

EVEREST LAW LLC

Advocates & Solicitors

UEN No. 201943895D

151 Chin Swee Road, #12-12 Manhattan House, Singapore 169876

Tel: 69707502 Fax: 69707503

We do not accept service of court documents by facsimile.

Our ref : TA.2020.2458(6266).ya(b)
Your ref : SHA7631H

6 August 2020

WITHOUT PREJUDICE

India International Insurance Pte Ltd
64 Cecil Street,
#04/#05 IOB Building,
Singapore 049711
Attn: Motor Claims Department

Certificate of Posting
Comfort Transportation Pte Ltd (no enclosure)
383 Sin Ming Drive
GAS Building Singapore 575717

Dear Sir/Madam,

CLAIMANT: QUALITY LEASING PRIVATE LIMITED
ACCIDENT INVOLVING SKG4215D & SHA7631H ON 6 APRIL 2019 ALONG DUNEARN ROAD INTO LINDEN DRIVE AT ABOUT 0220 HOURS

We act for QUALITY LEASING PRIVATE LIMITED, the owner of vehicle no. SKG4215D, whose vehicle was damaged as a result of the abovementioned accident by vehicle no. SHA7631H and our search reveals that you were the insurer of motor vehicle no. SHA7631H at the time of the accident.

We are instructed that the accident was caused by your insured's negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged, and our client has been put to loss and expense, particulars of which are as follows:

1.	Costs of repair	\$30,000.00
2.	Loss of use (PRI 28 days x \$100)	\$2,800.00
3.	Survey report fee	\$1,634.00
4.	LTA search fee	\$7.49
5.	GIA search / report fee	\$29.00
6.	Incidentals	\$80.00
7.	Costs	<u>\$900.00</u>
		<u>\$35,450.49</u>

We enclose herewith copies of the following documents supporting our client's claim for your attention:


1. GIA report for vehicle no. SKG4215D;
2. LTA search fee for **SHA7631H**;
3. Final Repair Bill;
4. Survey report (enclosing original photographs) depicting damage to SKG4215D.

Please note that if you are insured and you wish to claim your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within 14 days from the receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully


Tiwary Anuradha (Ms)
Everest Law LLC

Enc.

Confidentiality Notice: This letter is confidential. It may also be legally privileged.

If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it.

If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by e-mail.

SV

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	08/04/2019 11:55
Date Of Accident	06/04/2019 02:20
Exact Location Of Accident	ALONG DUNEARN RD INTO LINDEN DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG4215D
Insured/Policyholder	
Name Of Registered Owner	QUALITY LEASING PRIVATE LIMITED
Co Reg No	201312796G
Email Address	SHARONSOON5404@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	VOLVO
Model	S60 T4 1.6 AT ABS D/AB 2WD 4DR TC
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	18-MJ000980-R00
Cover Note Number	

Driver

Name of Driver	ON SI YUAN, JOAB
NRIC No	S9020041J
Date Of Birth	12/06/1990
Occupation	INDOOR
Date Of Driving Pass	24/07/2015
Driving Experience	3 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81791484
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 292A BUKIT BATOK EAST AVENUE 6 #08-208
Postcode	651292
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	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

-

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	SHA7631H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
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
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

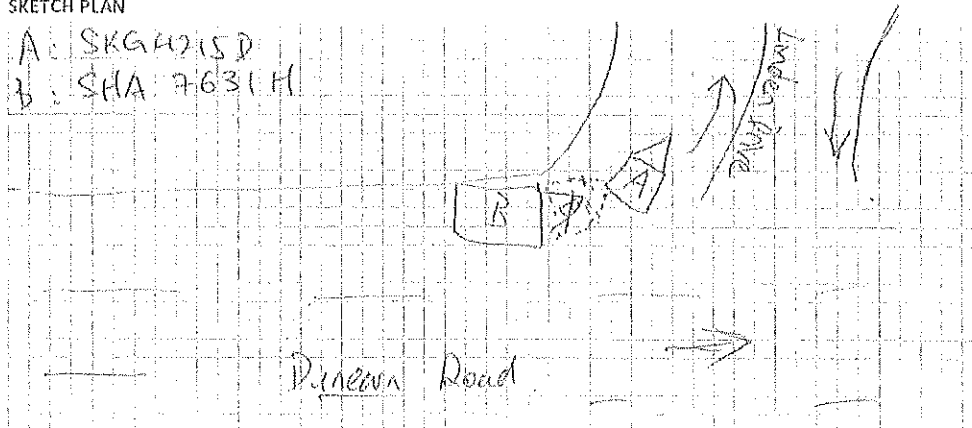
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan Pg. 2

SKETCH PLAN

A: SKGA215D
B: SHA 7631H



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE:	SKG 4215 D	ACCIDENT DATE & TIME:	08/04/2019 02:20 AM
CONTACT NUMBER:	8179 1484	E-MAIL ADDRESS:	tanben@hotmail.com
LOCATION:	Along Puneam Road Turning into Linden Drive		
I was driving along Puneam Road turning into Linden Drive suddenly this taxi SHA 7621H came from behind at a very high speed and knock on to the rear of my vehicle.			
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			
Please state:			
<input type="checkbox"/> Claim Own Policy <input type="checkbox"/> Claim Third Party <input checked="" type="checkbox"/> Claim OD/TP at other workshop <input type="checkbox"/> Reporting Only			

DECLARATION

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

Policyholder's Signature: _____
Date & Time: _____

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

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

Enquire Vehicle & Owner Information (Vehicle No. SHA7631H As At 06 Apr 2019 / 02:20:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: XINYA-SKG4215D

Current Owner Details

Owner ID Type: Company

Owner ID: 199303821R

Owner Name: COMFORT TRANSPORTATION PTE LTD

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.:383

Registered Street Name: SIN MING DRIVE

Registered Unit No.: -

Registered Building Name: GAS BUILDING

Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.: SHA7631H

Make Description/Model: HYUNDAI / I40 1.7L CRDI AT ABS AIRBAG 4DR

Insurance Company Name: INDIA INT'L INS PTE LTD



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735**TAX INVOICE**

Our Ref No: GR-19-140245

Date of Request: 28/08/2019

Your Ref No: 2019.6266

EAST ASIA LAW CORPORATION
133 New Bridge Road #10-02
Chinatown Point
Singapore 059413

Dear Sir/Madam,

Your Search Criteria:Date of Accident: 06/04/2019
Place of Accident: DUNEARN
Client Vehicle No: SKG4215D

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735**TAX INVOICE**

Our Ref No: GR-19-140249

Date of Request: 28/08/2019

Your Ref No: 2019.6266

EAST ASIA LAW CORPORATION
133 New Bridge Road #10-02
Chinatown Point
Singapore 059413

Dear Sir/Madam,

Date of Accident: 06/04/2019

Vehicle No: SKG4215D

Place of Accident: ALONG DUNEARN RD INTO LINDEN DRIVE

Involving Vehicle No: SHA7631H

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SHA7631H	ALONG DUNEARN RD INTO LINDEN DRIVE	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

e:

☒ [X] GIRO ☐ [] Cash ☐ [] Cheque

245-8(6266)

QUALITY LEASING PTE LTD

317 Outram Road, #02-39 Concorde Shopping Centre, Singapore 169075

Tel: 6473 8668 Fax: 6473 3005

Name : Quality Leasing Private Limited
Address : c/o 317 Outram Road
#02-39 Concorde Shopping Centre
Singapore 169075

Date : 3-Dec-19

Accident Date : 6-Apr-19

RECEIVED
02 MAR 2020

BY:.....

Final repair bill for vehicle no. SKG 4215 D

To supply and replace parts, labour charges for
repairing, knocking, welding and to respray painting
(Lump Sum Repair)

\$ 30,000.00

Dollar : Thirty Thousand Only

PAL'S

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883
Tel: 81818802 Fax: 67471017 Registration No: 201000268D

Invoice No 04-19011/DY

Billing Name & Address
Quality Leasing Private Limited
c/o 317 Outram Road
#02-39 Concorde Shopping Centre
Singapore 169075

Date 3 Dec 2019

Vehicle No : SKG 4215 D

Model : Volvo S60

Item	Descriptions	Amount S\$
1	Date of inspection : <u>9 Apr 2019</u> A copy of the inspection / survey report Correspondence, postages and etc.	
2	Photography Services - Purchase of films, develop negatives - Storage of negatives - Submission of photographs <u>209</u> copies	
3	Transportation Charges	
4	2nd Inspection & Final Inspection Total	<u>\$ 1634.00</u>
SDLS : ONE THOUSAND, SIX HUNDRED AND THIRTY-FOUR ONLY		

Notes :

1. All cheque payment should be "Crossed" and made payable to "Pal's Appraiser Pte. Ltd."
2. All cheque should have our "Invoice No." written on the reverse side of the cheque
3. For further enquiries on this invoice, please feel free to contact us



[Handwritten signature]

Official Stamp

PAL'S

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883
Tel: 81818802 Fax: 67471017 Registration No: 201000268D

Report Reference : **TP / 04-19011/DY / 2019**
Date of Report : **3 Dec 2019**

Quality Leasing Private Limited
c/o 317 Outram Road
#02-39 Concorde Shopping Centre
Singapore 169075

THIRD PARTY SURVEY ACCIDENT HAPPENED ON 6 Apr 2019

As per your instruction dated **9 Apr 2019** with regard to the above matter. We have carried out a physical inspection on the said vehicle **SKG 4215 D**. We enclosed herewith our report and findings as follows:

1. VEHICLE PARTICULARS

Registration No : SKG 4215 D
Model : Volvo S60
Year / Capacity : 2012/1596
Chassis No : YV1FS48HBC2143615
Engine No : B4164T1092548
Mileage : -
Colour : Red

2. TYRES CONDITION

		<u>Size</u>	<u>Made</u>	<u>Balance</u>		<u>Rim</u>
FRONT	O/S	215/50 R17	Goodyear	6.00	mm	Sport
REAR	O/S	215/50 R17	Goodyear	6.00	mm	Sport
FRONT	N/S	215/50 R17	Goodyear	6.00	mm	Sport
REAR	N/S	215/50 R17	Goodyear	6.00	mm	Sport

PAL'S

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-53 AutoBay @ Kaki Bukit Singapore 417883
Tel: 81818802 Fax: 67471017 Registration No: 201000268D

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the rear n/s portion(s). For more detail of the damages, please see photograph attached.

4. Workshop Address : Quality Leasing Pte Ltd
317 Outram Road
#02-39 Concorde Shopping Centre
Singapore 169075

5. Estimated normal period of repair : **26** working days to complete.

6. Enclosed number of photograph : **209** copies.

7. In accordance to your instruction, we have **Not Authorised** repair to the vehicle and the survey was done on a **"Without Prejudice"** basis. We hope that this report will be of assistance to you in dealing with the matter.

8. Should you discover any discrepancy in the report, please kindly notify us **within 2 weeks**, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle No: **SKG 4215 D**
 Report No: **TP/ 04-19011/DY / 2019**

SPARE PARTS

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
<u>List Items</u>				
1	Boot lid	Damage	\$ 2210.00	\$ 2210.00
1	Boot lid lamp	Damage	\$ 280.00	\$ 280.00
1	Boot lid inner lock	Damage	\$ 416.00	\$ 416.00
1	Boot lid rubber	Necessary	\$ 85.80	\$ 85.80
1	Boot lid 'VOLVO' emblem	Necessary	\$ 110.50	\$ 110.50
1	Boot lid 'S60' emblem	Necessary	\$ 100.10	\$ 100.10
1	Boot lid 'T4' emblem	Necessary	\$ 100.10	\$ 100.10
1	Boot lid hinge cover	Damage	\$ 67.00	\$ 67.00
1	Rear taillamp	Damage	\$ 548.00	\$ 548.00
1	Rear taillamp panel	Damage	\$ 167.00	\$ 167.00
1	Rear end panel	Damage	\$ 1144.00	\$ 1144.00
1	Rear bumper	Damage	\$ 1428.30	\$ 1428.30
1	Rear bumper reinforcement	Damage	\$ 1227.20	\$ 1227.20
1	Rear bumper side retainer	Damage	\$ 54.30	\$ 54.30
1	Rear bumper sensor	Damage	\$ 221.60	\$ 221.60
1	Rear exhaust silencer insulator	Damage	\$ 494.00	\$ 494.00
1	Rear fender	Damage	\$ 2032.70	\$ 2032.70
1	Rear fender air gate	Damage	\$ 43.00	\$ 43.00
1	Rear fender inner garnish	Damage	\$ 188.90	\$ 188.90
1	Rear fender inner panel	Damage	\$ 1476.10	\$ 1476.10
2	Rear fender inner shields	Damage	\$ 272.40	\$ 272.40
1	Rear fuel lid inner pipe	Damage	\$ 273.80	\$ 273.80
1	Rear sport rim	Damage	\$ 880.00	\$ 880.00
1	Rear shock absorber	Damage	\$ 326.00	\$ 326.00
1	Rear knuckle arm c/w bearing	Damage	\$ 1042.00	\$ 1042.00
1	Rear lower arm	Damage	\$ 318.00	\$ 318.00
1	Rear stay arm	Damage	\$ 286.00	\$ 286.00
1	Rear top arm	Damage	\$ 115.00	\$ 115.00
1	Rear trailing arm	Damage	\$ 463.00	\$ 463.00
1	Rear cross member	Damage	\$ 2267.00	\$ 2267.00
1	Rear stabilizer bar	Damage	\$ 197.00	\$ 197.00
1	N/s rocker panel	Repair	\$ 1834.10	\$
1	N/s rocker panel side skirt	Damage	\$ 721.70	\$ 721.70
1	Rear door	Damage	\$ 2963.00	\$ 2963.00
1	Rear door outer handle	Damage	\$ 471.00	\$ 471.00
1	Rear door rubber	Necessary	\$ 266.00	\$ 266.00
1	Roof top panel inner trim	Damage	\$ 1617.00	\$ 1617.00

List Items Sub Total	\$ 26707.60	\$ 24873.50
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Vehicle No: **SKG 4215 D**
 Report No: **TP/ 04-19011/DY / 2019**

SPARE PARTS

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
List Items Total c/f			\$ 26707.60	\$ 24873.50
<u>List Items</u>				
1	Roof top air-bag	Damage	\$ 1984.00	\$ 1984.00
1	Front passenger seat with air bag	Damage	\$ 3885.00	\$ 3885.00
1	Air bag sensor	Necessary	\$ 411.00	\$ 411.00
1	ECU control unit	Necessary	\$ 1341.00	\$ 1341.00
			<u>\$ 34328.60</u>	<u>\$ 32494.50</u>
	Discount	10.0%	\$ 3432.86	\$ 3249.45
			<u>\$ 30895.74</u>	<u>\$ 29245.05</u>
<u>Special Nett Items</u>				
1	Rear windscreen seal	Necessary	\$ 100.00	\$ 100.00
1	Rear windscreen sealant	Necessary	\$ 100.00	\$ 60.00
1	Rear tyre (Depreciation)	Damage	\$ 420.00	\$ 252.00
			<u>\$ 620.00</u>	<u>\$ 412.00</u>

Spare Parts Total \$ 31515.74 \$ 29657.05

Vehicle No: **SKG 4215 D**
 Report No: **TP/ 04-19011/DY / 2019**

LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
	Spare Parts Total c/f	\$ 31515.74	\$ 29657.05
1	To provide towing service charge.	\$ 60.00	\$ 60.00
2	To disconnect and reconnect, check electrical wiring, harness wires, sockets, replace damaged parts.	\$ 50.00	\$ 40.00
3	To remove and refit rear cushion seats, radio speaker board, interior upholstery to facilitate the repairs.	\$ 300.00	\$ 240.00
4	To remove and refit rear bumper sensor.	\$ 150.00	\$ 80.00
5	To remove and refit rear undercarriage.	\$ 1000.00	\$ 600.00
6	To check and re-adjust (Computerized) all wheel alignment.	\$ 200.00	\$ 120.00
7	To remove and refit rear windscreen glass.	\$ 280.00	\$ 150.00
8	To remove and refit, straighten and re-adjust exhaust pipe and replace rear exhaust silencer and mountings.	\$ 180.00	\$ 80.00
9	To remove and refit the door lock mechanism, regulator gear, window glass, handle, inner board, hinges, channel to facilitate the repairs.	\$ 150.00	\$ 80.00
10	To remove and replace the above damaged parts, straighten, knock out, realign and repair including cut and weld body panels. To re-adjust to the original position using power tools.	\$ 3000.00	\$ 2500.00
11	To spray paint on the replaced and repaired parts, prepare spray such as masking tape the unaffected areas with paper, cleaning and sanding of surfaces, final polishing and waxing are also available.	\$ 3000.00	\$ 2500.00
Sub Total		\$ 39885.74	\$ 36107.05