

ASS. REC. BY: Taufik

REF:

NS/ INC 22007331/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: SLA 8808L

Policy No. _____

Claims No. MT/1182252-002

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: Lim TS

Vehicle: IN / OUT

Veh No: SH9839X Yr Regn: 2019 July

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

Truck / Trailer or

Make: Hyundai C.C. 1580

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

Sp. Reading: 22695 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHC851CUB4/64717

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: 195/65R15

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

TOYO / YOKO or Wan Hoo

Front Rear

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

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

D.O.A. 29/7/2022 D.O.I. 1/8/22

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

26/9/22 Taufik informed LS \$800 (Red 1546.50, 65%)

Date/Time, File Pass to?

☐ : Preli. Report

☐ : Final Report

1)

Date/Time, File Return to?

2) 26/9/22-typist

Report Format: TP

Lump Sum / L.B. / P. \$800

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

Effective Date: 1 Nov 2020

REPAIR ESTIMATE

LKK-

DATE: 01.08.2022INSURANCE: NTUC (45)MODEL: Hyundai IoniqMVA: LIM T SVEHICLE NO.: SH 9839X

PART NO.	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
	Rear Bumper	1		\$ 459.40
	Rear Bumper Reinforcement	1		\$ 394.80
	Rear Bumper Centre Moulding	1		\$ 451.25
	Rear Bumper Lower Centre Moulding	1		\$ 155.00
	Rear Bumper Cover Clips	10	\$ 2.20	\$ 22.00
	Rear Bumper Tow Cover	1		\$ 98.80
	SUB TOTAL			\$ 1,581.25
	LESS 20%			\$ 316.25
	DISCOUNTED TOTAL			\$ 1,265.00
	Rear No. Plate W/Trim Cover	1		\$ 55.00
	Reverse Sensor	1		\$ 180.00
	SUB S/NETT			\$ 235.00
	LESS 10%			\$ 23.50
	S/NETT TOTAL			\$ 211.50
	Rear Bumper Mat	1		\$ 50.00
	SPARE PARTS TOTAL			\$ 1,526.50
	Labour Charge			
	Panel Beating			\$ 400.00
	Spray Painting Charge			\$ 300.00
	Remove/Refix Reverse Sensor			\$ 120.00
	TOTAL LABOUR			\$ 820.00
	ESTIMATE TOTAL			\$ 2,346.50

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 974 95749
imp' 1/8/22 @ 4pm
w/ Resurvey after repair
- Delays
Tanpin @ Mechanic

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: 01.08.2022 07:13 Page : 1

m: ARC Repair TP(CLSO)1

JOB CARD Sales Order: 4487933

JC N805524975

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

REGN NO: SH 9839X	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ(G2)	DATE/TIME IN 29.07.2022 18:20
YR OF MANU. 17.07.2019	TARGET DATE
CHASSIS CODE KMHC851CVKU164717	COMPLETION DATE/TIME:

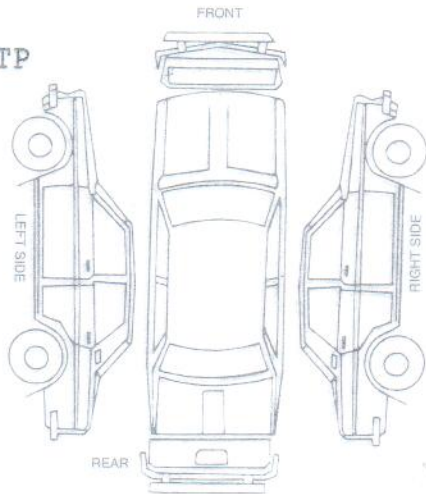
DUNT CARD NO.

JOB DESCRIPTION

ident Date: 29.07.2022
URE: 3P 29.07.2022

IO LABOR CODE
010 PB

DESCRIPTION
PANEL BEATING-SH 9839X-TP



OKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

lo.: SH 9839X

LIMITS

Vehicle No.:
SH 9839X

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard