

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

China Taiping CLS) TS

VEHICLE NO : SHC8536H

MAKE :

LKK - kalvin.

DATE 01/11/19

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover front cut			\$1,052.20
	Front Fender (RH) X reger			\$663.00
	Front Wheel Cap (RH) X su			\$107.10
	SUB TOTAL			\$1,822.30
	LESS 20%			\$364.46
	DISCOUNTED TOTAL			\$1,457.84
	Labour Charge			
	Panel Beating			280 \$300.00
	Spray Painting Charge			500 \$300.00 400
	Tuff Kote			\$40.00 X "
	Tow Fee			\$60.00 X "
	TOTAL LABOUR			\$650.00
	ESTIMATE TOTAL			\$2,107.84
<p> <i>Kalvin (LKK)</i> <i>31/10/19</i> <i>2071</i> <i>4/5</i> <i>After Repair photo</i> </p> <div> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> To resurvey before/after spray painting To display damaged part(s) during resurvey 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 <p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p> </div>				
<p>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.</p>				



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: <u>28/10/19</u> Time Received: <u>0125</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 checked="" type="checkbox"/> Normal Tow <input 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>Chun Teck Hong</u> Contact No.: <u>91662060</u> Vehicle No.: <u>SH C8536H</u> Make / Model / Colour: <u>I40</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>Woodlands Ave 5</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	 #: Cracked X: Dented / : Scratched O: Missing Signature of Customer: _____
---	--	--

Job Attended

2. 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>Bay</u>
Vehicle No.: <u>YN2337M</u>
Time Dispatch: <u>0125</u>
Time of Arrival: <u>0200</u>
Time Completed: <u>0245</u>

Cash Invoice Details (if applicable)

3. Cash Invoice No.:

Customer Acknowledgement

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.
I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

<u>28/10/19</u> Date	<u>0200</u> Time	<u>Bay</u> Signature of Customer
-------------------------	---------------------	-------------------------------------

4. WORKSHOP

Name of Attending Staff/Guard	Date & Time of Arrival	Signature of Attending Staff/Guard
-------------------------------	------------------------	------------------------------------