

22/03/2002

A.S. REC. BY:

REF: CS/MSG/190095701 Klvcl301 Special Instruction:

Surveyor: KalvinASSIGNMENT (Office)From (Person): Pauline Tham of MSIG Date/Time: 28.5.2019 16.48

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SHC 3969A Insured: SJV 98865at Workshop m/s Comfort delgro Tel: 6214 8398of 59 loyang DrivePolicy No: P6026721D MV Claim No: 594646

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 27.5.2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 29.5.2019 9.29 AM Person Contacted: Tien Siong Vehicle IN / OUT

Date/Time	Action/Instruction	Estimate (✓)
	SHC 3969A - NA/MSG/19009377/24.	D.O.A - 27/05/2019
	SJV 98865 - NA/MSG/19009377/24	D.O.A - 27/05/2019
<u>30/5/19</u>	Send preli revised via merimen	

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	28 May 2019 14:05		28 May 2019 16:48 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS		[Created by insurer]
Insured:	CHUA YAP BENG, ID: S0087343H	
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R	
Vehicle Reg. No.:	SHC3969A	Date of Loss: 27/05/2019 08:00 - :59 [50 Months and 15 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 594646	Policy/Cover Note No.: P60267721DMV (Comprehensive) Coverage: 25/11/2018 - 24/11/2019
Vehicle Reg. No. (Insured):	SJV9886S	Policy No. (Claimant):
		Excess:
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300	
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Pauline Tham - 6594 2545]	
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 29/05/2019]	
Driver/Custodian (Insured):	CHUA JIA HANG, YVONNE (/ Male) , NRIC: S8930818F Email:	
Adj Asg. Remarks:	Car in. on WP. Please contact us ASAP if you cannot attend this assignment. Liab: dispute. Contact: Lim Tien Siong @ 6214 8398 / 9635 8546	

ASSOCIATED MAIL RECEIVED	View All	Compose Case Mail
There are no mail for this case.		

ALL ASSOCIATED TASKS									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

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

To: MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way #21-01 SGX Centre 2 Singapore 068807	From: LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933
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Attn: Pauline Tham

Date: 30 May 2019

Preliminary Advice

Insured Vehicle No	: SJV9886S	Accident Date	: 27/05/2019
TP Vehicle No	: SHC3969A	Assignment Date	: 28/05/2019
Make	: HYUNDAI I40	Est. Duration of Repair	: 3.00
Date of Inspection	: 29/05/2019		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) 59 LOYANG DRIVE SINGAPORE 508969		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages n/s front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	3,496.00
Revised Amount	:S\$	2,877.68
Check Items (Estimated)	:S\$	17.92
Total		2,895.60

Lump Sum Repair	:S\$	
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Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

Remarks

() The vehicle is economical/not economical for repair.

(X) The above survey was conducted on a 'without prejudice' basis.

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	27/05/2019 16:14
Date Of Accident	27/05/2019 08:40
Exact Location Of Accident	SERANGOON RD TWDS PIE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC3969A
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	PRIVATE CAR

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	CHEONG WAI MING
NRIC No	S1736967I
Date Of Birth	02/03/1966
Occupation	OUTDOOR
Date Of Driving Pass	26/03/1991
Driving Experience	28 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93821109
Fax Number	
Contact Number	
EMail Address	CHANGI.WMC@GMAIL.COM

Address	BLK 641 PASIR RIS DRIVE 1 #06-506
Postcode	510641
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	SJV9886S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHUA JIA HANG YVONNE
NRIC/Passport Number	S8930818F
Contact Number	
Address	
Postcode	
Insurance Company Name	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Nature Of Damage	RIGHT FRT
No. Of Passenger (Including Driver)	

SKETCH PLAN

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.

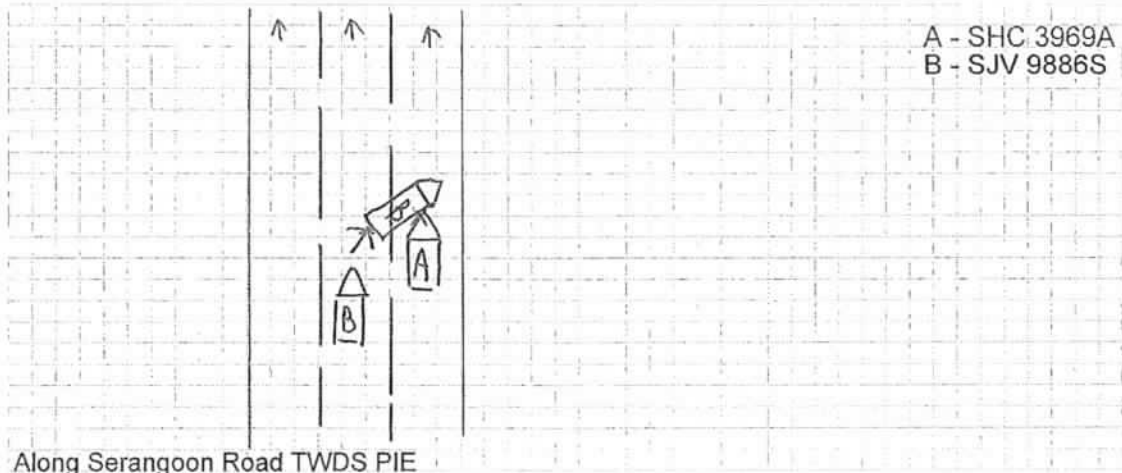
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 27.05.2019
@ 13:00 hrs


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27.05.2019 at about 08:40 hours I was travelling along Serangoon Road TWDS PIE
with no passenger onboard .
While travelling straight on the extreme right lane , suddenly veh B (SJV 9886S) cut into
my lane and collided into my taxi A - Front Left Portion .
As it took place too fast I could not take evasive action to prevent the accident
I have company photo and videos at scene to support my claims .
No injury in this accident .
Veh B (SJV 9886S) - Ms Chua Jia Hang , Yvonne I/C : S 8930818F H/P : 9138 5990

DECLARATION

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

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Date & Time: 27.05.2019
@ 13:00 hrs

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

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

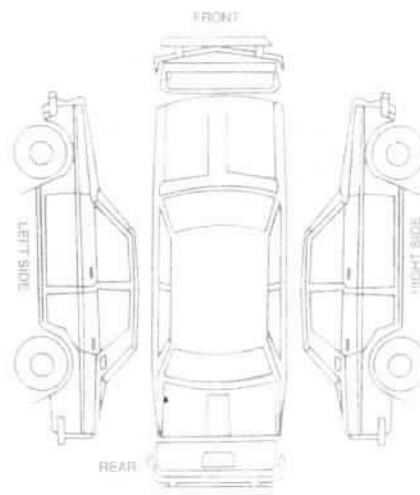
JC NO.: 305298802

JMER S JMER NO. ESS (R) (P)	COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755	REGN NO.: SHC3969A MAKE: HYUNDAI MODEL: I-40 YR OF MANU: 12.03.2015 CHASSIS CODE: RMFLB41UMFU065444	MILEAGE FUEL E. 1/2 F DATE/TIME IN: 27.05.2019 11:25 TARGET DATE COMPLETION DATE/TIME:
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Accident Date: 27.05.2019
 NATURE: 3P 27.05.19

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



BOOKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Wedge Slip

Exit Pass

No.: SHC3969A

LIMITS

Vehicle No.: SHC3969A

Signature/Date

Signature/Date

Name of Service Advisor

Date

Signature to Service Advisor upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

VEHICLE NO : SHC 3969A

MAKE :

MODEL : HYUNDAI i40

MSIG-CHS)

DATE 28/5/2019

TS
1120

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover — cut			\$ 544.50
	Front Bumper Grille (LH) — cut			\$ 41.60
	Front Bumper Bracket Top (LH) X su			\$ 22.40
	Front Bumper Bracket (LH) — cm			\$ 24.60
	Headlamp (LH) — cm			\$ 1,388.00
	Front Fender (LH) — Beated			\$ 566.30
	Front Fender Shield (LH) X su			\$ 175.90
	Front Fender Retainer (LH) X su			\$ 24.60
	Frt Wheel Hub Cap, LH — Beated			\$ 107.10
	SUB TOTAL			\$ 2,895.00
	LESS 20%			\$ 579.00
	DISCOUNTED TOTAL			\$ 2,316.00
	Labour Charge			300
	Panel Beating			\$ 400.00
	Spray Painting Charge			\$ 600.00 400
	Wiring			\$ 50.00 20
	Tuff Kote			\$ 50.00 20
	Frt Wheel Alignment			\$ 80.00 X 2
	TOTAL LABOUR			\$ 1,180.00
	ESTIMATE TOTAL			\$ 3,496.00

Kalar 1144
 29/5/19 1030h
 3 By
 Ls
 After Rep photo

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

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

Our Job Ref No : 305298802

Date : 30/05/19

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHC3969A

Date of Accident : 27-May-19

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

1. The repair job shall bill to: MSIG --- SJV9886S

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% \$2,300.00

Final Lumpsum Repair cost \$2,300.00

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 : 

Signature : 

Name : LIM T S

Name : KALVIN

Tel : 62148398

Date : 31/5/19

Fax : 65468156

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		NO		
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'ed	Status
Main	28 May 2019 14:05		28 May 2019 16:48 Edit Adj Rpt	S\$2,300.00 Edit Estimates	S\$2,300.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured: CHUA YAP BENG , ID: S0087343H									
Main Claimant: COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R									
Vehicle Reg. No.: SHC3969A		Date of Loss: 27/05/2019 08:00 - :59 [50 Months and 15 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / 594646		Policy/Cover Note No.: P60267721DMV (Comprehensive) Coverage: 25/11/2018 - 24/11/2019							
Vehicle Reg. No. (Insured): SJV9886S		Policy No. (Claimant):							
		Excess:							
Repairer: ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300									
Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Pauline Tham - 6594 2545]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 27/06/2019]									
Driver/Custodian (Insured): CHUA JIA HANG, YVONNE (/ Male) , NRIC: S8930818F Email:									
Adj Asg. Remarks: Car in. on WP. Please contact us ASAP if you cannot attend this assignment. Liab: dispute. Contact: Lim Tien Siong @ 6214 8398 / 9635 8546									
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

*SHC3969A (594646)
 [SJV9886S]
 TP
 COMFORT TRANSPORTATION PTE LTD
 May 27 2019 8:00AM
 [CHUA YAP BENG]
 ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	30/05/19 10:49	Adjuster Immediate Advice	 Load HTM	<input checked="" type="checkbox"/>
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
2	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
3	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
4	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
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28	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
29	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
30	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
31	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
32	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
33	31/05/19 09:02	General View	 Load JPG	<input checked="" type="checkbox"/>
34	31/05/19 09:11	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
				<input checked="" type="checkbox"/>
35	31/05/19 09:11	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
36	31/05/19 09:11	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
37	31/05/19 09:11	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	28/05/19 14:09	OI SJV9886S E-file report	Load PDF	
2	28/05/19 14:09	TP SHC3969A E-file report	Load PDF	
3	28/05/19 14:09	Estimate	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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/MSG19009570/K1VD3E2

Date: 03/06/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: P60267721DMV

Claimant Vehicle No : SHC3969A

Insured Vehicle No : SJV9886S

Date of Loss: 27/05/2019

Nature of Claim: TP

Claim No: 594646

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC3969A

Make & Model: HYUNDAI I40, 1.7 D CRDI F/L ABS AIRBAG 4DR (A)

Engine No: D4FDEU479917

Reg. Date: 12/03/2015 (Man. Year: 2014)

Chassis No: KMHLB41UMFU065444

Colour: Blue

Odometer: 482149 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: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 205/60 R16

Rear Tyre Size: 205/60 R16

Front Left Side: Hankook 7 mm

Rear Left Side: Hankook 7 mm

Front Right Side: Hankook 7 mm

Rear Right Side: Hankook 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,316.00	2,137.68	178.32	7.70
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,180.00	740.00	440.00	37.29
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	3,496.00	2,877.68	618.32	17.69
Approved Total (Overridden) (S\$)		2,300.00		
(S\$)	3,496.00	2,300.00	1,196.00	34.21
+ GST 7.00/7.00% (S\$)	244.72	161.00	83.72	34.21
Nett Amount (S\$)	3,740.72	2,461.00	1,279.72	34.21

INSPECTION

Date of Assignment: 28/05/2019

Date Inspected: 29/05/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd
(Loyang)
59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 3.0 days

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

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 03 Jun 2019)
Parts:	143	HYUNDAI I40 1.7 D CRDI F/L ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC3969A)	
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		*FRONT BUMPER COVER	Cut	544.50 FL	*544.50 FL
2	1		*FRONT BUMPER GRILLE (LH)	Cut	41.60 FL	*41.60 FL
3	1		*FRONT BUMPER BRACKET TOP (LH)	Serviceable	22.40 FL	*- FL
4	1		*FRONT BUMPER BRACKET (LH)	Cracked	24.60 FL	*24.60 FL
5	1		*HEADLAMP (LH)	Cracked	1,388.00 FL	*1,388.00 FL
6	1		*FRONT FENDER (LH)	Buckled	566.30 FL	*566.30 FL
7	1		*FRONT FENDER SHIELD (LH)	Serviceable	175.90 FL	*- FL
8	1		*FRONT FENDER RETAINER (LH)	Serviceable	24.60 FL	*- FL
9	1		*FRT WHEEL HUB CAP, LH	Grazed	107.10 FL	*107.10 FL
					Sub Total (S\$)	2,895.00
					- List Item Discount on L Items 20.00/20.00% (S\$)	579.00
					Total Parts (S\$)	2,316.00
						2,137.68

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	400.00	300.00
2	SPRAY PAINTING CHARGE	New	600.00	400.00
3	WIRING	New	50.00	20.00
4	TUFF KOTE	New	50.00	20.00
5	FRT WHEEL ALIGNMENT	New	80.00	0.00
Gross Labour Cost (S\$)			1,180.00	740.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >