

ASS. REC. BY:

REF: CS/TML18009353/Klvb n2 Special Instruction:

Surveyor:

ASSIGNMENT (Office)

Muhaimin

From (Person):

Fiona Gun

of

TML

Date/Time: 23/05/2018 1020am

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SHA 3179H

Insured:

SLT 2312P

at Workshop m/s

Comfort Delgro

Tel:

of

59 Loyang Drive

Policy No:

MH000848

Claim No:

M1801597

Sum Insured:

Excess:

Make of Veh:

D.O.A.

22/05/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SHA 3179H - CC4 / AXA 17009327 / 11/06/2018
	SLT 2312P - x

108/1113

Q. name: Kalvin

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / NS / 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.

N/S	O/S

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

Veh No: SHA 34794 Yr Regn: 10 Sep 2015

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

Truck / Trailer or

Make: Hyundai Ix c.c. 1685Colour: Blue A/C: Ins / Std / NI / NASp. Reading: 335101 T/Radio: Ins / Std / NI / NA

Eng/No: _____

C/No: KMHCB414MH407744Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / R/Rim or

Tyre Size: F: 205/60R16

R: _____

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

TOYO / YOKO or Campain

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 22/5/12 D.O.I. 23/5/12Survey held at CPGE (Loyang)

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

O/S Frnt.

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

Date / Time	Action / Instruction
25/5/8	Whole p/p \$1772.32 / 2 hrs. (Red 1934.48, 520 Tok'o PIP)

RECEIVED 25 MAY 2018

Date/Time, File Pass to?

☐ : Prell. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 25/5- typist

Days Of Repair: 2Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS: \$ _____

Photos

Others

TOTAL

150

10

260

Report Format: merimenLump Sum / I.B.I.: (\$ 1772.32)

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

Pre-Repair Survey

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	22 May 2018 16:48 Sendback Est	22 May 2018 16:55 S\$3,706.80	23 May 2018 10:20 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured:	FUSION CAR RENTALS PTE LTD , Co. Reg. No.: 201620140G								
Main Claimant:	CTPL , Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHA3479H	Date of Loss:	22/05/2018 02:00 - :59 [32 Months and 12 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1802597	Policy/Cover Note No.:	MH000848 (Third Party Only) Coverage: 26/07/2017 - 25/07/2018						
Vehicle Reg. No. (Insured):	SLT2312P	Policy No. (Claimant):							
		Excess:	S\$1,500.00						
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 Fiona Gan Bee Song - 65926378]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 04/06/2018]								
Adj Asg. Remarks:	PLS. CHECK CONSISTENCY OF THE DAMAGE.								
ASSOCIATED MAIL RECEIVED			View All	Compose Case Mail					
There are no mail for this case.									
<input type="checkbox"/> 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	22/05/2018 13:40
Date Of Accident	22/05/2018 02:30
Exact Location Of Accident	NEIL RD NEAR UNIT NO. 47
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA3479H
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	CHAN WENG SOON
NRIC No	S8515906B
Date Of Birth	23/05/1985
Occupation	OUTDOOR
Date Of Driving Pass	16/01/2006
Driving Experience	12 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97250257
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 331 CLEMENTI AVE 2 #06-132
Postcode	120331
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	2
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

REFER 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	SLT2312P
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PAN POH WAH
NRIC/Passport Number	S7566657H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LH FRONT

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.

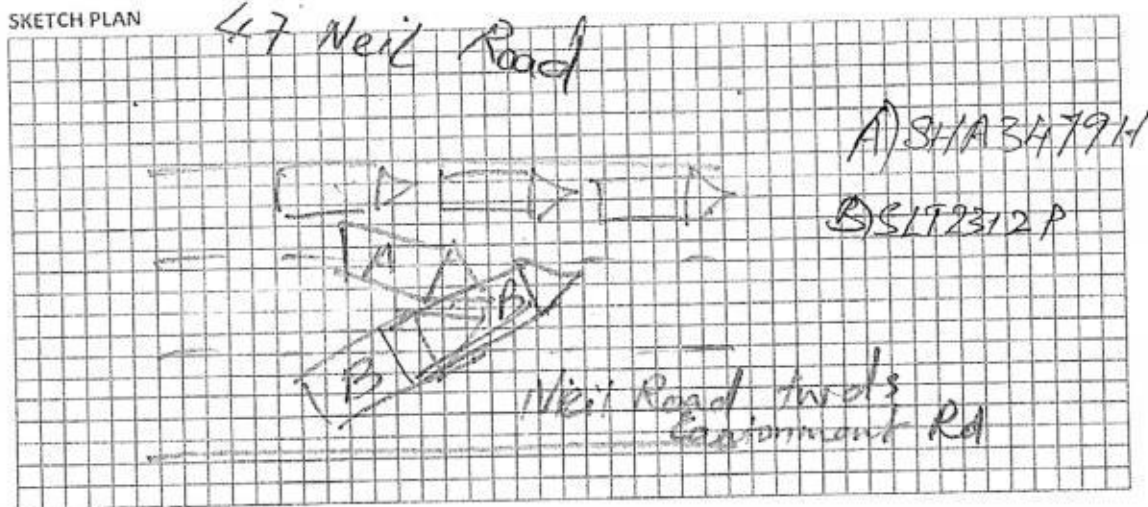
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22 May'18 @ 230 am, I am driving car A - SHA3479H at Neil Road. The weather is clear and not much traffic. After picking passenger up and I signal and filter out. Suddenly vehicle B intercepted and hit me at the side. He stopped and at the road, keep on blaming me. I keep quiet and he took all photos. After that no exchange particular.

DECLARATION

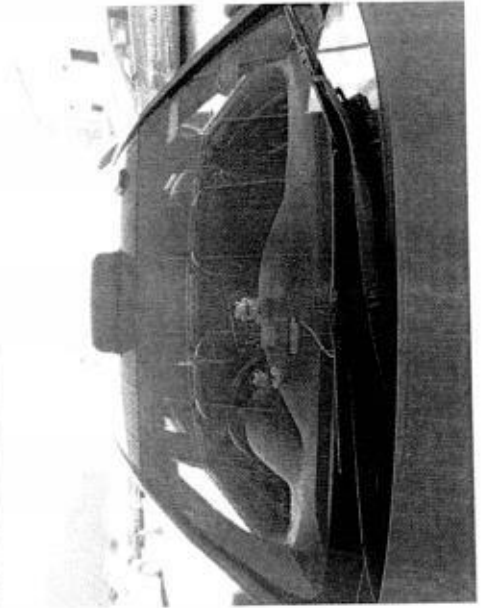
I/We declare the foregoing particulars are true in every respect.

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.:



Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO305163220

CUSTOMER

REGN NO: SHA3479H

MILEAGE

COMPANY COMFORT TRANSPORTATION PTE LTD

7/MS 7010045

CUSTOMER NO. 383 SIN MING DRIVE

ADDRESS Singapore SINGAPORE 575717

L (R) 65508755 (O)

(P)

MAKE: HYUNDAI

FUEL

E.....1/2.....F

MODEL I-40

DATE/TIME IN 22.05.2018 10:40

YR OF MANU. 10.09.2015

TARGET DATE

CHASSIS CODE KMHLB41UMGU077411

COMPLETION DATE/TIME:

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 22.05.2018

NATURE: 3P 22.05.2018

335101

S/NO	LABOR CODE	DESCRIPTION
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CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Knowledge Slip

Exit Pass

ie:
 lo.:
 cle No.: SHA3479H CHIANG

Vehicle No.: SHA3479H

is of Service Advisor

Signature/Date

Name of Service Advisor

Date

e 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

LKE

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

Singapore

Chuang

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	22/05/2018
Vehicle Reg. No.:	SHA3479H	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:	D4FDFU540143	Chassis No:	KMHLB41UMGU077411
Odometer:	335101 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	4		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	2,456.80
Miscellaneous Items	10.00
Labour	1,240.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	3,706.80
+ GST 7.00% (S\$)	259.48
Nett Amount (S\$)	3,966.28

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 22 May 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/SHA3479H/22/05/2018 16:55

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>hhl</i>	20.00	0.00	562.30 FL <i>1052.20</i>
2	1		*FRONT BUMPER BRACKET TOP RH <i>hhl</i>	20.00	0.00	*22.40 FL
3	1		*FRONT BUMPER BRACKET RH <i>hhl</i>	20.00	0.00	*24.60 FL
4	1		*HEADLAMP RH <i>X hhl</i>	20.00	0.00	*1,388.00 FL
5	1		*FRONT FENDER RH <i>X hhl</i>	20.00	0.00	*619.00 FL
6	1		*FRONT FENDER SHIELD RH <i>X hhl</i>	20.00	0.00	*169.80 FL
7	1		*FRONT FENDER RETAINER <i>X hhl</i>	20.00	0.00	*9.20 FL
8	1		*FRONT WHEEL HUB CAP RH <i>hhl</i>	20.00	0.00	*150.70 FL
9	1		*FRT FENDER ADVERTISEMENT LOGO RH <i>hhl</i>	0	0.00	*100.00 FS

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

Sub Total (S\$)	3,046.00
- List Item Discount on L Items (S\$)	589.20
Total Parts (S\$)	2,456.80

ComfortDelGro Engineering Pte Ltd/SHA3479H/22/05/2018 16:55. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

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

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING	New	560.00 300
2	SPRAY PAINTING	New	500.00 300
3	WIRING	New	50.00 11
4	TUFF KOTE	New	50.00 11
5	FRT WHEEL ALIGNMENT	New	80.00 11
Gross Labour Cost (S\$)			1,240.00

ComfortDelGro Engineering Pte Ltd/SHA3479H/22/05/2018 16:55. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Kalvin Kidey
23/5/18 1015 hrs.
2 Dgr.
P/P
Before Paint photo

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 market condition
- Third party survey done on "no win, no fee" basis
- No illegal modification allowed
- Supplier's price is subject to market survey and is subject to LKK Auto Consultants' approval

Acknowledged by Repairer

Signature:

Date:

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

JOB NO : 305163220
REGN NO : SHA3479H
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 10.09.2015
DATE/TIME IN : 22.05.2018 10:40
ACCIDENT DATE : 22.05.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-2322-A I40V3 BUMPER W LIP & FOG 1 1,052.20 20.00 841.76

0002 04-01-0103-0658-G I40VC CAP ASSY-WHEEL HUB 1 150.70 20.00 120.56

SUB-TOTAL : 962.32

JOB NATURE

0000 L MERIMEN FEE 10.00

0001 20-05 FRT FENDER ADVERTISEMENT 100.00

0002 L PANEL BEATING 300.00

0003 23-502 SPRAYPAINT ON AFFECTED AREA 400.00

SUB-TOTAL : 810.00

TOTAL : 1,772.32

AUTHORISED : YES / NO

MVA NAME & SIGNATURE

DATE :

SURVEYOR NAME & SIGNATURE

DATE :

Our Job Ref No : 305163220
Date : 22/05/18

COMFORTDELGRO ENGINEERING

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SHA3479H

Fax :

22/05/2018

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


1. The repair job shall bill to: TOKIO SLT2313P
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$962.32
 - (b) Labour Charges \$810.00
 - Total for Part-By-Part Repair Cost \$1,772.32**
 - (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 : 25/5/18

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 (Co.Reg No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/TM18009353/K1VBN2

Date: 30/05/2018

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MH000848
Claimant Vehicle No :	SHA3479H	Insured Vehicle No :	SLT2312P
Date of Loss:	22/05/2018	Nature of Claim:	TP
		Claim No:	M1802597

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHA3479H	Engine No:	D4DFDU540143
Make & Model:	HYUNDAI I40, 1.7 L CRDI AT ABS AIRBAG 4DR (A)	Chassis No:	KMHLB41UMGU077411
Reg. Date:	10/09/2015 (Man. Year: 2015)	Odometer:	335101 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:	Campeon 7 mm	Rear Left Side:	Campeon 7 mm
Front Right Side:	Campeon 7 mm	Rear Right Side:	Campeon 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,298.56	1,062.32	2,236.24	67.79
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,240.00	700.00	540.00	43.55
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,548.56	1,772.32	2,776.24	61.04
+ GST 7.00/7.00% (S\$)	318.40	124.06	194.34	61.04
Nett Amount (S\$)	4,866.96	1,896.38	2,970.58	61.04

INSPECTION

Date of Assignment:	23/05/2018	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	23/05/2018	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: 30 May 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 SHA3479H)	
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	Refer to supplementary	562.30 FL	*- FL
2	1	*FRONT BUMPER BRACKET TOP RH	Serviceable	22.40 FL	*- FL
3	1	*FRONT BUMPER BRACKET RH	Serviceable	24.60 FL	*- FL
4	1	*HEADLAMP RH	Serviceable	1,388.00 FL	*- FL
5	1	*FRONT FENDER RH	Repair	619.00 FL	*- FL
6	1	*FRONT FENDER SHIELD RH	Serviceable	169.80 FL	*- FL
7	1	*FRONT FENDER RETAINER	Serviceable	9.20 FL	*- FL
8	1	*FRONT WHEEL HUB CAP RH	Grazed	150.70 FL	*150.70 FL
9	1	*FRT FENDER ADVERTISEMENT LOGO RH	Necessary	100.00 FS	*100.00 FS
Supplementary #1					
10	1	*FRONT BUMPER COVER	Deformed	1,052.20 FL	*1,052.20 FL

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

Sub Total (\$)	4,098.20	1,302.90
- List Item Discount on L Items 20.00/20.00% (\$)	799.64	240.58
Total Parts (\$)	3,298.56	1,062.32

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 (S\$)			10.00	10.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	560.00	300.00
2	SPRAY PAINTING	New	500.00	400.00
3	WIRING	New	50.00	-
4	TUFF KOTE	New	50.00	-
5	FRT WHEEL ALIGNMENT	New	80.00	-
Gross Labour Cost (S\$)			1,240.00	700.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >