

22/03/2012

ASS. REC. BY:

REF: CS/TMI/14005449/KVD35²⁷

Special Instruction:

Survivor
menurun

Kalin

ASSIGNMENT (Office)

From (Person): Dillen Senthilan

of

TMI

Date/Time: 27.3.2019 18:04 PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHA 38283

Insured:

GBC 91692

at Workshop m/s

Comfordelgro Engineering

Tel:

6214 8315119

of 59 Loyang Drive, 508969

Policy No: MS 001411

Claim No:

M19 02031

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 27.3.2019

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement:

Date/Time:

27.3.19 9.08am

Person Contacted:

Jumani

Vehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	SHA 38283 - CS/PC1 18021236/T1+d3e2 DOA - 21/11/2018
	GBC 91692 - X

Surveyor: Kelvin

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OOITP / HS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: _____

at Workshop m/s _____

at _____

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: _____

ODAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Turn Sum: _____ % J Val: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SHA 3828J Yr Regn: 1509, 2015

Type: M. Car / M. Cycle / Bus / Van / Lorry / T. B. / Prime Mover /

Truck / Trailer or

Make: Hyundai 240 cc 1685

Colour: Blue A/C: Insu 0 / Sid / NI / NA

Sp. Reading: 604.687 T/Radio: Insu 0 / Sid / NI / NA

Eng/No: _____

C/No: KMHCB41um64 07 9200

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: 205/60R16

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

TOYO / YOKO or Wanlu

Front: _____ Rear: _____

R/Bal: 6 mm R/Bal: 6 mm

L/Bal: 6 mm L/Bal: 6 mm

D.O.A. 27/3/19 D.O.I. 27/3/19

Survey held at C D G E (Loyang)

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

o/s B.L.

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

Date / Time	Action / Instruction
29/3/19	Check up \$150/ 2 hrs (Red 904.72, 4990) To Kio 4s

Date/Time, File Pass to? ☐ : Prell. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) 14 - typist

Report Form

menimen

LS \$950/-

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech Insp (\$

☐ : Rep. Insp (\$

Survey Fee: 250

Transportation:

\$ + SS \$

Photos

Other

10

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	27 Mar 2019 Sendback Est	27 Mar 2019 15:02 S\$1,854.72	27 Mar 2019 18:04 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All																				
CLAIM SUBFOLDER DETAILS																								
Insured: AIK FAH TRADING, Co. Reg. No.: 37382400M																								
Main Claimant: CTPL																								
Vehicle Reg. No.: SHA3828J		Date of Loss: 27/03/2019 00:00 - :59 [41 Months and 12 Days From LTA Reg Date (Man Yr)]																						
Claim Type: TP / M1902031		Policy/Cover Note No.: MS001411 (Comprehensive) Coverage: 27/02/2019 - 26/02/2020																						
Vehicle Reg. No. (Insured): GBC9169Z		Policy No. (Claimant): Excess: S\$0.00																						
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 ... [Final Rpt due 05/04/2019]																								
Adj Asg. Remarks: OUR INSD HAS NOT RPT THE ACCIDENT.																								
ASSOCIATED MAIL RECEIVED																								
There are no mail for this case.																								
ALL ASSOCIATED TASKS																								
<table border="1"> <thead> <tr> <th>Due Date</th> <th>Priority</th> <th>Type</th> <th>Task Group</th> <th>Subject</th> <th>Handler</th> <th>Assigned By</th> <th>Completed On</th> <th>Created On</th> <th>Done?</th> </tr> </thead> <tbody> <tr> <td colspan="10">No results.</td> </tr> </tbody> </table>					Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?	No results.									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?															
No results.																								

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	27/03/2019 13:53
Date Of Accident	27/03/2019 11:00
Exact Location Of Accident	JALAN BUKIT MERAH TWDS LOWER DELTA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA3828J
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	TAN SENG CHUAN
NRIC No	S7243141C
Date Of Birth	20/11/1972
Occupation	OUTDOOR
Date Of Driving Pass	20/05/1994
Driving Experience	24 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96782353
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 311D ANCHORVALE LANE #07-40
Postcode	544311
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	SIDE SWIPE
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)	1

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

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	GBC9169Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD
Nature Of Damage	LEFT 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

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

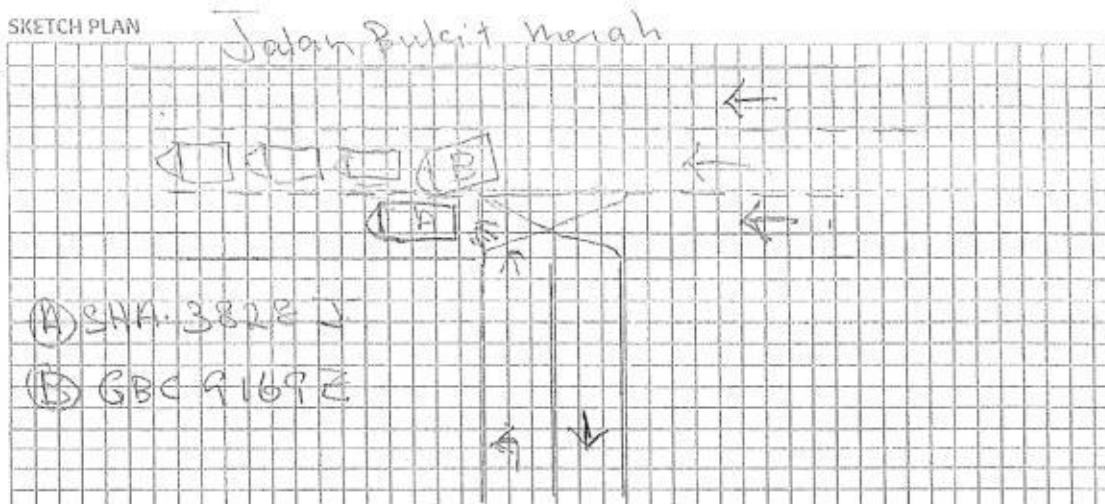
27/3/19
Jackson Heng
CSO

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

GIA/MIC SketchPlanForm_V3

4-1-1
3-1-1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/3/2019 at about 1100 hrs, I vehicle A was turning out from Carpark to the main road. After my turn was in straight position, Suddenly I felt a Impact from my right rear portion. Then vehicle B drive forward and parked his car at the side of the road.

DECLARATION

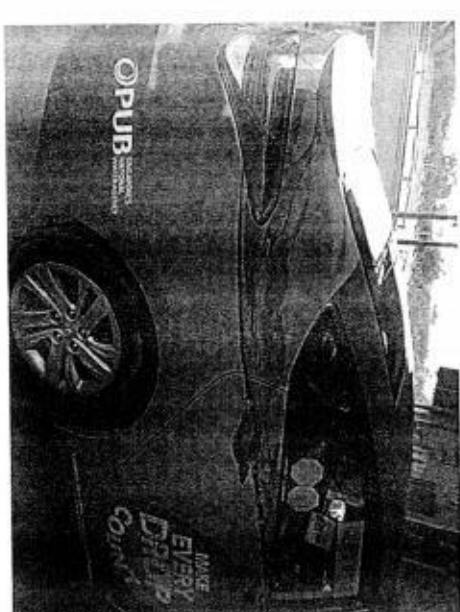
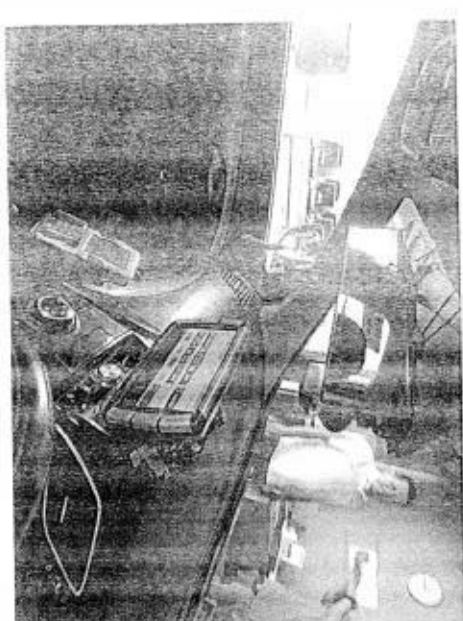
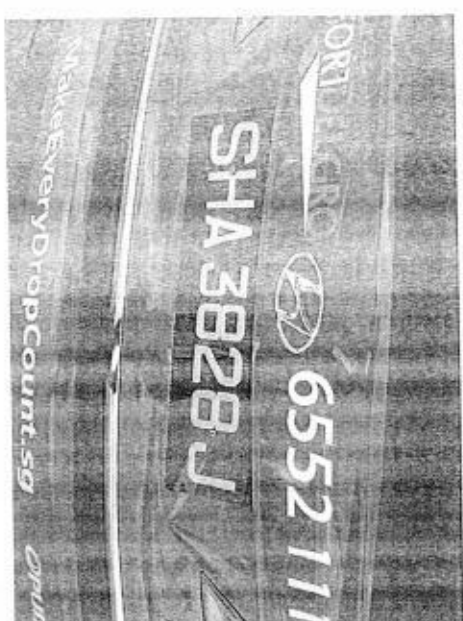
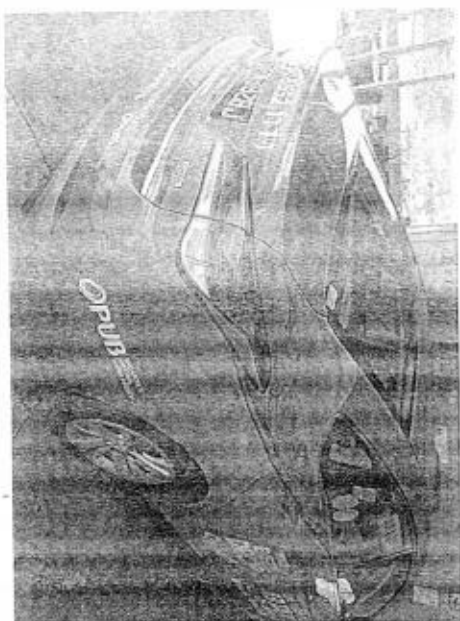
I/We declare the foregoing particulars are true in every respect.

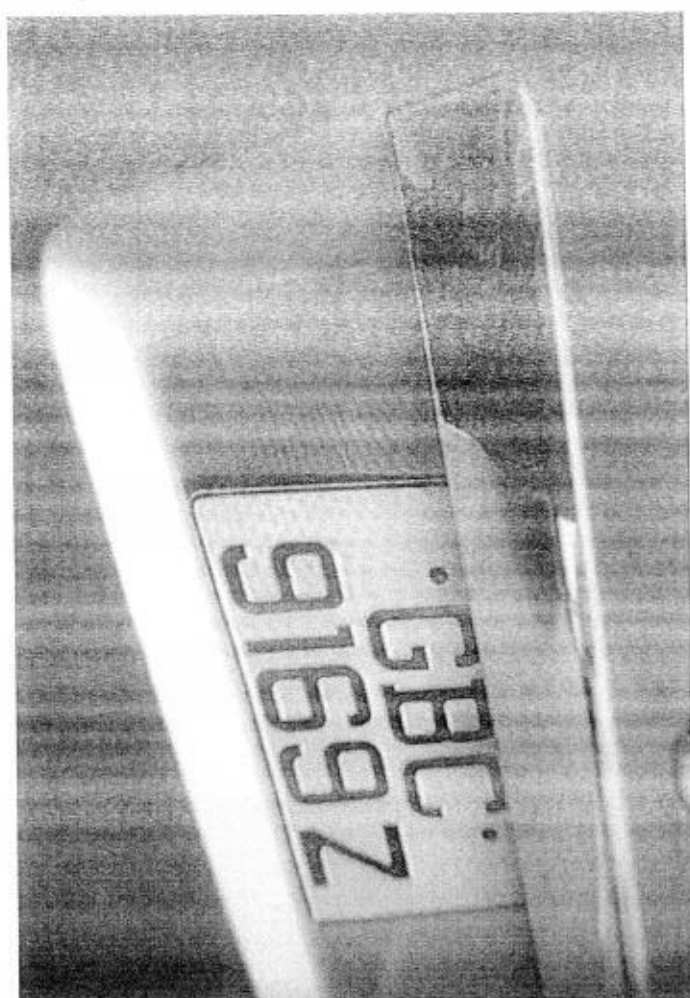
COMFORT TRANSPORTATION PTE LTD
CO REG NO 192202821R

Policyholder's Signature
Date & Time:

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

27/3/19
Jackson Heng
CSO
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:





COMFORTDELGRO

Date/Time: 27.03.2019 14:12 Page : 1

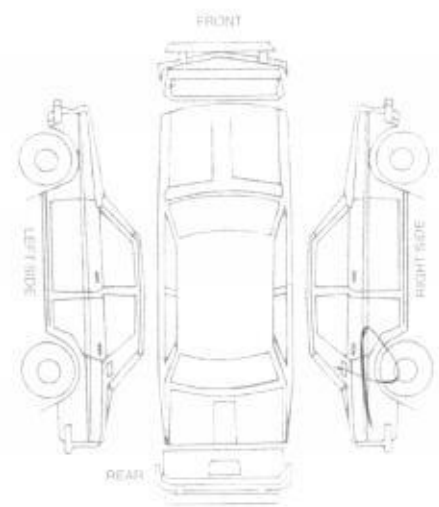
Team: ARC Repair TP(CLSO)1 **JOB CARD** Sales Order: JC NO.: 305282031

CUSTOMER /MS CUSTOMER NO. ADDRESS (R) (P) COUNT CARD NO.	COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (O)	REGN NO: SHA3828J	MILEAGE
		MAKE: HYUNDAI	FUEL E 1/2 F
		MODEL I-40	DATE/TIME IN 27.03.2019 11:45
		YR OF MANU 15.10.2015	TARGET DATE
		CHASSIS CODE KMHLB41UMGU079200	COMPLETION DATE/TIME

JOB DESCRIPTION

Accident Date: 27.03.2019
NATURE: 3P 27.03.19

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHA3828J JU TOKIO

Vehicle No.: SHA3828J

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 (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:	27/03/2019
Vehicle Reg. No.:	SHA3828J	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 GDI (A)	Vehicle Reg. Date:	15/10/2015
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDEU441560	Chassis No:	KMHLB41UMGU079200
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair 4 (day)			
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS**Amount**

Parts	444.72
Miscellaneous Items	10.00
Labour	1,400.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	1,854.72
+ GST 7.00% (S\$)	129.83
Nett Amount (S\$)	1,984.55

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 27 Mar 2019)

Parts: N/A HYUNDAI I40 1.7 GDi (A) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SHA3828J/27/03/2019 15:02

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		*FRT DOOR OUTER HANDLE <i>X repair</i>	20.00	0.00	*36.30 FL
2	1		*REAR WHEEL HUB CAP <i>house</i>	20.00	0.00	*107.10 FL
3	1		*REAR DOOR COMFORTDELGRO & APPS STICKER <i>per</i>	0.00	0.00	*80.00 F
4	1		*REAR BUMPER ADVERTISEMENT LOGO <i>per</i>	0.00	0.00	*50.00 F
5	1		*REAR FENDER RH ADVERTISEMENT LOGO <i>per</i>	0.00	0.00	*100.00 F
6	1		*REAR DOOR RH ADVERTISEMENT LOGO <i>per</i>	0.00	0.00	*100.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$) **473.40**- List Item Discount on L Items (\$\$) **28.68**Total Parts (\$\$) **444.72**

ComfortDelGro Engineering Pte Ltd/SHA3828J/27/03/2019 15:02. 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	400.00 200
2	SPRAYPAINT	New	850.00 600
3	TUFF KOTE	New	50.00 20
4	REAR WHEEL ALIGNMENT	New	100.00 20
Gross Labour Cost (S\$)			1,400.00

ComfortDelGro Engineering Pte Ltd/SHA3828J/27/03/2019 15:02. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Calor 10/06/19

27/3/19 1510 hr

2 hrs

45

After repair photo

COMFORTDELGRO ENGINEERING

Our Job Ref No 305282031

Date : 29/03/2019

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHA3828J

Date of Accident : 27/03/2019

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

1. The repair job shall bill to: TOKIO --- GBC9169Z
###

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: 20%

Final Lumpsum Repair cost

\$ 950.00

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 finalized amount

Signature : 

Name : JUMANI

Tel : 6214 8315

Fax : 65468156

Signature : 

Name : Kalm

Date : 29/3/19

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:

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	27 Mar 2019 Sendback Est	27 Mar 2019 15:02 S\$1,854.72	27 Mar 2019 18:04 Edit Adj Rpt	S\$950.00 Edit Estimates	S\$950.00 View Rpt		Pending for Survey Report Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

Insured:	AIK FAH TRADING , Co. Reg. No.: 37382400M		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SHA3828J	Date of Loss:	27/03/2019 00:00 - :59 [41 Months and 12 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M1902031	Policy/Cover Note No.:	MS001411 (Comprehensive) Coverage: 27/02/2019 - 26/02/2020
Vehicle Reg. No. (Insured):	GBC9169Z	Policy No. (Claimant):	
		Excess:	S\$0.00
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 KALVIN ANG WEI KUN] ... [Final Rpt due 05/04/2019]		
Adj Asg. Remarks:	OUR INSD HAS 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

SHA3828J (M1902031)
[GBC9169Z]

TP
CTPL

Mar 27 2019 12:00AM

[AIK FAH TRADING]

ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter

View View in Browser ▼

Assessment Reports

1 per page ▼

No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	27/03/19 15:02	Repairer Estimates	 Load HTM	

Photos/Images

3 per page ▼

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
2	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
3	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
4	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
5	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
6	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
7	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
8	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
9	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
10	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
11	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
12	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
13	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
14	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
15	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
16	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
17	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
18	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
19	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
20	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
21	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
22	29/03/19 09:09	General View	 Load JPG	<input checked="" type="checkbox"/>
23	29/03/19 09:25	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
24	29/03/19 09:25	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
25	29/03/19 09:25	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
26	29/03/19 09:25	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
27	29/03/19 09:25	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
28	29/03/19 09:25	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>

Documentation

1 per page ▼

No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)	Thumbnail	Print
1	03/04/19 16:14	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee	 Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print

Assessment Reports			1 per page ▼	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	27/03/19 15:03	E-filed GIA report	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Repairer ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

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/TMI19005499/K1VD3S2

Date: 10/04/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MS001411

Claimant Vehicle No : SHA3828J

Insured Vehicle No : GBC9169Z

Date of Loss: 27/03/2019

Nature of Claim: TP Claim No: M1902031

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHA3828J

Make & Model: HYUNDAI I40, 1.7 GDi (A)

Engine No: D4FDEU441560

Reg. Date: 15/10/2015 (Man. Year: 2015)

Chassis No: KMHLB41UMGU079200

Colour: Blue

Odometer: 604607 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:	Fair	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Average

CONDITION OF TYRES

Front Tyre Size: 205/60R16

Rear Tyre Size: 205/60R16

Front Left Side: West Lake 6 mm

Rear Left Side: West Lake 6 mm

Front Right Side: West Lake 6 mm

Rear Right Side: West Lake 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	444.72	415.68	29.04	6.53
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,400.00	800.00	600.00	42.86
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	1,854.72	1,225.68	629.04	33.92
Approved Total (Overridden) (S\$)		950.00		
(S\$)	1,854.72	950.00	904.72	48.78
+ GST 7.00/7.00% (S\$)	129.83	66.50	63.33	48.78
Nett Amount (S\$)	1,984.55	1,016.50	968.05	48.78

INSPECTION

Date of Assignment:	27/03/2019	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	27/03/2019	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang)
Estimated Period of Repair:	2.0 days		59 Loyang Drive
			Singapore 508969

Adjuster: KALVIN ANG WEI KUN

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

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen_print&caseid=806347&extid=299114&CFID=51111408&C... 1/4

any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 10 Apr 2019)	
Parts:	N/A	HYUNDAI I40 1.7 GDi (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHA3828J)	
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		*FRT DOOR OUTER HANDLE	Repair	36.30 FL	*- FL
2	1		*REAR WHEEL HUB CAP	Grazed	107.10 FL	*107.10 FL
3	1		*REAR DOOR COMFORTDELGRO & APPS STICKER	Necessary	80.00 F	*80.00 F
4	1		*REAR BUMPER ADVERTISEMENT LOGO	Necessary	50.00 F	*50.00 F
5	1		*REAR FENDER RH ADVERTISEMENT LOGO	Necessary	100.00 F	*100.00 F
6	1		*REAR DOOR RH ADVERTISEMENT LOGO	Necessary	100.00 F	*100.00 F

F=Franchise part, L=ListItemDisc.

Sub Total (\$\$)	473.40	437.10
- List Item Discount on L Items 20.00/20.00% (\$\$)	28.68	21.42
Total Parts (\$\$)	444.72	415.68

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 (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	SPRAYPAINT	New	850.00	600.00
3	TUFF KOTE	New	50.00	0.00
4	REAR WHEEL ALIGNMENT	New	100.00	0.00
Gross Labour Cost (S\$)			1,400.00	800.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >