

(08/11/13)

Surveyor: Kalvin

REF:

NS/INC18016049/Klsb

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s _____

of _____

Insured: YP 9303LPolicy No: 5103257693 330718 - 220719

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 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:

SHD 44030

Yr Regn:

26 Zy, 2012

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

Truck / Trailer or

Make:

Hyundai Santac.c. 189

Colour:

Blue

A/C: Insured / Std / NI / NA

Sp. Reading:

458922

T/Radio: Insured / Std / NI / NA

Eng/No:

Ch/No:

K M H E T 4 V M C A 8 2 7 9 0 8Gen. Cond: Good / F / Poor / BurntSteering: In order / J / Jammed / Leaked / Burnt orBrake: In order / J / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD / Air Rim or

Tyre Size: F:

215/60R16

R:

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

TOYO / YOKO or

Harlow K

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

29/8/12

D.O.I.

31/8/12

Survey held at

(DHE (Loyang))

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

Front / Rear

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

Date / Time Action / Instruction

Kalvin informed the taxi repaired by chunru already. cancel this case

INC4227/9

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS, \$

Photos

Others

TOTAL

Report Format: _____

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



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18016049/K1sb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 03-09-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 9303L	Veh. Inspected	SHD 4403D
Policy No.	5102257693	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	31/08/2018

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	29/08/2018	Inspection Date	31/08/2018
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.

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#) [Change Password](#) [Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="29/08/2018 17:21"/>
Vehicle No.(For Motor)	<input type="text" value="YP9303L"/>	Certificate Number	<input type="text"/>

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5102257693		LIAN SENG HIN TRADING CO (PTE) LTD	197100813W	GCV	Preferred Workshop Plan	YP9303L	Virtual Insured	23/07/2018	22/07/2019

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order: 3852748

JO NO.: 305206785

STOMER
 /MS COMFORT TRANSPORTATION PTE LTD VARS
 STOMER NO. 7010045
 DRESS 383 SIN MING DRIVE
 Singapore SINGAPORE 575717
 65508755 (O)

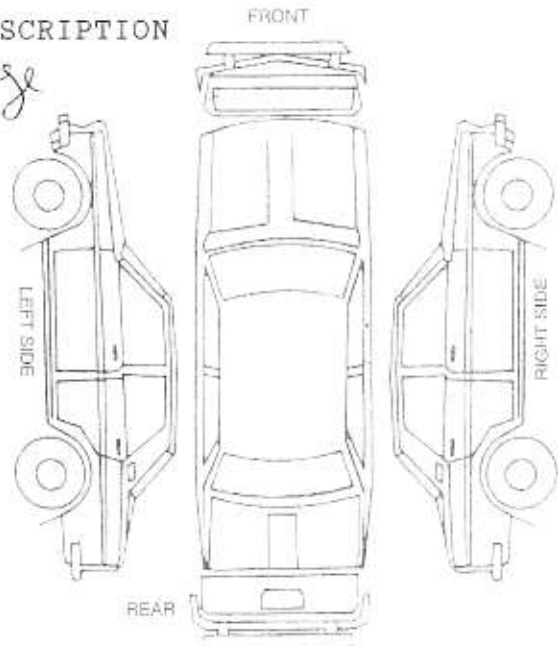
REGN NO.: SHD4403D	MILEAGE
MAKE: HYUNDAI	FUEL E. 1/2
MODEL SONATA	DATE/TIME IN 29.08.2018 15:50
YR OF MANU 26.07.2012	TARGET DATE
CHASSIS CODE KMHET41VMCA827908	COMPLETION DATE/TIME

ICOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 29.08.2018
 NATURE: 3P 29.08.2018

S/NO LABOR CODE DESCRIPTION
 NTUC - Rear and front damage



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Knowledge Slip

Exit Pass

Vehicle No.: SHD4403D
 LARRY

Vehicle No.: SHD4403D

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

Larry

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	3821R

Vehicle Details

Vehicle No.:	SHD4403D
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Sep 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO
Primary Colour:	Blue
Manufacturing Year:	2012
Engine No.:	D4EAC137202
Chassis No.:	KMHET41VMCA827908
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$14,789.00
Original Registration Date:	26 Jul 2012
First Registration Date:	26 Jul 2012
Transfer Count:	0
Actual ARF Paid:	\$14,789.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Jul 2020
PARF Rebate Amount:	\$9,612.00

Intended COE Rebate Details

COE Expiry Date:	25 Jul 2020
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
QP Paid:	\$38,490.00
COE Rebate Amount:	\$9,105.00
Total Rebate Amount:	\$18,717.00

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 03 Sep 2018

OK

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	30/08/2018 11:23
Date Of Accident	29/08/2018 15:50
Exact Location Of Accident	T JUNCTION OPF UPP BT TIMAH RD TWDS WOODLANDS RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4403D
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	SONATA-2.0 (A)
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
Driver	
Name of Driver	TOH THIAM HOCK
NRIC No	S1446795E
Date Of Birth	11/10/1960
Occupation	OUTDOOR
Date Of Driving Pass	14/07/1978
Driving Experience	40 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97429363
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 801C KEAT HONG CLOSE #12-43
Postcode	683801
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	CHAIN 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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HONG KAH NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 370 BUKIT BATOK STREET 31 , POSTCODE: 650370 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5679999 - FAX NO: 65652508
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20180829/2169

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	YP9303L
Vehicle Make/Model/Colour	ISUZU LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LOO CHEE MENG
NRIC/Passport Number	F1199981Q
Contact Number	93828302
Address	
Postcode	
Insurance Company Name	

Nature Of Damage: FRONT

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number: SJY1577X
Vehicle Make/Model/Colour: MERCEDES
Details Of Properties:
Vehicle Category: PRIVATE CAR
Name of Driver: HOO KOK PENG
NRIC/Passport Number: S8111643A
Contact Number: 97494939
Address:
Postcode:
Insurance Company Name:
Nature Of Damage: REAR
No. Of Passenger (Including Driver):

DETAILS OF INJURED PERSON 1

Name: TOH THIAM HOCK
Approximate Age:
Injuries Sustain: NECK AND BACK
Injured person in which vehicle?: SHD4403D
Were seat belts worn?: YES
Was this injured conveyed to hospital by ambulance?: YES
Address:
Postcode:

SKETCH PLAN

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

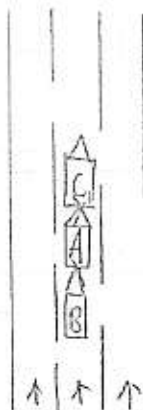
Policyholder's Signature
Date & Time:


Driver's Signature
(if driver is not the policyholder)
Date & Time: 30.08.2018
@11:30 hrs


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

Sketch Plan Pg. 2

SKETCH PLAN



A - SHD 4403D
B - YP 9303L
C - SJY 1577X

Along T Junction of Upper Bukit Timah Road TWDS Woodlands Rd And Gombak Dr

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

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

Policyholder's Signature _____
Date & Time: _____

Driver's Signature _____
(If driver is not the policyholder)
Date & Time: 30.08.2018
@11:30 hrs

Reporting Centre Personnel's Signature
Name: Peggy Chow
NRIC/FIN No: _____



**SINGAPORE
POLICE FORCE**



T/20180829/2169

1 of 4

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

Report No. T/20180829/2169

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/08/2018 21:25	Vide Report No.:	Station Diary No.: 28
--------------------------------------------	------------------	--------------------------

Informant's Particulars

Name of Informant: TOH THIAM HOCK			Address: APT BLK 801C KEAT HONG CLOSE #12-43 SINGAPORE 683801	
ID Type / ID No.: NRIC NO / S1446795E			Contact No.:	Mobile: 97429363
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 57	Date of Birth: 11/10/1960	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3,4,5	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 29/08/2018 15:50	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 UPPER BUKIT TIMAH ROAD WOODLANDS ROAD After traffic light junction of Cashew Road				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Chain reaction accident				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD4403D	COMFORT TAXI				Seriously Damaged	0
SJY1577X	Car					0
YP9303L	Lorry					0



**SINGAPORE
POLICE FORCE**



T/20180829/2169

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Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

Report No. T/20180829/2169

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TOH THIAM HOCK	ID No.	S1446795E
Related Vehicle	SHD4403D (COMFORT TAXI)	Contact No.	97429363
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	29/08/2018	Date Discharge	29/08/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	HOO KOK PENG	ID No.	S8111643A
Related Vehicle	SJY1577X (Car)	Contact No.	97494939
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LOO CHEE MENG	ID No.	F1199981Q
Related Vehicle	YP9303L (Lorry)	Contact No.	93828302
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 29/08/2018 at about 1550hrs, I was driving my Comfort Taxi SHD4403D along Upp Bt Timah Road towards Woodlands Rd. As I was approaching the traffic light junction after the Junction of Cashew Road, the traffic light turned red and I slowed down to a stop at the 2nd lane. At that point of time I noticed a black Mercedes Benz SJY1577X in front of me. As I was waiting for the Green light to come on, I suddenly felt a strong impact on my rear. The impact was strong enough that it pushes my taxi forward and hit onto the car in front of me. At that point of time, I felt pain on my back and neck. I managed to exit the taxi to take a look what had happened. I then realized that the impact from the rear was a collision from a lorry, YP9303L. The impact from the lorry caused my rear windscreen to be shattered and the rear



SINGAPORE
POLICE FORCE



T/20180829/2169

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Report No. T/20180829/2169

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

CONTINUATION OF REPORT

part was smashed. For the front, there are some scratches and dents due to the impact on the front vehicle. I managed to exchange particulars with the drivers and took some pictures of the damages. Shortly after, an ambulance arrived and conveyed me to Ng Teng Fong Hospital. I was diagnosed with neck and back pain initially. I was also issued 3 days of MC and to return for more follow up if required. As for my taxi, it had to be towed away. I wish to add on that I have informed my company regarding the accident. I wish to add also that my vehicle has an In Car camera and it is recording.



SINGAPORE
POLICE FORCE



T/20180829/2169

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Report No. T/20180829/2169

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

J/

Signature:

Sgt 2 MUHAMMAD NORHAZREEN SHAH BME
HARIZANINGAPORE POLICE FORCE

Signature Of Informant:

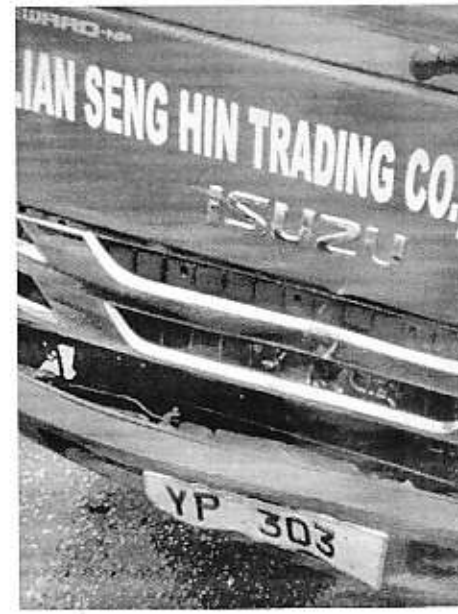
Signature Of Interpreter:
Not applicable

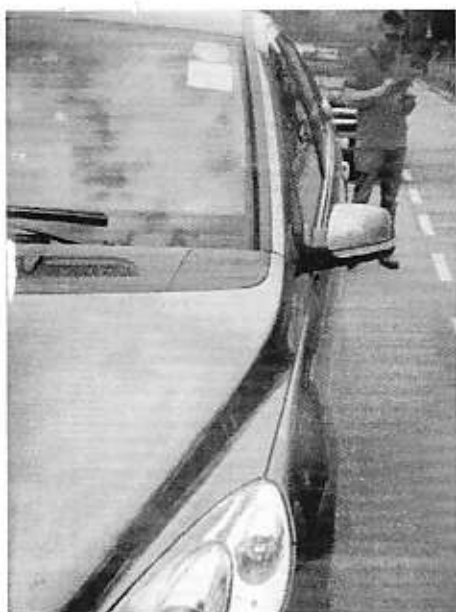
Date/Time:
29/08/2018 21:25

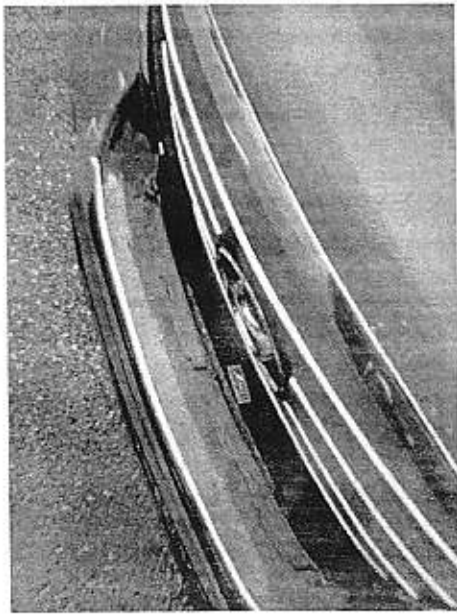
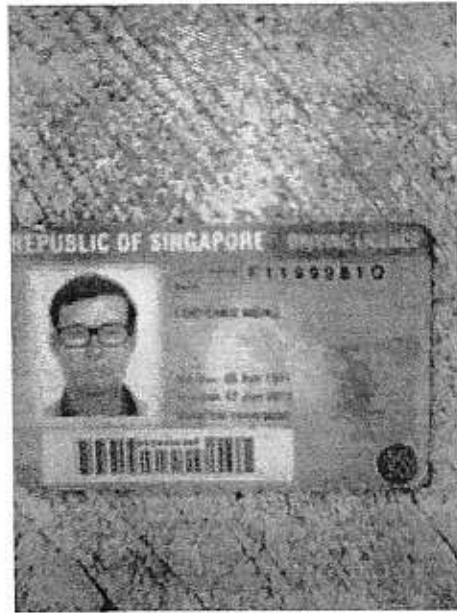
Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt RAZIZ BIN TAHAR
Contact No.: 65476200

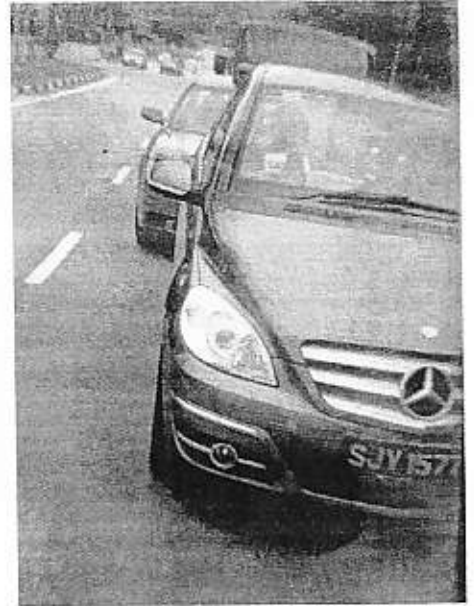
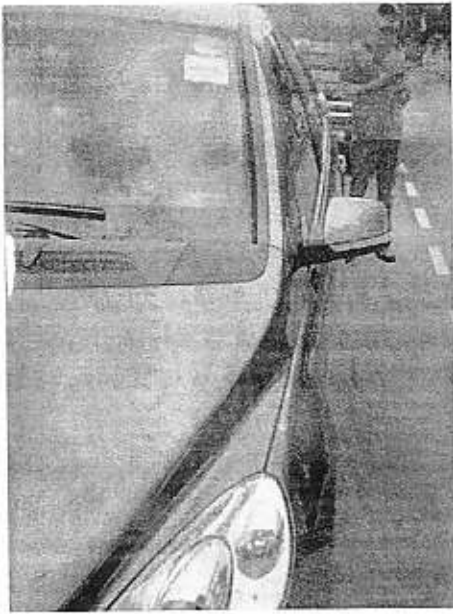
Classification Of Case:

Authentication Stamp
NP168









COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 4403D

DATE 31/8/2018 14:54

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Bonnet <i>X repair</i>			\$ 1,151.80	
	Bonnet Moulding ✓			\$ 120.90	
	Bonnet Lock ✓			\$ 48.80	
	Radiator Grille ✓			\$ 282.10	
	Radiator Grille U Moulding ✓			\$ 108.90	
	Front Bumper Cover ✓			\$ 538.80	
	Front Bumper Sponge ✓			\$ 136.30	
	Front Bumper Reinforcement ✓			\$ 504.10	
	Front Bumper Bracket Top (LH/RH) ?	\$	22.40	\$ 44.80	
	Front Bumper Protector (LH/RH) <i>X 1/2</i>	\$	29.20	\$ 58.40	
	Headlamp Support Panel Assy <i>X</i>			\$ 1,023.00	
	Headlamp (LH/RH) <i>LH ✓ RH ?</i>	\$	797.90	\$ 1,595.80	
	Radiator ?			\$ 814.80	
	Radiator Fan Blade, Cowling, Motor Assy ?			\$ 651.30	
	Radiator Bracket ?	\$	6.20	\$ 12.40	
	Horn Unit (RH) ?			\$ 83.10	
	Front Fender (RH) <i>X 1/2</i>			\$ 593.00	
	Front Fender Shield (RH) <i>X</i>			\$ 86.00	
	Front Fender Retainer <i>X</i>			\$ 9.20	
	Aircon Condenser ?			\$ 1,089.90	
	Front Door Mirror (RH) <i>X</i>			\$ 545.50	
	Inter Cooler ?			\$ 771.50	
	Inter Cooler Mounting (2 PCS) ?			\$ 24.80	
	SUB TOTAL			\$ 10,295.20	
	LESS 20%			\$ 2,059.04	
	DISCOUNTED TOTAL			\$ 8,236.16	
	Front Number Plate <i>X</i>			\$ 25.00	Nett
	Front No Plate Trim Cover <i>X</i>			\$ 30.00	Nett
	Front Fender Advertisement Logo (RH) <i>X</i>			\$ 100.00	Nett
				\$ 155.00	
	Labour Charge				
	Panel Beating			\$ 850.00	<i>400</i>
	Spray Painting Charge			\$ 750.00	<i>400</i>
	Wiring Charge			\$ 30.00	<i>20</i>
	Tuff Kote			\$ 50.00	<i>X</i>
	Remove/Refix Aircon & Refill Gas			\$ 150.00	<i>?</i>
	TOTAL LABOUR			\$ 1,830.00	
	ESTIMATE TOTAL			\$ 10,221.16	
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 PTE LTD

VEHICLE NO : SHD 4403D

DATE 31/8/2018 15:04

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid ✓			\$ 1,349.50
	Boot Lid Rubber ✓			\$ 110.90
	Boot Lid Hinge (LH/RH) ✓		\$ 170.60	\$ 341.20
	Boot Lid Lock Upper ✓			\$ 132.10
	Boot Lid Lock Lower ✓			\$ 30.30
	Boot Lid Sonata Plate ✓			\$ 43.60
	Boot Lid Hyundai Plate ✓			\$ 24.20
	Boot Lid 'H' Emblem ✓			\$ 26.10
	Boot Lid CRDI Plate ✓			\$ 22.70
	Boot Lid Lamp (LH/RH) ✓	\$	230.20	\$ 460.40
	Licence Lamp (LH/RH) ✓	\$	32.50	\$ 65.00
	Boot Lid Trimboard ✓			\$ 165.40
	Boot Lid Trimboard Clips (10pcs) ✓			\$ 11.00
	Rear Bumper ✓			\$ 578.40
	Rear Bumper Reinforcement ?			\$ 483.30
	Rear Bumper Clip ✓			\$ 22.00
	Rear Bumper Bracket (LH/RH) ?	\$	49.00	\$ 98.00
	Rear Bumper Sponge ?			\$ 137.40
	Rear Bumper Under Cover ?			\$ 185.80
	Rear Bumper Protector (LH/RH) ?	\$	38.00	\$ 76.00
	Tail Lamp (LH/RH) LH ✓ RH ?	\$	344.00	\$ 688.00
	Tail Lamp Quarter Panel (LH) ✓			\$ 93.80
	Rear Panel ✓			\$ 391.80
	Rear Panel Garnish ✓			\$ 95.80
	Spare Tyre Holder ?			\$ 27.60
	Tail Lamp Panel Top (LH/RH) LH ✓ RH x repd	\$	217.40	\$ 434.80
	Spare Tyre Panel x repd			\$ 863.00
	Spare Tyre Panel Cushion ?			\$ 200.30
	Rear Towing Hook ?			\$ 135.30
	Member Assy- Rear Floor Centre x repd			\$ 163.60
	Panel Assy-Rear Floor Side (LH/RH) x repd			\$ 88.55
	Rear Floor Chassis Member (LH/RH) x repd	\$	1,280.50	\$ 2,561.00
	Rear Fender (LH/RH) LH ✓ RH x repd	\$	1,935.90	\$ 3,871.80
	Rear Fender Inner Lining (LH/RH) ?	\$	74.10	\$ 148.20
	Rear Fender Corner Hardboard Cover (LH) ?			\$ 204.30
	Rear Fender Trim Board (LH/RH) ?	\$	180.90	\$ 361.80
	Rear Windscreen Glass ✓			\$ 639.00
	Rear Windscreen Moulding ✓			\$ 60.00
	Speaker Panel ?			\$ 695.60
	Speaker Panel Air Duct ?			\$ 94.30
	SUB TOTAL			\$ 16,181.85
	LESS 20%			\$ 3,236.37
	DISCOUNTED TOTAL			\$ 12,945.48

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Boot Lid Comfort Logo & Tel No. Sticker ✓			\$ 30.00	Nett
	Boot Lid Advertisement Logo ✓			\$ 100.00	Nett
	Rear No. Plate ✓			\$ 25.00	Nett
	Rear Bumper Reverse Sensor ✓			\$ 135.70	Nett
	Rear Bumper Rubber Mat ✗			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH) ✓		\$ 100.00	\$ 200.00	Nett
	Rear Windscreen Sealant ✓			\$ 46.00	Nett
				\$ 586.70	
	Labour Charge				
	Panel Beating			\$ 2,000.00 ¹²⁰⁰	
	Spray Painting Charge			\$ 1,500.00 ¹²⁰⁰	
	Wiring Charge			\$ 50.00 ²⁰	
	Tuff Kote			\$ 50.00 ²⁰	
	Rear Chassis Alignment Charge			\$ 400.00 ¹⁰⁰	
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00 ⁵⁰	
	Remove/Refix Rear Windscreen Glass			\$ 120.00 ¹⁰⁰	
	Remove/Refix Reverse Sensor			\$ 120.00 ³⁰	
	TOTAL LABOUR			\$ 4,390.00	
	ESTIMATE TOTAL			\$ 17,922.18	
<p> <i>Kali 1664</i> <i>3/8/16 1600h</i> <i>8 Days</i> <i>4/3</i> <i>After Repair photo</i> <i>check book value</i> </p>					
<p> LKK Auto Consultants hence notify the Repairer of the following: • To resurvey before after spray painting • To display damaged part during survey • Parts prices are subject to market basis • Third party survey is not allowed • No illegal modification to vehicle and • Supplier of parts and materials must be approved by us company Acknowledged by Repairer Signature: _____ Date: _____ </p>					
<p>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.</p>					