ASS. REC. BY:	
Kenneth	EIGNMENT
From: Date:	
Estimated Cost:	Veh No: SMY 6064RYr Regn: 031 21 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD TP WS ITP RES I OD RES I EVA I INV I MY	Truck / Trailes as
To Inspect Vehicle No:	(A) . Ake
at Workshop m/s Can Del.	Make: Tuy Nach c.c 1797 Colour M. Black A/C: Insured/Std/NI/NA
of	
Insured:	Sp.Reading 287634 T/Radio: Insured / Std / NI / NA Eng/No:
Policy No.	CNO: ZWR80 . 0439098
Claims No.	Gen. Cond: 2000 / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
1	Modi: NII / S/Rim / STO A/Rim or
(Policy Condition)	Tyre Size: F:
Remark: The yeh had commoned to	R: 195/65R15
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM! /
Bal. or Market Value: \$155k	TOYO/YOKO or Westlake
IDAC Accident Rport: Consistent? : Yes or No	Front Rear
GIA / PR Seen: Consistent?: Yes or No	R/Bal. X mm 'R/Bal. 9 mm
Est. Repairs: 07 days Res.: Yes or No	L/Bal. 7 mm L/Bal. 9 mm
i. Lum Sum: 1-B./ % 3 Val.: Yes or No	D.O.A. 10/7/24 D.O.I. 16/7/202
Tes or no	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt Rear 1 O/S N/S U/C Rooftop or
Date:Person Contacted: Vehicle: IN / OUT	& 147
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
	The second secon
to/Time, File Pass to?	the second secon
: Prell. Report Day	ys Of Repair:
: Final Report Res	survey No. of Trip: Survey Fee:
2/Time, File Return to?	Transportation
Add Fee:	-
, , , , , , , , , , , , , , , , , , , ,	and the second of the second s
	: Interview (\$), Finds
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Sum / I.B.I: (S	The second of th
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2)

Re



ComfortDelGro Engineering

205 Braddell Road S(579701)

Our Ref:

ACCIDENT REPAIR ESTIMATES

Type of Claim :	TP(CT)	Vehicle No.	: SMY6064R
		Make & Model	: TOYOTA NOAH
		Year of Manufacture	2020
		Chassis No.	: ZWR800439098
Ins Company :	III	Engine No.	: 2ZR0F41904
Excess :		Policy No.	:
Date of Accident :10	0/7/2024	Time of Accident	:
Suggested Days of Repair :		In-house Vehicle Asse	essor
Repair Estimates		Case Owner	: KELVIN
Parts (a) Cost / List Price Items	\$ 19,239.00	Signature	*
Plus/Less25%_	\$ 4,809.75		
Total of Cost / List	\$ 14,429.25	Operation KELVIN SU	
(b) Nett Price Items		TEL: 9786 4236	
Less	** * * · · · · · · · · · · · · · · · ·	E: kelvinsukwen	l@cage.com.sg
Total of Nett Item		TEL: 9728 8916 E: oisunpin@cd	
(c) Special Nett Items	\$ 796.00	<u> </u>	
Total Parts Cost (Appendix A)	\$ 15,225.25		
Labour (Appendix B)	\$ 2,730.00		Not Nothoire Phenny B& pains
Fotal Repair Cost	\$ 17,955.25		
The above total will be subjected to	9% G.S.T.	- g ()	
Name of Surveyor		Kenn	~ /h
-	:	Kenne UKK	
Company		1/2/2/2	
Survey conducted on	:	17/24 at	
Remarks By Surveyor			
(a) The repair of this vehicle is au			otice.
(b) Recommended Days of Repai	ir : <i>C</i>	77 day(s)	
(c) Resurvey	: Required / No	Required	
d) Excess	:\$	— ^	
e) Signature of surveyor	:		Pate:

Spark Car Care

ComfortDelGro Engineering Pte Ltd

205 Braddell Road S (579701) Tel: 63837168 / 63837466 Fax:62815767

Spare Parts

Vehicle No : SMY6064R Case Owner : KELVIN

Make & Model : TOYOTA NOAH Year Manufacture : 2020

Chassis No : ZWR800439098 Engine No : 2ZR0F41904

Sales Order : Supplier :

Order By : KELVIN Type of Claim : TP(CT)

Coperty Service			Telta		
S/No DESCRIPTION	QTY	Cost	List		Disposition By
1 REAR TAILGATE		Price	Price	S/N	Surveyor
2 REAR TAILGATE WEATHERSTRIP	1	R ₁ Dis IIu	\$ 2,705.00	A GAD CO	
3 REAR TAILAGTE LOCK	1	DISTPA	\$ 505.00 \$ 635.00	PARTITION OF	7
4 REAR TAILGATE HINGE-RH	1	n	\$ 176.00		
5 REAR TAILGATE HINGE-LH	1	n	\$ 176.00	\$ 40 Oc	X
6 TAILGATE EMBLEM"HYBRID"	1	M	\$ 65.00	S. Table	-
7 TAILGATE OUTER GARNISH	1	cm	\$ 1,155.00	B 60 8	-
8 TAILGATE CLOSE HANDLE	1	nu	\$ 25.00	5 25	
9 TAILAGTE NO.PLATE LAMP	2		\$ 176.00		7
10 TAILGATE INNER TRIM BOARD	1	Bu	\$ 635.00		<u></u>
11 TRIM BOARD CLIPS	10		na	\$ 30.00	0 /
12 REAR BUMPER	1	R	\$ 810.00	E	
13 REAR BUMPER CLIPS	10		na	\$ 30.0	0
14 RHR BUMPER RETAINER	1	Dil	\$ 120.00		-
15 LHR BUMPER RETAINER	1	Diy	\$ 120.00		
16 REAR BUMPER TOW COVER	1	Pu	\$ 40.00		×
17 REAR BUMPER REFLECTOR -RH	1	Sa	\$ 65.00		
8 REAR BUMPER REFLECTOR -LH	1	In	\$ 65.00	and a second	X
9 RHR CORNER PANEL	1	N	\$ 235.00		X
RHR CORNER PANEL BRACKET	1		\$ 150.00		7
LHR CORNER PANEL	1	cm			1
LHR CORNER PANEL BRACKET	1		\$ 150.00		7
RHR TAILLAMP	1	<i>In</i>	\$ 2,038.00		1
LHR TAILLAMP	1	Da/mg cm			
REAR END PANEL	1	BT	\$ 1,100.00		1
END PANEL TRIM BOARD	1	Nel	.,		
SPARE TYRE COMPARTMENT	1	n	\$ 550.00		7
LUGGAGE BOARD DECK	1	cm			
RHR FENER INNER TRIM BOARD	1	Bu			
HR FENDER INNER TRIM BOARD	1	Bn			
If any of the gusted nexts are		.,,,,	V 135.0	<u> </u>	

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

Spark Car Care

ComfortDelGro Engineering Pte Ltd 205 Braddell Road S (579701)

Tel: 63837168 / 63837466 Fax:62815767

Spare Parts

Vehicle No : SMY6064R Case Owner: KELVIN

Make & Model : TOYOTA NOAH Year Manufacture : 2020

Chassis No : ZWR800439098 Engine No: 2ZR0F41904

Sales Order : <u>0</u> Supplier:

Order By : KELVIN Type of Claim · TP(CT)

S/N	Tare Description	QTY	Cost Price	List Price		S/N	Disposition By Surveyor
	REVERSE SENSOR	1		NU	\$	280.00	2001n
	REAR WINDSCREEN	. 1	Shotter	\$ 1,850.00	•		
33	REAR W/S MOULDING	2	Mer	\$ 120.00			<u></u>
	SEALANT	1		New	\$	40.00	
	REAR NO.PLATE	1		su	\$	40.00	Х
36	PHV DECAL	1		M	\$	50.00	20sn
	SOLAR FILM	1		Ne	\$	300.00	
38 I	NNER SEAL	1		Na	\$	26.00	
39		1.17.1000-00-0		1,50	Ψ	20.00	
40			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
41		er i nan mass i i i	1901 T. H. F. S.				`
12	Mr. Mayor and Company	- CF CN	KK Auto Consultar	te hence notify	_		-
3			the Repairer of the		┝		
4			To resurvey before/afte	r spray painting	_		-
			To display damaged pa		_		
5	And the second s	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Parts prices are subject third party survey is o		<u>_</u>	naia	
<u> </u>	and the second of the second o		No illegal modification			90.0	
4			Supplementary item(s	must be resurveyed	an	4	
	the company of the second seco		is subject to final appr	oval from Insurance	Con	pany	
	* Parama II a managara		Acknowledged by Repa	rer	T		_
			Signature:		╁	-	_
			Date:		\perp		
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Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

Spark Car Care

ComfortDelGro Engineering Pte Ltd

205 Braddell Road S (579701) Tel: 63837168 / 63837466 Fax: 62815767

La	b	0	u	r

Vehicle No. :	SMY6064R	Case Owner		
Make & Model:	TOYOTA NOAH		: _	KELVIN
		Year of Manufacture	:	2020

S/N	Labour Description	E	simated	Adjusted
1	TO KNOCK & STRAIGHTEN ON ACCIDENT AREA, TO REMOVE &	+	Price	Price
	REFIT DAMAGE PARTS	\$	1,250.00	dool
2	TO PLITTY DESCRIPTION ON DEAD SHAPE			
	TO PUTTY,RESPRAY ON REAR BUMPER,REAR TAILGATE,	\$	1,250.00	11001
Aut	REAR END PANEL, SPARE TYRE COMPRT, AFFECTED AREA			
3	TO REMOVE/REFIT REAR WIDSCREEN	\$	120.00	
-		+*	120.00	
+	O CHECK WIRING, INSTALL REAR TAILLAMP, REVERSE SENSOR	\$	60.00	50l
T	O TUFF COAT/ WATER PROOFING ON WELD AREA	\$	50.00	
1	William Television Control of the Co	+	50.00	
+	3. P. M. C			
+				
1	Santagar Carlos Car	+	-	
		+		
L. Y	P your service and the service of th			
equal No.				
	again 10. is.	+		
7				
1				
(90)				
100		+		
		+		
		+		-
		+		

Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type.	
Owner ID Type:	Company
Owner ID: Vehicle Details	775H
Vehicle Details Vehicle No.:	CANYOLAN
Vehicle to be Exported:	SMY6064R
Intended Deregistration Date:	No 11 Jul 2024
Vehicle Make:	11 Jul 2024
Venicle Make: Vehicle Model:	TOYOTA
Primary Colour:	NOAH HYBRID 7-SEATER 1.8 X CVT
Manufacturing Year:	Black
Engine No.:	2020
Chassis No.:	2ZR0F41904
Maximum Power Output:	ZWR800439098
Open Market Value:	100.0 kW (134 bhp)
	\$34,394.00
Original Registration Date:	17 Mar 2021
First Registration Date:	17 Mar 2021
Fransfer Count:	0
Actual ARF Paid:	\$25,152.00
ntended PARF Rebate Details	
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	16 Mar 2031
ARF Rebate Amount:	\$18,864.00
tended COE Rebate Details	(a)
DE Expiry Date:	16 Mar 2031
DE Category:	B - Car above 1600cc or 97kW (130bhp)
DE Period(Years):	10
Paid:	\$50,100.00
E Rebate Amount:	\$33,467.00
al Rebate Amount:	\$52,331.00

You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.

The information contained herein is correct as at 11 Jul 2024

G SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to reputation policy liability.

 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

 5. Any false reporting may be referred to the Police for investigation.

 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of First Submission Reported by

Date of Accident

Exact Location of Accident Additional Location Information

Country/State of Loss

11/07/2024 10:14 (SGT)

Actual Driver

10/07/2024 12:55 (SGT)

CTE, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMY6064R

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

COMFORTDELGRO RENT A CAR PTE LTD

1XXXXXX775H

fleetsafety@cdgtaxi.com.sg

(Phone) +65-93274421

(Office) +65-68820888

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

Toyota

Noah

HYBRID

Private hire

No - Claiming third party

Private hire

Auto

1797

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

India International Insurance Pte Ltd

D18MFL0003414 04

DRIVER

Name of Driver

NRIC No

Date Of Birth

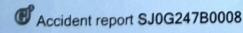
Occupation

ERWAN BIN JUMADI

SXXXX601Z

21/08/1983

Outdoor



SKETCH PLAN

IMPORTANT NOTICE

- 1. Please correctly report the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorized Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wiliful misrepresentation or withholding of material facts may 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association
- of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties. 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the
- 8. Consent under the Personal Data Protection Act (PDPA)

l understand, acknowledge, agree and consent that:

- (a) My insurer , my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims
- (ii) investigating the accident and/or my claims.
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me.
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (Collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Time

Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date & Time

100724

Witnessed by Reporting Centre

Personnel

