(08/4/13) wef REF:	1 msg 19021489/ Ugf 3112
ASS. REC. BY: March	M516/
· v	ASSIGNMENT
From: Date:	Veh No: SAM 65463 Yr Regn: 101 06
Estimated Cost:	Typer M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP) WS (TP RES (OD RES (EVA / INV) MV	Truck / Trailer or CA /
To Inspect Vehicle No: Som 65	463 Make: Cherrole + optra cc 1598
at Workshop m/s	Colour Scher A/C: Insured / Std / NI / NA
of	Sp.Reading 2243.79 T/Radio: Insured / Std / NI / NA
Insured: SJT/8017	Eng/No:
Policy No. 2776 4 943	C/No: KLINA356E.6H10789
Claims No. 6/3626	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: /85/60ng
(Policy Condition)	R:
Remark: The veh had commenced its N/S	
repair at the time of inspection.	TOYO/YOKO or he by lead
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	DIDA 6
GIA / PR Seen: Consistent?: Yes or No	11801 / 11801 /
Est. Repairs: 4 days Res.: Yes or No	D.O.A. 4/12/19 D.O.I. S/12/18
Lum Sum: 20 % 3 Val.: Yes or No	
	Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
CA I KEY I KEP. I 24 HKS	Des. of Damages: Frt Rear O/S N/S U/C Rooftop or
Date: Person Contacted:	The VIC / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction (415 / 02	the C
17A9833 coe	25-10-2011
10-43 317	*
06/12/19@ 9.36 on Enuil GIA 12	Man 10 10514.
8/10/19 2/5 \$ 3100 CONT.IN	No w. h. Ale. (red 8 1102, 10, 15 19)
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will to the same	1 30/15/2010
REC	EIVED 3 1 DEC 2019
Date/Time. File Pass to? Preli Report	Dave Of Banaire (#
al I c	Days Of Repair:
1) 30 12 Myrsy : Final Report Date/Time, File Return to?	Resurvey No. of Trip: 2 Survey Fee: Transportation: 200
	Transportation: 200 Add Fee: : Site Insp (\$)_s+Rs,_si
	: Interview (\$) Photos
Report Format: MERTP	Vision for account of the control of
Report Format: MER 1P Lump Sum / I.B.I. (\$ 3/90)	: Tech. Invs (\$) Others : Weekend (\$)
)	TOTAL 2/1
	IUIAL 111

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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Attn:

Chhia Nyuk Pui

Date:

30 Dec 2019

Preliminary Advice

Insured Vehicle No : SJT1805P

TP Vehicle No

: SGM6546B

Accident Date

: 04/12/2019

Make

: CHEVROLET OPTRA

Assignment Date

: 06/12/2019

Date of Inspection : 05/12/2019

Est. Duration of Repair

: 4.00

Inspection At

: FASTECH AUTO PTE LTD (HQ) 1 KAKI BUKIT AVE 6, #01-46/48/50 AUTOBAY

SINGAPORE 417883

Point of Impact / General Description of Damages

The vehicle sustained impact / damages n/s front portion, n/s body and parts claimed are consistent to the accident. The undercarriage affected due to collision.

Repairer's Estimate (Gross)	:S\$	12,502.70
Revised Amount	:S\$	3,899.40
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,899.40

Lump Sum Repair

3,100.00 :S\$

Total Loss Consideration

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

Remarks

	1	The vehicle	is	economical/not	economical	for	repair.
--	---	-------------	----	----------------	------------	-----	---------

(X) The above survey was conducted on a 'without prejudice' basis.

Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Friday, 6 December 2019 9:36 AM motorsurvey@sg.msig-asia.com

To: Cc:

CLID

Subject:

DIRECT SURVEY INSPECTION ON WORKSHOP - FASTECH AUTO PTE LTD, DOA:

04/12/2019, SGM 6546B (TP VEHICLE), SJT 1805P (OI VEHICLE)

Attachments:

SGM6546 GIA.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SGM 6546B at M/s: FASTECH AUTO PTE LTD, 1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883.

Enclosed herewith a copy of TP's GIA report. The estimated cost of repair will forward to you shortly.

Meanwhile, kindly provide us the claim reference number for our necessary action.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	560G
Vehicle Details	
Vehicle No.:	SGM6546B
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Dec 2019
Vehicle Make:	CHEVROLET
Vehicle Model:	OPTRA EST16A
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	F16D3690742K
Chassis No.:	KL1NA356E6H107890
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$14,790.00
Original Registration Date:	26 Oct 2006
First Registration Date:	26 Oct 2006
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$16,269.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	±
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	25 Oct 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$26,054.00
COE Rebate Amount:	\$9,833.00
Total Rebate Amount: Message	\$9,833.00
	ehicle cannot be further renewed. The vehicle
	r when the vehicle reaches its statutory lifespan (if

The information contained herein is correct as at 05 Dec 2019

applicable), whichever is earlier.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number Fax Number

Contact Number

EMail Address

- 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.	
e la applicación de la companion de la compani	ACCIDENT STATEMENT
Date Of Report	05/12/2019 10:25
Date Of Accident	04/12/2019 12:10
Exact Location Of Accident	BLK 499C TAMPINES AVE 09 CP
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SGM6546B
Insured/Policyholder	
Name Of Registered Owner	PANG KOK LING
NRIC No	S1451560G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98808022
Alternative Phone No	OTHERS-98808022
Vehicle Particulars	
Manufacturer	CHEVROLET
Model	OPTRA EST16A
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5039807198-10
Cover Note Number	
Driver	
Name of Driver	PANG KOK LING
NRIC No	S1451560G
Date Of Birth	22/05/1960
Occupation	OUTDOOR
Date Of Driving Pass	22/06/1978
Driving Experience	41 YEARS AND 5 MONTHS
	1 3 3 7 5 C

MALE

NOEMAIL

(LOCAL) +65-98808022

OTHERS-98808022

Address

BLK 489B #09-213 TAMPINES STREET 45

Postcode

521489

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident 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

REFER ATTACHED:

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJT1805P

Vehicle Make/Model/Colour

TOYOTA / COROLLA ALTIS 1.6 AUTO

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)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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 wiful 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
- 5. Any false reporting may be referred to the Police for investigation.
- 5. 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
- 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
- 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 Moreclary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - (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
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' tawyers/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.
- (c) the information so collected under (d) above may be shared / disclosed:
 - (f) 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 Sign Mire Date & Time:

Driver's Sesature (if driver's not the policyholder)

Date & Time:

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933 Tel: 67416697 Fax: 67492305

Email vackb@vicom.com.sg

Reporting Centre Personnel's Signature

NRIC/FIN No.:

SARAC Swell and one VS

Date of Accident	: 04.12.2019 · Accident Time: 12.10 04 (24-HR-Format)
Accident Place	: BIK 499C Tampines Ave 9 Carpark.
Vehicle, No. (Car Plate No.)	: SGM 6546B Make/Model:
Insurace Company	: NTVC Policy No: 5039807198 - 10.
Owner or Company Name /IC No.	: Pang Kok Ling (S1451560G).
Owner or Company Contact No.	:Owner's Hp 9880 8022 - Company Tel
DRIVER'S Name / IC No.	: as above
DRIVER'S Date Of Birth	: 12.05 - 1960 DRIVER'S License Pass Date 21.06 . 1948 -
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: OWNQ
DRIVER'S Address	: BIK 4898 Tampines Street 45. #09-213 (5) 521489.
DRIVER'S Contact No./ Alt No.	:1)
DRIVER'S Occupation	: (NDOOR) OUTDOOR (e.g. working inside or outside office)
Email Address	_
Weather & Road Surface	: CLEAR & DRY RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including D	river): Divor -
Was there any video Captured by ca Exact purpose for which vehicle was Any Injury (If YES, PIs state):	s being used at the time of accident Private use \ Work purpose
Other P	arty Driver's Particular (if any)
Vehicle, No: 3JT 1805	Vehicle, No:
Vehicle Make\Model:	
Name Driver:	
C No. Driver/Contact:	

* NEW - Passenger's name & gender:



SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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.
- 5. 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 invoive 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: Oriver's Signature (If driver is not the policyholder) Date & Time:

Name: NRIC/FIN No.:

Reporting Centre Personnel's Signature

GIARMIC SketchPlanForm_V8

1

	00	04.12	2019	at ah	put	12 - 10 pm	. 1	Md2	tray	elling	alo	ng !	BIK	1490	<u> </u>
ampines	vA 2	e 9	Carpark) Was	s trovel	ling S	traig	ht.	Suddi	suld	Vehic	te B	da	shed.
10 fv0	the	Carpa	rk 104	and	hit	my Yel	nide .								
		-													

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 .:

Not Allow! ship s/12/18 2/5#3100/ 4/5#4/

FASTECH AUTO PTE LTD BLK1 KAKI BUKIT AVE 6 #01-46,48,50 AUTOBAY SINGAPORE 417883

VEH	CIE	NO-SCI	4 6546B

QTY	PARTICULAR	1 1
1 PCS	FRONT BUMPER 70/.30	De/ waged \$1,100.00
1 PCS	FRONT BUMPER SIDE RETAINER	1M \$48.50 ×
1 SET	FRONT BUMPER CLIPS	su \$50.00
1 PCS	HEADLAMP N/S	∧ 1 \$788.20 X
1 PCS	FRONT FENDER N/S	\$415.00 \$
1 PCS	FRONT SHOCK ABSORBER N/S	11 \$392.30 X
1 PCS	FRONT LOWRE ARM N/S	1 \$615.20 X
1 PCS	FRONT KNUCKLE ARM N/S	17 \$545.00×
1 PCS	FRONT KNUCKLE ARM BEARING N/S	\$288.20
1 PCS	FRONT DOOR N/S	\$1,266.00 ×
1 PCS	FRONT DOOR PROTECTOR N/S 215.00	Nec \$289.30
1 PCS	REAR DOOR N/S	↑ \$1,205.00 ×
1 PCS	REAR DOOR PROTECTOR N/S 205.00	My \$265.00 —
1 PCS	REAR BUMPER 745.02	De age \$1,095.00
1 SET	REAR BUMPER CLIPS	\$50.00
1 PCS	FRONT SPORT RIM N/S	680.00 3005.N
1 PCS	REAR SPORT RIM N/S	10% CU7 \$680.00 350 5 ~
		\$9,772.70

LABOUR CHARGES	
TO CHECK WIRING	\$50.00 20
TO TRANSFER DOOR MECHANISM	1120.00メ
TO SPRAY RUST PROOFING	11 \$80.00 ×
TO CONDUCT WHEEL ALIGNMENT	\$150.00 63
TO DISMANTLE & REFIX FRONT UNDERCARRIAGE	√ \$150.00 ✓
LABOUR FOR PANEL BEATING & REPLACING PARTS	\$680.00 42.2
TO PUTTY & SPRAY PAINTING	\$1,500.00
	TOTAL \$12,502.70

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 in may is on a "Without Prejudice" basis.
- No literal resolution(s) is allowed.
- Supplimentary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer Signature: 1968 38**9**8.4

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/MSG19021489/UQF3N2

Date:

06/01/2020

REFERENCE

Date of Loss:

MSIG Insurance (Singapore) Pte. Ltd. Handling Insurer:

Policy No:

27764943

Claimant Vehicle No:

SGM6546B

04/12/2019

Insured Vehicle No:

Nature of Claim:

SJT1805P

613626 Claim No:

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SGM6546B

Make & Model:

CHEVROLET OPTRA, ESTATE 1.6 (A)

Engine No:

F16D3690742K

Reg. Date:

26/10/2006 (Man. Year: 2006)

Chassis No:

KL1NA356E6H107890

Colour:

Silver

Odometer:

228279 km

Engine Capacity: Market Value/New Car Price: 1598 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Engine Modification: Yes

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

185/60 R14

Rear Tyre Size:

185/60 R14

Front Left Side:

Habilead 6 mm

Rear Left Side:

Habilead 6 mm

Front Right Side:

Habilead 6 mm

Rear Right Side:

Habilead 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	9,772.70	2,469.40	7,303.30	74.73
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,730.00	1,430.00	1,300.00	47.62
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	12,502.70	3,899.40	8,603.30	68.81
Approved Total (Overridden) (S\$)		3,100.00		
(\$\$)	12,502.70	3,100.00	9,402.70	75.21
+ GST 7.00/7.00% (S\$)	875.19	217.00	658.19	75.21
Nett Amount (S\$)	13,377.89	3,317.00	10,060.89	75.21
	100000000000000000000000000000000000000			

INSPECTION

Date of Assignment:

06/12/2019

Fastech Auto Pte Ltd (HQ)

Date Inspected:

05/12/2019 Inspected At:

1 Kaki Bukit Ave 6, #01-46/48/50 Autobay

Singapore 417883

Estimated Period of Repair:

4.0 days

Adjuster: MARCUS CHUA Manager:

SHIAU CHAN

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

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 06 Jan 2020)

Parts: 144 CHEVROLET OPTRA ESTATE 1.6 (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: (Unsubmitted, no print-code for SGM6546B)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with

the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER	Deformed/Warped	1,100.00 F	*701.00 FL
2	1		*FRONT BUMPER SIDE RETAINER	Not Necessary	48.50 F	*-FL
3	1		*SET FRONT BUMPER CLIPS	Necessary	50.00 F	*50.00 FL
4	1		*HEADLAMP N/S	Not Necessary	788.20 F	*-FL
5	1		*FRONT FENDER N/S	Repair	415.00 F	*-FL
6	1		*FRONT SHOCK ABSORBER N/S	Not Necessary	392.30 F	*-FL
7	1		*FRONT LOWER ARM N/S	Not Necessary	615.20 F	*- FL
8	1		*FRONT KNUCKLE ARM N/S	Not Necessary	545.00 F	*-FL
9	1		*FRONT KNUCKLE ARM BEARING N/S	Not Necessary	288.20 F	*-FL
10	1		*FRONT DOOR N/S	Repair	1,266.00 F	*-FL
11	1		*FRONT DOOR PROTECTOR N/S	Necessary	289.30 F	*215.00 FL
12	1		*REAR DOOR N/S	Repair	1,205.00 F	*-FL
13	1		*REAR DOOR PROTECTOR N/S	Necessary	265.00 F	*205.00 FL
14	1		*REAR BUMPER	Deformed/Warped	1,095.00 F	*745.00 FL
15	1		*SET REAR BUMPER CLIPS	Necessary	50.00 F	*50.00 FL
16	1		*FRONT SPORT RIM N/S	Cut	680.00 FS	*350.00 FS
17	1		*REAR SPORT RIM N/S	Cut	680.00 FS	*350.00 FS
F=Fr	anchise	part. S=SpcN	Nett, L=ListItemDisc.			
				Sub Total (S\$)	9,772.70	2,666.00
			- List Item Discount on L Items 0.00/10.00% (S\$)			196.60
				Total Parts (S\$)	9,772.70	2,469.40
				_		

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
abo	our Items			
1	TO CHECK WIRING	New	50.00	20.00
2	TO TRANSFER DOOR MECHANISM	New	120.00	0.00
3	TO SPRAY RUST PROOFING	New	80.00	0.00
1	TO CONDUCT WHEEL ALIGNMENT	New	150.00	60.00
5	TO DISMANTLE & REFIX FRONT UNDERCARRIAGE	New	150,00	0.00
5	LABOUR FOR PANEL BEATING & REPLACING PARTS	New	680.00	400.00
7	TO PUTTY & SPRAY PAINTING	New	1,500.00	950.00
		Gross Labour Cost (S\$)	2,730.00	1,430.00

< END OF ESTIMATES >