E PER T			
ASS. REC. BY: REF OS SN	1019000146/A	n2 special Instruction	E
A S	GINMENT (Offic	e)	•
From (Person) Ngo Sau Wei shawn of	SMO	Date/Time:	3/1/10 @ 3.59pm
Estimated Cost:	Bill to:		-111-1
OD (T) WS/TP RES/OD RES/EVA/INV	/ MY 7 CS		
To Inspect Vehicle No: SKD	8312×	Insured:	P 1366#
at Workshop m/s	Lend Down	Tel: 6-	47 8064
TOTAL DOLLARY	# 01-61	10100049	
Policy No: D18M7PCVEG02666 Sum Insured:	Claim No	CM7D19000	59
Make of Veh:	Excess:	-	•
(Client's Record)		D.O.A O	2 01 2019
CA / REV / REP. / REV 24 HRS (up)			
Date/Time: 4:10pm@3/1/2019 Person Co	ntnetad	H.O.D. End	SAME TO SAME T
		Veh(cle_IN)/	0.01
Date/Time Action/Instruction () Es	timate		
ZKD 8315X-X			
YP 1366 # -×:			•
04/1/19 @ 9.40an Informed sha	un Ngo, we o	we panding extin	ate from vapour.
14 Jalla Contrar Merised to 51	hawn Ngo via	Mennen, :	
Us \$3000, 5 days	(Red \$ 4381.	10, 59-/-)	

. .

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:

Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place

#05-01/06, Singapore Land Tower

Singapore 048623

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park

Singapore 408933

Attn:

NGO SAU WEI SHAWN

Date: 14 Mar 2019

Preliminary Advice

Insured Vehicle No : YP1366H

TP Vehicle No

: SKD8312X

Accident Date

: 02/01/2019

Make

: VOLKSWAGEN BEETLE

Assignment Date

: 03/01/2019

Date of Inspection : 03/01/2019

Inspection At

Est. Duration of Repair

: 5.00

: HUA MENG SPRAY PAINTING WORKSHOP (HQ)

NO 1 KAKI BUKIT AVENUE 6, #01-61 AUTOBAY@KAKI BUKIT

SINGAPORE 417883

Point of Impact / General Description of Damages

The vehicle sustained impact / damages front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	7,381.10
Revised Amount	:S\$	3,738.75
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,738.75
Lump Sum Repair	:S\$	3,000.00

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

()	The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
()	The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
()	Other comments:

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

LAIM SUB	FOLDER TRA	CKING								
Case	Notified.	Est Submitted	Ad) Assigned	Adj Rpt	Ad) Sub	mitted	Ins Auth'ed	Status		
Main	02 Jan 2019		03 Jan 2019 15:59 Assign					111111111111111111111111111111111111111	Assignme el Case	nt
	Main	Ref	ference		Claim Details		Documen	ts	7 [Show All
CLAIM SU	JBFOLDER DE	TAILS		Will de la constant	Design College School	[Created	by insurer1	Service Constitute	INFO VILLE	6/5-6/1-7/
Insured:	MULTI SC	AFF ENGINEERIN	NG PTE LTD,	Co. Reg. No.	: 201026906N	,	o, maurer,			
Main Claimant:	TEE SU YI									
Vehicle Reg No.:	SKD831	2X			Date of Loss:	02/01/20	02/01/2019 11:00 - :59			
Claim Type	TP / CMTD1900059				Policy/Cover Note No.:	D18MTPCVE002666 (Comprehensive)				
Vehicle Reg No. (Insured):	ҮР1366H				Policy No. (Claimant):				7	
					Excess:					
Repairer:	Hua Meng 67478064,	Spray Painting 1 67465519	Workshop (HQ) No 1 Kaki	Bukit Avenue 6,	#01-61 Au	tobay@Kaki Bukit	, 417883	Kaki Buki	t - Tel:
Handling Insurer:	Sompo In	surance Singapo	re Pte. Ltd. (H	Q) - Tel: 64	61 6555 [Han	dled by NG	O SAU WEI SHA	WN - 632	29 5202]	
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Final Rpt	due 14/0	1/20191			
ASSOCIAT	TED MAIL REG							/iew All	Company	e Case Mail
There are n	o mail for this	case,						ITEW AII	Compose	e Case Mai
ALL ASSO	CIATED TAS	KS ^E				View All	Search Tasks	Create N	iew Task	Complete
Due Date	e Priority	Type Task 0	Group Subj	ect Han	dler Assign		Completed On	THE RESIDENCE OF THE PARTY OF T	ated On	
No results.						1000	armpreted on	61.6	area on	Done

Shiau Chan (LKKAuto)

From:

Do-Not-Reply <do-not-reply@merimen.com>

Sent:

Friday, 4 January 2019 9:40 AM

To:

do-not-reply@merimen.com

Cc:

SUR

Subject:

Re: VEHICLE SKD 8312X (YOUR REF: CMTD1900059)

This mail is associated with:

*SKD8312X (CMTD1900059) [YP1366H]

TP

TEE SU YIN

Jan 2 2019 11:00AM

[MULTI SCAFF ENGINEERING PTE LTD] Hua Meng Spray Painting Workshop

Dear Shawn,

Please ignore previously email.

Please be informed that we have inspected the vehicle SKD 8312X on 03/01/2019.

We are pending for 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

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VERSEAS Education.

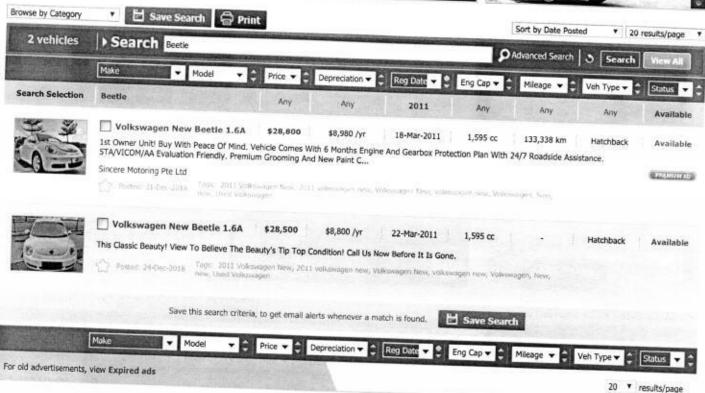
SUNTEC CONVENTION LEVEL 3 HALL 311

JA 3-9;









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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Owner ID Type:	And the state of t	Flat Co
Owner ID:	Singapore NRIC	
Vehicle Derails	6918F	
Vehicle No.:	SVD0040V	
Vehicle to be Exported:	SKD8312X	
Intended Deregistration Date:	Yes	
Vehicle Make:	04 Jan 2019	
Vehicle Model:	VOLKSWAGEN	
Primary Colour:	NEW BEETLE 1.6 A 6SPD	
Manufacturing Year:	Beige	
Engine No.:	2010	
Chassis No:	BFS090076	
Maximum Power Output:	WVWZZZ9CZBM008359	
Open Market Value:	75.0 kW (100 bhp)	
Original Registration Date:	\$18,045.00	
First Registration Date:	08 Mar 2011	
Transfer Count:	08 Mar 2011	
Actual ARF Paid:	3	
Intended PARF Rebate Details	\$18,045.00	
PARF Eligibility:	· · · · · · · · · · · · · · · · · · ·	NEE -
PARF Eligibility Expiry Date:	Yes	
PARF Rebate Amount:	07 Mar 2021	
intended GOE Repate Details	\$10,827.00	
COE Expiry Date:		
COE Category:	07 Mar 2021	
COE Period(Years):	A - Car (1600cc & below)	
QP Paid:	10	
COE Rebate Amount:	\$42,999,00	
Total Rebate Amount:	\$9,351.00	
information contained herein is correct as at 04 Jan 2019	\$20,178.00	

MSME19000723 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 02/01/2019 17:49 SUBMITTED BY: Sebestian Kong

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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.

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	02/01/2019 17:49			
Date Of Accident	02/01/2019 11:40			
Exact Location Of Accident	LOR NANGKA			
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SKD8312X			

Vehicle Registration Number	SKD8312X	
Insured/Policyholder		
Name Of Registered Owner	TEE SU YIN	
NRIC No	S7636918F	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-96800090	
Alternative Phone No	OFFICE-96800090	

Vehicle	Particul	ars
ACHIOLO	I DI CIOO	

Manufacturer	VOLKSWAGEN
Model	BETTLE

Exact Purpose	for v	which	vehicle	was	being	used	at
time of accider	t						

Are you	claiming	under	your	own	insurance	policy

Are you	claiming	under	your	own	insurance	policy
forrons	ir to your	vohicle	22			

for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY PRIVATE CAR

Vehicle Category

Insurance Company

Name of Insurance Company

INDIA INTERNATIONAL INSURANCE PTE LTD

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

D18MPC0001236 Rolicy Number

Cover Note Number

Driver

TEE SU YIN Name of Driver S7636918F NRIC No 03/11/1976 Date Of Birth INDOOR Occupation 01/09/1995 Date Of Driving Pass

23 YEARS AND 4 MONTHS Driving Experience

FEMALE Gender

(LOCAL) +65-96800090 Mobile Number

Fax Number

OFFICE-96800090 Contact Number

NOEMAIL **EMail Address**

Address

73 STILL ROAD

Postcode

423982

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 (including own vehicle)

2

involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

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

MY VEHICLE WAS STATIONARY PARKED AT LOR NANGKA ON 02.01.2019 @ 1140 HOURS. I WAS INSIDE MY HOUSE AT TAT TIME. SUDDENLY, I HEARD A BANG SOUND IN MY HOUSE THEN I GO OUT TO TAKE A LOOK. THE DRIVER AND THE PASSENGER CAME OUT FROM VEHICLE B AND ADMITTED HE REVERSED AND HIT MY CAR. HE TOLD MW THAT THE TRUCK REVERSE SENSOR WAS NOT WORKING HENCE HE DID NOT NOTICE MY CAR WAS BEHIND HIM. AFTER THAT, HE CALLED HIS IN CHARGE AND HE ASK ME TO GO FOR INSURANCE CLAIM

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

YP1366H

Vehicle Make/Model/Colour

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)

320 9

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Prease report correctly the details of the accident to speed up the claims profess
- 2 This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to regudiate policy liability.
- The issue and acceptance of this Form by losurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any faise reporting may be referred to the Police for investigation.
- 5. 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 ladgment 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)

Lunderstand, 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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawvers/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 (aw 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.

Sketch Plan #2 Pg. 1

SKETCH PLAN

1267 SKTO 8 112 Y VOLUET 77 1936 11 1

Luy Iy

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

У	veric	u	MAS	Stat	mnon	y 10	nked	nt i	δV
ca	02	8 ž .	b 1 - 20	196	1140	ws	. 1	has i	uside
hou	se	a+	that	tin	u.	Sud A	urly	. 1 he	and
anj	Son	nd	TN	my	hon	ise	then	18	r out
atl	^	100	k.	The	dww	w	aud	tine	passerye
ŧν	it t	>0 rv.	Vel	ride	B	and	ad	mitte	d
veve	sed	aı	rd	hit	my	Lav	. He	tolo	d me
th	e t	vuck	vev	erse	Suns	0.07	was	not	working
h	L d	id	uot	ust;	u	my	Lav	was	behine
Af-	ter	tha	t. L	ne co	alle d	wis	-in:	change	and
	how and nate over the	house any son att a out of the the	house at any sound aft a loo out from veversed as the truck he did	house at that any sound in take a look. out from vel veversed and the truck ver he did not	house at that time any sound in my affe a look. The out from vehicle veversed and hit the truck veverse he did not not:	house at that time. any sound in my how aft a look. The above out from vehicle s veversed and hit my the truck verses surs he did not notice	house at that time. Sudd any sound in my house aft a look. The abover out from vehicle is and veversed and hit my can the truck verses sensor he did not motice my	house at that time. Suddenly any sound in my house then take a look. The drawn and out from vehicle is and ad veversed and hit my car. He the truck verses sensor was he did not notice my car	y vericue was stationary parked at a complete of the constant

·DECLARATION

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

Pylic Wolder's Signature

Cale & Time:

Chiver's Signature

(if driver is not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

HUA MENG SPRAY PAINTING WORKSHOP

1, Kaki Bukit Avenue 6, Blk C #01-61 / 01-34, Singapore 417883 Autobay @ Kaki Bukit

Tel: 6747 8064, 6746 5519 / 9666 9680 Fax: 6743 4896

ECTIMATE

ESIIM	AIE		
TEE SUYIN 73 STILL ROAD S 423982 TP Somp 5. Xiao Chem	Date Vehicle no Make/Model Accident date	:09.01.2019 :SKD 8312 X :VOLKSWAGEN BEETLE :02.01.2019	
No DESCRIPTION	Qty		Amount (S\$)
List Items 1 Front bonnet Dewted	1	\$	1397

No	DESCRIPTION		Qty		Amount (S\$)
100	<u>List Items</u>		122 - 11		1207
1	Front bonnet Dewted		1	\$	1397
2	Front bonnet hinges @ \$148.50 ALC		2	\$	297 🗶
	Front bonnet lock		1	\$ \$ \$	165
	Front bonnet lock bracket		1	\$	27.5 🔫 .
5	Frontbonnet inner rubber	2925	1		88
6	Front bonnet emblem cauched	7778.	1	\$	99 🧠
7	Front bonnet cable , *** ***	7778.	151		132 🐣
8	Front bumper Reved		1	\$	1980 1198
9	Front bumper side holder @ \$33.00		2		66
	Front bonnet shock absorber XH ~~		1	\$	94.6
11	Front support panel top garnish 2 NO NU		1	\$	155
	Front support panel top garnish clips		1	\$	80 ×
			Total	\$	4581.1
	Special Nett Items				
1	Front number plate Set 0	60	1	\$	50-30
2	Front number plate holder	00	1	\$	-50-30
			Total	\$	100
	Labour Costs				1000
1	Remove, replace & repair consistent to the accident		×	\$	1400 400
2	Respray painting	- (1001	\$	1200 500
3	Tuff kote		1	\$	100 🗡
			Total	\$	2700
		G	rand Total	\$	7381.1

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:

5000

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:

D18MTPCVE002666

Engine No:

Odometer:

Chassis No:

CS/SMO19000146/AQD3N2

Date:

25/03/2019

REFERENCE

Handling Insurer: Claimant

Sompo Insurance Singapore Pte.

SKD8312X

Vehicle No: Date of Loss:

02/01/2019

Insured Vehicle

Policy No:

No:

Steering (Serviceable):

YP1366H

Nature of Claim: TP Claim No:

BFS090076

116296 km

WWZZZ9CZBM008359

CMTD1900059

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

Reg. Date:

Colour:

SKD8312X

Make & Model:

VOLKSWAGEN BEETLE, 1.6 1.6 A 6SPD (A)

08/03/2011 (Man. Year: 2010)

Beige 1595 cc

Engine Capacity: Market Value/New Car

Price:

Sum Insured (S\$):

N/A

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Yes Engine Modification:

Yes Footbrake (Serviceable): Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size: Front Left Side:

205/55 R16 ALTIMAX 6 mm Rear Tyre Size: Rear Left Side:

205/55 R16 ALTIMAX 6 mm

Front Right Side:

ALTIMAX 6 mm

Rear Right Side:

ALTIMAX 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,681.10	2,838.75	1,842.35	39.36
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,700.00	900.00	1,800.00	66.67
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	7,381.10	3,738.75	3,642.35	49.35
Approved Total (Overridden) (S\$)		3,000.00		
Nett Amount (S\$)	7,381.10	3,000.00	4,381.10	59.36

INSPECTION

Date of Assignment:

03/01/2019

Date Inspected:

03/01/2019 Inspected At:

Hua Meng Spray Painting Workshop

No 1 Kaki Bukit Avenue 6, #01-61

Autobay@Kaki Bukit Singapore 417883

Estimated Period of Repair:

5.0 days

Adjuster: ADRIAN LING

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

Referen	ce					
Part Source	: MRM-SG	Version: 1.0 (Last Synchronised: 25 Mar 2019)				
Parts:	M1-COUPE	VOLKSWAGEN BEETLE 1.6 1.6 A 6SPD (A) (Catalogue:Merimen Singapore 1.0)				
Labour:	Repairer's	(Price-denominated Standard List)				
Print Code:	(Unsubmitted,	no print-code for SKD8312X)				
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 n	ot in reference catalogue are prefixed with an asterisk *.				

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BONNET	Dented	1,397.00 F	*1,397.00 FL
2	2		*FRONT BONNET HINGES	Not Necessary	297.00 F	*-FL
3	1		*FRONT BONNET LOCK	Damaged	165.00 F	*165.00 FL
4	1		*FRONT BONNET LOCK BRACKET	Not Necessary	27.50 F	*-FL
5 6	1		*FRONT BONNET INNER RUBBER *FRONT BONNET EMBLEM	Not Necessary Cracked	88.00 F 99.00 F	*- FL *99.00 FL
7	1		*FRONT BONNET CABLE *FRONT BUMPER	Not Necessary Deformed	132.00 F 1,980.00 F	*- FL *1,198.00 FL
9	2		*FRONT BUMPER SIDE HOLDER	Necessary	66.00 F	*66.00 FL
10	1		*FRONT BONNET SHOCK ABSORBER	Not Necessary	94.60 F	*- FL
11	1		*FRONT SUPPORT PANEL TOP GARNISH	Not Necessary	155.00 F	*- FL
12	1		*FRONT SUPPORT PANEL TOP GARNISH CLIPS	Not Necessary	80.00 F	*- FL
13	1		*FRONT NUMBER PLATE	Bent	50.00 FS	*30.00 FS
14	1		*FRONT NUMBER PLATE HOLDER	Deformed	50.00 FS	*30.00 FS
F=Fra	anchise	part. S=Spcl	Nett. L=ListItemDisc.	Sub Tatal (SS)	4,681.10	2,985.00
			- List Item Discount on L Items	Sub Total (S\$) s 0.00/5.00% (S\$)	5	146.25
				Total Parts (S\$)	4,681.10	2,838.75

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	REMOVE, REPLACE & REPAIR CONSISTENT TO THE ACCIDENT	New	1,400.00	400.00
2	RESPRAY PAINTING	New	1,200.00	500.00
3	TUFF KOTE	New	100.00	0.00
	Gross Labo	our Cost (S\$)	2,700.00	900.00
	Report was unsubmitted du	ring this print-out.		

< END OF ESTIMATES >