

Trans-cab Auto Services Pte Ltd**AAD1810-052**

No. 2 Ang Mo Kio Street 63 Singapore 569111

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

CO./GST Reg. No. 201019626G

SHB 7893M

Vehicle No.:	SHB 7893M
Chassis No.:	KL1LA69RJBB108889
Vehicle Make:	CHEVROLET
Vehicle Model:	EPICA 2.0
Date of Accident :	2.10.2018
Third Party Insurer :	III

PART**LIST**

1	1	Front Side View Mirror Assy RH	\$	1,191.00
2	1	Rear Door RH (Panel A-RR DR LH)	\$	1,133.00
3	1	Rear door weatherstrip - Inner	\$	41.40
4	1	Rear door weatherstrip - 2nd Frame	\$	25.90
5	1	Rear door top hinge	\$	35.00
6	1	Rear door bottom hinge	\$	35.00
7	1	Rear door inner lock	\$	425.00
8	1	Rear door check / arrestor	\$	65.00
9	1	Rear door lock striker / latch	\$	120.00
10	1	Rear door outer weatherstrip moulding	\$	85.00
11	1	Side Rocker Panel Garnish RH	\$	236.40
12	1	Rear Fender RH	\$	1,145.00
13	1	Rear Fender Inner Trim RH	\$	418.44
14	1	Front Side Rocker Panel Garnish RH	\$	236.40
15	1	Front Side Rocker Panel Outer RH	\$	600.00
16	1	Front Side Rocker Panel Inner RH	\$	519.30
17	1	Rear Bumper	\$	1,202.00
18	1	Rear Bumper Beam	\$	239.94
19	1	Rear Bumper Centre Absorber	\$	260.00
20	1	Rear Bumper Side Retainer RH	\$	68.76
21	1	Rear Bumper Side Retainer LH	\$	68.76
22	1	Rear Bumper Reflectors RH	\$	119.74
23	1	Rear Bumper Reflectors LH	\$	119.74
24	1	Rear Bumper Tow Hook Cover	\$	93.00
25	1	Rear End Panel Outer	\$	623.76
26	1	Rear End Panel Inner Trim	\$	263.84
27	1	Rear Tail Lamp RH	\$	479.30

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28	1	Rear Tail Lamp Inner Panel RH	\$	359.00
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TOTAL	\$	10,209.68
10%	\$	1,020.97
	\$	9,188.71

Special Nett

1 Set	Front Bumper Fastener Clip	\$	24.00
1 Set	Front licence plate with holder	\$	192.00
1 Set	Radiator Grille clip	\$	35.00
1 Set	Front Fender Liner clip	\$	30.00
1	Front Fender RR Bracket RH	\$	7.10
1	Rear Wheel Rim Hub Cap RH	\$	166.30
1	Front right tyre	\$	220.00
1	Front Tyre Rim RH	\$	350.00
1	Front door sticker 'Trans-cab'	\$	80.00
1Set	Rear Fender Inner Trim Clip RH	\$	30.00
1	Rear door sticker '6555-3333'	\$	80.00
TOTAL	\$	1,214.40	

TOTAL PARTS	\$	10,403.11
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LABOUR

To Check Electrical Lighting Concerned.	\$	170.00
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Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	\$	4,500.00
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Putty and spray painting of the affected portion.	\$	4,000.00
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Towing Fees.	\$	120.00
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To dismantle and refit front end suspension, undercarriage parts, final checking and testing.	\$	380.00
To check steering geometry and computer wheel alignment	\$	220.00
To transfer of tire, rim and on wheel balancing.	\$	170.00
To rust-proofing of the affected areas.	\$	170.00
To check steering geometry and computer wheel alignment	\$	220.00
To transfer of door fittings, attachment and perform water seepage test.	\$	170.00
To transfer of fender fittings, attachment and perform water seepage test.	\$	170.00
TOTAL	\$	10,290.00
Over All Total	\$	20,693.11

Repair Days (Lump Sum)**15 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	03/10/2018 16:20
Date Of Accident	02/10/2018 21:45
Exact Location Of Accident	UPPER CROSS STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB7893M
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-62876666

Vehicle Particulars

Manufacturer	CHEVROLET
Model	EPICA-2.0 (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	PHUA JOO HIANG
NRIC No	S6847797B
Date Of Birth	20/12/1968
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1989
Driving Experience	28 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98691325
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 354 YISHUN RING ROAD #05-1778
Postcode	760354
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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?	YES
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)	3
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE

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 02/10/2018, AT ABOUT 2145HRS, I WAS TRAVELLING STRAIGHT ALONG THE RIGHTMOST LANE OF UPPER CROSS STREET. SUDDENLY I FELT AN IMPACT ON THE RIGHT SIDE OF MY TAXI. VEHICLE B(PA9520L) ENCROACHED MY LANE AND COLLIDED ONTO THE REAR RIGHT SIDE OF MY TAXI.

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	PA9520L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name PHUA JOO HIANG

Approximate Age

Injuries Sustain

Injured person in which vehicle? SHB7893M

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN


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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:



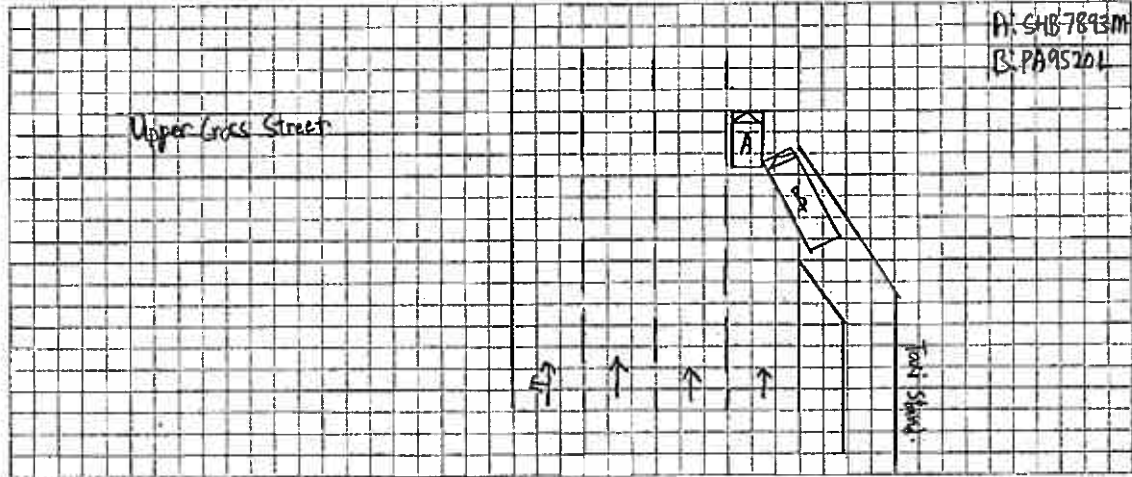
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to GIA 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:

NRIC/FIN No.:

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:

Company

3878K

Vehicle No.:

SHB7893M

Yes

03 Oct 2018

CHEVROLET

EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO

Red

2011

Z20S1457568K

KL1LA69RJBB108889

110.0 kW (147 bhp)

\$13,971.00

31 Dec 2012

31 Dec 2012

0

\$13,971.00

PARF Eligibility:

Yes

30 Dec 2020

\$9,779.00

COE Expiry Date:

30 Dec 2020

A - Car (1600cc & below)

8

\$56,733.00

\$15,879.00

\$25,658.00

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.

OK