ASS. REC. BY:	Marus	BF: C3 AWALSO	23152/Ug <u>ENT</u> (Office)	030 Paper	ial Instruction:	
From (Person):	Ben 7ang	of	AWAC	D	ate/Time: 27/12/163/1	.06cm
Estimated Cost.			Bill to:		aco i mic. O mo mo ji	000
OD TP WS/	FP RES / OD RES /	EVA/INV/MV7	CS	•		
To Inspect Vehic	le No:	CB 7426	M	Insured:	XE 4222-P	
at Workshop m/s		2100 60 AL	MO	Tel:	9069 7862	
of	& Kati	Rulcit he	#02-24	}		
Policy No: BV	F2SB00026	41802	Claim No:	NSVIR	00682/59	
Sum Insured:			Excess:	10110	190	
Make of Veh: (Client's Record)		.1		D.	O.A. 24/12/18	
CA / REV / R	EP. / REV 24 HRS	lup)			H.O.D. Endorsement:	
Date/Time: 11:10	81/c1/FC@mc	Person Contacted:	Kelvin	Veh	icle (N)OUT	
Date/Time A	ction/Instruction () Estimate	2			
	CB 7426M	The second secon				
	XE 4222p-)					
				11000	\$	

(08/11/13) Wef REF:	AWA
ASS. REC. BY: MOVELS . ASSI	GNMENT
From: Date: Estimated Cost: OD / 19/WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: CS 744M at Workshop m/s R.CO 60	Veh No: CB 7 (26M) Yr Regn: f / 4 Type: M.Car / M.Cycle/ Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or M Make: foyo fo coster c.c foo? Colour M. fe A/C: Insured / Std / NI / NA
of Insured: Policy No. Claims No. Sum Insured: Excess:	Sp.Reading 2302 T/Radio: Insured / Std / NI / N.A. Eng/No: C/No: JTGFY536003500662 Gen. Cond: Good / Fair / Poor / Burnt Steering: Inviter / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection.	Brake: Inorder / Jammed / Leaked / Burnt or Modi: Mil S/Rim / STD A/Rim or Tyre Size: F: 2/5/75/1/7.5 R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or
Bal. or Market Value: IDAC Accident Rport: 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: Date / Time Action / Instruction	Front R/Bal. 6 mm R/Bal. 6 mm L/Bal. 6 mm L/Bal. 6 mm L/Bal. 6 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 The U/C / Chassis frame / Body Structure affected due to collision.
3/1/8 canford h/s \$ 10,00 cred 6 38158, 79%)	O Ush Belun. RECEIVED 0 2 JAN 2019
hara t	Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation: Site Insp (\$)S * RS,SI Interview (\$) Photos
Report Format: 7P Lump Sum / I.B.1: (\$ 856)	: Tech. Invs (\$) Others : Weekend (\$) TOTAL 350

Nivitha (LKK Auto)

From:

Tang, Ben <Ben.Tang@awac.com> on behalf of Motorsurvey

<Motorsurvey@awac.com>

Sent:

Thursday, 27 December 2018 11:06 AM

To:

'assignments' 'SUR'; 'Enquiry'

Cc: Subject:

TP Survey assignment for CB 7426M - DOA: 24/12/2018 Our ref: NSV1800682/SG

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us **do** have consensus in the appointment of <u>Mr Marcus Chua</u> as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	CB 7426 M
Insured Vehicle	:	XE 4222 P
Policy Number	:	BVF2SB0002641802
Name of Workshop	:	Rico 60 Auto Services Pte. Ltd.
Contact Number	:	6286 6060
Person to Contact	:	Kelvin Wo
Estimated Cost of repairs	÷	\$ NA

Regards, Claims Division

Copy to Rico 60 Auto Services Pte. Ltd. via Email

Note -

(x)

- 1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
- Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.
- 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
- 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards Motor Claims Claims Group Global Market

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto 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 Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Surmos

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	9851E
Vehicle No.:	CB7426M
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	COASTER 19 SEATER MANUAL TURBO ABS
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	N04CUH17582
Chassis No.:	JTGFP538003500682
Maximum Power Output:	
Open Market Value:	\$73,852.00
Original Registration Date:	04 Aug 2014
First Registration Date:	04 Aug 2014
Transfer Count:	2
Actual ARF Paid: Intended PARF Rebate Details	\$3,693.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 24 Dec 2018

ОК

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Depreciation

Reg Date

Mileage

Veh Type

20

Status

▼ results/page

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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 witholding 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 13:41
Date Of Accident	24/12/2018 11:05
Exact Location Of Accident	DEFU AVE 1 / DEFU LANE 1 (JUNCTION)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	CB7426M
Insured/Policyholder	
Name Of Registered Owner	JOSEPH COACH PTE. LTD.
Co Reg No	201719851E
Email Address	NOEMAIL
Mobile Phone No.	
Alternative Phone No	OFFICE-84884082
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COASTER 19 SEATER MANUAL TURBO ABS
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100416925-01 COMP
Cover Note Number	
Driver	
Name of Driver	GUNASEKARAN RAGHUL
Passport No/FIN	G3252800M

 Passport No/FIN
 G3252800M

 Date Of Birth
 01/07/1994

 Occupation
 OUTDOOR

 Date Of Driving Pass
 30/08/2016

Driving Experience 2 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84884082

Fax Number Contact Number

EMail Address NOEMAIL

Address BLK 607 HOUGANG AVE 4 #02-137

Postcode 530607

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 SIDE SWIPE
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

Was any body injured in the Accident? YES

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.

Number of Passengers (Including Driver)

Passenger 1

NAME:

2

NO

NO

3

ME: : WEN XIUFANG

GENDER: : FEMALE

Passenger 2

NAME:

: TNEE BOON CHAI

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN ATTACHED

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 XE4222P

Vehicle Make/Model/Colour

MAN TGS 18.360 4X2 BLS

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 INJURED PERSON 1

Name

GUNASEKARAN RAGHUL

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

NEC, SHOULDER & BACK

CB7426M

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1 Please report correctly the details of the accident to speed up the daims 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.
- 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.
- 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.
- 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 ...
 - 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:
 - 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 Signat Date & Time:

Co. Reg. No

201719851E

BRY

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

2 4 DEC 2018

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4 Singapore 415933 Tel: 67416697 Fax: 67492305

Email: vackb@sironet.com.sq

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SKETCH PLAN Vehicle A! CB7426m Vehicle B! XE 4222P DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Defu Ave. 1 Detu Lame I and hit on to my vehicle Let+ portion IDAG KAKI BUKIT (VAC) DECLARATION 23 Kaki Bukit Ave 4 I/We declare the out saying particulars are true in every respect. Singapore 415933

Co. Reg. No. 201719851E

Driver's Signature

Date & Time

(If driver is not the policyholder)

2 4 DEC 2018

Policyholder's S

Date & Time:

Page 5 of 12

Tel: 67416697 Fax: 67492305 Email: vackb@singnet.com.sg Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:



Rico 60 Auto Services Pte Ltd . Blk 8 , Kaki Bukit Avenue 4 ,#02-24 Premier @ Kaki Bukit Singapore 415875 , Email: claims@rico60.com

Tel: 6286 6060 , FAX: 6286 7060

VECHICLE NUM: MAKE & MODEL: MILEAGE: TYRE:

CHASSIS NUM:

CB 7426 M
TOYOTA ROADSTER

FP538003500682

2/2 #10.000

1	WINDSCREEN LH SIDE - FRONT 2460	shother		\$	3,500.00
,	WINDSCREEN MOULDING X	11		\$	480.00
1	WINDSCREEN LH SIDE - REAR X	11		\$	3,500.00
,	WINDSCREEN MOULDING - REAR ×	,11		\$	480.00
1	LH SIDE PANEL - OUTER 4 445.	10 Books		\$	7,800.00
]	LH SIDE PANEL - OUTER LH SIDE PANEL - INENR 4250.	10 Broken/Bul		s	5,900.00
1	LH SIDE PANEL INNER TRIM COMPLETE SET	11		\$	890.00
1	LH SIDE DOOR PILLAR TRIM	De/cu7		\$	290.00
1	LH SIDE PANEL TRIM - FRONT	De/70.0		\$	180.00
)	LH SIDE PANEL TRIM - REAR	Delton		\$	180.00
1	LH SIDE PANEL TRIM - TOP FRONT	cul		\$	170.00
1	LH SIDE PANEL TRIM - TOP REAR	PIN		\$	170.00
1	LH SIDE PANEL TRIM - BTM FRONT	11		\$	170.00
1	LH SIDE PANEL TRIM - BTM REAR	11		\$	170.00
1	WINDOW FRAME TRIM - FRONT	11		\$	198.00
,	WINDOW FRAME TRIM - REAR	11		\$	198.00
1	PILLAR INNER TRIM	11		\$	450.00
]	LH SIDE PANEL HANDLE	11		\$	680.00
1	LH SIDE SEAT COMPLETE SET // ×	R		\$	2,480.00
1	LH AUTO DOOR ASSY	111		\$	8,900.00
_	LH AUTO DOOR MOTOR	11		\$	2,480.00
]	LH AUTO DOOR HINGE	11		\$	398.00
]	LH DOOR ALUMINIUM STEP SCUFF PLATE MAX	11		\$	140.00
]	LH DOOR RAILING COMPLETE SET - TOP	17		S	890.00
]	LH DOOR RAILING COMPLETE SET - BTM 17 1	٨٦		S	790.00
]	ROCKER PANEL LH	Λ		\$	1,780.00
1	-It Door Allor	1		載	6800.00
		SUBTOTAL		\$	43,264.00
		LESS 25%		\$	10,816.00
		PARTS TOTAL		\$	32,448.00
	SPECIAL NETT		QTY		PRICE
]	ROCKER PANEL STEP BAR	10		\$	150.00
	COMPANY STICKER	sel		\$	800.00
;	STICKER - SCHOOL BUS	NU		\$	200.00
,	WINDSCREEN GLASS SEALANT	M		\$	400.00
]	REAR SIDE PANEL SEALANT	11		\$	150.00
1	DOOR PILLAR SEALANT	11		\$	150.00
	PANEL TRIM CLIPS COMPLETE SET	11		S	400.00

*	LABOUR	QTY		PRICE
	TO RNR ACCIDENT DAMAGE PARTS, CUT/WELD , KNOCK&REALIGN / (70 o		\$	2,800.00
	TO PUTTY AND RESPRAY ACCIDENT AFFECTED AREA		\$	2,600.00
	TO RUST PROOF ACCIDENT AFFECTED AREA		\$	160.00
4	TO RNR REAR WINDSCREEN		s	400.00
	TO RNR SIDE DOOR MECHANISM		\$	600.00
	TO RNR UPHOSTERY, GARNISH AND ATTACHMENT PARTS		\$	1,600.00
	TO CLEAN AND VACUUM GLASSES TO ASSIST WORK LOAD A 1		s	200.00
	LABOUR TOTAL		s	8,360.00
	GRAND TOTAL COST		\$	43,058.00

PAGE 2 OF 2

P-1240f. 2 25Z 9303.50 12563.50 20Z (0000

LKK Auto Consultants hence notify the Repairer of the following:

* To the or my better former spray painting

If a last of the confirmation.

► The damp named a bit a "Without Prejudice" basis

• To leave the state of its allowed

 Supplie morning them(s) must be resurveyed and is subject to first approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

ALLIED WORLD ASSURANCE COMPANY LTD Ref

Ref:

CS/AWA18023152/Uqd3e2

(SINGAPORE BRANCH)

60 ANSON ROAD #08-01 (8th FLOOR)

MAPLETREE ANSON SINGAPORE 079914

Date: 04-01-2019



SIIV	GAPORE 079914		Code: AWA	
1.		Policy Particulars	:- THIRD PARTY CLA	AIM
	Insured Veh.	XE 4222P	Veh. Inspected	CB 7426M
	Policy No.	BVF2SB0002641802	Coverage (\$)	0.00
	Claim No.	NSV1800682/SG	Excess (\$)	0.00
	Assign From	BEN TANG	Assign Date	27/12/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model	TOYOTA COASTER (M)	c.c	4009
	Engine No.	HIDDEN	Year of Reg.	2014
	Chassis No.	JTGFP538003500682	Colour	WHITE
	Odometer	230250	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		
3.		Conditi	ons of Tyres	
		Size	Make	Balance
	R/H Front Tyre	215/75 R17.5	MICHELIN	6 mm
	L/H Front Tyre	215/75 R17.5	MICHELIN	6 mm
	R/H Rear Tyre	215/75 R17.5 (D)	MICHELIN	6/6 mm
	L/H Rear Tyre	215/75 R17.5 (D)	MICHELIN	6/6 mm
4.		Descripti	on of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE N/S	S BODY.	
	DAMAGES SEE D	ETAILS.		
5.			I Information	
	Accident Date	24/12/2018	Inspection Date	27/12/2018
	Survey held at	RICO 60 AUTO SERVICES PTE	LTD	
		8 KAKI BUKIT AVENUE 4 #02-24 PREMIER @ KAKI BUK SINGAPORE 415875	IT	
5a.		R	emarks	
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WITCE TO YOUR INSTRUCTIONS, V	THOUT PREJUDICE" BA	ISIS.
5b.	IBJIN ACCORDANG		Days of Repair	GENERAL SERVICE
JJ.	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	8 Working Da	avs



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. CB 7426M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	WINDSCREEN LH SIDE - FRONT	SHATTERED	3,500.00	2,460.00
1	WINDSCREEN MOULDING	NOT NECESSARY	480.00	-
1	WINDSCREEN LH SIDE - REAR	NOT NECESSARY	3,500.00	-
1	WINDSCREEN MOULDING - REAR	NOT NECESSARY	480.00	-
1	LH SIDE PANEL - OUTER	BADLY DENTED	7,800.00	4,845.10
1	LH SIDE PANEL - INNER	BADLY DENTED / BUCKLED	5,900.00	4,280.10
1	SET LH SIDE PANEL INNER TRIM COMPLETE	NOT NECESSARY	890.00	-
1	LH SIDE DOOR PILLAR TRIM	DEFORMED / CUT	290.00	290.00
1	LH SIDE PANEL TRIM - FRONT	DEFORMED / TORN	180.00	180.00
1	LH SIDE PANEL TRIM - REAR	DEFORMED / TORN	180.00	180.00
1	LH SIDE PANEL TRIM - TOP FRONT	CUT	170.00	170.00
1	LH SIDE PANEL TRIM - TOP REAR	NOT NECESSARY	170.00	-
1	LH SIDE PANEL TRIM - BTM FRONT	NOT NECESSARY	170.00	-
1	LH SIDE PANEL TRIM - BTM REAR	NOT NECESSARY	170.00	-
1	WINDOW FRAME TRIM - FRONT	NOT NECESSARY	198.00	1-
1	WINDOW FRAME TRIM - REAR	NOT NECESSARY	198.00	-
1	PILLAR INNER TRIM	NOT NECESSARY	450.00	1-
1	LH SIDE PANEL HANDLE	NOT NECESSARY	680.00	-
1	SET LH SIDE SEAT COMPLETE	TO REPAIR SEE LABOUR	2,480.00	-
1	LH AUTO DOOR ASSY	NOT NECESSARY	8,900.00	2-
1	LH AUTO DOOR MOTOR	NOT NECESSARY	2,480.00	1-
1	LH AUTO DOOR HINGE	NOT NECESSARY	398.00	-
1	LH DOOR ALUMINIUM STEP SCUFF PLATE	NOT NECESSARY	140.00	-
1	LH DOOR RAILING COMPLETE SET - TOP	NOT NECESSARY	890.00	-
1	LH DOOR RAILING COMPLETE SET - RIM	NOT NECESSARY	790.00	2=
1	ROCKER PANEL LH	TO REPAIR SEE LABOUR	1,780.00	-
1	LH DOOR PILLAR	TO REPAIR SEE LABOUR	6,800.00	-
	LESS 25% DISCOUNT		-12,516.00	
			37,548.00	9,303.90
	SPECIAL NETT ITEMS			
1	ROCKER PANEL STEP BAR (SN)	NOT NECESSARY	150.00	-

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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	COMPANY STICKER (SN)	NECESSARY	800.00	450.00
1	STICKER - SCHOOL BUS (SN)	NECESSARY	200.00	50.00
1	WINDSCREEN GLASS SEALANT (SN)	NECESSARY	400.00	80.00
1	REAR SIDE PANEL SEALANT (SN)	NOT NECESSARY	150.00	-
1	DOOR PILLAR SEALANT (SN)	NOT NECESSARY	150.00	-
1	SET PANEL TRIM CLIPS COMPLETE (SN)	NOT NECESSARY	400.00	-
			2,250.00	580.00
	LABOUR			
	TO RNR ACCIDENT DAMAGE PARTS, CUT / WELD, KNOCK & REALIGN.		2,800.00	1,500.00
	TO PUTTY AND RESPRAY ACCIDENT AFFECTED AREA.		2,600.00	800.00
	TO RUST PROOF ACCIDENT AFFECTED AREA.		160.00	80.00
	TO RNR REAR WINDSCREEN.		400.00	150.00
	TO RNR SIDE DOOR MECHANISM.	NOT NECESSARY	600.00	-
	TO RNR UPHOSTERY, GARNISH AND ATTACHMENT PARTS. INCLUSIVE OF THE REPAIR OF SET LH SIDE SEAT COMPLETE, ROCKER PANEL LH AND LH DOOR PILLAR.		1,600.00	150.00
	TO CLEAN AND VACUUM GLASSES TO ASSIST WORK LOAD.	NOT NECESSARY	200.00	(+
			8,360.00	2,680.00
	GRAND TOTAL		48,158.00	12,563.90

RECOMMENDED COST OF LUMP SUM REPAIRS	8,500.00
(TO ITS PRE-ACCIDENT CONDITION)	

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CHUA KANG SENG

Licensed Appraiser

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