

We do not accept service of Court documents by fax.

Our ref: AP/2021/004303/MC

Your ref: SLK4844E

Date: 18 March 2022

Secretary in charge: Caroline

Secretary's email: caroline@apl.com.sg

WONG ZHI JINGBlock 210 Bukit Batok Street 21
#04-210
Singapore 650210**By POST****(Without attachments)****Lonpac Insurance BHD****Insurer of SLK4844E**300, Beach Road #17-04/07,
The Concourse,
Singapore 199555**By EMAIL****(With attachments)**

Dear Sirs,

WITHOUT PREJUDICE**CLAIM ARISING FROM A ROAD TRAFFIC ACCIDENT ON 10 NOVEMBER 2021 AT ABOUT 2045 HRS INVOLVING MOTOR VEHICLES NO(S). SMD8219J AND SLK4844E ALONG BUKIT BATOK WEST AVE 6**We act for **STARK HOLDINGS INN BIKE LEASING PTE. LTD.**, owner of **SMD8219J**.We are instructed by our client to claim damages against you/your insured in connection to the above-mentioned road traffic accident between our client and your/your insured's vehicle **SLK4844E**.

We are instructed that the above-mentioned road traffic accident was caused by your/your insured's negligence / the negligence of your authorised driver in the driving, management and/or control of your/your insured's vehicle.

As a result of the abovementioned road traffic accident, our clients' vehicle was damaged and our clients has been put to loss and expense, particular of which are as follows:

COSTS OF REPAIR (WITH GST) \$ 15,301.00**LOSS OF USE/RENTAL \$ 1,560.00**

- Pre-repair \$ 360.00
(03 days including intervening weekend @ \$120.00 per day)
- Loss of use/rental during repair works \$1200.00
(10 days including intervening weekend @ \$120.00 per day)

Our Legal Costs with GST (At this stage) \$ 1,605.00

Disbursements (To-date)**\$ 941.99**

1.	Survey Report Fees	\$ 745.00
2.	GIA / LTA searches fee	\$ 36.49
3.	Other Incidentals with GST	\$ 160.50

Total \$ 19,407.99

We enclose herewith the following supporting documents for your attention:

- a. Our client's Singapore Accident Statement;
- b. Copy of repair bill from our client's workshop;
- c. Copy of our client's surveyor report;
- d. Copy of the survey report tax invoice;
- e. Copy of our client's rental bill;
- f. Copies of receipts for GIA / LTA searches;

In compliance with the pre-action protocol under the State Courts' Practice Direction 37, we had notified your insurer of the above-mentioned road traffic accident and to the best of our knowledge, your insurer had arranged for the pre-repair inspection of our client's vehicle.

Please note that if you are insured and you wish to claim under 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 to us within fourteen (14) days of your 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 a counterclaim against our client arising out of the above-mentioned accident, you are required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within eight (8) weeks of your receipt of this letter

*Should you fail to acknowledge receipt of this letter within fourteen (14) days, our client may commence Court proceedings against you without further notice to you or your insurer. For the avoidance of any doubt, **this letter serves as notice under Section 9(3) of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189)** of our client's intention to commence proceedings against you and/or your authorised driver.*

Yours faithfully,

**A P LAW PRACTICE LLC**

enc

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 11/11/2021 13:02 (SGT)
Date of Accident 10/11/2021 20:45 (SGT)
Exact Location of Accident Bukit Batok West Ave 6, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMD8219J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner STARK HOLDINGS INN BIKE LEASING PTE LTD
Company Reg No 201419069W
Email Address STARKHOLDINGSINN@GMAIL.COM
Mobile Phone No (Phone) +65-92201069
Alternative Phone No +65-92201069

VEHICLE PARTICULARS

Manufacturer Toyota
Model Estima
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private hire
Transmission Auto
CC 2362

INSURANCE COMPANY

Name of Insurance Company Etiqa Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number M0016412
Cover Note Number -

DRIVER

Name of Driver MOHAMAD ISWANDY BIN ISMAIL
NRIC No S8305749A

Date Of Birth	22/02/1983
Occupation	Outdoor
Date Of Driving Pass	01/03/2002
Driving experience	19 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-85180147
Alt. Phone Number	-
Email Address	STARKHOLDINGSINN@GMAIL.COM
Address	BLK 176D EDGEFIELD PLAINS #02-196
Address complement	-
Postcode	824176
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 vehicle 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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING ALONG BUKIT BATOK AVE 6. I STOPPED MY VEHICLE TO GIVE WAY TO THE VEHICLE IN FRONT OF ME. SUDDENLY VEHICLE B CAME FROM BEHIND AND HIT ONTO THE REAR PORTION OF MY VEHICLE.

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	SLK4844E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	WONG ZHI JING
Contact Number	(Phone) +65-93361316
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 MOHAMAD ISWANDY BIN ISMAIL
 Gender -
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? SMD8219J
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? -

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 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.

6. 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.



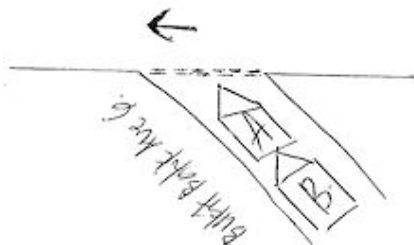
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

Butik Butik are 1.



(A) : SMD 8219J
(B) : SLK 4844E

Describe Circumstances of the Accident

I was travelling along Bukit Batok Ave C. I stopped my vehicle to give way to the vehicle in front of me.

Suddenly vehicle B came from behind and hit onto the rear portion of my vehicle.

Declaration

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



Policyholder's Signature / Date & Time

agashm

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

Witnessed by Reporting Centre Personnel













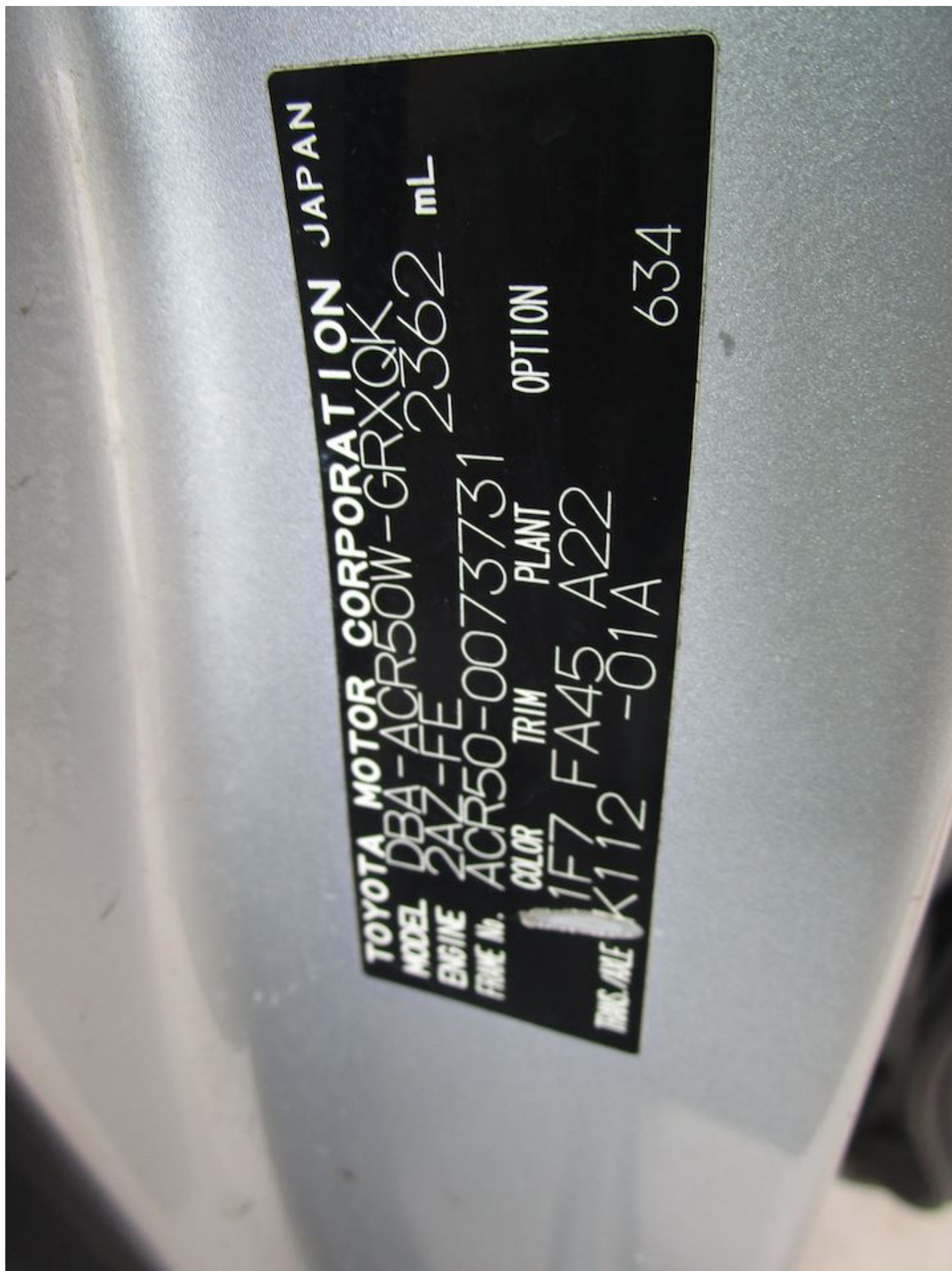
























INTERVIEW FORM

Name (Driver) : MUHAMMAD ISWANDY BIN ISMAIL

Policy No : M0016412

Vehicle No : SMD 8219J

Place of Accident : Bukit Batok Ave 6

Insured Driver's relationship with Insured : HIKER

Drink Driving of Insured and/or Insured Driver : No.

No of passenger(s) in Insured vehicle : 0

Injury to Insured and/or Insured driver, please indicate which hospital:
No

Third Party Vehicle No (if any) : SLK 4844 E

No of passenger(s) in Third Party Vehicle : N/A

Injury to Third Party driver and/or passenger(s), please indicate which hospital:
No

Type of collision and the extensiveness of the damages to all vehicles involved:
HIT REAR PORTION

Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement):
No

Traffic Police report (enclosed) : Yes ☒ No ☐

Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)

x wandy
Driver (Name & Signature)

I, affirmed the above information is given to my best knowledge

Attended by (Name & Signature)

Workshop Name: _____

Etiqua Insurance Berhad (Company Reg. No. T09FC0054K)
1 North Bridge Road, #08-01 High Street Centre, Singapore 179094
T: +65 6336 0477 F: +65 6339 2109

A Member of the **TAIYUAN** Group



M2400
31003841
Cov. Type: Comprehensive

CERTIFICATE OF INSURANCE

* MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) * MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 * ROAD TRANSPORT ACT, 1987 (MALAYSIA) * MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE No. M0016412

1. Index Mark and Registration Number of Vehicle	SMD8219J			
2. Name of Policyholder	Stark Holdings Inn Bike Leasing Pte Ltd			
3. Effective Date of Commencement of Insurance for the purposes of the Act	08/02/2021	Excess: Sect I	SS	2,000
		Excess: Section II	SS	1,500
		Excess: Windscreen	SS	100
4. Date of Expiry of Insurance	07/02/2022			
5. Persons or Classes of Persons entitled to drive		Engine No	: 2AZF163559	
		Chassis No	: ACR500073731	

(A) THE POLICYHOLDER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER:
(i) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(ii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iii) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these bindings.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

GOPFAD 08/02/2021 13:52:41



For and on behalf of Etiqa Insurance Pte. Ltd.

Approved Insurer

Authorised Signature



RECORD 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

Date of Request: 18/11/2021

Your Ref No: 004303

Dear Sir/Madam,

Date of Accident: 10/11/2021 00:00 (SGT)

Vehicle No: SMD8219J

Place of Accident: Near 8PWW+7Q Singapore

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLK4844E	Near 8PWW+7Q Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

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.



Thank you

Hoon Ang Ping has successfully logged out.

Your last login date and time was 11 Nov 2021, 14:47:16.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No. 	Asset Type 	Asset ID	Asset Owner ID 	Transaction Type 	Transac 
1	Vehicle	SLK4844E	-	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49

Tax Invoice



A-Tec Autocity Pte Ltd

8 Kaki Bukit Avenue 4, #04-20
Premier
Singapore - 415875
Mobile No: 97103383
Email: dreamcarzleasing@gmail.com

Customer Details:
MUHAMAD ISWANDY BIN ISMAIL
Blk 176D Edgefield Plains
#02-196
Singapore - 824176

Tax Invoice No: 0022	Dated: December 01, 2021
Delivery Note:	Terms of Payment: Due upon receipt
Suppliers's Ref:	Other Reference:
Buyer Order (PO) No: 0042	PO Dated:

S.No	Product	Description	Date Out	Date In	Qty	Price (SGD)	Amount (SGD)
1	SLD3965H	Toyota Altis 13Days	11/11/2021		1	\$1,560.00	\$1,560.00

Sub Total (SGD) \$1,560.00

Total (SGD) \$1,560.00

Amount in words:

Singapore Dollar (SGD) Only

Declaration:
We declare that this Tax Invoice shows the actual price of the goods described and that all particulars are true and correct.

For A-Tec Autocity Pte Ltd

Authorized Signatory
Billed by: Melvin Cheong
(dreamcarzleasing@gmail.com)

Notes:

Notes OCBC : 60160093501 UEN : 202127118W

Income Terms:

Terms



A-Tec Automotive Pte Ltd

8 Kaki Bukit Ave 4 #04-20 Premier Singapore 415875

Company Reg No: 201227298M

GST Reg No: 201227298M

EMAIL : atec_automotive@yahoo.com.sg

TEL: 6384-5206

FAX: 6384-5205

NAME: Stark Holdings Inn Bike Leasing Pte Ltd

DATE : 22-02-22

PROFORMA TAX INVOICE 7291082

JOB NO .

ADDRESS: 149 Shunli Industrial Park

VEHICLE NO. SMD8219J

Kaki Bukit Ave1

MAKE&MODEL : Toyota Estima

Singapore 416009

TERM

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
1	Lump Sum Repair As Per Surveyor Report			\$ 14,300.00
		SUB-TOTAL		\$ 14,300.00
		ADD GST 7%		\$ 1,001.00
		TOTAL AMOUNT		\$ 15,301.00

IMPORTANT

Please remit payment within 7 days from the due date

All cheques must be made payable to **A-TEC AUTOMOTIVE PTE LTD**

This a computer generated document.No signature is required.

J&M CONSULTANCY PTE LTD

11 Changi South Lane #02-08
ONN WAH BUILDING Singapore 486154
Company Reg No: 202125502E
Tel: 6214-0474 Fax: 6384-5205

INVOICE

STARK HOLDINGS INN BIKE LEASING PTE LTD
C/o: A-Tec Automotive Pte Ltd
8 Kaki Bukit Avenue 4
#04-20 Premier @ Kaki Bukit, Singapore 415875

Invoice No. : JM/210044
Our ref : ATEC/11/0009/JM
Date : 30 November 2021

DESCRIPTION	AMOUNT
OUR SERVICE FEE CHARGES: <ul style="list-style-type: none">Survey Inspection For Vehicle No. <u>SMD 8219 J</u>Digital Photographs Services (Inclusive of storage and submission of digital photographs)Transportation	
GRAND TOTAL	S\$745.00

E & O. E

All cheque payment should be "Crossed" and make payable to "J&M CONSULTANCY PTE LTD"

J&M Appraiser Pte Ltd



J&M CONSULTANCY PTE LTD

11 Changi South Lane #02-08
ONN WAH BUILDING Singapore 486154
Company Reg No: 202125502E
Tel: 6214-0474 Fax: 6384-5205

VEHICLE INSPECTION REPORT

To: STARK HOLDINGS INN BIKE LEASING PTE LTD Date : 30 November 2021
C/o: A-Tec Automotive Pte Ltd Our ref : ATEC/11/0009/JM
8 Kaki Bukit Avenue 4
#04-20 Premier @ Kaki Bukit, Singapore 415875

Accident Date : 10 November 2021 Type of Survey : Third party
Inspection Date : 11 November 2021
Repairer Name : A-Tec Automotive Pte Ltd
8 Kaki Bukit Avenue 4
#04-20 Premier @ Kaki Bukit, Singapore 415875

PARTICULARS OF VEHICLE

Registration No	: SMD 8219 J	Year / Capacity	: 2008 / 2,362 cc
Make / Model	: Toyota/ Estima	Colour	: Silver
Chassis No	: ACR500073731	Mileage	: 133,407 km
Engine No	: 2AZF163559		

CONDITION OF TYRES

	Make	Size	Thread Balance
Front Nearside	: APLUS	215/55Z R17	80%
Front Offside	: APLUS	215/55Z R17	80%
Rear Nearside	: APLUS	215/55Z R17	80%
Rear Offside	: APLUS	215/55Z R17	80%

GENERAL DESCRIPTION OF DAMAGE VEHICLE

The impact damages sustained on the vehicle at the time of inspection is on the rear bumper & tailgate portion.

(Details refer to the photographs attached)

Enclosed number of photographs: **60** copies

REMARKS

This inspection was conducted entirely on a "**WITHOUT PREJUDICE**" basis and we have not given authorization and instruction to the repairer to proceed with the repair.

Vehicle Registration No: SMD 8219 J

Our Ref No: ATEC/11/0009/JM

RECOMMENDATIONS

We have thoroughly inspected each and every item on the estimate against the physical damage found on the vehicle and we have listed the breakdown of our finding and our recommendation.

Under normal circumstances, the repair period would be about **14 (Fourteen)** working days.

Qty	Description	Condition	Repairer's Estimate	Revised Amount
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SPARE PARTS - LIST ITEMS

1	Rear bumper assy	Warped/Dented	\$ 1,240.00	\$ 1,240.00
1	Rear bumper retainer (1 set)	Warped/Necessary	\$ 337.00	\$ 337.00
1	Rear bumper bracket (1 set)	Warped/Necessary	\$ 363.00	\$ 363.00
1	Rear bumper reflectors (1 set)	Cracked	\$ 380.00	\$ 380.00
1	Rear bumper absorber foam	Cracked	\$ 375.00	\$ 375.00
1	Rear bumper inner trim	Warped	\$ 325.00	\$ 325.00
1	Rear tailgate assy	Warped/Dented	\$ 1,627.00	\$ 1,627.00
1	Rear taillamp outer LH	Cracked	\$ 976.00	\$ 976.00
1	Rear taillamp outer RH	Cracked	\$ 976.00	\$ 976.00
1	Rear taillamp inner LH	Cracked	\$ 1,050.00	\$ 1,050.00
1	Rear taillamp inner RH	Cracked	\$ 1,050.00	\$ 1,050.00
1	Rear wiper motor	Malfunction	\$ 500.00	\$ 500.00
1	Rear tailgate lock actuator	Malfunction	\$ 328.00	\$ 328.00
1	Rear tailgate dampers (1 set)	Bent	\$ 420.00	\$ 420.00
1	Rear tailgate lock latch	Bent	\$ 220.00	\$ 220.00
1	Rear tailgate "Toyota" logo	Necessary	\$ 200.00	\$ 200.00
1	Rear tailgate emblem "Estima"	Necessary	\$ 200.00	\$ 200.00
1	Rear tailgate outer garnish	Reuse	\$ 344.00	\$ -
1	Rear tailgate weatherstrip	Warped	\$ 330.00	\$ 330.07
1	Rear tailgate inner trim	Warped	\$ 472.00	\$ 472.00
1	Rear exhaust muffler	Bent	\$ 551.56	\$ 551.56
1	Rear end panel	Dented/Warped	\$ 650.00	\$ 650.00

Total	\$ 12,914.56	\$ 12,570.63
Less 25%	\$ 3,228.64	\$ 3,142.66
	\$ 9,685.92	\$ 9,427.97

Vehicle Registration No: SMD 8219 J

Our Ref No: ATEC/11/0009/JM

SPECIAL NETT ITEMS

1	Rear bumper clip (1 set)	Necessary	\$	100.00	\$	100.00
1	Rear end panel sealant	Necessary	\$	120.00	\$	120.00
1	Rear wiper blade (1 set)	Bent/Warped	\$	240.00	\$	240.00
1	Rear reverse sensor (1 set)	Malfunction	\$	650.00	\$	650.00
Total parts				\$ 10,795.92		\$ 10,537.97

Vehicle Registration No: SMD 8219 J

Our Ref No: ATEC/11/0009/JM

S/No	Description	Repairer's Estimate	Revised Amount
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Total cost of parts c/f	\$ 10,795.92	\$ 10,537.97
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LABOUR

1	To cut, weld, straighten affected areas and replace damaged parts.	\$ 2,800.00	\$ 2,600.00
2	To putty and spray painting the affected areas. Job Allowance.	\$ 2,800.00	\$ 2,600.00
3	To remove and install rear inner garnish and trim to facilitate the repair.	\$ 180.00	\$ 160.00
4	To check rear lighting and wiring.	\$ 120.00	\$ 100.00
5	To apply anti rust proofing to the affected areas.	\$ 300.00	\$ 280.00
6	To remove and install rear inner panel assy.	\$ 180.00	\$ 160.00
7	To remove and install rear bumper assy.	\$ 180.00	\$ 160.00
8	To remove and install exhaust system.	\$ 180.00	\$ 160.00
9	To remove and install rear tailgate assy	\$ 180.00	\$ 160.00
10	To remove and install rear windscreen to facilitate the repair	\$ 180.00	\$ 160.00
11	To remove and install rear wiper components	\$ 180.00	\$ 160.00
12	To remove and install rear tailgate locking mechanism	\$ 180.00	\$ 160.00
13	To remove and install rear reverse sensors.	\$ 180.00	\$ 160.00
14	To check central dock locking system	\$ 120.00	\$ 100.00
15	To conduct chassis alignment	\$ 350.00	\$ 300.00

Grand Total:	\$ 18,905.92	\$ 17,957.97
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The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a **Lump Sum Repair Contract of : \$ 14,300**

Vehicle Registration No: SMD 8219 J

Our Ref No: ATEC/11/0009/JM

By accepting to carry out the repairs on a contract lump sum basis, the repairer has the discretion to replace the damaged parts with used, reconditioned or new parts, or to repair it to a roadworthy condition.

Note: The revised estimate was made from visual inspection. Should there be any discrepancy or unseen damage / item in this survey, kindly notified the company within (7) from the date hereof. Otherwise, the revised amount shall be deemed to be valid.

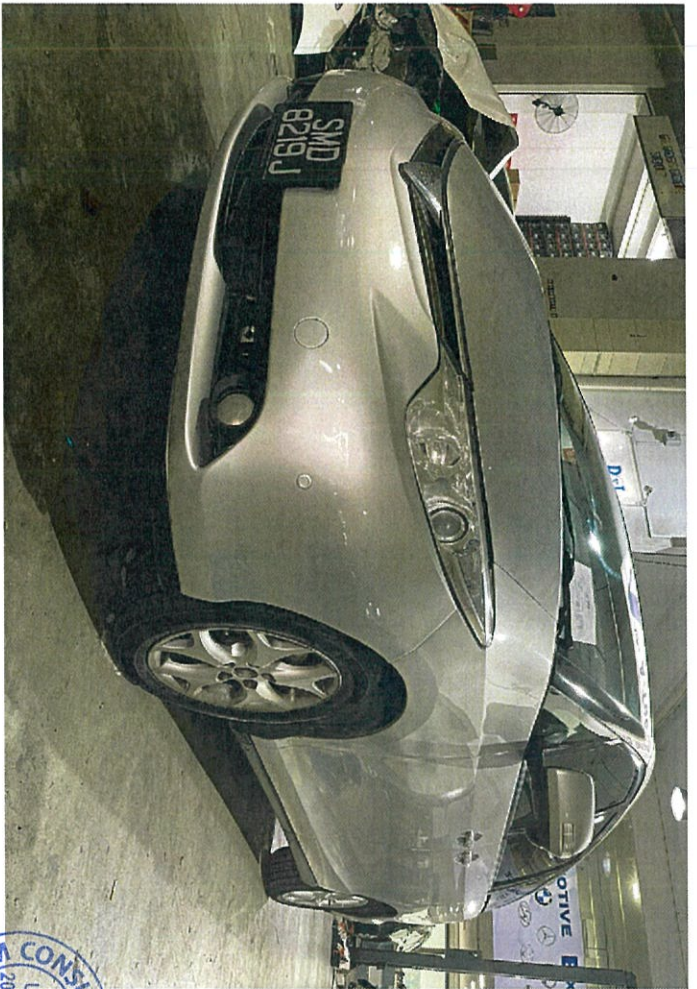
Disclaimer

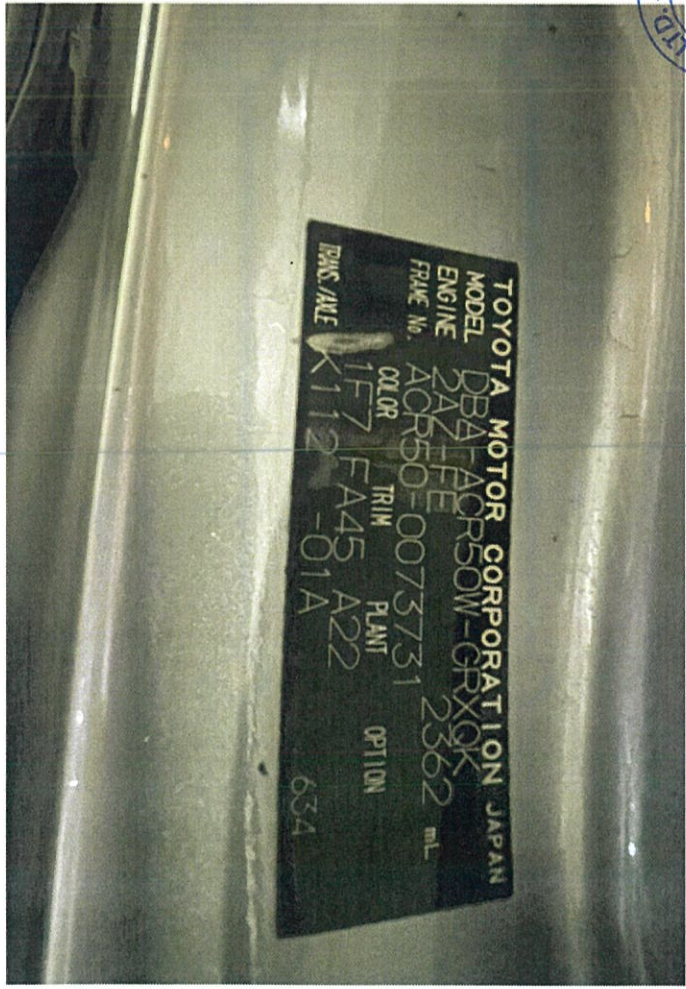
The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other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

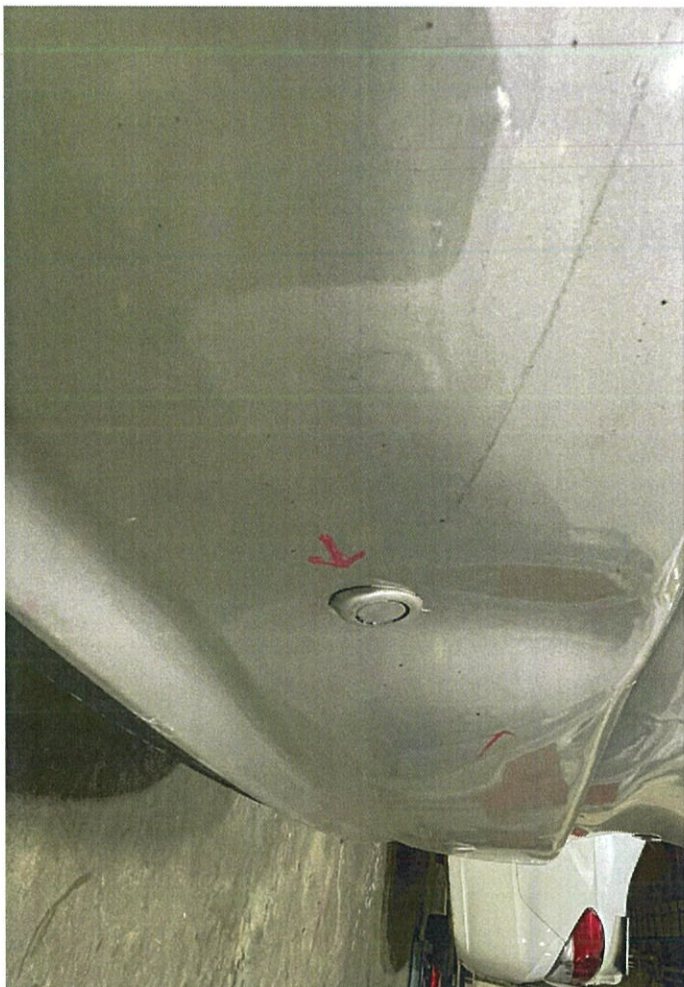
J&M Consultancy Pte Ltd

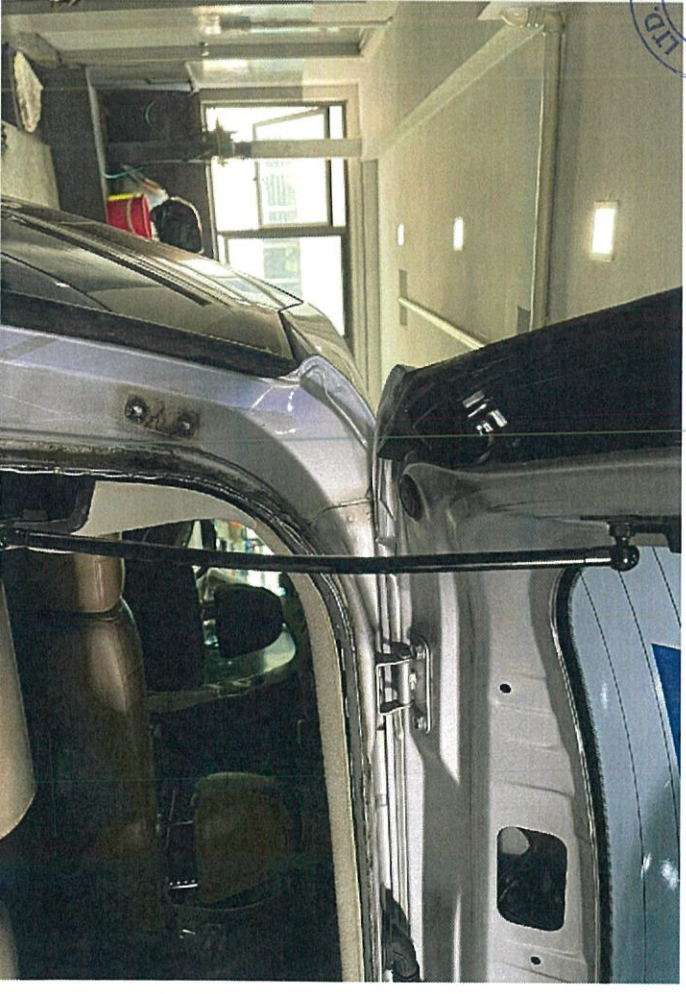
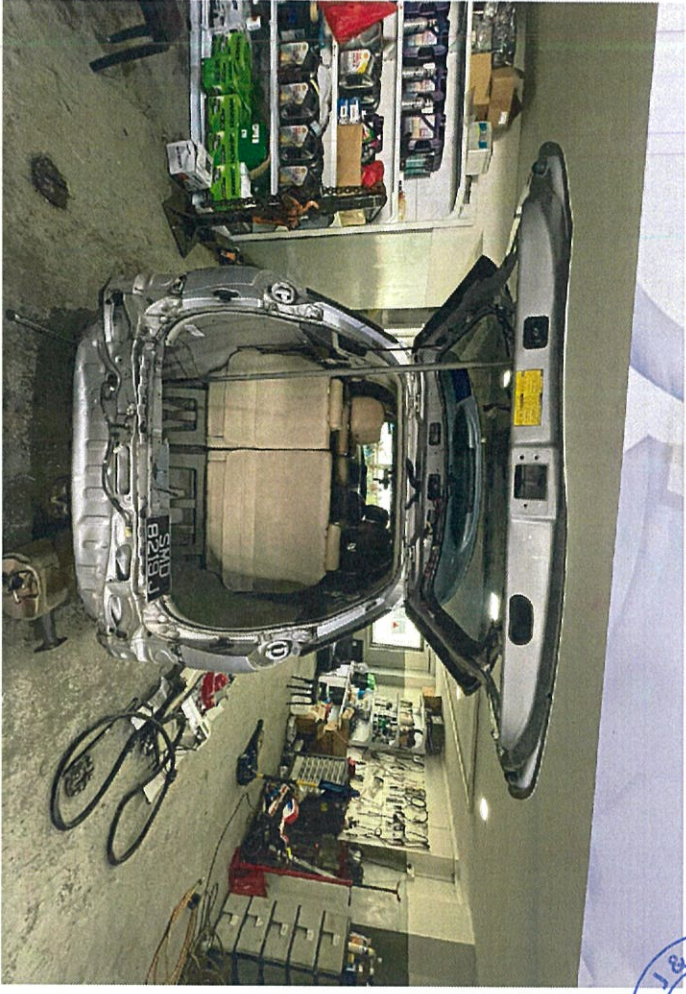
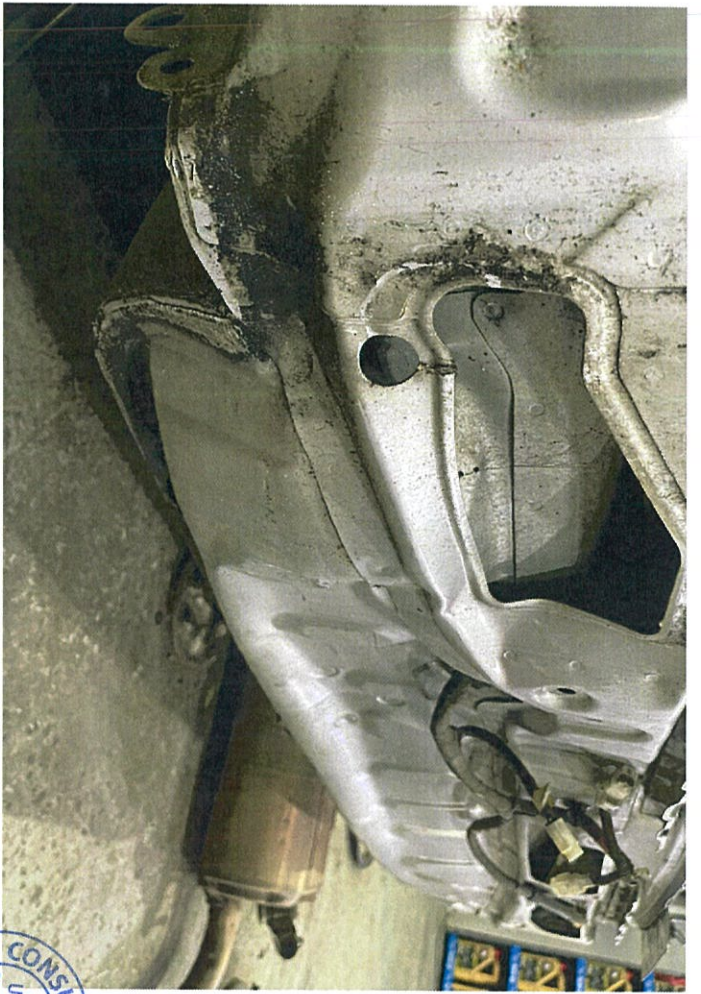


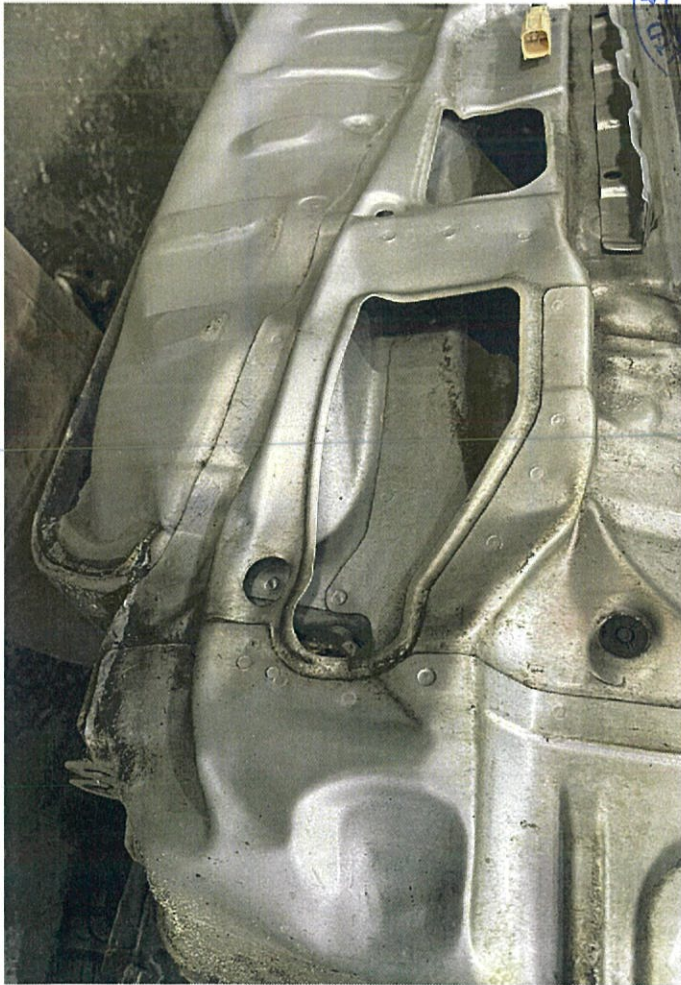
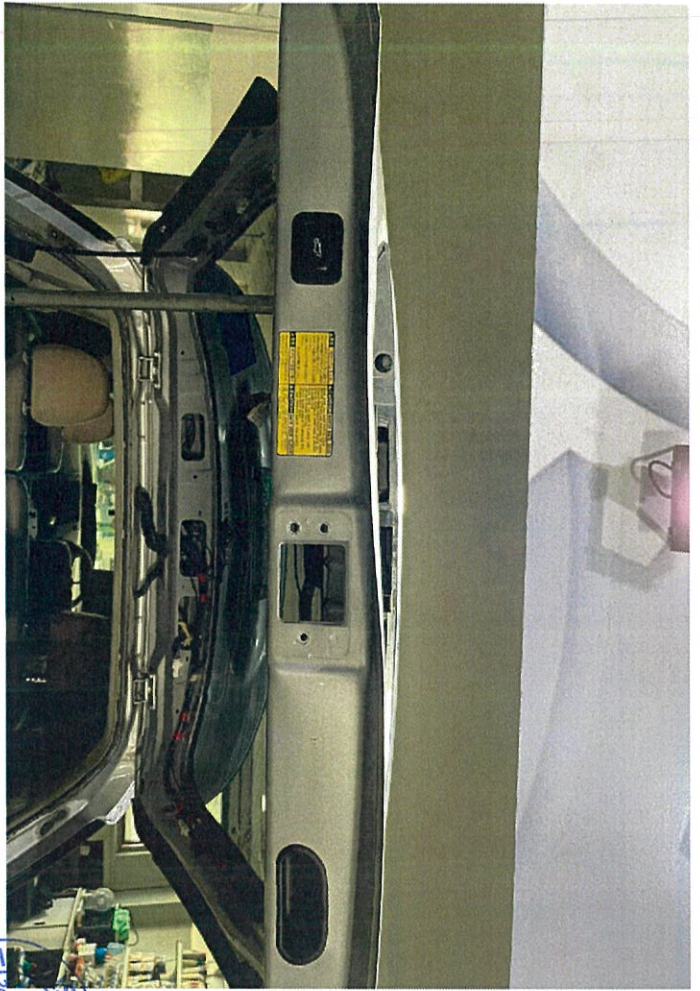
Joel Liew Jian Xiang
Automotive Appraiser

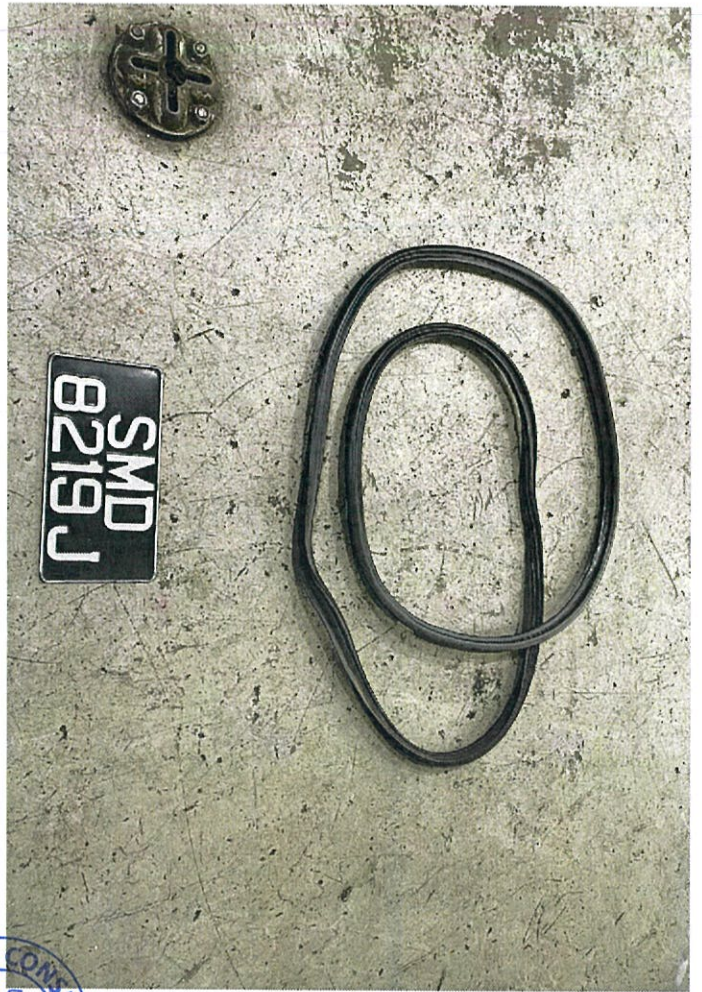


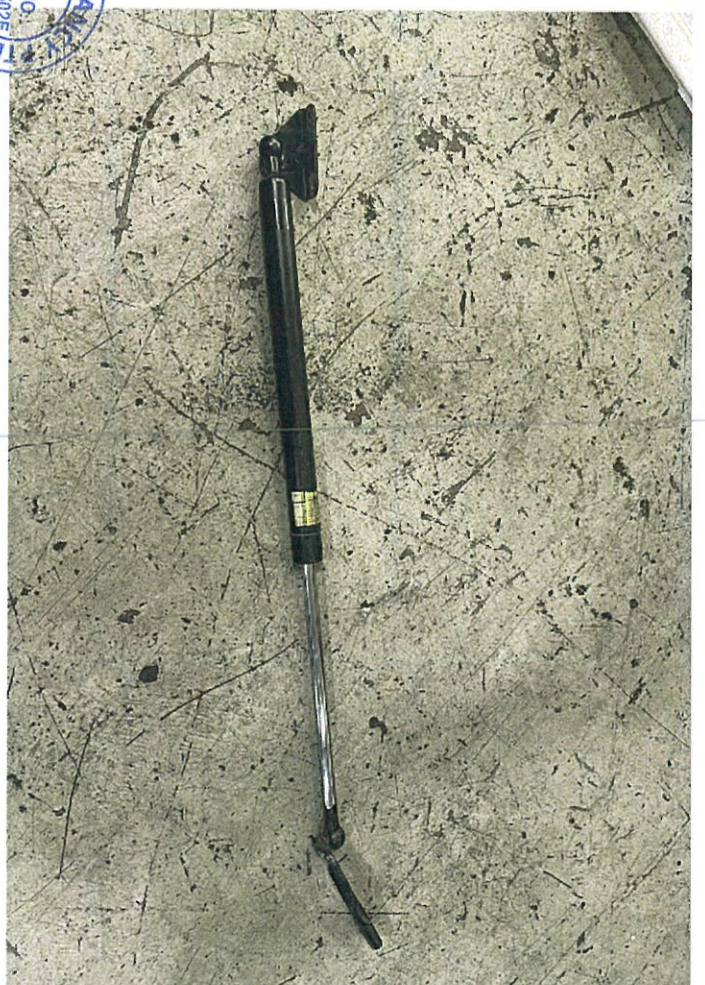


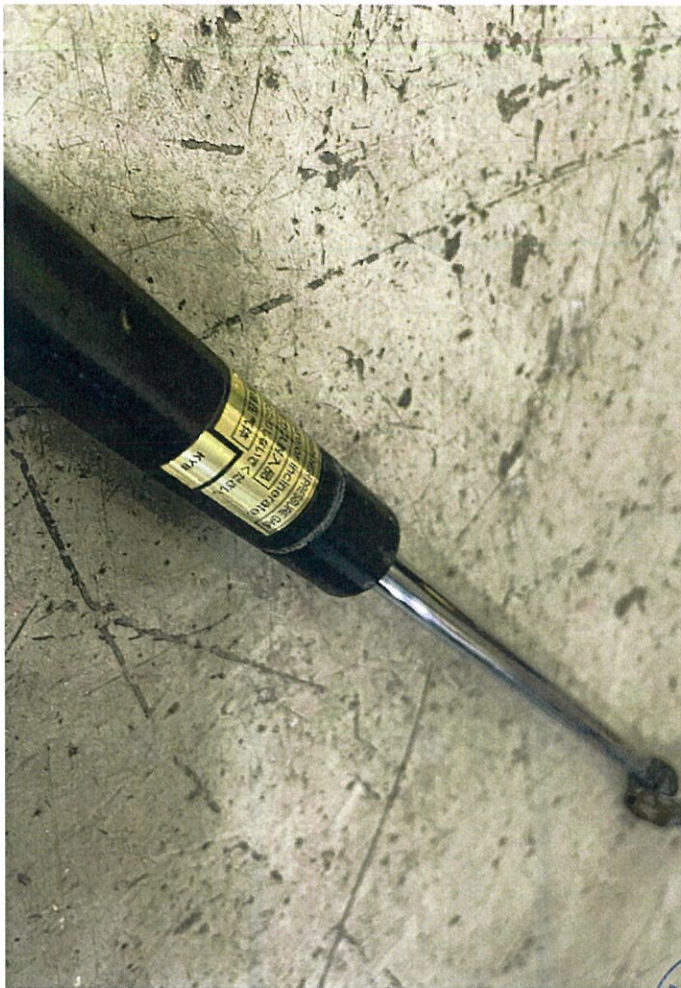


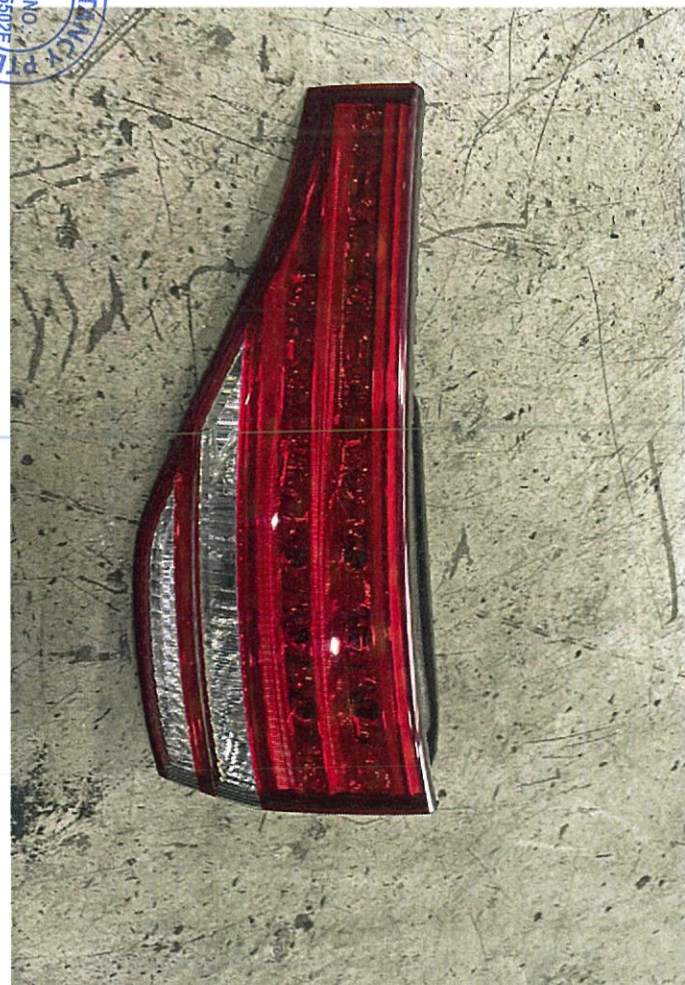




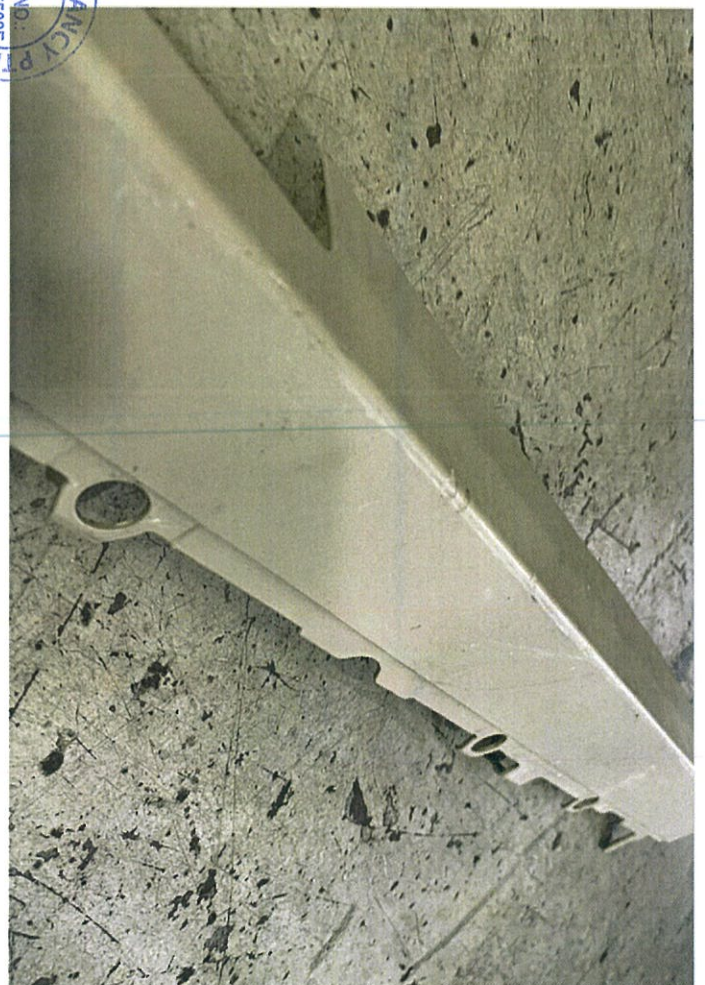
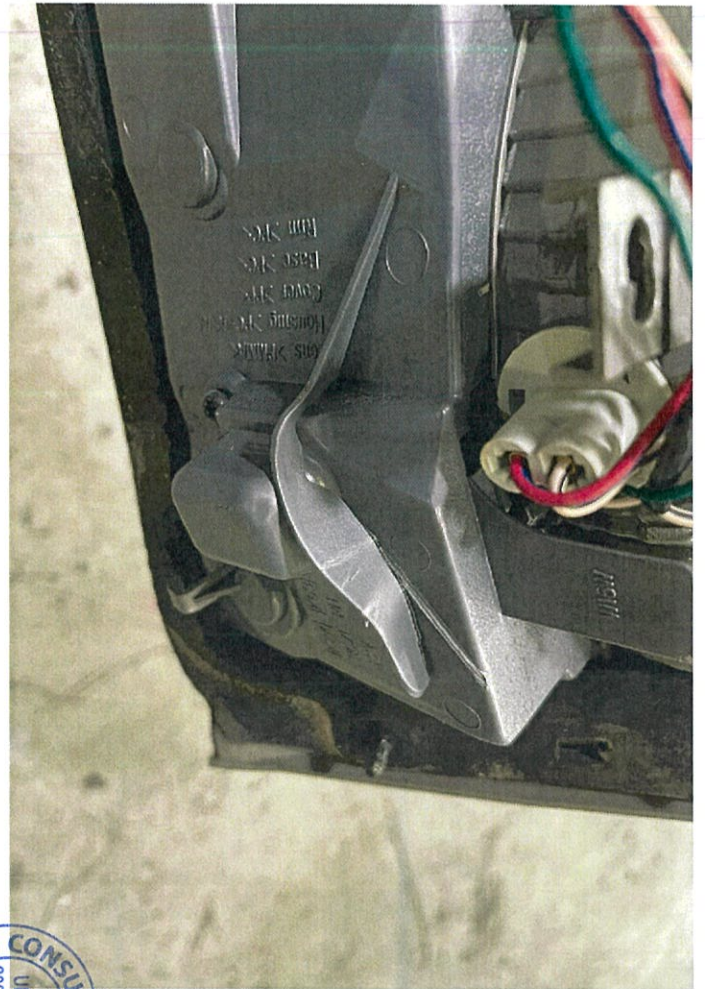
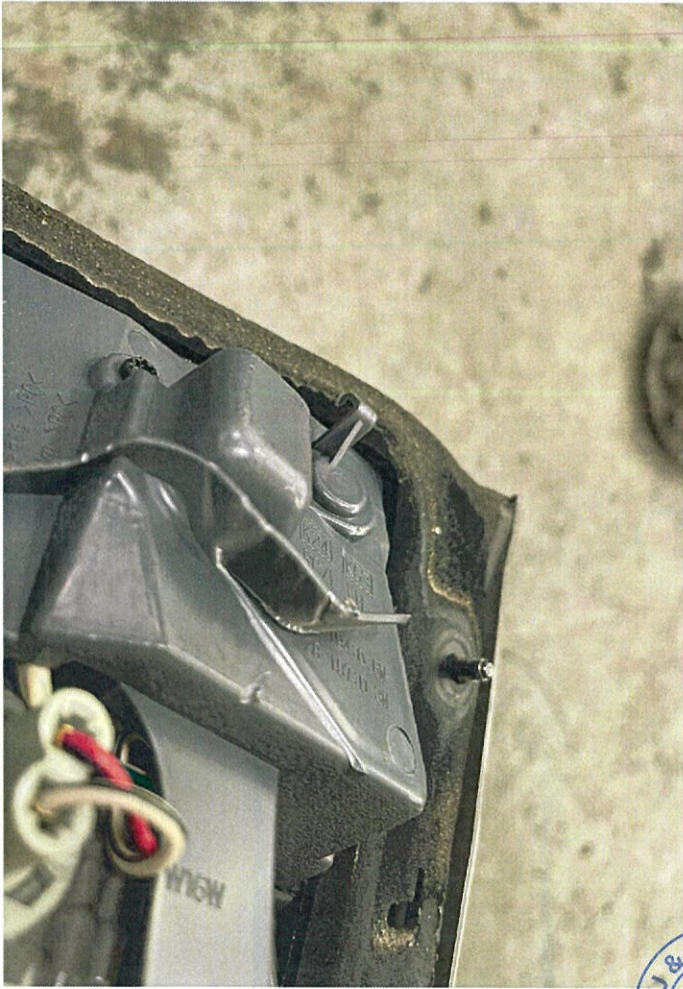


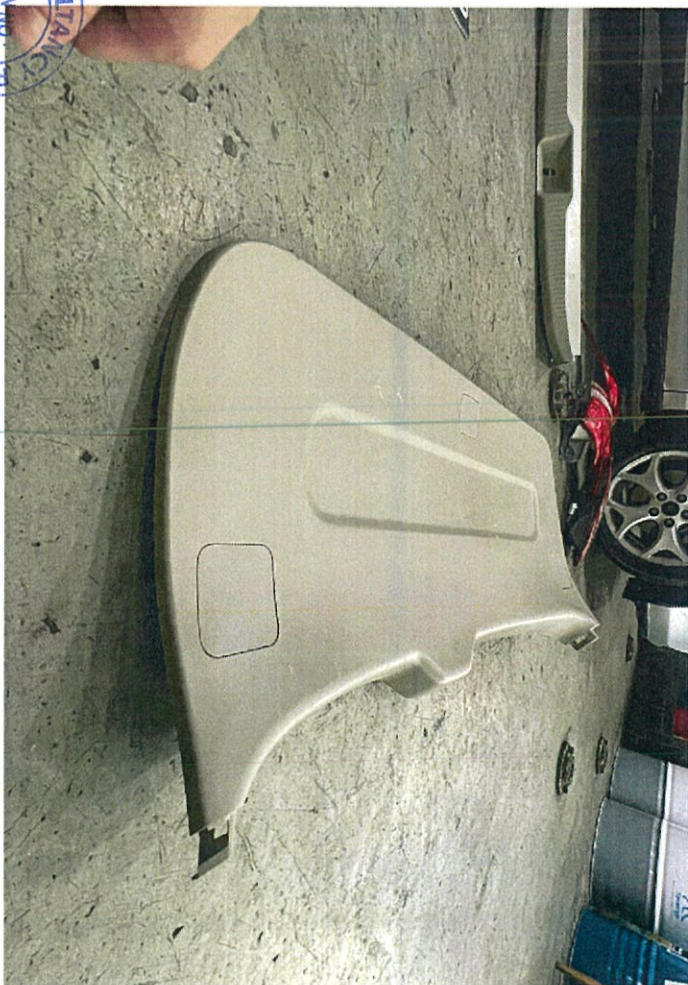


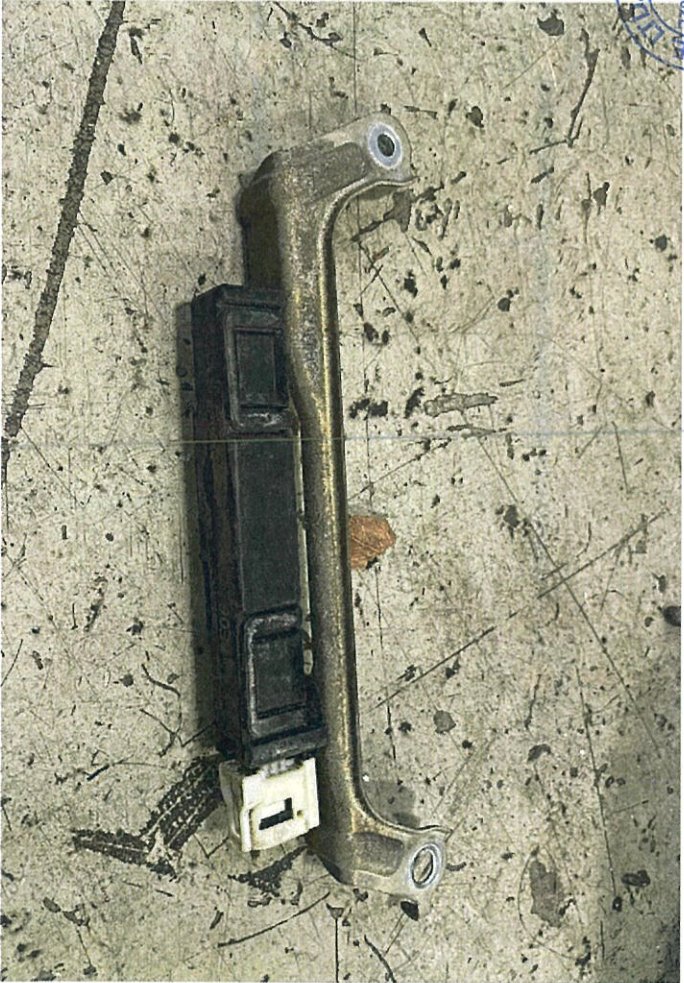
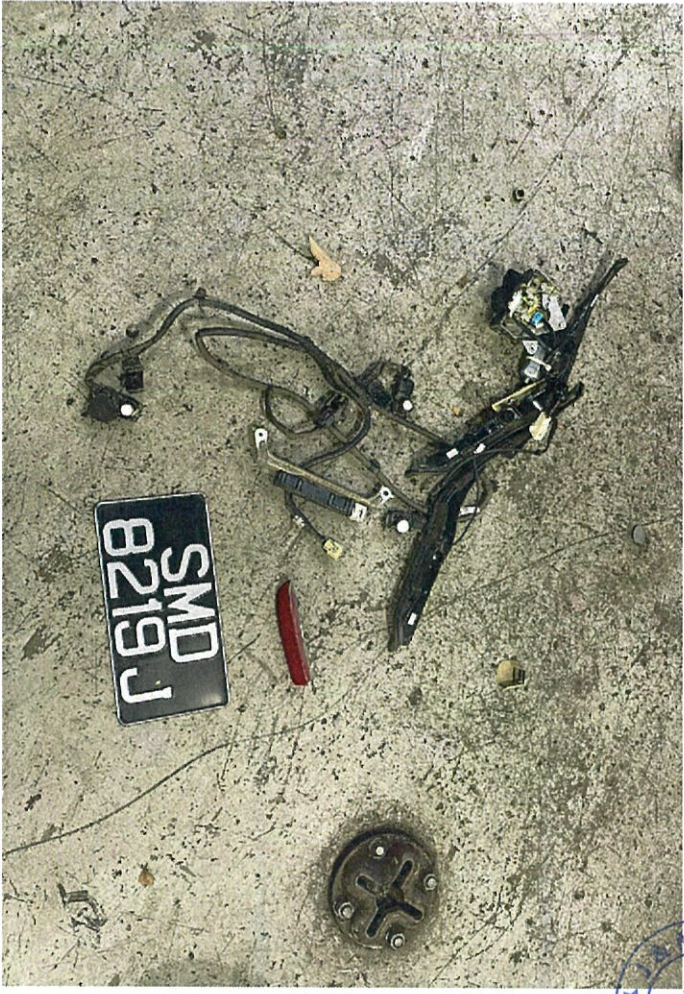
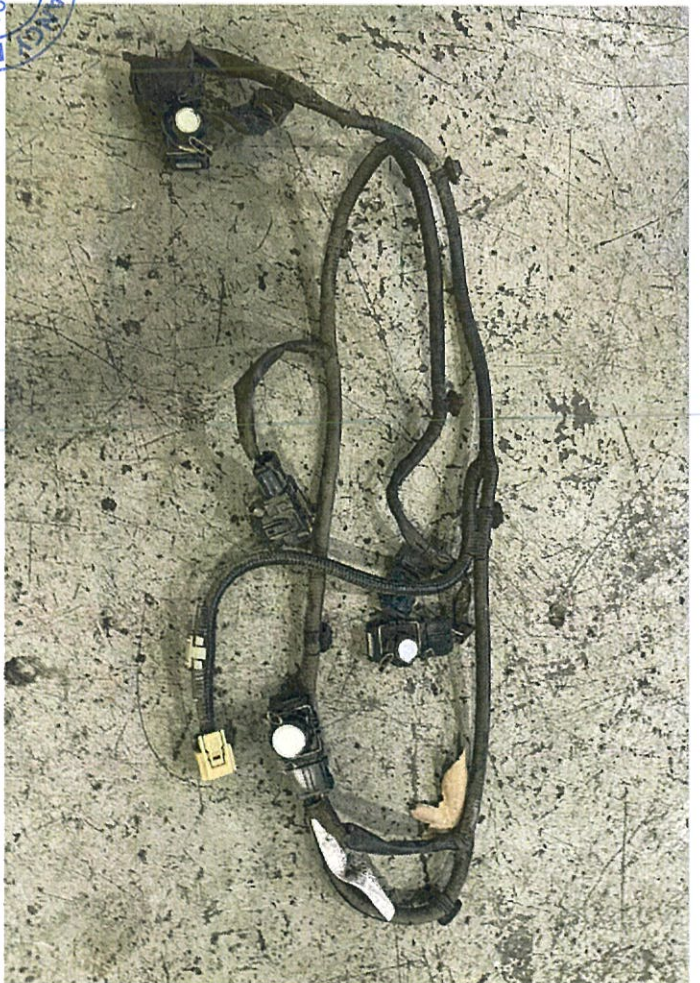
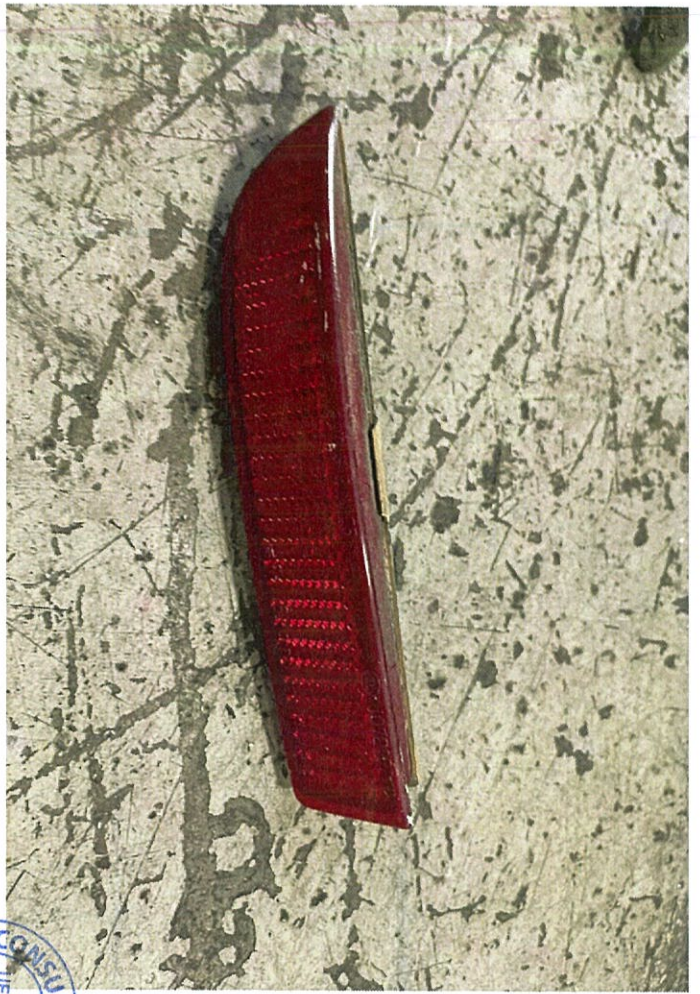


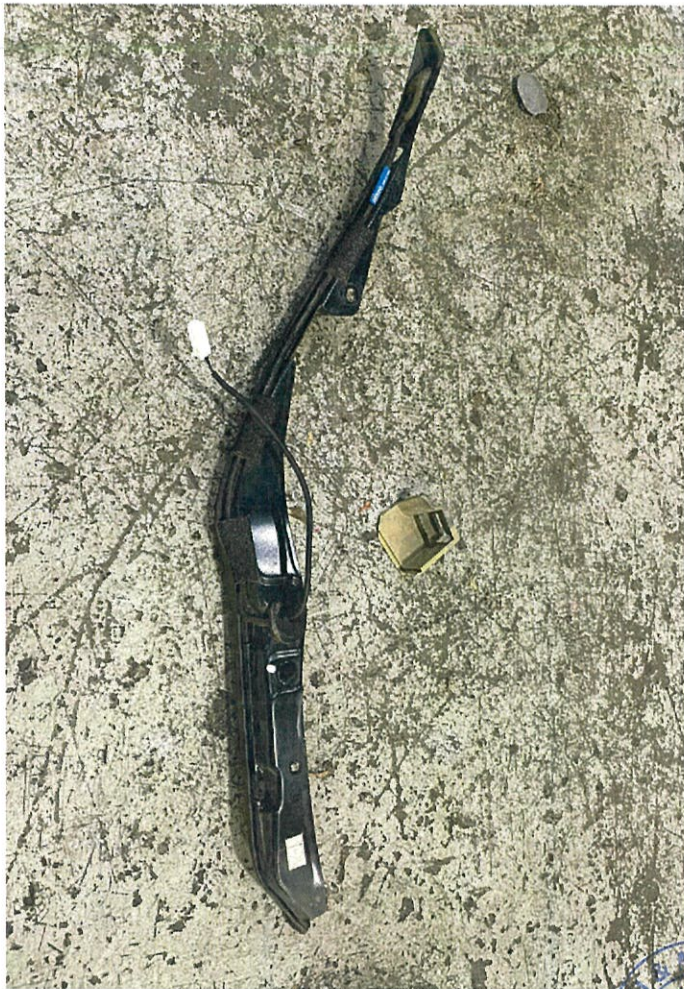
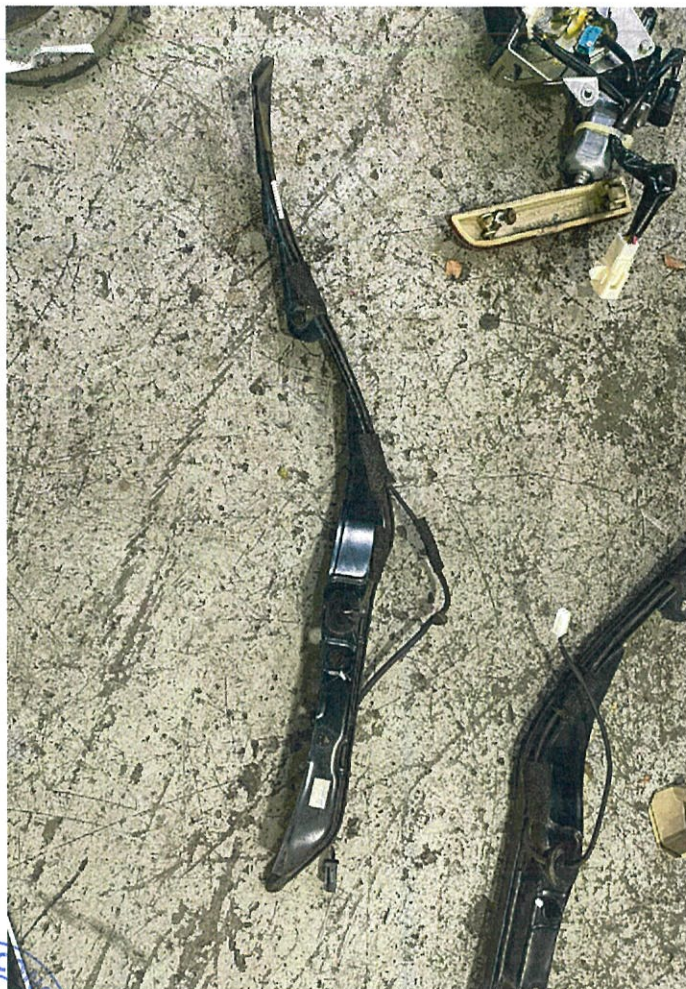


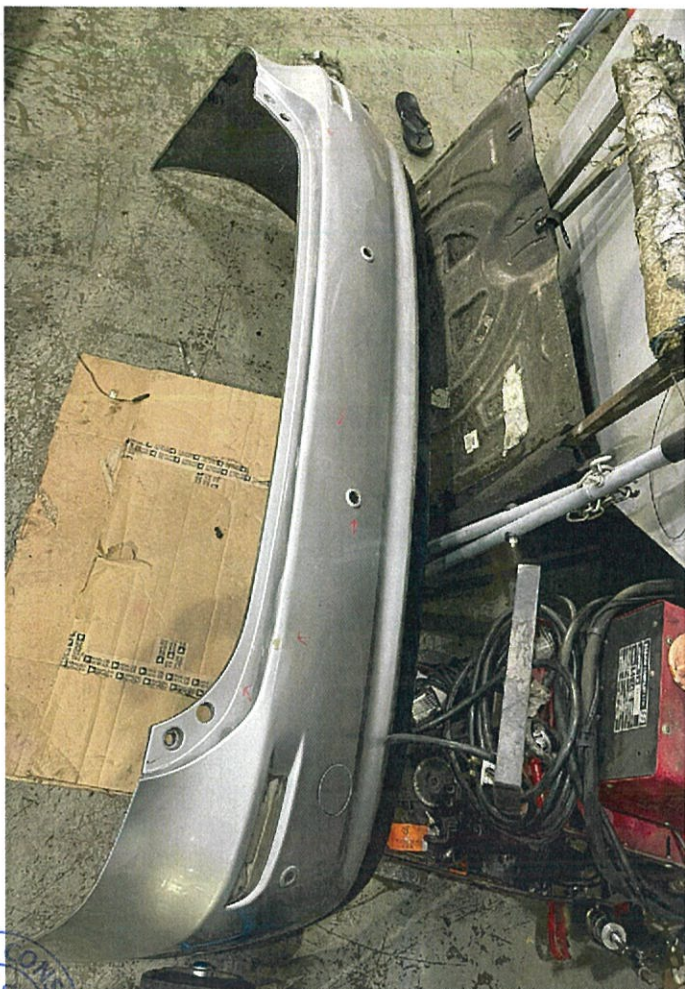
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JEN. NO. 202125502E
W. J. T.

