ASSIGNMENT

Emm: Date:	Veh No: SHB (38)	8 L' Yr Regn: 20/62/26/4
From: Date: Estimated Cost:		an / Lorry (Taxi) Prime Mover /
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
To Inspect Vehicle No:	Make: mercedes	BENZ EARD CC 2143
at Workshop m/s	Colour White	
of		T/Radio: Insured / Std / NI / NA
Insured: SLP 9391K	Eng/No: -	
Policy No.		22A761151 ·
Claims No. MT 1085740 -002	Gen. Cond: Good / Fair / Poor /	
Sum Insured: Excess:	Steering: Inorder / Jammed / Le	aked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Le	aked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/R	im or
	Tyre Size: F:	205 160 RIL
(Policy Condition)	R:	
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / L	LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or	presture
Bal. or Market Value:	Front	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm	R/Bal. S mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal mm	L/Bal. T mm
Est. Repairs: days Res.: Yes or No	D.O.A. 24(02)2020	D.O.I. 24/02/2020
Lum Sum: % 3 Val.: Yes ,or No	Survey held at	ldelgro (10/015)
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / C	D/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	TOTAL CONTRACTOR STATES OF	
Date: Person Contacted:	The U/C / Chassis frame / E	Body Structure affected due to collision.
No policy Found		
SHB 6388 L-CS FCI 19010079/	7/ad3n2 /	JC (15) MA: 30/5/10
SLP 9391 K - NA/INCI8019536		DOA: 20/10/2018
RECEIVED	4	
Us: \$1100 /= with 3 repairdeys	(Red 2072, 52/19	
100 from 200 20 food 100 - 1	C. A. A. A. A.	
confirm on 28/02/2020 with 3		
Date/Time, File Pass to? : Prell. Report	Days Of Repair: 3	79
the state of the s	Resurvey No. of Trip:	Survey Fee: 160
Date/Time, File Return to?		Transportation:
3/3 - typist Add Fee	hand)3+RSS/
aport Formst	: Interview (\$) Photos
2412.11.11.11.11.11	: Tech. Invs (\$) Cohers
ump 2 m / LEJ: (* 1900/>	: Westend (*	
50		TOTAL 160

Veron Chen (LKKAuto)

From:

MTCL@income.com.sg

Sent:

Monday, 2 March 2020 2:24 PM

To:

Veron Chen (LKKAuto)

Subject:

RE: REQUEST FOR CLAIM NUMBER

Dear Sir/Mdm,

We have registered the claim.

Our reference number: MT/1085740-002

Claim Officer: Jessie Wo

Please allow the claim officer 2-3 working days to respond to your case.

We appreciate if you do not respond to this email. Thank you

Best regards,

Diana Tay Senior Admin Assistant www.income.com.sg













At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.

Find out more at income.com.sg/careers



From: Veron Chen (LKKAuto) [mailto:veronchen@lkkauto.com]

Sent: Monday, 2 March 2020 12:50 PM

To: MTCL@income.com.sg

Subject: REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Kindly provides us claim number.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income N
1		COMFORT TRANSPORTATION PTE LTD	SHB 6388L	SLP 9

D.O.A	Time of Accident	Estimate	Tentative repair cost
24/2/2020	2:10	\$3972.00	\$1900.00

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

ehicle Owner Particulars	Company
Owner ID Type:	821R
Owner ID:	
Vehicle Details	SHB6388L
Vehicle No.:	No
Vehicle to be Exported:	25 Feb 2020
Intended Deregistration Date:	MERCEDES BENZ
Vehicle Make:	E 220 CDI BLUEEFFICIENCY
Vehicle Model:	White
Primary Colour:	2013
Manufacturing Year:	65192431512849
Engine No.:	WDD2120022A761151
Chassis No.:	125.0 kW (167 bhp)
Maximum Power Output:	\$40,946.00
Open Market Value:	20 Mar 2014
Original Registration Date:	20 Mar 2014
First Registration Date:	0
Transfer Count:	\$34,325.00
Actual ARF Paid: Intended PARF Rebate Details	M M
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Mar 2022
PARF Rebate Amount: Intended COE Rebate Details	\$24,027.00
COE Expiry Date:	19 Mar 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$58,745.00
COE Rebate Amount:	\$15,126.00
Total Rebate Amount:	\$39,153.00
vehicle reaches its statutory lifespan (if applicable), wh	t be further renewed. The vehicle must be de-registered upon COE expiry or when the nichever is earlier.
the sentained baroin is correct as at 25 Feb 2	7020

The information contained herein is correct as at 25 Feb 2020

SINGAPORE ACCIDENT STATEMENT

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.
- 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.

- 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	24/02/2020 15:56
Date Of Accident	24/02/2020 02:10
Exact Location Of Accident	ALONG BISHAN RD BEFORE X-JUNCTION OF BISHAN ST 22
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE

Country/State of Loss	Oli Control Control	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHB6388L	
Insured/Policyholder		

COMFORT TRANSPORTATION PTE LTD Name Of Registered Owner 1XXXXXX821R Co Reg No

FLEETSAFETY@CDGTAXI.COM.SG Email Address

Mobile Phone No

OFFICE-65508768 Alternative Phone No

Vehicle Particulars

MERCEDES-BENZ Manufacturer

E220 Model

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy

NO for repair to your vehicle?

THIRD PARTY If No. Please state action to be taken

TAXI Vehicle Category

Insurance Company

MS FIRST CAPITAL INSURANCE LTD Name of Insurance Company THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

YES Fleet Policy

D-18088936MFSH Policy Number

Cover Note Number

Driver

POH LEONG BOON Name of Driver

SXXXX012J NRIC No 04/04/1949 Date Of Birth OUTDOOR Occupation 24/12/1966 Date Of Driving Pass

53 YEARS AND 2 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-97836902 Mobile Number

Fax Number

Contact Number

NOEMAIL EMail Address

Address

BLK 79B TOA PAYOH CENTRAL #20-25

Postcode

312079

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - TAXI DRIVER

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

NO

ambulance?

anti en

Was any other material or property damaged? I have been approached by unknown person(s) 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

PLS REFER TO ATTACHED

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?

any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLP9391K

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

MOHAMED RUDIN BIN MOHAMED YASSIN

NRIC/Passport Number

Contact Number

97791276

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

POH LEONG BOON

71

GIDDY

SHB6388L

YES

NO

Sketch Plan Pg. 1

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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 aforesald.
- 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)
 - (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

COMPERT TRANSPORTATION . TE LED GO, REG. NO. 19930302110

Policyholder's Signature Date & Time:

(If driver is not the policyholder)

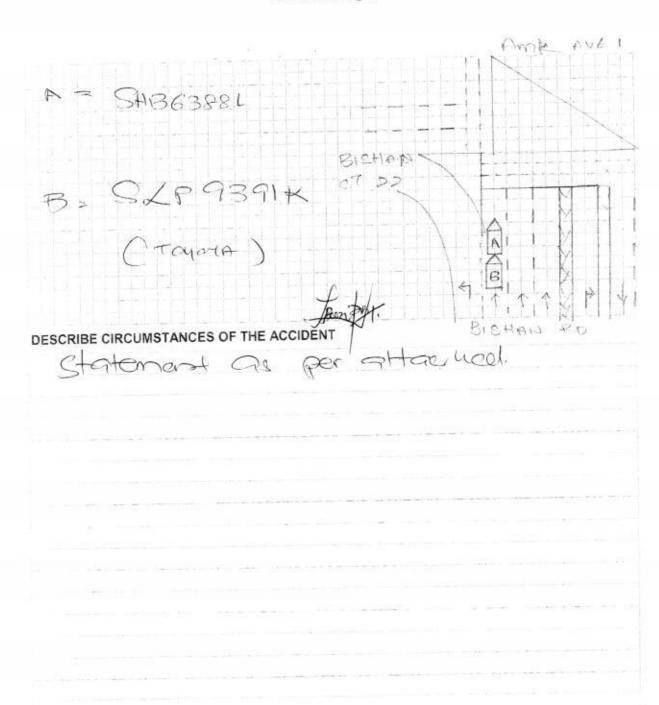
Date & Time:

Olivia Wend

Reporting Centre Personnel's Signature

Name: NRIC/FIN NO.

GIARINOSkewbill policing_V3



DECLARATION

We declare the foregoing particulars are true in every respect.

GOMEORT TRANSPORTATION (TELTI) GOLREG, NO. 1993G382110

> Policyholder's Signature Date & Time:

Drive's Signature (fi driver is not the policyholder) Date & Time:

Olivia Wendy

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

2

Sketch Plan Pg. 3

escribe Circumstances of the Accident.	
on the 24/02/2020 at 02:10hrs, I was driving along Bishan Rd direction with no passeng	er
n board my taxi.	
of Bishan ST 22 waiting for the green light. Just aft	er the
stop before the traffic light junction of Bishan ST 22 waiting for the green light. Just aft raffic light turn green suddenly there's an impact from behind my taxi. I step out to che	ck
nd found a vehicle of SLP9391K front portion had collided onto my taxi rear left portion	n.
nd found a venicle of SLP9391k front portion had comded onto my tax real temperature	
felt slight giddiness after the impact and will consult doctor later.	
Declaration	
/We declare the foregoing particulars are true in every respect.	
ř	
OMFORT TRANSPORTATION FITE LTD	100000
CO. REG. NO. 18930382TR	men.

Page 1

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

& Time

Policyholder's Signature/Date &

Time

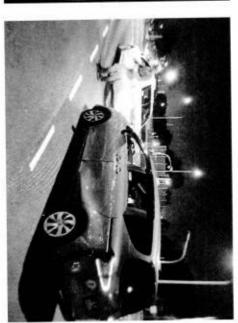
Witnessed by Reporting

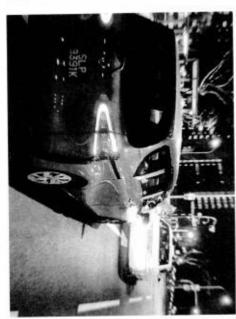
Centre Personnel















COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

MILEAGE

Date/Time: 24.02.2020 16:33

Page : 1

ARC Repair TP(CLSO)1 Team:

JOB CARD

JOB DESCRIPTION

Sales Order:

REGN NO. SHB6388L

JC NO.: 305383500

STOMER

(R)

(P)

COMFORT TRANSPORTATION PTE LTD

7010045

STOMER NO. 383 SIN MING DRIVE Singapore SINGAPORE 575717

65508755

MODEL E220CDI(E5)

MERCEDES BENZ

....1/2.....F 24.02.2020 03:00

YR OF MANUE 0.03.2014

TARGET DATE

COMPLETION DATE/TIME

CHASSIS CODE 2120022A761151

MAKE:

COUNT CARD NO.

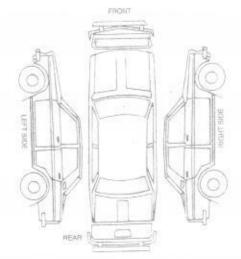
Accident Date: 24.02.2020

NATURE: 3P 24.02.2020

S/NO

LABOR CODE

DESCRIPTION



& PASSED OUT BY:	
SERVICE ADVISOR	CUSTOMER'S SIGNATURE
ement Slip	Exit Pass
SHB6388L JU NTUC LKK	Vehicle No.: SHB6388L

3 No.:

Signature/Date

Name of Service Advisor

Date

of Service Advisor returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 24.02.2020 Time: 16:40:00

Page: 1

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO

: 305383500 : SHB6388L

MILEAGE MAKE

: 00000000000 : MERCEDES BENZ

MODEL

: E220CDI(E5)

DATE OF REGN : 20.03.2014 DATE/TIME IN

: 24.02.2020 03:00

ACCIDENT DATE : 24.02.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0202-0579-G 212VA REAR BUMPER ASSY

1 1,510.00 20.00 1,208.00

0002 04-01-0202-0740-G 212VC REAR BUMPER REINFOR

1 1,150.00 20.00 920.00 TXN

0003 04-01-0202-2882-G 212VA BUMPER BRACKET RR/L

135.00 20.00 108.00 × 1/1 1/1

0004 04-01-0202-2982-G 212VA BUMPER BRACKET RR/R

135.00 20.00 108.00 × %

0005 04-01-0202-2124-G (212)PANELLING LOADING ED 1

325.00 20.00 260.00 1 xnn

0006 09-01-0299-2005-A (212/211B)REVERSE SENSOR

1 N 388.00 2.00- 388.00 DW

SUB-TOTAL : 2,992.00

JOB NATURE

0000 PB

PANEL BEATING

0001 SP

SPRAYPAINT CHARGE

0002 L

RENEW REVERSE SENSOR

400.00 \$ 360

500.00 %-

80.00 % -

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:

PANOURINE LOCANTO COM
PANOURINE LOCANTO COM
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PANOURINE DOCANTO

COMFORTDELGRO ENGINEERING PTE LTD

Date: 24.02.2020 Time: 16:40:00

Page: 2

REPAIR ESTIMATE

COMPANY: THIRD PARTY'S CLAIMS (CAS)

regression of the water

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO : 305383500
REGN NO : SHB6388L
MILEAGE : 0000000000
MAKE : MERCEDES BEN.
MODEL : E220CDI(E5)
DATE OF REGN : 20.03.2014
DATE/TIME IN : 24.02.2020 03:00
ACCIDENT DATE : 24.02.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 3,972.00

AUTHORISED: YES / NO

MVA NAME & SIGNATURE

DATE:

DATE:

SURVEYOR NAME & SIGNATURE

COMFORTDELGRO ENGINEERING

Our Job Ref No

305383500

Date

25/02/2020

ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156

and the second second second second

Го	10	LKK		Fax:	
Attn		RAM			
		: SHB6388L		DOA:	24/02/2020
he s	survey	and estimates of the repairs of	the above-menti	oned vehicle are as	follows:-
		repair job shall bill to:	NTUC		SLP9391K
3	11101	epan job shan on to		###	
2	The f	inalized amount shall be:			
	(a)	Spare Parts after List discou	nt		
	(b)	Labour Charges		###	
		Total for Part-By-Part Repa	air Cost		###
				N	###
	(c.)	Lumpsum Repair (if applicat Total for Lumpsum repair co Final Lumpsum Repair cos	st after Less:	20%	\$1,900.00
3.	Estin	nated normal period for repairs	s:3	_working days	
4.	We s	shall treat the above amount in 7 working days	as Correct and	Confirmed if there	s no reply from you
5.	Than	nk you for your assistance.		We confirm the e	stimates and
		M		finalized amount	9
	Sign	nature :		Signature:	/
	Nam	ne : JUMANI		Name :	/Ram
		6214 9215		Date :	28/02/2020
	Tel	: 6214 8315			200
	Tel Fax				200

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
LTA Search Fee	\$7.49			
Medical Fees (on behalf of driver, if applicable)				
6 Overrun				_

Remarks:	JONIN (1		
_			



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315



Reg. No: 52983356E GST Reg. No. 20-0405911-H

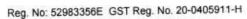
TLIC	INCOME INSURA	NCE CO-OPERATIVE LTD	Ref: NS/INC2000312	29/Fvd3e2			
3 RF	RAS BASAH ROAD 11 NTUC TRADE U		Date: 03-03-2020 Code: INC4				
		Policy Particulars	:- THIRD PARTY CLAIM				
•	Insured Veh.	SLP 9391K	Veh. Inspected	SHB 6388L			
	Policy No.		Coverage (\$)	0.00			
	Claim No.	MT/1085740-002	Excess (\$)	0.00			
	Assign From		Assign Date	24/02/2020			
2.		Vehicle Parti	culars & Condition				
1000	Make & Model	MERCEDES BENZ E 220	c.c	2143			
	Engine No.	HIDDEN	Year of Reg.	2014			
	Chassis No.	WDD2120022A761151	Colour	WHITE			
	Odometer	1030549	Steering	IN ORDER			
	Brakes	IN ORDER	Modification	SPORTS RIM			
	General	FAIR					
3.		Condi	tions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre	205/60 R16	WEST LAKE	7 mm			
	L/H Front Tyre	205/60 R16	WEST LAKE	7 mm			
	R/H Rear Tyre	205/60 R16	WEST LAKE	8 mm			
	L/H Rear Tyre	205/60 R16	WEST LAKE	8 mm			
4.	Description of Damages						
	THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.						
DAMAGES SEE DETAILS.							
5.			al Information				
	Accident Date	24/02/2020	Inspection Date	24/02/2020			
	Survey held at	COMFORTDELGRO ENGINE	ERING PTE LTD				
		59 LOYANG DRIVE SINGAPORE 508969					
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 NOR	ESTIMATED NORMAL PERIOD FOR REPAIR: 3 Working Days					



National Assessment Centre Services

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







ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 6388L

Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS			8
212VA REAR BUMPER ASSY	CRACKED	1,510.00	1,510.00
[] [] [] [] [] [] [] [] [] []	NOT NECESSARY	1,150.00	-
	NOT NECESSARY	135.00	
[2] ** **** **** **** *** *** *** *** ***	NOT NECESSARY	135.00	-
	NOT NECESSARY	325.00	
	The state of the s	-651.00	-302.00
		2,604.00	1,208.00
SPECIAL NETT ITEMS		1	1200002
(212/211B) REVERSE SENSOR (SN)	DAMAGED	0.0.0.77.5	
		388.00	388.00
LABOUR			200.00
PANEL BEATING.	ACEMENT OF PARTS REAR BUMPER ASSY REAR BUMPER REINFOR BUMPER BRACKET RR/L BUMPER BRACKET RR/R AND T NECESSARY 135.00 NOT NECESSARY 135.00 NOT NECESSARY 135.00 NOT NECESSARY 135.00 ANELLING LOADING ED 10% DISCOUNT ALL NETT ITEMS 11B) REVERSE SENSOR (SN) DAMAGED 388.00 UR BEATING. PAINT CHARGE. N REVERSE SENSOR. 980.00	No. of the last of	
SPRAYPAINT CHARGE.			
RENEW REVERSE SENSOR.			2000
Statistics with the control of the c		980.00	840.00
GRAND TOTAL		3,972.00	2,436.00
	REPLACEMENT OF PARTS 212VA REAR BUMPER ASSY 212VC REAR BUMPER REINFOR 212VA BUMPER BRACKET RR/L 212VA BUMPER BRACKET RR/R (212) PANELLING LOADING ED LESS 20% DISCOUNT SPECIAL NETT ITEMS (212/211B) REVERSE SENSOR (SN) LABOUR PANEL BEATING. SPRAYPAINT CHARGE. RENEW REVERSE SENSOR.	REPLACEMENT OF PARTS 212VA REAR BUMPER ASSY 212VC REAR BUMPER REINFOR 212VA BUMPER BRACKET RR/L 212VA BUMPER BRACKET RR/R (212) PANELLING LOADING ED LESS 20% DISCOUNT SPECIAL NETT ITEMS (212/211B) REVERSE SENSOR (SN) LABOUR PANEL BEATING. SPRAYPAINT CHARGE. RENEW REVERSE SENSOR.	Description of Parts Condition Workshop (\$)

	RECOMMENDED COST OF LUMP SUM REPAIRS		1,900.00
п	(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)	NAMES OF BEILDING	

Report Ref No. NS/INC20003129/Fvd3e2

PARASURAM S/O SHANMUGAM

Asst. Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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