

Trans-cab Auto Services Pte Ltd**AAD1804-122**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHB 9790M

Vehicle No.:	SHB 9790M
Chassis No.:	VF1ABL15AUC273324
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE
Date of Accident :	11.4.2018
Third Party Insurer :	AXA

PART		LIST	
1	HEADLAMP LH	\$	1,184.43
1	HEADLAMP PANEL FRT LH	\$	152.15
1	FENDER PANEL FRT LH	\$	783.83
1	WHEELARCH FRT LH	\$	278.84
1	FENDER BRACKET LOWER LH	\$	15.79
1	FENDER INSULATOR LH	\$	130.84
1	DOOR PANEL FRT LH	\$	2,844.66
1	DOOR HINGE UPPER LH L70Y	\$	261.28
1	DOOR HINGE LOWER LH	\$	300.55
1	DOOR CHECK FRT LH	\$	194.77
1	DOOR CHECK BOLT	\$	22.69
1	DOOR LOCK FRT LH	\$	908.75
1	DOOR CATCH FRT LH	\$	131.23
1	DOOR HANDLE OUTER FRT LH	\$	477.76
1	DOOR HANDLE COVER FRT LH	\$	13.22
1	DOOR HANDLE MODULE FRT LH	\$	133.60
1	DOOR REGULATOR FRT LH	\$	505.19
1	DOOR REGULATOR MOTOR FRT LH	\$	796.46
1	DOOR REGULATOR GUIDE FRT LH	\$	120.97
1	DOOR PANEL REAR LH L70Y	\$	2,844.66
1	DOOR GUIDE REAR LH L70Y	\$	176.82
1	DOOR GUIDE SCREW	\$	10.85
1	DOOR HINGE UPPER LH L70Y	\$	274.50
1	DOOR HINGE LOWER L70Y	\$	300.55
1	DOOR HINGE BOLT	\$	10.85
1	DOOR HINGE NUT L70Y	\$	14.60
1	DOOR CHECK REAR LH/RH L70Y	\$	203.06
1	DOOR CHECK BOLT	\$	22.69
1	DOOR CHECK NUT	\$	3.75
1	DOOR LOCK REAR LH L70Y	\$	908.75

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1	DOOR LOCK SCREW L70Y	\$	6.12
1	DOOR CATCH SCREW L70Y	\$	10.06
1	DOOR HANDLE OUTER REAR LH L70Y	\$	126.49
1	DOOR HANDLE CAP REAR LH L70Y	\$	35.52
1	DOOR HANDLE SEAL REAR LH L70Y	\$	7.89
1	DOOR HANDLE COVER REAR LH L70Y	\$	13.22
1	DOOR HANDLE MODULE REAR LH L70Y	\$	133.60
1	DOOR REGULATOR REAR LH L70Y	\$	1,135.10
1	DOOR REGULATOR MOTOR REAR LH L70Y	\$	893.75
1	DOOR REGULATOR NUT REAR L70Y	\$	12.43
1	DOOR REGULATOR MOTOR SCREW REAR L70Y	\$	6.31
1	DOOR FINISHER REAR LH L70Y	\$	423.10
1	DOOR MOULDING REAR LH L70Y	\$	176.82
1	DOOR MOULDING CLIP L70Y	\$	5.92
1	DOOR MOULDING SCREW L70Y	\$	6.91
1	DOOR CASING REAR LH L70Y	\$	1,509.06
1	DOOR WATER SHIELD REAR LH L70Y	\$	30.39
1	DOOR CASING CLIP	\$	12.63
1	DOOR CASING LIGHT L70Y	\$	48.74
1	DOOR FINISHER INNER REAR LH L70Y	\$	323.44
1	DOOR FINISHER BRACKET INNER REAR LH L70Y	\$	46.97
1	DOOR FINISHER BRACKET INNER REAR LH L70Y	\$	20.33
1	DOOR FINISHER BRACKET INNER REAR LH L70Y	\$	20.33
1	DOOR FINISHER BRACKET INNER REAR LH L70Y	\$	20.33
1	DOOR GRAB HANDLE REAR LH L70Y	\$	210.96
1	DOOR BLIND REAR LH L70Y	\$	741.80
1	DOOR WHEATHESTRIIP REAR LH L70Y	\$	410.66
1	DOOR SEAL REAR LH L70Y	\$	162.02
1	DOOR GLASS RUNNER SEAL REAR LH L70Y	\$	229.31
1	DOOR WAIST SEAL OUTER REAR LH L70Y	\$	334.69
1	DOOR WAIST SEAL INNER REAR LH L70Y	\$	115.64
1	FENDER PANEL REAR LH	\$	3,299.13
1	FENDER PANEL INNER TRIM REAR	\$	671.45
1	WHEELARCH REAR LH	\$	543.47
1	BUMPER COVER REAR	\$	1,108.46
1	BUMPER LOWER REAR	\$	768.84
1	BUMPER BRACKET CTR REAR	\$	113.47
1	BUMEPRE RETAINER LH REAR	\$	44.99
1	BUMPER BEAM REAR	\$	777.52

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1	BUMPER BEAM BRACKET LH REAR	\$	225.95
1	DOOR MIRROR ASSY LH	\$	1,483.40
1	TAILLAMP LH	\$	552.55

	\$	30,847.89
10%	\$	3,084.79
	\$	27,763.10

Special Nett

1SET	BUMPER CLIP FRT	\$	66.00
1	BUMPER BRACKET CLIP FRT LH	\$	12.00
1	BUMPER SUPPORT CLIP FRT LH	\$	10.50
1SET	BUMPER GRILLE LOWER CLIP	\$	69.00
1SET	FRAME FULL SUPPORT PANEL CLIP	\$	70.00
2	FRAME FULL SUPPORT PANEL NUT	\$	20.00
2	FRAME FULL SUPPORT PANEL STUD	\$	30.00
1SET	WHEELARCH CLIP FRT LH	\$	30.50
1	FRONT DOOR STICKER 'Trans-cab'	\$	80.00
1	FRONT DOOR STICKER 'Chassis'	\$	50.00
1	REAR DOOR STICKER '6555 3333'	\$	80.00

TOTAL	\$	518.00
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TOTAL PARTS	\$	28,281.10
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LABOUR

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	\$	3,500.00
Putty and spray painting of the affected portion.	\$	3,200.00
To rust-proofing of the affected areas.	\$	170.00

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To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	380.00
To check steering geometry and computer wheel alignment	\$	220.00
To transfer of tire, rim and on wheel balancing.	\$	170.00
To Check Electrical Lighting Concerned.	\$	170.00
To transfer of front fender fittings, attachment and perform water seepage test.	\$	380.00
To vacuum, replace, refix and recharge air condenser	\$	380.00
To replace, refix and top up coolant for radiator	\$	170.00
To vacuum, replace, refix and recharge Air Intercooler	\$	170.00

TOTAL	\$	8,910.00
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Over All Total	\$	37,191.10
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LUMP SUM (REPAIR DAY)**10 DAYS**

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 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 12/04/2018 08:41
 Date Of Accident 11/04/2018 20:15
 Exact Location Of Accident ORCHARD ROAD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB9790M
Insured/Policyholder
 Name Of Registered Owner TRANS-CAB SERVICES PTE LTD
 Co Reg No 200303878K
 Email Address CLAIMS@TRANSCAB.COM.SG
 Mobile Phone No
 Alternative Phone No OFFICE-62866666

Vehicle Particulars

Manufacturer RENAULT
 Model LATITUDE-2.0 L (A)
 Exact Purpose for which vehicle was being used at time of accident HIRE AND REWARD
 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 AXA INSURANCE PTE LTD
 Type Of Coverage THIRD PARTY
 Fleet Policy YES
 Policy Number VPX/P1680520
 Cover Note Number

Driver

Name of Driver ONG CHER TENG
 NRIC No S6816935F
 Date Of Birth 05/05/1968
 Occupation OUTDOOR
 Date Of Driving Pass 02/04/1988
 Driving Experience 30 YEARS AND 0 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-96185261
 Fax Number
 Contact Number
 EMail Address NOEMAIL

Address	BLK 439B SENGKANG WEST AVENUE #03-313
Postcode	792439
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

On 11.04.2018 at about 2015hours I was travelling straight on the extreme right lane along Orchard Road. Suddenly I felt an impact. Vehicle B (GBB5060J) which was travelling on my left swerved into my lane and hit onto my taxi's left side portion.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB5060J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	MUHAMMAD NA'IM BIN M A ALEEM
NRIC/Passport Number	S8632054A
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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 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. 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 centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

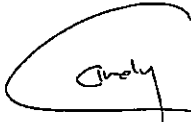
I understand, acknowledge, agree and consent that:

- (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:
 - (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;
 - (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:
 - (i) 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.

Policyholder's Signature
Date & Time:



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



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN

Orchard Road

A = 510 9710M
B = 665 5060M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see attach G/A Report

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NR1C/FIN No.:

GLARMC SketchPlanForm_V3

2

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 3878K

Vehicle Details

Vehicle No.: SHB9790M
Vehicle to be Exported: Yes
Intended De-registration Date: 12 Apr 2018
Vehicle Make: RENAULT
Vehicle Model: LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour: Red
Manufacturing Year: 2013
Engine No.: M9R8839C000356
Chassis No.: VF1ABL15AUC273324
Maximum Power Output: 127.0 kW (170 bhp)
Open Market Value: \$19,998.00
Original Registration Date: 31 Jul 2013
First Registration Date: 31 Jul 2013
Transfer Count: 0
Actual ARF Paid: \$12,498.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 30 Jul 2021
PARF Rebate Amount: \$9,373.00

Intended COE Rebate Details

COE Expiry Date: 30 Jul 2021
COE Category: A - Car (1600cc & below)
COE Period(Years): 8
PQP Paid: \$51,810.00
COE Rebate Amount: \$21,361.00
Total Rebate Amount: \$30,734.00

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 12 Apr 2018

OK