

ASS. REC. BY:

REF: CS/C71/9009022/Ksd3/n2 Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Chong Boon Sen of CTI Date/Time: 22/5/19 @ 2:29 pm

Estimated Cost: _____ Bill to: _____

Bill to:

Date/Time: 22/5/19 @ 2:29 pm

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

To inspect Vehicle No: SLW 8645Z Insured: SGY 3795E

at Workshop m/s Hui Yeng Motor Tel: 6451 5752

of BK 176 Sin Ming Drive # 04-02

Policy No: _____ Claim No: SNM191102258

Sum Insured: _____ Excess: _____

Excess

Make of Veh: _____ D.O.A. 20/5/2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 2:57pm @ 22/5/19 Person Contacted: Marcus

Vehicle IN/OUT

Date/Time	Action/Instruction	Estimate	✓
	SLW 86452-NA/CTI 19008982/h4		
	SGY 3775E-NA/CTI 19008982/h4		
30/5	11 Rm @ 220d enril		
	(\$ 2,319.00 Red - 51%)		

ASS. REC. BY:

REF: C121

Kenneth

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:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

03

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

1 File pass to

RECEIVED 30 MAY 2019

Veh No:

SLW 86457 Yr Regn: 03.18

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

Truck / Trailer or

MPV

Make:

Toy Wish

c.c

1798

Colour

M. D. Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

101845

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTDGG20W 80J609162

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / Rim or

Tyre Size:

F:

195/65R15

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Nemika

Front

Rear

R/Bal.

8

mm

R/Bal.

8

mm

L/Bal.

8

mm

L/Bal.

8

mm

D.O.A.

20/5/19

D.O.I.

27/5/19

Survey held at

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

N/S/FR

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

Date/Time, File Pass to?

30/05/19

1) Type: 4

Date/Time, File Return to?

2)

☐

: Prell. Report

☒

: Final Report

Days Of Repair: 3

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S - RS - SI

Fixes

Others

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

Lump Sum / I.B.I: (\$) 2,200/- H/S

TOTAL

220

Nivitha (LKK Auto)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Wednesday, 22 May 2019 2:29 PM
To: Hui Yang Motor
Cc: 'assignments'
Subject: RE: TP Claim for SLW8645Z against SGY3795E / DOA: 20/05/2019 / OUR REF: SNM19D202258

WITHOUT PREJUDICE

Dear Sir,

Our insured have yet to report the accident to us.

We will be assigning M/s LKK Auto Consultants Pte Ltd to survey your client's vehicle.

Aside to LKK,

Please proceed to survey the third party vehicle on WP basis.

Thank you.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG 3 Anson
Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Hui Yang Motor [mailto:hui_yang_motor@hotmail.com]
Sent: Wednesday, 22 May, 2019 2:17 PM
To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Subject: Re: TP Claim for SLW8645Z against SGY3795E / DOA: 20/05/2019 / OUR REF: SNM189D202258
Importance: High

Dear Sir,

Kindly arrange for Surveyors Kenneth Kong please.

Thank you & Regards,
Marcus Loh

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>

Sent: Wednesday, May 22, 2019 2:11 PM

To: hui yang motor@hotmail.com

Subject: RE: TP Claim for SLW8645Z against SGY3795E / DOA: 20/05/2019 / OUR REF: SNM189D202258

Dear Sir,

We intend to conduct a pre-repair survey of the damage to your client's vehicle jointly with your client/your motor workshop. We propose to use one of the following motor surveyors to conduct the joint pre-repair survey as a single joint expert.

ADRIAN LING
Kelvin Ang
SEE CHEW SENG
LOW SAR HUEI
HONG FOOK CHOY
XING QUO QIANG
KENNETH KONG
SIMON HO
CHUA WEIJIE
MARCUS CHUA

Please let us know within two(2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

You may select one of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG 3 Anson
Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Claims Dept of CTI

Sent: Wednesday, 22 May, 2019 2:08 PM

To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; hui yang motor@hotmail.com

Cc: Angie Foo <angie.foo@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>; Chee So Chow <sochow.chee@sg.cntaiping.com>; Elaine Cheong <elaine.cheong@sg.cntaiping.com>

Subject: FW: TP Claim for SLW8645Z against SGY3795E / DOA: 20/05/2019

Importance: High

Dear Boon Sen,

Please conduct PRS on behalf of Elaine TP: SLW8645Z (SNM19D202258) soonest possible.
File with Boon Sen - 63896171

From: Hui Yang Motor [mailto:hui_yang_motor@hotmail.com]
Sent: Wednesday, 22 May 2019 1:34 PM
To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Subject: TP Claim for SLW8645Z against SGY3795E / DOA: 20/05/2019
Importance: High

Dear Sir/Mdm,

Please refer to attached Estimate and GIA Report,

Kindly advise us on the Dates and Timing with regards
to the Surveying of the Vehicle Asap please.?

Thank you & Regards,
Marcus Loh
6451 5752

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>

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	21/05/2019 17:38
Date Of Accident	20/05/2019 11:55
Exact Location Of Accident	JUNCTION OF YIO CHU KANG RD & AMK AVE 5 TWDS SLE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLW8645Z
Insured/Policyholder	
Name Of Registered Owner	ACE FLEET MANAGEMENT PTE LTD
Co Reg No	201710914N
Email Address	SQUARECAR123@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-86667800
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH-1.8 CVT (A)
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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994511
Cover Note Number	
Driver	
Name of Driver	YAZID BIN MOHAMMAD
NRIC No	S7733373H
Date Of Birth	10/11/1977
Occupation	INDOOR
Date Of Driving Pass	17/07/2000
Driving Experience	18 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91542644
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 158 WOODLANDS STREET 13
Postcode	S730158
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	2
Passenger 1	NAME: : HAMIDAH
	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

PLEASE REFER TO ATTACHED SKETCH PLAN REPORT

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	SGY3795E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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.
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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:

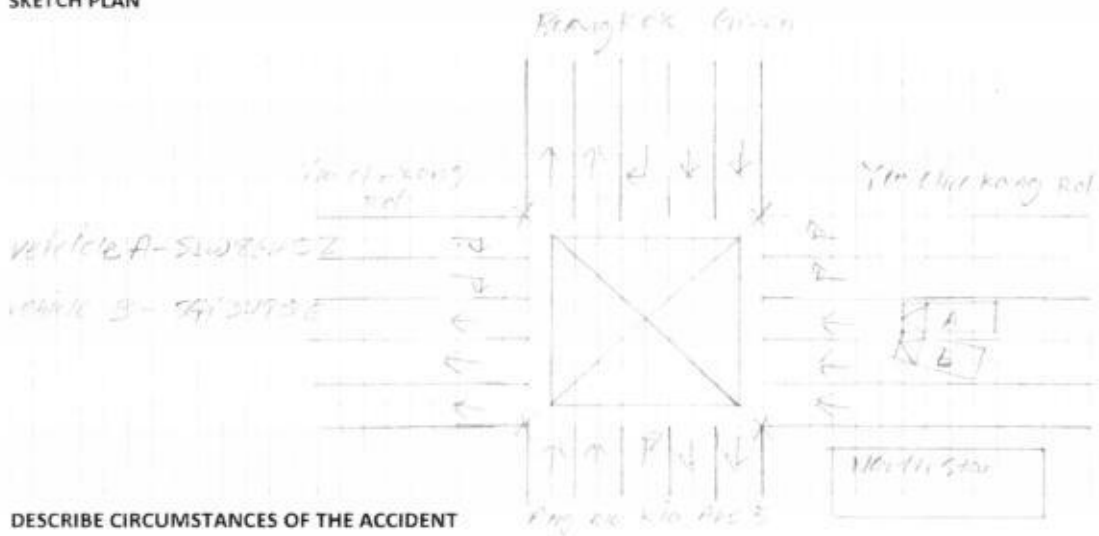
Driver's Signature
(if driver is not the policyholder)
Date & Time:



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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20th May 2019 at about 11:58 AM, I vehicle A :
 SWW 8645Z was travelling around Yio Chu Kang Rd
 towards SLE. Before the junction of Ang Mo Kio Ave 5
 and Buangkok Green, while I'm on the third lane from
 the right travelling straight, suddenly vehicle B collided
 onto my front left portion. We drove to the ESSO
 petrol kiosk to check on the damage and exchange
 particulars. Thus the driver admitted that it was his
 fault which he didn't see my vehicle. He agreed
 to claim against his insurance.

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.:



ACE FLEET MANAGEMENT PTE LTD

237 ALEXANDRA ROAD #02-03 THE ALEXCIER SINGAPORE (159929)

RENTAL AGREEMENT

Kindly fill up all of the details below

CAR MODEL: Toyota Wish

CARPLATE: SLW8645Z

HIRER'S NAME:	Yazid Bin Mohammad
NRIC/PASSPORT NO.:	S7733373H
D.O.B:	10/11/1977
NEXT OF KINS:	Hamidah
TEL:	88125215
ADDRESS:	158 Woodlands St 13 #02-723 S730158
CONTACT NO.:	91542644
RENTAL DEPOSIT:	\$1000/-
DATE OF COMMENCE:	8/3/19 - (End 8/09/2020)
EMAIL:	77clizay@gmail.com
RENTAL PER DAY:	\$65/-
BANK/ ACCOUNT NO.:	003 325539 POSB SING
*All Rental Payments to be make latest by every Monday. Thank you.	
CONTRACT VAILDITY:	18mths
1)INSURANCE 1 st PARTY EXCESS \$2500 \$1500 / yr 2)INSURANCE 3 rd PARTY EXCESS \$2500 \$1500 / yr 3)INSURANCE EXCESS FOR OVERSEA WILL BE DOUBLED 4)INSURANCE EXCESS FOR DRIVING LICENCE LESS THEN 2 YEAR AND BELOW 22 YEAR OLD WILL BE DOUBLED 5)WINDSCREEN EXCESS \$200	

Left Side



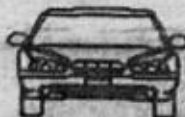
Right Side



Back



Front



Top

D-DENT S-SCRATCHES C-CHIPS R-RUET M-MISSING

REMARKS:

Hirer's Signature

GENERAL DEFINITIONS

輝陽汽車有限公司

HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721

Tel: 64515752 (2 Lines) . Fax: 64514658

Reg No. 201629438M

20/05/2019

Owner: ACE FLEET MANAGEMENT PTE LTD

ESTIMATE TO REPAIR TOYOTA WISH 1.8A - SLW8645Z

1pc front LH headlamp 1239.50
 1pc front LH fender
 1pc front bumper 581.20
 10pcs front bumper clip @\$5.00
 1pc front bumper LH side retainer
 1pc front bumper sponge
 1pc front centre grille assy
 1pc front LH fog lamp cover
 1pc front LH fog lamp chome

less 25%

my car \$ 1,712.40 ✓
 B \$ 591.60 ✓
 Bn \$ 981.90 ✓
 me \$ 50.00 ✓
 D11 \$ 132.10 ✓
 Sn \$ 181.60 X
 Sn \$ 282.10 X
 Sn \$ 181.60 X
 Sn \$ 98.70 X

\$ 4,212.00

\$ 1,053.00

\$ 3,159.00

wiring
 tuffkote
 spray painting
 labour charges
 Total

\$ 80.00 15/-
 \$ 80.00 30/-
 \$ 600.00 400/-
 \$ 600.00 400/-
 \$ 4,519.00



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:

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CT19009022/KSD3N2

Date: 30/05/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN30691319055	
Claimant Vehicle No :	SLW8645Z	Insured Vehicle No :	SGY3795E	
Date of Loss:	20/05/2019	Nature of Claim:	TP	Claim No: SNM19D202258C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLW8645Z	Engine No:	2ZR0A65874
Make & Model:	TOYOTA WISH, 1.8 CVT (A)	Chassis No:	JTDGG20W80J009162
Reg. Date:	06/03/2018 (Man. Year: 2017)	Odometer:	101845 km
Colour:	Metallic Dark Grey		
Engine Capacity:	1798 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	195/65R15	Rear Tyre Size:	195/65R15
Front Left Side:	West Lake 8 mm	Rear Left Side:	West Lake 8 mm
Front Right Side:	West Lake 8 mm	Rear Right Side:	West Lake 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	3,159.00	1,945.80	1,213.20	38.40
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,360.00	845.00	515.00	37.87
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	4,519.00	2,790.80	1,728.20	38.24
Approved Total (Overridden) (S\$)		2,200.00		
(S\$)	4,519.00	2,200.00	2,319.00	51.32
+ GST 7.00/7.00% (S\$)	316.33	154.00	162.33	51.32
Nett Amount (S\$)	4,835.33	2,354.00	2,481.33	51.32

INSPECTION

Date of Assignment:	22/05/2019	
Date Inspected:	27/05/2019 Inspected At:	Hui Yang Motor Pte Ltd (HQ) 176 Sin Ming Drive #04-02, Sin Ming AutoCare Singapore 575721

Estimated Period of Repair: 3.0 days

Adjuster: KENNETH KONG

Manager: Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 30 May 2019)
Parts:	M1-MPV	TOYOTA WISH 1.8 CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLW8645Z)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT LH HEADLAMP	Mtg Cracked	1,712.40 FL	*1,239.50 FL
2	1		*FRONT LH FENDER	Bent	591.60 FL	*591.60 FL
3	1		*FRONT BUMPER	Buckled	981.90 FL	*581.20 FL
4	10		*FRONT BUMPER CLIP	Necessary	50.00 FL	*50.00 FL
5	1		*FRONT BUMPER LH SIDE RETAINER	Distorted	132.10 FL	*132.10 FL
6	1		*FRONT BUMPER SPONGE	Serviceable	181.60 FL	*- FL
7	1		*FRONT CENTRE GRILLE ASSY	Serviceable	282.10 FL	*- FL
8	1		*FRONT LH FOG LAMP COVER	Serviceable	181.60 FL	*- FL
9	1		*FRONT LH FOG LAMP CHROME	Serviceable	98.70 FL	*- FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	4,212.00	2,594.40
- List Item Discount on L Items 25.00/25.00% (S\$)	1,053.00	648.60
Total Parts (S\$)	3,159.00	1,945.80

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	WIRING	New	80.00	15.00
2	TUFFKOTE	New	80.00	30.00
3	SPRAY PAINTING	New	600.00	400.00
4	LABOUR CHARGES	New	600.00	400.00
Gross Labour Cost (\$\$)			1,360.00	845.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >