

ASS. REC. BY:

REF: CS/FCI 19007875 | UV d3 12

Special Instruction:

Surveyor: Marcus

ASSIGNMENT (Office)

aws

From (Person): Hanny Kato of FCI Date/Time: 3.5.19 8.56a.m

Estimated Cost: Bill to:

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

To Inspect Vehicle No: 9U 5789G

Insured: SHC 0270B

at Workshop in/s Fastech Auto

Tel: 67465405

of 1 Kaki Bukit Ave 6 #01-46

Policy No:

Claim No: D19002923 MPCH

Sum Insured:

Excess:

Make of Veh:

D.O.A. 3.5.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

"wp"

H.O.D. Endorsement:

Date/Time: 6.5.19 730a.m

Person Contacted: Lina

Vehicle: IN/OUT

Date/Time	Action/Instruction Estimate (✓)
	GU 5789G-X
	SHC 0270B-X
7/5/19	Informed FCI pending workshop est from repairer by email
16/5/19	Email preli revised to FCI

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

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.

Bal. or Market Value:

IDAC Accident Rpt:

GIA PR Seen:

Est. Repairs:

Lum Sum:

Consistent?: Yes or No

Consistent?: Yes or No

days Res.: Yes or No

% 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time Action / Instruction

cve 31-3-2022 LTA 14190

16/5/19 2/5 \$6000 confirmed with Alan. (Ref 9862, 659)

Note MV: \$24K(EST) LTA: \$14,190 NV: \$9810

RECEIVED 16 MAY 2019

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 16/5 - typist

Report Format:

CWS

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

6000k)

Days Of Repair:

5

Resurvey No. of Trip:

2

Add Fee:

☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$

Survey Fee:

Transportation:

) \$ + RS. \$

) Photos

) Others

TOTAL

5x15=75

170+75

50

50+50

99

494



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: D19002923MFSH

Our ref: CS/FCI19007875/Uvd3

DATE: 16/5/2019

The Motor Claims Department
MS FIRST CAPITAL INSURANCE LTD

WITHOUT PREJUDICE

Dear Sir/Madam

INITIAL INSPECTION REPORT OF VEHICLE NO GU 5789G

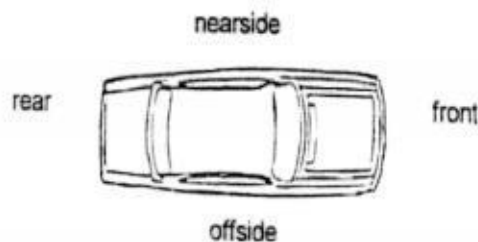
We thank for your instruction on 6/5/2019

Please be informed that we had conducted the inspection of the above mentioned vehicle on 3/5/2019 at the premises of M/s FASTECH AUTO PTE LTD

Workshop Estimate Amount	: S\$15,862.00
Revised Estimate Amount	: S\$6,000.00 (LUMP SUM)
"Check" Items Amount	: S\$
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

Description of Damage:

The vehicle sustained damages at the front n/s portion



Comments/Present Status:
Damages Consistent

Yours faithfully,

MARCUS CHUA
Licensed Appraiser

MOTOR SURVEY ASSIGNMENT

Date	03-05-2019	Our Ref No. D19002923MFSH
Accident Date	03-05-2019	Claim Type. Third Party
Insured Vehicle	SHC0270B	Third Party Vehicle. GU 5789G
Survey Location	1 KAKI BUKIT AVENUE 6 #01-46/48/50AUTOBAY	
Contact Person.	NANCY LAM	
Contact No.	67465405/ 0	Fax No. 67458520
Survey Type	WITHOUT PREJUDICE:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	FASTECH AUTO PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	HENRY KAO	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Thursday, 16 May 2019 4:24 PM
To: 'CWS Motor Claims'
Cc: 'Henry Kao Cai Jie'; SUR
Subject: RE: SURVEY ASSESSMENT - D19002923MFSH/1, GU 5789G
Attachments: GU 5789G PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle GU 5789G
Date of Survey: 3/5/2019
Number of days : 5 days

Best Regards,

Veron Chen | 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)

From: Veron Chen (LKKAUTO)
Sent: Tuesday, 7 May 2019 11:02 AM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>
Cc: 'Henry Kao Cai Jie' <HenryKao@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19002923MFSH/1, GU 5789G

Dear Sir/Madam,

Please be informed that we have inspected the vehicle GU 5789G on 3/5/2019.

We are pending estimate from repairer.

Best Regards,

Veron Chen | 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)

From: CWS Motor Claims [mailto:cwsmotorclaims@msfirstcapital.com.sg]
Sent: Monday, 6 May, 2019 8:56 AM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Henry Kao Cai Jie <HenryKao@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19002923MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

Best Regards,

Admin Team

Claim Workflow System

Motor Claims Department

MS First Capital Insurance Limited

Tel : 6507 3848

Fax : 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.

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Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

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

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To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Henry Kao Cai Jie <HenryKao@msfirstcapital.com.sg>
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Best Regards,
Admin Team
Claim Workflow System
Motor Claims Department
MS First Capital Insurance Limited
Tel : 6507 3848
Fax : 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.

- Game of Thrones
- Groomers Lab Paint Protection & Aesthetic Services
- How low can copycat china go? Fake disneyland

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Nissan Double-Cab Pickup (COE till 06/2021)

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NETLINK

Your Commercial Specialist

Specialized in New & Used Commercial Vehicles. Insurance. Hire Purchase. Scrap/Export

Price	\$25,800	Lifespan	21-Jul-2026
Depreciation	\$11,940 /yr	Reg Date	22-Jul-2006 (2yrs 1mth 27days COE left)
Mileage	159,000 km (12.4k /yr)	Manufactured	2006
Road Tax	N.A.	Transmission	Manual
Dereg Value	\$9,652 as of today (change)	OMV	\$18,225
COE	\$22,326	ARF	\$20,048
Engine Cap	2,664 cc	No. of Owners	1
Curb Weight	1,500 kg		

Type of Vehicle: [Truck](#)

Description

Cheapest In The Market! Low Mileage! 1 Owner Only! New Paint Colour Of Your Choice! Carryboy Hood Inclusive! Engine And Gearbox In Mint Condition! All Wear And Tears Replaced By Previous Owner! Selling As Vehicle Was Under Utilised! Insurance And Loan Available For Your One Stop Convenience! Attractive Loan Packages And High Trade In! Call Now! See To Believe Such A Well Maintained Vehicle!

Category

COE Car, Premium Ad Car

Status

Available

Resources



Car Valuation - Free

Find out the market value of your existing car for free. [Get started](#)



Vehicle Evaluation

Afraid of lemons? Request to have this car evaluated professionally. [Find out more](#)



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Seller Information

Company	Net Link Partners Pte Ltd » dealer's pricelist » 103 vehs sold 142 vehs available	
Address	71 Woodlands Industrial Park E9 #07-01, #08-08 Search cars nearby this location	
Location	Wave9	
Office No	67531661	
Contact Person (s)	Wilfred Lance Eugene Ng Jasmine	83803222 94561551 93270298 88686606

Posted on: 01-May-2019 | Last Updated on: 02-May-2019

Upfront Payment

» more Financial info

Transfer Fee \$25

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	5272H

Vehicle Details

Vehicle No.:	GU5789G
Vehicle to be Exported:	No
Intended Deregistration Date:	03 May 2019
Vehicle Make:	NISSAN
Vehicle Model:	PICKUP S/CAB
Primary Colour:	White
Manufacturing Year:	2001
Engine No.:	TD27674021
Chassis No.:	BD22010654
Maximum Power Output:	-
Open Market Value:	\$23,448.00
Original Registration Date:	07 Apr 2001
First Registration Date:	07 Apr 2001
Transfer Count:	3
Actual ARF Paid:	\$1,173.00

Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	31 Mar 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$24,394.00
COE Rebate Amount:	\$14,190.00
Total Rebate Amount:	\$14,190.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 03 May 2019

OK

> [Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details

Vehicle No. :	GUS789G
Vehicle Type :	B31 - Goods (Open) Lorry (Metal Body)/Pickup
Vehicle Attachment 1 :	With Hood
Vehicle Scheme :	Normal
Vehicle Make :	NISSAN
Vehicle Model :	PICKUP S/CAB
Chassis No. :	BD22010654
Propellant :	Diesel
Engine No. :	TD27674021
Engine Capacity :	2664 cc
Maximum Power Output :	-
Maximum Laden Weight :	2565 kg
Unladen Weight :	1660 kg
Year Of Manufacture :	2001
Original Registration Date :	07 Apr 2001
Lifespan Expiry Date :	06 Apr 2021
COE Category :	C - Goods Vehicle & Bus
PQP Paid :	\$24,394.00
COE Expiry Date :	31 Mar 2022
Road Tax Expiry Date :	30 Sep 2019
Inspection Due Date :	30 Sep 2019
Intended Transfer Date :	21 May 2019
CO2 Emission :	-
CO Emission :	-
HC Emission :	-
NOx Emission :	-
PM Emission :	-

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

You may print this page for reference.

OK

Print

Date of Accident : 3/5/11 Accident Time: 9.32am (24-HR-Format)
 Accident Place : Along in Teban Garden road towards
 Vehicle. No. (Car Plate No.) : G457896 Make/Model: Jury town Hall road
 Insurance Company : Ergo Policy No: DMFG18005014
 Owner or Company Name /IC No. : Precise Leasing Lte LTD / 201715272H
 Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : Narayanasing Govindasamy / 578851456
 DRIVER'S Date Of Birth : 16/1/1978 DRIVER'S License Pass Date 12/5/2004
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : Blk 35 Teban Gardens Road. #07-283 S60035
 DRIVER'S Contact No./ Alt No. : 1) 90275005 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : _____
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 1 Driver
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): NO

Other Party Driver's Particular (if any)

Vehicle. No: SHL 270B

Vehicle. No: _____

Vehicle Make/Model: _____

Vehicle Make/Model: _____

Name Driver: _____

Name Driver: _____

IC No. Driver/Contact: _____

IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

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:

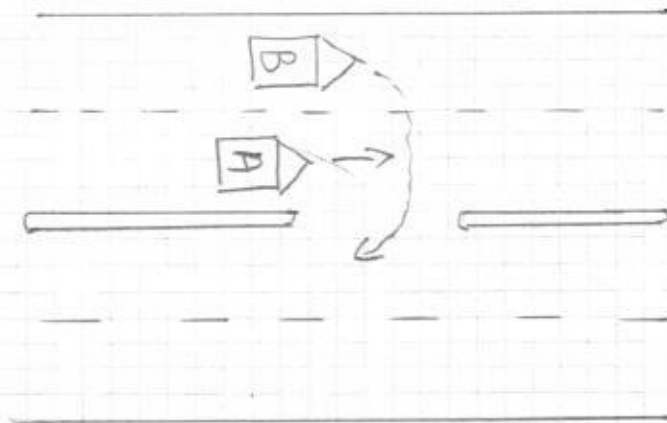
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



A - GUN5789G

B - SHC 270B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated date and time, I was driving my vehicle
I was travelling straight
A along Teban Garden Road. Suddenly vehicle B make
on u-turn and cause my car damages at the
front portion.

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.:

FASTECH AUTO PTE LTD
BLK1 KAKI BUKIT AVE 6
#01-46,48,50 AUTOBAY
SINGAPORE 417883

not Approved
2/5/19
6000/
3/5/19
5dy.

VEHICLE NO: GU 5789G

QTY	PARTICULAR (NETT ITEM)
1 PCS	BONNET
1 PCS	FRONT BUMPER
1 PCS	FRONT BUMPER TOP CHROME CENTRE
2 PCS	FRONT BUMPER SIDE CHROMES @\$650.00
1 SET	FRONT BUMPER CLIPS
1 PCS	FRONT APRON PANEL
1 PCS	FRONT GRILLE
1 PCS	FRONT GRILLE LOGO
1 PCS	SIDE LAMP N/S
1 PCS	HEADLAMP N/S
1 PCS	FRONT SUPPORT PANEL
1 PCS	FRONT FENDER N/S
1 PCS	FRONT FENDER INNER SHIELD N/S
1 SET	FRONT FENDER INNER SHIELD CLIPS N/S
1 PCS	FRONT DOOR N/S
1 PCS	FRONT LOWER ARM N/S
1 PCS	FRONT WHEEL HUB N/S
1 PCS	FRONT SHOCK ABSORBER N/S
1 PCS	FRONT TORSION BAR N/S
1 PCS	WIPER WASHER TANK
1 PCS	AIR CON CONDENSER

1	\$891.20	X
1	\$755.30	
1	\$950.00	
2	\$1,300.00	
1	\$50.00	
1	\$545.00	
1	\$688.20	
1	\$48.50	
1	\$175.00	
1	\$520.00	
1	\$745.30	
1	\$899.20	
1	\$295.30	
1	\$45.00	
1	\$1,120.00	X
1	\$566.00	X
1	\$650.00	X
1	\$325.00	X
1	\$495.00	X
1	\$288.00	
1	\$1,050.00	X
	\$12,402.00	

LABOUR CHARGES:

- TO CHECK WIRING
- TO DISMANTLE & REFIX CONDENSER RADIATOR
- TO REFILL AIRCON GAS
- TO CONDUCT WHEEL ALIGNMENT
- TO DISMANTLE & REPLACING FRONT UNDERCARRIAGE
- TO SPRAY RUST PROOFING
- LABOUR FOR PANEL BEATING & REPLACING PARTS
- TO PUTTY & SPRAY PAINTING

	\$80.00	30
	\$100.00	
	\$150.00	
1	\$150.00	X
1	\$300.00	X
	\$100.00	60
	\$1,080.00	700
	\$1,500.00	800
TOTAL	\$15,862.00	

Insurance Company must notify
in the event of the following:

- To not be repaired/sprayed
- To not be repaired/sprayed during survey
- To not be repaired/sprayed to confirmation
- To not be repaired/sprayed on a "without prejudice" basis
- To not be repaired/sprayed if it is allowed
- To not be repaired/sprayed if it is allowed
- To not be repaired/sprayed if it is allowed

Acknowledged by Repairer
Signature:
Date:

6464.30
102
5817.87
7507.87




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

Affiliated to Federation Internationale Des Experts En Automobile				
MS FIRST CAPITAL INSURANCE LTD		Ref : CS/FCI19007875/Uvd3n2		
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 21-05-2019		
		Code : FCI2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHC 270B	Veh. Inspected	GU 5789G	
Policy No.		Coverage (\$)	0.00	
Claim No.	D19002923MFSH	Excess (\$)	0.00	
Assign From	HENRY KAO	Assign Date	03/05/2019	
2. Vehicle Particulars & Condition				
Make & Model	NISSAN PICKUP (M)	c.c	2664	
Engine No.	HIDDEN	Year of Reg.	2001	
Chassis No.	BD22010654	Colour	BLUE	
Odometer	564832	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	165 R14	CST TIRES	6 mm	
L/H Front Tyre	165 R14	CST TIRES	6 mm	
R/H Rear Tyre	165 R14	CST TIRES	6 mm	
L/H Rear Tyre	165 R14	CST TIRES	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	03/05/2019	Inspection Date	03/05/2019	
Survey held at	FASTECH AUTO PTE LTD 1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883			
5a. Remarks				
A) DAMAGES CONSISTENT TO ACCIDENT REPORT. 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		



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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GU 5789G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BONNET (N)	TO REPAIR SEE LABOUR	891.20	-
1	FRONT BUMPER (N)	DENTED	755.30	688.00
1	FRONT BUMPER TOP CHROME CENTRE (N)	DENTED	950.00	915.00
2	FRONT BUMPER SIDE CHROMES @\$650.00 (N)	BENT / NECESSARY	1,300.00	900.00
1	SET FRONT BUMPER CLIPS (N)	NECESSARY	50.00	50.00
1	FRONT APRON PANEL (N)	BENT / BUCKLED	545.00	515.00
1	FRONT GRILLE (N)	CRACKED	688.20	622.00
1	FRONT GRILLE LOGO (N)	NECESSARY	48.50	48.50
1	SIDE LAMP N/S (N)	CRACKED	175.00	175.00
1	HEADLAMP N/S (N)	CRACKED	520.00	395.00
1	FRONT SUPPORT PANEL (N)	DENTED / BENT	745.30	745.30
1	FRONT FENDER N/S (N)	BUCKLED	899.20	811.00
1	FRONT FENDER INNER SHIELD N/S (N)	TORN	295.30	266.50
1	SET FRONT FENDER INNER SHIELD CLIPS N/S (N)	NECESSARY	45.00	45.00
1	FRONT DOOR N/S (N)	TO REPAIR SEE LABOUR	1,120.00	-
1	FRONT LOWER ARM N/S (N)	NOT NECESSARY	566.00	-
1	FRONT WHEEL HUB N/S (N)	NOT NECESSARY	650.00	-
1	FRONT SHOCK ABSORBER N/S (N)	NOT NECESSARY	325.00	-
1	FRONT TORSION BAR N/S (N)	NOT NECESSARY	495.00	-
1	WIPER WASHER TANK (N)	DENTED	288.00	288.00
1	AIR CON CONDENSER (N)	NOT NECESSARY	1,050.00	-
	LESS 10% DISCOUNT		-	-646.43
			12,402.00	5,817.87
LABOUR				
	TO CHECK WIRING.		80.00	30.00
	TO REFILL AIRCON GAS. }		150.00	100.00
	TO DISMANTLE & REFIX CONDENSER RADIATOR. }		100.00	-
	TO CONDUCT WHEEL ALIGNMENT.	NOT NECESSARY	150.00	-

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LKK Auto Consultants Pte Ltd

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO DISMANTLE & REPLACING FRONT UNDERCARRIAGE.	NOT NECESSARY	300.00	-
	TO SPRAY RUST PROOFING.		100.00	60.00
	LABOUR FOR PANEL BEATING & REPLACING PARTS.INCLUSIVE OF THE REPAIR OF BONNET AND FRONT DOOR N/S.		1,080.00	700.00
	TO PUTTY & SPRAY PAINTING.		1,500.00	800.00
			3,460.00	1,690.00
GRAND TOTAL			15,862.00	7,507.87
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				6,000.00

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MARKET VALUE: \$24,000.00 (EST)-LTA REIMBURSEMENT VALUE: \$14,190.00=NETT VALUE: \$9,810.00

CHUA KANG SENG

Licensed Appraiser

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