Kakin REF: CC3/7ml/s	7022655/KIHbn2	
om: Date:	Veh No. SHO 71	13/7 Yr Regn: Nov , 216
timated Cost.	Type: M.Car / M.Cycle / Bus / Va	n / Lorry / T 🕢 / Prime Mover /
D / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
Inspect Vehicle No:	Make: Hyunder	7 % o.c / 665 A/C: Inscred / Std / NI / NA 7/Radio: Inscred / Std / NI / NA
Workshop m/s	Colour Plue	A/C: Insched / Std / NI / NA
	Sp.Reading /6808	T/Radio: Insujed / Std / NI / NA
sured: Shm 7E	Eng/No:	
olicy No. MHO 01440	C/No: /CMH	L841414409627
laims No. M1706046	Gen. Cond: Good / F 1 Poor /	
CVARANTINA - PARI	Steering: Inorder/ Jammed / Le	
311 11100704.	Brake: Inorder / Jammed / Le	
(Client's Record) lake of Veh:	Modi: Nil / S/Rim / STD A/F	lim or
ake of vert.	Tyre Size: F:	
(Dallar Condition)	R:	
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS /	LIZA / MIC / OHTSU / PIR / SUMI /
	Front	Rear
DAC Accident Roort: Consistent? : Yes or No	R/Bal. 7 mm	R/Bal. 7 mm
DAG ACCIDENT TOOLS	L/Bal. 1 mm	L/Bal. 7 mm
Fac. Vac of No.	D.O.A. 28/11/12	D.O.I. 28/4/17
DIVI Van as Na	Survey held at	(OLE (loyeng)
.um Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN /	Des. of Damages : Frt / Rear	OS I NIS I U/C I Rooftop or
Date: Person Contacted:		/ Body Structure affected due to collision
Date / Time Action / Instruction SHD 7131 T - CC3 / TIL 170/2107 SGM 7E - NA/MSG10010206, 30/11/17 Comme P// \$152 6.18/2/	No.	18061017 7.Kz 15053010 911
RECEIVED 0.1	0	
Date/Time, File Pass to? : Preli, Report	Days Of Repair:	\ Survey Fee:
1) 1/2 14PIST : Final Report	Resurvey No. of Trip:	Transportation 250
Date/Time, File Return to?	Fee: Site Insp (\$)_s+Rs_s 10
2)	Interview (\$) Photos
-5	Tech Invs (\$) Others
T 7/3	The second secon	
Report Format: TR Lump Sum / (B): (5 1526 B)	VVeekend (\$	Y.



5a.

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

4945	EMILE TONION A	Affiliated to Federation Internat	ionale Des Experts En Autom	obile
OKI	MARINE INSURA	ANCE SINGAPORE LTD	Ref : CC3/TMI170226	
0 MC	CCALLUM STREET O MARINE CENTR	ESINGAPORE 069046	Date: 28-11-2017 Code: TMI	
		Policy Particular	s :- THIRD PARTY CLAI	M
	Insured Veh.	SGM 7E	Veh. Inspected	SHD 7131T
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From		Assign Date	28/11/2017
2.		Vehicle Pa	rticulars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	2)	Steering	
	Brakes		Modification	
	General			
3.	a subsection of the last	Con	ditions of Tyres	torn courses
		Size	Make	Balance
	R/H Front Tyre			mm
	L/H Front Tyre			mm
72.5	R/H Rear Tyre			mm
	L/H Rear Tyre			mm
4.	E COMPANY SERVICE	Descr	iption of Damages	
5.	· 原则是明日为 3		eral Information	00/44/2017
	Accident Date	28/11/2017	Inspection Date	28/11/2017

Remarks

59 LOYANG DRIVE SINGAPORE 508969

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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.

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.

AC	CID	ENT	STAT	EΜ	ENT
į		_			

Date Of Report Date Of Accident

28/11/2017 11:25 28/11/2017 08:05

Exact Location Of Accident

PIE TOWARDS JURONG BEFORE JALAN EUNOS EXIT

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHD7131T

Insured/Policyholder

Name Of Registered Owner

COMFORT TRANSPORTATION PTE LTD

199303821R

Co Reg No Email Address

FLEETSAFETY@CDGTAXI.COM.SG

Mobile Phone No

Alternative Phone No

OFFICE-65508768

Vehicle Particulars

Manufacturer

HYUNDAI

Model

140

Exact Purpose for which vehicle was being used at

Are you claiming under your own insurance policy

time of accident

NO

for repair to your vehicle?

THIRD PARTY

If No, Please state action to be taken

Vehicle Category

TAXI

Insurance Company

Name of Insurance Company

INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage

THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

YES

Policy Number

MCOM0016

Cover Note Number

Driver

GOH CHEE KIAT Name of Driver

S1182578H NRIC No 17/12/1956 Date Of Birth OUTDOOR Occupation 25/09/1979

38 YEARS AND 2 MONTHS **Driving Experience**

MALE Gender

Mobile Number

Date Of Driving Pass

Fax Number

Contact Number

EMail Address

GOHCHEEKIAT@YAHOO.COM

Address

BLK 556 PASIR RIS STREET 51 #03-153

Postcode

510556

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?

Was any body injured in the Accident?

YES YES

NO

Was any other material or property damaged?

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?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGM7E

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

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

DETAILS OF INJURED PERSON 1

Name

GOH CHEE KIAT

Approximate Age

61

Injuries Sustain

PAINS BEHIND THE BACK AND NECK.

Injured person in which vehicle?

SHD7131T

Were seat belts worn?

YES

Was injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan Pg. 1

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

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 ".
 - 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")
- 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:
 - 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.

COMEGRITARIANSPORTATION FILES. CO. REG. NO. 1902003321R

> Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Um Es Soon

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN		60	Airpost
urone 2	PIE et	193601 0992d	A = SHD 71317 B = SG M 7 E
PART EUNOS PART DESCRIBE CIRCUMSTANCES OF THE	E ACCIDENT		
This N	norning (28/1/17),	when I paw
1	1.70		on PIE bofre
Jalan Eunus Q	exit, y ba	aled mis	alowed down
the speed orn	d all of a	sudden, Co	W B(86M7E),
a Mercedes	behind, b	arged i	nto the loss of
my tea.			
One les	nale pass	eoryph in	my lox.
y fact	body pri	ins follo	wing Tho
accident			
			allarie.
DECLARATION		. 1	7
I/We declare the foregoing particulars of UMFGRT TRANSPORTATION PTS LI CO 328 NO 192202 STR	VIII VV	20/1	The Soon CSO
Policyholder's Signature Date & Time:	Driver's Signature (if driver is not the policyh Date & Time:	older)	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

Date/Time: 28.11.2017 12:11 Page: 1

Poam.	ARC	Renair	TP(C

JOB CARD Sales Order: JC NO.305092971

C Repair TP(CLSO)1	JOB CARD Sales Order:	JC NO.305092971
	REGN NO. SHD7131T	MILEAGE
7010045	E LTD MAKE: HYUNDAI	FUEL E
SIN MING DRIVE apore SINGAPORE 57571	7 MODEL _{I-40}	28.11.2017 09:45
	YR OF MANU. 1. 2016	TARGET DATE
	CHASSIS CODE KMHLB41UMHU09	6277 COMPLETION DATE/TIME:
	7010045 SIN MING DRIVE	ORT TRANSPORTATION PTE LTD 7010045 SIN MING DRIVE (apore SINGAPORE 575717 (O) REGN NO. 131T MAKE HYUNDAI MODEL 1-40 YR OF MANU 1. 2016 CHASSIS CODE AMBRILLE AMBR

JOB DESCRIPTION

Accident Date: 28.11.2017

NATURE: 3P 28.11.17

S/NO

LABOR CODE

DESCRIPTION

CKED & PASSED OUT BY:		
SERVICE ADVISOR		CUSTOMER'S SIGNATURE
wledgement Slip	Exit Pass	
SHD7131T LIMTS	Vehicle No.: SHD7131T	
of Service Advisor Signature/Date	Name of Service Advisor	Date
returned to Service Reception upon collection	To be kept by Security Guard	

COMFORTDELGRO ENGINEERING PTE LTD TOKIO MARING-CPP)

REPAIR ESTIMATE*

VEHICLE NO: SHD 7131T MAKE:

Type: Hankook

DATE 28/11/2017.

EL Qty	: HYUNDAI i40 Parts Description/ Labo	our	Type	Unit Pri	ce	A	mount
2.0	Boot Lid 'H' Emblem X **					\$	27.20
	Boot Lid CRDI Plate > ^^					S	41.00
	Bootlid Moulding × **					\$	85.00
	Bootlid i40 Emblem × *7					\$	41.00
	Bootlid Lower Garnish × 50-					S	398.00
	Rear Bumper / Idal					\$	603.60
	Rear Bumper Reinforcement		1			\$	504.35
	Rear Bumper Reinforcement Bracke	et (LH/RH) X		\$	180.00	S	360.00
	Rear Bumper Side Bracket			\$	49.00	\$	98.00
	Rear Bumper Clips /				10,12,10,10	\$	22.00
	Rear Bumper Sponge YJM					\$	143.40
	Rear Bumper Under Cover / ut					\$	225.00
		SUB TOTAL				\$	2,548.55
		LESS 20%				\$	509.71
	DISCO	OUNTED TOTAL				S	2,038.84
	Rear Bumper Rubber Mat Rear Bumper Advertisement Logo Rear Fender Advertisement Logo (1)			S	100.00	\$ \$	50.00 200.00 465.70
	Labour Charge	LKK Auto Const	iltants henc	e notify			200
	Panel Beating	the Renairer of	he following			\$	350.00
	Spray Painting Charge	To resurvey before To display damage	e/after spray po ed partist durin	unung g resurvey		\$	200.00
	Wiring Charge	 Dank nrings are 5 	ubject to centit	nation		S	50.00
	Remove/Refix Reverse Sensor	Third party surve No diegal mod 15	s on a "Without on a lice."	ut Prejudice: casis ed		S	120.00
	Merinon Fee \$10		Collect and art best	DOM: DOVING ARC			
	Merinan Fee \$10 Kaluh /L/K/4 ES	COTATE HADOUD	approval from	isurance compan	4	S	720.00
	Kalin ILICIY	Acknowledged by	Repairer			-0	2 22 4 5 4
	A // ES	TIMATETOTAL				\$	3,224.54
	Kahih /C/K/4 ES 128/11/17 1245h 2 Days. PIP Betone Paint ph	to					
	Ketore PAINT P.	1940 B				1	

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

28/11/2017

10/11/2016

KMHLB41UMHU096277

GOOD

NO

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

59 Loyang Drive Singapore 508969 Tel: 6214 8300

Ref. No:

Date of Loss:

Vehicle Reg. Date:

Gen Condition:

Chassis No:

Driveable?

TP INSURER:

Tokio Marine Insurance Singapore Ltd (HQ)

CTPL

Singapore

PARTICUL	ARS OF	CL AIM
PARTICUL	MING OIL	CLAIN

Claim Type: THIRD PARTY

Policy No:

Vehicle Reg. SHD7131T

No.:

Party At

UNKNOWN

Fault:

Make/Model: HYUNDAI I40, 1.7 D CRDI (A)

BLUE

Vehicle Colour:

Engine No: D4FDGU689104

3

0 KM Odometer:

Paint Type:

List Item

20.00 %

Discount:

Total Loss? NO

Est.

Duration of Repair (day)

Present

COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

Location:

	Amount
	2,504.54
	10.00
	720.00
	0.00
	0.00
Gross Total (S\$)	3,234.54
+ GST 7.00% (S\$)	226.42
Nett Amount (S\$)	3,460.96
	+ GST 7.00% (S\$)

This claim is handled by: LIM TIEN SIONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

2,504.54

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 28 Nov 2017)

Parts:

143

HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Validity:

Print Code: ComfortDelGro Engineering Pte Ltd/SHD7131T/28/11/2017 18:02 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	Otv	Part No.	Particulars	%Disc	%Depr	Amount
	4		*BOOTLID EMBLEM H	20.00	0.00	*27.20 FL 111
	1		*BOOTLID EMBLEM CRDI	20.00	0.00	*41.00 FL 00
	4		*BOOTLID MOULDING	20.00	0.00	*85.00 FL ^r
	1		*BOOTLID EMBLEM I40	20.00	0.00	*41.00 FL ^
5	4		*BOOTLID LOWER GARNISH	20.00	0.00	*398.00 FL S
3	4		*REAR BUMPER	20.00	0.00	*603.60 FL pa
7	1		*REAR BUMPER REINFORCEMENT	20.00	0.00	*504.35 FL s
3	2		*REAR BUMPER REINFORCEMENT BRKT RH/LH	20.00	0.00	*360.00 FL &
	2		*REAR BUMPER SIDE BRKT RH/LH	20.00	0.00	*98.00 FL S
10	10		*REAR BUMPER CLIPS	20.00	0.00	*22.00 FL n
	10		*REAR BUMPER SPONGE	20.00	0.00	*143.40 FL S
11 12	4		*REAR BUMPER UNDER COVER	20.00	0.00	*225.00 FL &
13	4		*BOOTLID COMFORTDELGRO	0.00	0.00	*20.00 F nn
14	1		*BOOTLID 65521111	0.00	0.00	*10.00F nn
			*REVERSE SENSOR	0.00	0.00	*135.70F Sh
15 16	1		*REAR BUMPER MAT	0.00	0.00	
17	1		*REAR BUMPER ADVERTISEMENT STICKER	0.00	0.00	*50.00 F W
18	2		*REAR FENDER ADVERTISEMENT STICKER RH/LH	0.00	0.00	*200.00F v
	-	e part. L=ListI		A. 2000 Ala		a Cartesian
	arichise	part. E-cisti	Sub Total (S\$)			3,014.25
			- List Item Discount on L Items (S\$)			509.71

ComfortDelGro Engineering Pte Ltd/SHD7131T/28/11/2017 18:02. Not valid without Reference section. Generated using Merimen e-Claims IEAS

Total Parts (S\$)

Estimates on Miscellaneous Items

No	Qty	Particulars		Amount
Mis 1	cellan 1	eous Items OD/TP Case (Insurer)		10.00
			Sub Total (S\$)	10.00

Estima	tes on	Labour

No	Particulars	Lab.Type	Amount
Lab	our Items	Novi	350,000 200
1	PANEL BEATING	New	200.00 18
2	SPRAY PAINTING	New	200.00 10
3	WIRING CHECK	New	50.00 nn
4		New	120,00 20
		Gross Labour Cost (S\$)	720.00

ComfortDelGro Engineering Pte Ltd/SHD7131T/28/11/2017 18:02. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

COMFORTDELGRO ENGINEERING PTE LTD

Date: 28.11.2017 Time: 17:41:08

Page: 1

REPAIR ESTIMATE

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO MILEAGE MAKE

: 305092971 : SHD7131T : 0000000000 : HYUNDAI

: I-40 MODEL

DATE OF REGN : 10.11.2016 DATE/TIME IN : 28.11.2017 09:45 ACCIDENT DATE : 28.11.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0579-G BUMPER REAR

1 603.60 20.00 482.88

0002 04-01-0101-0111-G BUMPER CLIPS 10 L 22.00 20.00 17.60

0003 04-01-0103-0738-G BUMPER LOWER REAR 1 225.00 20.00 180.00

0004 09-01-9999-0068-A REVERSE SENSOR 1 135.70 135.70

0005 04-01-0103-1150-A BUMPER PROTECTOR MAT 1 50.00 50.00

SUB-TOTAL : 866.18

JOB NATURE

0000 L	PANEL BEATING	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	180.00
0002 L	R/I REVERSE SENSOR	20.00
0003 20-05	TP MERIMEN	10.00
0004 20-05	Rear Bumper Adv.Sticker	50.00
0005 20-05	Rear Fender Adv.Sticker RH/H	200.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 28.11.2017 Time: 17:41:08

Page: 2

REPAIR ESTIMATE

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO MILEAGE

: 305092971 : SHD7131T : 0000000000 : HYUNDAI

MAKE

MAKE
MODEL : I-40
DATE OF REGN : 10.11.2016
DATE/TIME IN : 28.11.2017 09:45

ACCIDENT DATE : 28.11.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

SUB-TOTAL: 660.00

TOTAL : 1,526.18

AUTHORISED: YES / NO

SURVEYOR NAME & SIGNATURE

DATE:

DATE:

MVA NAME & SIGNATURE

COMFORTDELGRO ENGINEERING

305092971 Our Job Ref No : ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156 29/11/17 FINALIZATION FORM Fax: LKK KALVIN ANG Attn : 28-Nov-17 Vehicle Reg No. : SHD7131T Date of Accident : ___ The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-SGM 7E TOKIO MARINE The repair job shall bill to: 1. The finalized amount shall be: 2. \$866.18 Spare Parts after List discount (a) \$660.00 Labour Charges (b) \$1,526.18 Total for Part-By-Part Repair Cost (c.) Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: 20% Final Lumpsum Repair cost Estimated normal period for repairs: 2 working days. 3. We shall treat the above amount as Correct and Confirmed if there is no reply from you 4. within 7 working days We confirm the estimates and Thank you for your assistance. finalized amount Signature Signature: KALVIN : LIMTS Name Name 30/11/07 62148398 Date Tel 65468156 Fax For Official Use Only Document Confirm By Remarks Attached Amount Item (Signature) Yes or No YES Rental Rate P/Day Loss of Income Paid Survey Fees LTA Search Fee Medical Fees (on behalf of driver, if applicable) Overrun

Remarks:

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

51 Ubi Ave 1 #01-25. Pava 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/TMI17022655/K1TBN2

Date:

06/12/2017

REFERENCE

Handling Insurer:

Tokio Marine Insurance Singapore Ltd

Policy No:

MH001440

Claimant

SHD7131T

Insured Vehicle No:

SGM7E

Vehicle No: Date of Loss:

28/11/2017

Nature of Claim:

TP

Claim No: M1706046

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHD7131T

Make & Model:

HYUNDAI 140, 1.7 D CRDi (A) 10/11/2016 (Man. Year: 2016) Engine No: Chassis No: Odometer:

D4FDGU689104

168083 km

KMHLB41UMHU096277

Reg. Date: Colour:

Blue

1685 cc

Engine Capacity: 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:

Yes

Good Steering (Serviceable): **Engine Modification:**

Yes Footbrake (Serviceable): No Pre-accident Condition:

Yes Good

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

205/60R16

Rear Tyre Size:

205/60R16

Front Left Side:

Hankook 7 mm

Rear Left Side: Rear Right Side:

Hankook 7 mm Hankook 7 mm

Hankook 7 mm Front Right Side: The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts	Repairer's 2,504.54	Adjuster's 1,116.18	Difference 1,388.36	Diff % 55.43
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	720.00	400.00	320.00	44.44
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	3,234.54	1,526.18	1,708.36	52.82
+ GST 7.00/7.00% (S\$) Nett Amount (S\$)	226.42	106.83	119.59	52.82
	3,460.96	1,633.01	1,827.95	52.82

INSPECTION

Date of Assignment:

29/11/2017 Present Location:

ComfortDelGro Engineering Pte Ltd

(Loyang)

Date Inspected:

28/11/2017 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: DENISE TAY KWEE CHENG

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 I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SHD7131T)

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 *.

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
1	1	*BOOTLID EMBLEM H	Not Necessary	27.20 FL	*- FL
2	1	*BOOTLID EMBLEM CRDI	Not Necessary	41.00 FL	*- FL
3	1	*BOOTLID MOULDING	Not Necessary		*- FL *- FL
4	1	*BOOTLID EMBLEM 140	Not Necessary		
5	1	*BOOTLID LOWER GARNISH *REAR BUMPER	Serviceable Deformed	398.00 FL 603.60 FL	*- FL *603.60 FL
7	1 2	*REAR BUMPER REINFORCEMENT *REAR BUMPER REINFORCEMENT BRKT RH/LH	Serviceable Serviceable	504.35 FL 360.00 FL	*- FL *- FL
9	2	*REAR BUMPER SIDE BRKT RH/LH	Serviceable	98.00 FL	*- FL
10	10	*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
11	1	*REAR BUMPER SPONGE	Serviceable	143.40 FL	*-FL
12	1	*REAR BUMPER UNDER COVER	Cut	225.00 FL	*225.00 FL
13	1	*BOOTLID COMFORTDELGRO *BOOTLID 655211111	Not Necessary Not Necessary		*- FS *- FS
15	1	*REVERSE SENSOR *REAR BUMPER MAT	Shorted Necessary	135.70 F 50.00 F	*135.70 FS *50.00 FS
17	1 2	*REAR BUMPER ADVERTISEMENT STICKER *REAR FENDER ADVERTISEMENT STICKER RH/LH	Necessary Necessary	50.00 F 200.00 F	*50.00 FS
	-	part. S=SpcNett. L=ListItemDisc.			
		Francisco Con English Control	Sub Total (S\$)	3,014.25	1,286.30
		- List Item Discount on L Items 20			170.12
			Total Parts (S\$	2,504.54	1,116.18

Re N∘	commended Miscellaneous Oty Particulars	Items	Repairer's	Amount
Misc	ellaneous Items			00.00000
1	1 OD/TP Case (Insurer)		10.00	10.00
		Sub Total (S\$)	10.00	10.00
Re	commended Labour			
No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	350.00	200.00
2	SPRAY PAINTING	New	200.00	180.00
3	WIRING CHECK	New	50.00	7.0
4	R/I REVERSE SENSOR	New	120.00	20.00
		Gross Labour Cost (S\$)	720.00	400.00
	Report w	as unsubmitted during this print-out.		

< END OF ESTIMATES >