COMFORTDELGRO ENGINEERING -

Our Job Ref No	:	305467683	
Date	÷	15/05/21	

ComfortDelGro Engineering Pte Ltd

Date		15/05/21	-		oyang Drive Singapore 508969 : 6546 8156
FINA	LIZAT	ION FORM			
То	:	LKK		Fax:	
Attn	: M	rTAUFIKH			
Vehic	de Reg	No. SHA4543Z	CTPL		06.05.21
The s	survey	and estimates of the repairs of t	he above-mentione	d vehicle are as follows	s:-
1.	The r	repair job shall bill to:	AIG	;****.	SGQ6336U
2.	The f	inalized amount shall be:			
	(a)	Spare Parts after List discount			\$298.40
	(b)	Labour Charges			\$1,025.00
		Total for Part-By-Part Repair	Cost		\$1,323.40
	(c.)	Lumpsum Repair (if applicable Total for Lumpsum repair cost Final Lumpsum Repair cost		_20%_	ž-
3.	Estim	ated normal period for repairs:	3	working days.	
4.		hall treat the above amount as ing days	Correct and Conf	irmed if there is no re	eply from you within 7
5.	Thank	k you for your assistance.		We confirm the e	
	Signa Name Tel Fax			Signature : Name : Date :	Taufikh 27/5/21
For O	fficial	Use Only			

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees				
4. LTA Search Fee	\$7.49 / \$2.00			
Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

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## COMFORTDELGRO ENGINEERING PTE LTD

Date: 15.05.2021 Time: 09:47:12

REPAIR ESTIMATE

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 REGN NO 305467683 : SHA4543Z

MILEAGE MAKE

: 0000000000

MODEL

: HYUNDAI : IONIQ(G3)

DATE OF REGN

22.10.2019

DATE/TIME IN : 06.05.2021 21:00

ACCIDENT DATE : 06.05.2021

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 03-01-0104-2137-G CAP ASSY-WHEEL HUB 1 346.40 20.00 277.12

0002 04-01-0104-3913-G EMBLEM-BLUE DRIVE RH 1 26.60 20.00 21.28

SUB-TOTAL : 298.40

JOB NATURE

0000 PB

PANEL BEATING

525.00

0001 SP

SPRAYPAINT CHARGE

500.00

SUB-TOTAL : 1,025.00

TOTAL : 1,323.40

MVA NAME & SIGNATURE

**AUTHORISED: YES/NO** SURVEYOR NAME & SIGNATURE

DATE:

DATE: