

DATE:

Smg

REF:

ASS. REC. BY:

est

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s Comfort
 of _____
 Insured: CTI
 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
	<i>HA</i>

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Secn: _____ Consistent? : Yes or No
 Est. Repairs: 3 days Res: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: Sha 2746T Yr Regn: 36 APR 2019
 Type: M.Car / M.Cycle / Bus / Van / Lorry / ⓪ Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: hyundai AE 10m c.c. 1580
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 619925 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: Kmhc 851CVK0146153
 Gen. Cond: ⓪ Good / Fair / Poor / Burnt
 Steering: ⓪ In order / Jammed / Leaked / Burnt or
 Brake: ⓪ In order / Jammed / Leaked / Burnt or
 Mod: ⓪ Nil / S/Rim / STD / Rim; or
 Tyre Size: F: 195 / 65 R15
 R: 195 / 65 R15
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or WestLak
 Front Rear
 R/Bal. 6 mm R/Bal. 5 mm
 L/Bal. 6 mm L/Bal. 5 mm
 D.O.A. 22/11/22 D.O.I. 24/20/22 3pm
 Survey held at Comfort
 Des. of Damages: Frit / ⓪ 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) _____
 Report Format : _____
 Lump Sum / I.B.I: (\$ _____)

Days Of Repair: _____
 Resurvey No. of Trip: _____
 Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Weekend (\$ _____)
 Survey Fee: _____
 Transportation: _____
 \$ + RS. _____
 Photos _____
 Others _____
 TOTAL _____

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	821R
Vehicle Details	
Vehicle No.:	SHA2746T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	29 Nov 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	AE IONIQ HEV 1.6 DCT
Primary Colour:	Blue
Manufacturing Year:	2019
Engine No.:	G4LEKU210481
Chassis No.:	KMHC851CVKU146153
Maximum Power Output:	103.6 kW (138 bhp)
Open Market Value:	\$24,872.00
Original Registration Date:	30 Apr 2019
First Registration Date:	30 Apr 2019
Transfer Count:	0
Actual ARF Paid:	\$11,821.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Apr 2027
PARF Rebate Amount:	\$8,865.00
Intended COE Rebate Details	
COE Expiry Date:	29 Apr 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$20,940.00
COE Rebate Amount:	\$11,560.00
Total Rebate Amount:	\$20,425.00
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 29 Nov 2022

OK

A member of COMFORTDELGRO

Date/Time: 22.11.2022 08:19 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order: 5285431

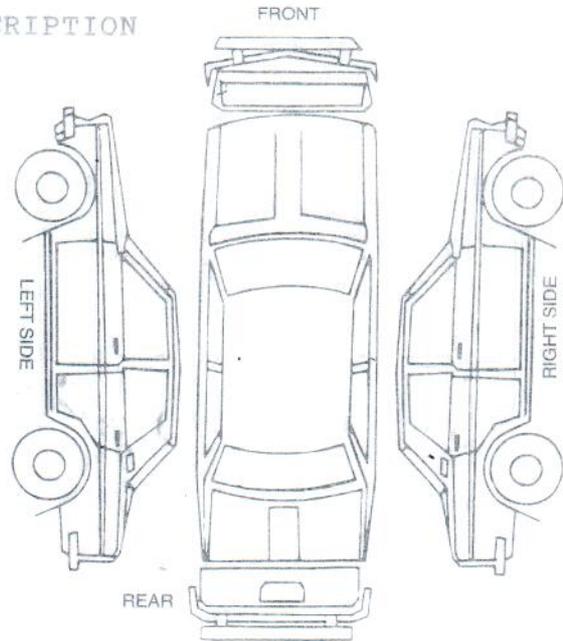
JC NO: 305537554

CUSTOMER /MS COMFORT TRANSPORTATION PTE LTD CUSTOMER NO. 7010045 ADDRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (O) (P) COUNT CARD NO.	REGN NO: SHA2746T	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL: IONIQ(G2)	DATE/TIME IN 23.11.2022 16:40
	YR OF MANU. 30.04.2019	TARGET DATE
	CHASSIS CODE: KMHC851CVKU146153	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 22.11.2022
NATURE: 3P 22.11.2022

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHA2746T YY

Vehicle No.: SHA2746T

Signature/Date of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard