

22/07/2012

ASS. REC. BY:

REF:

CS/MS 117023170/Klgb⁰²

Special Instruction:

Surveyor:

Kalin.

ASSIGNMENT (Office)

From (Person):

Irene Tan

of

MSL

Date/Time:

06122017 1145am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHA 1756X

Insured:

FBC 1852L

at Workshop m/s

Comfort Delgro

Tel:

6214 8316

of

55 Lanyang Div

Policy No:

MSD/VMT/17-355380

Claim No:

MSC/V/17-006902

Sum Insured:

Excess:

Make of Veh:

D.O.A

04.12.2017

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp

H.O.D. Endorsement:

Date/Time:

06122017 11:49am

Person Contacted:

Lany

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SHA 1756X - X

FBC 1852L - C16/AXA 11019509/Keddi

DOA: 1609 2011

07/12/17@4.56pm revised to Irene Tan via Mervin

REF: MSU

ASSIGNMENT

SHA 1756X Yr Reg: 2016

From: Date: 06/12/2017

Estimated Cost:

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

To Inspect Vehicle No: SHA 1756X

at Workshop mis:

Comfort Delgro

of

51 Loyang Drive

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 Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 2 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:

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

Truck / Trailer or

Make:

Toyota Prius

Colour:

Blue

A/C: In: 0 Red / Std / NI / NA

Sp. Reading

189831

T/Radio: In: 0 Red / Std / NI / NA

Eng No:

C/No:

JTDKBJFU 48352808

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In: 0 Jammed / Leaked / Burnt or

Brake: In: 0 Jammed / Leaked / Burnt or

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

Tyre Size:

F: 195/65R15

R:

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

Front

R/Bal. 2 mm

L/Bal. 2 mm

D.O.A. 4/12/17

Survey held at

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

o/s Body.

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

Rear

R/Bal. 2 mm

L/Bal. 2 mm

D.O.A. 6/12/17

CPLE (Gang)

Date / Time Action / Instruction

7/12/17 Get PIP \$435/200 (Paid \$90, 17/12)

PIP

RECEIVED 08 DEC 2017

Date/Time File Pass to?

08/12/2017

☐ : Preli. Report
☐ : Final Report

Date/Time File Return to?

2:

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee

Transportation

3 + 100

Photo

Sheet

Add Fee:

☐ Site Insp
☐ Interview
☐ Tech. Insp
☐ Weekend

(\$)

(\$)

(\$)

(\$)

Report Format:

Lump Sum / I.B.I. (\$)

TP

435

200

10

210



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

MSIG INSURANCE (SINGAPORE) PTE LTD

Ref : CS/MSG17023170/K1qb

16 RAFFLES QUAY
#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 06-12-2017



Code : MSG

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBC 1852L	Veh. Inspected	SHA 1756X
Policy No.	MSD/VMT/17-359380	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	MERIMEN (IRENE TAN)	Assign Date	06/12/2017

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

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5. General Information

Accident Date	04/12/2017	Inspection Date	06/12/2017
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	06 Dec 2017		06 Dec 2017 11:45 Assign			New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	MOHAMAD SHAHARY BIN MOHAMAD SO'OD, ID: S8512847G								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHA1756X	Date of Loss:	04/12/2017 16:00 - :59						
Claim Type:	TP	Policy/Cover Note No.:	MSD/VMT/17-359380 (Third Party Only) Coverage: 07/01/2017 - 06/01/2018						
Vehicle Reg. No. (Insured):	FBC1852L	Policy No. (Claimant):							
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Irene Tan Gek Ing - 6594 2541]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 07/12/2017]								
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.									

Note: This document has not been finalised.

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Irene Tan Gek Ing

Date: 07 Dec 2017

Preliminary Advice

Insured Vehicle No	: FBC1852L	Accident Date	: 04/12/2017
TP Vehicle No	: SHA1756X	Assignment Date	: 06/12/2017
Make	: TOYOTA PRIUS	Est. Duration of Repair	: 2.00
Date of Inspection	: 06/12/2017		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) 59 LOYANG DRIVE SINGAPORE 508969		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s body and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	525.00
Revised Amount	:S\$	435.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	435.00

Lump Sum Repair :S\$

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

- () The vehicle is economical/not economical for repair.
- (X) The above survey was conducted on a 'without prejudice' basis.

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	05/12/2017 11:30
Date Of Accident	04/12/2017 16:15
Exact Location Of Accident	TOH GUAN RD E TWDS TOH GUAN RD.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA1756X
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	TOYOTA
Model	PRIUS HYBRID 4G
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	LIM BOON KIAT
NRIC No	S7013003C
Date Of Birth	28/04/1970
Occupation	OUTDOOR
Date Of Driving Pass	03/07/1995
Driving Experience	22 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	WALTER28LIM@YAHOO.COM.SG

Address	BLK 187A RIVERVALE DRIVE #14-856
Postcode	541187
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

REFER 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	FBC1852L
Vehicle Make/Model/Colour	MOTORCYCLE
Details Of Properties	
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	84987710
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LH FRONT
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. 10020322P

5/12/17
Jackson Heng
CEO

Policyholder's Signature
Date & Time:

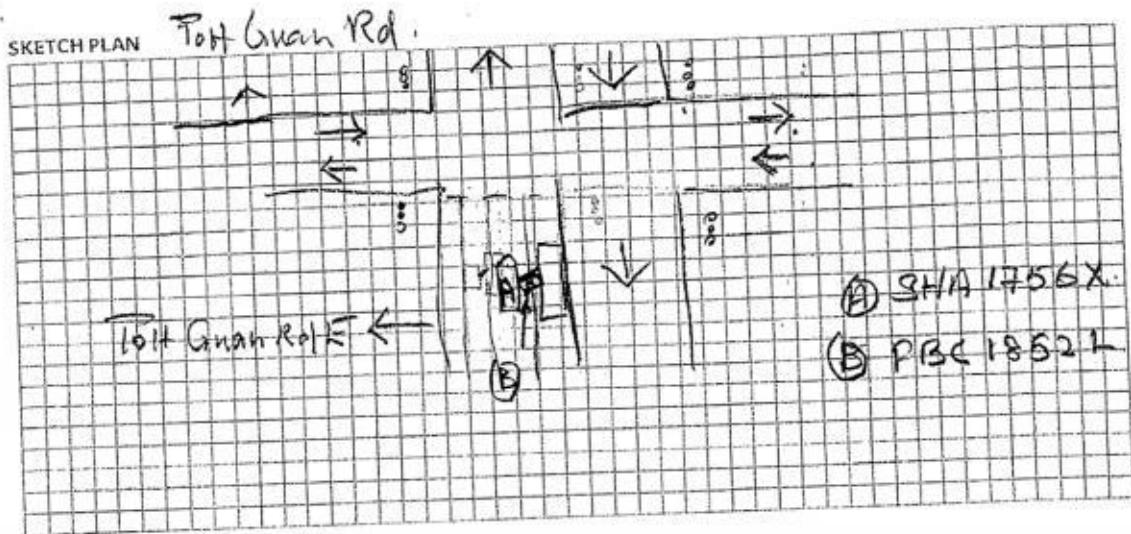
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Approved for use on 1/1/17



Sketch Plan Pg. 2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 4th/12/2017 at about 1615 hrs a vehicle A was stationary at Teh Guan road E waiting for traffic light to turn green. While waiting vehicle B trying to squeeze in between, but he was unbalance and grazed against my right side doors.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

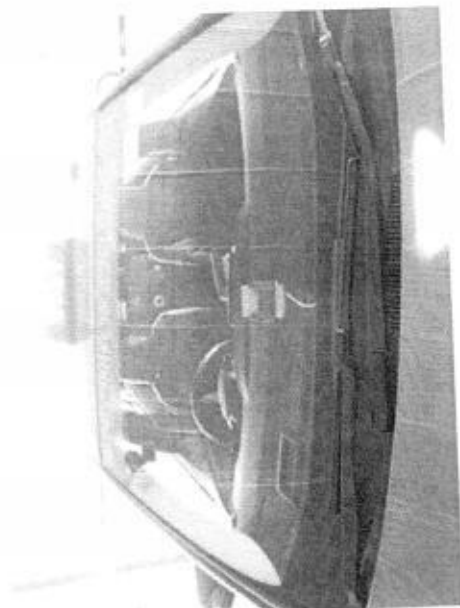
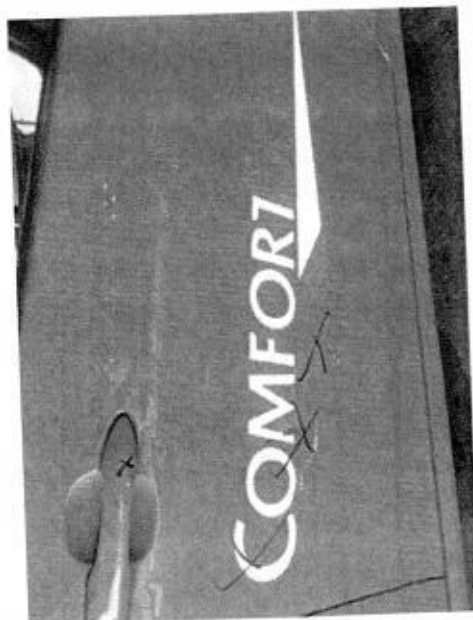
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: 33242
NRIC/FIN No.:

Signature of Reporting Centre Personnel

5/12/17 Jackson
Jackson Heng
CEO



Date/Time: 06.12.2017 09:55

Page : 1

A member of COMFORTDELGRO

Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO. 305095300

CUSTOMER

NAME: COMFORT TRANSPORTATION PTE LTD

PHONE: 7010045

CUSTOMER NO: 383 SIN MING DRIVE

ADDRESS: Singapore SINGAPORE 575717

TEL: 65508755

(O)

L (R)

(P)

SCOUT CARD NO.

REGN NO:

SHA1756X

MILEAGE

MAKE:

TOYOTA

FUEL

E.....1/2.....F

MODEL

PRIUS HYBRID(G4)06

DATE/TIME IN

12.2017 08:00

YR OF MANU

20.09.2016

TARGET DATE

CHASSIS CODE

JTDKB3FU403530808

COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 04.12.2017

NATURE: 3P 04.12.2017

S / NO

LABOR CODE

DESCRIPTION

MSIG - taxi Right doors damage

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

By:

Signature

File No.:

SHA1756X

LARRY

Larry Ng

Vehicle No.:

SHA1756X

Name 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
REPAIR ESTIMATE
 VEHICLE: SHA 1756X

MZG

DATE 6/12/2017 13:51

MODEL: TOYOTA PRIUS

QTY	PARTS DESCRIPTION	TYPE	UNIT PRICE	AMOUNT	
	FRONT DOOR COMFORT LOGO, RH <i>hu</i>			\$ 75.00	NETT
				\$ 75.00	
	Labour Charge				
	Panel Beating			\$ 200.00	<i>180</i>
	Spray Painting Charge			\$ 200.00	<i>180</i>
	Wiring Charge			\$ 50.00	<i>50</i>
	TOTAL LABOUR			\$ 450.00	
	ESTIMATE TOTAL			\$ 525.00	

Ka Lz 16/11/17
6/12/17 1345h
2 Pags
P/P
After Repair p/h

LKK Auto Consultants hereby 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
- Supplemental item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
 Signature:
 Date:

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 PTE LTD
REPAIR ESTIMATE

Date: 07.12.2017
Time: 17:06:50
Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305095300
REGN NO : SHA1756X
MILEAGE : 0000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(G4)
DATE OF REGN : 20.09.2016
DATE/TIME IN : 06.12.2017 08:00
ACCIDENT DATE : 04.12.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 28-01-0103-0003-A (I40)FRT DOOR LOGO SONATA 1 75.00 0.00 75.00

SUB-TOTAL : 75.00

JOB NATURE

0000 L PANEL BEATING 180.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 180.00

SUB-TOTAL : 360.00

TOTAL : 435.00

AUTHORISED : YES / NO

MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305095300

Date : 07/12/17

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA1756X

Date of Accident: 04/12/17

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

1. The repair job shall bill to: MSIG FBC1852L
2. The finalized amount shall be:

(a) Spare Parts after List discount	\$75.00
(b) Labour Charges	\$360.00
Total for Part-By-Part Repair Cost	\$435.00
(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

Signature : Kalvin

Name : Larry Ng

Name : Kalvin

Tel : 6214 8316

Date : 7/12/17

Fax : 6546 8156

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/MSG17023170/K1QBN2
Date: 12/12/2017

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VMT/17-359380
Claimant Vehicle No :	SHA1756X	Insured Vehicle No :	FBC1852L
Date of Loss:	04/12/2017	Nature of Claim:	TP
		Claim No:	MSC/V/17-001902

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHA1756X	Engine No:	2ZRR925666
Make & Model:	TOYOTA PRIUS, 1.8 HYBRID CVT (A)	Chassis No:	JTDKB3FU403530808
Reg. Date:	20/09/2016 (Man. Year: 2016)	Odometer:	189831 km
Colour:	Blue		
Engine Capacity:	1798 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:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	195/65 R15	Rear Tyre Size:	195/65 R15
Front Left Side:	Bridgestone 7 mm	Rear Left Side:	Bridgestone 7 mm
Front Right Side:	Bridgestone 7 mm	Rear Right Side:	Bridgestone 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	75.00	75.00	0.00	0.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	450.00	360.00	90.00	20.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	525.00	435.00	90.00	17.14
+ GST 7.00/7.00% (S\$)	36.75	30.45	6.30	17.14
Nett Amount (S\$)	561.75	465.45	96.30	17.14

INSPECTION

Date of Assignment:	06/12/2017	
Date Inspected:	06/12/2017 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: SHIAU CHAN

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: 12 Dec 2017)
Parts:	144	TOYOTA PRIUS 1.8 HYBRID CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHA1756X)	
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 DOOR COMFORT LOGO,RH	Necessary	75.00 FS	*75.00 FS
				Total Parts (S\$)	75.00	75.00

F=Franchise part. S=SpcNett.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	200.00	180.00
2	SPRAY PAINTING CHARGE	New	200.00	180.00
3	WIRING CHARGE	New	50.00	-
Gross Labour Cost (\$\$)			450.00	360.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >