

REF:

Surveyor: NA 2

REF:

TMI CC3/TM19001851/Ntd342 Chiang

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SLR 9963A

Policy No. MT000833

Claims No. M1900600

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: 2

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 7717C

Yr Regn: 30 May 2015

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

Truck / Trailer or

Make: HYUNDAI

LYO

c.c. 1,685

Colour: BLUE

A/C: Insured / Std / NI / NA

Sp. Reading: 52,841

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KM1LB41UMFU067342

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 705 / 40 R 16

R: 11

R:

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

TOYO / YOKO or

WESTLAKE

Front

Rear

R/Bal. 5 mm

R/Bal. 5 mm

L/Bal. 5 mm

L/Bal. 5 mm

D.O.A. 25/1/19

D.O.A. 28/1/19

Survey held at

COGE COYANG

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

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

Date / Time

Action / Instruction

SH 7717C - CS/FCL/7009144 / 3/3/20

DP: 05052019

TMI L/S

SLR 9963A - CS/SPF/5003599 / K/bn2

DP: 22/2/2018

2012/19 FINALIZED Lump sum REPAIR \$1,100.00 / 2 DAYS.

(Red: 1409.30 150%)

RECEIVED 21 FEB 2019

Date/Time, File Pass to?

☐

Preli Report

1) 2/2 Typist

☒

Final Report

Date/Time, File Return to?

2)

Report Format:

Lump Sum / I.B.I.: (\$ 1100)

Days Of Repair: 2

Resurvey No. of Trip: 1

*Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invo (\$

☐

Weekend (\$

\$ + RS \$

Photos

Others

TOTAL

260
10
260

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:	25/01/2019
Vehicle Reg. No.:	SH7717C	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI F/L ABS AIRBAG 4DR (A)	Vehicle Reg. Date:	30/05/2015
Vehicle Colour:	BLUE	Gen Condition:	EXCELLENT
Engine No:	D4FDEU475053	Chassis No:	KMHLB41UMFU069342
Odometer:	632841 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	1,399.30
Miscellaneous Items	10.00
Labour	1,100.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	2,509.30
+ GST 7.00% (S\$)	175.65
Nett Amount (S\$)	2,684.95

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

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	28/01/2019 08:29
Date Of Accident	25/01/2019 13:45
Exact Location Of Accident	MARINA BLVD TWDS SHEARES AVE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SH7717C
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	NG THIAM HEE
NRIC No	S1619968J
Date Of Birth	14/03/1963
Occupation	OUTDOOR
Date Of Driving Pass	01/04/2003
Driving Experience	15 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97576269
Fax Number	
Contact Number	
EMail Address	THIAMHEENG@GMAIL.COM

Address	BLK 381 CLEMENTI AVENUE 5 #06-398
Postcode	120381
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 (including own vehicle) involved in the accident	2
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)	4
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : FEMALE
Passenger 3	NAME: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI N.P.C
Police Station Address	ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: S/D REF: ESD189

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	SLR9963A
-----------------------------	----------

Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT
No. Of Passenger (Including Driver)	

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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. 199308218

Policyholder's Signature
Date & Time:

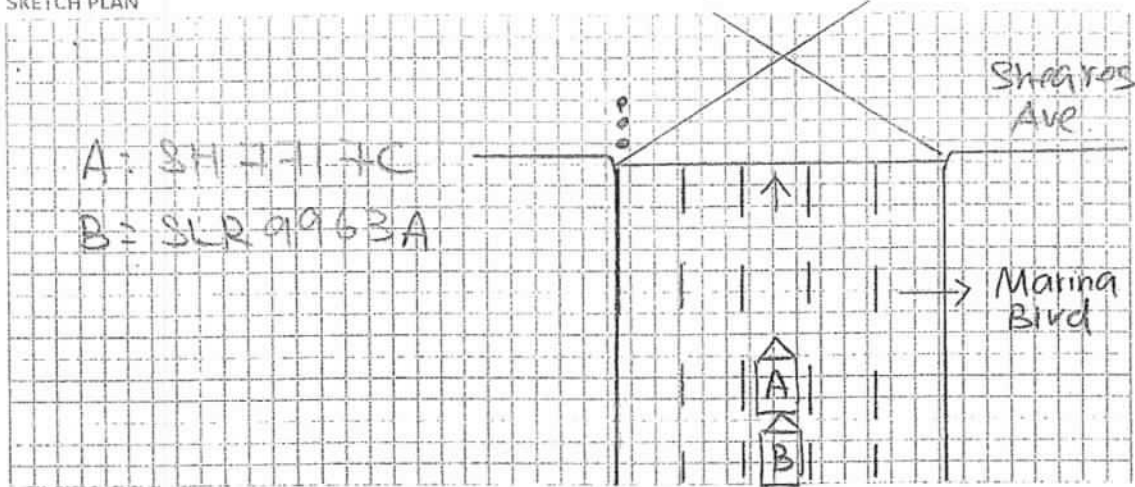
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Loke Wei Yiong

26/1/19

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 25/1/19 at about 13:45 hrs, I Veh A stopped at above said location waiting for traffic light change

Suddenly Veh B came from behind collided onto the rear portion of my stationary taxi. 03 passengers on board my taxi. No injury reported in this accident.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 109303821R

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.:

Loke Wei Yiong

26/1/19
2

Annex D

NOTICE OF REPORTING

This is to confirm that NG THIAM HEE, NRIC: S1619968J,
has reported to the Police a non-injury traffic accident which
occurred at junction of Marina Boulevard and Sheares Avenue
on 25/01/2019 at 1345hrs involving the following vehicles:

Complainant: SH7717C, Comfort Delgro Hyundai i40

Other Party: SLR9963A, Silver coloured Honda Airwave

2 If this accident was reported to the Police within 24 hours of its
occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act,
Cap 276.

Rank/Name of Issuing Officer: Sgt(2) Lim Wei Sheng

Date: 25/01/2019 Time: 2148hrs

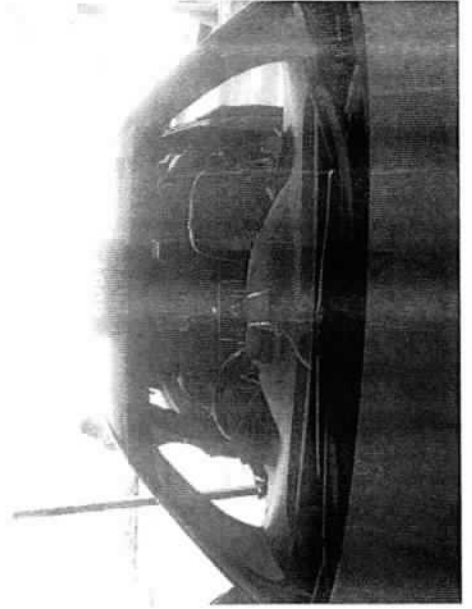
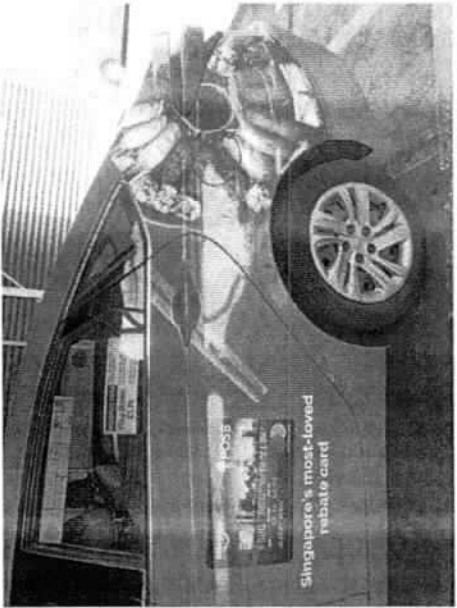
S/D Ref: ESD 189

Police Post/Unit: Clementi NPC

Original - to be issued to informant
Duplicate - to be submitted to Traffic Police



Sgt(2) T150380
Clementi NPC
20 Clementi Ave S
S (129858)
Tel: 68729998
Fax: 68728039



JOB CARD

Team: ARC Repair TP(CLSO)1

Sales Order:

JC NO.: 30526397

CUSTOMER		REGN NO.: SH 7717C	MILEAGE
MR/MS	COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
CUSTOMER NO.	7010045	MODEL I-40	E.....1/2.....
ADDRESS	383 SIN MING DRIVE Singapore SINGAPORE 575717	YR OF MANU. 30.05.2015	DATE/TIME IN 28.01.2019 09:4
TEL. (R) 65508755 (O)		CHASSIS CODE KMHLB41UMFU069342	TARGET DATE
DISCOUNT CARD NO.			COMPLETION DATE/TIME

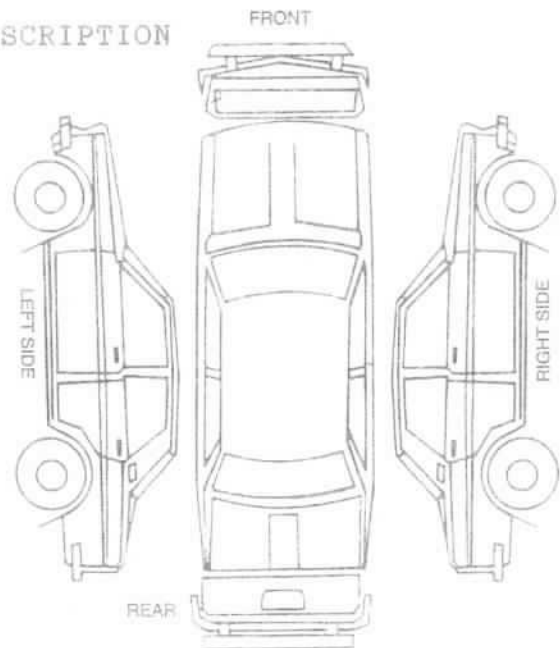
JOB DESCRIPTION

Accident Date: 25.01.2019

NATURE: 3P 25.01.2019

S/NO LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

acknowledgement Slip

Exit Pass

ame:

C No.:

ehicle No.:

SH 7717C

CHIANG

Vehicle No.:

SH 7717C

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

o be returned to Service Reception upon collection

To be kept by Security Guard

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

FINALIZATION FORM

To : LKK
Attn : NAZ
Vehicle Reg No. : **SH 7717C**

Fax :

25.01.2019

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

- | | | | |
|----|---|--------------|-------------------|
| 1. | The repair job shall bill to: | TOKIO MARINE | SLR9963A |
| 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
----	--------------------------------	------------------------------

We confirm the estimates and finalized amount

Signature : _____
 Name : **CHIANG**
 Tel : **62148314**
 Fax : **65468156**

Signature: _____
Name : NARUK
Date : 2012/1/9

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:

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 28 Jan 2019)**Parts:** 143 HYUNDAI I40 1.7 D CRDI F/L ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SH7717C/28/01/2019 15:04**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	20.00	0.00	*553.00 FL ✓ CRK
2	1		*REAR BUMPER REINFORCEMENT	20.00	0.00	*428.40 FL ✓ X SVL
3	2		*REAR BUMPER REINFORCEMENT BRACKETT	20.00	0.00	*160.60 FL ✓ X SVL
4	10		*REAR BUMPER CLIPS	20.00	0.00	*22.00 FL ✓ NFE
5	1		*REAR BUMPER UNDER COVER	20.00	0.00	*228.00 FL ✓ DU
6	1		*BUMPER REUBBER MAT	0	0.00	*50.00 FS ✓ NFE
7	1		*BUMPER ADVERTISEMENT LOGO	0	0.00	*100.00 FS ✓ NFE
8	1		*BUMPER REVERSE SENSOR	0	0.00	*135.70 FS ✓ NFE

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

Sub Total (\$\$)	1,677.70
- List Item Discount on L Items (\$\$)	278.40

Total Parts (\$\$)	1,399.30
--------------------	----------

ComfortDelGro Engineering Pte Ltd/SH7717C/28/01/2019 15:04. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	OD/TP Case (Insurer)	10.00
Sub Total (\$\$)			10.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New	480.00
2	SPRAY PAINT	New	500.00
3	TUFF KOTE	New	60.00
4	REMOVE/ REFI XREVERSE SENSOR	New	60.00
Gross Labour Cost (\$\$)			1,100.00

ComfortDelGro Engineering Pte Ltd/SH7717C/28/01/2019 15:04. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

NA2 LKIC
28/1/19 1630
LIS
2 DAYS
CHECK ITEMS PHOTOS
AFTER REPAIR PHOTOS

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:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	28 Jan 2019 Sendback Est	28 Jan 2019 15:04 S\$2,509.30	29 Jan 2019 12:22 Edit Adj Rpt	S\$1,100.00 Edit Estimates	S\$1,100.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured:	KEITH CHIA ZHEN GUANG, ID: S8833542B								
Main Claimant:	CTPL, Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SH7717C	Date of Loss:	25/01/2019 13:00 - :59 [43 Months and 26 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1900600	Policy/Cover Note No.:	MT000833 (Comprehensive) Coverage: 29/01/2018 - 28/01/2019						
Vehicle Reg. No. (Insured):	SLR9963A	Policy No. (Claimant):							
		Excess:	S\$1,000.00						
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 Dillen Senthilan so Selvarajoo]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Muhammad Nazril Bin Abdullah] ... [Final Rpt due 11/02/2019]								
Adj Asg. Remarks:	OUR INSD HAVE NOT RPT THE ACCIDENT								
ASSOCIATED MAIL RECEIVED									
View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS									
View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

SH7717C (M1900600)
[SLR9963A]
TP
CTPL
Jan 25 2019 1:00PM
[KEITH CHIA ZHEN GUANG]
ComfortDelGro Engineering Pte Ltd

Upload Documents		Upload Photos		Compose New Letter		View View in Browser	
Assessment Reports						1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)			Thumbnail	Print	
1	28/01/19 15:04	Repairer Estimates		1	Load HTM		
Photos/Images						3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)			Thumbnail	Print	
1	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
2	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
3	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
4	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
5	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
6	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
7	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
8	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
9	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
10	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
11	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
12	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
13	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
14	20/02/19 11:05	General View		1	Load JPG	<input checked="" type="checkbox"/>	
15	20/02/19 11:06	Photo After Spray		1	Load JPG	<input checked="" type="checkbox"/>	
16	20/02/19 11:06	Photo After Spray		1	Load JPG	<input checked="" type="checkbox"/>	
17	20/02/19 11:06	Photo After Spray		1	Load JPG	<input checked="" type="checkbox"/>	
Documentation						1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)			Thumbnail	Print	
1	28/01/19 15:05	E-filed GIA report		1	Load PDF		

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
Show Remarks To: <input type="checkbox"/> Repairer <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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/TMI19001851/NTD3E2

Date: 22/02/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MT000833

Claimant Vehicle No: SH7717C

Insured Vehicle No: SLR9963A

Date of Loss: 25/01/2019

Nature of Claim: TP

Claim No: M1900600

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SH7717C

Make & Model: HYUNDAI I40, 1.7 D CRDI F/L ABS AIRBAG 4DR (A)

Engine No: D4FDEU475053

Reg. Date: 30/05/2015 (Man. Year: 2015)

Chassis No: KMHLB41UMFU069342

Colour: Blue

Odometer: 632841 km

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:	Excellent	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Good

CONDITION OF TYRES

Front Tyre Size:	205/60 R16	Rear Tyre Size:	205/60 R16
Front Left Side:	West Lake 5 mm	Rear Left Side:	West Lake 5 mm
Front Right Side:	West Lake 5 mm	Rear Right Side:	West Lake 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,399.30	928.10	471.20	33.67
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,100.00	420.00	680.00	61.82
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	2,509.30	1,358.10	1,151.20	45.88
Approved Total (Overridden) (S\$)		1,100.00		
(S\$)	2,509.30	1,100.00	1,409.30	56.16
+ GST 7.00/7.00% (S\$)	175.65	77.00	98.65	56.16
Nett Amount (S\$)	2,684.95	1,177.00	1,507.95	56.16

INSPECTION

Date of Assignment: 29/01/2019 Present Location:

ComfortDelGro Engineering Pte Ltd (Loyang)

Date Inspected: 28/01/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd (Loyang)
59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: Muhammad Nazril Bin Abdullah**Manager:** DENISE TAY KWEE CHENG

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: 22 Feb 2019)
Parts:	143	HYUNDAI I40 1.7 D CRDI F/L ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SH7717C)	
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	Cracked	553.00 FL	*553.00 FL
2	1		*REAR BUMPER REINFORCEMENT	Serviceable	428.40 FL	*- FL
3	2		*REAR BUMPER REINFORCEMENT BRACKETT	Serviceable	160.60 FL	*- FL
4	10		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
5	1		*REAR BUMPER UNDER COVER	Distorted	228.00 FL	*228.00 FL
6	1		*BUMPER REUBBER MAT	Necessary	50.00 FS	*50.00 FS
7	1		*BUMPER ADVERTISEMENT LOGO	Necessary	100.00 FS	*100.00 FS
8	1		*BUMPER REVERSE SENSOR	Necessary	135.70 FS	*135.70 FS
					Sub Total (S\$)	1,677.70
					- List Item Discount on L Items 20.00/20.00% (S\$)	278.40
					Total Parts (S\$)	1,399.30
						928.10

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	480.00	200.00
2	SPRAY PAINT	New	500.00	200.00
3	TUFF KOTE	New	60.00	0.00
4	REMOVE/ REFI XREVERSE SENSOR	New	60.00	20.00
Gross Labour Cost (\$\$)			1,100.00	420.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >