

SS: REG. BY: Ran

REF: CC3/TMI19022723/Fq d302

### ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: SLF 9460Y  
 Policy No. MK000578  
 Claims No. M1910013  
 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
	XX

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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SH 8426K Yr Regn: 17/07 / 2019  
 Type: M.Car / M.Cycle / Bus / Van / Lorry Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Hyundai iony (G2) C.C. 1580  
 Colour: blue A/C: Insured / Std / NI / NA  
 Sp. Reading: 55198 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: KMHCSICVKV164695  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi: Nil / S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 195/65 R15  
 R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or DAVANTI

Front		Rear
R/Bal. <u>8</u> mm		R/Bal. <u>8</u> mm
L/Bal. <u>8</u> mm		L/Bal. <u>8</u> mm
D.O.A. <u>23/12/19</u>		D.O.I. <u>26/12/19</u>

\*Survey held at comfortelsgro (Loyang)  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
rear  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SH 8426K-CC3/TMI1504132/H196d1
	SLF 9460Y-CC4/LCR19003176/Ag63q2
30/12/19 @ 10.30am	visited to TMI via Meriton.
	P/P: \$927/= with 2 repair days (Red \$ 1378.75, 60%.)
	confirm on 30/12/19 with cheng

RECEIVED 31 DEC 2019

Date/Time, File Pass to: ☐ : Preli. Report

12/1/20 hmsr ☐ : Final Report

Date/Time, File Return to:

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Ardu Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Survey Fee:

Transportation: 3+RS, \$1

Photos

Others

P131

Report Format: MEB-TP

Lump Sum / UPR: 927

290

11

261

Note: This document has not been finalised.

**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

To: Tokio Marine Insurance Singapore Ltd  
20 McCallum Street  
#09-01 Tokio Marine Centre  
Singapore 069046

From: LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933

Attn: Telma Gomez

Date: 30 Dec 2019

**Preliminary Advice**

Insured Vehicle No	: SLF9460Y	Accident Date	: 23/12/2019
TP Vehicle No	: SH8426K	Assignment Date	: 27/12/2019
Make	: HYUNDAI IONIQ HYBRID	Est. Duration of Repair	: 2.00
Date of Inspection	: 26/12/2019		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) 59 LOYANG DRIVE SINGAPORE 508969		

**Point of Impact / General Description of Damages**

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	2,305.75
Revised Amount	:S\$	962.01
Check Items (Estimated)	:S\$	135.70
Total	:S\$	1,097.71

Lump Sum Repair	:S\$	
-----------------	------	--

**Total Loss Consideration**

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

**Remarks**

- ( ) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- ( ) The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- ( ) Other comments :

## 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	24/12/2019 14:41
Date Of Accident	23/12/2019 22:10
Exact Location Of Accident	CTE(SLE) BF JLN BAHAGIA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8426K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXXX21R
Email Address	FLEETSAFTY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	IONIQ
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

### Driver

Name of Driver	LOO SIONG HUAT (LUO XIANGFA)
NRIC No	SXXXX380C
Date Of Birth	01/12/1971
Occupation	OUTDOOR
Date Of Driving Pass	26/05/2004
Driving Experience	15 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86467077
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	334 #06-2043 ANG MO KIO AVE 1
Postcode	560334
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)	2
Passenger 1	NAME: : - GENDER: : MALE

#### 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)

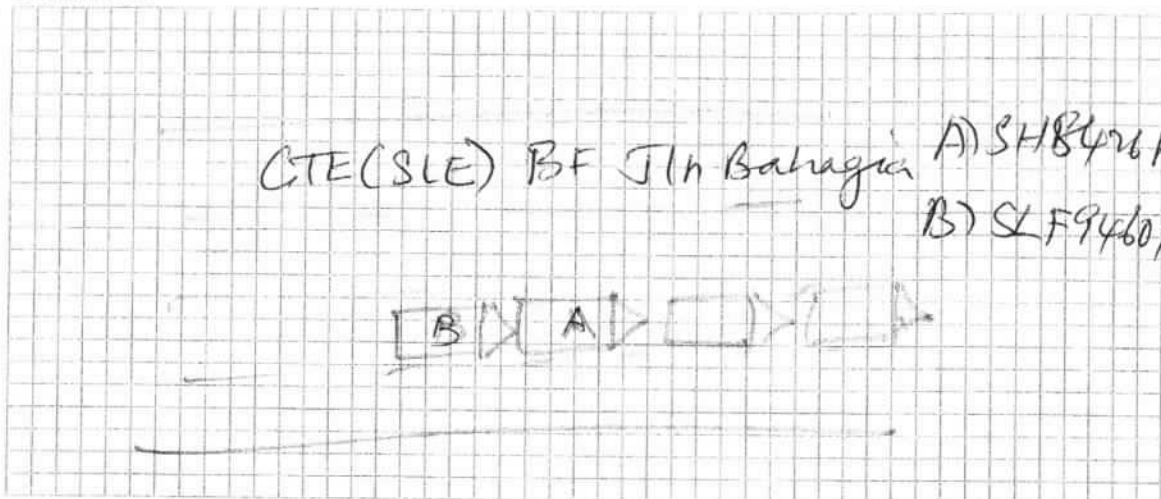
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF9460Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT

No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23/12/19 at about 2210 hrs when I Ueh A stopped because vehicles in front stopped. Ueh B collided onto the rear of my stationary vehicle. I felt pain on my neck, shoulder, back and will be consulting the doctor.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303621R

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.:

Q:\ASMC\Shen\HuaFong\03

SFR Modelling  
CSO  
24/12/19

**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.

COMFORT TRANSPORTATION PTE LTD  
CO. REG NO. 199303821R

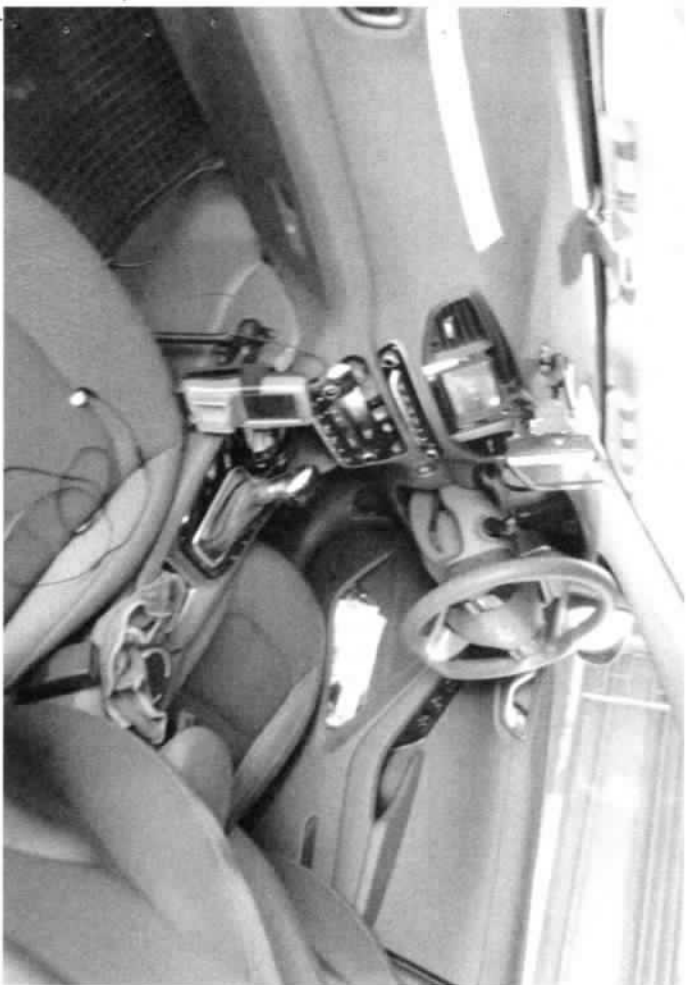
Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

GIAIWC SketchPlanForm\_V2







# COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

## 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 408649

24 Seroko Loop Singapore 758156  
7 Sungei Kadut Way Singapore 728791  
301 Yishun Industrial Park A Singapore 768

Date/Time: 26.12.2019 09:03

Page : 1

## JOB CARD

Sales Order:

JC NO.: 30536957

Team: ARC Repair TP(CLSO)1

CUSTOMER

MR/MS

CUSTOMER NO.

ADDRESS

TEL. (R)

(P)

DISCOUNT CARD NO.

COMFORT TRANSPORTATION PTE LTD

7010045

383 SIN MING DRIVE

Singapore SINGAPORE 575717

65508755

(O)

REGN NO.:

SH 8426K

MILEAGE

MAKE:

HYUNDAI

FUEL

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

MODEL

IONIQ(G2)

DATE/TIME IN

24.12.2019 12:2

YR OF MANU.

17.07.2019

TARGET DATE

CHASSIS CODE

KMHC851CVKU164695

COMPLETION DATE/TIME

## JOB DESCRIPTION

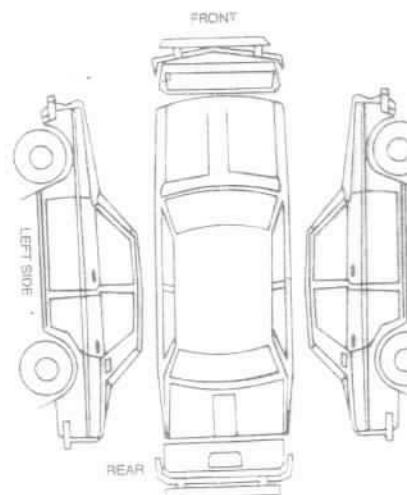
Accident Date: 23.12.2019

NATURE: 3P 23.12.2019

S/NO

LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Name:

I/C No.:

Vehicle No.:

SH 8426K

CHIANG

Exit Pass

Vehicle No.:

SH 8426K

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

To be returned to Service Reception upon collection

To be kept by Security Guard

## 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:	23/12/2019
Vehicle Reg. No.:	SH8426K	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	17/07/2019
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	G4LEKU297748	Chassis No:	KMHC851CVKU164695
Odometer:	55138 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	1,434.75
Miscellaneous Items	11.00
Labour	860.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (S\$)</b>	<b>2,305.75</b>
<b>+ GST 7.00% (S\$)</b>	<b>161.40</b>
<b>Nett Amount (S\$)</b>	<b>2,467.15</b>

This claim is handled by: CHIANG LIAT CHOON

Generated using Merimen e-Claims Internet Estimation & Adjusting System

**REPAIR DETAILS****Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 26 Dec 2019)**Parts:** 192 HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SH8426K/26/12/2019 11:58**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 (R)	20.00	0.00	*459.40 FL
2	1		*REAR BUMPER CENTRE NOULDING cut	20.00	0.00	*451.26 FL
3	1		*REAR BUMPER LOWER CENTRE MOULDING xnn	20.00	0.00	*155.00 FL
4	2		*REAR BUMPER STAY xnn	20.00	0.00	*276.20 FL
5	2		*REAR BUMPER SIDE BRACKET LH/RH xnn	20.00	0.00	*66.20 FL
6	10		*REAR BUMPER COVER CLIPS xnn	20.00	0.00	*22.00 FL
7	1		*REAR NO PLATE <del>xnn</del> Sur	0	0.00	*25.00 FS
8	1		*REAR NO PLATEB TRIM <del>xnn</del> <del>Sur</del> xnn	0	0.00	*30.00 FS
9	1		*REAR BUMPER REVERSE SENSOR xnn	0	0.00	*135.70 FS
10	1		*REAR BUMPER ADVERTISEMENT LOGO xnn	0	0.00	*50.00 FS
11	1		*REAR BUMPER RUBBER MAT xnn	0	0.00	*50.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (\$\$)	1,720.76
- List Item Discount on L Items (\$\$)	286.01
<b>Total Parts (\$\$)</b>	<b>1,434.75</b>

ComfortDelGro Engineering Pte Ltd/SH8426K/26/12/2019 11:58. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

LKK Auto Consultants hence notify  
the Repairer of the following:

- 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

Acknowledged by Repairer

Signature:

Date:

## Estimates on Miscellaneous Items

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

## Estimates on Labour

No	Particulars	Lab.Type	Amount
<b>Labour Items</b>			
1	PANEL BEATING	New	\$280 480.00
2	SPRAY PAINTING	New	\$200 250.00
3	WIRING	New	\$30 50.00
4	REMOVE/REFIX REVERSE SENSOR	New	\$50 80.00
Gross Labour Cost (S\$)			860.00

ComfortDelGro Engineering Pte Ltd/SH8426K/26/12/2019 11:58. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

LKK Auto Consultants hence notify the Repairer of the following:

- 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

Acknowledged by Repairer

Signature:

Date:

*[Handwritten Signature]*  
30/12/19  
26/12/19 1230hrs  
P9 Laburam@LKKauto.com  
886227784p  
2x pcr 4y 5  
Ref p9 in 1  
photo

Our Job Ref No : 305369571Date : 27/12/19**FINALIZATION FORM**To : LKK

Fax :

Attn : RAM: SH8426K23/12/2019

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

Z The repair job shall bill to: TOKIO MARINE SLF9460Y

2. The finalized amount shall be:

(a) Spare Parts after List discount

\$386.00

(b) Labour Charges

\$541.00**Total for Part-By-Part Repair Cost**\$927.00

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less:

**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 amountSignature : Name : CHIANGTel : 62148314Fax : 65468156Signature : Name : RamDate : 30/12/19**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		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

Remarks:

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

JOB NO : 305369571  
 REGN NO : SH 8426K  
 MILEAGE : 0000000000  
 MAKE : HYUNDAI  
 MODEL : IONIQ(G2)  
 DATE OF REGN : 17.07.2019  
 DATE/TIME IN : 24.12.2019 12:25  
 ACCIDENT DATE : 23.12.2019

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0104-2533-G IONIQV2 MOULDING ASSY-RR 1 451.25 20.00 361.00 *cut*  
 0002 FNPS NO PLATE(S) 1 N 25.00 2.00- 25.00 *scr*

SUB-TOTAL : 386.00

## JOB NATURE

0000 L MERIMEN 11.00  
 0001 PB PANEL BEATING 280.00  
 0002 SP SPRAYPAINT CHARGE 200.00  
 0003 17-01 CHECK ALL LIGHTING 0.00  
 0004 20-22 REMOVE/REFIX REVERSE SENSOR 50.00

SUB-TOTAL : 541.00

TOTAL : 927.00

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	26 Dec 2019 11:50 <a href="#">Sendback Est</a>	26 Dec 2019 11:58 <b>S\$2,305.75</b>	27 Dec 2019 08:54 <a href="#">Edit Adj Rpt</a>	<b>S\$927.01</b> <a href="#">Edit Estimates</a>	<b>S\$927.01</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

<b>Main</b>	<b>Reference</b>	<b>Claim Details</b>	<b>Documents</b>	<a href="#">Show All</a>
-------------	------------------	----------------------	------------------	--------------------------

#### CLAIM SUBFOLDER DETAILS

Insured:	CTPL, Co. Reg. No.: 199303821R		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SH8426K	Date of Loss:	23/12/2019 22:00 - :59 [5 Months and 6 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M1910013	Policy/Cover Note No.:	MK000578 (Third Party Only) Coverage: 25/06/2019 - 24/02/2020
Vehicle Reg. No. (Insured):	SLF9460Y	Policy No. (Claimant):	
		Excess:	S\$0.00
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 <b>Telma Gomez</b> - 65926402]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by <b>PARASURAM SHANMUGAM</b> ] ... [Final Rpt due 08/01/2020]		

#### 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

SH8426K (M1910013)  
[SLF9460Y]  
TP  
CTPL  
Dec 23 2019 10:00PM  
[CTPL]  
ComfortDelGro Engineering Pte Ltd

Upload Documents		Upload Photos	Compose New Letter	View <span style="border: 1px solid black; padding: 0 5px;">View in Browser</span> <span>▼</span>	
<b>Assessment Reports</b>				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	26/12/19 11:58	Repairer Estimates		Load HTM	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	30/12/19 10:36	Adjuster Immediate Advice		Load HTM	
<b>Photos/Images</b>				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	31/12/19 09:56	Odometer Reading		Load JPG	<input checked="" type="checkbox"/>
2	31/12/19 09:56	Chassis Number		Load JPG	<input checked="" type="checkbox"/>
3	31/12/19 09:56	General View		Load JPG	<input checked="" type="checkbox"/>
4	31/12/19 09:56	General View		Load JPG	<input checked="" type="checkbox"/>
5	31/12/19 09:56	General View		Load JPG	<input checked="" type="checkbox"/>
6	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
7	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
8	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
9	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
10	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
11	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
12	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
13	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
14	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
15	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
16	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
17	31/12/19 09:57	General View		Load JPG	<input checked="" type="checkbox"/>
18	31/12/19 09:57	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
19	31/12/19 09:57	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
20	31/12/19 09:57	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
21	31/12/19 09:57	After Repair Photo		Load JPG	<input checked="" type="checkbox"/>
<b>Documentation</b>				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	26/12/19 11:59	E-filed GIA report		Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>		Reset	Save	Print
There are no document checklists configured.				
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>				
<span style="font-size: 1.2em;">^</span> <span style="font-size: 1.2em;">v</span>				
<b>Show Remarks To:</b> <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/TMI19022723/FQD3E2

Date: 02/01/2020

## REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MK000578

Claimant  
Vehicle No : SH8426K

Insured Vehicle No : SLF9460Y

Date of Loss: 23/12/2019

Nature of Claim: TP

Claim No: M1910013

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SH8426K

Make &amp; Model: HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)

Engine No: G4LEKU297748

Reg. Date: 17/07/2019 (Man. Year: 2019)

Chassis No: KMHCH851CVKU164695

Colour: Blue

Odometer: 55198 km

Engine Capacity: 1580 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: 195/65 R15

Rear Tyre Size: 195/65 R15

Front Left Side: Davanti 8 mm

Rear Left Side: Davanti 8 mm

Front Right Side: Davanti 8 mm

Rear Right Side: Davanti 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,434.75	386.01	1,048.74	73.10
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	860.00	530.00	330.00	38.37
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>2,305.75</b>	<b>927.01</b>	<b>1,378.74</b>	<b>59.80</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>161.40</b>	<b>64.89</b>	<b>96.51</b>	<b>59.80</b>
<b>Nett Amount (S\$)</b>	<b>2,467.15</b>	<b>991.90</b>	<b>1,475.25</b>	<b>59.80</b>

## INSPECTION

Date of Assignment: 27/12/2019 Present Location:

ComfortDelGro Engineering Pte Ltd  
(Loyang)

Date Inspected: 26/12/2019 Inspected At:

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

Estimated Period of Repair: 2.0 days

Adjuster: PARASURAM SHANMUGAM

Manager: SHIAU CHAN

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.

Different 1 cents -Finalise confirm amount: \$927.00

## REPAIR DETAILS

### Reference

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 02 Jan 2020)
<b>Parts:</b>	192	HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SH8426K)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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	459.40 FL	-	*- FL
2	1		*REAR BUMPER CENTRE NOULDING	Cut	451.26 FL	-	*451.26 FL
3	1		*REAR BUMPER LOWER CENTRE MOULDING	Not Necessary	155.00 FL	-	*- FL
4	2		*REAR BUMPER STAY	Not Necessary	276.20 FL	-	*- FL
5	2		*REAR BUMPER SIDE BRACKET LH/RH	Not Necessary	66.20 FL	-	*- FL
6	10		*REAR BUMPER COVER CLIPS	Not Necessary	22.00 FL	-	*- FL
7	1		*REAR NO PLATE	Scratched	25.00 FS	-	*25.00 FS
8	1		*REAR NO PLATEB TRIM	Not Necessary	30.00 FS	-	*- FS
9	1		*REAR BUMPER REVERSE SENSOR	Not Necessary	135.70 FS	-	*- FS
10	1		*REAR BUMPER ADVERTISEMENT LOGO	Not Necessary	50.00 FS	-	*- FS
11	1		*REAR BUMPER RUBBER MAT	Not Necessary	50.00 FS	-	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

<b>Sub Total (\$\$)</b>	<b>1,720.76</b>	<b>476.26</b>
<b>- List Item Discount on L Items 20.00/20.00% (\$\$)</b>	<b>286.01</b>	<b>90.25</b>
<b>Total Parts (\$\$)</b>	<b>1,434.75</b>	<b>386.01</b>

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	480.00	280.00
2	SPRAY PAINTING	New	250.00	200.00
3	WIRING	New	50.00	0.00
4	REMOVE/REFIX REVERSE SENSOR	New	80.00	50.00
Gross Labour Cost (\$\$)			860.00	530.00

Report was unsubmitted during this print-out.
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&lt; END OF ESTIMATES &gt;