

ASS. REC. BY:

REF:

CS/INC20002805/Hs83

Special Instruction:

Surveyor: Hock Ann

ASSIGNMENT (Office)

From (Person): Cynthia Ang of INC. Date/Time: 18/2/2020

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: PC 6855 F Insured: GBB9320Hat Workshop m/s SK Automobile Tel: 67021555 67395155of 8 Kaki Bukit Ave 4 #08-46Policy No: _____ Claim No: MT/1084799-001

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 11/2/2020
(Client's Record)CA / REV / REP. / REV 24 HRS ^{imp} Keate H.O.D. Endorsement: _____Date/Time: 18/2 Person Contacted: Chric Vehicle IN / OUT

Date/Time	Action/Instruction
	<u>Estimate (✓)</u>
	<u>PC 6855 F - NA / INC20002341 / Z4 DOA: 11/2/2020</u>
	<u>GBB9320H - X</u>

ASS. REC. BY: HANN

REF:

INC

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: PC 6855Eat Workshop m/s SK Automobile.

of _____

Insured: _____

Policy No. _____

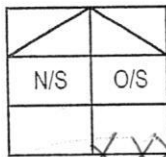
Claims No. _____

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: PC 6855E Yr Regn: ms, ch.

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

Truck / Trailer or

Make: T. Huan C.C. msColour: white A/C: Insured / Std / NI / NASp. Reading: 160733/km T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LDH223 0034486

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

R: 195/R15C

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

TOYO / YOKO or

Front HABILEAD Rear HABILEADR/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 11/2/20 D.O.I. 18/2/20Survey held at SK AutomobileDes. 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
	Hock Ann Confirmed L/S \$3,900/- @ 6 days NO down
	with Huey Lee. C \$16,098.25 Red - 81% 7 down.
	to NON point COE PART, owner IN wrong
	Hock Ann
	Dis check parts prices
	WV -
	PV - my data
	NV -

Date/Time, File Pass to?



Preli. Report



Final Report

1) Type 4
Date/Time, File Return to?

2) _____

Days Of Repair: 6Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Report Format:

Lump Sum / L/S: (\$ 3,900/- L/S)

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Cc: Toh Choon Hin; Thio Tse Kiat

Subject: TP CASES FARMED OUT TO LKK ON 18/02/2020

Dear LKK,

Please assist to survey the following vehicles as per Mr Toh's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	OI VEH	DOA	Additional Remarks
1	Chryllis Quah	MT/1084583-001	SMM1490P	SK AUTOMOBILE PTE LTD	48 Toh Guan Road East # 01-121 Enterprise Hub Singapore 608586	Winson / 62660555	GBJ8605B	14/02/2020	
2	Helena Tan	MT/1084612-002	GBD275D	WOON MENG MOTOR PTE LTD	50 BUKIT BATOK STREET 23 #01-06 MIDVIEW BUILDING SINGAPORE 659578	/ 63161131	GBB5975U	15/02/2020	
3	Charlotte Chew	MT/1084714-002	PC6504T	SK AUTOMOBILE PTE LTD	8 KAKI BUKIT AVENUE 4 #08-46 PREMIER@KAKI BUKIT	CHRIS / 6702 1555	GBJ6751A	17/02/2020	
4	David Phua	MT/1084799-001	PC6855E	SK AUTOMOBILE PTE LTD	8 KAKI BUKIT AVENUE 4 #08-46 PREMIER@KAKI BUKIT	CHRIS / Julie / 6702 1555	GBB9320H	11/02/2020	6789 5155
5	Charlotte Chew	MT/1082747-002	SMK1259C	SK AUTOMOBILE PTE LTD	8 KAKI BUKIT AVENUE 4 #08-46 PREMIER@KAKI BUKIT	Julie / 6789 5155	SLQ976C	03/02/2020	9623 4440 / 9099 6204
6	Cyndie Yong	MT/1084738-001	SLK6383E	XIN HUA WORKSHOP	8 KAKI BUKIT AVENUE 4 #08-40 PREMIER @ KAKI BUKIT SINGAPORE 415875	Eric / 8222 8966	SKA2577D	15/02/2020	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

With Regards

Cynthia Ang

Admin Assistant

Operations, Motor & Personal Lines

T +65 6430 7900

www.income.com.sg



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in wit yo

PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

Nivitha (LKK Auto)

From: Cynthia Ang <Cynthia.Ang@income.com.sg>
Sent: Tuesday, 18 February 2020 9:53 AM
To: 'assignments@lkkauto.com'; Admin-D (LKKAuto)
Cc: Toh Choon Hin; Thio Tse Kiat
Subject: TP CASES FARMED OUT TO LKK ON 18/02/2020

Dear LKK,

Please assist to survey the following vehicles as per Mr Toh's instruction :-

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2			GBD275D	WOON MENG MOTOR PTE LTD	50 BUKIT BATOK STREET 23 #01-06 MIDVIEW BUILDING SINGAPORE 659578	/ 63161131			
3			PC6504T	SK AUTOMOBILE PTE LTD	8 KAKI BUKIT AVENUE 4 #08-46 PREMIER@KAKI BUKIT	CHRIS / 6702 1555			
4			PC6855E	SK AUTOMOBILE PTE LTD	8 KAKI BUKIT AVENUE 4 #08-46 PREMIER@KAKI BUKIT	CHRIS / Julie / 6702 1555			6789 5155
5		MT/1082747-002	SMK1259C	SK AUTOMOBILE PTE LTD	8 KAKI BUKIT AVENUE 4 #08-46 PREMIER@KAKI BUKIT	Julie / 6789 5155			9623 4440 / 9099 6204
6			SLK6383E	XIN HUA WORKSHOP	8 KAKI BUKIT AVENUE 4 #08-40 PREMIER @ KAKI BUKIT SINGAPORE 415875	Eric / 8222 8966			

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

With Regards

Cynthia Ang

Admin Assistant

Operations, Motor & Personal Lines

T +65 6430 7900

www.income.com.sg

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	11/02/2020 13:42
Date Of Accident	11/02/2020 08:30
Exact Location Of Accident	PIE (CHANGI) AFTER SIMEI AVE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC6855E
Insured/Policyholder	
Name Of Registered Owner	LEK ENG KEE
NRIC No	SXXXX787D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88582121
Alternative Phone No	OFFICE-88582121

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	BUS

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5115172538
Cover Note Number	

Driver

Name of Driver	NG KIAN PENG
NRIC No	SXXXX357G
Date Of Birth	05/01/1968
Occupation	OUTDOOR
Date Of Driving Pass	17/11/2014
Driving Experience	5 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98300986
Fax Number	
Contact Number	OFFICE-98300986
Email Address	NOEMAIL

Address	149 PASIR RIS GROVE #07-78
Postcode	518139
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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?	YES
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)	9

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200211/7007.

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	GBB9320H
Vehicle Make/Model/Colour	NISSAN NV200
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name NG KIAN PENG

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? PC6855E

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

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 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 reputate 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:

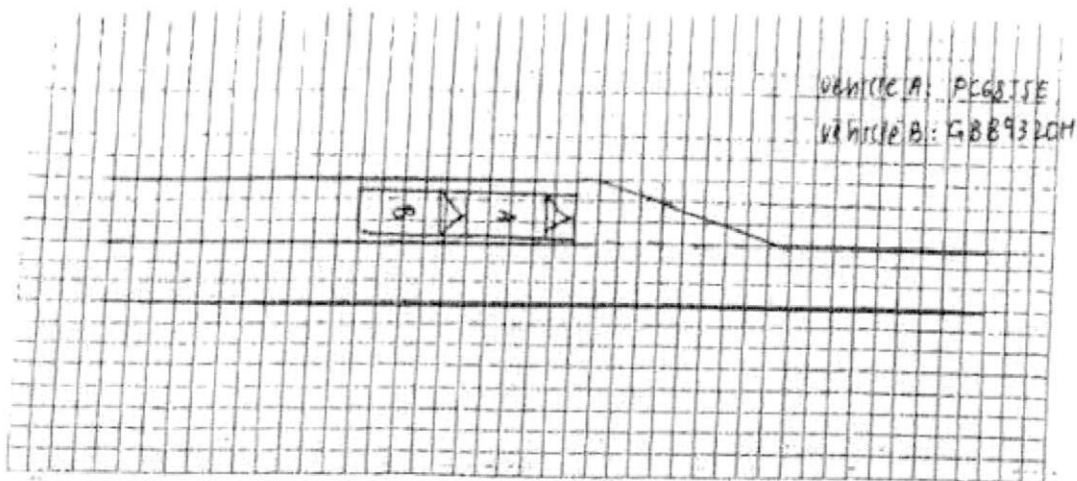
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my Insurer (collectively the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

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

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

Accident Sketch Plan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

DECLARATION

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

Policyholder's Signature

Date & Time:

Witness (if applicable) Name

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200211/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No: T/20200211/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/02/2020 12:25		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: NG KIAN PENG			Address: 149 PASIR RIS GROVE #07-78 SINGAPORE 518139		
ID Type / ID No.: NRIC NO / S6801357G			Contact No.: Home/Office: Mobile: 98300986		
Nationality: SINGAPORE CITIZEN			Email: wallacegin@gmail.com		
Sex: Male	Age: 52	Date of Birth: 05/01/1968	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: DRIVER		Driving Licence Information: Class: 2B,3		Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/02/2020 08:30	Type of Location: Straight Road
Location: SIMEI AVENUE				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBB9320H	Van	NISSAN	NV200	Silver	Slightly Damaged	0
PC6855E	Van	TOYOTA	HIACE		Slightly Damaged	8

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



T/20200211/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20200211/7007

CONTINUATION OF REPORT

Driver			
Name	NG KIAN PENG	ID No.	S6801357G
Related Vehicle	PC6855E (Van)	Contact No.	98300986
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	11/02/2020	Date Discharge	11/02/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

ON THE STATED TIME AND DATE, I WAS TRAVELLING ON MY VEHICLE BEARING CARPLATE NUMBER PC6855E. I WAS EXITING PIE CHANGI TOWARDS SIMEI, AFTER THE BEND COMES A SLIP ROAD TO MERGE INTO SIMEI AVENUE. WHICH I SLOWED DOWN TO CHECK CLEAR OF THE ONCOMING TRAFFIC BEFORE I CAN PROCEED FURTHER. SUDDENLY, I FELT A GREAT IMPACT FROM THE REAR. I ALIGHTED TO REALISE THAT VEHICLE B BEARING CARPLATE NUMBER GBB9320H HAD REAR ENDED ME. MY FOREHEAD HIT ONTO THE ROOF OF MY VEHICLE, AND I FELT PAIN ON MY NECK AND LOWER BACK AFTERWARDS IN WHICH I CONSULTED A DOCTOR AND WAS GIVEN 5 DAYS MC.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200211/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000

3 of 3

Report No. T/20200211/7007

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
JUREMAH BINTE AHMAD
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
11/02/2020 12:25

Classification Of Case:

X

SK Automobile Pte Ltd
(Co Reg. No. 201500047H)
23 Kaki Bukit Ave 4, #03-01
Vicom Inspection Centre (S415933)
Tel: 6789 5155 Fax : 6783 5155

TO	: NTUC INCOME	DATE	: 17-Feb-20
ATTENTION	: MOTOR CLAIMS DEPT	JOB TYPE	: T/P CLAIM
ESTIMATE REPORT :			
<u>OWNER'S PARTICULAR</u>		<u>VEHICLE DETAILS</u>	
NAME	:	VEHICLE NO	: PC6855E
ADDRESS	:	MODEL	: TOYOTA HIACE
TEL. NO.	:	CHASSIS NO	:
OWNER'S INSURANCE :			
POLICY NO.	:		
<u>ACCIDENT DETAILS</u>		DATE	:
		TIME	:
THIRD PARTY REQUESTOR / CONTACT : CHRIS 81210478			

QUOTATION SUMMARY

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	REAR SIDE PANEL RH X (R)	1	\$ 1,389.00	\$ 1,389.00
2	REAR SIDE PANEL INNER TRIM X (SVC)	1	\$ 1,425.00	\$ 1,425.00
3	REAR SIDE PANEL AIR VANT R/H ✓ CNA	1	\$ 45.00	\$ 45.00
4	TAILGATE ✓ BT	1	\$ 1,685.00	\$ 1,685.00
5	TAILGATE LOGO ✓ me	1	\$ 154.00	\$ 154.00
6	TAILGATE INNER TRIM ✓ CNA	1	\$ 548.00	\$ 548.00
7	TAILGATE CENTER MOULDING X (SVC)	1	\$ 254.00	\$ 254.00
8	TAILGATE WEATHERSTRIP ✓ CNA	1	\$ 395.00	\$ 395.00
9	TAILGATE INNER LOCK X (SVC)	1	\$ 485.00	\$ 485.00
10	TAILGATE LOWER LOCK X	1	\$ 105.00	\$ 105.00
11	TAIL LAMP R/H ✓ SOR	1	\$ 289.00	\$ 289.00
12	TAILLAMP PANEL RH X (R)	1	\$ 589.00	\$ 589.00

13	TAILLAMP LOWER GARNISH X (sve)	1	\$ 158.00	\$ 158.00
14	TAILLAMP LOWER GARNISH RETAINER X (sve)	1	\$ 65.00	\$ 65.00
15	REAR BUMPER ✓ CRA	1	\$ 489.00	\$ 489.00
16	REAR BUMPER SIDE RETAINER R/H ✓ me	1	\$ 89.00	\$ 89.00
17	REAR BUMPER LOWER BRACKET X (sve)	3	\$ 34.00	\$ 102.00
18	REAR NUMBER PLATE LAMP X (sve)	2	\$ 59.00	\$ 118.00
19	REAR END PANEL (EXTEND) R/H ✓ st	1	\$ 489.00	\$ 489.00
20	REAR END PANEL (INNER) X (R)	1	\$ 785.00	\$ 785.00
21	REAR END PANEL (OUTER) ✓ st	1	\$ 548.00	\$ 548.00
22	REAR END PANEL TOP GARNISH ✓ CRA	1	\$ 154.00	\$ 154.00
23	REAR EXHAUST PIPE X (sve)	1	\$ 985.00	\$ 985.00
24	REAR EXHAUST MOUNTING X (sve)	2	\$ 58.00	\$ 116.00

TOTAL PRICE \$ 11,461.00
 LESS 25% \$ 2,865.25
SUB TOTAL PRICE \$ 8,595.75

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	REAR BUMPER TOP GARNISH ✓ ser	1	\$ 500.00	\$ 500.00
2	REAR NUMBER PLATE X (sve)	1	\$ 50.00	\$ 50.00
3	REAR BUMPER CLIP ✓ me	10	\$ 6.50	\$ 65.00
4	REAR SIDE PANEL SEALANT X	1	\$ 150.00	\$ 150.00
5	REAR SIDE PANEL GLASS SEALANT X	1	\$ 80.00	\$ 80.00
6	REAR SIDE PANEL GLASS INNER SEAL X	1	\$ 60.00	\$ 60.00
7	REAR SIDE INNER PANEL SEALANT R/H ✓ me	1	\$ 150.00	\$ 150.00
8	REAR SIDE PANEL INNER TRIM CLIP X	9	\$ 6.50	\$ 58.50
9	REAR SIDE PANEL INNER TRIM MAT X (sve)	1	\$ 1,500.00	\$ 1,500.00
10	TAILGATE INNER MAT X (sve)	1	\$ 1,200.00	\$ 1,200.00
11	TAILGATE CENTER MOULDING CLIP X (sve)	6	\$ 6.50	\$ 39.00
12	TAILGATE INNER BOARD CLIP X (sve)	12	\$ 6.50	\$ 78.00
13	TAILGATE WINDSCREEN SEALANT ✓ me	1	\$ 80.00	\$ 80.00
14	TAILGATE WINDSCREEN INNER SEAL ✓ me	1	\$ 60.00	\$ 60.00
15	TAIL GATE WINDSCREEN SOLAR FLIM X	1	\$ 300.00	\$ 300.00
16	TAILGATE STICKER 'EMERGENCY DOOR' X	1	\$ 40.00	\$ 40.00
17	TAILGATE STICKER 'LC500H' ✓ me	1	\$ 50.00	\$ 50.00
18	TAILGATE STICKER 'LUXURY' ✓ me	1	\$ 50.00	\$ 50.00
19	TAILGATE STICKER '80/90KM' ✓ me	1	\$ 100.00	\$ 100.00
20	TAILGATE STICKER '70KM/H' ✓ me	1	\$ 50.00	\$ 50.00

X NS Δ

check price?

25

20

40

30

60

15

15

10

21	TAIL LAMP CLIP <i>n/14 ✓</i>	<i>2</i>	\$ 8.00	\$ 32.00	<i>8</i>
22	TAILLAMP PANEL SEALANT <i>X</i>	1	\$ 80.00	\$ 80.00	
23	REAR END PANEL (EXTEND) SEALANT <i>X</i>	1	\$ 80.00	\$ 80.00	
24	REAR END PANEL (INNER) SEALANT <i>X</i>	1	\$ 150.00	\$ 150.00	
25	REAR END PANEL (OUTER) SEALANT <i>✓</i>	1	\$ 150.00	\$ 150.00	<i>20</i>
26	REAR FLOOR PANEL TOP BOARD <i>X</i>	1	\$ 1,000.00	\$ 1,000.00	
27	REVERSE SENSOR <i>✓ (slant)</i>	1	\$ 380.00	\$ 380.00	<i>200</i>

TOTAL \$ 6,532.50

CLAIM DETAILS: LABOUR AND SPRAY PAINTING (REAR)

S/N	JOB DESCRIPTION	PRICE	ADJUSTED COST	APPROVED
1	PANEL BEATING AND REPLACE PARTS	\$ 1,600.00	<i>800</i>	
2	SPRAY PAINTING TO AFFECTED AREA	\$ 1,600.00	<i>800</i>	
3	WIRNING, BULB CHECKING <i>✓</i>	\$ 80.00	<i>30</i>	
4	REMOVE AND REFIX TAILGATE WINDSCREEN <i>✓</i>	\$ 200.00	<i>100</i>	
5	TRANSFER TAILGATE MECHAISM <i>✓</i>	\$ 150.00	<i>60</i>	
6	CONDUCT WATER LEAKAGE TEST <i>✓</i>	\$ 100.00	<i>30</i>	
7	REMOVE AND REFIX SIDE PANEL GLASS <i>X</i>	\$ 150.00		
8	REMOVE AND REFIX AUDIO SPEAKER AND PASSENGER SEAT <i>X</i>	\$ 550.00		
9	REMOVE AND REFIX REAR EXHAUST PIPE <i>X</i>	\$ 180.00		
10	REMOVE AND REFIX REAR REVERSE SENSOR <i>✓</i>	\$ 80.00	<i>20</i>	
11	TO CHECK DIAGNOSTICS OF VEHICLE MANAGEMENT/CONTROL UNITS, RESET MEMORIES TO SPECIFICATION ETC. <i>X</i>	\$ 180.00		

TOTAL

\$4,870.00

ESTIMATE REPORT

TOTAL PARTS COST : \$ 15,128.25
TOTAL LABOUR COST : \$ 4,870.00
TOTAL REPAIR COST : \$ 19,998.25

APPROVED DETAILS

EXCESS :
NO. OF WORKING DAYS :
RE-SURVEY :

PART BY PART OR LUMP SUM :

DATE & TIME OF SURVEY :
SURVEYED BY :
CONTACT NUMBER :
FAX NUMBER :

[Handwritten notes in left margin:]
20/2/2020
L/S repair
under 1000
6 day
resurvey after part
Hank for
85312883
18/2/20 4:20pm
Hank BNN @ LKK Auto

[Handwritten notes in middle margin:]
resurveyed
Hank for
18/2/20
4:50pm

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: