

ASS. REC. BY: TaufikREF: INCASSIGNMENT

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: 3 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Ching Vehicle: IN / OUTVeh No: SH194525B Yr Regn: 2017 Jy

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

Truck / Trailer or

Make: Toyota Prius C.C. 1798Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 207082 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: STDKR3F470356/227

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or Westlake

Front: _____ Rear: _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. _____ D.O.I. 9/6/23Survey held at Garage Logon

Des. 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
	Taufik finalised LS \$1900, 3 days. (Red \$2389.25, 56%)

Date/Time, File Pass to?

☐ : Prel. Report

1) 19/06 Typist

☐ : Final Report

Date/Time, File Return to?

2)

Rep. Format: TPLump Sum / L.S. / ? 1900Days Of Repair: 3Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS \$1

Photos

Others

TOTAL

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO SHA4525B

07.06.2023

MAKE Reg.05.07.2019

CHIANG/ INCOME

MODEL TOYOTA PRIUS G4

Qty	Parts Description/ Labour	Unit Price	Amount
1	REAR FENDER RH		\$992.04 Ry
1	REAR DOOR PANEL RH		\$1,258.30 bb
1	ROCKER SIDE PANEL GRANISH RH		\$576.00 Ry
	SUB TOTAL		\$2,826.34
	25.00%		\$706.59
	DISCOUNTED TOTAL		\$2,119.76
1	FRONT DOOR COMFORT LOGO STICKER		\$75.00 X
1	REAR DOOR COMFORT APP STICKER		na \$80.00
1	REAR FENDER ADVERTISEMENT		mb \$100.00
1	FRONT DOOR ADVERTISEMENT		X \$100.00
1	REAR DOOR ADVERTISEMENT		mb \$100.00
			\$439.50
	Labour Charge		
	Panel Beating	525	\$750.00
	Spray Painting Charge	600	\$800.00
	Remove/Refix Door Parts	60	\$90.00
	Remove/Refix Rear Upholstery	X	\$90.00
	TOTAL LABOUR		\$1,730.00
	ESTIMATE TOTAL		\$4,289.25
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.			

Taufik 9745745
 WPI 9/6/23 C 330pm
 L/S Resurvey after repair
 Taufik C/Wharfedale.com
 3 days

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:

am: ARC Repair TP(CLSO)1

JOB CARD Sales Order: 5899623

JC NO305557148

TOMER

VS COMFORT TRANSPORTATION PTE LTD

TOMER NO. 7010045

RESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

OUNT CARD NO.

REGN NO.:

SHA4525B

MILEAGE

MAKE:

TOYOTA

FUEL

E.....1/2.....F

MODEL

PRIUS HYBRID(G4)08.06.2023 15:10

DATE/TIME IN

YR OF MANU.

05.07.2017

TARGET DATE

CHASSIS CODE

JTDB3FU703561227

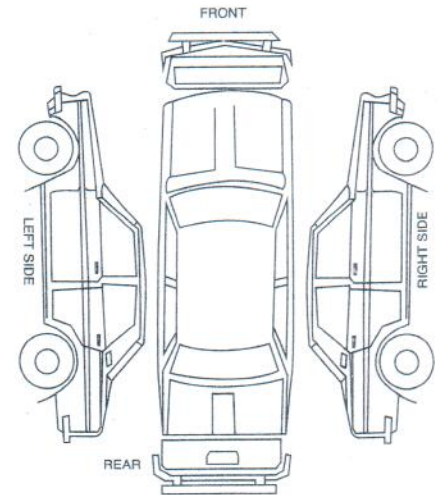
COMPLETION DATE/TIME:

JOB DESCRIPTION

ccident Date: 07.06.2023

ATURE: 3P 07.06.2023

/NO LABOR CODE DESCRIPTION



ECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nowledgement Slip

Exit Pass

:
Vehicle No.: SHA4525B CHIANG

Vehicle No.: SHA4525B

of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard