

INS. CASE OWNER: Jume | CC3 / CT11900 4655, k2ph2 | LKK: 12/7/19 IDAC: 12/7/19

Surveyor: Kalvin DOI: 12/7/19 Date/Time: 12/7/19  
 Registered in Meritum:                     

**Pre-assign / CCU / FTE**



Insured Vehicle No. : GBF 7484K Claim No. :                       
 Name of Insured : MUP KEE TRAINING COMPANY Policy No. : 0MLKSN21081900  
 Insured Tel No. :                      HP:                      Make / Model : NISSAN  
 Excess Sec II :SS                      D.O.A : 12/7/19 Place of Accident : Chan Yi Ku  
 Is driver the owner? ( YES / NO ) Nature of Accident :                       
 If NO. Driver Name / Age : TAN HWA LAM @ LAM Sang OI GIA REPORT: YES / NO :                      TP GIA REPORT: YES / NO :                       
 Driver Tel No. :                      (V/L: YES / NO ) Insured Liability :                      Final ? Yes / No :                     

SH 7802L



INSRS: WGE  
 WSP: W  
 Tel:                       
 Liability:                       
 RMKS:                     



INSRS:                       
 WSP:                       
 Tel:                       
 Liability:                       
 RMKS:                     



INSRS:                       
 WSP:                       
 Tel:                       
 Liability:                       
 RMKS:                     



INSRS:                       
 WSP:                       
 Tel:                       
 Liability:                       
 RMKS:                     

Date/Time	STAGE	DATE / PIC
	Non-Reporting Itr (1st)	
	Non-Reporting Itr (2nd)	
	Non-Reporting Itr (Final)	
	Notification Itr (if non-mickan)	
	Call OI: <u>&gt; Email 17/10/19</u>	
	After call Itr to OI	
<u>25-09-19</u>	Documentation Check List: Handler Typist	
	Notification Itr (if non-pickup)	<input type="checkbox"/>
	After call Itr to OI	<input checked="" type="checkbox"/>
	Authorisation To Act	<input checked="" type="checkbox"/>
	Release Voucher	<input checked="" type="checkbox"/>
	Final Repair Bill	<input checked="" type="checkbox"/>
	Car Rental Invoice	<input checked="" type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input checked="" type="checkbox"/>
	Medical Bill	<input type="checkbox"/>
	PIR	<input type="checkbox"/>
	Mandate/Reject Instruction	<input type="checkbox"/>
	LOD	<input checked="" type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input checked="" type="checkbox"/>
	Others:	<input type="checkbox"/>

**PRELIMINARY ADVICE** Date/Time:                      Sent By:                     

**FINALIZATION** Date/Time:                      Confirm with:                      Confirm by:                     

Repair Cost: 45 \$5,105.00 ( 2 days) Reduction: 40 % Email  Call

**FINAL SETTLEMENT** Date/Time: 12-11-19 Confirm with:                      Email  Call

Final Liability: 100 (Agreed / Assessed) BOLA S/N No. : NIL If NO or B 28. Ass. Ltr :                       
 Repair Cost: 1167 \$5,125.50 DID DRIVE PARS AND HIT TP STATIONARY VEH.  
 Loss of Rental (LOR): SS 221.34 ( 2 days) x 110.67  
 Loss of Use (LOU): SS - ( 5 x days)  
 Loss of Income (LOI): SS 100.00 ( 50 x 2 days)  
 LOR only  LOU only  LOR + LOU  LOR + LOI  [Tick only one]  
 GLA/LTA Search: SS 7.49  
 Medical: SS -  
 Disbursement: SS - (e.g. Tow/Independent)  
 Legal Cost: SS -  
 Total: SS 1,450.33 Global Sum SS: 1,450.00  
 1) Claim status: Normal/Reject/Private Settle  
 2) Report Format: TP  
 3) Survey fee: 400

**FINAL PAYMENT** Date/Time: 12-11-19 Confirm with:                      Email  Call

Payee 1: SS 1,450.00 Name 1: COMPTON/IGAD ENGINEERING PTE LTD  
 Payee 2: (Strike if N.A.) SS Name 2:                       
 Payee 3: (Strike if N.A.) SS Name 3:                     

**COPY SENT**  
12/11/19

Inspector: Kolvin

REF:

### ASSIGNMENT

From \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / IRV / MV  
 Inspected Vehicle No: \_\_\_\_\_  
 at Workshop mile \_\_\_\_\_  
 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 Report: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repair: 2 days Res: Yes or No  
 Cum Sum: 20 % J-Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SH 7803L Tr Regn: 11 Feb 2014  
 Type: M. Car / M. Cycle / Bus / Van / Lorry /  Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Hunter 24 cc 1685  
 Colour: Blue A/C: Insu  / Std / HI / NA  
 Sp. Reading: 660241 T/Radio: Ins  / Std / HI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: KM HLB 4144 D4041628  
 Gen. Cond: Good /  / Poor / Burnt  
 Steering: Inoper  / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Inoper  / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi: Nil / S/Rim / STD  / Rim or \_\_\_\_\_  
 Tyre Size: F: 205/60R16  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Harok  
 Front: R/Bal. 6 mm L/Bal. 6 mm  
 D.O.A. 13/3/19  
 Rear: R/Bal. 6 mm L/Bal. 6 mm  
 D.O.A. 13/2/19  
 Survey held at CDGE (Loyang)  
 Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooltop or  
o/s Rear  
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>45. + 1.080 (BBD. = 710 40%)</u>

Delete Time, File Pass to?  : Prel. Report  
 : Final Report

Days Of Repair: \_\_\_\_\_  
 Resurvey No. of Trip: \_\_\_\_\_

Add Fee:  Site Insp \$  
 Interview \$  
 Test to \$

Survey Fee: \_\_\_\_\_  
 Transport Allow: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



Auto  
Consultants  
Pte Ltd

Company Registration No. 199807188R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: To Be Advised  
Our ref: CC3/CTI19004655/K1pb3

Date: 14.03.2019

The Motor Claims Department  
M/s CHINA TAIPING INSURANCE (S) PTE LTD

Dear Sir/Madam,

**PRELIMINARY ADVICE OF VEHICLE NO.**

**SH7803L**

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 13.03.2019 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	1,760.00
Revised Estimate Amount	: S\$	1,310.00
"Check" Items Amount	: S\$	-
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the  
O/S Rear Portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

**KALVIN ANG**  
**Licensed Appraiser**

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SH 7803L

CHINA / LKK

DATE 13/3/2019 11:55

MAKE :

RIGHT REAR

FZ

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper			\$ 553.00	
	Rear Bumper Clip 10 pcs			\$ 22.00	
	Rear Fender (RH) x repair			\$ 575.00	
	SUB TOTAL			\$ 115.00	
	LESS 20%			\$ 460.00	
	DISCOUNTED TOTAL				
	Rear Bumper Advertisement Logo			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00	Nett
				\$ 250.00	
	<b>Labour Charge</b>				
	Panel Beating-Repair Fender			\$ 400.00	
	Spray Painting Charge			\$ 600.00	
	Tuff Kote			\$ 50.00	
	TOTAL LABOUR			\$ 1,050.00	
	ESTIMATE TOTAL			\$ 1,760.00	

Kalvin (LKK)  
 13/3/19 15:20 hr.  
 2 Pys  
 L/S  
 After Repair photo

LKK Auto Consultants hereby notify the Repairer of the following:

- To reserve before/after spray painting
- To display damaged parts during reserve
- Parts procedure subject to insurance
- Third party survey is on a "Without Prejudice" basis
- No illegal modifications allowed
- Supplementary items must be reviewed 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

Our Job Ref No : 305277199  
Date : 14.12.2018

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

## FINALIZATION FORM

To : LKK Fax : \_\_\_\_\_  
Attn : KALVIN  
Vehicle Reg No. : SH 7803L Date of Accident : 13.03.2019

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

- The repair job shall bill to: CHINA — GBF7484K
- The finalized amount shall be:
 

(a) Spare Parts after List discount	<u>\$0.00</u>
(b) Labour Charges	<u>\$0.00</u>
<b>Total for Part-By-Part Repair Cost</b>	<u>\$0.00</u>
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	<u>\$1,050.00</u>
<b>Final Lumpsum Repair cost</b>	<u>\$1,050.00</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 : FAUZY BIN MOKHTAR  
Tel : 62148319  
Fax : 65468156

Signature:   
Name : Calvin  
Date : 18/3/18

### 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		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

\_\_\_\_\_

Team: ARC Repair TP(CLS0)1

**JOB CARD**

Sales Order: 3905891

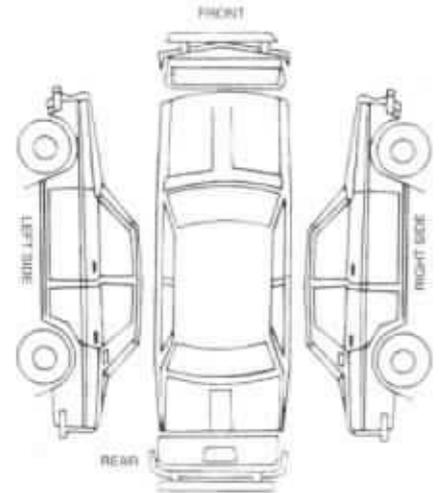
JC NO.: 305277199

CUSTOMER <b>COMFORT TRANSPORTATION PTE LTD</b> VMS 7010045 CUSTOMER NO. 383 SIN MING DRIVE ADDRESS Singapore SINGAPORE 575717 65508755 L (R) (O) (P)	REGN NO.: <b>SH 7803L</b>	MILEAGE
	MAKE: <b>HYUNDAI</b>	FUEL E _____ 1/2 _____ F
	MODEL <b>I-40</b>	DATE/TIME IN <b>13.03.2019 12:30</b>
	YR OF MANU. <b>11.02.2014</b>	TARGET DATE
	CHASSIS CODE <b>KMHLB41UMDU043628</b>	COMPLETION DATE/TIME:
SCOUNT CARD NO.		

JOB DESCRIPTION

Accident Date: 13.03.2019  
 NATURE: 3P 13.03.19/B-

S/NO	LABOR CODE	DESCRIPTION
●		



CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR \_\_\_\_\_

CUSTOMER'S SIGNATURE \_\_\_\_\_

Acknowledgement Slip

Vehicle No.: **SH 7803L**      **FZ CHINA**

Signature/Date \_\_\_\_\_

Returned to Service Reception upon collection

Exit Pass

Vehicle No.: **SH 7803L**

Name of Service Advisor \_\_\_\_\_      Date \_\_\_\_\_

To be kept by Security Guard

**COMFORTDELGRO ENGINEERING PTE LTD**

**REPAIR ESTIMATE\***

VEHICLE NO : SH 7803L

*CHINA / LKK*

DATE 13/3/2019 11:55

MAKE :

*RIGHT REAR*

*FZ*

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Rear Bumper ✓			\$ 553.00	
	Rear Bumper Clip 10 pcs ✓			\$ 22.00	
	<i>Rear fender (RH) x repair</i>				
	SUB TOTAL			\$ 575.00	
	LESS 20%			\$ 115.00	
	DISCOUNTED TOTAL			\$ 460.00	
	Rear Bumper Advertisement Logo ✓			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH) ✓	\$	100.00	\$ 200.00	Nett
				\$ 250.00	
	<b>Labour Charge</b>				
	Panel Beating-Repair Fender			\$ <del>400.00</del> <sup>200</sup>	
	Spray Painting Charge			\$ <del>600.00</del>	400
	Tuff Kote			\$ <del>50.00</del>	X
	TOTAL LABOUR			\$ 1,050.00	
	ESTIMATE TOTAL			\$ 1,760.00	
	<i>Ka Ina (LKK)</i>				
	<i>M 13/3/19 1520hr.</i>				
	<i>2 Dgs</i>				
	<i>L/S</i>				
	<i>After Repair photo</i>				
	<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>LKK Auto Consultants notice notify the Rep of the following:</p> <ul style="list-style-type: none"> <li>To notify of the above vehicle</li> <li>To notify of the repair parts to be replaced</li> <li>To notify of the labour to be performed</li> <li>To notify of the cost of the repair</li> <li>To notify of the cost of the paint</li> <li>To notify of the cost of the Tuff Kote</li> <li>To notify of the cost of the advertisement logos</li> </ul> </div>				

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 Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No: 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI19004655/K1eb3q2

3 ANSON ROAD #16-00  
SPRINGLEAF TOWERSINGAPORE 079909

Date : 18-11-2019



Code : CTI

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBF 7484K	Veh. Inspected	SH 7803L
Policy No.	DMCVSN3012821900	Coverage (\$)	0.00
Claim No.	SNM19D202859	Excess (\$)	0.00
Assign From		Assign Date	13/03/2019

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	KMHLB41UMDU043628	Colour	BLUE
Odometer	660241	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	6 mm
L/H Front Tyre	205/60 R16	HANKOOK	6 mm
R/H Rear Tyre	205/60 R16	HANKOOK	6 mm
L/H Rear Tyre	205/60 R16	HANKOOK	6 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION,  
DAMAGES SEE DETAILS.

## 5. General Information

Accident Date	13/03/2019	Inspection Date	13/03/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.  
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: **2 Working Days**



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 7803L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	DEFORMED	553.00	553.00
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR FENDER (RH )(NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-115.00	-115.00
			460.00	460.00
<b>SPECIAL NETT ITEMS</b>				
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
			250.00	250.00
<b>LABOUR</b>				
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR FENDER (RH).		400.00	200.00
	SPRAY PAINTING CHARGE.		600.00	400.00
	TUFF KOTE.	NOT NECESSARY.	50.00	-
			1,050.00	600.00
<b>GRAND TOTAL</b>			<b>1,760.00</b>	<b>1,310.00</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>1,050.00</b>

Report Ref No. CC3/CT119004655/K1eb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.