

ASS. REC. BY:

REF

83/INC19020893/R19d3-1

Special Instructions

Survey: Result

ASSIGNMENT (Office)

From Person: Motor Income Insurance of INC Date/Time: 13/01/2020

Estimated Cost: Bill to:

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

To inspect Vehicle No: SLS 6866L Insured: SMN 787K

at Workshop in/s Million Auto Tel: 6264 9091

of 4 Penjuru place # 01-12

Policy No: Claim No: MT/1072594-002

Sum Insured: Excess:

Make of Veh: D.O.A. 21/11/2019  
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10:32am 26/11/19 Person Contacted: Mr. Chang Vehicle IN/OUT

Date/Time	Action/Instruction
	Johny X
	SLS 6866L - X
	SMN 787K - COH/A1619020893/A163 D.O.A: 21/11/2019
	Dismantle: 26/11/2019
	After repair: 29/11/2019

*[Signature]*  
16/1/2020

16/01/20 submit LS \$1600, 3 days CRD \$2700, 68%.

RECEIVED 16 JAN 2020

ASSIGNED BY:

PRS

REF:

INC

3830

# ASSIGNMENT

From:

Date:

26/11/19

Estimated Cost:

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

To inspect Vehicle No:

SLS6866L

at Workshop m/s

Million Auto

of

4 penjun place # 01-12 penjun

Insured

Policy No

Claims No

Sum Insured

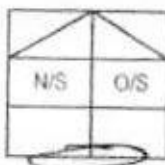
Excess:

(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 Rpt:

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 lup

Date:

Person Contacted

Vehicle: IN / OUT

Veh No:

SLS 6866L

Yr Regn:

2017 / 949

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

Truck / Trailer or

Make:

Audi A3 Sportback 1.0 TFSI 999

Colour:

Red

A/C:

Insured / Std / NI / NA

Sp Reading

26913

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WGU 2228V 01A W0-2924

Gen. Condt: Good / ☒ Fair / Poor / Burnt

Steering: ☒ Inorder / Jammed / Leaked / Burnt or

Brake: ☒ Inorder / Jammed / Leaked / Burnt or

Modi: Nil / ☒ S/Rim / STD A/Rim or

Tyre Size:

F:

205/55R16

R:

BS / DUN / EXNOVA / ☒ GY / FS / LIZA / MIC / 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.

26/11/19

D.O.A.

26/11/19

Survey held at

MILLION AUTO

Des. of Damages: Fnt / ☒ Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Date/Time: File Pass in?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time: File Return in?

2)

Days Of Repair:

Resurvey No. of Trip:

2

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: (Additional) (\$

Survey Fee:

Transportation:

3 + PS. \$

Phone:

(Other):

Report Format:

PRS

Version: 1.0 (1.0.0.0)

## 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	23/11/2019 11:30
Date Of Accident	21/11/2019 17:45
Exact Location Of Accident	CTE TOWARDS SLE (BEF AMT AVE 1)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS6866L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIM CHEE SENG
NRIC No	S1615383D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91072191
Alternative Phone No	OFFICE-NOPHONE
<b>Vehicle Particulars</b>	
Manufacturer	AUDI
Model	A3-1.4 TFSI (A)
Exact Purpose for which vehicle was being used at time of accident	PTE 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
<b>Insurance Company</b>	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCVSN3051891901
Cover Note Number	
<b>Driver</b>	
Name of Driver	LIM WEI CHE@SANTI
NRIC No	S9248330D
Date Of Birth	26/12/1992
Occupation	OUTDOOR
Date Of Driving Pass	26/08/2011
Driving Experience	8 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91072191
Fax Number	
Contact Number	

Address	BLK 172 BUKIT BATOK WEST AVE 8 #20-341
Postcode	650172
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	CHAIN COLLISION
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	4
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

#### 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	SMN787K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CAI ZHONG LING
NRIC/Passport Number	S8835729I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLX6562L
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

HO TUCK CHUEN

NRIC/Passport Number

S1610557J

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SKJ9730J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

AMIR MD

NRIC/Passport Number

G7364842X

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

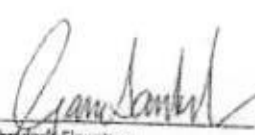
IMPORTANT NOTICE


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.
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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:

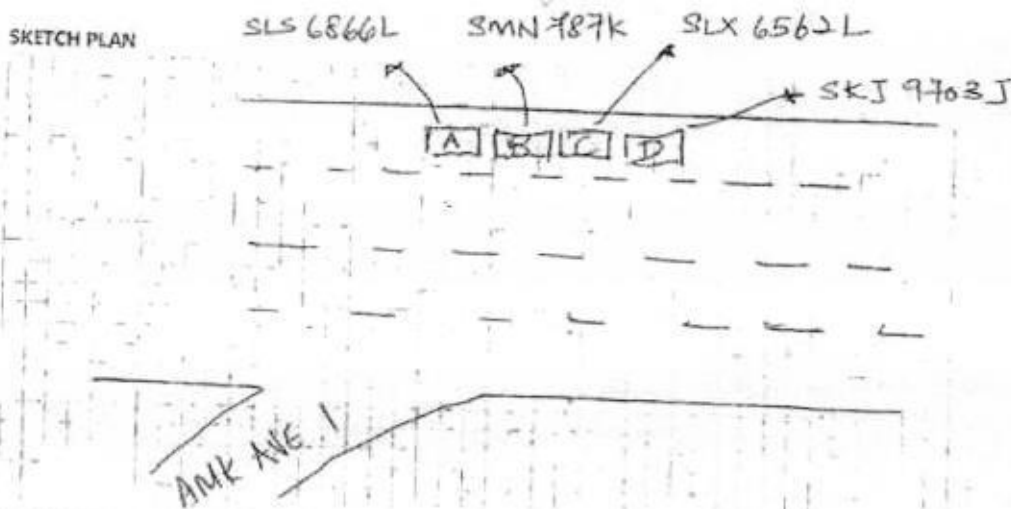
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN ORAL OR IMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

# Sketch Plan Pg. 2

SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At around 1744hrs on 21/11/19 along CTE toward SLE near AMK Ave 1 exit  
 I was driving car (SLS 6866L) along the first lane. The car in front had come to a stop due to the jam ahead and so did I. Shortly after coming to a stop, I was then hit from the back by car B (SMN 787K) Driven by Cai Zhongling (BRIC 38P 35729I). I got off my car and noted that there was a 4 cars pile up. With car D (SKJ 9703J) driven by AMIR MD (G7364842X) colliding into car C ~~SLX 6562L~~ SLX 6562L driven by Ho Turk Chuen (SL610557J) who collided into car B who finally hit my car A. We then exchanged particulars and agreed to claim for damages against insurance.

## DECLARATION

(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:

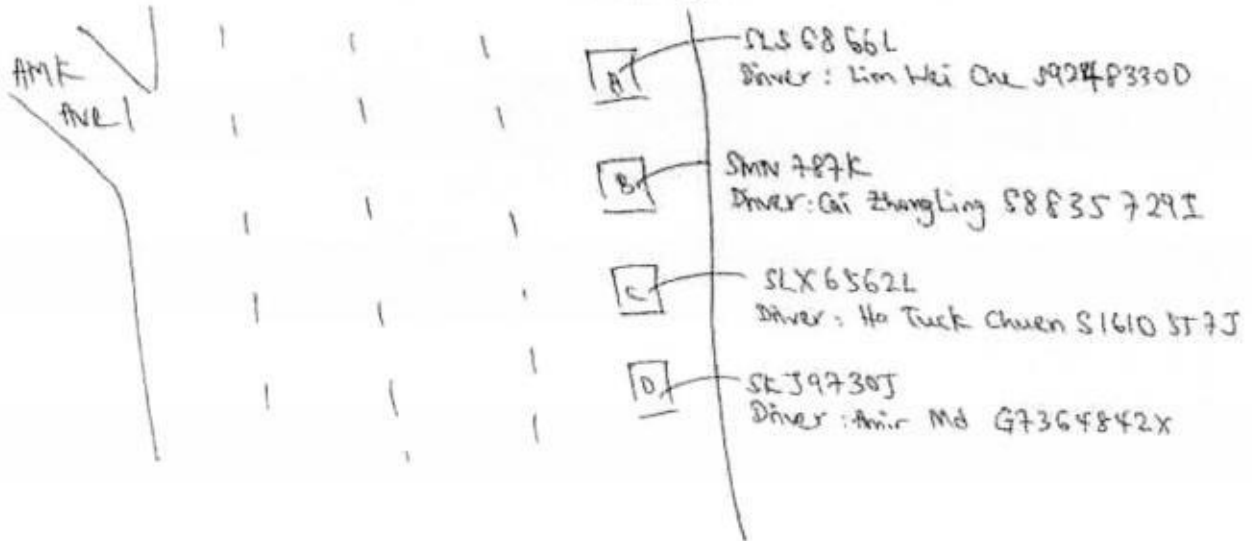
- ☐ Claim own policy
- ☐ Claim third party
- ☒ Claim OO / TP / other works hop
- ☐ For record purpose

Policy No. JPMPCSN 3051871901

Insurer CHIA Vch No SLS 6866L

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

Sketch Plan Pg. 3



around  
At 1744h along CTE towards SLE near the AMK Ave 1 exit,  
I was driving car A (SLX 6866L) along the first lane.  
The cars in front had come to a stop due to the jam ahead and  
so did I. <sup>Shortly</sup> After coming to a stop, I was then hit from the back by  
car B. I ~~got~~ got off my car and got down and noted that there was  
a 4 car pileup, with car D colliding into car C who collided into car  
B who finally hit my car, car A.  
We then exchanged particulars and agreed to claim for damages  
against ~~the~~ insurance.

Santi Lim Wei Che  
22/11/19



# PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Tel: 6315 1239, Fax: 6315 3298, Mobile: 9061 0543

Lim Chee Seng  
Blk 172 Bukit Batok West Ave 8  
#20-341  
Singapore 650172

Invoice no:	POS0493/19
Date:	16 December 2019
Report no:	493M1119.MAS
Vehicle :	SLS6866L

## INVOICE

No	Item Description	Qty	Unit Price	Total Amount(\$)
01	Being charges for the inspection of the accident vehicle, transport and photographs.			601.00
SGD(\$): Six Hundred and One only			Grand Total:	601.00

"Cheque should be crossed and made payable to "Pro-Option Services"

PRO-OPTION SERVICES



Authorised Signature

# PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Fax: 6315 3298, Mobile: 9061 0543

## ACCIDENT VEHICLE INSPECTION REPORT

Report no : 493M1119.MAS  
Vehicle no : SL56866L

### **1 REFERENCE**

Date of inspection : 25 November 2019  
Requested by : Lim Chee Seng  
Blk 172 Bukit Batok West Ave 8  
#20-341  
Singapore 650172  
Type of survey : Independent  
Repairer : Million Auto Service  
No. 4 Penjuru Place, #01-12, 2-8 Penjuru Tech Hub Singapore 608783  
Date of accident : 21 November 2019

### **2 VEHICLE DATA**

Make/model : AUDI A3 SPORTBACK 1.0 TFSI S TRONIC (LED)  
Chassis no : WAUZZZ8VOJA002924  
Engine no : CHZ399357  
Date of registration : 11 Aug 2017  
Engine capacity : 999 cc  
Colour : Red

### **3 STATIC CONDITION CHECK**

Steering : Serviceable  
Foot brakes : Serviceable  
Hand brakes : Serviceable  
Paintwork : Good  
General Condition : Good

### **4 TIRE CONDITION CHECK**

	<u>RH/MAKE</u>	<u>LH/MAKE</u>	<u>SIZE</u>
Front tread	: 7 mm/Goodyear	7 mm/Goodyear	205/55R16
Rear tread	: 7 mm/Goodyear	7 mm/Goodyear	205/55R16

### **5 BRIEF DESCRIPTION OF DAMAGE**

Rear boot lid bent/distorted, rear bumper dented/squashed/deformed, rear bumper reinforcement bent, rear end panel bent, etc. Please see para. 8 of this report for more details.

### **6 REMARKS**

This inspection is carried out on a "WITHOUT PREJUDICE" basis and I have not authorized any repairs.

### **7 RECOMMENDATION**

Cost of repairs : \$4,000.00 (lump sum)  
Estimated no of days : Six (6)

## 8 ASSESSMENT OF DAMAGE AND COSTS

Report no: 493M1119.MAS

Vehicle no: SLS6866L

### A SPARE PARTS

Description	Qty	Assessed Condition	Repairer's Amount	Revised Amount
Rear boot lid	1	bent/distorted	1,780.00	1,780.00 Xnn
Rear boot lid "A3" emblem	1	necessary	85.00	85.00 Xnn
Rear boot lid "Audi" logo	1	necessary	95.00	95.00 Xnn
Rear boot lid "TFSI" emblem	1	necessary	85.00	85.00 Xnn
Rear bumper	1	dented/squashed/deformed	920.00	920.00
Rear bumper reinforcement	1	bent	410.00	410.00
Rear bumper side retaining bracket LH	1	bent/cracked	96.00	96.00 Xsv
Rear bumper side retaining bracket RH	1	serviceable	96.00	0.00 Xsv
Reversing sensor set	1	serviceable	620.00	0.00 Xsv
Rear end panel	1	to repair	910.00	0.00 Xsv
		Subtotal of the above	5,097.00	3,471.00 1330
		Discount 10%	509.70	347.10 10%
(Special nett)		Subtotal 1:	4,587.30	3,123.90 1197
Rear windscreen sealant	1	necessary	80.00	80.00
		Subtotal 2:	80.00	80.00
		Total cost of parts:	4,667.30	3,203.90

### B LABOUR

To check wiring at the affected areas for condition and repair where needed.	40.00	30.00 Xnn
Panel beating charges to dismantle and remove all damaged parts, renew and install the same; to cut out the damaged body, renew and weld the same; to knock and reshape surrounding panels back to shape and alignment.	1,200.00	600.00 200
Spray paint all affected parts and repaired areas – rear bumper, rear boot lid, rear end panel, etc.	1,000.00	750.00 200
To apply anti-rust undercoat for the affected areas.	120.00	60.00 Xnn
To remove and reinstall reverse sensors and test for proper sensing function.	150.00	120.00 60
To remove and refit rear windscreen glass.	150.00	120.00 Xnn
To remove and transfer rear boot lid inner attachments and electrical wirings.	120.00	90.00 Xnn
		460
	Total cost of labour:	2,780.00 1,770.00
	Total cost of repair:	7,447.30 4,973.90

1197

460

1657

20%

1325.60

48-1,300

3 days

Report no: 493M1119.MAS  
Vehicle no: SLS6866L

**9 CONCLUSION**

The revised or adjusted cost of repairs to restore the vehicle is

\$4,973.90

(a) The final cost of repair based on lump sum repairs would be

**\$4,000.00**

(b) The estimated number of days for the repairs would be  
(1<sup>st</sup> Reinspection conducted on 26<sup>th</sup> November 2019)  
(Post Repair Inspection conducted on 30<sup>th</sup> November 2019)

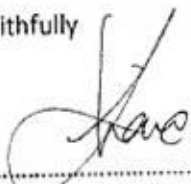
**Six (6)**

*The above recommendations in my view are fair and reasonable for the restoration of the vehicle to its pre-accident condition.*

**Note: Lump Sum Repair Basis**

*This means the repairer is allowed to replace the damaged parts with used, reconditioned or new parts, or repair it to a roadworthy condition.*

Yours faithfully

  
.....  
Liaw Leong San  
Licensed Automotive Appraiser

Dated: 16 December 2019

**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

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref : CS3/INC19020893/R1qd3s2-1

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date : 17-01-2020

189556

ATTN: JULIANA LEE

Code : INC

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	SMN 787K	Veh. Inspected	SLS 6866L
Policy No.		Coverage (\$)	0.00
Claim No.	MT/10725944-002	Excess (\$)	0.00
Assign From	MOTOR INCOME INSURANCE	Assign Date	13/01/2020

**2. Vehicle Particulars & Condition**

Make & Model	AUDI A3 SPORTBACK 1.0 TFSI	c.c	999
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	WAUZZZ8V0JA002924	Colour	RED
Odometer	26913	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	205/55 R16	GOODYEAR	6 mm
L/H Front Tyre	205/55 R16	GOODYEAR	6 mm
R/H Rear Tyre	205/55 R16	GOODYEAR	6 mm
L/H Rear Tyre	205/55 R16	GOODYEAR	6 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.  
DAMAGES SEE DETAILS.

**5. General Information**

Accident Date	21/11/2019	Inspection Date	26/11/2019
Survey held at	MILLION AUTO SERVICE 4 PENJURU PLACE #01-12 2.8 PENJURU TECH HUP SINGAPORE 608782		

**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 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLS 6866L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BOOT LID	NOT NECESSARY	1,780.00	-
1	REAR BOOT LID "A3" EMBLEM	NOT NECESSARY	85.00	-
1	REAR BOOT LID "AUDI" LOGO	NOT NECESSARY	95.00	-
1	REAR BOOT LID "TFSI" EMBLEM	NOT NECESSARY	85.00	-
1	REAR BUMPER	DENTED / SQUASHED / DEFORMED	920.00	920.00
1	REAR BUMPER REINFORCEMENT	BENT	410.00	410.00
1	REAR BUMPER SIDE RETAINING BRACKET LH	SERVICEABLE	96.00	-
1	REAR BUMPER SIDE RETAINING BRACKET RH	SERVICEABLE	96.00	-
1	SET REVERSING SENSOR	SERVICEABLE	620.00	-
1	REAR END PANEL	SERVICEABLE	910.00	-
	LESS 10% DISCOUNT		-509.70	-133.00
			4,587.30	1,197.00
<b>SPECIAL NETT ITEMS</b>				
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	80.00	-
			80.00	-
<b>LABOUR</b>				
	TO CHECK WIRING AT THE AFFECTED AREAS FOR CONDITION AND REPAIR WHERE NEEDED.	NOT NECESSARY	40.00	-
	PANEL BEATING CHARGES TO DISMANTLE AND REMOVE ALL DAMAGED PARTS, RENEW AND INSTALL THE SAME; TO CUT OUT THE DAMAGED BODY, RENEW AND WELD THE SAME; TO KNOCK AND RESHAPE SURROUNDING PANELS BACK TO SHAPE AND ALIGNMENT.		1,200.00	200.00
	SPRAY PAINT ALL AFFECTED PARTS AND REPAIRED AREAS - REAR BUMPER, REAR BOOT LID, REAR END PANEL, ETC.		1,000.00	200.00
	TO APPLY ANTI-RUST UNDERCOAT FOR THE AFFECTED AREAS.	NOT NECESSARY	120.00	-
	TO REMOVE AND REINSTALL REVERSE SENSORS AND TEST FOR PROPER SENSING FUNCTION.		150.00	60.00
	TO REMOVE AND REFIT REAR WINDSCREEN GLASS.	NOT NECESSARY	150.00	-

Report Ref No. CS3/INC19020893/R1qd3s2-1



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TEL: 6256 3561 FAX: 6256 4315

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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE AND TRANSFER REAR BOOT LID INNER ATTACHMENTS AND ELECTRICAL WIRINGS.	NOT NECESSARY	120.00	-
			2,780.00	460.00
GRAND TOTAL			7,447.30	1,657.00
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,600.00

Report Ref No. CS3/INC19020893/R1qd3s2-1

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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