

ASS. REC. BY: Smg

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD/TP/WS/TPRES/ODRES/EVA/INV/MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: TMI
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Vch: _____

Vch No: SHL 80834 Yr Reg: 29/04/2021
 Type: MCar / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Hyundai i10 cc 1,520
 Colour: Blue AG: Insured / Std / NA
 Sp. Reading: Unable to Start T/Radio: Insured / Std / NA
 Eng No: _____
 C/Nr: Kmh C851CVL V19 3023
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Mod: NO / SRM / STD / Rm, or

(Policy Condition)
 Remark: The vch had commenced its repair at the time of inspection.

NS	OS
444444	

Est. or Market Value: \$
 IDAC Accident Report: _____ Consistent? Yes or No
 GIA / PR Sec: _____ Consistent? Yes or No
 Est. Repair: 3 days Res: Yes or No
 Lump Sum: 70 % 3 Val: Yes or No

Tyre Size: F: 175/65 R15
 R: _____
 BS/DUN/EXNOVA/GY/FS/LZA/MC/OHTSU/PR/SUMI/
 TOYO/YOKO or Wata lane
 Front: _____ mm R/Bal: 5 mm
 L/Bal: 5 mm
 D.O.A. 30/3/23 D.O.L. 31/3/23 4.30p
 Survey held at Comfort
 Des. of Damages: Frt / Rear / OS / NS / UC / Roof or

CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN/OUT

The UC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Balance: _____
	yearly: _____
	my: _____
	Nov: _____
19/05/2023	Finalise L/S \$2,250.00 @ 3 days (Red \$1,424.84/39%)

Date/Time, File Pass to? 19/05/2023
 1) Typist ☒ : Final Report
 Date/Time, File Return to? _____

Days Of Repair: 3
 Resurvey No. of Trip: _____

Report Format: TP
 Lump Sum / LBJ: (\$ L/S \$2,250.00)

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

Survey Fee: _____
 Transportation: 3 + RR
 Phone: _____
 Others: _____
 TOTAL: _____

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 5891454

JC NO: 305550206

CUSTOMER

IRMS COMFORT TRANSPORTATION PTE LTD
CUSTOMER NO 7010045
ADDRESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
TEL (R) 65508755 (O)
(P)

REGN NO: SHC8083Y	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL: IONIQ(G3)	DATE/TIME IN: 30.03.2023 10:40
YR OF MANU: 29.04.2021	TARGET DATE
CHASSIS CODE: KMHC851CVLU193023	COMPLETION DATE/TIME:

ISCOUNT CARD NO.

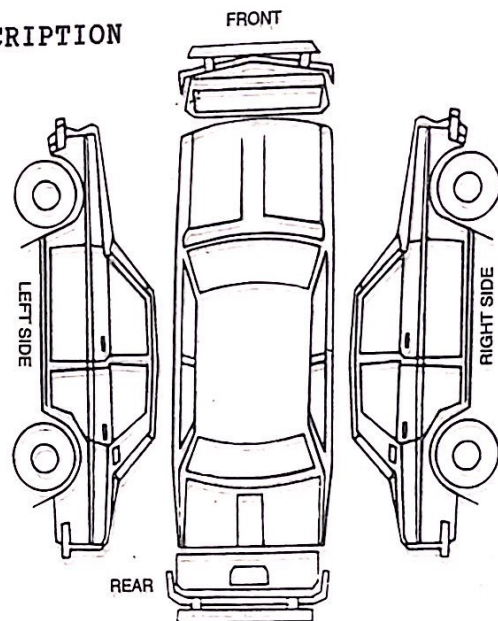
JOB DESCRIPTION

Accident Date: 30.03.2023
NATURE: 3P 30.03.2023

S/NO

LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Knowledge Slip

ie:
No.: SHC8083Y YY
cle No.:

Exit Pass

Vehicle No.: SHC8083Y

ie of Service Advisor

Signature/Date

Name of Service Advisor

Date

e returned to Service Reception upon collection

To be kept by Security Guard

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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER: **Tokio Marine Insurance Singapore Ltd (HQ)**
CTPL

Singapore

Loka Wei Yang
60011244 8407

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	30/03/2023
Vehicle Reg. No.:	SHC8083Y	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	29/04/2021
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	G4LEKU422025	Chassis No:	KMHC851CVLU193023
Odometer:	264949 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	5		
Remarks:	TEL: 62148355		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	2,233.84
Miscellaneous Items	311.00
Labour	1,130.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$)	3,674.84
+ GST 8.00% (\$)	293.99
Nett Amount (\$)	3,968.83

This claim is handled by: MS. LOKE YY

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