

22/03/2002

ASS. REC. BY:

REF: CS/SMO20003323/Eqd3 Special Instruction:Surveyor: SteveASSIGNMENT (Office)From (Person): Ye Yong Kang Melvin of SMO Date/Time: 28/02/2020 @ 12.20pm

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD ~~TP~~ WS/TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKV 722D Insured: PC 4843Cat Workshop m/s MORA Automotive Tel: 6272 3892of Blk 1008 Bukit Merah lane 3Policy No: \_\_\_\_\_ Claim No: CM7D 2000897 / GPL

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

Make of Veh: \_\_\_\_\_ D.O.A. 26/02/2020  
(Client's Record)CA / REV / REP. / REV 24 HRS <sup>up</sup>

H.O.D. Endorsement: \_\_\_\_\_

Date/Time: 12.34pm @ 28/2/2020 Person Contacted: Nitha Vehicle IN/OUT

Date/Time	Action/Instruction
	<u>Estimate</u> ✓
	<u>SKV 722D - CC3/A14/6013310/H126392</u>
	<u>PC4843C - X</u>
<u>11/3/2002 2.27pm</u>	<u>revised to Groh Pan looy by email.</u>

ASS. REC. BY: Steve

REF:

8MO

## ASSIGNMENT

From:

Date:

10/3/2020

Veh No:

SKV 7220

Yr Regn:

17/8/15

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

SKV 7220

Make:

Toyota Camry

C.C.

2494

at Workshop m/s

Mova Automotive

Colour

Silk

A/C: Insured / Std / NI / NA

of Blk 1008 Bkt merah line 3 #01-04

Sp. Reading

10/223

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

MR053AK5004099397

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

After 1pm

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

Tyre Size:

F:

215/55R17

R:

4

(Policy Condition)

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

N/S	O/S

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

TOYO / YOKO or

Bal. or Market Value:

Front

Rear

IDAC Accident Rpt:

Consistent? : Yes or No

R/Bal.

5

mm

R/Bal.

5

mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

5

mm

L/Bal.

5

mm

Est. Repairs:

days

Res.: Yes or No

D.O.A.

26/2/20

D.O.I.

10/3/20

Lum Sum:

%

3 Val.: Yes or No

Survey held at

Mova, for Yong Road

CA / REV / REP. / 24 HRS

up

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear RH

Date:

Person Contacted:

Vehicle: IN / OUT

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	MV-70K

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

Lump Sum / L.B.I. (\$

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

## Nivitha (LKK Auto)

---

**From:** Ye, Yong Kang Melvin <melvin.ye@sompo.com.sg>  
**Sent:** Friday, 28 February 2020 12:20 PM  
**To:** Nitha; assignments; sur@lkkauto.com  
**Cc:** Henry, Irene James; Gnoh, Pau Loong  
**Subject:** FW: CMTD2000897/GPL RE: TP CLAIMS - SKV722D AGAINST PC4843C DOA 26/02/20  
**Attachments:** WinZip Compressed Attachments.zip

Without Prejudice

Dear Nitha,

We will appoint LKK Auto to conduct the survey on a without Prejudice Basis.

Dear LKK Auto,

Please make the arrangement to survey for SKV722D on a without Prejudice Basis and revert with your preliminary report upon completion of survey to my colleague, Pau Loong.

Best Regards

Melvin Ye

Claims Division

D: 6322 4667 | T: 6461 6555



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**From:** Nitha <nitha@mova.com.sg>

**Sent:** Friday, 28 February, 2020 11:43 AM

**To:** Ye, Yong Kang Melvin <melvin.ye@sompo.com.sg>

**Cc:** tanyw@mova.com.sg; 'AVRIL HO' <avril@mova.com.sg>; Gnoh, Pau Loong <PauLoong.Gnoh@sompo.com.sg>; Henry, Irene James <irene.henry@sompo.com.sg>

**Subject:** RE: CMTD2000897/GPL RE: TP CLAIMS - SKV722D AGAINST PC4843C DOA 26/02/20

Dear Melvin ,

Kindly assign LKK.

Thank you,

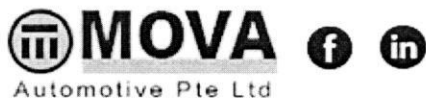
Best Regards,

*Nitha*

Claims Officer

Mova Automotive Pte Ltd

Tel: 6272 3892 Fax: 6270 8314



---

**From:** Ye, Yong Kang Melvin [mailto:melvin.ye@sompo.com.sg]

**Sent:** Friday, 28 February 2020 11:17 AM

**To:** Nitha

**Cc:** tanyw@mova.com.sg; 'AVRIL HO'; Gnoh, Pau Loong; Henry, Irene James

**Subject:** Ref: CMTD2000897/GPL RE: TP CLAIMS - SKV722D AGAINST PC4843C DOA 26/02/20

Our Reference: CMTD2000897/GPL

Your Reference: SKV722D

**Without Prejudice**

Date: 28.02.2020

**Attention:**

**MOVA AUTOMOTIVE PTE LTD**

Dear Nitha,

**ACCIDENT INVOLVING SKV722D & PC4843C ON 26.02.2020**

We refer to your Notice of Accident dated 27/02/2020.

Please be informed that Mr Gnoh Pau Loong is the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert.

**Pre-Repair Survey**

	Motor Surveyor	Surveyor	Selection (Indicate as tick)
--	----------------	----------	------------------------------

1	Raleigh Services	Andrew Ow Yong	
		Vincent Ng	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffery Ong	

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Best Regards

Melvin Ye

Claims Division

D: 6322 4667 | T: 6461 6555



**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

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**From:** Nitha <[nitha@movva.com.sg](mailto:nitha@movva.com.sg)>

**Sent:** Friday, 28 February, 2020 11:14 AM

**To:** Claims - Motor Survey <[MotorSurvey@sompo.com.sg](mailto:MotorSurvey@sompo.com.sg)>  
**Cc:** [tanyw@nova.com.sg](mailto:tanyw@nova.com.sg); 'AVRIL HO' <[avril@nova.com.sg](mailto:avril@nova.com.sg)>  
**Subject:** TP CLAIMS - SKV722D AGAINST PC4843C DOA 26/02/20

Dear All,

Kindly advise officer in charge and assign surveyor for the above mention case,

Thank you

Best Regards,

*Nitha*

Claims Officer  
Mova Automotive Pte Ltd  
Tel: 6272 3892 Fax: 6270 8314



## **Shiau Chan (LKKAUTO)**

---

**From:** Shiau Chan (LKKAUTO)  
**Sent:** Wednesday, 11 March 2020 2:27 PM  
**To:** Gnoh, Pau Loong  
**Cc:** Ye, Yong Kang Melvin; assignments; SUR  
**Subject:** RE: Direct Settle ; RE: CMTD2000897/GPL RE: TP CLAIMS - SKV722D AGAINST PC4843C DOA 26/02/20  
**Attachments:** CSSMO20003323Eqd3.pdf

Dear Mr Gnoh,

Enclosed herewith preliminary advice of SKV 722D.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

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

---

**From:** Gnoh, Pau Loong <[PauLoong.Gnoh@sompo.com.sg](mailto:PauLoong.Gnoh@sompo.com.sg)>

**Sent:** Friday, 28 February 2020 2:38 PM

**To:** 'AVRIL HO' <[avril@nova.com.sg](mailto:avril@nova.com.sg)>

**Cc:** Ye, Yong Kang Melvin <[melvin.ye@sompo.com.sg](mailto:melvin.ye@sompo.com.sg)>; Admin-D (LKKAUTO) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>

**Subject:** Direct Settle ; RE: CMTD2000897/GPL RE: TP CLAIMS - SKV722D AGAINST PC4843C DOA 26/02/20

Dear Avril,

With reference above, we would like to Direct Settle and please arrange / liaise with agreed SJE, M/s LKK AUTO for survey / finalization.

By copy to M/s LKK AUTO,

Please assist above, thank you.

Best Regards

**Gnoh Pau Loong**

Claims Division

D: 6329 5217 | T: 6461 6555



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Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: CMTD2000897/GPL

Date: 11<sup>th</sup> March 2020

Our Ref: CS/SMO20003323/Eqd3

Without Prejudice

The Motor Claims Department  
Sompo Insurance

Attn: Grace

Dear Sirs/Mdm

**PRELIMINARY ADVICE OF VEHICLE NO. SKV 722D.**

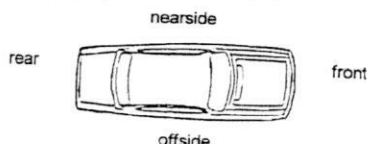
We thank you for the instruction on 28/02/2020.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 10/03/2020 at the premises of M/s MOVA AUTOMOTIVE and have the following to report:-

Workshop Estimate Amount	: S\$ <u>2,967.96</u>
Revised Estimate Amount	: S\$ <u>2,101.86</u>
"Check" Items Amount	: S\$ <u>372.60</u>
Market Value	: S\$ <u>-</u>
LTA Reimbursement Value	: S\$ <u>-</u>
Nett Value	: S\$ <u>-</u>

Description of Damage:

The vehicle sustained damages at the rear o/s portion.



Comments/ Present Status:

Damages consistent.

Days of repair: 4 days.

We have not authorized repair.

Yours faithfully

Steve  
Automobile Assessor



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	167N
<b>Vehicle Details</b>	
Vehicle No.:	SKV722D
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Mar 2020
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY 2.5 AUTO
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	2ARU229389
Chassis No.:	MR053AK5004009397
Maximum Power Output:	133.0 kW (178 bhp)
Open Market Value:	\$29,170.00
Original Registration Date:	17 Aug 2015
First Registration Date:	17 Aug 2015
Transfer Count:	0
Actual ARF Paid:	\$32,838.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Aug 2025
PARF Rebate Amount:	\$24,628.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	16 Aug 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$65,501.00
COE Rebate Amount:	\$35,585.00
<b>Total Rebate Amount:</b>	<b>\$60,213.00</b>

The information contained herein is correct as at 10 Mar 2020

OK

## 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	27/02/2020 13:57
Date Of Accident	26/02/2020 12:50
Exact Location Of Accident	ANG MO KIO AVE 1
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV722D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SANJI ENGINEERING PTE LTD
Co Reg No	2XXXXX167N
Email Address	HZZ@SANJI.COM.SG
Mobile Phone No	(LOCAL) +65-98372272
Alternative Phone No	OFFICE-62517727

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.5 AUTO
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	HO ZHI ZHANG
NRIC No	SXXXX991I
Date Of Birth	29/02/1960
Occupation	INDOOR
Date Of Driving Pass	25/09/1980
Driving Experience	39 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98372272
Fax Number	
Contact Number	
EMail Address	SAMHO227@YAHOO.COM

Address	APT BLK 1C CANTONMENT ROAD #07-25
Postcode	085301
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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: : SHERRY TAY 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

PLEASE REFER TO THE SKETCH PLAN

#### 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	PC4843C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HIEW KWEE KEE
NRIC/Passport Number	SXXXX115H
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.
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. 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

**SANJIA**  
engineering pte ltd

003 Toa Payoh Industrial Park,  
#03-1521, Singapore 319075  
Tel: 6251 7727 Fax: 6259 5505  
Email: sanji722@singnet.com.sg

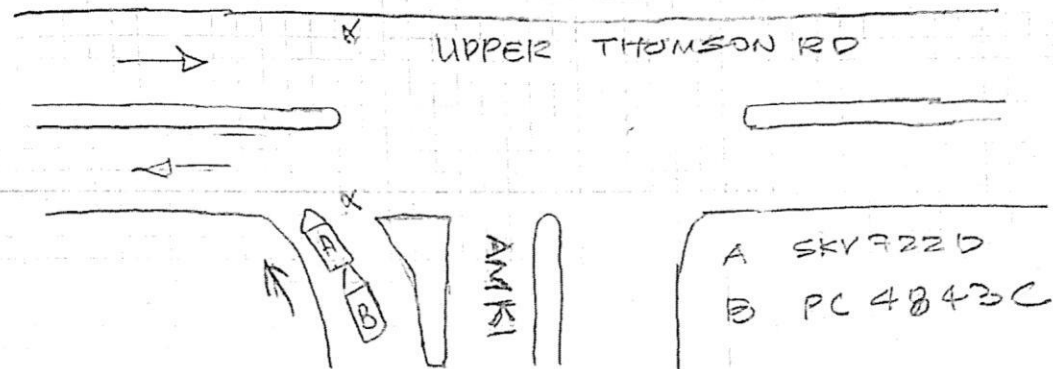
Policyholder's Signature  
Date & Time:

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

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

# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE	SKY 722D	ACCIDENT DATE & TIME	26/12/2020, 1250
CONTACT NUMBER	9837 2272/6X(777)	E-MAIL ADDRESS	Samho 227@yahoo.com
LOCATION	Ang Mo Kio Ave 1		
<p>more</p> <p>my vehicle station (SKV 722D) while waiting incoming pass by. A vehicle PC 4843C just come forward hit my vehicle (SKV 722D) behind. my vehicle behind bumper was found damaged.</p> <p>that's all.</p>			
<p>NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION</p>			
Please state:			
<input type="checkbox"/> Claim Own Policy <input type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input type="checkbox"/> Reporting Only			

**SANJI**  
Engineering pte ltd

103 Toa Payoh Industrial Park,  
103-1521, Singapore 319075  
Tel: 6254-7727 Fax: 6259-5506  
Policyholders: 22@sigmet.com.sg

Date & Time:

GRADING SKETCH Form\_V3

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

Date & Time: 21/02/2020  
11:00 AM

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

*Steve (LKK) 10/3/20 5.00pm 4 days, 4/5, P/P, R/M, S*

**Main Office:**  
Mova Building  
No. 22, Jalan Kilang,  
Singapore 159419  
Tel: (65) 6476 3333  
Fax: (65) 6271 5891  
www.mova.com.sg

**Workshop Dept:**  
Block 1008,  
Bukit Merah Lane 3,  
#01-04/06/08/94  
Singapore 159722

Tel: (65) 6272 3892  
Fax: (65) 6270 8314  
Co. Reg. 198904033G  
GST Reg. M2-0088864-2

# Estimate

28/02/2020

**SOMPO INSURANCE SINGAPORE PTE LTD**  
**50 RAFFLES PLACE**  
**#05-01/06 SINGAPORE LAND TOWER**  
**SINGAPORE 048623.**

Attention :- **XA018**

Page # :- 1  
Veh # :- SKV722D  
Veh Model :- TOYOTA CAMRY  
Estimate# :- CK420453  
Claim # :-  
ACC. Date :- 26/02/20  
Terms :- C.O.D Days  
Remarks :-

No.	Description	Qty	U.Price	Amounts S\$
<b>LIST ITEMS :</b>				
1.	REAR BOOT - REPAIR <i>x R</i>	1	PC	
2.	REAR BOOT LOGO (CAMRY) <i>- M</i>	1	PC	68.60
3.	REAR BOOT LOGO (2.5) <i>- M</i>	1	PC	55.70
4.	REAR BUMPER <i>- M</i>	1	PC	736.71
5.	BUMPER CLIPS <i>- M</i>	10	PC	4.80
6.	REAR BUMPER BRACKET RH <i>- BR</i>	1	PC	124.80
7.	REAR END PANEL - REPAIR <i>x R</i>	1	PC	
8.	END PANEL TOP GARNISH - CHECK <i>x</i>	1	PC	
9.	REAR REINFORCEMENT <i>?</i>	1	PC	496.80
LIST TOTAL S\$				1,530.61
25% DISCOUNT S\$				-382.65
				1,147.96
<b>SPECIAL NET ITEMS :</b>				
1.	REAR PARKING SENSOR <i>- SV</i>	1	PC <i>700</i>	250.00
SPECIAL NET TOTAL S\$				250.00
<b>LABOUR :</b>				
TO REPAIR REAR END PANEL, REAR BOOT, TO REMOVE & REPLACE ALL ACCIDENT DAMAGED AREAS TO STRAIGHTEN ON ACCIDENT DAMAGED PARTS				<i>500</i> 600.00
TO SPRAY PAINT ON ACCIDENT DAMAGED AREAS (PEARL WHITE)				<i>500</i> 700.00
TO REMOVE REAR SIDE TRIM BOARD L+R, SPARE TYRE & OTHER ATTACHMENT PARTS				<i>50</i> 150.00
TO RUST PROOF ON ACCIDENT DAMAGED PARTS				<i>30</i> 40.00
TO REMOVE & REFIX REAR PARKING SENSOR				<i>30</i> 40.00
TO INSPECT REAR TAILLAMP WATER LEAKAGE TEST				<i>30</i> 40.00
LABOUR TOTAL S\$				1,570.00

# Estimate

28/02/2020

**SOMPO INSURANCE SINGAPORE PTE LTD**  
**50 RAFFLES PLACE**  
**#05-01/06 SINGAPORE LAND TOWER**  
**SINGAPORE 048623.**

Attention :- **XA018**

Page # :- 1 137710

Veh # :- SKV722D

Veh Model :- TOYOTA CAMRY

Estimate# :- CK420453

Claim # :-

ACC. Date :- 26/02/20

Terms :- C.O.D Days

Remarks :-

**Main Office:**  
 Mova Building  
 No. 22, Jalan Kilang,  
 Singapore 159419  
 Tel : **(65) 6476 3333**  
 Fax : (65) 6271 5891  
 www.mova.com.sg

**Workshop Dept:**  
 Block 1008,  
 Bukit Merah Lane 3,  
 #01-04/06/08/94  
 Singapore 159722

Tel : **(65) 6272 3892**  
 Fax : (65) 6270 8314  
 Co. Reg. 198904033G  
 GST Reg. M2-0088864-2

No.	Description	Qty	U.Price	Amounts S\$
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E. & O.E

NON-TAX AMOUNT S	
AMOUNT S\$	2,967.96
GST @ 7 %	207.76
AMOUNT DUE S\$	3,175.72

Customer's Signature/Co. Stamp **MOVA AUTOMOTIVE PTE LTD**

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: