

REF:

NS/INC 23601522/Twp3

ASSIGNMENT

Form: _____ Date: _____

Estimated cost: _____

OD / TP / VS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: _____

at Workshop this _____

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 Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

days

Res.: Yes or No

Turn Sum: _____

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____

Person Contacted: _____

Veh No: SND4723EYr Regn: 2019 Aug

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

Truck / Trailer or _____

Make: HyundaiC.C. 1580Colour: Blue

A/C: Insured / Std / NI / NA

Sp. Reading: 569496

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMH C857 CVKM L64428

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 orTyre Size: F: 195/65R15R: 2

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

TOYO / YOKO, or Wan Hake

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.A. _____

D.O.I. 6/2/23Survey held at Compass AgencyDes. 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

Date/Time, File Pass 40?

☐

: Preli. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Report Format: _____

Lump Sum / L.B.R. / T

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐

: Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Insp (\$ _____)

: Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. SI. _____

Photos _____

Others _____

COMFORTDELGRO ENGINEERING PTE LTD

SAS-KW

Effective Date: 1 Nov 2020

REPAIR ESTIMATE

LKK-

DATE: 06.02.2023INSURANCE: INCOME (L/S)MODEL: Hyundai IoniqMVA: LIM T SVEHICLE NO.: SHD4723E

PART NO.	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
	Rear Bumper	1		\$ 459.40
	Rear Bumper Reinforcement	1		\$ 394.80
	Rear Bumper Reinforcement Brkt RH / LH	2	\$ 55.80	\$ 111.60
	Rear Bumper Centre Moulding	1		\$ 451.25
	Rear Bumper Cover Clips	10	\$ 2.20	\$ 22.00
	Rear Bumper Tow Cover	1		\$ 98.80
	Rear Bumper FogLamp	1		\$ 201.50
	Rear Smart Key Antenna	1		\$ 40.50
	SUB TOTAL			\$ 1,779.85
	LESS 20%			\$ 355.97
	DISCOUNTED TOTAL			\$ 1,423.88
	Reverse Sensor	1		\$ 180.00
	Rear No.Plake With Trim Cover (YELLOW)	1		\$ 55.00
	SUB S/NETT			\$ 235.00
	LESS 10%			\$ 23.50
	S/NETT TOTAL			\$ 211.50
	Rear Bumper Mat	1		\$ 50.00
	SPARE PARTS TOTAL			\$ 1,685.38
	Labour Charge			
	Panel Beating			\$ 400.00
	Spray Painting Charge			\$ 300.00
	Remove/Refix Reverse Sensor			\$ 120.00
	TOTAL LABOUR			\$ 820.00
	ESTIMATE TOTAL			\$ 2,505.38

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.

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 tie in indication(s) is allowed
- Supplier entry item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Tanjin 97495749
 WP 6/2/23 3:15 pm
 L/S Resurvey after repair
 Tanjin C/Handwritten
 2 days

Date/Time: 06.02.2023 13:37

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 5812108

JC NO 305544762

CUSTOMER
MS
TOMER NO
RESS
(R)
(P)

COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (O)

REGN NO: SHD4723E	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ(G2)	DATE/TIME IN 06.02.2023 10:35
YR OF MANU. 06.08.2019	TARGET DATE
CHASSIS CODE KMHC851CVKU164428	COMPLETION DATE/TIME:

COUNT CARD NO.

dent Date: 04.02.2023

RE: 3P 04.02.2023

LKK-

LABOR CODE

10

PB

JOB DESCRIPTION

LS

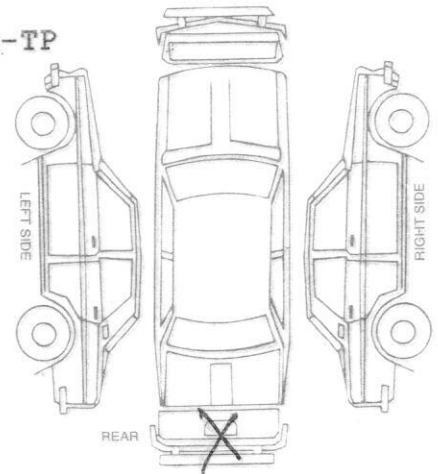
Income

SJY
5127K

FRONT

DESCRIPTION

PANEL BEATING-SHD4723E-TP



CKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

/ledgement Slip

Exit Pass

No.: SHD4723E

LIMITS

Vehicle No.:

SHD4723E

if Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard.