From (Person): Francis My b		IGNMENT (Offic TM1	Date/Time: 16,10.19 15.63 P.M.
Estimated Cost:		Bill to:	
OD TP WS / TP RES / OF To Inspect Vehicle No:	SHB 2352R	/ MV / CS	Insured: Smm 7354K
at Workshop m/s Comfortd			Tel: 62118300
Policy No: M1 00/160		Claim No	: M1908085
Sum Insured:		Excess	
Make of Veh: (Client's Record) CA / REV / REP. / REV Date/Time: 16.0.19 3.11	24 HRS P.M Person Con		D.O.A. 15.10.2019 H.O.D. Endorsement: Vehicle IN LOUT
SHB 2352 Smm 73	tion (V) E R - CC3/CT1 54k - X	Stinute. 17006636/ KIJ9	13q2 D.OA-11/04/2019
14/10/19 (9 7 330.	revised to	Francis Ng	UTA alcimen.

MVIMN

ASSIGNMENT

	VIII SHB 2352R YI HOU 2016
Estimated Cost	Type: M.Car / M.Cycle / Bus / Van / Lorry / Caxi D'rime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
For Inspect Vehicle No.	Maker Hyundai 140 no 1685
of Workshop mile	Colour Yellow A/C Insured / Std / NI / NA
uf	Sp.Reading 414 963 T/Radio Insured / Std / NI / NA
lingued	Eng/Na: -
Policy No	C/No: KMHLB41UMH097158
ClamicNo	Gen Cond. Good (Fair) Poor / Burnt
Sum Insured * Excess	Steering Inerder Jammed / Leaked / Burnt or
(Client's Record)	Brake Inorder / Jammed / Leaked / Burnt ur
Make of Veh:	Modi Nil / S/Rim (/ STD A/Rim or
	Tyre Size F: 205/60 R16
(Policy Condition)	R: ·
repair at the time of inspection.	BS / BON / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Ball or Market Value.	TOYO/YOKO OF Hankook
IDAC Accident Rport Consistent? : Yes or No	Front Roar
GIA / PR Seen Consistent? Yes or No	R/Bal. 7 mm R/Bal. 7 mm
2	L/Bal. 1 mm 1/Bal. 7 mm
<i>y</i>	10,7
Lum Som: % 3 Val. Yes or N	sometimen in comportanting (reach)
CA / REV / REP. / 24 HRS	Des. of Damages Frt Rear D/S N/S U/C Rooftop or
Date: Person Contacted	INTOUT Reav
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure offected due to collision
US: \$1550= 3 repairdays	(Red \$ 6392.62, 80%) TOKIO manne
confirm on 22/10/19	. Tokio mana
	(43)
RECEIVE	3 2 3 OCT 2019
: Preli. Report	Days Of Repair: 3
1 13 10 MM : Final Report	Resurvey No. of Trip: Survey Fee 290
Dries Father, File Return 197	Equippotation
	.dd Fee: Site Insp (\$) 5 + 10 - 10
1.74 40	Interview (\$) tholes.
Report Format . WERTP	Lifech Invs (\$), others
ump Sum / LB #: (\$ 1550	Weakend (\$

261

COMFORTDELGRO ENGINEERING

Our Job Ref No .

Remarks:

305341695

Date

: 18. Oct. 2019

ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156

FINA	LIZATI	ON FORM					
То	: _		LKK			Fax:	
Attn	:		RAN	И			
Vehic	de Reg	No. :	SHB2352R	!	Date	of Accident: _	15. Oct. 2019
The s	survey	and estima	ates of the re	pairs of the a	bove-mentioned	vehicle are as	follows:-
					TOKIO		SMM7354K
1.	i ne i	epair job s	hall bill to:	-	TOTALO		
2.	The	inalized ar	mount shall b	e:			
	(a)	Spare Pa	arts after List	discount			
	(b)	Labour C	Charges				
		Total for	Part-By-Pa	rt Repair Co	st		
	500 V			- 11 - 1-1-V			
	(c.)	Total for	n Repair (if a Lumpsum re	pplicable) pair cost afte	er Less:		
			mpsum Rep				\$1,550.00
				ronoiro:	3 000	rking days	
3.					wo		
4.	We s	shall treat in 7 worki	the above a	mount as Co	orrect and Confi	rmed if there	is no reply from you
	with	in / worki	ng days				
5.	Than	nk you for y	our assistan	ce.		e confirm the e	stimates and
			,	,			
	Sign	ature :		+4	Sig	nature:	7
	Nam	e : _	Larry	y Ng	Na	me :	Ram
	Tel	: 6	214 8316		Da	te :	22/10/19
	Fax	: 65	546 8156		_		
For	Officia	Use Only					
					Document	0 5 0	
		Item		Amount	Attached Yes or No	Confirm By (Signature)	Remarks
1. F	Rental I	Rate P/Day	/		YES		
2. L	oss of	Income Pa	aid				
3. 5	Survey	Fees					
		arch Fee		\$7.49			
5. N	Medical of drive	Fees (on r, if applica	behalf ble)				
6 (Overrur	1					

...CLAIM SUBFOLDER...(New Assignment)

AIM SUE	FOLDER TRACKIN	IG					
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	16 Oct 2019 Sendback Est	16 Oct 2019 11:46 5\$7,902.62	16 Oct 2019 15:03 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
CLAIM SUBFOLDER DETAIL	s		THE RESERVE OF A SECTION OF A S	
Insured:	AUTO EXCHANGE LEASI	NG PTE LTD, Co. Reg. No.: 2016	08350D	
Main Claimant:	CITYCAB PTE LTD (COM	PANY), Co. Reg. No.: 19950283	9G	
Vehicle Reg. No.:	SHB2352R	Date of Loss:	15/10/2019 11:0 [34 Months and Reg Date (Man Y	21 Days From LT
Claim Type:	TP / M1908085	Policy/Cover Note No.:	MI001160 Coverage: 18/07 17/07/2020	//2019 -
Vehicle Reg. No. (Insured):	SMM7354K	Policy No. (Claimant):	D-18088937MFS	H
		Excess:	S\$1,500.00	
Repairer:	ComfortDelGro Engineer	ring Pte Ltd (Loyang) 59 Loyang	Drive, 508969 Loyang - Tel: 6	5214 8300
Handling Insurer:	Tokio Marine Insurance	Singapore Ltd (HQ) - Tel: 6221	6111 [Handled by Ng Kwa	i Kay Francis]
Claimant's Insurer:	MS First Capital Insuran	ce Ltd (HQ) - Tel: 62222311		
Adjuster:	LKK Auto Consultants Pt	te Ltd (HQ) - Tel: 6256-3561 [Final Rpt due 25/10/201	.9]
Adj Asg. Remarks:	OI HAS NOT RPT THE ACCI	DT		
ASSOCIATED MAIL RECEIV	ED		View All Com	pose Case Mail
There are no mail for this case.				
E ALL ASSOCIATED TASKS		View All Searc	th Tasks Create New Tas	k Complete
Due Date Priority Typ	e Task Group Subject			ed On Done

Note: This document has not been finalised.

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

Tokio Marine Insurance Singapore Ltd 20 McCallum Street

#09-01 Tokio Marine Centre

Singapore 069046

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park

Singapore 408933

Attn:

To:

Ng Kwai Kay Francis

Date:

17 Oct 2019

Preliminary Advice

Insured Vehicle No : SMM7354K

TP Vehicle No

: SHB2352R

Accident Date

: 15/10/2019

Make

: HYUNDAI 140

Assignment Date

: 16/10/2019

Est. Duration of Repair

: 3.00

Date of Inspection Inspection At

: 16/10/2019 : COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

59 LOYANG DRIVE

SINGAPORE 508969

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	7,902.62
Revised Amount	:S\$	2,146.70
Check Items (Estimated)	:S\$	554.00
Total	:S\$	2,700.70

:S\$ Lump Sum Repair

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

Other comments:

()	The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
()	The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

wner ID Type:	Company
Owner ID: /ehicle Details	839G
Vehicle No.:	SHB2352R
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Oct 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	140 1.7 CRDI F/L AT ABS AIRBAG 4DR
	Yellow
Primary Colour:	2016
Manufacturing Year:	D4FDGU694116
Engine No.:	KMHLB41UMHU097158
Chassis No.:	100.0 kW (134 bhp)
Maximum Power Output:	\$19,316.00
Open Market Value:	24 Nov 2016
Original Registration Date:	24 Nov 2016
First Registration Date:	0
Transfer Count:	
Actual ARF Paid: Intended PARF Rebate Details	\$19,316.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 Nov 2024
PARF Rebate Amount:	\$14,487.00
Intended COE Rebate Details	ψ11, 107.00
COE Expiry Date:	23 Nov 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$41,313.00
COE Rebate Amount:	\$26,337.00
Total Rebate Amount:	\$40,824.00
Message	7,-

The information contained herein is correct as at 17 Oct 2019

applicable), whichever is earlier.

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 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.

 By the loagement of this report to the insurers, you hereby consaforesaid. 	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	16/10/2019 07:49
Date Of Accident	15/10/2019 11:25
Exact Location Of Accident	CTE TOWARDS AYE AT BRADDELL FLYOVER
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB2352R
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD (COMPANY)
Co Reg No	199502839G
Email Address	FLEETSAFTY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	140
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	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	
Driver	
Name of Driver	ONG CHENG POH
NRIC No	S0179095A

 NRIC No
 \$0179095A

 Date Of Birth
 26/03/1954

 Occupation
 OUTDOOR

 Date Of Driving Pass
 17/04/1978

Driving Experience 41 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97952688

Fax Number

Contact Number

EMail Address NOEMAIL

Address

530 09-12 SERANGOON NORTH AVENUE 4

Postcode

550530

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - TAXI DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident? YES

Foreign Vehicle Registration Number

JKD8826 (PRIVATE CAR)

Number of vehicles (including own vehicle)

involved in the accident

3

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)

3

Passenger 1

NAME:

GENDER: : MALE

Passenger 2

NAME:

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

KAKI BUKIT NPP

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

SEE POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES NO (TP)

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMM7354K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Page 2 of 25

. . Corttact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

FRT & REAR

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

JKD8826

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

							AUG		
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Barno				SPROD			()	B	
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(HC	Who ?								-1
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1	SHOTE								
DESCRIBE CIRCUMS	TANCES OF T	THE ACCIDENT		ay			TE		-
)		_			
Staten	renot	as	per '	Polic	e o	266	art	(ar)_
TING	10		C1/31						
(190	1910	15/2	096						
									_
	ing particulars	are true in every r	espect.		Olivia W	endy			
We declare the forego	TEITO	are true in every r	espect.		Oi:via W	endy	الون		
CO. REG. NO. 1	TEITO	Car				(فاول	5	
We declare the forego	TEITO				Olivia W Reporting Ce	ntre Per	فاول		





1 of 3

Report No. T/20191015/2094

Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/10/2019 14:53		Vide Report No.: E/20191015/0059	Station Diary No.			
Informa	int's Partic	ulars				
	f Informant: HENG POH		Address: APT BLK 530 SERANGO SINGAPORE 550530	OON NORTH AVENUE 4 #09-12		
ID Type / ID No.: NRIC NO / S0179095A		95A	Contact No.: Home/Office: Mobile: 97952688			
National SINGAP	lity: PORE CITIZ	ĽΕΝ	Email:			
Sex: Male	Age: 65	Date of Birth: 26/03/1954	Type of Informant: Driver			
Race: Chinese Occupation: Taxi driver		Language: Chinese	Institution / School Name:			
		Driving Licence Informati Class: 3	ion: Date of Expiry:			

Type of Accident: .	Non-Injury Drink Date/Time of Accident: No 15/10/2019 11:25		Type of Location Straight Road	
Location: Along Road 1 CENTRAL EX Weather:	· · · · · · · · · · · · · · · · · · ·	Road Surface:	*	Road Speed Limit:
Sunny	1/2	Ory		Noad Opeed Limit.
T (C F)		Traffic Control:		Traffic Volume:
Traffic Flow: One Way	1	Not Controlled		Moderate

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
JKD8826	Car	TOYOTA	Innova	Gold	Seriously Damaged	2
SHB2352R	Car	HYUNDAI	140	Yellow	Slightly Damaged	2
SMM7354K	Car	HONDA	Shuttle	Silver	Seriously Damaged	1





Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999 2 of 3 Report No. T/20191015/2094

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pe	destriar	Cross	ing: NA
Driver					4	
Name	ONG CHENG POH		ID No	6	S0179095A	
Related Vehicle	NIL		Contact No.		97952688	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On the 15/10/2019, I was driving my taxi (SHB2352R) travelling on central expressway towards Ayer Rajah Expressway. At the point of time, I had 2 passengers on board. When we are nearing braddell flyover, I noticed the car infront of me, stepped on the brake. After seeing his brake lights, I then stepped on the brake. I then felt a collision to the rear of my vehicle. The vehicle (SMM7354K) behind me, was then collided into by a third vehicle (JKD8826). The third vehicle is a foreign vehicle. I then alighted from my vehicle to check on the damages of my car after knowing that I am involved in a chain collision. My passengers were not injured and my car suffered slight damages. My vehicle bumper is slightly dented and my rear left braking lights fell off, but I managed to put it back. We all then exchanged particulars and took photos of all the damages of our vehicles. However, the 2nd car and 3rd car is badly damaged as I could see that there is a huge dent on the 2nd car rear portion and also a huge dent on the 3rd car front portion. At the point of time, the second car had 1 passenger and the third car had 1 passenger too. Luckily all the passengers were not injured and did not require any medical attention at the point of time. Traffic police attended to the scene, vide E/20191015/0059 and they took my SD card to view the footage of my in car camera. The traffic police also instructed me to lodge a traffic accident report. I wish to state that there is no conveyance of anyone involved in this chain collision.





Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999 3 of 3 Report No. T/20191015/2094

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:	Signature Of Informant:
Sgt 2 TAN ZHI XIANG	
Signature Of Interpreter: Not applicable	Date/Time: 15/10/2019 14:53
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
Contact No.:	
Authentication Stamp	

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

Date/Time20160 10:2019 10:26

Page: 1

P(CFSO)1	JOB CARD	Sales Order:	JC NO.: 305341695
	1000	REGN NO.: SHB2352R	MILEAGE
TD	VAHS	MAKE: HYUNDAI	FUEL 1/2F
DRIVE GAPORE 575717		MODEL I-40	5.10.2019 15:25
(O)	~	YR OF MANUA. 11. 2016	TARGET DATE
		CHASSIS CODE KMHLB41UMHU097158	COMPLETION DATE/TIME:
	DRIVE GAPORE 575717	DRIVE GAPORE 575717	TD VACS REGN NO.:SHB2352R MAKE: HYUNDAI MODEL I-40 YR OF MANU 24.11.2016

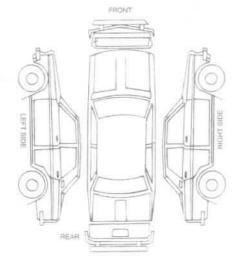
JOB DESCRIPTION

Accident Date: 15.10.2019 NATURE: 3P 15.10.2019

LABOR CODE

Tokio - Rear

DESCRIPTION



HECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

rowledgement Slip

lo.:

ale No.:

SHB2352R

LARRY

Vehicle No.:

Exit Pass

SHB2352R

e of Service Advisor

Signature/Date

Name of Service Advisor

Date

a returned to Service Reception upon collection

To be kept by Security Guard

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 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	05/10/2019 10:40	
Date Of Accident	05/10/2019 01:40	

Exact Location Of Accident ALONG UPPER PAYA LEBAR RD> BARTLEY RD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

MS FIRST CAPITAL INSURANCE LTD

Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD

Co Reg No 199303821R

Email Address FLEETSAFETY@CDGTAXI.COM.SG

Mobile Phone No Alternative Phone No OFFICE-65508768

Vehicle Particulars

HYWNDAI Manufacturer Model IÓNIQ HYBRID

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy NO

for repair to your vehicle?

If No, Please state action to be taken THIRD PARTY

Vehicle Category TAXI

Insurance Company

Name of Insurance Company

THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

Fleet Policy YES

D-18088936MFSH Policy Number

Cover Note Number

Driver

Name of Driver

NRIC No

22/12/1954 Date Of Birth OUTDOOR Occupation Date Of Driving Pass 17/09/1980

Driving Experience 39 YEARS AND 0 MONTHS

MALE Gender

Mobile Number

Fax Number

Contact Number

EMail Address NOEMAIL



ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive Singapore 508969 Tel: 6214 8300

Tokio Marine Insurance Singapore Ltd (HQ) TP INSURER: CITYCAB PTE LTD

Singapore

Claimant Insurer:

MS First Capital Insurance Ltd

PARTICULARS OF CLAIM

Claim Type:

THIRD PARTY

Ref. No:

Policy No:

Date of Loss:

15/10/2019

Vehicle Reg. No.:

SHB2352R

Driveable?

YES

Party At Fault:

UNKNOWN

Driver (TP):

ONG CHENG POH

Make/Model:

HYUNDAI I40, 1.7 D CRDI Vehicle Reg.

24/11/2016

(A)

Date:

Vehicle Colour:

YELLOW

Gen Condition: GOOD

Chassis No:

KMHLB41UMHU097158

Engine No: Odometer:

D4FDGU694116

414983 KM

Paint Type:

List Item Discount: 20.00 %

Total Loss?

NO

Est. Duration of

Repair (day)

6

Description of

SEE POLICE REPORT.

Accident/Loss

Present Location:

COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

COST OF CLAIMS		Amount
Parts		5,881.62
Miscellaneous Items		11.00
Labour		2,010.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	7 902 62

+ GST 7.00% (S\$) Nett Amount (S\$)

This claim is handled by: NG NYUK PHIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 16 Oct 2019)

Parts:

143

HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SHB2352R/16/10/2019 11:46

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 *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*BOOTLID X REPOIL	20.00	0.00	*2,174.90 FL
2	1		*BOOTLID LOCK UPPER ×nn	20.00	0.00	*102.60 FL
3	1		*BOOTLID LOCK LOWER KNIN	20.00	0.00	*31.70 FL
4	1		*BOOTLID H EMBLEM NEC /	20.00	0.00	*28.70 FL
5	1		*BOOTLID CRDI PLATE MEC	20.00	0.00	*27.90 FL
6	1		*BOOTLID MOLDING XNO	20.00	0.00	*85.00 FL
7	1		*BOOTLID i40 EMBLEM NEC	20.00	0.00	*27.90 FL
8	1		*BOOTLID LOWER GARNISH XMM	20.00	0.00	*227.90 FL
9	1		*REAR BUMPER	20.00	0.00	*553.00 FL
10	1		*REAR BUMPER REINFORCEMENT ?>	20.00	0.00	*428.40 FL
11	2		*REAR BUMPER REINFORCEMENT BRACKET - RH/LH	20.00	0.00	*160.60 FL
12	10		*REAR BUMPER CLIPS **** NEC	20.00	0.00	*22.00 FL
13	2		*REAR BUMPER BRACKETS - RH/LH XNY	20.00	0.00	*71.20 FL
14	1		*REAR BUMPER SPONGE ? XIV	20.00	0.00	*103.50 FL
15	1		*REAR BUMPER UNDERCOVER SCV	20.00	0.00	*228.00 FL
16	1		*REAR PANEL XNV	20.00	0.00	*526.70 FL
17	1		*REAR PANEL GARNISH X n n	20.00	0.00	*57.70 FL
18	1		*REAR PANEL LOWER PANEL XNN	20.00	0.00	*89.40 FL
19	1		*EXHAUST SILENCER - RH XMV	20.00	0.00	*967.70 FL
20	1		*EXHAUST PIPE CENTRE XMM	20.00	0.00	*730.10FL
21	1		*BOOT LID COMFORT STICKER NEC	0	0.00	*15.00 FS
22	1		*BOOT LID TEL STICKER MEC	0	0.00	*15,00FS
23	1		*REAR BUMPER RUBBER MAT NEC	0	0.00	*50.00FS
24	1		*REAR BUMPER REVERSE SENSOR SO	0	0.00	*135.70 FS
25	1		*ADVERTISEMENT - REAR BOOT Nec	0	0.00	*100.00FS
26	1		*ADVERTISEMENT - REAR BUMPER YELL	0	0.00	*50.00FS
27 F=Fra	2 inchise	part, S=S	*ADVERTISEMENT - REAR FENDER - RH/LH OCC SpcNett, L=ListItemDisc,	0	0.00	*200.00FS
			Sub Total (S\$)	1458.	2	7,210.60
			- List Item Discount on L Items (S\$)	291	0.64	1,328.98

ComfortDelGro Engineering Pte Ltd/SHB2352R/16/10/2019 11:46. Not valid without Reference section. Generated using Merimen e-Claims IEAS

Total Parts (S\$)

5,881.62

\$1162,56

Estimates on Miscellaneous Items

No (Qty Particulars		Amount
Misce	llaneous Items		
1 1	OD/TP Case (Insurer)		11.00
		Sub Total (S\$)	11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Lab	our Items		
1	PANEL BEATING **	New	\$420 850.00
2	SPRAY PAINTING	New	\$400 750.00
3	WIRING CHARGE	New	820 80.00
4	TUFF KOTE	New	90.00 MX #
5	REMOVE/REFIX REVERSE SENSOR	New	\$20 100.00
6	REMOVE/REFIX EXHAUST	New	x mm 150.00

Gross Labour Cost (S\$) 2033.56

2,010.00

ComfortDelGro Engineering Pte Ltd/SHB2352R/16/10/2019 11:46. Not valid without Reference section. Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Ram(LIX)

16/10/19 1245hrs

3repair boss

paragoram@LKilanto.com

paragoram@LKilanto.com

paragoram@LKilanto.com

paragoram@LKilanto.com

paragoram@LKilanto.com

paragoram@LKilanto.com

paragoram@LKilanto.com

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitt	ted Ins Auth'ed	Status		
Main	16 Oct 2019 Sendback Est	16 Oct 2019 11:46 \$\$7,902.62	16 Oct 2019 15:03 Edit Adj Rpt	S\$1,550.00 Edit Estimates	\$\$1,550.0 View Rpt		Pending for Report Cancel Case		
	Main	Ref	erence	Claim Det	ails	Documents		Show All	
CLAIM SU	BFOLDER DET	AILS							
Insured:	AUTO EXCH	HANGE LEASING	PTE LTD, Co. Reg	. No.: 201608350E					
Main Claimant:	CITYCAB P	TE LTD (COMPAN	IY), Co. Reg. No.	: 199502839G					
Vehicle Reg No.:	SHB2352	R		Date of		2019 11:00 - :59 nths and 21 Days Fro	m LTA Reg Date	(Man Yr)]	
Claim Type	Type: TP / M1908085			Policy/C Note No		60 ge: 18/07/2019 - 17/	07/2020		
Vehicle Reg No. (Insured):	SMM7354K (Claiman				D+1808	D-18088937MFSH			
				Excess:	S\$1,50	0.00			
Repairer:	ComfortDe	IGro Engineering	Pte Ltd (Loyang)	59 Loyang Drive,	508969 Loyang	- Tel: 6214 8300			
Handling Insurer:	Tokio Marii	ne Insurance Sin	gapore Ltd (HQ)	Tel: 6221 6111	[Handled by I	Ng Kwai Kay Francis	s]		
Claimant's Insurer:	MS First Ca	pital Insurance	Ltd (HQ) - Tel: 622	222311					
Adjuster:	25/10/201		td (HQ) - Tel: 6256	5-3561 [Handled	by PARASUR	AM SHANMUGAM]	[Final Rpt o	lue	
Adj Asg. Remarks:	OI HAS NOT	RPT THE ACCDT							
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There are n	o mail for this c	ase.							
ALL ASSO	CIATED TASK	s [⊡]			View All	Search Tasks C	Create New Task	Complet	
Due Date	e Priority	Type Task G	roup Subject	Handler A	ssigned By	Completed On	Created Or	Done	

Claim Documents

SHB2352R (M1908085) [SMM7354K] TP CITYCAB PTE LTD (COMPANY) Oct 15 2019 11:00AM [AUTO EXCHANGE LEASING PTE LTD] ComfortDelGro Engineering Pte Ltd

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Documents Checklist

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Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
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Show Remarks To: Repairer Handling Insurer Note: Remarks are private unless you show it to other parties.			

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/TMI19018277/FQF3E2

Date:

25/10/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No:

MI001160

Claimant Vehicle No:

SHB2352R

Insured Vehicle No:

SMM7354K

Date of Loss:

15/10/2019

Nature of Claim:

TP

Claim No: M1908085

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHB2352R

Make & Model:

HYUNDAI 140, 1.7 D CRDi (A)

Engine No:

D4FDGU694116

Reg. Date:

24/11/2016 (Man. Year: 2016)

Chassis No:

KMHLB41UMHU097158

Colour:

Yellow 1685 cc

Odometer:

414963 km

Engine Capacity: 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 Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side:

Hankook 7 mm

Rear Left Side:

Hankook 7 mm

Front Right Side:

Hankook 7 mm

Rear Right Side:

Hankook 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIM	9	Repairer's	Adjuster's	Difference	Diff %
Parts		5,881.62	1,275.70	4,605.92	78.31
Miscellaneous Item	ne.	11.00	11.00	0.00	0.00
Labour	10	2,010.00	860.00	1,150.00	57.21
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
Towning	Calculated Gross Total (S\$)	7,902.62	2,146.70	5,755.92	72.84
	Approved Total (Overridden) (S\$)		1,550.00		
	(S\$)	7,902.62	1,550.00	6,352.62	80.39
	+ GST 7.00/7.00% (S\$)	553.18	108.50	444.68	80.39
	Nett Amount (S\$)	8,455.80	1,658.50	6,797.30	80.39

INSPECTION

Date of Assignment:

16/10/2019 Present Location:

ComfortDelGro Engineering Pte Ltd

(Loyang)

Date Inspected:

16/10/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd

(Loyang)

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

3.0 days

Manager: SHIAU CHAN Adjuster: PARASURAM SHANMUGAM

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 Version: 1.0 (Last Synchronised: 25 Oct 2019) Part Source: MRM-SG

HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0) Parts: 143

(Price-denominated Standard List) Labour: Repairer's

Print Code: (Unsubmitted, no print-code for SHB2352R) These estimates are valid only if they contain the print code (above) on all estimate pages, running page Validity:

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	*BOOTLID	Repair	2,174.90 FL	*-FL
2	1	*BOOTLID LOCK UPPER	Not Necessary	102.60 FL	*-FL
3	1	*BOOTLID LOCK LOWER	Not Necessary	31.70 FL	*-FL
4	1	*BOOTLID H EMBLEM	Necessary	28.70 FL	*28.70 FL
5	1	*BOOTLID CRDI PLATE	Necessary	27.90 FL	*27.90 FL
6	1		Not Necessary	85.00 FL	*-FL
7	1	*BOOTLID i40 EMBLEM	Necessary	27.90 FL	*27.90 FL
8	1	*BOOTLID LOWER GARNISH	Not Necessary	227.90 FL	*-FL
9	1	*REAR BUMPER	Buckled	553.00 FL	*553.00 FL
10	1	*REAR BUMPER REINFORCEMENT	Not Necessary	428.40 FL	*-FL
11	2	*REAR BUMPER REINFORCEMENT BRACKET - RH/LH	Not Necessary	160.60 FL	*- FL
12	10	*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
13	2	*REAR BUMPER BRACKETS - RH/LH	Not Necessary	71.20 FL	*- FL
14	1	*REAR BUMPER SPONGE	Not Necessary	103.50 FL	*- FL
15	1	*REAR BUMPER UNDERCOVER	Scratched	228.00 FL	*228.00 FL
16	1	*REAR PANEL	Not Necessary	526.70 FL	*- FL
17	1	*REAR PANEL GARNISH	Not Necessary	57.70 FL	*-FL
18	1	*REAR PANEL LOWER PANEL	Not Necessary	89.40 FL	*- FL
19	1	*EXHAUST SILENCER - RH	Not Necessary	967.70 FL	*-FL
20	1	*EXHAUST PIPE CENTRE	Not Necessary	730.10 FL	*- FL
21	1	*BOOT LID COMFORT STICKER	Necessary	15.00 FS	*15.00 FS
22	1	*BOOT LID TEL STICKER	Necessary	15.00 FS	*15.00 FS
23	1	*REAR BUMPER RUBBER MAT	Necessary	50.00 FS	*50.00 FS
24	1	*REAR BUMPER REVERSE SENSOR	Scratched	135.70 FS	*135.70 FS
25	1	*ADVERTISEMENT - REAR BOOT	Necessary	100.00 FS	*100.00 FS
26	1	*ADVERTISEMENT - REAR BUMPER	Necessary	50.00 FS	*50.00 FS
27	2	*ADVERTISEMENT - REAR FENDER - RH/LH	Necessary	200.00 FS	*200.00 FS
F=Fra	anchise	part. S=SpcNett. L=ListItemDisc.	Sub Total (S\$)	7,210.60	1,453.20
		- List Item Discount on L Items 20.		23 - 65	177.50
		-	otal Parts (S\$	5,881.62	1,275.70

Total Parts (S\$) 5,881.62

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Recommend	iea i	viiscellaneous	nems

No	Qty	Particulars		Repairer's	Amount
Mis 1	cellar 1	neous Items OD/TP Case (Insurer)		11.00	11.00
			Sub Total (S\$)	11.00	11.00

Recomme			haur
Recomme	naea	_a	DOUL

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	850.00	420.00
2	SPRAY PAINTING	New	750.00	400.00
3	WIRING CHARGE	New	80.00	20.00
4	TUFF KOTE	New	80.00	0.00
5	REMOVE/REFIX REVERSE SENSOR	New	100.00	20.00
6	REMOVE/REFIX EXHAUST	New	150.00	0.00
		Gross Labour Cost (S\$)	2,010.00	860.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >