

ASS. REC. BY: ThevanREF: ntuc**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. _____

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
	X

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHC3421M Yr Regn: 214 119Type: M.Car / M.Cycle / Bus / Van / Lorry / (Taxi) / Prime Mover /

Truck / Trailer or _____

Make: Hyundai Ionig c.c. 1580Colour: blue A/C: Insured / Std / NI / NASp. Reading: 396941 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: hmtc851ahulu1763Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15R: 195/65R15

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

TOYO / YOKO or westlake

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 18/4/22 D.O.I. 19/4/22 1630Survey held at EDGEDes. 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

no GIA provided

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee:

Transportation:

____ S + RS ____ SI

Photos

Others

TOTAL

Report Format : _____

Lump Sum / I.B.I: (\$ _____)

Date/Time: 19.04.2022 14:16

Page : 1

Team: ABC Repair TP(CLS0)1

JOB CARD Sales Order: 4197815

JC NO305513035

STOMER
/MS COMFORT TRANSPORTATION PTE LTD
STOMER NO 7010045
DRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755

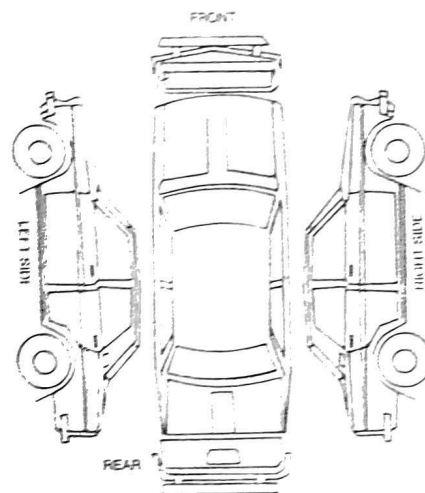
REGN NO: SHC3421M	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ(G2)	DATE/TIME IN 19.04.2022 12:15
YR OF MANU 02.04.2019	TARGET DATE
CHASSIS CODE KMHC851CVKU141763	COMPLETION DATE/TIME

COUNT CARD NO

JOB DESCRIPTION

Accident Date: 18.04.2022
NATURE: 3P 18.04.2022

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Knowledge Slip

Exit Pass

Vehicle No.: **SHC3421M** YY

Vehicle No.: **SHC3421M**

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

COMFORT TRANSPORTATION PTE LTD

REPAIR ESTIMATE

Vehicle No. : SHC3421M

Date: 04/19/22

Make : HYUNDAI

Insurance: NTUC

Model : IONIQ(G2)

MVA: MS. LOKE YY

Qty	Parts Description / Labour	Type	Unit Price	Amount
1	REAR BUMPER COVER			\$459.40
10	REAR BUMPER CLIPS			\$22.00
1	REAR BUMPER CENTRE MOULDING ASSY			\$451.25
1	REAR BUMPER REINFORCEMENT			\$394.80
1	ANTENNA SMARTKEY			\$40.50
1	REAR BUMPER FOG LAMP			\$201.50
1	LICENCE LAMP			\$85.30
	SUB TOTAL			\$1,654.75
	LESS 20%			\$330.95
	DISCOUNTED TOTAL			\$1,323.80
	REAR NUMBER PLATE WITH TRIM COVER			\$55.00
	REAR BUMPER REVERSE SENSOR			\$180.00
				\$235.00
	Labour Charge			
	PANEL BEATING			\$400.00
	SPRAY PAINTING CHARGE			\$600.00
	CHECK ALL LIGHTING			\$60.00
	REMOVE/REFIX REVERSE SENSOR			\$80.00
	TOTAL LABOUR			\$1,140.00
	ESTIMATE TOTAL			\$2,698.80

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.

Thuvan

82235769

19/4/22

1630 on 2 days up

US

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- To display damaged part(s) during resurvey
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation of Insurance Company
- Parts prices are subject to confirmation of Insurance Company
- Third party survey is on "Without Prejudice" basis
- Third party survey is on "Without Prejudice" basis
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: