

Form 100

ASSIGNMENT

Surveyor: Hwa Jie

REF: CS/INC19006299/Jgd3et

per all instructions

ASSIGNMENT (Office)

From (Person): Annie Koh

of INC

Date/Time: 9/4/19 @ 4.24am

Estimated Cost:

Bill to:

OD (TP) WS / TP RES / OD RES / EVA / INV / MY / CS

To Inspect Vehicle No:

PA 84824

Insured:

FBN 53542

at Workshop no/

connect 3

Tel:

9850 9666

of

566 woodlands Rd (Menden Estate)

Policy No:

Claim No:

MT/1039440-001

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A:

22/3/19

10/4/19 @ 11.30am (OW)

CA / REV / REP. / REV 24 HRS

WJ

H.O.D. Endorsement

Date/Time: 10.37am @ 9/4/19

Person Contacted:

Winnie

Vehicle IN /

OUT

Date/Time	Action/Instruction (✓) Estimate
	PA 84824 - X
	FBN 53542 - X
05/7/19	submit prelim. report, - The vehicle has not send in for repair.

Surveyor Flora Lee

REF: INC

### ASSIGNMENT

From: Date: 11/4/19

Estimated Cost:

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

To Inspect Vehicle No: PA 84824

at Workshop m/s connect 3

of No. 566 Woodlands Road

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh: 11.15 am

(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: 5 days Res.: Yes or No

Lump Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (up)

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: PA 84824 Yr Regn: 22 Jan 2009

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

Truck / Trailer or

Make: Toyota Hiace C.C. 2982

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

Sp. Reading: 641783 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KDH2230005227

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: 195/R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 22/3/19 D.O.I. 11/4/19 1123am

Survey held at Connect 3

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

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

Date / Time Action / Instruction

Not repair yet

RECEIVED 05 JUL 2019

Date/Time, File Pass to?

05/7/19 ☒ : Preli. Report

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Survey Fee:

Transportation:

☐ S + RS, ☐ SI

☐ Photos

☐ Others

TOTAL

Report Format :

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

290

## Nivitha (LKK Auto)

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**From:** Annie Koh <annie.koh@income.com.sg>  
**Sent:** Tuesday, 9 April 2019 1:48 PM  
**To:** 'assignments@lkkauto.com'  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 09/04/2019

Hi LKK,

Please take note of the Olc and claim number for GBE6149R and SLK9014B.

1	FIONA SHEN	MT/0954065-002	GBE6149R	SIN SHENG ENGINEERING SERVICES	3 TECH PARK CRESCENT TUAS TECH PARK SINGAPORE 638129	Susan / 6863 9595	FBB4174X	15/7/17
5	JARED LIU	MT/1033601-002	SLK9014B	WORLD AUTO PTE LTD	1 KRANJI LOOP SINGAPORE 739535	Daniel / 63621776	SLC4150R	25/2/19

Warmest Regards

Annie Koh  
Senior Admin,  
Motor Insurance  
T +65 64307899  
[www.income.com.sg](http://www.income.com.sg)



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**From:** Annie Koh  
**Sent:** Tuesday, 9 April 2019 10:44 AM  
**To:** 'assignments@lkkauto.com' <assignments@lkkauto.com>  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 09/04/2019

Re-send

Warmest Regards

Annie Koh  
Senior Admin,  
Motor Insurance  
T +65 64307899  
[www.income.com.sg](http://www.income.com.sg)



## Nivitha (LKK Auto)

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**From:** Annie Koh <annie.koh@income.com.sg>  
**Sent:** Tuesday, 9 April 2019 2:20 PM  
**To:** Admin-D (LKKAuto); assignments  
**Cc:** SUR  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 09/04/2019

Hi LKK,

Please take note of the OIC and claim number for PA8482U\*\*

4	SERENE LIM	MT/1039440-001	PA8482U	CONNECT 3	566 WOODLANDS ROAD (MANDAI ESTATE)	Winnie Chai / 9850-9666	14:00- 16:00
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Warmest Regards

**Annie Koh**  
Senior Admin,  
Motor Insurance  
T +65 64307899  
[www.income.com.sg](http://www.income.com.sg)



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**From:** Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]  
**Sent:** Tuesday, 9 April 2019 2:01 PM  
**To:** Annie Koh <annie.koh@income.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** Thio Tse Kiat <tsekiat.thio@income.com.sg>; SUR <sur@lkkauto.com>; Teng Ken Leong <kenleong.teng@income.com.sg>  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 09/04/2019

Dear Annie,

Thank you for the assignment.

Please be informed that PA8482U (Connect 3) is not in the workshop, repairer arrange on 10/04/2019.

Best Regards,

**G.Nivitha** | Admin  
**LKK Auto Consultants Pte Ltd**  
Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

**From:** Annie Koh  
**Sent:** Tuesday, 9 April 2019 9:24 AM  
**To:** 'assignments@lkkauto.com' <assignments@lkkauto.com>  
**Cc:** Thio Tse Kiat <tsekiat.thio@income.com.sg>; Teng Ken Leong <kenleong.teng@income.com.sg>  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 09/04/2019

Dear LKK,

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

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA
1		PENDING ADVISE	GBE6149R	SIN SHENG ENGINEERING SERVICES	3 TECH PARK CRESCENT TUAS TECH PARK SINGAPORE 638129	Susan / 6863 9595		FBB4174X	15/7/17
2	AZHARI	MT/1039198-002	SLC6230E	VERMOGEN ACE PTE LTD	6 BENOI ROAD, SINGAPORE 629904	Pila / 6358 3031		SGY3323J	5/4/19
3	DAVID PHUA	MT/1039006-002	SMC166K	BP AUTO	48 TOH GUAN ROAD EAST #01-121 ENTERPRISE HUB SINGAPORE 608586	/ 6266 0555		SLQ4302X	4/4/19
4		PENDING ADVISE	PA8482U	CONNECT 3	566 WOODLANDS ROAD (MANDAI ESTATE)	Winnie Chai / 9850-9666	14:00-16:00	FBN5354Z	22/3/19
5		PENDING ADVISE	SLK9014B	WORLD AUTO PTE LTD	1 KRANJI LOOP SINGAPORE 739535	Daniel / 63621776		SLC4150R	25/2/19

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Annie Koh  
 Senior Admin Assistant, Motor Insurance  
 T +65 6430 7899  
[www.income.com.sg](http://www.income.com.sg)



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## 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.

## 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	08/04/2019 12:19
Date Of Accident	22/03/2019 17:45
Exact Location Of Accident	T-JUNC OF INTERNATIONAL RD & TRACTOR RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	PA8482U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AVIVA COACH SERVICES
Co Reg No	53265647D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	HIACE-3.0 COMMUTER GL (A)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	BUS
<b>Insurance Company</b>	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	GA363610
Cover Note Number	
<b>Driver</b>	
Name of Driver	OH SIZE CHUAN
NRIC No	S0516783C
Date Of Birth	13/05/1952
Occupation	OUTDOOR
Date Of Driving Pass	03/05/2010
Driving Experience	8 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-95879180
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 617 YISHUN RING ROAD #09-3264
Postcode	760617
Was driver an employee of the Insured's Company	YES
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 - MAJOR/MINOR RD
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?	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)	9

#### 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 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	FBN5354Z
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	
No. Of Passenger (Including Driver)	



**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 cited 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)

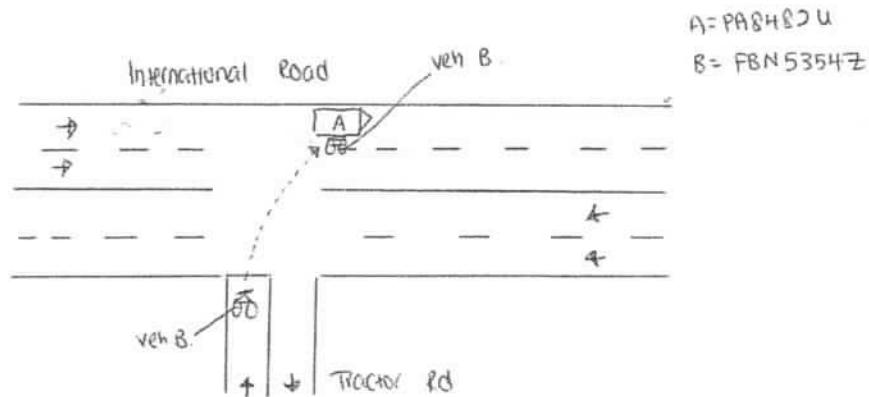
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22/03/2019 @ 17:45hrs, I was driving my bus PA8482U along International Rd (Major Rd) travelling straight when a motorcycle FBN5354Z which was turning out from Tractor Rd (minor road) hit onto my bus RH side portion.

<input type="checkbox"/> Claim own policy
<input type="checkbox"/> Claim third party
<input checked="" type="checkbox"/> Claim OD / TP at other workshop <u>Connect 3</u>
<input type="checkbox"/> For record purpose only
Policy No <u>GA 363610 / 1</u>
Insurer <u>AXA (F)</u> Veh No <u>PA8482U</u>

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/FIN No.:

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Business
Owner ID:	5647D
<b>Vehicle Details</b>	
Vehicle No.:	PA8482U
Vehicle to be Exported:	No
Intended Deregistration Date:	12 Apr 2019
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE COMMUTER GL 3.0 A
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	1KD1872941
Chassis No.:	KDH2230005227
Maximum Power Output:	-
Open Market Value:	\$47,771.00
Original Registration Date:	22 Jan 2009
First Registration Date:	22 Jan 2009
Transfer Count:	5
Actual ARF Paid:	\$2,389.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	21 Jan 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$14,086.00
COE Rebate Amount:	\$13,449.00
<b>Total Rebate Amount:</b>	<b>\$13,449.00</b>
<b>Message</b>	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 12 Apr 2019

OK

**CONNECT 3**

566 Woodlands Road ( Mandai Estate ) Singapore 728697

Tel: (65) 9850-9666 Email: Connect3winnie@gmail.com

R o c : 5 3 3 6 0 0 6 1 L

G S T : 5 3 3 6 0 0 6 1 L

QT19/PA8482U/TPC-442

**NTUC Income Insurance Cooperative Ltd**

1 Maritime Square

#10-01 Harbourfront Centre

Singapore 099253

**QUOTATION**

Dear Sir,

Cost of Repair to Vehicle PA8482U

With reference to the above-mentioned, we are pleased to quote as follows:-

No.	DESCRIPTION	QTY	U/PRICE (S\$)	AMOUNT (S\$)	
1.	Rear RH corner panel 00 /	1	157.50	157.50	
2.	Rear bumper Repair x	1	775.36	775.36	
3.	Rear bumper clips ne /	10	2.50	25.00	
4.	RH side panel Repair x	1	2,295.36	2,295.36	
5.	Sealant n n x	5	40.00	200.00	
6.	Labour to remove & refit RH side glasses to assist repair	1	300.00	300.00	X
7.	Labour to remove & refit upholstery seats & trims to assist repair	1	300.00	300.00	100
8.	Spray painting	1	1,000.00	1,000.00	800
9.	Labour charges	1	1,200.00	1,200.00	1000
SUB-TOTAL				S\$6,253.22	

- Price before 7% gst

Thank you.

Yours faithfully,

Winnie Chai



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:

12/4/19

Hwee Jie - LKK

11/4/19

L/S 5 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

**DAMAGE ASSESSMENT REPORT**

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19006299/Jqd3e2

73 BRAS BASAH ROAD

Date: 09-07-2019

#05-01 NTUC TRADE UNION HOUSESINGAPORE

189556



ATTN: SERENE LIM

Code: INC

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	FBN 5354Z	Veh. Inspected	PA 8482U
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1039440-001	Excess (\$)	0.00
Assign From	ANNIE KOH	Assign Date	09/04/2019

**2. Vehicle Particulars & Condition**

Make & Model	TOYOTA HIACE	c.c	2982
Engine No.	HIDDEN	Year of Reg.	2009
Chassis No.	KDH2230005227	Colour	SILVER
Odometer	641783 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	195 R15	MICHELIN	7 mm
L/H Front Tyre	195 R15	MICHELIN	7 mm
R/H Rear Tyre	195 R15	MICHELIN	7 mm
L/H Rear Tyre	195 R15	MICHELIN	7 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.  
DAMAGES SEE DETAILS.

**5. General Information**

Accident Date	22/03/2019	Inspect Date / Time	11/04/2019 ( 11:23 AM )
Survey held at	566 WOODLANDS ROAD		
Repairer	CONNECT3		

**5a. Remarks**

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

**5b. Estimate Days of Repair**

ESTIMATED NORMAL PERIOD FOR REPAIR:	5 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. PA 8482U**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR RH CORNER PANEL	DENTED	157.50	157.50
1	REAR BUMPER	TO REPAIR SEE LABOUR	775.36	-
10	REAR BUMPER CLIPS @\$2.50	NECESSARY	25.00	25.00
1	RH SIDE PANEL	TO REPAIR SEE LABOUR	2,295.36	-
5	SEALANT @\$40.00	NOT NECESSARY	200.00	-
			3,453.22	182.50
<b><u>LABOUR</u></b>				
	LABOUR TO REMOVE & REFIT RH SIDE GLASSES TO ASSIST REPAIR.	NOT NECESSARY	300.00	-
	LABOUR TO REMOVE & REFIT UPHOLSTERY SEATS & TRIMS TO ASSIST REPAIR.		300.00	100.00
	SPRAY PAINTING.		1,000.00	800.00
	LABOUR CHARGES. INCLUSIVE OF THE REPAIR OF REAR BUMPER AND RH SIDE PANEL.		1,200.00	1,000.00
			2,800.00	1,900.00
<b>GRAND TOTAL</b>			<b>6,253.22</b>	<b>2,082.50</b>
<b>RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE)</b>				<b>2,082.50</b>

Report Ref No. CS/INC19006299/Jqd3e2

**ONG HWEE JIE**

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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