ISS. REC. BY: MOVELS	CS / 190 12737 Uvds 2
SS. REC. BY: 7900-0	ASSIGNMENT
	CLP 19397 4000
rom: Date:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
stimated Cost:	Truck / Trailer or (A)
DD (TP WS TP RES OD RES EVA INV MV	0) (1 at 14h 1R511101
To Inspect Vehicle No:	A/C Inquired / Std / NI / NA
at Workshop m/s	Colour Colour Tipedia languard Std NI NA
of	Sp. Reading 5 7 47 5
Insured:	Erig/No: RU3/25253
Policy No.	
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
(Policy Condition)	R:
Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value: 7 Vi.	Front Rear
IDAC/Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal mm
GIA PR Seen: Consistent? : Yes or No	L/Bal. 7 mm L/Bal. 7 mm
Est Repairs: 6 days Res.: Yes or No	DOA 8/7/18 D.O. 10/7/18
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at
17A 43	SEL Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CONTRACTOR OF TAMES OF THE PARTY OF THE PART	IN/OUT Re~
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction Next Hilly Fyrs. 8800 Dep >>till9 4/5 \$ 7200 (Re	
RECE	IVED 2 2 JUL 2019
	/- him
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 6 5XIS-
	Resurvey No. of Trip: Survey Fee: 170+73
t) : Final Report	Turnetten PD
1) : Final Report Date(Time, File Return to?	Transportation: 50
t) : Final Report Date(Time, File Réturn to?)	Add Fee: Site Insp (\$)_\$+RS_SI 50
1) : Final Report Date(Time, File Return to? 2) >>1 - typist	Add Fee: Site Insp (\$)_\$+RS_\$ 50 99
1) : Final Report Date(Time, File Return to?	Add Fee: Site Insp (\$)_s+Rs_si 50

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BIAVIVA

Nissan Qashqai 1.2A DTG-T Premium Owner Selling \$79K

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Lady Owner, Law Mileage: Road Tax Till May 2020, 100% Accident Free. Direct Owner Started

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vezel rs

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Make

Model

Price

Depreciation

Reg Date 2017 Eng Cap

Mileage

Sort by Date Posted

Acresmond Sentility

Search Selection

vezel rs

\$77,000

Amy

\$8,560 /yr

Any

03-May-2017

1,496 cc

Anv

46,271 km

Any



Only 1 Owner, Rare High Spec Vezel 1.5A RS (Non Hybrid) Model In The Market, Authentic Low Mileage, Silent Undercarriage, Smooth Honda Vezel 1,5A RS Gearbox Transmission. Accident Free, Perfect Chassis. No Repairs Needed. High In-House Financing Available Easily, Call Us Now Or Vis

Posted: 21-Jun-2019 Tags: 2017 Honda Vezel, 2017 honda vezel, Honda Vezel, honda vezel, Honda, Vezel, vezel, Used Honda

Save this search criteria, to get email alerts whenever a match is found.

Model MUKE

Price

Depreciation

Reb Date

Eng Cap

Mileag∈

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	478A
Vehicle No.:	SLR1939Z
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Jul 2019
Vehicle Make:	HONDA
Vehicle Model:	VEZEL HYBRID 1.5RS AUTO
Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	LEB5952599
Chassis No.:	RU31252583
Maximum Power Output:	112.0 kW (150 bhp)
Open Market Value:	\$28,939.00
Original Registration Date:	02 Aug 2017
First Registration Date:	02 Aug 2017
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00 2500
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Aug 2027
PARF Rebate Amount: Intended COE Rebate Details	\$3,750.00
COE Expiry Date:	01 Aug 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,001.00
COE Rebate Amount:	\$40,135.00
Total Rebate Amount:	\$43,885.00

The information contained herein is correct as at 22 Jul 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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.
- 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 Centro 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	09/07/2019 14:41	
Date Of Accident	08/07/2019 21:15	
Exact Location Of Accident	NEW UPPER CHANGI ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

DETAILS OF OWN VEHICLE

SLR1939Z Vehicle Registration Number

Insured/Policyholder

CHEN JUI-HUA@CHEN CARY MRS KEE CHEN JUI-HUA Name Of Registered Owner

S2223478A NRIC No

KEVINKEESP@GMAIL.COM Email Address (LOCAL) +65-96784768 Mobile Phone No

OFFICE-96784768 Alternative Phone No

Vehicle Particulars

HONDA Manufacturer VEZEL Model

Exact Purpose for which vehicle was being used at PRIVATE USE time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY If No, Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

AXA INSURANCE PTE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

GA250122/1 Policy Number

Cover Note Number

Driver

KEE SZU PING Name of Driver S9490229J NRIC No

08/09/1994 Date Of Birth INDOOR Occupation 15/02/2013

Date Of Driving Pass **6 YEARS AND 4 MONTHS** Driving Experience

MALE Gender

(LOCAL) +65-96784768 Mobile Number

Fax Number

Contact Number

KEVINKEESP@GMAIL.COM EMail Address

Address "

50 THOMSON TERRACE

Postcode

574581

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

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?

Number of vehicles (including own vehicle)

2

NO

involved in the accident

YES

Was any body injured in the Accident?

1 500 00

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)

.

I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: LOUIS SAW YONG KIAT

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

10 UBI AVENUE 3

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

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 Vehicle Make/Model/Colour CB5409B

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category

KAMSANI BIN JAMAL

NRIC/Passport Number

S1591671J

Contact Number

Name of Driver

87520815

Address

Page 2 of 15

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

KEE SZU PING

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLR1939Z

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

50 THOMSON TERRACE

Postcode

574581

DETAILS OF INJURED PERSON 2

Name

LOUIS SAW YONG KIAT

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLR1939Z

Were seat belts wom?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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.
- 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-
- 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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 to 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)
 - (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
- 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
- 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,
- 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.
- 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

NRICZEIN No.:

SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DECLARATION

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

Driver's Slovature

17470

Reporting Centre Personnel's Signature





Report No. T/20190709/7009

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

	ar 4	TRAFFIC	ACCIDENT
REPORT	OF A	IKAFFIG	ACCIDENT

Date/Time Report Made: 09/07/2019 11:52		lade:	Vide Report No.:	Station Diary No.:		
Informa	nt's Particu	ulars				
Name of Informant: KEE SZU PING			Address: 50 THOMSON TERRACE SINGAPORE 574581			
ID Type / ID No.: NRIC NO / S9490229J			Contact No.: Home/Office:	Mobile: 96784768		
Nationality: SINGAPORE CITIZEN		EN	Email: kevinkeesp@gmail.com			
Sex: Age: Date of Birth: 08/09/1994			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: COFFEESHOP MANAGER		NAGER	Driving Licence Information: Class: 3,3A	Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/07/2019 21:15	Type of Location Straight Road
Location: NEW UPPER	CHANGI ROAD			
vvcaurer,		Road Surface:		Road Speed Limit:
Weather: Clear		Dry		30 Km/h
The state of the s			rking	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
CB5409B	Bus/Coach/Mi	TOYOTA	Hiace	White	No Damage	0
SLR1939Z	Car	HONDA	Vezel	Red	Slightly Damaged	1

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLR1939Z	AXA INSURANCE SINGAPORE PTE	Ga250122	02/08/2018	01/08/2019	





Report No. T/20190709/7009

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

CONTINUATION OF REPORT

AUA ERGRAHMAN II	volved: No				
No. of Pedestrian	s Injured: NIL	Use of Pede	strian	Cross	ing: NA
Driver					
Name	KAMSANI BIN JAMAL		ID No.		S1591671J
Related Vehicle	CB5409B (Bus/Coach/Minibus)			ct No.	87520815
Hospital/Clinic	NIL	I I	Class of Driving Licence & Expiry Date		Class: 3,3A Date of Expiry: NIL
	\$100	Date Discha	arge	NIL	
Date Treatment	NIL ted Medical Leave NIL	Degree of Ir		NIL	
	ted Medical Leave NIL	Dogico oi ii	47		Total Company of the last
Driver	WEE CZILI DING		D No		S9490229J
Name	KEE SZU PING		10 110.		
Related Vehicle	SLR1939Z (Car)		Contact No.		96784768
Hospital/Clinic	KIRIN CLINIC & SURGERY		Class Drivin Licend Expiry	g	Class: 3,3A Date of Expiry: NIL
Date Treatment	09/07/2019	Date Discha	ischarge 09/07/		7/2019
		Degree of Ir		Slight	
	ted Medical Leave 03	Dogioc ci ii	1,000		
Passenger	LOUIS SAW YONG KIAT	Ti	D No		S9403345D
Name	LOUIS SAW TONG KIAT		2 110		5.51 05.75 0 755:
Related Vehicle	SLR1939Z (Car)		Contact No.		91870979
Hospital/Clinic	KIRIN CLINIC & SURGERY		Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	09/07/2019	Date Discha	arge	09/07	7/2019
	ted Medical Leave 03	Degree of Ir		Slight	

Brief Details.

Accident between vehicle SLR1939Z and CB5409B

Accident taken place at 9.15pm on 08/07/2019.

Driver: Kee Szu Ping (S9490229J) Passenger: Louis Saw Yong Kiat (S9403345D)

Accident happened along the U Turn lane of new upper changi rd at the junction of bedok south ave 3. The vehicle (SLR1939Z, which i was the driver) was stationary at the red traffic light for about 1





Report No. T/20190709/7009

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

CONTINUATION OF REPORT

minute before impact from the rear. Vehicle was hit in the rear by a passenger van (CB5409B) driven by Mr KAMSANI BIN JAMAL (S1591671J). Impact cause a significant dent on the rear boot and damage to the rear bumper.

Both driver and passenger had injuries and have went to consult the doctor. Both receieving 3 days MC each.

The driver of the van which caused the accident immediately apologised and claimed the brake was loose while not focusing on the road at that moment.





Report No. T/20190709/7009

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

CONTINUATION OF REPORT

Sk	res l	c	1	ы	an

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/07/2019 11:52
Officer In Charge Of Case: TP / TPIB / KOH CHEE SENG, KEVIN Contact No.: 65472073	Classification Of Case:

IMPERIUM AUTOMOTIVE

25 Kaki Buki Road 4 #01-49 Synergy @ KB Singapore 417800 Tel: 9748 9940 Fax: 6346 7213

Vehicle No: SLR 1939Z

Model: Honda Vezel RS

Not	Alloral
	she
1	K € 7200
1	6 dy
	600

QTY	List Price:	Prices \$
1	Rear windscreen moulding	nu 121.80
1	Rear tailgate 903.23	30/500 1287.60
2	Rear tailgate dampers	77 331.60 X
1	Rear tailgate inner trim board	De/cna 225.00
1	Rear tailgate inner pull pocket	17 32.00 X
2	Rear tailgate lamps	CN 570.00
1	Rear tailgate lock	Bef /100 269.50
1	Rear tailgate rubber	Tul 227.00
1	Rear tailgate "VEZEL" emblem Rear tailgate logo 38-20	rec 56.20 -
1	Rear tailgate logo SP-20	res 67.40
1	Rear tailgate "RS" emblem	nu 6230_
1	Rear tailgate "HYBRID" emblem	ner 58.10
2	Rear tailgate number plate lamps	11 97.00 X
1	Rear tailgate number plate garnish	185.50 X
2	Rear taillamps	CAL 1390.00
1	Rear end panel	DD/Red 585.80
1	Rear end panel inner garnish	101 160.50
1	Rear keyless sensor (1 Set)	cre 189.50
1	Rear bumper &)	950.60
2	Rear bumpers - Side	De 10. 1 450.60
2	Rear bumper brackets	17 97.00 D
2	Rear bumper reflectors	1 1 303.80 ≪
2	Rear bumper side retainer 35 50x2=71-00	ru 101.80
1	Rear floor board	187.60 X
1	Rear floor panel	1145.70 X
1	Rear floor sponge tray board	C/4 197.80
1	Rear exhaust silencer	N 7 840.30 X
2	Rear exhaust mountings	. 11 49.00 ℃
2	Rear fender inner trim boards 264.04	M(701 530.001/C
2	Rear fender wheel arch garnishes	TOIN 601.50
1	Rear Bumper Absorber Reinforcement	Serf 650.80
		12023.30
	Less 20%	-2404.66
		Subtotal 9618.64

7557.05

	Special Nett Items:	
1	Rear windscreen sealant	All 80.00 40
1	Rear bumper clip (1 set)	ng 45.00 L
1	Rear reverse sensor (1 set)	Shuf 350.00 200
1	Rear reverse camera	W 480.00 X
1	Rear reverse sensor buzzer	Shad 150.00
1	Rear number plate with holder	1750.00 X
		Subtotal 1155.00
	Labour Charges:	3.0
	To remove, replace damaged lamps and check rear wiring	80.00 3 0
	To remove and refit inner garnishes	180.00 80
	To remove and refit rear reverse sensor	150.00 10
	To transfer rear tailgate mechanism and wiring assembly	120.00 60
	To remove and refit rear windscreen glass	180.00 122
	To remove, refit and replace exhaust silencer and mountings	An 150.00 x
	To apply tuff kote	200.00 SU
	Panel beating	1800.00 900
	To respray painting on the affected areas	1600.00 / 202
		Subtotal 4460.00

ESTIMATE PARTS AND LABOUR GRAND TOTAL

\$ 15233.64 \$\int_000-64 7100





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

IMPERIUM AUTOMOTIVE

Ref: CS/TP19012737/Uvd3n2

25 KAKI BUKIT ROAD 4 #01-49

Date: 24-07-2019

SYN	ERGY @ KB SING	SAPORE 417800	Date: 24-07-2019	
	BEHALF OF CHEN KEE CHEN JUI-F	I JUI-HUA @CHEN CARY HUA	Code: TP509	
1.		Policy Particulars	:- THIRD PARTY CLAI	M
	Insured Veh.		Veh. Inspected	SLR 1939Z
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From		Assign Date	10/07/2019
2.	THE REAL PROPERTY.	Vehicle Partic	culars & Condition	A
	Make & Model	HONDA VEZEL HYBRID RS (A)	c.c	1496
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	RU31252583	Colour	RED
	Odometer	39418	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Conditi	ons of Tyres	
		Size	Make	Balance
	R/H Front Tyre	225/50 R18	DUNLOP	7 mm
	L/H Front Tyre	225/50 R18	DUNLOP	7 mm
	R/H Rear Tyre	225/50 R18	DUNLOP	7 mm
	L/H Rear Tyre	225/50 R18	DUNLOP	7 mm
4.	No. of the last	Description	on of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE REA	AR PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		General Information		
	Accident Date	08/07/2019	Inspection Date	10/07/2019
	Survey held at	IMPERIUM AUTOMOTIVE		
		25 KAKI BUKIT ROAD 4 #01-49 SYNERGY @ KB SINGAPORE 417800		
5a.		Re	emarks	
	A)THE INSPECTION B)IN ACCORDANGE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT PREJUDICE" BAS E HAVE NOT AUTHORIS	SIS. SED REPAIRS.
5b.		Estimate	Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	6 Working Day	/s



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. SLR 1939Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR WINDSCREEN MOULDING	NECESSARY	121.80	121.8
1	REAR TAILGATE	BADLY DENTED	1,287.60	903.2
2	REAR TAILGATE DAMPERS	NOT NECESSARY	331.60	
1	REAR TAILGATE INNER TRIM BOARD	DEFORMED / CRACKED	225.00	225.0
1	REAR TAILGATE INNER PULL POCKET	NOT NECESSARY	32.00	
2	REAR TAILGATE LAMPS	CRACKED	570.00	570.0
1	REAR TAILGATE LOCK	BENT / TWISTED	269.50	269.5
1	REAR TAILGATE RUBBER	TWISTED	227.00	227.0
1	REAR TAILGATE "VEZEL" EMBLEM	NECESSARY	56.20	56.2
1	REAR TAILGATE LOGO	NECESSARY	67.40	38.2
1	REAR TAILGATE "RS" EMBLEM	NECESSARY	62.30	62.3
1	REAR TAILGATE "HYBRID" EMBLEM	NECESSARY	58.10	58.1
2	REAR TAILGATE NUMBER PLATE LAMPS	NOT NECESSARY	97.00	
1	REAR TAILGATE NUMBER PLATE GARNISH	NOT NECESSARY	185.50	
2	REAR TAILLAMPS	CRACKED	1,390.00	1,121.0
1	REAR END PANEL	DENTED / BENT	585.80	517.0
1	REAR END PANEL INNER GARNISH	TWISTED	160.50	160.5
1	SET REAR KEYLESS SENSOR	CRACKED	189.50	189.5
1	REAR BUMPER	DENTED	950.60	801.0
2	REAR BUMPER-SIDE	DEFORMED / TORN	450.60	450.6
2	REAR BUMPER BRACKETS	NOT NECESSARY	97.00	
2	REAR BUMPER REFLECTORS	NOT NECESSARY	303.80	
2	REAR BUMPER SIDE RETAINER	NECESSARY	101.80	71.0
1	REAR FLOOR BOARD	NOT NECESSARY	187.60	
1	REAR FLOOR PANEL	TO REPAIR SEE LABOUR	1,145.70	
1	REAR FLOOR SPONGE TRAY BOARD	CRACKED	197.80	197.8
1	REAR EXHAUST SILENCER	NOT NECESSARY	840.30	
2	REAR EXHAUST MOUNTINGS	NOT NECESSARY	49.00	
2	REAR FENDER INNER TRIM BOARDS	N/S TORN	530.00	265.0
2	REAR FENDER WHEEL ARCH GARNISHES	TORN	601.50	601.5
1	REAR BUMPER ABSORBER REINFORCEMENT	BENT	650.80	650.8

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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 (\$)
	LESS 20% DISCOUNT		-2,404.66	-1,511.41
			9,618.64	6,045.64
	SPECIAL NETT ITEMS			
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	80.00	40.00
1	SET REAR BUMPER CLIP (SN)	NECESSARY	45.00	45.00
1	SET REAR REVERSE SENSOR (SN)	SHORTED	350.00	200.00
1	REAR REVERSE CAMERA (SN)	NOT FITTED	480.00	
1	REAR REVERSE SENSOR BUZZER (SN)	SHORTED	150.00	150.00
1	REAR NUMBER PLATE WITH HOLDER (SN)	NOT NECESSARY	50.00	
			1,155.00	435.00
	LABOUR			
	TO REMOVE, REPLACE DAMAGED LAMPS AND CHECK REAR WIRING.		80.00	30.00
	TO REMOVE AND REFIT INNER GARNISHES.		180.00	80.00
	TO REMOVE AND REFIT REAR REVERSE SENSOR.		150.00	50.00
	TO TRANSFER REAR TAILGATE MECHANISM AND WIRING ASSEMBLY.		120.00	60.00
	TO REMOVE AND REFIT REAR WINDSCREEN GLASS.		180.00	120.00
	TO REMOVE, REFIT AND REPLACE EXHAUST SILENCER AND MOUNTINGS.	NOT NECESSARY	150.00	
	TO APPLY TUFF KOTE.		200.00	80.00
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR FLOOR PANEL.		1,800.00	900.00
	TO RESPRAY PAINTING ON THE AFFECTED AREAS.		1,600.00	1,200.00
			4,460.00	2,520.00
	GRAND TOTAL		15,233.64	9,000.64
	RECOMMENDED COST OF LUMP SUM REPAIRS	TO HIE TO A		7,200.00

RECOMMENDED COST OF LUMP SUM REPAIRS		7,200.00
(TO ITS PRE-ACCIDENT CONDITION)		

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CHUA KANG SENG

Licensed Appraiser