surveyor k	onnuth		ASSIGN	MENT (Office)			19.
From (Person);	alvin	de	of	Smo	Date/Time	22.8.19	16.58y.
Estimated Cost:				Bill to:			97
OD (TP) WS / T To Inspect Vehicle	PRES/	OD RES/E	2989 K	7 i CS	Insured: P	BN 7556	U
at Workshop m/s					Tel: 645	50012	
of 176 an							
Policy No: D18	mi mi o	1007931		Claim No:	CMTD 190 400	3	
Sum Insured:				Excess:			
Make of Veh:				-,	D.O.A	21.8.19	
(Client's Record) CA / REV / R Date/Time: 23	EP. / RI & 19	3V 24 HRS 0.7 4.m	Person Contact	ed: Li Hui		ndorsement:	
			V) Estim				
5	FJ 29	199t -	X		87		
	BN F	556 V -	×				
26/8/19	0-1	- ml:	corical.	ria merime	10		

MOLINAM

ASS. REC. BY:	
Kenneth	SICNMENT
Frame	SIGNMENT
Estimated Cost:	Veh No: SEE 2889K Yr Regn: 07, 16
OD TP/WS/TP RES/OD RES/EVA/INV/MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
To Inspect Vehicle No:	Truck/Traller or Negan
	Make: Chevrolet Orlando co 1362
of Complete	Colour M. Gora AC: Insured/Std/NI/NA
Insured:	Sp.Reading 55216 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	CNO: KLIYA 7589GK 347412
	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 / STDA/Rim or
Wake the state of	Tyre Size: F: 215/80R15
(Policy Condition)	R: -
Remark: The veh had commenced its N/S O/S	
repair at the time of inspection.	BS OUN EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Bal. or Market Value:	Front
IDAC Accident Rport: Consistent? : Yes or No	R/Rail N
GIA / PR Seen: Consistent? : Yes or No	L/Bal. P mm R/Bal. 0 mm
Est. Repairs: days Res.: Yes or No	DOA ZI / DIIO
Lum Sum: % 3 Val.: Yes or No	Survey held at 0.0.1. 23/8/19
CA / REV / REP. / 24 HRS	
Vehicles IN COLT	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Person Contacted:	The U/C / Chassis frame / D
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
File poss to	
RECEIVED	1 2 SEP 2019
	- 60
Data/Taro, Fão Pass to?	
: Prell. Report Day	s Of Repair:
Outo/Time, File Return to?	urvey No. of Trip: 2 Survey Fee:
7	Transportation 300
7 129- typist Add Fee:	_: Site Insp (\$) _ s - RS _ SI
Report Format : MRV men	: Interview (\$), Faces
	Tech Invs (\$). Others
Lump Sum / I.B.I: (S 4150 2	Weekend (\$
	TOTAL 361

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To:	50 Raffles	Singapore Land Tower	From:	51 Ubi A Paya Ub	o Consultants F ive 1 #01-25 oi Industrial Parl ire 408933	
Attn:	Melvin Ye		Date:	26 Aug 2	2019	
		<u>Prelii</u>	minary Adv	rice		
Insure	d Vehicle No	: FBN7556U				
	hicle No	: SFJ2989K		Accident [Date	: 21/08/2019
Make		: CHEVROLET ORLANDO		Assignme	nt Date	: 22/08/2019
Date o	of Inspection	:23/8/2019		Est. Durat	tion of Repair	:4
	ction At	: COMPLETE VMS PTE LTD				
Point	of Impact /	General Description of Damages				
The ve	ehicle sustair	ned impact / damages rear portion	and parts claim	ed are cor	nsistent to the a	ccident.
		Repairer's Estimate (Gross)		:S\$	10,613.33	
		Revised Amount		:S\$	3,852.10	
		Check Items (Estimated)		:S\$	2,644.10	
		Total		:S\$	6,496.20	
		Lump Sum Repair		:S\$		
		Total Loss Consideration				
		New for Old Value		:S\$		
		Pre-Accident Value		:S\$		
		COE / PARF Rebate		:S\$		
		Salvage Value		:S\$		
		Margin for Repair		:S\$		
Rem	arks					
C) The veh let us ha	icle is repairable at our adjusted an ve your authorisation.	mount. We have	e also conf	firmed excess a	and policy coverage, I
() The veh	icle is uneconomical to be repaired	l, you are advise	ed to invite	tender for the	wreck.
(X						

...CLAIM SUBFOLDER...(New Assignment)

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth	ed Status	
Main	22 Aug 2019		22 Aug 2019 16:58 Assign					ssignment el Case
	Main	Re	ference	Cla	im Details	Do	cuments	Show All
CLAIM S	UBFOLDER DET	AILS	Marie Courte Court Court	81490 W E 2010 C		SASSES SERVICES	[Created by	insurer]
Insured:		LOW L	EONG YEW, ID:	S8287853Z,	Tel: +659091328	2, Email: jaso	nlly@gmail.con	n
Main Clair			WEE KIAT VERN	ON, ID: S69	10279D			
Vehicle Re	eg. No.:	SFJ29)89K	Da	te of Loss:		21/08/2019 18:00 - :59	
Claim Typ	e:	TP / C	TP / CMTD1904003		Policy/Cover Note No.:		D18MTMC01007931 (TP, Fire & Theft)	
Vehicle Reg. No. (Insured):		FBN75	FBN7556U		Policy No. (Claimant):		menty	
					cess:			
Repairer:			ETE VMS PTE LT 55 0012	D (HQ) 176 S	in Ming Drive #03-	14 Sin Ming Au	tocare Complex	c, 575721 Sin Ming -
Handling :	Insurer:	Sompo	Insurance Sing	apore Pte. Lt	d. (HQ) - Tel: 646	1 6555 [Han-	dled by Melvin	Ye - 6322 4667]
Adjuster:					- Tel: 6256-3561			
Mary State of the State of Sta	stodian (Insured)	0 10000000	LOW LEONG YEW (36 / Male) , NRIC: S8287853Z, Tel: +6590913282 Email: jasonlly@gmail.com					
Adj Asg. F	Remarks:	W5: G0	OH LI HUI 6455 00	012				
ASSOCIA	ATED MAIL REC	EIVED				V	iew All C	ompose Case Mail
There are	no mail for this c	ase.					According to the	
E								**************************************
ALL ASS	OCIATED TASK	.5			View All Se	arch Tasks	Create New T	ask Complete
Due Da No results		Type Task 6	iroup Subjec	t Handler	Assigned By	Complete	d On Cre	eated On Done?

> Back to OneMotoring

quire PARF/COE Rebate for Registered Ve	nicie	
Vehicle Owner Particulars	Singapore NRIC	
Owner ID Type:		
Owner ID: Vehicle Details	279D	
Vehicle No.:	SFJ2989K	
Vehicle to be Exported:	No	
Intended Deregistration Date:	26 Aug 2019	
Vehicle Make:	CHEVROLET	
Vehicle Model:	ORLANDO 1.4AT TURBO	
Primary Colour:	Grey	
Manufacturing Year:	2016	
Engine No.:	A14NET161410720	
Chassis No.:	KL1YA7589GK347412	
Maximum Power Output:	103.0 kW (138 bhp)	
Open Market Value:	\$15,982.00	
Original Registration Date:	22 Jul 2016	
First Registration Date:	22 Jul 2016	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$15,982.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	21 Jul 2026	
PARF Rebate Amount: Intended COE Rebate Details	\$11,986.00	
COE Expiry Date:	21 Jul 2026	
COE Category:	B - Car above 1600cc or 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$56,089.00	
COE Rebate Amount:	\$38,706.00	
Total Rebate Amount:	\$50,692.00	

The information contained herein is correct as at 26 Aug 2019

ОК

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1 1 1 1 4

- 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 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

	ACCIDENT STATEMENT
Date Of Report	22/08/2019 10:54
Date Of Accident	21/08/2019 17:35
Exact Location Of Accident	ALONG KILLINEY RD BEFORE JUNC. OF DEVONSHIRE RD
Country/State of Loss	SINGAPORE

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SFJ2989K	
Insured/Policyholder		
Name Of Registered Owner	HENG WEE KIAT VERNON	

NRIC No Email Address VERNONHENG333@GMAIL.COM

Mobile Phone No (LOCAL) +65-97318676 Alternative Phone No OFFICE-97318676

Vehicle Particulars

CHEVROLET Manufacturer **ORLANDO** Model

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

PRIVATE USE

NO

S6910279D

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

MSIG INSURANCE (SINGAPORE) PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

A 28987869 QMY Policy Number

Cover Note Number

Driver

THERASA LEE MEI HUA Name of Driver

S7273122J NRIC No Date Of Birth 13/09/1972 INDOOR Occupation Date Of Driving Pass 30/06/1996

Driving Experience 23 YEARS AND 1 MONTH

FEMALE Gender

(LOCAL) +65-97318676 Mobile Number

Fax Number

Contact Number OFFICE-97318676

VERNONHENG333@GMAIL.COM **EMail Address**

Address

42 KIM YAM ROAD #08-04 SINGAPORE

Postcode

239347

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

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

NO

ambulance?

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)

1

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?

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBN7556U

Vehicle Make/Model/Colour

Details Of Properties

MOTORCYCLE

Vehicle Category Name of Driver

LOW LEONG YEW

NRIC/Passport Number

S8287853Z

Contact Number

90913282

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

LOW LEONG YEW

Approximate Age

.

Injuries Sustain SURFACED CUT

Injured person in which vehicle? FBN7556U

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

NA Address

NA

Postcode

NA

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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:

- 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.
- 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.

Policyholder's Signature

(If driver is not the policyholder)

Driver's Signature

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN		A Strong Street
	(D)	
		FILLINEY ROAD
	67 V	A = SPD 2989k

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCONSTANCES OF THE ACCIDENT
I was travelley along killing Read towards
Exeter Road. Infrant of me there was a taxi slower
down and Stopped . I followed suit and able to stop
beginned the tax; with nath car length. I tell the august
behind my air. I got down and saw a motorist
test but onto rear purpos of my verticle and fell.
I have a video fectage of front and back recorded
the entire incident."

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

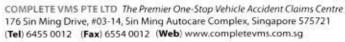
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





Email: darren@completevms.com.sg (lily@completevms.com.sg () lihui@completevms.com.sg ()

SING	M YAN ROA APORE 23	ND #08-04 No.	Estimate: Nothann Date: 2 Vehicle Num.: S Make/Model: C Make/Model: C Accident Date: 2 Claim No.: Claim No.: Policy No.: Gday,	22/08/2019 SFJ2989K CHEVROLET ORLANDO 1.4-2016
	tion : THE C	WNER PUSM	by Ith GyChassis/Eng#: K	KL1YA7589GK347412/A14NET16141
Conta	act: 86225	5000	Accident Date : 2 Claim No. : Reference :	21/08/2019
S/N	Quantity	Particular	4day,	Unit Price Amount S\$
		GIRCLAND WORLD		
	1	NETT ITEMS : TAIL GATE		1,240.00 X
	1	REAR W/SCREEN GLASS	<i>o</i> •	1,850.00 -
	1	REAR W/SCREEN GLASS MOULD!	Bulum	A 165.00 -
	1	REAR BUMPER	Mag 12061	1,222.00
	2	REAR BUMPER BRACKET		155.00 A 310.00 X
	1	REAR BUMPER FOG LAMP REAR BUMPER LOWER LIP		nulla 322.00 2
	1	REAR BUMPER LOWER SPORT G	HARD 547.30	Der 65200 L
	1	REAR BUMPER TOP PAD	310.70	399.00 2
0.	1	REAR BUMPER REINFORCEMENT		₹ 595.00 ₹
1.	1	REAR END PANEL		683.70 X
2.	6	REAR BUMPER CLIP		8.00 1 48.00 3
3.	1	REAR BUMPER SPONGE		5n 75.00 7
		Nett Total S\$:		7,841.70
		10.00% Discount S\$:		784.17
				7,057.53
	62	SPECIAL NETT ITEMS :	7 10 410.70	Mg = M 539 00 7
60	1		-7.06	555.00
50 50 50 50	1	CHEVROLET EMBLEM ORLANDO LS EMBLEM		~ 48.60 × ~ 68.00 X
	1	TURBO EMBLEM		1~ 45.20 X
60	1	REAR W/SCREEN GLASS SEALAN	IT:	May 65.00 4
Š.	1	REVERSE SENSOR		€ 280.00 X
		Special Nett Total S\$:		1,045.80
		LABOUR:		

LKK Auto Consultants hence notify the Repairer of the following:

- * To resurvey before/after spray painting
- To display damaged pert(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 Comment

Acknowledned by Reserve

CONTINUE / ...



COMPLETE VMS PTE LTD The Premier One-Stop Vehicle Accident Claims Centre 176 Sin Ming Drive, #03-14, Sin Ming Autocare Complex, Singapore 575721 (Tel) 6455 0012 (Fax) 6554 0012 (Web) www.completevms.com.sg

Email: darren@completevms.com.sg ()
lily@completevms.com.sg ()
lihui@completevms.com.sg ()

HENG WEE KIAT VERNON 42 KIM YAN ROAD #08-04 SINGAPORE 239347

Attention : THE OWNER Contact : 86225000 Estimate: ES006779

Date : 22/08/2019 Vehicle Num. : SFJ2989K

Make/Model: CHEVROLET ORLANDO 1.4-2016 Chassis/Eng#: KL1YA7589GK347412/A14NET161410

Accident Date : 21/08/2019

Claim No. : Reference : Policy No. :

S/N Quantity

Particular

Unit Price

Amount S\$

REMOVE & REINSTALL REAR W/SCREEN GLASS RUST PROOFING TREATMENT SPRAY PAINT DAMAGED AREA AFFECTED TO CUT OFF REAR END PANEL, KNOCK AND STRAIGHTEN REAR CHASSIS FRAME AND CHANGE ALL NECESSARY PARTS

Labour Total S\$:

200 180.00 x 459 1,100.00

300 980.00

2.510.00

SingDollars: Ten Thousand Six Hundred Thirteen & Cents Thirty-Three Only

Total S\$:

10,613.33

COMPLETE VMS PTE LTD

This is only an estimate bases on our preliminary inspection and does not cover additional parts and labour time which may be required after the work has begun

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Pava Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/SMO19014846/KVF3N2

Date:

17/09/2019

No:

REFERENCE

Vehicle No:

Date of Loss:

Handling Insurer: Claimant

Sompo Insurance Singapore Pte.

Ltd.

SFJ2989K

21/08/2019

Insured Vehicle

No:

Policy No:

FBN7556U

TP

Nature of Claim:

Engine No:

Odometer:

Chassis No:

D18MTMC01007931

Claim CMTD1904003

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SFJ2989K

Make & Model: Reg. Date:

CHEVROLET ORLANDO, 1.4 (A) 22/07/2016 (Man. Year: 2016)

A14NET161410720 KL1YA7589GK347412

55210 km

Colour:

Metallic Grey

Engine Capacity: Market Value/New Car 1362 cc

Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Yes Engine Modification:

Yes Footbrake (Serviceable): Pre-accident Condition: No

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

215/60R15

Rear Tyre Size:

215/60R15

Front Left Side:

Dunlop 8 mm

Rear Left Side:

742.93

11,356.26

Dunlop 8 mm

Front Right Side:

Dunlop 8 mm Rear Right Side: Dunlop 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts Miscellaneous Items	Repairer's 8,103.33 0.00	Adjuster's 4,342.63 0.00	3,760.70 0.00	Diff % 46.41
Labour Paintwork Labour Towing	2,510.00 0.00 0.00	870.00 0.00 0.00	1,640.00 0.00 0.00	65.34
Calculated Gross Total (S\$) Approved Total (Overridden) (S\$)	10,613.33	5,212.63 4,150.00	5,400.70	50.89
(\$\$)	10,613.33	4,150.00	6,463.33	60.90

INSPECTION

Date of Assignment:

22/08/2019

+ GST 7.00/7.00% (S\$)

Nett Amount (S\$)

Date Inspected:

23/08/2019 Inspected At:

COMPLETE VMS PTE LTD (HQ) 176 Sin Ming Drive #03-14 Sin Ming

452.43

6,915.76

60.90

60.90

Autocare Complex Singapore 575721

290.50

4,440.50

Estimated Period of Repair:

4.0 days

Adjuster: KENNETH KONG

Manager: VERON CHEN

Adjuster Report Page 2 of 4 NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

Adjuster Report Page 3 of 4

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 17 Sep 2019)

Parts: M1-MPV CHEVROLET ORLANDO 1.4 (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SFJ2989K)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*TAIL GATE	Repair	1,240.00 FN	*-FN
2	1		*REAR W/SCREEN GLASS	Cut	1,850.00 FN	*880.00 FN
3 4	1		*REAR W/SCREEN GLASS MOULDING *REAR BUMPER	Necessary Buckled/Warped	165.00 FN 1,222.00 FN	*165.00 FN *1,222.00 FN
5 6	2		*REAR BUMPER BRACKET *REAR BUMPER FOG LAMP	Repair Cut	310.00 FN 322.00 FN	*- FN *322.00 FN
7 8	1		*REAR BUMPER LOWER LIP *REAR BUMPER LOWER SPORT GUARD	Dented/Cut Dented	280.00 FN 652.00 FN	*280.00 FN *547.30 FN
9	1		*REAR BUMPER TOP PAD	Cracked	399.00 FN	*310.70 FN
10	1		*REAR BUMPER REINFORCEMENT	Bent	595.00 FN	*595.00 FN
11	1		*REAR END PANEL	Repair	683.70 FN	*- FN
12	6		*REAR BUMPER CLIP	Necessary	48.00 FN	*48.00 FN
13 14	1		*REAR BUMPER SPONGE *TAIL GATE CHROME HANDLE	Serviceable Cracked	75.00 FN 539.00 F	*- FN *410.70 FL
15 16	1		*CHEVROLET EMBLEM *ORLANDO LS EMBLEM	Not Necessary Not Necessary	48.60 FS 68.00 FS	*-FS *-FS
17 18	1		*TURBO EMBLEM *REAR W/SCREEN GLASS SEALANT	Not Necessary Necessary	45.20 FS 65.00 FS	*-FS *40.00FS
19 F=Fra	1 inchise	part. S=SpcN	*REVERSE SENSOR Nett. L=List/temDisc. N=Nett/temDisc.	Serviceable	280.00 FS	*-FS
				Sub Total (S\$)		4,820.70
			- List Item Discount on L Ite	하는 사람들이 하는 사람이가 있다. (이 없이 사람들은 그리아 시간에 가운~		41.07
			- Nett Item Discount on N Item	ms 10.00/10.00% (S\$)	784.17	437.00
				Total Parts (S\$)	8,103.33	4,342.63

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TRANSFER TAIL GATE COMPONENT TO NEW GATE	New	150.00	0.00
2	REMOVE & REINSTALL REAR W/SCREEN GLASS	New	180.00	120.00
3	RUST PROOFING TREATMENT	New	100.00	0.00
4	SPRAY PAINT DAMAGED AREA AFFECTED	New	1,100.00	450.00
5	TO CUT OFF REAR END PANEL,KNOCK AND STRAIGHTEN REAR CHASSIS FRAME AND CHANGE A NECESSARY PARTS	New LL	980.00	300.00
	Gross Labo	our Cost (S\$)	2,510.00	870.00
	Report was unsubmitted du	ring this print-out.		

< END OF ESTIMATES >