

(08/11/13) wef

ASS. REC. BY: AMC

REF:

CS/GA/23002122/Ruy³

373F

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SNB 5120Cat Workshop m/s TRANSEUROKARS P/Lof 21A, TANGKOR PASIRInsured: SML 1448T GA1

Policy No. _____

Claims No. CLMOMVP000001298

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: 127K

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: _____ 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: SNB 5120CYr Regn: 2021 / 194Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: MG ZS EV AT DELUXE SPColour: BLUG

A/C: Insured / Std / NI / NA

Sp. Reading: 1788R

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LSJW74093M2145402

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 215/50R17R: 215/50R17BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 16/02/23Survey held at TRANSEUROKARSDes. 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

REPAIR LIMIT - 72K

6/7/23 Final fig \$13,477.34 confirmed by email (red 3036.25, 18%)

Date/Time, File Pass to?

☐

: Preli. Report

Days Of Repair: 8

1)

☐

: Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2) 6/7/23-typist

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS SI

Photos

Others

Report Format : TPLump Sum / I.B.I. (\$ 13,477.34)

TOTAL

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 Actual 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	17/02/2023 11:00 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	16/02/2023 19:33 (SGT)
Exact Location of Accident	ECP, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB5120C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHEN YING YING
NRIC No	S8023373F
Email Address	CHEN_YINGYING@YMAIL.COM
Mobile Phone No	(Phone) +65-90085918
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	MG
Model	ZS EV
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 car
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/0106265

DRIVER

Name of Driver	CHEN YING YING
NRIC No	S8023373F
Date Of Birth	10/08/1980
Occupation	Indoor

Date Of Driving Pass	21/06/1999
Driving experience	23 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90085918
Alt. Phone Number	-
Email Address	CHEN_YINGYING@YMAIL.COM
Address	68 BAYSHORE ROAD #26-03
Address complement	-
Postcode	469986
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	PAX
Gender	Male

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

REFER TO ATTACHED
STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SML1448T
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 Actual 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 reassess 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.
8. 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

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

Vehicle A : S N B 5120C
Vehicle B : S M L 1448T

Lane 1

ECP towards Changi

Describe Circumstance of the Accident

I was driving along ECP ~~at~~ towards Changi on Lane 1 when the cars in front of me came to a complete stop. I applied brakes and managed to stop in time, however the car behind me crashed into my rear.

Declaration

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days claim whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Policyholder's Signature / Date & Time

17/2/23
Dum.

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

Witnessed by Reporting Centre Personnel:
(Name as in NR/CAD card)



REPAIR ESTIMATE

Name & Address:

GREAT AMERICAN INSURANCE COMPANY

3 Temasek Ave.,

#16-01 Centennial Tower

Singapore 039190

Vehicle No:

SNB5120C

Date:

25-Feb-23

Brand & Model:

MG ZS EV

Franchise:

MG

Email/Fax No:

Contact No:

Chassis/VIN No:

LSJW74093MZ145402

Contact Person (Eurokars):

Type of Claim:

THIRD PARTY

Policy No:

Date Of Registration:

26/08/2021

Contact No (Eurokars):

6331 0680

PARTS / MATERIAL CHARGES

MARK = Survey Marking [Key "A" if item is approved]

NO	DESCRIPTION	PART NO.	QTY	MARK	REVISED	PRICE
1	REAR BUMPER <i>del</i>	10344162-SPRP	1		-	\$ 550.00 ✓
2	REAR BUMPER LOWER <i>cr</i>	10344164	1		-	\$ 265.00 ✓
3	SPOILER REAR BUMPER LOWER <i>cr</i>	10344180	1		-	\$ 380.00 ✓
4	REAR FINISHER RH <i>scr</i>	10014697	1		-	\$ 73.20 ✓
5	REAR FINISHER LH <i>cr</i>	10014696	1		-	\$ 73.20 ✓
6	RETAINER RH REAR <i>x an</i>	10562367	1		-	\$ 38.00 X
7	RETAINER LH REAR <i>ne</i>	10562366	1		-	\$ 38.00 ✓
8	COVER TOWING HOOK REAR <i>scr</i>	10344260	1		-	\$ 11.00 ✓
9	RETAINER S.S ULTRASONIC LH WITH TAPE <i>ne</i>	10345448	1		-	\$ 12.90 ✓
10	RETAINER S.S ULTRASONIC CENTER WITH TAPE <i>ne</i>	10343137	1		-	\$ 12.90 ✓
11	RETAINER S.S ULTRASONIC RH WITH TAPE <i>ne</i>	10345485	1		-	\$ 12.90 ✓
12	GROMMET SCREW <i>ne</i>	90003375	6		-	\$ 5.40 ✓
13	RIVET <i>ne</i>	30081918	4		-	\$ 8.80 ✓
14	REFLECTOR RH <i>? cr</i>	10293798	1		-	\$ 120.00 ✓
15	REFLECTOR LH <i>cr</i>	10293795	1		-	\$ 120.00 ✓
16	LAMP LICENSE PLATE <i>? x an</i>	10415838	1		-	\$ 36.30 X
17	REAR WHEEL ARCH RH <i>x an</i>	10734147	1		-	\$ 45.50 X
18	REAR WHEEL ARCH LH <i>del</i>	10734127	1		-	\$ 45.50 ✓
19	SENSOR ULTRASONIC REAR <i>? x an</i>	10376550-GCY	3		-	\$ 465.00 X
20	CAMERA VIEW MONITOR REAR <i>? x an</i>	10587652	1		-	\$ 221.00 X
21	GROMMET SCREW <i>x an</i>	50012569	10		-	\$ 20.00 X
22	TAILGATE <i>st</i>	10691021-SEPP	1		-	\$ 1,900.00 ✓
23	CLIP TAILGATE <i>ne</i>	50018885	2		-	\$ 2.00 ✓
24	CLIP TAILGATE <i>ne</i>	91000113	2		-	\$ 1.04 ✓
25	CLIP SPOILER <i>ne</i>	10249682	6		-	\$ 12.00 ✓
26	ANTENNA REAR <i>ne</i>	10173337	1		-	\$ 29.00 ✓
27	REAR END PANEL <i>st</i>	10929813-SEPP	1		-	\$ 617.00 ✓
28	REAR REINFORCEMENT <i>st</i>	10246108-SEPP	1		-	\$ 380.00 ✓
29	REAR UNDER COVER <i>cr</i>	10541537	1		-	\$ 100.00 ✓
30						\$ -

Sub-Total (Parts Price) \$ - \$ 5,595.64

LABOUR / SERVICES CHARGES

REPAIR ESTIMATE

NO	DESCRIPTION	REVISED	PRICE
1	TO REPLACE REAR BUMPER , REAR END PANEL AND TAILGATE. <i>720 x 5</i>	<i>3600</i>	\$ 3,960.00
2	TO RESPRAY REAR BUMPER , REAR END PANEL AND TAILGATE. <i>720 x 3</i>	<i>2100</i>	\$ 2,520.00
3	TO SUPPLY SPRAY TEROSTAT SEALANT ON THE CUTTING	NETT	\$ 180.00
4	TO TRANSFER / REPLACE REVERSE SENSOR.	<i>200</i>	\$ 280.00
5	TO SUPPLY 1PC REAR NUMBER PLATE WITH CASING. nec	NETT	\$ 70.00
6	TO RECHARGE THE CAR BY USING AC CHARGER (2 HOURS).	NETT	\$ 165.00
7	For carrying out the checks, verifying and disabling connection of power (HV or 12V)" before repair and "checking, reconnection of power" after repair	NETT	\$ 165.00
8	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	<i>200</i>	\$ 250.00
9	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	<i>200</i>	\$ 300.00
10	TO CARRY-OUT BODY CAVITY PRESERVATION.(INCLUDING NEW PARTS AND CAOUTCHOU).	<i>150</i>	\$ 250.00
11	SUNDRIES	<i>20</i>	\$ 50.00

Survey Date & Time:	Repair Days:	Excess:
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Surveyor Remarks:

Sub-Total (Labour Price) \$ - \$ 8,160.00

	REVISED	PRICE
Parts Price	\$ -	\$ 5,595.64
Labour Price	\$ -	\$ 8,160.00
Total (Initial Estimate)	\$ -	\$ 13,755.64
Supp 1	\$ -	\$ -
Supp 2	\$ -	\$ -
Supp 3	\$ -	\$ -
Total (Before Excess)	\$ -	\$ 13,755.64
Less Excess	\$ -	\$ -
TOTAL (After Excess)	\$ -	\$ 13,755.64
GST 8%	\$ -	\$ 1,100.45
GRAND TOTAL	\$ -	\$ 14,856.09

Remarks:

- This is only an estimate based on visual inspection. Should there be more damages found during repair, it will be informed and quoted additionally.
- A fee of \$400 (excl. GST) will be chargeable for damage assessment and preparation of this estimate, if you choose not to proceed with repair.

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:

Rame
Hr 90010068
7 days + 1 = 8 days
P/P
01/03/23 @ 0930
Reg before paint

Name & Address:

GREAT AMERICAN INSURANCE COMPANY
3 Temasek Ave.,
#16-01 Centennial Tower
Singapore 039190

Vehicle No:

SNB5120C

Brand & Model:

MG ZS EV

Date:

5-Jul-23

Franchise:

MG

Email/Fax No:

Contact No:

Chassis/VIN No:

LSJW74093MZ145402

Contact Person (Eurokars):

Type of Claim:

Policy No:

Date Of Registration:

26/08/2021

Contact No (Eurokars):

6331 0680
PARTS / MATERIAL CHARGES

MARK = Survey Marking [Key "A" if item is approved]

NO	DESCRIPTION	PART NO.	QTY	MARK	REVISED	PRICE
1	REAR BUMPER	10344162-SPRP	1	A	\$ 550.00	\$ 550.00
2	REAR BUMPER LOWER	10344164	1	A	\$ 265.00	\$ 265.00
3	SPOILER REAR BUMPER LOWER	10344180	1	A	\$ 380.00	\$ 380.00
4	REAR FINISHER RH	10014697	1	A	\$ 73.20	\$ 73.20
5	REAR FINISHER LH	10014696	1	A	\$ 73.20	\$ 73.20
6	RETAINER RH REAR	10562367	1		-	\$ 38.00
7	RETAINER LH REAR	10562366	1	A	\$ 38.00	\$ 38.00
8	COVER TOWING HOOK REAR	10344260	1	A	\$ 11.00	\$ 11.00
9	RETAINER S.S ULTRASONIC LH WITH TAPE	10345448	1	A	\$ 12.90	\$ 12.90
10	RETAINER S.S ULTRASONIC CENTER WITH TAPE	10343137	1	A	\$ 12.90	\$ 12.90
11	RETAINER S.S ULTRASONIC RH WITH TAPE	10345485	1	A	\$ 12.90	\$ 12.90
12	GROMMET SCREW	90003375	6	A	\$ 5.40	\$ 5.40
13	RIVET	30081918	4	A	\$ 8.80	\$ 8.80
14	REFLECTOR RH	10293798	1	A	\$ 120.00	\$ 120.00
15	REFLECTOR LH	10293795	1	A	\$ 120.00	\$ 120.00
16	LAMP LICENSE PLATE	10415838	1		-	\$ 36.30
17	REAR WHEEL ARCH RH	10734147	1		-	\$ 45.50
18	REAR WHEEL ARCH LH	10734127	1	A	\$ 45.50	\$ 45.50
19	SENSOR ULTRASONIC REAR	10376550-GCY	3		-	\$ 465.00
20	CAMERA VIEW MONITOR REAR	10587652	1		-	\$ 221.00
21	GROMMET SCREW	50012569	10		-	\$ 20.00
22	TAILGATE	10691021-SEPP	1	A	\$ 1,900.00	\$ 1,900.00
23	CLIP TAILGATE	50018885	2	A	\$ 2.00	\$ 2.00
24	CLIP TAILGATE	91000113	2	A	\$ 1.04	\$ 1.04
25	CLIP SPOILER	10249682	6	A	\$ 12.00	\$ 12.00
26	ANTENNA REAR	10173337	1	A	\$ 29.00	\$ 29.00
27	REAR END PANEL	10929813-SEPP	1	A	\$ 617.00	\$ 617.00
28	REAR REINFORCEMENT	10246108-SEPP	1	A	\$ 380.00	\$ 380.00
29	REAR UNDER COVER	10541537	1	A	\$ 100.00	\$ 100.00
	SUPPLEMENTARY				-	\$ -
30	CONTAINER ASM-R/CMPT STOW TRAY (TOOL TRAY) <i>com</i>	10486975	1	A	\$ 88.00	\$ 88.00
31	COVER-L/GATE LAT (TAIL GATE LOCK COVER) <i>SM</i>	10318443	1	A	\$ 3.50	\$ 3.50

32	INSULATOR-R/CMPT FLR PNL (SPARE TIRE) <i>de /</i>	10480448	1	A	\$	249.00	\$	249.00
33	PANEL ASM-R/CMPT SILL TR (END PANEL TRIM) <i>son /</i>	10230145-ASA	1	A	\$	77.00	\$	77.00

Sub-Total (Parts Price) \$ 5,187.34 \$ 6,013.14

LABOUR / SERVICES CHARGES								
NO	DESCRIPTION				REVISED	PRICE		
1	TO REPLACE REAR BUMPER , REAR END PANEL AND TAILGATE.				\$ 3,600.00	\$ 3,960.00		
2	TO RESPRAY REAR BUMPER , REAR END PANEL AND TAILGATE.				\$ 2,100.00	\$ 2,520.00		
3	TO SUPPLY SPRAY TEROSTAT SEALANT ON THE CUTTING				\$ 180.00	\$ 180.00		
4	TO TRANSFER / REPLACE REVERSE SENSOR.				\$ 200.00	\$ 250.00		
5	TO SUPPLY 1PC REAR NUMBER PLATE WITH CASING.				\$ 70.00	\$ 70.00		
6	TO RECHARGE THE CAR BY USING AC CHARGER (2 HOURS).				\$ 165.00	\$ 165.00		
7	For carrying out the checks, verifying and disabling connection of power (HV or 12V)" before repair and "checking, reconnection of power" after repair				\$ 165.00	\$ 165.00		
8	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.				\$ 200.00	\$ 250.00		
9	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.				\$ 200.00	\$ 300.00		
10	TO CARRY-OUT BODY CAVITY PRESERVATION.(INCLUDING NEW PARTS AND CAOUTCHOU).)				\$ 150.00	\$ 250.00		
11	SUNDRIES				\$ 20.00	\$ 50.00		
	SUPPLEMENTARY (NECESSARY)							
12	TO REMOVE & REFIT THE WINDSCREEN GLASS AND CONDUCT WATER LEAK TEST. <i>me /</i>				\$ 560.00	\$ 560.00		
13	TO SUPPLY SEALER ON THE WINDSCREEN GLASS. <i>me /</i>				\$ 120.00	\$ 120.00		
14	TO TRANSFER TAILGATE MECHANISM. <i>me /</i>				\$ 280.00	\$ 280.00		
15	TO TRANSFER REVERSE CAMERA. <i>me /</i>				\$ 280.00	\$ 280.00		

Survey Date & Time: 01/03/2023	Repair Days: 07 + 01 = 08	Excess:
@0930		

Surveyor Remarks:

Remarks:

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- A fee of \$400 (excl. GST) will be chargeable for damage assessment and preparation of this estimate, if you choose not to proceed with repair.

Sub-Total (Labour Price) \$ 8,290.00 \$ 9,400.00

		REVISED	PRICE
Parts Price	\$	5,187.34	\$ 6,013.14
Labour Price	\$	8,290.00	\$ 9,400.00
Total (Initial Estimate)	\$	13,477.34	\$ 15,413.14
Supp 1	\$	-	\$ -
Supp 2	\$	-	\$ -
Supp 3	\$	-	\$ -
Total (Before Excess)	\$	13,477.34	\$ 15,413.14
Less Excess	\$	-	\$ -
TOTAL (After Excess)	\$	13,477.34	\$ 15,413.14
GST 8%	\$	1,078.19	\$ 1,233.05
GRAND TOTAL	\$	14,555.53	\$ 16,646.19