From (Perso Estimated Co	Cynthia tha		V (Office)	Da	de/Time 25/2/1909.54am
OD TP/W	VS/TP RES/OD RES/E	VA/INV/MY7CS	Bill to:		
To Inspect V at Workshop	chicle No:	SKP 5137	S	Insured	GBE 35047
of		1. 11 )	street 1	Tel	66619688
Policy No: Sum Insured:			Claim No:	M7/10	029 687-002:
Make of Veh (Client's Recor			EAMOSS:	D.C	DA 26/1/19 .
CA / REV Date/Time:	/ REP. / REV 24 HRS 10.02008) 25/2/10	erson Contacted:	Julien		I.O.D. Endorsement
Date/Time	Action/Instruction (V 8KP 51375- A CABE 3504	) Estimate	0		
×					

Sale WALLAND

Dute 25/2/19	Type M. Or / M. Gycla / Bus / Van / Lony / Taxt / Prime Mover /
Estimated Cost	Truck / Trailer or
OD (TP) WS/TP RES/OD RES/EVA/INV/MY	
to Inspect Vehicle No. SKP 5137S	(11559M 0)1)
at Workshopmis than thong  25D Sungai Kadut street 1	Colon S-Iva
25D Sungai Kadut Street 1	Spiriteaning 25 106
Insured: e <sup>r</sup>	Eng/No MNTBBAB17 20020219
Policy Ho	Gen Cond Good/Fair/Poor/Burnt
Claims No	Steering: Inord® / Jammed / Leaked / Burnt or
Sum lusured: Excess:	
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt &
Make of Voh. 10am-12pm	Modt: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 195/60 P16
(Policy Condition)	R:
Remark The veh had commenced its N/S O/S	1 DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or
Bat, or Market Value.	Front Rear
IDAG Accident Rport: Consistent? : Yes or No.	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen Consistent? : Yes or No	L/Bal. 6 , mm L/Bal. 6 mm
Est Repairs. days Res.: Yes or No	D.O.A. 26/1/17 D.O.I. 25/2/19 1131pm
Lum Sun: % 3 Val.: Yes or No	Survey held at Hua Hory
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Ligary O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	The U/C / Chassis frame / Elody Structure affected due to collision.
Date / Time Action / Instruction  27/08/19 Confirmed 45 \$ 3,457  (\$ 3,279.54 Red. 4  RECEIVED 1 2 SEP	mach
Date/line File Pass to/	Days Of Repair:
Onle/Time File Return to?	Resurvey No. of Trip:   Survey Fee: 250
Add Fe	e:   Site Insp (\$ . ) _ 5 <p\$ _="" st<="" td=""></p\$>
	Interview (\$ ) Pleas
Report Format	Tech toys (\$ ) offer 11

Nivitha (LKK Auto)

From:

Senta

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10.

Subject:

Daniel Koh; Teng Ken Leong; Thio Tse Kiat TP CASES FARMED OUT TO LKK ON 25/2/2019

assignments@lkkauto.com

Cynthia Ang «Cynthia Ang@income.com.sg» Monday, 25 February 2019 9:54 AM

Dear Veron / Nivitha,

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

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop WorkShop Name Address	WorkShop	Survey	Survey	OI Veh	DOA	Additional
					25D						
					SUNGEI						
					KADUT						
				HUA	STREET 1	Jerleen /			2		
		MT/1029687-		HONG	SINGAPORE	Mrs Tan /	Physical	10:00-			
н	Azhari 002	002	SKP51375	PTE LTD	729332	66619688	Survey	12:00	GBE3504T	26/01/2019	
					25D						
					SUNGE						
					KADUT	Yvonne					
	Eng			HUA	STREET 1	Toh /					
	Huey	MT/1033013-		HONG	SINGAPORE	1999	Physical				
	Huey	001	SMA44682	PTE LTD	729332	9688	Survey		SLP4002S	SLP4002S 20/02/2019	
					25D						
					SUNGEI	Yvonne					
					KADUT	Toh / Mrs					
	1000000			HUA	STREET 1	Tan/					
	Eric	MT/1032489-		HONG	SINGAPORE	6661	Physical	10:00-			
	Tang	001	SJW1043E	PTE LTD	729332	9688	Survey	12:00	XD5357H	XD5357H 12/02/2019	

# Please contact workshops.

Please ack.

www.income.com.sg 7 +65 6430 7900 Admin Assistant Cynthia Ang















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#### RE: SKP 5137S DOA - 26/01/2019

Ashley Tan <ashley@huahong.com.sg>

Mon 9/9/2019 6:29 PM

To: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Cc: SUR <sur@lkkauto.com>

Dear Shirley

Confirmed COR \$3450/-

#### Thanks & Regards Ashley Tan



**HUA HONG PRIVATE LIMITED** 25D SUNGEI KADUT STREET 1 SINGAPORE 729332 T. 6661 9690 | M. 9816 4151 | F. 6661 9699 Follow us @ huahong.com.sg







From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Sent: Wednesday, 28 August 2019 2:59 PM To: Ashley Tan <ashley@huahong.com.sg>

Cc: SUR <sur@lkkauto.com>

Subject: SKP 5137S DOA - 26/01/2019

Dear Ashley,

Please confirm final fig \$ 3,450.00 (lump sum) @ 5 days of repairs before GST.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

#### **LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

#### 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 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.

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AL	UП	-1-1	IIISI			

Date Of Report 28/01/2019 10:13

Date Of Accident 26/01/2019 06:30

Exact Location Of Accident ALONG BUKIT BATOK RD TWDS JURONG

Country/State of Loss SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number SKP5137S

Insured/Policyholder

Name Of Registered Owner WAN WOO MEI
NRIC No S2193855F

Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-92394722
Alternative Phone No OFFICE-92394722

Vehicle Particulars

Manufacturer NISSAN

Model SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR

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 NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5073401372-03

Cover Note Number

Driver

Name of Driver WAN WOO MEI

 NRIC No
 S2193855F

 Date Of Birth
 20/12/1941

 Occupation
 INDOOR

 Date Of Driving Pass
 04/03/1977

Driving Experience 41 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92394722

Fax Number

Contact Number OFFICE-92394722

EMail Address NOEMAIL

Address

103 CASHEW ROAD #12-04

Postcode

679674

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

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: NA

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 SKETCH PLAN

#### 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

**GBE3504T** 

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

LEE CHENG HUI

NRIC/Passport Number

S0709209A

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Accident Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
  - 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

1 Jevieen

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

#### Accident Sketch Plan Pg. 1

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  Accident Date & Time: 26   1 > 019 @ 206.50 am  Accident Location: \$\frac{1}{2}  Sator kind ownered to stop Bor circle light Accident to prepare to stop Bor circle light Just as I was closely down gently and rearry traffic light, at I hear a sound from length and velvice R collider on my cars grant end. My velvice "A" is SICP 51275. His rehicle "B" is GRE 25047.		*	
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☐ Reporting Only ☐ Own Damage ☑ Third Party ☐ Claim at other workshop (OD/TP)	☐ Repo	orting Only   Own Damage   Third	Party Claim at other workshop (OD/TP)
DECLARATION			
I/We declare the foregoing particulars are true in every respect.	I/We declare the foregoing parti	culars are true in every respect.	
	1	0	
Wast! Devlean	Wast	W.	Jevleon .
Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature	Policyholder's Signature		Reporting Centre Personnel's Signature
Date & Time: (If driver is not the policyholder) Name: Date & Time: NRIC/FIN No.:	Date & Time:		Name:



#### HUA HONG PRIVATE LIMITED

25D Sungei Kadut Street I Singapore 729332 Tel: (65) 6661 9688 Fax: (65) 6661 9699 Email: info@huahong.com.sg

#### **Estimate Repair List**

28 January 2019

HHTPClaims19-09

NTUC Income Cooperative Ltd 73 Bras Basah Road #05-01 NTUC Trade Union House Singapore 189556

Attn: Motor Claims Department

### ACCIDENT INVOLVING SKP 5137 S & GBE 3504 T ON 26/01/2019 ALONG BUKIT BATOK ROAD TOWARDS JURONG AT ABOUT 0630 HOURS

Insured

WAN WOO MEI

Vehicle Registration No

**SKP 5137 S** 

Vehicle Make

NISSAN

Vehicle Model

SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR

Vehicle Chassis No

MNTBBAB17Z0020219

Policy No

5073401372-03

Date of Accident	: 26/1/2019		Type of Clai	im: T	hird Party
S/N Quantity	Description		Unit Price S\$		Amount S\$
1 1	Rear Bumper Buc /	NETT		\$	453.60/
2 2	Rear Bumper Retainer (LH/RH) 1 NA)	NETT	\$ 48.50	\$	97.00×
3 1	Rear Bumper Foam (Center) RNX	NETT		\$	58.60×
4 2/	Rear Bumper Foam (LH/RH) 3 CRA-RH	NETT	\$ 58.60	\$	117.20 5
5 2	Rear Bumper Stay (LH/RH) \$ 00-PH	NETT	\$ 66.50	\$	133.00 60
	Rear End Panel D0/	NETT		\$	430.50 /
7 1	Rear End Panel Top Garnish DEF/	NETT		\$	125.30/
3 2	Rear Taillamp Panel (LH/RH) % NNX	NETT	\$ 263.20	\$	526.40×
21	Rear Taillamp (LH/RH) 3 GCR	NETT	\$ 285.30	\$	570.60 2
10 1	Rear Boot BUC /	NETT		\$	761.90/
1 1	Rear Boot Lock Shorted /	NETT		\$	85.60
12 2	Rear Boot Hinge (LH/RH) \$ NIU &	NETT	\$ 58.40	\$	116.80×
13 1	Rear Boot Weather Strip DEF/	NETT		\$	76.80 /
14 1	Rear Boot Chrome (Lower) NEC	NETT		\$	582.40 2
15 1	Rear Boot Chrome (Upper) NEC/	NETT		\$	182.20 /
16 1	Rear Emblem NEC/	NETT		\$	65.00 /
17 1	Rear Logo (SYLPHY) NEC/	NETT		\$	85.00 /
18 2	Rear Boot Lamp (LH/RH) 7 NN X	NETT	\$ 147.60	\$	295.20 ×
19 1·	Rear Boot Logo (XTRONIC CVT) NIEC	NETT .		\$	105.00
		1 20		\$	4,868.10
	3/3	1-50	Less 10%	\$	(486.81)
	- 10% 283	5-17 /	(A)	\$	4,381.29
20 10	Rear Bumper Clip	S/NETT	\$ 3.50	\$	NC 35.00 7
			Less 5%	\$	(1.75)
			(B)	\$	33.25



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### ACCIDENT INVOLVING SKP 5137 S & GBE 3504 T ON 26/01/2019 ALONG BUKIT BATOK ROAD TOWARDS JURONG AT ABOUT 0630 HOURS

Estimate Repair List for vehicle SKP 5137 S - Nissan Sylphy

Estim	ate Rep	pair List for vehi	cle SKP 5137 S - Nissan S	yipny			
E				(A+B)	Balance B/F	\$	4,414.54
11	1	Reverse Sen Rear Numbe		65/	NETT NETT	\$ \$	200.00 × 35.00 /
hanç ull s	ge rear	boot, rear LH/R	r panel, rear RH tail lamp p H tail lamp, rear LH/RH bo anel, rear RH fender and al	ot lamp, know	cking &	\$	1,000.00
о ре	erform w	vire checking	٠			\$	20.00
o di	smantle	& refit rear bur	nper sensor		1520/	\$	60.00
	ray rea		poot, rear end panel, rear t	yre floor pand	el and	\$	1,090.00
1			P-2748.87	e F	7% GST Total	\$ \$	6,729.54 471.07 <b>7,200.61</b>
	منا		L-1520 4333.87 L/S-3467.99 = 3450	(A	28/2 Hn	العا	Jia - Ck
	1.7	Claims Dept 39 9195		×		25/	2/19
		•	LKK Auto Consultants hen the Repairer of the followin To resurvey before/after spray To display damaged part(s) dui Parts prices are subject to con Third party survey is on a "With No illegal modification(s) is alle Supplementary item(s) must be is subject to final approval from	painting ring resurvey firmation hout Prejudice" basis lowed	•	- s	Solays.

6741 70

Acknowledged by Repairer

Signature: Date:



#### 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

## DAMAGE ASSESSMENT REPORT NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19003481/Esd3e2 73 BRAS BASAH ROAD Date: 16-09-2019 #05-01 NTUC TRADE UNION HOUSESINGAPORE

#05-01 18955		UNION HOUSESINGAPOR	RE	
	: AZHARI		Code: INC	
1.		Policy Particula	ars :- THIRD PARTY CLA	AIM
1	Insured Veh.	GBE 3504T	Veh. Inspected	SKP 5137S
	Policy No.		Coverage (\$)	0.00
	Claim No.	MT/1029687-002	Excess (\$)	0.00
- 1	Assign From	CYNTHIA ANG	Assign Date	25/02/2019
2.		Vehicle Pa	articulars & Condition	
	Make & Model	NISSAN SYLPHY	c.c	1598
	Engine No.	HIDDEN	Year of Reg.	2014
	Chassis No.	MNTBBAB17Z0020219	Colour	SILVER
	Odometer	25788 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.	William Box	Con	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	195/60 R16	BRIDGESTONE	6 mm
	L/H Front Tyre	195/60 R16	BRIDGESTONE	6 mm
	R/H Rear Tyre	195/60 R16	BRIDGESTONE	6 mm
	L/H Rear Tyre	195/60 R16	BRIDGESTONE	6 mm
4.		Descri	ption of Damages	

DAMAGES SEE DETAILS.

5.		Gene	ral Information	
	Accident Date	26/01/2019	Inspect Date / Time	25/02/2019 ( 11:31 AM )
	Survey held at	HUA HONG PTE LTD		
		25D SUNGEI KADUT STREE	T 1 SINGAPORE 729332	
5a.			Remarks	
	A)THE INSPECTION B)IN ACCORDANG	ON WAS CONDUCTED ON A'V CE TO YOUR INSTRUCTIONS,	VITHOUT PREJUDICE" BASIS WE HAVE NOT AUTHORISE	S. ED REPAIRS.
5b.		Estimat	te Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	5 Working Days	1



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#### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKP 5137S

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	BUCKLED	453.60	453.60
2	REAR BUMPER RETAINER (LH/RH) @\$48.50	NOT NECESSARY	97.00	-
1	REAR BUMPER FOAM (CENTER)	NOT NECESSARY	58.60	-
2	REAR BUMPER FOAM (LH/RH) @\$58.60	O/S CRACKED	117.20	58.60
2	REAR BUMPER STAY (LH/RH) @\$66.50	O/S DENTED	133.00	66.50
1	REAR END PANEL	DENTED	430.50	430.50
1	REAR END PANEL TOP GARNISH	DEFORMED	125.30	125.30
2	REAR TAILLAMP PANEL (LH/RH) @\$263.20	NOT NECESSARY	526.40	-
2	REAR TAILLAMP (LH/RH) @\$285.30	SCRATCHED	570.60	285.30
1	REAR BOOT	BUCKLED	761.90	761.90
1	REAR BOOT LOCK	SHORTED	85.60	85.60
2	REAR BOOT HINGE (LH/RH) @\$58.40	NOT NECESSARY	116.80	-
1	REAR BOOT WEATHER STRIP	DEFORMED	76.80	76.80
1	REAR BOOT CHROME (LOWER)	NECESSARY	582.40	273.00
1	REAR BOOT CHROME (UPPER)	NECESSARY	182.20	182.20
1	REAR EMBLEM	NECESSARY	65.00	65.00
1	REAR LOGO (SYLPHY)	NECESSARY	85.00	85.00
2	REAR BOOT LAMP (LH/RH) @\$147.60	NOT NECESSARY	295.20	-
1	REAR BOOT LOGO (XTRONIC CVT)	NECESSARY	105.00	105.00
	LESS 10% DISCOUNT		-486.81	-305.43
			4,381.29	2,748.87
	SPECIAL NETT ITEMS			
10	REAR BUMPER CLIP @\$3.50 (SN)	NECESSARY	35.00	30.00
1	REVERSE SENSOR (SN)	NOT NECESSARY	200.00	
1	REAR NUMBER PLATE (SN)	DEFORMED	35.00	35.00
			270.00	65.00

Report Ref No. CS/INC19003481/Esd3e2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	LABOUR			
	TO DISMANTLE, CUT & WELD REAR PANEL, REAR RH TAIL LAMP PANEL, DISMANTLE & CHANGE REAR BOOT, REAR LH / RH TAIL LAMP, REAR LH / RH BOOT LAMP, KNOCKING & PULL STRAIGHT REAR TYRE FLOOR PANEL, REAR RH FENDER AND ALL AREA AFFECTED BY ACCIDENT.		1,000.00	800.00
	TO PERFORM WIRE CHECKING.		20.00	20.00
	TO DISMANTLE & REFIT REAR BUMPER SENSOR.	NOT NECESSARY	60.00	-
	TO SPRAY REAR BUMPER, REAR BOOT, REAR END PANEL, REAR TYRE FLOOR PANEL AND LH / RH FENDER.		1,000.00	700.00
	33.000.3330		2,080.00	1,520.00
	GRAND TOTAL		6,731.29	4,333.87

RECOMMENDED COST OF LUMP SUM REPAIRS	3,450.00
(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)	

Report Ref No. CS/INC19003481/Esd3e2

CHEN TSUE YEE

**Automotive Assessor** 

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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