

22/03/2002

ASS. REC. BY:

REF: CS/TM/17020157/Klgbnz Special Instruction:

SURVJOY

From (Person):

Kalin

Telma Gomez

ASSIGNMENT (Office)

of TML

Date/Time: 21.11.2017 11.11am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 8835P

Insured:

SFZ 3302B

at Workshop m/s

Comlunt Delg ro

Tel:

of

59 Weyang Dine

Policy No:

MV 010238

Claim No:

M1705916

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 20.11.2017

CA / REV / REP. / REV 24 HRS WPI

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SHD 8835P - CS/QW13006269/Mlylk3
	SFZ 3302B - X

DA: 190213

SINGAPORE

Kahin

REF:

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. _____

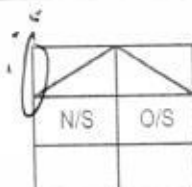
Sum Insured: _____

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 Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 2 days Res.: Yes or NoLum Sum: 1-B-1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: _____

SHP8835 P

Yr Regn: _____

"Jun / 2013

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

Truck / Trailer or

Make: _____

Hyundai Santa

c.c. 1991

Colour: _____

Silver

A/C: Insured / Std / NI / NA

Sp. Reading: _____

404245

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

KMHETKRM0A 834559

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

215/60R16

R: _____

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

TOYO / YOKO or

Max like

Front

Rear

R/Bal. 7 mmR/Bal. 7 mmL/Bal. 7 mmL/Bal. 7 mmD.O.A. 20/6/12D.O.I. 21/11/12

Survey held at

COGE (Geyang)

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

N/S Front.

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

Date / Time Action / Instruction

22/11/12 Continued P/P \$570 / 2 days.
(Red: 3266.85, 85%).T/G
L/S

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐

Site Insp (\$

) \$ + RS. \$

☐

Interview (\$

) Photos

☐

Tech. Invs (\$

) Others

☐

Weekend (\$

)

Report Format: TPLump Sum / I.B. (\$ 570)

TOTAL

250
10

260




LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
TOKIO MARINE INSURANCE SINGAPORE LTD		Ref : CS/TMI17022157/K1gb		
20 MCCALLUM STREET #09-01		Date : 21-11-2017		
TOKIO MARINE CENTRESINGAPORE 069046		Code : TMI		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SFZ 3302B	Veh. Inspected	SHD 8835P	
Policy No.	MV010238	Coverage (\$)	0.00	
Claim No.	M1705916	Excess (\$)	0.00	
Assign From	MERIMEN (TELMA GOMEZ)	Assign Date	21/11/2017	
2. Vehicle Particulars & Condition				
Make & Model	c.c		0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
4. Description of Damages				
5. General Information				
Accident Date	20/11/2017	Inspection Date	21/11/2017	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	21 Nov 2017 09:29 Sendback Est	21 Nov 2017 09:40 S\$3,585.84	21 Nov 2017 11:11 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured: HELENE NG SUAT HEAN, ID: S6901860B									
Main Claimant: COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199502839G									
Vehicle Reg. No.: SHD8835P Date of Loss: 20/11/2017 07:00 - :59									
Claim Type: TP / M1705916 Policy/Cover Note No.: MV010238 (Comprehensive) Coverage: 19/11/2017 - 18/11/2018									
Vehicle Reg. No. (Insured): SFZ3302B Policy No. (Claimant):									
Excess: S\$0.00									
Repairer: ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300									
Handling Insurer: Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Telma Gomez - 65926402]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 30/11/2017]									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

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 Authorised 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 ability.
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 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 Report	20/11/2017 15:55
Date Of Accident	20/11/2017 07:50
Exact Location Of Accident	SLIP RD FROM TPE TWDS UPP CHANGI RD NORTH/BEDOK TO
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD8835P
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-15072702MFSH
Cover Note Number	

Driver

Name of Driver	TAN GARK TENG
NRIC No	S1497634E
Date Of Birth	27/05/1961
Occupation	OUTDOOR
Date Of Driving Pass	27/01/1987
Driving Experience	30 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	16 EAST COAST DRIVE
Postcode	459154
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE ATTACH.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFZ3302B
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	NG SUAT HEAN HELENE
NRIC/Passport Number	
Contact Number	97248269
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	RHT REAR
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan Pg. 1

SKETCH PLAN

SKETCH PLAN

Handwritten notes and diagram:

- Handwritten text: A: SHD 8835P
- Handwritten text: B: SFZ 3302B
- Handwritten text: NG SVAT MEAN
- Handwritten text: HELENE
- Handwritten text: 97248269.
- Handwritten text: TWDs UPP CHANNEL RD NORT
- Handwritten text: 821P RD FROM THE TWDs EGBOK TOWN
- Diagram: A sketch plan showing a road layout. A horizontal road is shown with a dashed line in the center. A road labeled "TWDs UPP CHANNEL RD NORT" branches off to the right. A road labeled "821P RD FROM THE TWDs EGBOK TOWN" branches off to the left. A road labeled "A" is shown with a dashed line in the center. A road labeled "B" is shown with a dashed line in the center.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

DECLARATION

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

CITYCAB PTE LTD
CO. REG. NO. 1995028300

Policyholder's Signature _____
Date & Time: _____

Driver's Signature _____
(If different from above, attach this)

Reporting Centre Personnel's Signature

Sketch Plan Pg. 2

Describe Circumstances of the Accident

On 20 Nov 17 at about 07:50 hrs I was driving on the third lane from the right along a Slip Rd from TPE heading towards the direction of Upper Changi Rd North with my left hand signal lights switched on.

After checking for the traffic from my left is clear, I slowly filter to my right. When my taxi is almost three quarter into the lane suddenly a Mazda car SFZ3302B coming from my left from the leftmost lane filter out to its right in a speedy manner thus encroached into my path and caused this accident to happen.

As a result this, the right hand side rear of the car hit and grazed the left hand side front of my taxi.

01 passenger on board my taxi. No injury at the point of the accident.

Declaration

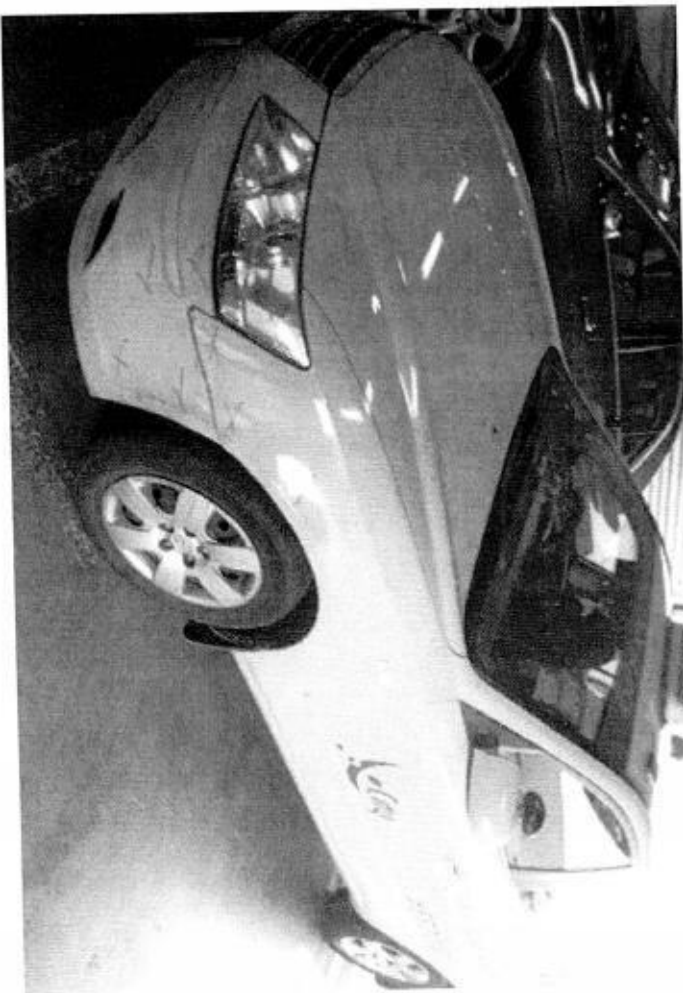
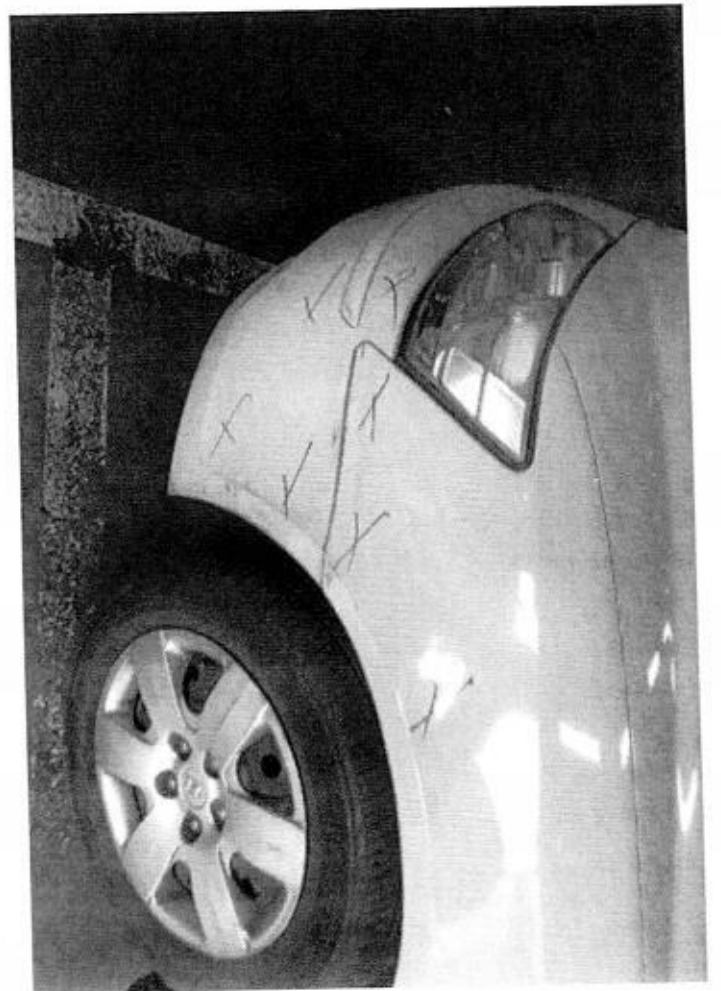
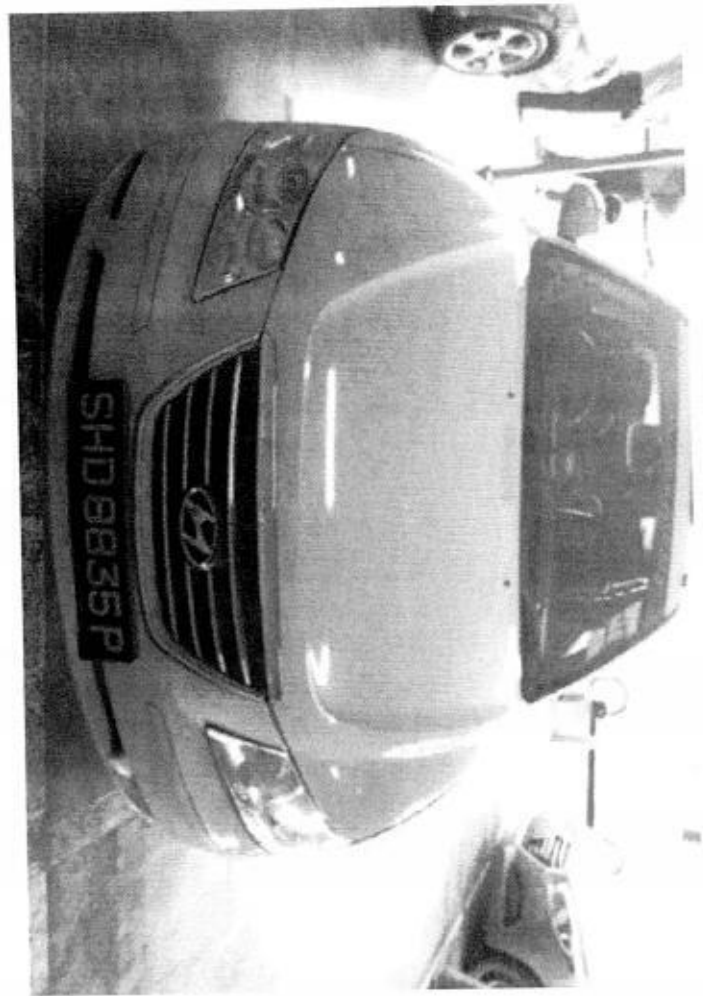
I/We declare the foregoing particulars are true in every respect.

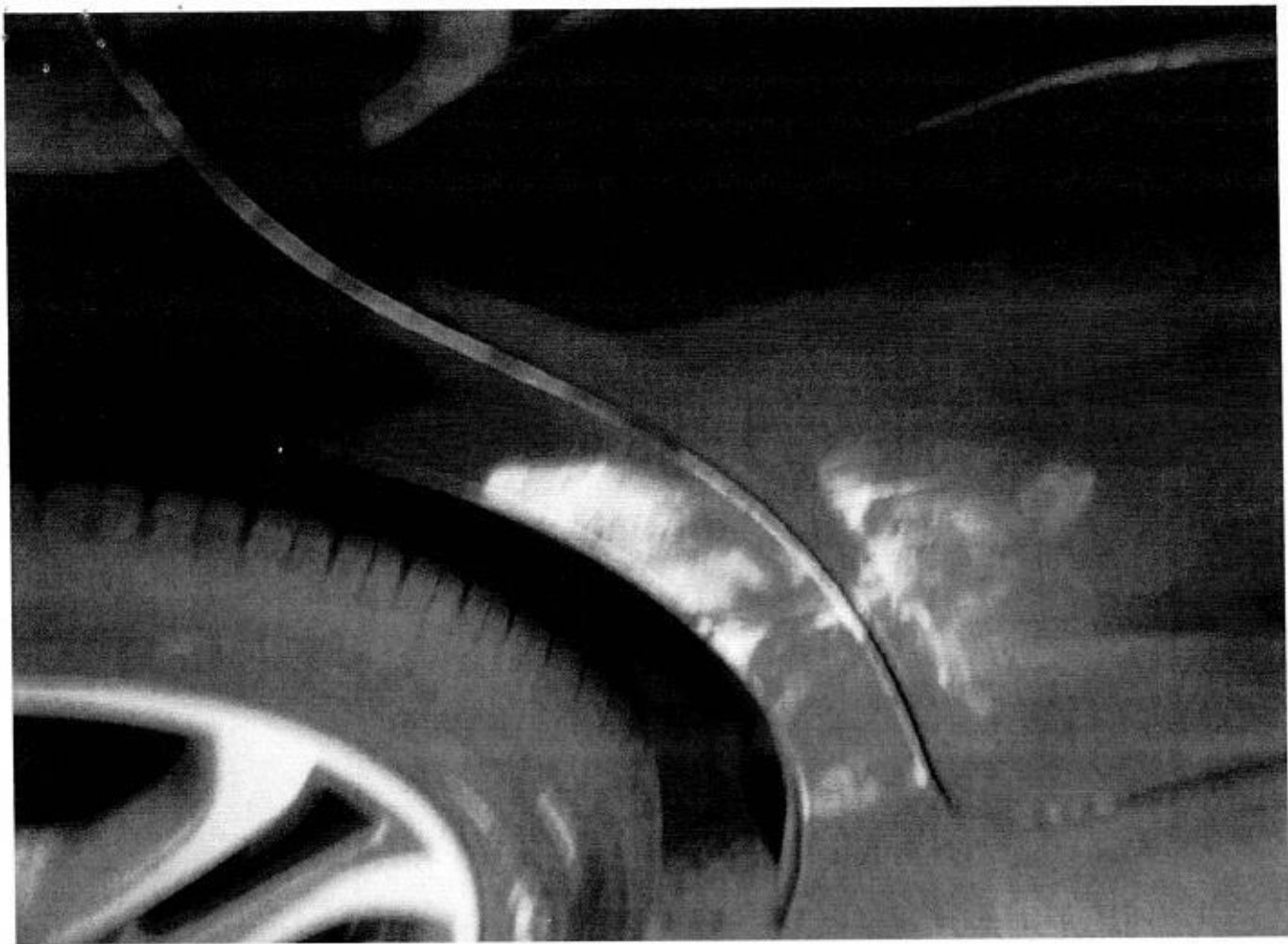
CITYCAR PTE LTD
CO. REG. NO. 199502830P

Policyholder's Signature/Date &
Time

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

Witnessed by Reporting
Centre Personnel





Date/Time: 20.11.2017 17:52

Page : 1

Team: ARC Repair TP(CFSO)1

JOB CARD Sales Order:

JC NO 305090813

CUSTOMER

R/MS CITYCAB PTE LTD
CUSTOMER NO 7010070
ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
L (R) 65551188 (O)
(P)

SCOUNT CARD NO.

REGN NO.	SHD8835P	MILEAGE
MAKE	HYUNDAI	FUEL
MODEL	SONATA	DATE/TIME IN
YR OF MANU	11.06.2013	TARGET DATE
CHASSIS CODE	KMHET41VMDA834559	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 20.11.2017
NATURE: 3P 20.11.2017

S/NO LABOR CODE DESCRIPTION

TOKIO - Taxi Left Front Damage
LKC/Kalvin

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

e:

to:

File No.:

SHD8835P

LARRY

Larry Ng

Signature of Service Advisor

Signature/Date

e returned to Service Reception upon collection

Exit Pass

Vehicle No.:

SHD8835P

Name of Service Advisor

Date

To be kept by Security Guard

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER: Tokio Marine Insurance Singapore Ltd (HQ)
COMFORT TRANSPORTATION PTE LTD

Singapore

PARTICULARS OF CLAIM

Claim Type: THIRD PARTY
Policy No:
Vehicle Reg. No.: SHD8835P
Party At Fault: UNKNOWN

Ref. No:
Date of Loss: 20/11/2017
Driveable? YES

Make/Model: HYUNDAI SONATA, 2.0 CRDI (A)

Vehicle Reg. Date: 11/06/2013

Vehicle Colour: YELLOW
Engine No: D4EAD306965
Odometer: 404245 KM

Gen Condition: GOOD
Chassis No: KMHET41VMDA834559

Paint Type:
List Item Discount: 20.00 %
Total Loss? NO
Est. Duration of Repair (day) 4

Present Location: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

COST OF CLAIMS

	Amount
Parts	2,555.84
Miscellaneous Items	10.00
Labour	1,020.00
Paintwork Labour	0.00
Towing	0.00

Gross Total (S\$)	3,585.84
+ GST 7.00% (S\$)	251.01
Nett Amount (S\$)	3,836.85

Larry Ng

This claim is handled by: NG NYUK PHIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 21 Nov 2017)**Parts:** 143 HYUNDAI SONATA 2.0 CRDI (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHD8835P/21/11/2017 09:40**Validity:** These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk *.**Estimates on Parts**

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRONT BUMPER <i>X Repair</i>	20.00	0.00	*538.80 FL
2	1		*FRONT BUMPER TOP BRACKET - LH <i>X sec</i>	20.00	0.00	*22.40 FL
3	1		*FRONT BUMPER BRACKET - LH <i>X sec</i>	20.00	0.00	*14.30 FL
4	1		*FRT BUMPER FENDER RETAINER <i>X sec</i>	20.00	0.00	*9.20 FL
5	10		*FRT BUMPER CLIPS <i>X sec</i>	20.00	0.00	*22.00 FL
6	1		*FRONT FENDER - LH <i>X Repair</i>	20.00	0.00	*593.00 FL
7	1		*HEADLAMP - LH <i>X sec</i>	20.00	0.00	*797.90 FL
8	1		*FRONT BUMPER PROTECTOR - LH <i>X Repair</i>	20.00	0.00	*29.20 FL
9	1		*FRONT WHEEL COVER - LH <i>X sec</i>	20.00	0.00	*145.00 FL
10	1		*HEADLAMP SUPPORT PANEL <i>X sec</i>	20.00	0.00	*1,023.00 FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)

3,194.80

- List Item Discount on L Items (S\$)

638.96

Total Parts (S\$)

2,555.84

ComfortDelGro Engineering Pte Ltd/SHD8835P/21/11/2017 09:40. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Larry Ng

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
<u>Miscellaneous Items</u>			
1	1	OD/TP Case (Insurer) ✓	10.00
Sub Total (S\$)			10.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING	New	400.00 200
2	SPRAY PAINTING	New	400.00 360
3	WIRING CHARGE	New	50.00 X 11
4	TUFF KOTE	New	50.00 X 11
5	FRONT WHEEL ALIGNMENT	New	120.00 X 11
Gross Labour Cost (S\$)			1,020.00

ComfortDelGro Engineering Pte Ltd/SHD8835P/21/11/2017 09:40. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Larry Ng

Kalok 1C/KK

24/11/17 1030h.

2 days

4s

After Rep. photo

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification is allowed
- Supplementary items must be resurveyed and is subject to final approval from Insurer and Company

Acknowledged by Repairer

Signature:

Date:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305090813
REGN NO : SHD8835P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : SONATA
DATE OF REGN : 11.06.2013
DATE/TIME IN : 20.11.2017 14:10
ACCIDENT DATE : 20.11.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0000 L	Merimen Fee	10.00	
0001 L	PANEL BEATING	200.00	
0002 23-502	SPRAYPAINT ON AFFECTED AREA	360.00	
			SUB-TOTAL : 570.00

TOTAL : 570.00

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305090813

Date : 22.11.2017

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHD8835P

Date of Accident: 20.11.2017

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: TOKIO SFZ3302B

2. The finalized amount shall be:

(a) Spare Parts after List discount /

(b) Labour Charges \$570.00

Total for Part-By-Part Repair Cost \$570.00

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: _____

Final Lumpsum Repair cost _____

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : Larry Ng

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : K a l v i n

Name : K a l v i n

Date : 22/11/17

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees				
4. LTA Search Fee	\$5.35			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/TM17022157/K1GBN2

Date: 24/11/2017

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MV010238
Claimant Vehicle No :	SHD8835P	Insured Vehicle No :	SFZ3302B
Date of Loss:	20/11/2017	Nature of Claim:	TP
		Claim No:	M1705916

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHD8835P	Engine No:	D4EAD306965
Make & Model:	HYUNDAI SONATA, 2.0 CRDI (A)	Chassis No:	KMHET41VMDA834559
Reg. Date:	11/06/2013 (Man. Year: 2013)	Odometer:	404245 km
Colour:	Yellow		
Engine Capacity:	1991 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Good	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Average

CONDITION OF TYRES

Front Tyre Size:	215/60R16	Rear Tyre Size:	215/60R16
Front Left Side:	West Lake 7 mm	Rear Left Side:	West Lake 7 mm
Front Right Side:	West Lake 7 mm	Rear Right Side:	West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,555.84	0.00	2,555.84	100.00
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,020.00	560.00	460.00	45.10
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	3,585.84	570.00	3,015.84	84.10
+ GST 7.00/7.00% (S\$)	251.01	39.90	211.11	84.10
Nett Amount (S\$)	3,836.85	609.90	3,226.95	84.10

INSPECTION

Date of Assignment:	21/11/2017	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	21/11/2017	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	2.0 days		

Adjuster: KALVIN ANG WEI KUN

Manager: LOW AI PHING

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 24 Nov 2017)
Parts:	143	HYUNDAI SONATA 2.0 CRDI (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHD8835P)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER	Repair	538.80 FL	*- FL
2	1		*FRONT BUMPER TOP BRACKET - LH	Serviceable	22.40 FL	*- FL
3	1		*FRONT BUMPER BRACKET - LH	Serviceable	14.30 FL	*- FL
4	1		*FRT BUMPER FENDER RETAINER	Serviceable	9.20 FL	*- FL
5	10		*FRT BUMPER CLIPS	Not Necessary	22.00 FL	*- FL
6	1		*FRONT FENDER - LH	Repair	593.00 FL	*- FL
7	1		*HEADLAMP - LH	Serviceable	797.90 FL	*- FL
8	1		*FRONT BUMPER PROTECTOR - LH	Repair	29.20 FL	*- FL
9	1		*FRONT WHEEL COVER - LH	Serviceable	145.00 FL	*- FL
10	1		*HEADLAMP SUPPORT PANEL	Serviceable	1,023.00 FL	*- FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	3,194.80	0.00
- List Item Discount on L Items 20.00/20.00% (S\$)	638.96	0.00
Total Parts (S\$)	2,555.84	0.00

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

No	Qty	Particulars	Repairer's	Amount
<u>Miscellaneous Items</u>				
1	1	OD/TP Case (Insurer)	10.00	10.00
Sub Total (S\$)			10.00	10.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	400.00	200.00
2	SPRAY PAINTING	New	400.00	360.00
3	WIRING CHARGE	New	50.00	-
4	TUFF KOTE	New	50.00	-
5	FRONT WHEEL ALIGNMENT	New	120.00	-
Gross Labour Cost (S\$)			1,020.00	560.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >