ASS. REC. BY:	(3) TMI 19017 3/5/ksf3N2
Kenneth	SSIGNMENT
From: Date:	the control of the co
Estimated Cost:	Veh No: 5/40 54838 Yr Regn: 01, 19
OD FTP WS I TP RES I OD RES I EVA I INV I MV	-   Jaxi Prime Mover /
To inspect Vehicle No:	Truck / Trailer or
	Make: Toy Privs c.c 1798
of Trans Cab	Colour B. + White I Par AVC: Insured / Std / NI / NA
Insured:	Sp.Reading 101397 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	CNO: JTDKB31-U68 3079185
Sum la	- Gen. Cond. Good / Fair / Poor / Burnt
(Client's Record)	Steering: Inorder Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inorder/ Jammed / Leaked / Burnt or
mone of year.	Modi: NII I S/RIm I STD ARIM or
	Tyre Size: F: 185/65R15
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM! /
repair at the time of inspection.	TOYOTYOKO or
Bal. or Market Value: 870, 360/	Front
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 9 mm R/Bal. 9
GIA / PR Seen: Consistent?: Yes or No	L/Bai. 57 mm L/Bai. 52
Est. Repairs: //2 days Res.: Yes or No	D.O.A. 29/9/19 D.O.I. 1/10/19
Lum Sum: 1-3/ % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	
Vehicle: IN COUR	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
113000001	1 500y Structure affected due to collision.
- The pass To	
9/10 & 813.78 To Small (	
SHD 5483P - (C3 (T1 19008123) KON	\$ 24,720.85 Red - 97%)
SLE 6614 x -	392 heA-cc/05/2019
DECE	NAME OF THE OWNER OWNER OF THE OWNER OW
KE SE	VED 1-0-001 2019
	the second secon
Date/Time, File Pass to? Prell. Report Da	
" - "	ays Of Repair: 1.5
Outo/Time, File Return to?	survey No. of Trip: Survey Fee:
7)	Transportation 250
Add Fee:	Site Insp (\$ )_s - Rs_s   11
Report Format :	: Interview (\$ ) Factors
Lump Cu (US)	Tech Invs (\$ ). Others
Lump Suph / I.B.M: (5 8/3.78 P/P)	Weekend (\$
	10144 261

# DIRECT SURVEY INSPECTION ON WORKSHOP -TRANS-CAB AUTO SERVICES PTE LTD, DOA:29/9/2019, SHD 5483R (TP VEHICLE), SLE 6614X (OI VEHICLE)

# Shirley Hiew (LKK Auto)

Wed 2/10/2019 3:18 PM

To: motorclaims@tokiomarine.com.sg <motorclaims@tokiomarine.com.sg>

Cc: SUR <sur@lkkauto.com>

3 attachments (1 MB)

TP GIA REPORT.pdf; ESTIMATE.pdf; PRELI ADVISE - SHD 5483R.pdf;

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SHD 5483R at M/s: TRANS-CAB AUTO SERVICES PTE LTD, NO.2 ANG MO KIO ST 63 SINGAPORE 569111 on 01/10/2019

Enclosed herewith a copy of TP's GIA report, estimated cost of repair and preliminary revised.

Kindly create claim in merimen for our necessary action.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>Sur@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | 5(408933)

# FW: TCS REF: AAD1909-243--Accident involving SHD 5483R & SLE 6614X on 29/09/2019

Ng Wai Yin <waiyin.ng@transcab.com.sg>

Thu 10/10/2019 11:09 AM

To: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Cc: SUR <sur@lkkauto.com>

2 attachments (486 KB) image001.wmz; ESTIMATE MARKED.pdf;

Hi Shirley

Amount confirmed \$813.78 (before GST).

Will send you before paint photo when I get It from our workshop.

Thank You Best Regards, Ng Wai Yin Finance Department TEL: 6603 1265 Ext.308

\*\*\* Please be reminded that all claims correspondence to be send to claims@transcab.com.sg

### TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63, Singapore 569111 Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764

Website: www.transcab.com.sg



This message is confidential. It may also be privileged or otherwise protected by work product immunity or other legal rules. If you have received it by mistake, please let us know by e-mail reply and delete it from your system; you may not copy this message or disclose its contents to anyone. Please send us by fax any message containing deadlines as incoming e-mails are not screened for response deadlines. The integrity and security of this message cannot be quaranteed on the Internet.

From: Shirley Hiew (LKK Auto) [mailto:ShirleyHiew@lkkauto.com]

Sent: Wednesday, 9 October, 2019 11:53 AM To: Ng Wai Yin <waiyin.ng@transcab.com.sg>

Cc: SUR <sur@lkkauto.com>

Subject: TCS REF: AAD1909-243--Accident involving SHD 5483R & SLE 6614X on 29/09/2019

Dear Wai Yin,

Please confirm final fig \$ 813.78 @ 1.5 days of repairs before GST.

Kindly provide us before paint photo.

### > Back to OneMotoring

Enquire	PARF/COE	Rebate fo	r Registered	Vehicle
---------	----------	-----------	--------------	---------

/ehicle Owner Particulars	** ** ** ** ** ** ** ** ** ** ** ** **
Owner ID Type:	Company
Owner ID:	878K
Vehicle Details	CURE ANDR
Vehicle No.:	SHD5483R
Vehicle to be Exported:	Yes
Intended Deregistration Date:	30 Sep 2019
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	2ZR2B99305
Chassis No.:	JTDKB3FU603079185
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,605.00
Original Registration Date:	25 Jan 2019
First Registration Date:	25 Jan 2019
Transfer Count:	0
Actual ARF Paid:	\$14,247.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Jan 2027
PARF Rebate Amount:	\$10,685.00
Intended COE Rebate Details	WEST-144440
COE Expiry Date:	24 Jan 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$20,838.00
COE Rebate Amount:	\$16,670.00
Total Rebate Amount:	\$27,355.00
Message	e further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle

The information contained herein is correct as at 30 Sep 2019

reaches its statutory lifespan (if applicable), whichever is earlier.

ОК

MTCS19128709 / Trans-Cab Services Pte Ltd - HQ ENTRY DATE & TIME: 30/09/2019 08:46 SUBMITTED BY: Amanda Tay Xin Er

#### SINGAPORE ACCIDENT STATEMENT

Contact Number

EMail Address

- IMPORTANT NOTICE

  1. Please report correctly the details of the accident to speed up the claims process.
- 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.

- Any false reporting may be referred to the Police for investigation.
   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.
   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.

	ACCIDENT STATEMENT
Date Of Report	30/09/2019 08:46
Date Of Accident	29/09/2019 21:00
Exact Location Of Accident	HOLLAND AVENUE SLIP ROAD TOWARDS HOLLAND ROAD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD5483R
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS-1.8 HYBRID CVT (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VFX/P1680520
Cover Note Number	
Driver	
Name of Driver	LEE CHOW WOON
NRIC No	S0164517Z
Date Of Birth	16/03/1948
Occupation	OUTDOOR
Date Of Driving Pass	19/03/1973
Driving Experience	46 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88202363
Fax Number	

NOEMAIL

BLK 778 YISHUN AVE 2 Address #12-1549

760778 Postcode

Was driver an employee of the Insured's Company NO

OTHER - RELIEF If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: ADRIAN SHOW - 98206002

: MALE GENDER:

**Details of Police Action** 

Was the accident reported to the police?

NO

2

NO

YES

NO

2

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

#### Circumstances of Accident

On 29.09.2019 at about 2100 hours, I was travelling straight along Holland Avenue slip road towards Holland Road when I slowed down and made a stop to check for the road clearance. While stationary, suddenly I felt an impact. Vehicle B (SLE6614X) hit onto my taxi rear portion.

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SLE6614X Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category Name of Driver

LIAN JUN WEI S8633236A NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage No. Of Passenger (Including Driver)

### Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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.
- 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:
  - 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:

Amonda

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

GIARMC SketchPlanForm\_V3

### Sketch Plan #2 Pg. 1

CH PLAN		
Hound		
Roud		<del></del>
Roua		
		A: SHD 5438 P
		81 51 E 66 14×
		81 SLE 6614X
		++++++++++++++
	10	
<del>1                                     </del>	-N+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1	Hulland Avenue
		Stip road toward
+++++++		
		Hollord Road
CRIBE CIRCUMSTANCES	OF THE ACCIDENT	
	24 20 20 20 20 20 20	*
	Please see the attach G1	A tepoth
1.0447		
		- Service Management
		The state of the s
	- Was	
ECLARATION		
	ticulars are true in every respect.	
see mediate and totallouily has		
	0	
	0.11.	
	later	h- c-da
		America Service Service
olicyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
olicyholder's Signature sate & Time:		

GLARIMC Sketch Plan Form\_V3

### Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No.: 6287 6666 Fax No.: 6257 1330

CO./GST Reg. No. 201019626G

SHD 5483R

Vehicle No.: SHD 5483R

Chassis No.: JTDKB3FU603079185

AAD1909-243

8813.78

مر 355.90

Not Nothaile Renny B4 paint

Vehicle Make: TOYOTA
Vehicle Model: PRIUS

Date of Accident : 29.9.19
Third Party Insurer : TOKIO MARINE

Date of Registration: 25/1/2019

LIST PART 1 442.60 X \$ REAR BUMPER 1 1 M 332.70 1 \$ REAR BUMPER RE-INFORCEMENT 2 mi 15.40 -\$ REAR BUMPER TOWING COVER 3 1 ndla 576.30 -\$ REAR BUMPER UNDER COVER (BLACK) 4 1 In 116.50 \$ REAR BUMPER SIDE RETAINER LH 5 1 ر المرابع REAR BUMPER SIDE RETAINER RH 6 1 N 1,147.80 \$ REAR TAILGATE 7 1 رم 925.60 \$ REAR TAILGATE OUTER GARNISH 8 1 SL 64.50 \$ COVER, REAR COMBINATION LAMP, RH 9 √~ 64.50 \$ COVER, REAR COMBINATION LAMP, LH 10 5L 95.60 \$ GARNISH, BACK DOOR SIDE, LH 11 1 St 95.60 GARNISH, BACK DOOR SIDE, RH 12 1 √s 56.50 \$ MOULDING, BACK DOOR OUTSIDE GARNISH, LOWER RH 13 56.50 \$ MOULDING, BACK DOOR OUTSIDE GARNISH, LOWER LH 14 1 ∫∠ <sub>259.20</sub> \$ BOARD ASSY, BACK DOOR TRIM 15 √<sub>52.10</sub> \$ PANEL ASSY, BACK DOOR TRIM, UPPER 16 √ <sub>372.30</sub> \$ REAR TAILGATE WEATHERSTRIP 17 √ر 650.30 \$ PANEL SUB-ASSY, BODY LOWER BACK 18 Sn 502.00 \$ TAILLAMP LOWER RH 19 \$ Sy 451.80 TAILLAMP UPPER RH 20 √<sub>→</sub> 123.70 \$ REAR BUMPER SIDE RH 21 1 \$ S 123.70 REAR BUMPER SIDE LH 22 1 √<sub>4</sub> 502.00 \$ TAILLAMP LOWER LH 23 1 JL 443.30 \$ TAILLAMP UPPER LH 24 1 √L 225.20 \$ BOARD, BACK DOOR TRIM 25 1 \$ 355.90 PANEL ASSY, DECK TRIM SIDE, RH 26

PANEL ASSY, DECK TRIM SIDE, LH

27

1

AAD1909-243

# Trans-cab Auto Services Pte Ltd

AAD1909-243

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No.: 6287 6666

Fax No.: 6257 1330

CO./GST Reg. No. 201019626G

SHD 5483R

To transfer of Rear Bumper fittings, attachments and perform water seepage test.	\$	~~ 170.00 X
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	6,000.00 150
To transfer of rear windscreen glass to facilitate bodywork repair.	\$	NN 170.00 X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	5 170.00 X
To check steering geometry and computer wheel alignment	\$	5 220.00 X
To transfer of tire, rim and on wheel balancing.	\$	170.00 🔏
To transfer of rear fender fittings, attachment and perform water seepage test.	\$	L 380.00 X
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	4 380.00 <b>/</b>
Labour charge to mount and dismount vehicle on jig		
bench, to facilitate repair.	\$	∠ 380.00 X
To Check Electrical Lighting Concerned.	\$	4 170.00 X
TOTAL	\$	14,720.00
Over All Total	\$	25,534.63
LKK Auto Consultrints hence notify (PART-BY-PART) Repair Days the Repairer of the following: To resurvey before/after spray painting To display damaged part(s) during resurvey	3	20 Days 1/20/91

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 inforced.

Supplementary items ( ) and community and and its subject to final approval from Insurance Company.

Admostedged by Regalter

## 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: CC3/TMI19017315/KSF3N2

Date:

11/10/2019

REFERENCE

Handling Insurer:

Tokio Marine Insurance Singapore Ltd

Policy No:

MK000582

Claimant

SHD5483R

Insured Vehicle No:

SLE6614X

Vehicle No: Date of Loss:

29/09/2019

Nature of Claim:

TP

Claim No: M1907738

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

SHD5483R

Make & Model:

TOYOTA PRIUS, 1.8 5DR HATCHBACK (A)

Engine No: Chassis No: 2ZR2B99305

Reg. Date:

25/01/2019 (Man. Year: 2018) Metallic White/Red

Odometer:

JTDKB3FU603079185 101397 km

Colour:

**Engine Capacity:** Market Value/New Car 1798 cc

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:

Pre-accident Condition: No

CONDITION OF TYRES

Front Tyre Size:

195/65R15

Rear Tyre Size:

195/65R15

Front Left Side:

Giti 9 mm

Rear Left Side:

Giti 9 mm

Front Right Side:

Giti 9 mm

Rear Right Side:

Giti 9 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts Miscellaneous Items	Repairer's 10,814.62 0.00	Adjuster's 443.77 0.00	Difference 10,370.85 0.00	<b>Diff %</b> 95.90
Labour Paintwork Labour	14,720.00 0.00	370.00 0.00	14,350.00 0.00 0.00	97.49
Towing  Gross Total (S\$)	0.00 <b>25.534.62</b>	0.00 <b>813.77</b>	24,720.85	96.81
+ GST 7.00/7.00% (S\$)	1,787.42	56.96	1,730.46	96.81
Nett Amount (S\$)	27,322.04	870.73	26,451.31	96.81

INSPECTION

Date of Assignment:

Date Inspected:

03/10/2019

01/10/2019 Inspected At:

Trans-Cab Services Pte Ltd (HQ)

2 Ang Mo Kio Street 63

Singapore 569111

**Estimated Period of Repair:** 

1.5 days

Adjuster: KENNETH KONG

Manager: Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

Different 1 cents -Finalise confirm amount: \$813.78

# REPAIR DETAILS

Referen	ce	
Part Source:	: MRM-SG	Version: 1.0 (Last Synchronised: 11 Oct 2019)
Parts:	144	TOYOTA PRIUS 1.8 5DR HATCHBACK (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted	i, no print-code for SHD5483R)
Validity:	These estimated numbers with	ates are valid only if they contain the print code (above) on all estimate pages, running page in the END OF ESTIMATES marker on the last estimate page
Eurther Info		not in reference catalogue are prefixed with an asterisk *.

# Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Repair	442.60 FL	*-FL
2	1		*REAR BUMPER RE-INFORCEMENT	Repair	332.70 FL	*-FL
3	1		*REAR BUMPER TOWING COVER	Missing	15.40 FL	*15.40 FL
4	1		*REAR BUMPER UNDER COVER (BLACK)	Dented/Cut		*576.30 FL
5	1		*REAR BUMPER SIDE RETAINER LH	Serviceable	116.50 FL	•-FL
6	1		*REAR BUMPER SIDE RETAINER RH	Serviceable	117.70 FL	*-FL
7	1		*REAR TAILGATE	Repair	1,147.80 FL	*-FL
8	1		*REAR TAILGATE OUTER GARNISH	Serviceable	925.60 FL	*-FL
9	1		*COVER,REAR COMBINATION LAMP,RH	Serviceable	64.50 FL	
10	1		*COVER,REAR COMBINATION LAMP,LH	Serviceable	64.50 FL	
11	1		*GARNISH,BACK DOOR SIDE,LH	Serviceable	95.60 FL	
12	1		*GARNISH,BACK DOOR SIDE,RH	Serviceable	95.60 FL	1 700
13	1		*MOULDING,BACK DOOR OUTSIDE GARNISH,LOWER RH		56.50 FL	
14	1		*MOULDING,BACK DOOR OUTSIDE GARNISH,LOWER LH	Serviceable	56.50 FL	
15	1		*BOARD ASSY, BACK DOOR TRIM	Serviceable	259.20 FL	
16	1		*PANEL ASSY, BACK DOOR TRIM, UPPER	Serviceable	52.10 FL	
17	1		*REAR TAILGATE WEATHERSTRIP	Serviceable	372.30 FL	
18	1		*PANEL SUB-ASSY, BODY LOWER BACK	Serviceable	650.30 FL	
19	1		*TAILLAMP LOWER RH	Serviceable	502.00 FL	
20	1		*TAILLAMP UPPER RH	Serviceable	451.80 FL	
21	1		*REAR BUMPER SIDE RH	Serviceable	123.70 FL	
22	1		*REAR BUMPER SIDE LH	Serviceable	123.70 FL	
23	1		*TAILLAMP LOWER LH	Serviceable	502.00 FL	
24	1		*TAILLAMP UPPER LH	Serviceable	443.30 FL	
25	1		*BOARD,BACK DOOR TRIM	Serviceable	225.20 FL	
26	1		*PANEL ASSY, DECK TRIM SIDE, RH	Serviceable	355.90 FL	
27	1		*PANEL ASSY, DECK TRIM SIDE, LH	Serviceable	355.90 FL	
28	1		*REAR RH FENDER PANEL	Repair	854.80 FL	
29	1		*LINER,REAR WHEEL HOUSE,RH	Repair	139.80 FL	
30	1		*COVER,DECK TRIM,REAR	Serviceable	126.70 FL	
31	1		*SET PARKING AID	Serviceable	700.00 FS	
32	1		*SET REAR BUMPER CLIP	Not Necessary	55.00 FS	s *-FS
33	1		*REAR WINDSCREEN SEALANT	Not Necessary	80.00 FS	s *-FS
34	1		*WINDSCREEN MOULDING	Not Necessary	100.00 FS	s *-FS
35	1		*REAR WINDSCREEN INNER SPONGE SEAL	Not Necessary	100.00 FS	S *-FS
36	1		*REAR TAILGATE TOYOTA LOGO	Not Necessary	47.00 FS	s *-FS
37	1		*REAR TAILGATE WORDING PRIUS	Not	52.90 F	s *-F5

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
				Necessary		
38	1		*REAR TAILGATE WORDING HYBRID	Not Necessary	53.50 FS	*-FS
39	1		*REAR TAILGATE STICKER TRANS-CAB	Not Necessary	80.00 FS	*-FS
40	1		*REAR TAILGATE STICKER 6555-3333	Not Necessary	80.00 FS	*-FS
41	1		*REAR BUMPER PROTECTOR	No such part	100.00 FS	*-FS
42	1		*REAR WHEEL RIM	Serviceable	1,570.55 FS	*-FS
43	1		*REAR TYRE 195/65/15	Serviceable	350.00 FS	*-FS
44	1		*REAR WHEEL RIM COVER	Serviceable	175.80 FS	*-FS
45	1		*SET FENDER WHEELARCH REAR RH CLIP	Not Necessary	35.00 FS	*-FS
F=Fra	anchise	part. S=S	pcNett. L=ListItemDisc.			100000
				Sub Total (S\$)	13,226.25	591.70
			- List Item Discount on L Item	s 25.00/25.00% (S\$)	2,411.63	147.93
				Total Parts (S\$)	10,814.62	443.77
			Report was unsubmitted during this	print-out.		

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

	ommended Labour	Lab.Type	Repairer's	Amount	
10	Particulars				
abo	ur Items	100000	170.00	0.00	
1	TO TRANSFER OF TAILGATE FITTINGS, ATTACHMENTS AND PERFORM WATER SEEPAGE TEST	New	100000000	220.00	
2	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	6,000.00	0.00	
3	TO RUST-PROOFING OF THE AFFECTED AREAS	New	170.00	0.00	
4	TO REINSTALL REAR BUMPER PARKING SENSOR	New	170.00	0.00	
5	TO TRANSFER OF REAR BUMPER FITTINGS,ATTACHMENTS AND PERFORM WATER SEFPAGE TEST	New	170.00	150.00	
6	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME	New	6,000.00	0.00	
7	TO TRANSFER OF REAR WINDSCREEN GLASS TO FACILITATE BODYWORK REPAIR	New	170.00	0.00	
8	TO TRANSFER OF REAR END PANEL FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST	New	170.00	0.00	
9	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	0.00	
10	TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING	New	170.00	0.00	
11	TO TRANSFER OF REAR FENDER FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST	New	380.00	5000	
12	TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH,FITTINGS AND OTHER,TO ENABLE REPAIR	New )	380.00	0.00	
13	LABOUR CHARGE TO MOUNT AND DISMOUNT VEHICLE ON JIG BENCH, TO FACILITATE REPAIR	New	380.00	0.00	
14	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	0.00	
		ur Cost (S\$)	14,720.00	370.00	

< END OF ESTIMATES >