

ASS REC BY:

REF:

C9/SMD19001831 /Atcd3¹²

Special Instruction:

Surveyor:

Munim

ASSIGNMENT (Office)

From (Person):

Agnes Chan

of

GMO

Date/Time:

28/01/2019 4:53pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKT 91B

Insured:

SKA 3414J

at Workshop m/s

Hkcp Hong

Tel:

of

2 Kaki Bukit Ave 2 # 02-13

Policy No:

D16MTPV 01003722

Claim No:

CMTD 1900672

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

27/01/2019

CA / REV / REP. / REV 24 HRS rep:

H.O.D. Endorsement:

Date/Time:

28/01/2019 5:10pm

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SKT 91B - NA / DNC19001756 / R3
	SKA 3414J - X
29/01-	Revert pending estimate.
	lump sum \$24501- (cred: 2969.70; 54%)

ASS. REC. BY:

REF:

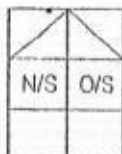
Adrian

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 3 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Vehicle: IN / OUT
 Person Contacted: _____

Veh No: SKT91B Yr Regn: 2015 May
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Mazda 3 c.c. 1496
 Colour: Black A/C: Insured / Std / NI / NA
 Sp. Reading: 52405 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JM6BM42A8G0309055
 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: 205/60R16
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or 9

Front		Rear	
R/Bal. <u>06</u> mm		R/Bal. <u>06</u> mm	
L/Bal. <u>06</u> mm		L/Bal. <u>06</u> mm	
D.O.A. _____		D.O.I. <u>28/01/19</u>	

Survey held at Hiap HongDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

TP Sampo.

RECEIVED 27 FEB 2019

mv:

PV:

Nett:

Date/Time, File Pass to?

1) TP Typist

3)

5)

Prel. Report:

Final Report:

Date/Time, File Return to?

2)

4)

6)

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic & Add.

S + RS, SI

Photos

Others

TOTAL

25010260

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	28 Jan 2019		28 Jan 2019 16:53 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
----------------------	---------------------------	-------------------------------	---------------------------	--------------------------

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:

NIHON SHOKKEN HOLDINGS CO.,LTD.SINGAPORE BRANCH, Co. Reg. No.: T09FC0038F

Main Claimant:

LIOW CHENG CHAI, ID: S7019508B

Vehicle Reg. No.:

SKT91B

Date of Loss:

27/01/2019 13:00 - :59

Claim Type:

TP / CMTD1900612

Policy/Cover Note No.:

D18MTPV01003722
(Comprehensive)

Vehicle Reg. No. (Insured):

SKA3414J

Policy No. (Claimant):

Excess:

Repairer:

Hlap Hong Motor Repair () 2 Kaki Bykit Avenue 2, #02-13, 417921 Kaki Bukit - Tel:

Handling Insurer:

Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by CHAN SHU HUI AGNES - 6329 5327]

Adjuster:

LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 08/02/2019]

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.									

View Sent Message

This mail is associated with :

***SKT91B (CMTD1900612)**
[SKA3414J]

TP

LIOW CHENG CHAI

Jan 27 2019 1:00PM

[NIHON SHOKKEN HOLDINGS CO.,LTD.SINGAPORE BRANCH]

Hlap Hong Motor Repair

[Resend](#)[View Recipients](#)[Print Message](#)[Delete Message](#)[Forward](#)

From LKK Auto Consultants Pte Ltd (LKK_HQ), sent on **29/01/2019 14:58 PM.**

To agnes.chan@sompo.com.sg

Subject SKT91B (CMTD1900612) [SKA3414J]

Dear Sir/Madam,

Please be informed that we have inspected the vehicle SKT 91B on 28/01/2019
We are pending estimate from repairer.

Regards,
Denise
LKK Auto

DOCUMENTS SUMMARY

There are no documents.

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	28/01/2019 10:51
Date Of Accident	27/01/2019 13:15
Exact Location Of Accident	JUNC OF UPP SERANGOON RD & UPP ALJUNIED RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT91B
Insured/Policyholder	
Name Of Registered Owner	LIOW CHENG CHAI
NRIC No	S7019506B
Email Address	LIOWALVIN@YAHOO.COM
Mobile Phone No	(LOCAL) +65-83219679
Alternative Phone No	OTHERS-83219679

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 3
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5103518088
Cover Note Number	

Driver

Name of Driver	LIOW CHENG CHAI
NRIC No	S7019506B
Date Of Birth	18/06/1970
Occupation	OUTDOOR
Date Of Driving Pass	22/12/1993
Driving Experience	25 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-83219679
Fax Number	
Contact Number	OTHERS-83219679
Email Address	LIOWALVIN@YAHOO.COM

Address	BLK 142 LORONG AH SOO #04-241
Postcode	530142
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) 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)	2
Passenger 1	NAME: : CHEONG HUEY YIANG GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOGANG N.P.C
Police Station Address	ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190127/2102

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FRONT ONLY(WITH DRIVER)
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKA3414J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	OGURA MOTOSHI
NRIC/Passport Number	G3185431N

Contact Number 94873674

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name LIOW CHENG CHAI

Approximate Age

Injuries Sustain NECK & BACK

Injured person in which vehicle? SKT91B

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode


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.

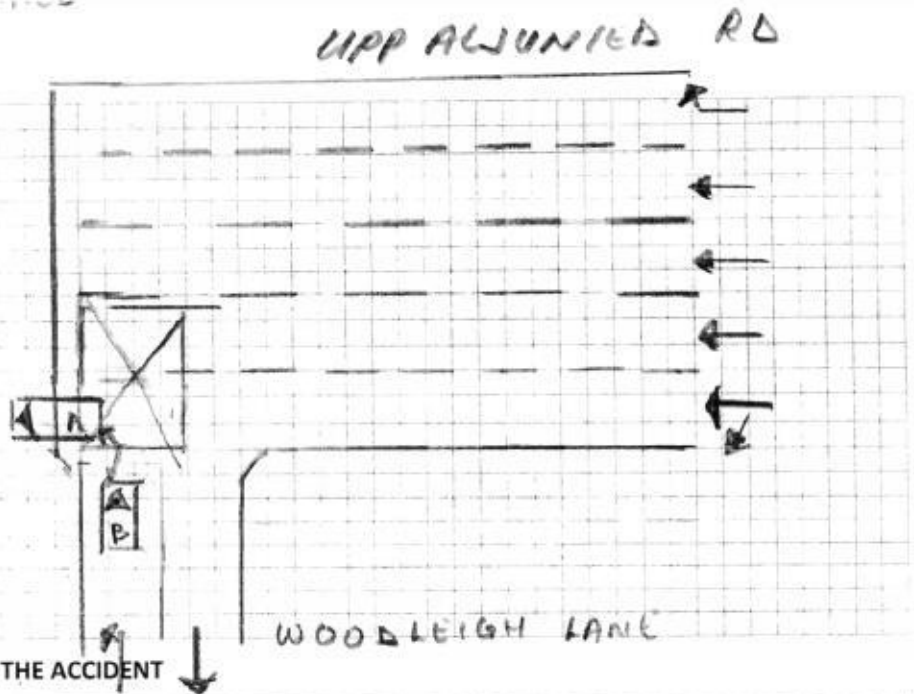
 28/01/2019
Policyholder's Signature
Date & Time:

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

 28/01/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

A-SKT91B
B-SKA3414J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: T/20190127/2102

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.:

23/01/2019

28/01/19



SINGAPORE POLICE FORCE



T/20190127/2102

1 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20190127/2102

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/01/2019 20:56	Vide Report No.:	Station Diary No.: 111
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Informant's Particulars

Name of Informant: LIOW CHENG CHAI			Address: APT BLK 142 LORONG AH SOO #04-241 SINGAPORE 530142		
ID Type / ID No.: NRIC NO / S7019506B			Contact No.: Home/Office: Mobile: 83219679		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 48	Date of Birth: 18/06/1970	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Building and construction project manager			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/01/2019 13:20	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 UPPER SERANGOON ROAD UPPER ALJUNIED ROAD Along Traffic light junction of Upper Serangoon Road and Upper Aljunied Road towards Hougang				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKA3414J	Car	TOYOTA	VIOS	Silver	Slightly Damaged	2
SKT91B	Car	MAZDA	MAZDA3 4- DOOR SEDAN 1.5L SP.6EAT	Blue	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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SINGAPORE POLICE FORCE



T/20190127/2102

Police Station Of Origin:

Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

2 of 3

Report No. T/20190127/2102

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKT91B	NTUC Income Insurance Co-Operative Limited	5103518088	03/09/2018	25/11/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIOW CHENG CHAI	ID No.	S7019506B
Related Vehicle	SKT91B (Car)	Contact No.	83219679
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	27/01/2019	Date Discharge	27/01/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On the 27/01/2019 at about 1320hrs, I was travelling along Upper Serangoon Road towards Hougang Town. I was driving my Blue colour Mazda 3, SKT91B. My wife was sitting at the front passenger seat.

As I reached the traffic light junction of Upper Serangoon road and Upper Aljunied Road, I stopped my vehicle as the traffic light was red. My car was at the extreme left lane and my vehicle was the first vehicle. A few seconds after I stopped my vehicle, a vehicle from the rear hit my rear. The front of the vehicle hit onto the rear of my vehicle. Due to the impact my vehicle moved forward slightly. I immediately stopped my vehicle and came out to make a check. My wife was not injured. I had some pain on my neck and shoulder area. The other driver also came out of his vehicle. I was not sure whether he was injured. None of us required any ambulance. Both of us exchanged our particulars. My car left side bumper was dented in. My car is only installed with a CCTV camera at the front and the rear is not installed with the CCTV camera.

I subsequently left the scene. As I continued to have pain on my neck and shoulder area. I went over to Mount Alvernia Hospital to see the doctor. I was given 5 days MC. I will report the accident to m insurance on the 28/01/2019.



**SINGAPORE
POLICE FORCE**



T/20190127/2102

3 of 3

Police Station Of Origin:
Hougang N.P.C

Report No. T/20190127/2102

60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: F / Staff Sgt TEO HENG HENG, ROBIN <i>TEO HENG HENG</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 27/01/2019 20:56
Officer In Charge Of Case: TP / AEIT / SSI 2 SITIMARSITA BINTE BOHARI Contact No.: 65476219	Classification Of Case: <i>Six J...</i>
Authentication Stamp NP168	Signature: <i>[Signature]</i>

Singapore Police Force

SKT91B

Date

No.

Mazda 3

JM6BM424860309055

Rear Bumper. Distorted	1074.80 ✓
Rear Bumper Clips. New	30 ✓
Rear Bumper Side Holder LH New	36.10 ✓
Rear Bumper Reflector LH cracked	50.40 ✓
Rear Bumper Reinforcement. Bent	537 ✓
Rear Bumper Tow Cover LH New	16.20 X
Reverse Sensor. Damaged	200(SN) 200(SN)
Rear End Panel Repair	535.10 X
Rear End Panel Top Garnish. <i>Free</i>	185.10 X
Rear End Panel Sealant. <i>Free</i>	60(SN) X
Tail Lamp LH. cracked.	915 ✓

2643.30

211464

S.N: 200

Panel Beating	800 300
Spray Painting	600 400
Wiring	50 30
To remove reverse sensor	100 50 780
To remove upholstery	150 X

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:

total: 3094.64

H/S: 2450

03 Days.

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/SMO19001831/ATD3N2

Date: 28/02/2019

REFERENCE

Handling Insurer:	Sompo Insurance Singapore Pte. Ltd.	Policy No:	D18MTPV01003722
Claimant Vehicle No :	SKT91B	Insured Vehicle No :	SKA3414J
Date of Loss:	27/01/2019	Nature of Claim:	TP
		Claim No:	CMTD1900612

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SKT91B	Engine No:	P520278899
Make & Model:	MAZDA 3, 1.5 (A)	Chassis No:	JM6BM42A8G0309055
Reg. Date:	26/05/2015 (Man. Year: 2015)	Odometer:	52405 km
Colour:	Black		
Engine Capacity:	1496 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:	205/60R16	Rear Tyre Size:	205/60R16
Front Left Side:	Toyo 6 mm	Rear Left Side:	Toyo 6 mm
Front Right Side:	Toyo 6 mm	Rear Right Side:	Toyo 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	3,719.70	2,314.64	1,405.06	37.77
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,700.00	780.00	920.00	54.12
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,419.70	3,094.64	2,325.06	42.90
Approved Total (Overridden) (S\$)		2,450.00		
Nett Amount (S\$)	5,419.70	2,450.00	2,969.70	54.79

INSPECTION

Date of Assignment:	28/01/2019		
Date Inspected:	28/01/2019	Inspected At:	Hiap Hong Motor Repair 2 Kaki Bykit Avenue 2, #02-13 Singapore 417921
Estimated Period of Repair:	3.0 days		

Adjuster: ADRIAN LING

Manager: DENISE TAY KWEE CHENG

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

Reference

Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 28 Feb 2019)
Parts: 144	MAZDA 3 1.5 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SKT91B)	
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 not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Distorted	1,074.80 F	*1,074.80 FL
2	1		*REAR BUMPER CLIPS	Necessary	30.00 F	*30.00 FL
3	1		*REAR BUMPER SIDE HOLDER LH	Necessary	36.10 F	*36.10 FL
4	1		*REAR BUMPER REFLECTOR LH	Cracked	50.40 F	*50.40 FL
5	1		*REAR BUMPER REINFORCEMENT	Bent	537.00 F	*537.00 FL
6	1		*REAR BUMPER TOW COVER LH	Not Necessary	16.20 F	*- FL
7	1		*REAR END PANEL	Repair	535.10 F	*- FL
8	1		*REAR END PANEL TOP GARNISH	Not Necessary	185.10 F	*- FL
9	1		*TAILLAMP LH	Cracked	915.00 F	*915.00 FL
10	1		*REVERSE SENSOR	Damaged	280.00 FS	*200.00 FS
11	1		*REAR END PANEL SEALANT	Not Necessary	60.00 FS	*- FS

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

Sub Total (S\$)	3,719.70	2,843.30
- List Item Discount on L Items 0.00/20.00% (S\$)	0.00	528.66
Total Parts (S\$)	3,719.70	2,314.64

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	800.00	300.00
2	SPRAY PAINTING	New	600.00	400.00
3	WIRING	New	50.00	30.00
4	TO REMOVE REVERSE SENSOR	New	100.00	50.00
5	TO REMOVE UPHOLSTERY	New	150.00	0.00
Gross Labour Cost (\$\$)			1,700.00	780.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >