

INS. CASE OWNER:

CC3, LCP 180 12710, Mwa3

LKK:

IDAC:

Surveyor:

Amc

DOI:

ASSIGNMENT

11-7-18

Date / Time:

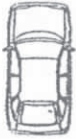
11-7-18

Registered in Merimen:

12-7-18

Pre-assign / CCU / FTE

8265512C



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A:

10-7-18

Place of Accident :

Is driver the owner? (YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SHD 33465



INSRS:

WSP:

Tel :

Liability :

RMKS:

date logy.



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SHD 33465 - CC3/LCP 180 1359 / 11/16/18 ; 08/18/18
 - CC3/MC 180 6122 / 11/16/18 ; 08/18/18
 - 15/16/18 24208 / 11/16/18 ; 08/18/18

8265512C X

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA :

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No.:

If NO or B 28, Ass. Lia :

Repair Cost:

S\$

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

(\$

x

days)

Loss of Income (LOI):

S\$

(\$

x

days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order: 3838916

JC NO.: 305186571

DMER
S
COMFORT TRANSPORTATION PTE LTD
7010045
DMER NO
383 SIN MING DRIVE
ESS
Singapore SINGAPORE 575717
65508755
(R)
(P)

REGN NO.	SHD3346S	MILEAGE
MAKE :	HYUNDAI	FUEL E.....1/2.....F
MODEL	I-40	DATE/TIME IN 10.07.2018 21:00
YR OF MANU.	21.07.2016	TARGET DATE
CHASSIS CODE	KMHLB41UMGU092187	COMPLETION DATE/TIME:

DMER CARD NO.

JOB DESCRIPTION

Accident Date: 10.07.2018
NATURE: 3P 11.07.18

3/NO	LABOR CODE	DESCRIPTION
000010	23-01	TOWING FEE

WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Receipt Slip

Exit Pass

No.: SHD3346S JU

Vehicle No.: SHD3346S

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

JU

Alc

DATE 11/7/2018 14:46

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper X Repair			\$ 603.60
	Rear Bumper Clips 10 pcs X			\$ 22.00
	Rocker Panel Outer Garnish (RH) X Repair			\$ 483.60
	Rear Wheel Hub-Cap (RH) ✓			\$ 150.70
	Front Wheel Hub Cap (RH) -			
	Rear Fender (RH) X repair SUB TOTAL			\$ 1,259.90
	LESS 20% DISCOUNTED TOTAL			\$ 251.98
	Rear Door (RH) X repair			\$ 1,007.92
	Front Door (RH) X Repair			
	Front fender (RH) X repair			
	Rear Door Comfortdelgro & Apps Sticker (RH) ✓			\$ 80.00
	Front Door Coloured Comfort Logo (RH) ✓			\$ 75.00
				\$ 155.00
	Labour Charge			
	Panel Beating			\$ 200
	Spray Painting Charge			\$ 350.00
	Tuff Kote			\$ 50.00
	Remove & Refix Reverse Sensor			\$ 120.00
	Rear Wheel Alignment			\$ 120.00
	TOTAL LABOUR			\$ 1,640.00
	ESTIMATE TOTAL			\$ 2,802.92

Kalvin LKKK

11/7/18 1540hrs.

2 hrs

PIP

After Repair photo

LKK Auto Consultants hence notify the Repainer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- 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 Reparer
Signature:
Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305186571
Date : 13/07/2018

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
: SHD3346S

Fax :

Date of Accident : 11/07/18

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

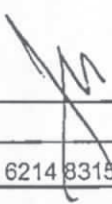
1. The repair job shall bill to: AIG --- SLG5512C
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$396.12
 - (b) Labour Charges ### \$1,340.00
 - Total for Part-By-Part Repair Cost** \$1,736.12
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20%
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 : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature : 
Name : Kalvin
Date : 16/7/18

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		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 13.07.2018
Time: 18:14:22
Page: 1

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

JOB NO : 305186571
REGN NO : SHD3346S
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 21.07.2016
DATE/TIME IN : 10.07.2018 21:00
ACCIDENT DATE : 10.07.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0658-G	I40VC CAP ASSY-WHEEL HUB	2 L	301.40	20.00	241.12
0002 28-01-0103-0003-A	(I40)FRT DOOR LOGO SONATA	1 N	75.00	2.00-	75.00
0003 28-01-0103-2013-A	I40V3 APP LOGO REAR DOOR	1 N	80.00	0.20	80.00

SUB-TOTAL : 396.12

JOB NATURE

0000 23-01	TOWING FEE	60.00
0001 L	PANEL BEATING- FRT.	200.00
0002 23-502	SPRAYPAINT ON AFFECTED AREA	1080.00

SUB-TOTAL : 1,340.00

TOTAL : 1,736.12

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 3346S

DATE 11/7/2018 14:46

MAKE :

MODEL : HYUNDAI i40

A16

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper <i>x repair</i>			\$ 603.60	
	Rear Bumper Clips 10 pcs <i>x</i>			\$ 22.00	
	Rocker Panel Outer Garnish (RH) <i>x repair</i>			\$ 483.60	
	Rear Wheel Hup-Cap (RH) <i>— hatched</i>			\$ 150.70	
	Front Wheel Hup Cap (RH) <i>— hatched</i>		\$150.70		
	<i>Rear Fender (RH) x repair</i>			\$ 1,259.90	
	<i>Rear Door (RH) x repair</i>			\$ 251.98	
	<i>Front Door (RH) x repair</i>			\$ 1,007.92	
	<i>Front fender (RH) x repair</i>				
		</			

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

of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Mainline +65 6383 6280 Facsimile +65 6280 9755

Service Centres

205 Braddell Road Singapore 579701

45 Pandan Road Singapore 609288

7 Sungei Kadut Way Singapore 728791

24 Senoko Loop Singapore 758158

59 Loyang Drive Singapore 508969

383 Sin Ming Drive Singapore 575717

320 Ubi Road 3 Singapore 408649

6553 1111

SPARK Assist

Recovery • Towing • Accident

Appointed Partners



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Date: 10/2/18 Time Received: 2130		3. Vehicle Type: ☐ Private ☒ Taxi (CTPL/CCPL) ☐ Fleet ☐ STK (Boon Lay)		4. Type of Towing: ☒ Normal Tow ☐ King Dolly ☐ Flat Bed ☐ Crane-up	
Customer: ☐ SPARK Kakis : ONG PANG MING No.: 86098693 : 24033465 Model/Colour: 140/Blue		5. Nature of Service: ☐ Jumpstart ☒ Recovery ☐ Change Tyre / Battery		6. Parts Replaced/Remarks:	
100 Punggol Field.		8. Vehicle Tow - In Workshop: ☐ Smoky Exhaust ☐ Wheel Jammed ☐ Overheating ☐ Steering Faulty ☐ Brake Faulty ☐ Alternator Faulty ☐ Starting Problem ☐ Loss Power ☒ Accident ☐ Engine Stalled ☐ Return Taxi			
Workshop: Braddell ☒ Loyang ☐ Pandan Ming ☒ Sungei Kadut ☐ Ubi Senoko ☐ Komoco (UBI / Leng Kee) ☐ Cycle & Carriage (PD)		11. Radio / CD Player: ☐ OK ☐ Faulty ☒ Not tested			
Meter Reading: _____ Level: F 1/4 1/2 3/4 E		12. Vehicle Details (if applicable): Tuck / Recovery Van: ☐ VRS ☒ QA ☐ GAO ☐ TZ ☐ YISHUN ☐ OTHERS of Driver: <u>Bar</u> No.: <u>24291m</u> Dispatch: <u>2135</u> of Arrival: <u>2200</u> Completed: <u>2200</u>			
Signature of Customer: <u>[Signature]</u>					
Invoice No.: _____					
Acknowledgement: I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, keys, spectacles, pen, etc. and that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses. Note: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.					
Date: _____ Time: _____		Signature of Customer: <u>[Signature]</u>			
WORKSHOP					
of Attending Staff/Guard: _____		Date & Time of Arrival: _____		Signature of Attending Staff/Guard: _____	

WORKSHOP COPY



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition			
1. Date: <u>10/7/18</u> Time Received: <u>2130</u>		3. Vehicle Type: ☐ Private ☒ Taxi (CTPL/CCPL) ☐ Fleet ☐ STK (Boon Lay)	
2. ☐ New ☐ SPARK Kakis Name of Customer : <u>OWN PANG MING</u> Contact No. : <u>86098693</u> Vehicle No. : <u>S4033465</u> Make / Model / Colour : <u>140 / Blue</u> Email : _____		4. Type of Towing: ☒ Normal Tow ☐ King Dolly ☐ Flat Bed ☐ Crane-up	
		5. Nature of Service: ☐ Jumpstart ☒ Recovery ☐ Change Tyre / Battery	
7. Location: <u>100 Punggol Field.</u>		6. Parts Replaced/Remarks: _____ _____	
9. Preferred Workshop: ☐ Braddell ☒ Loyang ☐ Pandan ☐ Sin Ming ☐ Sungei Kadut ☐ Ubi ☐ Senoko ☐ Komoco (UBI / Leng Kee) ☐ Cycle & Carriage (PD) ☐ Others: _____		8. Vehicle Tow - In Workshop: ☐ Smoky Exhaust ☐ Wheel Jammed ☐ Overheating ☐ Steering Faulty ☐ Brake Faulty ☐ Alternator Faulty ☐ Starting Problem ☐ Loss Power ☒ Accident ☐ Engine Stalled ☐ Return Taxi	
10. Odometer Reading : _____ Fuel Level : ☐ F ☐ 1/4 ☐ 1/2 ☐ 3/4 ☐ E		11. Radio / CD Player ☐ OK ☐ Faulty ☒ Not tested	
Job Attended			
12. Tow Truck / Recovery Van : ☐ VRS ☒ QA ☐ GAO ☐ TZ ☐ YISHUN ☐ OTHERS TOWING Name of Driver : <u>Sare</u> Vehicle No. : <u>421291M</u> Time Dispatch : <u>2135</u> Time of Arrival : <u>2200</u> Time Completed : <u>2220</u>		 # : Cracked X : Dented / : Scatched O : Missing _____ Signature of Customer	
Cash Invoice Details (if applicable)			
13. Cash Invoice No. : _____			
Customer Acknowledgement			
a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc. b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses. c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.			
_____ Date _____ Time _____		_____ Signature of Customer _____	
14. WORKSHOP			
_____ Name of Attending Staff/Guard _____		_____ Date & Time of Arrival _____	
		_____ Signature of Attending Staff/Guard _____	