

INS. CASE OWNER:

CC 4, AM 190 10983, Kga3

LKK:
IDAC:

Surveyor:

KSC

DOI:

ASSIGNMENT

20/6/2014

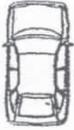
Date / Time :

20/6/14

Registered in Merimen:

21/6/14

Pre-assign / CCU / FTE



Insured Vehicle No. : SLJ 2349L

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :SS _____ D.O.A : 1/6/2014

Place of Accident : _____

Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

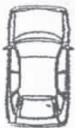
Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : _____ % Final ? Yes / No

SLQ 2132H



INSRS: Entremont
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
<u>SLQ 2132H - X ; SLJ 2349L - X</u>	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	Documentation Check List: Handler Typist	
	Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD	<input type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____

FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____

Repair Cost: S\$ _____ (_____ days) Reduction: _____ % Email Call

FINAL SETTLEMENT Date/Time: _____ Confirm with: _____ Email Call

Final Liability: % _____ (Agreed / Assessed) BOLA S/N No. : _____ If NO or B 28, Ass. Lia : _____

Repair Cost: S\$ _____

Loss of Rental (LOR): S\$ _____ (_____ days)

Loss of Use (LOU): S\$ _____ (\$ x days)

Loss of Income (LOI): S\$ _____ (\$ x days)

LOR only LOU only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search S\$ _____

Medical: S\$ _____

Disbursement: S\$ _____ (e.g. Tow/ Independent)

Legal Cost S\$ _____

Total: S\$ _____ **Global Sum S\$:** _____

FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email Call

Payee 1: S\$ _____ Name 1: _____

Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____

Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____

AIG / LKK



ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio, Ind Park 2 #01-251/ 259, 569536. Tel: +65-6484 1221 Fax: +65-6484 7829 Website: www.esteempf.com.sg

Repair Estimates

SLQ 2132 H

Not Authorized
Resurvey by paint

Parts	(a) Cost / List Price Items	\$	<u>3,492.95</u>
	Plus/Less 25%	\$	<u>873.24</u>
	Total of Cost / List	\$	<u><u>2,619.71</u></u>
	(b) Nett Price Items		
	Less		
	Total of Nett Item		
	(c) Special Nett Items		
Total Parts Cost		\$	<u><u>2,619.71</u></u>
Labour		\$	<u><u>2,120.00</u></u>
Total		\$	<u><u>4,739.71</u></u>

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 returned and is subject to final approval from insurance company

Acknowledged by Repairer
Signature:
Date:

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Kenneth

Company : LKK

Survey conducted on : 26/6/19 at _____

Remarks By Surveyor

(a) The repair of this vehicle is ~~authorized~~ / is not authorized until further notice.

(b) Recommended Days of Repair : 03 day(s)

(c) Resurvey : Required / ~~Not Required~~

(d) Excess : \$ _____

(e) Signature of surveyor : Le Date: 26/6/19



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Spare Parts

Vehicle No. : SLQ 2132 H
 Make & Model : TOYOTA PRIUS
 Chassis No : JTDKB3FU903561682

Submit By : SERENCE
 Year Manufacture : 2017
 Engine No. : 2ZRS056884

Cost / List

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
1	Rear bumper <i>Bul/na</i>	1	\$497.50		✓
2	Rear bumper clip <i>na</i>	10	\$40.00		✓
3	Rear bumper side retainer LH <i>sn</i>	1	\$112.70		X
4	Rear bumper side retainer RH <i>sn</i>	1	\$112.70		X
5	Rear bumper reinforcement <i>R</i>	1	\$398.90		X
6	Rear bumper lower garnish centre <i>na/na</i>	1	\$582.60		✓
7	Rear bumper lower garnish RH <i>na/na</i>	1	\$149.70		✓
8	Rear bumper tow cover <i>sn</i>	1	\$31.70		X
9	Rear bumper under cover <i>sn</i>	1	\$355.20		X
10	Rear bumper under cover RH <i>sn</i>	1	\$187.60		X
11	Rear bumper under cover clip <i>na</i>	4	\$14.00		X
12	Tail lamp RH - UPPER	1	\$498.75		?
13	Tail lamp RH - LOWER	1	\$511.60		?
14					
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23					

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.