	BIGNMENT	
E	2101/1/101/1	
Date;		1'-1
Estimate(Cost:	Veh' No: SHA 30311	
	Type: M.Car / M.Cycle / Bus / Van / L	orry / T 🍎 / Prime Mover /
OD/TP/WS/TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
e(Workstop m/s	7701	A 00 199:
el e	Colour	A/C: Instred/Std/NI/NA
insured: SMC 7331L		T/Radio: Ins Ad / Std / NI / NA
	Eng/No:	
Policy Na		1414MRA875287
Claims Ni.	Gen. Cond: Good / F Poor / Burn	
Sum In stred: Excess: (Client's Record)	Steering: Inorder/ Jammed / Leaked	
Make of Veh:	Brake: Inordar Jammed / Leaked	The state of the s
THE STATE OF THE S	_ Modi: Nil / S/Rim / STD Affim o	11
	Tyre Size; F: 2	15/60 RIG
(Policy Condition)	.R:	~
Remark: The veh had commenced its N/S O/S repair at the time of inspection.	- DOTOGNIENNOVATGITESTUZA	
	TOYO/YOKO or	Maxxo
Ball or Market Value:	Front	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal, + mm	R/Bal, 2 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 1 mm	L/Bal, + mm
Est. Repairs: days Res.; Yes or No	D.O.A. 16/148	D.O.I. 17/48
Lum Sum: % 3 Val.: Yes or No	Survey held at	DGE (Loyang)
CA / REV / REP. / 24 HRS	Des. of Damages : Frt. / Rear / Q/S	
Dale: Person Contacted: Vehicle: IN / Ot	Rea,	rol).
Dale / Time Action / Instruction	— The U/C / Chassis frame / Boo	ly Structure affected due to collision
SHA 3331 A - CC6/ TUTE 031608 / 1/1	1851 Dat: 11-11-2016	-t-
Smc 23311	J W. 11-11-2010	Tokro
	(Ded: 1381.70; 54%	
11 1111	44. 1001. 10, 5.17	0)
R	ECEIVED 2 0 DEC 2018.	
511		
Deleffine, File Pass 10? : Prell. Report	Days Of Repair: 2	
120 R Typist Final Report		Survey Fee: 250
Oate/Time, File Rejurn to?	Resurvey No. of Trip:	Survey Fee: 250 Transportation;
Add F	001 000 1000 /\$	
Add F		
Report Format: TP	Interview (\$) Photos
	Tech, Invs (\$) Others

COMFORTDELGRO . ENGINEERING

A member of COMFORIDELCRO

ComfortDelGra Engineering Pte Ltd

205 Braddell Road Singapore 579701 Marride + 65 6383 6280 Facstrole + 65 6280 9765

Workshops 56 Loyang Drive Singapore 508908 383 Sin Ming Drive Singapore 573717 45 Pandan Road Singapore 609286

Date/Time? Vbif7d3f2020018 14:36 Page: 1

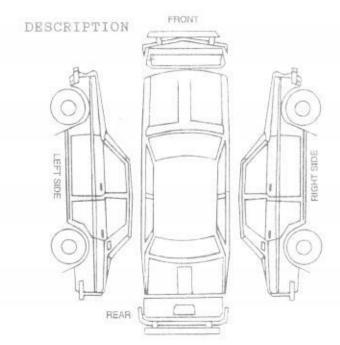
JOB CARD ARC Repair TP(CLSO)1 Sales Order: JC NO.: 305251910 Team: REGN NO.: SHA3331A MILEAGE STOMER COMFORT TRANSPORTATION PTE LTD FUEL MAKE: I/MS HYUNDAI 7010045 STOMER NO. 383 SIN MING DRIVE E.....F DATE/TIME IN 7.12.2018 11:05 MODEL SONATA Singapore SINGAPORE 575717 65508755 YR OF MANU. 11,07,2013 TARGET DATE _ (R) (P) CHASSIS CODE KMHET41VMDA83528 COMPLETION DATE/TIME: SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 16.12.2018 NATURE: 3P 16.12.2018

S/NO

LABOR CODE



ECKED & PA	SSED OUT BY:			
	SERVICE ADVISOR	8		CUSTOMER'S SIGNATURE
owledgemen	t Silp		Exit Pass	
o: o.: le No.:	SHA3331A	CHIANG	Vehicle No.: SHA3331A	
s of Service /	Advisor	Signature/Date	Name of Service Advisor	Date
returned to	Service Reception upon o	ollection	To be kept by Security Guard	

MCD618182054 / ComfortDetGro Engineering Pte Ltd - Layang ENTRY DATE & TIME: 17/12/2018 13:38 SUBMITTED BY: Huang XiaoYan

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 witholding 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	17/12/2018 13:38
Date Of Accident	16/12/2018 22:00
Exact Location Of Accident	EU TONG SEN ST X MERCHANT RD
Country/State of Loss	SINGAPORE

Belle (m. s.) (m. s. m. m. m. m. m. s.) Hall in Garden (m. s.) (m. s.) (m. s.)	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHA3331A
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	
243.004.004	The William Co.

Verlicie Faiticulais		
Manufacturer	HYUNDAI	
Model	SONATA	
Exact Purpose for which vehicle	was being used at	

time of accident	
Are you claiming under your own insurance policy	NO

for repair to your vehicle?	NO
If No. Disease state estima to be taken	TUIDD DADT

If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

venicle Category	1
Insurance Company	

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES

riddi'r diidy	120
Policy Number	MCOM0015

Cover Note	Number	

Driver		
Name of Driver	TAN PUAY HIONG	
NRIC No	S1233965H	

11110110	
Date Of Birth	11/12/1957
Occupation	OUTDOOR
Date Of Driving Pass	10/10/1977
	44.454556.4415.6

Driving Experience	41 YEARS AND 2 MONTHS

Gender	MALE

Mobile Number	(LOCAL) +65-82181691
---------------	----------------------

Fax Number Contact Number

EMail Address ARTDESPA@GMAIL.COM

Address

BLK 346 BALESTIER ROAD #10-03

Postcode

329776

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

DRIZZLING

Road Surface

WET

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?

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 3

Number of Passengers (Including Driver)

Passenger 1

NAME:

GENDER:

: MALE

Passenger 2

NAME:

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

TOA PAYOH N.P.C

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT: T/20181217/2025

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

SMC2331L

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

HAN TUN AUNG

NRIC/Passport Number

S7465872E

Contact Number

94575724

Address

Page 2 of 20

Postcode

Insurance Company Name

TOKIO MARINE INSURANCE SINGAPORE LTD

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

	DETAILS OF MUNICIPALITY
	DETAILS OF INJURED PERSON 1
Name	TAN PUAY HIONG
Approximate Age	61
Injuries Sustain	PAIN ON SHOULDER AND SPINE. ON 4 DAYS MC.
Injured person in which vehicle?	SHA3331A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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 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:

- 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)
 - (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
- 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:

bake Wei Yiena

Name:

NRIC/FIN No.:

Reporting Centre Personnel's Signature

th (%)
As per artiached police report
T 20181217 2005
1 30 (81-11-120-2

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:

Loke Wei Yieng

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:





1.of 3

Report No. T/20181217/2025

Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194

Tel No: 1800-2519999

REPORT OF A TRAFFIC ACCIDENT

17/12/2018 10:09		/lade:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars			
Name of Informant: TAN PUAY HIONG			Address: 346 BALESTIER ROAD #10-03 SINGAPORE 329776		
	/ ID No.: O / S123396	65H	Contact No.: Home/Office:	Mobile: 82181691	
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 61	Date of Birth: 11/12/1957	Type of Informant:		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Taxi driver			Driving Licence Information: Class: 2,3,4,5 Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 16/12/2018 22:00	Type of Location YELLOW BOX
Location: Junction of R MERCHANT EU TONG SE				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Traffic Control: Two Way Not Controlled			Traffic Volume: Moderate	
Type of Collis Between Mov	ion: ring Vehicles - Head 1	o Rear		Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SHA3331)	TAXI	HYUNDAI	sonata	Blue	Slightly Damaged	2
SMC2331L	Car	HONDA			Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Tel No: 1800-2519999



T/20181217/2025

2 of 3

Report No. T/20181217/2025

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194

319194 CONTINUATION OF REPORT

Driver						
Name	TAN PUAY HIONG		ID No		S1233965H	
Related Vehicle	SHA3331 (TAXI)		Contact No.		82181691	
Hospital/Clinic	FINEST HEALTH MEDICAL CENTRE		Class Driving Licent Expiry	g	Class: 2,3,4,5 Date of Expiry: NIL	
Date Treatment	17/12/2018 Date Di		scharge 17/12		2/2018	
No. of Days gran			e of Injury Slight			
Driver		NAME OF TAXABLE PARTY.				
Name	HAN TUN AUNG		ID No	¥k	S7465872E	
Related Vehicle	SMC2331L (Car)		Conta	ct No.	94575724	
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date D	ischarge	NIL	

Brief Details.

On the above date and time, while waiting at the junction of New Beach Rd turning towards Merchant Rd, the traffic light was amber. When I was about to turn right, I saw a cyclist dashing from Eu Tong Sen St at the extreme left lane as such I press the brake paddle to avoid collision.

Degree of Injury

Slight

NIL

Subsequently, I felt a bang form the rear. I then went out of my taxi and exchanged particulars with the other driver. We did take few pictures of the incident. At that point of time, I was informed by 2 of my passengers that they were not hurt. As such, I drove off to drop them at their residential address.

Damages inflicted on my taxi as follows: Rear bumper alignment off and few scratches

No. of Days granted Medical Leave

On 17/12/2018, I went to the clinic to get medical attention as I felt pain on both the shoulder and spine area. I was given 4 days MC.





T/20181217/2025

3 of 3

Report No. T/20181217/2025

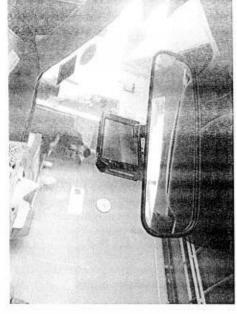
Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 CONTINUATION OF REPORT Tel No: 1800-2519999

Sketch Plan

Informant is not able to provide sketch plan

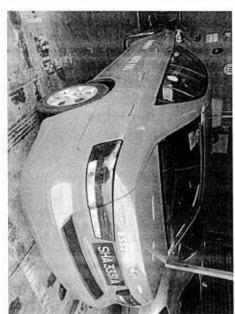
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: E / Staff Sgt NORHAZWANI BINTE MA'AZ	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 17/12/2018 10:09
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LILL SINGAPO Contact No.: 65476151	Classification Of Case:
Authentication Stamp	RE .



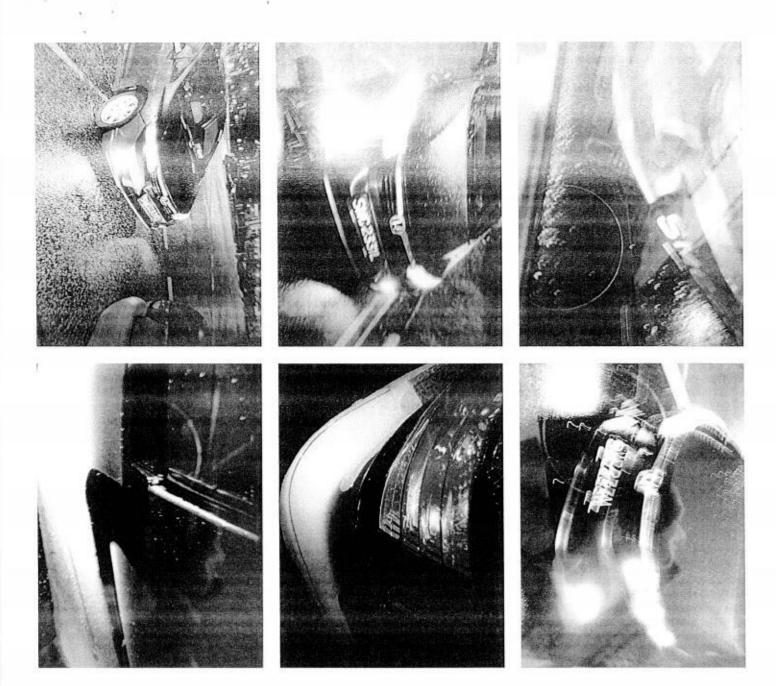












COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHA 3331A

DATE 17/12/2018 12:44

MAKE

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	F	Amount
	Rear Bumper			\$	578.40
	Rear Bumper Reinforcement 2 64			\$	483.30
	Rear Bumper Clip			\$	22.00
	Rear Bumper Sponge 🛠 💆			\$	137.40
	Rear Bumper Under Cover 🛠 🖍			\$	185.80
	Rear Bumper Protector (RH)			\$	38.00
	Rear Bumper Protector (RH)			\$	391.80
	Rear Panel Garnish 🔊 🕬			\$	95.80
	SUB TOTAL			s	1,932.50
	LESS 20%			s	386.50
	DISCOUNTED TOTAL			S	1,546.00
	Rear Bumper Reverse Sensor			\$	135.70
				s	135.70
					155.76
	Labour Charge				200
	Panel Beating			S	400.00
	Spray Painting Charge			S	300.00
	Wiring Charge			\$	30.00
	Remove/Refix Reverse Sensor			S	120.00
	a . Cu			\$	10/
	Mrmm Fu TOTAL LABOUR			\$	850.00
	ESTIMATE TOTAL			\$	2,531.70
	Ka Lir 1 Cless	he Repaire	onsultants hence notify of the following: heterelater spray painting		7
	M 17/12/18 154h	 To display da Partr prices Third party s No illegal ms Supplement 	maged part(s) during resurvey are subject to confirmation urvey is on a "Without Prejudice idification(s) is allowed any item(s) must be resurveyed final approval from Insurance C	and	
	4/5	Acknowledge Signature: Date:			
	After Kepun ple				
	This is an initial estimate based on a visual inspection of the	a abassa sa	hiola. The final renois		

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305251910 ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156 13/12/18 Date **FINALIZATION FORM** LKK Fax: KALVIN Attn : SHA3331A Vehicle Reg No. 16/12/2018 The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-1. The repair job shall bill to: TOKIO SMC2331L 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) \$1150.00 Total for Lumpsum repair cost after Less: Final Lumpsum Repair cost 3. Estimated normal period for repairs: 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 finalized amount Signature: Signature: Name CHIANG Name Tel 62148314 Date Fax 65468156 For Official Use Only Document Confirm By Item Attached Amount Remarks (Signature) Yes or No Rental Rate P/Day YES 2. Loss of Income Paid Survey Fees LTA Search Fee 7.49 Medical Fees (on behalf of driver, if applicable) Overrun

Remarks:

...CLAIM SUBFOLDER...(Pending for Survey Report)

LAIM SUBF	OLDER TRAC	KING							
Case /	Votified	Est Submitted		Ad) Rpt	Adj Su	bmitted	Ins Auth'ed	Status	
	17 Dec 2018 16:09 Sendback Est	17 Dec 2018 16:15 S\$2,151.62	18 Dec 2018 08:46 Edit Adj Rpt	S\$1,150.00 Edit Estimates	S\$1,1 View	Acceptable and the second		Pending for S Report Cancel Case	urvey
М	ain	Ref	erence	Claim	Details		Documents		Show All
CLAIM SUB	FOLDER DET	TAILS			Delicate haraste				
Insured:	HAN TUN A	AUNG, ID: S746	5872E						
Main Claimant:	CTPL								
Vehicle Reg. No.:	SHA3331	1A		Date	of Loss:		18 22:00 - :59 hs and 5 Days Fror	n LTA Reg Date (N	fan Yr)]
Claim Type:	Policy/Cover MT105601 (Comprehensive)				72				
Vehicle Reg. No. (Insured):	SMC2331L				y No. imant):				
				Exce	ess:	S\$800.00)		
Repairer:	ComfortDe	elGro Engineerin	g Pte Ltd (Loya	ng) 59 Loyang Dr	ive, 5089	69 Loyang	- Tel: 6214 8300		
Handling Insurer:	V-02-100-00-00-00-00-00-00-00-00-00-00-00-00	CACCOLOGY NORTH PROCESSOR		****************************			elma Gomez - 659	Several Const	
Adjuster:	28/12/20	Consultants Pte 18]	Ltd (HQ) - Tel: 6	256-3561 [Har	ndled by I	KALVIN A	NG WEI KUN]	[Final Rpt due	
ASSOCIATI	ED MAIL REC	CEIVED					V	iew All Compos	e Case Mail
There are no	mail for this o	case.							
ALL ASSO	CIATED TASE	KS ⁼				View All	Search Tasks	Create New Task	Complete
Due Date	Priority	Type Task (Group Subje	ct Handler	Assign	ned By	Completed On	Created On	Done
No results.									

Claim Documents

SHA3331A (M1806416) [SMC2331L] TP CTPL Dec 16 2018 10:00PM [HAN TUN AUNG] ComfortDelGro Engineering Pte Ltd

Ace.	essment Reports		1 per	page ¥	•
		F 4 18 18 8 11 11 11 11 11 11 11 11 11 11 1	1 per	Thumbnail	
No 1	Finalized On 17/12/18 16:15	ComfortDelGro Engineering Pte Ltd (Loyang) Repairer Estimates	0	Load HTM	Print
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)		Thumbnail	Print
1	18/12/18 08:47	Accident Statement From: OD - Reg. No: SMC2331L, Claimant: HAN TUN AUNG	0	Load HTM	
Pho	tos/Images		3 per	page ▼	•
No.	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	18/12/18 09:06	General View	0	Load JPG	•
2	18/12/18 09:06	General View	0	Load JPG	•
3	18/12/18 09:06	General View	0	Load JPG	•
4	18/12/18 09:06	General View	0	Load JPG	•
5	18/12/18 09:06	General View	0	Load JPG	•
6	18/12/18 09:06	General View	0	Load JPG	2
7	18/12/18 09:06	General View	0	Load JPG	•
8	18/12/18 09:06	General View	0	Load JPG	•
9	18/12/18 09:06	General View	0	Load JPG	•
10	18/12/18 09:06	General View	0	Load JPG	•
11	18/12/18 09:06	General View	0	Load JPG	•
12	18/12/18 09:06	General View	0	Load JPG	•
13	18/12/18 09:06	General View	0	Load JPG	•
14	18/12/18 09:06	General View	0	Load JPG	•
15	18/12/18 09:06	General View	0	Load JPG	•
16	18/12/18 09:06	General View	0	Load JPG	~
17	18/12/18 09:06	General View	0	Load JPG	•
18	18/12/18 09:06	General View	0	Load JPG	•
19	18/12/18 09:06	General View	0	Load JPG	•
20	18/12/18 09:06	General View	0	Load JPG	•
21	18/12/18 17:08	Reinspection Photo	0	Load JPG	•
22	18/12/18 17:08	Reinspection Photo	0	Load JPG	•
23	18/12/18 17:08	Reinspection Photo	0	Load JPG	•
Doc	cumentation		1 per	page T	•
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)		Thumbnail	Print
1	24/12/18 11:02	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee	0	Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	0	Thumbnail Load PDF	Print

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
Show Remarks To: Repairer Handling Insurer Note: Remarks are private unless you show it to other parties.	

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/TMI18022615/K1TBS2

Date:

28/12/2018

REFERENCE

Handling Insurer:

Tokio Marine Insurance Singapore Ltd

Policy No:

MT105601

Claimant Vehicle No:

SHA3331A

Insured Vehicle No:

SMC2331L

Date of Loss:

16/12/2018

Nature of Claim:

TP

M1806416 Claim No:

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHA3331A

Make & Model:

HYUNDAI SONATA, 2.0 D CRDi Turbo (NF) (A)

Engine No:

D4EAD322935

Reg. Date:

11/07/2013 (Man. Year: 2013)

Chassis No: Odometer:

KMHET41VMDA835287 192498 km

Colour: Engine Capacity: Blue

1991 cc

N/A

Market Value/New Car Price: Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Good

Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes Good

Handbrake (Serviceable):

Yes

Engine Modification:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

215/60R16

Rear Tyre Size:

215/60R16

Front Left Side:

Maxxis 7 mm

Rear Left Side:

Maxxis 7 mm

Front Right Side:

Maxxis 7 mm

Rear Right Side:

Maxxis 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,291.62	1,002.66	288.96	22.37
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	850.00	430.00	420.00	49.41
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	2,151.62	1,442.66	708.96	32.95
Approved Total (Overridden) (S\$)		1,150.00		
(S\$)	2,151.62	1,150.00	1,001.62	46.55
+ GST 7.00/7.00% (S\$)	150.61	80.50	70.11	46.55
Nett Amount (S\$)	2,302.23	1,230.50	1,071.73	46.55

INSPECTION

Date of Assignment:

18/12/2018

ComfortDelGro Engineering Pte Ltd (Loyang)

Date Inspected:

17/12/2018 Inspected At: 59 Loyang Drive

Singapore 508969

Estimated Period of Repair:

2.0 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

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen_printrpt&caseid=773250&extid=290545&CFID=46132160&C... 1/4

any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 28 Dec 2018)

HYUNDAI SONATA 2.0 D CRDi Turbo (NF) (A) (Catalogue:Merimen Singapore 1.0) Parts: 143

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

Print Code: (Unsubmitted, no print-code for SHA3331A)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the Validity:

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		*REAR BUMPER	Cracked	578.40 FL	*578.40 FL
2	1		*REAR BUMPER REINFORCEMENT	Cracked	483.30 FL	*483.30 FL
3	10		*REAR BUMPER CLIP	Necessary	22.00 FL	*22.00 FL
4	1		*REAR BUMPER SPONGE	Serviceable	137.40 FL	*- FL
5	1		*REAR BUMPER UNDER COVER	Serviceable	185.80 FL	*- FL
6	1		*REAR BUMPER PROTECTOR RH	Repair	38.00 FL	*- FL
7	1		*REAR REVERESE SENSOR.	Shorted	135.70 FS	*135.70 FS
8	1		*REAR PANEL	Serviceable		*- FL
9	1		*REAR PANEL GARNISH	Serviceable	1923	*-FL
F=Fr	anchise	part, S=SpcNe	tt. L=ListItemDisc.	-		2.00
				Sub Total (S\$)	1,580.60	1,219.40
			- List Item Discount or	L Items 20.00/20.00% (S\$)	288.98	216.74
				Total Parts (S\$)	1,291.62	1,002.66

Report was unsubmitted during this print-out.

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WIRING

New

New

Gross Labour Cost (S\$)

30.00

120.00

850.00

0.00

30.00

430.00

Recommended Miscellaneous Items

REMOVE/REFIX REVERSE SENSOR

No Qty Particulars		Repairer's	Amount
Miscellaneous Items			
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
Labour Items			
1 PANEL BEATING	New	400.00	200.00
2 SPRAY PAINTING	New	300.00	200.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >