

ASS. REC. BY:

REF:

CS/TM119004076

Nvd3n2

Special Instruction:

SMV09/09

## ASSIGNMENT (Office)

From (Person):

Telma Gomez

of

TMI

Date/Time:

5/3/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHC 8798T

Insured:

SH 7629G

at Workshop m/s

CDGE

Tel:

62442300

of

59 Loyang Drive

Policy No:

HK000000

Claim No:

M1401301

Sum Insured:

Excess:

Make of Vch:

(Client's Record)

D.O.A.

2/3/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SHC 8798T - X
	SH 7629G - X

REF:

REF:

TMI

Surveyor:

NA2

# 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:

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
X	X

Est. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

2

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SHC 8798 T

Yr Regn:

10 MAR 2016

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

Truck / Trailer or

Make:

HYUNDAI 140

C.C. 1685

Colour

BLUE

A/C: Insured / Std / NI / NA

Sp. Reading

564,014

T/Radiq: Insured / Std / NI / NA

Eng/No:

C/No:

KN12LB41UMGU085559

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:

R:

205/60 R16

11

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

TOYO / YOKO or

HANKOOK

Front

Rear

R/Bal.

R/Bal.

5

mm

L/Bal.

L/Bal.

5

mm

D.O.A.

213/19

D.O.A.

5.13.19

Survey held at

EDGE 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

2013/19

FINALIZED PART BY PART REPAIR \$ 440.00/2 DAYS

(Red 890, 679)

RECEIVED 25 MAR 2013

Date/Time, File Pass to?

☐

: Prelim Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

25/3 - typist

Report Format:

merimen

Lump Sum / I.B.I. (\$

440k

Days Of Repair:

2

Resurvey No. of Trip:

-

Survey Foot:

Transportation:

250

10

S + RS \$1

Photos

Others

TOTAL

260

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invo (\$

☐

: Weekend (\$

## ...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	05 Mar 2019 12:01 <a href="#">Sendback Est</a>	05 Mar 2019 12:05 <b>S\$1,330.00</b>	05 Mar 2019 17:59 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>									
Insured: CTPL, Co. Reg. No.: 199303821R									
Main Claimant: CTPL									
Vehicle Reg. No.: SHC8798T		Date of Loss: 02/03/2019 10:00 - :59 [35 Months and 20 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / M1901301		Policy/Cover Note No.: MK000202 (Third Party Only) Coverage: 25/02/2019 - 24/02/2020							
Vehicle Reg. No. (Insured): SLH7629G		Policy No. (Claimant): Excess: S\$1,600.00							
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 Telma Gomez - 65926402]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 14/03/2019]									
<b>ASSOCIATED MAIL RECEIVED</b> <a href="#">View All</a> <a href="#">Compose Case Mail</a>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

**Veron Chen (LKKAUTO)**

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**From:** Naz (LKKAUTO)  
**Sent:** Wednesday, 20 March 2019 3:53 PM  
**To:** Chiang Liat Choon  
**Cc:** Veron Chen (LKKAUTO); SUR  
**Subject:** Re: SHC 8798T FINALIZATION

Dear Mr Chiang,

Finalized Part by Part Repair \$440.00 / 2 Days subject to insurance approval.

Thank you.

Best Regards,

**Naz** | Technical Investigator

**LKK Auto Consultants**

Phone: 6841-2157 | Email: [Naz@lkkauto.com](mailto:Naz@lkkauto.com) | Fax: 6256-4315

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

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**From:** Chiang Liat Choon <[chianglc@cdge.com.sg](mailto:chianglc@cdge.com.sg)>  
**Sent:** Thursday, 14 March 2019 11:39 AM  
**To:** Naz (LKKAUTO)  
**Subject:** Fw: SHC8798T FINALIZE

Dear Naz,

Best Regards  
Chiang Liat Choon

Taxi Crash Repair ComfortDelGro Engineering Pte Ltd  
Off: 62148314 Fax: 65468156

---

**From:** ApeosPort-IV C5570 <sbs-singnalling@sbstransit.com.sg>  
**Sent:** Thursday, 14 March 2019 11:34 AM  
**To:** Chiang Liat Choon  
**Subject:** Scan Data from CDG\_LO\_AW\_A5570

Number of Images: 2  
Attachment File Type: PDF

Device Name: ApeosPort-IV C5570  
Device Location:

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This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

SBS Transit Ltd [Registration No. 199206653M]

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ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

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## 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	02/03/2019 11:39
Date Of Accident	02/03/2019 10:35
Exact Location Of Accident	AIRPORT BLVD TWDS T 3 NEAR DNATA EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8798T
<b>Insured/Policyholder</b>	
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	GOH PENG GUAN
NRIC No	S1691995J
Date Of Birth	13/10/1965
Occupation	OUTDOOR
Date Of Driving Pass	22/06/1988
Driving Experience	30 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91467966
Fax Number	
Contact Number	
Email Address	ALANGPG65@GMAIL.COM

Address	BLK 170C PUNGGOL FIELD #12-695
Postcode	823170
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)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : FEMALE

#### 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 / Type Of Accident: HEAD TO SIDE

#### 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	SLH7629G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG ROMAN CHI KEUNG
NRIC/Passport Number	S2601357G
Contact Number	
Address	

Postcode

Insurance Company Name

TOKIO MARINE INSURANCE SINGAPORE LTD

Nature Of Damage

FRT

No. Of Passenger (Including Driver)



# 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. 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.

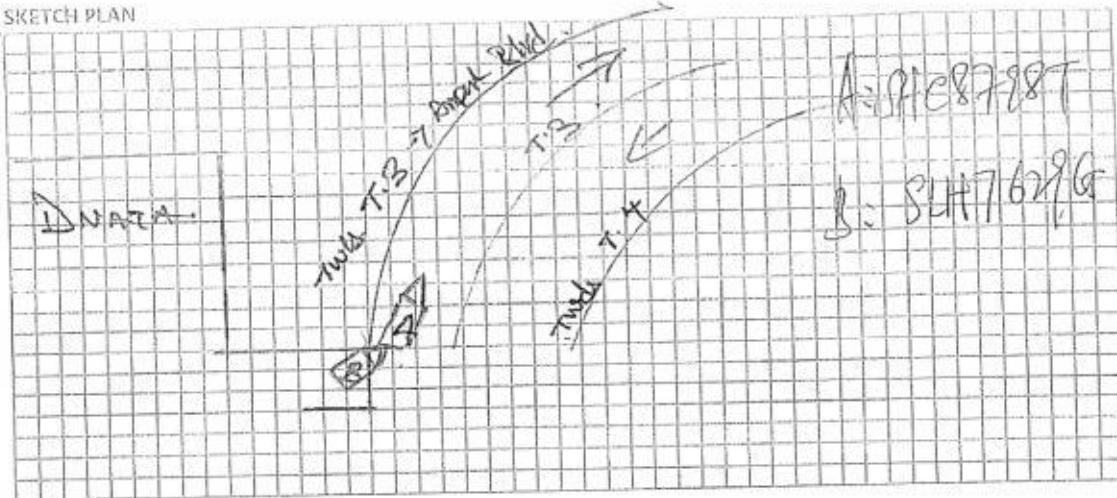
CO PLAN NO 199703221R

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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON. 2 March 2019 10:30h I, Vett A

Pick up pax and about to move

I left A gone, went to vehicle in the

Right. Suddenly Vett B hit Vett A

left rear at the point of accident

Vett A ferry 2 pax not injured.

DECLARATION

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

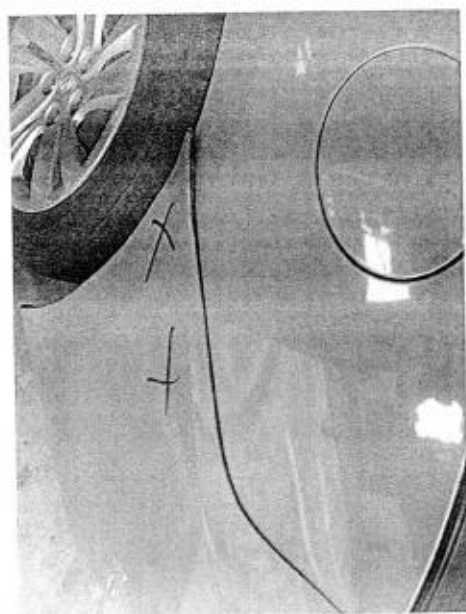
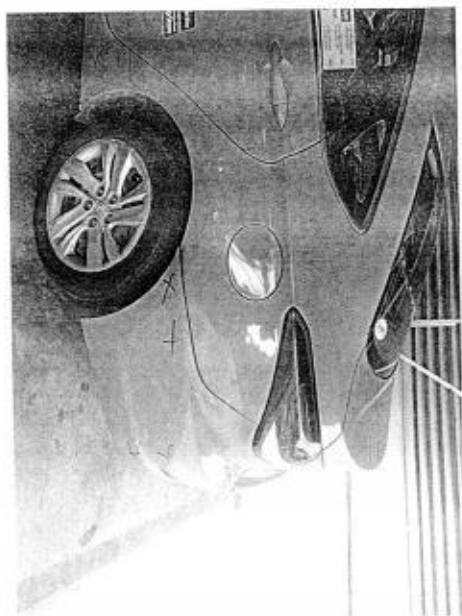
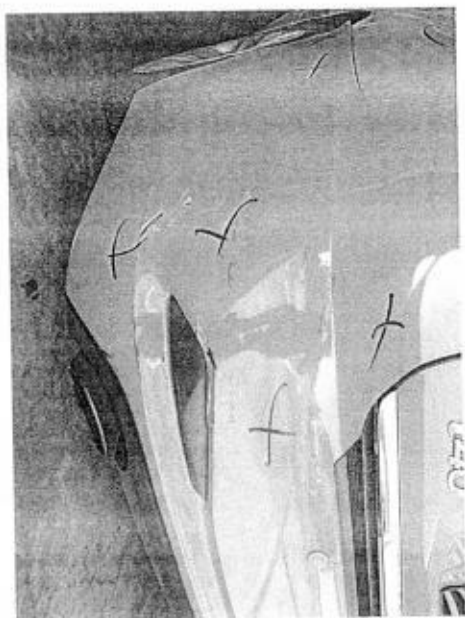
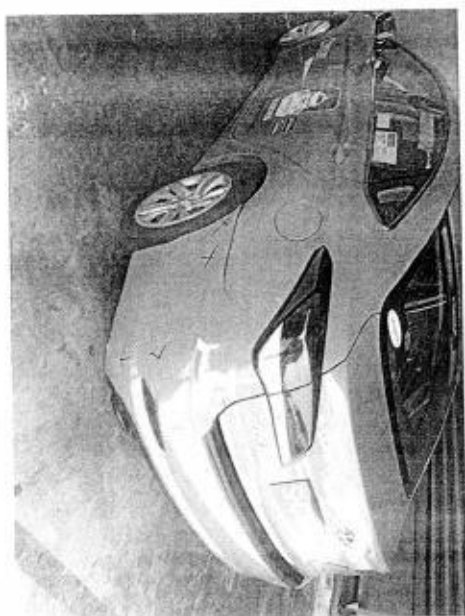
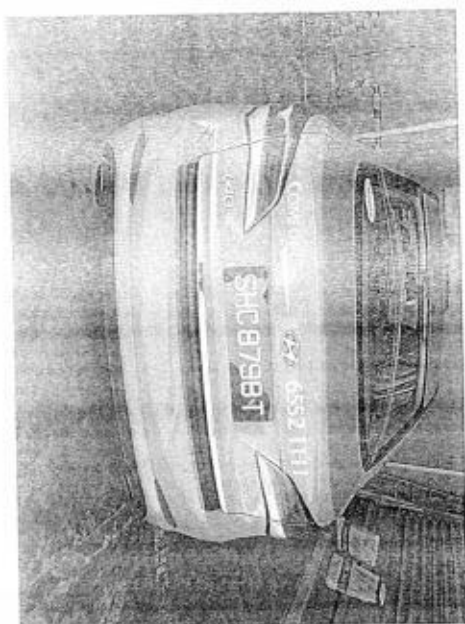
COMFORT TRANSPORTATION PTB LLC  
CO REG NO 189203321R

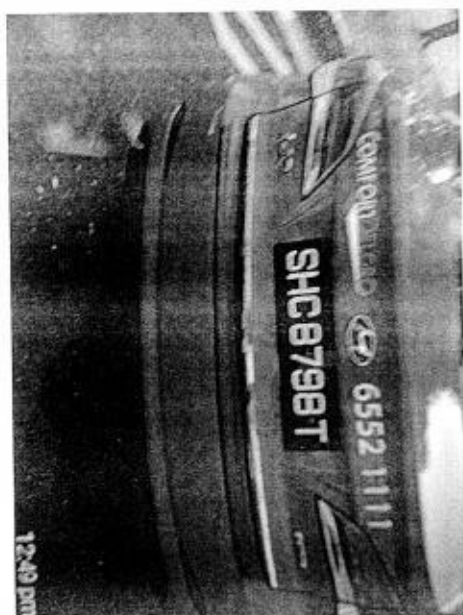
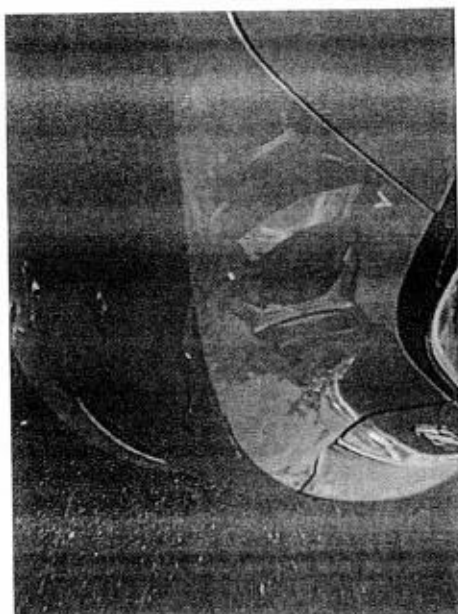
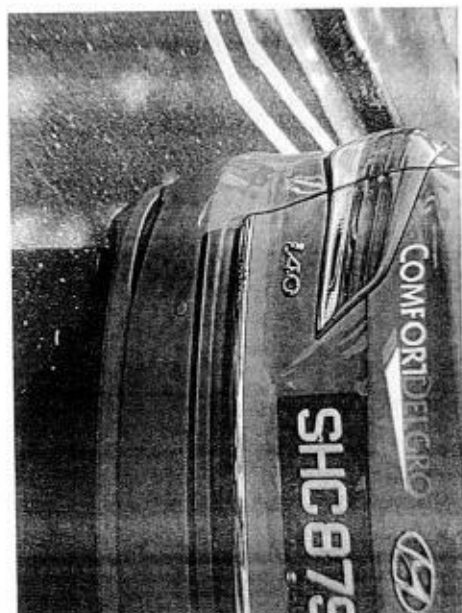
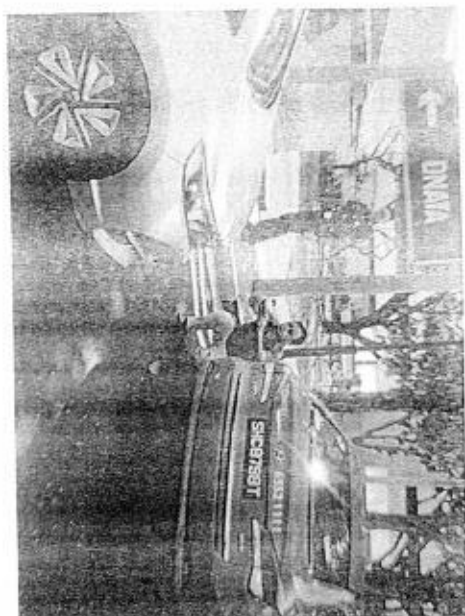
Policyholder's Signature  
Date & Time:

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

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

J. Nair 2/3





## 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**

<b>Claim Type:</b>	THIRD PARTY	<b>Ref. No:</b>	
<b>Policy No:</b>		<b>Date of Loss:</b>	02/03/2019
<b>Vehicle Reg. No.:</b>	SHC8798T	<b>Driveable?</b>	YES
<b>Party At Fault:</b>	UNKNOWN		
<b>Make/Model:</b>	HYUNDAI I40, 1.7 D CRDI (A)	<b>Vehicle Reg. Date:</b>	10/03/2016
<b>Vehicle Colour:</b>	BLUE	<b>Gen Condition:</b>	GOOD
<b>Engine No:</b>	D4FDEU493782	<b>Chassis No:</b>	KMHLB41UMGU085559
<b>Odometer:</b>	0 KM		
<b>Paint Type:</b>			
<b>List Item Discount:</b>	20.00 %		
<b>Total Loss?</b>	NO		
<b>Est. Duration of Repair (day)</b>	3		
<b>Present Location:</b>	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

**COST OF CLAIMS**

	<b>Amount</b>
Parts	510.00
Miscellaneous Items	10.00
Labour	810.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (S\$)</b>	<b>1,330.00</b>
<b>+ GST 7.00% (S\$)</b>	<b>93.10</b>
<b>Nett Amount (S\$)</b>	<b>1,423.10</b>

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: 05 Mar 2019)  
**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/SHC8798T/05/03/2019 12:05  
**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 ?XR
2	10		*REAR BUMPER CLIP 10PCS	20.00	0.00	*22.00 FL /NEC XNN
3	1		*REAR BUMPER MAT	0	0.00	*50.00 FS /NEC XNN
Sub Total (S\$)						625.00
- List Item Discount on L Items (S\$)						115.00
Total Parts (S\$)						510.00

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

ComfortDelGro Engineering Pte Ltd/SHC8798T/05/03/2019 12:05. 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	400.00
2	SPRAY PAINTING	New	300.00
3	WIRING	New	30.00
4	REMOVE/REFIX REVERSE SENSOR	New	80.00
Gross Labour Cost (S\$)			810.00

ComfortDelGro Engineering Pte Ltd/SHC8798T/05/03/2019 12:05. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

*[Signature]*  
NA2 LKK

5/3/19 1530

PIP

2 DAYS

CHECK ITEMS PHOTO

BY FRONT PHOTO

**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:

Team: ARC Repair TP(CLSO)1

## JOB CARD

Sales Order:

JC NO.: 305274553

CUSTOMER

COMFORT TRANSPORTATION PTE LTD

VR/MS

7010045

CUSTOMER NO.

ADDRESS

383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755 (Q)

TEL (R)

(P)

DISCOUNT CARD NO.

REGN NO:

SHC8798T

MILEAGE

MAKE:

HYUNDAI

FUEL

E 1/2

MODEL

I-40

DATE/TIME IN

05.03.2019 10:10

YR OF MANU

10.03.2016

TARGET DATE

CHASSIS CODE

KMHLB41UMGU085559

COMPLETION DATE/TIME

## JOB DESCRIPTION

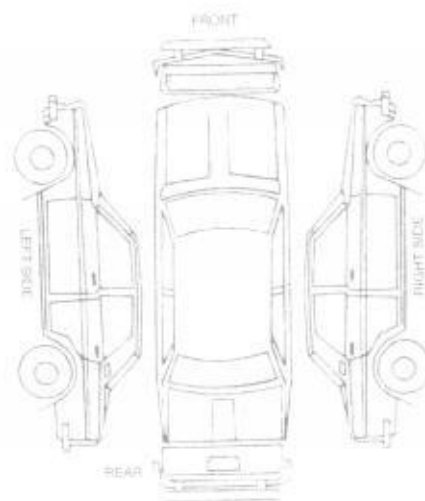
Accident Date: 02.03.2019

NATURE: 3P 02.03.19

S/NO

LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Knowledge Slip

Exit Pass

Name:

Vehicle No.:

SHC8798T

CHIANG

Vehicle No.:

SHC8798T

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

Date: 14.03.2019  
Time: 09:38:32  
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 : 305274553  
REGN NO : SHC8798T  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : I-40  
DATE OF REGN : 10.03.2016  
DATE/TIME IN : 05.03.2019 10:10  
ACCIDENT DATE : 02.03.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

SUB-TOTAL : 0.00

JOB NATURE

0000 L	MERIMEN FEE	10.00	
0001 PB	PANEL BEATING	200.00	
0002 SP	SPRAYPAINT CHARGE	200.00	
0003 20-22	REMOVE/REFIX REVERSE SENSOR	30.00	
			SUB-TOTAL : 440.00

TOTAL : 440.00

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :

Our Job Ref No : 305274553  
Date : 14/03/19

## COMFORTDELGRO ENGINEERING

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

### FINALIZATION FORM

To : LKK  
Attn : NAZ  
Vehicle Reg No. : SHC8798T

Fax :

02/03/19

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


1. The repair job shall bill to: TOKIO SLH7629G
2. The finalized amount shall be:
- |   |                 |
|---|-----------------|
| (a) Spare Parts after List discount       |                 |
| (b) Labour Charges                        | <u>\$440.00</u> |
| <b>Total for Part-By-Part Repair Cost</b> | <u>\$440.00</u> |
| (c.) Lumpsum Repair (if applicable)       |                 |
| Total for Lumpsum repair cost after Less: |                 |
| <b>Final Lumpsum Repair cost</b>          |                 |


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 : NAZ LKK  
Date : 2013/19

### 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:

## 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: CS/TMI19004076/NVD3N2

Date: 25/03/2019

## REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MK000202
Claimant Vehicle No :	SHC8798T	Insured Vehicle No :	SLH7629G
Date of Loss:	02/03/2019	Nature of Claim:	TP
		Claim No:	M1901301

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	SHC8798T	Engine No:	D4FDEU460610
Make & Model:	HYUNDAI I40, 1.7 D CRDi (A)	Chassis No:	KMHLB41UMGU085559
Reg. Date:	10/03/2016 (Man. Year: 2015)	Odometer:	564014 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:	Good

## CONDITION OF TYRES

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

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	510.00	0.00	510.00	100.00
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	810.00	430.00	380.00	46.91
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>1,330.00</b>	<b>440.00</b>	<b>890.00</b>	<b>66.92</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>93.10</b>	<b>30.80</b>	<b>62.30</b>	<b>66.92</b>
<b>Nett Amount (S\$)</b>	<b>1,423.10</b>	<b>470.80</b>	<b>952.30</b>	<b>66.92</b>

## INSPECTION

Date of Assignment:	05/03/2019	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	05/03/2019	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: 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

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 25 Mar 2019)
<b>Parts:</b> 143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHC8798T)
<b>Validity:</b>	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
<b>Further Info:</b>	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	Repair	553.00 FL	*- FL
2	10		*REAR BUMPER CLIP 10PCS	Not Necessary	22.00 FL	*- FL
3	1		*REAR BUMPER MAT	Not Necessary	50.00 FS	*- FS
F=Franchise part. S=SpcNett. L=ListItemDisc.						
Sub Total (S\$)					625.00	0.00
- List Item Discount on L Items 20.00/20.00% (S\$)					115.00	0.00
Total Parts (S\$)					510.00	0.00

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## 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 (S\$)			10.00	10.00

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	400.00	200.00
2	SPRAY PAINTING	New	300.00	200.00
3	WIRING	New	30.00	0.00
4	REMOVE/REFIX REVERSE SENSOR	New	80.00	30.00
Gross Labour Cost (S\$)			810.00	430.00

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&lt; END OF ESTIMATES &gt;