

22/03/2002

ASS. REC. BY:

GQ

REF:

e/cr19020248/Rlyd3

Special Instruction:

Surveyor:

~~Rastu~~

ASSIGNMENT (Office)

From (Person): Chong Boon Sen

of

CTI

Date/Time:

14/11/10 1:36pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLU 4447R

Insured:

SMC 5843G

at Workshop m/s

Thurs Eurokars

Tel:

9127 7928

of

Subi close

Policy No:

Claim No:

8NMIND205342

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

CA / REV / REP. / REV 24 HRS

91277928

H.O.D. Endorsement:

Date/Time: 2:26pm @ 14/11/10

Person Contacted:

Poncel

Vehicle IN (OUT)

Date/Time

Action/Instruction

Exhibit 1

SLU 4447R-

ASS. REC. BY:

GIL

REF:

CTI

ASSIGNMENT

From:

Date:

19/11/19

Estimated Cost:

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

To Inspect Vehicle No:

SLU 4447R

at Workshop m/s

Trans Eurocars

of

5 ubi close

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

3pm (waiting)

Ronald

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

1up)

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLU 4447R

Yr Regn:

01 Dec 2017

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

Truck / Trailer or

Make:

Mazda 3

C.C

1496

Colour

blue

A/C:

Insured / Std / NI / NA

Sp. Reading

26572

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JM6BN22A8J 0194498

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/60R16

R:

11

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

TOYO / YOKO or

Front

R/Bal.

6

mm

Rear

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

19-11-19

Survey held at

w/s

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

3pm

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

Date / Time

Action / Instruction

1/10 Owner withdraw claims sent by email

1/10 Submit Preli (Red \$ 2651-30, 44%)
\$3248-40

Date/Time, File Pass to?



: Preli. Report

1)



: Final Report

Date/Time, File Return to?

2)

1/10/20 Typist

Report Format:

Lump Sum / L&L: \$

Preli

Days Of Repair:

3

Resurvey No. of Trip:

1

Add Fee:



: Site Insp (\$)



: Interview (\$)



: Tech. Invs (\$)



: Weekend (\$)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Yvonne Wong (LKK Auto)

From: Ronald Yap <ronald.yap@eurokars.com.sg>
Sent: Thursday, October 01, 2020 4:27 PM
To: SUR
Cc: Jess Francis Carlos
Subject: RE: OUR REF: SNM19D205342/SMC5843G/CBS & YOUR REF: SLU4447R -ARRANGE FOR PRS- SLU4447R

Hi Yvonne,

We shall close this case mutually.

Thank You,

Ronald Yap
5 Ubi Close
S408605
Eurokars Group

From: Ronald Yap
Sent: 21 August 2020 09:39
To: jenny.lew@sg.cntaiping.com
Cc: SUR <sur@lkkauto.com>; Jess Francis Carlos <jess.carlos@eurokars.com.sg>
Subject: FW: OUR REF: SNM19D205342/SMC5843G/CBS & YOUR REF: SLU4447R -ARRANGE FOR PRS- SLU4447R

Dear Jenny,

May we have the liability of this case please?

Thank You,

Ronald Yap
5 Ubi Close
S408605
Eurokars Group

From: Ronald Yap
Sent: 19 November 2019 18:09
To: 'Chong Boon Sen' <boonsen.chong@sg.cntaiping.com>
Cc: assignments <assignments@lkkauto.com>; Vion Lim <vion.lim@eurokars.com.sg>

Nivitha (LKK Auto)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Thursday, 14 November 2019 1:36 PM
To: ronald.yap@eurokars.com.sg
Cc: vion.lim@eurokars.com.sg; assignments
Subject: RE: OUR REF: SNM19D205342/SMC5843G/CBS & YOUR REF: SLU4447R -ARRANGE FOR PRS- SLU4447R

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.

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: ronald.yap@eurokars.com.sg [mailto:ronald.yap@eurokars.com.sg]
Sent: Thursday, November 14, 2019 1:33 PM
To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Cc: vion.lim@eurokars.com.sg
Subject: Re: OUR REF: SNM19D205342/SMC5843G/CBS & YOUR REF: SLU4447R -ARRANGE FOR PRS- SLU4447R

Dear Boon Sen

Please assign to LKK

Thank you

Ronald Yap
Insurance Claims
9127 7928

Sent from my Smartphone.

----- Original message -----

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>

Date: 11/14/19 13:21 (GMT+08:00)

To: Ronald Yap <ronald.yap@eurokars.com.sg>

Subject: RE: OUR REF: SNM19D205342/SMC5843G/CBS & YOUR REF: SLU4447R -ARRANGE FOR PRS- SLU4447R

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: 太平狮城 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, November 12, 2019 9:32 AM

To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; ronald.yap@eurokars.com.sg

Cc: Chee So Chow <sochow.chee@sg.cntaiping.com>; Alfred Toh <alfred.toh@sg.cntaiping.com>

Subject: OUR REF: SNM19D205342/SMC5843G/CBS & YOUR REF: SLU4447R -ARRANGE FOR PRS- SLU4447R

Dear Boon Sen,

Please conduct PRS -SLU4447R soonest possible (Our Insured- SMC5843G- had not filed SAS Report)

File to officer in charge -Chong Boon Sen -DID: 6389 6171.

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

TEL: (65) 63896116 - F: (65) 6224 7478

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

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From: ronald.yap@eurokars.com.sg [mailto:ronald.yap@eurokars.com.sg]
Sent: Tuesday, November 12, 2019 8:52 AM
To: Claims Dept of CTI
Cc: vion.lim@eurokars.com.sg; samuel.ng@eurokars.com.sg; jess.francis@eurokars.com.sg
Subject: ARRANGE FOR SURVEY / YOUR REF: SMC5843G / SLU4447R

Dear Claims,

As attached / subject, kindly arrange the survey of our client's vehicle the soonest.

Let us have your appointed surveyor for arrangements.

Thank You,

Ronald Yap
Insurance Claims

Trans Eurokars Pte Ltd
5 Ubi Close, Singapore 408605
T: 6395 8899 H: 9127 7928
ronald.yap@eurokars.com.sg

This email, including any attachment, is intended for the sole use of the recipient(s) named above and may contain information that is confidential and/or proprietary to the Eurokars Group. If you have received it in error, please notify us immediately by reply email and then delete this message from your system. Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.

From: mazdacanon@mazda.com.sg <transeurokars@eurokars.com.sg>
Sent: 12 November 2019 09:14
To: Ronald Yap <ronald.yap@eurokars.com.sg>
Subject: Attached Image

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>

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	08/11/2019 16:29
Date Of Accident	07/11/2019 15:50
Exact Location Of Accident	SLIP RD TO WOODLANDS RD TO BT PANJANG KJE EXIT 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU4447R
Insured/Policyholder	
Name Of Registered Owner	MR WATARU TOMIKAWA
NRIC No	S2761324A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82239260
Alternative Phone No	OFFICE-82239260

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 (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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	YUSUKE TOMIKAWA
NRIC No	S2761324A
Date Of Birth	12/08/1994
Occupation	INDOOR
Date Of Driving Pass	02/02/2017
Driving Experience	2 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82239260
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	484 CHOA CHU KANG AVENUE 5 #13-08
Postcode	680484
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO WITH OWNER, TO BE UPLOADED SHORTLY
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC5843G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BERNARD LIM JIA HAO
NRIC/Passport Number	S9347876B
Contact Number	87423735
Address	
Postcode	
Insurance Company Name	
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:

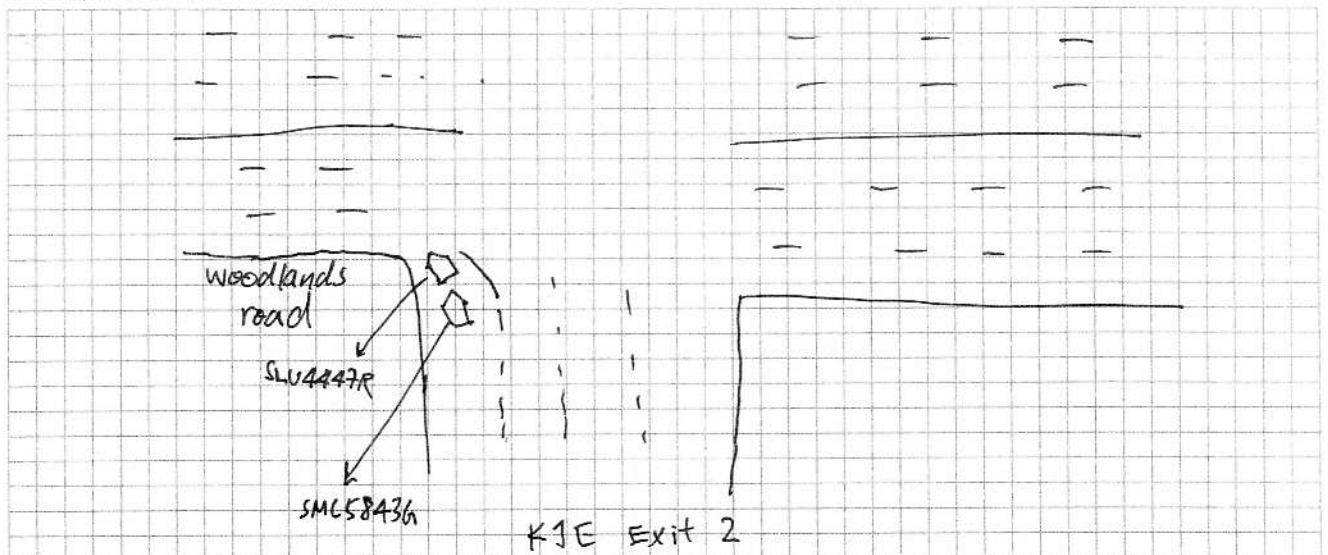
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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:

4
Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE NO: SLU4447R

ACCIDENT DATE: 07 Nov 2019

CONTACT NUMBER: 8223 9264

ACCIDENT TIME: 1553

EMAIL: tttysuke@gmail.com

LOCATION: Left turn joining Woodlands road towards Bukit Panjang, KJE Exit 2

Was waiting at the left turn lane for traffic to clear, then the car behind collided

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLICY.

PLEASE CHECK YOUR POLICY FOR MORE INFORMATION

PLEASE STATE: () CLAIM OWN POLICY ☒ CLAIM THIRD PARTY () REPORTING ONLY

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.:

Third Party Insurer Enquiry

Our Ref No: GR-19-184792
Date of Request: 08/11/2019

Your Ref No: Online Purchase

Trans Eurokars Pte Ltd
12 Sungei Kadut Ave
Singapore 729648

Dear Sir/Madam,

Enquiry Date 08/11/2019
Enquiry By Ronald Yap
TP Vehicle No. SMC5843G
Accident Date 07/11/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SMC5843G	NTUC Income Insurance Co-operative Ltd	28/09/2018-09/01/2020	
SMC5843G	China Taiping Insurance (Singapore) Pte. Ltd. ✓	18/09/2019-17/09/2020	6389 6111

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

TAX INVOICE

Our Ref No: GR-19-184792
Date of Request: 08/11/2019

Your Ref No: Online Purchase

Trans Eurokars Pte Ltd
12 Sungei Kadut Ave
Singapore 729648

Dear Sir/Madam,

Enquiry Date 08/11/2019
Enquiry By Ronald Yap
TP Vehicle No. SMC5843G
Accident Date 07/11/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	324A
Vehicle No.:	SLU4447R
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Nov 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 SEDAN 1.5 AT LED EU6
Primary Colour:	Blue
Manufacturing Year:	2017
Engine No.:	P520486659
Chassis No.:	JM6BN22A8J0194498
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$18,686.00
Original Registration Date:	01 Dec 2017
First Registration Date:	01 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$13,686.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Nov 2027
PARF Rebate Amount:	\$10,264.00
COE Expiry Date:	30 Nov 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$46,791.00
COE Rebate Amount:	\$37,575.00
Total Rebate Amount:	\$47,839.00

The information contained herein is correct as at 19 Nov 2019

OK



TRANS EUROKARS PTE LTD



ESTIMATE COST OF REPAIRS

CHINA TAIPING INSURANCE P/L 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909 ATTN.: MOTOR CLAIMS FAX:		NAME: Mr Wataru Tomikawa ADDRESS: 484 Choa Chu Kang Avenue 5 #13-08 Singapore 680484 TEL: 82239260Tomikaw		WIP: 13529 EXCESS: DATE: 11-Nov-19	
VEH NO:	SLU4447R	DATE IN:		CONTACT PERSON:	Ronald 63957875
CHASSIS NO:	JM6BN22A8J0194498	MILEAGE:		TYPE OF CLAIM:	THIRD PARTY CLAIM
MODEL:	MAZDA3	DATE REG.:	1-Dec-17	POLICY NO.:	
NATURE OF WORKS					
Parts Description					
NO	QTY			REVISED	PRICES
1	REAR BUMPER / <i>ll</i>	1	MBPD8-50-221ABB		\$ 1,128.60
2	BRACKET CENTER ?	1	MKD53-50-251		\$ 5.40
3	REAR REINFORCEMENT ?	1	MB45A-50-260		\$ 564.20
4	RETAINER CENTER, SENSOR / <i>MC</i>	2	MKD47-67-UC5A13		\$ 36.40
5	SENSOR CENTER, ULTRASONIC X <i>nn</i>	1	MGMK6-67-UC1 13		\$ 181.70
6	TAPE PROTECTOR, SENSOR /	3	MG51D-50-EM1A		\$ 25.80
7	FASTENER, REAR BUMPER /	4	MB45A-56-146A		\$ 12.00
8	CLIP, REAR BUMPER /	2	MGJ21-50-049		\$ 6.80
9	GROMMET, REAR BUMPER /	4	MBHN1-50-0Z1A		\$ 10.80
10	GROMMET, REAR BUMPER /	2	M9991-00-501		\$ 6.00
11	RIVET, REAR BUMPER /	4	MBBM4-50-355		\$ 18.00
12	GASKET LHS, TAILLAMP /	1	MBHN1-51-163		\$ 22.00
13	GASKET RHS, TAILLAMP /	1	MBHN1-51-153		\$ 22.00
TOTAL PARTS					\$ 2,039.70
TOTAL PARTS COST					\$ 2,039.70
Labour Description					
1	MZ-BR-REAR02	TO REPLACE REAR BUMPER AND REAR REINFORCEMENT. REPAIR ALL AREAS AFFECTED BY THE ACCIDENT.			<i>860</i> \$ 1,320.00
2	MZ-SP-SFRT02	TO RESPRAY FRONT BUMPER AND FRONT REINFORCEMENT.			<i>630</i> \$ 1,260.00
3	MZ-BR-REVSEN	TO TRANSFER REVERSE SENSORS. ✓			NETT \$ 330.00
4	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION. <i>nn</i>			<i>X</i> \$ 250.00

5	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	150	\$ 250.00
6	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	180	\$ 350.00
7		TO SUPPLY BODY COATING. <i>NN X</i>	NETT	TBA
8	MZ-BR-SUNDRI	SUNDRIES. <i>10.</i>	NETT	\$ 100.00


TOTAL LABOUR	\$ -	\$ 3,860.00
TOTAL PARTS	\$ -	\$ 2,039.70
TOTAL	\$ -	\$ 5,899.70
LESS EXCESS	\$ -	\$ -
TOTAL AFTER EXCESS	\$ -	
GST 7%	\$ -	\$ -
GRAND TOTAL	\$ -	\$ -

REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A **QUOTATION FEE OF \$400** WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.

TRANS EUROKARS PTE LTD

Authorised Signature

3 Days . 
before paint photos.

Guo Qiang - 82880282

19/11/19.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- 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 allowed
- Supplementary item(s) must be resurveyed **and** is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature: _____
Date: _____