

Survey Department Check List (Case Handler)

Reference No.: CS/ QW18001746/ Klvb
Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

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

(1) Office Assign Form

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

Surveyor (

): 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	✓			
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(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	✓			
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Check By: VERON

Case Handler

3/1/18

Date

*C: Critical *N: Non-Critical

21/05/2014




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			
COMFORT TRANSPORTATION PTE LTD		Ref : CS/QW18001746/K1vb	
383 SIN MING DRIVESINGAPORE 575717		Date : 29-01-2018	
		Code : QW002	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	Veh. Inspected		SHA 7789L
Policy No.	Coverage (\$)		0.00
Claim No.	Excess (\$)		0.00
Assign From	Assign Date		29/01/2018
2. Vehicle Particulars & Condition			
Make & Model	c.c		0
Engine No. HIDDEN	Year of Reg.		
Chassis No.	Colour		
Odometer -	Steering		
Brakes	Modification		
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	25/01/2018	Inspection Date	29/01/2018
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.			

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 GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	25/01/2018 11:07
Date Of Accident	25/01/2018 07:40
Exact Location Of Accident	TPE TWDS PUNGGOL DIRECTION BEFORE LOYANG AVE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA7789L
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	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	MS 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	GOH KIM HUAT DANIEL
NRIC No	S7131714E
Date Of Birth	29/08/1971
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1991
Driving Experience	26 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	YAMAHA-71@HOTMAIL.COM

Address BLK 422 SERANGOON CENTRAL #02-366
 Postcode 550442
 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? YES
 Was any injured conveyed to hospital by ambulance? YES
 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: : MALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 POLICE STATION NAME [OTHER] PASIR RIS N.P.C
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT : T/20180125/2022

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBG3260K
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category TAXI
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name AXA INSURANCE PTE LTD
 Nature Of Damage FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	UNKNOWN
Approximate Age	
Injuries Sustain	CUTS ON THE RIGHT LEG AND CHEST
Injured person in which vehicle?	FBG3260K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

IMPORTANT NOTICE

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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 199303821R

Policyholder's Signature
Date & Time:

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

Lim Ee Soon
CSO

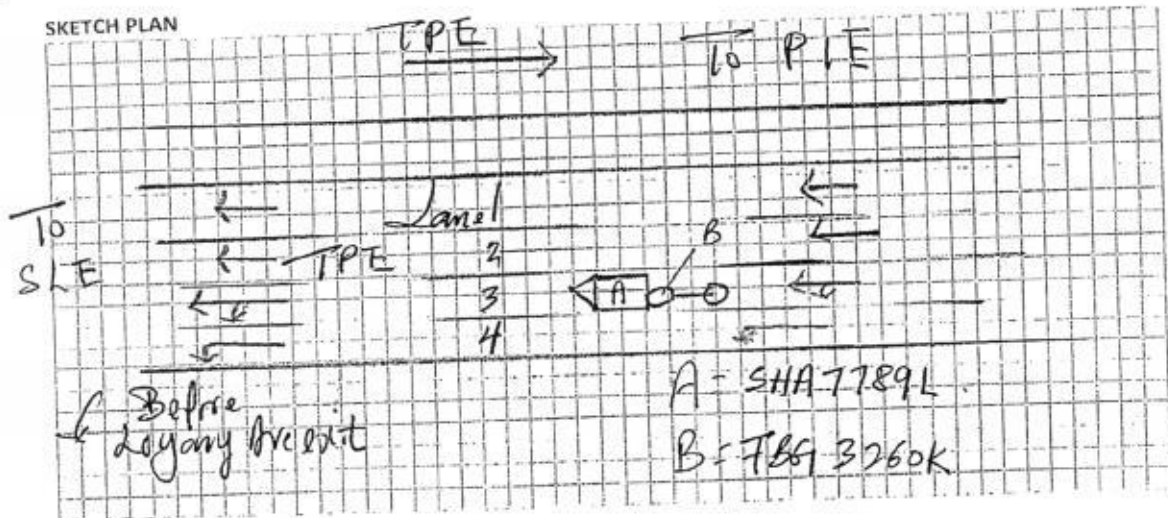
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

\\share02\SketchPlanForm_Y3



Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Police Report attached.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
DU REG NO 199303821R

Policyholder's Signature
Date & Time:

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

Lim Ee Soon
CSC

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

Signature of the Policyholder



**SINGAPORE
POLICE FORCE**



T/20180125/2022

1 of 3

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20180125/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/01/2018 09:24		Vide Report No.: G/20180125/0061		Station Diary No.: 28	
Informant's Particulars					
Name of Informant: GOH KIM HUAT DANIEL			Address: APT BLK 422 SERANGOON CENTRAL #02-366 SINGAPORE 550422		
ID Type / ID No.: NRIC NO / S7131714E			Contact No.: Home/Office:		Mobile: 97473569
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 29/08/1971	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/01/2018 07:40	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 TAMPINES EXPRESSWAY LOYANG AVENUE Bef Exit 2				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG3260K	Motorcycle				Slightly Damaged	0
SHA7789L	Car				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL		



**SINGAPORE
POLICE FORCE**



T/20180125/2022

2 of 3

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20180125/2022

CONTINUATION OF REPORT

Rider		ID No.		NIL	
Name	Unknown Rider		Contact No.	NIL	
Related Vehicle	FBG3260K (Motorcycle)		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Hospital/Clinic	NIL		Date Discharge	NIL	
Date Treatment	NIL		Degree of Injury	NIL	
No. of Days granted Medical Leave	NIL				
Driver		ID No.		S7131714E	
Name	GOH KIM HUAT DANIEL		Contact No.	97473569	
Related Vehicle	SHA7789L (Car)		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Hospital/Clinic	NIL		Date Discharge	NIL	
Date Treatment	NIL		Degree of Injury	NIL	
No. of Days granted Medical Leave	NIL				

Brief Details.

ON the above mentioned date, time and location, I was driving my vehicle, SHA7789L on the 3rd lane of 4 lanes. As it was a slow moving traffic on my lane, I wanted to filter to the extreme left lane. However, before filtering, a motorbike, FBG3260K, came from the back and his front portion of his bike knocked into the rear of my vehicle. After the accident, I called for the ambulance and Traffic Police officers shortly after. I have in-car camera. I have already passed the SD card to the TP officers at scene. The rider was conveyed to the hospital as well. There are dents and scratches on the rear side of my vehicle.



**SINGAPORE
POLICE FORCE**



T/20180125/2022

3 of 3

Report No. T/20180125/2022

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Sgt 1 ISAAC LIM JUN CHENG

[Signature]

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI NG CHWEE THENG
Contact No.: 65476397

Signature Of Informant:

[Signature]

Date/Time:
25/01/2018 09:24

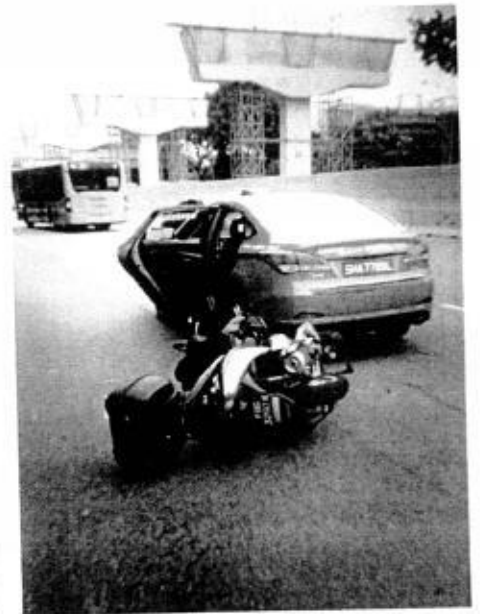
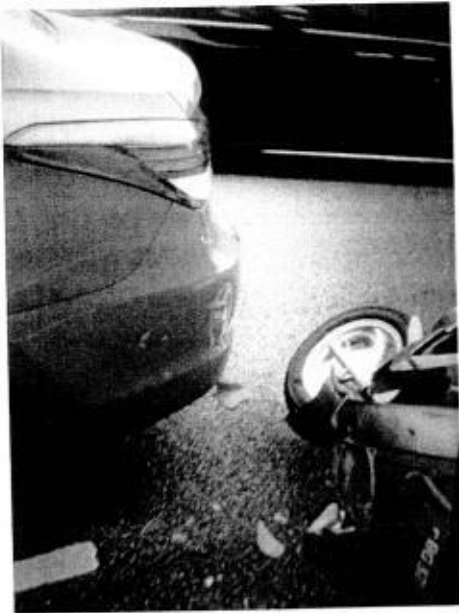
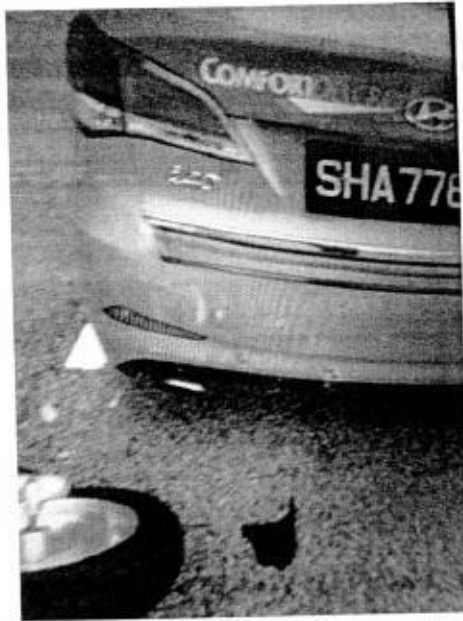
Classification Of Case:

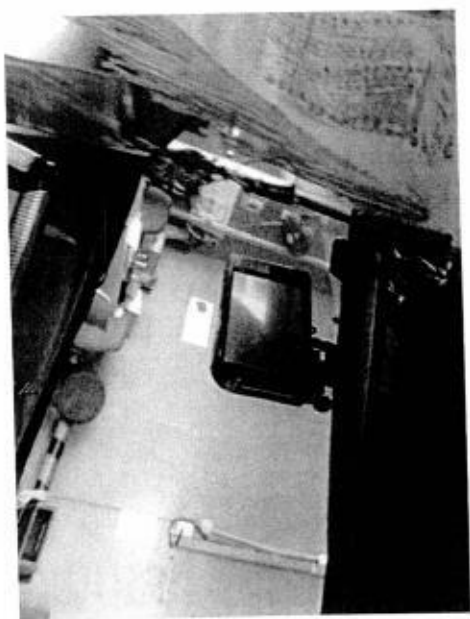
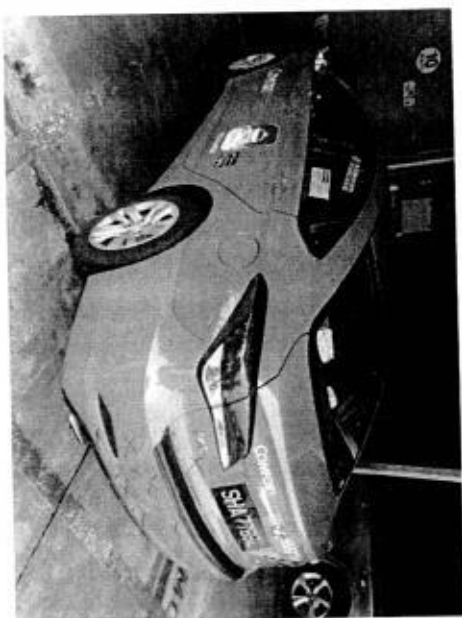
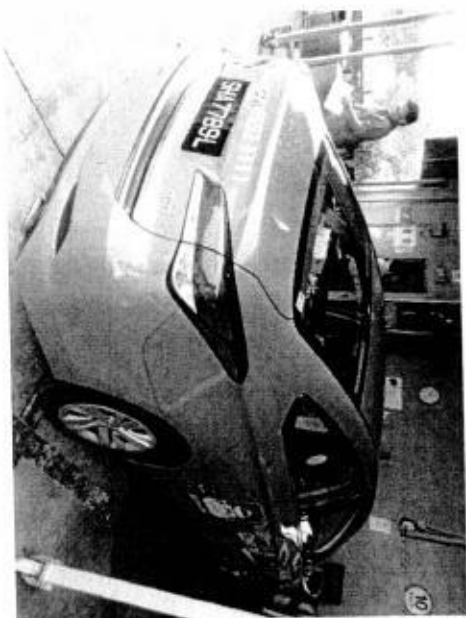
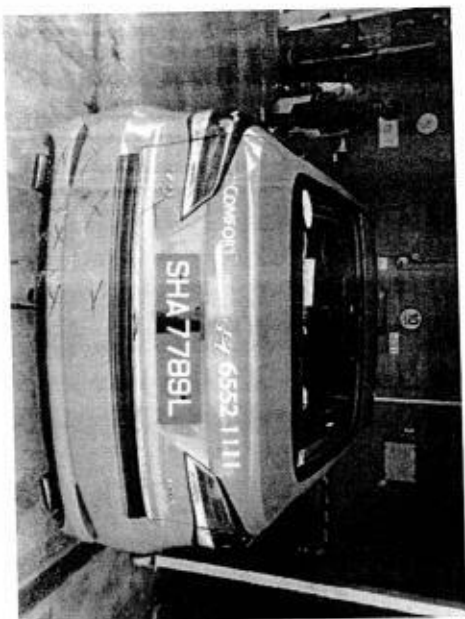


**SINGAPORE
POLICE FORCE**

Authentication Stamp
NP168

[Signature]
SIGNATURE





Item: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO.305110497

Customer

IS COMFORT TRANSPORTATION PTE LTD
OMER NO 7010045
ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (R) (O)
(P)

REGN NO.	SHA7789L	MILEAGE
MAKE	HYUNDAI	FUEL
MODEL	I-40	E.....1/2.....F
YR OF MANU.	05.03.2015	DATE/TIME IN
CHASSIS CODE	KMHLB41UMFU064760	COMPLETION DATE/TIME:

JOB CARD NO.

JOB DESCRIPTION

Accident Date: 25.01.2018
NATURE: 3P 25.01.18/C

/NO LABOR CODE DESCRIPTION

WORKED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Delivery Slip

Exit Pass

No.: SHA7789L JU AXA

Vehicle No.: SHA7789L

Signature/Date Name of Service Advisor Date

turned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

VEHICLE NO : SHA 7789L

DATE 25/1/2018 10:42

MAKE :

MODEL : HYUNDAI i40

748 HRD

Jumani

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid 'H' Emblem ✓			\$ 27.20
	Boot Lid CRDI Plate ✓			\$ 41.00
	Bootlid Moulding ✗			\$ 85.00
	Bootlid i40 Emblem ✓			\$ 41.00
	Bootlid Lower Garnish ✗			\$ 398.00
	Rear Bumper ✓			\$ 603.60
	Rear Bumper Reinforcement ?			\$ 504.35
	Rear Bumper Reinforcement Bracket (LH/RH) ?	\$	180.00	\$ 360.00
	Rear Bumper Side Bracket ?	\$	49.00	\$ 98.00
	Rear Bumper Clips ✓			\$ 22.00
	Rear Bumper Sponge ?			\$ 143.40
	Rear Bumper Under Cover ✓			\$ 225.00
	Tail Lamp (LH) ✓			\$ 565.60
	SUB TOTAL			\$ 3,114.15
	LESS 20%			\$ 622.83
	DISCOUNTED TOTAL			\$ 2,491.32
	Boot Lid Comfort Logo & Tel No. Sticker ✓			\$ 30.00 Nett
	Boot Lid Advertisement Logo ✓			\$ 100.00 Nett
	Rear Bumper Reverse Sensor ✓			\$ 135.70 Nett
	Rear Bumper Rubber Mat ✓			\$ 50.00 Nett
				\$ 315.70
	Labour Charge			
	Panel Beating			\$ 350.00 200
	Spray Painting Charge			\$ 400.00 360
	Wiring Charge			\$ 50.00 20
	Tuff Kote			\$ 50.00 ✗
	Remove/Refix Reverse Sensor			\$ 120.00 20
	TOTAL LABOUR		3802.62	\$ 970.00
	ESTIMATE TOTAL			\$ 3,777.02
<p><i>Kaluh Ukk</i> <i>29/1/18 1415 hrs</i> <i>3 Days</i> <i>PIP</i> <i>Before Part PPH</i></p>				
<p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • 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 • Supplementary item(s) must be approved and is subject to final approval from the Company <p>Acknowledged by Repairer Signature: _____ Date: _____</p>				
<p>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.</p>				

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

VEHICLE NO : SHA 7789L

DATE 25/1/2018 10:42

MAKE :

MODEL : HYUNDAI i40

Jumani

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Boot Lid 'H' Emblem — <i>nc</i>			\$ 27.20	
	Boot Lid CRDI Plate — <i>nc</i>			\$ 41.00	
	Bootlid Moulding x <i>nc</i>			\$ 85.00	
	Bootlid i40 Emblem — <i>nc</i>			\$ 41.00	
	Bootlid Lower Garnish x <i>nc</i>			\$ 398.00	
	Rear Bumper — <i>nc</i>			\$ 603.60	
	Rear Bumper Reinforcement <i>nc</i>			\$ 504.35	
	Rear Bumper Reinforcement Bracket (LH/RH) <i>nc</i>		\$ 180.00	\$ 360.00	
	Rear Bumper Side Bracket <i>nc</i>		\$ 49.00	\$ 98.00	
	Rear Bumper Clips — <i>nc</i>			\$ 22.00	
	Rear Bumper Sponge <i>nc</i>			\$ 143.40	
	Rear Bumper Under Cover — <i>nc</i>			\$ 225.00	
	Tail Lamp (LH) <i>nc</i>			\$ 565.60	
	Rear Bumper Reflector LH — <i>nc</i>				
	SUB TOTAL			\$ 3,114.15	
	LESS 20%			\$ 622.83	
	DISCOUNTED TOTAL			\$ 2,491.32	
	Boot Lid Comfort Logo & Tel No. Sticker — <i>nc</i>			\$ 30.00	Nett
	Boot Lid Advertisement Logo + <i>nc</i>			\$ 100.00	Nett
	Rear Bumper Reverse Sensor — <i>nc</i>			\$ 135.70	Nett
	Rear Bumper Rubber Mat — <i>nc</i>			\$ 50.00	Nett
				\$ 315.70	
	Labour Charge				
	Panel Beating			\$ 350.00	
	Spray Painting Charge			\$ 400.00	360
	Wiring Charge			\$ 50.00	20
	Tuff Kote			\$ 50.00	50
	Remove/Refix Reverse Sensor			\$ 120.00	20
	TOTAL LABOUR			\$ 970.00	
	ESTIMATE TOTAL			\$ 3,777.02	
				3802.62	
	<p>LIK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> 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 Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company 				
	<p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p>				
	<p>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.</p>				

Kajuh iUkk

29/1/18 14:56

3 Days

PIP
Before Part p/h

IXIA - CP(P)

748 HRO

\$32

Zero

360

20

50

20

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305110497
Date : 30.01.18

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SHA7789L

Fax :

Date of Accident : 25.01.18

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

- The repair job shall bill to: AXA --- FBG3260K
###
- The finalized amount shall be:
 - Spare Parts after List discount \$1,461.62
 - Labour Charges ### \$600.00
 - Total for Part-By-Part Repair Cost \$2,061.62
 - Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20%
Final Lumpsum Repair cost

3. Estimated normal period for repairs: 3 working days

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature :
Name : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature :
Name : Kalvin
Date : 31/1/18

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:

SUPPLEMENTARY ITEMS.REAR BUMPER REFLECTOR LH

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 30.01.2018
Time: 18:02:16
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 : 305110497
REGN NO : SHA7789L
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 05.03.2015
DATE/TIME IN : 25.01.2018 10:20
ACCIDENT DATE : 25.01.2018

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	04-01-0103-1150-A	I40VC PROTECTOR MAT	1 N	50.00	2.00-	50.00
0008	09-01-9999-0068-A	HYUNDAI REVERSE SENSOR AS	1 N	135.70	0.20	135.70
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
0011	04-01-0103-0581-A	I40VC LAMP ASSY-RR COMB O	1	565.60	20.00	452.48
0012	04-01-0103-0851-G	I40VC REFLECTOR/REFLEX AS	1	32.00	20.00	25.60

SUB-TOTAL : 1,461.62

JOB NATURE

COMFORTDELGRO ENGINEERING PTE LTD

Date: 30.01.2018

REPAIR ESTIMATE

Time: 18:02:16

Page: 2

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

JOB NO : 305110497
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DATE/TIME IN : 25.01.2018 10:20
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JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0000 L	PANEL BEATING- REAR	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	360.00
0002 17-01	CHECK ALL LIGHTING	20.00
0003 L	REMOVE/REFIX REVERSE SENSOR	20.00
SUB-TOTAL :		600.00
TOTAL :		2,061.62

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

SUPPLEMENTARY OF PARTS AND LABOUR COSTS			
DESCRIPTION	QTY	ESTIMATE	REMARKS
REAR BUMPER REFLECTOR LH	1	\$32.00	
TOTAL:		\$32.00	JUMANI



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

COMFORTDELGRO ENGINEERING PTE LTD

Ref : CS/QW18001746/K1vbs2

59 LOYANG DRIVESINGAPORE 508969

Date : 07-02-2018



Code : QW007

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	Veh. Inspected	SHA 7789L
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From	Assign Date	29/01/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMFU064760	Colour	BLUE
Odometer	399505	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60R16	WEST LAKE	7 mm
L/H Front Tyre	205/60R16	WEST LAKE	7 mm
R/H Rear Tyre	205/60R16	WEST LAKE	7 mm
L/H Rear Tyre	205/60R16	WEST LAKE	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	25/01/2018	Inspection Date	29/01/2018
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.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: 3 Working Days



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 7789L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BOOT LID 'H' EMBLEM	NECESSARY	27.20	27.20
1	BOOT LID CRDI PLATE	NECESSARY	41.00	41.00
1	BOOTLID MOULDING	SERVICEABLE	85.00	-
1	BOOTLID I40 EMBLEM	NECESSARY	41.00	41.00
1	BOOTLID LOWER GARNISH	TO REPAIR SEE LABOUR	398.00	-
1	REAR BUMPER	DEFORMED	603.60	603.60
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	504.35	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @ \$180.00	SERVICEABLE	360.00	-
2	REAR BUMPER SIDE BRACKET @ \$49.00	SERVICEABLE	98.00	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	143.40	-
1	REAR BUMPER UNDER COVER	CUT	225.00	225.00
1	TAIL LAMP (LH)	GRAZED	565.60	565.60
1	REAR BUMPER REFLECTOR LH	CRACKED	32.00	32.00
	LESS 20% DISCOUNT		-629.23	-311.48
			2,516.92	1,245.92
SPECIAL NETT ITEMS				
1	BOOT LID COMFORT LOGO & TEL NO. STICKER (SN)	NECESSARY	30.00	30.00
1	BOOT LID ADVERTISEMENT LOGO (SN)	NOT NECESSARY	100.00	-
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
			315.70	215.70
LABOUR				
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF BOOTLID LOWER GARNISH.		350.00	200.00
	SPRAY PAINTING CHARGE.		400.00	360.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE / REFIX REVERSE SENSOR.		120.00	20.00
			970.00	600.00
GRAND TOTAL			3,802.62	2,061.62

Report Ref No. CS/QW18001746/K1vbs2



RECOMMENDED COST OF REPAIRS			2,061.62
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Report Ref No. CS/QW18001746/K1vbs2

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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