

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 6594Y

MAKE :

MODEL : HYUNDAI i40

DATE 8/7/2019 16:35

L/Re

CHINA

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Bootlid Moulding / on			\$ 85.00	
	Rear Bumper / Repl			\$ 553.00	
	Rear Bumper Clip 10 pcs - on			\$ 22.00	
	Rear Bumper Bracket (LH/RH) LH RH x 5		\$ 35.60	\$ 71.20	
	Rear Bumper Under Cover - on			\$ 228.00	
	Rear Fender Inner Lining (LH/RH) x on		\$ 169.30	\$ 338.60	
	Rear Tail Lamp (LH) - Lnt				
	SUB TOTAL		\$ 565.60	\$ 1,297.80	
	LESS 20%			\$ 259.56	
	DISCOUNTED TOTAL			\$ 1,038.24	
	Rear Bumper Rubber Mat - on			\$ 50.00	Nett
	Rear Bumper Reverse Sensor - shld			\$ 135.70	Nett
				\$ 185.70	
	Labour Charge				
	Panel Beating			\$ 400.00	
	Spray Painting Charge			\$ 30.00	
	Wiring Charge			\$ 150.00	
	Towing Fees- King Dolly			\$ 80.00	
	Remove/Refix Reverse Sensor				
	TOTAL LABOUR			\$ 960.00	
	ESTIMATE TOTAL			\$ 2,183.94	

K. Loh (U/C)

98/7/19 1620hr.

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Attn Repair p 66

KK Aut. Repairer to notify the Rep. of the survey

- To resurvey the damaged parts during survey
- To display the damaged parts 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 resurveyed 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.

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: <u>8-7-2019</u> Time Received: <u>11:30</u>		3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)		4. Type of Towing: <input type="checkbox"/> Normal Tow <input checked="" type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up	
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : <u>MR NAH</u> Contact No. : <u>94767192</u> Vehicle No. : <u>SHD6594Y</u> Make / Model / Colour : <u>140</u> Email :		5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery		6. Parts Replaced/Remarks:	
7. Location: <u>7 GAMBAS CRESCENT</u>		8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi			
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others:					

10. Odometer Reading : _____ Fuel Level : <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E		11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested		 <p># : Cracked X : Dented / : Scratched O : Missing</p>	

Job Attended

12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input type="checkbox"/> QA <input type="checkbox"/> GAO <input checked="" type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS Name of Driver : <u>shu Jian</u> Vehicle No. : <u>4P74946</u> Time Dispatch : <u>11:30</u> Time of Arrival : <u>12:10</u> Time Completed :		Signature of Customer	
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Cash Invoice Details (if applicable)

13. Cash Invoice No. :	
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Customer Acknowledgement

- a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.
- b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
- c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

<u>8-7-2019</u> Date	<u>12:10</u> Time	 Signature of Customer
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14. WORKSHOP

Name of Attending Staff/Guard	Date & Time of Arrival	Signature of Attending Staff/Guard
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CUSTOMER'S COP