

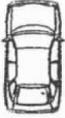
INS. CASE OWNER:

CC 3 / CTI1901 9187, k12h3

LKK:  
IDAC:

Surveyor: kalwin DOI: 29/10/10 Date / Time: 29/10/10  
Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SGP 576T Claim No. : \_\_\_\_\_  
Name of Insured : \_\_\_\_\_ Policy No. : \_\_\_\_\_  
Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_ Make / Model : \_\_\_\_\_  
Excess Sec II :\$ \_\_\_\_\_ D.O.A : 20/10/10 Place of Accident : \_\_\_\_\_  
Is driver the owner? ( YES / NO ) Nature of Accident : \_\_\_\_\_  
If NO, Driver Name / Age : \_\_\_\_\_ OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO  
Driver Tel No. : \_\_\_\_\_ (V/L: YES / NO) Insured Liability : % Final ? Yes / No

SHA 576T → → → → →



INSRS: cb6e  
WSP: m  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: \_\_\_\_\_  
WSP: \_\_\_\_\_  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: \_\_\_\_\_  
WSP: \_\_\_\_\_  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: \_\_\_\_\_  
WSP: \_\_\_\_\_  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_

Date/ Time	STAGE	DATE / PIC
<u>SHA 576T - 29/10/10</u>	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	<b>Documentation Check List:</b> Handler Typist	
	Notification ltr (if non-pickup)	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: \_\_\_\_\_ Sent By: \_\_\_\_\_ Confirm by: \_\_\_\_\_

FINALIZATION Date/Time: \_\_\_\_\_ Confirm with: \_\_\_\_\_ Confirm by: \_\_\_\_\_  
Repair Cost: \$ ( \_\_\_\_\_ days) Reduction: % Email  Call

FINAL SETTLEMENT Date/Time: \_\_\_\_\_ Confirm with: \_\_\_\_\_ Email  Call   
Final Liability: % (Agreed / Assessed) BOLA S/N No. : \_\_\_\_\_ If NO or B 28, Ass. Lia : \_\_\_\_\_  
Repair Cost: \$  
Loss of Rental (LOR): \$ ( \_\_\_\_\_ days)  
Loss of Use (LOU): \$ (\$ x \_\_\_\_\_ days)  
Loss of Income (LOI): \$ (\$ x \_\_\_\_\_ days)  
LOR only  LOU only  LOR + LOU  LOR + LO  [Tick only one]  
GIA/LTA Search \$  
Medical: \$  
Disbursement: \$ (e.g. Tow/ Independent )  
Legal Cost \$  
1) Claim status: Normal/Reject/Private Settle  
2) Report Format: \_\_\_\_\_  
3) Survey fee: \_\_\_\_\_

Total: \$ Global Sum \$\$: \_\_\_\_\_

FINAL PAYMENT Date/Time: \_\_\_\_\_ Confirm with: \_\_\_\_\_ Email  Call

Payee 1: \$ Name 1: \_\_\_\_\_  
Payee 2: (Strike if N.A.) \$ Name 2: \_\_\_\_\_  
Payee 3: (Strike if N.A.) \$ Name 3: \_\_\_\_\_



# COMFORTDELGRO ENGINEERING

## ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Mainline + 65 6383 6280 Facsimile + 65 6280 9755

### Workshops

59 Loyang Drive Singapore 508969

383 Sin Ming Drive Singapore 575717

45 Pandan Road Singapore 609286

320 Ubi Road 3 Singapore 109649

24 Senoko Loop Singapore 758156

7 Sungei Kadut Way Singapore 728791

501 Yishun Industrial Park A Singapore 768732

A member of COMFORTDELGRO

Date/Time: 29.10.2019 14:26 Page : 1

Team: ARC Repair TP(CLSO)1

### JOB CARD

Sales Order:

JC NO.: 305344839

CUSTOMER

CUSTOMER NO.  
ADDRESS

COMFORT TRANSPORTATION PTE LTD  
7010045  
383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755

WAPL

REGN NO.: <b>SHA5963M</b>	MILEAGE
MAKE: <b>HYUNDAI</b>	FUEL E.....1/2.....F
MODEL <b>IONIQ(G2)</b>	DATE/TIME IN <b>29.10.2019 09:50</b>
YR OF MANU. <b>08.11.2018</b>	TARGET DATE
CHASSIS CODE <b>KMHC851CVKU115071</b>	COMPLETION DATE/TIME:

COUNT CARD NO.

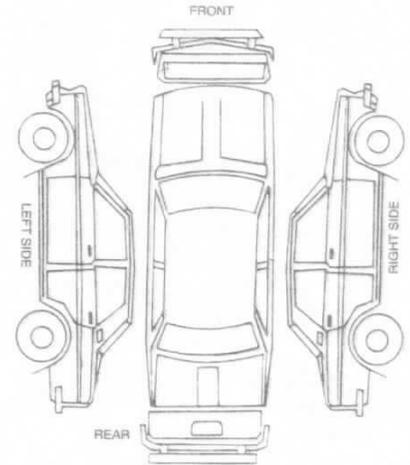
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### JOB DESCRIPTION

Accident Date: 26.10.2019  
NATURE: 3P 26.10.2019

S/NO LABOR CODE DESCRIPTION

CHINA - Left Centre  
Lkc/Kalni -



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

No.: **SHA5963M**

**LARRY**

Vehicle No.:

**SHA5963M**

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