Suivajor From (Person	: Pauline Than		MSI	T (Office)	Da	te/Time: 14.1	2. M 17019.
Estimated Co.				till to:			
To inspect Ve	S/TP RES / OD RI chicle No: SH	ES/EVA/INV	/ MV / CS		Insured:	SMH	64066
	m/= (hunni #01-05 OL A	mr Autopoint			Tel:	65425	119
Policy No: 3	911 990>mcx			Claim No:			
Sum Insured:				Excess:			
Make of Veh					D.O.A. 15.11-1019		
CA / REV Date/Time:	REP. / REV 241	HRS Person Cor		tim	1	LO.D. Endorsem	ent:
Date/Time	Action/Instruction	(V)E	Stinute				
	SMH 64-LC	×.					
_	SNC 39931	OSTRES (GLESS	*/Athital	(3)(#1 p3)(4)	fiese		

9	ASSIGNMENT	(JE 12/11 2073
	Veh No. 8HC 3997	T Yr Regn 2015 April
From: Date:	Type: M.Car / M.Cycle / Bus / Van /	
Estimated Cost	Truck / Trailer or	
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	14010-1400-1400-1400-1400	I40 cc 1685
To Inspect Vehicle No.	Golour Blue	A/C: Insured / Std / NI / NA
at Workshop m/s	50.000	T/Radio: Insured / Std / NI / NA
of .	24626	
insured.	VIALU 2	41UMFU067890
Policy No	Gen. Cond: Good / Fair / Poor / Bu	
Claims No.	×	
Sum Insured: Excess:	Steering: Interder / Jammed / Leak	
(Client's Record)	Brake: Interder / Jammed / Leak	MOS-0011077
Make of Veh:	Modi NII S/Rim / STD A/Rim	
	Tyre Size: F:	05 60 7 16
(Policy Condition)	R:	
Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LL	
repair at the time of inspection.	TOYO / YOKO or	Wistleke
Bat. or Market Value.	Front	Rear
IDAC Accident Rport Consistent? : Yes or No	R/Bal. S mm	R/Bal. 5 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. S mm	L/Bal. mm
Est Repairs: 4 days Res.: Yes or No	D.OA 15/12/2019	D.O.L 18/12/2019
Lum Sum: 30 % 3 Val.: Yes or No	Survey held at Chuny	ij AMK
	Des. of Damages : Frt / Rear / C	DIS I NIS I UIC I Rooftop or
CA / REV / REP. / 24 HRS Vehicle: II		
Date: Person Contacted:	The U/C / Chassis frame / I	Body Structure affected due to collision.
13/1/20 Sent Preli by MeriNe 27/11/2020 Juny 2/5 5650	n - vitu 4 degs of	(Red \$4833-00 46%)
	RECEIVED 2 2 JAN 2020	
Date/Time, File Pass 1s/2 : Prell. Report	Days Of Repair:	
; Final Report	Resurvey No. of Trip: 3	Survey Fee:
Cotoffine, File Return 167	🖂	Transportation: 200
22/126 Typist A	dd Fee: Site Insp (\$	s+Rssi!
, 1	: Interview (\$) Photo
Flore Congret :	Fech, Invs 13	Others
(Inne Sm) 18 16 \$ \$5650 = 1	Meet end (S	
		70701

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@ikkauto.com;assignments@ikkauto.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:

Pauline Tham

Date:

13 Jan 2020

Preliminary Advice

Insured Vehicle No : SMH6406C

TP Vehicle No

: SHC3997T

Accident Date

: 15/12/2019

Make

: HYUNDAI 140

Assignment Date

: 17/12/2019

Date of Inspection

: 18/12/2019

Est. Duration of Repair

: 4.00

Inspection At

: CHUNNI MOTOR WORK PTE LTD - AMK (HQ)

BLK 10 #01-05/06, AMK AUTOPOINT

SINGAPORE 568047

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	10,483.00
Revised Amount	:S\$	7,124.56
Check Items (Estimated)	:S\$	0.00
Total	:S\$	7,124.56

:S\$ Lump Sum Repair

Total Loss Consideration

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

Remarks

() The vehicle	is economical/not	economical for	repair.
---	---------------	-------------------	----------------	---------

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

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

	Notified	Est Supmitted	Adt Assuuned	Acti Ros	800.3	bermmed	Ins Authred	Stature		
Main	17 Dec 2019 12:55	and the second second	17 Dec 2019 17:01 Assign	TOS UKS				New Assig		
	Mairi	Re	ference		Claim Detail		Docume	ints	Show All	
CLAIM SI	BFOLDER DE	TAILS				[Creat	ed by insurer]	in the latest series of the la		
Insured:	ASIA EXP	RESS CAR RENT	AL PTE LTD, C	o. Reg. No.	2011168820					
Main Claimant:	COMFORT	TRANSPORTAT	ON PTE LTD,	Co. Reg. N	la.: 19930382	R				
Vehicle Re No.:	SHC399	SHC3997T			Date of Lo		15/12/2019 08:00 - :59 [56 Months and 13 Days From LTA Reg Date (Man Yr			
Claim Type	TP				Palicy/Cav Note No.:		29119902MCX (Comprehensive) Coverage: 25/03/2019 - 24/03/2020			
Vehicle Re No. (Insured):	SMH6406	ic			Policy No. (Claimant)					
					Excess:				_	
Repairer:	Chunni M	otor Work Pte Lt	d - Amk (HQ)	Blk 10 #01-	05/06, AMK A	topoint, 56	8047 Ang Ma Kio	- Tel: 6483601	6	
Handling Insurer:		urance (Singapo						ım - 6594 2545	1	
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Imm.A	dvice du	18/12/2019]			
Adj Asg. Remarks:	on WP. Liz	b: NR. Agree on S	JE. Assign: LKK	Auto Consu	Itants Pte Ltd.	Contact: M	s Lynn or Ms Iren	e @ 6542 5119	/ 6542 7162.	
ASSOCIA	TED MAIL RE	CEIVED						View All C	ompose Case Ma	
There are	no mail for this	case.								
ALL ASS	OCIATED TAS	sks=				View	All Search Tasks	Create New	Task Complet	

MCD619164955 / ComfortDelGro Engineering Pile Lid - Loyang ENTRY DATE & TIME: 15/12/2019 11:30 SUBMITTED BY: Janet Lim Stang Gek

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 17/12/2019 09:21

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for investigation.

- 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 ledgement 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.

arordian.	
	ACCIDENT STATEMENT
Date Of Report	16/12/2019 11:30
Date Of Accident	15/12/2019 08:55
Exact Location Of Accident	T4 BLVD X T4 WAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC3997T
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particules	
Manufacturer	HYUNDAI
Model	140
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Driver	
Name of Driver	LIM SHENG XIONG, AMOS
NRIC No	S8623261H

Date Of Birth 10/08/1986 Occupation OUTDOOR Date Of Driving Pass 02/11/2018

Driving Experience 1 YEAR AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-94372283

Fax Number Contact Number

EMail Address NOEMAIL Address

BLK 502 ANG MO KIO AVE 5

#06-3746

Postcode

560502

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - TAXI DRIVER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

YES NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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 * TYPE OF ACCIDENT :- HEAD TO SIDE

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMH6406C

Vehicle Make/Model/Colour

HONDA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

RH FRONT

No. Of Passenger (Including Driver)

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.
- 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 aforesald.
- 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:
 - 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.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

Policyholder's Signature

Park Carried Contract

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnells Signature

Name:

NRIC/FIN No.:

Loke Wei Yieng

			O Given L	0 /
	T4 way	> - \	١٣٥١	
				-
A: SHC 39977				/
B: 3MH 6406			1-1-	
		Ivd	1-1-/-	
		7		- 12
RIBE CIRCUMSTANCES OF THE AC	CCIDENT	272 (1	17
I STOPPED AT STOP	UNE AT TENE	FIC JUNC	from.	
	Les I		EN, WOULD F	ORWAR
SUGHTLY VEHICLE B				
UE OF VEHICLE B.				
		_	100	

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's bignature Name:

Loke Wei Yieng

NRIC/FIN No.:

CHUNNI MOTOR WORK PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHC 3997T

MAKE :

DATE: 16.12.2019

TEL : 6542 5119

MSIA

L	: HYUNDAI i40				2 6039	_	अध
ty	Parts Descri	ption/ Labour	Type	U	nit Price	- 4	Amount
	Radiator Grille Do Kee					S	251.00
	Radiator Grille H Emblen	1 broken		ł		\$	27.50
	Front Bumper Cover	V-				S	544.50
	Front Bumper Sponge +	•/W		1		S	99.20
	Front Bumper Reinforcen	nent st Dental				S	402.10
	Front Bumper Grille (LH)					S	93.60
	Front Bumper Grille Aird	Color Commercial A 770				S	26.20
	Front Bumper Centre Gril	0.40				S	178.60
	Front Bumper Centre Gril					S	80.00
	Front Bumper Bracket To			S	22.40	S	44.80
	Front Bumper Bracket (L.			s	24.60	S	49.20
	Headlamp Support Top C					S	222.60
	Headlamp Support Panel	Assy 2 14/Dental				S	907.40
	Headlamp Support Panel Headlamp (LH/RH)	inde hater		S	1,388.00	S	2,776.00
	Radiator to	TABLE		1	.,,,,,,,,,,	s	698.30
	Radiator Fan Blade, Cowl	ine Motor Assy				S	792.95
	Radiator Bracket (RH/LH			s	6.50	S	13.00
	Radiator Guard	7 114		S	20.00	150	40.00
	Horn Unit (LH/RH)			S	73.80	1.575	147.60
	Aircon Condenser	VH		3	75.00	S	927.50
	The state of the s	-0				5	1,032.50
	Inter Cooler Service (2)			On	10 22		25.90
	Inter Cooler Mounting (2			80	(9.70	S	229.70
	Hose B To Inter Cooler			10	18.20 F14.56	S	
	Hose C To Inter Cooler In	17.77		60	114.06	S	294.50 167.05
	Pipe To Inter Cooler					S	
	Pipe To Inter Cooler Outl	er MM				3	244.55
		SUB TOTAL				5	10,316.25
		LESS 20%				S	2,063.25
		DISCOUNTED TOTAL			1	S	8,253.00
		the Repairer of the following				Ť	ojare (100
		 To resurvey before latter spray pr 	inting				
		 To display damaged part(s) dure 					
	Labour Charge	 Parts prices are subject to confin Third party survey is on a 'Witho 		esis			
	Panel Beating	 No illegal modification(s) is allow 	ed			s	1,000.00
	Spray Painting Charge	 Supplementary item(s) must be it is subject to final approval from it 				S	500.00
			11000 1000 1000	-	710.00	5	50.00
	Wiring Charge	Acknowledged by Repairer			110.00	3	
	Towing Charge	Signature:				S	50.00
	Remove/Refix Aircon & I	CONTRACTOR OF THE PARTY OF THE			l .		150.00
	Diagnostic & Resetting T	Section 2015 and Committee of the Commit		71	24.56 5650 00	3	480.00
	18 13 2216 G 100			110	-1-0	e	2,230.00
	Med Andr) TOTAL LABOUR		45	2620.00	3	2,230.00
	1 Sm. 40	ESTIMATE TOTAL		2		•	10,483.00
		ESTEMATE TOTAL				3	10,403.00

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

Adjuster Report

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/MSG19022257/DYF3N2

Date:

23/01/2020

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

29119902MCX

Claimant Vehicle

SHC3997T

Insured Vehicle No:

SMH6406C

No:

Date of Loss:

15/12/2019

Nature of Claim:

TP

Claim No: 615030

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHC3997T

Make & Model:

HYUNDAI I40, 1.7 L CRDI AT ABS AIRBAG 4DR (A) Engine No:

D4FDEU495780

Reg. Date:

02/04/2015 (Man. Year: 2015)

Chassis No:

KMHLB41UMFU067890

Colour:

Odometer:

581968 km

Engine Capacity: Market Value/New Car Price:

1685 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable):

Engine Modification:

No

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

205/60R16

Rear Tyre Size:

205/60R16

Front Left Side: Front Right Side: West Lake 5 mm

Rear Left Side: Rear Right Side: West Lake 5 mm West Lake 5 mm

West Lake 5 mm The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
Parts		8,253.00	6,414.56	1,838.44	22.28
Miscellaneous Items		0.00	0.00	0.00	
Labour		2,230.00	710.00	1,520.00	68.16
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	10,483.00	7,124.56	3,358.44	32.04
	Approved Total (Overridden) (S\$)		5,650.00		
	(S\$)	10,483.00	5,650,00	4,833.00	46.10
	+ GST 7.00/7.00% (S\$)	733.81	395.50	338.31	46.10
	Nett Amount (S\$)	11,216.81	6,045.50	5,171.31	46.10

INSPECTION

Date of Assignment:

Date Inspected:

17/12/2019

18/12/2019

Inspected At:

Chunni Motor Work Pte Ltd - Amk (HQ)

Blk 10 #01-05/06, AMK Autopoint

Singapore 568047

Estimated Period of Repair:

4.0 days

Adjuster: **BRYAN TANI** Manager:

YVONNE WONG YIN CHENG

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.

Reference

REPAIR DETAILS

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 23 Jan 2020)

Parts: 143 HYUNDAI I40 1.7 L CRDI AT ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: (Unsubmitted, no print-code for SHC3997T)

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 *.

Recomi	mend	ed P	arts
LUCCUIII	110110	Cui	ui to

No.	Qty Pa	rt No. Particulars	Condition	Repairer's	Amount
1	1:	*RADIATOR GRILLE	Broken	251.00 FL	*251.00 FL
2	1	*RADIATOR GRILLE H EMBLEM	Broken	27,50 FL	*27,50 FL
3	1	*FRONT BUMPER COVER	Torn	544,50 FL	*544.50 FL
4	1	*FRONT BUMPER SPONGE	Torn	99.20 FL	*99.20 FL
5	1	*FRONT BUMPER REINFORCEMENT	Bent/Dented	402.10 FL	*402,10 FL
6	1	*FRONT BUMPER GRILLE (LH)	Dislodged	93.60 FL	*93.60 FL
7	1	*FRONT BUMPER GRILLE AIRDUCT (LH)	Not Necessary	26.20 FL	*-FL
8	1	*FRONT BUMPER CENTRE GRILLE	Broken/Deformed	178.60 FL	*178.60 FL
9	1	*FRONT BUMPER CENTRE GRILLE TOP GARNISH, LH	Cut	80.00 FL	*80.00 FL
10	2	*FRONT BUMPER BRACKET TOP (LH/RH)	Not Necessary	44.80 FL	*-FL
11	2	*FRONT BUMPER BRACKET (LH/RH)	Not Necessary	49.20 FL	*-FL
12	1	*HEADLAMP SUPPORT TOP COVER	Not Necessary	222.60 FL	*-FL
13	1	*HEADLAMP SUPPORT PANEL ASSY	Bent/Dented	907.40 FL	*907.40 FL
14	2	*HEADLAMP (LH/RH)	Mounting Broken	2,776.00 FL	*2,776.00 FL
15	1	*RADIATOR	Bent	698.30 FL	*698.30 FL
16	1	*RADIATOR FAN BLADE, COWLING, MOTOR ASSY	Not Necessary	792.95 FL	*-FL
17	2	*RADIATOR BRACKET (RH/LH)	Not Necessary	13.00 FL	*-FL
18	2	*RADIATOR GUARD	Not Necessary	40.00 FL	*-FL
19	2	*HORN UNIT (LH/RH)	Not Necessary	147.60 FL	*-FL
20	1	*AIRCON CONDENSER	Bent	927.50 FL	*927.50 FL
21	1	*INTER COOLER	Punctured	1,032.50 FL	*1,032.50 FL
22	1	*INTER COOLER MOUNTING (2 PCS)	Not Necessary	25.90 FL	*-FL
23	1	*HOSE B TO INTER COOLER	Not Necessary	229.70 FL	*-FL
24	1	*HOSE C TO INTER COOLER INLET	Not Necessary	294.50 FL	*-FL
25	1	*PIPE TO INTER COOLER	Not Necessary	167.05 FL	*-FL
26	1	*PIPE TO INTER COOLER OUTLET	Not Necessary	244.55 FL	*-FL
F=Fr	anchise par	t. L=ListRemDisc.	Sub Total (S\$)	10,316.25	8,018.20

Sub Total (S\$) 10,316.25 8,018.20 - List Item Discount on L Items 20.00/20.00% (S\$) 2,063.25 1,603.64

Total Parts (S\$) 8,253.00 6,414.56

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	1,000.00	400.00
2	SPRAY PAINTING CHARGE	New	500.00	200.00
3	WIRING CHARGE	New	50.00	30.00
4	TOWING CHARGE	New	50.00	0.00
5	REMOVE/REFIX AIRCON & REFILL GAS	New	150.00	80.00
6	DIAGNOSTIC & RESETTING TO ERASE FAULT CODE	New	480.00	0.00
		Gross Labour Cost (S\$)	2,230.00	710.00
_	Report was unsubm	itted during this print-out.		

< END OF ESTIMATES >