ASS. REC. BY: Kenneth

REF: C121 2200685714

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s Opting

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 Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 1.31 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SNR 3770S Yr Regn: 12, 19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Toy Prius A) c.c 1798

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

Sp.Reading 126393 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDZS3EU20J052299

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: Firest _____

R: Arivo 205/60R16

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm
D.O.A.	17/6/22	D.O.I.	19/7/2022

Survey held at _____

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

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

Date / Time	Action / Instruction
8/8	8.38a Carlow

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: $ - RS. SI

Parking: _____

Others: _____

TOTAL: _____

Report Format :

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

OPTIMA WERKZ SINGAPORE

OPTIMA WERKZ PTE LTD
Co. Reg. No. 201212455W
www.ow.sg /OptimaWerkz /OptimaWerkz

Date: 18/07/2022
Vehicle No: SMR3770S
Model: TOYOTA PRIUS PLUS
Chassis: JTDZS3EU20J052299
Reg.Year: 2019

Third Party Insurer: CHINA TAIPING
Third Party Veh No: SFA999S
Date of Accident: 17/07/2022
Estimator: KIT
Surveyor:

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S$	AMOUNT S$
1	REAR BUMPER LOWER DIFFUSER	1	R	R $387.90
2	REAR BUMPER REFLECTOR RH	1		R $76.30
3	REAR BUMPER	1		REPAIR
4	REAR FENDER RH	1		REPAIR
			SUB TOTAL	$464.20
			LESS 25%	$116.05
			PARTS TOTAL	$348.15

NO.	SPECIAL NETT	QTY	UNIT S$	AMOUNT S$
1	REAR BUMPER CLIPS	1		NN $50.00
			S/N TOTAL	$50.00

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE,REPLACE,REFIX,REPAIR & READJUST ACCIDENT AREAS. $400.00

LABOUR CHARGES FOR PAINTING & FURNISHING MATERIALS AT ACCIDENT AREAS. $600.00

TO TUFF KOTE & UNDERSEAL MATERIALS. NN $100.00 X

TO CHECK WIRING & ELECTRICAL SYSTEM & ETC. NN $80.00 X

LABOUR TOTAL	$1,180.00
TOTAL	**$1,578.15**

KIT

Not Included
Resurvey After Paint
2 days

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:

Head office
6 Kung Chong Road Singapore 159143
Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

Branch
9A Serangoon North Ave 5 Singapore 554500
Tel: (+65) 6484 9919 | Fax: (+65) 6481 1993

Branch (Motor Insurance Claims)
Blk 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047
Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011