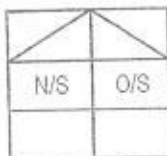


08/11/13
Surveyor: Kalvin

REF: C03 / TM218007479 / Klvb2

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To: Inspected Vehicle No: _____
 at Workshop n/s _____
 of _____
 Insured: SCW 1339K
 Policy No. mrv011398
 Claims No. m1802068
 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: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SHC 8459Y Yr Regn: 3 Dec 2015
 Type: M. Car / M. Cycle / Bus / Van / Lorry / T. / Prime Mover /
 Truck / Trailer or
 Make: Hyundai C.O. 1685
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 328755 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KM HLB414M 4080657
 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: 205/60R16
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Hwa Kark
 Front 7 mm Rear 7 mm
 R/Bal. 7 mm L/Bal. 7 mm
 D.O.A. 19/4/12 D.O.I. 23/4/12
 Survey held at CDE (Loyang)
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
 o/s B.L.
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SHC 8459Y - C03 / F07120115240 / Avn-1
	SCW 1339K - X
24/4/18	Email GIA to TMI
24/4/18	Calculate P/P \$1115.56 / 28yrs. (Red 2050.80, 65yrs)
RECEIVED 25 APR 2018	

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report

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

1) _____
 Date/Time, File Return to?
 2) 25/4 - typist

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Insp (\$)
☐ : Other (\$)

Survey Fee:	250
Transportation:	10
\$ + RS. \$	
Photos	
Others	
TOTAL	260

Reason for Repair: merimen
 P/P \$ 1115.56




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 : CC3/TMI18007479/K1vb	
20 MCCALLUM STREET #09-01 TOKIO MARINE CENTRESINGAPORE 069046			Date : 23-04-2018	
			Code : TMI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SCW 1339K	Veh. Inspected	SHC 8459Y	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	23/04/2018	
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	19/04/2018	Inspection Date	23/04/2018	
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.				

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

Pre-Repair Survey

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	23 Apr 2018 14:19 Sendback Est	23 Apr 2018 14:27 S\$3,045.80	24 Apr 2018 11:58 Edit Adj Rpt				Pending for Survey Report Cancel Case
Supp #1	24 Apr 2018 17:17 Sendback Est	24 Apr 2018 17:22 S\$120.56	24 Apr 2018 17:22 Assign			Combine Suppl.	New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

Insured:	COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R		
Main Claimant:	COMFORT TRANSPORTATION PTE LTD		
Vehicle Reg. No.:	SHC8459Y	Date of Loss:	19/04/2018 09:00 - :59 [28 Months and 16 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M1802068	Policy/Cover Note No.:	MV011398 (Comprehensive) Coverage: 01/12/2016 - 30/11/2018
Vehicle Reg. No. (Insured):	SCW1339K	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 Zheng Hanyang - 65926416]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 04/05/2018]		
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.									

Veron Chen (LKKAuto)

From: Veron Chen (LKKAuto)
Sent: Tuesday, 24 April 2018 10:08 AM
To: motorclaims@tokiomarine.com.sg
Cc: SUR
Subject: DIRECT SURVEY INSPECTION ON WORKSHOP -COMFORTDELGRO ENGINEERING PTE LTD, DOA: 19/4/2018, SHC 8459Y (TP VEHICLE),SCW 1339K (OI VEHICLE)
Attachments: EST.pdf; GIA.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SHC 8459Y M/s: COMFORTDELGRO ENGINEERING PTE LTD, 59 LOYANG DRIVE, SINGAPORE 508969 on 23/4/2018

Enclosed herewith a copy of TP's GIA report and estimated cost of repair.

Meanwhile, kindly create claim in merimen for our necessary action.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

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	19/04/2018 14:11
Date Of Accident	19/04/2018 09:15
Exact Location Of Accident	NERWTON ROAD TWDS NEWTON CIRCUS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8459Y
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	PHUA NIAM WEE
NRIC No	S1569145Z
Date Of Birth	08/11/1962
Occupation	OUTDOOR
Date Of Driving Pass	20/08/1984
Driving Experience	33 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	JOHNSONPNW@GMAIL.COM

Address	BLK 349 UBI AVENUE 1 #05-1033
Postcode	400349
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
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	SCW1339K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LOW KAY ENG
NRIC/Passport Number	
Contact Number	84284135
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD
Nature Of Damage	LEFT 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199307221R

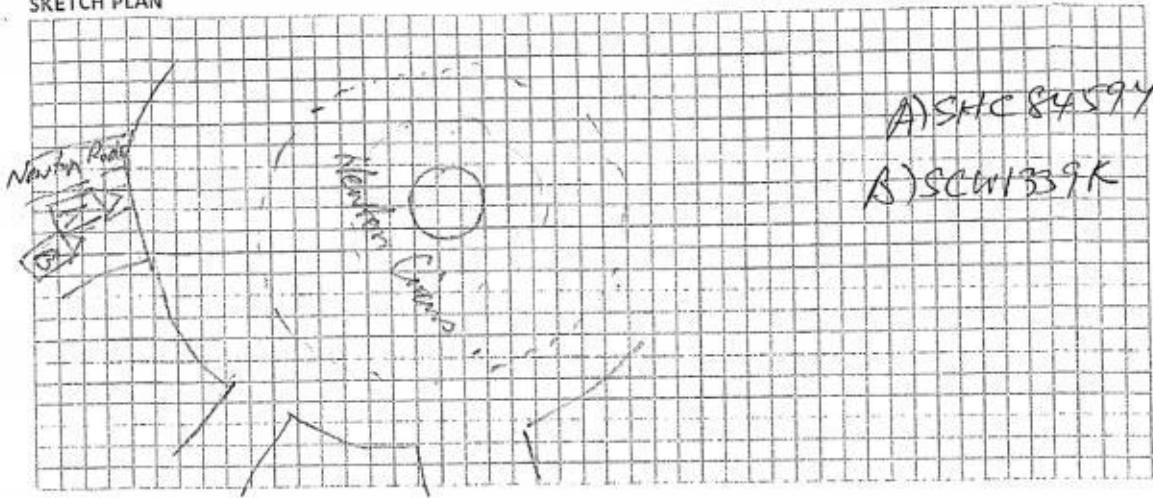
Policyholder's Signature
Date & Time:

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

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

[Signature] 19/4/18
R Moorthy
CSO

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/6/18 at about 0915 hrs while I Veh A was driving along Newton Road towards Newton Circus in lane 2, Veh B from lane 1 filtered to the left and collided on the right rear portion of my vehicle.

DECLARATION

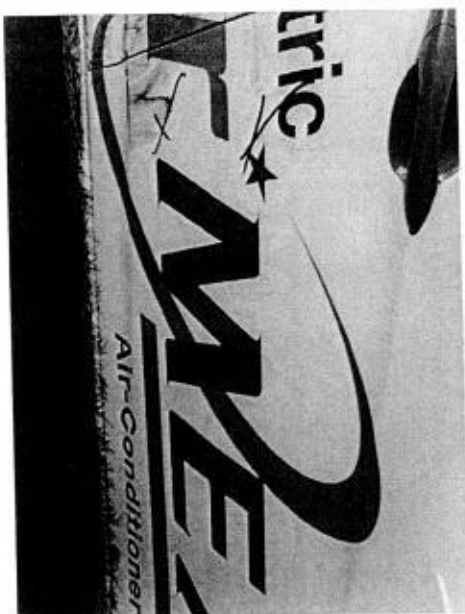
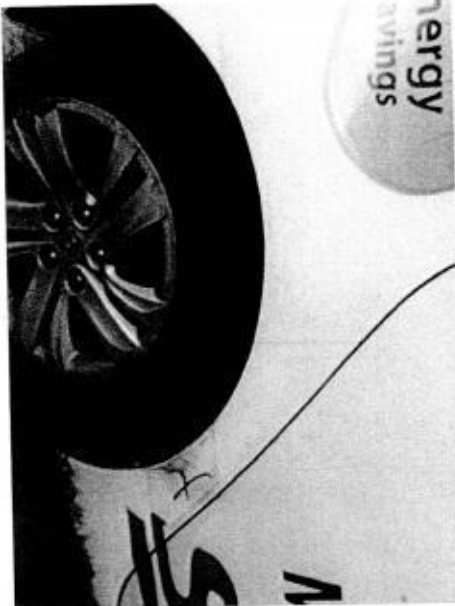
I/We declare the foregoing particulars are true in every respect.

COMFORT TRANSPORTATION PTE LTD
CO REG. NO. 199303821R

Policyholder's Signature
Date & Time:

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

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





COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 379701
Mailing + 65 6383 6280 Facsimile + 65 6250 8735
Workshops
59 Loyang Drive Singapore 508339 24 Serangoon Singapore 735158
383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 726791
45 Pandan Road Singapore 609266 6 Dohi Avenue 1 Singapore 525537

Date/Time: 23.04.2018 12:18 Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order: JC NO 305144759

CUSTOMER
NAME: COMFORT TRANSPORTATION PTE LTD
CUSTOMER NO: 7010045
ADDRESS: 383 SIN MING DRIVE
Singapore SINGAPORE 575717
L. (R) 65508755 (O)
(P)
SCOUT CARD NO.

VAR

(B)

REGN NO: SHC8459Y	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL: I-40	DATE/TIME IN: 23.04.2018 09:00
YR OF MANU: 03.12.2015	TARGET DATE
CHASSIS CODE: KMHLB41UMGU080657	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 19.04.2018
NATURE: 3P 19.04.2018

S/N	LABOR CODE	DESCRIPTION
		TOKIO - Right Rear damage
		LTB/Kalmi -

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHC8459Y
Name: LARRY

Vehicle No.: SHC8459Y

Signature of Service Advisor: _____
Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

Larry Ng

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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER: Tokio Marine Insurance Singapore Ltd (HQ)
COMFORT TRANSPORTATION PTE LTD

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	19/04/2018
Vehicle Reg. No.:	SHC8459Y	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	03/12/2015
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDFU564947	Chassis No:	KMHLB41UMGU080657
Odometer:	327897 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	5		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	1,535.80
Miscellaneous Items	10.00
Labour	1,500.00
Paintwork Labour	0.00
Towing	0.00
	<u>3166.36</u>
Gross Total (S\$)	3,045.80
+ GST 7.00% (S\$)	213.21
Nett Amount (S\$)	3,259.01

This claim is handled by: **NG NYUK PHIN**

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference**

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 23 Apr 2018)

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/SHC8459Y/23/04/2018 14:27

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		*REAR DOOR - RH <i>X Ng</i>	20.00	0.00	*1,351.00 FL
2	1		*FRONT DOOR COMFORT LOGO - RH <i>hol</i>	0	0.00	*75.00 FS
3	1		*REAR DOOR APP LOGO - RH <i>ne</i>	0	0.00	10 *80.00 FS
4	1		*AEVERTISEMENT - RHF DOOR <i>ne</i>	0	0.00	*100.00 FS
5	1		*AEVERTISEMENT - RHR DOOR <i>ne</i>	0	0.00	*100.00 FS
6	1		*AEVERTISEMENT - RHR FENDER <i>ne</i>	0	0.00	*100.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	1,806.00
- List Item Discount on L Items (S\$)	270.20
Total Parts (S\$)	1,535.80

ComfortDelGro Engineering Pte Ltd/SHC8459Y/23/04/2018 14:27. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Larry Ng

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	400.00 200
2	SPRAY PAINTING	New	750.00 400
3	TRANSFER OF DOOR	New	200.00 111
4	WIRING CHARGE	New	50.00 11
5	TUFF KOTE	New	100.00 11
Gross Labour Cost (\$\$)			1,500.00

ComfortDelGro Engineering Pte Ltd/SHC8459Y/23/04/2018 14:27. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Larry Ng

Kalvin

23/4/18 1500

2 Qty.

P/P

After Rep-gh

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:

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)
COMFORT TRANSPORTATION PTE LTD

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:	MV011398	Date of Loss:	19/04/2018
Vehicle Reg. No.:	SHC8459Y	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	03/12/2015
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDFU564947	Chassis No:	KMHLB41UMGU080657
Odometer:	327897 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	5		

Present Location: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

COST OF CLAIMS	Amount
Parts	120.56
Miscellaneous Items	0.00
Labour	0.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	120.56
+ GST 7.00% (S\$)	8.44
Nett Amount (S\$)	129.00
+ Previous Estimates (S\$)	3,259.01
Claim Total (S\$)	3,388.01

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

REPAIR DETAILS**Reference****Part Source:** MRM-SG **Version:** 1.0 (Last Synchronised: 24 Apr 2018)**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/SHC8459Y/24/04/2018 17:22**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		*REAR WHEEL COVER - RH	20.00	0.00	*150.70 FL
F=Franchise part. L=ListItemDisc.						
Sub Total (\$\$)						150.70
- List Item Discount on L Items (\$\$)						30.14
Total Parts (\$\$)						120.56

glazed

ComfortDelGro Engineering Pte Ltd/SHC8459Y/24/04/2018 17:22. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

There are no labour items selected.

ComfortDelGro Engineering Pte Ltd/SHC8459Y/24/04/2018 17:22. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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

JOB NO : 305144759
 REGN NO : SHC8459Y
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 03.12.2015
 DATE/TIME IN : 23.04.2018 09:00
 ACCIDENT DATE : 19.04.2018

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		75.00
0002 04-01-0103-0658-G	I40VC CAP ASSY-WHEEL HUB	1	150.70	20.00	120.56 <i>grazed</i>
0003 28-01-0103-0004-A	(I40/SONATA)REAR DOOR TEL	1	10.00		10.00
SUB-TOTAL :					205.56

JOB NATURE

0000 L	MERIMEN FEE	10.00	
0001 L	ADVERTISEMENT - RHF DOOR		100.00
0002 L	ADVERTISEMENT - RHR DOOR		100.00
0003 L	ADVERTISEMENT - RHR FENDER		100.00
0004 L	PANEL BEATING	200.00	
0005 23-502	SPRAYPAINT ON AFFECTED AREA		400.00
			SUB-TOTAL : 910.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 24.04.2018

Time: 15:19:21

REPAIR ESTIMATE

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 : 305144759
REGN NO : SHC8459Y
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 03.12.2015
DATE/TIME IN : 23.04.2018 09:00
ACCIDENT DATE : 19.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,115.56

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305144759

Date : 24. Apr. 2018

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHC8459Y

Date of Accident: 19.04.2018

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

1. The repair job shall bill to: TOKIO SCW1339K

2. The finalized amount shall be:

(a) Spare Parts after List discount \$505.56

(b) Labour Charges \$610.00

Total for Part-By-Part Repair Cost \$1,115.56

(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 : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : Calvin

Date : 24/4/18

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

Remarks:

TOTAL LOSS

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/TMI18007479/K1VBN2

Date: 27/04/2018

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MV011398
Claimant Vehicle No :	SHC8459Y	Insured Vehicle No :	SCW1339K
Date of Loss:	19/04/2018	Nature of Claim:	TP
		Claim No:	M1802068

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHC8459Y	Engine No:	D4FDFU564947
Make & Model:	HYUNDAI I40, 1.7 D CRDi (A)	Chassis No:	KMHLB41UMGU080657
Reg. Date:	03/12/2015 (Man. Year: 2015)	Odometer:	328755 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:	205/60-15
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	1,656.36	505.56	1,150.80	69.48
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,500.00	600.00	900.00	60.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	3,166.36	1,115.56	2,050.80	64.77
+ GST 7.00/7.00% (S\$)	221.65	78.09	143.56	64.77
Nett Amount (S\$)	3,388.01	1,193.65	2,194.36	64.77

INSPECTION

Date of Assignment:	24/04/2018	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	23/04/2018	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	2.0 days		

Adjuster: KALVIN ANG WEI KUN

Manager: 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: 27 Apr 2018)
Parts:	143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC8459Y)	
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		*REAR DOOR - RH	Repair	1,351.00 FL	*- FL
2	1		*FRONT DOOR COMFORT LOGO - RH	Necessary	75.00 FS	*75.00 FS
3	1		*REAR DOOR APP LOGO - RH	Necessary	80.00 FS	*10.00 FS
4	1		*AEVERTISEMENT - RHF DOOR	Necessary	100.00 FS	*100.00 FS
5	1		*AEVERTISEMENT - RHR DOOR	Necessary	100.00 FS	*100.00 FS
6	1		*AEVERTISEMENT - RHR FENDER	Necessary	100.00 FS	*100.00 FS
Supplementary #1						
7	1		*REAR WHEEL COVER - RH	Grazed	150.70 FL	*150.70 FL
F=Franchise part, S=SpcNett, L=ListItemDisc.						
Sub Total (\$\$)					1,956.70	535.70
- List Item Discount on L Items 20.00/20.00% (\$\$)					300.34	30.14
Total Parts (\$\$)					1,656.36	505.56

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

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

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	400.00	200.00
2	SPRAY PAINTING	New	750.00	400.00
3	TRANSFER OF DOOR	New	200.00	-
4	WIRING CHARGE	New	50.00	-
5	TUFF KOTE	New	100.00	-
Gross Labour Cost (\$\$)			1,500.00	600.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >