

ASS. REC. BY:

REF: CS/TMI18012460/Klv d3 n2 Special Instructions:

Sub Vender:

meimen

Kalvin

ASSIGNMENT (Office)

From (Person):

Pauline them

of

TMI

Date/Time:

9/7/18 @ 3:06pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 3948E

Insured:

SLV 7709K

at Workshop n/s:

Comfort Delgro

Tel:

6214 8300

of

59 Loyang Drive

Policy No:

MT000188

Claim No:

M1803386

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A 06/07/2018

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

3:55pm @ 9/7/18

Person Contacted:

Ng Yule phin

Vehicle:

IN

OUT

Date/Time

Action/Instruction (✓) Estimate

SHD 3948E - CS/FCI 17009246/R/vbn2

DOA: 7/05/2017

SLV 7709K - X

(08/11/13)

REF:

Surveyor: Kelvin

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspected 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: SHD 3948E Yr Regn: 29 In 21Type: M.Car / M.Cycle / Bus / Van / Lorry / 0 / Prime Mover /

Truck / Trailer or

Make: Hyundai Santa c.c. 1991Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 609156 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMHET41UMBA811917Gen. Cond: Good / 0 / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60R16

R: \_\_\_\_\_

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

TOYO / YOKO or Wulke

Front

R/Bal. 7 mmL/Bal. 7 mmD.O.A. 6/7/18Survey held at CDHE (Loyang)

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

Front o/s

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

Date / Time Action / Instruction

13/7/18 Contact U/S \$850/3h. (Red 2508.75, 750) To K.R. 4s.

RECEIVED 16 JUL 2018

Date/Time, File Pass to? ☐ : Prel. Report1) ☐ : Final Report

Date/Time, File Return to?

2) 13/7 - typist

Report Format: merimenLump Sum / I.B.I: (\$) 850/-Days Of Repair: 3Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$

Survey Fee:

Transportation:

\$ + R.S. \$

Photos

Others

TOTAL

250

10

260

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	09 Jul 2018 12:30 <a href="#">Sendback Est</a>	09 Jul 2018 12:40 <b>S\$3,108.75</b>	09 Jul 2018 15:06 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
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#### CLAIM SUBFOLDER DETAILS

Insured:	COMFORT TRANSPORTATIN PTE LTD, Co. Reg. No.: 19930821R		
Main Claimant:	COMFORT		
Vehicle Reg. No.:	SHD3948E	Date of Loss:	06/07/2018 18:00 - :59 [84 Months and 7 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M1803386	Policy/Cover Note No.:	MT000188 (Comprehensive) Coverage: 15/01/2018 - 14/01/2019
Vehicle Reg. No. (Insured):	SLV7709K	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 <b>Pauline Tham</b> ]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 18/07/2018]		

#### 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	07/07/2018 08:58
Date Of Accident	06/07/2018 18:30
Exact Location Of Accident	BLK 238 JURONG EAST ST 21 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD3948E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA
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	TANG KANG HO
NRIC No	S1763902A
Date Of Birth	12/07/1966
Occupation	OUTDOOR
Date Of Driving Pass	24/06/1988
Driving Experience	30 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96614476
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	110 06-600 TECK WHYE LANE
Postcode	680110
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 ON COLLISION
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: : MALE

#### 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	SLV7709K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MOHAMMAD HISHAM BIN ISA
NRIC/Passport Number	S8104073G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT RHT

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

### SKETCH PLAN

A = SHD3948E  
B = SLV7709K  
BIC 238 Jurong  
East S = 21  
Open Space Command

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 6/1/18 @ abt 1830 hrs, I was driving along above location. While I was turning right, suddenly a car SLV MOAR coming out from the parking lot hit the front right of my taxi. 1 Male pax on board & no one was injured at the point of accident.

## DECLARATION

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

COMFORT TRANSPORTATION PLEIN  
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.:

*Journal of Management Inquiry* 17(6)

Teo Yen Yee

**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.

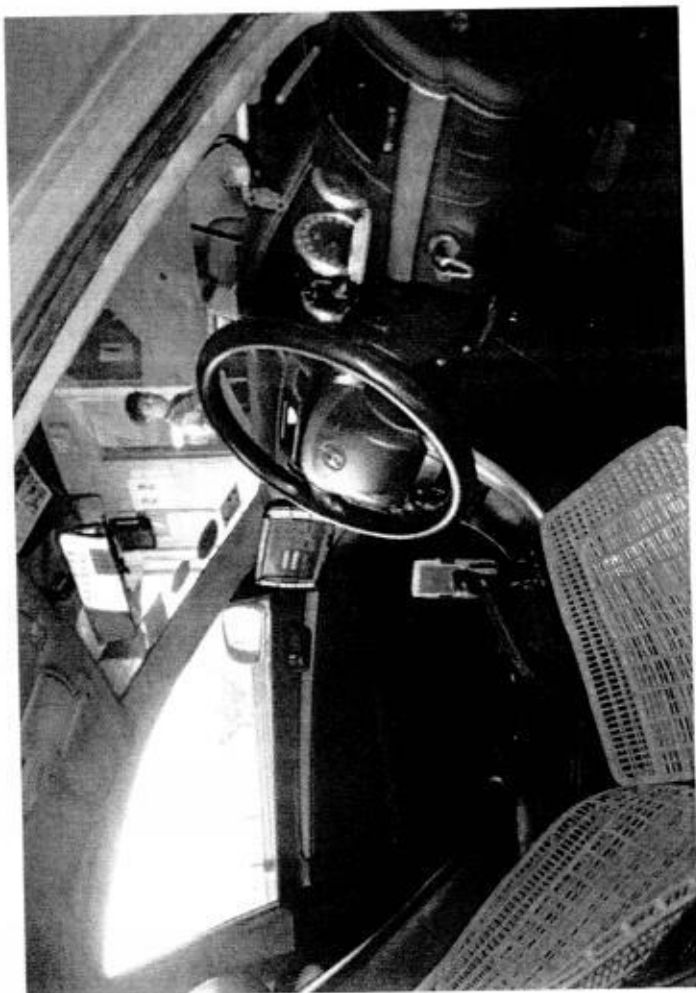
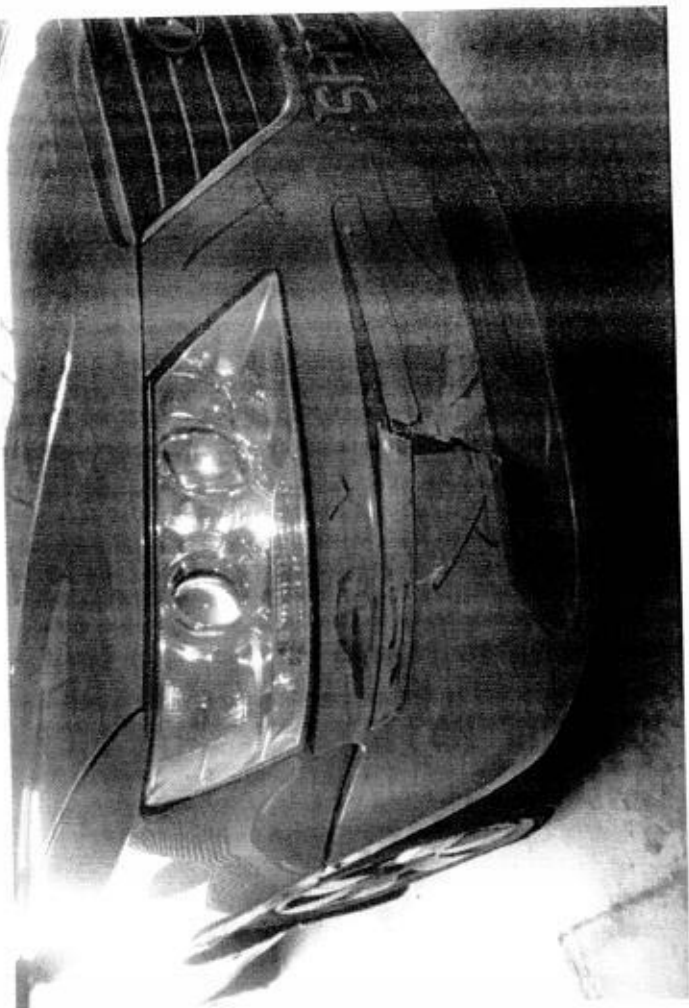
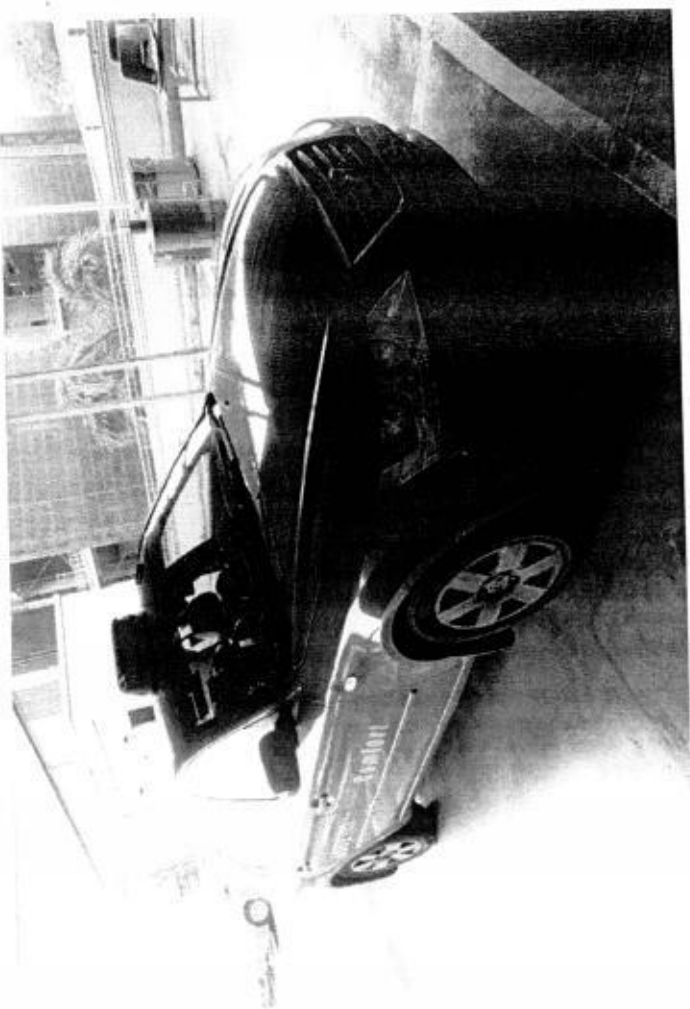
COMFORT TRANSPORTATION PTE. LTD.  
CO. REG. NO. 199303821P

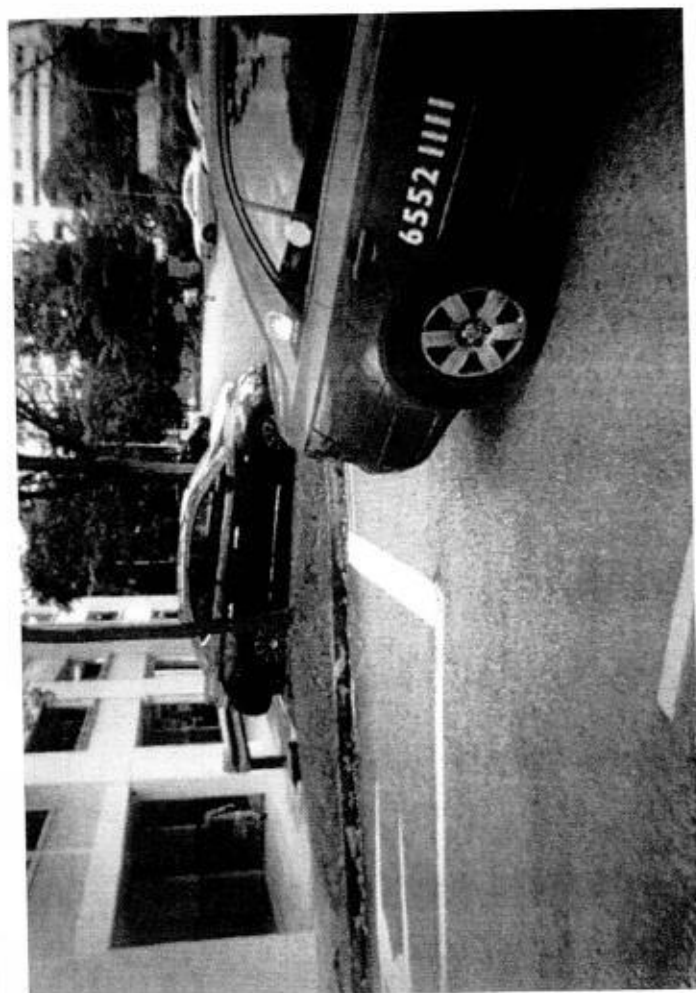
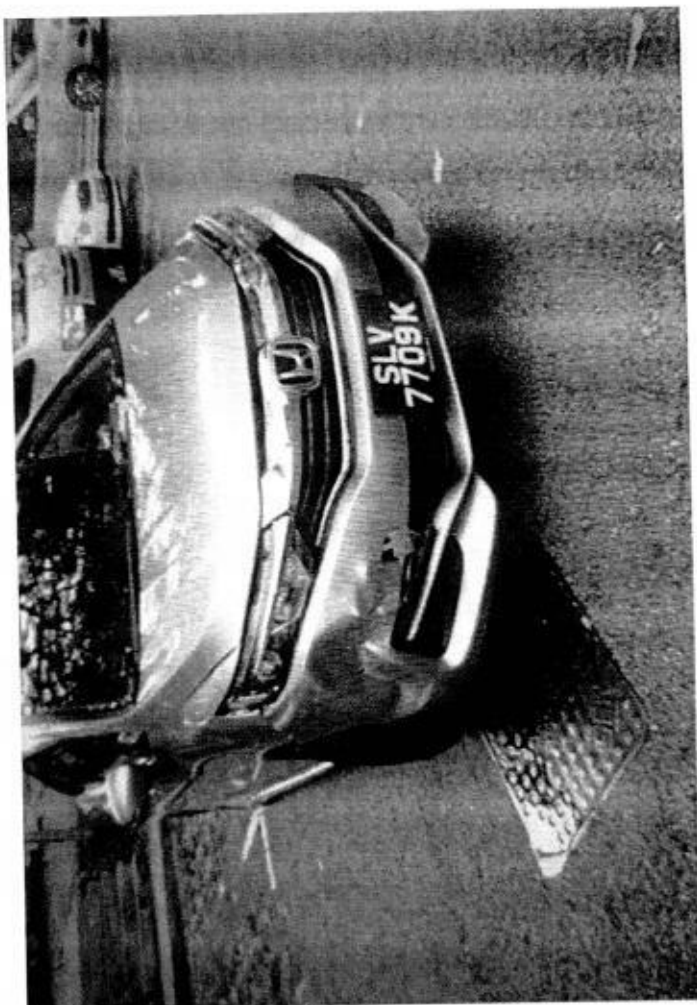
Policyholder's Signature  
Date & Time:

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

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









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

59 Loyang Drive  
Singapore 508969  
Tel: 6214 8300

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

Singapore

## PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	06/07/2018
Vehicle Reg. No.:	SHD3948E	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI SONATA, 2.0 CRDI (A)	Vehicle Reg. Date:	29/06/2011
Vehicle Colour:	BLUE	Gen Condition:	FAIR
Engine No:	D4EAB967979	Chassis No:	KMHET41VMBA811917
Odometer:	609156 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	2,498.75
Miscellaneous Items	10.00
Labour	600.00
Paintwork Labour	0.00
Towing	3358.75 0.00
Gross Total (S\$)	3,108.75
+ GST 7.00% (S\$)	217.61
Nett Amount (S\$)	3,326.36

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: 09 Jul 2018)  
 Parts: 143 HYUNDAI SONATA 2.0 CRDI (A) (Catalogue:Merimen Singapore 1.0)  
 Labour: Repairer's (Price-denominated Standard List)  
 Print Code: ComfortDelGro Engineering Pte Ltd/SHD3948E/09/07/2018 12:40  
 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 — <i>Phil</i>	20.00	0.00	*538.80 FL
2	1		*FRONT BUMPER REINFORCEMENT <i>Phil</i>	20.00	0.00	*504.10 FL
3	1		*FRONT BUMPER SPONGE <i>Phil</i>	20.00	0.00	*136.30 FL
4	1		*FRONT BUMPER GRILLE - RH <i>Phil</i>	20.00	0.00	*17.60 FL
5	1		*FRONT BUMPER MOLDING - RH <i>Phil</i>	20.00	0.00	*29.20 FL
6	1		*FRONT BUMPER BRACKET - RH <i>Phil</i>	20.00	0.00	*14.30 FL
7	1		*FRONT BUMPER RETAINER - RH <i>Phil</i>	20.00	0.00	*9.20 FL
8	10		*FRONT BUMPER CLIPS — <i>me</i>	20.00	0.00	*22.00 FL
9	1		*HEADLAMP SUPPORT PANEL <i>Phil</i>	20.00	0.00	*1,023.00 FL
10	1		*HEADLAMP - RH <i>Phil</i>	20.00	0.00	*797.69 FL
11	1		*FRONT NUMBER PLATE — <i>an</i>	0	0.00	*25.00 FS

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

<i>Front RH Fan L x Repair</i>	Sub Total (S\$)	3,117.19
<i>- List Item Discount on L Items (S\$)</i>		618.44
<i>Front Bumper x Repair</i>	Total Parts (S\$)	2,498.75

ComfortDelGro Engineering Pte Ltd/SHD3948E/09/07/2018 12:40. 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 (S\$)			10.00

## Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING	New	<del>200</del> <del>300.00</del>
2	SPRAY PAINTING	New	<del>250.00</del> 200
3	WIRING CHARGE	New	<del>50.00</del> X 1.3
Gross Labour Cost (S\$)			600.00

ComfortDelGro Engineering Pte Ltd/SHD3948E/09/07/2018 12:40. Not valid without Reference section.  
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< END OF ESTIMATES >

Larry Ng

Kah 10/07/18  
9/7/18 1330h  
3 Pys.  
L/S  
After Repair 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 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 TRANSPORTATIN PTE LTD**

Singapore

**PARTICULARS OF CLAIM**

<b>Claim Type:</b>	THIRD PARTY	<b>Ref. No:</b>	
<b>Policy No:</b>	MT000188	<b>Date of Loss:</b>	06/07/2018
<b>Vehicle Reg. No.:</b>	SHD3948E	<b>Driveable?</b>	YES
<b>Party At Fault:</b>	UNKNOWN		
<b>Make/Model:</b>	HYUNDAI SONATA, 2.0 CRDI (A)	<b>Vehicle Reg. Date:</b>	29/06/2011
<b>Vehicle Colour:</b>	BLUE	<b>Gen Condition:</b>	FAIR
<b>Engine No:</b>	D4EAB967979	<b>Chassis No:</b>	KMHET41VMBA811917
<b>Odometer:</b>	609156 KM		
<b>Paint Type:</b>			
<b>List Item Discount:</b>	20.00 %		
<b>Total Loss?</b>	NO		
<b>Est. Duration of Repair (day)</b>	3		
<b>Present Location:</b>	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

**COST OF CLAIMS**

	<b>Amount</b>
Parts	0.00
Miscellaneous Items	0.00
Labour	250.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (S\$)</b>	<b>250.00</b>
<b>+ GST 7.00% (S\$)</b>	<b>17.50</b>
<b>Nett Amount (S\$)</b>	<b>267.50</b>
<b>+ Previous Estimates (S\$)</b>	<b>3,326.36</b>
<b>Claim Total (S\$)</b>	<b>3,593.86</b>

Generated using Merimen e-Claims Internet Estimation & Adjusting System

**REPAIR DETAILS****Reference**

**Part Source:** MRM-SG      **Version:** 1.0 (Last Synchronised: 13 Jul 2018)  
**Parts:** 143      **HYUNDAI SONATA 2.0 CRDI (A) (Catalogue:Merimen Singapore 1.0)**  
**Labour:** Repairer's      (Price-denominated Standard List)  
**Print Code:** **ComfortDelGro Engineering Pte Ltd/SHD3948E/13/07/2018 14:56**  
**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****There are no new parts selected.**

ComfortDelGro Engineering Pte Ltd/SHD3948E/13/07/2018 14:56. 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

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	SPRAY PAINTING FOR FRONT FENDER - RH	New	<del>250.00</del> <sup>200</sup>
Gross Labour Cost (\$\$)			250.00

ComfortDelGro Engineering Pte Ltd/SHD3948E/13/07/2018 14:56. Not valid without Reference section.  
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&lt; END OF ESTIMATES &gt;

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305184832  
Date : 13. Jul. 2018

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


## FINALIZATION FORM


To : LKK Fax : \_\_\_\_\_  
Attn : KALVIN  
Vehicle Reg No. : SHD3948E Date of Accident: 6. Jul. 2018

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

1. The repair job shall bill to: TOKIO SLV7709K
2. The finalized amount shall be:
  - (a) Spare Parts after List discount \_\_\_\_\_
  - (b) Labour Charges \_\_\_\_\_
  - Total for Part-By-Part Repair Cost** \_\_\_\_\_
  - (c.) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: \_\_\_\_\_
  - Final Lumpsum Repair cost** \$850.00
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 : Larry Ng  
Tel : 6214 8316  
Fax : 6546 8156

Signature :   
Name : Kalvin  
Date : 13/7/18

## 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:

\_\_\_\_\_  
\_\_\_\_\_

## 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/TMI18012460/K1VD3N2

Date: 17/07/2018

## REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MT000188
Claimant Vehicle No :	SHD3948E	Insured Vehicle No :	SLV7709K
Date of Loss:	06/07/2018	Nature of Claim:	TP
		Claim No:	M1803386

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	SHD3948E	Engine No:	D4EA8669193
Make & Model:	HYUNDAI SONATA, 2.0 CRDI (A)	Chassis No:	KMHET41VMB811917
Reg. Date:	29/06/2011 (Man. Year: 2011)	Odometer:	609156 km
Colour:	Blue		
Engine Capacity:	1991 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:	Fair	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Average

## CONDITION OF TYRES

Front Tyre Size:	215/60R16	Rear Tyre Size:	215/60R16
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	2,498.75	473.64	2,025.11	81.04
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	850.00	600.00	250.00	29.41
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	3,358.75	1,083.64	2,275.11	67.74
Approved Total (Overridden) (S\$)		850.00		
(S\$)	3,358.75	850.00	2,508.75	74.69
+ GST 7.00/7.00% (S\$)	235.11	59.50	175.61	74.69
Nett Amount (S\$)	3,593.86	909.50	2,684.36	74.69

## INSPECTION

Date of Assignment:	09/07/2018	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	09/07/2018	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	3.0 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

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 17 Jul 2018)
<b>Parts:</b> 143	HYUNDAI SONATA 2.0 CRDI (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHD3948E)
<b>Validity:</b>	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
<b>Further Info:</b>	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	Deformed	538.80 FL	*538.80 FL
2	1		*FRONT BUMPER REINFORCEMENT	Serviceable	504.10 FL	*- FL
3	1		*FRONT BUMPER SPONGE	Serviceable	136.30 FL	*- FL
4	1		*FRONT BUMPER GRILLE - RH	Serviceable	17.60 FL	*- FL
5	1		*FRONT BUMPER MOLDING - RH	Serviceable	29.20 FL	*- FL
6	1		*FRONT BUMPER BRACKET - RH	Serviceable	14.30 FL	*- FL
7	1		*FRONT BUMPER RETAINER - RH	Serviceable	9.20 FL	*- FL
8	10		*FRONT BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
9	1		*HEADLAMP SUPPORT PANEL	Serviceable	1,023.00 FL	*- FL
10	1		*HEADLAMP - RH	Serviceable	797.69 FL	*- FL
11	1		*FRONT NUMBER PLATE	Cracked	25.00 FS	*25.00 FS
12	1		*FRONT RH FENDER (NPA)	Repair	-	*- FL
13	1		*FRONT BONNET (NPA)	Repair	-	*- FL
					<b>Sub Total (\$\$)</b>	<b>3,117.19 585.80</b>
					<b>- List Item Discount on L Items 20.00/20.00% (\$\$)</b>	<b>618.44 112.16</b>
					<b>Total Parts (\$\$)</b>	<b>2,498.75 473.64</b>

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

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## 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	300.00	200.00
2	SPRAY PAINTING	New	250.00	200.00
3	WIRING CHARGE	New	50.00	0.00
<u>Supplementary #1</u>				
<u>Labour Items</u>				
4	SPRAY PAINTING FOR FRONT FENDER - RH	New	250.00	200.00
Gross Labour Cost (S\$)			850.00	600.00

Report was unsubmitted during this print-out.
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&lt; END OF ESTIMATES &gt;