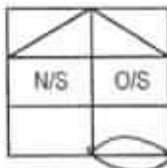


ASSIGNMENT

Front: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SCR 233P
 at Workshop m/s Maximus Racing
 of 7, South Lee St #05-05
 Insured: NTUC
 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.



Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SCR 233P Yr Regn: 2017 / May
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: TOYOTA C-HR Hybrid 1.8 SA cc 1797
 Colour: BLACK A/C: Insured / Std / NI / NA
 Sp. Reading: 35182 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: 24X162014486
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Modl: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 225/50R18
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MO / 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. 11/11/19 D.O.I. 13/11/19
 Survey held at MR PERFORMANCE 2.39pm
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear O/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

31/11/19 Resal confirmed P/R \$ 1,140 /- @ 2 days with Amy.
(\$ 5,340.75 Red - 82%)

RECEIVED 20 NOV 2019

Date/Time, File Page 10/7

26/11/191) Typist

Date/Time, File Return 10/7

2)

☐ : Prel. Report☒ : Final ReportDays Of Repair: 2Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invt (\$☐ : Wash and

Survey Fee:

Transportation:

3 x RS \$

Photos

Client

-

TOTAL

250

Report Formed:

Lump Sum (P/R): 1,140/- P/R

Nivitha (LKK Auto)

From: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>
Sent: Thursday, 14 November 2019 8:49 AM
To: Admin-D (LKKAuto); assignments
Cc: SUR; Hazalya Binte Ibrahim
Subject: RE: TP CASES FARMED OUT TO LKK ON 13/11/2019

Dear LKK,

Re-send with complete details.

Warmest Regards

Hazalya Bte Ibrahim
Admin Assistant
Operations, Motor & Personal Lines (PL)
www.income.com.sg

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made different



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Find out more at income.com.sg/careers

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]
Sent: Thursday, 14 November 2019 7:41 AM
To: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>; assignments <assignments@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: TP CASES FARMED OUT TO LKK ON 13/11/2019

Dear Hazalya,

Kindly assist to provide us the complete details of the below assignment.

Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Hazalya Binte Ibrahim [mailto:hazalya.ibrahim@income.com.sg]

Sent: Wednesday, 13 November 2019 9:47 AM

To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>

Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>

Subject: TP CASES FARMED OUT TO LKK ON 13/11/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	Azhari	MT/1071002-001	FBH4158L	HKL LIM TEAM MOTORSPT	BLK 1008 #01-24 BUKIT MERAH LANE 3 SINGAPORE 159722	James Lim (Keong) / 6275-6656		SGG1021M	23/06/19	6275-6566
2	Chryllis Quah	MT/1070958-001	5CR233P	MAXIMUS RACING PTE LTD	MR PERFORMANCE CENTRE 7 SOON LEE STREET #05-05 ISPACE SINGAPORE 627608	Arry Seah / 8858 3131	12:00-16:00		11/11/19	9638 2477
3	Jared Liu	MT/1071048-001	SLL3226R	PEGASUS ENGINEERING & TRADING PTE LTD	74 KIAN TECK ROAD SINGAPORE 628800	Chern / 65137748	14:00-16:00	GBI9737Y	11/11/19	Driver waiting
4	Eric Tang	MT/1070984-001	SLR4815C	PEGASUS ENGINEERING & TRADING PTE LTD	74 KIAN TECK ROAD SINGAPORE 628800	Chern / 65137748	10:30-16:00	XD3747D	12/11/19	

5	Muhammad Airwan	MT/1070829-002	SMD4745H	TRANS EUROKARS PTE LTD	27A TANJONG PERIURU SINGAPORE 609042	Samuel Ng /	15-00-16-00	SIA3340A	11/11/19	
6	Jeff Lin	MT/1071063-001	SMH5296J	XINYA AUTO SERVICES PTE LTD	BLK 1002 #01-75 BUKIT MERAH LANE 3 SINGAPORE 159719	/ 62703481		SKJ1748L	08/11/19	
7	Muhammad Airwan	MT/1068445-002	SMH4477K	AUTO INSURE PTE LTD	6 MARSILING LANE	Mr Sam Goh / 31572628		SLJ47875	21/10/19	9743 6363
8	Charlotte Chew	MT/1067845-002	5ML3246X	CYCLE & CARRIAGE AUTOMOTIVE PTE LTD	209 PANDAN GARDENS SINGAPORE 609339	Kevin Leong / 81680997	10-00-12-00	SKW4924G	19/10/19	6568 4501
9	Fiona Shen	MT/1055123-002	5LR758K	CYCLE & CARRIAGE AUTOMOTIVE PTE LTD	209 PANDAN GARDENS SINGAPORE 609339	Edwin Caiina / 91819978	10-00-12-00	FBH1536Z	25/07/19	6568 4501
10	Helena Tan	MT/1070771-002	EM1175U	CYCLE & CARRIAGE INDUSTRIES PTE LTD	188 PANDAN LOOP SINGAPORE 128378	GO CHEE HAN / 9181 7717		SHD1108B	10/11/19	6771 4336
11	Jared Liu	MT/1065746-002	SLX4511Y	ETHOZ AUTOMOTIVE SOLUTIONS LTD	30 BUKIT BATOK CRESCENT SINGAPORE 658075	Lee Chen Sin / 8822 8339		GBJ5365M	07/10/19	6654 7520
12	Jeff Lin	MT/1071022-001	SGG5504K	WOON MENG MOTOR PTE LTD	50 BUKIT BATOK STREET 23 #01-06 MIDVIEW BUILDING SINGAPORE 659578	/ 63161131		XE1549S	08/11/19	63161151

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Warmest Regards

Hazalya Bte Ibrahim
Admin Assistant
Motor Department
T +65 6430 7902
www.income.com.sg

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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	11/11/2019 15:31
Date Of Accident	11/11/2019 10:25
Exact Location Of Accident	JLN BOON LAY TWD AYE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCR233P
Insured/Policyholder	
Name Of Registered Owner	TAN SOH LENG
NRIC No	S1705837A
Email Address	EVELIMTAN@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81881504
Alternative Phone No	OFFICE-81881504

Vehicle Particulars

Manufacturer	TOYOTA
Model	C-HR HYBRID 1.8
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	GREAT EASTERN GENERAL INSURANCE LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2019-V0104285-VAN-R001
Cover Note Number	

Driver

Name of Driver	TAN SOH LENG
NRIC No	S1705837A
Date Of Birth	25/11/1965
Occupation	INDOOR
Date Of Driving Pass	06/07/1989
Driving Experience	30 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81881504
Fax Number	
Contact Number	OFFICE-81881504
Email Address	EVELIMTAN@YAHOO.COM

Address	27 HAZEL PARK TERRACE #04-04
Postcode	678949
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?	NO
Was any injured conveyed to hospital by ambulance?	
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

REFER TO SKETCH PLANS

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	SKT7763A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

Tln Boon Lay TWD AYē

$$\boxed{B} \times \boxed{A}$$

A: SCR 233 P-

B. SKT 7763A.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The vehicles travelling in front stopped. I managed to stop in time.

Suddenly Veh. B. collided on to the rear of my vehicle.

DECLARATION

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

Policyholder's Signature

Policyholder's
Date & Time:

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

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

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.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



MAXIMUS RACING PTE LTD

MR Performance Centre, No.7 Soon Lee Street, #05-05, iSpace, Singapore 627608.

Enquiry Hotline : +65 6250 1198 / Fax : +65 6250 1081

Company Registration No. : 200507694R

**ESTIMATION FOR SCR233P**

Reference No: Q-19-105

Date: 11/11/2019

Terms: Cash

Requested By: NTUC Income - Motor Claims Department

Address: 75, Bras Basah, NTUC Income Centre S(189557)

Tel: +65 67881777 / Fax: +65 6339 6277

Item	Description	Qty	Unit Price	Disc %	Total Price
	Policy No // Accident Date: 2019-V0104285-VAN-R001 // 11/11/2019 Drive In: 11/11/2019 Vehicle Make/Model: Toyota C-HR Hybrid 1.8 Vehicle Number: SCR 233 P Manufacturing Year: 2017 Engine: 2ZR8039546 Chassis No: ZYX102014486				
1	Toyota Rear Boot X AN	1	\$ 520.00	25%	\$ 390.00
2	Toyota Rear Boot Lock X AN	1	\$ 320.00	25%	\$ 240.00
3	Toyota Rear Boot Lock Cover X AN	1	\$ 60.00	25%	\$ 45.00
4	Toyota Rear Boot Lock Striker X AN	1	\$ 70.00	25%	\$ 52.50
5	Toyota Rear Boot Sensor X AN	1	\$ 156.00	25%	\$ 117.00
6	Toyota Rear Boot Sensor Bracket X AN	1	\$ 60.00	25%	\$ 45.00
7	Toyota Rear Boot Weatherstrip X AN	1	\$ 120.00	25%	\$ 90.00
8	Toyota Rear Bumper repair	1	\$ 390.00	25%	\$ 292.50
9	Toyota Rear Bumper Side Upper Bracket X SUC	2	\$ 180.00	25%	\$ 135.00
10	Toyota Rear Bumper Side Garnish X SUC	2	\$ 280.00	25%	\$ 210.00
11	Toyota Rear Bumper Side Garnish Reflector X SUC	2	\$ 85.00	25%	\$ 63.75
12	Toyota Rear Lower Bumper de- ? / 64	1	\$ 390.00	25%	\$ 292.50
13	Toyota Rear Bumper Reinforcement Bar ? / 64	1	\$ 250.00	25%	\$ 187.50
14	Toyota Rear End Panel X AN	1	\$ 430.00	25%	\$ 322.50
15	Toyota Rear End Panel Cover W/ Striker Cover (Interior) X SUC	1	\$ 230.00	25%	\$ 172.50
16	Toyota Logo X AN	1	\$ 60.00	25%	\$ 45.00
17	CHR Batch X AN	1	\$ 60.00	25%	\$ 45.00
18	Hybrid Batch X AN	1	\$ 60.00	25%	\$ 45.00
19	Aftermarket Third Brake Light, Lower Bumper X AN	1	\$ 150.00	S.NETT	\$ 150.00
20	Reverse Sensor Aftermarket ? AN	1 package	\$ 300.00	S.NETT	\$ 200 300.00
21	Reverse Camera X AN	1	\$ 160.00	S.NETT	\$ 320.00
22	Remove and renew damaged parts, straighten and realign affected areas	1	Repair		\$ 200 1,000.00
23	Respray affected areas.	1	4p 9001006r		\$ 200 1,000.00
24	Remove and refit rear upholstery and trims to assist workload X AN	1	2 days		\$ 300.00
25	To apply cavity wax coating on affected areas X AN	1	P/P		\$ 150.00
26	To check rear lights, reverse sensor and water leakages X AN	1	13/11/19 @ 1435		\$ 120.00
27	General diagnosis and checking X AN	1	Reg before repair		\$ 150.00
28	Wiring for Reversing Camera & Sensors	1			\$ 60 200.00
LPR Auto Consultants hereby notify the Repairer of the following: • To survey before/after spray painting • To survey damaged car/parts during survey • Plans & parts are subject to confirmation • All work done must be done without insurance claim • No third party involvement is allowed • Surveying must be done by surveyor and is subject to final approval from Insurance Company Acknowledged by Repairer: Signature: Date:					
PRICE BEFORE GST					\$ 6,480.75
ADD GST 7%					\$ 453.85
Grand Total:					\$ 6,934.40

MAXIMUS RACING PTE LTD

MR Performance Centre, No.7 Soon Lee Street, #05-05, iSpace, Singapore 627608.

Enquiry Hotline : +65 6250 1198 / Fax : +65 6250 1081

Company Registration No. : 200507694R

**FINALISATION FOR SCR233P**

Requested By: NTUC Income - Motor Claims Department

Address: 75, Bras Basah, NTUC Income Centre S(189557)

Tel: +65 67881777 / Fax: +65 6339 6277

Reference No: Q-19-105

Date: 21/11/2019

Terms: Cash

Item	Description	Qty	Unit Price	Disc %	Total Price
	Policy No // Accident Date: 2019-V0104285-VAN-R001 // 11/11/2019 Drive In: 11/11/2019 Vehicle Make/Model: Toyota C-HR Hybrid 1.8 Vehicle Number: SCR 233 P Manufacturing Year: 2017 Engine: 2ZR8039546 Chassis No: ZYX102014486				
1	Toyota Rear Lower Bumper	1	\$ 390.00	25%	\$ 292.50
2	Toyota Rear Bumper Reinforcement Bar	1	\$ 250.00	25%	\$ 187.50
3	Reverse Sensor Aftermarket	1 set	\$ 200.00	S.NETT	\$ 200.00
4	Remove and renew damaged parts, straighten and realign affected areas	1			\$ 200.00
5	Respray affected areas.	1			\$ 200.00
6	Wiring for Reversing Camera & Sensors	1			\$ 60.00
PRICE BEFORE GST					\$ 1,140.00
ADD GST 7%					\$ 79.80
Grand Total:					\$ 1,219.80



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19020109/R1sd3n2
73 BRAS BASAH ROAD Date: 27-11-2019
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556



ATTN: CHRYLLIS QUAH

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKT 7763A	Veh. Inspected	SCR 233P
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1070958-001	Excess (\$)	0.00
Assign From	HAZALYSA BINTI IBRAHIM	Assign Date	13/11/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA C-HR HYBRID 1.8S A	c.c	1797
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	ZYX102014486	Colour	BLACK
Odometer	35182 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	225/50 R18	MICHELIN	6 mm
L/H Front Tyre	225/50 R18	MICHELIN	6 mm
R/H Rear Tyre	225/50 R18	MICHELIN	6 mm
L/H Rear Tyre	225/50 R18	MICHELIN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	11/11/2019	Inspect Date / Time	13/11/2019 (02:39 PM)
Survey held at	MAXIMUS RACING PTE LTD 7 SOON LEE STREET #05-05 SINGAPORE 627608		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
-------------------------------------	----------------



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SCR 233P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	TOYOTA REAR BOOT	NOT NECESSARY	520.00	-
1	TOYOTA REAR BOOT LOCK	NOT NECESSARY	320.00	-
1	TOYOTA REAR BOOT LOCK COVER	NOT NECESSARY	60.00	-
1	TOYOTA REAR BOOT LOCK STRIKER	NOT NECESSARY	70.00	-
1	TOYOTA REAR BOOT SENSOR	NOT NECESSARY	156.00	-
1	TOYOTA REAR BOOT SENSOR BRACKET	NOT NECESSARY	60.00	-
1	TOYOTA REAR BOOT WEATHERSTRIP	NOT NECESSARY	120.00	-
1	TOYOTA REAR BUMPER	TO REPAIR SEE LABOUR	390.00	-
2	TOYOTA REAR BUMPER SIDE UPPER BRACKET	SERVICEABLE	180.00	-
2	TOYOTA REAR BUMPER SIDE GARNISH	SERVICEABLE	280.00	-
2	TOYOTA REAR BUMPER SIDE GARNISH REFLECTOR	SERVICEABLE	85.00	-
1	TOYOTA REAR LOWER BUMPER	DEFORMED	390.00	390.00
1	TOYOTA REAR BUMPER REINFORCEMENT BAR	BENT	250.00	250.00
1	TOYOTA REAR END PANEL	SERVICEABLE	430.00	-
1	TOYOTA REAR END PANEL COVER W/STRIKER COVER (INTERIOR)	SERVICEABLE	230.00	-
1	TOYOTA LOGO	NOT NECESSARY	60.00	-
1	CHR BATCH	NOT NECESSARY	60.00	-
1	HYBRID BATCH	NOT NECESSARY	60.00	-
	LESS 25% DISCOUNT		-930.25	-160.00
			2,790.75	480.00
SPECIAL NETT ITEMS				
1	AFTERMARKET THIRD BRAKE LIGHT,LOWER BUMPER (SN)	NOT NECESSARY	150.00	-
1	REVERSE SENSOR AFTERMARKET (SN)	NOT WORKING	300.00	200.00
1	REVERSE CAMERA (SN)	NOT NECESSARY	320.00	-
			770.00	200.00
LABOUR				
	REMOVE AND RENEW DAMAGED PARTS,STRAIGHTEN AND REALIGN AFFECTED AREAS.INCLUSIVE OF THE REPAIR OF TOYOTA REAR BUMPER.		1,000.00	200.00

Report Ref No. CS/INC19020109/R1sd3n2



LKK Auto Consultants Pte Ltd

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	RESPRAY AFFECTED AREAS.		1,000.00	200.00
	REMOVE AND REFIT REAR UPHOLSTERY AND TRIMS TO ASSIST WORKLOAD.	NOT NECESSARY	300.00	-
	TO APPLY CAVITY WAX COATING ON AFFECTED AREAS.	NOT NECESSARY	150.00	-
	TO CHECK REAR LIGHTS, REVERSE SENSOR AND WATER LEAKAGES.	NOT NECESSARY	120.00	-
	GENERAL DIAGNOSIS AND CHECKING.	NOT NECESSARY	150.00	-
	WIRING FOR REVERSING CAMERA & SENSORS.		200.00	60.00
			2,920.00	460.00
GRAND TOTAL			6,480.75	1,140.00
RECOMMENDED COST OF REPAIRS (CONFIRMED)				1,140.00

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MRB

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE,
MinstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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