

12/12/19

ASS. REC. BY:

REP:

CS/AGI/19021936/Ey d3

n2

Special Instruction:

Surveyor: Steve

ASSIGNMENT (Office)

From (Person): Julie Mangubart

of

AGI

Date/Time:

12/12/19 @ 2:20pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKX 7754E

Insured:

SJX7105R

at Workshop m/s

Cheng Auto

Tel:

8666 7775

of

5 soon lee street #01-62

Policy No:

Claim No:

C10004859/LA

Sum Insured:

Excess:

Make of Veh:

D.O.A.

10/12/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 2:57pm @ 12/12/19

Person Contacted:

Rachel

Vehicle IN/OUT

Date/Time	Action/Instruction
	13/12/19 ✓
	SKX 7754E - X
	SJX 7105R - X

ASS. REQ. BY:

Steve

REF:

AG1

ASSIGNMENT

From: _____ Date: 19.12.2019

Estimated Cost: _____

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

To inspect Vehicle No. SKX 7754E

at Workshop m/s Chung Auto Bodyworks

of 5 Sun Lee Street Pioneer Point #01-67

Insured: _____

Policy No. _____

Claims No. _____

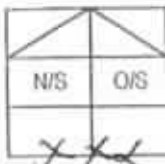
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: Audi 400 p.m

(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: SKX 7754E Yr Regn: 28/12/15

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

Truck / Trailer or

Make: Mazda 3

C.C. 1496

Colour: Red

A/C: Insured / Std / NI / NA

Sp. Reading: 64339

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JM6BM42A86032-9313

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: 225/45R17

R: 4

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

TOYO / YOKO or

Front

Rear

R/Bal. 5

mm

R/Bal. 5

mm

L/Bal. 5

mm

L/Bal. 5

mm

D.O.A. 10/12/19

D.O.A. 19/12/19

Survey held at

Chung Auto

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

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

Date / Time Action / Instruction

5/1/20 MV-SSK
Finalise \$1950, 3 days (Rachel) (Red \$8432-79, 81%)

RECEIVED 06 FEB 2020

Date/Time, File Pass to/

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to/

5/2/20 Typist

Rep. Format:

Emp. Sur. / L.P. / \$1950/F

Days Of Repair: 3

Resurvey No. of Trip: 3

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Insp (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Other

TOTAL

250

Steve Chen (LKK Auto)

From: CLAIMS@CHENG AUTO.COM
Sent: Tuesday, February 04, 2020 11:18 AM
To: Steve Chen (LKK Auto)
Cc: Yvonne Wong (LKK Auto)
Subject: RE: SKX 7754E - Finalize

Dear Steve,

We apologise on the late response.

With reference to your email dated 20th January 2020, we accept the offer of S\$1,950.00 & 03 repair days.

Please advise if Letter of Demand is to be submitted to Auto & General Insurance or LKK Auto.

Thanks & Best Regards,
Claims Department

Rachel Lai



CHENG AUTO BODYWORKS

HP: 8666 7775 | Office-Tel: 6631 0707 | Fax: 6316 2431

Reporting Centre

Address: 5 Soon Lee Street #01-60 Pioneer Point, Singapore 627607

Email: claims@chengauto.com

Workshop

Address: 5 Soon Lee Street #01-62 Pioneer Point, Singapore 627607

Email: cab@chengauto.com

Spraypainting

Address: 1 Soon Lee Street #06-41 Pioneer Centre, Singapore 627605

Email: cab@chengauto.com

From: Steve Chen (LKK Auto) <SteveChen@lkkauto.com>
Sent: Monday, 20 January, 2020 9:17 AM
To: CLAIMS@CHENG AUTO.COM
Cc: Yvonne Wong (LKK Auto) <yvonnewong@lkkauto.com>
Subject: SKX 7754E - Finalize

Dear Sir,

Kindly follow up.

Nivitha (LKK Auto)

From: Julie Mangubat <julie.m@budgetdirect.com.sg>
Sent: Thursday, 12 December 2019 2:20 PM
To: sur@lkkauto.com; Admin-D (LKKAuto)
Cc: Loganathan Agoram
Subject: FW: TPPD survey || C10004859/LA || OI (SJX7105R - Purple) - TP 1 (SKX7754E-claimant) - TP (SKX6213G) || Est: \$11,109.59 || Cheng Auto
Attachments: ESTIMATES.pdf

On behalf of Logan

Hi Team

Please help to survey TPPD.

Thank you,
-Julie

From: Claims
Sent: Thursday, 12 December, 2019 1:11 PM
To: Derrick Quok <derrick.q@budgetdirect.com.sg>
Cc: Loganathan Agoram <loganathan.a@budgetdirect.com.sg>
Subject: TPPD survey || C10004859/LA || OI (SJX7105R - Purple) - TP 1 (SKX7754E-claimant) - TP (SKX6213G) || Est: \$11,109.59 || Cheng Auto

Hi Derrick

TPPD survey assignment please at Cheng Auto

Thank you,
-Julie

From: CLAIMS@CHENGAUTO.COM <CLAIMS@CHENGAUTO.COM>
Sent: Thursday, 12 December, 2019 11:48 AM
To: Claims <claims@budgetdirect.com.sg>
Subject: SKX 7754E - MOHAMMED BAZLI BIN AZMY | DOA : 10/12/2019 | REF. NO. : NEW

Dear Sir/Madam,

We, the repairers for vehicle (SJX7754E) is filing a Third Party Claim against your insured (SJX7105R), please review the attached document.

Kindly arrange a surveyor for a pre-inspection.

We look forward to your prompt reply.

Please let us have the Claim Ref. No. for future correspondence.

Thanks & Best Regards,
Claims Department

Rachel Lai



CHENG AUTO BODYWORKS

HP: 8666 7775 | Office-Tel: 6631 0707 | Fax: 6316 2431

Reporting Centre

Address: 5 Soon Lee Street #01-60 Pioneer Point, Singapore 627607

Email: claims@chengauto.com

Workshop

Address: 5 Soon Lee Street #01-62 Pioneer Point, Singapore 627607

Email: cab@chengauto.com

Spraypainting

Address: 1 Soon Lee Street #06-41 Pioneer Centre, Singapore 627605

Email: cab@chengauto.com

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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	375B
Vehicle Details	
Vehicle No.:	SKX7754E
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Dec 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	P520338528
Chassis No.:	JM6BM42A8G0329313
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$18,044.00
Original Registration Date:	28 Dec 2015
First Registration Date:	28 Dec 2015
Transfer Count:	1
Actual ARF Paid:	\$13,044.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Dec 2025
PARF Rebate Amount:	\$9,783.00
Intended COE Rebate Details	
COE Expiry Date:	27 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$54,301.00
COE Rebate Amount:	\$32,697.00
Total Rebate Amount:	\$42,480.00

The information contained herein is correct as at 19 Dec 2019

OK

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	11/12/2019 10:49
Date Of Accident	10/12/2019 16:50
Exact Location Of Accident	AYE NEAR ALEXANDRA EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX7754E
Insured/Policyholder	
Name Of Registered Owner	MOHAMMED BAZLI BIN AZMY
NRIC No	S8505375B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96898458
Alternative Phone No	OFFICE-96898458
Vehicle Particulars	
Manufacturer	MAZDA
Model	3-1.4 SEDAN 1.5L SP.6EAT (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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT111572
Cover Note Number	
Driver	
Name of Driver	MOHAMMED BAZLI BIN AZMY
NRIC No	S8505375B
Date Of Birth	01/03/1985
Occupation	INDOOR
Date Of Driving Pass	24/09/2005
Driving Experience	14 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96898458
Fax Number	
Contact Number	OFFICE-96898458
Email Address	NOEMAIL

Address	BLK 196 WESTWOOD AVENUE #01-35
Postcode	648153
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
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)	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

On the 10/12/2019, at 1655Hrs I was traveling on the first lane along AYE towards city. I had driven past the Alexandra exit when the vehicle ahead of me applied brakes. I reacted immediately and applied brakes, managed to stop in time. As I was coming to a stop, vehicle B (SJX7105R) collided into the rear of my vehicle. Vehicle C was also involved in this incident, colliding into the rear of vehicle B.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJX7105R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DR. KHORSHED ALAM
NRIC/Passport Number	
Contact Number	96430147
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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)	

Accident Sketch Plan

SKETCH PLAN

Date of Accident: 10/12/2019

A : SKX7754E
B : SJX7105R
C : UNKNOWN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 10/12/2019, at 1655Hrs I was traveling on the first lane along AYE towards city. I had driven past the Alexandra exit when the vehicle ahead of me applied brakes. I reacted immediately and applied brakes, managed to stop in time. As I was coming to a stop, vehicle B (SJX7105R) collided into the rear of my vehicle. Vehicle C was also involved in this incident, colliding into the rear of vehicle B.

- ☐ Own Damage Claim
☒ Third Party Claim
☐ C/D/TP Claim at another workshop
☐ Reporting Only

DECLARATION

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

Policyholder's Signature

Date & Time: 10/12/2019 16:55

Driver's Signature

(If driver is not the policyholder)

Date & Time



Reporting Centre

Name

NRIC/ID No.

Accident Sketch Plan

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to rescind policy liability.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of 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 signature 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 if needed.
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 sharing 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
- (i) 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;
 - (ii) 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;
 - (iii) the information so collected under (a) above may be shared / disclosed:
 - (a) 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
 - (b) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 15/12/2021

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Policyholder's Signature

Name:

NRIC/ID No.:

I am fully aware that my insurer must have a 14-day period for me to decide on filing an Own Damage Claim.

TP / AUTO & General
Repair

DATE : 12/12/2019

REPAIR DETAILS		
REFERENCE		
Vehicle Reg No.	: SKX7754E	
Make & Model	: MAZDA / MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT	
Chassis No.	: JM6BM42A8G0329313	
Engine No.	: P520338528	
Manufactured Year	: 2015	
Labour	: REPAIRER'S	
TP Vehicle Reg No.	: SJX7105R	UNKNOWN
DOA & Location	: 10/12/2019	AYE NEAR ALEXANDRA EXIT
Our Ref	: SKX7754E	/ MOHAMMED BAZLI BIN AZMY

ESTIMATES OF PARTS

No.	Qty	Description	Part No.	Price
1	1	REAR BUMPER / DD		\$ 1,026.91
2	1	REAR BUMPER RETAINER RH / OR		\$ 39.14
3	1	REAR BUMPER RETAINER LH / OR		\$ 39.14
4	1	REAR BUMPER BRACKET RH X NAI		\$ 49.44
5	1	REAR BUMPER BRACKET LH X NAI		\$ 49.44
6	1	REAR BUMPER REFLECTOR RH ? X NAI		\$ 54.59
7	1	REAR BUMPER REFLECTOR LH ? X NAI		\$ 54.59
8	1	REAR BUMPER TOW COVER / MIS		\$ 18.54
9	1	REAR REINFORCEMENT ? / DD		\$ 581.95
10	1	END PANEL X R		\$ 546.93
11	1	END PANEL TOP GARNISH X NAI		\$ 92.70
12	1	BOOT LOGO X NAI		\$ 81.37
Sub-Total (\$\$)				\$ 2,634.74
SAAA List Item Discount 20% (\$\$)				\$ 526.95
Sub-Total (\$\$)				\$ 2,107.79

1795-68
-20%
1364.54

LABOUR

No.	Description	Price
1	LABOUR	\$ 600.00
2	SPRAYPAINTING	\$ 600.00
3	REMOVE AND REPLACE PARKING SENSOR PLUS TEST	\$ 100.00
Total Labour (\$\$)		\$ 6,990.00

490
400
X
800

MISCELLANEOUS ITEMS

No.	Description	Price
1	REAR BUMPER CLIPS	\$ 100.00
2	END PANEL SEALANT	\$ 100.00
3	ANTI RUST	\$ 100.00
4	PARKING SENSOR	\$ 250.00
Total Miscellaneous Items (\$\$)		\$ 1,285.00

30 APC
X NAI
30 APC
200 per SH
260
3957.79

Total Parts (S\$)	\$	2,107.79
Total Labour (S\$)	\$	6,990.00
Total Miscellaneous (S\$)	\$	1,285.00
Sub-Total (S\$)	\$	10,382.79
GST 7% (S\$)	\$	726.80
Grand Total (S\$)	\$	11,109.59

Steve (LKK)

8372 8813

Steve.chen@lkk.co.uk

WHL Mr L 19/12/19, 1.30 pm

3 chys

L/S

Ry AL SH

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:

P-1364.54

NI-260

L-800

2424.54

L/S-1939-63

=1950



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

Affiliated to Federation Internationale Des Experts En Automobile			
AUTO & GENERAL INSURANCE (S) PL		Ref : CS/AGI19021936/Eyd3n2	
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924		Date : 07-02-2020	
		Code : AGI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJX 7105R	Veh. Inspected	SKX 7754E
Policy No.		Coverage (\$)	0.00
Claim No.	C10004859/LA	Excess (\$)	0.00
Assign From	JULIE MANGUBAT	Assign Date	12/12/2019
2. Vehicle Particulars & Condition			
Make & Model	MAZDA 3	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	JM6BM42A8G0329313	Colour	RED
Odometer	64339	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	225/45 R17	MICHELIN	5 mm
L/H Front Tyre	225/45 R17	MICHELIN	5 mm
R/H Rear Tyre	225/45 R17	MICHELIN	5 mm
L/H Rear Tyre	225/45 R17	MICHELIN	5 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	10/12/2019	Inspection Date	19/12/2019
Survey held at	5 SOON LEE STREET #01-62 PIONEER POINT		
Repairer	CHENG AUTO BODYWORKS		
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:		3 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 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKX 7754E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	DENTED	1,026.91	1,026.91
1	REAR BUMPER RETAINER RH	BROKEN	39.14	39.14
1	REAR BUMPER RETAINER LH	BROKEN	39.14	39.14
1	REAR BUMPER BRACKET RH	NOT NECESSARY	49.44	-
1	REAR BUMPER BRACKET LH	NOT NECESSARY	49.44	-
1	REAR BUMPER REFLECTOR RH	NOT NECESSARY	54.59	-
1	REAR BUMPER REFLECTOR LH	NOT NECESSARY	54.59	-
1	REAR BUMPER TOW COVER	MISSING	18.54	18.54
1	REAR REINFORCEMENT	DENTED	581.95	581.95
1	END PANEL	TO REPAIR SEE LABOUR	546.93	-
1	END PANEL TOP GARNISH	NOT NECESSARY	92.70	-
1	BOOT LOGO	NOT NECESSARY	81.37	-
	LESS 20% DISCOUNT		-526.95	-341.14
			2,107.79	1,364.54
SPECIAL NETT ITEMS				
1	REAR BUMPER CLIPS (SN)	NECESSARY	100.00	30.00
1	END PANEL SEALANT (SN)	NOT NECESSARY	100.00	-
1	PARKING SENSOR (SN)	SHORTED	250.00	200.00
			450.00	230.00
LABOUR				
	LABOUR INCLUSIVE OF THE REPAIR OF END PANEL.		600.00	400.00
	SPRAYPAINTING.		600.00	400.00
	REMOVE AND REPLACE PARKING SENSOR PLUS TEST.	NOT NECESSARY	100.00	-
	ANTI RUST.		100.00	30.00
			1,400.00	830.00
GRAND TOTAL			3,957.79	2,424.54
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,950.00

Report Ref No. CS/AGI19021936/Eyd3n2

CHEN TSUE YEE

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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