

(08/11/13)

Surveyor: Kalvin

REF: CC3/TML18018406/Klvbn2

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop no/s: _____

of: _____

Insured: SIC 6161EPolicy No. MH001871Claims No. M180519

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 65486 Yr Regt: 4 Nov 2014

Type: M/Car / M/Cycle / Bus / Van / Lorry / TQ / Prime Mover /

Truck / Trailer or

Make: Hyundai c.c. 168Colour: Blue A/C: Ins Std / NI / NASp. Reading: 613690 T/Radio: Ins Std / NI / NA

Eng/No: _____

C/No: KMHCBYHMEYD 61385

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Ignored / Jammed / Leaked / Burnt or

Brake: Ignored / Jammed / Leaked / Burnt or

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

Tyre Size: F: 255/60R16

R: _____

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

TOYO / YOKO or Went / etcFront: 7 mmR/Bal. 7 mmL/Bal. 7 mmD.O.A. 10/10/8 D.O.I. 10/10/8Survey 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

SHD 65486 - (53/FCL) 8013051 / T740352DA: 130718 TokroSIC 6161E - X11/10/8 Email GIA to TMI11/10/8 Advise 1/5 \$1100 / 2 by. (Red 400-40, 269)

RECEIVED 12 OCT 2010

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 11/10- typistReport Format: merimenLump Sum / L.B.I: (\$) 1100/2Days Of Repair: 2Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

250

10

260

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Oct 2018 Sendback Est	10 Oct 2018 16:23 S\$1,502.40	10 Oct 2018 17:34 Edit Adj Rpt				Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

Insured:	STAR CAR LEASING PTE LTD, Co. Reg. No.: 201325738Z			
Main Claimant:	CTPL			
Vehicle Reg. No.:	SHD6548G	Date of Loss:	10/10/2018 00:00 - :59 [47 Months and 6 Days From LTA Reg Date (Man Yr)]	
Claim Type:	TP / M1805119	Policy/Cover Note No.:	MH001871 (Third Party Only) Coverage: 01/01/2018 - 31/12/2018	
Vehicle Reg. No. (Insured):	SGC6161E	Policy No. (Claimant):		
		Excess:	S\$1,500.00	
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 Zheng Hanyang - 65926416]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 19/10/2018]			
Adj Asg. Remarks:	OUR INSD HAVE NOT RPT THE ACCIDNENT. PLS. CHECK CONSISTENCY OF THE DAMGAGE. THKS			

[View All](#)
[Compose Case Mail](#)

ASSOCIATED MAIL RECEIVED

There are no mail for this case.

[View All](#)
[Search Tasks](#)
[Create New Task](#)
[Complete](#)

ALL ASSOCIATED TASKS

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Veron Chen (LKKAuto)

From: Veron Chen (LKKAuto)
Sent: Thursday, 11 October 2018 9:00 AM
To: motorclaims@tokiomarine.com.sg; SUR
Subject: DIRECT SURVEY INSPECTION ON WORKSHOP - COMFORTDELGRO ENGINEERING PTE LTD ,DOA: 10/10/2018, SHD 6548G (TP VEHICLE), SGC 6161E (OI VEHICLE)
Attachments: GIA.pdf, MARK EST.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SHD 6548G M/s: COMFORTDELGRO ENGINEERING PTE LTD, 59 LOYANG DRIVE SINGAPORE 508969 on 10/10/18.

Enclosed herewith a copy of TP's GIA report and estimated cost of repair.

Meanwhile, kindly create claim in merimen for our necessary action.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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 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. 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	10/10/2018 15:29
Date Of Accident	10/10/2018 13:30
Exact Location Of Accident	HAIG ROAD TWDS MOUNTBATTEN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6548G
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	I40
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	ONG CHUEN BENG
NRIC No	S7003441G
Date Of Birth	02/02/1970
Occupation	OUTDOOR
Date Of Driving Pass	21/07/1990
Driving Experience	28 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90901441
Fax Number	
Contact Number	
Email Address	DARRENOCB@GMAIL.COM

Address	BLK 328 HOUGANG AVENUE 5 #11-186
Postcode	530328
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 TO REAR
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)	1

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

PLS REFER TO ATTACHED

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	SGC6161E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	FRANCIS ARULANTHU
NRIC/Passport Number	S1470324A
Contact Number	96868761
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

IMPORTANT NOTICE

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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.
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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.

UMFORT TRANSPORTATION PTE LTD
CO REG NO. 192203321R

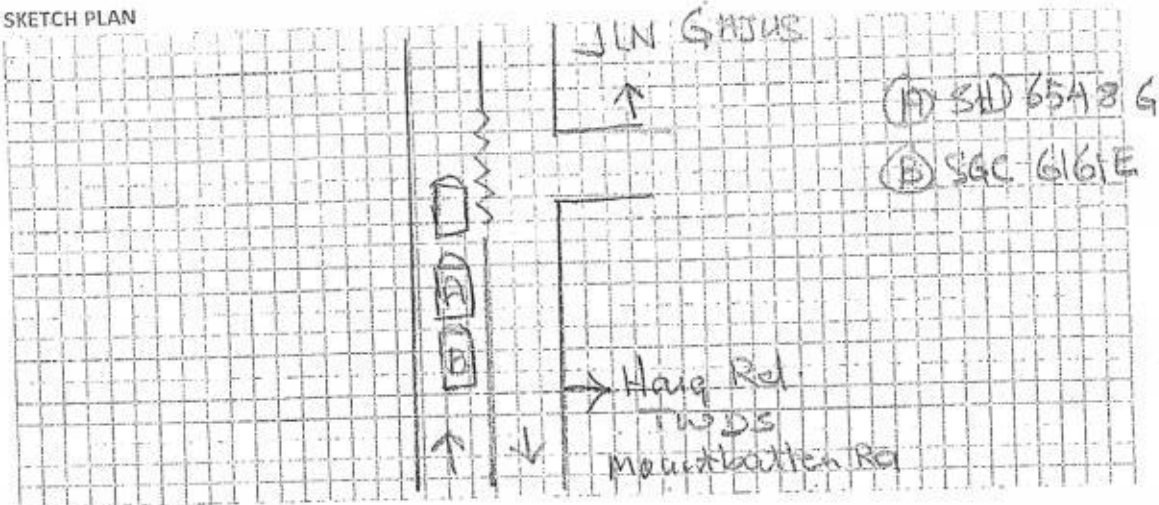
Policyholder's Signature
Date & Time:

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

10/10/18
Jackson Hong
CSO

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/10/2018 at about 1330 hrs, I vehicle A was
 Stop behind the front car at Haig road T junction of
 JLN Gayus. A few second later vehicle B came from my
 back and hit into vehicle A rear portion.

DECLARATION

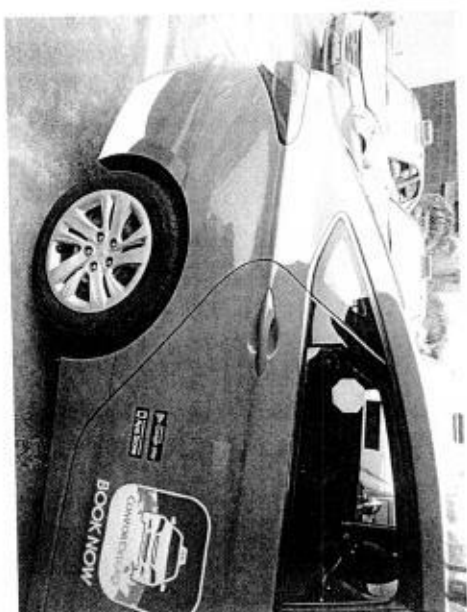
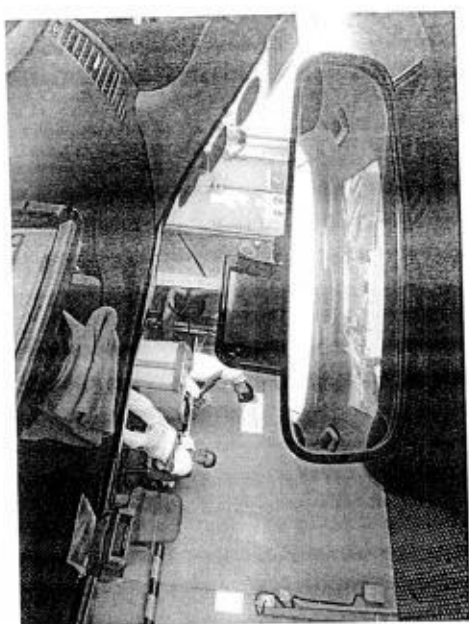
I/We declare the foregoing particulars are true in every respect.

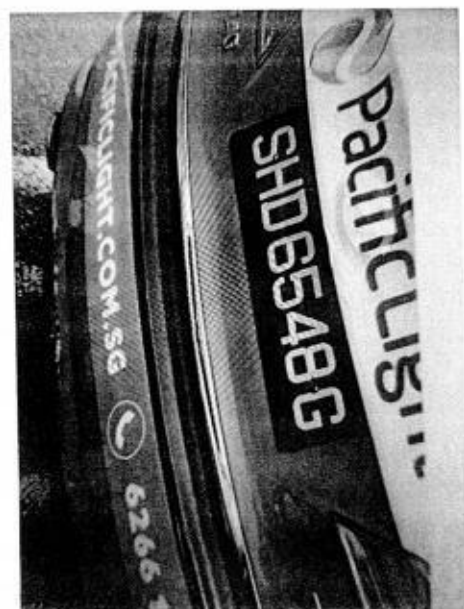
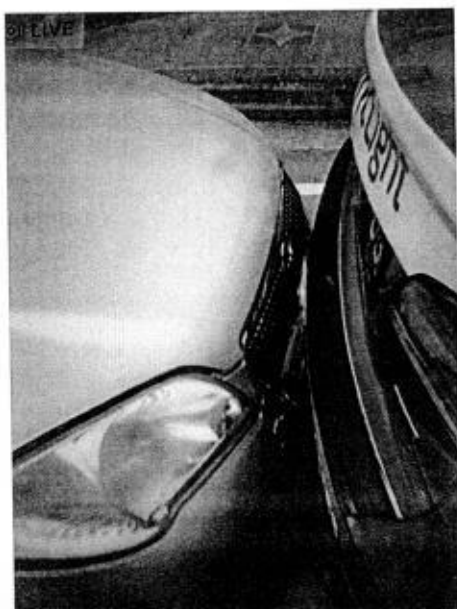
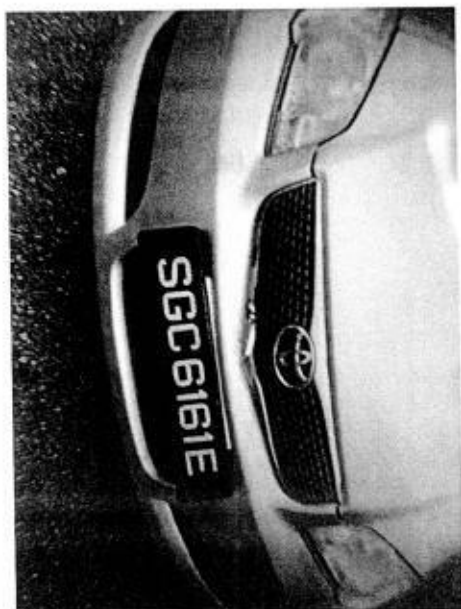
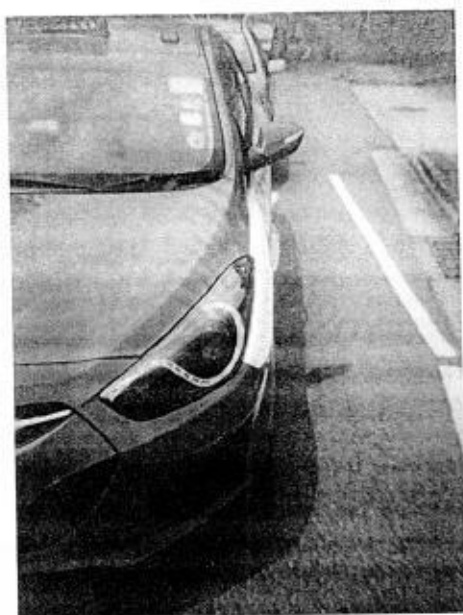
COMFORT TRANSPORTATION PTE LTD
 CO. REG. NO. 192007321R

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

REPAIR ESTIMATE*

VEHICLE NO : SHD 6548G

DATE 10/10/2018 14:26

MAKE :

MODEL : HYUNDAI i40

To Kio

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper			\$ 553.00	
	Rear Bumper Clip 10 pcs			\$ 22.00	
	Rear Bumper Under Cover			\$ 228.00	
	SUB TOTAL			\$ 803.00	
	LESS 20%			\$ 160.60	
	DISCOUNTED TOTAL			\$ 642.40	
	 Rear Bumper Rubber Mat			\$ 50.00	Nett
	Rear Bumper Advertisement Logo			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00	Nett
				\$ 300.00	
	Labour Charge				
	Panel Beating			\$ 220.00 ²⁰⁰	
	Spray Painting Charge			\$ 220.00 ²⁰⁰	
	Wiring Charge			\$ 30.00 ^{X 2}	
	Remove/Refix Reverse Sensor			\$ 80.00 ³⁰	
	TOTAL LABOUR			\$ 550.00	
	ESTIMATE TOTAL			\$ 1,492.40	

10/10/18
 10/10/18 1550h
 2 Bys
 4/5
 After Repair

LKK Auto Consultants hereby notify the Repairer of the following:

- To reserve this vehicle's body painting
- To display damaged parts from a resurvey
- Parts prices are subject to an inspection
- Third party survey is on a 'without prejudice' basis
- No illegal modifications is allowed
- Supplementary (costs) must be removed 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.

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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER: Tokio Marine Insurance Singapore Ltd (HQ)
CTPL

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	10/10/2018
Vehicle Reg. No.:	SHF6548G	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	04/11/2014
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDEU460308	Chassis No:	KMHLB41UMEU061385
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	4		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	942.40
Miscellaneous Items	10.00
Labour	550.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	1,502.40
+ GST 7.00% (S\$)	105.17
Nett Amount (S\$)	1,607.57

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference**

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 10 Oct 2018)

Parts: 143 HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SHF6548G/10/10/2018 16:23

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		*REAR BUMPER ASSY <i>Def</i>	20.00	0.00	*553.00 FL
2	1		*REAR BUMPER UNDER COVER <i>cut</i>	20.00	0.00	*228.00 FL
3	10		*REAR BUMPER CLIPS <i>nrc</i>	20.00	0.00	*22.00 FL
4	1		*REAR BUMPER MAT <i>nrc</i>	0.00	0.00	*50.00 F
5	1		*REAR BUMPER ADVERTISEMENT LOGO <i>nrc</i>	0.00	0.00	*50.00 F
6	2		*REAR FENDER ADVERTISEMENT LOGO <i>nrc</i>	0.00	0.00	*200.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	1,103.00
- List Item Discount on L Items (S\$)	160.60
Total Parts (S\$)	942.40

ComfortDelGro Engineering Pte Ltd/SHF6548G/10/10/2018 16:23. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

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	220.00 200
2	SPRAYPAINT	New	220.00 200
3	WIRING	New	30.00 X
4	REMOVE/REFIX REVERSE SNSOR	New	80.00 30
Gross Labour Cost (S\$)			550.00

ComfortDelGro Engineering Pte Ltd/SHF6548G/10/10/2018 16:23. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305224225

OMER
IS
OMER NO.
IESS
(R)
(P)
JUNT CARD NO.

COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (C)

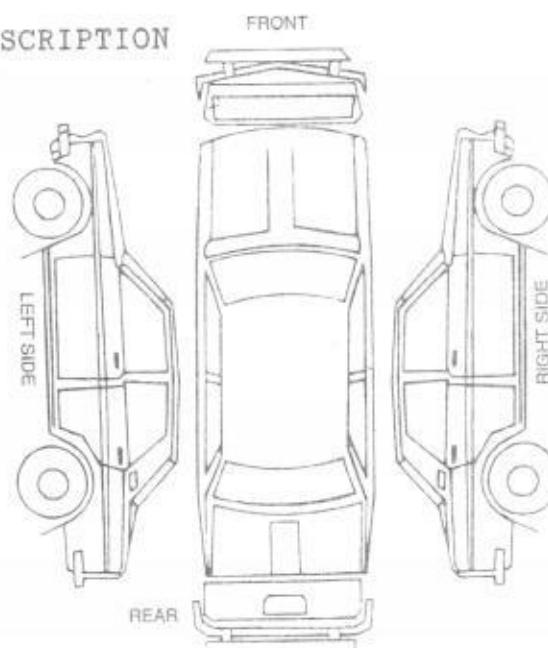
REGN NO.: SHD6548G	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 10.10.2018 14:25
YR OF MANU 04.11.2014	TARGET DATE
CHASSIS CODE KMHLB41UMEU061385	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 10.10.2018
NATURE: 3P 10.10.18

S/NO LABOR CODE

DESCRIPTION



WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

No.: SHD6548G JU TOKIO

Vehicle No.: SHD6548G

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305224225

Date : 11. Oct. 2018

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508989
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHD6548G

Date of Accident: 10. Oct. 2018

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

1. The repair job shall bill to: TOKIO MARINE SGC6161E

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

\$1,100.00

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 : 6546 8156

Signature : 

Name : KALVIN

Date : 11/10/18

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				
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: CC3/TMI18018406/K1VBN2

Date: 12/10/2018

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MH001871
Claimant Vehicle No :	SHD6548G	Insured Vehicle No :	SGC6161E
Date of Loss:	10/10/2018	Nature of Claim:	TP
		Claim No:	M1805119

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHD6548G	Engine No:	D4FDEU429964
Make & Model:	HYUNDAI I40, 1.7 D CRDi (A)	Chassis No:	KMHLB41UMEU061385
Reg. Date:	04/11/2014 (Man. Year: 2014)	Odometer:	613690 km
Colour:	Blue		
Engine Capacity:	1685 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:	Good	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Average

CONDITION OF TYRES

Front Tyre Size:	205/60R16	Rear Tyre Size:	205/60R16
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	942.40	942.40	0.00	0.00
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	550.00	430.00	120.00	21.82
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	1,502.40	1,382.40	120.00	7.99
Approved Total (Overridden) (S\$)		1,100.00		
(S\$)	1,502.40	1,100.00	402.40	26.78
+ GST 7.00/7.00% (S\$)	105.17	77.00	28.17	26.79
Nett Amount (S\$)	1,607.57	1,177.00	430.57	26.78

INSPECTION

Date of Assignment:	10/10/2018	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	10/10/2018	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	2.0 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

Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 12 Oct 2018)
Parts: 143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHD6548G)
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 *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER ASSY	Deformed	553.00 FL	*553.00 FL
2	1		*REAR BUMPER UNDER COVER	Cut	228.00 FL	*228.00 FL
3	10		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
4	1		*REAR BUMPER MAT	Necessary	50.00 F	*50.00 FS
5	1		*REAR BUMPER ADVERTISEMENT LOGO	Necessary	50.00 F	*50.00 FS
6	2		*REAR FENDER ADVERTISEMENT LOGO	Necessary	200.00 F	*200.00 FS
				Sub Total (\$\$)	1,103.00	1,103.00
				- List Item Discount on L Items 20.00/20.00% (\$\$)	160.60	160.60
				Total Parts (\$\$)	942.40	942.40

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

Report was unsubmitted during this print-out.

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 (\$\$)			10.00	10.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	220.00	200.00
2	SPRAYPAINT	New	220.00	200.00
3	WIRING	New	30.00	-
4	REMOVE/REFIX REVERSE SNSOR	New	80.00	30.00
Gross Labour Cost (\$\$)			550.00	430.00

Report was unsubmitted during this print-out.

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