MUNICIPAL TANIL GON OF ICE	(Office)	Date/Time:
Estimated Cost: Estimated Cost	Bill to:Insured:	9JT 3241C 621E8 HICO
of	Claim No:	D.O.A. 28031018
Make of Veh: (Client's Record)  CA / REV / REP. / REV 24 HRS 'Wp  Date/Time: 29032018 9990M Person Contacted:	Tumani	H.O.D. Endorsement:
Date/Time Action/Instruction ( V ) Estimate  STT 3241C - X .	39 / Agball-1	- DOG = OLDHIOLE
Part by Part \$1236.18	1 (Red: 10	95.40:46%)

ASSIGNMENT  Veh No:  Veh No:	(1183) REF:		14 15
ASSIGNMENT  Veh No. SH 6480 YE Regm  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Make:  Colour Gr / Colour Gr / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / M.Cycle / Bus / Van / Lorry / Gr / Prime Mover /  Type: M.Car / Type: M.Car / M.Cycle / Bus / Acc: Insue/Gr / Std / Ni / Ni / Ni / Std / Ni / Ni / Std / Ni / Ni / Ni / Std / Ni / N	ine yr Kalvin		
Type M.Carl M.Cycle Bus I Van I Lony I Van I Prime Mover I Truck I Trailer st Truck I Trailer st Truck I Trailer st Makes:  Very Asign m/s  Sund C:  Colour		ASSIGNMENT	14. 1 20/2 2.12
Truck / Trailer st.  Imp 6// ship is 1 P RES / OD RES / EVA / INV / INV Imp 6// ship is 5 P RES / OD RES / EVA / INV / INV Imp 6// ship is 5 P RES / OD RES / EVA / INV / INV Imp 6// ship is 5 P RES / OD RES / EVA / INV / INV Imp 6// ship is 5 P RES / OD RES / EVA / INV / INV Sp. Reseding 3 GPZ Tradic insuped / Isd / IN / INA Sp. Reseding 5 GPZ Tradic insuped / Isd / IN / IN A Sp. Reseding 6 GPZ Tradic insuped / Isd / IN / IN A Sp. Reseding 6 GPZ Tradic insuped / Isd / IN / IN A Sp. Reseding 6 GPZ Tradic insuped / Isd / IN / IN A Sp. Reseding for / Indianated / Leaked / Burnt or Brake: Inorte/ Jammed / Leaked /	Date:	Veh No:	64409 Yr Regnt
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Sp. Reading 3 622  Tradic Insuged / Std / N/I NA  Eng No.  CNo:  CNo:  CNo:  Consistent Report  Action / Insuged / Std / N/I NA  Eng No.  Consistent Report  Secrification of Jammed / Leaked / Burnt or  Brake: Income / Jammed / Leaked / Burnt or  Brake: Income / Jammed / Leaked / Burnt or  Modil: Nill / Sirlin / Std Art or  Tyre Size:  F: 2 5 / 64 Art 6  R:  BS / DUN / EXHOVA / GY / FS / LIZA / Nill / OHTSU / IPIR / SUMI /  TOYO / YORO or  Front  Bal.   Amm   List    TOYO / YORO or  Front  Bal.   Amm   List    Toyo / YORO or  Front  Bal.   Amm   List    Toyo / YORO or  Toyo / YORO or  Bal.   Amm   List    Toyo / YORO or  Bal.   Amm   List    Toyo / YORO or  Toyo / Yoro / Yoro / Yoro / Yoro /	Insp exVehicle No:	Make: H/un	12 240 0.0 164r
Englino: Cilho: KMHLBKI 4 M H 9 0 9 9 3 5 K  Gen. Cond: Good [Fig.] Poor   Burnt  Steering: Inord Jammed   Leaked   Burnt or  Brake:   Inord Jammed   Leaked   Burnt or  Modi:   Nil   SiRm   STD Albunt  Tyre Size:   F: 2 5 / 64 K 6  R: BS / DUN / EXNOVA   GY / FS / LiZA   Mig. OHTSU   PIR   SUM! /  TOYO / YORO or  Front   Real   Report    Steering:   Gen. Condision   Consistent? : Yes or No  LIA   PR Seen:   Consistent? : Yes or No  LIA   PR Seen:   Consistent? : Yes or No  Survey held at   Conference   Consistent    Data   Replino   Real   Conference    Data   Replino   Real   Conference    The UIC   Chassis frame   Body Structure affected due to collisic  The UIC   Chassis frame   Body Structure affected due to collisic  Person Contacted:   Pinal Report    RECEIVED B AND ZUID  Patiento, File Pass to?   Pinal Report    RECEIVED B AND ZUID  Add Fee:   Site Insp. (\$ ) Pinas  Chara  Chara  Chara  Englino:   Condision   Burnt   Condision    Real   Report   Real   Condision    Real   Report   Real   Condision    Received B And Report   Consistent    The UIC   Chassis frame   Body Structure affected due to collision    Received B And Fee:   Site Insp. (\$ ) Pinas  Chara  Add Fee:   Site Insp. (\$ ) Pinas  Chara  Cha	Nor⊬step m/s	Colour U/-	A/C: Insured / Std / NI / NA
CiNo: KMHLBKI 4 M M 9 9 9 75 K alias Nh  min state: Excess:  Citer tifecord) alias of Vin:  NIS OIS  India in Mattet Value:  Date Time Action / Instruction  Consistent?: Yes or No  Lisal. Tory of YOKO or  Front Risal. Tory of YOKO or  The UIC I Chassis frame I Body Structure affected due to collisic  Tory of YOKO or  Tory of YOKO or  The UIC I Chassis frame I Body Structure affected due to collisic  Tory of YOKO or  Tory of YOKO or  The UIC I Chassis frame I Body Structure affected due to collisic  Tory of Yoko or  Tory of Yoko or  The UIC I Chassis frame I Body Structure affected due to collisic  Tory of Yoko or  Tory of	1000 1000 1000 1000 1000 1000 1000 100	Sp.Reading 3696	T/Radio: Insured / Std / NI / NA
Gen. Cond: Good I F Poor I Burnt Steering: Inord Jammed / Leaked / Burnt or Brake: Inord Jammed / Leaked / Burnt or Modi: Nil / Sirkim / STD Alfah or Tyre Size: F: 2.5 / 66 M 6  R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC OHTSU / PIR / SUMI / TOYO / YOKO or  Brake: Inord Jammed / Leaked / Burnt or Modi: Nil / Sirkim / STD Alfah or Tyre Size: F: 2.5 / 66 M 6  R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC OHTSU / PIR / SUMI / TOYO / YOKO or  BRIED  A Consistent?: Yes or No Consistent?: Yes or No Burnsum:  St. Repets: days Res.: Yes or No A / REV / REP. / 24 HRS  Vehicle: IN / OUT  The U/C / Chassis frame / Body Structure affected due to collision  ECCES  CIP  RECEIVED US APR ZUID  Days Of Repair:  Profil Report  Profile Resurvey No. of Trip: Tamportation: Tamportati	ured:	Eng/No:	11 2411. M 1110 0 9 35X
Steering: Interest / Jammed / Leaked / Burnt or Brake: Interest / Jammed / Leaked / Burnt or Brake: Interest / Jammed / Leaked / Burnt or Modi: Nil / Sirkim / STD Alfah or Tyre Size; F: 2 o 5 / 6 a.K.6  Pulicy Condition)  Modi: Nil / Sirkim / STD Alfah or Tyre Size; F: 2 o 5 / 6 a.K.6  R:  BS / DUN / EXNOVA / GY / FS / LIZA / MIC / CHTSU / PIR / SUMI / TOYO / YOKO or Front  Rear R/Bal. 7 mm R/Bal. 7	icy Pla		
Brake: Inor 1 Jammed / Leaked / Burnt or Modi: Nil / Sirtim / STD A/Line or Tyre Size: F: 2 of / Salt 6  R: Bold Indian / Std A Coldent Rport: Consistent?: Yes or No  IA / PR Seen: Consistent?: Yes or No  IA / PR Seen: Consistent?: Yes or No  Str. Repairs: days Res.: Yes or No  Str. Repairs: days Res.: Yes or No  Str. Repairs: A Res.: Yes or No  Do.A. 24/Jfs D.O.J. 29/Jfs  Days of Damages: Frt / Rear / Ols / Instruction  RECEIVED 1 A PR ZUID  Detailine, File Peass to?  Days of Repair: 2  Resurvey No. of Trip: Survey Fee: Transportation: 250  Add Fee: Site Insp. (\$ ) S.F.S. St. (0)  Photos  The Urc / Chassis frame / Body Structure affected due to collision: 10 peacing. File Return to?  Add Fee: Site Insp. (\$ ) S.F.S. St. (0)  Photos  The Urc / Formas (\$ ) Photos  The Urc / For	aims No.	Gen. Cond: Good / Fp / Poo	or / Burnt
Clern trisecord   Salve of Wai:   Modii: Nil / Sirkim / STD Arth or Tyre Size:   F: 2 o f / 6 k to 6	min stred: Excess:		
(Pelicy Condition) emark: The veh had commenced its repair at the time of inspection.  al. or Market Value:  DAC A Coldent Report:  Consistent?: Yes or No LIA / PR Seen:  Consistent?: Yes or No LIA / PR Seen:  days Res.: Yes or No LIBBL.  D.O.A. 26/J/8  Survey held at  Des. of Damages: Frt / Rear / Ols / INS / U/C / Reoftop or  The U/C / Chassis frame / Body Structure affected due to collisic  Date / Time   Action / Instruction    Resurvey No. of Trip:  Date Time, File Pass to?  Date Time, File Return to?  Add Fee:  Site Insp (5)  Photos  Chara  Tyre Size:  F: 2 of /641/6  R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  TOYO / YOKO or  Front Resurvey No. Or  Front Resurvey No.  Resurvey No. of Trip:  Survey Fee:  Tansportation.  Survey Fee:  Tansportation.  250  Add Fee:  Site Insp (5)  Photos  Chara  The Control of Survey Fee:  Tansportation.  The U/C / Chara  Survey Fee:  Tansportation.  Tansportation.  Tansportation.  Tansportation.  Survey Fee:  Tansportation.  Tansportation.  Survey Fee:  Tansportation.  Tansporta	Client's Record)	The street of th	•
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(Pelicry Condition) emark: The veh had commenced its mpair at the time of inspection.  al. or Market Value:  DAC A Coldent Rport:  Consistent?: Yes or No NAI / PR Seen:  Consistent?: Yes or No St. Repairs:  days Res.: Yes or No Surrey held at  Do. O. 2 / Jr S  Data:  Person Contacted:  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  T		Tyre Size; F:	205/0000
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Action / Instruction    Front   Rear	enark, me ven nad commenced no		FS/LIZA/MIC/OHTSU/PIR/SUMI/
Action / Instruction  RECEIVED 0 3 APR 2018  Result Present Consistent? : Yes or No St. Repairs: days Res.: Yes or No Des. of Damages : Frt / Rear / O/S / No. / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision  RECEIVED 0 3 APR 2018  Resurvey No. of Trip: Tansportation: 250 Tansportation: 250 Tansportation: 250 The U/C / St. Resurvey No. of Trip: Tansportation: 250 The U/C / Chassis frame / Body Structure affected due to collision  R/Bal.	repair at the time of inspection.	TOYO / YOKO or	
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Survey held at Des, of Damages: Frt / Rear / Ols / Nis / U/C / Rooftop or Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  RECEIVED 3 PR ZUID  Date   President   Presi	STA / PR Seen: Consistent?: Yes or No		mat.
Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or  The U/C / Chassis frame / Body Structure affected due to collision  RECEIVED 0 3 PR ZUID  Petelline, File Pass to?  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  Add Fee:  Site Insp (\$ ) SHRS SI (O)  Photos	est.Repairs: days Res.: Yes or No	D.O.A. 28/1/8	
Date: Person Contacted: Vehicle: IN / OUT  Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  C//  Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  The U/C / Chassis frame / Body Structure affected due to collision  FC2/S  The U/C	.umSum: % 3 Val.: Yes or No		
Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision    Date / Time   Action / Instruction	A J REV J REP / 24 HRS	Des. of Damages : Frt / Re	ear / O/S / N/S / U/C / Rooftop or
Date Time Action / Instruction  RECEIVED 0.3 APR 2010  Paterline, File Pass to?  Paterline, File Return to?  Add Fee: Site Insp (\$ ) \$ + R8. St (0) \$ Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass to (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Character Street Pass To (1) \$ 1 \text{ Teach Invs (\$ ) } Photos Char	Vehicle:	: IN / OUT	
Paper Forms 6: Profession Photos  RECEIVED 8 3 APR 2018  Page No. of Trip:  Survey Fee:  Transportation:  Add Fee:  Interview (\$ Photos  The challenge of the second of th		The U/C / Chassis ira	alle / Body Chactaro anosto and
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## 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

ECICS LTD

Ref: CS/ICS18005861/K1tb

7 TEMASEK BOULEVARD

Date: 29-03-2018



	01 SUNTEC TOWE SAPORE 038987	ER ONE	Date: 29-03-2018	
SINC	SALONE 030901		Code: ICS	
1.		Policy Particul	ars :- THIRD PARTY CLA	M
	Insured Veh.	SJT 3241C	Veh. Inspected	SH 6440G
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From	JANICE GOH	Assign Date	28/03/2018
2.	The state of the s	Vehicle P	articulars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer		Steering	
	Brakes		Modification	
	General			
3.		Cor	nditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre			mm
į	L/H Front Tyre			mm
	R/H Rear Tyre			mm
	L/H Rear Tyre			mm
4.		Desc	ription of Damages	ALCOHOLD BY
5.		Ge	neral Information	
٥.	Accident Date	28/03/2018	Inspection Date	29/03/2018
	Survey held at	COMFORTDELGRO ENGI		
	Carrey note at	59 LOYANG DRIVE SINGAPORE 508969		
5a.	Service March		Remarks	
	A)THE INSPECTION	ON WAS CONDUCTED ON A	A"WITHOUT PREJUDICE" BANS, WE HAVE NOT AUTHOR	SIS. ISED REPAIRS.

## Catherine Chong (LKK Auto)

From:

motorsurvey <motorsurvey@ecics.com.sg>

Wednesday, 28 March, 2018 7:25 PM

Sent: To:

Jumani Bin Masudin; assignments@lkkauto.com

Cc:

motorsurvey

Subject:

RE: DOA.28.03.18 SH6440G with your insured SJT3241C - ECICS

Attachments:

img-328180313-0001.pdf

Without Prejudice

Dear Jumani

Thank you for your email.
We will appoint LKK for the survey.

Aside to LKK

Please assist to arrange for TP PRI.

Thank you.

Regards, Janice Goh Claims Division DID: +65 6303 0182 FAX: +65 6338 9267

**ECICS Limited** 

7 Temasek Boulevard, #10-01 Suntec Tower One, Singapore 038987

WITH IMMEDIATE EFFECT FOR ALL PRE-REPAIR INSPECTION/SURVEY, please email to <a href="motorsurvey@ecics.com.sg">motorsurvey@ecics.com.sg</a> directly.

\*\*Please bear with us should we take longer to response as we are currently experiencing a high volume of claims. Thank you for your kind patience and understanding. \*\*

From: Jumani Bin Masudin [mailto:jumanibm@cdge.com.sg]

Sent: Wednesday, 28 March, 2018 6:06 PM

To: motorsurvey

Subject: Fw: DOA.28.03.18 SH6440G with your insured SJT3241C - ECICS

TO

Officer in charge

see attached

Best Regards Jumani Masudin Taxi Crash Repair / ComfortDelgro Engineering Pte Ltd Tel. 6214-8315 / Fax. 6546-8156

---- Forwarded by Jumani Bin Masudin/cdge/delgronotes on 28/03/2018 06:04 PM -----

From:

"ApeosPort-IV C5570 " <sbs-singnalling@sbstransit.com.sg>

To: jumanibm@cdge.com.sg

Date: Subject:

Number of Images: 8

Attachment File Type: PDF

Device Name: ApeosPort-IV C5570

Device Location:

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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.

SBS Transit Ltd [Registration No. 199206653M]

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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 En	gineering Pte Ltd	[Registration No. 199506048W]
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### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding 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.

- 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 Report	28/03/2018 16:23
Date Of Accident	28/03/2018 11:25
Exact Location Of Accident	PIE TWDS CHANGI BEFORE TAMPINES AVE 5 EXIT
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SH6440G
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	140
Exact Purpose for which vehicle was being used at time of accident	t.
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	
Driver	

#### Driver

POH KAH HUAT Name of Driver S1646818E NRIC No 11/06/1964 Date Of Birth OUTDOOR Occupation 15/08/1983 Date Of Driving Pass

34 YEARS AND 7 MONTHS **Driving Experience** 

MALE Gender

Mobile Number Fax Number

Contact Number

POH\_KHUAT1106@YAHOO.COM EMail Address

BLK 98 ALJUNIED CRESCENT

#07-427

380098 Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - TAXI DRIVER

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Address

Was any foreign vehicle involved in this accident? NO 2

Number of vehicles involved in the accident

YES Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

NO

NO

4

: MALE GENDER:

Passenger 2

NAME:

GENDER:

: FEMALE

Passenger 3

NAME:

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED

Remarks/ Reasons:

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

KIA

DETAILS OF OTHER VEHICLE PROPERTY 1

SJT3241C Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category UNKNOWN Name of Driver

NRIC/Passport Number

Page 2 of 13

Contact Number

96367217

Address

Postcode

Insurance Company Name

Nature Of Damage

FRONT

No. Of Passenger (Including Driver)

## **DETAILS OF INJURED PERSON 1**

Name

POH KAH HUAT

Approximate Age

Injuries Sustain

FELT DIZZY

Injured person in which vehicle?

SH6440G

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

### **DETAILS OF INJURED PERSON 2**

Name

UNKNOWN(PAX-1)

Approximate Age

Injuries Sustain

FELT DIZZY

Injured person in which vehicle?

SH6440G

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

### **DETAILS OF INJURED PERSON 3**

Name

UNKNOWN(PAX-2)

Approximate Age

Injuries Sustain

FELT DIZZY

Injured person in which vehicle?

SH6440G

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

### Sketch Plan Pg. 1

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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 liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- By the lodgment 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 aforesald.
- Consent under the Personal Data Protection Act (PDPA)

I 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:
  - 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;
  - (iii) 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

CO. REG. NO. 199303821R

Policyholder's Signature Date & Time: Oriver's Signatural

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SMBIAC ShetchHardoom\_V3

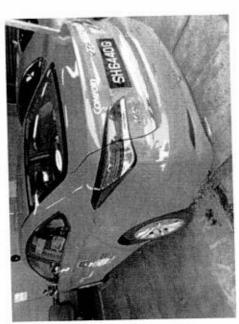
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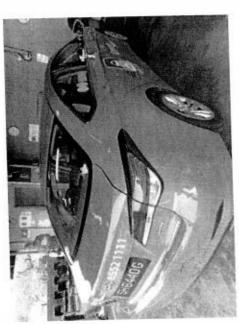
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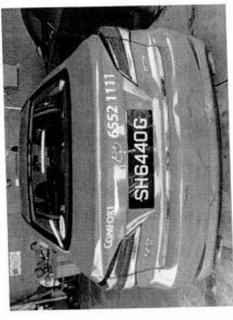
## Sketch Plan Pg. 2

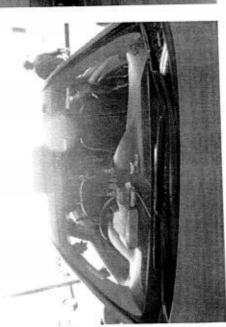
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I/We declare the foregoing particulars are true MFORT TRANSPORTATION PTE LTD	A
CO. REG. NO. 199303821R	× /
d	N
Policyholder's Signature Drive	A Signature Reporting Centre Personnel's Signature
	iver is not the policyholder) Name: 50/2/14
the second secon	& Time: NRIC/FIN No.: 38 7 10 -
GIARRAC Shetch Flen Form_V3	











COMFORT

sturned to Service Reception upon collection

Date/Time: 29.03.2018 08:48

Page : .

MER COMFORT TRANSPORTATION PTE LTD 7010045  MER MODEL 7010045  SIN MING DRIVE SINGAPORE 575717 PP  LINT CARD NO.  LABOR CODE  LABOR CODE  LABOR CODE  DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  JOR DESCRIPTION  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  FULL VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MAKE: HUNDAI  JOR DESCRIPTION  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  MILEAGE  MODEL 1-40 28.03-75/10/8 14:35  VR OF MON-12.2017  CHASSENGHE \$410KHU099354  COMPLETION DATE:  JOR DESCRIPTION  CHASSENGHE	m: ARC Repair TP(CLSO)1	JOB CAI	RD Sales Order:	JC NO.305136366
MANY   HYUNDAI   FUEL   12   13   14   13   14   15   15   16   16   16   16   16   16			REGN NO. 6440G	MILEAGE
MODEL	COMFORT TRANSPORTATION PTE	LTD		FUEL E1/2
### 65508755 (O) PR OF 2012.2017 TARGET DATE    CHASSINGLE ALUMHU099354 COMPLETION DATE TO THE PROPERTY OF THE	MER NO 83 SIN MING DRIVE		MODELI-40 28.	03.2018 14:35
NT CARD NO.  PASSED OUT EY:  SERVICE ADVISOR  SERVICE ADVISOR  CHASSED OUT EY:  SERVICE ADVISOR  CUSTOMER'S SIGNATURE  Exit Pass  Vehicle No.:  SH 6440G  JU ECICS LKK  COMPLETION DESCRIPTION  CHASSED COMPLETION DESCRIPTION  COMPLETION DESCRIPTION  COMPLETION DESCRIPTION  COMPLETION DESCRIPTION  COMPLETION DESCRIPTION  CUSTOMER'S SIGNATURE  Exit Pass  Vehicle No.:  SH 6440G				TARGET DATE
SERVICE ADVISOR  SERVICE ADVISOR  SERVICE ADVISOR  Ext. Pass  Ladden Total Sign and the service advisor customer's Signature  Ext. Pass  Vehicle No.: SH 6440G  JU ECICS LKK  SIGNATURE  DESCRIPTION  CUSTOMER'S SIGNATURE			CHASSIS CODE MMHLB41UMHU099354	COMPLETION DATE/TIME
NO	cident Date: 28.03.2018	JOB DESCRIF	PTION	
KED & PASSED OUT BY:  SERVICE ADVISOR  CUSTOMER'S SIGNATURE  ledgement Slip  Exit Pass  Vehicle No.: SH 6440G  DE ST. 6440G		D	ESCRIPTION	
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service ADVISOR  ledgement Slip  Exit Pass  Vehicle No.: SH 6440G  SH 6440G  Page 1			CUSTOMER'S	SIGNATURE
No.: SH 6440G JU ECICS LKK Vehicle No.: SH 6440G	SERVICE ADVISOR	4	COSTOMERO	J. G. G. T. G.
No.: SH 6440G JU ECICS LKK SH 6440G	edgement Slip	Exit Pa	335	
Date	No.: SH 6440G JU ECICS LKK	Vehick	e No.: SH 6440G	
	f Service Advisor Signature/		of Service Advisor Date	

To be kept by Security Guard

## COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

MAKE

VEHICLE NO: SH 6440G

DATE 28/3/2018 14:52

Jumani

Qty	: HYUNDAI i40 Parts Description/ Labour	Type	Unit Price	A	mount
Qty	Rear Bumper Deformed			\$	603.60
	Rear Bumper Reinforcement , X SVC			S	504.35
	Rear Bumper Reinforcement Bracket (LH/RH)? XS	10	\$ 180.00	\$	360.00
	Rear Bumper Side Bracket 7 XQVC	<i>/</i> C		S	49.00
				S	22.00
	Rear Bumper Clips / Ne C			S	143.40
	Rear Bumper Sponge 2 200			S	225.00
	Rear Bumper Under Cover — Cut				220,00
	SUB TOTAL			s	1,907.35
	LESS 20%		1	S	381.47
	DISCOUNTED TOTAL			s	1,525.88
	DISCOUNTED TOTAL			FOR	-51
	Rear Bumper Reverse Sensor - Shorted			\$	135.70
				\$	135.70
	Labarra Chauss				200
	Labour Charge			\$	250.00
	Panel Beating			S	250.00
	Spray Painting Charge			S	50.00
	Wiring Charge			\$	120.00
	R/Refix Reverse Sensor			<b>P</b>	12000
	TOTAL LABOUR	Ł.		\$	670.00
	ESTIMATE TOTAL			\$	2,331.58
	1 29/2/1 1.20h 2 Pm 2 Pm 8/m Post pl	U =	KK Auto Consultants hence Repairer of the following To resurvey before/after spray part To display damaged part(s) during Parts prices are subject to confirm Third party survey is on a Without No illegal modification(s) is allowed Supplementary item(s) must be not subject to final approval from the knowledged by Repairer sphature:	g: sinting g resur nation ut Freju ed	rvey
	<i>p</i> .,		te:		entrum veill
	This is an initial estimate based on a visual inspection of be prepared after the vehicle is surveyed by a motor Surv	the above	vehicle. The final repair	r qua	intum Will

# COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO: SH 6440G

DATE 28/3/2018 14:52

Jumani

EL	: HYUNDAI i40	Type	Ur	it Price	A	mount	
Qty	Parts Description/ Labour	-71			\$	603.60	
	Rear Bumper / July				S	504.35	
	Rear Bumper Reinforcement X		c	180.00	\$	360.00	
	Rear Bumper Reinforcement Bracket (LH/KH)		\$	100.00		49.00	
	Rear Bumper Side Bracket /				S		
	Rear Bumper Clips Rear Bumper Sponge				S	22.00	
	Rear Rumper Sponge		1	1	\$	143.40	
	Rear Bumper Under Cover				S	225.00	
	SUB TOTAL				s	1,907.35	
	LESS 20%				\$	381.47	
	DISCOUNTED TOTAL				S	1,525.88	
	Rear Bumper Reverse Sensor — 6 LH				\$	135.70	N
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					\$	135.70	+
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COMFORTDELGRO ENGINEERING PTE LTD

Date: 29.03.2018 Time: 15:10:49

Page: 1

REPAIR ESTIMATE

COMPAINY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO MILEAGE : 305136366 : SH 6440G

: 0000000000 : HYUNDAI MAKE

: I-40 MODEL
DATE OF REGN : 20.12.2017
28.03.2018 14:35 MODEL

ACCIDENT DATE : 28.03.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-O1-0103-0579-G I40VC COVER ASSY-RR BUMPE 1 603.60 20.00 482.88

0002 04-01-0101-0111-A HYUNDAI BUMPER COVER CLIP 10 L 22.00 20.00 17.60

0003 04-01-0103-0738-G I40VC COVER-RR BUMPER LWR 1 225.00 20.00 180.00

0004 09-01-9999-0068-A HYUNDAI REVERSE SENSOR AS 1 N 135.70 2.00- 135.70

SUB-TOTAL : 816.18

JOB NATURE

0000 L

PANEL BEATING- REAR

200.00

0001 23-502

SPRAYPAINT ON AFFECTED AREA

200.00

0002 L

REMOVE/REFIX REVERSE SENSOR

20.00

SUB-TOTAL: 420.00

TOTAL : 1,236.18

AUTHORISED: YES/NO

MVA NAME & SIGNATURE

DATE:

SURVEYOR NAME & SIGNATURE

DATE:

### COMFORTDELGRO ENGINEERING

	- b - D - 4	Ale .	2051	136366				
our Jo Date	oo Ket	No : _		3/2018	-81		Comfort 59 Lova	DelGro Engineering Pte Ltd ing Drive Singapore 508961
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	LIZAII			_KK			Fax:	
Го	8 <del>-</del>		-	CALVIN			1 00.	
Attn			Self-bridge	4500M		Data	of Accident :	28/03/2018
	1000		SH 64		250 30			
ihe s	urvey	and esti	mates of t	he repairs of	the above-n	nentioned	vehicle are as	follows:-
١.	The	repair jol	b shall bill	to:	ECIC	S		SJT3241C
2.	The f	finalized	amount s	hall be:			7,111	
	(a)	Spare	Parts afte	r List discou	nt			\$816.18
	(b)	Labou	r Charges			###		\$420.00
		Total	for Part-B	y-Part Repa	ir Cost			\$1,236.18
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## LKK Auto Consultants Pte Ltd (Co Reg. No:199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/ICS18005861/K1TBN2

Date:

06/04/2018

REFERENCE

Handling Insurer:

**ECICS Limited** 

Policy No:

Claimant Vehicle No:

SH6440G

Insured Vehicle No:

SJT3241C

Date of Loss:

28/03/2018

Nature of Claim:

TP

Claim No:

N/A

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SH6440G

Make & Model:

HYUNDAI 140, 1.7 D (A) 20/12/2017 (Man. Year: 2016) Engine No: Chassis No: Odometer:

D4FDGU715487

36382 km

KMHLB41UMHU099354

Reg. Date: Colour:

**Engine Capacity:** 

1685 cc

Market Value/New Car

N/A

Price:

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

205/60R16

Rear Tyre Size:

205/60R16

Front Left Side:

Hankook 7 mm

Rear Left Side:

Hankook 7 mm

Front Right Side:

Hankook 7 mm

Rear Right Side:

Hankook 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts	Repairer's 1,661.58 0.00	Adjuster's 816.18 0.00	Difference 845.40 0.00	Diff % 50.88
Miscellaneous Items Labour Paintwork Labour	670.00 0.00 0.00	420.00 0.00 0.00	250.00 0.00 0.00	37.31
Towing  Gross Total (S\$)  + GST 7.00/7.00% (S\$)	<b>2,331.58</b> 163.21	<b>1,236.18</b> 86.53	<b>1,095.40</b> 76.68	<b>46.98</b> 46.98
Nett Amount (S\$)	2,494.79	1,322.71	1,172.08	46.98

INSPECTION

Date of Assignment:

28/03/2018

Date Inspected:

29/03/2018 Inspected At:

ComfortDelGro Engineering Pte Ltd

(Loyang)

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

2.0 days

Adjuster: KALVIN ANG WEI KUN

Manager: DENISE TAY KWEE CHENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

## REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 05 Apr 2018)

Parts:

143

HYUNDAI I40 1.7 D (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SH6440G)

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 \*.

Re No.			. Particulars	Condition	Repairer's	Amount
32	.0		*REAR BUMPER	Deformed	603.60 FL	*603.60 FL
1	1		*REAR BUMPER REINFORCEMENT	Serviceable	504.35 FL	*-FL
3	2		*REAR BUMPER REINFORCEMENT BRACKET (LH/RH) *REAR BUMPER SIDE BRACKET	Serviceable Serviceable		
5	10		*REAR BUMPER CLIPS *REAR BUMPER SPONGE	Necessary Serviceable		*-FL
6 7 8	1		*REAR BUMPER UNDER COVER *REAR BUMPER REVERSE SENSOR	Cut Shorted		*225.00 FL *135.70 FS
F=Franchise part. S=SpcNett. L=ListItemDisc.  Sub Total (S\$)						986.30
			- List Item Discount on L Items 20.0	0/20.00% (S\$	381.47	170.12
			Тс	otal Parts (S\$	1,661.58	816.18

Report was unsubmitted during this print-out.

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items	New	250.00	200.00
1	PANEL BEATING	New	250.00	200.00
2	SPRAY PAINTING CHARGE	New	50.00	-
3	WIRING CHARGE R/REFIX REVERSE SENSOR	New	120.00	20.00
		Gross Labour Cost (S\$)	670.00	420.00
	Report	was unsubmitted during this print-out.		

< END OF ESTIMATES >