

ASS. REC. BY:

REF:

CS3/AG119011294/Gcd302

Special Instruction:

Conveyer: GK

## ASSIGNMENT (Office)

From (Person):

Ivy Rutilia

of

AGI

Date/Time:

26/6/19 @ 11:29 am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SDJ 8877J

Insured:

SLT 5124X

at Workshop in/s

SAT Motor

Tel:

9859 9677

of

24 Defu here 12

Policy No:

Claim No:

C10003317/JM

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

21/06/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

11:57 am @ 26/6/19

Person Contacted:

Jessie

Vehicle IN/OUT

Date/Time

Action/Instruction

Johny

SLT 5124X : NA/INC19010982/24

D.O.A 21/06/2019

SDJ 8877J : NA/INC19018112/51

D.O.A 10/09/2010

Diamondite: 2/7/2019

After repair: 5/7/2019

(08/11/13)

ASS. REC. BY:

REF

A79

## ASSIGNMENT

From:

Date:

1-7-2019

Estimated Cost:

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

To Inspect Vehicle No: SDJ 8877 J

at Workshop m/s Sat motor

of 24 Defu Lane 12

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

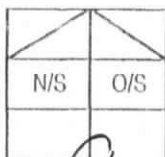
(Client's Record)

Make of Veh:

After 1.00 p.m.

(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:

4/21

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:

SDJ 8877 J

Yr Regn:

03 Mar 2014

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

Truck / Trailer or

Make:

Toyota Camry

c.c

2494

Colour:

Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

72165

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MR053 AK 500 4007247

Gen. 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:

215/55ZR17

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

01-07-19

Survey held at

w/s

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

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

Date / Time

Action / Instruction

~~\$1200~~ \$2000 - \$3000

Date/Time, File Pass to?



: Preli. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

4

Resurvey No. of Trip:

2

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

PRS

Lump Sum / I.B.I. (\$

100

60

60

220

## Nivitha (LKK Auto)

---

**From:** Ivy Ratilla <ivy.r@budgetdirect.com.sg>  
**Sent:** Wednesday, 26 June 2019 11:29 AM  
**To:** Admin-D (LKKAuto)  
**Cc:** SUR; Julie Mangubat  
**Subject:** TPPD Survey: Claim ref:C10003317/JM || OI- SLT5124X (Silver) TP- SDJ8877J || Est:0.00 || M/s Sat Motors  
**Attachments:** auto & general.pdf; SDJ8877J\_21062019 ADD.pdf; OI GIA Report SLT5124X .pdf

Hi Team,

We would like to arrange for TP PRS for SDJ8877J. Vehicle is not in yet.

Please contact PIC directly:

**Ms Jessie Ong of M/s SAT Motors at mobile no. 98599677**

Thank you.

Regards,

**Ivy**  
Admin Executive, Claims

T +65 6540 2185  
F +65 6725 0853  
E [ivy.r@budgetdirect.com.sg](mailto: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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**From:** Jessie Ong <[pakweng@satmotors.com](mailto:pakweng@satmotors.com)>

**Sent:** Tuesday, 25 June 2019 5:39 PM

**To:** Claims <[claims@budgetdirect.com.sg](mailto:claims@budgetdirect.com.sg)>; Customer Care <[help@budgetdirect.com.sg](mailto:help@budgetdirect.com.sg)>

**Cc:** 'Jonathan lim' <[jonathan@satmotors.com](mailto:jonathan@satmotors.com)>; [sean@satmotors.com](mailto:sean@satmotors.com)

**Subject:** RE: PRE-REPAIR INSEPTION OF SDJ8877J - Your Ref: SLT5124X ALONG TAMPINES ROAD ON 21.06.2019

Dear Sirs

We act for Mr Kwa Tiong King, the owner and driver of SDJ 8877J which was involved in the above captioned accident.

We are instructed that the accident was caused by the negligence of the driver of motor vehicle no. SLT 5124X.

Our search shows that you are insurers of the motor vehicle no. SLT 5124X.

We are requested to inform you that our client's vehicle is available for pre-repair inspection at the following address:

M/s SAT Motors

24 Defu Lane 12

Singapore 539131

Please request your assessor to contact our **Ms Jessie Ong of M/s SAT Motors at mobile no. 98599677**

**within forty-eight (48) hours** from the receipt of this email to arrange for the inspection.

Best Regards,

Jessie Ong

Hp : 9859 9677

Email: [pakweng@satmotors.com](mailto:pakweng@satmotors.com)

Website: [www.satmotors.com](http://www.satmotors.com)



24 Defu Lane 12 S(539131)

TEL: +65 6748 1141

FAX: +65 6749 1141

Find us on Facebook today @ [Http://www.facebook.com/SATMotors.Yourcarspecialist](http://www.facebook.com/SATMotors.Yourcarspecialist)

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[Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Owner ID Type:	Singapore NRIC
Owner ID:	6140E
Vehicle No.:	SDJ8877J
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Jul 2019
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY 2.5 AT
Primary Colour:	Silver
Manufacturing Year:	2013
Engine No.:	2ARU090860
Chassis No.:	MR053AK5004007247
Maximum Power Output:	133.0 kW (178 bhp)
Open Market Value:	\$28,050.00
Original Registration Date:	03 Mar 2014
First Registration Date:	03 Mar 2014
Transfer Count:	0
Actual ARF Paid:	\$31,270.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 Mar 2024
PARF Rebate Amount:	\$21,889.00
COE Expiry Date:	02 Mar 2024
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$78,604.00
COE Rebate Amount:	\$36,702.00
Total Rebate Amount:	\$58,591.00

The information contained herein is correct as at 01 Jul 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	24/06/2019 17:37
Date Of Accident	21/06/2019 11:10
Exact Location Of Accident	ALONG TAMPINES ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SDJ8877J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KWA TIONG KING
NRIC No	S1506140E
Email Address	KENTTKKWA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91141557
Alternative Phone No	OFFICE-91141557
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	CAMRY
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	71647750 QMY
Cover Note Number	
<b>Driver</b>	
Name of Driver	KWA TIONG KING
NRIC No	S1506140E
Date Of Birth	08/01/1961
Occupation	INDOOR
Date Of Driving Pass	07/05/1979
Driving Experience	40 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91141557
Fax Number	
Contact Number	OFFICE-91141557
EMail Address	KENTTKKWA@GMAIL.COM

Address	6A THRIFT DRIVE SINGAPORE
Postcode	535053
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	CHAIN COLLISION
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	3
Was any body injured in the Accident?	YES
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)	1

#### 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 - SINGAPORE CITY
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED

#### 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	SLT5124X
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number CB7431Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name KWA TIONG KING

Approximate Age 58

Injuries Sustain REFER TO POLICE REPORT

Injured person in which vehicle? SDJ8877G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

Address 6A THRIFT DRIVE  
SINGAPORE

Postcode 535053


**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.:

SKETCH PLAN

TAMPINES ROAD.

A: SDJ8877J

B: SLT 5124X

C: CB7431Y



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG TAMPINES ROAD WHEN SUDDENLY

I FELT A HUGE IMPACT TO THE REAR OF MY VEHICLE I

REALISED I GOT INTO A CHAIN COLLISION WITH SLT 5124X

& CB7431Y.

## DECLARATION

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

Policyholder's Signature

Date &amp; Time:

Driver's Signature

(If driver is not the policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



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

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/06/2019 11:56	Vide Report No.:	Station Diary No.:
--	------------------	--------------------

**Informant's Particulars**

Name of Informant: KWA TIONG KING			Address: 6A THRIFT DRIVE SINGAPORE 535053		
ID Type / ID No.: NRIC NO / S1506140E			Contact No.: Home/Office: Mobile: 91141557		
Nationality: SINGAPORE CITIZEN			Email: kenttkkwa@gmail.com		
Sex: Male	Age: 58	Date of Birth: 08/01/1961	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Retired			Driving Licence Information: Class: 3	Date of Expiry:	

**General Information of the Accident**

General Information of the Accident:				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/06/2019 11:10	Type of Location: Straight Road
Location:  TAMPINES ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
CB7431Y	Van	NISSAN			Seriously Damaged	0
SDJ8877J	Car	TOYOTA	CAMRY	Silver	Slightly Damaged	1
SLT5124X	Car	SUBARU	IMPREZZA	Silver		1

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDJ8877J	MSIG INSURANCE (SINGAPORE) PTE. LTD.			



**SINGAPORE  
POLICE FORCE**



T/20190624/7012

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

2 of 3

Report No. T/20190624/7012

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	KWA TIONG KING	ID No.	S1506140E
Related Vehicle	SDJ8877J (Car)	Contact No.	91141557
Hospital/Clinic	KONG KIAN CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	21/06/2019	Date Discharge	21/06/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

I WAS DRIVING ALONG TAMPINES ROAD WHEN SUDDENLY I FELT A HUGE IMPACT TO THE REAR OF MY VEHICLE, I REALISED I GOT INOT A CHAIN COLLISION WITH SLT5124X & CB7431Y.



**SINGAPORE  
POLICE FORCE**



T/20190624/7012

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

3 of 3

Report No. T/20190624/7012

**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 / TPHQ /  
SHARIFAH NOR FARIZAN BINTE SYED MOHD  
SAID  
Contact No.: 65476172

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:  
24/06/2019 11:56

Classification Of Case:


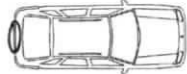
**LKK Auto Consultants Pte Ltd**

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

PRE-REPAIR INSPECTION REPORT			
AUTO & GENERAL INSURANCE (S) PL		Ref: CS3/AGI19011294/Gcd3e2	
(BUDGET DIRECT INSURANCE)190 CLEMENCEAU AVENUE #03-01 S S C SINGAPORE 239924		Date: 17-07-2019	
Code: AGI			
<b>1. Policy Particulars :- (THIRD PARTY CLAIM)</b>			
Insured Veh.	SLT 5124X	Veh. Inspected	SDJ 8877J
Policy No.		Coverage (\$)	0.00
Claim No.	C10003317/JM	Excess (\$)	0.00
Assign From	IVY RATILLA	Assign Date	26/06/2019
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA CAMRY	c.c	2494
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	MR053AK5004007247	Colour	SILVER
Odometer	72165 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	215/55Z R17	MICHELIN	6 mm
L/H Front Tyre	215/55Z R17	MICHELIN	6 mm
R/H Rear Tyre	215/55Z R17	MICHELIN	6 mm
L/H Rear Tyre	215/55Z R17	MICHELIN	6 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
<b>5. General Information</b>			
Accident Date	21/06/2019	Inspect Date / Time	01/07/2019 ( 03:00 PM )
Survey held at	SAT MOTORS 24 DEFU LANE 12 SINGAPORE 539131		
<b>5a. Remarks</b>			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,000-\$3,000			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days	

Report Ref No. CS3/AGI19011294/Gcd3e2

Inspected By



XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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