

NS/INC22000044/T1tc

ASS. REC. BY: Taughn

REF:

INC

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: _____

Policy No. _____

Claims No. **MT/1156364-002**

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

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

WP

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHD6642SYr Regn: 2016, June

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

Truck / Trailer or

Make: Hyundai

c.c

Colour: Blue

A/C: Insured / Std / NI / NA

Sp. Reading: 827521

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 11MHLB4/4M G 407550

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 orTyre Size: F: 205/60R16

R: _____

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

TOYO / YOKO or Wester

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.A. _____

D.O.I. 29/12/21Survey held at Confut Logon

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

Frt N/S

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

Date / Time Action / Instruction

revised COR L/S\$1700 , 2 DAYS.

RED:993.28;36%

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Rep. Format: _____

Lump Sum / L.B./ (\$)

COMFORTDELGRO ENGINEERING

REPAIR ESTIMATE*

VEHICLE NO SHD6642S
 MAKE 23/06/2016
 MODEL I-40

DATE 28.12.21
 CHIANG/NTUC

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	FRONT BUMPER COVER		de	\$1,052.20
10	BUMPER CLIP		ner	\$2.20
1	FRONT BUMPER GRILLE LH		x	\$187.20
1	FRONT FENDER LH		bt	\$663.00
1	FRONT FENDER SHIELF LH		?	\$174.90
1	REAR BUMPER BRACKET /LH		?	\$24.60
	<i>front</i> SUB TOTAL			\$2,104.10
	20.00%			\$420.82
	DISCOUNTED TOTAL			\$1,683.28
	Labour Charge			
	Panel Beating		280	\$450.00
	Spray Painting		500	\$500.00
	Check lighting		x	\$60.00
	TOTAL LABOUR			\$1,010.00
	ESTIMATE TOTAL			\$2,693.28
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.				

Tanpin 97495749
 'wp' 28/12/21 @ 5pm
 c/s Henry after repair
 Tanpin e (Lkautsun)
 2 days

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:

Date/Time: 29.12.2021 15:58

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Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order: 4157275

JC No: 305499568

CUSTOMER
VMS COMFORT TRANSPORTATION PTE LTD
CUSTOMER NO. 7010045
ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
L (R) 65508755 (O)
(P)

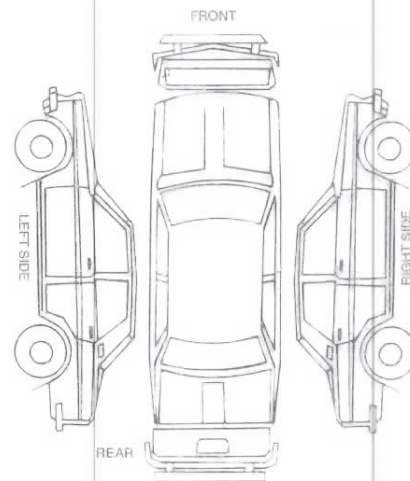
REGN NO. SHD6642S	MILEAGE
MAKE HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 29.12.2021 14:10
YR OF MANU. 23.06.2016	TARGET DATE
CHASSIS CODE KMHLB41UMGU091550	COMPLETION DATE/TIME:

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 28.12.2021
NATURE: 3P 28.12.2021

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHD6642S CHIANG

Vehicle No.: SHD6642S

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard