

ASS. REC. BY:

REF: ES/FCI19001991/ Tlad3⁵² Special Instruction:Surveyor: Taufik

ASSIGNMENT (Office)

From (Person): Karen Tanof FEIDate/Time: 9:42am @ 30/1/19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SGW 6366BInsured: SH 7986Sat Workshop m/s: Car CraftersTel: 86921244 / 4498 94316186of 48 ton Guen Rd East #05-155

Policy No:

Claim No: D19000723 MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A. 18/01/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

1up

H.O.D. Endorsement:

Date/Time: 10:25am @ 30/1/19Person Contacted: Jie Ren

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>SGW 6366B-X</u>
	<u>SH 7986S-CS/FCI 18017436/Dgd3n2</u> <u>2018: 21/9/2018</u>
<u>11/2/19 @ 2:44pm</u>	<u>revised to Karen Tan by email.</u>
<u>20/2/19 @ 5:13pm</u>	<u>checked with Jie Ren, he need to confirm to the owner whether still claim.</u>
<u>17/6/19 @ 1:22pm</u>	<u>checked with Jie Ren, the vehicle has not send in for repair.</u>
<u>17/6/19</u>	<u>Submit Prel. report.</u>

Taylor

REF:

FCI

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 Vehl: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: 94000
 IDAC Accident Rpt: Consistent? : Yes or No
 GIA / PR Seen: Consistent? : Yes or No
 Est. Repairs: 4 days Res.: Yes or No
 Lum Sum: % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS. 11am

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGW 6366B To Rego: 2000 . NSW
 Type: ☒ Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /
 Truck / Trailer or
 Make: Mercedes Benz E200 C/C: 1998
 Colour: Grey A/C: ☐ Insured / ☐ Std / ☐ NI / ☐ NA
 Sp Reading: 399129 T/Radio: ☐ Insured / ☐ Std / ☐ NI / ☐ NA
 Eng No: _____
 C/No: WOK2100482624 2836
 Gen Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ Burnt
 Steering: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Brake: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt or
 Modi: ☒ Nil / ☐ SRim / ☐ STD A/Rim or
 Tyre Size: F: 225/45R17
 R: -
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU ☒ PIR / SUMI /
 TOYO / YOKO or
 Front: _____ Rear: _____
 R/Bal: 4 mm R/Bal: 6 mm
 L/Bal: 6 mm L/Bal: 6 mm
 D.O.A: _____ D.O.I: 8/2/19
 Survey held at: Car Crafters 4 & Toh Guan
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
o/s Rea
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

RECEIVED 17 JUN 2019

Date/Time, File Pass to?

17/6/2019

Date/Time, File Return to?

2

Report Format :

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

☒ Preli. Report
☐ Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ Site Insp (\$)
☐ Interview (\$)
☐ Tech. Insp (\$)
☐ Weekend (\$)

Survey Fee:

Transportation

3 * RS. SI

Photos

Other

TOTAL

100
50
18
168

MOTOR SURVEY ASSIGNMENT

Date	28-01-2019	Our Ref No. D19000723MFSH
Accident Date	18-01-2019	Claim Type. Third Party
Insured Vehicle	SH7986S	Third Party Vehicle. SGW6366B
Survey Location	48 TOH GUAN ROAD EAST #05-155 ENTERPRISE HUB	
Contact Person.	JIE REN	
Contact No.	62679916/ 86921244	Fax No. 62679313
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	CARCRAFTERS SINGAPORE 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: Monday, 11 February 2019 2:49 PM
To: 'CWS Motor Claims'; assignments
Cc: 'Karen Tan'; SUR
Subject: RE: SURVEY ASSESSMENT - D19000723MFSH/1
Attachments: CSFCI19001991T1qd3.pdf

Dear Karen,

Enclosed herewith preliminary advice of SGW 6366B.

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: Wednesday, 30 January 2019 12:16 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 - D19000723MFSH/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: CWS Motor Claims [<mailto:cwsmotorclaims@msfirstcapital.com.sg>]
Sent: Wednesday, 30 January 2019 9:42 AM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Karen Tan <karentan@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19000723MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.



Auto
Consultants
Pte Ltd

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

Your Ref: D19000723MFSH

Date: 11 February 2019

Our Ref: CS/FCI19001991/T1qd3

The Motor Claims Department
First Capital Insurance Ltd

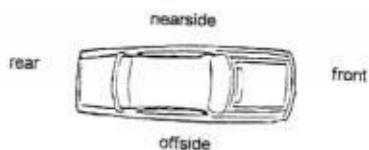
Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SGW 6366B.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 08/02/2019 at the premises of M/s CARCRAFTERS and have the following to report:-

Workshop Estimate Amount	: S\$ 1,600.00 .
Revised Estimate Amount	: S\$ 1,180.00 .
"Check" Items Amount	: S\$ - .
Market Value	: S\$ - .
LTA Reimbursement Value	: S\$ - .
Nett Value	: S\$ - .

Description of Damage:
The vehicle sustained damages
at the o/s rear portion.



Yours faithfully

Taufikh
Automotive Assessor

New TP

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.

estimate only ✓

ACCIDENT STATEMENT

Date Of Report	21/01/2019 11:48
Date Of Accident	18/01/2019 14:00
Exact Location Of Accident	ALONG MCE TOWARDS EXIT TO ECP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW6366B
Insured/Policyholder	
Name Of Registered Owner	SEKARAN S/O RENGIAH
NRIC No	S7200635F
Email Address	SEGAR@SEMURA.SG
Mobile Phone No	(LOCAL) +65-97777169
Alternative Phone No	OFFICE-97777169

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200ML-2.0 (A)

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 PRIVATE CAR

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MT/00450713
Cover Note Number	

Driver

Name of Driver	SEKARAN S/O RENGIAH
NRIC No	S7200635F
Date Of Birth	05/01/1972
Occupation	INDOOR
Date Of Driving Pass	10/02/1999
Driving Experience	19 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97777169
Fax Number	
Contact Number	OFFICE-97777169
Email Address	SEGAR@SEMURA.SG

Address	APT BLK 115 HOUGANG AVENUE 1 #02-1310 SINGAPORE 530115
Postcode	
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	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	2
Was any body injured in the Accident?	NO
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.	NO
Number of Passengers (Including Driver)	5
Passenger 1	NAME: : WIFE GENDER: : FEMALE
Passenger 2	NAME: : COLLEAGUE GENDER: : FEMALE
Passenger 3	NAME: : COLLEAGUE GENDER: : FEMALE
Passenger 4	NAME: : COLLEAGUE GENDER: : FEMALE

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.

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	SH7986S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 0635F

Vehicle Details

Vehicle No.: SGW6366B
Vehicle to be Exported: No
Intended Deregistration Date: 19 Jan 2019
Vehicle Make: MERCEDES BENZ
Vehicle Model: E200ML AUTO
Primary Colour: Beige
Manufacturing Year: 2000
Engine No.: 11195732053239
Chassis No.: WDB2100482B242836
Maximum Power Output: -
Open Market Value: \$44,312.00
Original Registration Date: 27 Nov 2000
First Registration Date: 27 Nov 2000
Transfer Count: 4
Actual ARF Paid: \$62,037.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Apr 2019
COE Category: E - Open Category
COE Period(Years): 10
PQP Paid: \$3,162.00
COE Rebate Amount: \$88.00
Total Rebate Amount: \$88.00

The information contained herein is correct as at 19 Jan 2019

OK



Contact us at
 Hotline: (65) 6532 2888
 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
 Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00450713
Type of Coverage / Driver Plan	: Car Third-Party Fire and Theft (Value Plan)
1) Vehicle Registration No.	: SGW6366B
Chassis No.	: WDB2100482B242836
2) Name of Policy Holder	: SEKARAN S/O RENGIAH
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 23/01/2018 14:45
4) Date/Time of Expiry of Insurance	: 30/04/2019 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) Any person who is named on the policy who is driving on the Policyholder's permission.	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 [Malaysia], are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 1,000.00 (before any applicable GST)
Windscreen Excess	: Not Applicable (before any applicable GST)
Choice of workshop	: DirectAsia approved workshops
Finance company / Hire Purchase	:
Main driver	: SEKARAN S/O RENGIAH
Ref	Named Driver
Named driver (1)	SANDRA D/O CHOCKALINGAM
Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.	

Accident Toolkit

Sketch plan

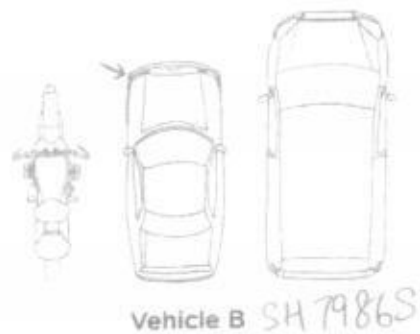
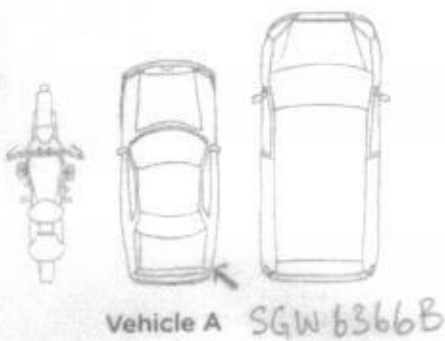
Sketch of accident scene:

Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

If safe, please take photos or videos from all angles.



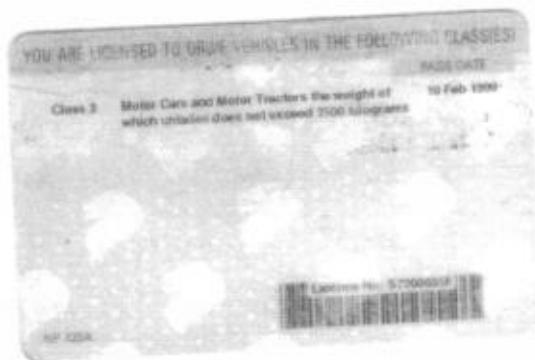
Please indicate on vehicle A (your vehicle) and, vehicle B (third party vehicle), the point of impact and area(s) of visible damage with an arrow.



Call us direct
Customer Care
6665 5555
Claims Support 24/7 Hotline
6532 1818
+65 6803 3699 (from overseas)



Sketch Plan #4 Pg. 1



Owner & Driver: Sgw 63668





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
4 Raffles Quay #18-00 Singapore 042580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: S66530006 / GST Reg. No: S4400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MVA619009525 Vehicle Registration No: SGW 6366B
Name (as shown in NRIC): SeKaran S/O Rengiah NRIC/FIN/Passport No: S7200 635F
(*Vehicle Driver/ Vehicle Owner) (*) Please delete as appropriate
Address: Apt B1K 115 Hougang Avenue 2 # 02-1310 Singapore (S30) 115
Contact (Tel): _____ Mobile No: 97777169
Email Address: sekar@semora.sg
Date of Accident: 13/01/2019 Time of Accident: 14:00 Hrs
Place of Accident: Along MLE Towards Exit to ECP
Insurance Company: Direct Asia Insurance

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

It should not be reporting, it should be a third party claim

Policyholder / Driver's Signature
Date: 22/01/2019

Reporting Centre Personnel's Signature
Name: Mrs. Jieren
NRIC/FIN No: S95026407
Date: 22/01/2019



CarCrafters Singapore Pte Ltd

48 Toh Guan Road East

#05-155, Enterprise Hub

Singapore 608586

Repair Estimate

Tel: 6267 9916

Fax: 6267 9313

www.carcrafters.sg

Date : 26-Jan-2019

Vehicle Num : SGW6366B

Make/Model : MERCEDES BENZ E200ML

Chassis No : WDB2100482B242836

S/N	PARTS	QTY	PRICE	TOTAL
1	LH REAR PROTECTIVE STRIP RH	1	\$ 190.00	\$ 190.00
2	LH REAR MOULDING RH	1	\$ 160.00	\$ 160.00
<div style="border: 1px solid black; padding: 5px;"> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • 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 <p>Acknowledged by Repairer Signature: Date:</p> </div>				
TOTAL PARTS				\$ 350.00
TOTAL AMOUNT				\$ 350.00
MISCELLANEOUS ITEM				
LABOUR				
1	To remove/ replace/ refit & panel beat of LH rear side fender rear bumper, LH rear protective strip and LH rear moulding		\$ 800.00	\$ 400. 800.00
2	To putty & respray of LH rear side fender, rear bumper, LH rear protective strip		\$ 400.00	\$ 400.00
3	To check accident affected wiring system & recover.		\$ 50.00	\$ 30. 50.00
TOTAL				\$ 1,600.00
GST 7%				\$ 112.00
GRAND TOTAL				\$ 1,712.00

Tanpin 17495749 / 67418434

'WP' 8/2/19 1130

Resurvey after repair

* Check repair limit

13-4 days

sur @ lkkauto.com



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/FCI19001991/T1qd3s2

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 18-06-2019



Code : FCI2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SH 7986S	Veh. Inspected	SGW 6366B
Policy No.		Coverage (\$)	0.00
Claim No.	D19000723MFSH	Excess (\$)	0.00
Assign From	KAREN TAN	Assign Date	30/01/2019

2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ E200	c.c	1998
Engine No.	HIDDEN	Year of Reg.	2000
Chassis No.	WDB2100482B242836	Colour	BEIGE
Odometer	399129	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	225/45R17	PIRELLI	6 mm
L/H Front Tyre	225/45R17	PIRELLI	6 mm
R/H Rear Tyre	225/45R17	PIRELLI	6 mm
L/H Rear Tyre	225/45R17	PIRELLI	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	18/01/2019	Inspection Date	08/02/2019
Survey held at	CARCRAFTERS SINGAPORE PTE LTD 48 TOH GUAN ROAD EAST #05-155 ENTERPRISE HUB SINGAPORE 608586		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 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 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGW 6366B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	RH REAR PROTECTIVE STRIP (SN)	CUT	190.00	190.00
1	RH REAR MOULDING (SN)	CUT	160.00	160.00
			350.00	350.00
LABOUR				
	TO REMOVE/REPLACE/REFIT & PANEL BEAT OF LH REAR SIDE FENDER, REAR BUMPER, LH REAR, PROTECTIVE STRIP AND LH REAR MOULDING.		800.00	400.00
	TO PUTTY & RESPRAY OF LH REAR SIDE FENDER, REAR BUMPER, LH REAR PROTECTIVE STRIP.		400.00	400.00
	TO CHECK ACCIDENT AFFECTED WIRING SYSTEM & RECOVER.		50.00	30.00
			1,250.00	830.00
GRAND TOTAL			1,600.00	1,180.00
RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE)				1,180.00

Report Ref No. CS/FCI19001991/T1qd3s2

MARKET VALUE: \$4,000.00

LTA: \$88.00

NETT VALUE: 3,912.00

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.