

Our Job Ref No : 305510379

Date : 04/04/22

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

				ang Drive Singapore 508969 46 8156
LIZAT	ION FORM			
To :LKK			_ Fax :	
: M	rTaufikh	I		
cle Reg	No. : SH 8304D	CTPL		25/03/2022
survey	and estimates of the repairs of	of the above-mention	ned vehicle are as follows:	-
The repair job shall bill to:		CHINA TAIPING		SMP830H
The f	inalized amount shall be:			
(a)	Spare Parts after List discou	ınt		
(b)	Labour Charges			
	Total for Part-By-Part Repa	air Cost		\$0.00
(c.)	Total for Lumpsum repair co	st after Less:	20%	\$3,300.00
Estim	ated normal period for repairs	s: <u>2</u>	working days.	
		as Correct and Co	onfirmed if there is no re	oly from you within
Thanl	k you for your assistance.	f	We confirm the es finalized amount	timates and
Signa	ture :	/ \	Signature:	taufikh
Name	: Ms. Loke YY		Name : T	aufikh
Tel	62148355		Date : 28/4	1/22
Fax	65468156			
	: : Mode Regisurvey The r The r (a) (b) (c.) Estimate We so recommend to rec	: Mr Taufikh cle Reg No. : SH 8304D survey and estimates of the repairs of The repair job shall bill to: The finalized amount shall be: (a) Spare Parts after List discout (b) Labour Charges Total for Part-By-Part Repair (c.) Lumpsum Repair (if applicate Total for Lumpsum repair constituted for Lumpsum Repair constituted normal period for repairs We shall treat the above amount 7 working days Thank you for your assistance. Signature: Name : Ms. Loke YY Tel : 62148355	: LKK : Mr Taufikh cle Reg No. : SH 8304D CTPL survey and estimates of the repairs of the above-mention The repair job shall bill to: CHINA TA 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: Final Lumpsum Repair cost Estimated normal period for repairs: 2 We shall treat the above amount as Correct and Co 7 working days Thank you for your assistance. Signature: Name: Ms. Loke YY Tel: 62148355	LIZATION FORM LKK

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 / \$2.00			
Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

Remarks		