

ASS. REC. BY:

REF:

AG2/ 22012760/Kny3

C

Kenneth

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: _____

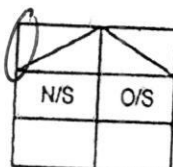
Excess: _____

(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: _____

04

days

Res.: Yes or No

Lum Sum: _____

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: _____

STJ1742P

Yr Regn: _____

09, 08

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

Truck / Trailer or

Make: _____

Toy Estima

C.C

2362

Colour: _____

M-Black

A/C:

Insured / Std / NI / NA

Sp. Reading: _____

350851

T/Radio:

Insured / Std / NI / NA

Eng/No: _____

C/No: _____

ACR 50

7061157

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / Std / STD A/Rim or

Tyre Size: _____

F: _____

225/50R18

R: _____

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

Front

Rear

R/Bal. _____

9

mm

R/Bal. _____

9

mm

L/Bal. _____

9

mm

L/Bal. _____

9

mm

D.O.A. _____

18/12/22

D.O.I. _____

21/12/2022

Survey held at _____

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

N/S 151

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

Date / Time

Action / Instruction

20/12

11:30pm

@ 2700

Cahm

(Red.

3737.25, 58%)

Date/Time, File Pass to?

1) 31/12/23

Date/Time, File Return to?

2) _____

☐

: Prell. Report

☐

: Final Report

Days Of Repair: _____

4

Resurvey No. of Trip: _____

1

Add Fee: _____

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Survey Fee: _____

Transportation: _____

S + RS. SI

Fees

Others

TOTAL

Report Format :

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

2700

TP

源摩哆廠

GUAN MOTOR WORKS

Business Regn. No: 081026001

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 H/P: 9742 6003

Not Authorized
11 Day & 2700h
Penny After Pain

4 days

REPAIR ESTIMATE SJJ1742P

No.	Qty	List Items	
1	1	Front bumper <i>981</i>	<i>mg</i> \$ 1,349.90 <i>2</i>
2	1	Front bumper LH side retainer	\$ <i>Pr</i> 72.00 <i>✓</i>
3	1 set	Front bumper clips	\$ <i>nn</i> 40.00 <i>2</i>
4	1	Front bumper inner foam	\$ <i>nn</i> 85.90 <i>x</i>
5	1	LH headlamp	\$ <i>nn</i> 876.20 <i>✓</i>
6	1	Front LH fender	\$ <i>nn</i> 652.40 <i>x</i>
7	1	Front LH fender under splash shield	\$ <i>nn</i> 248.00 <i>x</i>
8	1 set	Front fender under splash shield clips	\$ <i>nn</i> 40.00 <i>x</i>
9	1	Front LH shock absorber	\$ <i>nn</i> 386.00 <i>x</i>
10	1	Front LH lower arm	\$ <i>nn</i> 435.20 <i>x</i>
11	1	Front LH knuckle arm <i>590</i>	\$ <i>nn</i> 620.00 <i>2</i>
12	1	Front LH wheel hub & bearing	\$ <i>nn</i> 286.40 <i>2</i>
13	1	Front stabilizer bar LH link rod	\$ <i>nn</i> 171.00 <i>x</i>
			\$ 5,263.00
Less 25%			\$ 1,315.75
Total :			\$ 3,947.25

Special Nett Items

14	1	Front LH tyre	\$ <i>nn</i> 280.00 <i>x</i>
15	1	Front LH sport rim <i>Pr</i>	\$ <i>nn</i> 600.00 <i>✓ 4001N</i>
Total :			\$ 880.00

Labour

1	Labour Charges for remove/refit, panel beating, cutting welding and replacement of damages.	\$ 600.00 <i>3001</i>
2	To putty and spray Spray Paintings charges.	\$ 600.00 <i>4001</i>
3	To remove, refit front LH under carriage damages.	\$ 250.00 <i>801</i>
4	To conduct computerise wheel alignment test.	\$ 100.00 <i>601</i>
5	To apply anti rust treatment	\$ <i>nn</i> 60.00 <i>x</i>
Total :		\$ 1,610.00

Total Parts and Labour : \$ 6,437.25

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: