

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 () 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: _____

Veh No: SM295964 Yr Regn: 31/5/19
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Audi A4 c.c. 1984
 Colour: White A/C: Insured / Std / Nil / NA
 Sp. Reading: 80770 T/Radio: Insured / Std / Nil / NA
 Eng/No: _____
 C/No: WAU2ZZ2P4XKACT1227
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brakes: Inorder / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 215/50R17
 R: _____

(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: _____ Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / (MIC) / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front Rear
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. 4 mm L/Bal. 4 mm
 D.O.A. 2/9/22 D.O.I. 13/9/22
 Survey held at Gothbell
 Des. of Damages: FR / Rear / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

| Date / Time | Action / Instruction |
|-------------|----------------------|
| | <u>MV-139K</u> |
| | |
| | |
| | |
| | |
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| | |
| | |

Order/Time, File Pass to? : Prel. Report
 : Final Report
 Date/Time, File Return to? _____
 2) _____
 Report Form: _____
 Lump Sum / I.S.A. (\$) _____

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

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

Survey Fee: _____
 Transportation: _____
 S + RS. \$ _____
 Phone _____
 Others _____
 TOTAL _____

INSURER: **China Taiping Insurance (Singapore) Pte. Ltd. (HQ)**
PARTICULARS OF CLAIM

| | | | |
|-------------------------------|--|-----------------------|---------------|
| Claim Type: | OD (Own Damage) | Ref. No: | |
| Policy No: | DMPCSNW00103522200 | Date of Loss: | 02/09/2022 |
| Vehicle Reg. No.: | SMZ9596Y | Driveable? | |
| Driver Age/Info: | / MALE | Party At Fault: | UNKNOWN |
| TP Injury Involved? | NO | Third Party Involved? | YES |
| Insured/Claimant: | GOH KOK CHUAN | | |
| Driver: | GOH KOK CHUAN | | |
| Make/Model: | AUDI A4, 2.0 SEDAN TFSI S-TRONIC (NAV) (A) | Vehicle Reg. Date: | 21/03/2019 |
| Vehicle Colour: | White | | |
| Engine No: | GKCCQW1LW | Chassis No: | I89EJK8CLWAAL |
| Odometer: | 1 KM | | |
| Paint Type: | | | |
| Total Loss? | NO | | |
| Est. Duration of Repair (day) | 4 | | |
| Present Location: | GOLDBELL ENGINEERING PTE LTD (TUAS) | | |

| COST OF CLAIMS | Amount |
|--------------------------|-----------------|
| Parts | 2,180.00 |
| Miscellaneous Items | 0.00 |
| Labour | 800.00 |
| Paintwork Labour | 0.00 |
| Towing | 0.00 |
| Gross Total (S\$) | 2,980.00 |
| + GST 7.00% (S\$) | 208.60 |
| Nett Amount (S\$) | 3,188.60 |

This claim is handled by: RAMESH S/O SOMASUNDREM

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 12 Sep 2022)
 Parts: 143 AUDI A4 2.0 SEDAN TFSI S-TRONIC (NAV) (A) (Catalogue.Merimen Singapore 1.0)
 Labour: Repairer's (Price-denominated Standard List)
 Print Code: Goldbell Engineering Pte Ltd/SMZ9596Y/12/09/2022 10:20
 Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
 Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

| No. | Qty | Part No. | Particulars | %Disc | %Depr | Amount |
|-------------------------------------|-----|----------|---|-------|-------|---------------|
| 1 | 1 | | *FRONT BUMPER <i>BR</i> | 0.00 | 0.00 | *1,100.00 F ✓ |
| 2 | 1 | | *FRONT BUMPER GRILL <i>BR</i> | 0.00 | 0.00 | *580.00 F ✓ |
| 3 | 1 | | *FRONT REINFORCEMENT <i>BT</i> | 0.00 | 0.00 | *465.00 F ✓ |
| 4 | 1 | | *FRONT NO. PLATE WITH HOLDER <i>CVT</i> | 0.00 | 0.00 | *35.00 F ✓ |
| Total Parts (S\$) <i>(COS plie)</i> | | | | | | 2,180.00 |

F=Franchise part

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Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

| No | Particulars | Lab. Type | Amount |
|--------------------------|---|-----------|------------|
| Labour Items | | | |
| 1 | RESPRAY FRONT BUMPER | New | 250 350.00 |
| 2 | REMOVE INSTALL FRONT BUMPER, FRONT GRILL AND REINFORCEMENT. | New | 300 450.00 |
| Gross Labour Cost (\$\$) | | | 800.00 |

550

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total - 2730

< END OF ESTIMATES >

L/S - 2184
= 2200



Steve CLKK)

8322 8813

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EXCISE - ?

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PAR LIS

by BLY

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: