

Rem

C3 / TM1 20006342 / P4f302

ASSIGNMENT

Team

Date

Estimated Cost

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No.

At Workshop m/s

of

Insured

Policy No.

Claims No.

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

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 6177S

at Regn: 13/05/2015

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: MERCEDES BENZ E220CDI C.C. 2143

Colour: white A/C: Insured / Std / NI / NA

Sp. Reading: 688631 T/Radio: Insured / Std / NI / NA

Eng/No: -

C/No: WDD2120012B170592

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: 225 / 55 R11

R: -

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Westlake

Front

Rear

R/Bal. C mm R/Bal. C mm

L/Bal. C mm L/Bal. C mm

D.O.A. 30/12/19

D.O.I. 06/01/2020

Survey held at comfort+delgro (loyang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

SH 6177S - CC4 / AKA 17005099 / m1p13
SMK 28 IT - X

DOA - 09/01/2020

7/2

Sent Rpt via Merimen

TM1

LIS

L/S: \$1250/- with 2 repair days (Red \$1944.40, 60%)

confirm on 24/1/2020 with Lim Kook Eng. RECEIVED 06 FEB 2020

Date/Time: File Pass to?

☐

Preli. Report

in

☐

Final Report

Date/Time: File Return to?

7/2/20 Typist

Days Of Repair: 2

Resurvey No. of Trip: 2

Add Fee:

☐

Site Insp. (\$)

☐

Interview (\$)

☐

Tech. Insp. (\$)

☐

Map (\$)

Total Fee:

Total Fee: \$1250/-

Survey Fee:

250

Transportation

Fuel & PS (\$)

Phone

Other

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: Ngo Sau Wei Shawn

Date: 07 Feb 2020

Preliminary Advice

Insured Vehicle No	: SMK281T	Accident Date	: 30/12/2019
TP Vehicle No	: SH6177S	Assignment Date	: 07/01/2020
Make	: MERCEDES-BENZ E220	Est. Duration of Repair	: 0.00
Date of Inspection	: 07/01/2020		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) 59 LOYANG DRIVE SINGAPORE 508969		

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	3,194.40
Revised Amount	:S\$	1,556.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,556.00

Lump Sum Repair	:S\$
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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.
- (X) Other comments : THE ABOVE SURVEY WAS CONDUCTED ON A WITHOUT "PREJUDICE" BASIS

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	30/12/2019 15:18
Date Of Accident	30/12/2019 09:10
Exact Location Of Accident	KILLINEY RD TWDS RIVER VALLEY.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH6177S
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXX821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E220
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	ONG KAH KIAT
NRIC No	SXXXX947I
Date Of Birth	14/03/1955
Occupation	OUTDOOR
Date Of Driving Pass	22/12/1975
Driving Experience	44 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97369313
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	37 WESTWOOD DRIVE
Postcode	648855
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)	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 :- 3P REVERSED

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	SMK281T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR
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.

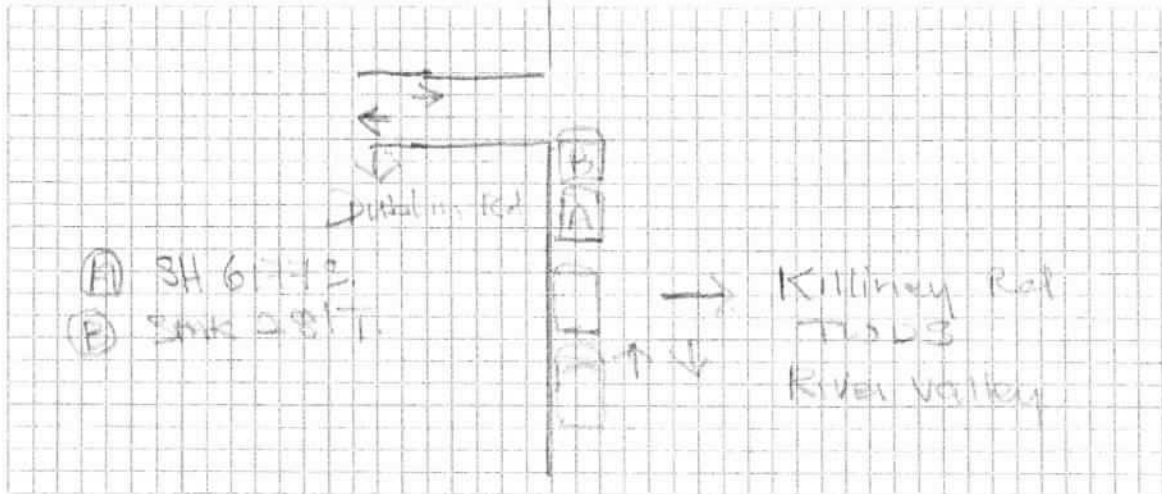
Policyholder's Signature
Date & Time:

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

30/12/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/12/19 at about 0910 hrs, I vehicle A was parked at the road side of Killiney Rd, Then I went to the toilet. After that I drove my taxi out from the parking lot. The first accident vehicle B reverse and bang onto my taxi front. Then I come out from my taxi to view the damage. After talking to vehicle B driver, we drove forward to side that I was behind her. Suddenly Second time she reverse and hit my taxi front against, causing the front damage. No one was injured at that time.

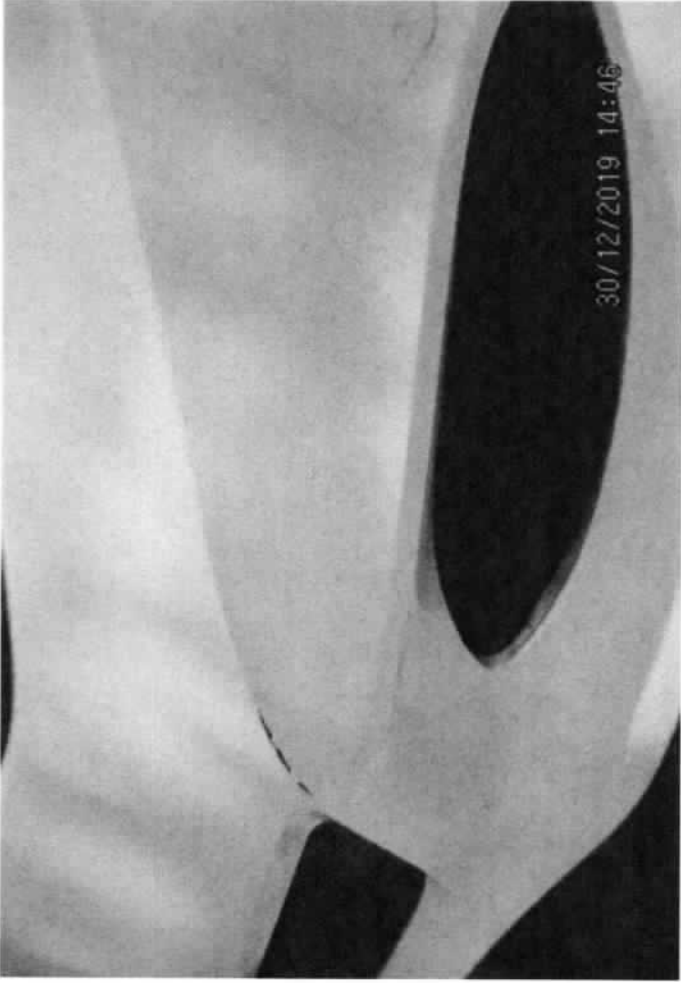
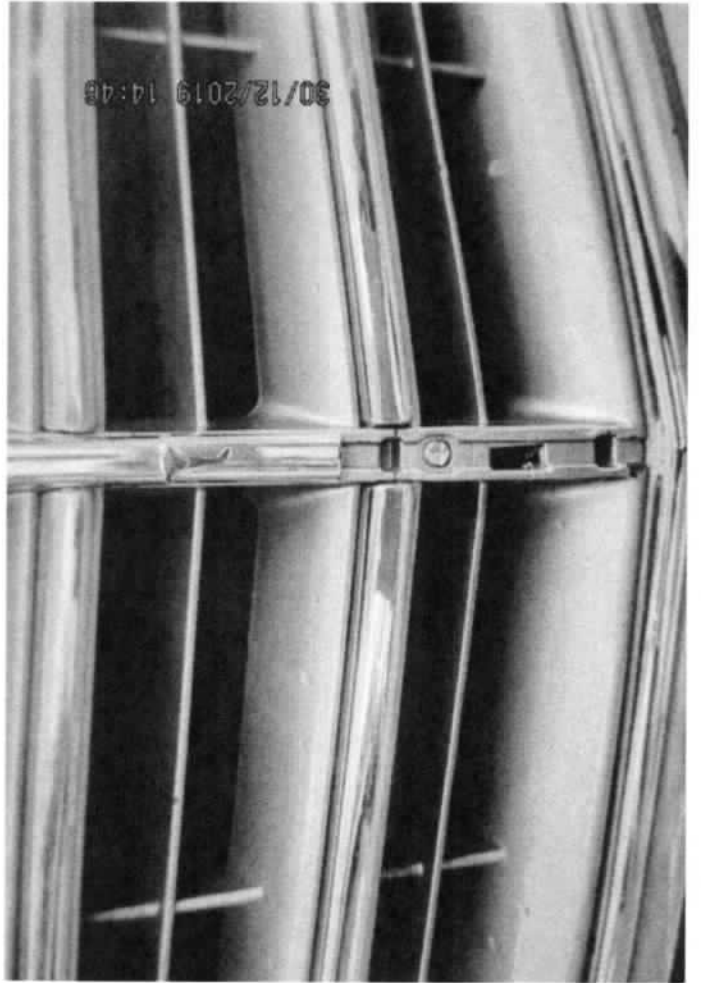
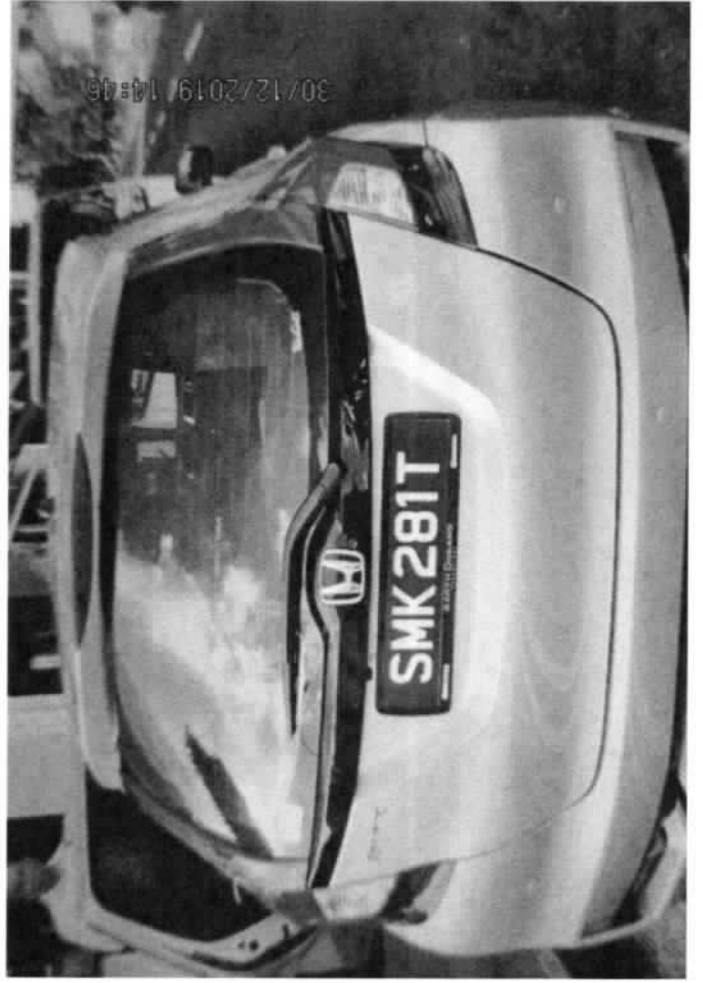
DECLARATION

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

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.:



Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305372067

OMER
S COMFORT TRANSPORTATION PTE LTD
7010045
OMER NO. 383 SIN MING DRIVE
ESS Singapore SINGAPORE 575717
65508755

(R) (O)
(P)

UNT CARD NO.

REGN NO.: SH 6177S	MILEAGE
MAKE: MERCEDES BENZ	FUEL E.....1/2.....F
MODEL E220CDI(E6)	DATE/TIME IN 06.01.2020 10:45
YR OF MANUF 13.05.2015	TARGET DATE
CHASSIS CODE WDD2120012B170592	COMPLETION DATE/TIME:

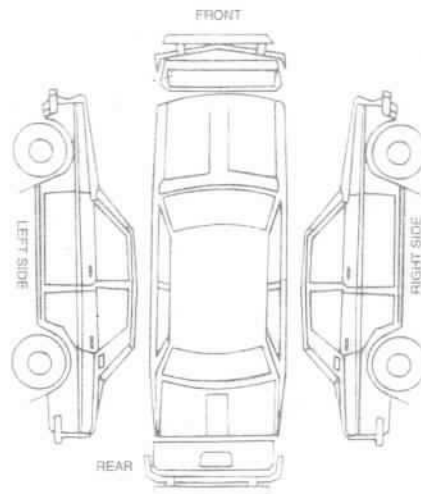
Tokw Marine

JOB DESCRIPTION

Accident Date: 30.12.2019

NATURE: 3P 31.12.2019

S/NO LABOR CODE DESCRIPTION



LED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Adgement Slip

o.: SH 6177S

LKE

RAM

Exit Pass

Vehicle No.:

SH 6177S

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

DATE 1/6/2020 15:23

MODEL : MERCEDES

DATE 1/6/2020 15:23 *Leticia Maldonado*

Like

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bumper Assy, Frt X(R)			\$ 1,890.50
	Bumper Bracket, LH xmn			\$ 95.00
	Radiator Grille era			\$ 1,220.00
				\$ 976/=
	SUB TOTAL			\$ 3,205.50
	LESS 20%			\$ 641.10
	DISCOUNTED TOTAL			\$ 2,564.40
	Labour Charge			
	Panel Beating			\$ 380.00
	Spray Painting Charge			\$ 250.00
	TOTAL LABOUR			\$ 630.00
	ESTIMATE TOTAL			\$ 3,194.40

Handwritten notes:

- 8/1/2020
- Ram LKK
- 06/01/2020 1530 hrs
- Para Suran @ LKK auto-co
- 88622778 (LKS)
- (2) repair days
- qst repair photo

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:

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.

Our Job Ref No 305372067
Date : 18.01.20

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

FINALIZATION FORM


To : LKK Fax :
Attn : Mr RAM
Vehicle Reg No. SH6177S CTPL 30.12.19

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

1. The repair job shall bill to: TOKIO MARINE --- SMK281T
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges
 - Total for Part-By-Part Repair Cost**
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$1,250.00
Final Lumpsum Repair cost \$1,250.00

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 : Ram
Date : 24/1/2020

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:

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


CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	06 Jan 2020 Sendback Est	06 Jan 2020 19:30 \$3,205.40	07 Jan 2020 10:36 Edit Adj Rpt	\$1,250.00 Edit Estimates	\$1,250.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured: YONG JOON FONG , Co. Reg. No.: S0603426H									
Main Claimant: CTPL									
Vehicle Reg. No.: SH6177S		Date of Loss: 30/12/2019 00:00 - :59 [55 Months and 17 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / M2000143		Policy/Cover Note No.: MS003166 (Comprehensive) Coverage: 27/03/2019 - 26/03/2021							
Vehicle Reg. No. (Insured): SMK281T		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 Ngo Sau Wei Shawn]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by PARASURAM SHANMUGAM] ... [Final Rpt due 16/01/2020]									
Adj Asg. Remarks: OI HAS NOT RPT THE ACCDT									
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

SH6177S (M2000143)
[SMK281T]
TP
CTPL
Dec 30 2019 12:00AM
[YONG JOON FONG]
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	06/01/20 19:30	Repairer Estimates							1	Load HTM				
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)								Thumbnail	Print			
1	07/02/20 12:34	Adjuster Immediate Advice							1	Load HTM				
Photos/Images									3 per page			<input checked="" type="checkbox"/>		
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)								Thumbnail	Print			
1	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
2	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
3	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
4	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
5	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
6	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
7	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
8	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
9	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
10	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
11	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
12	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
13	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
14	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
15	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
16	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
17	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
18	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
19	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
20	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
21	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
22	13/01/20 17:55	General View							1	Load JPG	<input checked="" type="checkbox"/>			
23	23/01/20 16:15	Reinspection Photo							1	Load JPG	<input checked="" type="checkbox"/>			
24	23/01/20 16:15	Reinspection Photo							1	Load JPG	<input checked="" type="checkbox"/>			
25	23/01/20 16:15	Reinspection Photo							1	Load JPG	<input checked="" type="checkbox"/>			
26	23/01/20 16:15	Reinspection Photo							1	Load JPG	<input checked="" type="checkbox"/>			
Documentation									1 per page			<input checked="" type="checkbox"/>		
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)								Thumbnail	Print			
1	29/01/20 11:42	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee							1	Load PDF				
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)								Thumbnail	Print			
1	06/01/20 19:32	E-filed GIA report							1	Load PDF				
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)								Thumbnail	Print			

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On			Thumbnail Print
1	31/01/20 22:00	ComfortDelGro Engineering Pte Ltd (Loyang) Letter of Demand from Third Party	 Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)
<div></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/TMI20000342/FYF3E2

Date: 10/02/2020

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MS003166

Claimant Vehicle No : SH6177S

Insured Vehicle No : SMK281T

Date of Loss: 30/12/2019

Nature of Claim: TP Claim No: M2000143

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SH6177S

Make & Model: MERCEDES-BENZ E220, 2.2 (A)

Engine No: 65192432747914

Reg. Date: 13/05/2015 (Man. Year: 2015)

Chassis No: WDD2120012B170592

Colour: White

Odometer: 638631 km

Engine Capacity: 2143 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: 225/55 R16

Rear Tyre Size: 225/55 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	2,564.40	976.00	1,588.40	61.94
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	630.00	580.00	50.00	7.94
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	3,205.40	1,567.00	1,638.40	51.11
Approved Total (Overridden) (S\$)		1,250.00		
(S\$)	3,205.40	1,250.00	1,955.40	61.00
+ GST 7.00/7.00% (S\$)	224.38	87.50	136.88	61.00
Nett Amount (S\$)	3,429.78	1,337.50	2,092.28	61.00

INSPECTION

Date of Assignment: 07/01/2020 Present Location:

ComfortDelGro Engineering Pte Ltd
(Loyang)

Date Inspected: 06/01/2020 Inspected At:

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

Estimated Period of Repair: 2.0 days

Adjuster: PARASURAM SHANMUGAM**Manager:** YVONNE WONG YIN CHENG

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: 10 Feb 2020)
Parts:	143	MERCEDES-BENZ E220 2.2 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SH6177S)	
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		*FRT BUMPER ASSY	Repair	1,890.50 FL	-	*- FL
2	1		*FRT BUMPER BRACKET LH	Not Necessary	95.00 FL	-	*- FL
3	1		*RADIATOR GRILLE ASSY	Cracked	1,220.00 FL	-	*1,220.00 FL
					Sub Total (\$\$)	3,205.50	1,220.00
					- List Item Discount on L Items 20.00/20.00% (\$\$)	641.10	244.00
					Total Parts (\$\$)	2,564.40	976.00

F=Franchise part. L=ListItemDisc.

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 (S\$)			11.00	11.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	380.00	380.00
2	SPRAY PAINTING CHARGE	New	250.00	200.00
Gross Labour Cost (S\$)			630.00	580.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >