

Hwee Jie

REF: NTUL

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured _____

Policy No. _____

Claims No. _____

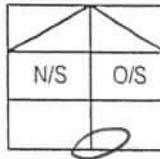
Sum Insured: _____ Excess: _____

(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 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No. SLQ 4070P Yr Regn: 7 Jul 2017

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

Truck / Trailer or _____

Make: Honda Vezel c.c. 1496

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

Sp. Reading: 98024 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: RU31213220

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: 215/60 R16

R: _____

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

TOYO / YOKO or _____

Front _____ Rear _____

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

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

D.O.A. 12/2/19 D.O.I. 14/2/19 @ 0209P

Survey held at World Auto

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
18/3/19	Confirmed P/P \$4340/- with 5 days of repair. - Hwee Jie Used: 4016.30, 48%
RECEIVED 19 MAR 2019	

Date/Time. File Pass to? : Preli. Report

1) 19/3 Typst : Final Report

Date/Time. File Return to?

2)

Report Format :

Lump Sum / I.B.I. (\$) TP 4340/-

Days Of Repair: 5

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)

) S + PS SI

) Photos

) Others

TOTAL

250

250

Nivitha (LKK Auto)

From: Daniel Koh <daniel.koh@income.com.sg>
Sent: Thursday, 14 February 2019 9:26 AM
To: 'assignments@lkkauto.com'
Cc: Teng Ken Leong; Thio Tse Kiat
Subject: FW: TP CASES FARMED OUT TO LKK ON 14/2/2019

Dear Veron / Nivitha,

Please assist to survey the vehicles as per Mr Teng's instruction :-

S/NO	THIRD PARTY	OUR INSURED	WORKSHOP / CONTACT	DOA / REF / OFFICER
1	GBC1437C	SMG4036E	BP AUTO / 62660555	30-1-2019 / MT-1030397-002 / Fiona Shen
2	SLQ4070P	SJP1689D	WORLD AUTO / Ainee 63621776	12-2-2019 / MT-1031899-001 / Fiona Shen

Please contact workshops.

Please ack.

Thank You

Daniel Koh
Senior Admin Assistant, Motor Insurance
T +65 6430 7901
www.income.com.sg



Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the

recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

Tokio Marine

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	13/02/2019 11:55
Date Of Accident	12/02/2019 09:05
Exact Location Of Accident	ANG MO KIO AVE 6
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLQ4070P
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62414992
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID (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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995071
Cover Note Number	
Driver	
Name of Driver	CHUA BAN HUAT
NRIC No	S1333658Z
Date Of Birth	29/07/1958
Occupation	OUTDOOR
Date Of Driving Pass	09/12/1977
Driving Experience	41 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98277252
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	NOADDRESS
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
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 ON COLLISION
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: : NONAME GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE ATTACHED SKETCH

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO OVERWRITTEN
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP1689D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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

CHUA BAN HUAT

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

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 willful 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 lodging 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, regulation, 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:
NIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

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/ID No.:

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20190212/7014

2 of 4

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190212/7014

CONTINUATION OF REPORT

Driver			
Name	XU SHAO HONG BERNARD		ID No. NIL
Related Vehicle	SJP1689D (Car)		Contact No. 81576524
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHUA BAN HUAT		ID No. S1333658Z
Related Vehicle	SLQ4070P (Car)		Contact No. 98277252
Hospital/Clinic	CANBERRA MEDICAL AESTHETICS		Class of Driving Licence & Expiry Date Class: 2,3,4 Date of Expiry: NIL
Date Treatment	12/02/2019	Date Discharge	12/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	CHUA TIONG GHEE		ID No. S9228461A
Related Vehicle	SLQ4070P (Car)		Contact No. 85116091
Hospital/Clinic	ACUMED MEDICAL GROUP		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	12/02/2019	Date Discharge	12/02/2019
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

ON 12/02/2019 , I WAS DRIVING VEHICLE SLQ4070P TRAVELLING ALONG LENTOR TOWARDS ANG MO KIO AVE 6 AROUND 0905 HRS WITH MY SON ONBOARD MY VEHICLE. WHILE ARRPROACH ANG MO KIO AVE 9 , DUE TO FRONT VEHICLE STOP FOR THE RED LIGHT , I ALSO STOP.

WITHIN SECONDS VEHICLE SJP 1689D HAD COLLIDED ONTO MY REAR OF MY VEHICLE . DUE TO THE STRONG IMPACT BOTH ME AND MY SON HAD A SHOCKED.

WE CAME DOWN AND EXCHANGE OUR PARTICULAR. AND WE MOVE OFF .

AFTER THE ACCIDENT ME AND MY SON WAS NOT FEELING WELL AND WE DO SEEK FOR MEDICAL ATTENTION .

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20190212/7014

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 4

Report No. T/20190212/7014

CONTINUATION OF REPORT

I WAS GIVEN 3 DAYS OF MC AND REQUIRED TO GO FOR AN X-RAY BY THE DOCTOR . MY SON AS WELL WAS INJURED AND WAS GIVEN MC.

Sketch Plan #6



SINGAPORE
POLICE FORCE



T/20190212/7014

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

4 of 4
Report No. T/20190212/7014

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
ONG YONG HOCK
Contact No.: 65476436

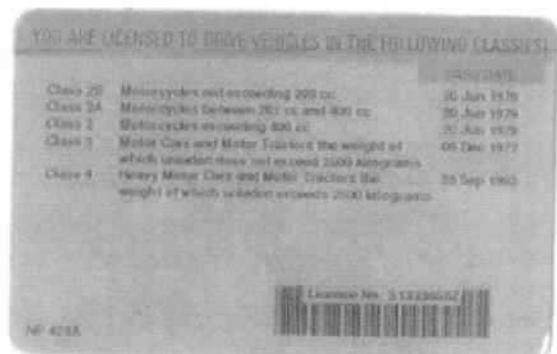
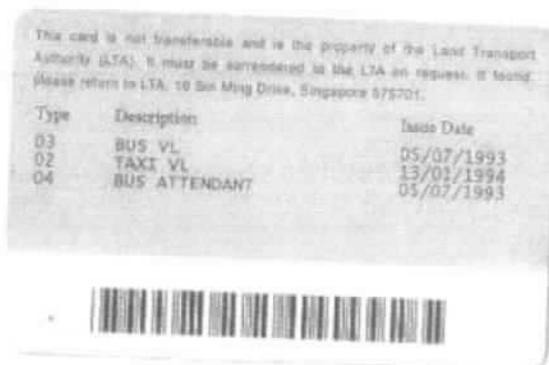
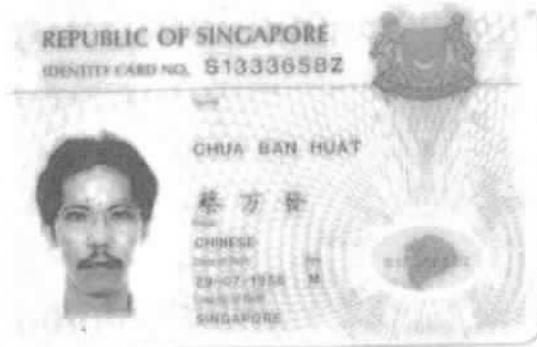
Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
12/02/2019 15:26

Classification Of Case:

Individual Statement



WORLD AUTO PTE LTD

47 Jalan Pemimpin #01-02/03
 Halcyon 2, S'pore 577200
 Tel No. : 6451 3933 Fax No. : 6455 7576
 E-Mail : worldaut@singnet.com.sg
 Website : www.worldauto.com.sg
 Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

TOKIO MARINE INSURANCE SINGAPORE LTD
 20 McCLLUM STREET,
 #09-01 TOKIO MARINE CENTRE 069046

Attention : Motor Claim Department
 Contact : 6221 6111 Fax No. : 6221 2101

Estimate : ES190069

Date : 13/02/2019
 Vehicle Num. : SLQ 4070P (LCR)
 Make/Model : HONDA VEZEL HYBRID
 Chassis/Eng# :
 Accident Date : 12/02/2019
 Claim No. :
 Reference :
 Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
LIST ITEMS :				
1.	1	REAR BOOT LID DEF	1100	4,250.00 ✓
2.	1	REAR BOOT HYBRID EMBLEM (VEZEL) NEC	56	89.00 ✓
3.	1	REAR BOOT VEZEL EMBLEM (VEZEL) NEC	56	89.00 ✓
4.	1	REAR WINDSCREEN GLASS MOULDING NEC	150	250.00 ✓
5.	2	REAR BOOT REFLECTOR LAMP NH	580.00	1,160.00 X
6.	1	REAR BOOT LOCK ASSY Svc		330.00 X
7.	1	REAR BOOT HAND GRIP COVER DEF		78.00 ✓
8.	1	REAR BUMPER DEF	760	900.00 ✓
9.	1	REAR END PANEL DO	700	860.00 ✓
10.	1	REAR END PANEL TOP GARNISH NH		260.00 X
11.	1	REAR BOOT WEATHER STRIP NH		180.00 X
List Total S\$:				5,446.00
20.00% Discount S\$:				1,089.20
				4,356.80
SPECIAL NETT ITEMS :				
1.	1	REAR WINDSCREEN SEALANT NEC	60	100.00 ✓
2.	1	REAR BUMPER CLIP NEC	30	40.00 ✓
3.	1	REAR END PANEL TOP GARNISH CLIPS NH		40.00 X
4.	1	REVERSE SENSOR Shorted	200	280.00 ✓
Special Nett Total S\$:				460.00
LABOUR :				
TRANSFER REAR BOOTLID MECHANISM AND ACCESSORIES				50 180.00 ✓
REMOVE & REFIT REAR WINDSCREEN GLASS				

CONTINUE / ...

WORLD AUTO PTE LTD

47 Jalan Pemimpin #01-02/03
 Halcyon 2, S'pore 577200
 Tel No. : 6451 3933 Fax No. : 6455 7576
 E-Mail : worldaut@singnet.com.sg
 Website : www.worldauto.com.sg
 Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

TOKIO MARINE INSURANCE SINGAPORE LTD
 20 McCLLUM STREET,
 #09-01 TOKIO MARINE CENTRE 069046

Attention : Motor Claim Department
 Contact : 6221 6111 Fax No. : 6221 2101

Estimate : ES190069

Date : 13/02/2019
 Vehicle Num. : SLQ 4070P (LCR)
 Make/Model : HONDA VEZEL HYBRID
 Chassis/Eng# :
 Accident Date : 12/02/2019
 Claim No. :
 Reference :
 Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
.		TO APPLY RUSTPROOFING/ TUFFCOATING TREATMENT TO REPLACED PARTS.	30	180.00 ✓
.		REMOVE ACCIDENT DAMAGED PARTS IN ORDER TO FACILITATE REPAIRS INCLUDING CUT/WELD, PANEL BEAT, STRAIGHTEN CHASSIS WHERE NECESSARY AND REPLACE ABOVE PARTS.	700	1,100.00 ✓
.		PUTTY AND SPRAY PAINT & ALL AFFECTED AREAS(INNER&OUTER)	600	1,000.00 ✓
.		TO CHECK REAR WIRES, CONNECTORS, REPLACE DAMAGED LAMPS REVERSE SENSORS AND START/STOP UNIT CAPACITORS	30	180.00 ✓
.		DEACTIVATE HV BATTERY SYSTEM IN ORDER TO FACILITATE REPAIRS AND REACTIVATE BACK SAME (HV HYBRID SYSTEM SAFETY PROCEDURES)	200	450.00 ✓
.		PERFORM WHOLE VEHICLE DIAGNOSTICS INCLUDING CLEARING FAULT CODES AND REINTIALISING HV HYBRID SYSTEM FOR POST REPAIRS. (HV HYBRID SYSTEM SAFETY PROCEDURES)	120	450.00 ✓
		Labour Total S\$:		3,540.00

E. & O.E.

Total S\$:

8,356.80

Total - \$4340

for WORLD AUTO PTE LTD

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:

[Signature]
 2/2/19
 Hwee Jia - LKK
 14/2/19
 E/P 5 days

[Signature]



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			
NTUC INCOME INSURANCE CO-OPERATIVE LTD		Ref : CS/INC19002766/Jtd3e2	
73 BRAS BASAH ROAD			
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
ATTN : FIONA SHEN		Date : 20-03-2019 Code : INC	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJP 1689D	Veh. Inspected	SLQ 4070P
Policy No.		Coverage (\$)	0.00
Claim No.	MT-1031899-001	Excess (\$)	0.00
Assign From	DANIEL KOH	Assign Date	14/02/2019
2. Vehicle Particulars & Condition			
Make & Model	HONDA VEZEL	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	RU31213220	Colour	BROWN
Odometer	98024	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/60 R16	MICHELIN	6 mm
L/H Front Tyre	215/60 R16	MICHELIN	6 mm
R/H Rear Tyre	215/60 R16	MICHELIN	6 mm
L/H Rear Tyre	215/60 R16	MICHELIN	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	12/02/2019	Inspection Date	14/02/2019
Survey held at	1 KRANJI LOOP		
Repairer	WORLD AUTO PTE LTD		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		5 Working 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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLQ 4070P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BOOT LID	DEFORMED	1,250.00	1,100.00
1	REAR BOOT HYBRID EMBLEM (VEZEL)	NECESSARY	89.00	56.00
1	REAR BOOT VEZEL EMBLEM (VEZEL)	NECESSARY	89.00	56.00
1	REAR WINDSCREEN GLASS MOULDING	NECESSARY	250.00	150.00
2	REAR BOOT REFLECTOR LAMP @\$580.00	NOT NECESSARY	1,160.00	-
1	REAR BOOT LOCK ASSY	SERVICEABLE	330.00	-
1	REAR BOOT HAND GRIP COVER	DEFORMED	78.00	78.00
1	REAR BUMPER	DEFORMED	900.00	760.00
1	REAR END PANEL	DENTED	860.00	700.00
1	REAR END PANEL TOP GARNISH	NOT NECESSARY	260.00	-
1	REAR BOOT WEATHER STRIP	NOT NECESSARY	180.00	-
	LESS 20% DISCOUNT		-1,089.20	-580.00
			4,356.80	2,320.00
<u>SPECIAL NETT ITEMS</u>				
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	100.00	60.00
1	REAR BUMPER CLIP (SN)	NECESSARY	40.00	30.00
1	REAR END PANEL TOP GARNISH CLIPS (SN)	NOT NECESSARY	40.00	-
1	REVERSE SENSOR (SN)	SHORTED	280.00	200.00
			460.00	290.00
<u>LABOUR</u>				
	TRANSFER REAR BOOTLID MECHANISM AND ACCESSORIES.		180.00	50.00
	REMOVE & REFIT REAR WINDSCREEN GLASS. (NPA)	NOT NECESSARY	-	-
	TO APPLY RUST-PROOFING / TUFFCOATING TREATMENT TO REPLACED PARTS.		180.00	30.00
	REMOVE ACCIDENT DAMAGED PARTS IN ORDER TO FACILITATE REPAIRS INCLUDING CUT / WELD, PANEL BEAT, STRAIGHTEN CHASSIS WHERE NECESSARY AND REPLACE ABOVE PARTS.		1,100.00	700.00
	PUTTY AND SPRAY PAINT & ALL AFFECTED AREAS (INNER&OUTER).		1,000.00	600.00
	TO CHECK REAR WIRES, CONNECTORS, REPLACE DAMAGED LAMPS REVERSE SENSORS AND START / STOP UNIT CAPACITORS.		180.00	30.00



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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	DEACTIVATE HV BATTERY SYSTEM IN ORDER TO FACILITATE REPAIRS AND REACTIVATE BACK SAME (HV HYBRID SYSTEM SAFETY PROCEDURES).		450.00	200.00
	PERFORM WHOLE VEHICLE DIAGNOSTICS INCLUDING CLEARING FAULT CODES AND REINSTIALISING HV HYBRID SYSTEM FOR POST REPAIRS. (HV HYBRID SYSTEM SAFETY PROCEDURES)		450.00	120.00
			3,540.00	1,730.00
GRAND TOTAL			8,356.80	4,340.00
RECOMMENDED COST OF REPAIRS (CONFIRMED)				4,340.00

Report Ref No. CS/INC19002766/Jtd3e2

ONG HWEE JIE

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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