOOR RUBBER-LH	Torn	189.80 FL	*189.80 FL
16	1		*REAR DOOR TRANSIT EMBLEM-LH	Necessary	117.00 FL	*117.00 FL
17	1		*REAR DOOR CONNECT EMBLEM-LH	Necessary	98.00 FL	*98.00 FL
18	2		*REAR TAILLAMPS	Not Necessary	876.00 FL	*- FL
19	1		*REAR END PANEL TOP GARNISH	No such part	255.00 FL	*- FL
20	1		*REAR CENTRE END PANEL	Dented/Bent	575.00 FL	*575.00 FL
21	1		*REAR CENTRE INNER MEMBER	Repair	700.00 FL	*- FL
22	1		*REAR BUMPER	Bent	865.00 FL	*865.00 FL
23	2		*REAR BUMPER BRACKETS	Bent	312.60 FL	*312.60 FL
24	1		*REAR BUMPER CENTRE INNER GARNISH	Distorted	192.00 FL	*192.00 FL
25	1		*SET REAR BUMPER CLIP	Necessary	65.00 FL	*65.00 FL
26	1		*REAR BUMPER REINFORCEMENT	No such part	488.30 FL	*- FL
27	2		*REAR BUMPER SIDE HOLDERS	Not Necessary	96.00 FL	*- FL
28	2		*REAR BUMPER SIDE	O/s Deformed/N/s Missing	590.00 FL	*590.00 FL
29	2		*REAR NUMBER PLATE LAMPS	Not Necessary	150.00 FL	*- FL
30	1		*REAR FLOOR PANEL	Repair	1,399.70 FL	*- FL
31	1		*REAR SPARE TYRE CARRIAGE CHAIN	Damaged/Torn	376.00 FL	*376.00 FL
32	1		*REAR SPARE TYRE LOCK CATCH BRACKET	Bent	115.00 FL	*115.00 FL
33	1		*REAR EXHAUST PIPE	Bent/Twisted	855.00 FL	*855.00 FL
34	2		*REAR EXHAUST MOUNTINGS	Not Necessary	90.00 FL	*- FL
35	1		*REAR SIDE PANEL WHEEL ARCH GARNISH	Serviceable	355.00 FL	*- FL
36	1		*GLOVE BOX COVER	Serviceable	225.00 FL	*- FL
37	1		*REAR DOOR GLASS SEALANT-RH	Necessary	80.00 FS	*40.00 FS
38	1		*REAR DOOR 6PAX STICKER-RH	Necessary	28.00 FS	*10.00 FS
39	1		*REAR DOOR GLASS SEALANT-LH	Necessary	80.00 FS	*40.00 FS
40	1		*REAR DOOR 70KM/H STICKER-LH	Necessary	28.00 FS	*10.00 FS

Report was unsubmitted during this print-out.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
41	1		*REAR NUMBER PLATE WITH HOLDER	Not Necessary	50.00 FS	*- FS
42	1		*SET REAR REVERSE SENSOR	Shorted	350.00 FS	*200.00 FS
43	1		*SET RADIO CD PLAYER	Serviceable	800.00 FS	*- FS

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

<b>Sub Total (S\$)</b>	<b>16,066.40</b>	<b>7,870.40</b>
- List Item Discount on L Items 20.00/20.00% (S\$)	2,930.08	1,514.08

<b>Total Parts (S\$)</b>	<b>13,136.32</b>	<b>6,356.32</b>
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## 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 REMOVE,REPLACED DAMAGED LAMPS AND CHECK UP REAR WIRING	New	80.00	30.00
2	TO REMOVE AND REFIT INNER GARNISHES	New	150.00	-
3	TO REMOVE AND REFIT REAR REVERSE SENSOR	New	150.00	50.00
4	TO TRANSFER REAR DOORS MECHANISM AND WIRING ASSEMBLY	New	120.00	120.00
5	TO REMOVE AND REFIT REAR WINDSCREEN GLASS	New	180.00	180.00
6	TO REMOVE,REFIT AND REPLACE EXHAUST SILENCER AND MOUNTINGS	New	150.00	60.00
7	TO APPLY UNDERCOATING	New	200.00	80.00
8	PANEL BEATING	New	1,800.00	900.00
9	TO RE-SPRAY PAINTING ON THE AFFECTED AREAS	New	1,600.00	750.00
Gross Labour Cost (S\$)			<b>4,430.00</b>	<b>2,170.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >