

201801

ASS' REC. BY

REF: CS/GA118000638/K1qd3n2

Case No.

By: Kalvin

ASSIGNMENT (Office)

From (Person): Rachel Tan

# GAI

Date/Time: 10/01/2018 @ 10:52am

Estimated Cost:

Estimate

OD / ☒ WS / TP RES / OD RES / EVA / INV / NV / CS

To Inspect Vehicle No:

SHD 49064

Insured:

GY 4401K

at Workshop info:

Comfort Delgro

Tel:

of

59 Luyang Drive

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

DCA 09/01/18

(Client's Record)

CA / REV / REP. / REV 24 HRS wp

MOD: Endorsement

Date/Time: 11:31am @ 10/01/18

Person Contacted

jumani

Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction
	( <input checked="" type="checkbox"/> ) <u>Estimate</u>
	<u>SHD 49064 -x</u>
	<u>GY 4401K -x</u>
<u>11/01/18 @ 4:18pm</u>	<u>revised to Rachel Tan by email.</u>

Surrey

Kalin

REF:

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No. \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

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

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? Yes or No

Est. Repairs: 7 days Res: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Date / Time Action / Instruction

16/1/18 6.40am P/P \$505/20% (Red 81154.40, 70%)

GA2

RECEIVED 17 JAN 2010

Date/Time File Pass to? ☐ : Preli. Report12/1/18 transfer ☐ : Final Report

Date/Time File Return to?

Days Of Repair: 2Resurvey No. of Trip: 1

Survey Fee

Transportation

Report Format: TPLump Sum / I.B 1: 15 505

Add Fee:

☐ Site Insp \$  
☐ Interview \$  
☐ Testimony \$  
☐ Wheel-end \$

250

SHD 49064

12 Mar 2014

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

Truck / Trailer or

Make

Hyundai 240

cc 1685

Colour

Blue

A/C Insured / Std / NI / NA

Sp Reading

459132

T Radio Insured / Std / NI / NA

Eng/No

C/No

1CM HCB 414AE4 0527X0

Gen Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / Rim or

Tyre Size

F:

205/60 R16

R:

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

TOYO / YOKO or

Hsd/Hd

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A

9/1/18

D.O.A

10/1/18

Survey held at

(P/S) (1/18)

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

N/S P/S

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




# 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			
GREAT AMERICAN INSURANCE COMPANY		Ref : CS/GAI18000638/K1qd3	
3 TEMASEK AVENUE #16-01 CENTENNIAL TOWER SINGAPORE 039190		Date : 11-01-2018	
		Code : GAI	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	GY 4401K	Veh. Inspected	SHD 4906U
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	RACHEL TAN	Assign Date	11/01/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	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	09/01/2018	Inspection Date	10/01/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: GY 4401K

Date: 11<sup>th</sup> January 2018

Our Ref: CS/GAI18000638/K1qd3

The Motor Claims Department  
Great American Insurance Company

Attn: Rachel

Dear Sirs/Mdm

**PRELIMINARY ADVICE OF VEHICLE NO. SHD 4906U**

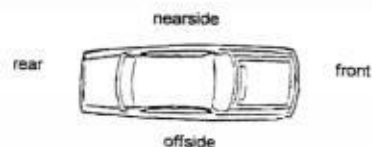
We thank you for the instruction on 10/01/2018.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 10/01/2018 at the premises of M/s COMFORTDELGRO and have the following to report:-

Workshop Estimate Amount	: S\$ <u>1,659.40</u>
Revised Estimate Amount	: S\$ <u>505.00</u>
"Check" Items Amount	: S\$ <u>-</u>
Market Value	: S\$ <u>-</u>
Salvage Value	: S\$ <u>-</u>
Nett Value	: S\$ <u>-</u>

Description of Damage:

The vehicle sustained damages at the n/s body.



Comments/ Present Status:

Damages consistent.

We have NOT authorise repair.

Yours faithfully

Kalvin Ang  
Automotive Assessor

# Survey Department Check List (Case Handler)

Reference No.: C9/KA118000638/K19d3  
Policy Type: OD / TP / RES / TL / EVA

SHD 49064

Case Handler

Typist

Admin ( Nivitha ): Case handler to make sure all Information created by the assignment team are ACCURATE.

## (1) Office Assign Form

- C Reference No.
- C Customer Code
- N Assign From
- C Assign Date
- C Veh No (Inspected)
- C Veh No (Insured)
- C D.O.A
- C Policy No
- C Claim No
- C Insurance Authorisation (CA /REV/REP)
- C Report Type
- C Weekend Charges
- N Survey held at/Repairer
- C Excess

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

Surveyor ( Kelvin ): Case handler to make sure the surveyor completed all required information.

## (1) Assignment Form

- C Vehicle No
- C Regn Month/Year
- N Vehicle Type
- N Make & Model
- C Engine Capacity. (C.C)
- N Colour
- C Odometer. (Sp.Reading)
- C Chassis No
- N General Condition
- N Steering
- N Brake
- N Modification (Modi)
- C Tyre Size
- N Tyre Make
- C Tyre Balance
- C Date of Inspection
- N Survey held
- N Des.of Damages

✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

## (2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

✓		
---	--	--

## (3) Workshop Estimate/Assignment Form

- N ALL Parts condition
- C Market Value for OD cases
- C Estimate Repair Cost for PRI (RSI, TMI, MSIG)
- C Days of repair
- C Finalised Amount
- C Re-inspection Cases to Finalize within 5 Days

✓		
✓		
✓		

## (4) System - (Views/Merimen)

- C Resurvey photo Uploaded

✓		
---	--	--

Check By:

Chn 17/1/18

Case Handler

Date

\*C: Critical \*N: Non-Critical

21/05/2014

## Catherine Chong (LKK Auto)

---

**From:** Shiau Chan (LKKAuto) <siewsc@lkkauto.com>  
**Sent:** Wednesday, 10 January, 2018 10:52 AM  
**To:** assignments  
**Subject:** FW: DOA 09.01.18 SHD4906U with your insured GY4401K- GAIG  
**Attachments:** img-109150813-0001.pdf

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Tan, Rachel [<mailto:Rachel.Tan@sg.gaig.com>]  
**Sent:** Tuesday, 9 January, 2018 3:48 PM  
**To:** [jumanibm@cdge.com.sg](mailto:jumanibm@cdge.com.sg)  
**Cc:** SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Subject:** RE: DOA 09.01.18 SHD4906U with your insured GY4401K- GAIG

Without prejudice

Dear Sir

We acknowledge receipt of the attached PRI request, LKK will assist us on the survey.

Dear LKK

Please accept assignment to conduct survey on a without prejudice basis. Our insured has not reported accident.

Regards,

**Rachel Tan**, Executive | P. +65 6804 7846 | [Rachel.tan@sg.gaig.com](mailto:Rachel.tan@sg.gaig.com)



**Claims** | 3 Temasek Avenue #16-01 Centennial Tower Singapore 039190

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Moody's  
A1 (Good)  
Awarded June 15, 2013

Standard & Poor's  
A+ (Strong)  
Awarded March 2, 2016

For more information on our financial ratings, visit [GAIG.com/FinancialStrength](http://GAIG.com/FinancialStrength).

**From:** Juman Bin Masudin [<mailto:jumanibm@cdge.com.sg>]  
**Sent:** Tuesday, January 09, 2018 3:09 PM  
**To:** Ngian, Kelvyna <[Kelvyna.Ngian@sg.gaig.com](mailto:Kelvyna.Ngian@sg.gaig.com)>

Cc: General Claims <GeneralClaims@sg.gaig.com>

Subject: Fw: DOA 09.01.18 SHD4906U with your insured GY 4401K- GAIG

TO

Officer in charge

see attached

Best Regards

Jumani Masudin

Taxi Crash Repair / ComfortDelgro Engineering Pte Ltd

Tel. 6214-8315 / Fax. 6546-8156

----- Forwarded by Jumani Bin Masudin/cdge/delgnotes on 09/01/2018 03:06 PM -----

From: "ApeosPort-IV C5570" <sbs-singnalling@sbstransit.com.sg>  
To: jumaniibm@cdge.com.sg  
Date: 09/01/2018 03:05 PM  
Subject: Scan Data from CDG\_LO\_AW\_A5570

---

Number of Images: 7

Attachment File Type: PDF

Device Name: ApeosPort-IV C5570

Device Location:

---

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SBS Transit Ltd [Registration No. 199206653M]

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only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

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ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

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## Shiau Chan (LKKAUTO)

---

**From:** Shiau Chan (LKKAUTO)  
**Sent:** Thursday, 11 January, 2018 4:18 PM  
**To:** 'Tan, Rachel'  
**Cc:** SUR; assignments  
**Subject:** RE: DOA 09.01.18 SHD4906U with your insured GY4401K- GAIG  
**Attachments:** CSGAI18000638K1qd3.pdf

Dear Rachel,

Enclosed herewith preliminary advice of SHD 4906U.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Admin-D (LKKAUTO)  
**Sent:** Wednesday, 10 January, 2018 1:17 PM  
**To:** 'Tan, Rachel' <[Rachel.Tan@sg.gaig.com](mailto:Rachel.Tan@sg.gaig.com)>  
**Cc:** SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>; assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>  
**Subject:** RE: DOA 09.01.18 SHD4906U with your insured GY4401K- GAIG

Dear Rachel,

Thank you for the assignment.

Best Regards,

**Catherine Chong** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6741-8434 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Tan, Rachel [<mailto:Rachel.Tan@sg.gaig.com>]  
**Sent:** Tuesday, 9 January, 2018 3:48 PM  
**To:** [jumanibm@cdge.com.sg](mailto:jumanibm@cdge.com.sg)  
**Cc:** SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Subject:** RE: DOA 09.01.18 SHD4906U with your insured GY4401K- GAIG

Without prejudice

Dear Sir

We acknowledge receipt of the attached PRI request, LKK will assist us on the survey.

Dear LKK

Please accept assignment to conduct survey on a without prejudice basis. Our insured has not reported accident.

## 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	09/01/2018 14:34
Date Of Accident	09/01/2018 12:10
Exact Location Of Accident	CAR PARK BEHIND BLK 620 OFF HOUGANG AVE 8
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4906U
<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	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

### Driver

Name of Driver	WONG CHYNG SING
NRIC No	S1590028H
Date Of Birth	22/12/1963
Occupation	OUTDOOR
Date Of Driving Pass	21/12/1982
Driving Experience	35 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	919 05-453 HOUGANG AVENUE 4
Postcode	530919
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	COLLIDED INTO PARKED VEHICLE
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)	0

#### Details of Police Action

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

#### Circumstances of Accident

SEE ATTACH.

#### Attachment(s)

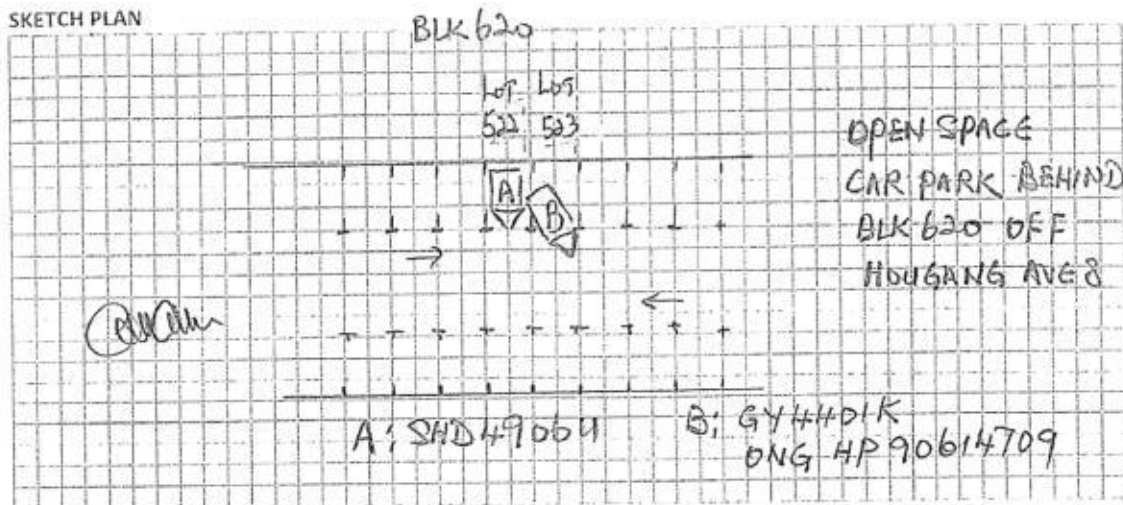
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY4401K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ONG
NRIC/Passport Number	
Contact Number	90614709
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	NO DAMAGE
No. Of Passenger (Including Driver)	

# Sketch Plan Pg. 1

## 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. 199203821R

Policyholder's Signature  
Date & Time:

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

09/01/18

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

STRAC Sketch Plan Form\_V2

### Sketch Plan Fig. 2

Describe Circumstances of the Accident

On 09 Jan 2018 at about 12:10 hrs I parked my taxi with the front of my taxi facing outwards inside Lot 522 behind Blk 620 off Hougang Ave 8. Shortly after I stepped out from my taxi and walked to the side of my taxi to clean and wipe my taxi. Suddenly I heard a banging sound coming from the left hand side front door of my taxi. I looked towards the left and saw the lorry GY4401K while in the midst of reversing, the rear right corner of the lorry hit the left front door including the left hand side wing mirror casing of my parked taxi thus damaging them in the process.

## Declaration

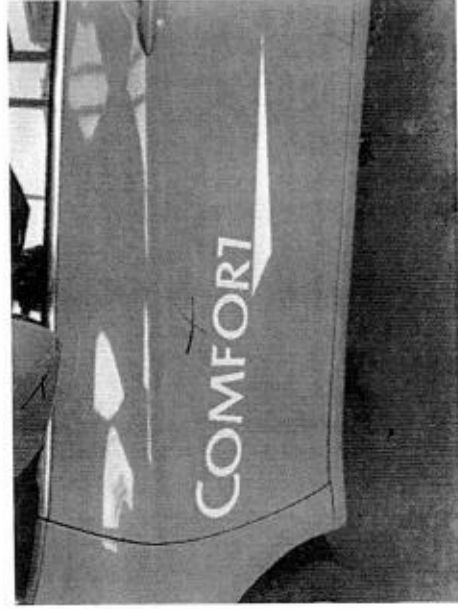
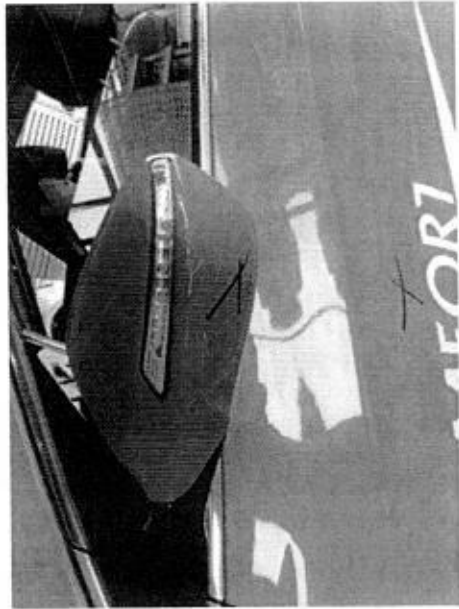
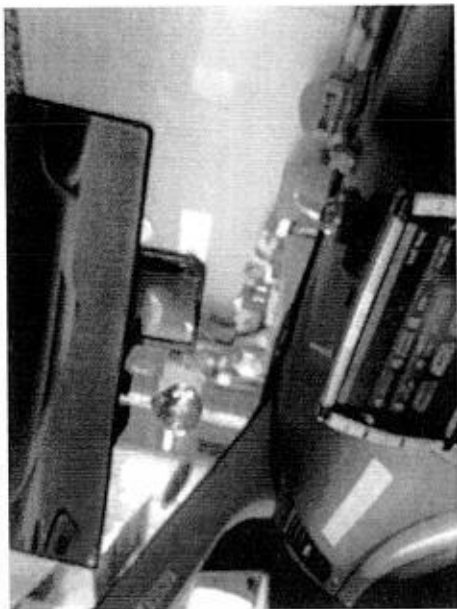
I/We declare the foregoing particulars are true in every respect.

PORT TRANSPORTATION PTE LTD  
CO REG NO 189393821R

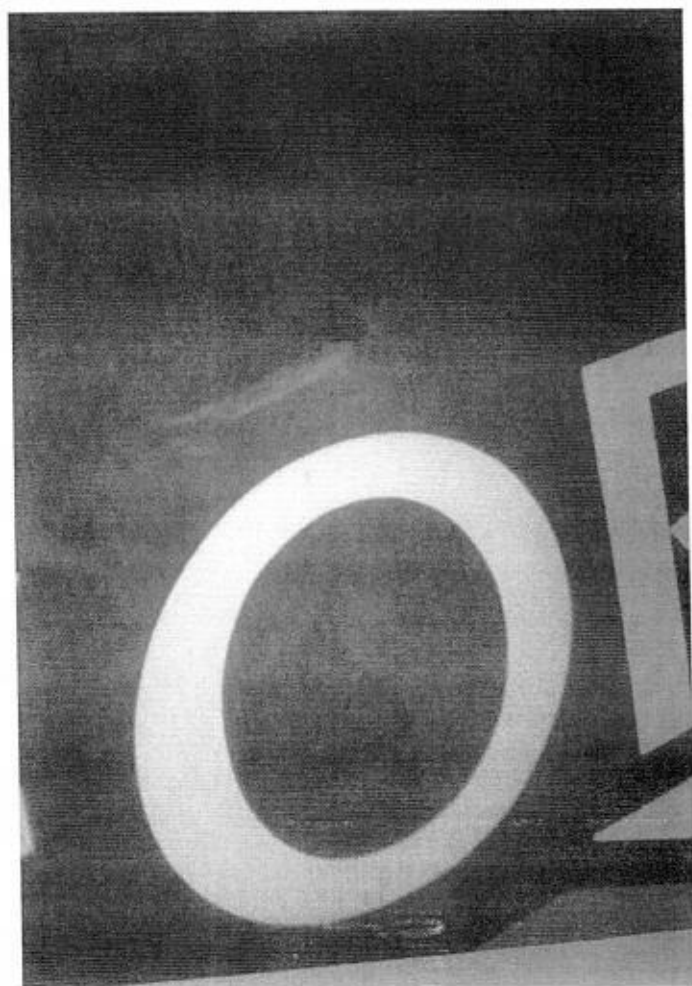
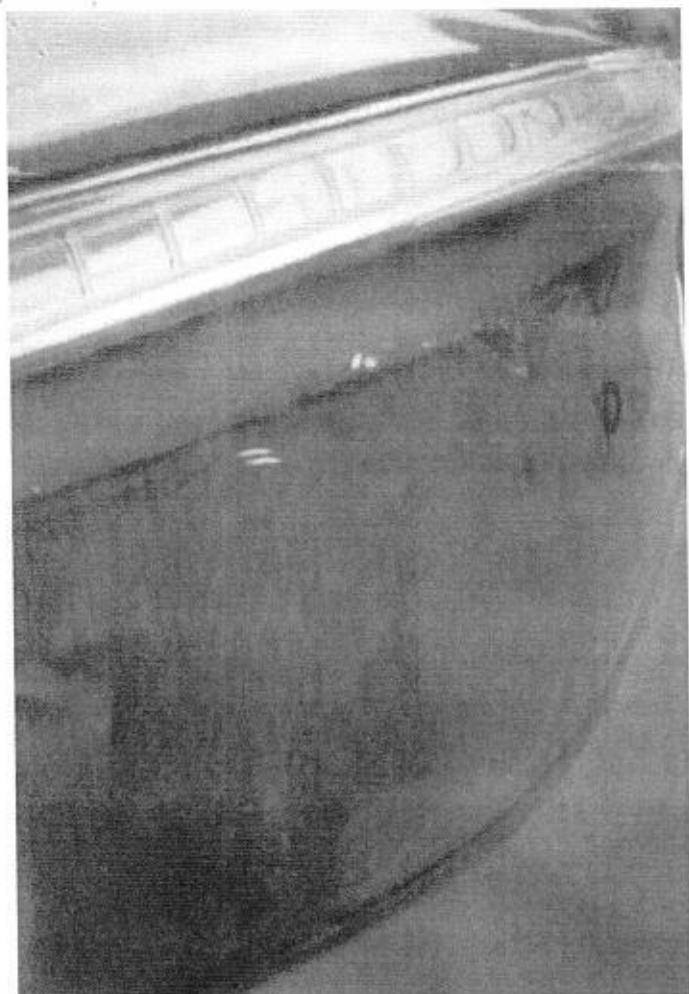
Policyholder's Signature/Date &  
Time

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

09/01/18   
Witnessed by Reporting  
Centre Personnel









RE: DOA 09.01.18 SHD4906U with your insured GY4401K- GAIG

Tan, Rachel

to:

jumanibm@cdge.com.sg

09/01/2018 03:48 PM

Cc:

SUR

Hide Details

From: "Tan, Rachel" <Rachel.Tan@sg.gaig.com>

To: "jumanibm@cdge.com.sg" <jumanibm@cdge.com.sg>

Cc: SUR <sur@lkkauto.com>

### 3 Attachments



image001.jpg



image002.jpg



img-109150813-0001.pdf

Without prejudice

Dear Sir

We acknowledge receipt of the attached PRI request, LKK will assist us on the survey.

Dear LKK

Please accept assignment to conduct survey on a without prejudice basis. Our insured has not reported accident.

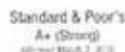
Regards,

Rachel Tan, Executive | P. +65 6804 7846 | Rachel.tan@sg.gaig.com



Claims | 3 Temasek Avenue #16-01 Centennial Tower Singapore 039190

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For more information on our financial ratings, visit [GAIG.com/FinancialStrength](http://GAIG.com/FinancialStrength).

From: Jumani Bin Masudin [mailto:jumanibm@cdge.com.sg]

Sent: Tuesday, January 09, 2018 3:09 PM

To: Ngian, Kelvyna <Kelvyna.Ngian@sg.gaig.com>

Cc: General Claims <GeneralClaims@sg.gaig.com>

Subject: Fw: DOA 09.01.18 SHD4906U with your insured GY 4401K- GAIG

TO

Officer in charge



Team: ARC Repair TP(CLS0)1

**JOB CARD** Sales Order:

JC NO.305105424

COMER  
IS COMFORT TRANSPORTATION PTE LTD  
OMER NO 7010045  
RESS 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755

REGN NO: SHD4906U	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 09.01.2018 13:15
YR OF MANU 12.03.2014	TARGET DATE
CHASSIS CODE KMHLB41UMEU052740	COMPLETION DATE/TIME:

(R)  
(P)

JUNT CARD NO.

JOB DESCRIPTION

ccident Date: 09.01.2018  
ATURE: 3P 09.01.2018

/NO LABOR CODE DESCRIPTION

CKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Redemption Slip

Exit Pass

No.: SHD4906U JU GAIG

Vehicle No.: SHD4906U

Signature/Date

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 NO : SHD 4906U

DATE 9/1/2018 14:48

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Door Mirror (LH) X 1 pair			\$ 980.50
	Front Door (LH) X 1 pair			\$ 980.50
	SUB TOTAL			\$ 196.10
	LESS 20%			\$ 784.40
	DISCOUNTED TOTAL			
	Front Door Comfort Logo (LH) — ne			\$ 75.00
	Labour Charge			202
	Panel Beating			\$ 350.00
	Spray Painting Charge			\$ 350.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	TOTAL LABOUR			\$ 800.00
	ESTIMATE TOTAL			\$ 1,659.40

Calvin LKK  
 10/1/18 1100-4  
 2 Pairs  
 45  
 After Repair photo

LKK Auto Care Centre hereby notify  
 the Repairer of the following:  
 • To resolve before any painting  
 • To replace damaged parts and survey  
 • Parts prices are subject to confirmation  
 • Third party survey is on a "Without Prejudice" basis  
 • No legal mode of dispute is allowed  
 • Subsequent items must be surveyed and  
 is subject to final approval of the 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: 15.01.2018

Time: 10:21:09

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 : 305105424  
REGN NO : SHD4906U  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 12.03.2014  
DATE/TIME IN : 09.01.2018 13:15  
ACCIDENT DATE : 09.01.2018

## 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- FRT. 200.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 230.00

SUB-TOTAL : 430.00

TOTAL : 505.00

MVA NAME & SIGNATURE  
DATE :

\_\_\_\_\_  
SURVEYOR NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305105424

Date : 15/01/2018

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508968  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHD4906U

Date of Accident : 09/01/18

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

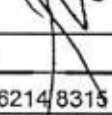
1. The repair job shall bill to: GAIG --- GY 4401K  
###
2. The finalized amount shall be:
  - (a) Spare Parts after List discount \$75.00
  - (b) Labour Charges ### \$430.00
  - Total for Part-By-Part Repair Cost \$505.00**
  - (c) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20%  
**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 :   
Name : JUMANI  
Tel : 6214 8315  
Fax : 6546 8156

Signature :   
Name : KALVIN  
Date : 16/1/18

## 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:




# 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				
GREAT AMERICAN INSURANCE COMPANY		Ref : CS/GAI18000638/K1qd3n2		
3 TEMASEK AVENUE #16-01 CENTENNIAL TOWER SINGAPORE 039190		Date : 18-01-2018		
		Code : GAI		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	GY 4401K	Veh. Inspected	SHD 4906U	
Policy No.		Coverage (\$)	0.00	
Claim No.	GY4401K	Excess (\$)	0.00	
Assign From	RACHEL TAN	Assign Date	10/01/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	KMHLB41UMEU052740	Colour	BLUE	
Odometer	459132	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/60 R16	WEST LAKE	7 mm	
L/H Front Tyre	205/60 R16	WEST LAKE	7 mm	
R/H Rear Tyre	205/60 R16	WEST LAKE	7 mm	
L/H Rear Tyre	205/60 R16	WEST LAKE	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.				
DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	09/01/2018	Inspection Date	10/01/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>2 Working Days</b>		



# 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

Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4906U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	FRONT DOOR MIRROR (LH)	TO REPAIR SEE LABOUR	980.50	-
1	FRONT DOOR (LH)(NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-196.10	-
			784.40	-
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	FRONT DOOR COMFORT LOGO (LH)(SN)	NECESSARY	75.00	75.00
			75.00	75.00
	<b><u>LABOUR</u></b>			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT DOOR MIRROR (LH) AND FRONT DOOR (LH).		350.00	200.00
	SPRAY PAINTING CHARGE.		350.00	230.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	TUFF KOTE.	NOT NECESSARY	50.00	-
			800.00	430.00
	<b>GRAND TOTAL</b>		<b>1,659.40</b>	<b>505.00</b>
	<b>RECOMMENDED COST OF REPAIRS</b>			<b>505.00</b>

Report Ref No. CS/GAI18000638/K1qd3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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