

ASS. REC. BY:

REF:

072/230059571ky

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 \_\_\_\_\_ Cruan Motor

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: 4 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: SCM 9898M Yr Regn: 08.15

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

Make: Honda City C.G. 1497

Colour: M.P. White AC: Insured / Std / NI / NA

Sp. Reading: 49515 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: NRHEM8880GP000129

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NI / S/Rlm / STD / Rlm or

Tyre Size: F: 185/55R16 R: \_\_\_\_\_

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

Front R/Bal. 8 mm Rear R/Bal. 8 mm

L/Bal. 8 mm L/Bal. 8 mm

D.O.A. 18/4/23 D.O.I. 9/6/2023

Survey held at \_\_\_\_\_ Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or then o/s

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

Date / Time	Action / Instruction
<u>12/7 11:00pm</u>	<u>&amp; 20000 Cash</u>

Date/Time, File Pass to?  : Prell. Report  : Final Report

Date/Time, File Return to?

Days Of Repair: \_\_\_\_\_ Resurvey No. of Trip: \_\_\_\_\_

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

Survey Fee:	
Transportation	
S - RS. SI	
Fuel	
Others	
TOTAL	

Report Format : \_\_\_\_\_ Lump Sum / I.B.I. (\$) \_\_\_\_\_

# 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 4 days

*Not Authorized  
L1 Rmg & 2000p  
Resurvey After Paint*

## REPAIR ESTIMATE SCM9898M

No.	Qty	Nett Items	
1	1	Rear bumper	\$ <i>Bar</i> 463.70 ✓
2	1	Rear bumper RH side reflector	\$ <i>In</i> 30.00 X
3	2	Rear bumper side retainer	\$ <i>150.1</i> 37.60 ✓
4	1 set	Rear bumper clips	\$ <i>na</i> 30.00 ✓
5	1	RH taillamp	<i>my</i> \$ <i>scpt</i> 225.70 ✓
6	1	Rear boot lid	\$ <i>By</i> 589.50 —
7	1	Rear boot centre "H" logo	\$ <i>na</i> 22.50 ✓
8	1	Rear boot LH "CITY" emblem	\$ <i>na</i> 19.80 —
9	1	Rear boot RH "I-VTEC" emblem	\$ <i>na</i> 23.50 —
10	1	Rear boot RH side lamp	\$ <i>na</i> 118.50 X
11	1	Rear boot top lock	\$ <i>R</i> 106.80 X
12	1	Rear boot weatherstrip	\$ <i>In</i> 99.60 X
13	1	Rear end panel	\$ <i>R</i> 385.00 X
14	1	Rear end panel top garnish	\$ <i>my</i> <i>CRM</i> 75.00 ✓
Total :			\$ 2,227.20

## Special Nett Items

15	1 set	Reverse sensors	\$ <i>CRM</i> 280.00 <i>2001m</i>
16	1 set	Rear end panel sealant	\$ <i>na</i> 60.00 X
Total :			\$ 340.00

## Labour

1	Labour Charges for remove/refit, cutting/welding and replacement of damages.	\$ 1,000.00 <i>50d</i>
2	To putty and spray Spray Paintings charges.	\$ 1,000.00 <i>44d</i>
3	To check wirings and lightings.	\$ 40.00 <i>2d</i>
4	To remove, refit reverses sensors.	\$ 80.00 <i>5d</i>
5	To remove, refit rear bootlid fittings.	\$ 80.00 <i>5d</i>
6	To remove, refit rear upholstery and attachments.	\$ 120.00 <i>5d</i>
7	To supply and apply anti rust treatment	\$ 80.00 <i>3d</i>
Total :		\$ 2,400.00

**Total Parts and Labour : \$ 4,967.20**

**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: