

Assessment

ASS. REC. BY:

REF:

CS/AIG/19003/24/KSD3

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person):

Azlan

of

AIG

Date/Time:

15/2/19 @ 2:4pm

Estimated Cost:

Bill to:

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MY / CS

To Inspect Vehicle No:

SLF695X

Insured:

GBD3069M

at Workshop m/s

Green Motor

Tel:

6453 6111

of

176 Sin Ming Drive #02-03

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

30/8/2018

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

15/2/19 @ 3:17pm

Person Contacted:

Ah Hing

Vehicle:

☒ IN ☐ OUT

Date/Time	Action/Instruction ( / ) Estimate
	SLF695X - X
	GBD3069M - (CS/AIG/1802293E/RIP63 DOA. 17/12/18
26/2	11 Lyr @ 2250 email & carhm

ASS. REC. BY:

REF-

CS/AIA19003124/Ked3

**Special Instruction**

Surveyor

### ASSIGNMENT (Office)

From (Person): Azlan Syazairdin

AG

Date/Time

17/5/2019

**Estimated Cost:**

Bill for

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

To inspect Vehicle No:

SLF695Y

Insured:

GSD-3069M

at Workshop m/s

Guan Meter

Tel:

9742 6003

of 176 SIm #02-03

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A.

30/8/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

**H.O.D. Endorsement:**

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction ( ) Estimate
	QF698Y-X
	GAD3069M-X

ASS. REC. BY:

REF: AIG/Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s Chuan Motor

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.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Date / Time Action / Instruction

1 File pass to22/02/19 Continued HS \$ 2,250/- @ 2 days with Kenneth(\$1,563.84 Red - 41%)

RECEIVED 28 FEB 2019

Veh No: SLF 6854 Yr Regn: 06.10Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hyundai 145 c.c. 235PColour: M. Grey A/C: Insured / Std / NI / NASp. Reading: 153698 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KM14EC41CMB134274Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/55ZR17

R: \_\_\_\_\_

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

TOYO / YOKO or Nexen

Front \_\_\_\_\_

R/Bal. 7 mmL/Bal. 7 mmD.O.A. 30/8/18Survey held at 19/2/19

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

1st O/S

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

Date/Time, File Pass to?

28/02/191) Typ 4

Date/Time, File Return to?

7☐ : Prell. Report☒ : Final ReportDays Of Repair: 2Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S - RS - SI

Fees

Others

TOTAL

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

Report Format :

Lump Sum / I.B.I: (\$ 2,250/- HS)

## 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 ability.
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	06/09/2018 17:31
Date Of Accident	30/08/2018 14:40
Exact Location Of Accident	ANTHONY ROAD CARPARK NO.A0035 LOT NO.38
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF695X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YAM TAK HO
NRIC No	S6830202A
Email Address	MICHAEL.YTH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96874243
Alternative Phone No	OTHERS-96874243

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I45-2.4 GLS (A)
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-MV010626-R01
Cover Note Number	

### Driver

Name of Driver	YAM TAK HO
NRIC No	S6830202A
Date Of Birth	02/08/1968
Occupation	OUTDOOR
Date Of Driving Pass	26/05/1988
Driving Experience	30 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96874243
Fax Number	
Contact Number	OTHERS-96874243
Email Address	MICHAEL.YTH@GMAIL.COM

Address	BLK 3 QUEEN'S ROAD #08-163 SINGAPORE
Postcode	260003
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER ATTACHED

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD3069M
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	

**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:

6/9/15 17:51h

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name

NRIC/FIN No.:





**SINGAPORE  
POLICE FORCE**



T/20180831/2137

Police Station Of Origin:  
Bukit Timah N.P.C  
1 Duke's Road SINGAPORE 268914  
Tel No: 1800-4629999

1 of 3

Report No. T/20180831/2137

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/08/2018 19:17		Vide Report No.:		Station Diary No.: 104	
<b>Informant's Particulars</b>					
Name of Informant: YAM TAK HO			Address: APT BLK 3 QUEEN'S ROAD #08-163 SINGAPORE 260003		
ID Type / ID No.: NRIC NO / S6830202A			Contact No.: Home/Office: Mobile: 96874243		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 50	Date of Birth: 02/08/1968	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: FINANCIAL CONSULTANT			Driving Licence Information: Class: 3 Date of Expiry:		

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/08/2018 12:40	Type of Location: Car Park
Location:  ANTHONY ROAD  Anthony Road carpark no.A0035 lot no 38				
Weather:		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD3069M	Van	TOYOTA		Black		0
SLF695X	Car	HYUNDAI	I45 2.4 AT ABS AIRBAG 2WD 4DR GAS/D	Silver	Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20180831/2137

Police Station Of Origin:  
Bukit Timah N.P.C  
1 Duke's Road SINGAPORE 268914  
Tel No: 1800-4629999

3 of 3

Report No. T/20180831/2137

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:  
E /  
Staff Sgt NORMAN BIN JALAL

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
31/08/2018 19:17

Officer In Charge Of Case:  
TP / SINGAPORE  
SI / **ABDUL KAREEM BIN ABDUL HAGUE** SN 170  
Contact No.: 65476079

Classification Of Case:

Authentication Stamp  
NP158 SIGNATURE

源摩哆廠

# GUAN MOTOR WORKS

Business Regn. No: 081026001

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 H/P: 9742 6003

## REPAIR ESTIMATE FOR SLF695X

No.	Qty	List Items	
1	1	Front bumper	\$ 598.30 ✓
2	1	Front bumper RH fog lamp	\$ 156.30 ✗
3	1	Front bumper RH side retainer	\$ 18.00 ✓
4	1 set	Front bumpere clips	\$ 30.00 ✓
5	1	Front bumper inner foam	\$ 96.40 ✗
6	1	Front bumper inner reinforcement	\$ 340.30 ✗
7	1 set	Front fender under shield clips	\$ 30.00 ✗
8	1	RH headlamp	\$ 2,285.50 ✓
			\$ 3,554.80
Less 20%			\$ 710.96
Total :			\$ 2,843.84

	Labour	
1	Labour Charges for remove/refit, cutting/welding and replacement of damages.	\$ 400.00 2201
2	To putty and spray Spray Paintings charges.	\$ 500.00 2401
3	To check wirings and lightings.	\$ 30.00 201
4	To supply and apply anti rust treatment	\$ 40.00 ✗
Total :		\$ 970.00

Total Parts and Labour : \$ 3,813.84

Not Withdraw  
 Return After Paint  
 2 days  
 11 Sep @ 2250h

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:

## ...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	20 Feb 2019 <a href="#">Edit Reg</a>		15 Feb 2019 00:00 <a href="#">Edit Adj Rpt</a>	<b>\$2,250.00</b> <a href="#">Edit Estimates</a>	<b>\$2,250.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

  

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>									
Insured: <b>LIANHE HOUSE</b> , Co. Reg. No.: 53197328W									
Main Claimant: -									
Vehicle Reg. No.: <b>SLF695X</b>		Date of Loss: 30/08/2018 00:00 - :59 [98 Months and 14 Days From LTA Reg Date (Man Yr)]							
Claim Type: <b>TP / 2047157515SG</b>		Policy/Cover Note No.: 1700043174							
Vehicle Reg. No. (Insured): <b>GBD3069M</b>		Policy No. (Claimant):							
		Excess:							
Repairer: <b>Guan Motor Works (HQ)</b> 176 Sin Ming Drive #02-03 Sin Ming Autocare, 575721 Sin Ming - Tel: 64536111									
Handling Insurer: <b>AIG Asia Pacific Insurance Pte. Ltd. (Express)</b> - Tel: 65-6419-3000 ... [Handled by <b>Lee, Ming-Yao</b> ] MingYao.Lee@aig.com									
Adjuster: <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>KENNETH KONG</b> ] ... <b>[Final Rpt due 28/02/2019]</b>									
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
<ul style="list-style-type: none"> <li>AIG_SG (20/02/2019): No OI GIA Report</li> <li>AIG_SG (20/02/2019): Request to upload TP GIA Report</li> </ul>									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

\*SLF695X (2047157515SG)  
[GBD3069M]  
TP

Aug 30 2018 12:00AM  
[LIANHE HOUSE]  
Guan Motor Works

Upload Documents

Upload Photos

Compose New Letter

Upload Video

Upload Audio

View

View in Browser

Photos/Images					3 per page	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print	
1	28/02/19 13:21	General View		Load JPG		
2	28/02/19 13:21	General View		Load JPG		
3	28/02/19 13:21	General View		Load JPG		
4	28/02/19 13:21	General View		Load JPG		
5	28/02/19 13:21	General View		Load JPG		
6	28/02/19 13:21	General View		Load JPG		
7	28/02/19 13:21	General View		Load JPG		
8	28/02/19 13:21	General View		Load JPG		
9	28/02/19 13:21	General View		Load JPG		
10	28/02/19 13:21	Odometer Reading		Load JPG		
11	28/02/19 13:21	Chassis Number		Load JPG		
12	28/02/19 13:22	Reinspection Photo		Load JPG		
13	28/02/19 13:22	Reinspection Photo		Load JPG		
14	28/02/19 13:22	Reinspection Photo		Load JPG		
15	28/02/19 13:22	Reinspection Photo		Load JPG		

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

## 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/AIG19003124/KSD3Q2

Date: 01/03/2019

REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 1700043174  
 Claimant Vehicle No: SLF695X Insured Vehicle No: GBD3069M  
 Date of Loss: 30/08/2018 Nature of Claim: TP Claim No: 2047157515SG

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SLF695X  
 Make & Model: HONDA ACCORD, 2.0 (A) Engine No: G4KEAA402571  
 Reg. Date: 16/06/2010 (Man. Year: 2010) Chassis No: KMHEC41CMB134274  
 Colour: Metallic Grey Odometer: 153698 km  
 Engine Capacity: 2359 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: 215/55Z R17 Rear Tyre Size: 215/55Z R17  
 Front Left Side: Nexen 7 mm Rear Left Side: Nexen 7 mm  
 Front Right Side: Nexen 7 mm Rear Right Side: Nexen 7 mm

The above values represent the remaining tyre treads depth

<u>COST OF CLAIMS</u>	<u>Repairer's</u>	<u>Adjuster's</u>	<u>Difference</u>	<u>Diff %</u>
Parts	2,843.84	2,345.44	498.40	17.53
Miscellaneous Items	0.00	0.00	0.00	
Labour	970.00	480.00	490.00	50.52
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>3,813.84</b>	<b>2,825.44</b>	<b>988.40</b>	<b>25.92</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>2,250.00</b>		
<b>Nett Amount (S\$)</b>	<b>3,813.84</b>	<b>2,250.00</b>	<b>1,563.84</b>	<b>41.00</b>

INSPECTION

Date of Assignment: 15/02/2019  
 Date Inspected: 19/02/2019 Inspected At: Guan Motor Works (HQ)  
 176 Sin Ming Drive #02-03 Sin Ming  
 Autocare  
 Singapore 575721  
 Estimated Period of Repair: 2.0 days

Adjuster: KENNETH KONG

Manager: Hiew May Fung

*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

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER	Mtg Cracked	598.30 FL	*598.30 FL
2	1		*FRONT BUMPER RH FOG LAMP	Serviceable	156.30 FL	*- FL
3	1		*FRONT BUMPER RH SIDE RETAINER	Distorted	18.00 FL	*18.00 FL
4	1		*SET FRONT BUMPER CLIPS	Necessary	30.00 FL	*30.00 FL
5	1		*FRONT BUMPER INNER FOAM	Serviceable	96.40 FL	*- FL
6	1		*FRONT BUMPER INNER REINFORCEMENT	Repair	340.30 FL	*- FL
7	1		*SET FRONT FENDER UNDER SHIELD CLIPS	Not Necessary	30.00 FL	*- FL
8	1		*RH HEADLAMP	Cut	2,285.50 FL	*2,285.50 FL

F=Franchise part. L=ListItemDisc

<b>Sub Total (\$\$)</b>	<b>3,554.80</b>	<b>2,931.80</b>
<b>- List Item Discount on L Items 20.00/20.00% (\$\$)</b>	<b>710.96</b>	<b>586.36</b>
<b>Total Parts (\$\$)</b>	<b>2,843.84</b>	<b>2,345.44</b>

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	LABOUR CHARGES FOR REMOVE/REFIT ,CUTTING /WELDING AND REPLACEMENT OF DAMAGES	New	400.00	220.00
2	TO PUTTY AND SPRAY SPRAY PAINTING CHARGES	New	500.00	240.00
3	TO CHECK WIRINGS AND LIGHTINGS	New	30.00	20.00
4	TO SUPPLY AND APPLY ANTI RUST TREATMENT	New	40.00	0.00
Gross Labour Cost (S\$)			970.00	480.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >