

CHUNNI MOTOR WORK PTE LTD**REPAIR ESTIMATE***

VEHICLE NO : SHC 7715P

DATE : 3.12.2018

MAKE :

TEL : 6542 5119

MODEL : HYUNDAI SONATA

FAX : 6542 6039

INDIA

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Radiator Grille			\$ 282.10	
	Radiator Grille U Moulding			\$ 108.90	
	Front Bumper Cover			\$ 538.80	
	Front Bumper Sponge			\$ 136.30	
	Front Bumper Reinforcement			\$ 504.10	
	Front Bumper Bracket Top (LH/RH)		\$ 22.40	\$ 44.80	
	Front Bumper Protector (LH/RH)		\$ 29.20	\$ 58.40	
	Front Bumper Bracket (LH/RH)		\$ 20.10	\$ 40.20	
	Headlamp Support Panel Assy			\$ 1,023.00	
	Headlamp (LH/RH)		\$ 797.90	\$ 1,595.80	
	Radiator			\$ 814.80	
	Radiator Fan Blade,Cowling,Motor Assy			\$ 651.30	
	Radiator Bracket		\$ 6.20	\$ 12.40	
	Aircon Condenser			\$ 1,089.90	
	Inter Cooler			\$ 771.50	
	Inter Cooler Mounting (2 PCS)			\$ 24.80	
	Wiring-ECM			\$ 3,107.80	
	SUB TOTAL			\$ 10,804.90	
	LESS 20%			\$ 2,160.98	
	DISCOUNTED TOTAL			\$ 8,643.92	
	Front Number Plate			\$ 25.00	Nett
	Front No Plate Trim Cover			\$ 30.00	Nett
				\$ 55.00	
	Labour Charge				
	Panel Beating			\$ 1,000.00	
	Spray Painting Charge			\$ 250.00	
	Wiring Charge			\$ 50.00	
	Towing Charge			\$ 50.00	
	Remove/Refix Dashboard			\$ 450.00	
	Remove/Refix Fuse Box			\$ 180.00	
	Remove/Refix Aircon & Refill Gas			\$ 150.00	
	TOTAL LABOUR			\$ 2,130.00	

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid			\$ 1,349.50
	Boot Lid Rubber			\$ 110.90
	Boot Lid Hinge (LH/RH)		\$ 170.60	\$ 341.20
	Boot Lid Lock Upper			\$ 132.10
	Boot Lid Lock Lower			\$ 30.30
	Boot Lid Sonata Plate			\$ 43.60
	Boot Lid Hyundai Plate			\$ 24.20
	Boot Lid 'H' Emblem			\$ 26.10
	Boot Lid CRDI Plate			\$ 22.70
	Boot Lid Lamp (LH/RH)		\$ 230.20	\$ 460.40
	Boot Lid Trimboard			\$ 165.40
	Boot Lid Trimboard Clips (11pcs)			\$ 11.00
	Rear Bumper			\$ 578.40
	Rear Bumper Reinforcement			\$ 483.30
	Rear Bumper Clip			\$ 22.00
	Rear Bumper Bracket			\$ 49.00
	Rear Bumper Sponge			\$ 137.40
	Rear Bumper Under Cover			\$ 185.80
	Rear Bumper Protector (LH/RH)		\$ 38.00	\$ 76.00
	Tail Lamp (LH/RH)		\$ 344.00	\$ 688.00
	Rear Panel			\$ 391.80
	Rear Panel Garnish			\$ 95.80
	Spare Tyre Holder			\$ 27.60
	Spare Tyre Panel			\$ 863.00
	Spare Tyre Panel Cushion			\$ 200.30
	Rear Towing Hook			\$ 135.30
	Member Assy- Rear Floor Centre			\$ 163.60
	Exhaust Pipe Insulator			\$ 56.10
	Exhaust Silencer			\$ 723.00
	Exhaust Pipe Hanger			\$ 56.10
	SUB TOTAL			\$ 7,649.90
	LESS 20%			\$ 1,529.98
	DISCOUNTED TOTAL			\$ 6,119.92
	Boot Lid City Cab Logo & Tel No Sticker			\$ 30.00
	Labour Charge			
	Panel Beating			\$ 1,400.00
	Spray Painting Charge			\$ 1,000.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Remove/Refix Exhaust Pipe			\$ 150.00
	TOTAL LABOUR			\$ 2,650.00
	ESTIMATE TOTAL			\$ 19,628.84
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 person Surveyor appointed by the insurance company.				

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 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. 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	03/12/2018 14:28
Date Of Accident	01/12/2018 22:45
Exact Location Of Accident	CTE TOWARDS ANG MO KIO BEFORE BRADDELL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7715P
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	SONATA
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	
Driver	
Name of Driver	LEE CHONG ENG
NRIC No	S0063299F
Date Of Birth	08/02/1953
Occupation	OUTDOOR
Date Of Driving Pass	09/07/1975
Driving Experience	43 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83897493
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 533 BEDOK NORTH STREET 3 #12-762
Postcode	460533
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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)	2
Passenger 1	NAME: : - 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

PLS REFER TO ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH8143B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM TAH GUAN
NRIC/Passport Number	
Contact Number	90596789
Address	
Postcode	
Insurance Company Name	INDIA INTERNATIONAL INSURANCE PTE LTD
Nature Of Damage	FRT

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJX6628E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SHENG YANG
NRIC/Passport Number	S8012705G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	

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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.

CITYCAB PTE LTD
CO. REG. NO. 199502839G

Policyholder's Signature
Date & Time:

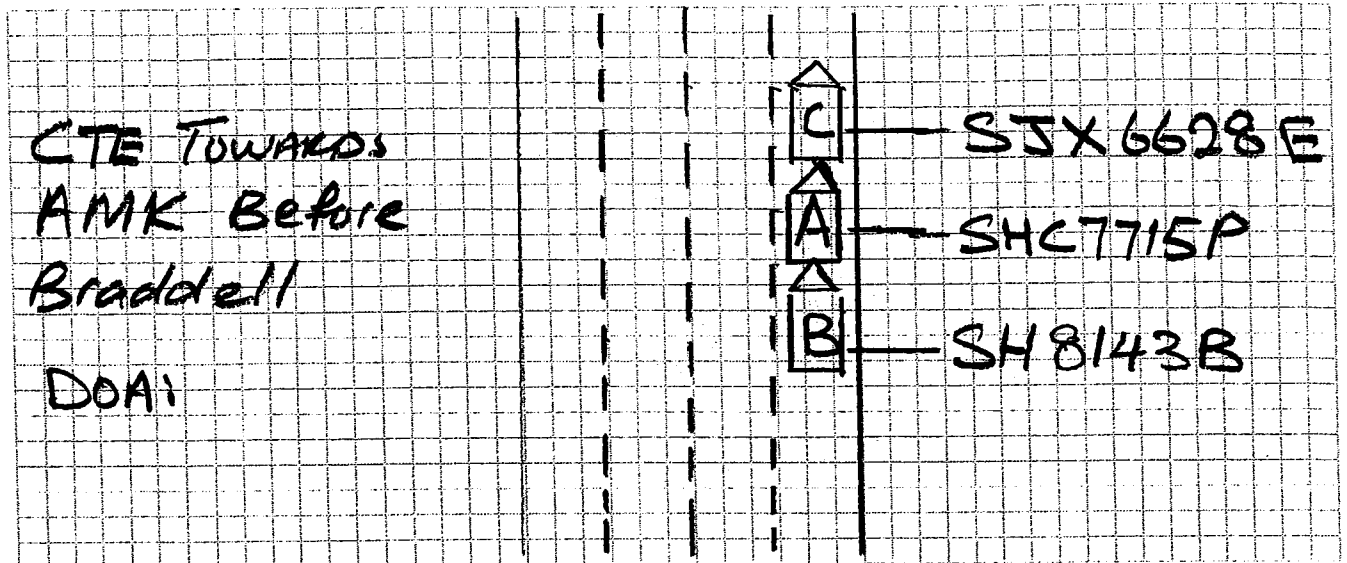


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Fauzy

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/2/18 @ 2245hr, I was driving along CTE towards ANG Mo Kio before Braddell on extreme right lane. Suddenly Front Vehicle Apply brake and stop and I follow apply brake and stop. A few second later Suddenly Vehicle (B) SH 8143 B hit my taxi on the rear portion Cause my taxi Jerk Forward and hit Vehicle (C) SJX 6628 E on the rear.

There is (1) Female Pax on board at my taxi and No injury.
There is Video Footage On the Scene.

DECLARATION

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

CITYCAB PTE LTD
CO. REG. NO. 199502839G

Policyholder's Signature
Date & Time:

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

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