FAX NO: TO : 18/07/2019 8:45 ESTIMATE REPORT 1ST Quotation JOB-NO: 50111855 OWNER'S PARTICULARS 65533880 Page 1 of 2 NAME: CityCab PTE LTD (Fleet) CONTACT: ADDRESS: 383 SIN MING DRIVE 64739522 **SINGAPORE 575717 0** VEHICLE DETAILS SHC0924Z AUTO KMHLB41UMGU081073 LICENSE NO: TRANS: CHASSIS: HYUNDAI / i40 D4FDFU566590 ENGINE: MAKE / MODEL: MS First Capital Insurance Limited OWNER'S INSURER: JOB-CODE: TP SA: Ding Auto User 2 **CLAIM DETAILS** QUOTED DISCOUNT DISC PRICE IND SUR.DISP COSTS PRICE DESCRIPTION QTY LABOUR 1 REMOVE & TRANSFER DOOR PARTS 400.00 1.00 0.00 400.00 2 STRIAGHTEN & LHS ROCKER PANEL, LHR 1.00 1,000.00 0.00 1,000.00 FENDER PANEL & DAMAGED AREA. 1,250.00 3 RESPRAY LHS ROCKER PANEL, LHS 1.00 0.00 1.250.00 ROCKER PANEL SKIRT, LHR FENDER & DAMAGED AREA. 4 CHECK WIRING SYSTEM 1.00 150.00 0.00 150.00 TOTAL: 2,800.00 0.00 2,800.00 MATERIALS 1 FRONT LHS DOOR ASSY 1.00 2,256.00 451.20 1,804.80 2 REAR LHS DOOR ASSY 1.00 2.201.00 440.20 1,760.80 3 REAR LHS FENDER ASSY 1.00 2,171.50 434.30 1,737.20 4 LHS ROCKER PANEL 1.00 1,310.60 262.12 1,048.48 5 REAR LHS INNER FENDER PANEL ASSY 1.00 178.00 35.60 142.40 6 LHS ROCKER SKIRT 1.00 695.88 139.18 556.70 7 DOOR STICKER -COMFORT DELGRO 1.00 150.00 0.00 150.00 S 8 DOOR STICKER - 65521111 1.00 150.00 0.00 150.00 TOTAL: 9,112.98 ,762.60 7,350.38 11,912.98 TOTAL PARTS & LABOUR: 1.762.60 10.150.38 EXCESS/LOADING:S\$ No. Of Day: Supp \$265.50 cut REAR WHEEL RIM COVER LH RE-SURVEY: BEFORE/AFTER PAINTING PART-BY-PART OR LUMP SUM: S\$ DATE OF SURVEY: SURVEYED BY: CONTACT NO: FAX NO: NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED DAuto002 Sur C ( Wanto wm Ding Auto User 2 **ESTIMATOR** 

STA AUTOCENTRE

DESCRIPTION

QTY

QTY

COSTS

QUOTED DISCOUNT DISC PRICE IND SUR.DISP
PRICE
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## 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: