

Surveyor: Kelvin

REF:

CC3/TMU7022563/KHb52

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: SN 1707X

Policy No. MW000912

Claims No. M1705992

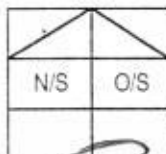
Sum Insured: _____ Excess: _____

(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: _____ days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHB4J87C Yr Regn: 7 Oct / 2010

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

Truck / Trailer or

Make: Hyundai Sonata C.C. 1991

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading: 540482 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 1CMHETXVMAA 794235

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/Rim or

Tyre Size: F: 215/60R16

R: _____

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

TOYO / YOKO or Maxxis

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 24/11/12 D.O.I. 27/11/12

Survey held at COHE (Logan)

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

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

Date / Time	Action / Instruction
	SHB 4337C - CC4 / AXA 17000668 / KHb52
	SN 1707X - X
29/11/17	Sent GIA & EST to Shirley
27/11/17	Calc 45% 2850 / 3 Pys.
	Red: \$ 2378.82, 45%.

Date/Time, File Pass to?

☐

: Preli. Report

1) typist

☒

: Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

____ \$ + RS. ____ SI

Photos

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Report Format: TP

Lump Sum / I.B.H: (\$ 2850)

250

10

RECEIVED 17 NOV 2017



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 : CC3/TMI17022563/K1rb

20 MCCALLUM STREET #09-01

TOKIO MARINE CENTRESINGAPORE 069046

Date : 27-11-2017



Code : TMI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJN 1707X	Veh. Inspected	SHB 4387C
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	27/11/2017

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	24/11/2017	Inspection Date	27/11/2017
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.
--

COMFORTDELGRO ENGINEERING

TOKIO Marine
LKK

ComfortDelGro Engineering Pte Ltd

215 Bunker Road Singapore 11012
Marine - 65 6383 4202 Fax - 65 6292 9753

Workshops

59 Luyang Drive Singapore 545005

323 Sin Ming Drive Singapore 570111

45 Paddan Road Singapore 609290

323 Bunker Road Singapore 11012

24 Serangoon Road Singapore 738156

7 Sungei Kadut Way Singapore 725791

8 Delta Avenue 1 Singapore 339537

member of COMFORTDELGRO

Date/Time: 27.11.2017 08:11

Page : 1

am: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO.305092145

OMER

COMFORT TRANSPORTATION PTE LTD

7010045

OMER NO

383 SIN MING DRIVE

ESS Singapore SINGAPORE 575717

65508755

(O)

(R)

(P)

UNT CARD NO.

REGN NO: SHB4387C	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL SONATA	DATE/TIME IN 24.11.2017 16:35
YR OF MANU 07.10.2010	TARGET DATE
CHASSIS CODE KMHET41VMAA794235	COMPLETION DATE/TIME:

JOB DESCRIPTION

cident Date: 24.11.2017

ATURE: 3P 24.11.17

NO

LABOR CODE

DESCRIPTION

KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ledgement Slip

Exit Pass

No.:

SHB4387C

LIMITS

Vehicle No.:

SHB4387C

f Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

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	25/11/2017 08:47
Date Of Accident	24/11/2017 14:50
Exact Location Of Accident	SENTONSA GATEWAY TWDS SENTONSA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB4387C
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
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-1572701MFSH
Cover Note Number	

Driver

Name of Driver	LAM SHEN CHONG
NRIC No	S1181608H
Date Of Birth	10/10/1955
Occupation	OUTDOOR
Date Of Driving Pass	25/06/1976
Driving Experience	41 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 889A TAMPINES STREET 81 #06-1040
Postcode	521889
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	COLLISION - HEAD TO REAR
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

PLS REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN1707X
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	TAN PENG LOONG
NRIC/Passport Number	S6807494J
Contact Number	96544209
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

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 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. The 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD
CO REG NO 98000101R

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

AGENCY USE ONLY (Internal Use)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24th/11/2017 at about 1450 hrs, I vehicle A was driving into Seton gateway, there was heavy traffic and slowed moving. while I was stationary at that time, suddenly vehicle B came from my back and hit against my vehicle A rear

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO REG NO 102033018

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

24/11/17 Jackson

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

VEHICLE NO : SHB 4387C

MAKE :

MODEL : HYUNDAI SONATA

DATE 27/11/2017

Tyre: Maxxis

LKK - Calvin

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid — <u>nd</u>			\$ 1,349.50
	Boot Lid Rubber <u>X sc</u>			\$ 110.90
	Boot Lid Lock Upper <u>X sc</u>			\$ 132.10
	Boot Lid Lock Lower <u>X sc</u>			\$ 30.30
	Boot Lid Sonata Plate — <u>sc</u>			\$ 43.60
	Boot Lid Hyundai Plate — <u>sc</u>			\$ 24.20
	Boot Lid 'H' Emblem — <u>sc</u>			\$ 26.10
	Boot Lid CRDI Plate — <u>sc</u>			\$ 22.70
	Rear Bumper — <u>nd</u>			\$ 578.40
	Rear Bumper Reinforcement <u>✓/sc</u>			\$ 483.30
	Rear Bumper Clip — <u>sc</u>			\$ 22.00
	Rear Bumper Sponge <u>X sc</u>			\$ 137.40
	Rear Bumper Under Cover <u>X sc</u>			\$ 185.80
	Rear Bumper Protector (LH/RH) <u>X repair</u>	\$	38.00	\$ 76.00
	Tail Lamp (RH) <u>X sc</u>			\$ 344.00
	Rear Panel <u>X repair</u>			\$ 391.80
	Rear Panel Garnish <u>X sc</u>			\$ 95.80
	SUB TOTAL			\$ 4,053.90
	LESS 20%			\$ 810.78
	DISCOUNTED TOTAL			\$ 3,243.12
	Boot Lid Comfort Logo & Tel No. Sticker — <u>nd</u>			\$ 30.00 Nett
	Boot Lid Advertisement Logo — <u>nd</u>			\$ 100.00 Nett
	Rear Bumper Reverse Sensor — <u>nd</u>			\$ 135.70 Nett
	Rear Bumper Advertisement Logo — <u>nd</u>			\$ 50.00 Nett
				\$ 315.70
	Labour Charge			
	Panel Beating			\$ 850.00
	Spray Painting Charge			\$ 600.00 <u>5%</u>
	Wiring Charge			\$ 50.00 <u>X</u>
	Tuff Kote			\$ 50.00 <u>20</u>
	Remove/Refix Reverse Sensor			\$ 120.00 <u>20</u>
	TOTAL LABOUR			\$ 1,670.00
	ESTIMATE TOTAL			\$ 5,228.82
				<u>5234.00</u>

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305092145

Date : 29/11/17

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHB4387C

Date of Accident : 24-Nov-17

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

1. The repair job shall bill to: TOKIO MARINE --- SJN1707X

2. The finalized amount shall be:

(a) Spare Parts after List discount

(b) Labour Charges

Total for Part-By-Part Repair Cost

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20% \$2,850.00

Final Lumpsum Repair cost \$2,850.00

3. Estimated normal period for repairs: 3 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 : 

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 29/11/17

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. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks: REAR BUMPER REINFORCEMENT - REPLACED

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed
Main	27 Nov 2017 19:01 Sendback Est	27 Nov 2017 19:07 S\$5,239.06	29 Nov 2017 13:30 Edit Adj Rpt	S\$2,850.00 Edit Estimates	S\$2,850.00 View Rpt	
						Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS

Insured:	CTPL, Co. Reg. No.: 199303821R		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SHB4387C	Date of Loss:	24/11/2017 14:00 - :59
Claim Type:	TP / M1705992	Policy/Cover Note No.:	MW000912 (Comprehensive) Coverage: 05/02/2017 - 04/02/2018
Vehicle Reg. No. (Insured):	SJN1707X	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 Jeffrey Tay - 65926413]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 08/12/2017]		

ASSOCIATED MAIL RECEIVED

There are no mail for this case.

ALL ASSOCIATED TASKS

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

SHB4387C (M1705992)
[SJN1707X]
TP
CTPL
Nov 24 2017 2:00PM
[CTPL]
ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter		View Use Viewer
Assessment Reports		1 per page <input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)
1	27/11/17 19:07	Repairer Estimates
		Thumbnail Print Load HTM
Photos/Images		3 per page <input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)
1	29/11/17 19:14	General View
2	29/11/17 19:14	General View
3	29/11/17 19:14	General View
4	29/11/17 19:14	General View
5	29/11/17 19:14	General View
6	29/11/17 19:14	General View
7	29/11/17 19:14	General View
8	29/11/17 19:14	General View
9	29/11/17 19:14	General View
10	29/11/17 19:14	General View
11	29/11/17 19:14	General View
12	29/11/17 19:14	General View
13	29/11/17 19:14	General View
14	29/11/17 19:14	General View
15	29/11/17 19:14	Reinspection Photo
16	29/11/17 19:14	Reinspection Photo
17	29/11/17 19:14	Reinspection Photo
18	29/11/17 19:14	Reinspection Photo
19	29/11/17 19:14	Reinspection Photo
20	30/11/17 16:26	Reinspection Photo
21	30/11/17 16:26	Reinspection Photo
22	30/11/17 16:26	Reinspection Photo
		Thumbnail Print Load JPG
Documentation		1 per page <input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)
1	27/11/17 19:08	E-filed GIA report
		Thumbnail Print Load PDF

Documents Checklist

Reset Save Print
DOCUMENTS CHECKLIST
There are no document checklists configured.
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>
Show Remarks To: <input type="checkbox"/> Repairer <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

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: CC3/TMI17022563/K1RBS2

Date: 06/12/2017

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MW000912
Claimant Vehicle No :	SHB4387C	Insured Vehicle No :	SJN1707X
Date of Loss:	24/11/2017	Nature of Claim:	TP
		Claim No:	M1705992

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHB4387C	Engine No:	D4EA9823171
Make & Model:	HYUNDAI SONATA, 2.0 D CRDi Turbo (NF) (A)	Chassis No:	KMHET41VMAA794235
Reg. Date:	07/10/2010 (Man. Year: 2010)	Odometer:	540482 km
Colour:	Blue		
Engine Capacity:	1991 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

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

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	3,559.06	2,355.54	1,203.52	33.82
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,670.00	1,180.00	490.00	29.34
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	5,239.06	3,545.54	1,693.52	32.32
Approved Total (Overridden) (\$\$)		2,850.00		
(\$\$)	5,239.06	2,850.00	2,389.06	45.60
+ GST 7.00/7.00% (\$\$)	366.73	199.50	167.23	45.60
Nett Amount (\$\$)	5,605.79	3,049.50	2,556.29	45.60

INSPECTION

Date of Assignment:	29/11/2017 Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	27/11/2017 Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	3.0 days	

Adjuster: KALVIN ANG WEI KUN

Manager: Janice Lee Si Hua

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: 06 Dec 2017)
Parts:	143	HYUNDAI SONATA 2.0 D CRDi Turbo (NF) (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHB4387C)	
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		*BOOTLID	Dented	1,349.50 FL	*1,349.50 FL
2	1		*BOOTLID RUBBER	Serviceable	110.90 FL	*- FL
3	1		*BOOTLID UPR LOCK	Serviceable	132.10 FL	*- FL
4	1		*BOOTLID LWR LOCK	Serviceable	30.30 FL	*- FL
5	1		*BOOTLID SONATA EMBLEM	Necessary	43.60 FL	*43.60 FL
6	1		*BOOTLID HYUNDAI EMBLEM	Necessary	24.20 FL	*24.20 FL
7	1		*BOOTLID H EMBLEM	Necessary	26.10 FL	*26.10 FL
8	1		*BOOTLID CRDI EMBLEM	Necessary	22.70 FL	*22.70 FL
9	1		*REAR BUMPER	Deformed	578.40 FL	*578.40 FL
10	1		*REAR BUMPER REINFORCEMENT	Cracked	483.30 FL	*483.30 FL
11	10		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
12	1		*REAR BUMPER SPONGE	Serviceable	137.70 FL	*- FL
13	1		*REAR BUMPER UNDER COVER	Serviceable	185.80 FL	*- FL
14	2		*REAR BUMPER PROTECTOR RH/LH	Repair	76.00 FL	*- FL
15	1		*TAILLAMP RH	Serviceable	344.00 FL	*- FL
16	1		*REAR END PANEL	Repair	391.80 FL	*- FL
17	1		*REAR END PANEL GARNISH	Serviceable	95.80 FL	*- FL
18	1		*BOOTLID COMFORT STICKER	Necessary	20.00 F	*20.00 F
19	1		*BOOTLID 65521111 STICKER	Necessary	10.00 F	*10.00 F
20	1		*BOOTLID ADVERTISEMENT STICKER	Necessary	100.00 F	*100.00 F
21	1		*REVERSE SENSOR	Shorted	135.70 F	*135.70 F
22	1		*REAR BUMPER ADVERTISEMENT STICKER	Necessary	50.00 F	*50.00 F

F=Franchise part, L=ListItemDisc.

Sub Total (\$\$)	4,369.90	2,865.50
- List Item Discount on L Items 20.00/20.00% (\$\$)	810.84	509.96
Total Parts (\$\$)	3,559.06	2,355.54

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 (\$\$)			10.00	10.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	850.00	600.00
2	SPRAY PAINTING	New	600.00	540.00
3	WIRING CHECK	New	50.00	0.00
4	TUFF KOTE	New	50.00	20.00
5	R/I REVERSE SENSOR	New	120.00	20.00
Gross Labour Cost (\$\$)			1,670.00	1,180.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >