

(FINALIZATION REPORT)



Date : 03/03/2020  
To : MS FIRST CAPITAL INSURANCE LIMITED

Attn : Motor Claim Department FAX :

Owner : LEONG CHONG  
Insured By : AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED  
Certificate No : P10014346R02 Accident Date : 06/02/2020  
Vehicle No : SKN-7350-P Make & Model : HYUNDAI ELANTRA 1.6 AT ABS D/AB 2WD 4I

FINAL ESTIMATED REPAIR COST DETAILS Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
<b>List Item</b>			
1	REAR BOOTLID RESTORE	0.00	0.00
1	REAR BOOTLID EMBLEM CENTRE	59.60	59.60
1	REAR BOOTLID EMBLEM "ELANTRA"	74.50	74.50
1	REAR BUMPER	681.90	681.90
10	REAR BUMPER CLIP	50.00	50.00
1	REAR BUMPER LOWER GARNISH	351.20	351.20
1	REAR BUMPER SIDE RETAINER LH	42.10	42.10
1	REAR BUMPER SIDE RETAINER RH	42.10	42.10
1	REAR BUMPER INNER BRACKET LH	89.10	0.00
1	REAR BUMPER INNER BRACKET RH	89.10	0.00
1	REAR BUMPER REINFORCEMENT	362.10	0.00
1	REAR END PANEL	462.90	0.00
1	REAR END PANEL TOP GARNISH	98.10	0.00

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FINAL ESTIMATED REPAIR COST DETAILS Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
	Sub Total	2402.70	1301.40
	Discount <b>20%</b> On Parts	(0.00)	(260.28)
	<b>Special Nett Item</b>		
1	REAR BOOTLID EMBLEM "ELITE"	45.00	45.00
1	REVERSE SENSOR	220.00	220.00
1	END PANEL SEALANT	40.00	0.00
	Sub Total	305.00	265.00
	<b>Labour &amp; Misc</b>		
	LABOUR TO CARRY OUT REAR REPAIR	800.00	400.00
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS	35.00	30.00
	TO SPRAY PAINTING ON REAR AFFECTED AREA	600.00	500.00

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**FINAL ESTIMATED REPAIR COST DETAILS** Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR AMT (\$)
	SPRAY RUST PROOF ON AFFECTED AREA	50.00	30.00
	TO DETACH & RENEW REVERSE SENSOR	60.00	30.00
	<b>Sub Total</b>	<b>1545.00</b>	<b>990.00</b>
	<b>Sub Total</b>	3,772.16	2,296.12
	GST 7.0 %	264.05	160.73
	<b>Total</b>	<b>4,036.21</b>	<b>2,456.85</b>

*COR: \$2,296.12 (PART BY PART)*

*4 DAYS REPAIR*

Surveyor Name : STEVEN LEONG - LKK *PARTS - \$1,301.40 - 20%*

Date & Time : 20/02/2020 11:00:00 AM *- \$1,041.12*

Lee Chen Sin *S/N - \$265.00*

CLAIM DEPARTMENT *LABOUR - \$990.00*

DID : 66547520 *\$2,296.12*

FAX :