

ASS. REC. BY:

REF: CTZ / 21000750/Ke

C

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s City Auto

Insured: _____

Policy No. _____

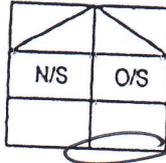
Claims No. _____

Sum Insured: _____ Excess: _____
(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 1-B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SL 75585A Yr Regn: 08, 18⁵

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

Truck / Trailer or Wagon
Make: Honda Shuttle c.c. 1496

Colour: M. D. Grey A/C: Insured / Std / NI / NA

Sp. Reading: 182335 T/Radio: Insured / Std / NI / NA

Eng/No: _____
C/No: GP7 - 1209238

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60R15
R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front R/Bal. 8 mm Rear R/Bal. 8 mm
L/Bal. 8 mm L/Bal. 8 mm
D.O.A. 13/1/21 D.O.I. 18/1/2021

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or
Rear o/s

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
<u>22/1</u>	<u>CTZ Emp @ 255d Carsum</u>

Date/Time, File Pass to? : Prel. Report
 : Final Report

Days Of Repair: _____

Resurvey No. of Trlp: _____

Survey Fee: _____

Transportation: _____

_____ \$ + RS. _____ SI

_____ P. _____

_____ Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$ _____)

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

Empty box for additional notes or calculations.



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643

TEL: 6453 1235, 6452 0850 FAX: 6453 7944

24hrs Towing Services Tel 9823 9898

Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Estimate : QUOT202101-000342(00)

Date : 14/01/2021

Vehicle No. : SLZ5565A

Make/Model : HONDA SHUTTLE HYBRID 1.5
AUTO

Mileage (km) : 0

Chassis No. : GP71209238

Accident Date : 13/01/2021 00:00:00

Claim No. : SGE7272B

Reference : JO202101-0488

Policy No. : 5112028891-01

CHINA TAIPING INSURANCE (S) PTE LTD

NO. 3

ANSON RD

SPRINGLEAF TOWER

SINGAPORE 079909

Contact : -

Fax No. : 62247175

Not Notified

Primary B repair

L1 Imp @ 2550/ 4 days

S/No	Particular	Quantity	Unit Price	Amount S\$
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LIST ITEMS :

1	Rear bumper	1.0	1,150.60	<i>Bur</i> 1,150.60 ✓
2	Rear bumper bracket	2.0	24.90	<i>R</i> 49.80 X
3	Rear bumper lamp	1.0	148.50	<i>sm</i> 148.50 X
4	Rear bumper lamp garnish	1.0	86.20	<i>h</i> 86.20 X
5	Rear boot lid	1.0	1,193.00	<i>By</i> 1,193.00 ✓
6	Rear boot emblem - Hybrid	1.0	38.00	<i>ner</i> 38.00 ✓
7	Rear boot emblem - logo	1.0	55.00	<i>ner</i> 55.00 ✓
8	Rear boot emblem - Shuttle	1.0	80.10	<i>ner</i> 80.10 ✓
9	Tow cover	1.0	18.50	<i>h</i> 18.50 X
10	Rear end panel	1.0	538.30	<i>R</i> 538.30 X
List Total :				3,358.00
20% Discount S\$				671.60
				2,686.40

SPECIAL NET :

1	Reverse sensor	1.0	300.00	<i>od</i> 300.00 <i>2005A-</i>
2	Rear windscreen sealant	1.0	55.00	<i>ner</i> 55.00 <i>403N</i>
SPECIAL NET Total S\$:				355.00

LABOUR :

* To remove and refit of windscreen glass	1.0	120.00	120.00	✓
-To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts	1.0	550.00	550.00	<i>400L</i>
- Spray painting on affected & replace parts	1.0	850.00	850.00	<i>420L</i>
				1,520.00

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before 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:

Page 1 of 1

Total S\$: 4,561.40

GST 7% S\$: 319.30

Amount Due S\$: 4,880.70

for CITY AUTO PTE LTD