

108/17/13

Surveyor: Kalvin

REF: CS/TM1 190 10954 / K15d/302

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SLL10255

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 Rpt: _____ Consistent?: Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHC 8315D Yr Regn: 28 May 2015

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

Truck / Trailer or

Make: Hyundai 240 C.C. 1685

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading: 489056 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHLBR14MF4069295

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / 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 Wuthake

Front Rear

R/Bal. 7 mm R/Bal. 1 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 19/6/19 D.O.I. 20/6/19

Survey held at CPGE (Loyang)

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

Rev

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

Date / Time	Action / Instruction
	SHC 8315D - X
	SLL 10255 - CS / MSG 18013246 / T15d/302 DOA - 18/07/2013
24/6/19	Chs 415\$ 4100 / 3 hrs.
	(\$ 6,383.98 Red - 61%)
	RECEIVED 25 JUN 2019

Date/Time, File Pass to?

25/06/19

1) Typist

Date/Time, File Return to?

2) _____

☐ : Preli. Report☒ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : _____ (\$ _____)

Survey Fee:

Transportation:

S + RS, SI

Photos

Other

250

11

261

Record Format:

4,100/- HS

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	20/06/2019 13:58
Date Of Accident	19/06/2019 21:00
Exact Location Of Accident	UPP BT TIMAH RD AFT MRT STN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8315D
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

Driver

Name of Driver	MUHAMMAD IMRAN BIN ABU SAMAH
NRIC No	S7242905B
Date Of Birth	20/11/1972
Occupation	OUTDOOR
Date Of Driving Pass	23/11/1994
Driving Experience	24 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91074424
Fax Number	
Contact Number	
Email Address	IMRANABS1972@GMAIL.COM

Address	635B #09-265 SENJA ROAD
Postcode	672635
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)	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

SEE ATTACH.

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

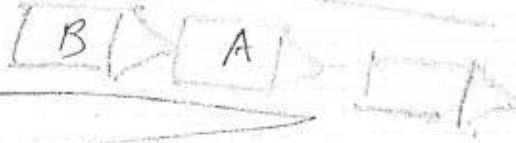
Vehicle Registration Number	SLL1025S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JAMAL BIN MONIP
NRIC/Passport Number	S1514825Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

SKETCH PLAN



A) SHC8315D

B) SLL107SS



Upp Bukit Timah Rd.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/6/19 at about 2100hrs while I Veh A
 slowed down and stopped behind other vehicles
 in front, Veh B collided onto the rear
 of my stationary vehicle.

DECLARATION

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

COMFORT TRANSPORTATION Pte Ltd
 Policyholder's Signature

Driver's Signature

Reporting Centre Personnel's Signature

IMPORTANT NOTICE

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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
62-550-1000

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.:

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

Tokio Marine - H.S.

TS

VEHICLE NO : SHC 8315D

DATE 20/6/2019

MAKE :

Tyre: Next/ok 205/60R16

LKK - kalvin

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid <i>Repl</i>			\$ 2,174.90
	Boot Lid Lock Upper <i>X su</i>			\$ 102.60
	Boot Lid Lock Lower <i>X su</i>			\$ 31.70
	Boot Lid 'H' Emblem <i>- ne</i>			\$ 28.70
	Boot Lid CRDI Plate <i>- ne</i>			\$ 27.90
	Bootlid Moulding <i>- 6th</i>			\$ 85.00
	Bootlid i40 Emblem <i>- ne</i>			\$ 27.90
	Bootlid Lower Garnish <i>- 1st</i>			\$ 227.90
	Rear Bumper <i>- Repl</i>			\$ 553.00
	Rear Bumper Reinforcement <i>- an</i>			\$ 428.40
	Rear Bumper Reinforcement Bracket (LH/RH) <i>/ But</i>		80.30	\$ 160.60
	Rear Bumper Clip 10 pcs <i>- ne</i>			\$ 22.00
	Rear Bumper Bracket <i>2nd</i>	\$	35.60	\$ 71.20
	Rear Bumper Sponge <i>- 1st</i>			\$ 103.50
	Rear Bumper Under Cover <i>- an</i>			\$ 228.00
	Rear Bumper Reflector Lamp (LH/RH) <i>X su</i>	\$	30.60	\$ 61.20
	Rear Panel <i>X repair</i>			\$ 526.70
	Rear Panel Garnish <i>- an</i>			\$ 57.70
	Rear Panel Lower Panel <i>X repair</i>			\$ 89.40
				\$ 5,008.30
	SUB TOTAL			\$ 10,016.60
	LESS 20%			\$ 2,003.32
	DISCOUNTED TOTAL			\$ 8,013.28
	Boot Lid Comfort Logo & Tel No. Sticker <i>- ne</i>			\$ 30.00
	Boot Lid Advertisement Logo <i>- ne</i>			\$ 100.00
	Rear No. Plate <i>X su</i>			\$ 25.00
	Rear Bumper Reverse Sensor <i>- still</i>			\$ 135.70
	Rear Bumper Rubber Mat <i>- ne</i>			\$ 50.00
	Rear Bumper Advertisement Logo <i>- ne</i>			\$ 50.00
	Rear Fender Advertisement Logo (LH/RH) <i>- ne</i>			\$ 200.00
				\$ 590.70
	Labour Charge			
	Panel Beating			\$ 600.00
	Spray Painting Charge			\$ 900.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Remove/Refix Reverse Sensor			\$ 80.00
	Meridian Fee			\$ 11.00
	TOTAL LABOUR			\$ 1,880.00
	ESTIMATE TOTAL			\$ 10,483.98

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 hence notify the Repairer of the following:
 • To survey before enter spray painting
 • To display damaged part(s) during survey
 • 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 reported
 is subject to final approval from insurance company

Acknowledged by Repairer

Signature:

Date:

Ka LKK

20/6/19 1600h

3 days

45

Alfa Repair photo

Nett
Nett
Nett
Nett
Nett
Nett
Nett

600
20
20
20

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:	19/06/2019
Vehicle Reg. No.:	SHC8315D	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	28/05/2015
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDFU500565	Chassis No:	KMHLB41UMFU069295
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	5		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	4,597.34
Miscellaneous Items	11.00
Labour	1,920.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	6,528.34
+ GST 7.00% (S\$)	456.98
Nett Amount (S\$)	6,985.32

This claim is handled by: LIM TIEN SIONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 20 Jun 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/SHC8315D/20/06/2019 18:00

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		*BOOTLID	20.00	0.00	*2,174.90 FL	BUC
2	1		*BOOTLID UPR LOCK	20.00	0.00	*102.60 FL	SVC
3	1		*BOOTLID LWR LOCK	20.00	0.00	*31.70 FL	SVC
4	1		*BOOTLID EMBLEM-H	20.00	0.00	*28.70 FL	NEC
5	1		*BOOTLID EMBLEM-CRDI	20.00	0.00	*27.90 FL	NEC
6	1		*BOOTLID EMBLEM-I40	20.00	0.00	*27.90 FL	NEC
7	1		*BOOTLID MOULDING	20.00	0.00	*85.00 FL	CRA
8	1		*BOOTLID LOWER GARNISH	20.00	0.00	*227.90 FL	CRA
9	1		*REAR BUMPER	20.00	0.00	*553.00 FL	DE
10	1		*REAR BUMPER REINFORCEMENT	20.00	0.00	*428.40 FL	CRA
11	2		*REAR BUMPER REINFORCEMENT BRACKET RH/LH	20.00	0.00	*160.60 FL	Bent
12	2		*REAR BUMPER SIDE BRACKET RH/LH	20.00	0.00	*71.20 FL	SVC
13	10		*REAR BUMPER CLIPS	20.00	0.00	*22.00 FL	NEC
14	1		*REAR BUMPER SPONGE	20.00	0.00	*103.50 FL	TOM
15	1		*REAR BUMPER UNDER COVER	20.00	0.00	*228.00 FL	CRA
16	2		*REAR BUMPER REFLECTOR RH/LH	20.00	0.00	*61.20 FL	SVC
17	1		*REAR END PANEL	20.00	0.00	*526.70 FL	R
18	1		*REAR END PANEL GARNISH	20.00	0.00	*57.70 FL	CRA
19	1		*REAR END LOWER PANEL	20.00	0.00	*89.40 FL	R
20	1		*BOOTLID COMFORTDELGRO & 65521111 STICKER	0.00	0.00	*30.00 F	NEC
21	1		*BOOTLID ADV. STICKER	0.00	0.00	*100.00 F	NEC
22	1		*REAR NO.PLATE	0.00	0.00	*25.00 F	SVC
23	1		*REAR BUMPER MAT	0.00	0.00	*50.00 F	NEC
24	1		*REVERSE SENSOR	0.00	0.00	*135.70 F	Shorted
25	1		*REAR BUMPER ADV.STICKER	0.00	0.00	*50.00 F	NEC
26	1		*REAR FENDER ADVERTISEMENT STICKER RH/LH	0.00	0.00	*200.00 F	NEC

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	5,599.00
- List Item Discount on L Items (\$\$)	1,001.66
Total Parts (\$\$)	4,597.34

ComfortDelGro Engineering Pte Ltd/SHC8315D/20/06/2019 18:00. 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)	11.00
Sub Total (S\$)			11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING	New	800.00 600
2	SPRAY PAINTING	New	900.00 600
3	WIRING CHECK	New	50.00 20
4	TUFF KOTE	New	50.00 30
5	R/I REVERSE SENSOR	New	120.00 30
Gross Labour Cost (S\$)			1,920.00

ComfortDelGro Engineering Pte Ltd/SHC8315D/20/06/2019 18:00. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305304789

OMER

IS COMFORT TRANSPORTATION PTE LTD

OMER NO. 7010045

LESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

OUNT CARD NO

REGN NO.:

SHC8315D

MILEAGE

MAKE :

HYUNDAI

FUEL

E 1/2 F

MODEL

I-40

DATE/TIME IN

20.06.2019 11:50

YR OF MANU

28.05.2015

TARGET DATE

CHASSIS CODE

KMHLB41UMFU069295

COMPLETION DATE/TIME

JOB DESCRIPTION

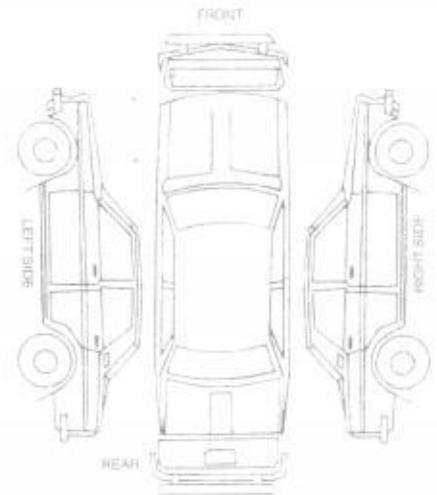
Accident Date: 19.06.2019

NATURE: 3P 19.06.19

S/NO

LABOR CODE

DESCRIPTION



ICKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ledgement Slip

Exit Pass

No.: SHC8315D

LIMITS

Vehicle No.:

SHC8315D

f Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305304789
Date : 24/06/19

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

FINALIZATION FORM

To : LKK Fax :
Attn : KALVIN ANG
Vehicle Reg No : SHC8315D Date of Accident : 19-Jun-19

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

1. The repair job shall bill to: TOKIO MARINE --- SLL1025S
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% \$4,100.00
 - Final Lumpsum Repair cost \$4,100.00**
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 :
Name : LIM T S
Tel : 62148398
Fax : 65468156

Signature :
Name : KALVIN
Date : 24/6/19

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		NO		
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/TMI19010954/K1SD3

Date: 27/06/2019

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MK000342
Claimant Vehicle No :	SHC8315D	Insured Vehicle No :	SLL1025S
Date of Loss:	19/06/2019	Nature of Claim:	TP
		Claim No:	M1904586

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHC8315D	Engine No:	D4FDFU500565
Make & Model:	HYUNDAI I40, 1.7 D CRDi (A)	Chassis No:	KMHLB41UMFU069295
Reg. Date:	28/05/2015 (Man. Year: 2015)	Odometer:	489056 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:	West Lake 7 mm	Rear Left Side:	West Lake 7 mm
Front Right Side:	West Lake 7 mm	Rear Right Side:	West Lake 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,597.34	3,866.10	731.24	15.91
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	1,920.00	1,270.00	650.00	33.85
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	6,528.34	5,147.10	1,381.24	21.16
Approved Total (Overridden) (S\$)		4,100.00		
(S\$)	6,528.34	4,100.00	2,428.34	37.20
+ GST 7.00/7.00% (S\$)	456.98	287.00	169.98	37.20
Nett Amount (S\$)	6,985.32	4,387.00	2,598.32	37.20

INSPECTION

Date of Assignment:	21/06/2019	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	20/06/2019	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: Hiew May Fung

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: 27 Jun 2019)	
Parts: 143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)	
Labour: Repairer's	(Price-denominated Standard List)	
Print Code:	(Unsubmitted, no print-code for SHC8315D)	
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	*BOOTLID	Buckled	2,174.90 FL	*2,174.90 FL
2	1	*BOOTLID UPR LOCK	Serviceable	102.60 FL	*- FL
3	1	*BOOTLID LWR LOCK	Serviceable	31.70 FL	*- FL
4	1	*BOOTLID EMBLEM-H	Necessary	28.70 FL	*28.70 FL
5	1	*BOOTLID EMBLEM-CRDI	Necessary	27.90 FL	*27.90 FL
6	1	*BOOTLID EMBLEM-I40	Necessary	27.90 FL	*27.90 FL
7	1	*BOOTLID MOULDING	Cracked	85.00 FL	*85.00 FL
8	1	*BOOTLID LOWER GARNISH	Cracked	227.90 FL	*227.90 FL
9	1	*REAR BUMPER	Deformed	553.00 FL	*553.00 FL
10	1	*REAR BUMPER REINFORCEMENT	Cracked	428.40 FL	*428.40 FL
11	2	*REAR BUMPER REINFORCEMENT BRACKET RH/LH	Bent	160.60 FL	*160.60 FL
12	2	*REAR BUMPER SIDE BRACKET RH/LH	Serviceable	71.20 FL	*- FL
13	10	*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
14	1	*REAR BUMPER SPONGE	Torn	103.50 FL	*103.50 FL
15	1	*REAR BUMPER UNDER COVER	Cracked	228.00 FL	*228.00 FL
16	2	*REAR BUMPER REFLECTOR RH/LH	Serviceable	61.20 FL	*- FL
17	1	*REAR END PANEL	Repair	526.70 FL	*- FL
18	1	*REAR END PANEL GARNISH	Cracked	57.70 FL	*57.70 FL
19	1	*REAR END LOWER PANEL	Repair	89.40 FL	*- FL
20	1	*BOOTLID COMFORTDELGRO & 65521111 STICKER	Necessary	30.00 F	*30.00 F
21	1	*BOOTLID ADV. STICKER	Necessary	100.00 F	*100.00 F
22	1	*REAR NO.PLATE	Serviceable	25.00 F	*- F
23	1	*REAR BUMPER MAT	Necessary	50.00 F	*50.00 F
24	1	*REVERSE SENSOR	Shorted	135.70 F	*135.70 F
25	1	*REAR BUMPER ADV.STICKER	Necessary	50.00 F	*50.00 F
26	1	*REAR FENDER ADVERTISEMENT STICKER RH/LH	Necessary	200.00 F	*200.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	5,599.00	4,691.20
- List Item Discount on L Items 20.00/20.00% (\$\$)	1,001.66	825.10
Total Parts (\$\$)	4,597.34	3,866.10

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)	11.00	11.00
Sub Total (\$\$)			11.00	11.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	800.00	600.00
2	SPRAY PAINTING	New	900.00	600.00
3	WIRING CHECK	New	50.00	20.00
4	TUFF KOTE	New	50.00	20.00
5	R/I REVERSE SENSOR	New	120.00	30.00
Gross Labour Cost (\$\$)			1,920.00	1,270.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >