

22/03/2003

ASS. REC. BY:

REF: CS/AGI17023811/K1qd3n2 Special Instruction:

Surveyor: Kelvin ASSIGNMENT (Office)From (Person): Albert Hong of AGI Date/Time: 5:01pm @ 14/12/17

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SHB 3916H Insured: SLA 7267Dat Workshop m/s Comfort Delgro Tel: 62148316of 59 Hoyong Drive, 508969Policy No: \_\_\_\_\_ Claim No: C10001209

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 12/12/17  
(Client's Record)

CA / REV / REP. / REV 24 HRS

(wop)

H.O.D. Endorsement: \_\_\_\_\_

Date/Time: 9:07am @ 15/12/17 Person Contacted: Lenny Ng Vehicle: IN OUT

Date/Time	Action/Instruction (✓) Estimate	
	SHB 3916H - CS/GW12002595/T1qn	D.O.A. : 04/02/2012
	SLA 7267D - x	

REF: AGI

## ASSIGNMENT

From: \_\_\_\_\_ Date: 15/12/17

Estimated Cost: \_\_\_\_\_

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SHB3916H

at Workshop m/s Comfort Delgro

of 59 Loyang Drive, 508969

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: 2 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 'wp'

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SHB3916H

Yr Regn: 17 Mar 2017

Type: M.Car / M.Cycle / Bus / Van / Lorry / T6 / Prime Mover /

Truck / Trailer or

Make: Hyundai Ioniq 1580

Colour: Yellow A/C: Insured / Std / NI / NA

Sp. Reading: 103899 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMHC851CVH402226

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195 / 65 R15

R: \_\_\_\_\_

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

TOYO / YOKO or Nexen

Front

Rear

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 12/12/17 D.O.A. 15/12/17

Survey held at CPE (Loyang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

o/s Ra

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

18/12/17

Total P/P + 396 / 2 hrs. (Red to 560, 59%)

RECEIVED 29 DEC 2017

Date/Time. File Pass to?

☐

Preli. Report

17/12/17

☐

Final Report

Date/Time. File Return to?

2

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

\$ + RS \$

Photos

Others

Report Format: TP

Lump Sum / I.B.I. (\$) 396

TOTAL




# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
AUTO & GENERAL INSURANCE (S) PL		Ref : CS/AGI17023811/K1qd3	
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924		Date : 15-12-2017	
		Code : AGI	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SLA 7267D	Veh. Inspected	SHB 3916H
Policy No.		Coverage (\$)	0.00
Claim No.	C10001209	Excess (\$)	0.00
Assign From	ALBERT HONG	Assign Date	15/12/2017
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	12/12/2017	Inspection Date	15/12/2017
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

# Survey Department Check List (Case Handler)

Reference No.: C9/AG117073 811/K19063  
 Policy Type: OD / TP / TP RES / TL / EVA

SAB 39164

Case Handler

Typist

**Admin** ( Murphy ): Case handler to make sure all information created by the assignment team are **ACCURATE**.

## (1) Office Assign Form

- C Reference No.
- C Customer Code
- N Assign From
- C Assign Date
- C Veh No (Inspected)
- C Veh No (Insured)
- C D.O.A
- C Policy No
- C Claim No
- C Insurance Authorisation (CA /REV/REP)
- C Report Type
- C Weekend Charges
- N Survey held at/Repairer
- C Excess

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

**Surveyor** ( Kalun ): Case handler to make sure the surveyor completed all required information.

## (1) Assignment Form

- C Vehicle No
- C Regn Month/Year
- N Vehicle Type
- N Make & Model
- C Engine Capacity. (C.C)
- N Colour
- C Odometer. (Sp.Reading)
- C Chassis No
- N General Condition
- N Steering
- N Brake
- N Modification (Modi)
- C Tyre Size
- N Tyre Make
- C Tyre Balance
- C Date of Inspection
- N Survey held
- N Des.of Damages

✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

## (2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

✓			
---	--	--	--

## (3) Workshop Estimate/Assignment Form

- N ALL Parts condition
- C Market Value for OD cases
- C Estimate Repair Cost for PRI (RSI, TMI, MSIG)
- C Days of repair
- C Finalised Amount
- C Re-inspection Cases to Finalize within 5 Days

✓			
✓			

## (4) System - (Views/Merimen)

- C Resurvey photo Uploaded

✓			
---	--	--	--

Check By:

[Signature] 29/12/17  
 Case Handler Date

**Nivitha (LKK Auto)**

---

**From:** Albert Hong <albert.hong@budgetdirect.com.sg>  
**Sent:** Thursday, 14 December, 2017 5:01 PM  
**To:** 'assignments'  
**Cc:** SUR  
**Subject:** Appoint LKK to conduct TP survey; Our Ref: C10001209  
**Attachments:** SHB3916H.pdf

Hi LKK,

Please accept assignment and liaise with TP workshop.

Thank you.

Regards,

**Albert Hong**  
**Senior Executive, Claims**

**T** +65 6540 2182  
**F** +65 6725 0853  
**E** [albert.hong@budgetdirect.com.sg](mailto:albert.hong@budgetdirect.com.sg)



**Customer Care:** +65 6221 2111  
**Claims:** +65 6221 2199  
**Claims (Int.):** +65 6540 2199

190 Clemenceau Avenue  
#03-01, Singapore Shopping Centre  
Singapore 239924  
[budgetdirect.com.sg](http://budgetdirect.com.sg)

Auto & General Insurance (Singapore) Pte. Limited (co. Reg. No. 201626103G) trading as Budget Direct Insurance.

**From:** Lim Kwok Eng [mailto:[limke@cdge.com.sg](mailto:limke@cdge.com.sg)]  
**Sent:** Thursday, 14 December, 2017 1:24 PM  
**To:** Claims <[claims@budgetdirect.com.sg](mailto:claims@budgetdirect.com.sg)>  
**Cc:** Ng Nyuk Phin <[ngnp@cdge.com.sg](mailto:ngnp@cdge.com.sg)>; Roger How Keen Meng <[rogerhow@cdge.com.sg](mailto:rogerhow@cdge.com.sg)>  
**Subject:** SHB3916H with your insured SLA7267D

To Officer In Charge

Pls arrange surveyor, refer attached

On behalf of Larry Ng

Best Regards  
Lim Kwok Eng  
Taxi Crash Repairs / ComfortDelgro Engineering Pte Ltd  
Tel. 6214-8316 / 62148355 / 6214-8156

---

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

This email is sent by Auto & General (SEA) Services Pte. Limited or a related body corporate (Auto & General) and is for the intended addressee. The views expressed in this email and attachments (email) reflect the views of the stated author but may not reflect views of Auto & General. This email is confidential and subject to copyright. It may be privileged. If you are not the intended addressee, confidentiality and privilege have not been waived and any use, interference with, or disclosure of this email is unauthorised.

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
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 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 Report	13/12/2017 09:33
Date Of Accident	12/12/2017 20:15
Exact Location Of Accident	AYER RAJAH EXPRESSWAY TWDS MCE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB3916H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	IONIQ HYBRID

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? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category TAXI

### Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-15072702MFSH
Cover Note Number	

### Driver

Name of Driver	YEOH YEOW CHONG
NRIC No	S1547374F
Date Of Birth	21/04/1962
Occupation	OUTDOOR
Date Of Driving Pass	21/08/1980
Driving Experience	37 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	322 07-86 HOUGANG AVENUE 5
Postcode	530322
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	HOUGANG NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

SEE POLICE REPORT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

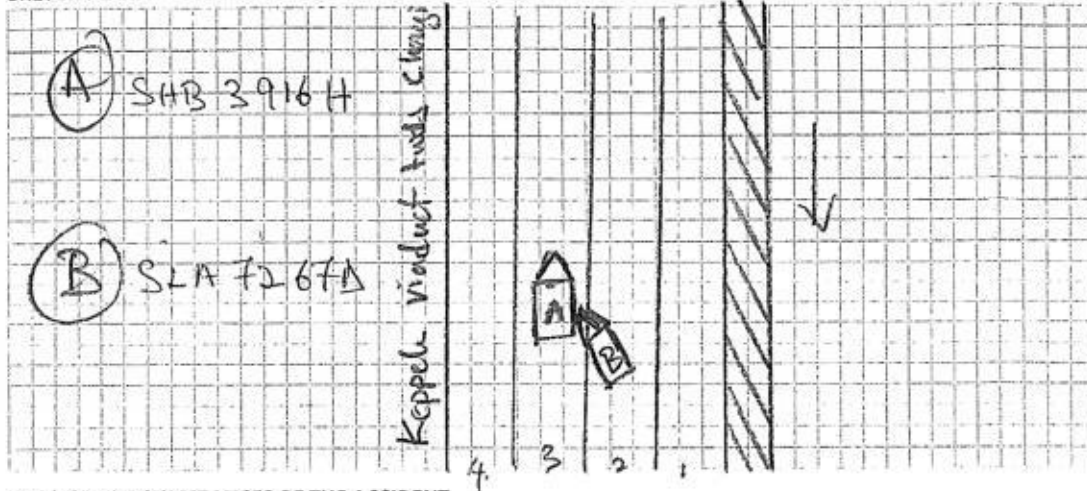
Vehicle Registration Number	SLA7267D
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LEFT FRT
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 12 DEC

Refer to police report.

T/ 2017 12 12/2185

DECLARATION

I/We declare the foregoing particulars are true in every respect.

CITYCAB PTE LTD  
CO. REG. NO. 199502839G

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:

## Sketch Plan Pg. 2



**SINGAPORE  
POLICE FORCE**



T/20171212/2185

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

1 of 3

Report No. T/20171212/2185

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/12/2017 22:28		Vide Report No.:		Station Diary No.: 148	
<b>Informant's Particulars</b>					
Name of Informant: YEOH YEOW CHONG			Address: APT BLK 322 HOUGANG AVENUE 5 #07-86 SINGAPORE 530322		
ID Type / ID No.: NRIC NO / S1547374F			Contact No.: Home/Office: Mobile: 83558232		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 55	Date of Birth: 21/04/1962	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/12/2017 20:15	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY AYE TOWARDS MCE NEAR TO VIVO CITY.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB3916H	Car				Slightly Damaged	2
SLA7267D	Car					0



**SINGAPORE  
POLICE FORCE**



T/20171212/2185

Police Station Of Origin;  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

2 of 3

Report No. T/20171212/2185

**CONTINUATION OF REPORT**

**Brief Details.**

On 12/12/2017 at about 2015hrs, I was driving my vehicle, SHB3916H, along AYE towards MCE near to Vivo city and there was an accident happened at lane 1-3 therefore I continued going straight. When I was moving, there was a vehicle, SLA7267D, hit onto the rear right of my vehicle. After the collision, he did not stop therefore I gave a chase till MCE however when I horned him, he does not want to stop and move off. I observed the driver to be a Indian aged about 50 years old. There was a passenger (Wendy, c/n:81386325) in my vehicle and she is willing to be the witness of the incident. I wish to state that there is camera in my vehicle and my company will be retrieving it. The damaged for my vehicle were scratches on the rear right. There is no on injured and no government properties damaged.



**SINGAPORE  
POLICE FORCE**



T/20171212/2185

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

3 of 3



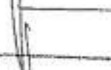
Report No. T/20171212/2185

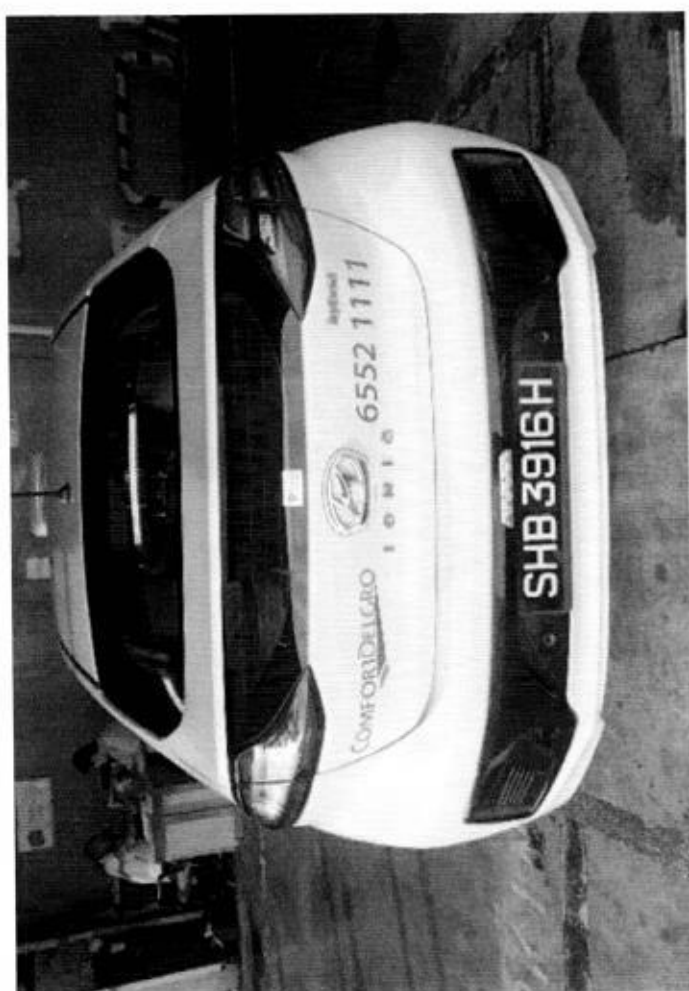
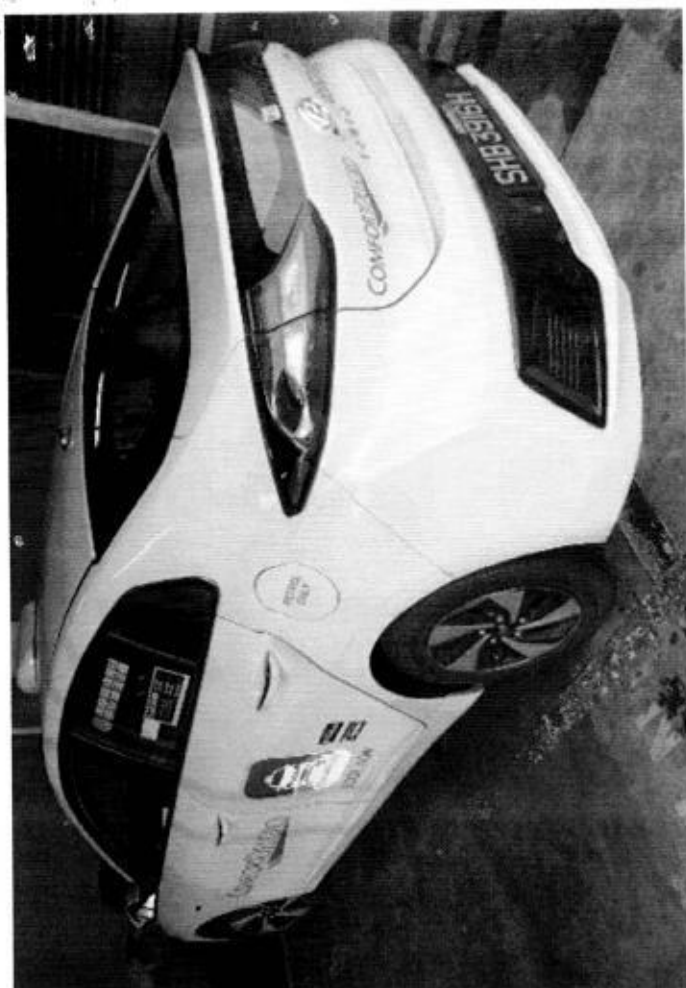
CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 JANSEN KWOK SHU HAO	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 12/12/2017 22:28
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt LIM WOON TIONG Contact No.: 65476418	Classification Of Case:  SN 085
Authentication Stamp NP168 	Signature: 



A member of COMFORTDELGRO

Date/Time: 13.12.2017 17:40 Page : 1

Team: ARC Repair TP(CFS0)1

JOB CARD Sales Order: JC NO305097568

STOMER  
CITYCAB PTE LTD  
VMS 7010070  
STOMER NO. 383 SIN MING DRIVE  
DRESS Singapore SINGAPORE 575717  
65551188 (O)  
L. (R)  
(P)

REGN NO. SHB3916H	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ	DATE/TIME IN 12.12.2017 21:20
YR OF MANU. 17.03.2017	TARGET DATE
CHASSIS CODE KMHC851CVHU022826	COMPLETION DATE/TIME:

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 12.12.2017  
NATURE: 3P 12.12.2017

S/NO	LABOR CODE	DESCRIPTION
		AUTO & GENERAL INS - taxi Right Rear damage

CHECKED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Knowledge Slip  
Name: LARRY  
Vehicle No.: SHB3916H  
Signature/Date  
To be returned to Service Reception upon collection

Exit Pass  
Vehicle No.: SHB3916H  
Name of Service Advisor  
Date  
To be kept by Security Guard

# CITY CAB PTE LTD

VEHICLE NO : SHB 3916H

MAKE :

MODEL : HYUNDAI IONIQ

DATE

21/12/20

145\*+

=

145\*+

145\*×

80\*%

116\*+

0\*0

100\*+

180\*+

=

280\*+

0\*0

116\*+

280\*+

=

396\*+

\$ 120.00

\$ 840.00

\$ 956.00

Qty

Parts Description/ Labour

Type

Rear Wheel Hup-Cap (RH)

Grazed

SUB TOTAL

LESS 20%

DISCOUNTED TOTAL

Labour Charge

Panel Beating

Spray Painting Charge

Wiring Charge

Remove/Refix Reverse Sensor

Rear Wheel Alignment

TOTAL LABOUR

ESTIMATE TOTAL

Kalun 10/10/14

15/12/17 1015 Lm

2 Day

P/P

After Repair photo

LKK Auto Consultants hence notify the Repairer of the following:

- Technical
- Technical
- Parts
- Technical
- Technical
- Technical
- Technical

Acknowledged by

Signature:

Date:

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.

## CITY CAB PTE LTD

VEHICLE NO : SHB 3916H

DATE 14/12/2017 10:36

MAKE :

MODEL : HYUNDAI IONIQ

Pby P

Auto &amp; General INS

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Wheel Hup-Cap (RH) <i>hrazed</i>			\$ 145.00
	<b>SUB TOTAL</b>			\$ 145.00
	<b>LESS 20%</b>			\$ 29.00
	<b>DISCOUNTED TOTAL</b>			\$ 116.00
	<b>Labour Charge</b>			<i>100</i>
	Panel Beating			\$ <del>350.00</del>
	Spray Painting Charge		<i>180</i>	\$ <del>200.00</del>
	Wiring Charge			\$ <del>50.00</del> <i>x n</i>
	Remove/Refix Reverse Sensor			\$ <del>120.00</del> <i>x n</i>
	Rear Wheel Alignment			\$ <del>120.00</del> <i>x n</i>
	<b>TOTAL LABOUR</b>			\$ 840.00
	<b>ESTIMATE TOTAL</b>			\$ 956.00
<p><i>Kalun' 16/12/17</i></p> <p><i>15/12/17 1015 hr</i></p> <p><i>2 Day</i></p> <p><i>PIP</i></p> <p><i>After Repair photo</i></p>				
<div> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>• To resurvey to include spray painting</li> <li>• To display damaged part(s) during resurvey</li> <li>• Parts prices are subject to confirmation</li> <li>• Third party survey is on a "Without Prejudice" basis</li> <li>• No illegal modification(s) is allowed</li> <li>• Supplementary work(s) must be resurveyed and is subject to final approval from Insurance Company.</li> </ul> <p>Acknowledged by Repairer:</p> <p>Signature:</p> <p>Date:</p> </div>				
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.				

COMFORTDELGRO ENGINEERING PTE LTD  
REPAIR ESTIMATE

Date: 16.12.2017  
Time: 15:13:59  
Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010070  
ADDRESS : CITYCAB PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65551188

JOB NO : 305097568  
REGN NO : SHB3916H  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ  
DATE OF REGN : 17.03.2017  
DATE/TIME IN : 12.12.2017 21:20  
ACCIDENT DATE : 12.12.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 03-01-0104-2061-G IONIQ CAP ASSY-WHEEL HUB 1 145.00 20.00 116.00

SUB-TOTAL : 116.00

JOB NATURE

0000 L PANEL BEATING 100.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 180.00

SUB-TOTAL : 280.00

TOTAL : 396.00

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305097568  
Date : 17.12.2017

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHB3916H

Date of Accident: 12/12/17

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

1. The repair job shall bill to: Auto & General Ins SLA7267D
2. The finalized amount shall be:
 

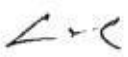
(a) Spare Parts after List discount	\$116.00
(b) Labour Charges	\$280.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$396.00</b>
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less:	
<b>Final Lumpsum Repair cost</b>	


3. Estimated normal period for repairs: 2 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

Signature :   
Name : Larry Ng  
Tel : 6214 8316  
Fax : 6546 8156

Signature :   
Name : Kalvin  
Date : 18/12/17

## 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				
3. Survey Fees				
4. LTA Search Fee	\$5.35			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AUTO & GENERAL INSURANCE (S) PL

Ref : CS/AGI17023811/K1qd3n2

(BUDGET DIRECT INSURANCE)

190 CLEMENCEAU AVENUE #03-01

SINGAPORE SHOPPING CENTRESINGAPORE

239924

Date : 05-01-2018



Code : AGI

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLA 7267D	Veh. Inspected	SHB 3916H
Policy No.		Coverage (\$)	0.00
Claim No.	C10001209	Excess (\$)	0.00
Assign From	ALBERT HONG	Assign Date	14/12/2017

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	KMHC851CVHU022826	Colour	YELLOW
Odometer	103899	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	NEXEN	7 mm
L/H Front Tyre	195/65 R15	NEXEN	7 mm
R/H Rear Tyre	195/65 R15	NEXEN	7 mm
L/H Rear Tyre	195/65 R15	NEXEN	7 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION.
DAMAGES SEE DETAILS.

## 5. General Information

Accident Date	12/12/2017	Inspection Date	15/12/2017
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
-------------------------------------	----------------



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 3916H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR WHEEL HUP-CAP (RH)	GRAZED	145.00	145.00
	LESS 20% DISCOUNT		-29.00	-29.00
			116.00	116.00
	<b><u>LABOUR</u></b>			
	PANEL BEATING.		350.00	100.00
	SPRAY PAINTING CHARGE.		200.00	180.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX REVERSE SENSOR.	NOT NECESSARY	120.00	-
	REAR WHEEL ALIGNMENT.	NOT NECESSARY	120.00	-
			840.00	280.00
	<b>GRAND TOTAL</b>		<b>956.00</b>	<b>396.00</b>
	<b>RECOMMENDED COST OF REPAIRS</b>			<b>396.00</b>

Report Ref No. CS/AGI17023811/K1qd3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

**DISCLAIMER OF LIABILITY TO THIRD PARTIES:-** This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.