

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

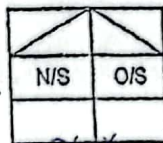
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

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

Veh No: SJZ 80501 Yr Regn: 1/11/12

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

Truck / Trailer or

Make: Mercedes-Benz E300E c.c. 1991Colour: Black A/C: Insured / Std / NI / NASp. Reading: 9596 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WIK 213053215044110

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: 275/35R19R: 11

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

TOYO / YOKO or .

Front

Rear

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 20/9/12 D.O.I. 25/10/12Survey held at Cycle

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

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

Date / Time Action / Instruction

MV- 2781

Steve final final fig \$2734.41, 3 days (Red \$680, 20%)

Date/Time, File Pass to?

☐ : Preli. Report

1) 03/11 Typist

☐ : Final Report

Date/Time, File Return to?

2)

Report Format: TPLump Sum (I.E.T. (\$ 2734.41)Days Of Repair: 3

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$1

Phone

Others

TOTAL



Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

ESTIMATE FOR SJZ8050Y

Daimler South East Asia Pte Ltd

Accounts Payable
Jurong Point Post Office
PO Box 540, Singapore 916418
Attn: Nguyen Thanh Soh(COYCARSVS)
68498420Cynthia

Vehicle & Document Information
WIP No 59802
Reg No/Reg Date SJZ8050Y / 01/04/2022
Date In/Mileage / 0
Chassis No W1K2130532B044110X
Engine No 27492032014019
Make/Model MB/E 300 e SEDAN
Colour/Trim 021 197 Obsidian B1/ 042 214 Leather Nut

Account No	Terms	Date/Time Printed	CSE	Operator
WD000057	Credit	26/09/2022/ 11:29	AQ	305 / Alan Quek Ai Lun

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
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M BPNSUN POLICY NO/ACC DATE : 999996111 / 20-09-2022 DRIVE IN: 21-09-2022 // TP CAR NO: YN4126A (SCDF) DATE IN/DATE SURVEY: BY/AUTHORIZED ON :				
A BPILAB USE XENTRY TO CHECK CONTROL UNITS & RESET MEMORY TO STANDARD SETTINGS.NETT			0.10	380.00 ✓
A BPILAB REMOVE & REPAIR REAR BUMPER				960 1440.00
A BPIRES RESPRAY REAR BUMPER			0.07	800 1000.00
M REAR BUMPER BOTTOM PANEL / CUT	1.00	336.57	15.00	286.08
M REAR BUMPER BOTTOM PANEL GARNISH / CUT	1.00	362.74	15.00	308.33

Steve CLKK)
25/10/22, 12:00
W R
3 Lys
P/P
by BCL y

Alan Quek
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4377 HP: 9186 5112 Fax: 6872 1272
Email: alan.quek@cyclecarriage.com.sg

Confirmed & accepted by

Nett 3,414.41
7% GST on 3414.41 239.01
Total Payable 3,653.42

LKK Auto Consultants hence notify

the Repairer of the following:
Authorized signatory and company stamp
to resurvey before/after spray painting

Validity of this estimate is based on the date of issue. This is a computer generated document, no signature is required.
Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



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