

(08/11/13) waf

ASS. RE BY: Marcus

REF:

CS/40121005012/443

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: GBA 924E

at Workshop m/s

of

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.

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

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

GBA 924E

Yr Regn:

02/102/07

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

Truck / Trailer or

Make:

Toyota Dyna

c.c

2982

Colour:

S.h

A/C:

Insured / Std / NI / NA

Sp. Reading

462139

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JT FAT 354/80 3000166

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195 R15

R:

155 R12

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

TOYO / YOKO or

westlake

Front

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

16/4/21

D.O.I.

21/4/21

Survey held at

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

Rear N/S.

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

Date / Time Action / Instruction

see note 01-02-2022
Nett 6218

3/5/21

4/5 # 5000 confirmed with Alan.
(Red: 7383.70, 59%)

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Days Of Repair: 5

Resurvey No. of Trip:

Survey Fee:

Transportation:

) \$ + RS, \$ SI

) Photos

) Others

Report Format :

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

TP
5000/-

TOTAL

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 Submission 21/04/2021 13:25 (SGT)
Date of Accident 16/04/2021 10:30 (SGT)
Exact Location of Accident Bedok North Ave 4, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBA924E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SOLID PLASTERCEIL DECOR
Company Reg No 5XXXX679M
Email Address JASONKCAPL@GMAIL.COM
Mobile Phone No (Phone) +65-91007849
Alternative Phone No +65-91007849

VEHICLE PARTICULARS

Manufacturer Toyota
Model Dyna
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 3000

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number Z/21/VC00/109783
Cover Note Number -

DRIVER

Name of Driver CHONG WEE FONG
NRIC No SXXXX666C

Date Of Birth	15/01/1974
Occupation	Outdoor
Date Of Driving Pass	15/03/1997
Driving experience	24 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-91007849
Alt. Phone Number	-
Email Address	JASONKCAPL@GMAIL.COM
Address	BLK 269B YISHUN ST 22 #09-547
Address complement	-
Postcode	762269
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

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 the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210417/2079

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	YP6009G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver -
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHONG WEE FONG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	GBA924E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 willful 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 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.
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.



[Signature]

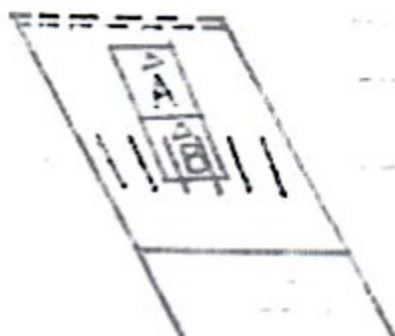
[Signature]

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Bedok North Ave 4

A: 68A 924E

B: YP4009 G

Describe Circumstances of the Accident

Please refer to the Police Report: (T/20210414/2079)

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

ct

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

4

Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20210417/2079

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 4
Report No. T/20210417/2079

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/04/2021 20:24	Vide Report No.:	Station Diary No.: 75
--	------------------	--------------------------

Informant's Particulars

Name of Informant: CHONG WEE FONG		Address: APT BLK 269B YISHUN STREET 22 #09-547 SINGAPORE 762269	
ID Type / ID No.: NRIC NO / S7477666C		Contact No.: Home/Office: Mobile: 91007849	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 47	Date of Birth: 15/01/1974	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: CONTRACTOR		Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/04/2021 10:30	Type of Location: Bend
Location: BEDOK NORTH AVENUE 4				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBA924E	Lorry				Slightly Damaged	0
YP6009G	Lorry				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210417/2079

2 of 4

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20210417/2079

CONTINUATION OF REPORT

Driver			
Name	CHONG WEE FONG	ID No.	S7477666C
Related Vehicle	GBA924E (Lorry)	Contact No.	91007849
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	17/04/2021	Date Discharge	17/04/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	MOHAMMED TASBIH BIN MOHD IDRUS	ID No.	S8606855I
Related Vehicle	NIL	Contact No.	89431547
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 16/04/2021, at around 1030hrs, I was driving my company lorry (bearing registration no.: GBA 924E) along Bedok North Ave 4 and I was intending to turn left into Upper Changi Road.

At the stop line, I made a safety check on my right and I saw that there were cars travelling so I stopped to let the cars pass by.

Suddenly, I felt an impact from behind and I realized that a 14ft lorry (bearing registration no.: YP 6009G) had collided onto my rear. I stopped my vehicle ahead to make a check on the damages. My lorry sustained dents and damages onto the rear. The other lorry sustained dents and damages on the front bumper.

We exchanged particulars and agreed on claiming insurance after informing my company.

I felt pain and strain on the back of my neck.

I then left the scene.

On 17/04/2021, I went to Changi General Hospital to seek medical treatment as I still feel the pain and I was given 5 days of MC by the doctor.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768327
Tel No: 1800-8529999



T/20210417/2079

3 of 4

Report No. T/20210417/2079

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20210417/2079

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

4 of 4

Report No T/20210417/2079

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
L /
Sgt 2 MUHAMAD SYABIL BIN SALLEH

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/04/2021 20:24

Officer In Charge Of Case:
TP / AEIT /
Insp BOON YEN KIAN
Contact No.: 65476172

Classification Of Case:

Authentication Stamp
NP:68

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business
Owner ID: 679M

Vehicle Details

Vehicle No.: GBA924E
Vehicle to be Exported: No
Intended Deregistration Date: 21 Apr 2021
Vehicle Make: TOYOTA
Vehicle Model: DYNA 150 MANUAL
Primary Colour: Silver
Manufacturing Year: 2006
Engine No.: 1KD1549520
Chassis No.: JTFAT35Y803000166
Maximum Power Output: -
Open Market Value: \$24,285.00
Original Registration Date: 02 Feb 2007
First Registration Date: 02 Feb 2007
Transfer Count: 3
Actual ARF Paid: \$0.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 01 Feb 2022
COE Category: C - Goods Vehicle & Bus
COE Period(Years): 5
PQP Paid: \$24,252.00
COE Rebate Amount: \$3,782.00
Total Rebate Amount: \$3,782.00

Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 21 Apr 2021

OK

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Low Mileage, Well Maintained,
Stuttgart Car, Original Stock,
Accident Free.

Direct Owner [StarAd](#)

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NEW & USED COMMERCIAL VEHICLES

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Sort by Date Posted 20 results/page

2 vehicles

dyna 2022

[Advanced Search](#) [Submit](#)

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	dyna 2022		Any	Any	> 10 year(s) old	Any	Any	Any	Available
	Toyota	Dyna 150 3.0M (COE till 08/2022)	-	N.A	18-Sep-2002	2,986 cc	-	Truck	Available
		Fuel Type: Diesel							DIRECT OWNER
		Posted: 21-Apr-2021 Tags: 2002 Toyota Dyna, Toyota Dyna, Toyota, Dyna							
	Toyota	Dyna 150 3.0M (COE till 03/2022)	\$16,800	\$19,340 /yr	05-Mar-2007	2,982 cc	-	Truck	Available
		Fuel Type: Diesel							DIRECT OWNER
		Good Condition.							
		Posted: 20-Apr-2021 Tags: 2007 Toyota Dyna, Toyota Dyna, Toyota, Dyna							

Save this search criteria, to get email alerts whenever a match is found.

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
For old advertisements, view Expired ads									

20 results/page

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Sort by Date Posted

20 results/page

5 vehicles

dyna 2023

[Advanced Search](#) [Submit](#)

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	dyna 2023		Any	Any	> 10 year(s) old	Any	Any	Any	Available
	Toyota	Dyna 150 3.0M (COE till 10/2023)	\$21,800	\$8,790 /yr	14-Oct-2008	2,982 cc	178,050 km	Truck	Available
Fuel Type: Diesel Good Condition, Will Maintained, Loan Available. Posted: 21-Apr-2021 Tags: 2008 Toyota Dyna, Toyota Dyna, Toyota, Dyna									
	Toyota	Dyna 150 3.0M (COE till 06/2023)	\$23,800	\$10,950 /yr	24-Jun-2008	2,982 cc	-	Truck	Available
Fuel Type: Diesel LTA Approved Full Canopy, Full Checker Plate, Vehicle In Tip Top Condition, No Repair Needed, Low Down Payment, Flexible Loan Packa... Posted: 16-Apr-2021 Tags: 2008 Toyota Dyna, Toyota Dyna, Toyota, Dyna									
	Toyota	Dyna 150 3.0M (COE till 04/2023)	\$23,800	\$12,000 /yr	16-Apr-2008	2,982 cc	-	Truck	Available
Fuel Type: Diesel 1 Owner Only, Low Mileage, All Wear & Tears Has Been Changed, Come With Reverse Camera For Safety Issue, Call Us Now To View. SG Motor Link Pte Ltd Posted: 13-Apr-2021 Tags: 2008 Toyota Dyna, Toyota Dyna, Toyota, Dyna									
	Toyota	Dyna 150 3.0M (COE till 07/2023)	\$14,800	\$6,500 /yr	06-Aug-2003	2,986 cc	-	Truck	Available
Fuel Type: Diesel Engine And Gear Transmission Is In Good Condition, Vehicle Number GW5482E ROC: 052C. We Provide High Trade In For All Vehicle M... Posted: 08-Apr-2021 Tags: 2003 Toyota Dyna, Toyota Dyna, Toyota, Dyna									
<div><div>GET YOUR COE RENEWAL LOAN</div><div>Is your COE expiring? Let us help you renew it!</div><div>Getting your COE renewed is easy, fast and affordable. We'll help you renew your COE and get a loan for it. Get the cheapest loan in town and an approval in 2 days without effort! Enquire today.</div></div>									
	Toyota	Dyna 150 3.0M (COE till 09/2023)	\$20,800	\$8,600 /yr	22-Sep-2008	2,982 cc	198,000 km	Truck	Available
Fuel Type: Diesel Posted: 04-Apr-2021 Tags: 2008 Toyota Dyna, Toyota Dyna, Toyota, Dyna									

Save this search criteria, to get email alerts whenever a match is found.

Submit to insurance

NOT AUTHORIZED

21/4/21

1/5 \$ 5000 / 5 days

FASTECH AUTO PTE LTD
1 KAKI BUKIT AVE 6
01-48 S'PORE 417883

VEHICLE NO:GBA 924E

1PC	TAILGATE	Self	\$1,645.10	/
1PC	TAILGATE DYNA STICKER	new	\$45.50	/
1PC	TAILGATE LOWER MEMBER	Self	\$545.10	/
1PC	TAILGATE LOCK LATCH N/S	Self	\$119.30	/
1PC	TAILGATE 'TOYOTA' STICKER	new	\$275.00	/
2PCS	TAILLAMPS @\$ 285.30	n/s one	\$570.60	1pc
2PCS	TAILLAMP PANELS @\$ 119.30	n	\$238.60	X
1PC	TAILGATE LOWER 'L' PANEL N/S	Self	\$68.50	/
1PC	TAILGATE LOWER 'L' PANEL RUBBER N/S	NT	\$62.30	X
1PC	DROPSIDE GATE N/S	22/ Self	\$2,455.10	/
1PC	DROPSIDE GATE LOWER MEMBER N/S	Self/one	\$899.20	/
1PC	REAR EXHAUST PIPE	11	\$585.20	X
1PC	REAR EXHAUST PIPE MONTING	11	\$112.00	X
1PC	REAR CENTRE CROSS MEMBER	11	\$845.20	X
1PC	REAR SPARE TYRE CHAIN & BRACKET	11	\$392.50	X
1PC	REAR SPARE TYRE 'L' BRACKET	11	\$85.00	X
1PC	REAR LICENCE PLATE BRACKET	Self	\$119.50	/
			\$9,063.70	
	S.NETT			
1PC	TAILGATE 70KM/hr STICKER	new	\$20.00	10
1SET	REAR REVERSE SENSOR	NT	\$380.00	X
1PC	REAR LICENCE PLATE	Self	\$40.00	14
	TO CHECK WIRING		\$80.00	20
	TO DISMANTLE & REPLACING REVERSE SENSOR	11	\$80.00	X
	TO SPRAY RUST PROOFING		\$120.00	80
	TO DISMANTLE & REPLACING REAR EXHAUST	11	\$100.00	X
	LABOUR FOR PANEL BEATING & REPLACING PARTS		\$1,000.00	900
	TO PUTTY & SPRAY PAINTING		\$1,500.00	880
	TOTAL		\$12,383.70	

25%

For the Company to hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To survey damaged part(s) during resurvey
- Repair 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:

1-5795.30
25%
1-4346.47
S.N-24
2-1880
6250.47
202
8000.