

62.

Tmi CC3/TMI 19021266/Gsf32

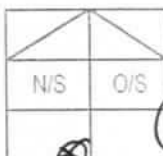
ASSIGNMENT

SHC 8763T 07 Apr 2016

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s: Comfort layang
 of: _____
 Insured: SLR 4149S
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SHC 8763T Regn: 07 Apr 2016
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Hyundai 140 cc 1685
 Colour: blue A/C: Insured / Std / NI / NA
 Sp Reading: 685420 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMH/LB 41UMG4 086901
 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 A/Rim or
 Tyre Size: F: 25/60 R16
 R: 11

(Policy Condition)
 Remark: The veh had commenced its
 repair at the time of inspection.



BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or westlake
 Front: _____ Rear: _____
 R/Bal: 6 mm R/Bal: 6 mm
 L/Bal: 6 mm L/Bal: 6 mm
 D.O.A. _____ D.O.I. 02-12-19
 Survey held at w/s 4:45pm
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
O/S rear
 The U/C / Chassis frame / Body Structure affected due to collision.

Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 2 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS
 Date: _____ Vehicle: IN / OUT
 Person Contacted: _____

Date / Time	Action / Instruction
	SHC 8763T - CC3 / LCR 17006190 / H1M292 DOA - 26/03/2017
	SLR 4149 S - X
	XGR Ordered P/P \$ 816.68 @ 2 days with kwok Eng. (\$1,014.18 Red - 55%)
	RECEIVED 07 JAN 2020

Date/Time, File Pass to: 07/01/20
 II Typ. 4
 Date/Time, File Return to: _____
☐ : Preli. Report
☒ : Final Report
 Days Of Repair: 2
 Resurvey No. of Trip: 1
 Add Fee: ☐ Site Insp. 15
☐ Interview 15
☐ Tech. Insp. 15
☐ Travel exp. 5
 Survey Fee: 290
 Transportation: _____
 11
 261
\$816.68 P/P

Date/Time: 02.12.2019 13:41

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305358378

OMER

IS COMFORT TRANSPORTATION PTE LTD

OMER NO. 7010045

ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

DUNT CARD NO.

REGN NO.:

SHC8763T

MILEAGE

MAKE:

HYUNDAI

FUEL

E.....1/2.....F

MODEL

I-40

DATE/TIME IN

02.12.2019 10:20

YR OF MANU.

07.04.2016

TARGET DATE

CHASSIS CODE

KMHLB41UMGU086901

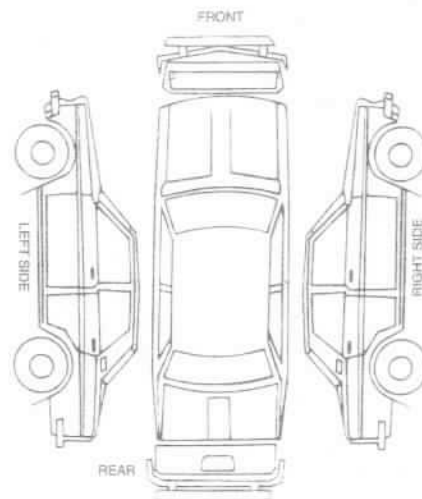
COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 01.12.2019

NATURE: 3P 01.12.2019

S/NO LABOR CODE DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

lo.: SHC8763T

LKE

Vehicle No.:

SHC8763T

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto)
Sent: Tuesday, 3 December 2019 3:50 pm
To: motorclaims@tokiomarine.com.sg
Cc: SUR
Subject: DIRECT SURVEY INSPECTION ON WORKSHOP -COMFORTDELGRO ENGINEERING PTE LTD, DOA: 01/12/2019, SHC 8763T (TP VEHICLE), SLR 4149S (OI VEHICLE)
Attachments: TP GIA REPORT.pdf; ESTIMATE.pdf; PRELI ADVISE - SHC 8763T.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SHC 8763T at M/s: COMFORTDELGRO ENGINEERING PTE LTD, 59 LOYANG DRIVE SINGAPORE 508969 on 02/12/2019

Enclosed herewith a copy of TP's GIA report, estimated cost of repair and preliminary revised.

Kindly create claim in merimen for our necessary action.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: TBA

Date: 03 December 2019

Our Ref: CC3/TMI19021266/Gsf3

The Motor Claims Department
TOKIO MARINE INSURANCE SINGAPORE LTD

Dear Sir/Madam,

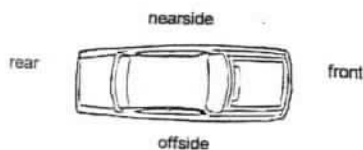
PRELIMINARY ADVISE REPORT OF VEHICLE NO. SHC 8763T

Please be informed that we had conducted the inspection of the abovementioned vehicle on 02/12/2019 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$ 1,830.86 .
Revised Estimate Amount	: S\$ 816.68 .
"Check" Items Amount	: S\$ - .
Market Value	: S\$ - .
LTA Reimbursement Value	: S\$ - .
Nett Value	: S\$ - .

Description of Damage:

The vehicle sustained damages at the o/s rear portion.



Comments/ Present Status:

Damages Consistent.

Repair days: 2 days

Yours faithfully

Xing Guo Qiang
Automotive Assessor

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	02/12/2019 11:41
Date Of Accident	01/12/2019 19:20
Exact Location Of Accident	STADIUM WALK TWDS NICOLL HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8763T
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	NG KOK SOON
NRIC No	S7119634H
Date Of Birth	04/06/1971
Occupation	OUTDOOR
Date Of Driving Pass	21/10/1991
Driving Experience	28 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90222020
Fax Number	
Contact Number	
Email Address	DICKSONNG1971@YAHOO.COM.SG

Address	BLK 231 JURONG EAST ST 21 #06-675
Postcode	600231
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	RAINING
Road Surface	WET

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?	
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

REFER ATTACHED * TYPE OF ACCIDENT :- HEAD TO SIDE

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	SLR4149S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JOHNSON LEE
NRIC/Passport Number	
Contact Number	91013740
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LH FRONT
No. Of Passenger (Including Driver)	

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:

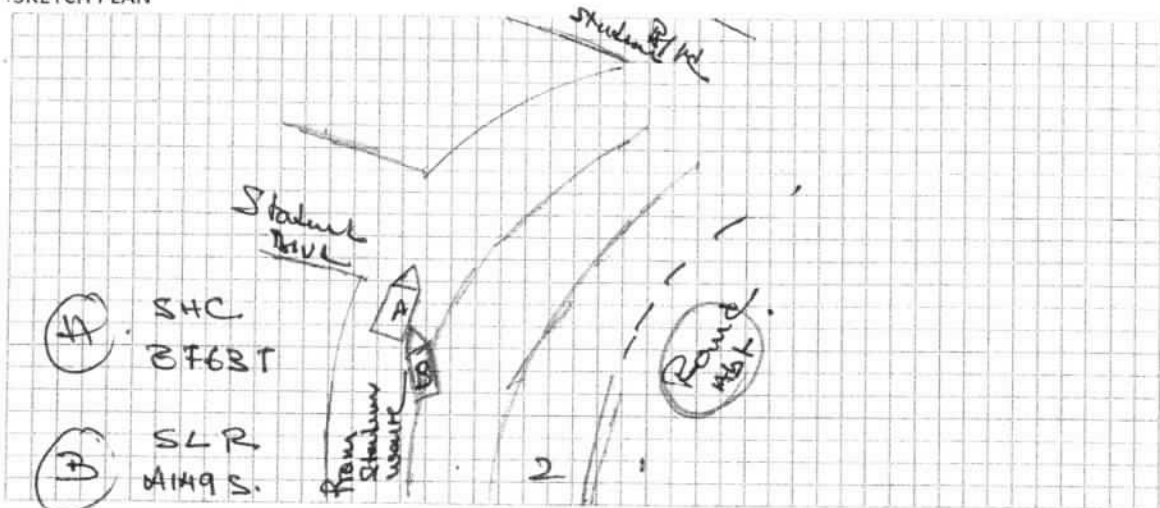
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON. 1 Dec 2019 @ 2019 @ 1920h
I. Vett (A) was driving on the above
road. Straight → Suddenly Vett (B)
from 3rd lane. Rushed and hit
Vett (A) Right Rear. @ the time
of accident → Vett (A) was parked.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 400700222

Policyholder's Signature

Date & Time:

Driver's Signature _____

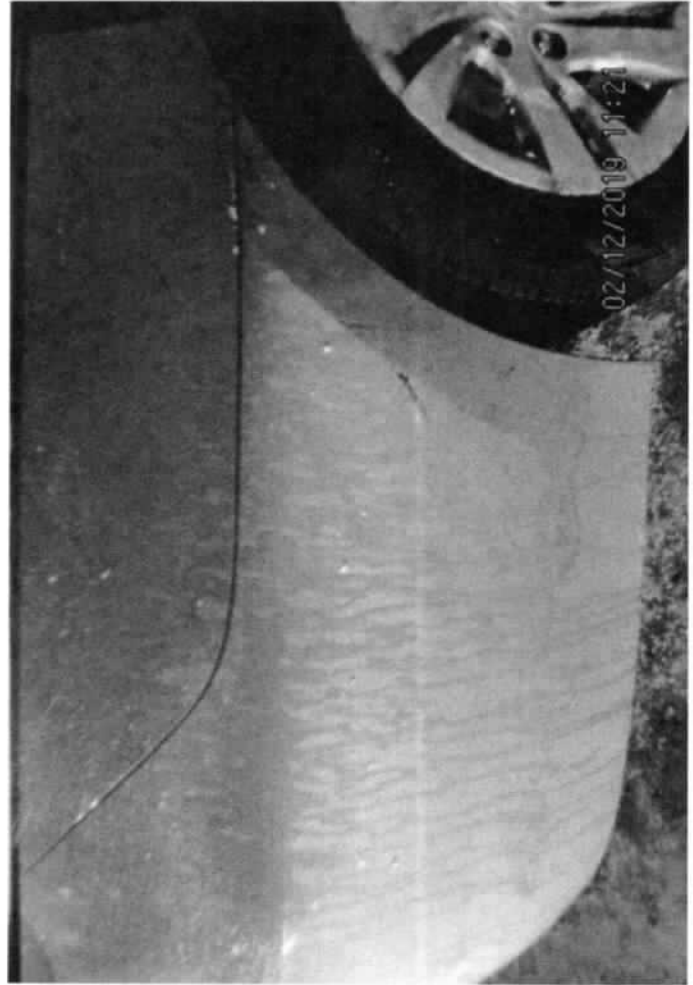
(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No.

SHC8763T

Make / Model

HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR

Vehicle Type :

H10 - Public Transport Taxi (Motor Car)

Vehicle Attachment 1 :

Air-Con (Taxi)

Vehicle Scheme :

Taxi (Company)

Chassis No. :

KMHLB41UMGU086901

Propellant :

Diesel

Engine No. :

D4FDFU504522

Motor No. :

-

Engine Capacity :

1685 cc

Power Rating :

-

Maximum Power Output :

100.0 kW (134 bhp)

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER:
CTPL

Tokio Marine Insurance Singapore Ltd (HQ)

Singapore

Lice

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	01/12/2019
Vehicle Reg. No.:	SHC8763T	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	07/04/2016
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDFU504522	Chassis No:	KMHLB41UMGU086901
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	759.86
Miscellaneous Items	11.00
Labour	1,060.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	1,830.86
+ GST 7.00% (S\$)	128.16
Nett Amount (S\$)	1,959.02

This claim is handled by: LIM KWOK ENG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 02 Dec 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/SHC8763T/02/12/2019 14:42	
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		*REAR BUMPER X Repair	20.00	0.00	*553.00 FL
2	10		*REAR BUMPER CLIPS X NN	20.00	0.00	*22.00 FL
3	1		*REAR BUMPER BRACKET RH X NN	20.00	0.00	*35.60 FL
4	1		*REAR WHEEL HUB CAP RH / SCR	20.00	0.00	*107.10 FL
5	1		*REAR BUMPER REVERSE SENSOR X NG	0.00	0.00	*135.70 F
6	1		*REAR BUMPER RUBBER MAT X NN	0.00	0.00	*50.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	903.40
- List Item Discount on L Items (S\$)	143.54
Total Parts (S\$)	759.86

ComfortDelGro Engineering Pte Ltd/SHC8763T/02/12/2019 14:42. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New	350.00
2	SPRAY PAINTING CHARGE - [repair rear fender Rh]	New	500.00
3	WIRING CHARGE	New	50.00
4	REMOVE/REFIX REVERSE SENSOR	New	80.00
5	REAR WHEEL ALIGNMENT	New	80.00
Gross Labour Cost (S\$)			1,060.00

ComfortDelGro Engineering Pte Ltd/SHC8763T/02/12/2019 14:42. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Handwritten signature
6/12/19

2 Days.
P/P upon repair.
After repair photos
Gue Aif
02/12/19.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after 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 resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

**COMFORTDELGRO
ENGINEERING**

Our Job Ref No 305358378
Date : 03.01.20

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

FINALIZATION FORM


To : LKK
Attn : Mr QUO QIANG
Vehicle Reg No. SHC8763T CTPL

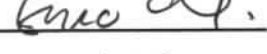
Fax :
01.12.19

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

1. The repair job shall bill to: TOKIO MARINE --- SLR4149S
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$85.68
 - (b) Labour Charges \$731.00
 - Total for Part-By-Part Repair Cost** \$816.68
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20%
Final Lumpsum Repair cost _____
3. Estimated normal period for repairs: 2 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 KWOK ENG
Tel : 62148316
Fax : 65468156

Signature : 
Name : LIM KWOK ENG
Date : 06/1/2020

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:

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 03.01.2020

Time: 18:36:26

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305358378
REGN NO : SHC8763T
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 07.04.2016
DATE/TIME IN : 02.12.2019 10:20
ACCIDENT DATE : 01.12.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0658-G I40VC CAP ASSY-WHEEL HUB 1 L 107.10 20.00 85.68

SUB-TOTAL : 85.68

JOB NATURE

0000 L MERIMEN CHARGE 11.00

0001 L PANEL BEATING 280.00

0002 23-502 SPRAYPAINT ON AFFECTED AREA 400.00

0003 L REMOVE/REFIX REVERSE SENSOR 40.00

SUB-TOTAL : 731.00

TOTAL : 816.68

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	02 Dec 2019 14:29 Sendback Est	02 Dec 2019 14:42 \$1,830.86	03 Dec 2019 17:34 Edit Adj Rpt	\$816.68 Edit Estimates	\$816.68 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
-------------	------------------	----------------------	------------------	--------------------------






















CLAIM SUBFOLDER DETAILS									
Insured:	LION CITY RENTALS PTE LTD, Co. Reg. No.: 201504621K								
Main Claimant:	CTPL								
Vehicle Reg. No.:	SHC8763T	Date of Loss:	01/12/2019 19:00 - :59 [43 Months and 24 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1909431	Policy/Cover Note No.:	MK000574 (Third Party Only) Coverage: 25/06/2019 - 24/02/2020						
Vehicle Reg. No. (Insured):	SLR4149S	Policy No. (Claimant):							
		Excess:	S\$1,600.00						
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Telma Gomez - 65926402]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 12/12/2019]								
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

SHC8763T (M1909431)
[SLR4149S]
TP
CTPL
Dec 1 2019 7:00PM
[LION CITY RENTALS PTE LTD]
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	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	02/12/19 14:42	Repairer Estimates	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
2	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
3	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
4	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
5	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
6	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
7	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
8	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
9	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
10	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
11	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
12	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
13	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
14	06/01/20 16:07	General View	 Load JPG	<input checked="" type="checkbox"/>
15	06/01/20 16:07	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
16	06/01/20 16:07	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
17	06/01/20 16:07	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
18	06/01/20 16:07	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	02/12/19 14:45	E-filed GIA report	 Load PDF	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail	Print
1	03/12/19 17:03	TP - SHC8763T SAS	 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"/> Repairer <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: CC3/TMI19021266/GSF3E2

Date: 14/01/2020

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MK000574

Claimant SHC8763T

Insured Vehicle No: SLR4149S

Date of Loss: 01/12/2019

Nature of Claim: TP

Claim No: M1909431

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC8763T

Make & Model: HYUNDAI I40, 1.7 D CRDi (A)

Engine No: D4DFU504522

Reg. Date: 07/04/2016 (Man. Year: 2015)

Chassis No: KMHLB41UMGU086901

Colour: Blue

Odometer: 685420 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: Good

Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable): Yes

Engine Modification:

No

Pre-accident Condition:

Good

CONDITION OF TYRES

Front Tyre Size: 205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side: West Lake 6 mm

Rear Left Side:

West Lake 6 mm

Front Right Side: West Lake 6 mm

Rear Right Side:

West Lake 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	759.86	85.68	674.18	88.72
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	1,060.00	720.00	340.00	32.08
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	1,830.86	816.68	1,014.18	55.39
+ GST 7.00/7.00% (S\$)	128.16	57.17	70.99	55.39
Nett Amount (S\$)	1,959.02	873.85	1,085.17	55.39

INSPECTION

Date of Assignment: 03/12/2019 Present Location:

ComfortDelGro Engineering Pte Ltd
(Loyang)

Date Inspected: 02/12/2019 Inspected At:

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

Estimated Period of Repair: 2.0 days

Adjuster: XING GUO QIANG

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: 14 Jan 2020)
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 SHC8763T)	
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	Reference	Amount
1	1		*REAR BUMPER	Repair	553.00 FL	-	*- FL
2	10		*REAR BUMPER CLIPS	Not Necessary	22.00 FL	-	*- FL
3	1		*REAR BUMPER BRACKET RH	Not Necessary	35.60 FL	-	*- FL
4	1		*REAR WHEEL HUB CAP RH	Scratched	107.10 FL	-	*107.10 FL
5	1		*REAR BUMPER REVERSE SENSOR	Not Necessary	135.70 F	-	*- F
6	1		*REAR BUMPER RUBBER MAT	Not Necessary	50.00 F	-	*- F

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	903.40	107.10
- List Item Discount on L Items 20.00/20.00% (\$\$)	143.54	21.42
Total Parts (\$\$)	759.86	85.68

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

No	Qty	Particulars	Repairer's	Amount
Miscellaneous Items				
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
Labour Items				
1	PANEL BEATING	New	350.00	280.00
2	SPRAY PAINTING CHARGE - [repair rear fender Rh]	New	500.00	400.00
3	WIRING CHARGE	New	50.00	0.00
4	REMOVE/REFIX REVERSE SENSOR	New	80.00	40.00
5	REAR WHEEL ALIGNMENT	New	80.00	0.00
Gross Labour Cost (\$\$)			1,060.00	720.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >