

ASS. REC. BY: Taufik

REF:

NS/INC22001911/Tvc

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: **SJG 1476Z**

Policy No. _____

Claims No. **MT/1163748-001**

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: Amay Vehicle: IN / OUT

Veh No: **SMB 66284** - Yr Regn: **2019, Oct.**

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

Truck / Trailer or

Make: **Hyundai Lang** C.C. **1580**

Colour: **Blue** A/C: Insured / Std / NI / NA

Sp. Reading: **270894** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **1CMHC 851CV 4187517**

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: **195/65R15**

R: _____

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

TOYO / YOKO or **Workshop**

Front Rear

R/Bal. **6** mm R/Bal. **6** mm

L/Bal. **6** mm L/Bal. **6** mm

D.O.A. **27/2/2022** D.O.I. **28/2/22**

Survey held at **Comfort Lodge**

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

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

Date / Time	Action / Instruction
22/3/22	Taufikh confirmed LS \$3100 (red 1982.36, 39%)

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

1) _____
Date/Time, File Return to?

2) **24/3/22-typist**

Rep. Format: **TP**

Lump Sum / L.S.: **\$3100**

Days Of Repair: **3**

Resurvey No. of Trip: **1**

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

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

REPAIR ESTIMATE*

VEHICLE NO SHB6628U

DATE 27/02/22

MAKE REG.30.10.2019

MODEL : HYUNDAI IONIQ G3

CHIANG /NTUC

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	FRONT BUMPER BRACKET LH			\$35.00
1	FRONT BUMPER			\$430.90
1	HEADLAMP LH			\$1,993.65
1	FOG LAMP LH			\$642.50
1	FRONT BUMPER GARNISH LH			\$186.90
1	FRONT FENDER SHIELD LH			\$164.70
1	FRONT FENDER LH			\$588.80
1	FRONT FENDER EMBLEM			\$26.60
1	FRONT WHEEL COVER LH			\$346.40
	SUB TOTAL			\$4,415.45
	20.00%			\$883.09
	DISCOUNTED TOTAL			\$3,532.36
1	FRONT FENDER ADVERTISEMENT			\$100.00
				\$100.00
	Labour Charge			
	Panel Beating			\$700.00
	Spray Paint			\$600.00
	Reset Wheel alignment			\$60.00
	Check lighting			\$90.00
	TOTAL LABOUR			\$1,450.00
	ESTIMATE TOTAL			\$5,082.36

Tanfani 87445749
 'up' 28/2/22
 Tanfani 0114444444
 2-3 days
 4/3 Kuning after repair.

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.

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order: 4179347

JC NO305506834

CUSTOMER

MR/MS COMFORT TRANSPORTATION PTE LTD
CUSTOMER NO. 7010045
ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
TEL. (R) 65508755 (O)
(P)

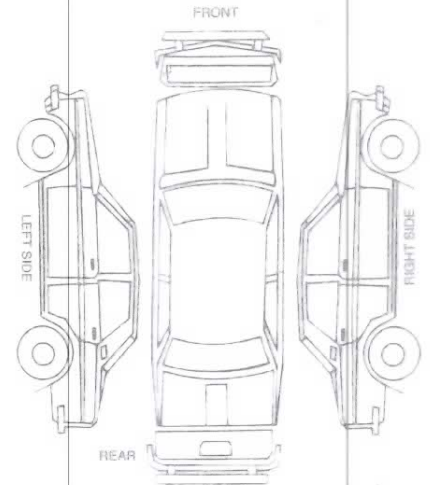
DISCOUNT CARD NO.

REGN NO.: SHB6628U	MILEAGE
MAKE : HYUNDAI	FUEL E.....1/2.....
MODEL IONIQ(G3)	DATE/TIME IN 27.02.2022 21:10
YR OF MANU. 30.10.2019	TARGET DATE
CHASSIS CODE KMHC851CVLU187517	COMPLETION DATE/TIME

JOB DESCRIPTION

Accident Date: 27.02.2022
NATURE: 3P 27.02.2022

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Name:

No.:

Vehicle No.:

SHB6628U

CHIANG

Vehicle No.:

SHB6628U

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard