Surveyor :	Kenneth	ASSI	GNMEN	T (Office)		R		
From (Person	Hafizul Furha		SPF	_ (D	ate/Time: 24.	1.19	9.16am
Estimated Co	st:		В	Bill to:				
To Inspect Ve	STTP RES / OD R	SL(5746			Insured:	QX :	32 E	
	m/s Car Tim		n		Tel:	6471511	1	
of 160 Si	n ming will	re 4102-04						
Policy No:				Claim No:	AEMO/10	05/009/20	19/08	6
Sum Insured:				Excess:				
Make of Veh				D.O.A. 23. 8. 19				
CA / REV Date/Time:	1 REP. / REV 24 4-8-19 - 9-496	HRS i. m Person Con				H O D Endorsew	vent:	
Date/Time	Action/Instruction	(V) E	timate.					
	QX 32E					8		
	SLC 574(:)							
		•			0	Line	lie	1
					1.10	7 THE RESIDENCE	11110.1	

.

Nivitha (LKK Auto)

From:

Hafizul Farhan RAHMAT (SPF) < Hafizul_Farhan_RAHMAT@spf.gov.sg>

Sent:

Thursday, 29 August 2019 9:16 AM Admin-D (LKKAuto); assignments

To: Cc:

Frankie THAY (SPF); Rosalyn TAN (SPF)

Subject:

Pre-repair survey for SLC574C (vs QX32E DOA:23/8/19)

Message Classification: Unclassified

Hi,

Kindly conduct pre-repair survey on SLC574C at:

CarTimes Autolution 160 Sin Ming Drive #02-04 AutoCity Singapore 575722

Contact: Yuki, Tel: 6471 5111

Thank you.

Best Regards,

Hafizul Farhan Bin Rahmat AEMD / PLD Singapore Police Force DID: (65) 6478 4860 | FAX: (65) 6478 4850





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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 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.
- 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 ava 7. By the lodgement of this report to the insurers, you hereby consaforesaid.	allable upon application by interested parties. Sent to the archiving of this report at the centre and to copies of the report being made available
建筑的 医 克勒氏 医甲基甲基	ACCIDENT STATEMENT
Date Of Report	26/08/2019 14:47
Date Of Accident	23/08/2019 12:30
Exact Location Of Accident	OUTRAM ROAD OUTSIDE WANGZ HOTEL
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLC574C
Insured/Policyholder	
Name Of Registered Owner	PENNEFATHER JOAN DEBBIE
NRIC No	S1283192G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93663474
Alternative Phone No	OTHERS-93663474
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
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 NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5108747918

Cover Note Number

Driver

Name of Driver TUPAZ DAVID JOE

NRIC No S8115285C Date Of Birth 15/05/1981 Occupation OUTDOOR Date Of Driving Pass 08/06/2009

Driving Experience 10 YEARS AND 2 MONTHS

Gender

Mobile Number (LOCAL) +65-87494766

Fax Number

Contact Number

EMail Address DAVIDTUPAZ213@GMAIL.COM Address

BLK 188A BEDOK NORTH STREET4 #08-66

Postcode

461188

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

PARENT

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)

2

involved in the accident

YES

Was any body injured in the Accident?

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:

: GRAB PASSENGER

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 30 BEDOK NORTH ROAD, POSTCODE: 469676, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

AS PER POLICE REPORT No.T/20190824/2157;

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

QX32E

Vehicle Make/Model/Colour

SUBARU / IMPREZA 5MT

Details Of Properties

Vehicle Category

GOVERNMENT

Name of Driver

SIM NGIN KIT

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

	DETAILS OF INJURED PERSON 1
Name	TUPAZ DAVID JUDE
Approximate Age	38
Injuries Sustain	
Injured person in which vehicle?	SLC574C
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	BLK 118A BEDOK NORTH STREET4 #08-66
Postcode	46118

Accident Sketch Plan Pg. 1

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.
- 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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (li) 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
- 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

IDAC KAKI BUKIT (VAC)

Reporting Certal KakirBukitnawa 4 Singapore 415933

NRIC/11667416697 Fax: 67492305

Email: vackb@singnet.com.sg

Accident Sketch Plan Pg. 1

SKETCH PLAN	Outroum Rd (outside WangzHite)		<
	A-SLC 5740		
	B-Qx32E	15 A	-
			
			<u> </u>

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23/8/19 at 1230hrs, I was driving along outram Rd towards	41-1
When I was in the yellow box Vehicle B comen the right kHit or	nto
my front right Portion ofmy reliale	

DECLARATION

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

Policyholder's Signature Date & Time.

(If driver is not the policyholder) Date & Time:

IDAC KAKI BUKIT (VAC)
Reporting Cerki Kalki, Bukit Anne 4
Name: Singapore 415933
NRIC/Tethor/1416697 Fax: 67492305
Email: vackb@singnet.com.sg



Police Station Of Origin: Bedok North N P C 30 Bedok North Road SINGAPORE 469676 Tel No. 1800-2449999



1 of 3 Report No. 1/20190824/2157

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.	Station Diary No
24/08/2019 19:31		117

E-100-C01E 10-01			A CONTRACTOR OF THE PARTY OF TH		
Informan	it's Partice	ilars			
Name of Informant: TUPAZ DAVID JUDE			Address: APT BLK 188A BEDOK NOR SINGAPORE 461188	TH STREET 4 #08-66	
ID Type / ID No. NRIC NO / S8115285C			Contact No.: Home/Office Mobile: 87494766		
National SINGAP	ly: ORE CITIZ	EN	Email:		
Sex: Age Date of Birth: Male 38 15/05/1981			Type of informant Driver		
Race Filipino			Language. English	Institution / School Name:	
Occupation GRAB DRIVER			Driving Licence Information Class 2B.3A	Date of Expiry:	

General Information of the Accident			
Injury	Drink	Date/Time of	T

	Injury	Drink	Date inne of	Type or coomis
Type of	Government Vehicle	Drive	Accident	Straight Road
Acadent:		No	23/08/2019 12:20	

Location Along Road 1 OUTRAM ROAD

ALONG OUTRAM ROAD Weather	Road Surface:	Road Speed Limit:
dear	Traffic Control	Traffic Volume:
Traffic Flow	Not Controlled	Moderate
One Way	1401 COMMONDS	Anyone conveyed by
Type of Gallisian:	Care Direction	ambulance:
Between Moving Vehicles - Side	Swipe - Same Direction	No

Details of V		Make	Model	Color	Condition	Direction of the last of the l
Vehicle No.	Car	SUBARU	IMPREZA	White		0
			5MT	Mileto	Slightly	1
SLC574C	Car	HONDA	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR	White	Damaged	



Police Station Of Origin Bedok North N.P.C. 30 Bedok North Road SINGAPORE 469676 Tel No: 1800 2449999



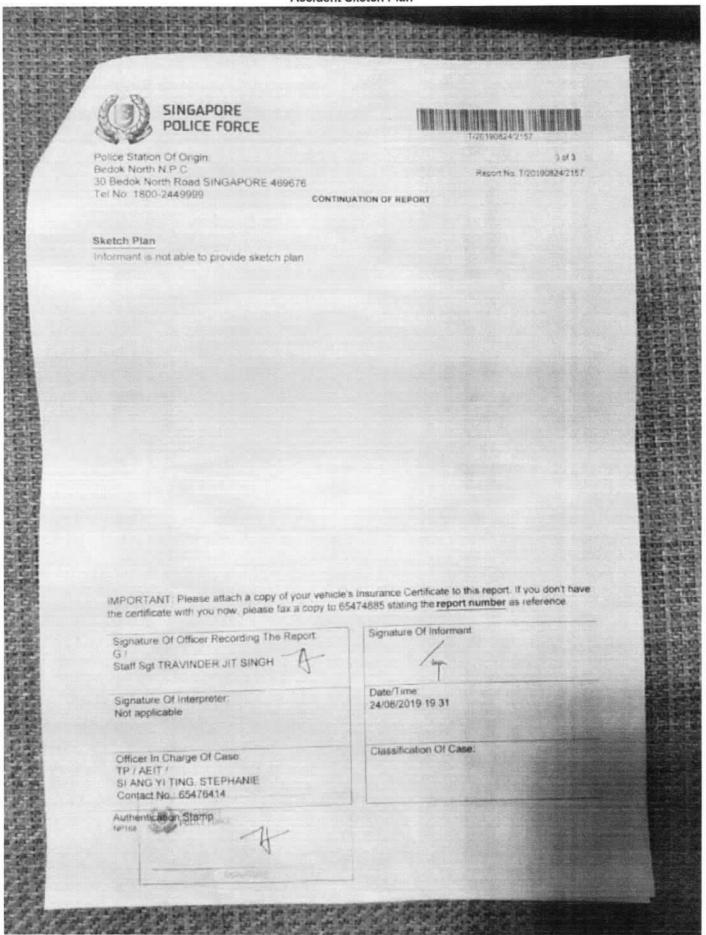
Report No. T/20190624/2157

CONTINUATION OF REPORT

Detaits of Pers	on Involved			III SEE	-	
Any Pedestrian	Involved: No					
No. of Pedestria	ns Injured NIL		Use of Ped	estran	Cross	ing NA
Driver		30 14 14		1000		
Name	SIM NGIN KIT			ID No.		NIL
Related Vehicle	QX32E (Car)			Conta	ct No	NIL
Hospital/Clinic	NIL			Class Driving Licens Expiry	g ce&	Class: NIL Date of Expiry: NIL
Date Treatment	MIL		Date Disch	arge	NIL	
No. of Days gran	fed Medical Leave	NIL	Degree of	THE RESIDENCE OF THE PERSON NAMED IN	Contract of the last	
Driver						
Vame	TUPAZ DAVIO JUDE			ID No		S8115285C
Related Vehicle	SLC574C (Car)			Conta	ct No.	87494766
Hospital/Clinic	UNIHEALTH CLINIC			Class Driving Licence Expiry	g ce &	Class 2B,3A Date of Expiry: NIL
Date Treatment	24/08/2019		Date Disch	arge	24/08	/2019
	ted Medical Leave	03	Degree of	Injury	Slight	

On 23 August 2019 at about 1220hrs, I was driving my vehicle along Outram Road on Lane 3 towards Singapore General Hospital, sending my passenger to her drop off location. As I was driving along Lane 3, all of a sudden, a Police vehicle registration number QX32E emerged from my right side and abruptly entered Lane 3 without signaling. I could not brake in time and as such, the right side of my front bumper collided with the left side of the front bumper of the police vehicle. I then stopped my vehicle and approached the Police Officer whom identified himself as Sim Ngian Kit. The Police Officer refused to provide his telephone number and told me to take down the police vehicle registration number will do. I then took photos of the accident scene and went to a nearby carpark to exchange particulars as both our vehicles were blocking traffic. I then left after which

On 24 August 2019, I went to Unihealth Clinic located at Block 214 Bedox North Street 1 #01-171 as I was feeling pain in my neck, hip and my right feet. I was then issued with 3 days of medical leave reference MC No 0000002718.



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	192G
Vehicle No.:	SLC574C
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Aug 2019
Vehicle Make:	HONDA
Vehicle Model:	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	L15B4036461
Chassis No.:	RU11116457
Maximum Power Output:	96.0 kW (128 bhp)
Open Market Value:	\$20,115.00
Original Registration Date:	29 Apr 2016
First Registration Date:	29 Apr 2016
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$10,161.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Apr 2026
PARF Rebate Amount: Intended COE Rebate Details	\$7,620.00
COE Expiry Date:	28 Apr 2026
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$46,667.00
COE Rebate Amount:	\$30,348.00
Total Rebate Amount:	\$37,968.00

The information contained herein is correct as at 27 Aug 2019

ОК



CarTimes Autolution Pte Ltd 160 Sin Ming Drive AutoCity #02-04 Singapore 575722

Tel: 6471 5111 Email: claims@cartimes.com.sg

Vehicle No. SLC574C

Car Model: Honda VEZEL

QTY	DESCRIPTION	DESCRIPTION REPAIRER'S ESTIMATE(\$\$)		The state of the s		SURVEYORS ADJUSTMENT(S\$)
	LIST ITEM					
1	FRT RH FENDER			7 580.00	X	
1	FRT RH WHEEL ARC			Bu 195.00		
1	FRT BUMPER 801.70			By 907.00	_	
1	FRT BUMPER LOWER LID			BL 366.00		
1	LH FENDER INNER SHEILD			^P	X	
1	BUMPER RH SIDE RETAINNER			30.00		
1	FRT RH HEADLAMP			1850.00		
1	FRT RH FOGLAMP			∫ _~ 150.00	X	
1	FRT RH FOGLAMP COVER			nu 47.00		
1	FRT RH HEADLAMP BRACKET			N 68.00	520	
1	FRT RH ABSORBER			5° → 450.00		
1	FRT RH LOWER ARM			ر _{385.00}	×	
1	KUNCLE ARM			√ 580.00	1	
1	WHEEL BEARING			~~ 480.00	ý.	
1	WHHEL HUB			280.00	1	
1	LINKAGE			108.00	1	
1	FRT RH RIM			960.00	<	
				7693.00		
			20%	1538.60		
				6154.40		
	Special Nett items					
1 set	FENDER INNER SHEILD CLIP			Ma 30.00	×	
1 set	FRT BUMPER CLIP			May 30.00		
	FRT BUMPER SENSOR			م 280.00		
		special nett		340.00	^\	
		TOTAL PART		6494.40		

Not Norhain 21 Sap & 2750h Menny After Paint olify 4 days

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 names) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Vehicle No. SLC574C Car Model : Honda VEZEL

S/N	DESCRIPTION	REPAIRER'S ESTIMATE (S\$)		SURVEYORS ADJUSTMENT
1	LABOUR To remove the affected parts & fittings to commence repairs; replace damaged parts and components	1000.00	3	501
2	To supply paint materials, expandable items & putty, respray paint on parts replaced & repaired	800.00	4	ed .
3	To remove and re-fix wiring and check all electrical components at damaged areas for proper functions	120.00	2.	=(
4	To remove & replace front sensor & check for proper function	120.00	50	(
5	To remove & replace front undercarrige part	∼ 180.00	×	
	PERFROM WHEEL ALIGMENT	~ 80.00	X	
	Labour Total :	2300.00		
	TOTAL (PARTS & LABOUR):	8414.40		



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

AUTOMOTIVE ENGINEERING & MGT DIVISION Ref : CS/SPF19015329/Kyf3e2

ACCIDENT CLAIM SECTION (SPORE POLICE



		EASANT ROAD BLK 8 OLD NGAPORE 298333	Date: 13-12-2019		
	N : HAFIZUL FARI		Code: SPF		
1.		Control of the Contro	:- THIRD PARTY CLAI	M	
	Insured Veh.	QX 32E	Veh. Inspected	SLC 574C	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	AEMD/105/009/2019/086	Excess (\$)	0.00	
	Assign From	HAFIZUL FARHAN RAHMAT	Assign Date	29/08/2019	
2.		Vehicle Part	iculars & Condition		
	Make & Model	HONDA VEZEL (A)	c.c	1496	
	Engine No.	HIDDEN	Year of Reg.	2016	
	Chassis No.	RU11116457	Colour	METALLIC PEARL WHITE	
	Odometer	99141	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
	General	GOOD			
3.		Condi	tions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre	215/60 R16	DUNLOP	2 mm	
	L/H Front Tyre	215/60 R16	DUNLOP	2 mm	
	R/H Rear Tyre	215/60 R16	DUNLOP	3 mm	
	L/H Rear Tyre	215/60 R16	DUNLOP	3 mm	
1.		Descript	ion of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE FF	RONT O/S PORTION.		
	DAMAGES SEE D	ETAILS.			
5.	General Information				
	Accident Date	23/08/2019	Inspection Date	29/08/2019	
	Survey held at	160 SIN MING DRIVE #02-04			
	Repairer	CAR TIMES AUTOLUTION PT	E LTD		
ā.		F	Remarks		
		ON WAS CONDUCTED ON A"WI			
5b.	D)III ACCONDAIN		Days of Repair	LU ILLI AIIIO.	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	4 Working Day	S	



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. SLC 574C

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRT RH FENDER	TO REPAIR SEE LABOUR	580.00	-
1	FRT RH WHEEL ARCH	BUCKLED	195.00	195.00
1	FRT BUMPER	BENT	907.00	801.70
1	FRT BUMPER LOWER LID	BUCKLED	366.00	366.00
1	LH FENDER INNER SHIELD	SERVICEABLE	257.00	-
1	BUMPER RH SIDE RETAINER	DISTORTED	30.00	30.00
1	FRT RH HEADLAMP	CUT	1,850.00	1,850.00
1	FRT RH FOGLAMP	SERVICEABLE	150.00	-
1	FRT RH FOGLAMP COVER	DENTED	47.00	47.00
1	FRT RH HEADLAMP BRACKET	TO REPAIR SEE LABOUR	68.00	-
1	FRT RH ABSORBER	SERVICEABLE	450.00	-
1	FRT RH LOWER ARM	SERVICEABLE	385.00	-
1	KNUCKLE ARM	SERVICEABLE	580.00	-
1	WHEEL BEARING	NOT NECESSARY	480.00	2
1	WHEEL HUB	SERVICEABLE	280.00	-
1	LINKAGE	SERVICEABLE	108.00	-
1	FRT RH RIM	SERVICEABLE	960.00	_
	LESS 20% DISCOUNT		-1,538.60	-657.94
			6,154.40	2,631.76
	SPECIAL NETT ITEMS			
1	SET FENDER INNER SHIELD CLIP (SN)	NOT NECESSARY	30.00	-
1	SET FRT BUMPER CLIP (SN)	NECESSARY	30.00	30.00
1	SET FRT BUMPER SENSOR (SN)	SERVICEABLE	280.00	-
	12 29		340.00	30.00
	LABOUR			
	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; REPLACE DAMAGED PARTS AND COMPONENTS. INCLUSIVE OF THE REPAIR OF FRT RH FENDER AND FRT RH HEADLAMP BRACKET.		1,000.00	350.00

Report Ref No. CS/SPF19015329/Kyf3e2



(TO ITS PRE-ACCIDENT CONDITION)

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 (\$)	
	TO SUPPLY PAINT MATERIALS, EXPANDABLE ITEMS & PUTTY, RESPRAY PAINT ON PARTS REPLACED & REPAIRED.		800.00	400.00	
	TO REMOVE AND RE-FIX WIRING AND CHECK ALL ELECTRICAL COMPONENTS AT DAMAGED AREAS FOR PROPER FUNCTIONS.		120.00	20.00	
	TO REMOVE & REPLACE FRONT SENSOR & CHECK FOR PROPER FUNCTION.		120.00	50.00	
	TO REMOVE & REPLACE FRONT UNDERCARRIAGE PART.	NOT NECESSARY	180.00	-	
	PERFORM WHEEL ALIGNMENT.	NOT NECESSARY	80.00	-	
			2,300.00	820.00	
	GRAND TOTAL		8,794.40	3,481.76	
	RECOMMENDED COST OF LUMP SUM REPAIRS			2,750.00	

Report Ref No. CS/SPF19015329/Kyf3e2

NOTES : THE ESTIMATED UPPER RANGE OF REPAIR COST FOR THE DAMAGED VEHICLE IS IN THE REGION OF \$2,500-\$3,000

1150

KONG SENG CHEONG

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.

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