

Surveyor:

Falvin

DOI:

ASSIGNMENT

2/10/19

Date / Tin

2/10/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLD 7083 C.

Name of Insured:

TEO Hong Sheng.

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

2/10/19

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO. Driver Name / Age:

TAN HEVEN VANESSA FAYE

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

DMPICW706787800

MERCEDES.

MAXWELL RD TMS WATKINST

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHC809Z



INSRS:

WSP:

Tel:

Liability:

RMKS:

colle
m

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

SHC809Z-X SLD 7083C-X

LIABILITY UNCLER - BOTH PARTY TURNING.

19.06.19 10:30 (AUBD O/CAD NO RESPONSE.)

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

ADMR 19.06.19

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: ADMK

Repair Cost:

45 SS1,500.00

(3 days) Reduction:

14 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 21.10.19

Confirm with CAT

Email ☒ Call ☐

Final Liability:

100%

% 50

(Agreed / Assessed) BOLA S/N No.:

706

If NO or B 28, Ass. Lia:

Repair Cost: +1,605.40

SS 802.50

BOTH PARTY TURNING.

Loss of Rental (LOR): 496.38

SS 248.19

(3 days) x +165.46

Loss of Use (LOU): -

SS -

(\$ x 3 days)

Loss of Income (LOI): +190.40

SS 75.00

(\$50 x 3 days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒

SS 7.99

[Tick only one]

GLA/LTA Search

SS -

Medical:

SS -

Disbursement:

SS -

Legal Cost

SS -

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: 2700

Total: 22,258.87

SS 1,133.18

Global Sum SS: 1,150

FINAL PAYMENT

Date/Time: 21.10.19

Confirm with: OM

Email ☒ Call ☐

Payee 1:

SS1,150.00

Name 1:

COMFORTDELIGO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3:

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop n/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____

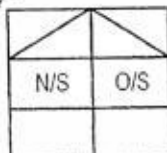
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: _____

SHC 809 7

25/24 2013

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

Truck / Trailer or

Make: _____

Much Out E220

c.c

2143

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

99.085

T/Radio:

Insured / Std / NI / NA

Eng/No: _____

C/No: _____

LOP 2120-22A 758777

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:

F:

205/65 R16

R:

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

TOYO / YOKO or

Went

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

26/5/19

D.O.I.

27/5/19

Survey held at

CPHE (Loyang)

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

215 Bch

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

Date / Time

Action / Instruction

45: +1,500 (USD: +4,247.28 74%)

CTI
42

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

\$ + RS, \$

Photos

Others

TOTAL

Report Format: _____

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

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Invs (\$ _____)

☐

: Weekend (\$ _____)



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

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/CTH9009430/K1eb3

Date: 28.05.2019

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

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHC809Z

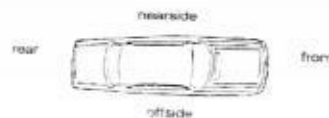
We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 27.05.2019 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	5,747.28
Revised Estimate Amount	: S\$	1,900.00
"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 Body



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 3 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

COMFORT DELGRO
ENGINEERING

COMFORT DELGRO

Date/Time: 27.05.2019 12:44

Page : 1

Team: ARC Repair TP(CFS0)1

JOB CARD

Sales Order:

JC NO.: 305298414

CUSTOMER

CITYCAB PTE LTD

7010070

R/MS

CUSTOMER NO.

383 SIN MING DRIVE

ADDRESS

Singapore SINGAPORE 575717

65551188

L (R)

(O)

(P)

VAPC

REGN NO.:

SHC 809Z

MILEAGE

MAKE:

MERCEDES BENZ

FUEL

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

MODEL

E220CDI (E5)

DATE/TIME IN: 27.05.2019 10:45

YR OF MANUF.

25.07.2013

TARGET DATE

CHASSIS CODE

WDD2120022A758333

COMPLETION DATE/TIME:

SCOUNT CARD NO.

(B)

JOB DESCRIPTION

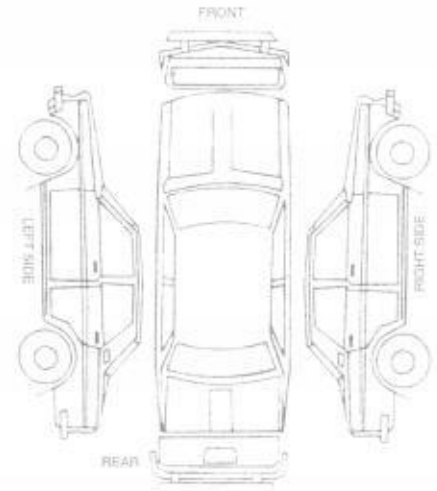
Accident Date: 26.05.2019

NATURE: 3P 26.05.2019

S/NO

LABOR CODE

DESCRIPTION

CHINA - Left Fmt
Lkt/Kdm -

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

V:

O:

File No.:

SHC 809Z

LARRY

Vehicle No.:

SHC 809Z

Larry Ng

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

DATE: 27. May. 2019

DOA: 26. May. 2019 CHINA

DOA: 26. May. 2019

Larry Ng

TOTAL		\$5,74
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COMFORTDELGRO
ENGINEERING

Our Job Ref No : 305298414

Date : 30. May. 2019

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHC 809Z

Date of Accident: 26. May. 2019

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

1. The repair job shall bill to: CHINA SLD3083C

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: \$1,500.00

Final Lumpsum Repair cost

3. Estimated normal period for repairs: 3 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 : Larry Ng

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : Kaku

Name : Kaku

Date : 31/5/19

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

Remarks:

* Uneconomical to repair - Total Loss *



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/CTI19009430/K1eb3n2	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 01-11-2019	
		Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLD 3083C	Veh. Inspected	SHC 809Z
Policy No.	DMPCSN3068581800	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	27/05/2019
2. Vehicle Particulars & Condition			
Make & Model	MERCEDES BENZ E 220	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	WDD2120022A758333	Colour	WHITE
Odometer	990085	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/65 R16	WEST LAKE	7 mm
L/H Front Tyre	205/65 R16	WEST LAKE	7 mm
R/H Rear Tyre	205/65 R16	WEST LAKE	7 mm
L/H Rear Tyre	205/65 R16	WEST LAKE	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	26/05/2019	Inspection Date	27/05/2019
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:		3 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. SHC 809Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT FENDER -LH	TO REPAIR SEE LABOUR	996.10	-
1	WHEEL RIM HUB CAP LH	SERVICEABLE	130.50	-
1	WHEEL RIM -LH	GRAZED	1,250.00	1,250.00
1	FRONT DOOR -LH	TO REPAIR SEE LABOUR	2,970.00	-
1	ROCKER PANEL GARNISH (LH) (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-1,069.32	-250.00
			4,277.28	1,000.00
	LABOUR			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT FENDER -LH ,FRONT DOOR -LH AND ROCKER PANEL GARNISH (LH).		600.00	300.00
	SPRAY PAINTING CHARGE.		800.00	600.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	TUFF KOTE.	NOT NECESSARY	100.00	-
	FRONT WHEEL ALIGNMENT.	NOT NECESSARY	120.00	-
			1,670.00	900.00
	GRAND TOTAL		5,947.28	1,900.00
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			1,500.00

Report Ref No. CC3/CT119009430/K1eb3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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