

Version:

ASS. REC. BY:

Signature: Rasu

REF:

03/CTI/19017059/R19d3

12

Special Instructions:

ASSIGNMENT (Office)

Person (Person): Chong Boon Sen

of CTI

Date/Time: 26/9/19 @ 3.08pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBG 1402G

Insured:

GBJ 5258P

at Workshop n/a

3A Automobile

Tel:

G223 1122

at

120 Tower Delta Road #02-15

Policy No:

PMCVSN 19230619000

Claim No:

SNM19D20448066

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

16/9/19

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

9.57am @ 27/9/19

Person Contacted:

enjo

Vehicle IN

OUT

Date/Time

Action/Instruction

1. should ✓

GBG 1402G - X

GBJ 5258P - X

08/11/19

Panel finalised LS @ 700, 2 days (Red @ 1288.40, 65%)

Rasul

CT1

2760

ASSIGNMENT

3.10.2019

veh No G8G 1402G Page 2017 Jun

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

Truck / Trailer or

Make: TOYOTA HIACE 4DR AUTO cc 2982

Colour: WHITE A/C: Insured / Std / NI / NA

Sp. Reading: 57822 T/Radio: Insured / Std / NI / NA

Eng/No:

C/Nr: JTFH TD 2P6 00216236

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil S/Rim / STD A/Rim or

Tyre Size: F: 195R15C

R: "

BS: SUN / 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: 16/09/19 D.O.I: 03/10/19

Survey held at 3 A AUTOMOBILE

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop of

FRONT N/S

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

Signature

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

To: Insured Vehicle No: G8G 1402G

at Workshop no: 3 A Automobile

at BIK 120 Lower Delta road #02-15

Insured:

Policy No:

Claims No:

Sum Insured: Excess:

Client's Record:

Make of Vch: After 10.00 a.m

Policy Condition:

Remark: The vch had commenced its repair at the time of inspection.

N/S	O/S

Est. of Market Value:

ID/C Accident Report: Consistent? Yes or No

G/A / PR. Seen: Consistent? Yes or No

Est. Repair: 2 days Res: Yes or No

Unit Sum: % S Val: Yes or No

CA / REV / REP / 24 HRS

"ap"

Vehicle IN / OUT

Date: Person Contacted:

Date / Time: Action / Instruction

RECEIVED 10 NOV 2019.

On Site Report: ☐ Prelim. Report

8/11/19 ☐ Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ Site Insp. 15

☐ Integrity 15

☐ Tech. Insp. 15

☐ Material

Survey Fee:

Insurance Fee:

3 x 10 = 30

10000

10000

10000

10000

110

MER TP
700

Nivitha (LKK Auto)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Thursday, 26 September 2019 3:08 PM
To: enjo.ho@bkw.sg
Cc: assignments
Subject: RE: OUR REF: SNM19D204480-GBJ5258P-CBS - Appointment For Survey Of GBG1402G (Your vehicle no. GBJ5258P)

WITHOUT PREJUDICE

Dear Sir

We will be assigning M/s LKK AUTO CONSULTANTS to survey your client's vehicle.

Aside to LKK AUTO CONSULTANTS,

Please proceed to survey the third party vehicle on WP basis. Please merimen.

Thank you.

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG 3 Anson
Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Chong Boon Sen
Sent: Tuesday, September 24, 2019 11:21 AM
To: enjo.ho@bkw.sg
Subject: RE: OUR REF: SNM19D204480-GBJ5258P-CBS - Appointment For Survey Of GBG1402G (Your vehicle no. GBJ5258P)

Without prejudice

Dear Sir,
LKK
STA
LBS

Chong Boon Sen

Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平獅城 Taiping SG 3 Anson
Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

From: Claims Dept of CTI

Sent: Tuesday, September 24, 2019 11:18 AM

To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>;
Chee So Chow <sochow.chee@sg.cntaiping.com>; enjo.ho@bkw.sg

Subject: OUR REF: SNM19D204480-GBJ5258P-CBS - Appointment For Survey Of GBG1402G (Your vehicle no. GBJ5258P)

Dear Boon Sen,

Please conduct PRS for GBG1402G.

Note : officer in charge – Boon Sen 63896171.

Regards,

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

T: (65) 63896116 | F: (65) 62247175

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平獅城 Taiping SG

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From: Enjo Ho [<mailto:enjo.ho@bkw.sg>]

Sent: Monday, 23 September, 2019 5:56 PM

To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Cc: Kenneth Tan <kenneth.tan@bkw.sg>; Winnie Fan <winnie.fan@bkw.sg>; Bowie Teng <bowie.teng@bkw.sg>

Subject: Appointment For Survey Of GBG1402G (Your vehicle no. GBJ5258P)

Dear Motor Survey Team,

Please find attached and arrange survey ASAP.

Warmest regards,

ENJO HO

TA Automobile Pte Ltd

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.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	23/09/2019 15:36
Date Of Accident	16/09/2019 19:40
Exact Location Of Accident	323B SENGKANG EAST WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG1402G
Insured/Policyholder	
Name Of Registered Owner	BKW RENT A CAR PTE LTD
Co Reg No	200106276D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97868677
Alternative Phone No	OFFICE-67387777

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-2.5 (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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994367/100829844
Cover Note Number	

Driver

Name of Driver	SAMBASIVAM SARAVANAN
NRIC No	G7610987M
Date Of Birth	07/06/1984
Occupation	INDOOR
Date Of Driving Pass	25/09/2009
Driving Experience	9 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97868677
Fax Number	
Contact Number	OFFICE-67387777
Email Address	NOEMAIL

Address	120 LOWER DELTA ROAD #02-15 CENDEX CENTRE
Postcode	169208
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE ATTACHED

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	GBJ5258P
Vehicle Make/Model/Colour	DYNA 3.0 AUTO
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
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.

Policyholder's Signature
Date & Time:

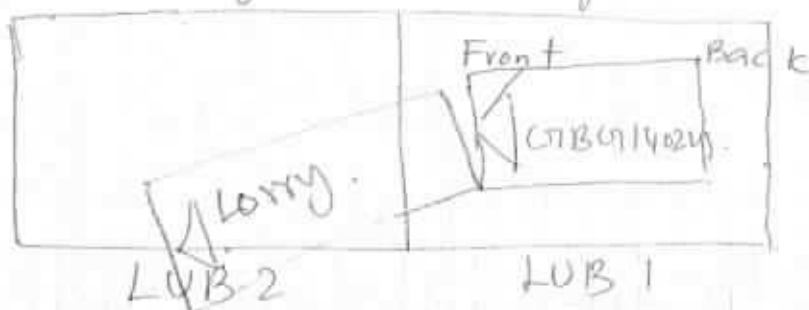


Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

loading unloading Bay.



Location: 323B Sengkang East Way.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report No. T/20190917/2055

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:



**SINGAPORE
POLICE FORCE**



T/20190917/2055

1 of 3

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

Report No. T/20190917/2055

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/09/2019 11:57		Vide Report No.: F/20190916/0157		Station Diary No.: 20	
Informant's Particulars					
Name of Informant: SAMBASIVAM SARAVANAN			Address: 20 JALAN AFIFI #06-4514 CERTIS CISCO CENTRE SINGAPORE 409179		
ID Type / ID No.: FIN NO / G7610987M			Contact No.: Home/Office: Mobile: 98284730		
Nationality: INDIAN			Email:		
Sex: Male	Age: 35	Date of Birth: 07/06/1984	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: CISCO OFFICER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/09/2019 19:40	Type of Location: Loading Bay
Location: Along Road 1 SENGKANG EAST WAY				
Loading bay at 323B Sengkang East Way				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
GBG1402G	Van	TOYOTA	HIACE VAN TURBO 4 DR AUTO	Silver	Slightly Damaged	0
GBJ5258P	Lorry	TOYOTA	DYNA 3.0 AUTO	Silver	No Damage	0

**SINGAPORE
POLICE FORCE**

T/20190917/2055

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

2 of 3

Report No. T/20190917/2055

CONTINUATION OF REPORT

Brief Details.

On the 16/09/2019 at about 1940hrs, I parked my van at the loading and unloading bay of Blk 323B Sengkang East Way as I wanted to go to the wash room at the community center nearby. When I reached the community center, I heard there was a reversing sound and observed that there was a uncle who was driving a 10 feet lorry trying to park at the lot in front of my van. As the uncle seemed to have some difficulty parking into the lot, I observed him from a distance. I then saw him reversing and hit onto the front of my van. There is a slight crack at the front left headlight. I then approached him regarding this but he denied hitting onto my van. He then called for police as he claimed that I wasn't letting him leave. I was then advised by the officers to lodge a traffic report. The uncle did not want to exchange his particulars with me and I only managed to take down his plate number.



**SINGAPORE
POLICE FORCE**



T/20190917/2055

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

3 of 3

Report No. T/20190917/2055

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
D /
Sgt 2 SIM WENG HONG

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/09/2019 11:57

Officer In Charge Of Case:
TP / GIT /
SI THABAGESH JEYATHESH
Contact No: 65476232

Classification Of Case:

Authentication Stamp
NP168

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport /Company Cert No.:	200106276D
Owner ID Type:	Company
Owner Name:	B K W RENT A CAR PTE LTD
Registered Address:	120 LOWER DELTA ROAD #02-15 CENDEX CENTRE SINGAPORE 169208
Mailing Address:	-
Birth Date:	-

Vehicle Particulars

Vehicle No.:	GBG1402G
Previous Vehicle No.:	-
Effective Date of Ownership:	13 Jun 2017
Original Regn Date:	13 Jun 2017
Registration Date:	13 Jun 2017
Year of Manufacture:	2016
Vehicle Type:	Goods (Closed) Van/Van Panel (Delivery)
Vehicle Scheme:	-
Vehicle Attachment 1:	No Attachment
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE VAN TURBO 4 DR AUTO
Primary Colour:	Silver
Secondary Colour:	-
Passenger Capacity:	2
Chassis No.:	JTFHT02P600216236
Engine No.:	1KD2685399
Engine Capacity /Power Rating:	2982 cc / -
Maximum Power Output:	-
Propellant:	Diesel



3A Automobile Pte Ltd

Office Address : No 120 Lower Delta Road #02-15 Singapore 169208 Tel: 6223 1122 Fax: 6738 6666

Estimate Report

To : CHINA TAIPING INSURANCE (S) PTE LTD
Attn : Motor Claim Department

Tel : 6389 6530
Fax : 6224 7175

Policy Number : 999994367/100829844
Vehicles Number : GBG 1402 G
Make and Model : TOYOTA HIACE
Date Of Accident : 16/9/2019
Time Accident : 07:40PM

Estimated Repairs Costs

Unit	List Items	Unit Price	Prices
1 pc	Front Bumper <i>cm /</i>	\$ 495.00	\$ 495.00
1 pc	Front Headlamp (LH) <i>? x 500</i>	\$ 898.00	\$ 898.00
10 pc	Front Bumper Clips <i>new /</i>	\$ 3.00	\$ 30.00

S/Total

Less

<i>525</i>	\$ 1,423.00
<i>20% 252</i>	\$ (284.60)
<i>25% 393.75</i>	\$ 1,138.40

Labour Charges To Remove And Renewing Of The Above Parts, Bumpers etc. Dismantling, Fixing, Cutting Out of Necessary Joints.		\$ <i>250</i> 450.00
To Provide Skill Labour & Material to do Surface Treatment / Epoxy Treatment and to Respray with 2K Paint on the Affected Areas & Components with Oven Spray Booth Facilities		\$ <i>250</i> 400.00

Total

\$ 1,988.40

Regards,

Yours faithfully,

3A Automobile Pte Ltd

Person to contact : Alwin / Enjo

Mobilephone : 9786 8677 / 6738 7777

Rasul
2/10/19
HP 90010068
2 days

4/5

03/10/19 @ 1220

Repair after repair

email: rasul@1kkauto.com

393.75

500.00

893.75

20%

715

43-700

2 days

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/CT119017059/R1QD3N2

Date: 20/11/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN19230619000		
Claimant Vehicle No :	GBG1402G	Insured Vehicle No :	GBJ5258P		
Date of Loss:	16/09/2019	Nature of Claim:	TP	Claim No:	SNM19D204480C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	GBG1402G		
Make & Model:	TOYOTA HIACE, 3.0 D TURBO 4DR (A)	Engine No:	1KD2685399
Reg. Date:	13/06/2017 (Man. Year: 2016)	Chassis No:	JTFHT02P600216236
Colour:	White	Odometer:	57822 km
Engine Capacity:	2982 cc		
Market Value/New Car Price:	N/A		
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:	195R15C	Rear Tyre Size:	195R15C
Front Left Side:	Dunlop 6 mm	Rear Left Side:	Dunlop 6 mm
Front Right Side:	Dunlop 6 mm	Rear Right Side:	Dunlop 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	1,138.40	393.75	744.65	65.41
Miscellaneous Items	0.00	0.00	0.00	
Labour	850.00	500.00	350.00	41.18
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	1,988.40	893.75	1,094.65	55.05
Approved Total (Overridden) (S\$)		700.00		
Nett Amount (S\$)	1,988.40	700.00	1,288.40	64.80

INSPECTION

Date of Assignment:	18/11/2019		
Date Inspected:	03/10/2019	Inspected At:	3A Automobile Pte Ltd (HQ) 120 Lower Delta Road, #02-15, Cendex Centre Singapore 169208
Estimated Period of Repair:	2.0 days		

Adjuster: MOHD RASUL

Manager: SHIAU CHAN

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:	(Last Synchronised: 20 Nov 2019)	
Parts:	N/A	TOYOTA HIACE 3.0 D TURBO 4DR (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GBG1402G)	
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	Cracked	495.00 FL	*495.00 FL
2	1		*FRONT HEADLAMP (LH)	Serviceable	898.00 FL	*- FL
3	10		*FRONT BUMPER CLIPS	Necessary	30.00 FL	*30.00 FL
					Sub Total (S\$)	1,423.00
					- List Item Discount on L Items 20.00/25.00% (S\$)	284.60
					Total Parts (S\$)	1,138.40

F=Franchise part. L=ListItemDisc.

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
<u>Labour Items</u>				
1	LABOUR CHARGES TO REMOVE AND RENEWING OF THE ABOVE PARTS,BUMPER ETC.DISMANTLING,FIXING,CUTTING OUT OF NECESSARY JOINTS	New	450.00	250.00
2	TO PROVIDE SKILL LABOUR & MATERIAL TO DO SURFACE TREATMENT/EPOXY TREATMENT AND TO RESPRAY WITH 2K PAINT ON THE AFFECTED AREAS & COMPONENTS WITH OVEN SPRAY BOOTH FACILITIES	New	400.00	250.00
Gross Labour Cost (S\$)			850.00	500.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >