

ASS. REC. BY:

REF: CS/MSG/19015153/DSF312

Special Instruction:

Surveyor: Bryan

ASSIGNMENT (Office)

From (Person): Chh'ia Nyuk Pui

of

MS29

Date/Time: 29.8.19 12.01 p.m.

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SHC 2105H

Insured:

SLS 7434T

at Workshop m/s Soon Hock Motor

Tel:

64836016

of BIK 10 mm Industrial Part 2A # 01-05/06

Policy No: 29114756 MKF

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A.

22.8.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 29.8.19 1.30 p.m.

Person Contacted:

Lynn

Vehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	SHC 2105H - C3/AG/16008354/ming 352 DOA-03/05/2016
	SLS 7434T - X
05/09/19 @ 17:53 pm	revised PA to Chh'ia Nyuk Pui via messaging.

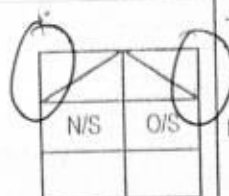
Surveyor

REF:

ASSIGNMENT

06 Nov 2026

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: 128 days Res.: Yes or No
 Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHC 2105H Yr Regn: 2018 / Nov
 Type: M.Car / M.Cycle / Bus / Van / Lorry (Taxi) Prime Mover /
 Truck / Trailer or
 Make: Hyundai Ioniq c.c. 1580
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 71736 T/Radio: Insured / Std / NI / NA
 Eng/No: G4LEJU111909
 C/No: KMHCB51CVKU115062
 Gen. Cond: (Good) / Fair / Poor / Burnt
 Steering: (In order) / Jammed / Leaked / Burnt or
 Brake: (In order) / Jammed / Leaked / Burnt or
 Modi: Nil / (S/Rim) / STD A/Rim or
 Tyre Size: F: 195/65 R 15
 R: — 11 —
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Michelin
 Front _____ Rear _____
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 26/08/2019 D.O.I. 28/08/2019
 Survey held at Churni AMK
 Des. of Damages: Frl / Rear / O/S / N/S / U/C / Rooftop or
N/S Front y o/s Rear y o/s Rear
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time _____ Action / Instruction
MSIG SLB 7434T

28/10
04/10/19 prnpr 215 25000/- with 12 day 7 reg
(\$ 15,355.24 Red - 38%)

RECEIVED 04 OCT 2019

Date/Time, File Pass to? 04/10/19
 1) typist
 Date/Time, File Return to?
 2) _____

Days Of Repair: 12
 Resurvey No. of Trip: 2

Add Fee: ☐ Site Insp (\$)
☐ Interview (\$)
☐ Tech. Invs (\$)
☐ Weekend (\$)

Survey Fee:
 Transportation: 250
 S + RS: 11

Photos
 Others
 TOTAL 261

Report Format :
 Lump Sum / I.B.I: (\$ 25,000/- 45)

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: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Chhia Nyuk Pui

Date: 05 Sep 2019

Preliminary Advice

Insured Vehicle No	: SLS7434T	Accident Date	: 26/08/2019
TP Vehicle No	: SHC2105H	Assignment Date	: 28/08/2019
Make	: HYUNDAI IONIQ HYBRID	Est. Duration of Repair	: 8 days
Date of Inspection	: 28/08/2019		
Inspection At	: Soon Hock Motor Pte Ltd (HQ) Blk 10 Ang Mo Kio Industrial Park 2A, #01-05/06 AMK Autopoint Singapore 568047		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages n/s front, o/s front & o/s rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	39,979.72
Revised Amount	:S\$	35,815.40
Check Items (Estimated)	:S\$	0.00
Total	:S\$	35,815.40

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\$

Remarks

- () The vehicle is economical/not economical for repair.
- (X) The above survey was conducted on a 'without prejudice' basis.

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	26 Aug 2019		28 Aug 2019 12:01 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	GRAB RENTALS PTE LTD, Co. Reg. No.: 201617200G		
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R		
Vehicle Reg. No.:	SHC2105H	Date of Loss:	26/08/2019 13:00 - :59 [9 Months and 18 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP	Policy/Cover Note No.:	29114756MKF (Comprehensive) Coverage: 01/02/2019 - 31/01/2020
Vehicle Reg. No. (Insured):	SLS7434T	Policy No. (Claimant):	
		Excess:	
Repairer:	Soon Hock Motor Pte Ltd (HQ) Blk 10 Ang Mo Kio Industrial Park 2A, #01-05/06 AMK Autopoint, 568047 Ang Mo Kio - Tel: 64836016		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 29/08/2019]		
Driver/Custodian (Insured):	TAN SEOW CHEW (68 / Male) , NRIC: S0014841E Email:		
Adj Asg. Remarks:	on WP. OI:Grab. Liab: Unclear. Assign: LKK Auto Consultants Pte Ltd. Contact: Ms Lynn or Ms Irene at 65425119 / 6542 7162.		

ASSOCIATED MAIL RECEIVED

View All

Compose Case Mail

- MSIG_SG (28/08/2019): Cancellation of Assignment: SHC2105H

ALL ASSOCIATED TASKS

View All

Search Tasks

Create New Task

Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

MCD619112640 / CamionDelGiro Engineering Pte Ltd - Loyal
 ENTRY DATE & TIME: 26/08/2019 18:06
 SUBMITTED BY: Catherine Por May Juan

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	26/08/2019 18:06
Date Of Accident	26/08/2019 12:50
Exact Location Of Accident	BUKIT BATOK EAST AVE 6 TWDS JURONG KECHIL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC2105H
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	IONIQ
Exact Purpose for which vehicle was being used at time of accident	
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	TAXI
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
Driver	
Name of Driver	KHOO SUWEE HUA
NRIC No	S0219013C
Date Of Birth	04/05/1954
Occupation	OUTDOOR
Date Of Driving Pass	01/01/2000
Driving Experience	19 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97518377
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address 108 #03-264 JURONG EAST STREET 13
 Postcode 600108
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - TAXI DRIVER
 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 1
 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? NO
 If Yes, Please state which Police Station
 Was notice of Intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

SEE ATTACH.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Remarks/ Reasons: -
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLS7434T
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver TAN SEOW CHEW
 NRIC/Passport Number S0014841E
 Contact Number 92396353
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage FRT RHT
 No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

KERB

MOBILE EQUIPMENT

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.

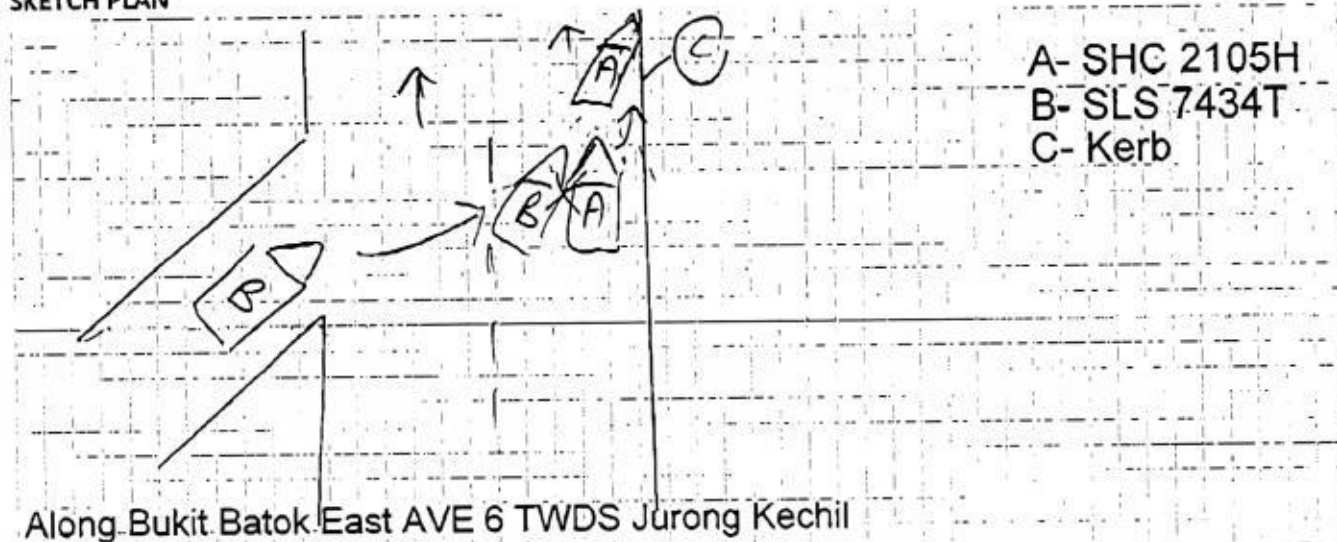
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 26.08.2019@1530HRS

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

SKETCH PLAN



A- SHC 2105H
B- SLS 7434T
C- Kerb

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26.08.2019@ 1250hrs I was travelling along Bukit Batok East AVE 6 TWDS Jurong Kechil with no passenger onboard.

As I was travelling straight suddenly veh(B) SLS 7434T dashed out from my left and hit onto my vehicle front left portion. My vehicle swerve towards the kerb.

right

As it took place too fast I could not take evasive action to prevent the accident.

I have company video and photos at scene to support my claims.

No injury in this accident.

Veh(B) SLS 7434T MR Tan Seow Chew HP: 9239 6353

DECLARATION

I declare the foregoing particulars are true in every respect.

CO. REG. NO. 199303821R

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26.08.2019@1530HRS

Reporting Centre Personnel's Signature

Name:

IC/FIN No.: June

VEHICLE NO : SHC 2105H

DATE : 26.08.2019

MAKE :

TEL : 6542 5119

MODEL : HYUNDAI IONIQ

FAX : 6542 6039

MSHG

Page 1 of 2

Page 2 of 2

FAX : 6542 6039

Page 1 of 1

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG19015153/DSF3N2

Date: 08/10/2019

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	29114756
Claimant Vehicle No :	SHC2105H	Insured Vehicle No :	SLS7434T
Date of Loss:	26/08/2019	Nature of Claim:	TP
		Claim No:	604036

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHC2105H	Engine No:	G4LEJU111909
Make & Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Chassis No:	KMHC851CVKU115062
Reg. Date:	08/11/2018 (Man. Year: 2018)	Odometer:	71736 km
Colour:	Blue		
Engine Capacity:	1580 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	195/65R15	Rear Tyre Size:	195/65R15
Front Left Side:	Michelin 5 mm	Rear Left Side:	Michelin 5 mm
Front Right Side:	Michelin 5 mm	Rear Right Side:	Michelin 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	35,595.24	29,826.60	5,768.64	16.21
Miscellaneous Items	0.00	0.00	0.00	
Labour	4,760.00	2,220.00	2,540.00	53.36
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	40,355.24	32,046.60	8,308.64	20.59
Approved Total (Overridden) (\$\$)		25,000.00		
(\$\$)	40,355.24	25,000.00	15,355.24	38.05
+ GST 7.00/7.00% (\$\$)	2,824.87	1,750.00	1,074.87	38.05
Nett Amount (\$\$)	43,180.11	26,750.00	16,430.11	38.05

INSPECTION

Date of Assignment:	28/08/2019	
Date Inspected:	28/08/2019	Inspected At: Chunni Motor Work Pte Ltd - Amk Blk 10 #01-05/06, AMK Autopoint Singapore 568047
Estimated Period of Repair:	12.0 days	

Adjuster: BRYAN TANI

Manager: Hiew May Fung

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.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 08 Oct 2019)
Parts:	192	HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC2105H)	
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		*FRONT BUMPER COVER	Cut/Cracked	418.30 FL	*418.30 FL
2	1		*FRONT BUMPER GRILLE (LH)	Cut	186.90 FL	*186.90 FL
3	1		*FRONT BUMPER BRACKET (LH)	Not Necessary	28.00 FL	*- FL
4	1		*HEADLAMP SUPPORT PANEL ASSY	Cracked/Broken	949.30 FL	*949.30 FL
5	1		*HEADLAMP (LH)	Cut/Scratched	1,198.80 FL	*1,198.80 FL
6	1		*DAY LIGHT,LH	Cut/Scratched	642.50 FL	*642.50 FL
7	1		*FRONT FENDER (LH)	Dented	490.70 FL	*490.70 FL
8	1		*FRONT FENDER SHIELD (LH)	Deformed	114.70 FL	*114.70 FL
9	1		*EMBLEM-BLUE DRIVE (LH)	Necessary	26.60 FL	*26.60 FL
10	1		*FRONT DOOR (LH)	Bent	1,797.20 FL	*1,797.20 FL
11	1		*FRONT DOOR MIRROR (LHH)	Cut	1,054.60 FL	*1,054.60 FL
12	1		*FRONT DOOR PROTECTOR (LH)	Not Necessary	116.20 FL	*- FL
13	1		*ROCKER PANEL OUTER GARNISH	Not Necessary	290.00 FL	*- FL
14	2		*FRONT WHEEL RIM (LH/RH)	O/s Cut/ N/s Broken	2,248.40 FL	*2,248.40 FL
15	2		*FRONT WHEEL BEARING	Damaged	908.00 FL	*908.00 FL
16	2		*FRONT SHOCK ABSORBER (ASSY) (LH/RH)	Distorted	745.00 FL	*745.00 FL
17	2		*FRONT SHOCK ABSORBER MOUNTING (LH/RH)	Not Necessary	413.80 FL	*- FL
18	2		*FRONT SHOCK ABSORBER FORK (LH/RH)	Not Necessary	413.80 FL	*- FL
19	2		*FRONT SUSPENSION UPPER ARM (LH/RH)	Not Necessary	488.60 FL	*- FL
20	1		*FRONT DRIVE SHAFT (LH/RH)	N/s Damaged/O/s Not Necessary	1,873.40 FL	*936.70 FL
21	1		*RACK & PINION ASSY	Damaged	887.40 FL	*887.40 FL
22	1		*STG TIE END	N/s Bent/O/s Not Necessary	189.40 FL	*94.70 FL
23	2		*FRONT SUSPENSION LOWER ARM (LH/RH)	N/s Bent/O/s Distorted	593.60 FL	*593.60 FL
24	1		*KNUCKLE ARM (LH/RH)	Ns Distorted/Os Not Necessary	727.20 FL	*363.60 FL
25	1		*ENGINE CROSSMEMBER	Distorted	1,803.90 FL	*1,803.90 FL
26	1		*REAR WHEEL RIM (RH)	Cut	1,124.20 FL	*1,124.20 FL
27	1		*ENGINE UNDER COVER	Torn	469.40 FL	*469.40 FL
28	1		*GEARBOX ASSY	Damaged	18,928.32 FS	*16,000.00 FS
29	1		*FRONT DOOR COMFORT LOGO (LH)	Necessary	75.00 FS	*75.00 FS
30	1		*FRONT TYRE (LH/RH)(50%) (O/s Not Necessary)	N/s Cut/Punctured	432.00 FS	*108.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$) 39,635.22 33,237.50
 - List Item Discount on L Items 20.00/20.00% (S\$) 4,039.98 3,410.90

Total Parts (S\$) 35,595.24 29,826.60

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
Labour Items				
1	PANEL BEATING	New	1,000.00	600.00
2	SPRAY PAINTING CHARGE	New	1,400.00	600.00
3	WIRING CHARGE	New	50.00	30.00
4	TUFF KOTE	New	100.00	40.00
5	TOWING CHARGE	New	90.00	0.00
6	TRANSFER OF DOOR	New	120.00	60.00
7	REMOVE/REFIX UNDERCARRIAGE (FRT)	New	400.00	250.00
8	FRONT WHEEL ALIGNMENT	New	120.00	60.00
9	REMOVE/REFIX AIRCON & REFILL GAS	New	150.00	80.00
10	REMOVE/REFIX GEARBOX	New	450.00	180.00
11	DIAGNOSTIC & RESETTING TO ERASE FAULT CODE }	New	480.00	320.00
12	RE-SET FRT ABS SYSTEM }	New	200.00	0.00
13	RE-SET FRT POWER WINDOW SYSTEM }	New	200.00	0.00
Gross Labour Cost (\$\$)			4,760.00	2,220.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >