

Surveyor: Kelvin

REF:

CC3/TML/8022614/KH02

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop m/s _____

at _____

Insured: **GBA 7478E**

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lump Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time Action / Instruction

	SHD 3044M - CC3/TML/8022614/Tub362	DA: 270617	Tokio
	GBA 7478E - NBA/DIC16017009/Y	DA: 240816	Pip
19/12/18	Lump 45 \$1700 / 3 hrs. CRD: 45h9.22, 72%)		
	RECEIVED 27 DEC 2018		

Veh No: **SHD3044M**

Yr Regn: **23Z 2.6**

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

Truck / Trailer or

Make: **Kia I-240**

cc: **1685**

Colour: **Blue**

A/C: Ins / Std / NI / NA

Sp. Reading: **250847**

T/Radio: Ins / Std / NI / NA

Eng/No: _____

C/No: **KMHLD414M6409/494**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: **205/60R16**

R: _____

BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/TOYO/YOKO or **Flack**

Front

Rear

R/Bal: **2** mm

R/Bal: **2** mm

L/Bal: **2** mm

L/Bal: **2** mm

D.O.A: **14/2/18**

D.O.A: **17/2/18**

Survey held at **CDGE (Loyang)**

Des. of Damages: Frl / Rear / O/S / N/S / UIC / Rooftop or

Rear

The UIC / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

☐ : Preli. Report

1) **20/12/18 Typist**

☒ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: **3**

Resurvey No. of Trip: **1**

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee: **250**

Transportation: _____

\$ + RS \$ _____

Photos **10**

Others _____

TOTAL

260

Report Format: **TP**

Lump Sum / I.B.I: (\$ **1700**)

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	15/12/2018 10:13
Date Of Accident	14/12/2018 17:20
Exact Location Of Accident	FOCH RD TOWARDS JLN BESAR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD3044M
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	I40
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	TIROI PARTOGI NAUDUR TOBING
NRIC No	S2003559E
Date Of Birth	06/08/1953
Occupation	OUTDOOR
Date Of Driving Pass	16/05/1989
Driving Experience	29 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91284076
Fax Number	
Contact Number	
Email Address	TIROI.TUBING@GMAIL.COM

Address	535 08-900 BEDOK NORTH STREET 3
Postcode	460535
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 - HEAD TO REAR
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: : MALE

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

SEE ATTACH.

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	GBA7478E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMMAD LUKMAN ZIKRI BIN SELAMAT
NRIC/Passport Number	S9834827A
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	NO DAMAGE

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

A = SHD 3044M

B = GBA 4478E
(LORRY)

READY
LINE

HOTEL
PI
ELEGANCE

FOCH RD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was dropping passenger along No. 30 Foch
RD at approximately 1717 PM my hazard light was
turned on. I have stopped completely to collect the
passenger when there was a bump from behind
I looked back and saw a white lorry to follow
the lorry GBA 4478E. The driver of this vehicle
MULHAMAD LUKMAN ZIKRI BIN SELAMAN

DECLARATION

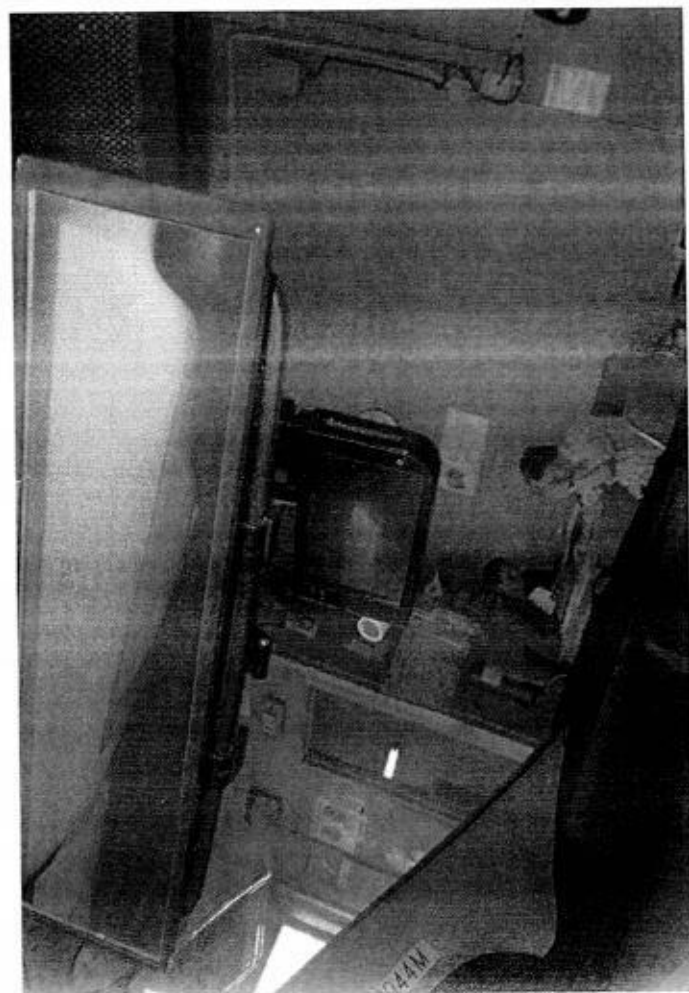
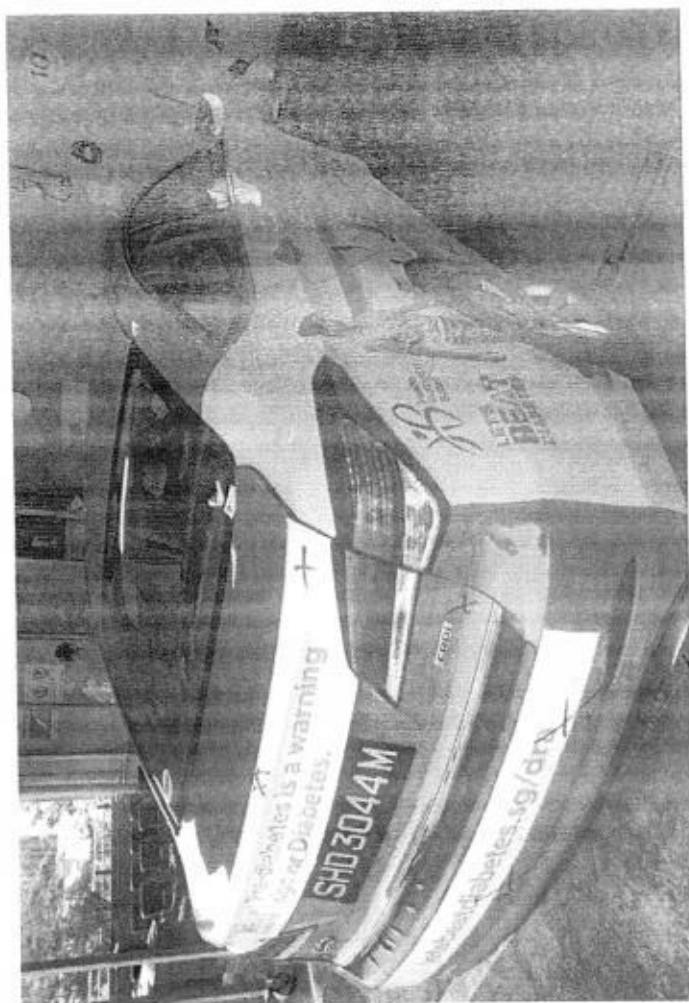
I/We declare the foregoing particulars are true in every respect.

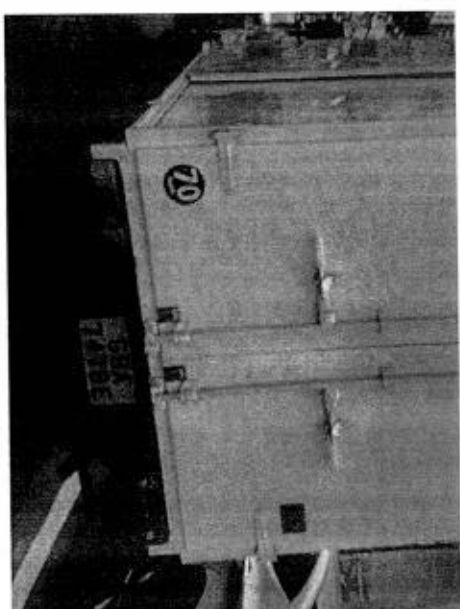
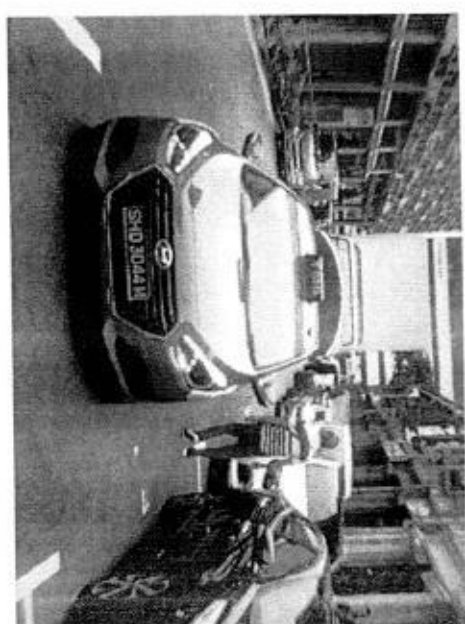
COMFORT TRANSPORTATION PTE LTD
CO. NO. 159133331R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Reporting Centre Personnel's Signature
Name:





COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 3044M

DATE 12/17/2018 10:02

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid <i>X repair</i>			\$ 2,174.90
	Boot Lid Lock Upper <i>X see</i>			\$ 102.60
	Boot Lid Lock Lower <i>X see</i>			\$ 31.70
	Boot Lid 'H' Emblem <i>- new</i>			\$ 28.70
	Boot Lid CRDI Plate <i>- new</i>			\$ 27.90
	Bootlid Moulding <i>X see</i>			\$ 227.90
	Bootlid i40 Emblem <i>✓ new</i>			\$ 27.90
	Bootlid Lower Garnish <i>X see</i>			\$ 227.90
	Rear Bumper <i>Return</i>			\$ 553.00
	Rear Bumper Reinforcement <i>X see</i>			\$ 428.40
	Rear Bumper Reinforcement Bracket (LH/RH) <i>X see</i>		\$ 80.30	\$ 160.60
	Rear Bumper Clip 10 pcs <i>- new</i>			\$ 22.00
	Rear Bumper Sponge <i>X see</i>			\$ 103.50
	Rear Bumper Under Cover <i>- ct</i>			\$ 228.00
	Rear Panel <i>X repair</i>			\$ 526.70
	Rear Panel Garnish <i>X see</i>			\$ 57.70
	SUB TOTAL			\$ 4,929.40
	LESS 20%			\$ 985.88
	DISCOUNTED TOTAL			\$ 3,943.52
	Boot Lid Comfort Logo & Tel No. Sticker <i>new</i>			\$ 30.00 Nett
	Rear Bumper Reverse Sensor <i>short</i>			\$ 135.70 Nett
	Rear Bumper Advertisement Logo <i>- new</i>			\$ 50.00 Nett
	Rear Fender Advertisement Logo (LH/RH) <i>- new</i>		\$ 100.00	\$ 200.00 Nett
	TOTAL			\$ 415.70
	Labour Charge			
	Panel Beating (Repair)			\$ 800.00 <i>400</i>
	Spray Painting Charge			\$ 900.00 <i>600</i>
	Wiring Charge			\$ 30.00 <i>X 11</i>
	Tuff Kote			\$ 50.00 <i>X 17</i>
	Remove/Refix Reverse Sensor <i>Remove fee</i>			\$ 120.00 <i>30</i>
	<i>Kahiri 11/11/18</i>			\$ 10 <i>10</i>
	<i>17/2/18</i>			\$ 1,900.00
	TOTAL LABOUR			\$ 6,259.22
	ESTIMATE TOTAL			
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.				

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JO NO.: 305251383

STOMER

REGN NO.:

SHD3044M

MILEAGE

MAKE :

HYUNDAI

FUEL

E.....1/2.....F

MODEL

I-40

DATE/TIME IN

15.12.2018 09:10

YR OF MANU

23.06.2016

TARGET DATE

CHASSIS CODE

KMHLB41UMGU091494

COMPLETION DATE/TIME:

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 14.12.2018

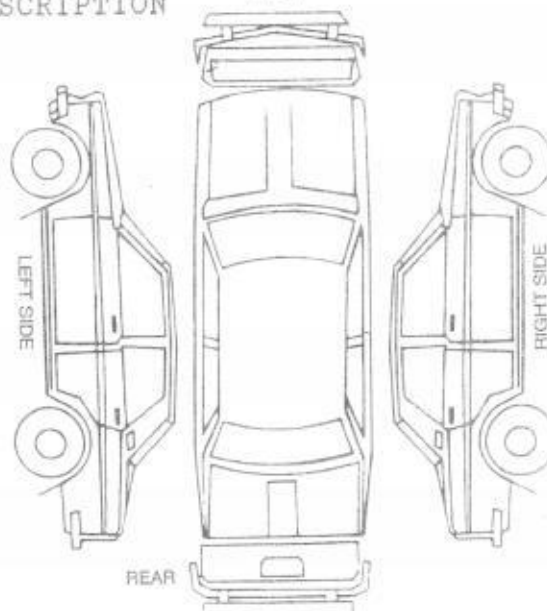
NATURE: 3P 14.12.2018

S/NO

LABOR CODE

DESCRIPTION

FRONT



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHD3044M CHIANG

Vehicle No.: SHD3044M

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

Our Job Ref No : 305251383
Date : 19/12/18

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SHD3044M

Fax :

14/12/2018

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

- | | | | |
|----|---|------------------------------|-------------------|
| | | TOKIO | GBA7478E |
| 1. | The repair job shall bill to: | | |
| 2. | The finalized amount shall be: | | |
| | (a) Spare Parts after List discount | | |
| | (b) Labour Charges | | |
| | Total for Part-By-Part Repair Cost | | |
| | (c.) Lumpsum Repair (if applicable) | | |
| | Total for Lumpsum repair cost after Less: | | |
| | Final Lumpsum Repair cost | | \$1,700.00 |
| 3. | Estimated normal period for repairs: | 3 | working days. |
| 4. | We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days | | |
| 5. | Thank you for your assistance. | We confirm the estimates and | |

Signature : _____
Name : **CHIANG**
Tel : **62148314**
Fax : **65468156**

We confirm the estimates and finalized amount

Signature : _____
Name : Ka/ok
Date : 19/12/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

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: CC3/TMI18022614/K1TBN2

Date: 26/12/2018

REFERENCE

Handling Insurer:	Tokio Marine Insurance Singapore Ltd	Policy No:	MJ001464
Claimant Vehicle No :	SHD3044M	Insured Vehicle No :	GBA7478E
Date of Loss:	14/12/2018	Nature of Claim:	TP
		Claim No:	M1806421

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHD3044M		
Make & Model:	HYUNDAI I40, 1.7 D CRDI F/L ABS AIRBAG 4DR (A)	Engine No:	D4FDGU651825
Reg. Date:	23/06/2016 (Man. Year: 2016)	Chassis No:	KMHLB41UMGU091494
Colour:	Blue	Odometer:	230447 km
Engine Capacity:	1685 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Good	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Good

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

	Repairer's	Adjuster's	Difference	Diff %
Parts	4,359.22	1,125.70	3,233.52	74.18
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,900.00	1,030.00	870.00	45.79
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	6,269.22	2,165.70	4,103.52	65.46
Approved Total (Overridden) (\$\$)		1,700.00		
(\$\$)	6,269.22	1,700.00	4,569.22	72.88
+ GST 7.00/7.00% (\$\$)	438.85	119.00	319.85	72.88
Nett Amount (\$\$)	6,708.07	1,819.00	4,889.07	72.88

INSPECTION

Date of Assignment:	18/12/2018	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	17/12/2018	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	3.0 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: 26 Dec 2018)

Parts: 143 HYUNDAI i40 1.7 D CRDI F/L ABS AIRBAG 4DR (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SHD3044M)

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 *.

Recommended Parts

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
1	1	*BOOT LID	Repair	2,174.90 FL	*- FL
2	1	*BOOT LID LOCK UPPER	Serviceable	102.60 FL	*- FL
3	1	*BOOT LID LOCK LOWER	Serviceable	31.70 FL	*- FL
4	1	*BOOT LID H EMBLEM	Necessary	28.70 FL	*28.70 FL
5	1	*BOOT LID CRDI EMBLEM	Necessary	27.90 FL	*27.90 FL
6	1	*BOOT LID MOULDING	Serviceable	227.90 FL	*- FL
7	1	*BOOT LID i40 EMBLEM	Necessary	27.90 FL	*27.90 FL
8	1	*BOOT LID LOWER GARNISH	Serviceable	227.90 FL	*- FL
9	1	*REAR BUMPER	Deformed	553.00 FL	*553.00 FL
10	1	*REAR BUMPER REINFORCEMENT	Serviceable	428.40 FL	*- FL
11	2	*REAR BUMPER REINFORCEMENT BRACKET LH /RH	Serviceable	160.60 FL	*- FL
12	10	*REAR BUMPER CLIP	Necessary	22.00 FL	*22.00 FL
13	1	*REAR BUMPER SPONGE	Serviceable	103.50 FL	*- FL
14	1	*REAR BUMPER UNDER COVER	Cut	228.00 FL	*228.00 FL
15	1	*REAR PANEL	Repair	526.70 FL	*- FL
16	1	*REAR PANEL GARNISH	Serviceable	57.70 FL	*- FL
17	1	*BOOT LID COMFORT LOGO & TEL NO	Necessary	30.00 FS	*30.00 FS
18	1	*REAR BUMPER REVERSE SENSOR	Shorted	135.70 FS	*135.70 FS
19	1	*REAR BUMPER ADVERTISEMENT LOGO	Necessary	50.00 FS	*50.00 FS
20	2	*REAR FENDER ADVERTISEMENT LOGO LH/RH	Necessary	200.00 FS	*200.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	5,345.10	1,303.20
- List Item Discount on L Items 20.00/20.00% (S\$)	985.88	177.50
Total Parts (S\$)	4,359.22	1,125.70

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

No	Qty	Particulars	Repairer's	Amount
<u>Miscellaneous Items</u>				
1	1	OD/TP Case (Insurer)	10.00	10.00
Sub Total (S\$)			10.00	10.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	800.00	400.00
2	SPRAY PAINTING	New	900.00	600.00
3	WIRING	New	30.00	-
4	TUFF KOTE	New	50.00	-
5	REMOVE/REFIX REVERSE SENSOR	New	120.00	30.00
Gross Labour Cost (S\$)			1,900.00	1,030.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >