

ASS. REC. BY:

REF: CS/AGI/9014875/Ag f3

N2

Special Instruction:

SURVAYOR Adrain

ASSIGNMENT (Office)

From (Person): Iry Ratilla

of AGI

Date/Time: 23.8.19 2.58p.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: GBC 54529

Insured: SKM 7980B

at Workshop m/s Kai motor

Tel: 67474006

of Blk 3007 ub Rd 1 # 01-440

Policy No:

Claim No: C 10003774

Sum Insured:

Excess:

Make of Veh:

D.O.A. 18.8.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 23.8.19 3.30p.m

Person Contacted: kym

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	GBC 54529 - NO/LIP/6007251, + DCA-24/09/2016
	SKM 7980B CCB/ AGI/6007251/UPM 312 DCA-24/09/2016
28/8/19 @ 2.30pm	Informed Iry, we are pending for estimate from repairer. Final AG B 1410.59, 2 days (Red & 2136.59, 60%).

Adrian

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s: _____

of _____

Insured: _____

Policy No. _____

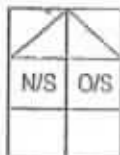
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(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. Repairs: 2 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: GBCS4526 Yr Regn: 2012 / Dec.Type: M.Car / M.Cycle / Bus / Van / Other / Taxi / Prime Mover /

Truck / Trailer or

Make: Nissan Cabstar C.G. 2953Colour: Silver AC: Insured / Std / Nil / NASp. Reading 351783 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: JNISC2F2420850534Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / SRim / STD A/Rim orTyre Size: F: 155R15C MaxxisR: 165R13 Dunlop

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 27/08/19Survey held at Kai Motor

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

Front N/S

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>TP Budget Direct.</u>

RECEIVED 10 OCT 2019

MV:

PV:

Nett:

Date/Time, File Pass to?

1) 18/10 14:44

3)

5)

Prel. Report:

Final Report:

Date/Time, File Return to?

2)

4)

6)

Part Prices Check:

IN

OUT

Survey Fee:

Basic & Add.

S + RS. \$

Photos

Others

TOTAL

Date:

250

Nivitha (LKK Auto)

From: Ivy Ratilla <ivy.r@budgetdirect.com.sg>
Sent: Friday, 23 August 2019 2:58 PM
To: Admin-D (LKKAuto)
Cc: sur@lkkauto.com; Justin Wong
Subject: TPPD Survey: Claim ref:C10003774/KY || OI- SKM7980B (Black) TP- GBC5452G || Est:0.00 || Kai Motor
Attachments: C10003774-1.pdf

Hi Team,

We would like to arrange TP Survey for GBC5452G. Workshop has chosen Mr. Adrian Ling to survey the vehicle.

Please confirm.

Regards,

Ivy Ratilla
Executive, Claims Admin

T +65 6540 2185
F +65 6725 0853
E ivy.r@budgetdirect.com.sg



Customer Care +65 6221 2111
Claims +65 6221 2199
Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01
Singapore Shopping Centre
Singapore
239924
budgetdirect.com.sg

auto  general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

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From: Kai Motor <kaimotor@gmail.com>
Sent: Friday, 23 August 2019 2:14 PM
To: Ivy Ratilla <ivy.r@budgetdirect.com.sg>
Cc: Claims <claims@budgetdirect.com.sg>; Justin Wong <justin.wong@budgetdirect.com.sg>
Subject: Re: ACCIDENT INVOLVING VEHICLE NO No GBC 5452 G & SKM 7980 B on 18/08/2019@15:15:00 || C10003774

Hi Sir,

We Choose...👉👉👉

Adrian Ling LKK Auto Consultants Pte Ltd

👉 Have a nice day w thanks.

Ms Kym

From: Kai Motor <kaimotor@gmail.com>
Sent: Thursday, 22 August 2019 5:42 PM
To: Claims <claims@budgetdirect.com.sg>
Subject: ACCIDENT INVOLVING VEHICLE NO No GBC 5452 G & SKM 7980 B on 18/08/2019@15:15:00

KAI MOTOR TRADING

BLK 3007 UBI ROAD 1
#01-440, SINGAPORE 408701
TEL: 67474006 FAX:67437591
E-mail : kaimotor@gmail.com
REG NO: 44223100L

Date : 22/08/2019

Attn: The Motor Claims Department
Your Insured veh no : SKM 7980 B
CONTACT AUTO & GENERAL INSURANCE (SINGAPORE) PTE LTD
Singapore Shopping Centre
190 Clemenceau Avenue #03-01
Singapore 239924

Dear Sir / Madam

WITHOUT PREJUDICE

(By Email Only)

claims@budgetdirect.com.sg
Tel 62212111

ACCIDENT INVOLVING VEHICLE NO No GBC 5452 G & SKM 7980 B on 18/08/2019@15:15:00

We are writing on behalf of Wei Zhong Foodstuff Manufacturer the registered owner of GBC 5452 G which was involved on the above mentioned accident between SKM 7980 B.

Investigation reveals that the motor vehicle number SKM 7980 B was insured with you at the material time of the said accident.

As a result of the accident was caused solely and completely by the negligence of your insured vehicle number SKM 7980 B. Therefore, our client is holding you liable for the repair costs and other consequential loss which was sustained by him/her/them.

Kindly arrange your representative to survey our client's vehicle at **KAI MOTOR TRADING** Blk 3007, Ubi Road 1, #01-440, Singapore 408701 within two (2) days from the date hereof as to avoid further losses incur.

We enclosed hereby the GIA report of GBC 5452 G for your kind attention.

Failing which, our client have no alternative but to proceed with the necessary repairs and the will be forward to you for reimbursement.

Yours faithfully,

--

Have a nice day w thanks.

Ms Kym

Kai Motor Trading

Blk 3007 Ubi Rd 1 #01-440
Singapore 408701
Telephone: 6747 4006

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--

Have a nice day w thanks.

Ms Kym

Kai Motor Trading

Blk 3007 Ubi Rd 1 #01-440

Singapore 408701

Telephone: 6747 4006

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Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Wednesday, 28 August 2019 2:30 PM
To: 'Ivy Ratilla'; assignments
Cc: SUR; 'Justin Wong'
Subject: RE: TPPD Survey: Claim ref:C10003774/KY || OI- SKM7980B (Black) TP- GBC5452G || Est:0.00 || Kai Motor

Dear Ivy,

Please be informed that we have inspected the vehicle GBC 5452G on 27/08/2019.

We are pending for estimate from repairer.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewse@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Sent: Friday, 23 August 2019 3:31 PM
To: 'Ivy Ratilla' <ivy.r@budgetdirect.com.sg>; assignments <assignments@lkkauto.com>
Cc: SUR <sur@lkkauto.com>; 'Justin Wong' <justin.wong@budgetdirect.com.sg>
Subject: RE: TPPD Survey: Claim ref:C10003774/KY || OI- SKM7980B (Black) TP- GBC5452G || Est:0.00 || Kai Motor

Dear Sir/Madam,

Thank you for the assignment.

Please be informed that vehicle currently not in the workshop, repairer will arrange.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ivy Ratilla <ivy.r@budgetdirect.com.sg>
Sent: Friday, 23 August, 2019 2:58 PM
To: Admin-D (LKKAUTO) <admin-d@lkkauto.com>

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 19/08/2019 16:20
Date Of Accident 18/08/2019 15:15
Exact Location Of Accident UBI AVENUE 2 CARPARK
Country/State Of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBC5452G
Insured/Policyholder
Name Of Registered Owner WEI ZHONG FOODSTUFF MANUFACTURER
Co Reg No 34635000W
Email Address NOEMAIL
Mobile Phone No
Alternative Phone No OFFICE-87435117

Vehicle Particulars

Manufacturer NISSAN
Model CABSTAR-2.0 (M)
Exact Purpose for which vehicle was being used at time of accident COMMERCIAL USE
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 5106101316
Cover Note Number COMPREHENSIVE

Driver

Name of Driver FOO CHEE SENG
NRIC No S1628971Z
Date Of Birth 05/10/1964
Occupation INDOOR
Date Of Driving Pass 17/11/1982
Driving Experience 36 YEARS AND 9 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91665535
Fax Number
Contact Number
Email Address NOEMAIL

Address

Postcode

BLK 31 BENDEMEER ROAD #05-827
330031

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)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

MACPHERSON NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 54 PIPIT ROAD #01-82/84, POSTCODE: 370054, COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-7449999 - FAX NO: 65476366

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT.

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

SKM7980B

Vehicle Make/Model/Colour

HONDA CIVIC

Details Of Properties

RIGHT PORTION

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

Auto & General Insurance (s) PL

claims@budgetdirect.com.sg

1.1.

No. Of Passenger (Including Driver)
Passenger 1

2

NAME: : PASSENGER
GENDER: : MALE

Sketch Plan Pg. 1

NTUC Income Motor Service Centre

Report No. MT

18/8/19

Vehicle No.

Make Model

ABC 54526
Nissan Almera

Report Date: 18/8/2019 Start Time: 4:16 PM

Reporting Type

End Time

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 willful 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 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.
 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/are 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 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 reasonable required for the purposes stated; or
 - (ii) for compliance with requirements under any regulations, law or court orders.



18/8/2019 16:16

Policyholder's Signature
Date & Time:

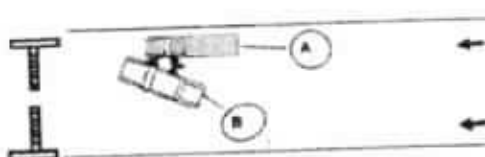
[Signature]
18/8/2019 16:16

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

[Signature]
Reporting Centre Personnel's Signature
Name: Eric Woo Jun Kiat
NRIC/ Fin No: 9992753

Sketch Plan Pg. 2

SKETCH PLAN



UBI AVE 3 BLK 3020 CARPARK

Vehicle A: GBC5452G Vehicle B: SKM79009

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
REFER TO POLICE REPORT.

DECLARATION

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



19/8/2019 16:16

Policyholder's Signature
Date & Time:



19/8/2019 16:16

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



Reporting Centre Personnel's Signature
Name: Eric Woo Jun Kiat
NRIC/ Fin No: 5092753



凱摩哆服務 KAI MOTOR TRADING

BLK 3007 UBI ROAD 1 #01-440, SINGAPORE 408701.
TEL: 6747 4006 FAX: 6743 7591 EMAIL: kaimotor@gmail.com
BUS. REG. NO: 44223100L GST NO: M90371531Y

專業服務：汽車意外保險賠償·拖車·汽車修理及維修服務·打嗎呷·噴漆·

Specialist in: Accidents Insurance Claim, Towing Service, Motor Vehicle Repairing, Panel Beating, Spray Painting.

Date : 23/08/2019

Attn: The Motor Claims Department

Your Insured veh no : SKM 7980 B

AUTO & GENERAL INSURANCE (SINGAPORE) PTE LTD

Singapore Shopping Centre

190 Clemenceau Avenue #03-01

Singapore 239924

Dear Sir / Madam

Estimate Cost repair Bill To Nissan Cabstar No No GBC 5452 G & SKM 7980 B on 18/08/2019
@15:15:00

To Supply:-

1pc	Side conner panel LH	Repr	\$ 676.60	nett *	
1pc	Front bumper w reinforcement	Delid	\$ 1,039.60	nett ✓	945.10
1pc	Front bumper bracket LH	nlc ne	\$ 47.50	nett *	
1pc	Front bumper clip	nlc ne	\$ 50.00	nett *	
1pc	Front head lamp	nlc ne	\$ 473.40	nett *	
1pc	Front door sticker LH	nlc	\$ 65.00	nett *	30(su)
1pc	Front door signal lamp LH	nlc ne	\$ 78.10	nett *	
			\$ 2,430.20		
		less	\$ 243.02		
		10%	\$ 2,187.18		

To dismantl & replace damage parts, panel beat where necessary.

To putty, apply primer & spray paint on the affected portion.

To check wiring functions.

\$ 580.00 200.
\$ 680.00 300 530
\$ 100.00 30
\$ 3,547.18

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:

total 1410.59
CP/P)

Adrian King
27/08/19.

7/p. 02 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

Affiliated to Federation Internationale Des Experts En Automobile				
AUTO & GENERAL INSURANCE (S) PL			Ref : CS/AGI19014875/Aqf3n2	
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924			Date : 21-10-2019	
				
			Code : AGI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SKM 7980B	Veh. Inspected	GBC 5452G	
Policy No.		Coverage (\$)	0.00	
Claim No.	C10003774/KY	Excess (\$)	0.00	
Assign From	IVY RATILLA	Assign Date	23/08/2019	
2. Vehicle Particulars & Condition				
Make & Model	NISSAN CABSTAR	c.c	2953	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	JN1SC2F24Z0850534	Colour	SILVER	
Odometer	351783	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195 R15C	MAXXIS	6 mm	
L/H Front Tyre	195 R15C	MAXXIS	6 mm	
R/H Rear Tyre	165 R13	DUNLOP	6 mm	
L/H Rear Tyre	165 R13	DUNLOP	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	18/08/2019	Inspection Date	27/08/2019	
Survey held at	KAI MOTOR TRADING BLK 3007 UBI ROAD 1 #01-434 SINGAPORE 408701			
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:		2 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. GBC 5452G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	SIDE CONNER PANEL LH (N)	TO REPAIR SEE LABOUR	676.60	-
1	FRONT BUMPER W REINFORCEMENT (N)	DEFORMED	1,039.60	945.10
1	FRONT BUMPER BRACKET LH (N)	NOT NECESSARY	47.50	-
1	FRONT BUMPER CLIP (N)	NOT NECESSARY	50.00	-
1	FRONT HEAD LAMP (N)	NOT NECESSARY	473.40	-
1	FRONT DOOR SIGNAL LAMP LH (N)	NOT NECESSARY	78.10	-
	LESS 10% DISCOUNT		-236.52	-94.51
			2,128.68	850.59
1	FRONT DOOR STICKER LH (SN)	NECESSARY	65.00	30.00
	LESS 10% DISCOUNT		-6.50	-
			58.50	30.00
	LABOUR			
	TO DISMANTLE & REPLACE DAMAGE PARTS,PANEL BEAT WHERE NECESSARY,INCLUSIVE OF THE REPAIR OF SIDE CONNER PANEL LH.		580.00	200.00
	TO PUTTY,APPLY PRIMER & SPRAY PAINT ON THE AFFECTED PORTION.		680.00	300.00
	TO CHECK WIRING FUNCTIONS.		100.00	30.00
			1,360.00	530.00
GRAND TOTAL			3,547.18	1,410.59
RECOMMENDED COST OF REPAIRS				1,410.59

Report Ref No. CS/AGI19014875/Aqf3n2

ADRIAN LING WAI PING

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

Licensed Appraiser

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