

33/03/2013

ASS. REC. BY:

REF: CS3/MSG19011105/E t43-1

Special Instruction:

Sender: Hwa Jia

ASSIGNMENT (Office)

From (Person): Ng Chun How

of MSG

Date/Time: 24/9/19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SGQ 13514

Insured: SGQ 62916

at Workshop m/s Legacy Vehicle Motorsports
of 34 woodlands Close, #01-08 mega

Tel: 8858 8851

Policy No: R04630400MX

Claim No: 597429

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A 18.6.19

25.6.2019

CA / REV / REP. / REV 24 HRS

Date/Time: 24.6.19 4.47pm

Person Contacted: Eric Wong

H.O.D. Endorsement

Vehicle IN/OUT

Date/Time Action/Instruction (X) Estimate

SGQ 13514

SGQ 62916

Lump Sum \$4550 - (Red: 4670:509)

Repair Days: 10.

Do Not Finalise

27/9 - Typist file pass

RECEIVED 30 SEP 2019

27/9/2019

PRS

ASSIGNMENT

From:

Date:

25-6-2019

Estimated Cost:

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

To Inspect Vehicle No: SGA 13514

at Workshop with Legacy Technica

at 39 Woodland Close, #01-08

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.

Est. or Market Value:

\$18K

IDAC Accident Report:

Consistent? : Yes or No

GIA / PIR Seen:

Consistent? : Yes or No

Est. Repairs:

6

days

Res:

Yes or No

Lump Sum:

%

3 Val:

Yes or No

CA / REV / REP / 24 HRS

mp

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SGA13514

Yr Regn:

5 Jan 2007

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

Truck / Trailer or

Make:

Toyota Altis

c.c 1518

Colour:

Grey

A/C:

Insured / Std / NI / NA

Sp. Branding:

T/Taxi:

Insured / Std / NI / NA

Eng No:

C/N:

MRO532EL107137839

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

Inorder / Jammed / Leaked / Burnt or

Brake:

Inorder / Jammed / Leaked / Burnt or

Mod:

NI / S/R / STD / R / Rim or

Tyre Size:

F: 195/60 R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal:

6

mm

R/Bal:

6

mm

L/Bal:

6

mm

L/Bal:

6

mm

D.O.A:

18/6/19

D.O.A:

25/6/19

Survey held at

Legacy

Des. of Damages:

Front

/

Rear

/

O/S

/

N/S

/

U/C

/

Roof

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Range: \$4000 - \$5000
6 days.

25/6/2019

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

6

Resurvey No. of Trip:

2

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ + H.C. = \$

Phone:

Others:

TOTAL

00

11

11

Report Format:

PRS

Lump Sum / I.B.I: (\$

Nivitha (LKK Auto)

From: Accounts (LKKAuto) <account@lkkauto.com>
Sent: Thursday, 26 September 2019 2:00 PM
To: Admin-D (LKKAuto)
Cc: Accounts (LKKAuto)
Subject: RE: Report Send Back Alerts - SGQ1351H (TP)

Dear Nivitha,

FYNA Please...

Pending for Survey Report-CS3/MSG19011105/JCD3E2

24 Sep 2019 12:06	Ins Send Back Adj Rpt	Please do paper resurvey	[1] NG CHEN H
24 Sep 2019 12:06	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2019/09/26	[1] Merimen Admir
24 Sep 2019 12:06	Adj Mandate Set	Maintained.	[1] Merimen Admir

Thank You..

Best Regards,



SuthaShelia (Shelia) | Accounts Dept.

LKK Auto Consultants Pte Ltd

Phone: 6841 1891 | email: account@lkkauto.com | fax: 6844-8805

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Do-Not-Reply <do-not-reply@merimen.com>
Sent: Tuesday, 24 September 2019 12:20 PM
To: account@lkkauto.com
Subject: Report Send Back Alerts - SGQ1351H (TP)

Dear Sir / Madam,

Please login to Merimen Online at www.merimen.com.sg for more information.

Thanks,
The Merimen Team



This email has been checked for viruses by AVG antivirus software.
www.avg.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	20/06/2019 18:48
Date Of Accident	18/06/2019 18:15
Exact Location Of Accident	ALONG TELOK BLANGAH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJG6291G
Insured/Policyholder	
Name Of Registered Owner	CAVIN MAK CHEE WAI
NRIC No	S9137974J
Email Address	TSSTZ1118@GMAIL.COM
Mobile Phone No	(LOCAL) +65-88554647
Alternative Phone No	OTHERS-88554647

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.6 L VTI (A)

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
------------------	-------------

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	80463040 QMX
Cover Note Number	

Driver

Name of Driver	MAK HOCK LEONG
NRIC No	S1166416D
Date Of Birth	02/11/1955
Occupation	OUTDOOR
Date Of Driving Pass	31/12/1982
Driving Experience	36 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88554280
Fax Number	
Contact Number	
EMail Address	TSSTZ1118@GMAIL.COM

Address	BLK 428 CLEMENTI AVE 3 #05-434
Postcode	120428
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	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 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

ON 18/06/19 ABOUT 6:15PM, I WAS TRAVELLING ON TELOK BLANGAH ROAD TOWARDS HARBOUR FRONT CENTRE. I HAD A BLUR VISION AND I SAW VEHICLE B'S (IN FRONT) BRAKE LIGHT BUT I DID NOT STOP IN TIME; HENCE COLLIDED INTO ITS REAR. MY FRONT BONNET, BUMPER, LIGHT IS ALL DAMAGE. I WAS ADMITTED TO SGH FOR FURTHER CHECK-UP.

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	SGQ1351H
Vehicle Make/Model/Colour	TOYOTA / ALTIS
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	LEOW HIAN CHYE
NRIC/Passport Number	S7524195Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR PORTION
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name MAK HOCK LEONG

Approximate Age

Injuries Sustain

Injured person in which vehicle? SJG6291G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address (DRIVER)

Postcode

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.

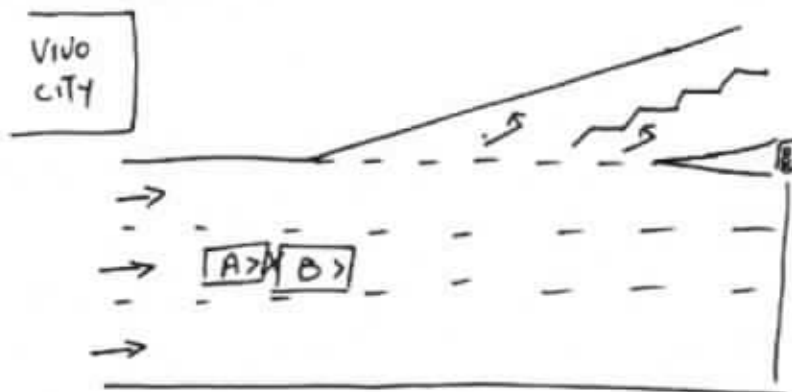
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



HARBOUR
FRONT
CENTRE

A SJ4 6291G

B SGQ 1351H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 18/6/19 ABOUT 615 PM, I WAS TRAVELLING ON TELOK BUANGAH ROAD TOWARDS HARBOUR FRONT CENTRE. I HAD A DUE VISION AND ~~WAS~~ I SAW VEH B'S (IN FRONT) BRAKE LIGHT BUT I DID NOT STOP IN TIME HENCE COLLIDED INTO ITS REAR. MY FRONT BONNET, BUMPER, LIGHT IS ALL DAMAGE. I ^{WAS} ADMITTED TO SGH FOR FURTHER CHECKUP.

1196

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.:

ISSUED BY: 11/11/19

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



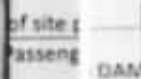
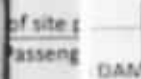
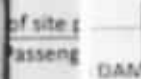
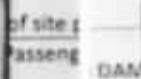
Accident Photo



Accident Photo



of site :	_____
Passeng	DAN



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	24/06/2019 09:31
Date Of Accident	18/06/2019 18:45
Exact Location Of Accident	OUTSIDE VIVOCITY ALONG TELOK BLANGAH RD LP 36-38
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGQ1351H
Insured/Policyholder	
Name Of Registered Owner	LEOW HIAN CHYE
NRIC No	S7524195Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82284808
Alternative Phone No	OFFICE-82284808

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5097808659-01
Cover Note Number	

Driver

Name of Driver	LEOW HIAN CHYE
NRIC No	S7524195Z
Date Of Birth	07/08/1975
Occupation	OUTDOOR
Date Of Driving Pass	08/03/1996
Driving Experience	23 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82284808
Fax Number	
Contact Number	OFFICE-82284808
EMail Address	NOEMAIL

Address	BLK 204 PETIR ROAD #05-623
Postcode	670204
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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 ambulance?	YES
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	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	SJG6291G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MAK HOCK LEONG
NRIC/Passport Number	S1166416D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name LEOW HIAN CHYE
Approximate Age
Injuries Sustain
Injured person in which vehicle? SGQ1351H
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name MAK HOCK LEONG
Approximate Age
Injuries Sustain
Injured person in which vehicle? SJG6291G
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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 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 laws 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 of 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.

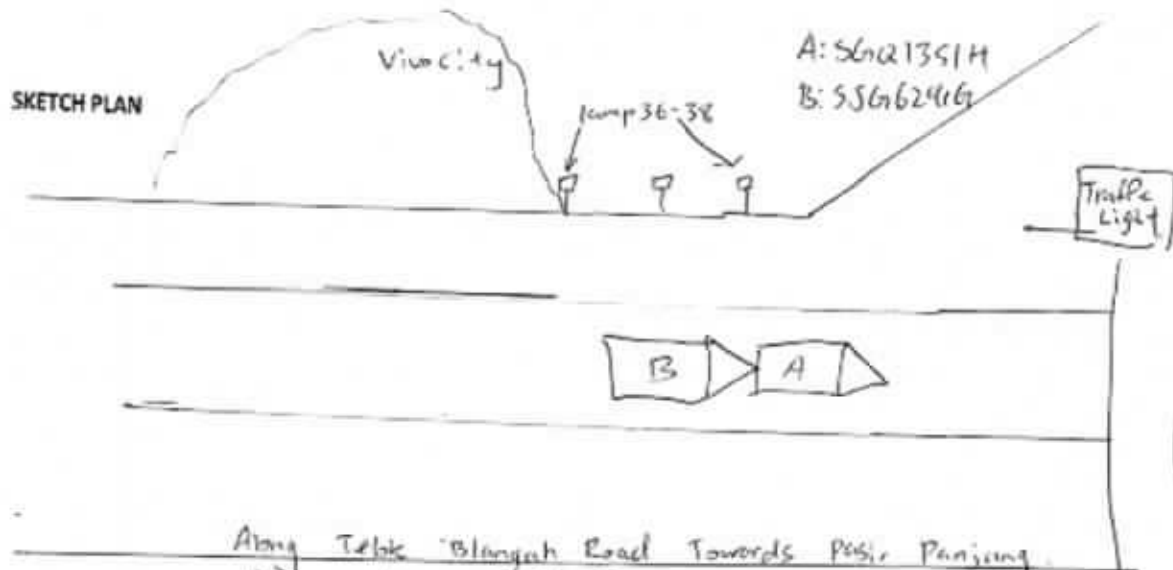
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



Along Teluk Blangah Road Towards Pasir Panjang
Between lamp pole 36-38

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.

DECLARATION

We declare the foregoing particulars are true in every respect.

Policyholder's Signature
& Time:

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

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

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20190622/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190622/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/06/2019 11:26		Vide Report No.: D/20190618/0123		Station Diary No.:	
Informant's Particulars					
Name of Informant: LEOW HIAN CHYE			Address: APT BLK 204 PETIR ROAD #05-623 SINGAPORE 670204		
ID Type / ID No.: NRIC NO / S7524195Z			Contact No.: Home/Office: Mobile: 82284808		
Nationality: SINGAPORE CITIZEN			Email: inquiry@legacytecnica.com		
Sex: Male	Age: 43	Date of Birth: 07/08/1975	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PRIVATE HIRER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/06/2019 18:45	Type of Location: Straight Road
Location: TELOK BLANGAH ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: HEAD(MOVING) TO REAR (STATIONARY)				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGQ1351H	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Silver		0
SJG6291G	Car	HONDA	CIVIC	Blue	Seriously Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGQ1351H	NTUC Income Insurance Co-Operative Limited	5097808659-01	05/02/2019	04/02/2020

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20190622/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20190622/7010

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEOW HIAN CHYE	ID No.	S7524195Z
Related Vehicle	SGQ1351H (Car)	Contact No.	82284808
Hospital/Clinic	SGH SPECIALIST PRACTICE	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	18/06/2019	Date Discharge	21/06/2019
No. of Days granted Medical Leave	32	Degree of Injury	Slight
Driver			
Name	MAK HOCK LEONG	ID No.	S1166416D
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I WAS DRIVING(SGQ1351H) ALONG TELOK BLANGAH ROAD TOWARDS PASIR PANJANG ROAD ON THE 18/JUNE/2019 AROUND 1845HRS. MY CAR WAS STATIONARY AT THE TRAFFIC LIGHT BETWEEN LAMP POLE 36 & 38. AS I WAS WAITING FOR THE TRAFFIC LIGHT TO TURN GREEN, A VEHICLE SJG6291G COLLIDE & BANG ON TO THE REAR OF MY VEHICLE. THE 3RD PARTY DRIVER WAS INJURED, AND I WAS ALSO INJURED. TRAFFIC POLICE AND AMBULANCE WAS PRESENT, AND WE WERE BOTH SENT TO HOSPITAL. I WAS DISCHARGE FROM THE HOSPITAL ON THE 21 JUNE 2019.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20190622/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190622/7010

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
MOHAMED RIZWAN BIN IBRAHIM
Contact No.: 93265045

Authentication Stamp
NP165

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
22/06/2019 11:26

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**RW AUTOMOTIVE APPRAISERS SERVICES**

(Licensed Appraisers & Claims Adjusters)
 256 Bishan St. 22 #12-472 Singapore 570256
 Tel: +65 6996 9988 Hp: +65 8338 9988 Fax: + 65 6553 3912
 Reg. No. 528212708

Leow Hian Chye
 c/o Legacy Technica Motorsports
 38, Woodlands Close
 #01-08, MEGA@Woodlands
 Singapore 737856

Report No : RW/0049/19TP
 Date : 28.06.2019

VEHICLE INSPECTION REPORT**REFERENCE**

Requested by : Workshop, owner's behalf
 Date of Request : 22.06.2019
 Date of Accident : 18.06.2019
 Date of Inspection : 22.06.2019
 Inspected at : Legacy Technica Motorsports
 38, Woodlands Close, MEGA@Woodlands
 #01-08, Singapore 737856

VEHICLE DETAILS

Vehicle No	SGQ 1351 H	Make & Model	Toyota Allis
Year Make	2008	Colour	Grey
Engine No	3ZZ4622085	Chassis No	MR053ZEC107137859
Engine Capacity	1598 cc	Mileage	317,773 km
Air-Con	Yes	Radio/CD/Cassette	Yes
Seat Belt	Yes	Rims	Sport

GENERAL CONDITION OF VEHICLE

General Condition	Good	Modification	Nil
Brakes	Serviceable	Handbrake	Serviceable
Steering	Serviceable		

Tyres	Make	Size	Rim	Tread Balance
Front Right	Dayton	195/60 R15	Sport	7 mm
Front Left	Dayton	195/60 R15	Sport	7 mm
Rear Right	Bridgestone	195/60 R15	Sport	5 mm
Rear Left	Bridgestone	195/60 R15	Sport	5 mm

ASSESSMENT

	Breaker's Estimate	Recommendation
Spare Parts	\$ 6,075.30	\$ 5,718.58
Labour Charges	\$ 4,210.00	\$ 3,610.00
Paint Work	\$ 2,400.00	\$ 2,200.00
Towing Charges	\$ -	\$ -
Total	\$ 12,685.30	\$ 11,528.58
Recommend lump sum repairs		\$ 9,220.00
Reduction		\$ 3,485.30
Estimated Period Required for Repair		16 days

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 Reg. No. 528212708

Page : 1

ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

Vehicle No: SGQ 1351 H

Report No.: RW0049/15TP

S/No	QTY	Description	Condition/ Remarks	Repairer's Estimates	My Recommendation
------	-----	-------------	-----------------------	-------------------------	----------------------

REPLACEMENT OF DAMAGED PARTS

1)	1	Rear bumper	Torn	\$ 418.30	\$ 418.30 ✓
2)	1set	Rear bumper clips	Necessary	\$ 30.00	\$ 30.00 ✓
3)	2	Rear bumper side holders	Necessary	\$ 49.00	\$ 49.00 ✓
4)	2	Rear bumper dampers	Dented	\$ 86.40	\$ 86.40 X JVC
5)	1	Rear end panel	Dented	\$ 700.80	\$ 700.80 X S80
6)	1	Rear end panel top garnish	Cracked	\$ 68.90	\$ 68.90 ✓
7)	1	Rear tail lamp RH	Cracked	\$ 233.80	\$ 233.80 X JVC
8)	1	Rear tail lamp LH	Cracked	\$ 233.80	\$ 233.80 ✓
9)	1	Rear tail lamp panel LH	Dented	\$ 381.20	\$ 381.20 ✓
10)	1	Rear tail lamp lower aprons (3007 part)	Dented	\$ 161.40	\$ 161.40 X 125
11)	1	Rear boot lid	Dented/Bent	\$ 845.30	\$ 845.30 X 640
12)	1	Rear boot lid lock	Bent	\$ 63.20	\$ 63.20 ✓
13)	1	Rear boot lid weatherstripe	Cut	\$ 63.10	\$ 63.10 ✓
14)	1	Rear boot lid outer moulding	Cracked	\$ 155.10	\$ 155.10 X JVC
15)	2	Rear boot lid hinges	Bent	\$ 263.60	\$ 263.60 X JVC
16)	2	Rear boot lid reflectors	Cracked	\$ 161.40	\$ 161.40 X JVC
17)	1	Rear 'Toyota' logo	Necessary	\$ 35.20	\$ 35.20 ✓
18)	1	Rear '1.8' emblem	Necessary	\$ 26.10	\$ 26.10 ✓
19)	1	Rear 'E' emblem	Necessary	\$ 27.80	\$ 27.80 ✓
20)	1	Rear 'VVTi' emblem	Necessary	\$ 28.80	\$ 28.80 ✓
21)	1	Rear 'Corolla' emblem	Necessary	\$ 27.20	\$ 27.20 ✓
22)	1	Rear 'Altis' emblem	Necessary	\$ 29.80	\$ 29.80 ✓
23)	1	Rear fender LH	Dented	\$ 757.70	\$ 757.70 ✓
24)	1	Rear fender inner trim LH	Distorted	\$ 157.00	\$ 157.00 X JVC
25)	1set	Rear fender inner trim clips LH	Necessary	\$ 30.00	\$ 30.00 X JVC
26)	1	Rear fender inner shield LH	Distorted	\$ 76.20	\$ 76.20 X JVC
27)	1set	Rear fender inner shield clips LH	Necessary	\$ 25.00	\$ 25.00 X JVC
28)	1	Rear fender air vent LH	Distorted	\$ 76.70	\$ 76.70 X JVC
29)	1	Rear spare tyre panel	Dented	\$ 850.40	\$ 850.40 X JVC
30)	1	Rear spare tyre panel top cover	Cracked	\$ 163.20	\$ 163.20 X JVC
31)	1	Rear spare tyre panel side cover LH	Distorted	\$ 40.50	\$ 40.50 X JVC
32)	1	Rear windscreen moulding	Necessary	\$ 75.20	\$ 75.20 ✓
33)	1	Rear chassis member LH	Repairable	\$ 478.30	\$ -
Less 25%				\$ 8,820.40	\$ 6,342.10
				\$ 1,705.10	\$ 1,585.53
				\$ 5,115.30	\$ 4,756.58
34)	1	Rear number plate X	Cracked	\$ 30.00	\$ 30.00 SN
35)	1	Rear number plate holder X	Cracked	\$ 30.00	\$ 30.00 SN
				\$ 5,175.30	\$ 4,816.58

3660.70
- 25%

745.22

**RW AUTOMOTIVE APPRAISERS SERVICES**

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Reg. No. S28212708

Page : 2

Vehicle No: SGQ 1351 H

Report No.: RW/0049/19TP

		Balance brought forward		\$ 5,175.30	\$ 4,816.58
36)	1set	Rear reverse sensor	Failed	\$ 350.00 SN	\$ 350.00 200/
37)	1	Rear end panel sealant	Necessary	\$ 60.00 SN	\$ 60.00 30/
38)	1set	Rear tail lamp lower apron rivets	Necessary	\$ 60.00 SN	\$ 60.00 10/
39)	1	Rear spare tyre panel sealant	Necessary	\$ 120.00 SN	\$ 120.00 x 5vc
40)	1	Rear spare tyre panel insulation pad	Necessary	\$ 250.00 SN	\$ 250.00 x 5vc
41)	1	Rear windscreen sealant	Necessary	\$ 60.00 SN	\$ 60.00 / 40
Total (Parts):				\$ 6,075.30	\$ 5,716.58 250

LABOUR CHARGES

42)	Cut out, replace and weld rear end panel, rear left fender, rear left tail lamp panel and rear spare tyre panel. Panel beat rear right fender. Straighten rear chassis. Remove and replace all damaged parts.	\$ 3,000.00	\$ 2,700.00	1400 ✓
43)	Check wiring and lightings.	\$ 100.00	\$ 80.00	30 ✓
44)	Remove and reinstall rear windscreen glass.	\$ 150.00	\$ 120.00	✓
45)	Remove and reinstall rear upholstery, cushion seats and roof lining to enable repair.	\$ 320.00	\$ 280.00	50 ✓
46)	Repair rear exhaust silencer.	\$ 120.00	\$ 60.00	X
47)	Remove and replace rear reverse sensors.	\$ 100.00	\$ 80.00	20 ✓
48)	Conduct waterproof test after repair.	\$ 120.00	\$ 80.00	X
49)	Rust proofing treatment on affected area.	\$ 300.00	\$ 250.00	30 ✓
50)	Spray painting on affected area.	\$ 2,400.00	\$ 2,200.00	1000 ✓
Total (Labour):		\$ 6,610.00	\$ 5,810.00	
Total:		\$ 12,685.30	\$ 11,526.58	265

P- 2745.22

M- 280

L- 2650

5675.22

L/S- 4540.17

= 4550

10 days repair



RW AUTOMOTIVE APPRAISERS SERVICES

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Reg. No. 528212708

Page : 3

Vehicle No: SGQ 1351 H

Report No.: RW/0049/19TP

POINT OF IMPACT

At the rear portion of the vehicle.

RECOMMENDATION

The vehicle was inspected thoroughly based on the repairer's estimate against the actual damages found on the vehicle. My findings and recommendation are listed as per attached.

My adjusted amount for the cost of repair is \$11,526.58.

CONCLUSION

The repairer has agreed to undertake repairs at a lump sum of \$9,220.00 corresponding to labour charges, spray painting and replacement of parts.

SURVEYED WITHOUT PREJUDICE



RICHARD WONG
(Licensed Appraiser)

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	24 Jun 2019		24 Jun 2019 16:40 Edit Adj Rpt	S\$4,550.00 Edit Estimates	S\$4,550.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	CAVIN MAK CHEE WAI, ID: S91379743								
Main Claimant:	LEOW HIAN CHYE, ID: S75241952								
Vehicle Reg. No.:	SGQ1351H	Date of Loss:	18/06/2019 18:00 - :59 [149 Months and 13 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 597429	Policy/Cover Note No.:	80463040QMX (Comprehensive) Coverage: 13/10/2018 - 12/10/2019						
Vehicle Reg. No. (Insured):	SG66291G	Policy No. (Claimant):							
		Excess:	S\$500.00						
Repairer:	Legacy Technica Motorsports (woodlands) (HQ) 39 WOODLANDS CLOSE, #01-08 MEGA @ WOODLANDS, 737856 Woodlands - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jowyn Tay Mei Ling - 6643 1307]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by CHEN TSUE YEE] ... [Final Rpt due 26/09/2019]								
Driver/Custodian (Insured):	MAX HOCK LEONG (63 / Male), NRIC: S1166416D Email:								
Adj Asg. Remarks:	on WP. Liab: 100%. TP Lawyer disagree on SJE - assign LKK Auto. Contact: Eric Wong @ 8858 8851/ 62561519								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> MSIG_SG (24/09/2019): Report Send Back Alerts - SGQ1351H (TP) 									
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.									

Claim Documents

*SGQ1351H (597429)

[SJG6291G]












































TP




















































LEOW HIAN CHYE

Jun 18 2019 6:00PM

[CAVIN MAK CHEE WAI]

Legacy Technica Motorsports (woodlands)

Upload Documents			Upload Photos			Compose New Letter			View		View in Browser	
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3	24/06/19 15:15	TP SGQ1351H E-REPORT		Load PDF	
4	24/06/19 15:25	TP disagree on SJE		Load PDF	
5	24/09/19 12:06	TP Survey Report		Load PDF	
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1	01/10/19 09:03	Colour Photo		Load PDF	
2	01/10/19 09:03	PRS Invoice		Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
<div></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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: CS3/MSG19011105/ETF3E2-1

Date: 01/10/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: 80463040QMX

Claimant Vehicle No : SGQ1351H

Insured Vehicle No : SJG6291G

Date of Loss: 18/06/2019

Nature of Claim: TP

Claim No: 597429

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SGQ1351H

Make & Model: TOYOTA COROLLA, 1.6 (A)

Engine No: 3ZZ4622085

Reg. Date: 05/01/2007 (Man. Year: 2006)

Chassis No: MR053ZEC107137859

Colour: Grey

Odometer: 0 km

Engine Capacity: 1598 cc

Market Value/New Car

N/A

Price:

Sum Insured (S\$): 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: 195/60 R15

Rear Tyre Size: 195/60 R15

Front Left Side: Bridgestone 6 mm

Rear Left Side: Bridgestone 6 mm

Front Right Side: Bridgestone 6 mm

Rear Right Side: Bridgestone 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	6,075.30	3,025.22	3,050.08	50.20
Miscellaneous Items	0.00	0.00	0.00	
Labour	6,610.00	2,650.00	3,960.00	59.91
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	12,685.30	5,675.22	7,010.08	55.26
Approved Total (Overridden) (S\$)		4,550.00		
Nett Amount (S\$)	12,685.30	4,550.00	8,135.30	64.13

INSPECTION

Date of Assignment: 24/06/2019

Date Inspected: 25/06/2019 Inspected At:

Legacy Technica Motorsports
(woodlands) (HQ)
39 WOODLANDS CLOSE, #01-08
MEGA @ WOODLANDS
Singapore 737856

Estimated Period of Repair: 10.0 days

Adjuster: CHEN TSUE YEE

Manager: DENISE TAY KWEE CHENG

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: 01 Oct 2019)
Parts: 143	TOYOTA COROLLA 1.6 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SGQ1351H)	
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	*REAR BUMPER	Torn	418.30 FL	*418.30 FL
2	1	*SET REAR BUMPER CLIPS	Necessary	30.00 FL	*30.00 FL
3	2	*REAR BUMPER SIDE HOLDERS	Necessary	49.00 FL	*49.00 FL
4	2	*REAR BUMPER DAMPERS	Serviceable	86.40 FL	*- FL
5	1	*REAR END PANEL	Dented	700.80 FL	*580.00 FL
6	1	*REAR END PANEL TOP GARNISH	Cracked	68.90 FL	*68.90 FL
7	1	*REAR TAIL LAMP RH	Serviceable	233.80 FL	*- FL
8	1	*REAR TAIL LAMP LH	Cracked	233.80 FL	*233.80 FL
9	1	*REAR TAIL LAMP PANEL LH	Dented	381.20 FL	*381.20 FL
10	1	*REAR TAIL LAMP LOWER APRONS	Dented (1Pcs Only)	161.40 FL	*125.00 FL
11	1	*REAR BOOT LID	Dented / Bent	845.30 FL	*640.00 FL
12	1	*REAR BOOT LID LOCK	Bent	63.20 FL	*63.20 FL
13	1	*REAR BOOT LID WEATHERSTRIPE	Cut	63.10 FL	*63.10 FL
14	1	*REAR BOOT LID OUTER MOULDING	Serviceable	155.10 FL	*- FL
15	2	*REAR BOOT LID HINGES	Serviceable	263.60 FL	*- FL
16	2	*REAR BOOT LID REFLECTORS	Serviceable	161.40 FL	*- FL
17	1	*REAR TOYOTA LOGO	Necessary	35.20 FL	*35.20 FL
18	1	*REAR 1.6 EMBLEM	Necessary	26.10 FL	*26.10 FL
19	1	*REAR E EMBLEM	Necessary	27.80 FL	*27.80 FL
20	1	*REAR VVTI EMBLEM	Necessary	28.80 FL	*28.80 FL
21	1	*REAR COROLLA EMBLEM	Necessary	27.20 FL	*27.20 FL
22	1	*REAR ALTIS EMBLEM	Necessary	29.80 FL	*29.80 FL
23	1	*REAR FENDER LH	Dented	757.70 FL	*757.70 FL
24	1	*REAR FENDER INNER TRIM LH	Serviceable	157.00 FL	*- FL
25	1	*SET REAR FENDER INNER TRIM CLIPS LH	Serviceable	30.00 FL	*- FL
26	1	*REAR FENDER INNER SHIELD LH	Serviceable	76.20 FL	*- FL
27	1	*SET REAR FENDER INNER SHIELD CLIPS LH	Serviceable	25.00 FL	*- FL
28	1	*REAR FENDER AIR VENT LH	Serviceable	76.70 FL	*- FL
29	1	*REAR SPARE TYRE PANEL	Repair	850.40 FL	*- FL
30	1	*REAR SPARE TYRE PANEL TOP COVER	Serviceable	163.20 FL	*- FL
31	1	*REAR SPARE TYRE PANEL SIDE COVER LH	Serviceable	40.50 FL	*- FL
32	1	*REAR WINDSCREEN MOULDING	Necessary	75.20 FL	*75.20 FL
33	1	*REAR CHASSIS MEMBER LH	Repair	478.30 FL	*- FL
34	1	*REAR NUMBER PLATE	Serviceable	30.00 FS	*- FS
35	1	*REAR NUMBER PLATE HOLDER	Serviceable	30.00 FS	*- FS
36	1	*SET REAR REVERSE SENSOR	Failed	350.00 FS	*200.00 FS
37	1	*REAR END PANEL SEALANT	Necessary	60.00 FS	*30.00 FS
38	1	*SET REAR TAIL LAMP LOWER APRON RIVETS	Necessary	60.00 FS	*10.00 FS
39	1	*REAR SPARE TYRE PANEL SEALANT	Serviceable	120.00 FS	*- FS
40	1	*REAR SPARE TYRE PANEL INSULATION PAD	Serviceable	250.00 FS	*- FS
41	1	*REAR WINDSCREEN SEALANT	Necessary	60.00 FS	*40.00 FS

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

Sub Total (\$\$) 7,780.40 3,940.30

- List Item Discount on L Items 25.00/25.00% (\$\$) 1,705.10 915.08

Report was unsubmitted during this print-out.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
Total Parts (S\$)					6,075.30	3,025.22

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	CUT OUT, REPLACE AND WELD REAR END PANEL, REAR LEFT FENDER, REAR LEFT TAIL LAMP PANEL AND REAR SPARE TYRE PANEL. PANEL BEAT REAR RIGHT FENDER. STRAIGHTEN REAR CHASSISES. REMOVE AND REPLACE ALL DAMAGED PARTS	New	3,000.00	1,400.00
2	CHECK WIRING AND LIGHTINGS	New	100.00	30.00
3	REMOVE AND REINSTALL REAR WINDSCREEN GLASS	New	150.00	120.00
4	REMOVE AND REINSTALL REAR UPHOLSTERY, CUSHION SEATS AND ROOF LINING TO ENABLE REPAIR	New	320.00	50.00
5	REPAIR REAR EXHAUST SILENCER	New	120.00	0.00
6	REMOVE AND REPLACE REAR REVERSE SENSORS	New	100.00	20.00
7	CONDUCT WATERPROOF TEST AFTER REPAIR	New	120.00	0.00
8	RUST PROOFING TREATMENT ON AFFECTED AREA	New	300.00	30.00
9	SPRAY PAINTING ON AFFECTED AREA	New	2,400.00	1,000.00
Gross Labour Cost (S\$)			6,610.00	2,650.00

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< END OF ESTIMATES >