

ASS. REC. BY:

REF:

CS/TM118000055/KHb2

Special Instruction:

Sunway

**ASSIGNMENT (Office)**From (Person): Shirley Too of TM Date/Time: 2/1/2018

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

**OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS**To Inspect Vehicle No: SHC 8921 D Insured: GBF6233Aat Workshop m/s Comport Delgro Tel: \_\_\_\_\_of 59 Loyang DrivePolicy No: MI000373 Claim No: M1800013

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 29/12/17

(Client's Record)

**CA / REV / REP. / REV 24 HRS**

H.O.D. Endorsement: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN/OUT

Date/Time	Action/Instruction ( ) Estimate
	<u>SHC 8921 D - X</u>
	<u>GBF 6233A - X</u>

Kalvin

# ASSIGNMENT

SHC 89210

14 Apr 2016

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop No: \_\_\_\_\_  
 of: \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No: \_\_\_\_\_  
 Claims No: \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Vehicle: \_\_\_\_\_  
 Type: M/Car / M/Cycle / Bus / Van / Lorry / T/Truck / Prime Mover  
 Truck / Trailer or  
 Make: Hyundai 240 1685  
 Colour: Blue 6 Std / NI / NA  
 Seating: 260401 6 Std / NI / NA  
 Eng No: \_\_\_\_\_  
 O No: KM HLB 414A 44087423  
 Gen. Cond: Good / Poor / Poor / Burnt  
 Steering: In OK / Jammed / Leaked / Burnt on  
 Brake: In OK / Jammed / Leaked / Burnt on  
 Mod: N/A / S/Rim / STD A 0 / m / r  
 Tyre Size: F: 205/60R16  
 R: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bel. or Market Value: \_\_\_\_\_  
 IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / FR Seed: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repair: \_\_\_\_\_ days Res: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No

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

Front	Rear
R.Bal. <u>2</u> mm	R.Bal. <u>2</u> mm
L.Bal. <u>2</u> mm	L.Bal. <u>2</u> mm
D.O.A. <u>29/12/17</u>	D.O.A. <u>2/1/18</u>
Survey held at: <u>CHC (Luzon)</u>	

QA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

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

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

Date / Time Action / Instruction  
5/1/8 Continued PIP \$1573.54 / 24hrs (Red, 1661; 51%)

Tolco

RECEIVED 10 JAN 2016

Date/Time File Received: ☐ Prel. Report

10/1 Typist ☒ Final Report

Date/Time File Returned: \_\_\_\_\_

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee  
 Transportation

Add Fee:



Site Insp: \$  
 Rental: \$  
 Tech Fee: \$  
 Rep. Fee: \$

Site Fee  
 Photo  
 Other

Report Format: TP

Lump Sum: 0 1573.54

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/TMI18000055/K1tb		
20 MCCALLUM STREET #09-01		Date : 02-01-2018		
TOKIO MARINE CENTRESINGAPORE 069046		Code : TMI		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	GBF 6233A	Veh. Inspected	SHC 8921D	
Policy No.	M1000373	Coverage (\$)	0.00	
Claim No.	M1800013	Excess (\$)	0.00	
Assign From	SHIRLEY TOO	Assign Date	02/01/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	c.c			
Engine No.	Year of Reg.			
Chassis No.	Colour			
Odometer	Steering			
Brakes	Modification			
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	29/12/2017	Inspection Date		
Survey held at				
<b>5a. Remarks</b>				

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

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	29 Dec 2017 17:58 <a href="#">Sendback Est</a>	29 Dec 2017 18:05 <b>S\$3,234.54</b>	02 Jan 2018 11:50 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All
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**CLAIM SUBFOLDER DETAILS**

<b>Insured:</b>	CTPL, Co. Reg. No.: 199303821R		
<b>Main Claimant:</b>	CTPL		
<b>Vehicle Reg. No.:</b>	SHC8921D	<b>Date of Loss:</b>	29/12/2017 11:00 - :59
<b>Claim Type:</b>	TP / M1800013	<b>Policy/Cover Note No.:</b>	MI000373 (Comprehensive) Coverage: 13/01/2017 - 12/01/2018
<b>Vehicle Reg. No. (Insured):</b>	GBF6233A	<b>Policy No. (Claimant):</b>	
		<b>Excess:</b>	S\$0.00
<b>Repairer:</b>	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300		
<b>Handling Insurer:</b>	Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by <b>Dillen Senthilan so Selvarajoo</b> ]		
<b>Adjuster:</b>	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 11/01/2018]		

**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.									

Team: ARC Repair TP(CLS0)1

**JOB CARD** Sales Order:

JC NO.305102257

OMER	REGN NO: SHC8921D	MILEAGE
IS COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL E.....1/2.....F
OMER NO 7010045	MODEL I-40	DATE/TIME IN 29.12.2017 15:20
ADDRESS 383 SIN MING DRIVE	YR OF MANU 14.04.2016	TARGET DATE
Singapore SINGAPORE 575717	CHASSIS CODE KMHLB41UMGU087423	COMPLETION DATE/TIME:
65508755 (R) (P)		

DUNT CARD NO.

JOB DESCRIPTION

Accident Date: 29.12.2017  
NATURE: 3P 29.12.17

/NO	LABOR CODE	DESCRIPTION
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WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Receipt Slip

Exit Pass

No.: SHC8921D

JU TOKIO LKK

Vehicle No.:

SHC8921D

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned 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	29/12/2017 16:22
Date Of Accident	29/12/2017 11:35
Exact Location Of Accident	SLIP RD FROM PAYA LEBAR RD TWDS PIE/TUAS DIRECTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8921D
<b>Insured/Policyholder</b>	
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	I40

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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0016
Cover Note Number	

### Driver

Name of Driver	LEOW KIM CHOON
NRIC No	S1391734E
Date Of Birth	28/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	31/12/1979
Driving Experience	37 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 670 HOUGANG AVENUE 8 #02-741
Postcode	530670
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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
Passenger 1	NAME: : - GENDER: : FEMALE

#### 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	GBF6233A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	PEH AH SENG
NRIC/Passport Number	S1205452A
Contact Number	98345696
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD
Nature Of Damage	FRT

No. Of Passenger (Including Driver)



**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.

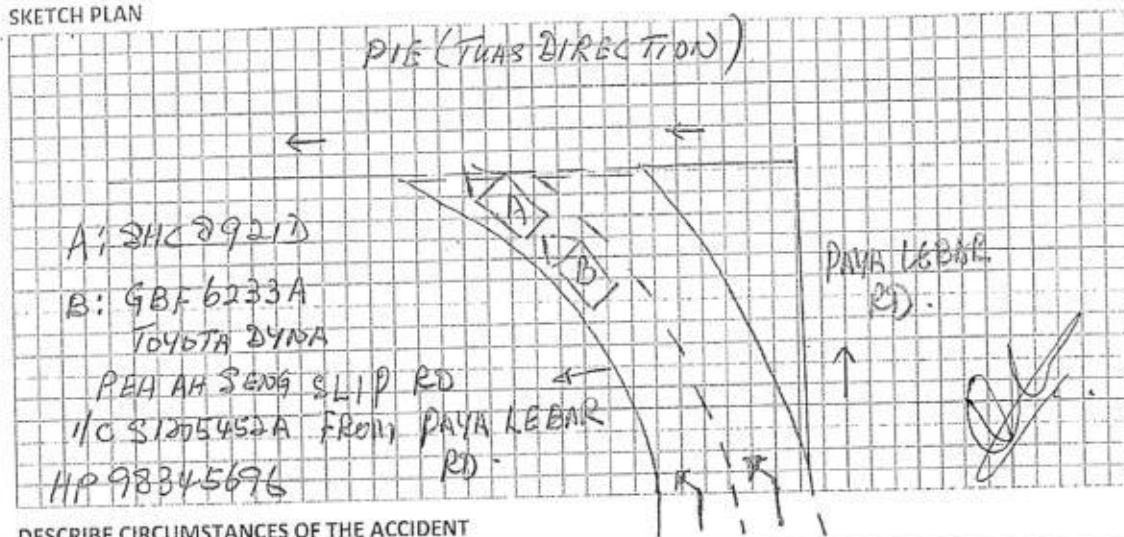
OMFAC TRANSPORTATION PTE LTD  
CO REG NO 19270321R

Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CO REG NO 192203351R

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.:

## Describe Circumstances of the Incident

On 29 Dec 2017 at about 11:35 hrs I was driving along a Slip Rd from Paya Lebar Rd heading towards PIE/Tuas direction.

As I approached the give way lines I slowed down and stopped at the give way lines to give way to the traffic from my right.

Suddenly a few seconds later a Toyota Dyna lorry GBF6233A came from behind collided onto the Rear Portion of my taxi.

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

Enclosed is a video footage and scene photos to support my claims.

## Declaration

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

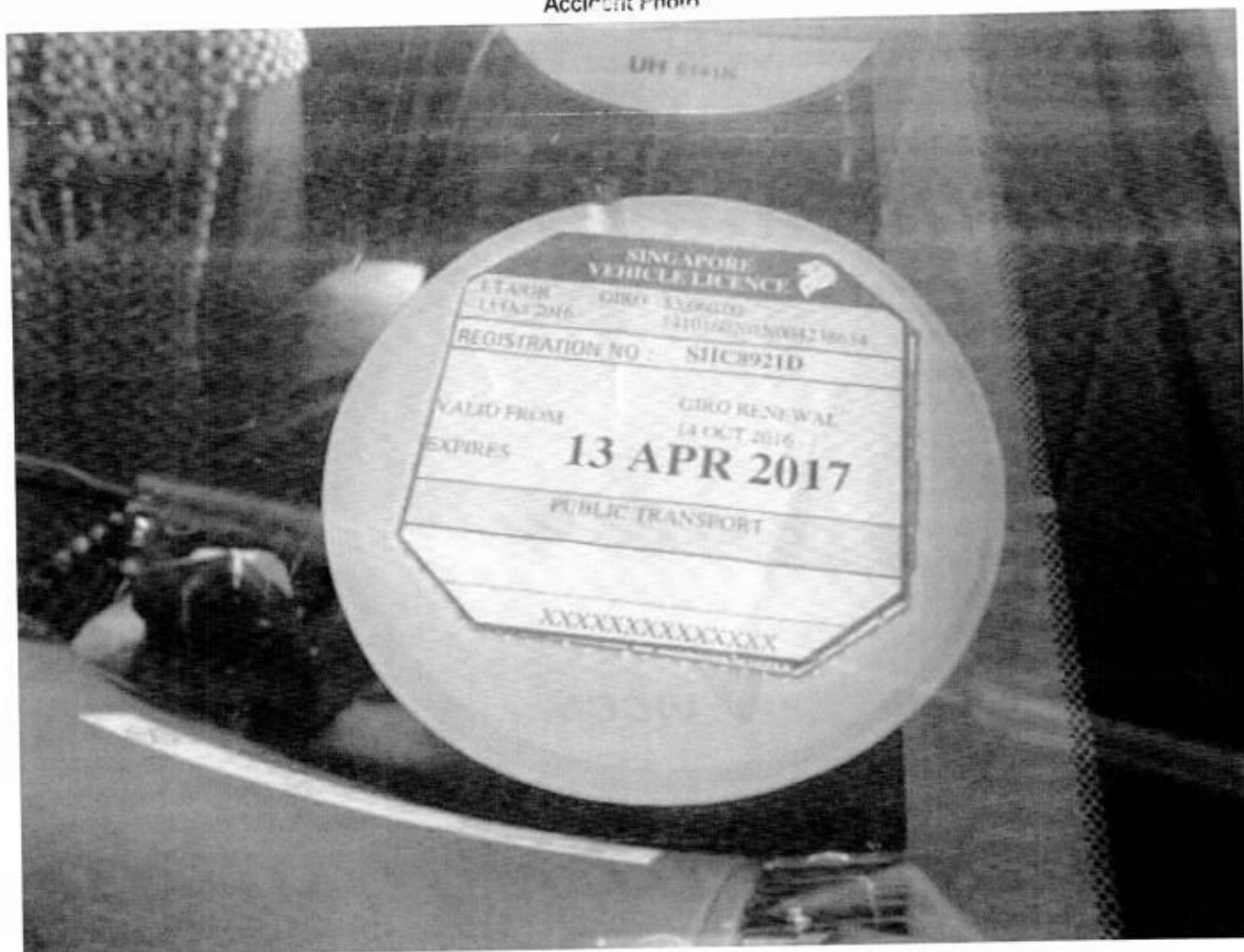
LOGISTICS TRANSPORTATION PTE LTD  
CO. REG NO 19270324B

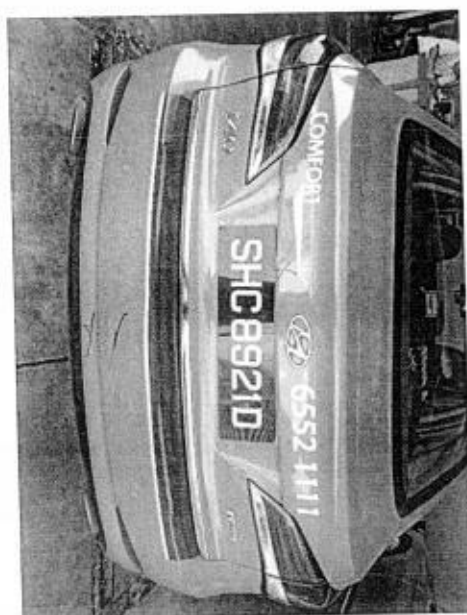
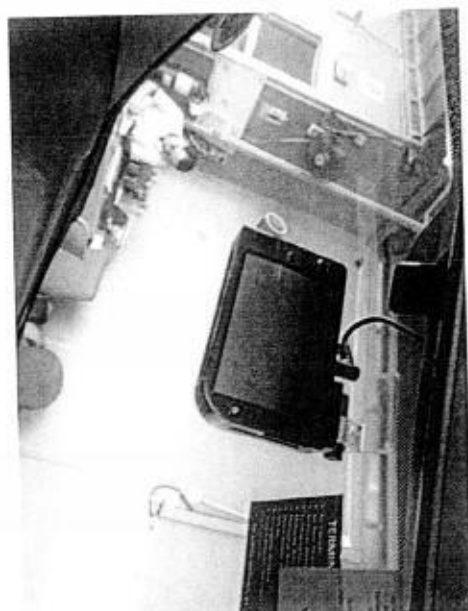
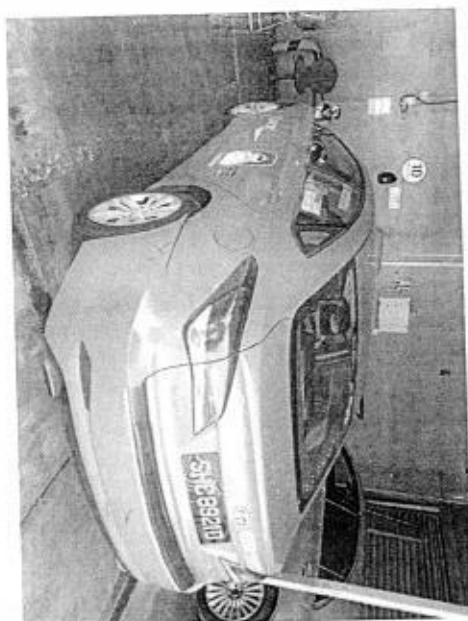
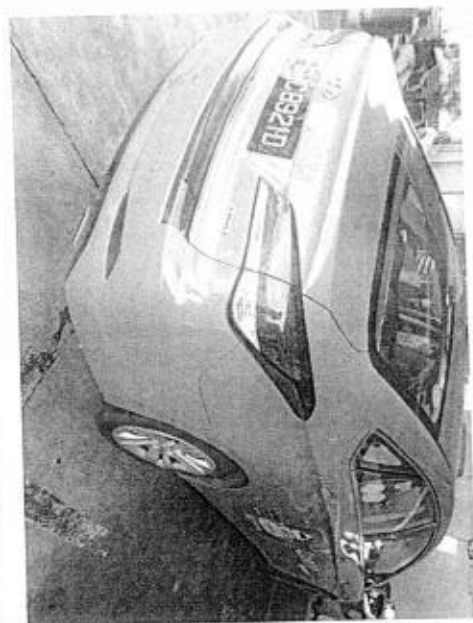
Policyholder's Signature/Date &  
Time

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

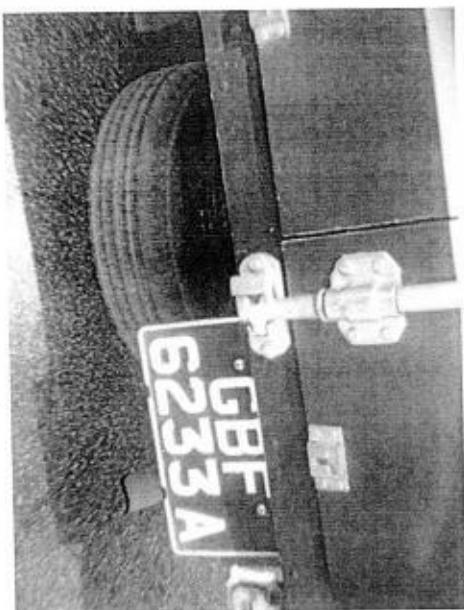
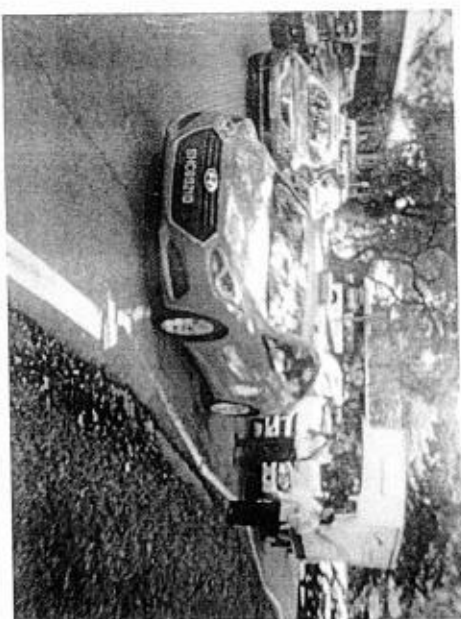
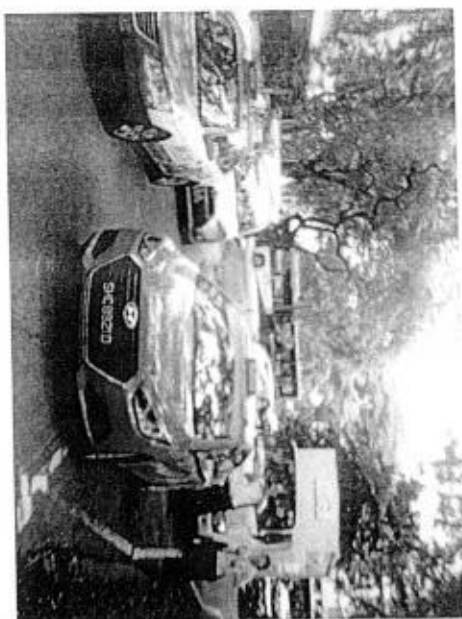
Witnessed by Reporting  
Centre Personnel

### Accident Photo









# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305102257  
Date : 04/01/18

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

## FINALIZATION FORM

To : LKK  
Attn : KALVIN  
Vehicle Reg No. : SHC8921D

Fax :

Date of Accident : 29/12/2017

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

1. The repair job shall bill to: TOKIO --- GBF6233A  
###
2. The finalized amount shall be:
 

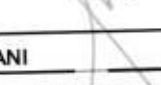
(a) Spare Parts after List discount		\$983.54
(b) Labour Charges	###	\$590.00
<b>Total for Part-By-Part Repair Cost</b>		<b>\$1,573.54</b>
(c.) Lumpsum Repair (if applicable)		
Total for Lumpsum repair cost after Less: 20%		
<b>Final Lumpsum Repair cost</b>		


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 :   
Name : JUMANI  
Tel : 6214 8315  
Fax : 65468156

Signature :   
Name : Kalvin  
Date : 5/1/18

### 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		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

## COMFORTDELGRO ENGINEERING PTE LTD

Date: 04.01.2018

Time: 10:11:52

## REPAIR ESTIMATE

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 : 305102257  
REGN NO : SHC8921D  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 14.04.2016  
DATE/TIME IN : 29.12.2017 15:20  
ACCIDENT DATE : 29.12.2017

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0103-0787-G	I40VC EMBLEM-I40	1	41.00	20.00	32.80
0002 04-01-0103-0786-G	I40VC EMBLEM-CRDI	1	41.00	20.00	32.80
0003 04-01-0103-0800-G	I40VC SYMBOL MARK-TRUNK L	1	27.20	20.00	21.76
0004 04-01-0103-0579-G	I40VC COVER ASSY-RR BUMPE	1	603.60	20.00	482.88
0005 04-01-0101-0111-G	HYUNDAI BUMPER COVER CLIP	10 L	22.00	20.00	17.60
0006 04-01-0103-0738-G	I40VC COVER-RR BUMPER LWR	1	225.00	20.00	180.00
0007 09-01-9999-0068-A	HYUNDAI REVERSE SENSOR AS	1 N	135.70	2.00-	135.70
0008 04-01-0103-1150-A	I40VC PROTECTOR MAT	1 N	50.00	0.20	50.00
0009 28-01-0103-0005-A	(I40/SONATA)REAR BOOT LOG	1 N	15.00	0.02-	15.00
0010 28-01-0103-0006-A	(I40/SONATA)REAR BOOT TEL	1 N	15.00	0.00	15.00
SUB-TOTAL :					983.54

## JOB NATURE

0000 L PANEL BEATING- REAR 200.00



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

JOB NO : 305102257  
REGN NO : SHC8921D  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 14.04.2016  
DATE/TIME IN : 29.12.2017 15:20  
ACCIDENT DATE : 29.12.2017

JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0001 23-502	SPRAYPAINT ON AFFECTED AREA			360.00		
0002 L	REMOVE/REFIX REVERSE SENSOR			20.00		
0003 L	MERIMEN FEE	10.00				
SUB-TOTAL :						590.00
TOTAL :						1,573.54

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
\_\_\_\_\_  
SURVEYOR NAME & SIGNATURE  
DATE :

*Han Kok*

**ComfortDelGro Engineering Pte Ltd** (Co. Reg No: 199506048W)  
 59 Loyang Drive  
 Singapore 508969  
 Tel: 6214 8300

**TP INSURER:** **Tokio Marine Insurance Singapore Ltd (HQ)**  
**CTPL**

*Jumani*

Singapore

#### PARTICULARS OF CLAIM

Claim Type: THIRD PARTY	Ref. No:	
Policy No:	Date of Loss:	29/12/2017
Vehicle Reg. SHC8921D	Driveable?	YES
No.:		
Party At UNKNOWN		
Fault:		
Make/Model: HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	14/04/2016
Vehicle BLUE	Gen Condition:	GOOD
Colour:		
Engine No: D4FDFU609888	Chassis No:	KMHLB41UMGU087423
Odometer: 0 KM		
Paint Type:		
List Item 20.00 %		
Discount:		
Total Loss? <b>NO</b>		
Est. 5		
Duration of Repair (day)		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)	

COST OF CLAIMS	Amount
Parts	2,254.54
Miscellaneous Items	10.00
Labour	970.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (S\$)</b>	<b>3,234.54</b>
<b>+ GST 7.00% (S\$)</b>	<b>226.42</b>
<b>Nett Amount (S\$)</b>	<b>3,460.96</b>

**This claim is handled by: JUMANI MASUDIN**

Generated using *Merimen e-Claims Internet Estimation & Adjusting System*

**REPAIR DETAILS****Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 29 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:** ComfortDelGro Engineering Pte Ltd/SHC8921D/29/12/2017 18:05**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		*BOOTLID H EMBLEM — <i>nee</i>	20.00	0.00	*27.20 FL
2	1		*BOOTLID CRDI EMBLEM — <i>nee</i>	20.00	0.00	*41.00 FL
3	1		*BOOTLID I40 EMBLEM — <i>nee</i>	20.00	0.00	*41.00 FL
4	1		*BOOTLID MOULDING X <i>nee</i>	20.00	0.00	*85.00 FL
5	1		*BOOTLID LOWER GARNISH X <i>nee</i>	20.00	0.00	*398.00 FL
6	1		*REAR BUMPER — <i>nee</i>	20.00	0.00	*603.60 FL
7	1		*REAR BUMPER REINFORCEMENT X <i>nee</i>	20.00	0.00	*504.35 FL
8	1		*REAR BUMPER REINFORCEMENT BRACKET LH X <i>nee</i>	20.00	0.00	*180.00 FL
9	1		*REAR BUMPER REINFORCEMENT BRACKET RH X <i>nee</i>	20.00	0.00	*180.00 FL
10	1		*REAR BUMPER SIDE BRACKET RH X <i>nee</i>	20.00	0.00	*49.00 FL
11	1		*REAR BUMPER SIDE BRACKET LH X <i>nee</i>	20.00	0.00	*49.00 FL
12	10		*REAR BUMPER CLIPS — <i>nee</i>	20.00	0.00	*22.00 FL
13	1		*REAR BUMPER SPONGE X <i>nee</i>	20.00	0.00	*143.40 FL
14	1		*REAR BUMPER UNDER COVER — <i>nee</i>	20.00	0.00	*225.00 FL
15	1		*BOOTLID COMFORT LOGO & TEL NO. STICKER — <i>nee</i>	0.00	0.00	*30.00 F
16	1		*REVERSE SENSOR — <i>nee</i>	0.00	0.00	*135.70 F
17	1		*REAR BUMPER MAT — <i>nee</i>	0.00	0.00	*50.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	2,764.25
- List Item Discount on L Items (S\$)	509.71
<b>Total Parts (S\$)</b>	<b>2,254.54</b>

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Generated using Merimen e-Claims IEAS

## Estimates on Miscellaneous Items

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

## Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING	New	200
2	SPRAYPAINT	New	400.00
3	WIRING	New	400.00 360
4	REMOVE, REFIX REVERSE SENSOR	New	50.00 X 2
Gross Labour Cost (\$\$)			1200.00 20

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Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Kalvin (11/11/17)

2/1/18 10.50h

2 days.

VIP

Before Paint 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 surveys on a "no prejudice" basis
- No illegal parts to be used
- Supply of parts is subject to final approval

Acknowledged by Repairer:

Signature:

Date:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	29 Dec 2017 17:58 <a href="#">Sendback Est</a>	29 Dec 2017 18:05 <b>S\$3,234.54</b>	02 Jan 2018 11:50 <a href="#">Edit Adj Rpt</a>	<b>S\$1,573.54</b> <a href="#">Edit Estimates</a>	<b>S\$1,573.54</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

<b>Main</b>	<b>Reference</b>	<b>Claim Details</b>	<b>Documents</b>	<a href="#">Show All</a>
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**CLAIM SUBFOLDER DETAILS**

Insured:	CTPL, Co. Reg. No.: 199303821R		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SHC8921D	Date of Loss:	29/12/2017 11:00 - :59
Claim Type:	TP / M1800013	Policy/Cover Note No.:	MI000373 (Comprehensive) Coverage: 13/01/2017 - 12/01/2018
Vehicle Reg. No. (Insured):	GBF6233A	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 <b>Dillen Senthilan so Selvarajoo</b> ]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by <b>KALVIN ANG WEI KUN</b> ] ... [Final Rpt due 11/01/2018]		

**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.									

## Claim Documents

SHC8921D (M1800013)  
[GBF6233A]  
TP  
CTPL  
Dec 29 2017 11:00AM  
[CTPL]  
ComfortDelGro Engineering Pte Ltd

<a href="#">Upload Documents</a>   <a href="#">Upload Photos</a>   <a href="#">Compose New Letter</a>			<b>View</b> <a href="#">View in Browser</a>	
<b>Assessment Reports</b>			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	<b>Thumbnail</b>	<b>Print</b>
1	29/12/17 18:05	Repairer Estimates	Load HTM	
<b>Photos/Images</b>			3 per page	<input checked="" type="checkbox"/>
No	Relabel/ Reorder	LKK Auto Consultants Pte Ltd (HQ)	<b>Thumbnail</b>	<b>Print</b>
1	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
2	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
3	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
4	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
5	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
6	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
7	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
8	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
9	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
10	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
11	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
12	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
13	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
14	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
15	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
16	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
17	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
18	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
19	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
20	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
21	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
22	03/01/18 08:36	General View	Load JPG	<input checked="" type="checkbox"/>
23	03/01/18 17:04	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
24	03/01/18 17:04	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
<b>Documentation</b>			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	<b>Thumbnail</b>	<b>Print</b>
1	29/12/17 18:05	E-filed GIA report	Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	<a href="#">Reset</a>	<a href="#">Save</a>	<a href="#">Print</a>
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There are no document checklists configured.

**Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**

**Show Remarks To:** ☐ Repairer ☐ Handling Insurer  
Note: Remarks are private unless you show it to other parties.

# 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/TM18000055/K1TBE2  
Date: 15/01/2018

### REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd	Policy No: MI000373
Claimant Vehicle No: SHC8921D	Insured Vehicle No: GBF6233A
Date of Loss: 29/12/2017	Nature of Claim: TP Claim No: M1800013

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHC8921D		
Make & Model:	HYUNDAI I40, 1.7 D CRDi (A)	Engine No:	D4DFDU609888
Reg. Date:	14/04/2016 (Man. Year: 2016)	Chassis No:	KMHLB41UMGU087423
Colour:	Blue	Odometer:	260401 km
Engine Capacity:	1685 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:	205/60 R16	Rear Tyre Size:	205/60 R16
Front Left Side:	Hankook 7 mm	Rear Left Side:	Hankook 7 mm
Front Right Side:	Hankook 7 mm	Rear Right Side:	Hankook 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,254.54	983.54	1,271.00	56.38
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	970.00	580.00	390.00	40.21
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>3,234.54</b>	<b>1,573.54</b>	<b>1,661.00</b>	<b>51.35</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>226.42</b>	<b>110.15</b>	<b>116.27</b>	<b>51.35</b>
<b>Nett Amount (S\$)</b>	<b>3,460.96</b>	<b>1,683.69</b>	<b>1,777.27</b>	<b>51.35</b>

### INSPECTION

Date of Assignment:	02/01/2018	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	02/01/2018	Inspected At:	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

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 15 Jan 2018)
<b>Parts:</b>	143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHC8921D)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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 H EMBLEM	Necessary	27.20 FL	*27.20 FL
2	1		*BOOTLID CRDI EMBLEM	Necessary	41.00 FL	*41.00 FL
3	1		*BOOTLID I40 EMBLEM	Necessary	41.00 FL	*41.00 FL
4	1		*BOOTLID MOULDING	Serviceable	85.00 FL	*- FL
5	1		*BOOTLID LOWER GARNISH	Serviceable	398.00 FL	*- FL
6	1		*REAR BUMPER	Deformed	603.60 FL	*603.60 FL
7	1		*REAR BUMPER REINFORCEMENT	Serviceable	504.35 FL	*- FL
8	1		*REAR BUMPER REINFORCEMENT BRACKET LH	Serviceable	180.00 FL	*- FL
9	1		*REAR BUMPER REINFORCEMENT BRACKET RH	Serviceable	180.00 FL	*- FL
10	1		*REAR BUMPER SIDE BRACKET RH	Serviceable	49.00 FL	*- FL
11	1		*REAR BUMPER SIDE BRACKET LH	Serviceable	49.00 FL	*- FL
12	10		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
13	1		*REAR BUMPER SPONGE	Serviceable	143.40 FL	*- FL
14	1		*REAR BUMPER UNDER COVER	Cut	225.00 FL	*225.00 FL
15	1		*BOOTLID COMFORT LOGO & TEL NO.STICKER	Necessary	30.00 F	*30.00 F
16	1		*REVERSE SENSOR	Shorted	135.70 F	*135.70 F
17	1		*REAR BUMPER MAT	Necessary	50.00 F	*50.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	2,764.25	1,175.50
- List Item Discount on L Items 20.00/20.00% (S\$)	509.71	191.96
Total Parts (S\$)	2,254.54	983.54

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

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

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	PANEL BEATING	New	400.00	200.00
2	SPRAYPAINT	New	400.00	360.00
3	WIRING	New	50.00	0.00
4	RENMOVE,REFIX REVERSE SENSOR	New	120.00	20.00
Gross Labour Cost (S\$)			<b>970.00</b>	<b>580.00</b>

Report was unsubmitted during this print-out.
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&lt; END OF ESTIMATES &gt;