

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.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

7

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

C821R

Vehicle: IN / OUT

Date:

Person Contacted:

270821427

Veh No:

SA/A2805C

Yr Regn:

14/05/19

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

Truck / Trailer or

CA/

Make:

Hyundai ACIONIQ c.c 1580

Colour

3m

A/C:

Insured / Std / NI / NA

Sp. Reading

489992

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KMHC81CV KM146086

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

In order / Jammed / Leaked / Burnt or

Brake:

In order / Jammed / Leaked / Burnt or

Modi:

Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/65 R15

R:

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

TOYO / YOKO or

Duraturn

Front

6

Rear

6

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

27/10/22

D.O.I.

1/11/22

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

N/S Rear &

The U/C Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

fuel pipe & 24hrs Roofing work

6/12/22 L/S \$11,400 insured Tuman: (Red \$8944.20, 44%)

Date/Time, File Pass to?



Preli. Report

1) 06/12/22



Final Report

Date/Time, File Return to?

2)

Days Of Repair:

7

Resurvey No. of Trip:

2

Survey Fee:

Transportation:

Add Fee:



Site Insp (\$

) S + RS, SI



Interview (\$

) Photos



Tech. Invs (\$

) Others



Weekend (\$

)

Report Format :

AVER-7P

Lump Sum / I.B.I. (\$

11400

TOTAL

**COMFORTDELGRO
ENGINEERING**

Our Job Ref No : 305565015

Date 24.11.22

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156**FINALIZATION FORM**

To : LKK

Fax :

Attn : Mr MARCUS

Vehicle Reg No. SHA2405C

Date of Accident : 27.10.22

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: TOKIO --- SNG2639S
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges
 - Total for Part-By-Part Repair Cost
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20%
Final Lumpsum Repair cost

\$12,500.00

4511400

3. Estimated normal period for repairs: 7 working days.
4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days
5. Thank you for your assistance.

We confirm the estimates and
finalized amountSignature : 

Name : JUMANI

Tel : 62148315

Fax : 65468156

Signature : _____

Name : MARCUS

Date : _____

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees				
LTA Search Fee	\$7.49 / \$2.00	YES		
5. Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

Remarks:

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER:
CTPL

Tokio Marine Insurance Singapore Ltd (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	27/10/2022
Vehicle Reg. No.:	SHA2405C	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	14/05/2019
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	G4LEKU210484	Chassis No:	KMHC851CVKU146086
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	7		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	14,036.56
Miscellaneous Items	11.00
Labour	4,710.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$)	18,757.56
+ GST 7.00% (\$)	1,313.03
Nett Amount (\$)	20,070.59

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

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:

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 31 Oct 2022)**Parts:** 192 HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHA2405C/31/10/2022 15:47**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		*REAR BUMPER ASSY <i>For</i>	20.00	0.00	*459.40 FL
2	10		*REAR BUMPER CLIPS <i>See</i>	20.00	0.00	*22.00 FL
3	1		*REAR BUMPER SIDE BRACKET LH <i>one</i>	20.00	0.00	*55.80 FL
4	1		*REAR FENDER LH <i>Body</i>	20.00	0.00	*1,768.30 FL
5	1		*REAR BUMPER AIR DUCT LH <i>For</i>	20.00	0.00	*87.30 FL
6	1		*WHEEL RIM LH <i>one</i>	20.00	0.00	*1,124.20 FL
7	1	129.60 S/N	*WHEEL TYRE LH <i>one</i>	0.00	0.00	*216.00 F
8	1		*CURTAIN AIRBAG MODULE <i>207</i>	20.00	0.00	*1,344.50 FL
9	1		*FRT LH SEAT CUSHION <i>Admited</i>	20.00	0.00	*3,151.20 FL
10	1	complete	*FRT LH SEAT CUSHION AIR BAG <i>Bus</i>	20.00	0.00	*1,344.50 FL
11	1		*REAR SAFETY BELT ASSY LH <i>Admited</i>	20.00	0.00	*513.20 FL
12	1		*REAR SAFETY BELT ASSY RH <i>Admited</i>	20.00	0.00	*513.20 FL
13	1		*FRT SAFETY BELT ASSY RH <i>Admited</i>	20.00	0.00	*648.90 FL
14	1		*FRT SAFETY BELT ASSY LH <i>Admited</i>	20.00	0.00	*648.90 FL
15	1		*FUEL LIP TANK COVER <i>11</i>	20.00	0.00	*83.30 FL
16	1		*REAR WHEEL HUP CAP LH <i>Daye R</i>	20.00	0.00	*346.40 FL
17	1		*REAR WHEELBEARING IN HUB <i>Daye</i>	20.00	0.00	*544.00 FL
18	1		*REAR TRAILING ARM LH <i>11</i>	20.00	0.00	*265.40 FL
19	1		*REAR ASSIST ARM LH <i>11</i>	20.00	0.00	*227.90 FL
20	1		*REAR S/ABSORBER LH <i>Bus</i>	20.00	0.00	*230.50 FL
21	1		*REAR S/ABSORBER MOUNTING LH <i>11</i>	20.00	0.00	*133.10 FL
22	1		*STABILIZER BAR <i>11 X</i>	20.00	0.00	*387.30 FL
23	1		*STABILIZER LINK <i>11 X</i>	20.00	0.00	*147.30 FL
24	1		*REAR UPPER ARM LH <i>Bus</i>	20.00	0.00	*239.50 FL
25	1		*REAR LOWER ARM LH <i>11</i>	20.00	0.00	*393.10 FL
26	1		*REAR KNUCKLE ARM LH <i>Bus</i>	20.00	0.00	*538.10 FL
27	1		*UNIT ASSY - SMARTK CRU (RADAR SENSOR) <i>11 X</i>	20.00	0.00	*1,784.80 FL
28	1		*REAR DOOR APPS LOGO <i>See</i>	0.00	0.00	*80.00 F
29	1		*REAR FENDER SHIELD LH <i>For</i>	20.00	0.00	*173.60 FL

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	17,471.70
- List Item Discount on L Items (\$\$)	3,435.14
Total Parts (\$\$)	14,036.56

ComfortDelGro Engineering Pte Ltd/SHA2405C/31/10/2022 15:47. Not valid without Reference section.
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Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
<u>Miscellaneous Items</u>			
1	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING 350	New 1050	1,800.00
2	SPRAYPAINT 250	New 1000	1,200.00
3	CHECK WIRING	New 20	80.00
4	TUFF KOTE	New 40	80.00
5	REMOVE/REFIX REAR UPHOSLTERY	New 80	200.00
6	RENEW SAFETY BELT	New 120	150.00
7	REMOVE/RENEW FRT SEAT CUSHION LH	New 50	150.00
8	REMOVE / REFIX REAR UNDER CARRIGE	New 180	300.00
9	DIAGNOSETIC & RESETTING FAULT CODE	New 280	480.00
10	TOWING FEE (KING DOOLY)	New 120	150.00
11	ADJUST FOUR WHEEL ALIGNMENT	New 100	120.00
Gross Labour Cost (S\$)			4,710.00

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< END OF ESTIMATES >

3040

129.60 s/w
80 s/w

11078.80

2- 13848.50
202
11078.80
14328.4
11462.

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 24 Nov 2022)**Parts:** 192 HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHA2405C/24/11/2022 14:21**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		*ROOF HEADLINING ASSY	20.00	0.00	*1,983.30 FL
						Sub Total (S\$)
						1,983.30
						- List Item Discount on L Items (S\$)
						396.66
						Total Parts (S\$)
						1,586.64

F=Franchise part. L=ListItemDisc.

ComfortDelGro Engineering Pte Ltd/SHA2405C/24/11/2022 14:21. Not valid without Reference section.
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602 129-60 s/w

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	821R
Vehicle Details	
Vehicle No.:	SHA2405C
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Nov 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	AE IONIQ HEV 1.6 DCT
Primary Colour:	Blue
Manufacturing Year:	2019
Engine No.:	G4LEKUP210464
Chassis No.:	KMHC851CVKU146086
Maximum Power Output:	103.6 kW (138 bhp)
Open Market Value:	\$24,799.00
Original Registration Date:	14 May 2019
First Registration Date:	14 May 2019
Transfer Count:	0
Actual ARF Paid:	\$11,719.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 May 2027
PARF Rebate Amount:	\$8,789.00
Intended COE Rebate Details	
COE Expiry Date:	13 May 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$22,309.00
COE Rebate Amount:	\$12,638.00
Total Rebate Amount:	\$21,427.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 01 Nov 2022

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	28/10/2022 09:49 (SGT)
Reported by	Driver
Date of Accident	27/10/2022 21:50 (SGT)
Exact Location of Accident	Keppel Rd, Singapore
Additional Location Information	SENTOSA GATEWAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA2405C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-97350642
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ae ioniq
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1580

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	VFX/P2419138

DRIVER

Name of Driver	MOHAMED BASRI BIN NAWI
NRIC No	SXXXX469H
Date Of Birth	24/07/1951
Occupation	Outdoor

Vehicle Manufacturer	Hyundai
Vehicle Model	Avante
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHUA XIANPENG
NRIC No	SXXXX930B
Contact Number	(Phone) +65-96690255
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHAMED BASRI BIN NAWI
Gender	Male
Phone No	(Phone) +65-97350642
Address	550 JURONG WEST STREET 42 #03-237
Address Complement	-
Post Code	640550
Approximate Age Years Old	71
Injuries Sustained	FELT PAIN ON THE BACK AND NECK AREAR. 7DAYS MC SHA2405C
Injured person in which vehicle?	
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-


Describe Circumstances of the Accident

ON 27/10/2022 AT ABOUT 2150HRS I WAS DRIVING VEHICLE A (SHA2405C) ALONG SENTOSA GATEWAY. AT THE U TURN JUNCTION WHILE THE TRAFFIC LIGHT WAS GREEN I PROCEED TO MAKE AN U TURN, SUDDENLY VEHICLE B (SNG2639S) WAS BELIEVE TO BEAT THE RED LIGHT AND COLLIDED ONTO VEHICLE A. NOBODY WAS INJURED DURING THE ACCIDENT.

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time



Driver's Signature (If driver is not the policyholder) / Date
& Time 27/10/2022 2255HRS

**FLASH ACCIDENT
REPORTING OFFICER**
FRO NAZREEN



Witnessed by Reporting Centre
Personnel



SINGAPORE POLICE FORCE



T/20221028/2071

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 4

Report No. T/20221028/2071

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/10/2022 18:03		Vide Report No.: D/20221027/0108		Station Diary No.: 147	
Informant's Particulars					
Name of Informant: MOHAMED BASRI BIN NAWI			Address: APT BLK 550 JURONG WEST STREET 42 #03-237 SINGAPORE 640550		
ID Type / ID No.: NRIC NO / S0238469H			Contact No.: Home/Office: Mobile: 97350642		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 71	Date of Birth: 24/07/1951	Type of Informant: Driver		
Race: Boyanese			Language:		Institution / School Name:
Occupation: TAXI DRIVER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/10/2022 21:50	Type of Location: Y-Junction
Location: SENTOSA GATEWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA2405C	Car	HYUNDAI	AE IONIQ HEV 1.6 DCT	Blue	Seriously Damaged	0
SNG2639S	Car	HYUNDAI	CN7 AVANTE 1.6 DOHC CVT S	Black	Slightly Damaged	2



Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20221028/2071

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMED BASRI BIN NAWI	ID No.	S0238469H
Related Vehicle	SHA2405C (Car)	Contact No.	97350642
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	28/10/2022	Date Discharge	28/10/2022
No. of Days granted Medical Leave	07	Degree of Injury	Slight
Driver			
Name	CHUA XIANPENG	ID No.	S9237930B
Related Vehicle	SNG2639S (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 27/10/2022 at about 2150hrs, I am driving vehicle (V1, VRN: SHA2405C) travelling along Sentosa Gateway towards Sentosa Direction. Subsequently, I formed up at the traffic light wanting to turn-right (U-Turn) to Sentosa Gateway towards City Direction to Vivocity Dropoff point. At that point of time, the traffic light was red thus, my vehicle was in stationary position.

Shortly after, the traffic light turns green and I accelerated forward and suddenly, there was a great impact on the rear left of my vehicle and the airbag was being deployed. I was feeling slightly dizzy and shocked and I went down to take a look and noticed that there was another vehicle (V2, VRN: SNG2639S) collided into the rear left of my vehicle when I was turning right.

There was no ambulance at scene, but traffic police came to scene and had taken my SD card (Ref: D/20221027/0108).

On 28/10/2022 at about 1242hrs, I felt pain on my back and neck area, and I had went to Ng Teng Fong General Hospital A&E for checks and was granted 07 Days of MC from 28/10/2022 to 03/11/2022 date inclusive (MC: 1320661870). Doctor informed that they will be sending me for further checks.

I wish to state that I did not sustain any visible injuries except for bruises on right elbow, I have the in-vehicle camera recording of the incident. My vehicle sustained damaged left rear area and airbag deployed.

Date/Time: 31.10.2022 14:37

Page : 1

am: ARC Repair TP(CLSO)1

JOB CARD Sales Order: 5132157

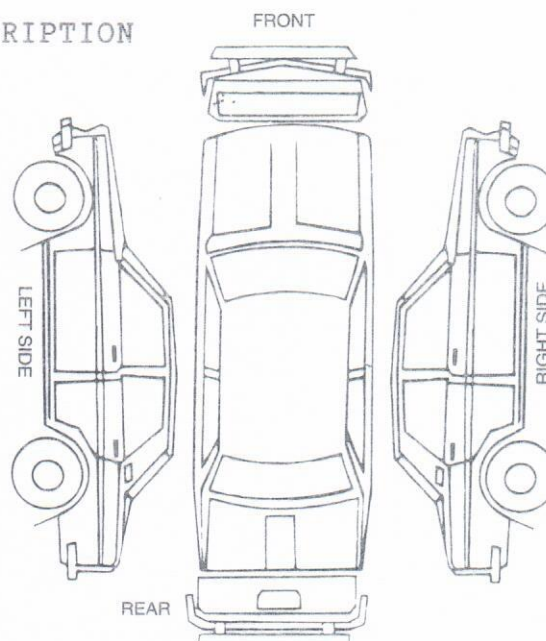
JC No: 305535015

TOMER AS COMFORT TRANSPORTATION PTE LTD TOMER NO. 7010045 RESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (O) (P)		REGN NO. SHA2405C	MILEAGE
		MAKE HYUNDAI	FUEL E.....1/2.....F
		MODEL IONIQ(G2)	DATE/TIME IN 27.10.2022 21:50
		YR OF MANU 14.05.2019	TARGET DATE
OUNT CARD NO.		CHASSIS CODE KMHC851CVKU146086	COMPLETION DATE/TIME:

ccident Date: 27.10.2022
ATURE: 3P.27.10.22

JOB DESCRIPTION

/NO LABOR CODE DESCRIPTION



WORKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

No.: SHA2405C

JU TOKIO

Vehicle No.:

SHA2405C

f Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: <u>27.10.22</u> Time Received: <u>2305</u>		3. Vehicle Type: <input type="checkbox"/> Private <input type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up
2. <input type="checkbox"/> New <input checked="" type="checkbox"/> SPARK Kakis Name of Customer : Contact No. : <u>97350642</u> Vehicle No. : <u>SHA 2405 C</u> Make / Model / Colour : Email : <u>lonik</u>		5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	6. Parts Replaced/Remarks:

7. Location: <u>Set-Sa</u>	8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others:	

10. Odometer Reading : Fuel Level : <u>F</u> <u>1/4</u> <u>1/2</u> <u>3/4</u> <u>E</u>	11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested	 # : Cracked X : Dented / : Scatched O : Missing Signature of Customer
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Job Attended

12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input checked="" type="checkbox"/> QA <input type="checkbox"/> GAO <input type="checkbox"/> OTHERS
Name of Driver : <u>Lim Kah Ang</u>
Vehicle No. : <u>4P123</u>
Time Dispatch : <u>2305</u>
Time of Arrival : <u>2345</u>
Time Completed :

Cash Invoice Details (if applicable)

13. Cash Invoice No. :

Customer Acknowledgement

a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.

b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.

c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

<u>27/10/22</u> Date	<u>2345</u> Time	 Signature of Customer
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14. WORKSHOP

Name of Attending Staff/Guard	Date & Time of Arrival	Signature of Attending Staff/Guard
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