

22/03/2001

ASS. REC. BY:

REF:

CS/A6119009198/Asd302

Special Instruction:

Survey:

## ASSIGNMENT (Office)

From (Person):

Ivy

of

A61

Date/Time:

23/5/2019 4.07pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SMD558

Insured:

SLN7131T

at Workshop m/s

New Hock Park

Tel:

67479241

of 1 Kaki Bukit Ave 6 #01-43

Policy No:

Claim No:

C10003160/30

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

14/5/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

24/5/19

Person Contacted:

Sukyi

Vehicle IN/OUT

Date/Time

Action/Instruction

Echmote (✓)

SMD558-X

SLN7131T-X

15/07/19

Confirmed H/S \$ 3,900/- @ 3 days with Adrian  
( \$ 27,536.00 Red - 76% )

ASS. REC. BY:

REF:

Adrian

## ASSIGNMENT

Front:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured

Policy No.

Claims No.

Sum Insured:

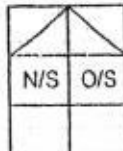
Excess:

(Client's Record)

Make of Veh:

(Police Condition)

Remark: The veh had commenced its  
repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / IPR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No: SMD 555

Yr Regn:

2018 / JulyType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Porsche Panamera c.c. 2995

Colour:

Grey

A/C: Insured / Std / NI / NA

Sp. Reading:

6674

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WP022297ZJL115131Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F:

295/40R19

R:

295/40R19

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

TOYO / YOKO or

Front

Rear

R/Bal.

06

mm

R/Bal.

06

mm

L/Bal.

06

mm

L/Bal.

06

mm

D.O.A.

D.O.I.

27/05/19

Survey held at

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

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

Date / Time

Action / Instruction

TP Budget Direct.

RECEIVED 15 JUL 2019

MV:

PV:

Nett:

Resurvey No. of Trip - 1

Date/Time, File Pass to?

15/07/19  
Typet

Date/Time, File Return to?

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic &amp; Add.

S + RS, SI

Photos

Others

TOTAL

450

Prel. Report:

Final Report:

L/S \$ 8,900/-

## Nivitha (LKK Auto)

---

**From:** Ivy Ratilla <ivy.r@budgetdirect.com.sg>  
**Sent:** Thursday, 23 May 2019 4:07 PM  
**To:** Admin-D (LKKAuto)  
**Cc:** SUR; Justin Wong  
**Subject:** Claim ref:C10003160/JW || OI- SLN7131T (Beige) TP- SMD55S || Est:0.00 || New Hock Teck  
**Attachments:** SMD55S PRI.pdf

Hi Team,

We would like to arrange TP Pre repair Survey for SMD55S. Please see below email for reference.

They have chosen Mohamad Taufihk.

Kindly confirm.

Regards,

Ivy  
Admin Executive, Claims

T +65 6540 2185  
F +65 6725 0853  
E ivy.r@budgetdirect.com.sg



**Customer Care** +65 6221 2111  
**Claims** +65 6221 2199  
**Claims (Int.)** +65 6540 2199

190 Clemenceau Avenue, #03-01  
Singapore Shopping Centre  
Singapore  
239924  
[budgetdirect.com.sg](http://budgetdirect.com.sg)

auto & general

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

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MSME19066395 / SME Motor Pte Ltd - Kaki Bukit  
ENTRY DATE & TIME: 22/05/2019 17:47  
SUBMITTED BY: Chia Pui Ying

Your NCD will be affected due to late reporting  
Actual e-Filing Submission Date & Time: 22/05/2019 17:53

## 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	22/05/2019 17:47
Date Of Accident	14/05/2019 13:50
Exact Location Of Accident	PREMISES OF AUTOBAY KAKI BUKIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD55S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHEW GEOK CHAN CHAI
NRIC No	S2552669D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97590630
Alternative Phone No	OFFICE-97590630
<b>Vehicle Particulars</b>	
Manufacturer	PORSCHE
Model	PANAMERA
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 CAR
<b>Insurance Company</b>	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA380343
Cover Note Number	
<b>Driver</b>	
Name of Driver	CHEW GEOK CHAN CHAI
NRIC No	S2552669D
Date Of Birth	08/04/1963
Occupation	INDOOR
Date Of Driving Pass	28/07/1983
Driving Experience	35 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97590630
Fax Number	
Contact Number	OFFICE-97590630
E Mail Address	NOEMAIL

Address 55 RICHARDS PLACE  
 Postcode 546373  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OWNER  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

### General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED  
 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) 0

### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name TRAFFIC POLICE DIVISION HQ  
 Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 65470000 - FAX NO:  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

### Circumstances of Accident

REFER TO POLICE REPORT: T/20190522/7016.

### 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 SLN7131T  
 Vehicle Make/Model/Colour  
 Details Of Properties VEHICLE B  
 Vehicle Category PRIVATE CAR  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage

22/05/2019 WED 17:55 FAX

No. Of Passenger (Including Driver)

### SKETCH PLAN

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 renewate 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)

(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:

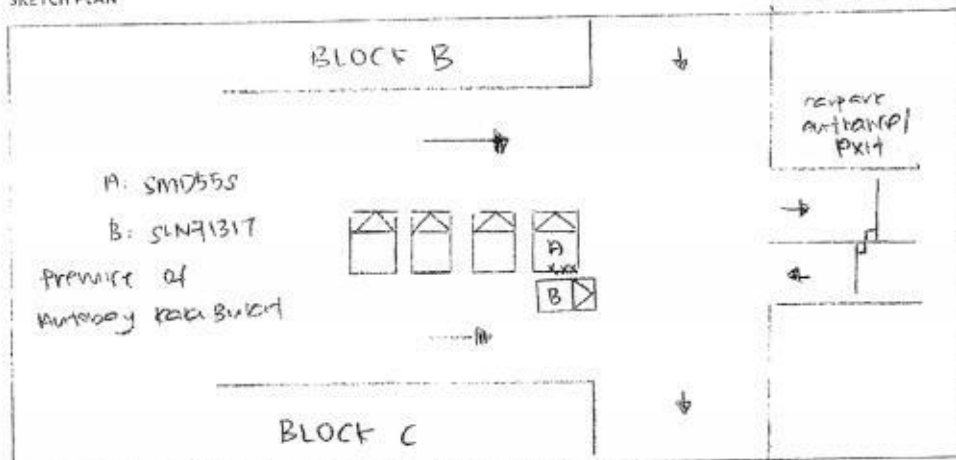
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
- (ii) for complying with requirements under any regulations, laws or court orders.

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

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

# Sketch Plan #2 Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please kindly refer to police report T/20190522/7016

*[Signature]*

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

*[Signature]*  
 Policyholder's Signature  
 Date & Time:

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

27/5/19 4:40pm  
 Reporting Centre Personnel's Signature  
 Name:  
 MRIC/FIN No:



## Sketch Plan #3 Pg. 1

LETTER OF UNDERTAKING

I/We, CHEW GEOK LIAN CHAI, the owner of vehicle no. SMP 56 S

My/Our Insurance is under M/s AXA Insurance Pte Ltd. I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop. NEW HOCK TECK MOTOR PTE. LTD.

Signed and Acknowledge by:



Name & signature of policy holder

Company stamp

22/05/19.  
Date

## Sketch Plan #4 Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190522/7016

1 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20190522/7016

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/05/2019 16:09		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHEW GEOK CHAN CHAI			Address: 55 RICHARDS PLACE SINGAPORE 546373		
ID Type / ID No.: NRIC NO / S2552669D			Contact No.: Home/Office: Mobile: 67479241		
Nationality: SINGAPORE CITIZEN			Email: chloe@nhtmotor.com		
Sex: Male	Age: 56	Date of Birth: 08/04/1963	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Director			Driving Licence Information: Class:		Date of Expiry:

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 14/05/2019 13:50	Type of Location: Car Park
Location:  KAKI BUKIT AVENUE 6				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLN7131T	Car			Gold		0
SMD55S	Car	PORSCHE				0

## Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## Sketch Plan #5 Pg. 1

**SINGAPORE  
POLICE FORCE**

T/20190522/7016

2 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20190522/7016

## CONTINUATION OF REPORT

Vehicle Owner			
Name	CHEW GEOK CHAN CHAI	ID No.	S2552669D
Related Vehicle	NIL	Contact No.	67479241
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

## Brief Details.

My vehicle SMD55S was parked stationary in the parking lot.  
A few hours later, I realised that my vehicle had suffered damages on my rear right portion of my vehicle and also the exhaust pipe.  
I reviewed the surveillance cameras and realised that SLN7131T had hit onto my vehicle at about 1:50pm.  
SLN7131T did not stop and proceeded to exit the premise.

## Sketch Plan #6 Pg. 1

**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20190522/7016

3 of 3

Report No. T/20190522/7016

## CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TP1B /  
ABDUL KAREEM BIN ABDUL HAGUE  
Contact No.: 65476079

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
22/05/2019 16:09

Classification Of Case:



新福德車廠私人有限公司

NEW HOCK TECK MOTOR PTE. LTD.

1 Kaki Bukit Ave 6, Blk C #01-43 Autobay@Kaki Bukit, Singapore 417883

Email: admin@nhtmotor.com Website: www.nhtmotor.com

Tel: 6747 9241 Fax: 6741 7276

UEN: 201718370K

CHEW GEOK CHAN CHAI

Blk 1 Kaki Bukit Ave 6

# 01-43

Singapore 417883

21/05/2019

TP Budget Direct  
Shirley

Accident date: 14/05/2019

Estimated repair cost for vehicle no: SMD55S PORSCHE PANAMERA 3.0 A '18

CHASSIS: WP0ZZZ97ZJL115131

S/N	QTY	Items	U/PRICE	AMOUNT
1	1	Rear Bumper <i>torn</i>		<del>\$8,600.00</del> 4887
2	1	Rear Bumper Lower <i>ut</i>		<del>\$1,480.00</del> 900
3	12	Rear Bumper Clip <i>new</i>	\$8.00	\$96.00 ✓
4	1	Rear Bumper Towing Cover <i>new</i>		\$60.00 x
7	1	Rear Bumper Reinforcement <i>new</i>		\$1,500.00 x
8	4	Rear Bumper Reverse Sensor <i>new</i>	\$580.00	\$2,320.00 x
9	1	Rear R/H Bumper Side Retainer <i>new</i>		\$250.00 x
10	1	Rear R/H Bumper Side Reflector <i>new</i>		\$380.00 x
11	1	Rear Exhaust Assy <i>ut</i>		<del>\$5,800.00</del> 4880
13	2	Rear R/H Exhaust Mounting <i>new</i>	\$290.00	\$580.00 x
14	1	Rear R/H Exhaust Aluminium Cover <i>coupled</i>		<del>\$360.00</del> 155
15	1	Rear Center Exhaust <i>new</i>		\$9,500.00 x
			Subtotal:-	\$31,726.00

11028  
9925.20

### Labour charges

To remove & refit reverse sensor

~~\$350.00~~ 100

To remove & refit rear & center exhaust

~~\$480.00~~ 200

To reset computer

~~\$380.00~~ 100

To check wiring

~~\$150.00~~ 30

Tuff kote

1230

~~\$150.00~~ X

Panel beating

~~\$1,600.00~~ 400

Spray painting

~~\$1,600.00~~ 400

Subtotal:- \$4,710.00

Total:- \$36,436.00

35636.00

total: 11155.20

L/S 8.9K

03 Days

8.9K

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

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				
AUTO & GENERAL INSURANCE (S) PL			Ref : CS/AGI19009198/Asd3n2	
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924			Date : 16-07-2019	
			Code : AGI	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SLN 7131T	Veh. Inspected	SMD 55S	
Policy No.		Coverage (\$)	0.00	
Claim No.	C10003160/JW	Excess (\$)	0.00	
Assign From	IVY	Assign Date	23/05/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	PORSCHE PANAMERA	c.c	2995	
Engine No.	HIDDEN	Year of Reg.	2018	
Chassis No.	WP0ZZZ97ZJL115131	Colour	GREY	
Odometer	6674	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	295/40 R19	GOODYEAR	6 mm	
L/H Front Tyre	295/40 R19	GOODYEAR	6 mm	
R/H Rear Tyre	295/40 R19	GOODYEAR	6 mm	
L/H Rear Tyre	295/40 R19	GOODYEAR	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	14/05/2019	Inspection Date	27/05/2019	
Survey held at	NEW HOCK TECK MOTOR PTE LTD 1 KAKI BUKIT AVENUE 6 #01-43 AUTOBAY @ KAKI BUKIT SINGAPORE 417883			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 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 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMD 55S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	TORN	8,600.00	4,887.00
1	REAR BUMPER LOWER	CUT	1,480.00	900.00
12	REAR BUMPER CLIP @\$8.00	NECESSARY	96.00	96.00
1	REAR BUMPER TOWING COVER	NOT NECESSARY	60.00	-
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	1,500.00	-
4	REAR BUMPER REVERSE SENSOR @\$580.00	NOT NECESSARY	2,320.00	-
1	REAR R/H BUMPER SIDE RETAINER	NOT NECESSARY	250.00	-
1	REAR R/H BUMPER SIDE REFLECTOR	NOT NECESSARY	380.00	-
1	REAR EXHAUST ASSY	CUT	5,800.00	4,990.00
2	REAR R/H EXHAUST MOUNTING @\$290.00	NOT NECESSARY	580.00	-
1	REAR R/H EXHAUST ALUMINIUM COVER	CRUMPLED	360.00	155.00
1	REAR CENTER EXHAUST	NOT NECESSARY	9,500.00	-
	LESS 10% DISCOUNT		-	-1,102.80
			30,926.00	9,925.20
<b><u>LABOUR</u></b>				
	TO REMOVE & REFIT REVERSE SENSOR.		350.00	100.00
	TO REMOVE & REFIT REAR & CENTER EXHAUST.		480.00	200.00
	TO RESET COMPUTER.		380.00	100.00
	TO CHECK WIRING.		150.00	30.00
	TUFF KOTE.	NOT NECESSARY	150.00	-
	PANEL BEATING.		1,600.00	400.00
	SPRAY PAINTING.		1,600.00	400.00
			4,710.00	1,230.00
<b>GRAND TOTAL</b>			<b>35,636.00</b>	<b>11,155.20</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>8,900.00</b>

Report Ref No. CS/AGI19009198/Asd3n2

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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