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meun: Kalyin REF: CR NO	\$\\\\c19003397	M-1-		
<u> </u>	ASSIGNMENT	189361		
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timatedCost: Date:	Veh 170:	SHO 4537	B Yr Regn: 2004	22
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y incomit Rys 1837 804 1801 WV	Truck / 1	./		1 v v
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	Colour	BLe	A/C: Insu & d / Std	
sured: AL 8897L 1	Sp.Reading	B 77309	T/Radio: Ins 62d / Std	AHIMA
	Eng/No:			
- 36511914398-03	C/No:		41UMCA 8309	42
- MI / 1033 140 - 00L		od F 1 Poor Burn		
(Client's Record)		G / Jammed / Leaked		
Nake of Veh;	Brake: Inore	Set T Jammed / Leaked	/ Burnt or	
note of rell,		S/Rim 1-STOG/Rim o		
	Tyre Size;	F: 2	15/60KI6	
(Policy Condition)		R:	-	
Remark: The veh had commenced its N/S repair at the time of inspection.	BS / DUN / E		A & MIC / OHTSU / PIR I.SU	IMI /
1	TOYOTYOK	(0 or 1)	Nestlk	
Gal. or Market Value:	Front		Rear	
IDAC Accident Rport: Consistent? : Yes or No	R/8al.	:7 mm	R/Bal,	men
GIA / PR Seen: Consistent? : Yes or No	L/Bal.	F. Sullimm	L/Bal. 6	mm
Est Repairs: days Res.; Yes or No	D.O.A. 2	/2/19	D.O.I. 22/2/	lee
Lum Sum: % 3 Val.: Yes or No	Survey held	al C	DGE (Loya	149)
CA / REV / REP. / 24 HRS	Des. of Dam	ages: Frt / Rear / O/	S / N/S / U/C / Rooftop	
Vehic	cle: IN / OUT		s Kan.	
Dale;Person Contacted;	The U/C		dy Structure affected du	e ló collision
Date / Time Action / Instruction				
SHD 4837 B-X	¥		INC	
1/3/19 and 415 \$ 1050/	-		48	
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	513			
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Octofine File Pass 107 : Prell. Report	· Days Of R	epair:		
1) Typing V: Final Report	Resurvey	No. of Trip:	Survey Fee:	160
OstaTime, File Reluin lo?	gg004 100 Fe		Transportation:	
	Add Fee: :Site	e Insp (\$)S+RSSI	
2)	AUU 1 66.]. 311	3 11150		
2)		erview (\$) Pholos	
Report Format	: Inte) Pholos	

eBao Tech

GeneralClaim

Hello, NAC_PAYA_UBI_800601 Change Language · Change Password Log Out My Desktop **Policy Query** Notice of Loss 21/02/2019 00:05 Policy No. Date of Accident Vehicle No.(For Motor) FL8899L Certificate Number Search Certificate Number Policyholder Name Vehicle Policyholder NRIC Insured Object Commence Select Policy No. Product Cover Type Expiry Date No. Date YOUNG AZMAN BIN 5077294328-03 Third Party, Fire & Theft FL8899L 27/01/2019 26/01/2020 S6801149C GMC FL8899L 1 ABDUL RAHMAN

Continue

. Policy Information

Policy No.	5077294328-03	Policyholder Name	YOUNG AZMAN BIN ABDUL RAH	Policyholder NRIC	S6801149C
Certificate No.		V2675000000		34423	
Address	BLK 406 #03-269 CHOA CHU KA	NG AVENUE 3	SINGAPORE 680406		
Product Name	MOTORCYCLE INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	11/01/2019	Effective Date	27/01/2019 00:00	Expiry Date	26/01/2020 23:59
Third Party Excess	0	Own damage Excess	0	Windscreen Excess	
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	YEW HENG CREDIT ENTERPRISE	Agent Tel.	67437030	GST Flag	Y
Co- insurance Flag	No				
Open Policy Info					
Certificate Info					
	older Mailing Address				
Address 1	BLK 406 #03-269	Address 2	CHOA CHU KANG AVENUE 3	Address 3	SINGAPORE 680406
Address 4		Address Type	Singapore address	Post Code	680406
Unit No.		Related Policy Number	5077294328-03		
▶ Insure	d Object: FL8899L				
- Fudous	ements				

Continue

Cancel

TP Claims against NTUC Income: Follow-Through Survey

Date 4/3/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.
П	MT/1033740-002	COMFORT TRANSPORTATION PTE LTD	SHD 4537B	FL 8899L
7	MT/1033577-002	COMFORT TRANSPORTATION PTE LTD	SHC 3325H	SGB 8664M
æ	MT/1033786-002	COMFORT TRANSPORTATION PTE LTD	SHD 7119E	GBF 5149S
4	MT/1033788-002	COMFORT TRANSPORTATION PTE LTD	SH 8701R	SJR 5821B

COMFORTDELGRO ENGINEERING

A mamber of COMFORTDELGRO

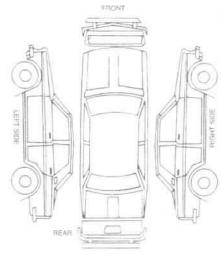
ComfortDelGro Engineering Pte Ltd

Date/Time: 21.02.2019 16:55

Page :

JOB CARD Team: ARC Repair TP(CLSO)1 Sales Order: JC NO.: 305271199 STOMER MILEAGE REGN NO .: SHD4537B COMFORT TRANSPORTATION PTE LTD VACS VMS FUEL MAKE: 7010045 HYUNDAI ISTOMER NO. E.....1/2... 383 SIN MING DRIVE DRESS MODEL DATE/TIME IN Singapore SINGAPORE 575717 SONATA 21.02.2019 14:35 65508755 YR OF MANU. 25.10.2012 (R) TARGET DATE (P) CHASSIS C COMPLETION DATE/TIME: KMHET41VMCA830472 SCOUNT CARD NO. JOB DESCRIPTION Accident Date: 21.02.2019 NATURE: 3P 21.02.2019 FRONT LABOR CODE S/NO DESCRIPTION

NTHC- Right Rear LEK/Kalmi-



IECKED & PASSED OUT BY: SERVICE ADVISOR CUSTOMER'S SIGNATURE owledgement Slip Exit Pass Vehicle No.: SHD4537B SHD4537B LARRY le No.: a of Service Advisor Signature/Date Name of Service Advisor Date returned to Service Reception upon collection To be kept by Security Guard

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

aloresaid.	
	ACCIDENT STATEMENT
Date Of Report	21/02/2019 15:52
Date Of Accident	21/02/2019 00:05
Exact Location Of Accident	BUKIT TIMAH RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD4537B
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	SONATA
Exact Purpose for which vehicle was being used time of accident	at
Are you claiming under your own insurance polic for repair to your vehicle?	y NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	
Driver	
Name of Driver	CHENG JOO HIONG
NRIC No	S0998075Z
Date Of Birth	18/06/1947
Occupation	OUTDOOR
Date Of Driving Pass	03/04/1968
Driving Experience	50 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81686659

NOEMAIL

Address

530 05-14 SERANGOON NORTH AVENUE 4

Postcode

550530

Was driver an employee of the Insured's Company NO

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 - HEAD TO REAR

OTHER - TAXI DRIVER

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

YES

Was any other material or property damaged? 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?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

HOUGANG NPC

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

SEE POLICE REPORT.

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

FL8899L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Page 2 of 20

Name

Approximate Age

Injuries Sustain

GIDDY

RIDER

Injured person in which vehicle?

FL8899L

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

Sketch Plan Pg. 1

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	1445			H		1
SCRIBE CIRCUMSTANCES OF THE ACCIDENT		Lat Janta	obac karden	od a solve o	da sela mi	
		1				
Refer: Police report attached	-t v			-		_
Coper, Tonce representation		-				_
1/20190221/2009						
1 20140 2711 2004					_	-
			(3-00)		_	
						_
at a second at						
CLARATION		o iln	110			
CLARATION le declare the foregoing particulars are true in every respect. 'FORT TRANSPORTATION PTE LTD		2/2/ ckson H C30	119	0	4200	





Police Station Of Origin:

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

Report No. T/20190221/2009

REPORTO	F A TRAFFIC	ACCIDENT			
	ne Report N 19 02:28	lade:	Vide Report No.: J/20190221/0003	Station Diary No.	
Informa	nt's Particu	ulars			
	Informant: JOO HION	G	Address: APT BLK 530 SERANGOON SINGAPORE 550530	NORTH AVENUE 4 #05-14	
ID Type NRIC NO	/ ID No.: D / S099807	75Z	Contact No.: Home/Office:	Mobile: 81686659	
National SINGAP	ty: ORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth: 18/06/1947	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupat Taxi driv			Driving Licence Information: Class: 3 Date of Expiry:		

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/02/2019 00:00	Type of Location Straight Road
Location: Along Road 1 BUKIT TIMAH near the vicin Weather:		Road Surface:	<i>P</i>	Road Speed Limit:
Clear		Dry		
		Traffic Control:		Traffic Volume:
Traffic Flow:		Not Controlled		Light

Details of V	ehicle Involve	d			HISTORY STATE	N. Sept. South of the
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FL8899L	Motorcycle					0
SHD4537B	Car	15.			Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

CONTINUATION OF REPORT

2 of 3 Report No. T/20190221/2009

Driver		CONCERNS.	Blue and the least of	S105500E	ral Server	TO BE SHOULD BE SHOULD BE SHOULD BE
Name	CHENG JOO HION	VG	MARIENA VII. T. M.A.	ID No).	S0998075Z
Related Vehicle	SHD4537B (Car)		-	Conta	act No.	81686659
Hospital/Clinic	NIL			Class Drivin Licend Expin	g	Class; 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 21/02/2019 at about 0000hrs, I was driving fmy vehicle - One blue Comfort Delgro Taxi (Registration Plate Number: SHD4537B). I had just dropped off a passenger at Maplewood Condominium located along Bukit Timah Road near to Tan Chong Motors. I had wanted to make a U-turn along the said road. I made a check and saw that traffic was clear as such, i proceeded to drive to U-turn road opening. As i proceeded to the U-turn opening, my vehicle was suddenly hit by a orange motorcycle (Registration Plate Number: FL8899L). The motorcycle as well as the rider fell to her right. As a result of the collision, my vehicle had damages on the my rear-right signal was damaged, the rear right region of my vehicle was scratched. I am not sure regarding the damages to the motorcycle.

Upon collision, i got out of my vehicle to make a check on the female rider (no particulars available) who was conscious at the time. The rider informed that she was giddy. A passerby had assisted and called for the ambulance. Ambulance made a check on her and admitted her to Ng Teck Fong Hospital. The traffic police also came to scene. The traffic police officer also took down the statement of the female rider before being conveyed. Traffic Police took down my statement and took my In-vehicle CCTV SD card. I was given a case number - J/20190221/0003 and was advised to lodge a police report at any nearest police station.

I am not sure whether the rider had any in-built CCTV. I am not sure whether the vicinity of incident location has CCTV which could have capture footage of the incident. I am not injured.

Sketch Plan Pg. 4





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

3 of 3 Report No. T/20190221/2009

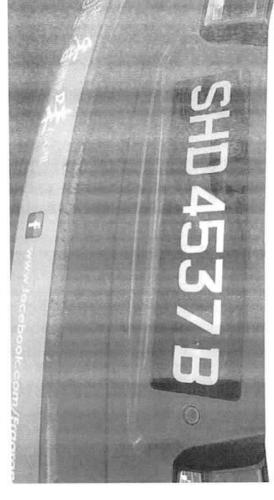
Sketch Plan

Informant is not able to provide sketch plan

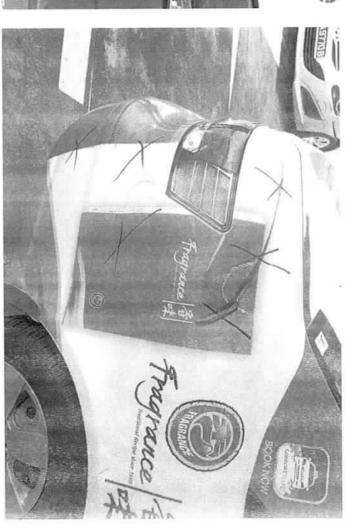
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

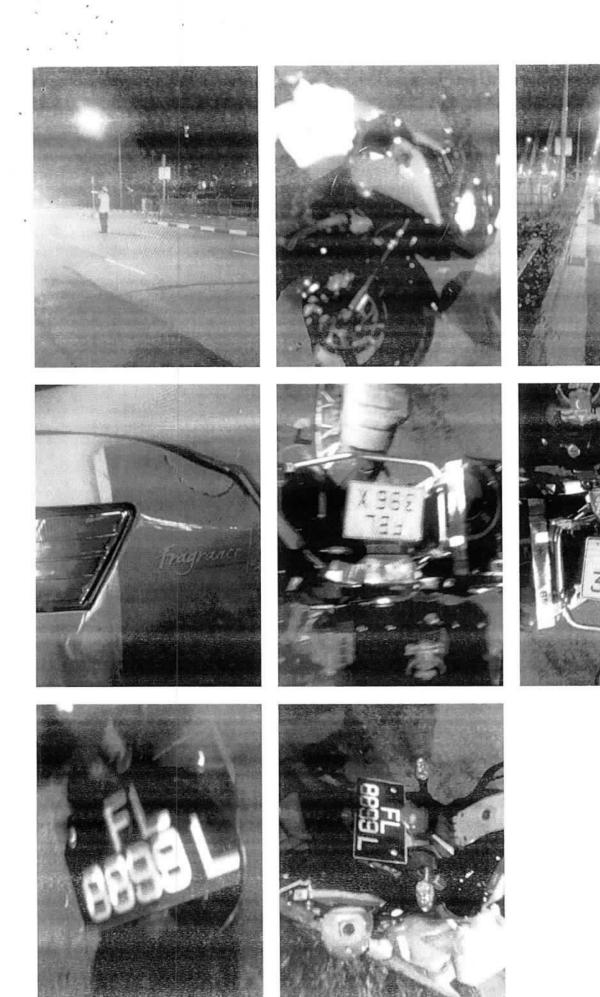
Signature Of Officer Recording The Report:	Signature Of Informant:
Sgt 2 MOHAMAD ZULHIZWAN AQMA BIN MOHD ZULKEFLEE	8 hung
Signature Of Interpreter: Not applicable	Date/Time:
	21/02/2019 02:28
Officer In Charge Of Case:	Classification Of Case:
TP / GIT /	
Staff-Sgt YAN MINGSHENG DANIEL Contact No.: 65476252	
St offer	
Authentication Stamp	
NP168 Signature:	











COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

VEHICLE NO: SHD 4537B

MAKE MODEL

· HVINDAL SONATA

DATE 21/2/2019 14:42

NTU C

IODEL	: HYUNDAI SONATA	1	sury	141
' Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper × Mah			\$ 578.40
	Rear Bumper Clip × 44			\$ 22.00
	Rear Bumper Protector (RH)			\$ 38.00
	Tail Lamp (RH)		\$ 344.00	\$ 688.00
	Rear Fender (RH)			\$ 1,935.90
	Rear Fender Inner Lining (RH)			\$ 74.10
	Rear Windscreen Moulding × 45			\$ 60.00
	rear windscreen woulding			\$ 00.00
	SUPTOTAL			6 2 207 40
	SUB TOTAL LESS 20%			\$ 3,396.40
				\$ 679.28
	DISCOUNTED TOTAL			\$ 2,717.12
	Rear Bumper Advertisement Logo			\$ 50.00 N
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00 N
	Rear Fender Comfort Sticker (RH)			\$ 30.00 N
	Rear Windscreen Sealant 🗶 🐴			\$ 46.00 N
	,			
				\$ 326.00
	Labour Charge			1100
	Panel Beating			\$ 800.00
	Spray Painting Charge			\$ 600.00 \$
	Wiring Charge			\$ 30.00 2
	Tuff Kote		and notify	\$ 50.00 X
	Remove/Refix Cushion & Upholstery Rear	การแปลกไร	lang:	\$ 150.00 5
	Remove/Refix Rear Windscreen Glass	onsultants foller of the following the follo	ance notify	
	TOTAL LABOUR	beloted par	It must up resurveyed and any from Insurance Company is its allowed.	\$ 120.00 }
	TOTAL A TO DISPIS	_A 30 C -		6 1750.00
	I L. I/I(II)	arty survivy is o	is it is allowed in must be resurveyed and in must be resurveyed and in must be resurveyed and in must be resurrence.	\$ 1,750.00
	Cath 1009 ESTIMATE TOTAL	nal mountary item	s is allowed It must be resurveyed and nonpany It must be resurveyed company It was the insurance company Epairer	6 4 702 12
	ESTIMATE TOTAL	plect to final at		\$\\ 4,793.12
	1 22/2/9 1020 45.	contedged by R	epairer	
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	All Dear alt.			
	Agree 194" F			
	17.			
	TOTAL LABOUR Calib 1000 ESTIMATE TOTAL 22/2/19 1020 hs. 3 hys. Uls Address This is an initial estimate based on a visual inspection of the	e above ve	chicle. The final repair of	uantum will
	V 4 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		200 12 140	

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

Page 1 of 1

COMFORTDELGRO ENGINEERING

1140	0002111			ENGINEERING		
Our Job Ref No 3052 Date : 01/				ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 50896		
ION F	ORM			Fax:	6546 8156	
				Fax:		
		/INI	_	, un		
	Course the Designation of the		— Date	of Accident	21.02.19	
	. 011043371	,		or Accident.	21.02.10	
and e	stimates of the re	pairs of the abov	e-mentioned	vehicle are a	s follows:-	
repair	job shall bill to:	NT	TUC		FL8899L	
finalize	ed amount shall b	e:		###		
51		diododini				
		rt Repair Cost			-	
, 0,,		r riopaii ooor		D.I.		
				131		
			ess: 20%	8	\$1,150.00	
		repairs:			is no reply from you	
shall tr in 7 w		mount as Corre	ct and Confi	rmed if there	is no reply from you estimates and	
shall tr in 7 w	reat the above ar orking days	mount as Corre	ct and Confi	rmed if there	*/ B 0	
shall tr in 7 w	reat the above ar orking days	mount as Corre	ct and Confi	rmed if there	*/ B 0	
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	repair finalize Spa Labo Tota Lum Tota	: SHD4537E and estimates of the re repair job shall bill to: finalized amount shall b Spare Parts after List Labour Charges Total for Part-By-Pa	KALVIN : SHD4537B and estimates of the repairs of the above repair job shall bill to: NT finalized amount shall be: Spare Parts after List discount Labour Charges Total for Part-By-Part Repair Cost Lumpsum Repair (if applicable)	KALVIN : SHD4537B Date and estimates of the repairs of the above-mentioned repair job shall bill to: NTUC finalized amount shall be: Spare Parts after List discount Labour Charges ### Total for Part-By-Part Repair Cost Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: 20%	KALVIN : SHD4537B Date of Accident: and estimates of the repairs of the above-mentioned vehicle are as repair job shall bill to: NTUC ### finalized amount shall be: Spare Parts after List discount Labour Charges ### Total for Part-By-Part Repair Cost Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: 20%	



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref:

National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H

NS/INC19003397/K1sd3e2



#05	BRAS BASAH ROA -01 NTUC TRADE 556	AD UNION HOUSESINGAPORE	Date: 05-03-2019 Code: INC4				
1.	The Control of	Policy Particulars	:- THIRD PARTY CLAIM				
	Insured Veh.	FL 8899L	Veh. Inspected	SHD 4537B			
	Policy No.	5077294328-03	Coverage (\$)	0.00			
	Claim No.	MT/1033740-002	Excess (\$)	0.00			
	Assign From		Assign Date	22/02/2019			
2.		Vehicle Parti	culars & Condition				
	Make & Model	HYUNDAI SONATA	c.c	1991			
	Engine No.	HIDDEN	Year of Reg.	2012			
	Chassis No.	KMHET41VMCA830472	Colour	BLUE			
	Odometer	877309	Steering	IN ORDER			
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM			
	General	FAIR					
3.		Conditi	ions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre	215/60 R16	WEST LAKE	7 mm			
	L/H Front Tyre	215/60 R16	WEST LAKE	7 mm			
	R/H Rear Tyre	215/60 R16	WEST LAKE	6 mm			
	L/H Rear Tyre	215/60 R16	WEST LAKE	6 mm			
4.	The Market St.		on of Damages	以下主题 的最后遗传。			
	THE VEHICLE SU	STAINED DAMAGES AT THE O/S	S REAR PORTION.				
	DAMAGES SEE D	ETAILS.					
5.	PART IS	Genera	Information				
	Accident Date	21/02/2019	Inspection Date	22/02/2019			
	Survey held at						
		59 LOYANG DRIVE SINGAPORE 508969					
5a.		Re	emarks	THE REPORT OF THE PARTY.			
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT PREJUDICE" BASIS. E HAVE NOT AUTHORISED F	REPAIRS.			
5b.		Estimate Days of Repair					
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	3 Working Days				



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315





ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4537B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	TO REPAIR SEE LABOUR	578.40	
10	REAR BUMPER CLIP	NOT NECESSARY	22.00	
1	REAR BUMPER PROTECTOR (RH)	TO REPAIR SEE LABOUR	38.00	
2	TAIL LAMP (RH) @\$344.00	CRACKED	688.00	688.00
1	REAR FENDER (RH)	TO REPAIR SEE LABOUR	1,935.90	
1	REAR FENDER INNER LINING (RH)	SERVICEABLE	74.10	
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	60.00	=
	LESS 20% DISCOUNT		-679.28	-137.60
			2,717.12	550.40
	SPECIAL NETT ITEMS			
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
1	REAR FENDER COMFORT STICKER (RH)(SN)	NECESSARY	30.00	30.00
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	-
			326.00	280.00
	LABOUR			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR BUMPER,REAR BUMPER PROTECTOR (RH) AND REAR FENDER (RH).		800.00	400.00
	SPRAY PAINTING CHARGE.		600.00	400.00
	WIRING CHARGE.		30.00	20.00
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX CUSHION & UPHOLSTERY REAR.		150.00	50.00
	REMOVE/REFIX REAR WINDSCREEN GLASS.	NOT NECESSARY	120.00	-
			1,750.00	870.00
	GRAND TOTAL		4,793.12	1,700.40

Report Ref No. NS/INC19003397/K1sd3e2





RECOMMENDED COST OF LUMP SUM REPAIRS
(TO ITS PRE-ACCIDENT CONDITION)
(CONFIRMED)

1,150.00

Report Ref No. NS/INC19003397/K1sd3e2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

L

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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