

ASS. REC. BY: Taufik

REF:

INC NS/INC23004120/Tnp3

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.

N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 1 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: chuan Vehicle: IN / OUT

Veh No: SAC 3372X Yr Regn: 2461 April
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Cylinder 140 c.c. 1685
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 1258/10 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMHLB414MG4087798
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: NP / S/Rim / STD A/Rim or
 Tyre Size: F: 205/60R16
 R: 205/60R16
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Westlake
 Front 6 mm R/Bal. 6 mm
 L/Bal. 6 mm D.O.I. 20/4/23
 Survey held at Comfort Lodge
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
N/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Taufikh confirmed lump sum \$600 and 1 day
 (red, \$1752.24, 74%)

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

1) _____
 Date/Time, File Return to?

2) _____

Rep. Format: _____

Lump Sum / L&J: ()

Days Of Repair: 1

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

\$ + RS. SI

Photos

Others

TOTAL

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO SHC3371X

SHC 3372X

19.04.2023

MAKE

REG 21.04.2016

MODEL

I-40

CHIANG/

INCOME

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	LH/SIDE WING MIRROR			\$670.00
1	ROCKER GRANISH LH		old damage	X \$732.80
	SUB TOTAL			\$1,402.80
	20.00%			\$280.56
				\$1,122.24
1	REAR DOOR COMFORT APP STICKER			X \$80.00
				\$80.00
	Labour Charge			
	Panel Beating		140	\$450.00
	Spray Painting Charge		100	\$700.00
	TOTAL LABOUR			\$1,150.00
	ESTIMATE TOTAL			\$2,352.24
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.				

Taufan 97445749
 WP 20/4/23 @ 4pm
 1/1 Resurvey after repair
 Taufan 21/4/23 on
 01 day

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) allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
 Signature:
 Date:

Date/Time: 20.04.2023 08:13

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Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order: 5893706

JC NO305551728

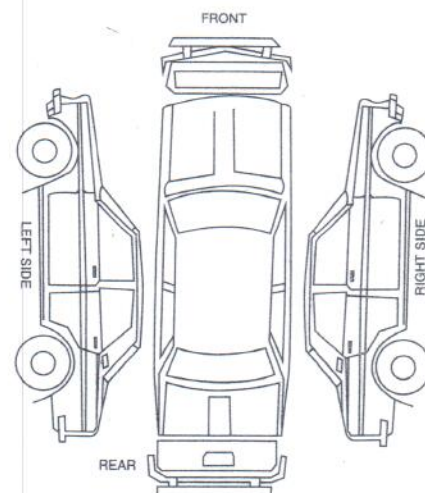
CUSTOMER COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (R) (O) (P)		REG NO. SHC3372X	MILEAGE
		MAKE HYUNDAI	FUEL E.....1/2.....F
		MODEL I-40	DATE/TIME IN 19.04.2023 16:15
		YR OF MANU. 21.04.2016	TARGET DATE
COUNT CARD NO.		CHASSIS CODE KMHLB41UMGU087798	COMPLETION DATE/TIME:

Accident Date: 19.04.2023

NATURE: 3P 19.04.2023

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

acknowledgement Slip

Exit Pass

No.: SHC3372X

CHIANG

Vehicle No.:

SHC3372X

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard