

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: 3 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: 27A5H236

Veh No: _____

Yr Regn: _____

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

Truck / Trailer or (A)

Make: _____

Colour: _____

Sp. Reading: _____

Eng/No: _____

C/No: _____

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: _____

R: _____

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

TOYO / YOKO or

Front

R/Bal. _____

L/Bal. _____

D.O.A. _____

Survey held at _____

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
11/7/23	Insured Sumon: 1/5 & 3050 (Red, \$1368.08, 30%)

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: _____

Add Fee:

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

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$)

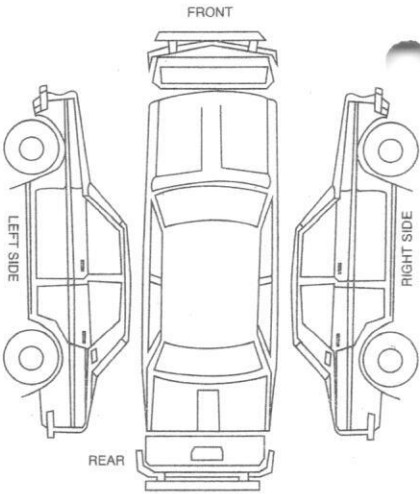
am: ARC Repair TP(CLS0)1 JOB CARD Sales Order: 5902845 JC NO305559657

OMER	REGN NO: SHA1073H	MILEAGE
S COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
OMER NO. 7010045	MODEL IONIQ(G2)	E.....1/2.....F
ESS 383 SIN MING DRIVE	DATE/TIME IN	05.07.2023 11:15
Singapore SINGAPORE 575717	YR OF MANU. 26.06.2019	TARGET DATE
(R) 65508755 (O)	CHASSIS CODE KMHC851CVKU164283	COMPLETION DATE/TIME:
(P)		
UNT CARD NO.		

JOB DESCRIPTION

Accident Date: 04.07.2023
ATURE: 3P.04.07.23

NO LABOR CODE DESCRIPTION



VED & PASSED OUT BY: _____

SERVICE ADVISOR CUSTOMER'S SIGNATURE

gement Slip

Exit Pass

o.: SHA1073H JU TOKIO

Vehicle No.: SHA1073H

Service Advisor Signature/Date Name of Service Advisor Date

urned 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:
CTPL

Tokio Marine Insurance Singapore Ltd (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	04/07/2023
Vehicle Reg. No.:	SHA1073H	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	26/06/2019
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	G4LEKU297716	Chassis No:	KMHC851CVKU164283
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	83		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

Not Authorized
6/7/23 @ 11.10am
H29009660P
mercusdmc@lkhauts.com
2/5 @ 3050
3 days 2 hrs 45 mins

COST OF CLAIMS	Amount
Parts	2,437.08
Miscellaneous Items	11.00
Labour	1,970.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	4,418.08
+ GST 8.00% (S\$)	353.45
Nett Amount (S\$)	4,771.53

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

Lkh Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts, before 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:

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 05 Jul 2023)**Parts:** 192 HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHA1073H/05/07/2023 15:08**Validity:** These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk *.**Estimates on Parts**

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRT FENDER RH <i>body</i>	20.00	0.00	*588.80 FL ✓
2	1		*FRT FENDER EMBLEM RH <i>RM</i>	20.00	0.00	*26.60 FL ✓
3	1		*FRT DOOR ASSY RH <i>body</i>	20.00	0.00	*1,797.20 FL ✓
4	1		*ROCKER PANEL GARNISH RH <i>de/b.n</i>	20.00	0.00	*290.00 FL ✓
5	1		*FRT DOOR COMFORT LOGO <i>RM</i>	0.00	0.00	*75.00 F ✓
6	1		*ADVERTISEMENT LOGO - FENDER <i>RM</i>	0.00	0.00	*100.00 F ✓
7	1		*ADVERTISEMENT LOGO - DOOR <i>RM</i>	0.00	0.00	*100.00 F ✓

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)

2,977.60

- List Item Discount on L Items (S\$)

540.52

Total Parts (S\$)

2,437.08

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Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New	1,000.00
2	SPRAYPAINT	New	800.00
3	TUFF KOTE	New	50.00
4	TRANSFER DOOR PARTS	New	120.00
Gross Labour Cost (S\$)			1,970.00

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< END OF ESTIMATES >

P-2702.6
202
2162.08
275
1380
3817.08
202
3052

Date 08.07.23

Fax:

Vehicle Reg No. **SHA1073H**

Date of Accident : 04.07.23

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

- | | | | | |
|------|---|---|---------------|-------------------|
| 1. | The repair job shall bill to : | <u>TOKIO</u> | <u>---</u> | <u>SLK2102B</u> |
| 2. | The finalized amount shall be: | | | |
| (a) | Spare Parts after List discount | | | |
| (b) | Labour Charges | | | |
| | Total for Part-By-Part Repair Cost | | | |
| (c.) | Lumpsum Repair (if applicable) | | | |
| | Total for Lumpsum repair cost after Less: | <u>20%</u> | | <u>\$3,050.00</u> |
| | Final Lumpsum Repair cost | | | |
| 3. | Estimated normal period for repairs: | <u>3</u> | working days. | |
| 4. | We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days | | | |
| 5. | Thank you for your assistance. | We confirm the estimates and finalized amount | | |

Fax : 65468156

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid	----	NO		
3. Survey Fees	----	---		
LTA Search Fee	26.75/2.00	YES		
5. Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

Remarks: