

ASS. REC. BY:

REF:

es/INC19010010/Etd3n2

Special Instruction:

Surveyor: Steve

## ASSIGNMENT (Office)

From (Person):

Cynthia Ang

of

INC

Date/Time: 4/6/19 @ 9:51am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

YP86404

Insured:

XD9743A

at Workshop m/s

SNG Ah Tee

Tel:

6268 6183

of

Blk 3 Pioneer Rd North #01-18

Policy No:

Claim No:

MT/1037523-001

Sum Insured:

Excess:

Make of Veh:

D.O.A.

20/03/2017

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Junice

Vehicle IN / OUT

Date/Time

Action/Instruction

Estimate ✓

YP86404-X

XD9743A-CC6/ABA/SC05670/T/p43n2

Jua: 6/3/15

Steve

REF:

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To Inspect Vehicle No: \_\_\_\_\_  
at Workshop n/vs: \_\_\_\_\_  
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: \_\_\_\_\_ days Res.: Yes or No  
Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No  
  
CA / REV / REP. / 24 HRS  
Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
Vehicle: IN / OUT

N/S	O/S

Veh No: **YP 86404** Yt Regn: **21/2/18**  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or  
Make: **Mitsubishi Canter** cc **2998**  
Colour: **White** A/C Insured / Std / NI  
Sp. Reading: **14489** T/Ratio: Insured / Std / NI  
Eng/No: \_\_\_\_\_  
CtNo: **FEB 21 EA 25044**  
Gen. Cond: Good / Fair / Poor / Burnt  
Steering: Inorder / Jammed / Leaked / Burnt or  
Brake: Inorder / Jammed / Leaked / Burnt or  
Modi: Nil / S/Rlm. / STD A/Rlm or  
Tyre Size: F: **195/85R15**  
R: \_\_\_\_\_  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or  
  
Front: **6** mm R/Bal. **6**  
L/Bal. **6** mm L/Bal. **6**  
D.O.A. **20/3/19** D.O.I. **4/6/19**  
Survey held at **Sng Ah Tee** **2.51**  
Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or  
**Front LH**  
The UIC / Chassis frame / Body Structure affected due to c

Date / Time : Action / Instruction  
**21/10/19** **MV-80K**  
**Finalise (note \$3410.75 (PIP), 5 day (Sham))**  
**(Red: 3643; 51.6)**

RECEIVED 03 OCT 2019

Date/Time, File Pass to? ☐ : Prel. Report  
**31/10 Typist** ☒ : Final Report  
Date/Time, File Return to?

Days Of Repair: **5**  
Resurvey No. of Trip: **1**

Add Fee: ☐ : Site Insp (\$)  
☐ : Interview (\$)  
☐ : Tech Invs (\$)  
☐ : Weekend (\$)

Survey Fee:  
Transportation

Report Format:  
Lump Sum / I.B. : **3410.75**

250

**Nivitha (LKK Auto)**

**From:** Cynthia Ang <Cynthia.Ang@income.com.sg>  
**Sent:** Tuesday, 4 June 2019 9:51 AM  
**To:** 'assignments@lkkauto.com'; Admin-D (LKKAuto)  
**Cc:** Teng Ken Leong; Thio Tse Kiat; Cynthia Ang  
**Subject:** TP CASES FARMED OUT TO LKK ON 04/06/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	Quek Swee Keng	MT/1047395-001	SHD2157C	PRIME AUTO CLAIMS SERVICE PTE LTD	6 BENOI PLACE	Chrissy / 6861 0908		SKJ3337B	31/05/2019	
2	Cyndie Yong	MT/1044568-002	SHD2989T	PRIME AUTO CLAIMS SERVICE PTE LTD	6 BENOI PLACE	Chrissy / 6861 0908		FBC3857K	13/05/2019	
3	Wo Jessie	MT/1047390-001	SHD2480T	PRIME AUTO CLAIMS SERVICE PTE LTD	6 BENOI PLACE	Chrissy / 6861 0908		SGG2155D	03/06/2019	
4	Charlotte Chew	MT/1037523-001	YP8640U	SNG AH TEE MOTOR & PANEL SERVICE PTE LTD	3 PIONEER ROAD NORTH #01-18 SINGAPORE 628457	Janice Chang / 62686183		XD9743A	20/03/2019	After 10am
5	Azhari	MT/1047469-001	SKD2239P	AUTO INSURE PTE LTD	6 MARSILING LANE	SAM / 31572628		SLQ1888S	30/05/2019	
6	Eric Tang	MT/1047352-002	SLL6400J	AUTO INSURE PTE LTD	6 MARSILING LANE	Sam Goh / 9743 6363		SKR3762P	02/06/2019	
7	Serene Lim	MT/1047289-001	SJT452E	AUTO WHEELS MOTOR WORKS	No.1 BUKIT BATOK CRESCENT #02-40	Louis Ong / 91928963		GZ9173E	28/05/2019	
8	Muhammad Airwan	MT/1011852-002	PC8628G	ONE LINE MOTORWORKS TRADING	11 OLD TUCK ROAD	Ms Penny / 93533081		GBB9494P	17/09/2018	
9	Serene Lim	MT/1046034-002	SGS4984B	PRO-JEX V2D MOTOR PTE LTD	25 KAKI BUKIT ROAD 4 #03-93 SYNERGY @ KB	Edmund / 8668-7666		SGK2531E	24/05/2019	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

With Regards

Cynthia Ang  
Admin Assistant  
Motor Insurance  
T +65 6430 7900  
[www.income.com.sg](http://www.income.com.sg)



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.  
Find out more at [Income.com.sg/careers](http://Income.com.sg/careers)



PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

---

## Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

[Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	2308N
<b>Vehicle Details</b>	
Vehicle No.:	YP8640U
Vehicle to be Exported:	No
Intended Deregistration Date:	04 Jun 2019
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEB21ER4SDEN (CBU)
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	4P10D07605
Chassis No.:	FEB21EA25044
Maximum Power Output:	-
Open Market Value:	\$34,694.00
Original Registration Date:	21 Feb 2018
First Registration Date:	21 Feb 2018
Transfer Count:	0
Actual ARF Paid:	\$1,735.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	20 Feb 2028
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$38,303.00
COE Rebate Amount:	\$33,372.00
<b>Total Rebate Amount:</b>	<b>\$33,372.00</b>

The information contained herein is correct as at 03 Jun 2019

OK

## 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	21/03/2019 11:20
Date Of Accident	20/03/2019 09:30
Exact Location Of Accident	JUNCTION OF PIONEER RD & TUAS AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP8640U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NEWARK ENGINEERING PTE LTD
Co Reg No	199202308N
Email Address	NEWPL@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-68622435
<b>Vehicle Particulars</b>	
Manufacturer	MITSUBISHI
Model	CANTER-3.0 D FEB21ER4SDEB (CBU) (M)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE
<b>Insurance Company</b>	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P2090823
Cover Note Number	
<b>Driver</b>	
Name of Driver	HOSSAIN SELIM
Passport No/FIN	G2203318U
Date Of Birth	25/01/1989
Occupation	OUTDOOR
Date Of Driving Pass	26/09/2017
Driving Experience	1 YEAR AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83242431
Fax Number	
Contact Number	
Email Address	SELIM@NEWARK.COM.SG

Address	6 TUAS AVENUE 18A
Postcode	638855
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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: : UNKNOWN
	GENDER: : MALE

#### 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

REFER TO SKETCH PLAN

#### 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	XD9743A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SUN XIANQUAN
NRIC/Passport Number	G2238743Q
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.
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.:

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The accident was occurred on 20th Mar, 2019 at 9:30 am. i was driving YP8640U and stopped at the junction of Tuas Avenue 2 & Pioneer Road while waiting for traffic light, the vehicle no : XD9743A stop next to me was collided to my left door while turning to the left, please refer to attached photos at the scene.

- ☐ Claim own policy
  - ☒ Claim third party
  - ☐ Claim OD / TP at other works hop
  - ☐ For record purpose
- Policy No. P2090823  
Insurer AXAC C Veh.No. YP8640U

## 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.:

# 孫亞弟汽車燒焊私人有限公司 SNG AH TEE MOTOR & PANEL SERVICE PTE LTD

Blk 3, Pioneer Road North, #01-18 Singapore 628457

Tel: 6268 6183 (4 Lines) Fax: 6268 1429

Email: sngahtee@singnet.com.sg

Website: www.sngahtee.com

RCB. Reg. / GST Reg. No: 200810440N

EST/QUOTE NO. SQ004748

NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

MOTOR CLAIMS DEPT

NO.1 MARITIME SQUARE

#10/01 HARBOURFRONT CENTRE

SINGAPORE 099253

ATTENTION :

CONTACT : 63301654/63301885 FAX NO: 3382440/3381504

DATE 26/03/2019

ACCIDENT DATE : 20/03/2019

VEHICLE NO : YP8640U

CHASSIS/ENG.NO : FEB21EA25044

VEHICLE MODEL : MIT.FEB21

CLAIM NO :

POLICY NO :

REMARK 8640NTUC TP AGST  
XD9743A

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
------	-----	------	-------------	-------	--------	-------------	-----------

## \*\* LIST PRICE \*\*

1	1	PC	FRT DOOR(LH) / 00	2,001.00	25	1,500.75	1,500.75
2	1	PC	FRT DOOR GLASS GARNISH(REAR) / CVT	42.00	25	31.50	31.50
3	1	PC	FRT DOOR RUBBER(LH) X N/A	424.00	25	318.00	318.00
4	1	PC	FRT CABIN REAR PANEL(LH) / 00	1,158.00	25	868.50	868.50
5	1	PC	REAR TAILGATE GATE X R	3,500.00	25	2,625.00	2,625.00

SUB-TOTAL: 5,343.75

3291  
- 25%  
P- 2469.75  
L- 1010  
(P-P) 3419.75

## \*\* WORK LABOUR \*\*

TO KNOCK, WELD, REMOVE & FIX ABOVE PARTS

TO PUTTY & RESPRAY PAINTING ON AFFECTED AREA

TO REMOVE & FIX DOOR GLASS

TO REDRAW LOGO ON DOOR

500 600.00 600.00

400 800.00 800.00

30 60.00 60.00

80 250.00 250.00

SUB-TOTAL 1,710.00

1010

Steve CLKK) with 4/6/19, 300pm  
8322 8813  
5 days  
P/P  
Ry

PAGE: 1 of 1

SUB-TOTAL : S\$ 7,053.75

ADD 7% GST. S\$ 493.76

GRAND TOTAL : S\$ 7,547.51

LIK 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

ON BEHALF OF SNG AH TEE MOTOR & SERVICE PTE LTD

E & O.E

• No illegal modification(s) is allowed  
• Supplementary item(s) must be resurveyed and  
is subject to final approval from Insurance Company

Disclaimer clause:

The above estimate/quotation is meant for solely the intended party stated above and in any event, we are not liable to any other parties arising from the circumstances of this or any action taken in reliance on such estimates or quotations.

Quotation is only valid for 14 days.

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

### DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19010010/Etd3n2

73 BRAS BASAH ROAD  
#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 07-10-2019



ATTN: CHARLOTTE CHEW

Code: INC

#### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	XD 9743A	Veh. Inspected	YP 8640U
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1037523-001	Excess (\$)	0.00
Assign From	CYNTHIA ANG	Assign Date	04/06/2019

#### 2. Vehicle Particulars & Condition

Make & Model	mitsubishi canter	c.c	2998
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	FEB21EA25044	Colour	WHITE
Odometer	14489 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

#### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/85 R15	DUNLOP	6 mm
L/H Front Tyre	195/85 R15	DUNLOP	6 mm
R/H Rear Tyre	195/85 R15	DUNLOP	6 mm
L/H Rear Tyre	195/85 R15	DUNLOP	6 mm

#### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION.  
DAMAGES SEE DETAILS.

#### 5. General Information

Accident Date	20/03/2019	Inspect Date / Time	04/06/2019 ( 02:51 PM )
Survey held at	SNG AH TEE MOTOR & PANEL SERVICE PTE LTD BLK 3, PIONEER ROAD NORTH, #01-18 SINGAPORE 628457.		

#### 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.  
B)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 1

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. YP 8640U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>REPLACEMENT OF PARTS</b>			
1	FRT DOOR (LH)	DENTED	2,001.00	2,001.00
1	FRT DOOR GLASS GARNISH (REAR)	CUT	42.00	42.00
1	FRT DOOR RUBBER (LH)	NOT NECESSARY	424.00	-
1	FRT CABIN REAR PANEL (LH)	DENTED	1,158.00	1,158.00
1	REAR TAILGATE GATE	TO REPAIR SEE LABOUR	3,500.00	-
	LESS 25% DISCOUNT		-1,781.25	-800.25
			5,343.75	2,400.75
	<b>LABOUR</b>			
	TO KNOCK,WELD,REMOVE & FIX ABOVE PARTS.INCLUSIVE OF THE REPAIR OF REAR TAILGATE GATE.		600.00	500.00
	TO PUTTY & RESPRAY PAINTING ON AFFECTED AREA.		800.00	400.00
	TO REMOVE & FIX DOOR GLASS.		60.00	30.00
	TO REDRAW LOGO ON DOOR.		250.00	80.00
			1,710.00	1,010.00
	<b>GRAND TOTAL</b>		<b>7,053.75</b>	<b>3,410.75</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>3,410.75</b>

Report Ref No. CS/INC19010010/Etd3n2

CHEN TSUE YEE  
Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.