15/5/2010

INS. CASE OWNER: CC 3, CTI 180 18387, K fa3

LKK:

IDAC:

ASSIGNMENT

Surveyor: Ank

DOI: 9-10-18

Date / Time : 9-10-18

Registered in Merimen: ✓

Pre-assign / CCU / FTE GBH 7281T

Insured Vehicle No. :		Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 9/10/18	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**

1/8

SH9329B → → →

INSRS: WSP: Ohio Tel : Liability : 10/90 . RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SH9329B = NS/WC1701103?/ ...; DOA 3/6/17
	GBH7281T } NA/CT1180182944/24 ; DOA 9/10/18

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$		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ (e.g. Tow/ Independent)		2) Report Format:
Legal Cost	S$		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)

Surveyor: Kelvin

REF: 1838X/16

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Insp. 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 Rport: _____ 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SH 9329B Yr Regn: 17 Mar 2016

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

Make: Hyundai Sonata c.c 1685

Colour Blue A/C: Insured / Std / NI / NA

Sp.Reading 260025 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHLB41GMGU085577

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: 205/60R16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Campron

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	9/10/18	D.O.I.	9/10/18

Survey held at CDHE (Loyang)

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

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

Date / Time	Action / Instruction
	CTZ
	P/P

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Report Format : _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Survey Fee:	
Transportation:	
$ + RS $ SI	
Photos	
Others	
TOTAL	

OMFORTDELGRO
ENGINEERING
member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701
Mainline : +65 6383 6280 Facsimile : +65 6280 9755
Workshops
51 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
320 Ubi Road 3 Singapore 408669
24 Senoko Loop Singapore 758156
7 Sungei Kadut Way Singapore 728791
501 Yishun Industrial Park A Singapore 768732

China Taipei

Date/Time: 09.10.2018 15:57 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305223764

OMER

OMER NO. 7010045

SS COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755 (O)

(P)

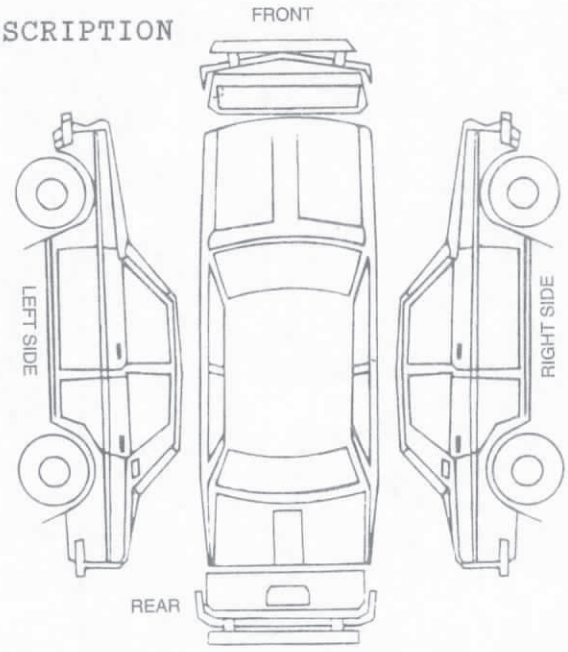
UNT CARD NO.

REGN NO.: SH 9329B	MILEAGE
MAKE : HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 09.10.2018 14:35
YR OF MANU. 17.03.2016	TARGET DATE
CHASSIS CODE KMHLB41UMGU085577	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 09.10.2018
NATURE: 3P 09.10.18

S/NO	LABOR CODE	DESCRIPTION



CKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ledgement Slip

No.: SH 9329B LIMTS

f Service Advisor

Signature/Date

turned to Service Reception upon collection

Exit Pass

Vehicle No.: SH 9329B

Name of Service Advisor

Date

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE China Taiping

Date: 09.10.2018
Time: 16:14:14

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

JOB NO	:	305223764
REGN NO	:	SH 9329B
MILEAGE	:	0000000000
MAKE	:	HYUNDAI
MODEL	:	I-40
DATE OF REGN	:	17.03.2016
DATE/TIME IN	:	09.10.2018 14:35
ACCIDENT DATE	:	09.10.2018

	JOB / PARTS DESCRIPTION	QTY	IND UNIT-PRICE	DISC%	AMOUNT
PART REQUISITION					
0001 04-01-0103-0579-G	REAR BUMPER	1	553.00	20.00	442.40
0002 04-01-0103-0738-G	REAR BUMPER UNDER COVER	1	228.00	20.00	182.40
0003 04-01-0101-0111-G	REAR BUMPER CLIPS	10 L	22.00	20.00	17.60
0004 04-01-0103-0577-G	BOOTLID	1	2,174.90	20.00	1,739.92
0005 04-01-0103-0789-G	BOOTLID EMBLEM-HYUNDAI	1	35.90	20.00	28.72
0006 04-01-0103-0787-G	BOOTLID EMBLEM-I40	1	27.80	20.00	22.24
0007 04-01-0103-0786-G	BOOTLID EMBLEM-CRDI	1	27.80	20.00	22.24
0008 04-01-0103-0800-G	BOOTLID EMBLEM-H	1	28.70	20.00	22.96
0009 28-01-0103-0005-A	BOOTLID COMFORTDELGRO	1	20.00	~~2.00~~	20.00
0010 28-01-0103-0006-A	BOOTLID 65521111	1	10.00	~~0.20~~	10.00
0011 04-01-0103-1150-A	REAR BUMPER CHROME PLATE	1	50.00	~~0.02~~	50.00
0012 09-01-9999-0068-A	REVERSE SENSOR	1	135.70	~~0.00~~	135.70

SUB-TOTAL : 2,694.18

JOB NATURE

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE China Taiping

Date: 09.10.2018
Time: 16:14:14
Page: 2/2 IS

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

JOB NO	:	305223764
REGN NO	:	SH 9329B
MILEAGE	:	0000000000
MAKE	:	HYUNDAI
MODEL	:	I-40
DATE OF REGN	:	17.03.2016
DATE/TIME IN	:	09.10.2018 14:35
ACCIDENT DATE	:	09.10.2018

	JOB / PARTS DESCRIPTION	QTY IND UNIT-PRICE DISC% AMOUNT
0000 20-05	Rear Fender Adv.Sticker RH/LH	200.00 ✓
0001 20-05	Rear Bumper Adv.Sticker	100.00 ✓
0002 L	PANEL BEATING	~~440.00~~ 400
0003 23-502	SPRAYPAINT ON AFFECTED AREA	~~440.00~~ 400
0004 20-00	TUFF COAT ON AFFECTED PARTS.	~~40.00~~ 20
0005 L	R/I REVERSE SENSOR	~~120.00~~ 30
0006 20-05	BootLid Adv.Sticker	100.00 ✓

SUB-TOTAL : 1,440.00

TOTAL : 4,134.18

LIM

MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO

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:

Kah Lim LKK
9/10/18
16:25:15
3 Days.
P/P
Before Paint photo

COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305223764

Date : 12/10/18

FINALIZATION FORM

To : LKK Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SH 9329B Date of Accident : 09-Oct-18

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

1. The repair job shall bill to: CHINA TAIPING --- GBH7281T

2. The finalized amount shall be:

(a)	Spare Parts after List discount	$2,558.48
(b)	Labour Charges	$1,250.00
	Total for Part-By-Part Repair Cost	**$3,808.48**
(c.)	Lumpsum Repair (if applicable)	
	Total for Lumpsum repair cost after Less: 20%	
	Final Lumpsum Repair cost	

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 : LIM T S

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature

Name KALVIN

Date : 12/10/18

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		NO		
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: 11.10.2018
Time: 17:37:23
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	:	305223764
REGN NO	:	SH 9329B
MILEAGE	:	0000000000
MAKE	:	HYUNDAI
MODEL	:	I-40
DATE OF REGN	:	17.03.2016
DATE/TIME IN	:	09.10.2018 14:35
ACCIDENT DATE	:	09.10.2018

JOB / PARTS DESCRIPTION		QTY	IND UNIT-PRICE	DISC%	AMOUNT
PART REQUISITION					
0001 04-01-0103-0579-G	REAR BUMPER	1	553.00	20.00	442.40
0002 04-01-0103-0738-G	REAR BUMPER UNDER COVER	1	228.00	20.00	182.40
0003 04-01-0101-0111-G	REAR BUMPER CLIPS	10 L	22.00	20.00	17.60
0004 04-01-0103-0577-G	BOOTLID	1	2,174.90	20.00	1,739.92
0005 04-01-0103-0789-G	BOOTLID EMBLEM-HYUNDAI	1	35.90	20.00	28.72
0006 04-01-0103-0787-G	BOOTLID EMBLEM-I40	1	27.80	20.00	22.24
0007 04-01-0103-0786-G	BOOTLID EMBLEM-CRDI	1	27.80	20.00	22.24
0008 04-01-0103-0800-G	BOOTLID EMBLEM-H	1	28.70	20.00	22.96
0009 28-01-0103-0005-A	BOOTLID COMFORTDELGRO	1	20.00	2.00-	20.00
0010 28-01-0103-0006-A	BOOTLID 65521111	1	10.00		10.00
0011 04-01-0103-1150-A	REAR BUMPER MAT	1	50.00		50.00
				SUB-TOTAL	: 2,558.48

JOB NATURE

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 11.10.2018
Time: 17:37:23
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	:	305223764
REGN NO	:	SH 9329B
MILEAGE	:	0000000000
MAKE	:	HYUNDAI
MODEL	:	I-40
DATE OF REGN	:	17.03.2016
DATE/TIME IN	:	09.10.2018 14:35
ACCIDENT DATE	:	09.10.2018

	JOB / PARTS DESCRIPTION	QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0000 20-05	Rear Fender Adv.Sticker RH/LH	200.00				
0001 20-05	Rear Bumper Adv.Sticker	100.00				
0002 L	PANEL BEATING	400.00				
0003 23-502	SPRAYPAINT ON AFFECTED AREA				400.00	
0004 20-00	TUFF COAT ON AFFECTED PARTS.				20.00	
0005 L	R/I REVERSE SENSOR	30.00				
0006 20-05	BootLid Adv.Sticker	100.00				

SUB-TOTAL : 1,250.00

TOTAL : 3,808.48

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :