ASS REC BY	REF:	CITPIED 3 X	20 FE	Special Instruct	on.
Surveyor		ASSIGNMEN	VI (Office)		
From (Person);	or Chumi Ma	NY	Date/Tune	: 14/12/2016 .
Estimated Co	al:		Bill to:		
OD PTP IW	STTP RES / OD RES / EVA	INV / MV / CS			
To Inspect V	which No: SHA 40098			Insured:	
nt Workshop	m/a			Tel:	
of					
Policy No:		Claim Not	2 PCOH BHS	-	
			Excess:		
Make of Vol.				, D.Q.A	9/12/2018
CA / REV	REP. / REV 24 HRS			H,O,D, E	odorsement:
	Pers	on Contacted:		Vehicle IN	LOUT
Date/Time	Action/Instruction (Estimate			
	X-2ROPARS				
			(4.4)		
1 1					
				\$3	20
				NPC/	W. Thomas are

MCDB18159030 / ComfunDolQio Engineering Pro Lid - Loyang ENTRY DATE & TUME: 11/12/2016 07:21 SUBMITTED BY: Catherine Per May Jean Your NCD will be affected due to late reporting Actual o-Filling Submission Date & Time: 11/12/2018 07:28

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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.
- 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 ecceptance 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,
- 5. 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 ladgement 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 evaluable afterweak.

	ACCIDENT STATEMENT
Date Of Report	11/12/2018 07:21
Date Of Accident	09/12/2018 18:45
Exact Location Of Accident	SENTOSA GATEWAY (IN FRONT VIVOCITY BUILDING)
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHA4029S
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXLCOM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	IONIQ HYBRID
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-18088936MFSH
Cover Note Number	
Driver	
Name of Driver	CHUA POH GEK
NRIC No	S6820084I
Date Of Birth	28/05/1968
Occupation	OUTDOOR
Date Of Driving Pass	08/09/1987
Driving Experience	31 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93887814
Fax Number	
Contact Number	
STATISTICAL CONT.	PRICELLA PROPERTY AND COM

ERICHUAPG@HOTMAIL.COM

Address

209 06-1602 ANG MO KIO AVENUE 3

Postcode

560209

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

YES

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

ambulance?

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)

Passenger 1

NAME:

GENDER:

: MALE

Passenger 2

NAME:

GENDER:

: FEMALE

Passenger 3

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

SJH93X

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

ZHU QICHAO

NRIC/Passport Number

S7982832G

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

FRT RHT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

CHUA POH GEK

Approximate Age

50

Injuries Sustain

NECK

Injured person in which vehicle?

SHA4029S

Were seat belts worn?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address Postcode

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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.
- 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.
- By the ladgment 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 :
 - 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 invoive 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:
 - 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.

COMFORT TRANSPORTATION PTE LTD

CO. REG. NO. 199303821R

Policyholder's Signature

Date & Time:

Driver's Signature

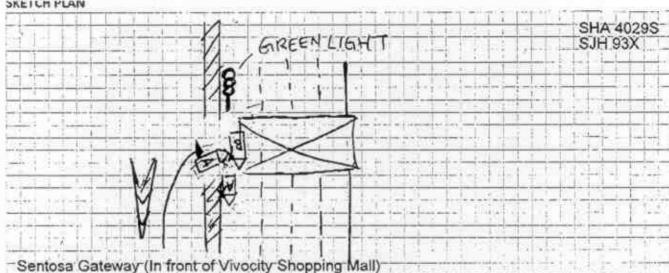
(If driver is not the policyholder)

Date & Time: 10.12.18 @ 0840HRS

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No. June Tan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 09.12.18 at 1845HRS I was travelling along Sentosa Gateway	(In Front of Vivocity
Shopping Mall) with one male one female and one baby onboard.	
As the traffic light turned green as I started to move off and veh (E	3) SJH 93X suddenly
dashed out from my left and hit my taxi (A) front portion.	
As the accident took place too fast I could not take evasive action	n to prevent the accident.
I have company video and photos to support my claims.	
I have suffered neck pain and will consult a doctor later.	
Veh B (SJH 93X) Mr Zhu Qichao S7982832G	

DECLARATION

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

... REG. NO. 199303821R

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time 10.12.18@0840HRS

Reporting Centre Personnel's Signature

NRIC/FIN No.: June Tan

DIAMENT STORTHARD PROJECT

\$ 3,474.00

CHUNNI MOTOR WORK PTE LTD

Wiring-Engine

REPAIR ESTIMATE*

VEHICLE NO : SHA 4029S

DATE : 10.12.2018

MAKE	. HOUNDALIONIO		: 654			110
MODEL, Qty	: HYUNDAI IONIQ Parts Description/ Labour		: 6542 6039 Unit Price		Amount	
- 40	Bonnet Eastern Labour	Type		merrice.	S	2,253.80
	Bonnet Hinge (LH/RH)		s	118.70	S	237.40
	Bonnet Lock			110.70	S	127.30
	Radiator Grille				S	1,227.50
	Front Bumper Cover				S	418.30
	Front Bumper Sponge				S	86.90
	Front Bumper Reinforcement				S	1,075.10
	Speaker Assy- VESS				s	154,40
	Radar Sensor				S	2,910.90
	Front Bumper Moulding Centre Upper (LH/RH)		S	108.50	s	217.00
	Front Bumper Moulding (LH/RH)		S	93.60	S	187.20
	Front Bumper Lower Stiffner		-Ti-	2.50,000,00	S	85.10
	Front Bumper Lip				S	35.10
	Front Bumper Bracket Top (LH/RH)		S	35.00	S	70.00
	Front Bumper Bracket (LH/RH)		S	28.00	S	56.00
	Front Bumper Side Bracket Support		S	12.00	S	24.00
	Front Bumper Clips 10 pcs			2002001	S	22.00
	Headlamp Support Panel Assy				S	949.30
	Headlamp (LH/RH)		S	1,198.80	S	2,397.60
	Day Light, LH				S	642.50
	Day Light, RH				S	642,50
	Day Light Wiring ,LH/RH		S	585.50	S	1,171.00
	Radiator				5	884.80
	Radiator Blower Motor				S	378.00
	Radiator Fan				S	375.10
	Radiator Shroud				S	275.50
	Radiator Hose Upper	1			S	66.20
	Radiator Hose Lower	1			5	66.20
	Emblem-Blue Drive	1	S	26,60	S	53.20
	Front Fender Shield (LH/RH)	l l	S	114.70	S	229.40
	Air Cleaner Assy				S	282,70
	Air Duet	l l			S	96.80
	Aircon Condenser				S	663.60
	Aircon Suction & Liquid Hose				S	679.60
	Aircon Discharge Hose				\$	148.50
	Wiper Panel Top Gamish				S	97.00
	Wiper Container	1			5	68.00
	Wiper Container Motor	1			s	78.00
	Front Wheel Hub Cap (RH)				S	175.10
	Front Chasis Member				S	1,314.80
	Engine Under Cover				S	469,40
	Engine Crossmember				S	1,803.90
	Engine Mounting, RH				S	580.90
	Wiring-Front				5	3,802.10

у	Parts Description/ Labour	Trees	Their Date		America
		Туре	Unit Price		Amount
	Motor Assy, Hybrid Vehicle			S	4,833.00
	Generator Assy, Hybrid Vehicle			\$	3,358.10
	Inverter Assy, w/Convertor			S	5,390.20
	Hybrid Spare Tank			S	371.30
	Hybrid Cooling Pipe Motor			S	432.20
	Hybrid Inverter Bypass Hose-inlet			5	42.60
	Hybrid Inverter Bypass Hose-Outlet			S	29.30
	SUB TOTAL			S	45,510.40
	LESS 20%			S	9,102.08
	DISCOUNTED TOTAL			S	36,408.32
	Front Number Plate			5	25.00
	Front No Plate Trim Cover			S	30.00
	Emblem-Bluc Drive			S	26.60
				S	81.60
	Labour Charge Panel Beating Spray Painting Charge Wiring Charge Tuff Kote Towing Charge Front Chassis Alignment Charge FRT Wheel Alignment			\$ \$ \$ \$ \$ \$	1,500.00 1,000.00 50.00 100.00 50.00 400.00
	Remove/Refix Aircon & Refill Gas			S	150.00
	Remove/Refix Engine			S	650.00
	Remove/Refix Dashboard			\$	450.00
	Remove/Refix Fuse Box			S	180.00
	Diagnostic & Resetting To Erase Fault Code			s	480.00
				-	10.50000000
	TOTAL LABOUR			S	5,130.00

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