

ASS. REC. BY: Rm

REF:

NS/INC 20003304/Ftd352

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: SBV 32TPolicy No. 5104228912 -01 (4/10/19-3/10/2020)Claims No. MT/1085996-002

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: **The veh had commenced its repair at the time of inspection.**

N/S	O/S

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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SHA 4160M Yr Regn: 14/03/2019

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

Truck / Trailer or

Make: TOYOTA Prius C: 1798Colour: blue A/C: Insured / Std / NI / NASp. Reading: 138272 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JTDXB3F0303078964Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65 R15

R: \_\_\_\_\_

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

TOYO / YOKO or

DAWANT 1

Front

Rear

R/Bal. 7 mm R/Bal. 6 mmL/Bal. 7 mm L/Bal. 8 mmD.O.A. 26/02/2020 D.O.I. 27/02/2020Survey held at comptel/1085996 (1085996)Des. 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

SHA 4160M - CS / FCI / 7000789 / T19h3n2SBV 32T - XDOA: 8/01/2017

P/R

RECEIVED 11 MAR 2020

P/P: \$2486.2 / = with 3 repair days (Red: 1599.77: 39%)

confirm on 6/3/2020 with change.

Date/Time, File Pass to?



: Prel. Report

1) 11/3 Typist



: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Add Fee:



: Site Insp. (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Report Format:

Lump Sum / L.E.S. # 2486.20

# TP Claims against NTUC Income: Follow-Through Survey

Date : 6/3/2020

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/1085996-002	COMFORT TRANSPORTATION PTE LTD	SHA 4610M	SBV 32T	26/2/2020	13:55	\$ 4,085.97
2	MT/1083320-002	COMFORT TRANSPORTATION PTE LTD	SHD 3430G	SGS 830M	6/2/2020	8:20	\$ 2,238.53
3	MT/1077851-002	COMFORT TRANSPORTATION PTE LTD	SH 9890X	SLB 9544K	29/12/2019	10:50	\$ 2,098.53
4	MT/1086221-002	COMFORT TRANSPORTATION PTE LTD	SHA 5868E	SGU 2306L	28/2/2020	9:10	\$ 2,566.48
5	MT/1085416-002	COMFORT TRANSPORTATION PTE LTD	SHD 3398S	SLJ 9580M	22/2/2020	3:30	\$ 6,130.40

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)**Policy Query**

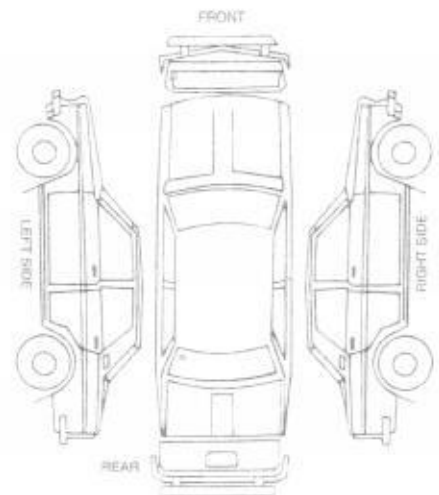
Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="26/02/2020 09:25"/>							
Vehicle No.(For Motor)	<input type="text" value="SBV32T"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5104228912-01		KUA SOH HAH	S0199142F	GPC	drive PREMIUM	SBV32T	SBV32T	04/10/2019	03/10/2020
<input type="button" value="Continue"/>										

Team: ARC Repair TP(CLSO)	<b>JOB CARD</b>	Sales Order:	JC NO.: 305384000
STOMER COMFORT TRANSPORTATION PTE LTD /MS 7010045 STOMER NO 383 SIN MING DRIVE DRESS Singapore SINGAPORE 575717 65506755 - (R) (O) (P)	REGN NO: SHA4610M MAKE: TOYOTA MODEL: PRIUS HYBRID(G4) YR OF MANU: 14.03.2019 CHASSIS CODE: JTDKB3FU303078964	MILEAGE FUEL DATE/TIME IN: 26.02.2020 14:40 TARGET DATE COMPLETION DATE/TIME:	
COUNT CARD NO.			

Accident Date: 26.02.2020  
NATURE: 3P 26.02.2020

JOB DESCRIPTION

S/NO      LABOR CODE      DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR      CUSTOMER'S SIGNATURE

Acknowledgement Slip

Vehicle No.: SHA4610M      CHL ANG

Signature/Date

returned to Service Reception upon collection

Exit Pass

Vehicle No.: SHA4610M

Name of Service Advisor      Date

To be kept by Security Guard

## 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	26/02/2020 15:30
Date Of Accident	26/02/2020 13:55
Exact Location Of Accident	ALONG SHUNFU ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA4610M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXX821R
Email Address	FLEETSAFETY@CDGETAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
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
Cover Note Number	

### Driver

Name of Driver	LEE KWEE CHOON
NRIC No	SXXXX500E
Date Of Birth	09/03/1955
Occupation	OUTDOOR
Date Of Driving Pass	08/02/1985
Driving Experience	35 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91762629
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 858 YISHUN AVENUE 4  
#04-95  
Postcode 760858  
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? NO  
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) 2  
Passenger 1 NAME: : -  
GENDER: : FEMALE

### 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

### 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 SBV32T  
Vehicle Make/Model/Colour BMW  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver UNKNOWN  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name

• • • • • Nature Of Damage  
• • • • • No. Of Passenger (Including Driver)

FRONT RH

**IMPORTANT NOTICE**

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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.

COMFORT FLAT (P) PRIVATE LIMITED  
CO. REG. NO. T0603821R

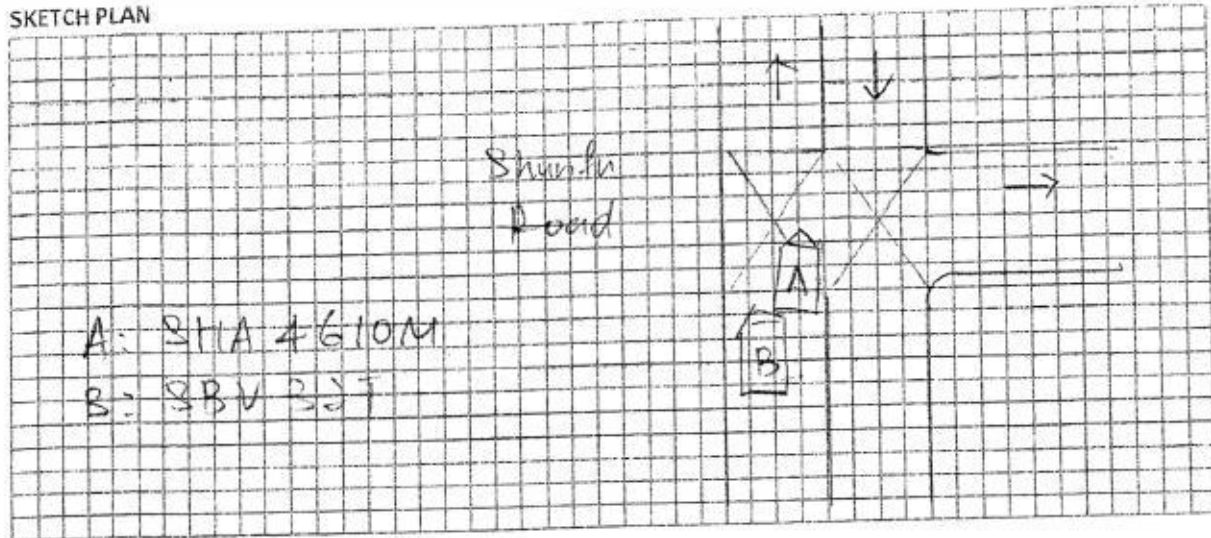
Policyholder's Signature  
Date & Time:

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

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



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/2/2020 at about 13:55 hrs, I veh  
A ferrying a female passenger at above said location  
When I stopped at above said junction waiting  
opposite traffic to clear, Veh B came from behind  
it front right portion collided onto the rear left  
portion of my taxi. No injury reported

DECLARATION

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

COMFORT AUTO & MOTOR INSURANCE LTD  
CO. REG. NO. 100740282112

Policyholder's Signature  
Date & Time:

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

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

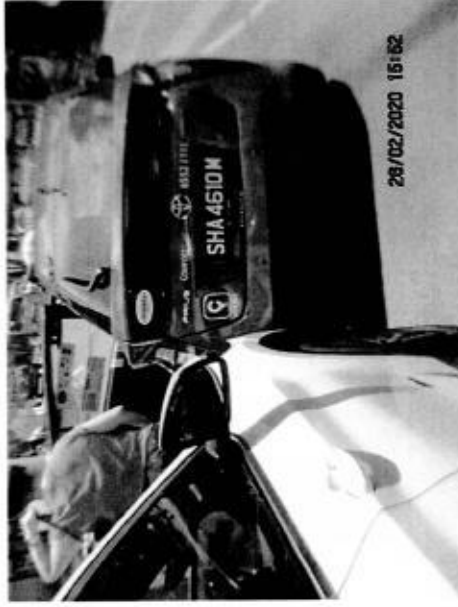
> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	821R
Vehicle Details	
Vehicle No.:	SHA4610M
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Feb 2020
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	2ZR2B96954
Chassis No.:	JTDKB3FU303078964
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,605.00
Original Registration Date:	14 Mar 2019
First Registration Date:	14 Mar 2019
Transfer Count:	0
Actual ARF Paid:	\$14,247.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Mar 2027
PARF Rebate Amount:	\$10,685.00
Intended COE Rebate Details	
COE Expiry Date:	13 Mar 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$20,420.00
COE Rebate Amount:	\$17,964.00
<b>Total Rebate Amount:</b>	<b>\$28,649.00</b>
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 27 Feb 2020

OK



## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO SHA4610M

DATE 26.02.20

MAKE :

CHIANG/NTUC

MODEL TOYOTA PRIUS

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	REAR BUMPER <i>cr</i>			\$458.60
1	REAR BUMPER LOWER COVER <i>DEF</i>			\$552.60
1	REAR BUMPER SIDE RETAINER <i>xm</i>			\$112.70
1	REAR BUMPER REINFORCEMENT <i>↑xm</i>			\$318.80
10	REAR BUMPER CLIPS <i>nee</i>			\$22.00
1	REAR BUMPER TOWING COVER <i>xm</i>			\$82.70
1	TAIL LAMP ASSY UPPER <i>xm</i>			\$557.90
1	TAIL LAMP ASSY LOWER <i>cr</i>			\$548.40
				<b>\$2,653.70</b>
	<b>SUB TOTAL</b>			<b>\$663.42</b>
	<b>25.00%</b>			<b>\$1,990.27</b>
	<b>DISCOUNTED TOTAL</b>			
				\$135.70
1	REAR REVERSE SENSOR <i>xm</i>			\$50.00
1	BUMPER MAT <i>nee xm</i>			\$60.00
2	BOOT LID COMFORT & TEL NO STICKER <i>nee</i>			\$40.00
1	BOOTLID COMFORT APP. <i>nee</i>			<b>\$285.70</b>
				<b>\$1,276.2</b>
	<b>Labour Charge</b>			
	Panel Beating			\$950.00
	Spray Painting Charge			\$660.00
	Tuff Kote			\$80.00
	Check Lighting			\$60.00
	Remove/refix reverse sensor			\$60.00
	<b>TOTAL LABOUR</b>			<b>\$1,810.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$4,085.97</b>

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

3 repair by S  
 (P/P) Before print photo

Our Job Ref No : 305384000

Date : 04/02/20

## FINALIZATION FORM

To : LKK

Fax :

Attn : RAM

: SHA4610M

26.02.2020

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

Z The repair job shall bill to: NTUC SBV32T

2. The finalized amount shall be:

(a) Spare Parts after List discount \$1,276.20

(b) Labour Charges \$1,210.00

**Total for Part-By-Part Repair Cost \$2,486.20**

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less:

**Final Lumpsum Repair cost**

3. Estimated normal period for repairs: 3 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature :

Signature :

Name : CHIANG

Name : Rqm

Tel : 62148314

Date : 6/3/2020

Fax : 65468156

### For Official Use Only

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

Remarks:

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010045  
 ADDRESS : COMFORT TRANSPORTATION PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65508755

JOB NO : 305384000  
 REGN NO : SHA4610M  
 MILEAGE : 0000000000  
 MAKE : TOYOTA  
 MODEL : PRIUS HYBRID(G4)  
 DATE OF REGN : 14.03.2019  
 DATE/TIME IN : 26.02.2020 14:40  
 ACCIDENT DATE : 26.02.2020

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0302-2282-G	PRIG4 COVER REAR BUMPER	1	458.60	25.00	343.95	gr
0002 04-01-0302-2287-G	PRIG4 GUARD-REAR BUMPER C	1	552.60	25.00	414.45	DEF
0003 04-01-0302-2267-G	PRIVC BUMPER PIECE	10	22.00	25.00	16.50	rec
0004 04-01-0302-0796-A	PRIG4 LENS AND BODY REAR	1	548.40	25.00	411.30	gr
0005 28-01-9999-2025-A	APP LOGO REAR BONNET CTPL	1	40.00	10.00	36.00	rec
0006 28-01-0302-2015-A	PRIVC REAR BONNET COMFORT	1	30.00	10.00	27.00	rec
0007 28-01-0302-0006-A	PRIVC REAR BOOT 65521111	1	30.00	10.00	27.00	rec

SUB-TOTAL : 1,276.20

## JOB NATURE

0000 PB	PANEL BEATING	640.00
0001 SP	SPRAYPAINT CHARGE	400.00
0002 20-00	TUFF COAT ON AFFECTED PARTS.	60.00
0003 17-01	CHECK ALL LIGHTING	50.00



## 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



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC20003304/Ftd3s2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 11-03-2020

189556



Code: INC4

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

Insured Veh.	SBV 32T	Veh. Inspected	SHA 4610M
Policy No.	5104228912-01	Coverage (\$)	0.00
Claim No.	MT/1085996-002	Excess (\$)	0.00
Assign From		Assign Date	27/02/2020

### 2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	JTDKB3FU303078964	Colour	BLUE
Odometer	138272	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	DAVANTI	7 mm
L/H Front Tyre	195/65 R15	DAVANTI	7 mm
R/H Rear Tyre	195/65 R15	DAVANTI	8 mm
L/H Rear Tyre	195/65 R15	DAVANTI	8 mm

### 4. Description of Damages

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

### 5. General Information

Accident Date	26/02/2020	Inspection Date	27/02/2020
Survey held at	COMFORTDELGRO ENGINEERING 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.
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### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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**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



Page No.:1 of 2

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 4610M**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	CRACKED	458.60	458.60
1	REAR BUMPER LOWER COVER	DEFORMED	552.60	552.60
1	REAR BUMPER SIDE RETAINER	NOT NECESSARY	112.70	-
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	318.80	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	REAR BUMPER TOWING COVER	NOT NECESSARY	82.70	-
1	TAIL LAMP ASSY UPPER	NOT NECESSARY	557.90	-
1	TAIL LAMP ASSY LOWER	CRACKED	548.40	548.40
	LESS 25% DISCOUNT		-663.43	-395.40
			1,990.27	1,186.20
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
1	BUMPER MAT (SN)	NOT NECESSARY	50.00	-
2	BOOT LID COMFORT & TEL NO STICKER (SN)	NECESSARY	60.00	54.00
1	BOOTLID COMFORT APP. (SN)	NECESSARY	40.00	36.00
			285.70	90.00
<b><u>LABOUR</u></b>				
	PANEL BEATING.		950.00	640.00
	SPRAY PAINTING CHARGE.		660.00	400.00
	TUFF KOTE.		80.00	60.00
	CHECK LIGHTING.		60.00	50.00
	REMOVE / REFIX REVERSE SENSOR.		60.00	60.00
			-	-
			-	-
			-	-
			1,810.00	1,210.00
<b>GRAND TOTAL</b>			<b>4,085.97</b>	<b>2,486.20</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>2,486.20</b>

Report Ref No. NS/INC20003304/Ftd3s2



Report Ref No. NS/INC20003304/Ftd3s2

**PARASURAM S/O SHANMUGAM**

**Asst. Automotive Assessor**

A handwritten signature in black ink, appearing to be 'K.K. LAU'.

**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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