

# AT AUTO CONSULTANT

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*Not Notation  
 Purvey B4 paint  
 4 days*

Date of Estimate: 06.04.2022  
 Vehicle No: PC9681U  
 Owner: CITITRANS BUS TRANSIT PTE LTD  
 Date of Accident: 04.04.2022  
 Make & Model: Toyota Hiace Commuter GL 2.8 AT High Roof  
 Chassis No : GDH2232002871

Port  
 16P  
 AM

**ESTIMATE FOR ACCIDENT VEHICLE NOS: PC9681U**

**PARTS**

- 1 1 Rear bumper
- 2 1 Rear bumper side retainer RH
- 3 1 Rear apron corner panel RH/LH
- 4 1 Taillamp RH/LH
- 5 1 Tail gate
- 6 1 Tail gate outer handle moulding
- 7 1 Tail gate emblem "TOYOTA"
- 8 1 Tail gate emblem "HIACE"
- 9 1 Tail gate emblem "GL"
- 10 1 Tail gate inner trim
- 11 1 Tail gate lock
- 12 1 Tail gate weather strip

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\$165.00  
 \$412.00

Pr \$913.00 ✓  
 Pr \$63.00 X  
 Pr \$330.00 X  
 Pr \$824.00 X  
 Pr \$3,012.00 ✓  
 Pr \$365.00 X  
 Na \$98.00 ✓  
 Na \$78.00 ✓  
 Na \$68.00 ✓  
 Pr \$536.00 27  
 Pr \$412.00 ✓  
 \$298.00 7  
 \$6,997.00  
 \$1,749.25  
 \$5,247.75

SUB TOTAL  
 LESS 25 %  
 DISCOUNTED SUB TOTAL

**S. NETT ITEM**

- 1 1 70KM sticker
- 2 1 Windscreen sealant x 6
- 3 1 Give way sticker
- 4 1 Company contact sticker
- 5 1 Emergency door sticker
- 6 1 Rear number plate/garnish

SUB TOTAL  
 LESS 0 %  
 DISCOUNTED SUB TOTAL

Na \$20.00 152N  
 Na \$240.00 405N  
 Na \$30.00 X  
 Na \$30.00 X  
 Na \$15.00 X  
 Pr \$0.50 455N  
 \$335.50  
 \$0.00  
 \$335.50

**LABOUR**

- 1 Panel beating for replace and repair affected parts
- 2 Spray painting on accident areas
- 3 Wiring charges
- 4 Apply undercoating to above affected areas
- 5 R/R last row seat & fender side garnish to facilitate hot work
- 6 R/R rear tailgate windscreen

1,200.00 500  
 900.00 400  
 100.00 15L  
 300.00 30L  
 Na 300.00 X  
 350.00 120L  
 \$3,150.00

**LKK Auto Consultants** hence notify  
 SUBTOTAL (LABOUR) 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  
 Page 1 of 1 Subject to final approval from Insurance Company

Acknowledged by Repairer  
 Signature:  
 Date: