

INS. CASE OWNER:

LKK:

IDAC:

Surveyor:

DOI:

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :S\$

D.O.A :

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



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SHC 14505-X; FBE 8581L-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:

(08/11/13) wef

ASS. REC. BY:

Kahm

REF:

AXA

eab

ASSIGNMENT

From:

Date: 27/7/18

Estimated Cost:

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

To Inspect Vehicle No:

SHC 1450S

at Workshop m/s

Comfort Delgro
59 Loyang Drive

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 ^{sup}

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

SHC 1450S

Yr Regn:

7 Sep / 2017

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

Truck / Trailer or

Make:

Toyota Prius

c.c

1798

Colour

Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

132262

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTPKB3FY4035 63954

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195/65R15

R:

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

TOYO / YOKO or

Wentik

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

25/7/18

D.O.I.

27/7/18

Survey held at

CPHE (Layang)

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

Ms. Bk.

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

S + RS, SI

Photos

Others

TOTAL

Report Format :

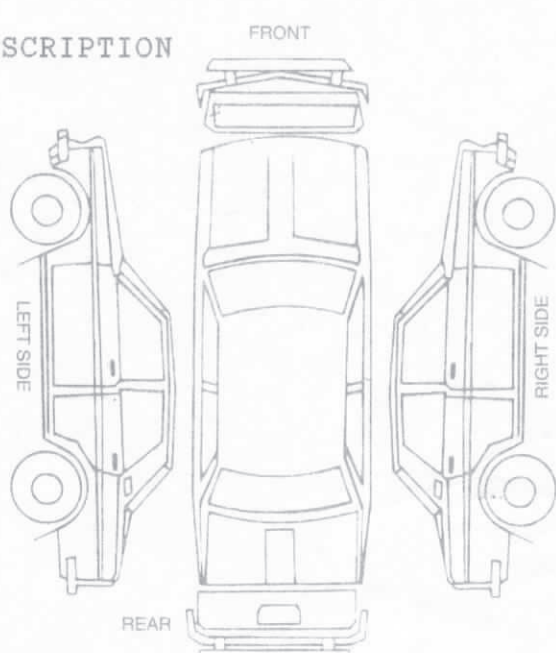
Lump Sum / I.B.I: (\$)

P/P

Team: ARC Repair TP(CLS0)1	JOB CARD	Sales Order:	JC NO.: 305192563
STOMER	REGN NO.: SHC1450S	MILEAGE	
MS COMFORT TRANSPORTATION PTE LTD	MAKE: TOYOTA	FUEL	
STOMER NO. 7010045	MODEL	DATE/TIME IN	
DRESS 383 SIN MING DRIVE	PRIUS HYBRID(G4)	26.07.2018 12:30	
Singapore SINGAPORE 575717	YR OF MANU	TARGET DATE	
65508755 (R) (O)	07.09.2017		
	CHASSIS CODE	COMPLETION DATE/TIME:	
COUNT CARD NO.	JTDKB3FU403563954		

Accident Date: 25.07.2018
NATURE: 3P 25.07.18

JOB DESCRIPTION

S/NO	LABOR CODE	DESCRIPTION
		

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR	CUSTOMER'S SIGNATURE
Acknowledgement Slip	Exit Pass
Vehicle No.: SHC1450S	Vehicle No.: SHC1450S
Signature/Date	Name of Service Advisor
returned to Service Reception upon collection	To be kept by Security Guard

REPAIR ESTIMATE

26/7/2018 15:50

AKH
JH.

VEHICLE NO : SHC 1450S

MAKE :

MODEL : TOYOTA PRIUS

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT	
PANEL SUB-ASSY, FRONT DOOR, LH <i>to repair</i>			\$ 1,264.00	
REAR TYRE RIM (LH) ✓			\$ 1,555.00	
<i>Rear Door (LH) ✓</i>				
SUB TOTAL			\$ 2,819.00	
LESS 25%			\$ 704.75	
DISCOUNTED TOTAL			\$ 2,114.25	
REAR DOOR COMFORT & APPS STICKER ✓			\$ 80.00	NETT
<i>Front Door sticker -</i>				
LABOUR CHARGE				
Panel Beating			\$ 850.00	
Spray Painting Charge			\$ 800.00 600	
Tuff Kote			\$ 50.00	20
Transfer of Door			\$ 120.00	50
TOTAL LABOUR			\$ 1,520.00	
ESTIMATE TOTAL			\$ 3,714.25	

Kahm LKKK
 27/7/18 1026h
 2 B32
 P/P
 Before Part 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:

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.

Our Job Ref No : 305192563
Date : 30/07/2018

COMFORTDELGRO ENGINEERING

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
: SHC1450S
Date of Accident : 25/07/2018

Fax :

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

1. The repair job shall bill to: AXA --- FBE8581L
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$2,312.00
 - (b) Labour Charges ### \$1,070.00
 - Total for Part-By-Part Repair Cost \$3,382.00
 - (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 : Kalin
Date : 31/7/18

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: Final Amount Subject to Insurance Approval

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 30.07.2018
Time: 17:51:09
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 : 305192563
REGN NO : SHC1450S
MILEAGE : 0000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(G4)
DATE OF REGN : 07.09.2017
DATE/TIME IN : 26.07.2018 12:30
ACCIDENT DATE : 25.07.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0302-0596-G	PRIG4 PANEL SUB-ASSY RR D	1	1,221.30	25.00	915.97
0002 03-01-0302-2020-G	PRIG4 WHEEL DISC	1	1,555.00	25.00	1,166.25
0003 28-01-0103-2013-A	I40V3 APP LOGO REAR DOOR	1 N	80.00	2.50-	80.00
0004 28-01-0103-0003-A	(I40)FRT DOOR LOGO SONATA	1 N	75.00	0.25	75.00
0005 04-01-0302-2297-G	PRIG4 EMBLEM SIDE PANEL (	1	86.50	25.00	64.87
0006 28-01-0302-2017-A	PRIVC FUEL TANK LID (PETR	1 N	10.00	0.00	10.00

SUB-TOTAL : 2,312.09

JOB NATURE

0000 L	PANEL BEATING- FRT.	400.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	600.00
0002 20-00	TUFF COAT ON AFFECTED PARTS.	20.00
0003 L	TRANSFER DOOR PART	50.00

SUB-TOTAL : 1,070.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 30.07.2018

Time: 17:51:09

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 : 305192563
REGN NO : SHC1450S
MILEAGE : 0000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(C
DATE OF REGN : 07.09.2017
DATE/TIME IN : 26.07.2018 12:30
ACCIDENT DATE : 25.07.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 3,382.09

MVA NAME & SIGNATURE
DATE:

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE: