

ASS. REC. BY:

REF: CS/CT219011394/KSD312

Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Irene Tay of CTI Date/Time: 27.6.19 12.37p.m.

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SMH 9773Y Insured: YQ 462P

at Workshop m/s AE Auto Tel: 93825367

of 160 Sh Ming Drive #06-01

Policy No: Claim No: SNM190202920

Sum Insured: Excess:

Make of Veh: D.O.A. 13/06/2019  
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 27.6.19 1.00p.m. Person Contacted: Ryan Vehicle: IN / OUT

Date/Time	Action/Instruction ( ✓ ) Estimate
	YQ 462P: X
	SMH 9773Y: X
11/8	@ 4842.84 email & confirm ( \$2,150.22 Red - 31% )

ASS. REC. BY:

REF: C721

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_ AE

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

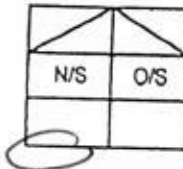
Claims No. \_\_\_\_\_

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 Report: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 1.31 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SMH97734 Yr Regn: 03, 1Z

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

Truck / Trailer or

Make: Toy Harrier c.c. 1986

Colour: n. Black A/C: Insured / Std / NI / NA

Sp. Reading: 4499 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: ZSP460 . 0089765

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 A/Rim or

Tyre Size: F: 235/55R18

R: \_\_\_\_\_

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

TOYO / YOKO or

CERAMIC 1

Front

R/Bal. 8 mm

L/Bal. 8 mm

D.O.A. 13/6/19

Survey held at

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

Rear N/S

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

Date / Time Action / Instruction

1 File pass to

2 minmen case

RECEIVED 22 AUG 2019

Date/Time, File Pass to?

22/08/19

☐ : Prell. Report☒ : Final Report

1) Typing

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S - RS - SI

Fines

Others

TOTAL

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

Report Format:

Lump Sum / I.B.I. (\$) 4,342.34 p/p

220

## Nivitha (LKK Auto)

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**From:** Shu Pei (LKKAuto) <shupeil@lkkauto.com>  
**Sent:** Thursday, 27 June 2019 12:37 PM  
**To:** assignments  
**Subject:** FW: OUR REF: SNM19D202920/TAYHP - PRE REPAIR SURVEY FOR SMH 9773Y  
  
**Importance:** High

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: [shupeil@lkkauto.com](mailto:shupeil@lkkauto.com) | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Autoexcel Engineering <aeexcel@singnet.com.sg>  
**Sent:** Tuesday, 25 June 2019 8:55 AM  
**To:** 'Irene Tay' <irene.tay@sg.cntaiping.com>  
**Subject:** RE: OUR REF: SNM19D202920/TAYHP - PRE REPAIR SURVEY FOR SMH 9773Y  
**Importance:** High

Dear Sirs,

We would like to appoint KENNETH KONG.

Thank you

Best Regards  
Ryan Soh  
93825367

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**From:** Irene Tay <[irene.tay@sg.cntaiping.com](mailto:irene.tay@sg.cntaiping.com)>  
**Sent:** Monday, June 24, 2019 5:35 PM  
**To:** Autoexcel Engineering <[aeexcel@singnet.com.sg](mailto:aeexcel@singnet.com.sg)>  
**Subject:** OUR REF: SNM19D202920/TAYHP - PRE REPAIR SURVEY FOR SMH 9773Y

### WITHOUT PREJUDICE

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.

Thank you.

Regards,

**Irene Tay**

Executive

Claims Department (Motor Division)

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Direct (65) 6389 6192

Fax (65) 62247478/62247175

Email: [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)

[www.sg.cntaiping.com](http://www.sg.cntaiping.com)



*Disclaimer :*

*This message is confidential; its contents do not constitute a commitment by China Taiping Insurance (Singapore) Pte. Ltd. except where provided for in a written agreement between you and China Taiping Insurance (Singapore) Pte. Ltd. Any unauthorized disclosure, use or dissemination, either in whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.*

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From: Autoexcel Engineering [<mailto:aeexcel@singnet.com.sg>]  
Sent: Monday, 24 June, 2019 3:50 PM  
To: Lim Shu Min <[shumin.lim@sg.cntaiping.com](mailto:shumin.lim@sg.cntaiping.com)>; Irene Tay <[irene.tay@sg.cntaiping.com](mailto:irene.tay@sg.cntaiping.com)>; Chee So Chow <[sochow.chee@sg.cntaiping.com](mailto:sochow.chee@sg.cntaiping.com)>  
Subject: RE: OUR REF: SNM19D202920/TAYHP - PRE REPAIR SURVEY FOR SMH 9773Y

Dear Officer,

Please advise as vehicle is already in our workshop.

*Thank You & Best Regards,*  
*Doreen Chan*  
64591630

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From: Lim Shu Min <[shumin.lim@sg.cntaiping.com](mailto:shumin.lim@sg.cntaiping.com)>  
Sent: Monday, June 24, 2019 10:15 AM  
To: Irene Tay <[irene.tay@sg.cntaiping.com](mailto:irene.tay@sg.cntaiping.com)>; Chee So Chow <[sochow.chee@sg.cntaiping.com](mailto:sochow.chee@sg.cntaiping.com)>;  
[aeexcel@singnet.com.sg](mailto:aeexcel@singnet.com.sg)  
Subject: OUR REF: SNM19D202920/TAYHP - PRE REPAIR SURVEY FOR SMH 9773Y  
Importance: High

Dear Irene,

Please conduct PRS SMH9773Y soonest possible.

File with Officer-In-Charge – Irene Tay – 63896192.

Thank you

**Lim Shu Min**  
Executive

Claims Department

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 63896156 | F: (65) 62247175

W: [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | FB: [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | WeChat: 太平獅城 Taiping SG

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From: Autoexcel Engineering [<mailto:aeexcel@singnet.com.sg>]

Sent: Friday, 21 June, 2019 9:09 AM

To: Claims Dept of China Taiping Insurance <[e-claims@sg.cntaiping.com](mailto:e-claims@sg.cntaiping.com)>

Subject: PRE REPAIR SURVEY FOR SMH 9773Y

Importance: High

Dear Sirs,

Please help us arrange for pre repair survey.

Our vehicle – SMH 9773Y

Accident date – 13/06/2019

Your insure – YQ 462P

Location – AE AUTO PTE LTD

160 SIN MING DRIVE # 06-01

SIN MING AUTOCITY (S) 575722

Please also let us have the list of surveyor to appoint.

Thank you

Regards

Ryan Soh

93825367

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For more information please visit <http://www.symanteccloud.com>

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**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	20/06/2019 09:58
Date Of Accident	13/06/2019 16:20
Exact Location Of Accident	BUKIT BATOK STREET 22
Country/State of Loss	SINGAPORE

**DETAILS OF OWN VEHICLE**

Vehicle Registration Number	SMH9773Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHANDRAN GANESAN
NRIC No	S7573955I
Email Address	GANESANGLOBAL@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96875000
Alternative Phone No	OFFICE-96875000
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	HARRIER
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108564937
Cover Note Number	
<b>Driver</b>	
Name of Driver	CHANDRAN GANESAN
NRIC No	S7573955I
Date Of Birth	21/05/1975
Occupation	INDOOR
Date Of Driving Pass	14/09/1996
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96875000
Fax Number	
Contact Number	OFFICE-96875000
Email Address	GANESANGLOBAL@YAHOO.COM

Address	BLK 310 #07-304 JURONG EAST STREET 32 HONG KAH EAST PLACE
Postcode	600310
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	COLLIDED INTO PARKED VEHICLE
Weather Conditions	RAINING
Road Surface	WET

#### 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 POLICE REPORT (ATTENDED BY: JAMES NG)

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	CANNOT BE UPLOADED
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ462P
Vehicle Make/Model/Colour	MIT CANTER / WHITE
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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.
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:

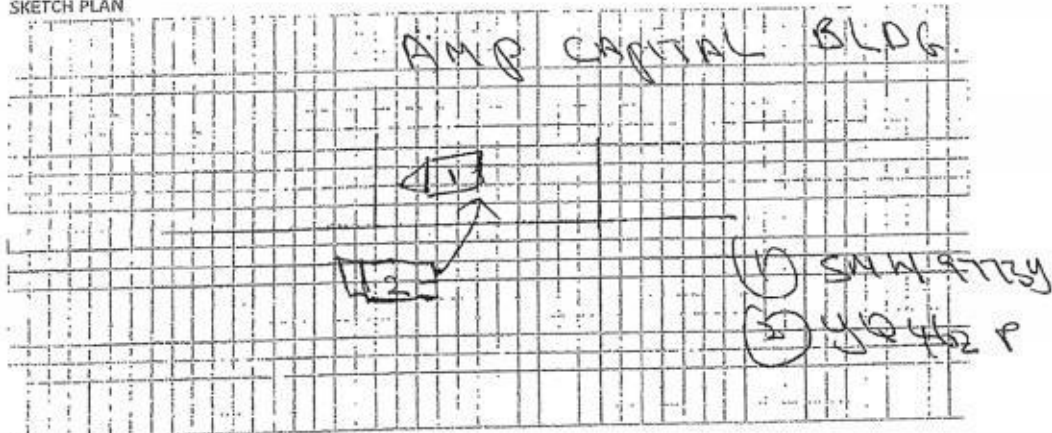
2.0 JUN 2019

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/ID:

**NG WING KIN JAMES**  
admin.vac@vicom.com.sg

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As Police Report ATTACHED

DECLARATION

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

Policyholder's Signature  
Date & Time:

20 JUN 2019

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



Reporting Centre Personnel's Signature  
Name:

NG WING KIN JAMES  
admin.vac@vicom.com.sg

### Enquire PARF/COE Rebate for Registered Vehicle

## Total Rebate Amount:

\$65,571.00

OK

AE AUTO PTE LTD  
180, Sin Ming Drive  
Sin Ming Auto City #06-01  
Singapore 575722  
Tel: 64535654, 64591630  
Fax: 64591698

Not Authorised

Permy B4pam

4 days

4842.84

Date : '24/06/2019

QUOTATION -THIRD PARTY CLAIM

CHINA TAIPING INSURANCE( SINGAPORE ) PTE LTD

Attn: Motor Claim Department . Officer In Charge

Accident on : 13/06/2019

Claim : Third Party Claim  
Veh. No : SMH 9773 Y  
Model : TOYOTA HARRIER  
Insured Ins: NTUC INCOME

QTY	PARTICULARS	AMOUNT	SURVEYOR
	Your Insurer Vehicle No : YQ 462 P		
1	TAILGATE 1712.05 R	\$ 1,988.50	✓
1	TAILGATE HARRIER EMBLEM 74.60 M	\$ 580.60	✓
1	TAILGATE W/SCREEN MOULDING M	\$ 180.50	✓
1	TAILGATE CENTER LOGO 52.60 M	\$ 65.00	✓
1	TAILGATE REFLECTOR LH 436.70 CM	\$ 745.60	✓
1	TAILLAMP PANEL LH	REPAIR	
1	TAILLAMP LH 983.50 CM	\$ 1,128.50	✓
1	REAR FENDER LH	REPAIR	
1	END PANEL	REPAIR	
1	REAR BUMPER 1255.50 Not / CM	\$ 1,325.60	✓
10	REAR BUMPER CLIPS M	\$ 35.00	✓
1	REAR BUMPER SIDE RETAINER LH	\$ See 181.45	X
		\$ 6,230.75	
	Less 25%	\$ 1,557.69	
		\$ 4,673.06	
	<u>S/NETT PARTS :</u>		
1	TAILGATE W/SCREEN SEALANT M	\$ 140.00	405M
	TOTAL S/NETT :	\$ 140.00	
	TOTAL PARTS :	\$ 4,813.06	

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:

160, Sin Ming Drive  
Sin Ming Auto City #06-01  
Singapore 575722  
Tel: 64535654, 64591630  
Fax: 64591698

[illegible]

## 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/CTI19011394/KSD3N2

Date: 26/08/2019

## REFERENCE

<b>Handling Insurer:</b>	China Taiping Insurance (Singapore) Pte. Ltd.	<b>Policy No:</b>	DMCVSN19123019000	
<b>Claimant Vehicle No :</b>	SMH9773Y	<b>Insured Vehicle No :</b>	YQ462P	
<b>Date of Loss:</b>	13/06/2019	<b>Nature of Claim:</b>	TP	<b>Claim No:</b> SNM19D202920

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

<b>Reg No:</b>	SMH9773Y	<b>Engine No:</b>	3ZRB888821
<b>Make &amp; Model:</b>	TOYOTA HARRIER, 2.0 (A)	<b>Chassis No:</b>	ZSU600089765
<b>Reg. Date:</b>	20/03/2017 (Man. Year: 2016)	<b>Odometer:</b>	44991 km
<b>Colour:</b>	Metallic Black		
<b>Engine Capacity:</b>	1986 cc		
<b>Market Value/New Car Price:</b>	N/A		
<b>Sum Insured (S\$):</b>	Market Value/New Car Price		

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

## CONDITION OF TYRES

<b>Front Tyre Size:</b>	235/55R18	<b>Rear Tyre Size:</b>	235/55R18
<b>Front Left Side:</b>	Continental 8 mm	<b>Rear Left Side:</b>	Continental 8 mm
<b>Front Right Side:</b>	Continental 8 mm	<b>Rear Right Side:</b>	Continental 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,813.06	3,602.84	1,210.22	25.14
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,180.00	1,240.00	940.00	43.12
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (S\$)</b>	<b>6,993.06</b>	<b>4,842.84</b>	<b>2,150.22</b>	<b>30.75</b>

## INSPECTION

<b>Date of Assignment:</b>	28/06/2019	
<b>Date Inspected:</b>	25/06/2019	<b>Inspected At:</b>
		Ae Auto Pte Ltd (HQ) 160 Sin Ming Drive, #06-01, Sin Ming AutoCity Singapore 575722

**Estimated Period of Repair:** 4.0 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

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 26 Aug 2019)
<b>Parts:</b>	M1-SUV	TOYOTA HARRIER 2.0 (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SMH9773Y)	
<b>Validity:</b>	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	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*TAILGATE	Bent	1,988.50 FL	*1,712.05 FL
2	1		*TAILGATE HARRIER EMBLEM	Necessary	580.60 FL	*74.60 FL
3	1		*TAILGATE W/SCREEN MOULDING	Necessary	180.50 FL	*180.50 FL
4	1		*TAILGATE CENTER LOGO	Necessary	65.00 FL	*52.60 FL
5	1		*TAILGATE REFLECTOR LH	Cracked	745.60 FL	*456.70 FL
6	1		*TAILLAMP PANEL LH (NPA)	Repair	0.00 FL	*- FL
7	1		*TAILLAMP LH	Cracked	1,128.50 FL	*983.50 FL
8	1		*REAR FENDER LH (NPA)	Repair	0.00 FL	*- FL
9	1		*END PANEL (NPA)	Repair	0.00 FL	*- FL
10	1		*REAR BUMPER	Dented/Cracked	1,325.60 FL	*1,255.50 FL
11	10		*REAR BUMPER CLIPS	Necessary	35.00 FL	*35.00 FL
12	1		*REAR BUMPER SIDE RETAINER LH	Serviceable	181.45 FL	*- FL
13	1		*TAILGATE W/SCREEN SEALANT	Necessary	140.00 FS	*40.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

<b>Sub Total (\$\$)</b>	<b>6,370.75</b>	<b>4,790.45</b>
<b>- List Item Discount on L Items 25.00/25.00% (\$\$)</b>	<b>1,557.69</b>	<b>1,187.61</b>
<b>Total Parts (\$\$)</b>	<b>4,813.06</b>	<b>3,602.84</b>

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
<b>Labour Items</b>				
1	LABOUR CHARGES,CUTTING,WELDING,REPLACE REPAIR ACCIDENT AFFECTED AREA	New	600.00	400.00
2	TO DO SPRAY PAINTING ON ACCIDENT AFFECTED AREA	New	800.00	600.00
3	TO DO ANTI RUST	New	120.00	30.00
4	TO DO SEALANT WATERPROOFING ON WELDING,CUTTING AREA,SEAL GAP ETC FOR REAR	New	120.00	0.00
5	TRANSFER TAILGATE PARTS TO ANOTHER TAILGATE	New	100.00	60.00
6	TO REMOVE REFIX REAR W/SCREEN	New	100.00	100.00
7	TO REMOVE REFIX,GARNISH,TRIM BOARD,UPHOLSTERY ETC	New	220.00	0.00
8	TO CHECK LAMP WIRING SYSTEM,REMOVE REFIX SENSOR ETC	New	120.00	50.00
<b>Gross Labour Cost (\$\$)</b>			<b>2,180.00</b>	<b>1,240.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >