

REF: CSI/SPF19012132/Eg d3^{sr}

Special Instruction:

ASSIGNMENT (Office)

From (Person): Harizul Fathon of SPF Date/Time: 9/7/19
Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant:

Surveyor: Unique Appraiser Service
Workshop: Neo RandR

OD/TP Re-inspection Evaluation

To Inspect Vehicle No: SLK 1592B Insured: SJS 5978C
at Workshop m/s NEO R and R Tel: _____
of 61 ubi Road one #01-22

Insured: SJS 5978C

Tel:

Policy No.

Claim No: AEMD/105/009/2019/072

Sum Insured:

Excess:

Make of Veh:

D.O.A.

(Client's Record)

H.O.D. Emplacement/Date:

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: _____ Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original: _____ days)

Date/Time: 25/7/19 Submit Final Fig 3600, 5 days (Red \$ 6700 / 67 %; Original 10 days)

Date/Time	Action/Instruction
	<p>SLK1592B-NA/MIG19010587/29</p> <p>8JS5476X-NA/MIG19007673/29</p> <p>*COR range = \$3600 - \$4900</p> <p>Weekend: 02 days.</p>
	<p>Don: 14/6/2019</p> <p>Don: 29/7/2019</p> <p><i>[Signature]</i></p> <p>25/7/19</p> <p>Do Not Finalise</p>

Para(1) : Parts found not replaced (To highlight *R* or *UB*, *LR*, *Etc*)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

RECEIVED 25 JUL 2019

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value : _____

Inspected/
Evaluated by:

<p><i>Fee Charged:</i></p>

Date: _____

Basic & Add	
Transport	
Photos	
Others	
Total	

200

1) Date/Time 26/7/19 File Pass to tyrisha

2) Date/Time File Return to

3) Date/Time _____ File Pass to _____

4) Date/Time File Return to

5) Date/Time _____ File Pass to _____

6) Date/Time File Return to

Nivitha (LKK Auto)

From: Hafizul Farhan RAHMAT (SPF) <Hafizul_Farhan_RAHMAT@spf.gov.sg>
Sent: Tuesday, 9 July 2019 12:20 PM
To: Admin-D (LKKAuto); assignments
Cc: Frankie THAY (SPF)
Subject: Post survey of SLK1592B (vs QX385L DOA: 29/4/2019) Part 1
Attachments: (LOD) 2019-072.pdf

Hi,

Kindly conduct post-repair survey of SLK1592B. (refer to attached)

Case file no: AEMD/105/009/2019/072.

Best Regards,

Hafizul Farhan Bin Rahmat

AEMD / PLD

Singapore Police Force

DID: (65) 6478 4840 | FAX: (65) 6478 4850



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CATHERINE LIM LLC

林 林 ADVOCATES & SOLICITORS
翠 NOTARY PUBLIC - 公証官
玲 COMMISSIONER FOR OATHS - 宣誓官
律
帥 CATHERINE C.L. LIM
館 DIRECTOR
LL.B (HONS) SINGAPORE - 法律系 - 律師
M.B.A. (BUSINESS LAW) - 商業系 - 碩士



20 Havelock Road #03-01
Central Square Singapore 059765
UEN No. 201310922K

Tel: (65) 6438 5500
Fax: (65) 6438 0111
www.catherinelimllc.com
Email: info@catherinelimllc.com
CATHERINE LIM LLC is a law
corporation with limited liability

Our Ref: CL/190505/T/NRR.sg

26 June 2019

SPF Accident Claims Section
Automotive Engineering & Management Division
Police Logistics Department
1 Mount Pleasant Road
Block 8 Old Police Academy
Singapore 298333
Attn: Claims Dept

WITHOUT PREJUDICE

via AR Registered

Dear Sir

ACCIDENT INVOLVING SLK 1592B / SJS 5978C ON 29.04.2019 ALONG PIE (CHANGI) BEFORE KALLANG BAHRU EXIT

We act for NEO R And R Pte Ltd, the owner of motor vehicle No. SLK 1592B, which was involved in the above accident.

Our client has suffered loss and damage as a result of your agent and/or servant's negligence in driving motor vehicle No. SJS 5978C. (20385L) 1CD.

Accordingly, we quantify our client's claim as follows:-

1. Cost of repair	\$ 9,800.00
2. Loss of use (10 days x \$120)	\$ 1,200.00
3. Survey fee	\$ 600.00
4. Police Report fee	\$ 44.00
5. Incidentals, transport, photocopying etc	\$ 53.50
6. Cost	\$ 963.00
	<hr/>
	\$12,660.50

We enclose herewith photocopies of our client's accident report, final repair bill, survey fee, survey report and colour photographs of our client's damaged vehicle for your immediate attention.

Please let us know within the next 14 days from the receipt of this letter, whether you are prepared to admit liability and revert with a settlement proposal, failing which our clients shall have no alternative but to commence legal proceedings against your insured.

Yours faithfully

Enc.
cc: client

418M14

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	30/04/2019 12:05
Date Of Accident	29/04/2019 16:00
Exact Location Of Accident	PIE (CHANGI) BEFORE KALLANG BAHRU EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK1592B
Insured/Policyholder	
Name Of Registered Owner	NEO R & R PTE LTD
Co Reg No	201026086E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90709947
Alternative Phone No	OFFICE-90709947

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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 HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994579
Cover Note Number	

Driver

Name of Driver	MOHAMAD NURHAN BIN RAIHAN
NRIC No	S9701015C
Date Of Birth	09/01/1997
Occupation	OUTDOOR
Date Of Driving Pass	14/02/2019
Driving Experience	0 YEAR AND 2 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97257461
Fax Number	
Contact Number	OFFICE-97257461
Email Address	NOEMAIL

Address BLK 126 BEDOK NORTH STREET 2
#03-02
Postcode 460128
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
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? 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) 2
Passenger 1
NAME: NORAHMAH BINTE HARON
GENDER: FEMALE

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?

Statement of the Driver

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE, VEHICLE IN FRONT BRAKE, SO I BRAKE MY VEHICLE AS WELL. SUDDENLY I FELT AN IMPACT OF MY VEHICLE AND REALIZE THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

Attachments

Are accident photos available for attachment?

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

DETAILS OF INJURED PERSON 1

Name	MOHAMAD NURHAN BIN RAIHAN
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLK1592B
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	NORAHMAH BINTE HARON
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLK1592B
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 insured(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 taking 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 situated 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 (a) above may be shared /disclosed:
 - (i) to all Insurers and/or any other third parties that exist to 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.



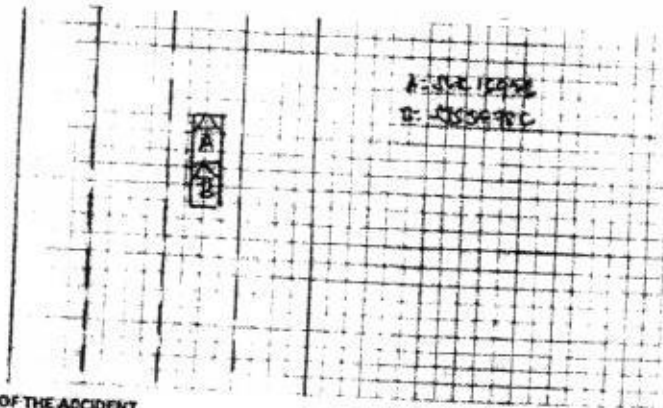
Policyholder's Signature
Date & Time:

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

Reporting Centre Representative's Signature
Name:
NRQ/IR No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

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

Policyholder's Signature
Date & Time:

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

Reporting Officer's Signature
Name:
Date & Time:



Neo R AND R PTE LTD
No. 61 Ubi Road One Oxley Bizhub #01-22 Singapore 408727
Tel: 6286 8324 / 6286 5324 Fax: 6286 1002
www.neorentalandresources.com
Reg No: 201026086E

190505

Date 8th MaY

2019

Final Repair Costs

Vehicle No: SLK1592B (HONDA VEZEL 1.5A)

Repair costs of the vehicle No. SLK1592B as per the surveyor's report
Unique Appraisers Service (attached herewith)

Dated 8th May

\$9,800.00

(Lump Sum)

Singapore Dollars : NINETHOUSAND EIGHT HUNDRED ONLY.



UNIQUE APPRAISERS SERVICE

BLK 650, HOUGANG AVENUE 8, #07-335,
SINGAPORE 530650

TEL: 88266727 FAX: 68584193

REG. NO. 47083000W

SINGAPORE, 8th May 20 18

M/S NEO R & R PTE LTD

INVOICE NO. UNI/0138/19

ITEM	PARTICULARS	AMOUNT
1.	Automobile inspection report fee for vehicle Registration. No:-SLK 1592 B Inclusive of Photographs & Transport Charges	\$ 600.00 =====

UNIQUE APPRAISERS SERVICE



UNIQUE APPRAISERS SERVICE

BLK 650, HOUGANG AVENUE 8, #07-335,
SINGAPORE 530650.

TEL: 88266727 FAX: 68584193

REG. NO. 47083000W

W/S NEO R & R PTE LTD
1, Ubi Road One, #01-22,
Maxley Bizhub,
Singapore

INSURED : -
POLICY NO : -
CLAIM NO : -
ACC. DATE : -
OUR REF : UNI/MISC/0138/19

VEHICLE PARTICULARS

REG NO : SLK 1592 B
MODEL : Honda Vezel
NO : RU1-1207642
NO : Hidden
E : 118,939 km
P : 1,500 cc
1496

COLOUR : Grey
AIRCON : Fitted
SPORTTRIM : Fitted
SEATBELT : Fitted
C/RADIO : Fitted
OTHER : -

VEHICLE CONDITION

ENGINE : Serviceable
CHASSIS : Serviceable

BODY WORK : Good

FRONT TYRE	BALANCE	30%	SIZE	215/60R16	MAKE	Dunlop
FRONT TYRE	BALANCE	30%	SIZE	215/60R16	MAKE	Ling Long
REAR TYRE	BALANCE	30%	SIZE	215/60R16	MAKE	Dunlop
REAR TYRE	BALANCE	30%	SIZE	215/60R16	MAKE	Ling Long

VEHICLE DAMAGE ASSESSMENT AND RECOMMENDED COST OF REPAIR

ESTIMATOR'S EST.
7.20

LESS EXCESS:-

OUR REVISED

\$ 9,800.00

N.A.

\$ 9,800.00

NOTES:

In the circumstances, repairs to the vehicle would take approximately ten (10) days to complete. (excluding of Sunday & public holidays)

The repair was carried out on a "Without Prejudice" basis only.

VEHICLE DESCRIPTION OF DAMAGED:

The vehicle sustains damages to the rear portion, description are listed overleaf.

UNIQUE APPRAISERS SERVICE

ADJUSTMENT OF REPAIR COST AND REPLACEMENT OF PARTS:

* Instruction Received

Veh No: SLK 1592 B
Assign By: Mr. Jeans
Date: 02-05-19

Date of Inspection: 02-05-19
Date of Re-inspection:
Date of Report: 08-05-19

Workshop: NEO R & R Pte Ltd

QTY	DESCRIPTION OF PARTS AND LABOUR	DESCRIPTION OF DAMAGE	REPAIR'S EST.	OUR REVISED
1 pc	rear bumper fascia	dented & distorted <i>DD</i>	\$ 893.50	\$ 893.50 <i>3741</i>
2 pcs	rear bumper side pad (n/s only)	dented & distorted <i>✓</i>	504.00	252.00 <i>✓</i>
2 pcs	rear bumper reflector (n/s only)	cracked <i>X NN</i>	300.80	150.40
1 pc	spare tyre panel lower cover	dented & distorted <i>X NN</i>	390.00	390.00
1 set	rear bumper lower cover clip	necessary <i>rec</i>	60.00	60.00 <i>223</i>
1 pc	rear end panel	dented & distorted <i>X R</i>	589.00	589.00
1 pc	rear end panel trim cover	cracked <i>X NN</i>	292.30	292.30
1 pc	tailgate	dented & distorted <i>DD</i>	1,310.90	1,310.90 <i>3099</i>
1 pc	tailgate screen moulding	necessary <i>rec</i>	125.00	125.00 <i>✓</i>
1 pc	tailgate garnish	waived <i>X NN</i>	392.70	0.00
1 pc	tailgate "Vezel" emblem	necessary <i>rec</i>	58.90	58.90 <i>325</i>
1 pc	tailgate weatherstrip	deformed <i>X NN</i>	255.40	255.40
1 pc	tailgate inner lock	bent <i>✓</i>	280.00	280.00 <i>204</i>
1 pc	tailgate inner lock latch	bent <i>X NN</i>	32.50	32.50 <i>X</i>
2 pcs	tailgate lamp (n/s only)	cracked <i>rec</i>	921.20	460.60 <i>✓</i>
1 pc	tailgate "H" emblem	necessary <i>rec</i>	45.00	45.00 <i>32</i>
2 pcs	taillamp (n/s only)	cracked <i>rec</i>	1,102.00	551.00 <i>1420</i>
2 pcs	rear body panel trim cover (n/s only)	cracked <i>X NN</i>	970.40	485.20 <i>X</i>
1 set	rear body panel trim cover clip	necessary <i>X NN</i>	60.00	60.00 <i>X</i>
1 pc	rear n/s body panel wheel arch garnish	deformed <i>dd</i>	198.60	198.60 <i>✓</i>
1 pc	spare tyre panel	dented & distorted <i>X NN</i>	1,130.00	1,130.00
1 pc	spare tyre top cover	deformed <i>X NN</i>	380.00	380.00
1 pc	rear tool tray	cracked <i>X NN</i>	385.00	385.00
	Less 20% discount on parts		\$ 10,677.20	\$ 8,385.30
				1,677.06
				\$ 6,708.24
	<u>S/Nett Items</u>			
1 pc	tailgate screen dam rubber	necessary <i>rec</i>	\$ 100.00	\$ 80.00 <i>301</i>
1 tube	tailgate screen sealant	necessary <i>rec</i>	100.00	50.00 <i>✓</i>
1 tube	body panel join sealant	necessary <i>X</i>	100.00	50.00 <i>✓</i>
1 set	reverse parking sensor	dented <i>dd</i>	300.00	280.00 <i>3200</i>
			\$ 11,277.20	\$ 7,168.24 <i>2801</i>
	<u>Labour charges & misc.</u>			
	To dismantle & refit rear carpeting, side trim cover, upholstery to facilitate repair.		\$ 500.00	\$ 400.00 <i>501</i>
	To dismantle necessary rear end attachments, place vehicle on cellette bench to perform chasis alignment to original specification.		\$ 500.00	\$ 400.00 <i>X NN</i>
	To dismantle petrol tank & attachment to facilitate repair.		\$ 200.00	\$ 120.00 <i>X NN</i>
			\$ 12,477.20	\$ 8,088.24
	Continue page 2.....			<i>501</i>

UNIQUE APPRAISERS SERVICE



Automobile Adjuster K H Quek

UNIQUE APPRAISERS SERVICE


ADJUSTMENT OF REPAIR COST AND REPLACEMENT OF PARTS:

* Instruction Received

Veh No: SLK 1592 B

QTY	DESCRIPTION OF PARTS AND LABOUR	DESCRIPTION OF DAMAGE	REPAIR'S EST.	OUR REVISED
continue from page 1. Balance carried forwards		\$12,477.20	\$ 8,088.24
	<u>Labour charges & misc</u>			
	To dismantle and replace damaged parts, to straighten, repair & reshape rear n/s body panel, rear chassis members, rear body n/s inner panel & align necessary parts.		\$ 2,400.00	\$ 2,000.00 40%
	To transfer tailgate fittings		\$ 180.00	\$ 100.00 50%
	To transfer tailgate screen		\$ 200.00	\$ 160.00 100%
	To putty & respray paint on affected accident sections		\$ 2,200.00	\$ 1,600.00 3600%
	To respray rust proof on affected accident areas		\$ 300.00	\$ 200.00 30%
	To renew reverse parking & test functions		\$ 100.00	\$ 40.00 20%
	To check, test lighting & wiring functions		\$ 80.00	\$ 40.00 30%
	Note:- Contract job as agreed at a lump sum amount of:-		\$ 17,937.20	\$ 12,228.24 \$ 9,800.00 1239%
	<p>P- 2559.88</p> <p>M- 280</p> <p>L- 1280</p> <p>4110.88</p> <p>L/S - 3288.79</p> <p>= 3300</p> <p>5 days</p>			

UNIQUE APPRAISERS SERVICE



Automobile Adjuster K H Quek.



Your Ref: AEMD/105/009/2019/072

Date: 29th July 2019

Our Ref: CS1/SPF19012132/Eqd3s2

M/s Automotive Engineering & MGT Divison
Accident Claim Section (Singapore Police Force)
1 Mount Pleasant Road
Blk 8 Old Police Academy
Singapore 298333

Attn: Hafizul Farhan

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: SLK 1592B
INSURED VEHICLE: SJS 5978C ACCIDENT DATE: 29/04/2019**

We thank you for your instruction on 09/07/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SLK 1592B from M/s Unique Appraisers Service.
- b) Final Repair Bill of SLK 1592B from M/s Neo R And R Pte Ltd.
- c) Singapore Accident Statement of Vehicle SLK 1592B.
- d) Damaged vehicle photographs of SLK 1592B.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SLK 1592B
Make & Model	: Honda Vezel 1.5
Year of Registration	: 2017
Chassis Number	: RU11207642
Engine Capacity	: 1496 cc

2. We recommend that the repairs of the entire damage require about 5 (Five) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLK 1592B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BUMPER FASCIA	DENTED	893.50	741.00
2	REAR BUMPER SIDE PAD	N/S DENTED / DISTORTED	504.00	252.00
2	REAR BUMPER REFLECTOR	NOT NECESSARY	300.80	-
1	SPARE TYRE PANEL LOWER COVER	NOT NECESSARY	390.00	-
1	SET REAR BUMPER LOWER COVER CLIP	NECESSARY	60.00	23.00
1	REAR END PANEL	TO REPAIR SEE LABOUR	589.00	-
1	REAR END PANEL TRIM COVER	NOT NECESSARY	292.30	-
1	TAILGATE	DENTED	1,310.90	1,098.00
1	TAILGATE SCREEN MOULDING	NECESSARY	125.00	125.00
1	TAILGATE GARNISH	NOT NECESSARY	392.70	-
1	TAILGATE "VEZEL" EMBLEM	NECESSARY	58.90	35.00
1	TAILGATE WEATHERSTRIP	NOT NECESSARY	255.40	-
1	TAILGATE INNER LOCK	BENT	280.00	204.00
1	TAILGATE INNER LOCK LATCH	NOT NECESSARY	32.50	-
2	TAILGATE LAMP	N/S CRACKED	921.20	460.60
1	TAILGATE "H" EMBLEM	NECESSARY	45.00	32.00
2	TAILLAMP	N/S CUT	1,102.00	480.00
2	REAR BODY PANEL TRIM COVER	NOT NECESSARY	970.40	-
1	SET REAR BODY PANEL TRIM COVER CLIP	NOT NECESSARY	60.00	-
1	REAR N/S BODY PANEL WHEEL ARCH GARNISH	DEFORMED	198.60	198.60
1	SPARE TYRE PANEL	NOT NECESSARY	1,130.00	-
1	SPARE TYRE TOP COVER	NOT NECESSARY	380.00	-
1	REAR TOOL TRAY	NOT NECESSARY	385.00	-
	LESS 20% DISCOUNT		-	-729.84
			10,677.20	2,919.36
<u>SPECIAL NETT ITEMS</u>				
1	TAILGATE SCREEN DAM RUBBER (SN)	NECESSARY	100.00	30.00
1	TUBE TAILGATE SCREEN SEALANT (SN)	NECESSARY	100.00	50.00
1	TUBE BODY PANEL JOIN SEALANT (SN)	NOT NECESSARY	100.00	-
1	SET REVERSE PARKING SENSOR (SN)	DENTED	300.00	200.00
			600.00	280.00

Report Ref No. CS1/SPF19012132/Eqd3s2



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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	TO DISMANTLE & REFIT REAR CARPETING, SIDE TRIM COVER, UPHOLSTERY TO FACILITATE REPAIR.		500.00	50.00
	TO DISMANTLE NECESSARY REAR END ATTACHMENTS, PLACE VEHICLE ON CELLETTE BENCH TO PERFORM CHASSIS ALIGNMENT TO ORIGINAL SPECIFICATION.	NOT NECESSARY	500.00	-
	TO DISMANTLE PETROL TANK & ATTACHMENT TO FACILITATE REPAIR.	NOT NECESSARY	200.00	-
	TO DISMANTLE AND REPLACE DAMAGED PARTS, TO STRAIGHTEN, REPAIR & RESHAPE REAR N/S BODY PANEL, REAR CHASSIS MEMBERS, REAR BODY N/S INNER PANEL & ALIGN NECESSARY PARTS. INCLUSIVE OF THE REPAIR OF REAR END PANEL.		2,400.00	400.00
	TO TRANSFER TAILGATE FITTINGS.		180.00	50.00
	TO TRANSFER TAILGATE SCREEN.		200.00	100.00
	TO PUTTY & RESPRAY PAINT ON AFFECTED ACCIDENT SECTIONS.		2,200.00	600.00
	TO RESPRAY RUST PROOF ON AFFECTED ACCIDENT AREAS.		300.00	30.00
	TO RENEW REVERSE PARKING & TEST FUNCTIONS.		100.00	20.00
	TO CHECK, TEST LIGHTING & WIRING FUNCTIONS.		80.00	30.00
			6,660.00	1,280.00
	GRAND TOTAL		17,937.20	4,479.36
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,600.00

Report Ref No. CS1/SPF19012132/Eqd3s2

THE ESTIMATED UPPER RANGE OF REPAIR COST FOR THE DAMAGED VEHICLE IS IN THE REGION OF \$3,600.00 - \$4,900.00

RECOMMENDED REPAIR DAYS : 5

WEEKENDS : 2

TOTAL DAYS : 7

CHEN TSUE YEE

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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