

ASS. REC. BY:

REF: CS/INC19015224/Kqd3

n2

Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Daniel Koh

of INK

Date/Time: 11:37am @ 28/08/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLX 1004P

Insured: XE 4322J

at Workshop m/s H C Auto Pte Ltd

Tel: 9457 0678

of 160 Sin Ming Drive #05-09

Policy No:

Claim No: MT/1059685-001

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 26/08/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10:13am @ 28/8/19

Person Contacted:

Mr Joe

Vehicle ☒ IN / OUT

Date/Time

Action/Instruction

Voluntary

XE 4322J : X

SLX 1004P X

30/9 @ 1660 re email & confirm (Red @ 3430.08, 67%.)

ASS. REC. BY:

REF:

INCL

Kenneth

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:

2-3 days

Res.: Yes or No

Lum Sum:

1.B.1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

1 File pass to

RECEIVED 14 OCT 2019

Date/Time, File Pass to?

1) 04/10 14:54

Date/Time, File Return to?

2)

Report Format:

Lump Sum / I.B.I. (\$) 78

1660

Days Of Repair: 3

Resurvey No. of Trlp: 1

Add Fee:

Site Insp (\$)

Interview (\$)

Tech Invs (\$)

Weekend (\$)

Survey Fee:

Transportation:

S + RS. \$1

Fuel \$5

Others

TOTAL

250

Veh No:

SLX 1004P

Yr Regn:

03, 18

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

Truck / Trailer or

Make:

Honda VTEC

c.c

1496

Colour:

m. Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

141.55

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

RU 3

1266798

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / Rim or

Tyre Size:

F: M/Hike 215/60R16

R:

Dun

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

R/Bal.

9

mm

Rear

R/Bal.

3

mm

L/Bal.

9

mm

L/Bal.

3

mm

D.O.A.

26/8/19

D.O.I.

28/8/19

Survey held at

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

Rear N/S

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

11.48am

Nivitha (LKK Auto)

From: Daniel Koh <daniel.koh@income.com.sg>
Sent: Wednesday, 28 August 2019 11:37 AM
To: 'assignments@lkkauto.com'
Cc: admin-d@lkkauto.com
Subject: FW: TP CASES FARMED OUT TO LKK ON 28/8/2019

Dear LKK,

Resend with claim numbers & OIC

From: Daniel Koh
Sent: Wednesday, 28 August 2019 9:34 AM
To: 'assignments@lkkauto.com' <assignments@lkkauto.com>
Cc: 'admin-d@lkkauto.com' <admin-d@lkkauto.com>; Teng Ken Leong <kenleong.teng@income.com.sg>; Thio Tse Kiat <tsekiat.thio@income.com.sg>
Subject: FW: TP CASES FARMED OUT TO LKK ON 28/8/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OIV	DOA	Additional Remarks
1	SERENE LIM	MT/1059411-002	SG83566X	CAR TIMES AUTOLUTION PTE LTD	160 SIN MING DRIVE #02-	Yuki Peck / 64715111		SJR5894R	24/8/2019	

Daniel Koh
Senior Admin Assistant
Motor Insurance
T +65 6430 7901
www.income.com.sg



in with
you

At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

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	27/08/2019 17:46
Date Of Accident	26/08/2019 13:00
Exact Location Of Accident	PIONEER ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX1004P
Insured/Policyholder	
Name Of Registered Owner	123 LEASING PTE LTD
Co Reg No	201201338W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-82725558

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994200
Cover Note Number	

Driver

Name of Driver	OW CHIEN HAO
NRIC No	S7516234J
Date Of Birth	28/05/1975
Occupation	OUTDOOR
Date Of Driving Pass	25/11/1996
Driving Experience	22 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91837468
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 331 SEMBAWANG CLOSE #12-365
Postcode	750331
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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)	2
Passenger 1	NAME: : LOUIS GENDER: : MALE

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 SKETCH PLAN.

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	XE4322J
Vehicle Make/Model/Colour	SCANIA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ABRAHAM SEVIOUR SAVIOUR
NRIC/Passport Number	S8790401F
Contact Number	97974638
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 reudate 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.

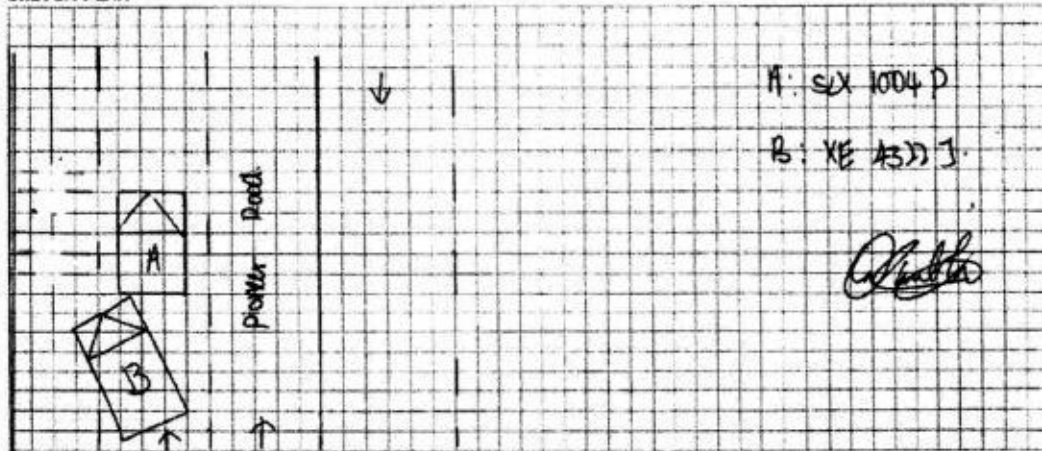


 Policyholder's Signature
 Date & Time:
 27 AUG 2019


 Driver's Signature
 (if driver is not the policyholder)
 Date & Time:
 27 AUG 2019


 Reporting Centre Personnel's Signature
 Name: Jenny Lim
 NRIC/FIN No.: S6927273H

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/08/19 at about 1300 hours, while I was driving my motor vehicle A SLX 1004 P along Pioneer Road at the second lane from the left. Suddenly the vehicle in front of me stopped and I stopped in time too. Suddenly I felt an impact from behind. I realised that was a motor vehicle B XE 4322 J hit me from behind. His front right portion hit onto my rear left portion of my vehicle SLX 1004 P. I'm lodging this report to claim against the insurer of XE 4322 J. No one was injured.

[Signature]

DECLARATION

I/We declare the foregoing to be true in every respect.

[Signature]
Policyholder's Signature

Date & Time: 27 AUG 2019

GIAMAC SketchPlanForm_V3

[Signature]
Driver's Signature
(If driver is not the policyholder)

Date & Time: 27 AUG 2019

[Signature]
Reporting Centre Personnel's Signature

Name: Jenny Lim
NRIC/FIN No.: S6927273H

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7516234J**



Name
OW CHIAN HAO
(OU JIANHAO)
欧 津 豪

Race
CHINESE

Date of birth
28-05-1975

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Driving Number: **S7516234J**

Name
OW CHIAN HAO
(OU JIANHAO)

Birth Date: **28 May 1975**

Valid Date: **20 Oct 2003**



4784833



NRIC No: **S7516234J**



Date of Issue
21-10-2011

Address
APT BLK 331 SENDAWANG CLOSE
#12-365
SINGAPORE 780331

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

Class	Vehicle Description	Valid Date
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	26 Nov 1996

NP 428A

Licence No: **S7516234J**





HOTLINE TEL: (66) 6419-3000

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1966

ROAD TRANSPORT ACT, 1967 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

M Z 430

		(The below excess is subject to GST)	
COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	S\$2000.00 (Sect I & II)
CERTIFICATE NO.	SLX1004P	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999994200	SUM INSURED	Market Value
		INSURING WITH COE/PARF	Yes
		SLX1004P	
1) VEHICLE REGISTRATION NO.		123 LEASING PTE LTD	
2) NAME OF INSURED			
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		15 March 2019	
4) DATE OF EXPIRY OF INSURANCE		14 March 2020	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*			
<p>Any person who is driving on the insured's order or with their permission.</p> <p>S\$2,000.00 Section I & S\$2,000.00 Section II Excess is applicable for driver who is between 20 years to 40 years old with minimum 2 years driving experience in Singapore.</p> <p>An additional excess of \$1,000.00 per incident is applicable in the event of an accident occurring outside Singapore.</p>			
<p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation to that behalf from driving the Motor Vehicle.</p>			
6) LIMITATION AS TO USE*			
<p>1) Use for social, domestic, pleasure purposes and business purposes of insured</p> <p>2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.</p> <p>3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p> <p>The Policy does not cover: 1) Use for button, driving test, racing, para-motoring, reliability trial or speed-testing. 2) Use whilst towing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.</p>			
LOSS OF USE		Not Included	
HIRE PURCHASE COMPANY		TECK WEI CREDIT PTE LTD	
<p>*Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.</p>			

I/ We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1967 (Malaysia).

Issued in Singapore 14 Mar 2019

AIG Asia Pacific Insurance Pte. Ltd.

501295-000
Insure Link Pte Ltd
2 Kallang Ave
409-16 CT Hub
Singapore 339407


AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL

H C AUTO PTE LTD

160 Sin Ming Drive # 05-09 Sin Ming Auto City Singapore 575722

Tel : 6457 0678 Fax : 6457 8287

Co. and GST Reg. No. : 200820153N

Date : 27 / 08 / 2019

ESTIMATE COSTS OF REPAIR

M/s 123 Leasing Pte Ltd

C/o 160 Sin Ming Drive

05-09 Sin Ming Auto City

Singapore 575722

Dear Sir / Madam ,

Vehicle no. : SLX 1004 P - Honda Vezel hybrid 1.5X Auto

Accident date : 26 / 08 / 2019

*Not Authorised
- 3 days
Resurvey B4 painting
& 1660h*

Quantity	Descriptions	Amount (S\$)
1	1 pc rear end panel	\$ 620.00 X
2	1 pc rear bumper fascia <i>865.00</i>	<i>Bullet</i> \$ 1,120.00 ✓
3	1 pc n/s rear bumper side	<i>mgmt</i> \$ 235.00 <i>2</i>
4	1 pc n/s rear bumper bracket	\$ 35.00 X
5	1 pc n/s rear bumper side retainer	\$ 32.00 X
6	1 pc n/s rear bumper reflector	\$ 160.50 X
7	1 pc rear bumper lower garnish	\$ 422.60 X
8	1 pc n/s rear fender wheel arch garnish	<i>mgmt</i> \$ 150.00 <i>2</i>
		\$ 2,775.10
	Less 20 %	\$ 555.02
		\$ 2,220.08

9	1 pc rear panel inner seal	\$ 250.00 sn X
10	2 pcs reverse sensor	\$ 350.00 sn X
		\$ 2,820.08

Labour charges	\$ 1,000.00 <i>2000</i>
To putty and spray painting	\$ 900.00 <i>4000</i>
To check wiring	\$ 120.00 <i>100</i>
Refix reverse sensor	\$ 100.00 <i>500</i>
To re-seal anti rust	\$ 150.00 X
	\$ 5,090.08
Plus : 7% GST	\$ 356.31
Sub_Total	\$ 5,446.39

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:

Page 1 of 1



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/INC19015224/Kqd3n2

73 BRAS BASAH ROAD

Date: 07-10-2019

#05-01 NTUC TRADE UNION HOUSESINGAPORE

189556



ATTN: CHARLOTTE CHEW

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	XE 4322J	Veh. Inspected	SLX 1004P
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1059685-001	Excess (\$)	0.00
Assign From	DANIEL KOH	Assign Date	28/08/2019

2. Vehicle Particulars & Condition

Make & Model	HONDA VEZEL (A)	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	RU31266794	Colour	METALLIC GREY
Odometer	141551 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	WEST LAKE	9 mm
L/H Front Tyre	215/60 R16	WEST LAKE	9 mm
R/H Rear Tyre	215/60 R16	DUNLOP	3 mm
L/H Rear Tyre	215/60 R16	DUNLOP	3 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	26/08/2019	Inspect Date / Time	28/08/2019 (11:08 AM)
Survey held at	160 SIN MING DRIVE #05-09		
Repairer	H C AUTO PTE LTD		

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:	3 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. SLX 1004P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR END PANEL	TO REPAIR SEE LABOUR	620.00	-
1	REAR BUMPER FASCIA	BUCKLED / CUT	1,120.00	865.00
1	N/S REAR BUMPER SIDE	MTG CRACKED	235.00	235.00
1	N/S REAR BUMPER BRACKET	TO REPAIR SEE LABOUR	35.00	-
1	N/S REAR BUMPER SIDE RETAINER	SERVICEABLE	32.00	-
1	N/S REAR BUMPER REFLECTOR	SERVICEABLE	160.50	-
1	REAR BUMPER LOWER GARNISH	SERVICEABLE	422.60	-
1	N/S REAR FENDER WHEEL ARCH GARNISH	MTG CRACKED	150.00	150.00
	LESS 20% DISCOUNT		-555.02	-250.00
			2,220.08	1,000.00
	SPECIAL NETT ITEMS			
1	REAR PANEL INNER SEAL (SN)	SERVICEABLE	250.00	-
2	REVERSE SENSOR (SN)	SERVICEABLE	350.00	-
			600.00	-
	LABOUR			
	LABOUR CHARGES.INCLUSIVE OF THE REPAIR OF REAR END PANEL AND N/S REAR BUMPER BRACKET.		1,000.00	200.00
	TO PUTTY AND SPRAY PAINTING.		900.00	400.00
	TO CHECK WIRING.		120.00	10.00
	REFIX REVERSE SENSOR.		100.00	50.00
	TO RE-SEAL ANTI RUST.	NOT NECESSARY	150.00	-
			2,270.00	660.00
	GRAND TOTAL		5,090.08	1,660.00
	RECOMMENDED COST OF REPAIRS (CONFIRMED)			1,660.00

Report Ref No. CS/INC19015224/Kqd3n2

KONG SENG CHEONG

Licensed Appraiser

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.