

06/11/15

Ref: Kalvin

REF: CC3/TM118007174/K1V62

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / INS / TP RES / OD RES / EVA / INV / MV
 To Insp Vehicle No: _____
 at Work stop m/s _____
 of _____
 Insured: SLU 6105Z
 Policy No. MT000468
 Claims No. M1801995
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SHB 4058C Yr Regn: 10 Sep, 2015
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Hyundai Z90 c.c. 1685
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 265326 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KM HLB 816M 620 77890
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD / Rim or _____
 Tyre Size: F: 255/60R16
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Walker
 Front R/Bal. 2 mm Rear R/Bal. 2 mm
 L/Bal. 2 mm L/Bal. 2 mm
 D.O.A. 13/4/18 D.O.I. 17/4/18
 Survey held at CD4E (Loyang)
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
N/S Front.
 The U/C / Chassis frame / Body Structure affected due to collision.

N/S	O/S

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: _____ 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
18/4/18	Cancel PIP \$ 610 / 2 days (Red 579.20, 499) To Kio PIP

RECEIVED 20 APR 2018

Date/Time, File Pass to? Prel. Report
 Final Report
 1) _____
 Date/Time, File Return to?
 2) 20/4 - typist
 MRIMEN
 PIP \$ 610/2

Days Of Repair: 2
 Resurvey No. of Trip: 1
 Add Fee: Site Insp (\$ _____)
 Interview (\$ _____)
 Survey Fee: 250
 Transportation: _____
 S + RS, SI _____
 Photos _____
 10
 260

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	17 Apr 2018 13:37	17 Apr 2018 13:47	17 Apr 2018 19:56				Pending for Survey Report Cancel Case
	Sendback Est	S\$989.20	Edit Adj Rpt				
Supp #1	18 Apr 2018 13:42	18 Apr 2018 13:44	18 Apr 2018 13:44			Combine Suppl.	New Assignment Cancel Case
	Sendback Est	S\$200.00	Assign				

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured:	CTPL , Co. Reg. No.: 199303821R								
Main Claimant:	CTPL								
Vehicle Reg. No.:	SHB4058C	Date of Loss:	13/04/2018 09:00 - :59 [31 Months and 3 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1801995	Policy/Cover Note No.:	MT000468 (Comprehensive) Coverage: 17/01/2018 - 16/01/2019						
Vehicle Reg. No. (Insured):	SLU6405Z	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 Telma Gomez - 65926402]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 26/04/2018]								
Adj Asg. Remarks:	PLS. CHECK CONSISTENCY OF THE DAMAGE.								
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.									

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	13/04/2018 14:36
Date Of Accident	13/04/2018 09:15
Exact Location Of Accident	ALONG JOO CHIAT PL TWDS JOO CHIAT RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB4058C
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	MUHAMMAD NOH BIN SABERAN
NRIC No	S7837211G
Date Of Birth	26/12/1978
Occupation	OUTDOOR
Date Of Driving Pass	19/12/2001
Driving Experience	16 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	MUHDNOH@LIVE.COM.SG

Address	663D #06-233 JURONG WEST STREET 65
Postcode	644663
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 - OPENING DOOR OF 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)	1

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)

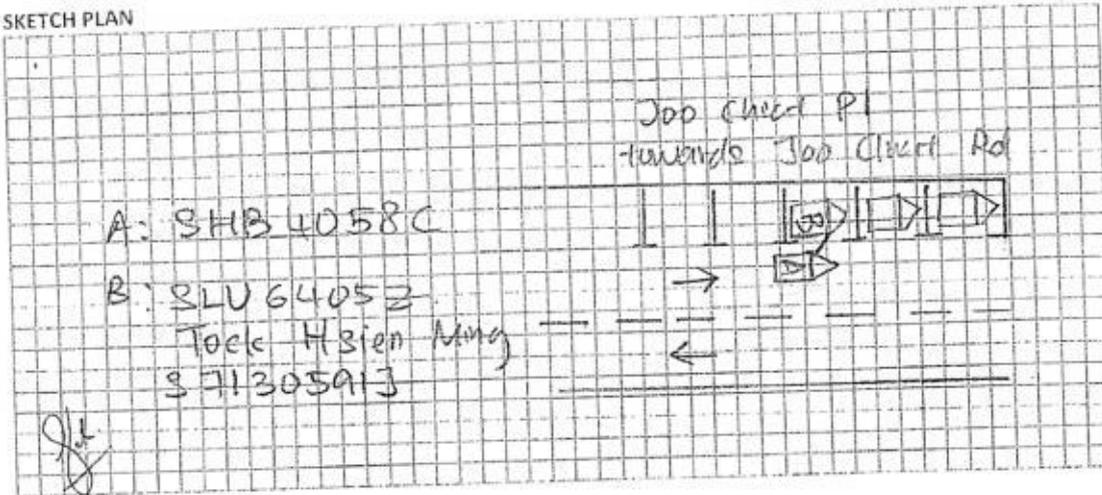
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLU6405Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOCK HSIEN MING
NRIC/Passport Number	S7130591J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT RHT DOOR
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13/4/18 at about 09:15 hrs, I was driving along Joo Chiat Place towards Joo Chiat Rd.

Suddenly a car SLU 6405Z parked in the left car park lot open driver door. As it happen too sudden, I can't react at all. As a result, the car right front door grazed onto the left front portion of my taxi.

No passenger in my taxi. No injury

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
 CO. REG. NO. 199003821R

Policyholder's Signature
 Date & Time:

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

Reporting Centre Personnel's Signature
 Name: 12/1/18

Sketch Plan Pg. 2

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)**

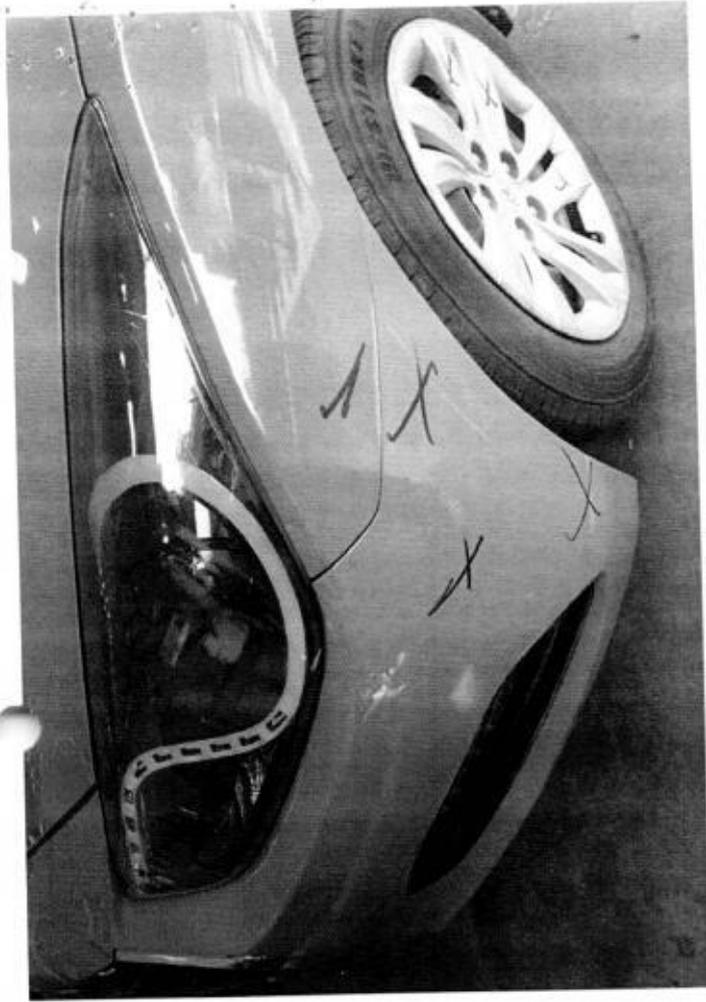
I understand, acknowledge, agree and consent that:

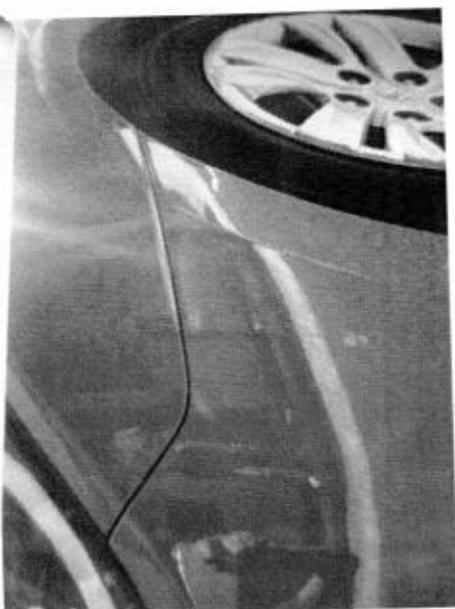
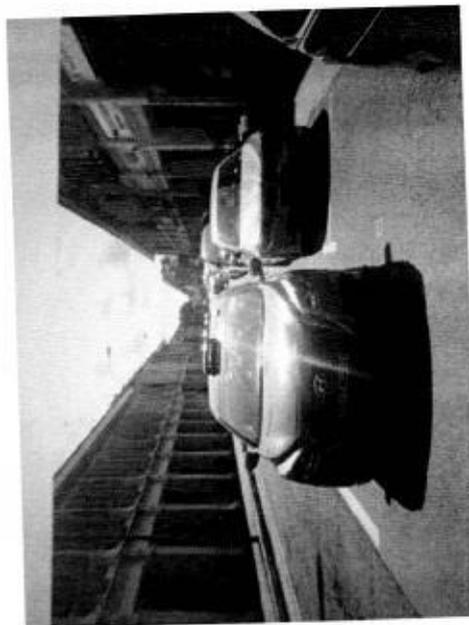
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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
Policyholder's Signature
Date & Time:


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


Reporting Centre Personnel's Signature
Name: 13/4/18
NRIC/FIN No.:





Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO:305142910

CUSTOMER NAME: COMFORT TRANSPORTATION PTE LTD VMS NO: 7010045 CUSTOMER NO: 383 SIN MING DRIVE ADDRESS: Singapore SINGAPORE 575717 TEL (R) 65508755 (P)	REGN NO: SHB4058C	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL: I-40	DATE/TIME IN: 17.04.2018 09:40
	YR OF MANU: 10.09.2015	TARGET DATE
	CHASSIS CODE: KMHLB41UMGU077490	COMPLETION DATE/TIME:

Tokio

Accident Date: 13.04.2018
 NATURE: 3P 13.04.2018

JOB DESCRIPTION

FRT LH

S/NO LABOR CODE DESCRIPTION

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

to: _____
 from: **SHB4058C** **CHIANG**
 Vehicle No.:

Vehicle No.: **SHB4058C**

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

to be returned to Service Reception upon collection

To be kept by Security Guard

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

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	13/04/2018
Vehicle Reg. No.:	SHB4058C	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 L CRDI AT ABS AIRBAG 4DR (A)	Vehicle Reg. Date:	10/09/2015
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4DFDU541694	Chassis No:	KMHLB41UMGU077490
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	479.20
Miscellaneous Items	10.00
Labour	500.00
Paintwork Labour	0.00
Towing	0.00
	<u>1189.20</u>
	Gross Total (S\$) 989.20
	+ GST 7.00% (S\$) 69.24
	<u>1,058.44</u>

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

Generated using Merimen e-Claims Internet Estimation & Adjusting System

Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

There are no labour items selected.

ComfortDelGro Engineering Pte Ltd/SHB4058C/18/04/2018 13:44. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 17 Apr 2018)
Parts: 143 HYUNDAI I40 1.7 L CRDI AT ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: ComfortDelGro Engineering Pte Ltd/SHB4058C/17/04/2018 13:47
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		*FRONT BUMPER COVER <i>X repair</i>	20.00	0.00	*562.30 FL
2	1		*FRONT BUMPER BRACKET TOP LH <i>X disc</i>	20.00	0.00	*22.40 FL
3	1		*FRONT BUMPER SIDE BRACKET LH <i>X disc</i>	20.00	0.00	*14.30 FL
F=Franchise part. L=ListItemDisc.						
			<i>Front Fender (LH) X 14.2</i>	Sub Total (S\$)		599.00
			- List Item Discount on L Items (S\$)			119.80
Total Parts (S\$)						479.20

ComfortDelGro Engineering Pte Ltd/SHB4058C/17/04/2018 13:47. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

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

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PEANEL BEATING	New	250.00 200
2	SPRAY PAINTING	New	250.00 200
Gross Labour Cost (S\$)			500.00

ComfortDelGro Engineering Pte Ltd/SHB4058C/17/04/2018 13:47. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Kaka (LKK)
17/4/18 1400h.
2 Pys.
PIP
After Rep. p LK.

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

Acknowledged by Repairer
 Signature:
 Date:

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 18 Apr 2018)
Parts: 143 HYUNDAI I40 1.7 L CRDI AT ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: ComfortDelGro Engineering Pte Ltd/SHB4058C/18/04/2018 13:44
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		*SPRAY PAINT FENDER	20.00	0.00	*250.00 FL 200
						F=Franchise part. L=ListItemDisc.
						Sub Total (S\$)
						250.00
						- List Item Discount on L Items (S\$)
						50.00
						Total Parts (S\$)
						200.00

ComfortDelGro Engineering Pte Ltd/SHB4058C/18/04/2018 13:44. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

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

59 Loyang Drive
 Singapore 508969
 Tel: 6214 8300

(SUPPLEMENTARY)

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

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:	MT000468	Date of Loss:	13/04/2018
Vehicle Reg. No.:	SHB4058C	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 L CRDI AT ABS AIRBAG 4DR (A)	Vehicle Reg. Date:	10/09/2015
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDFU541694	Chassis No:	KMHLB41UMGU077490
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	200.00
Miscellaneous Items	0.00
Labour	0.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	200.00
+ GST 7.00% (S\$)	14.00
Nett Amount (S\$)	214.00
+ Previous Estimates (S\$)	1,058.44
Claim Total (S\$)	1,272.44

Generated using Merimen e-Claims Internet Estimation & Adjusting System

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305142910
Date : 16/04/18

FINALIZATION FORM

To : LKK Fax : _____
Attn : KALVIN
Vehicle Reg No. : SHB4058C 13/04/2018

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

1. The repair job shall bill to: TOKIO SLU6405Z
2. The finalized amount shall be:

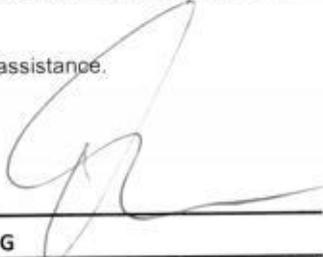
(a) Spare Parts after List discount	
(b) Labour Charges	\$610.00
Total for Part-By-Part Repair Cost	\$610.00
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less:	
Final Lumpsum Repair cost	

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 : 
Name : CHIANG
Tel : 62148314
Fax : 65468156

Signature : 
Name : Kalvin
Date : 18/4/18

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:

REPAIR ESTIMATE

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

JOB NO : 305142910
 REGN NO : SHB4058C
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 10.09.2015
 DATE/TIME IN : 17.04.2018 09:40
 ACCIDENT DATE : 13.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0000 L	MERIMEN FEE	10.00		
0001 L	PANEL BEATING	200.00		
0002 23-502	SPRAYPAINT ON AFFECTED AREA		400.00	
				SUB-TOTAL : 610.00
				TOTAL : 610.00

AUTHORISED: YES / NO

MVA NAME & SIGNATURE
 DATE:

SURVEYOR NAME & 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	17 Apr 2018 13:37 Sendback Est	17 Apr 2018 13:47 S\$989.20	17 Apr 2018 19:56 Edit Adj Rpt	S\$610.00 Edit Estimates	S\$610.00 View Rpt		Pending for Survey Report Cancel Case
Supp #1	18 Apr 2018 13:42	18 Apr 2018 13:44 S\$200.00	18 Apr 2018 13:44			(Combined)	Combined with Main Uncombine Suppl.

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS									
Insured:	CTPL , Co. Reg. No.: 199303821R								
Main Claimant:	CTPL								
Vehicle Reg. No.:	SHB4058C								
Claim Type:	TP / M1801995								
Vehicle Reg. No. (Insured):	SLU6405Z								
Date of Loss:	13/04/2018 09:00 - :59 [31 Months and 3 Days From LTA Reg Date (Man Yr)]								
Policy/Cover Note No.:	MT000468 (Comprehensive) Coverage: 17/01/2018 - 16/01/2019								
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 Telma Gomez - 65926402]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 26/04/2018]								
Adj Asg. Remarks:	PLS. CHECK CONSISTENCY OF THE DAMAGE.								
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

**SHB4058C (M1801995)
[SLU6405Z]**

**TP
CTPL
Apr 13 2018 9:00AM
[CTPL]**

ComfortDelGro Engineering Pte Ltd

Upload Documents		Upload Photos	Compose New Letter	View View in Browser <input type="checkbox"/>
Assessment Reports				1 per page <input type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	17/04/18 13:47	Repairer Estimates	Load HTM	
2	18/04/18 13:44	Repairer Estimates Suppl. #1	Load HTM	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail	Print
1	17/04/18 19:55	Accident Statement From: SC - Reg. No: SLU6405Z, Claimant: TOCK HSIEN MING (ZHUO XIANMING)	Load HTM	
Photos/Images				3 per page <input type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
2	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
3	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
4	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
5	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
6	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
7	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
8	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
9	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
10	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
11	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
12	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
13	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
14	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
15	19/04/18 07:53	General View	Load JPG	<input checked="" type="checkbox"/>
16	19/04/18 17:36	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
17	19/04/18 17:36	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
18	19/04/18 17:36	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
19	19/04/18 17:36	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
Documentation				1 per page <input type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	17/04/18 13:48	E-filed GIA report	Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	26/04/18 10:21	Supplementary	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
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: CC3/TMI18007174/K1VBE2

Date: 26/04/2018

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd	Policy No: MT000468
Claimant Vehicle No : SHB4058C	Insured Vehicle No : SLU6405Z
Date of Loss: 13/04/2018	Nature of Claim: TP Claim No: M1801995

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHB4058C	Engine No: D4DFDU541694
Make & Model: HYUNDAI I40, 1.7 L CRDI AT ABS AIRBAG 4DR (A)	Chassis No: KMHLB41UMGU077490
Reg. Date: 10/09/2015 (Man. Year: 2015)	Odometer: 265326 km
Colour: Blue	
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: Good

CONDITION OF TYRES

Front Tyre Size: 205/60R16	Rear Tyre Size: 205/60R16
Front Left Side: West Lake 7 mm	Rear Left Side: West Lake 7 mm
Front Right Side: West Lake 7 mm	Rear Right Side: West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	679.20	200.00	479.20	70.55
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	500.00	400.00	100.00	20.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	1,189.20	610.00	579.20	48.71
+ GST 7.00/7.00% (S\$)	83.24	42.70	40.54	48.70
Nett Amount (S\$)	1,272.44	652.70	619.74	48.70

INSPECTION

Date of Assignment: 17/04/2018	Present Location: ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected: 17/04/2018	Inspected At: 59 Loyang Drive Singapore 508969
Estimated Period of Repair: 2.0 days	

Adjuster: KALVIN ANG WEI KUN

Manager: VERON CHEN

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: 25 Apr 2018)
Parts: 143	HYUNDAI I40 1.7 L CRDI AT ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHB4058C)
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 BUMPER COVER	Repair	562.30 FL	*- FL	
2	1		*FRONT BUMPER BRACKET TOP LH	Serviceable	22.40 FL	*- FL	
3	1		*FRONT BUMPER SIDE BRACKET LH	Serviceable	14.30 FL	*- FL	
4	1		*FRONT FENDER (LH)	Repair	-	*- FL	
Supplementary #1							
5	1		*SPRAY PAINT FENDER		250.00 FL	*200.00 FS	
					Sub Total (S\$)	849.00	200.00
					- List Item Discount on L Items 20.00/20.00% (S\$)	169.80	0.00
					Total Parts (S\$)	679.20	200.00

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

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

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PEANEL BEATING	New	250.00	200.00
2	SPRAY PAINTING	New	250.00	200.00
Gross Labour Cost (S\$)			500.00	400.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >