

ASS. REC. BY:

REF:

CS/SPF/19012709/R1+F302

Special Instruction:

Surveyor

Rasul

ASSIGNMENT (Office)

From (Person):

Hafizul

of

SPF

Date/Time:

18.7.19 3.31pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

9BJ 1831K

Insured:

QX 588T

at Workshop m/s

Charm's customcraft

Tel:

62717054

of

Blk 1010 Bukit morah lane 3 #01-105

Policy No:

Claim No:

AEMD/106/009/2019/078

Sum Insured:

Excess:

Make of Veh:

D.O.A.

10.7.19

(Client's Record)

CA / REV / REP. / REV 24 HRS

emp

H.O.D. Endorsement:

Date/Time:

18.7.19 3.57p.m

Person Contacted:

sharon

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓)

Estimate

GBJ1831K X

Pending Liability.

Submit preli report

Do Not Finalise

Nivitha (LKK Auto)

From: Hafizul Farhan RAHMAT (SPF) <Hafizul_Farhan_RAHMAT@spf.gov.sg>
Sent: Thursday, 18 July 2019 3:31 PM
To: Admin-D (LKKAuto); assignments
Cc: Frankie THAY (SPF)
Subject: Request for Pre-Repair Survey of GBJ1831K

Hi,

Kindly conduct Pre-repair survey for **GBJ1831K** at

CHARN'S CUSTOMCRAFT
BLK 1010 BUKIT MERAH LANE 3
#01-105
SINGAPORE 159724

Contact: 6271 7054 / 6273 3304

Thank you.

Best Regards,

Hafizul Farhan Bin Rahmat

AEMD / PLD

Singapore Police Force

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



HOME TEAM
TRANSFORMATION 2025
One Home, One Team
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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	11/07/2019 17:16
Date Of Accident	10/07/2019 18:05
Exact Location Of Accident	SERVICE ROAD OF BLK 425 CLEMENTI AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ1831K
Insured/Policyholder	
Name Of Registered Owner	CHARLOTTE GRACE CAKESHOP
Co Reg No	53219971E
Email Address	JIAEN89@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91130404
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	SUZUKI
Model	EVERY GA660
Exact Purpose for which vehicle was being used at time of accident	DELIVERY OF GOODS
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

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107470927
Cover Note Number	

Driver

Name of Driver	LING JIA EN
NRIC No	S8912571E
Date Of Birth	09/04/1989
Occupation	INDOOR
Date Of Driving Pass	09/04/2008
Driving Experience	11 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91130404
Fax Number	
Contact Number	
Email Address	JIAEN89@GMAIL.COM

Address	BLK 316B ANCHORVALE LINK #09-197
Postcode	542316
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: : MARSHALL SIN SIAH LONG GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2369999 - FAX NO: 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT (REPORT NO.: T/20190711/2069)

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	CEASED BY TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	QX588T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	LIU HAI HAN
NRIC/Passport Number	
Contact Number	6872 9999

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO: 90J 1831K
ACCIDENT DATE: 10/07/19 @ 18:05pm

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.

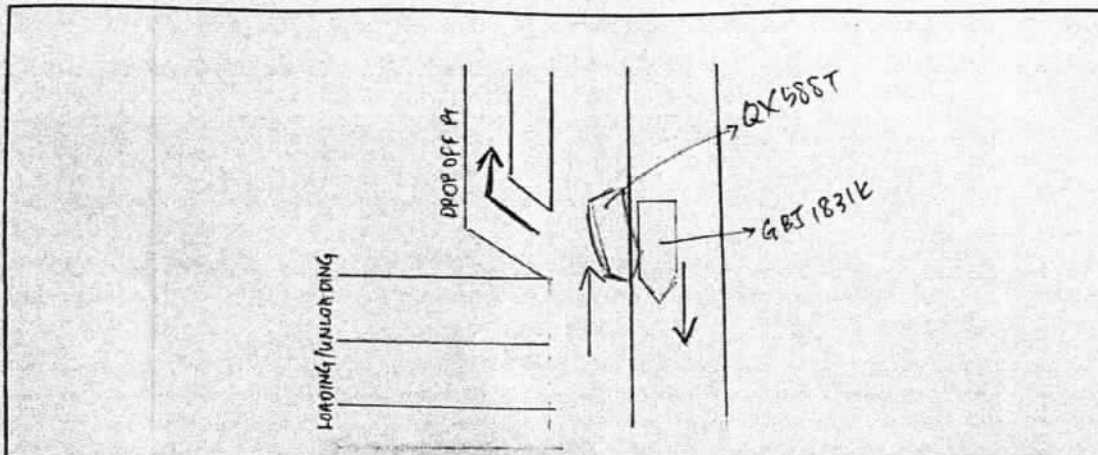
NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION

CHARLOTTE GRACE CAKESHOP
X 9768 9827
BLK 5 EVERTON PARK #01-24 8080006
WWW.CHARLOTTEGRACE.COM
Policyholder's Signature
Date & Time:

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

CHARNE'S CUSTOMCRAFT
Reporting Centre Person's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

GBJ1831K van used for delivering goods at the point of Accident.

Refer to Police Report

OWN DAMAGE () 3RD PARTY CLAIM ☒ REPORTING ONLY () OWN WORKSHOP ()

DECLARATION

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

CHARLOTTE GRACE CAKESHOP
9788 9827

BLK 5 EVERTON PARK #01-24 S080005
Policeholder's Signature
WWW.CHARLOTTE-GRACE.COM
Date & Time:

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

CHARN'S CUSTOMCRAFT

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20190711/2069

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

1 of 3

Report No. T/20190711/2069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/07/2019 13:30		Vide Report No.: D/20190710/0078		Station Diary No.: 71	
Informant's Particulars					
Name of Informant: LING JIA EN			Address: APT BLK 316B ANCHORVALE LINK #09-197 SINGAPORE 542316		
ID Type / ID No.: NRIC NO / S8912571E			Contact No.: Home/Office: Mobile: 91130404		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 30	Date of Birth: 09/04/1989	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/07/2019 18:00	Type of Location: Service Road
Location: Along Road 1 CLEMENTI AVENUE 1				
Service Road of Blk 425 Clementi Avenue 1				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ1831K	Van	SUZUKI	Every	White	Slightly Damaged	1
QX588T	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190711/2069

2 of 3

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20190711/2069

CONTINUATION OF REPORT

Driver			
Name	LING JIA EN	ID No.	S8912571E
Related Vehicle	NIL	Contact No.	91130404
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/07/2019 at about 1800hrs, I was driving along the Service Road of Blk 425 Clementi Avenue 1 when the Police car QX588T hit my van. My van suffered damages to the driver door. Traffic police attended to the incident.



**SINGAPORE
POLICE FORCE**



T/20190711/2069

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999




3 of 3
Report No. T/20190711/2069

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: A / SI FOO SHAN YI SUNNY 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/07/2019 13:30
Officer In Charge Of Case: TP / GIT / SI YEO CHUN JIAN Contact No.: 65476213	Classification Of Case: 

Authentication Stamp
NP168

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	9971E
Vehicle Details	
Vehicle No.:	GBJ1831K
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Jul 2019
Vehicle Make:	SUZUKI
Vehicle Model:	EVERY GA 660 A/T 2WD 5DR LGV
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	R06A2132385
Chassis No.:	DA17V257047
Maximum Power Output:	-
Open Market Value:	\$13,396.00
Original Registration Date:	13 Feb 2019
First Registration Date:	13 Feb 2019
Transfer Count:	0
Actual ARF Paid:	\$670.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	12 Feb 2029
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$26,230.00
COE Rebate Amount:	\$25,144.00
Total Rebate Amount:	\$25,144.00

The information contained herein is correct as at 11 Jul 2019

OK

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5107470927

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| 1. Index mark and Registration Number of Vehicle | Cover : Comprehensive |
| Chassis Number | : To Be Advised |
| 2. Name of Policyholder | : DA17V257047 |
| 3. Effective Date of Insurance | : CHARLOTTE GRACE CAKESHOP |
| 4. Expiry Date of Insurance | : 13 Feb 2019 |
| 5. Persons or Classes of Persons entitled to drive# | : 12 Feb 2020 |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |
| This Policy does not cover | |
| (a) Use for hire or reward. | |
| (b) Use for racing, pace-making, reliability trial or speed-testing. | |
| (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle. | |
| # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings. | |

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: HL BANK
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)


Agency : S & M ALLIANCE PTE LTD (00000614373)
Date of Issue : 12 Feb 2019 14:39 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



CHARN'S CUSTOMCRAFT

Accident Claim Repair, Corrosion Welding, Body Dent Repairs,
Spray-Painting, Mechanical Repair And Customizing of Cars

BLOCK 1010, BUKIT MERAH LANE 3, #01-105, SINGAPORE 159724
BLOCK 1009, BUKIT MERAH LANE 3, #01-82, SINGAPORE 159723
TEL: 6271 7054, 6273 3304 FAX: 6273 6676 EMAIL: charns@singnet.com.sg
Bus. Reg. No. 251513/00M GST Reg. No. M90367863L

NTUC/SPF(QX588T)

DOA: 10/07/2019@1805

S'PORE POLICE FORCE

17/07/2019

ATTN: ACCIDENT CLAIMS SECTION

THIRD PARTY CLAIM

ESTIMATE COST OF REPAIR FOR VEHICLE NO:

GBJ 1831 K - SUZUKI EVERY GA 660 A/T 2WD 5DR LGV

CHASSIS NO: DA17V257047 (2017)

1 pc	Front fender inner shield <i>cut</i> ✓	\$ 123.60
1 pc	RH Door <i>buc</i> ✓	\$ 825.30
		<u>\$ 948.90</u>
	LESS 15%	\$ 142.34
		<u>\$ 806.56</u>

1 pc	RH door co. reg sticker (S/NETT) <i>rec</i> ✓	\$ 25.00
1 pc	Rim hub (S/NETT) <i>sea</i> ✓	\$ 125.00

Alignment	\$ 60.00 ✓
Remove and reinstall RH door fittings & glass.	\$ 60.00 40

Remove necessary parts: jacking, panel beating, repair and straighten RH rocker panel, front fender RH and installation \$ ~~500.00~~ 350 of the above.

(Extra) Putty and respray front fender RH, RH door and RH rocker panel.

	\$ 650.00 500
	\$ 2,226.56
ADD 7% GST	\$ 155.86
	<u>\$ 2,382.42</u>

Note: The above is an estimate only. IF other parts requested during the course of repair, we will inform you accordingly.

All parts are subject to availability.

CHHARN'S CUSTOMCRAFT

.....
[Signature]

[Signature]
23/7/19
R4sul
Hp 90010068
4 days
P/P
22/07/19 @ 1520
Respray before paint




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

Affiliated to Federation Internationale Des Experts En Automobile			
AUTOMOTIVE ENGINEERING & MGT DIVISION		Ref : CS/SPF19012709/R1tf3e2	
ACCIDENT CLAIM SECTION (SPORE POLICE FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD POLICE ACADEMYSINGAPORE 298333 ATTN : HAFIZUL		Date : 12-11-2019	
		Code : SPF	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	QX 588T	Veh. Inspected	GBJ 1831K
Policy No.		Coverage (\$)	0.00
Claim No.	AEMD/105/009/2019/078	Excess (\$)	0.00
Assign From	HAFIZUL	Assign Date	18/07/2019
2. Vehicle Particulars & Condition			
Make & Model	SUZUKI EVERY GA 660 A/T	c.c	658
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	DA17V257047	Colour	WHITE
Odometer	7296	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	145/80 R12	BRIDGESTONE	5 mm
L/H Front Tyre	145/80 R12	BRIDGESTONE	5 mm
R/H Rear Tyre	145/80 R12	BRIDGESTONE	5 mm
L/H Rear Tyre	145/80 R12	BRIDGESTONE	5 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	10/07/2019	Inspection Date	22/07/2019
Survey held at	CHARN'S CUSTOMCRAFT BLK 1010 BUKIT MERAH LANE 3 #01-105 SINGAPORE 159724		
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:		4 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. GBJ 1831K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT FENDER INNER SHIELD	CUT	123.60	123.60
1	RH DOOR	BUCKLED	825.30	825.30
	LESS 15% DISCOUNT		-142.34	-142.34
			806.56	806.56
SPECIAL NETT ITEMS				
1	RH DOOR CO. REG STICKER (SN)	NECESSARY	25.00	25.00
1	RIM HUB (SN)	SCRATCHED	125.00	125.00
			150.00	150.00
LABOUR				
	ALIGNMENT.		60.00	60.00
	REMOVE AND REINSTALL RH DOOR FITTINGS & GLASS.		60.00	40.00
	REMOVE NECESSARY PARTS:JACKING, PANEL BEATING, REPAIR AND STRAIGHTEN RH ROCKER PANEL, FRONT FENDER RH AND INSTALLATION OF THE ABOVE.		500.00	350.00
	(EXTRA) PUTTY AND RESPRAY FRONT FENDER RH, RH DOOR AND RH ROCKER PANEL.		650.00	500.00
			1,270.00	950.00
GRAND TOTAL			2,226.56	1,906.56
RECOMMENDED COST OF REPAIRS (REPAIR COST NOT CONCLUDE)				1,906.56

Report Ref No. CS/SPF19012709/R1tf3e2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

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.