

ASS. REC. BY:

REF:

03/INC19012846/DgB3N2

Special Instructions:

Assigner: Bryan

ASSIGNMENT (Office)

From (Person): Hazalyga Rte Ibrahim

INC

Date/Time: 20/7/2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SHD 8582T

Insured: RTY 565TY

at Workshop n/a Chummi Motor

Tel: 65425119

of BIK ID AWC #03-19

Policy No:

Claim No: MT/1054159-002

Sum Insured:

Excess:

Make of Veh:
(Client's Record)

D.O.A. 18/7/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 20/7

Person Contacted: Lynn

Vehicle IN/OUT

Date/Time

Action/Instruction Estimated (✓)

SHD8582T-CCS/A1617009429/H1da392 DOA: 11/5/2017

RTY565TY-X

ASSIGNMENT

COP 2024 Sept

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No.:

at Workshop n/s

of

Insured

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Vehicle

(Policy Condition)

Remark: The veh had commenced its
 repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repair:

6

days

Res.: Yes or No

Lump Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHD 8582T

Yr Regn:

Sept, 2016

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

Truck / Trailer or

Make:

Hyundai I40

c.c

1685

Colour:

Yellow

A/C:

Insured / Std / NI / NA

Sp. Reading

283429

T/Radio:

Insured / Std / NI / NA

Eng/No:

D4FDGU674647

C/No:

KMH1B41UMGU093776

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

205/60 R16

R:

— 11 —

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

TOYO / YOKO or

Hankook

Front

Rear

R/Bal.

S

mm

R/Bal.

S

mm

L/Bal.

S

mm

L/Bal.

S

mm

D.O.A.

18/07/2019

D.O.A.

22/07/2019

Survey held at

Chunni AMK

11:34am

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

O/S Front

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

Date / Time

Action / Instruction

NTUC SJY5657Y

30/08/2019

Invoice 2/5 8000/- with 6 days of rep
 (Ref to 7005.12, 49%)

Date/Time, File Pass to?

1) 30/8/2019

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.I. (\$

7P

8000

Days Of Repair:

6

Resurvey No. of Trip:

2

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

3 + 10% = 33

Photos

Others

TOTAL

250

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLV2176E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT & REAR
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKT2865Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	SONG SANG
Approximate Age	71
Injuries Sustain	RHT WAIST,LEG,BACK
Injured person in which vehicle?	SHD8582T
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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.

CITYCAB PTE LTD
CO. REG. NO. 199502839G

Policyholder's Signature
Date & Time: 19/7/2019


Driver's Signature
(If driver is not the policyholder)
Date & Time: 19/7/2019@11:45hrs

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

SKETCH PLAN


AS-ATTACHED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

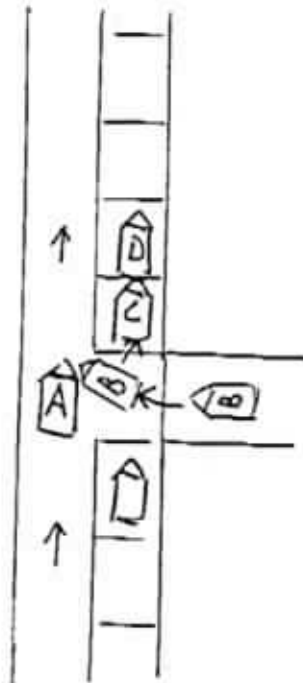
Refer to the Police Report :T/20190718/2128

DECLARATION

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

CITYCAB PTE LTD
CO. REG. NO. 199502839CPolicyholder's Signature
Date & Time: 19/7/2019
Driver's Signature
(If driver is not the policyholder)
Date & Time: 19/7/2019@11:45hrsLisa
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



A-SHD 8582T

B-SJY 5657Y

C-SLV 2176E

D-SKT 2865Y

Along Lorong 9 Geylang twds Sims Ave.

.....
Name : Song Sang

Date : 19.07.2019



SINGAPORE POLICE FORCE



T/20190718/2128

1 of 4

Report No. T/20190718/2128

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/07/2019 16:19		Vide Report No.:		Station Diary No.: 37	
Informants Particulars					
Name of Informant: SONG SANG			Address: APT BLK 306 TAMPINES STREET 32 #06-04 SINGAPORE 520306		
ID Type / ID No.: NRIC NO / S2551926D			Contact No.: Home/Office: Mobile: 91472113		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 70	Date of Birth: 14/09/1948	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: TAXI DRIVER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/07/2019 12:20	Type of Location: Straight Road
Location: Along Road 1 LORONG 9 GEYLANG LORONG 9 GEYLANG TOWARDS SIMS AVENUE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
SHD8582T	Car				Slightly Damaged	0
SJY5657Y	Car					0

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



**SINGAPORE
POLICE FORCE**



T/20190718/2128

2 of 4

Report No. T/20190718/2128

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

CONTINUATION OF REPORT

Driver			
Name	SONG SANG	ID No.	S2551926D
Related Vehicle	SHD8582T (Car)	Contact No.	91472113
Hospital/Clinic	STREET 11 CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	18/07/2019	Date Discharge	18/07/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	SEE KIAN BENG	ID No.	S6946329J
Related Vehicle	SJY5657Y (Car)	Contact No.	97955585
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 18/07/2019 at about 1220hrs, I was driving my company car (Citycab) bearing registration number SHD8582T along Geylang Lorong 9 towards Sims Avenue. As I reached a slip road leading to a junction, a car bearing registration SJY5657Y came from my right and collided into the front right portion of my vehicle.

After the collision, the said car swerved into two other vehicles (SLV2176E and SKT2865Y) that were parking along the road. I stopped my vehicle immediately and took photos of the accident before subsequently, moving to the side as there was oncoming traffic. I then spoke to the driver of SJY5657Y and exchanged particulars.

My vehicle sustained a burst front right tyre along with dents and scratches at the front right portion of the vehicle. I called my company towing company and the vehicle was towed away subsequently. No police or ambulance came to the accident scene.

At about 1400hrs, I went to Street11 Clinic 2018 Pte Ltd as I suffered redness on my right wrist and pain on right leg and my back area. I was given 3 days MC.

I wish to state that my company taxi has an in-car camera (facing front) which was working at the point of time and captured the accident.



**SINGAPORE
POLICE FORCE**



T/20190718/2128

3 of 4

Police Station Of Origin:

Tampines North NPP

461 Tampines Street 44 #01-56 SINGAPORE

520461

Tel No: 1800-7818999

Report No. T/20190718/2128

CONTINUATION OF REPORT

**SINGAPORE
POLICE FORCE**

T/20190718/2128

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

4 of 4

Report No. T/20190718/2128

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:

G /

Sgt 2 MUHAMMAD SYARAFUDDIN BIN
SHARIFF

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

18/07/2019 16:19

Officer In Charge Of Case:

TP / AEIT /

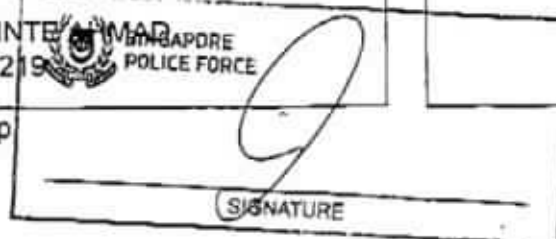
SSI 2 JUREMAH BINTI

Contact No.: 65476219

Classification Of Case:

Authentication Stamp

NP168



NAME
ADDRESS

Home Tel.:

VIN:

Registration: SHD 8582 T

Technician:

Mileage: 283429

Time Printed 22.7.19 11:46 AM

HYUNDAI I40

Front : Left

Actual	BEFORE	Specified Range
-0°37'		-3°00' 3°00'
4°06'		-0°19' 5°41'
0°22'		-1°30' 1°30'
17°42'		
17°05'		

Camber
Caster
Toe
SAI
Included Angle
Turning Angle Diff.

Front : Right

Actual	BEFORE	Specified Range
-0°19'		-3°00' 3°00'
4°14'		-0°19' 5°41'
2°16'		-1°30' 1°30'
15°09'		
14°51'		

Front

Cross Camber
Cross Caster
Cross SAI
Total Toe
Cross Turn Diff.

Actual	BEFORE	Specified Range
-0°19'		-3°00' 3°00'
-0°08'		-3°00' 3°00'
2°33'		-3°00' 3°00'
2°38'		-3°00' 3°00'

Rear : Left

Actual	BEFORE	Specified Range
-0°32'		-3°30' 2°30'
-0°18'		-1°30' 1°30'

Camber
Toe

Rear : Right

Actual	BEFORE	Specified Range
-1°46'		-3°30' 2°30'
0°01'		-1°30' 1°30'

Rear

Cross Camber
Total Toe
Thrust Angle

Actual	BEFORE	Specified Range
1°15'		-3°00' 3°00'
-0°17'		-3°00' 3°00'
-0°09'		-3°00' 3°00'

CHUNNI MOTOR WORK PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 8582T

DATE : 19.07.2019

MAKE :

TEL : 6542 5119

MODEL : HYUNDAI i40

FAX : 6542 6039

None

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Headlamp Support Panel Assy BT / white			\$ 907.40 ✓ photo
	Headlamp (RH) Scratched / broken mirror			\$ 1,388.00 ✓
	Front Fender (RH) Dented			\$ 566.30 ✓ part to
	Front Fender Apron Panel (RH) Dented			\$ 637.00 ✓
	Front Fender Shield (RH) deformed / torn			\$ 174.90 ✓
	Front Fender Retainer NH			\$ 24.60 X
	Front Fender Top Garnish NH			\$ 120.00 X
	Wiper Container Motor NH			\$ 75.00 X
	Front Wheel Rim (RH) Z distorted			\$ 325.30 Z ✓
	Front Wheel Hub Cap (RH) cut			\$ 107.10 ✓
	Front Wheel Bearing Z Done			\$ 540.50 Z ✓
	Front Shock Absorber (Assy) (RH) Z distorted			\$ 342.20 Z ✓
	Front Shock Absorber Mounting (RH) NH			\$ 108.80 X
	Front Drive Shaft (RH) Z Done			\$ 1,030.80 Z ✓
	Rack & Pinion Assy Z Done			\$ 969.60 Z ✓
	STG Tie End Z BT			\$ 62.60 Z ✓
	Stabilizer Bar Z distorted			\$ 252.30 Z ✓
	Stabilizer Bar Bush (RH) NH			\$ 16.40 X
	Stabilizer Bar Link Z distorted			\$ 61.10 Z ✓
	Stabilizer Bracket NH			\$ 24.00 X
	Front Suspension Lower Arm (RH) Z distortion			\$ 529.30 Z ✓
	Knuckle Arm (RH) Z distorted			\$ 552.00 Z ✓
	Engine Crossmember Z distorted			\$ 2,094.40 Z ✓
	ABS Sensor NH			\$ 234.00 X
	Electric Power Steering NH			\$ 3,641.00 X
	SUB TOTAL			\$ 14,784.60
	LESS 20%			\$ 2,956.92
	DISCOUNTED TOTAL			\$ 11,827.68
	Front Fender Advertisement Logo (RH) NH			\$ 100.00 Nett ✓
	Front Tyre (RH) cut / burst 50%			\$ 216.00 Nett ✓ 188.00
				\$ 316.00

SHD 8582T

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Labour Charge			
	Panel Beating			\$ 1,000.00
	Spray Painting Charge			\$ 900.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Towing Charge			\$ 50.00
	Remove/Refix Undercarriage (FRT)			\$ 100.00
	FRT Wheel Alignment			\$ 100.00
	Diagnostic & Resetting To Erase Fault Code			\$ 250.00
	TOTAL LABOUR			\$ 2,500.00
	ESTIMATE TOTAL			\$ 14,643.68
	22/07/2019 @ 1100hrs			15605.12
	Not Authorised			
	4/Summ 6 days.			
	(Signature) YAN			
	LKK Auto			
	(Signature)			
	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:			
	This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.			



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

DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19012846/Dqf3n2

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 04-09-2019



ATTN: JESSIE WO

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJY 5657Y	Veh. Inspected	SHD 8582T
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1054159-002	Excess (\$)	0.00
Assign From	HAZALYSA BTE IBRAHIM	Assign Date	22/07/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU093776	Colour	YELLOW
Odometer	283429 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	5 mm
L/H Front Tyre	205/60 R16	HANKOOK	5 mm
R/H Rear Tyre	205/60 R16	HANKOOK	5 mm
L/H Rear Tyre	205/60 R16	HANKOOK	5 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	18/07/2019	Inspect Date / Time	22/07/2019 (11:34 AM)
Survey held at	CHUNNI MOTOR REPAIRS PTE LTD BLK 10 ANG MO KIO INDUSTRIAL PARK 2A AMK AUTOPOINT #03-19 SINGAPORE 568047		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	6 Working Days
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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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 8582T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	HEADLAMP SUPPORT PANEL ASSY	BENT / CRACKED	907.40	907.40
1	HEADLAMP (RH)	SCRATCHED / MOUNTING BROKEN	1,388.00	1,388.00
1	FRONT FENDER (RH)	DENTED	566.30	566.30
1	FRONT FENDER APRON PANEL (RH)	DENTED	637.00	637.00
1	FRONT FENDER SHIELD (RH)	DEFORMED / TORN	174.90	174.90
1	FRONT FENDER RETAINER	NOT NECESSARY	24.60	-
1	FRONT FENDER TOP GARNISH	NOT NECESSARY	120.00	-
1	WIPER CONTAINER MOTOR	NOT NECESSARY	75.00	-
1	FRONT WHEEL RIM (RH)	DISTORTED	325.30	325.30
1	FRONT WHEEL HUB CAP (RH)	CUT	107.10	107.10
1	FRONT WHEEL BEARING	DAMAGED	540.50	540.50
1	FRONT SHOCK ABSORBER (ASSY)(RH)	DISTORTED	342.20	342.20
1	FRONT SHOCK ABSORBER MOUNTING (RH)	NOT NECESSARY	108.80	-
1	FRONT DRIVE SHAFT (RH)	DAMAGED	1,030.80	1,030.80
1	RACK & PINION ASSY	DAMAGED	969.60	969.60
1	STG TIE END	BENT	62.60	62.60
1	STABILIZER BAR	DISTORTED	252.30	252.30
1	STABILIZER BAR BUSH (RH)	NOT NECESSARY	16.40	-
1	STABILIZER BAR LINK	DISTORTED	61.10	61.10
1	STABILIZER BRACKET	NOT NECESSARY	24.00	-
1	FRONT SUSPENSION LOWER ARM (RH)	DISTORTED	529.30	529.30
1	KNUCKLE ARM (RH)	DISTORTED	552.00	552.00
1	ENGINE CROSSMEMBER	DISTORTED	2,094.40	2,094.40
1	ABS SENSOR	NOT NECESSARY	234.00	-
1	ELECTRIC POWER STEERING	NOT NECESSARY	3,641.00	-
1	FRONT BUMPER COVER (ADDITIONAL)	BENT / MOUNTING BROKEN	1,052.20	1,052.20
1	FRONT BUMPER SIDE RETAINER (RH) (ADDITIONAL)	BROKEN	24.60	24.60

Report Ref No. CS/INC19012846/Dqf3n2

**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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 20% DISCOUNT		-3,172.28	-2,323.52
			12,689.12	9,294.08
	<u>SPECIAL NETT ITEMS</u>			
1	FRONT FENDER ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
1	FRONT TYRE (RH)(50%)(SN)	CUT / BURST	216.00	108.00
1	FRONT BUMPER ADVERTISEMENT LOGO (RH) (ADDITIONAL)(SN)	NECESSARY	100.00	100.00
			416.00	308.00
	<u>LABOUR</u>			
	PANEL BEATING.		1,000.00	600.00
	SPRAY PAINTING CHARGE.		900.00	500.00
	WIRING CHARGE.		50.00	30.00
	TUFF KOTE.		50.00	40.00
	TOWING CHARGE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX UNDERCARRIAGE (FRT).		100.00	80.00
	FRT WHEEL ALIGNMENT.		100.00	60.00
	DIAGNOSTIC & RESETTING TO ERASE FAULT CODE.		250.00	150.00
			2,500.00	1,460.00
	GRAND TOTAL		15,605.12	11,062.08
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			8,000.00

Report Ref No. CS/INC19012846/Dqf3n2


ANG BRYAN TANI

Automotive Assessor / Investigator


K.K.LAU CPT(RET)**BEng(Hons),B.Bus,MBA,PEng,PE,
MinstAEA,MASME,MIRTE****REGD Auto Consultant-SAE, Licensed Appraiser**

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