15/5/2010

INS. CASE OWNER: RA | CC 4, ASM 180 22576, Kl pa3 | LKK: 88210 IDAC:

ASSIGNMENT

Surveyor: AWK DOI: 17/12/18 Date / Time: 17/12/18

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. : SHB9706H		Claim No. : S8M016G0	bx
Name of Insured : 11C Svs PTL		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$ 5,000-00	D.O.A : 17/12/18	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**

3rd

SH6084M → → →

INSRS: WSP: Cng loyang. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SH6084M - CL4/ASM 180/1381/Klea4q2 ; DOA: 20/6/18
	SHB9706H. CS/FCU 1800388? /Kq6n2 ; DOA: 23/2/18
	- CC6/AXA1 2000733/Uza4q2 ; DOA: 8/1/17

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:

Surveyor: Kelvin

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Insp'ed 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

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SH 6054 M Yr Regn: 20 Sep / 2017

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

Make: Toyota Prius c.c 1798

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

Sp.Reading 208111 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKB3FG903564050

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: 195/65R15

R: _____

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

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	12/12/18	D.O.I.	17/12/18

Survey held at CDGE (Loyang)

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

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

Date / Time	Action / Instruction
	AXA
	PP

Date/Time, File Pass to? _____ : Preli. Report

1) _____ : Final Report

Date/Time, File Return to?

2) _____

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:	
__S + RS__SI	
Photos	
Others	
TOTAL	

AXA

LIM KE / Larry Ng

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

VEHICLE NO : SH 6054M 12/15/2018 9:38

MAKE :

MODEL : TOYOTA PRIUS

	PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT	
	REAR TRUNK LID LOGO(PRIUS)			$ 60.80	
	REAR TRUNK LID LOGO(HYBRID)			$ 52.40	
	REAR TRUNK LID LOGO(TOYOTA STAR)			$ 52.90	
	REAR BUMPER			$ 458.60	
	REAR BUMPER RE-INFORCEMENT			$ 322.30	
	REAR BUMPER UNDER COVER			$ 552.60	
	REAR BUMPER SIDE RETAINER ?			$ 112.70	
	REAR BUMPER CLIPS			$ 22.00	
	Rear Trunk Lid Outer Garnish				
	SUB TOTAL			$ 1,634.30	
	LESS 25%			$ 408.58	
	DISCOUNTED TOTAL			$ 1,225.73	
	REAR NO. PLATE WITH TRIM COVER ×			$ 100.00	NETT
	REAR TRUNK LID APPS STICKER			$ 40.00	NETT
	REAR TRUNK LID COMFORT & TEL NO. STCIKER			$ 60.00	NETT
	REAR BUMPER REVERSE SENSOR			$ 135.70	NETT
	TOTAL			$ 335.70	
	LABOUR CHARGE				
	Panel Beating			$ ~~400.00~~ 300	
	Spray Painting Charge			$ ~~600.00~~	400
	Wiring Charge			$ ~~30.00~~	×
	Tuff Kote			$ ~~50.00~~	×
	Remove/Refix Reverse Sensor			$ ~~120.00~~	30
	Remove/Refix Roof Top Advertisement			$ ~~150.00~~	×
	TOWING FEE			$ 60.00	
	TOTAL LABOUR			$ 1,900.00	
	ESTIMATE TOTAL			$ 3,461.43	

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:

[illegible signature]
17/12/18 1100hr
3 [illegible] P/P [illegible] photo

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.

OMFORTDELGRO ENGINEERING
member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701
Mainline + 65 6383 6280 Facsimile + 65 6280 9755
Workshops
59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
320 Ubi Road 3 Singapore 408649
24 Senoko Loop Singapore 758156
7 Sungei Kadut Way Singapore 728791
501 Yishun Industrial Park A Singapore 768732

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order: 3882279 JC NO.: 305250949

OMER

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

AXA

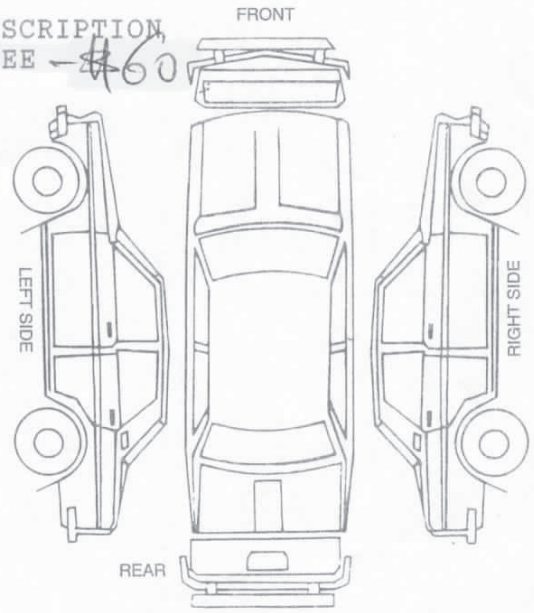
OUNT CARD NO.

REGN NO.: SH 6054M	MILEAGE
MAKE : TOYOTA	FUEL E.....1/2.....F
MODEL PRIUS HYBRID(G4)	DATE/TIME IN 12.12.2018 22:10
YR OF MANU. 20.09.2017	TARGET DATE
CHASSIS CODE JTDKB3FU903564050	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 12.12.2018
NATURE: 3P 12.12.2018

S/NO	LABOR CODE	DESCRIPTION
000010	23-01	TOWING FEE - $60



CKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ledgement Slip

No.: SH 6054M LKE

f Service Advisor

Signature/Date

eturned to Service Reception upon collection

Exit Pass

Vehicle No.: SH 6054M

Name of Service Advisor

Date

To be kept by Security Guard

a3

COMFORTDELGRO ENGINEERING

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

Our Job Ref No 305250949

Date : 19/12/18

FINALIZATION FORM

To : LKK Fax :

Attn : Mr KALVIN ANG

Vehicle Reg No. SH6054M CTPL 12.12.18

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

1. The repair job shall bill to: **AXA --- SHB9706H**

2. The finalized amount shall be:

(a)	Spare Parts after List discount	$2,106.20
(b)	Labour Charges	$790.00
	Total for Part-By-Part Repair Cost	**$2,896.20**
(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.

Signature :

Name : LIM KWOK ENG

Tel : 62148316

Fax : 65468156

We confirm the estimates and finalized amount

Signature :

Name : Kalvin

Date : 19/12/18

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				
5. Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

Remarks: Final Amount Subject to Insurer Approval

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 19.12.2018
Time: 09:25:50
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	:	305250949
REGN NO	:	SH 6054M
MILEAGE	:	0000000000
MAKE	:	TOYOTA
MODEL	:	PRIUS HYBRID(G4)
DATE OF REGN	:	20.09.2017
DATE/TIME IN	:	12.12.2018 22:10
ACCIDENT DATE	:	12.12.2018

JOB / PARTS DESCRIPTION — QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0302-2282-G	PRIG4 COVER REAR BUMPER	1	L	458.60	25.00	343.95
0002	04-01-0302-2287-G	PRIG4 GUARD-REAR BUMPER C	1	L	552.60	25.00	414.45
0003	04-01-0302-2286-G	PRIG4 COVER REAR BUMPER-T	1	L	82.70	25.00	62.02
0004	04-01-0302-2288-G	PRIG4 REINFORCEMENT SUB-A	1	L	322.30	25.00	241.72
0005	04-01-0302-2346-G	PRIG4 GARNISH SUB ASSY BA	1	L	889.70	25.00	667.27
0006	04-01-0302-2269-G	PRIG4 ORNAMENT SUB-ASSY B	1	L	52.90	25.00	39.67
0007	04-01-0302-2270-G	PRIG4 PLATE-BACK DOOR NAM	1	L	52.40	25.00	39.30
0008	04-01-0302-2271-G	PRIG4 PLATE-BACK DOOR NAM	1	L	60.80	25.00	45.60
09	28-01-0302-2013-A	PRIVC REAR BONNET APP TAX	1	N	40.00	2.50-	40.00
0010	28-01-0302-2015-A	PRIVC REAR BONNET COMFORT	1	N	30.00	0.25	30.00
0011	28-01-0302-0006-A	PRIVC REAR BOOT 65521111	1	N	30.00	0.03-	30.00
0012	09-01-0302-2005-A	PRIG4 REVERSE SENSOR ASSY	1	N	135.70	0.00	135.70
0013	04-01-0302-2267-G	PRIVC BUMPER PIECE	10	L	22.00	25.00	16.50

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 19.12.2018
Time: 09:25:50

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

JOB NO	:	305250949
REGN NO	:	SH 6054M
MILEAGE	:	0000000000
MAKE	:	TOYOTA
MODEL	:	PRIUS HYBRID(C
DATE OF REGN	:	20.09.2017
DATE/TIME IN	:	12.12.2018 22:10
ACCIDENT DATE	:	12.12.2018

JOB / PARTS DESCRIPTION		QTY IND UNIT-PRICE	DISC%	AMOUNT
			SUB-TOTAL :	2,106.18
JOB NATURE				
0000 23-01	TOWING FEE	60.00		
0001 L	PANEL BEATING	300.00		
0002 23-502	SPRAYPAINT ON AFFECTED AREA		400.00	
0003 20-22	REMOVE/REFIX REVERSE SENSOR		30.00	
			SUB-TOTAL :	790.00
			TOTAL :	2,896.18

AUTHORISED : YES / NO

MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE :