

(08/11/13) wef

ASS. REC. BY: *marcus*

REF:

CC6/CT121005776/4es3

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: *GBC 2114C*

at Workshop m/s *143 BD*

of

Insured:

GBA 9286D

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:

\$10k.

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.: Yes or No

Lump Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

196N

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

GBC 2114C

Yr Regn:

12/8/11

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

Truck / Trailer or

(M)

Make:

Toyota Hiace

c.c *2982*

Colour

Green

A/C: Insured / Std / NI / NA

Sp. Reading

420846

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTFH 02P 600076690

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F:

195-215

R:

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

TOYO / YOKO or

Austone

Front

6

Rear

6

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

6/5/21

D.O.I.

12/5/21

Survey held at

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

Rear

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

Date / Time

Action / Instruction

*body \$7k. LTA \$547
cost until 11-8-2011
new vans \$92k.*

19/5/21 4/5 \$2800 confirmed with Susan.

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:

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

) ☐ S + RS, ☐ SI

) Photos

) Others

Report Format :

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

TOTAL

**LIU'S BROTHER AUTO ENGINEERING WORKSHOP**

No. 1 Kaki Bukit Avenue 6 #01-01 Auto Bay @ Kaki Bukit Singapore 417883

ROB No: 53291793J . Tel: 6741-1730 / 731 . Fax: 6744-5746. Email: liusbro@gmail.com

Invoice/Ref No: GBC2114C210506

Estimate**Customer**

Name: China Taiping Insurance (Singapore) Pte Ltd

Address Motor Claims Department

3 Anson Road #16-00

Springleaf Tower

Singapore 079909

Date:

11-05-21

Vehicle No: GBC2114C

Model/Make: Toyota Hiace
Manual

Item No.	Descriptions Of Parts	Original Quotation / Estimation	Revised Quotation / Cost Of Repair
1	Rear Tailgate <i>50/300</i>	\$ 1,850.00	
2	Tailgate Inner Lock <i>SN</i>	\$ 359.00	X
3	Tailgate "Toyota Logo" Motif <i>new 68-10</i>	\$ 70.30	✓
4	Tailgate "70 KM/H" Sticker <i>new</i>	\$ 15.00	SN
5	Tailgate "8 PAX" Sticker <i>new</i>	\$ 15.00	10 s/w
6	Bumper <i>DE 48-10</i>	\$ 796.80	10 s/w
7	Bumper Clips 1 set <i>new 50-00</i>	\$ 65.00	✓
8	Bumper Reverse Sensor <i>SN</i>	\$ 220.00	SN
9	End Panel Outer <i>DD</i>	\$ 566.10	X
10	End Panel Sealant <i>new</i>	\$ 50.00	X
	Remove and refix rear tailgate components & wiper mechanism	\$ 80.00	60
	Remove and refix rear bumper reverse sensor	\$ 120.00	40
	Labor for Panel Beating, Cut, Weld, Straighten & Replacing Parts Etc	\$ 600.00	580
	To putty & spray painting & including touch up paint on accident affected area	\$ 600.00	450
	To apply Rust Proofing , reseal tuff-coating treatment on accident area	\$ 60.00	50
	Remove & reinstall Tailgate Glass to facilitate repairs	\$ 120.00	100

Total Parts & Labour of estimate for damaged vehicle

\$ 5,587.40

Total amount in Lump Sum Basis for repaired vehicle

SDLS:



M/s Liu's Bro Auto Engrg Wks

not Authorized
deal
11/5/21
d/s \$2800
4 days
Whe phw After up
** Lth. Asher*

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:

P. 3015-30
25%
7-2261-47
S.N-20-00
1-1280
3561-47