

NS/INC21013226/T1tc

ASS. REQ. BY: Tang Jia

REF: INC

AGENCY/COMPANY: SHD3441A

Yr Regn: 2016 Nov

From: _____ 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. MT/1155875-002

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

Consistent? : Yes or No

Consistent? : Yes or No

Est. Repair: _____ days

Res.: Yes or No

Lum Sum: _____ %

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

INTS

Veh No: _____

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

Truck / Trailer or

MAKE: Hyundai 140 (685)

Colour: Blue

Sp. Reading: 562674

Eng/No: KMHLB414M4096652

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: N/A / Rim / STD A/Rim or

Tyre Size: F: 205/60R16

R: _____

BS / BUN / E-KNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or waste

Front

R/Bal. 6 mm

L/Bal. 6 mm

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 27/12/11

Survey held at Comfort Lodge

Des. of Damages: Fnt / Rear / O/S / N/S / STD / Rooftop or

Rear o/s

The VIC / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to? _____

Date/Time, File Return to? _____

Rep. Form: _____

Lump Sum / L.B.R. (F) _____

Days of Repair: _____

Resurvey No. of Trip: _____

Add Fee: _____

Site Insp (\$)

Interview (\$)

Tech. Insp (\$)

Vehicle (\$)

Convey Fee: _____

Transportation: _____

Photos: _____

Others: _____

LUMP SUM

1200,2DAYRED:

1847.01;60%

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Effective Date: 1 Nov 2020

LKK -

INSURANCE: NTUC (L/S)

MVA: LIM T S

DATE: 27-Dec-21

MODEL: Hyundai i40

VEHICLE NO.: SHD3441A

PART NO.	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
	Rear Bumper	1		\$553.00
	Rear Bumper Under Cover	1		\$228.00
	Rear Bumper Reinforcement	1		\$428.40
	Rear Bumper Clips	10	\$2.20	\$22.00
	Rear Bumper Reflector RH	1		\$32.00
	Exhaust Muffler RH	1		\$967.70
	SUB TOTAL			\$2,231.10
	LESS 20%			\$446.22
	DISCOUNTED TOTAL			\$1,784.88
	Reverse Sensors	1		\$135.70
	SUB S/NETT			\$135.70
	LESS 10%			\$13.57
	SUB S/NETT TOTAL			\$122.13
	Rear Fender Adv.Sticker RH / LH	1	\$100.00	\$200.00
	Rear Bumper Adv.Sticker	1		\$50.00
	Rear Bumper Mat	1		\$50.00
	NETT TOTAL			\$300.00
	SPARE PARTS TOTAL			\$2,207.01
	Labour Charge			
	Panel Beating			\$300.00
	Spray Painting Charge			\$300.00
	R/I Reverse Sensors			\$120.00
	R/I Exhaust System			\$120.00
	TOTAL LABOUR			\$840.00
	ESTIMATE TOTAL			\$3,047.01

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 or appointed by the insurance company.

- LKK Auto Consultants hence notify the Receiver 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

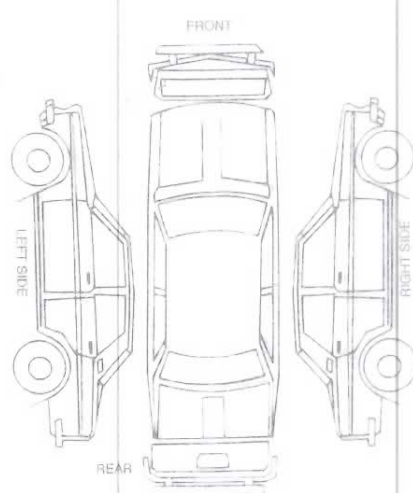
Signature:

Date:

am: ARC Repair TP(CLSO)1 JOB CARD Sales Order: 4155775 JC NO305499190

OMER	REGN NO : SHD3441A	MILEAGE
S COMFORT TRANSPORTATION PTE LTD	MAKE : HYUNDAI	FUEL
OMER NO. 7010045		E.....1/2.....F
ESS 383 SIN MING DRIVE	MODEL I-40	DATE/TIME IN 26.12.2021 19:40
Singapore SINGAPORE 575717	YR OF MANU. 24.11.2016	TARGET DATE
(R) 65508755 (O)	CHASSIS CODE KMHLE41UMHU096632	COMPLETION DATE/TIME:
(P)		

IDENT Date: 24.12.2021		JOB DESCRIPTION
TURE: 3P 24.12.2021		
NO 0010	LABOR CODE PB	DESCRIPTION PANEL BEATING-SHD3441A



KED & PASSED OUT BY: _____		CUSTOMER'S SIGNATURE _____	
SERVICE ADVISOR _____			
edgement Slip	Exit Pass		
No.: SHD3441A	LIMITS	Vehicle No.: SHD3441A	
Service Advisor _____	Signature/Date _____	Name of Service Advisor _____	Date _____
turned to Service Reception upon collection		To be kept by Security Guard	