

ASS. REC. BY: Taufiq

REF: INC

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

Bal. or Market Value: _____
 IDAC Accident Report: _____ 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 WP
 Date: _____ Person Contacted: Lim TS Vehicle: IN / OUT

Veh No: S4D301OK Yr Regn: 2016 June
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Mynden 140 C.C. 1685
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 640763 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMHLB414MG4091536
 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: 205/60R16
 R:
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Wostake
 Front R/Bal. 6 mm Rear R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. _____ D.O.I. 10/8/22
 Survey held at Comfort by jay
 Des. of Damages: Frit / Rear / O/S / N/S / U/C / Rooftop / or
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction

Date/Time, File Pass to? : Preli. Report
 : Final Report
 1) _____
 Date/Time, File Return to?
 2) _____
 Rep. Format: _____
 Lump Sum / L.B.J. (F) _____

Days Of Repair: _____
 Resurvey No. of Trip: _____
 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

DATE: 10.08.2022

INSURANCE: NTUC (US)

MODEL: Hyundai i40

MVA: LIM T S

VEHICLE NO.: SHD3010K

PART NO.	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
	Front Door LH	1		\$ 2,707.70
	Rear Door LH	1		\$ 2,201.10
	Rocker Panel Garnish LH	1		\$ 732.80
	SUB TOTAL			\$ 5,641.60
	LESS 20%			\$ 1,128.32
	DISCOUNTED TOTAL			\$ 4,513.28
	Front Door ComfortDelGro LH	1		\$ 75.00
	Rear Door APPS LH	1		\$ 80.00
	S/NETT SUB			\$ 155.00
	LESS 10%			\$ 15.50
	S/NETT TOTAL			\$ 139.50
	SPARE PARTS TOTAL			\$ 4,652.78
	Labour Charge			
	Panel Beating - Rear Fender Arch LH			\$ 800.00
	Spray Painting Charge			\$ 900.00
	Tuff Kote			\$ 80.00
	Transfer Of Doors	2	\$ 120.00	\$ 240.00
	TOTAL LABOUR			\$ 2,020.00
	ESTIMATE TOTAL			\$ 6,672.78

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.

Taufik 97495749
 WP 10/8/22 @ 4pm
 US Resurvey after repair
 3 days
 tafik@lkkauto.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:

m: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 4523002

JC No: 805526047

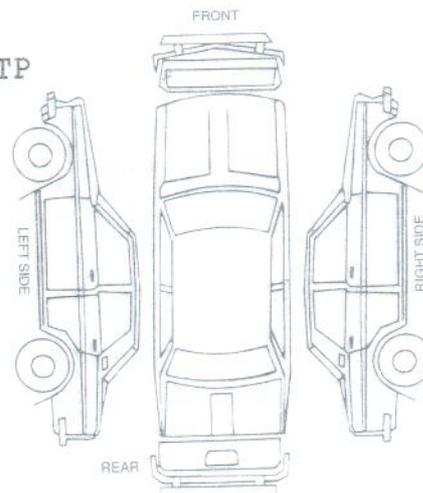
OWNER IS COMFORT TRANSPORTATION PTE LTD OWNER NO. 7010045 ADDRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (O) (P) JUNT CARD NO.	REGN NO.: SHD3010K	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL I-40	DATE/TIME IN 10.08.2022 12:20
	YR OF MANU. 09.06.2016	TARGET DATE
	CHASSIS CODE KMHLB41UMGU091336	COMPLETION DATE/TIME:

JOB DESCRIPTION

Ident Date: 10.08.2022
 DURE: 3P 10.08.2022/C

NO LABOR CODE
 0010 PB

DESCRIPTION
 PANEL BEATING-SHD3010K-TP



REKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

Vo.: SHD3010K

LIMITS

Vehicle No.:

SHD3010K

Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard