

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

22/04/2019 10:18

JOB-NO: 50111586

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

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ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

VEHICLE DETAILS

LICENSE NO: SHC0924Z

TRANS: AUTO

CHASSIS: KMHLB41UMGU081073

MAKE / MODEL: HYUNDAI / i40

ENGINE: D4DFU566590

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

| DESCRIPTION                                    | QTY  | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|------------------------------------------------|------|--------------|----------|------------|-----|----------|-----------|
| <u>LABOUR</u>                                  |      |              |          |            |     |          |           |
| 1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS     | 1.00 | 500.00       | 0.00     | 500.00     |     | Y        | 200       |
| 2 TO RUST PROOFING ON ACCIDENT AFFECTED AREAS  | 1.00 | 150.00       | 0.00     | 150.00     |     | Y        | X         |
| 3 REMOVE & REFIX REVERSE SENSOR & CHECK WIRING | 1.00 | 120.00       | 0.00     | 120.00     |     | Y        | 30        |
| 4 RESPRAY REAR BUMPER + BUMPER LOWER           | 1.00 | 500.00       | 0.00     | 500.00     |     | Y        | 300       |
| 5 RESPRAY REVERSE SENSOR                       | 1.00 | 150.00       | 0.00     | 150.00     |     | Y        | X         |
| TOTAL:                                         |      | 1,420.00     | 0.00     | 1,420.00   |     |          |           |
| <u>MATERIALS</u>                               |      |              |          |            |     |          |           |
| 1 BUMPER REAR                                  | 1.00 | 698.33       | 139.67   | 558.66     | L   | Y        | de        |
| 2 BUMPER RETAINER REAR LH                      | 1.00 | 49.14        | 9.83     | 39.31      | L   | Y        | de        |
| 3 BUMPER SPONGE REAR                           | 1.00 | 150.15       | 30.03    | 120.12     | L   | Y        | 3         |
| 4 BUMPER REFLECTOR REAR LH                     | 1.00 | 42.50        | 8.50     | 34.00      | L   | Y        | de        |
| 5 BUMPER LOWER REAR                            | 1.00 | 253.40       | 50.68    | 202.72     | L   | Y        | de        |
| 6 BUMPER PROTECTOR PAD REAR                    | 1.00 | 180.00       | 0.00     | 180.00     | S   | Y        | de        |
| 7 REVERSE SENSOR                               | 1.00 | 250.00       | 0.00     | 250.00     | S   | Y        | X         |
| 8 BUMPER CLIPS SET REAR                        | 1.00 | 35.00        | 0.00     | 35.00      | S   | Y        | de        |
| TOTAL:                                         |      | 1,658.52     | 238.71   | 1,419.81   |     |          |           |
| TOTAL PARTS & LABOUR :                         |      | 3,078.52     | 238.71   | 2,839.81   |     |          |           |

EXCESS/LOADING:\$ 0.00

No. Of Day: 02

RE-SURVEY: BEFORE/AFTER PAINTING  
PART-BY-PART OR LUMP SUM: \$

DATE OF SURVEY: 23 / 4 / 19

SURVEYED BY: Tanfer

CONTACT NO: 97415747

FAX NO:

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED  
DAuto001

Ding Auto User 1

**CLAIM DETAILS**

| DESCRIPTION    | QTY | QUOTED COSTS | DISCOUNT | DISC PRICE | IND | SUR.DISP | REV PRICE |
|----------------|-----|--------------|----------|------------|-----|----------|-----------|
| ESTIMATOR      |     |              |          |            |     |          |           |
| STA AUTOCENTRE |     |              |          |            |     |          |           |
| TEL:           |     | FAX:         |          |            |     |          |           |

**LKK Auto Consultants hence notify the Repairer of the following:**

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts price are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modifications is allowed
- Supplementary items must be resurveyed **and** is subject to the approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: