

KH/ KL
Ruth chun

CC3/AXA/3012663/HIP²
CC3/AXA/3012663/HIP²

ASSIGNMENT

Assignee: Harry DOI: 12-7-13 Assign Date: 12-7-13



Assigned Vehicle No: SJA 9393H
Name of Insured: Rob Choo Koo
Insured Tel No: 9118 4513
Excess Sec II SS: 0.00
Is driver the owner? ☒ YES / NO: N/A
Nature of Accident: N/A

Claim No: 0275392
Policy No: P072415
Make/Model: Toyota
Place of Accident: Along SE 2nd St

UIC: Driver Name / Age: _____
Tel: Tel No: _____
UIC: Report: ☒ YES / NO: UIC: Report: ☒ YES / NO
Final? Yes / No: _____



INSRS
WSP: COOLBY
Tel: _____
Reliability: _____
RMCS: _____



INSRS
WSP: _____
Tel: _____
Reliability: _____
RMCS: _____



INSRS
WSP: _____
Tel: _____
Reliability: _____
RMCS: _____

URGENT
URGENT

| Date/Time | FOR CSO ONLY: | STAGE | DATE/TIME |
|-----------|---------------------------------|---------------------------|-----------|
| | Is driver the owner? (YES / NO) | Initiation | |
| | If NO, Driver Name / Age | Initial AIG for OI/GIA | |
| | Driver's Own Vehicle Number | Apt letter to OI | |
| | Insurance Company | Call OI | |
| | | After call to OI | |
| | | Type Report | |
| | | Prepare Invoice | |
| | | Others | |
| | | Documentation Check List: | |
| | | Handler | Typist |
| | | OI Apt Ltr | |
| | | Authorisation To Act | |
| | | Release Voucher | |
| | | Final Repair Bill | |
| | | Car Rental Invoice | |
| | | ETA / GIA | |
| | | Medical Bill | |
| | | Approval Email | |
| | | Payment Breakdown Form | |
| | | Others | |

4/10/13 11:45am called OI. OI not free to talk. Request to call him back on Monday (4/10/13)

4/10/13 10:10am called OI. Not pick up

4/10/13 10:20am called OI. OI admit involved in crash & c. OI was the last veh. But OI insist that IT had hit into the front vehicle before he hit him. OI only responsible for rear portion. Inform him we will seek further instruction from AXA & revert to him @ 4:30pm

4/10/13 Seeking instruction from AXA

Try to avoid crash - CSO

16/10/2013 5:30pm Called OI, info OI out (SE instruction). OI mentioned Ruth will look into the matter and revert to OI. to Email Ruth.

File pass to Dim Sum to Ruth (Compensation)

| | | |
|-------------------------|---------------------------------|---|
| FINAL SETTLEMENT | Date: <u>15/11/13</u> | Confirm with: <u>Alison</u> |
| Repair Cost: <u>W/H</u> | SS <u>20768.91</u> | Final Liability: <u>100%</u> (Agreed / Assessed) |
| Loss of Rental: | SS <u>1423.10</u> (14 days) | X <u>101.65</u> |
| Loss of Use: | SS <u>700.00</u> (50 x 14 days) | |
| Disbursement: | SS <u>5.35</u> | |
| Total: | SS <u>22897.36</u> | Global Sum: SS <u>22800.00</u> |
| | | BOIA S/N No: <u>28</u> |
| | | If NO or B 28, Ass. Ltr: <u>100%</u> |
| | | <u>#350-#250</u> |
| | | <u>#22800.00 - Comfort Design Engineering Pte Ltd</u> |

(25/05/03)

ASS REC. BY:

REF:

ASSIGNMENT

From: AXA Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No: _____

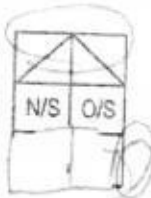
Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / P/R Seen: _____ Consistent? : Yes or No

Est. Repairs: 14 days Res.: Yes or NoLum Sum: 7/8 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Vehicle IN / OUT

Person Contacted: _____

Date / Time Action / Instruction

2/8/13 Survey K. Resury Photo uploaded

Finalised amt R/P \$19410.20 with 14 days with Tumari.

(Ref # 7867096 / 67%)

Veh No: SHD 40317 Yr Regn: 01 17012

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

Truck / Trailer or AMake: Hyundai Santa C.C. 1991Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 163073 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHET412MCA 820784Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/60R16R: W

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

TOYO / YOKO or Westlake

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 10/7/13 D.O.L. 12/7/13Survey held at IDGE Layan

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

Frt & Rear

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

Date/Time, File Pass to?

Date/Time, File Return to?

1)

2)

3)

4)

5)

6)

Print Report

Fax Report

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic & Add.

S + RS, SI

Photos

Others

TOTAL

Status of Driving Licence

Licence Number: S7209347Z

Status of Driving Licence: Valid

Classes of Licence: 2A,2B,3

Expiry Date: Valid for life unless revoked, suspended or disqualified.

The above information is accurate as at 19/07/2013 12:01 AM

[Print](#) [Back](#)

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 Authorized 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 11/07/2013 15:06
Date Of Accident 10/07/2013 18:00
Exact Location Of Accident SLE(TPE) B4 MANDAI AVE EXIT

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD4031T
Insured/Policyholder
Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD
Co Reg No 199303821R

Vehicle Particulars

Manufacturer HYUNDAI
Model SONATA-2.0 (A)

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 India International Insurance Pte Ltd
Type Of Coverage Third Party Fire and/or Theft
Fleet Policy Yes
Policy Number MCOM0015
Cover Note Number

Driver

Name of Driver KOH KEE CHEONG
NRIC No S0130901C
Date Of Birth 22/12/1954
Occupation Outdoor
Date Of Driving Pass 17/09/1980
Driving Experience 32 Years And 9 Months
Gender Male

Mobile Number

Fax Number

Contact Number

E-Mail Address NOEMAIL

Address BLK 218 MARSILING CRESCENT
#05-37

Postcode 730218

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 Collision- Chain Collision
Weather Conditions Clear
Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No
Was any body injured in the Accident? Yes
Was any other material or property damaged? Yes
Was there any video captured by Car Camera? No

Details of Police Action

Was the accident reported to the police? Yes
If Yes Please state which Police Station
Police Station Name Yishun North Neighbourhood Police Centre
Police Station Address ROAD 31 Yishun Central POSTCODE: 768827 COUNTRY: Singapore
Police Station Contact TEL NO 1800-8529999 - FAX NO 68522299
Was notice of intended Prosecution given? No
If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT NO: T/20130710/4187
Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJA9393H
Vehicle Make/Model/Colour TOYOTA
Details Of Properties
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number 91689393
Address
Postcode
Insurance Company Name AXA Insurance Singapore Pte Ltd
Nature Of Damage FRONT
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKH3452L
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number 96961148
Address
Postcode

Insurance Company Name
Nature Of Damage FRONT & REAR
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJM9111S
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number 97933966

Address
Postcode

Insurance Company Name
Nature Of Damage FRONT & REAR
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SFX6753Z
Vehicle Make/Model/Colour NISSAN
Details Of Properties
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number

Address
Postcode

Insurance Company Name
Nature Of Damage FRONT & REAR
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SCN2223B
Vehicle Make/Model/Colour NISSAN TEANA
Details Of Properties
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number

Address
Postcode

Insurance Company Name
Nature Of Damage FRONT & REAR

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number SJT27528

Vehicle Make/Model/Colour HONDA

Details Of Properties

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage FRONT & REAR

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 7

Vehicle Registration Number SJB6671J

Vehicle Make/Model/Colour MITSUBISHI

Details Of Properties

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage REAR

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name KOH KEE CHEONG

Approximate Age 59

Injuries Sustain CHEST

Injured person in which vehicle? SHD4031T

Were seat belts worn? Yes

Was injured conveyed to hospital by ambulance? Yes

Address BLK 218 MARSILING CRESCENT
#08-37

Postcode 730218

DETAILS OF INJURED PERSON 2

Name TONG KIM WEI (PAX)

Approximate Age

Injuries Sustain MOUTH, CHEST
Injured person in which vehicle? SHD4031T
Were seat belts worn?
Was injured conveyed to hospital by ambulance? Yes
Address
Postcode

DETAILS OF INJURED PERSON 3

Name UNKNOWN (DRIVER)
Approximate Age
Injuries Sustain UNSURE
Injured person in which vehicle? SKH3452L
Were seat belts worn?
Was injured conveyed to hospital by ambulance? Yes
Address
Postcode

SKETCH PLAN

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 willful 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 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.

Sketch Plan

| | |
|-----------------------------|-------------|
| (A) | A: 34D4031T |
| ← H ← G ← F ← E ← T ← A ← B | B: 8JH9393H |
| ← | C: 3KH3452L |
| ← | D: 5JM9111S |
| ← | E: SFX6753Z |
| ← | F: 5CN2223B |
| ← | G: 5JT2223B |
| ← | H: 5JB6871J |

OLE (TPE) B4 Manda Ave Exit

Describe Circumstances of the Accident

As per police report no:

T/2013 0710/4187

Declaration

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199302201R

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20130710/4187

1 of 4

✓ Report No. T/20130710/4187

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 10/07/2013 22:12 | Vide Report No.: | Station Diary No.: 94 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | | | |
|--|------------|------------------------------|--|--|----------------------------|
| Name of Informant: KOH KEE CHEONG | | | Address: APT BLK 218 MARSILING CRESCENT #08-37 SINGAPORE 730218 | | |
| ID Type / ID No.: NRIC NO / S0130901C | | | Contact No.: Home/Office: Mobile/Pager: 94384075 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 59 | Date of Birth: 22/12/1954 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: Taxi Driver | | | Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|------------------|------------------------------------|--|---|
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 10/07/2013 18:00 | Type of Location: Straight Road |
| Location: Along Road 1 Traveling Toward Road 2 SELETAR EXPRESSWAY MANDAI AVENUE Along SLE towards Mandai Avenue (Before Mandai Avenue) | | | | |
| 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 Rear | | | | Anyone conveyed by ambulance: Yes |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Color | Condition | No of Passenger | Insurance Company | Insurance No | Effective Date | Expiry Date |
|-------------|------|----------|-------|-------------------|-----------------|-------------------------------------|--------------|----------------|-------------|
| SCN2223 B | | | | | 0 | | | | |
| SFX6753Z | | | | | 0 | | | | |
| SHD4031 T | Taxi | HYUND AI | Blue | Seriously Damaged | 1 | Wah International Insurance Pte Ltd | MC000005 | 01/01/2012 | 31/12/2014 |
| SJA9393H | | | | | 0 | | | | |

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20130710/4187

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Report No. T/20130710/4187

CONTINUATION OF REPORT

| Details of Vehicle Involved | | | | | | | | | |
|-----------------------------|------|------|-------|-----------|-----------------|-------------------|--------------|----------------|-------------|
| Vehicle No. | Type | Make | Color | Condition | No of Passenger | Insurance Company | Insurance No | Effective Date | Expiry Date |
| SJB6871J | | | | | 0 | | | | |
| SJM9111S | | | | | 0 | | | | |
| SJT2752B | | | | | 0 | | | | |
| SKH3452 L | | | | | 0 | | | | |

| Details of Person Involved | | | |
|--|-------------------------|--|---|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | KOH KEE CHEONG | ID No. | S0130901C |
| Related Vehicle | SHD4031T (Taxi) | Contact No. | 94384075 |
| Hospital/Clinic | KHOO TECK PUAT HOSPITAL | Class of Driving Licence & Expiry Date | Class: 2B,2A,2,3 Date of Expiry: NIL |
| Date Treatment | 10/07/2013 | Date Discharge | 10/07/2013 |
| No. of Days granted Medical Leave (MC) | 07 | Degree of Injury | Fracture |
| Passenger | | | |
| Name | TONG KIM WEI | ID No. | S9045087E |
| Related Vehicle | SHD4031T (Taxi) | Contact No. | 96719704 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |

Sketch Plan Pg.4

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20130710/4187

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Report No. T/20130710/4187

CONTINUATION OF REPORT

| | | | |
|--|----------------|--|---|
| Driver | | | |
| Name | Unknown Driver | | ID No. NIL |
| Related Vehicle | SJA9393H | | Contact No. 91689393 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge NIL |
| No. of Days granted Medical Leave (MC) | NIL | | Degree of Injury NIL |
| Driver | | | |
| Name | Unknown Driver | | ID No. NIL |
| Related Vehicle | SJM9111S | | Contact No. 97933966 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge NIL |
| No. of Days granted Medical Leave (MC) | NIL | | Degree of Injury NIL |
| Driver | | | |
| Name | Unknown Driver | | ID No. NIL |
| Related Vehicle | SKH3452L | | Contact No. 96961148 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge NIL |
| No. of Days granted Medical Leave (MC) | NIL | | Degree of Injury NIL |

Brief Details.

On 10/07/2013 at about 1800hrs, I was driving my company taxi SHD4031T on the extreme right lane along SLE towards Mandai Avenue (before Mandai Avenue & after Woodlands Avenue 2) and was travelling in front of one vehicle SKH3452L. Suddenly the vehicle SKH3452L slowed down and it suddenly stopped. I had also heard some vehicle collision noises, therefore I slowed down to avoid any contact with the front vehicle. Before my vehicle come to a stop, there is one vehicle SJA9393H which was travelling behind my vehicle and it hit onto the rear portion of my vehicle causing it surge forward; therefore my vehicle hit onto the front vehicle SKH3452L. There is a total of 8 vehicles involved which includes my vehicle and it took place on the extreme right lane of SLE. After the incident, I was conveyed by ambulance to Khoo Teck Puat hospital and was given 7 days of outpatient leave from 11th - 17th July 2013.

Sketch Plan Pg.5

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20130710/4187

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Report No. T/20130710/4187

CONTINUATION OF REPORT

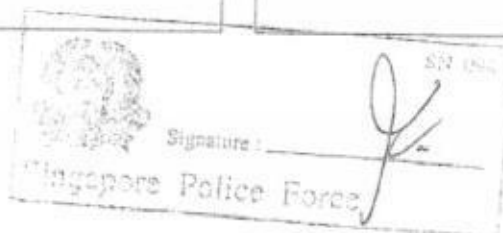
Sketch Plan

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 / LAU JIXIANG | Signature Of Informant: |
| Signature Of Interpreter: Not applicable | Date: 10/07/2013 22:12 |
| Officer In Charge Of Case: TP / Contact No.: 6547 0000 | Classification Of Case: |

Authentication Stamp
NP168



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 | 11/07/2013 17:25 |
| Date Of Accident | 10/07/2013 18:00 |
| Exact Location Of Accident | ALONG SLE TWDS CTE |

DETAILS OF OWN VEHICLE

| | |
|--|----------------------|
| Vehicle Registration Number | SJA9393H |
| Insured/Policyholder | |
| Name Of Registered Owner | KOH CHEE KIANG |
| NRIC No | S7209347Z |
| Vehicle Particulars | |
| Manufacturer | TOYOTA |
| Model | ESTIMA-2.4 AERAS (A) |
| 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? | Yes |
| If No, Please state action to be taken | |
| Vehicle Category | Private Car |

Insurance Company

| | |
|---------------------------|---------------------------------|
| Name of Insurance Company | AXA Insurance Singapore Pte Ltd |
| Type Of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | P0724115 |
| Cover Note Number | |

Driver

| | |
|--|----------------------------------|
| Name of Driver | KOH CHEE KIANG |
| NRIC No | S7209347Z |
| Date Of Birth | 12/03/1972 |
| Occupation | Indoor |
| Date Of Driving Pass | 26/09/1997 |
| Driving Experience | 15 Years And 9 Months |
| Gender | Male |
| Mobile Number | (Local) +65-91689393 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |
| Address | BLK 527 HOUGANG AVE 6 #08-217 |
| Postcode | 530527 |
| Was driver an employee of the Insured's Company | No |
| If No, Relationship of the Driver with the Insured | Owner |

| | |
|---|---|
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|----------------------------|
| Type Of Accident | Collision- Chain Collision |
| 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 |
| Was there any video captured by Car Camera? | Yes |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | Yes |
| If Yes, Please state which Police Station | |
| Police Station Name | Hougang Neighbourhood Police Centre |
| Police Station Address | ROAD: 60 Hougang Ave 9 , POSTCODE: 538775 , COUNTRY: Singapore |
| Police Station Contact | TEL NO: 1800-4890999 - FAX NO: 63128989 |
| Was notice of intended Prosecution given? | No |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO THE POLICE REPORT T/20130711/4107

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
|---|-----|

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-------------------------------------|----------|
| Vehicle Registration Number | SHD4013T |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Name of Driver | MR KOH |
| NRIC/Passport Number | |
| Contact Number | 94384075 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

Details of Witness

| | |
|---------------|--|
| Name | |
| Phone Number | |
| Email Address | |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SKH3452L |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Name of Driver | MR MAK |
| NRIC/Passport Number | |
| Contact Number | 96961148 |
| Address | |
| Postcode | |

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJM9111S

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver MR KOH

NRIC/Passport Number

Contact Number 97933966

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SFX6753Z

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver MR TAN

NRIC/Passport Number

Contact Number 81276005

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SCN2223B

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver DANIEL

NRIC/Passport Number

Contact Number 97903066

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number SJT2752B

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver WAHIDAH

NRIC/Passport Number

Contact Number 97472105

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 7

Vehicle Registration Number SJB6871J

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver JOHNSON

NRIC/Passport Number

Contact Number 90037888

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

**SKETCH PLAN****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 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 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.

Sketch Plan

| | | | |
|---------------|---------------|---------------|--------------|
| A = SJA9393H | C = SKH3452L | E = SFX 6753Z | G = S3T2752B |
| B = SHD 4031T | D = SJM 9111S | F = SCN 2228B | H = SJB6871J |

Describe Circumstances of the Accident

| |
|--|
| refer to the police report T/20130711/4107 |
| |
| |
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| |
| |
| |
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| |
| |

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

Witnessed by Reporting Centre Personnel

NOTE: PLEASE NOTE YOUR INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. KINDLY CHECK YOUR POLICY FOR MORE INFORMATION.

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



T/20130711/4107

1 of 5

Report No. T/20130711/4107

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|---|--|----------------------------|
| Date/Time Report Made: 11/07/2013 16:38 | | | Vide Report No.: | | Station Diary No.: 67 |
| Informant's Particulars | | | | | |
| Name of Informant: KOH CHEE KIANG | | | Address: APT BLK 527 HOUGANG AVENUE 6 #08-217 SINGAPORE 530527 | | |
| ID Type / ID No.: NRIC NO / S7209347Z | | | Contact No.: Home/Office: Mobile/Pager: 91689393 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 41 | Date of Birth: 12/03/1972 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: Sales Manager | | | Driving Licence Information: Class: 2B,2A,3 | | Date of Expiry: |

| | | | | |
|---|------------------|------------------------------------|--|-------------------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 10/07/2013 18:00 | Type of Location: Straight Road |
| Location: Along Road 1 Traveling Toward Landmark SELETAR EXPRESSWAY CENTRAL EXPRESSWAY | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: | | Traffic Control: Not Controlled | | Traffic Volume: Moderate |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: No |

| Details of Vehicle Involved | | | | | | | | | |
|-----------------------------|------|--------|------------|-------------------|-----------------|-------------------------|---------------|----------------|-------------|
| Vehicle No. | Type | Make | Color | Condition | No of Passenger | Insurance Company | Insurance No | Effective Date | Expiry Date |
| SCN2223 B | Car | NISSAN | Dark Grey | Seriously Damaged | 0 | | | | |
| SFX6753Z | Car | NISSAN | Red | Seriously Damaged | 0 | | | | |
| SHD4031 T | Car | | Blue | Seriously Damaged | 1 | | | | |
| SJA9393H | Car | TOYOTA | Mid Silver | Slightly Damaged | 1 | AXA Insurance Singapore | VPA/P07 24115 | 12/11/2012 | 11/11/2013 |

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



T/20130711/4107

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Report No. T/20130711/4107

CONTINUATION OF REPORT

| Details of Vehicle Involved | | | | | | | | | |
|-----------------------------|------|-------------|-------|-------------------|-----------------|-------------------|---------------|----------------|-------------|
| Vehicle No. | Type | Make | Color | Condition | No of Passenger | Insurance Company | Insurance No. | Effective Date | Expiry Date |
| SJA9393H | Car | TOYOTA | | | | Pte Ltd | | | |
| SJB6871J | Car | MITSUBI SHI | White | Slightly Damaged | 3 | | | | |
| SJM9111S | Car | JAGUAR | Black | Seriously Damaged | 0 | | | | |
| SJT2752B | Car | HONDA | Black | Seriously Damaged | 0 | | | | |
| SKH3452 L | Car | MAZDA | White | Seriously Damaged | 0 | | | | |

| Details of Person Involved | | | |
|--|----------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | Daniel | ID No. | NIL |
| Related Vehicle | SCN2223B (Car) | Contact No. | 97903066 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Mr Tan | ID No. | NIL |
| Related Vehicle | SFX6753Z (Car) | Contact No. | 81276005 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |

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



T/20130711/4107

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Report No. T/20130711/4107

CONTINUATION OF REPORT

| | | | |
|--|----------------|--|---------------------------------------|
| Driver | | | |
| Name | Mr Koh | ID No. | NIL |
| Related Vehicle | SHD4031T (Car) | Contact No. | 94384075 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | KOH CHEE KIANG | ID No. | S7209347Z |
| Related Vehicle | SJA9393H (Car) | Contact No. | 91689393 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 2B,2A,3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Johnson | ID No. | NIL |
| Related Vehicle | SJB6871J (Car) | Contact No. | 90037888 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Mr Kok | ID No. | NIL |
| Related Vehicle | SJM9111S (Car) | Contact No. | 97933966 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |

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



T/20130711/4107

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Report No. T/20130711/4107

CONTINUATION OF REPORT

| | | | |
|--|----------------|--|-----------------------------------|
| Driver | | | |
| Name | Wahidah | ID No. | NIL |
| Related Vehicle | SJT2752B (Car) | Contact No. | 97472105 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Mr Mak | ID No. | NIL |
| Related Vehicle | SKH3452L (Car) | Contact No. | 96961148 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave (MC) | NIL | Degree of Injury | NIL |

Brief Details.

On 10/07/2013 at about 1800hrs, I was driving my vehicle, one mid-silver colour Toyota car bearing registration plate number SJA9393H, along SLE towards CTE on the most right lane. One blue colour taxi bearing registration plate number SHD4031T had then overtook me from the left lane without signalling. I therefore took precaution and tried to maintain a safe distance from the taxi. The next moment, the taxi stop suddenly as he had collided into the white colour Mazda bearing registration plate number SKH3452L, in front of him. I had then immediately applied emergency brake and had managed to control my vehicle and had only hit slightly on the rear right of the taxi.

After which, I alighted and realized that I was involved in a chain accident consisting of eight vehicles, including mine. We had then exchanged our particulars and I am not sure if anyone was conveyed to hospital. However, the female Chinese passenger in the taxi in front of my vehicle was bleeding from her gum. Whereas, the rest of us were not injured. My vehicle front bumper and headlight were damaged.

This is the first time such incident happened. There was no ambulance nor police at scene when I left the scene. I am lodging this report as I had received a call from TP IO Officer Irmanz HP: 65476365 on 10/07/2013 at about 2135hrs and he had informed me to lodge a Traffic Accident Report at any nearest police station.

There is a CCTV installed in my vehicle and the footage showed that the taxi had hit the vehicle SKH3452L and skidded to the left side. The footage had further captured that the female passenger of the taxi had the impact before I collided into the taxi.

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



T/20130711/4107

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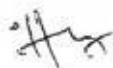

Report No. T/20130711/4107

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 / BOON HUI TING  | Signature Of Informant:  |
| Signature Of Interpreter: Not applicable | Date: 11/07/2013 16:38 |
| Officer In Charge Of Case: TP / Contact No.: | Classification Of Case: |

Authentication Stamp



Accident Photo



Accident Photo



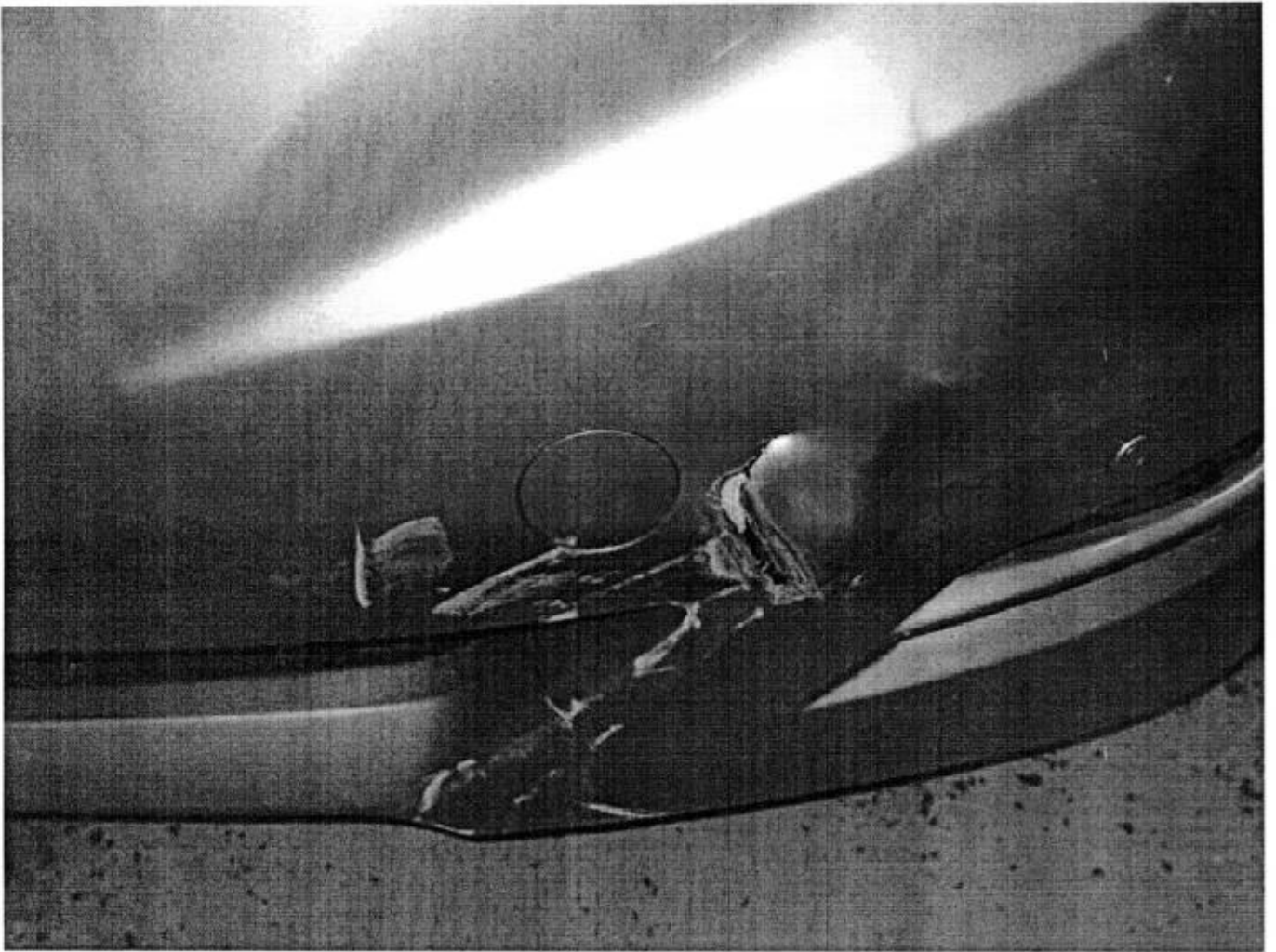
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE
138 Robinson Road #07-09
The Corporate Office
Singapore 068906
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm

ADDENDUM


(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS

Original Report No: 13081794 Vehicle Registration No: SJA9393H
Name(as shown in NRIC): Koh Chee Kiang
(*Vehicle Driver/Vehicle Owner) (*Please delete as appropriate)
NRIC/Passport No: S72093472
Address: _____
Contact (Tel): _____ (H/P): 91689393
(Email): _____
Date Of Accident: 10/7/13 Time Of Accident: 18:00
Place Of Accident: Aloft SLE TWDS CTE
Insurance Company: AXA

(B) ADDITIONAL INFORMATION / AMENDMENTS

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:-

Addendum reporting info OD


SIGNATURE OF VEHICLE OWNER/DRIVER
DATE: _____

REPAIR ESTIMATE*

DATE 12.07.13

MODEL. : HYUNDAI SONATA

240

SHD 4031T

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|--|--|------|------------|---------------------|
| | Labour Charge | | | |
| | Panel Beating | | | \$ 1,200.00 1400 ✓ |
| | Spray Painting Charge | | | \$ 400.00 360 ✓ |
| | Wiring Charge | | | \$ 50.00 x |
| | Tuff Kote | | | \$ 100.00 30 ✓ |
| | Towing Charge | | | \$ 50.00 -1 |
| | Remove/Refix Cushion & Upholstery Rear | | | \$ 150.00 80 ✓ |
| | Remove/Refix Rear Windscreen Glass | | | \$ 120.00 x |
| | Remove/Refix Undercarriage (RR) | | | \$ 300.00 20 ✓ |
| | Rear Wheel Alignment | | | \$ 80.00 60 x |
| | TOTAL LABOUR | | | \$ 2,450.00 1040.00 |
| | ESTIMATE TOTAL | | | \$ 7,546.40 |
| | | | | 7646.40 |
| <p>Rear only: A1812.24 3days</p> <p>Front only: \$1675.50 11days</p> <p>17397.96</p> | | | | |
| 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*

VEHICLE NO : SHD 4031T

DATE 12.07.13

MAKE

MODEL : HYUNDAI SONATA

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|-----|--|------|------------|-------------|
| | Bonnet <i>Buc</i> | | | \$ 1,001.60 |
| | Bonnet Rubber (LH) <i>svc</i> | | | \$ 15.70 |
| | Bonnet Hinge (LH/RH) <i>bent</i> | | \$ 76.10 | \$ 152.20 |
| | Bonnet Moulding <i>cra</i> | | | \$ 105.20 |
| | Bonnet Lock <i>bent</i> | | | \$ 42.40 |
| | Bonnet Absorber (LH Only) <i>svc</i> | | | \$ 61.60 |
| | Bonnet Insulator <i>deform</i> | | | \$ 202.50 |
| | Bonnet Seal <i>an</i> | | | \$ 31.90 |
| | Bonnet Insulator Clips <i>rec</i> | | | \$ 7.00 |
| | Bonnet Cable <i>svc</i> | | | \$ 39.60 |
| | Radiator Grille <i>cra</i> | | | \$ 245.30 |
| | Radiator Grille U Moulding <i>cra</i> | | | \$ 94.70 |
| | Front Bumper Cover <i>cra</i> | | | \$ 468.60 |
| | Front Bumper Sponge <i>cra</i> | | | \$ 118.50 |
| | Front Bumper Reinforcement <i>Bent</i> | | | \$ 438.40 |
| | Front Bumper Centre Grille <i>cra</i> | | | \$ 114.00 |
| | Front Bumper Lip <i>svc</i> | | | \$ 52.10 |
| | Front Bumper Protector (LH/RH) <i>RH cra, LH svc</i> | | \$ 25.40 | \$ 50.80 |
| | Front Bumper Bracket (LH/RH) <i>cra</i> | | \$ 17.50 | \$ 35.00 |
| | Front Bumper Side Bracket <i>cra</i> | | \$ 4.60 | \$ 9.20 |
| | Headlamp Support Panel Assy <i>cra</i> | | | \$ 889.60 |
| | Headlamp (LH/RH) <i>cra</i> | | \$ 693.80 | \$ 1,387.60 |
| | Headlamp Halogen Bulb (LH/RH) <i>LH svc, RH rec</i> | | \$ 12.00 | \$ 24.00 |
| | Radiator <i>bent</i> | | | \$ 708.50 |
| | Radiator Fan Blade, Cowling, Motor Assy <i>cra</i> | | | \$ 566.40 |
| | Radiator Hose Upper <i>svc</i> | | | \$ 39.50 |
| | Radiator Hose Lower <i>svc</i> | | | \$ 39.50 |
| | Radiator Expansion Tank <i>cra</i> | | | \$ 40.00 |
| | Horn Unit (LH/RH) <i>LH svc, RH dented</i> | | \$ 72.30 | \$ 144.60 |
| | Horn Wire <i>svc</i> | | | \$ 130.40 |
| | Front Fender (RH) <i>Buc</i> | | | \$ 515.80 |
| | Front Fender Apron Panel (RH) <i>Buc</i> | | | \$ 637.00 |
| | Front Fender Shield (RH) <i>torn</i> | | | \$ 74.80 |
| | Front Fender Mudflap (RH) <i>cra</i> | | | \$ 13.50 |
| | Front Fender Signal Lamp (RH) <i>svc</i> | | | \$ 39.50 |
| | Front Fender Retainer (RH) <i>cra</i> | | | \$ 3.00 |
| | Air Cleaner Assy <i>svc</i> | | | \$ 107.00 |
| | Air Duct <i>deform</i> | | | \$ 171.70 |
| | Air Flow Sensor <i>svc</i> | | | \$ 527.80 |
| | Resonator Tank Hose <i>svc</i> | | | \$ 218.30 |
| | Aircon Sensor Pressure - Suc/Lic <i>svc</i> | | | \$ 203.40 |
| | Aircon Condenser <i>Bent</i> | | | \$ 947.80 |
| | Aircon Receiver <i>repeat</i> | | | \$ 59.60 |
| | Aircon Suction & Liquid Hose <i>Bent</i> | | | \$ 549.10 |

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|-----|--|------|------------|--------------|
| | Aircon Discharge Hose <i>bent</i> | | | \$ 194.40 |
| | Aircon Blower Motor <i>svc</i> | | | \$ 218.50 |
| | Aircon Compressor <i>dented</i> | | | \$ 2,381.30 |
| | Battery Tray <i>crn</i> | | | \$ 46.20 |
| | Battery Stay <i>svc</i> | | | \$ 17.40 |
| | Rocker Panel Outer Garnish <i>crn</i> | | | \$ 403.00 |
| | Wiper Panel Top Garnish <i>svc</i> | | | \$ 76.00 |
| | Wiper Link <i>svc</i> | | | \$ 355.00 |
| | Wiper Container <i>crn</i> | | | \$ 51.60 |
| | Wiper Container Motor <i>crn</i> | | | \$ 54.90 |
| | Front Shock Absorber (Assy) (LH/RH) <i>nn</i> | | \$ 177.20 | \$ 354.40 |
| | Front Shock Absorber Mounting (LH/RH) <i>nr</i> | | \$ 62.60 | \$ 125.20 |
| | Front Suspension Upper Arm (LH/RH) <i>RH distorted, HSSC</i> | | 208.70 | \$ 417.40 |
| | Rack & Pinion Assy <i>svc</i> | | | \$ 1,820.00 |
| | STG Tie Rod (LH/RH) <i>svc</i> | | \$ 135.00 | \$ 270.00 |
| | STG Tie End (LH/RH) <i>svc</i> <i>nn</i> | | \$ 57.90 | \$ 115.80 |
| | Stabilizer Bar <i>svc</i> | | | \$ 185.40 |
| | Stabilizer Bar Bush (LH/RH) <i>svc</i> | | \$ 11.20 | \$ 22.40 |
| | Stabilizer Bar Link (LH/RH) <i>svc</i> | | \$ 68.10 | \$ 136.20 |
| | Front Suspension Lower Arm (LH/RH) <i>nn</i> | | \$ 595.90 | \$ 1,191.80 |
| | Knuckle Arm (LH/RH) <i>nn</i> | | \$ 485.80 | \$ 971.60 |
| | Knuckle Arm Bearing (LH/RH) <i>nn</i> | | \$ 106.20 | \$ 212.40 |
| | Engine Mounting <i>crn</i> | | | \$ 401.60 |
| | Engine Under Cover <i>svc</i> | | | \$ 285.90 |
| | Engine Mtg (Front) <i>crn</i> | | | \$ 196.10 |
| | Engine Mtg (Rear) <i>svc</i> | | | \$ 233.00 |
| | Power Steering Pump <i>jam</i> | | | \$ 628.50 |
| | Power Steering Tank <i>crn</i> | | | \$ 151.40 |
| | Power Steering Pressure Hose Assy <i>bent</i> | | | \$ 511.90 |
| | Power Steering Outlet Hose & Bracket <i>svc</i> | | | \$ 63.70 |
| | Power Steering Pipe Assy <i>bent</i> | | | \$ 63.70 |
| | Power Steering Pulley <i>dented svc</i> | | | \$ 56.80 |
| | ECU Bracket <i>svc</i> | | | \$ 68.10 |
| | ECU Unit <i>svc</i> | | | \$ 3,502.90 |
| | Oil Cooler - Tube Assy <i>bent</i> | | | \$ 222.60 |
| | Inter Cooler <i>bent</i> | | | \$ 670.90 |
| | Inter Cooler Mounting (4 PCS) <i>crn</i> | | \$ 21.60 | \$ 43.20 |
| | Hose B To Inter Cooler | | | \$ 191.40 |
| | Hose C To Inter Cooler Inlet | | | \$ 94.40 |
| | Pipe To Inter Cooler | | | \$ 139.20 |
| | Pipe To Inter Cooler Outlet | | | \$ 203.80 |
| | Controller (PWN) <i>svc</i> | | | \$ 431.20 |
| | Oil Cooles Assy <i>bent</i> | | | \$ 236.60 |
| | Turbo Charge <i>svc</i> | | | \$ 3,362.40 |
| | Wiring-Engine | | | \$ 2,771.70 |
| | Wiring-Front | | | \$ 1,634.00 |
| | Junction Box Assy | | | \$ 901.50 |
| | Inhibitor Switch | | | \$ 87.00 |
| | Engine Assy | | | \$ 23,800.00 |

SHD 4031T

| Qty | Parts Description/ Labour | Type | Unit Price | Amount | |
|--|---|------|------------|--------------|-----------|
| | Engine Top Cover <i>SVC</i> | | | \$ 321.70 | X |
| | Throttle Body Assy <i>SVC</i> | | | \$ 936.90 | X |
| | SUB TOTAL | | | \$ 63,157.70 | 16116.20 |
| | LESS 20% | | | \$ 12,631.54 | |
| | DISCOUNTED TOTAL | | | \$ 50,526.16 | 12892.86 |
| | Front Number Plate <i>N/C</i> | | | \$ 25.00 | Nett ✓ |
| | Front No Plate Trim Cover <i>CRN</i> | | | \$ 30.00 | Nett ✓ |
| | Front Fender Advertisement Logo (RH) <i>N/C</i> | | | \$ 100.00 | Nett ✓ |
| | New Battery <i>SVC</i> | | | \$ 180.00 | Nett X |
| | | | | \$ 335.00 | 135 |
| | Labour Charge | | | | |
| | Panel Beating | | | \$ 3,800.00 | 2000 ✓ |
| | Spray Painting Charge | | | \$ 1,000.00 | 900 ✓ |
| | Wiring Charge | | | \$ 50.00 | 30 ✓ |
| | Tuff Kote | | | \$ 300.00 | 80 ✓ |
| | Towing Charge | | | \$ 50.00 | X |
| | Front Chassis Alignment Charge | | | \$ 220.00 | 180 ✓ |
| | Remove/Refix Undercarriage (FRT) | | | \$ 400.00 | 3120 ✓ |
| | FRT Wheel Alignment | | | \$ 80.00 | 60 ✓ |
| | Remove/Refix Radiator | | | \$ 90.00 | 60 ✓ |
| | Remove/Refix Aircon & Refill Gas | | | \$ 130.00 | 100 ✓ |
| | Remove/Refix Engine (JX/SH) | | | \$ 600.00 | 200 ✓ |
| | Remove/Refix Dashboard | | | \$ 400.00 | 2X |
| | Remove/Refix Fuse Box | | | \$ 120.00 | 2X |
| | TOTAL LABOUR | | | \$ 7,240.00 | 3730 |
| | ESTIMATE TOTAL | | | \$ 58,101.16 | 66 552.86 |
| | 14 day PIP Get print photo LK Henry 97884060 12/27/13 1630 hrs PIP # 19410.20 14 days ✓ | | | | |
| 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. | | | | | |

[illegible]

COMFORTDELGRO ENGINEERING PTE LTD

Date: 29.07.2013

REPAIR ESTIMATE

Time: 09:30:21

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 304336086
 REGN NO : SHD4031T
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : SONATA
 DATE OF REGN : 12.01.2012
 DATE/TIME IN : 10.07.2013 18:00
 ACCIDENT DATE : 10.07.2013

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

| | | | | | | |
|------|-------------------|---------------------------|------|----------|-------|--------|
| 0001 | 04-01-0101-0021-G | RADIATOR GRILLE TOP MOULD | 1 | 105.20 | 20.00 | 84.16 |
| 0002 | 04-01-0101-0013-A | BONNET(T-SONATA)+ | 1 | 1,001.60 | 20.00 | 801.28 |
| 0003 | 04-01-0101-0028-G | LATCH ASSY-HOOD RH(3K910) | 1 L | 42.40 | 20.00 | 33.92 |
| 0004 | 04-01-0101-0044-G | BONNET INSULATOR(T-SONATA | 1 | 202.50 | 20.00 | 162.00 |
| 0005 | 04-01-0101-0110-G | CLIP BONNET INSULATOR(T-S | 10 L | 7.00 | 20.00 | 5.60 |
| 0006 | 04-01-0101-0009-G | MOULDING-FR CTR OTR(T-NF0 | 1 | 94.70 | 20.00 | 75.76 |
| 0007 | 04-01-0101-0012-G | ASSY-RADIATOR LWR(T-NF070 | 1 | 245.30 | 20.00 | 196.24 |
| 0008 | 04-01-0101-0003-A | COVER-FR BUMPER(T-NF0708) | 1 | 468.60 | 20.00 | 374.88 |
| 0009 | 03-01-0101-0004-G | ABSORBER-FR BUMPER ENERGY | 1 | 118.50 | 20.00 | 94.80 |
| 0010 | 04-01-0101-0011-A | BUMPER REINFORCEMENT FRT(| 1 | 438.40 | 20.00 | 350.72 |
| 0011 | 04-01-0101-0064-G | GRILLE-FR BUMPER(T-NF0708 | 1 | 114.00 | 20.00 | 91.20 |
| 0012 | 04-01-0101-0030-G | BRKT-FR BUMPER UPR SIDE M | 1 | 17.50 | 20.00 | 14.00 |
| 0013 | 04-01-0101-0029-G | BRKT-FR BUMPER UPR SIDE M | 1 | 17.50 | 20.00 | 14.00 |
| 0014 | 04-01-0101-0042-G | BRKT-FR BUMPER COVER RH(T | 1 | 4.60 | 20.00 | 3.68 |

COMFORTDELGRO ENGINEERING PTE LTD

Date: 29.07.2013

REPAIR ESTIMATE

Time: 09:30:21

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 304336086
 REGN NO : SHD4031T
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : SONATA
 DATE OF REGN : 12.01.2012
 DATE/TIME IN : 10.07.2013 1

3:00

ACCIDENT DATE : 10.07.2013

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

| | | | | | | |
|------|-------------------|---------------------------|-----|--------|-------|--------|
| 0015 | 04-01-0101-0037-G | BRKT-FR BUMPER COVER LH(T | 1 | 4.60 | 20.00 | 3.68 |
| 0016 | 04-01-0101-0024-G | MOULDING ASSY-FR BPR RH(T | 1 | 25.40 | 20.00 | 20.32 |
| 0017 | 04-01-0101-0015-G | CARRIER ASSY-FR END MODUL | 1 | 889.60 | 20.00 | 711.68 |
| 0018 | 04-01-0101-0026-A | HEADLAMP ASSY RH - W/SOCK | 1 | 693.80 | 20.00 | 555.04 |
| 0019 | 04-01-0101-0027-A | HEADLAMP ASSY LH - W/SOCK | 1 | 693.80 | 20.00 | 555.04 |
| 0020 | 09-01-0101-0004-G | HORN ASSY-LOW PITCH(SONAT | 1 L | 72.30 | 20.00 | 57.84 |
| 0021 | 04-01-0101-0017-A | FENDER FRONT RH(T-SONATA) | 1 | 515.80 | 20.00 | 412.64 |
| 0022 | 04-01-0101-0157-G | PANEL ASSY-FENDER APRON R | 1 | 637.00 | 20.00 | 509.60 |
| 0023 | 86812-3K500 | GUARD ASSY-FR WHEEL RH(T- | 1 | 74.80 | 20.00 | 59.84 |
| 0024 | 04-01-0101-0074-G | BUMPER RETAINER MOUNTING(| 1 | 3.00 | 20.00 | 2.40 |
| 0025 | 02-01-0101-0003-G | AIR DUCT(T-SONATA) | 1 L | 171.70 | 20.00 | 137.36 |
| 0026 | 04-01-0101-0071-G | TRAY ASSY-BATTERY(T-SONAT | 1 | 46.20 | 20.00 | 36.96 |