

22/03/2002

ASS. REC. BY:

REF

FCI 19000704 / 11q d 3e2

Special Instruction:

Surveyor:

Taufik

ASSIGNMENT (Office)

From (Person):

Karen Tan

of

FCI

Date/Time:

4:44pm @ 10/01/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBD 9392P

Insured:

SHB 3646L

at Workshop m/s

Success United

Tel:

9223 6288

of

2 kaki Bukit Ave 2 #01-33 Autohub

Policy No:

Claim No:

D19000322 MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

04/01/2019

CA / REV / REP. / REV 24 HRS

1up1

15/01/2019 @ 1:30pm dw

H.O.D. Endorsement:

Date/Time:

4:30pm @ 11/1/19

Person Contacted:

Ginina

Vehicle IN (OUT)

Date/Time

Action/Instruction

(✓)

Estimate

GBD 9392P-X

SHB 3646L-CS / FCI 18015696 / 11td 3e2

DUA: 25/8/18

18/1/19 @ 5:13pm revised to Karen Tan by email.

14/3/19 @ 5:15pm checked with Ginina (worksp), the vehicle has not send in for repair.
due to awaiting liability issue.

15/3/19

Submit photo report

Surry Tajmi

REF: FCI

ASSIGNMENT

From: Date: 15/01/2019

Estimated Cost:

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

To Inspect Vehicle No: GBD 9392P

at Workshop m/s Success United
of 2 kaki Bukit Ave 2 #01-33 Autohub

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

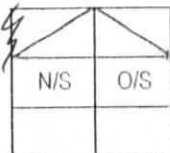
(Client's Record)

Make of Veh:

1:30pm @ owner waiting

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GBD 9392P Yr Regn: 2015 10ng

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

Truck / Trailer or

Make: 15434 NHR 85. C.C 2929

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

Sp. Reading: 59477 T/Radio: Insured / Std / NI / NA

Eng/No:

C.No: JMAN HR 85E F71.00605

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: 195/90R15.

R: 145/R13

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 5/6 mm

L/Bal. 6 mm L/Bal. 6/5 mm

D.O.A.

D.O.I.

Survey held at

Success United

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

RECEIVED 15 MAR 2019

Date/Time, File Pass to?

☒ : Preli. Report

☐ : Final Report

Date/Time, File Return to?

Days Of Repair: 5

Resurvey No. of Trip:

Survey Fee:

Transportation:

) \$ + RS. SI

) Photos

) Others

TOTAL

2)

Report Format :

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

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

150

50

35

235

MOTOR SURVEY ASSIGNMENT

Date	09-01-2019	Our Ref No. D19000322MFSH
Accident Date	04-01-2019	Claim Type. Third Party
Insured Vehicle	SHB3646L	Third Party Vehicle. GBD9392P
Survey Location	2 KAKI BUKIT AVE 2 #01-33 & #02-29KAKI BUKIT AUTOHUB	
Contact Person.	SIRINA SOON	
Contact No.	67461515/ 92236288	Fax No. 67485015
Survey Type	WITHOUT PREJUDICE: LIABILITY UNCLEAR:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	SUCCESS UNITED PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	KARENT	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Friday, 18 January 2019 5:13 PM
To: 'CWS Motor Claims'; assignments
Cc: 'Karen Tan'; SUR
Subject: RE: SURVEY ASSESSMENT - D19000322MFSH/1
Attachments: CSFC19000704T1qd3.pdf

Dear Karen,

Enclosed herewith preliminary advice of GBD 9392P.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)
Sent: Friday, 11 January 2019 4:33 PM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Karen Tan' <karentan@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19000322MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not in the workshop, repairer will arrange.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Nivitha (LKK Auto) [<mailto:admin-d@lkkauto.com>]
Sent: Friday, 11 January 2019 4:33 PM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; 'ASSIGNMENTS@LKKAUTO.COM' <ASSIGNMENTS@LKKAUTO.COM>
Cc: 'Karen Tan' <karentan@msfirstcapital.com.sg>; 'SUR' <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19000322MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D19000322MFSH

Date: 18 January 2019

Our Ref: CS/FCI19000704/T1qd3

The Motor Claims Department
First Capital Insurance Ltd

Dear Sir/Madam,

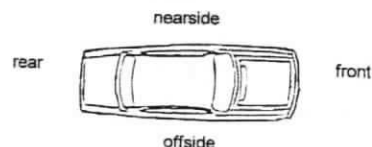
INITIAL INSPECTION REPORT OF VEHICLE NO. GBD 9392P

Please be informed that we had conducted the inspection of the abovementioned vehicle on 15/01/2019 at the premises of M/s SUCCESS UNITED. and have the following to report:-

Workshop Estimate Amount	: S\$ <u>7,147.54</u>
Revised Estimate Amount	: S\$ <u>4,108.84</u>
"Check" Items Amount	: S\$ <u>-</u>
Market Value	: S\$ <u>-</u>
LTA Reimbursement Value	: S\$ <u>-</u>
Nett Value	: S\$ <u>-</u>

Description of Damage:

The vehicle sustained damages at the front n/s portion.



Yours faithfully

Taufikh
Automotive Assessor

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

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3448R
Vehicle Details	
Vehicle No.:	GBD9392P
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Jan 2019
Vehicle Make:	ISUZU
Vehicle Model:	NHR85AUE4AA
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	4JJ11W7289
Chassis No.:	JAANHR85EF7100105
Maximum Power Output:	-
Open Market Value:	\$23,085.00
Original Registration Date:	01 Aug 2015
First Registration Date:	01 Aug 2015
Transfer Count:	0
Actual ARF Paid:	\$1,155.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Jul 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$5,194.00
COE Rebate Amount:	\$3,408.00
Total Rebate Amount:	\$3,408.00

The information contained herein is correct as at 07 Jan 2019

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	07/01/2019 13:27
Date Of Accident	04/01/2019 10:50
Exact Location Of Accident	CIRCUIT LINK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBD9392P
Insured/Policyholder	
Name Of Registered Owner	PERWIRA PTE LTD
Co Reg No	198903448R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91477856
Vehicle Particulars	
Manufacturer	ISUZU
Model	NHR85AUE4AA-3.0 D (M)
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	GOODS VEHICLE
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MCV0000967
Cover Note Number	
Driver	
Name of Driver	FU JUN
Passport No/FIN	G8235628U
Date Of Birth	16/12/1981
Occupation	OUTDOOR
Date Of Driving Pass	21/05/2008
Driving Experience	10 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91477856
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 130 BEDOK RESERVOIR ROAD #14-134
Postcode	470130
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	COLLISION - CROSS JUNCTION
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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED 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	SHB3646L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIEW JIA MING
NRIC/Passport Number	S8437442C
Contact Number	81696666
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	FU JUN
------	--------

Approximate Age

Injuries Sustain

Injured person in which vehicle?

GBD9392P

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

BLK 130 BEDOK RESERVOIR ROAD

Postcode

470130

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 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.

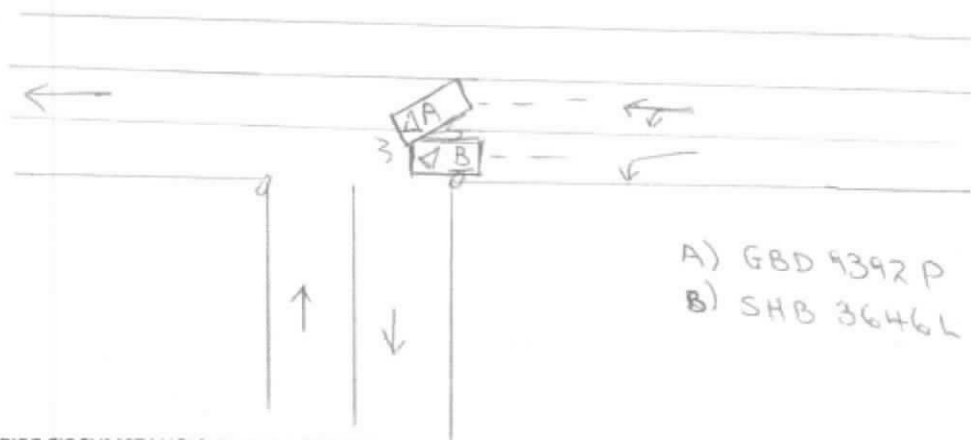

Policyholder's Signature
Date & Time: _____


Driver's Signature
[If driver is not the policyholder]
Date & Time: _____


Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No.: _____

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I stopped my lorry at the traffic T-junction in the center & straight & turning lane. Veh (B) was on my left, in the turning lane. When the traffic light turns green, I accelerated & starting to make my turn in Circuit link. Veh (B) instead of turning & move straight forward & collided onto my lorry. I called the police but they said they will not anyone down as there was no injuries. We exchange particulars & thereafter ~~when~~ leave the scene.

DECLARATION

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

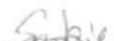


Policyholder's Signature
Date & Time





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



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SUCCESS UNITED PTE LTD

2 Kaki Bukit Ave 2, #01-33 / #02-29

Kaki Bukit Autohub. Singapore 417921

Tel No. : 67461515 / 67471787 Fax No. : 67485015

Website : www.successunited.com.sg

Buss. Reg. No. : GST No. 200402570G

MS First Capital Insurance Limited

36 Robinson Road

#16-01 City House

Singapore 068877

Attention : Motor Claim Department

Contact : 65073848 Fax No. : 65073849

Estimate : TP19-008

Date : 10/01/2019

Vehicle Num. : GBD9392P

Make/Model : Isuzu Lorry-2015

Chassis/Eng# : JAANHR85EF7100105/4JJ11W7289

Accident Date : 04/01/2019

Claim No. : D19000322MFSH

Reference :

Policy No. : (31/07/2019)

S/N	Quantity	Particular	Unit Price	Amount S\$
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1.	1	LIST ITEMS :		
2.	1	Frt Bumper Assy	725.85	
3.	1	Frt Bumper Bracket LH	281.34	
4.	1	Headlamp Assy LH	420.00	
5.	1	Headlamp Side Lamp LH	155.20	
6.	1	Frt Door LH	1,174.38	
7.	1	Frt Door Weatherstrip LH	195.80	
8.	2	Frt Door Hinge, Top/Lower LH	156.00	
9.	1	Frt Door Center Check LH	312.00	
10.	1	Side Step Garnish LH	78.00	
11.	1	Frt Wheel Arch Guard Garnish LH	148.17	
		Frt Door Pillar LH	98.10	
		List TotalS\$:	4,947.54	

1.	1	SPECIAL NETT ITEMS :		
		Co's Sticker	40.00	
		Special Nett Total S\$:	40.00	

LABOUR :		
To remove, rearrange electrical wirings, check lighting	30	60.00
To remove, replace & transfer door components.	60	200.00
To remove, repair and replaced damaged bodyparts, realign bodyworks & where consistent to the accident	600	1,000.00
To putty and respray painting on affected area.	600	900.00
Labour Total S\$:		2,160.00


for SUCCESS UNITED PTE LTD

E. & O.E.

LKK Auto Consultants certify


the Repairer of the form

- To resurvey before reafter spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey without Prejudice basis
- No illegal modification is allowed
- Supplementary item(s) must be surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:


Total S\$: 7,147.54

Tan Kah Kee 97495749
- WP
15/1/19 @ 130pm
Lumpsum
Resurvey after repair
sure (LKK Autohub)
05 days



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

MS FIRST CAPITAL INSURANCE LTD

Ref : CS/FCI19000704/T1qd3e2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 18-03-2019



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 3646L	Veh. Inspected	GBD 9392P
Policy No.		Coverage (\$)	0.00
Claim No.	D19000322MFSH	Excess (\$)	0.00
Assign From	KAREN TAN	Assign Date	10/01/2019

2. Vehicle Particulars & Condition

Make & Model	ISUZU NHR85AUE4AA	c.c	2999
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	JAANHR85EF7100105	Colour	WHITE
Odometer	59477	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/90 R15	YOKOHAMA	6 mm
L/H Front Tyre	195/90 R15	YOKOHAMA	6 mm
R/H Rear Tyre	145 R13	YOKOHAMA	6/6 mm
L/H Rear Tyre	145 R13	YOKOHAMA	6/6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	04/01/2019	Inspection Date	15/01/2019
Survey held at	SUCCESS UNITED PTE LTD 2 KAKI BUKIT AVE 2 #01-33 KAKI BUKIT AUTOHUB SINGAPORE 417921		

5a. Remarks

A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	5 Working Days
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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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBD 9392P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRT BUMPER ASSY	CRACKED	725.85	725.85
1	FRT BUMPER BRACKET LH	BENT	281.34	281.34
1	HEADLAMP ASSY LH	NOT NECESSARY	420.00	-
1	HEADLAMP SIDE LAMP LH	CRACKED	155.20	155.20
1	FRT DOOR LH	BENT	1,174.38	1,174.38
1	FRT DOOR WEATHERSTRIP LH	NECESSARY	195.80	195.80
2	FRT DOOR HINGE, TOP / LOWER LH @\$156.00	TO REPAIR SEE LABOUR	312.00	-
1	FRT DOOR CENTER CHECK LH	NOT NECESSARY	78.00	-
1	SIDE STEP GARNISH LH	CUT	148.17	148.17
1	FRT WHEEL ARCH GUARD GARNISH LH	CUT	98.10	98.10
1	FRT DOOR PILLAR LH	TO REPAIR SEE LABOUR	1,358.70	-
	LESS 15% DISCOUNT		-	-416.83
			4,947.54	2,362.01
<u>SPECIAL NETT ITEMS</u>				
1	CO'S STICKER (SN)	CUT	40.00	40.00
			40.00	40.00
<u>LABOUR</u>				
	TO REMOVE, REPAIR AND REPLACED DAMAGED BODYPARTS, REALIGN BODYWORKS & WHERE CONSISTENT TO THE ACCIDENT. INCLUSIVE OF THE REPAIR OF FRT DOOR HINGE, TOP / LOWER LH AND FRT DOOR PILLAR LH.		1,000.00	600.00
	TO REMOVE, REARRANGE ELECTRICAL WIRINGS, CHECK LIGHTING.		60.00	30.00
	TO REMOVE, REPLACE & TRANSFER DOOR COMPONENTS.		200.00	60.00
	TO PUTTY AND RESPRAY PAINTING ON AFFECTED AREA.		900.00	600.00
			2,160.00	1,290.00
GRAND TOTAL			7,147.54	3,692.01

Report Ref No. CS/FCI19000704/T1qd3e2



RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE)			3,692.01
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Report Ref No. CS/FCI19000704/T1qd3e2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.