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ole No:	8JC 3516	SA SA	Insured:	SLP	46261	
			Tel:	9815	4655	2
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		_ Excess:				
			D.O	A_ 12	15/2019	
EP. / REV 24 HI	RS		2)	5 2014 0 10 .O.D. Endorsem	oan-12pm	
moltislia	Person Contacted:	David		IUO) AL-sk	9)	
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	REF AGI		0			-
ASS. REC. BY:		SICHMENT				
	1	SIGNMENT		1	10	17
From: Date	32.5.7019	Veh No:	5JC3516A	Yr Regn: /	9'	/
Estimated Cost:		Type: M.Carl	M.Cycle / Bus / Van / L	orry / Taxi / Prime M	lover/	
OD (TP) WS / TP RES / OD RES / EVA / I	NV/MV	Truck /	Trailer or (A)	6 (0)		
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at Workshop m/s HUP Motor		Colour	5. her	A/C: Insured	/ Std / NI /	NA
of Bir 9 004 Tampinuse S	93 # 01-120	Sp.Reading	47333	T/Radio: Insured	/Std/NI/	NA
Insured:		Eng/No:	(11/			
Policy No.		C/No:	JIEKB.	36 H 20JO	00 4	9/
Claims No.		Gen. Cond: G	ood / Fair / Poor / Burn	t		- 1
Sum Insured: Exce	SS:	Steering: Iner	der / Jammed / Leaked	/ Burnt or	ā.,	
(Client's Record)		Brake: Infor	der/Jammed/Leaked	/ Burnt or	(A) (A) (A)	
Make of Veh: 10.00 - 12	wp.m	Modi: Nil /	S/Rim / STD A/Rim of		0	15
		Tyre Size:	F: 23	5-/55-0	214	
(Policy Condition)			R:	-/	V	2000
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11	nt? : Yes or No	L/Bal.	G / mm	L/Bal.	5,	mm
3	s.: Yes or No	D.O.A. 17	15/18	D.O.I. 22/	0/18	7
	/al.: Yes or No	Survey held at			11	
* u	P" LTA 70967		ges: Frt / Rear LO/S	/ N/S / U/C / Roof	top or	
CA / REV / REP. / 24 HRS	Vehicle: IN / OU	1	L	r	010 8 .0000	
Date: Person Contacted:		The U/C /	Chassis frame / Body	y Structure affected	due to colli	sion.
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				TOTAL	250	

(08/11/13)

Nivitha (LKK Auto)

From:

lvy Ratilla <ivy.r@budgetdirect.com.sg>

Sent:

Friday, 17 May 2019 2:23 PM

To:

Admin-D (LKKAuto)

Cc:

SUR; Julie Mangubat

Subject:

Claim ref: C10003117/JM || OI- SLQ4626L (Black) TP-SJC3516A || Est: \$2419.95 ||

Hup Motor Trading

Attachments:

SJC 3516 A.pdf

Hi Team,

We would like to arrange TP Survey for SJC3516A. Please see below email for reference.

Kindly confirm.

Regards,

Ivy Admin Executive, Claims

T +65 6540 2185 F +65 6725 0853

E ivy.r@budgetdirect.com.sg



Claims +65 6221 2111 Claims +65 6221 2199 Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01 Singapore Shopping Centre Singapore 239924 budgetdirect.com.sq

auto 🗞 general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

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From: David Ang <hupmotor@gmail.com>

Sent: Friday, 17 May 2019 1:23 PM

To: Claims <claims@budgetdirect.com.sg>

Subject: RE: ACCIDENT ON: 12/05/19, INVOLVING CLIENT'S (SJC 3516 A) & YOUR INSURED (SLQ 4626 L) HIT & RUN

ALONG LOR LEW LIAN MULTI STOREY CAR PARK

Dear Sirs,

Attach our estimate bill, GIA third party insurer search fee, client's Police report, GIA report, insurance certificate & log card for your reference & attention,

Kindly assign your panel surveyor (LKK Auto Consultants Pte Ltd) to survey client's damaged vehicle On: 22/05/19 (at 10am to 12pm) as owner waiting, Please revert & confirm the survey assignment,

Kindly revert & confirm client's third party claims liability, reference & OIC, as we are looking for direct settlement,

Best Regards
David Ang
Tel: 6784 0039, Fax: 6784 0076, HP: 9815 4655
Mailing Address:
Hup Motor Trading & Service
Blk 9004 Tampines St 93
#01-120
Singapore 528838

Virus-free.	www.avg.com

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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	0401G
Vehicle No.:	SJC3516A
Vehicle to be Exported:	No
Intended Deregistration Date:	22 May 2019
Vehicle Make:	TOYOTA
Vehicle Model:	HARRIER G GRADE
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	8ARZ094195
Chassis No.:	JTEKB3GH20J000491
Maximum Power Output:	170.0 kW (227 bhp)
Open Market Value:	\$33,308.00
Original Registration Date:	17 Oct 2017
First Registration Date:	17 Oct 2017
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$38,632.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Oct 2027
PARF Rebate Amount:	\$28,974.00
Intended COE Rebate Details	
COE Expiry Date:	16 Oct 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,001.00
COE Rebate Amount:	\$41,993.00
Total Rebate Amount:	\$70,967.00

The information contained herein is correct as at 22 May 2019

OK

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 16/05/2019 10:43

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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	15/05/2019 08:33
Date Of Accident	12/05/2019 11:35
Exact Location Of Accident	LOR LEW LIAN MULTI STOREY CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJC3516A
Insured/Policyholder	
Name Of Registered Owner	YEO PHEK SUAN
NRIC No	S1650401G

 Mobile Phone No
 (LOCAL) +65-98388215

 Alternative Phone No
 OFFICE-90222511

Vehicle Particulars

Email Address

Manufacturer TOYOTA

Model HARRIER-2.0 (A)

Exact Purpose for which vehicle was being used at time of accident PARKED AT CARPARK

Are you claiming under your own insurance policy

for repair to your vehicle?

NO NO

NOEMAIL

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number CN851631

Cover Note Number

Driver

Name of Driver CHUA PENG CHEONG

 NRIC No
 \$1304528C

 Date Of Birth
 09/10/1958

 Occupation
 INDOOR

 Date Of Driving Pass
 08/01/1977

Driving Experience 42 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90222511

Fax Number

Contact Number

EMail Address NOEMAIL

Address

420 SERANGON CENTRAL #10-414

Postcode

550420

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

5

General Information of the Accident

Type Of Accident

COLLIDED INTO PARKED VEHICLE

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

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

NO

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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

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

SLQ4626L

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category

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. Rease report correctly the details of the socident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorized Oriver.
- 3. Information provided must be as prothful and accurate as possible. Any will disrepresentation or withholding of material facts may ellow insurance companies to repudiate policy liability.
- 4. The leave and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the inscrers 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 adjament of this report to the insurers, you hereby consent to the archiving of this report at the contre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Cata Protection Act (PDPA)

lunderstand, acknowledge, agree and consent that :

- (a) My insurer, my w prishop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal detailpersonal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Para onal information") and disclose and transfer such Personal information to all insurer(s) who have insured verticals) involved in this accident (all insurer(s) who have insured verticals) involved in this accident (all insurer(s) who have insured verticals) involved in this accident shall be collectively referred to as the "insurers"), the insurers law yers/law firms, the literatury Authority of Singapore and any relevant government agencylauthority (such as the police), for the purpose(s) of :
- (8) processing, handling another dealing with my claims including the settlement of the claims and any necessary investigations relating to
- (ii) investigating the accident anctor my claims;
- (6) 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 envelopmental
- (v) complying with applicable law in administering, processing, handling endor dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yersitem firms, may/are placed and decides 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 GA to their third party service provide (including their sew yersitemy firms), which may be seed outside of Singapore, for one or more of the above Purposes.

Driver's Signature (If driver is not the policyholder) / Date & Tirre Sketch Plan

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POLICE REPORT





1 of 3

Report No. T/20190513/2186

Police Station Of Origin: Serangoon N.P.C. 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129 Tel No: 1800-4880999

	- TO ACCU	ACCIDENT		THE SET WAS ASSESSED AND MALE OF THE SECOND OF THE SECOND		
Date/Time Report Made: 13/05/2019 21:44			Vide Report No.:	Station Diary No.: 109		
In forman	Parille	lare of the		1000年の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の		
Name of I YEO PHE	nformant:		Address: APT BLK 420 SERANGOON 0 550420	CENTRAL #10-414 SINGAPORE		
ID Type /	Type / ID No.: RIC NO / \$1850401G		Contact No.: Home/Office:	Mobile: 98388215		
Nationalit	The second secon		Email:	The second secon		
Sex: Female	Age: 54	Date of Birth: 04/09/1964	Type of Informant: Vehicle Owner			
Race: Chinese Occupation: OTHERS			Language:	Institution / School Name:		
			Driving Licence Information: Class: 3	Date of Expiry:		

ieneral infor	nation of the Accide	de la companya de la		Tune of Location
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/05/2019 11:35	Type of Location: LOR LEW LIAN
Location: LORONG LE	W LIAN ong Lew Lian (S) 5320	NO MACE		2 2 = 3
Weather:	ONG DEW LIGHT (O) COL	Road Surface:	R	oad Speed Limit
Traffic Flow:		Traffic Control:	T	raffic Volume:
Type of Colli	sion:	_ F	а	inyone conveyed by imbulance: lo

December 14	hice Invelved		Color Color	Condition	No of Passancer
SJC3516A	Car	Mako		(Count) and reserved to be be the	0

Carrier Co.	
Details of Person Involved	The Control Control Control of the Control Con
Any Pedestrian Involved: No No. of Pedestrians Injured: NIL.	Life of Parkening Consider NA
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Serangoon N.P.C

Report No. 1/20190513/2186

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

CONTINUATION OF REPORT

Tel No: 1800-4880999

Related Vehicle NIL Hospital/Clinic NIL		- VAIL:	i No.	98388215
Hospital/Clinic NIL	 	1		
	1	Class Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL
Date Treatment NIL	Date Disc			9

On 12/05/2019 at 1200hrs, I realized there was a letter placed on my vehicle, SJC3516A. The letter states "Hi, I withnessed your car being hit at the front bumper by another vehicle, SLQ4626L, A Nission(Need double check plate). May have footage of the incident. Can contact me at 91292126 if unable to claim. Regards". I then made a check on my vehicle and discover that there several scratches to my front bumper.

I then contact 91292126 and Mr Justin was on the line. Mr Justin informed that he had witness the incident and will whatsapped me the footage.

From the footage that I received, I discover that on 12/05/2019 at 1137hrs, vehicle SLQ4626L was reversing and the left front bumber collided onto my vehicle's front bumper.

As such, I am lodging this report. That is all.

POLICE REPORT Pg. 1





T/20190513/2186

Report No. T/20190513/2186

Police Station Of Origin: Serangoon N.P.C

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

Singapore Police Force

CONTINUATION OF REPORT

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: F / Sgt 2 MUHAMMAD ALIF RIDHWAN SIN BAHARIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/05/2019 21:44
Officer In Charge Of Case:	Classification Of Case:
Sr Staff Sgt ESTHER CHONG SN 154	

AXA INSURANCE PTE LTD

8 Shenton Way, #24-01 AXA Tower, Singapore 088611 Customer Service Centre #B1-01 Tel: 6338 7288 Fax: 6338 2522 Website: www.axa.com.sg GST Registration Number: 199903512M



Original

Agent Code: 14885

Policy No. (if any): BSTU008 WILLIE

New Business

SmartDrive Quote Ref: 4 2637

MOTOR COVER NOTE

No. CN851631

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992:
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

	30:123022			
THE COMPANY	AXA INSURANCE PTE LTD			
INSURED	YEO PHEK SUAN @ CHENG SOOK CHIN			
MAKE AND DESCRIPTION OF VEHICLE	TOYOTA HARRIER 2.0			
VEHICLE REGISTRATION NO.				
YEAR OF MANUFACTURE	2017			
ENGINE NO.	8ARZ094195			
CHASSIS NO.	JTEKB3GH20J000491			
ENGINE CAPACITY/TONNAGE	1998			
COVER TYPE	COMPREHENSIVE			
HIRE PURCHASE	DBS BANK LTD			
VALUE (S\$)	AS PER MARKET VALUE			
PERIOD OF INSURANCE	FROM: 29/09/2017 TO: 28/09/2019			
EXCESS (S\$)	500			
AXA PREMIUM WORKSHOP?	NO BORNEO MOTORS (S) PTE LTD			

IWE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by

AISINCHCAPE4

on

29/09/2017 10:10am

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of Issue unless replaced by the Certificate of Insurance issued by the Company.

- · Premium for time on risk will be charged subject to minimum of S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
- · An administrative fee of S\$26.75 (inclusive of GST) will be charged:
 - Cover note issued and cancelled before inception.
 - Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be waild.

For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

MTR/C/NOTE/V01/03

哈汽車貿易服務

HUP MOTOR TRADING & SERVICE

Blk 9004 Tampines Street 93 #01-120 Singapore 528838 Tel: 6784 0039 Fax: 6784 0076 Email: hupmotor@gmail.com Reg. No. 378091/00W							
Our Ref:	TP 2947/05/19	Your Ref:	1d. 8t	Date: 15 th May 2019			

MS YEO PHEK SUAN BLK 420, #10-414 SERANGOON CENTRAL SINGAPORE 550402

Estimate cost of repair to TOYOTA HARRIER G Grade 2.0 (A) H/B - SJC 3516 A

1395-10 (47 \$ 1,725.80 1 pc front bumper SCN 283.80 .. 1 pc front bumper centre lower garnish ner 44.00 -8 pcs front bumper clips @\$ 5.50 sin 60.00 405. N 6 pcs front bumper lower clips 1 set front number plate & frame \$ 2,146.60 1755-5 \$ 536.65 Less 25%

\$ 1,609.95

To wiring check up for sensor.

30.00

Labour charge to remove & cut out damaged parts, to jack, straighten & knocking out front bumper reinforcement & necessary parts, to weld, renew & align above parts.

380.00 200

To putty & respray painting on all affected accident parts.

400.00

\$ 2,419.95 ______

Dollars : Two Thousand Four Hundred Nineteen And Cents Ninety Five Only. 1-13/192

HUP MOTOR TRACING & SERVICE

- damaged part(s) during resurvey
- Triad party survey is on a "Williout Prejudice" basis.
- No General respectation(s) is allowed.
- Supple in tary hards) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer



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

U.S.	注题 数据	Affiliated to Federation Internati	onale Des	Experts En Automo	obile
AUT	TO & GENERAL INSURANCE (S) PL			CS/AGI1900879	99/Uqd3n2
190 (URANCE) ENUE #03-01 NG CENTRESINGAPORE	Date :	10-06-2019 AGI	
1.		Policy Particulars	s :- THIR	D PARTY CLAII	M
	Insured Veh.	SLQ 4626L	Veh. II	nspected	SJC 3516A
	Policy No.		Cover	age (\$)	0.00
	Claim No.	C10003117/JM	Exces	s (\$)	0.00
	Assign From	IVY RATILLA	Assig	n Date	17/05/2019
2.		Vehicle Par	ticulars &	& Condition	
	Make & Model	TOYOTA HARRIER G GRADE	c.c		1998
	Engine No.	HIDDEN	Year	of Reg.	2017
	Chassis No.	JTEKB3GH20J000491	Colou	r	SILVER
	Odometer	47333	Steeri	ng	IN ORDER
	Brakes	IN ORDER	Modif	ication	SPORTS RIM
	General	GOOD			
3.		Cond	itions of	Tyres	
		Size	Make		Balance
	R/H Front Tyre	235/55 R18	BRIDG	SESTONE	6 mm
	L/H Front Tyre	235/55 R18	BRIDG	SESTONE	6 mm
	R/H Rear Tyre	235/55 R18	BRIDG	SESTONE	6 mm
	L/H Rear Tyre	235/55 R18	BRIDG	SESTONE	6 mm
4.			tion of D	Control of the Contro	
	THE VEHICLE SU	STAINED DAMAGES AT THE F	RONT PO	ORTION.	
5.			ral Inforr	nation	
-	Accident Date	12/05/2019	Inspe	ction Date	22/05/2019
	Survey held at	HUP MOTOR TRADING & SE	RVICE		
	BLK 9004 TAMPINES ST 93 #01-120 SINGAPORE 528838				
5a.	CARTE AUST DE		Remarks		
	A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b.		Estima	te Days c	f Repair	

ESTIMATED NORMAL PERIOD FOR REPAIR:

2 Working Days



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJC 3516A

(TO ITS PRE-ACCIDENT CONDITION)

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	DEFORMED / CUT	1,725.80	1,395.10
1	FRONT BUMPER CENTRE LOWER GARNISH	SCRATCHED	283.80	283.80
8	FRONT BUMPER CLIPS @\$5.50	NECESSARY	44.00	44.00
6	FRONT BUMPER LOWER CLIPS	NECESSARY	33.00	33.00
	LESS 25% DISCOUNT		-521.65	-438.98
			1,564.95	1,316.92
1	SET FRONT NUMBER PLATE & FRAME (SN)	SCRATCHED	60.00	40.00
	LESS 25% DISCOUNT		-15.00	
			45.00	40.00
	LABOUR			
	TO WIRING CHECK UP FOR SENSOR.		30.00	30.00
	LABOUR CHARGE TO REMOVE & CUT OUT DAMAGED PARTS, TO JACK, STRAIGHTEN & KNOCKING OUT FROM BUMPER REINFORCEMENT & NECESSARY PARTS. TO WELD, RENEW & ALIGN ABOVE PARTS.		380.00	200.00
	TO PUTTY & RESPRAY PAINTING ON ALL AFFECTED ACCIDENT PARTS.		400.00	300.00
			810.00	530.00
	GRAND TOTAL		2,419.95	1,886.92
W-2	RECOMMENDED COST OF LUMP SUM REPAIRS			1,500.00

Report Ref No. CS/AGI19008799/Uqd3n2

CHUA KANG SENG

Licensed Appraiser