

ASS. REC. BY: Taufik

REF:

NS/ INC 22006561/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: FBT 8254C

Policy No. _____

Claims No. MT/1177132-002

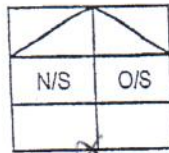
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



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: Iman

Vehicle: IN / OUT

Veh No: SHU 3850T Yr Regn: 2017, Sep.

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

Truck / Trailer or

Make: Toyota Prim c.c. 1798

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

Sp. Reading 713985 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: STDKB3F4503563879

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: NH / S/Rim / STD A/Rim or

Tyre Size: F: 195/65R15

R: 7 -

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

TOYO / YOKO or Wintake

Front Rear

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

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

D.O.A. 17/6/2022 D.O.I. 21/6/22

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

16/8/22 Taufikh informed LS \$1200 (Red 718.74,37%)

Date/Time, File Pass to?

☐ : Prell. Report

☐ : Final Report

1)

Date/Time, File Return to?

2) 17/8/22-typist

Rep. Format : TP

Lump Sum / L.S. : \$1200

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS. \$ _____

Photos

Others

TOTAL

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

KAC / Csum

Date: 21.06.2022

Time: 11:21:17

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305520313
 REGN NO : SHA3850T
 MILEAGE : 0000000000
 MAKE : TOYOTA
 MODEL : PRIUS HYBRID(G4)
 DATE OF REGN : 07.09.2017
 DATE/TIME IN : 21.06.2022 10:45
 ACCIDENT DATE : 17.06.2022

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0302-2282-G	COVER REAR BUMPER	1	503.04	25.00	377.28	pv
0002	04-01-0302-2288-G	REINFORCEMENT SUB-ASSY RE	1	378.32	25.00	283.74	?
0003	04-01-0302-2267-G	BUMPER PIECE	10	22.00	25.00	16.50	ru
0004	04-01-0302-2287-G	GUARD-REAR BUMPER CENTER	1	654.96	25.00	491.22	de

SUB-TOTAL : 1,168.74

JOB NATURE

0000	PB	PANEL BEATING	400.00	350
0001	SP	SPRAYPAINT CHARGE	300.00	250
0002	L	REMOVE/REFIX REVERSE SENSOR	50.00	30

SUB-TOTAL : 750.00

TOTAL : 1,918.74

MVA NAME & SIGNATURE
 DATE :

AUTHORISED : YES / NO
 SURVEYOR NAME & SIGNATURE
 DATE :

Tanphi 97495749
 WP 21/6/22 E SPY
 2 days
 L/S Rising after repair
 tanphi @khant.com

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: 21.06.2022 11:17

Page : 1

am: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO 305520313

OMER
S COMFORT TRANSPORTATION PTE LTD
OMER NO. 7010045
ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65508755 (O)
(P)

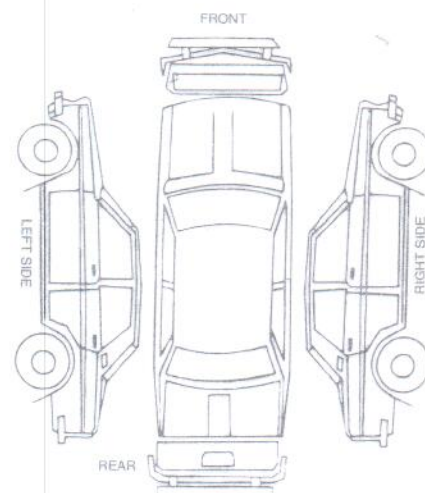
REGN NO: SHA3850T	MILEAGE
MAKE: TOYOTA	FUEL E.....1/2.....F
MODEL PRIUS HYBRID(G4)21	DATE/TIME IN 06.2022 10:45
YR OF MANU. 07.09.2017	TARGET DATE
CHASSIS CODE JTDKB3FU503563879	COMPLETION DATE/TIME:

DUNT CARD NO.

JOB DESCRIPTION

Accident Date: 17.06.2022
ATURE: 3P 17.06.22

'NO LABOR CODE DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

No.: **SHA3850T**

JU NTUC

Vehicle No.:

SHA3850T

Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard