

INS. CASE OWNER:

CC 3, CT 1 1900 3563, Pleas

LKK:

IDAC:

Surveyor:

Amc

DOI:

ASSIGNMENT

21/1/19

Date / Time:

21/1/19

Registered in Merimen:

Pre-assign / CCU / FTE

Gw 1848k



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :SS D.O.A: 21/1/19

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

SHC 81880



INSRS:

WSP:

Tel :

Liability :

RMKS:

d/ba Luyans



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SHC 81887 - G172118011261 DCD222 : DOR: 12/6/18
 - CS1EC11720 2335/164322 : DOR: 26/1/19
 Gw 1848 K-M1671801294424 : DOR: 19/6/18
 - CS31AXA160162461 G164322 : DOR: 29/8/16

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\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

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:

Date/Time: 25.02.2019 11:57

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305272061

CUSTOMER

R/MS COMFORT TRANSPORTATION PTE LTD

CUSTOMER NO. 7010045

ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

TEL (R) 65508755 (O)

(P)

SCOUT CARD NO.

REGN NO.:

SHC8188D

MILEAGE

MAKE :

HYUNDAI

FUEL

E.....1/2.....F

MODEL

I-40

DATE/TIME IN

25.02.2019 10:40

YR OF MANU.

24.03.2016

TARGET DATE

CHASSIS CODE

KMHLB41UMGU086711

COMPLETION DATE/TIME:

JOB DESCRIPTION

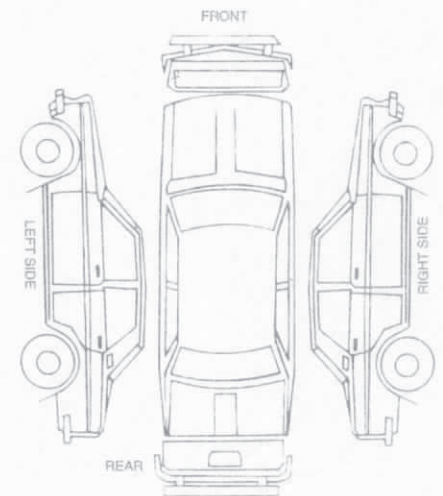
Accident Date: 25.02.2019

NATURE: 3P 25.02.2019

S/NO

LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Ref:

No.:

Vehicle No.:

SHC8188D

CHIANG

Vehicle No.:

SHC8188D

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

to be returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 8188D

DATE 25/2/2019 10:56

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper ✓			\$ 553.00	
	Rear Bumper Reinforcement ?			\$ 428.40	
	Rear Bumper Reinforcement Bracket (LH/RH) ?		\$ 80.30	\$ 160.60	
	Rear Bumper Clip 10 pcs ✓			\$ 22.00	
	Rear Bumper Bracket ?		\$ 35.60	\$ 71.20	
	Rear Bumper Sponge ?			\$ 103.50	
	Rear Bumper Under Cover ✓			\$ 228.00	
	SUB TOTAL			\$ 1,566.70	
	LESS 20%			\$ 313.34	
	DISCOUNTED TOTAL			\$ 1,253.36	
	Rear No. Plate ✓			\$ 25.00	Nett
				\$ 25.00	
	Labour Charge			200	
	Panel Beating			\$ 400.00	
	Spray Painting Charge			\$ 300.00	200 X
	Wiring Charge			\$ 30.00	X
	Remove/Refix Reverse Sensor			\$ 80.00	X
	TOTAL LABOUR			\$ 810.00	
	ESTIMATE TOTAL			\$ 2,088.36	
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.					

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- Supplementary items must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

Ka/uh 16/1/19
25/2/19 1410 hrs
2 Days
P/P
Before paint photo

Our Job Ref No : 305272061
Date : 27/02/19

COMFORTDELGRO ENGINEERING

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SHC8188D

Fax :

25/02/2019

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

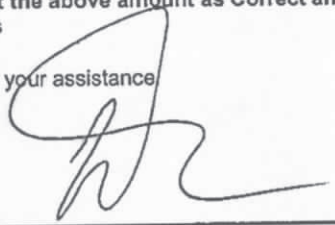
1. The repair job shall bill to: CHINA QW1848K
2. The finalized amount shall be:
- | | |
|---|-----------------------------|
| (a) Spare Parts after List discount | <u>\$667.40</u> |
| (b) Labour Charges | <u>\$400.00</u> |
| Total for Part-By-Part Repair Cost | <u>\$1,067.40</u> |
| (c) Lumpsum Repair (if applicable) | <u> </u> |
| Total for Lumpsum repair cost after Less: | <u> </u> |
| Final Lumpsum Repair cost | <u> </u> |

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 : CHIANG
Tel : 62148314
Fax : 65468156

Signature : 
Name : Kalvin
Date : 28/2/19

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:

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 28.02.2019

Time: 08:19:17

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 : 305272061
REGN NO : SHC8188D
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 24.03.2016
DATE/TIME IN : 25.02.2019 10:40
ACCIDENT DATE : 25.02.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0579-G	I40VC COVER ASSY-RR BUMPE	1	553.00	20.00	442.40
0002 04-01-0101-0111-G	HYUNDAI BUMPER COVER CLIP	10 L	22.00	20.00	17.60
0003 04-01-0103-0738-G	I40VC COVER-RR BUMPER LWR	1	228.00	20.00	182.40
0004 FNPS	NO PLATE(S)	1 N	25.00	2.00-	25.00

SUB-TOTAL : 667.40

JOB NATURE

0000 PB	PANEL BEATING	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	200.00

SUB-TOTAL : 400.00

TOTAL : 1,067.40

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :