Trans-cab Auto Services Pte Ltd

AAD1812-243

No. 2 Ang Mo Kio Street 63 Singapore 569111 Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 9768T

	Vehicle No.:		SHD 9768T	•
	Chassis No.:		VF1ABL15A	UC277268
	Vehicle Make:		RENAULT	
	Vehicle Model:		LATITUDE	
	Date of Accident :		29.12.2018	
	Third Party Insurer :		FWD	
	Date of Registration :		31/3/2014	
	PART			LIST
1	BUMPER COVER FRT		\$	1,259.42
1	BUMPER SPOILER FRT		\$	181.75
1	BUMPER ABSORBER FRT		\$	394.68
1	BUMPER RETAINER FRT RH		\$	150.77
1	BUMPER SUPPORT FRT		\$	123.88
1	BUMPER UNDERTRAY FRT		\$	472.83
1	BUMPER GRILLE LOWER FRT		\$	266.80
1	BUMPER FOG LAMP GRILLE RH		\$	207.21
1	BUMPER BEAM FRT		\$	914.08
1	HEADLAMP RH		\$	1,184.43
1	HEADLAMP PANEL FRT RH		\$	152.15
1	FENDER PANEL FRT RH		\$	783.83
1	WHEELARCH FRT RH		\$	278.84
1	FENDER BRACKET LOWER RH		\$	15.79
1	FENDER INSULATOR RH		\$	130.84
1	DOOR PANEL FRT RH		\$	2,844.66
1	WIPER RESERVOIR		\$	348.25
1	WIPER RESERVOIR NECK		\$	136.11
1	WIPER RESERVOIR MOTOR		\$	270.06
		TOTAL	\$	10,116.39
		10%	\$	1,011.64
			\$	9,104.75
	Specical Nett			
1SET	BUMPER CLIP FRT		\$	66.00
1	BUMPER BRACKET CLIP FRT RH		\$	12.00
1	BUMPER SUPPORT CLIP FRT RH		\$	10.50
1SET	BUMPER GRILLE LOWER CLIP		\$	69.00
			7	00.00

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	ТОТА	L \$	9,262.25
		\$	157.50
1	Front right door sticker 'Chassis'	\$	50.00
1	FRONT RIGHT DOOR STICKER 'TRANS-CAB'	\$	80.00

TOTAL PARTS

LABOUR

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts,	
adjust and realign the same	\$ 3,000.00
Putty and spray painting of the affected portion.	\$ 3,000.00
To rust-proofing of the affected areas.	\$ 170.00
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$ 380.00
To check steering geometry and computer wheel alignment	\$ 220.00
To transfer of tire, rim and on wheel balancing.	\$ 170.00
To Check Electrical Lighting Concerned.	\$ 170.00
To transfer of front fender fittings, attachment and perform water seepage test.	\$ 380.00
To vacuum, replace, refix and recharge air condenser	\$ 380.00
To replace, refix and top up coolant for radiator	\$ 170.00

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SHD 9768T

To vacuum, replace, refix and recharge Air

Intercooler

\$

170.00

TOTAL	\$ 8,210.00
Over All Total	\$ 17,472.25

LUMP SUM (REPAIR DAY)

10 DAYS

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed</u> by the <u>Policyholder and/or the Authorised Driver.</u>
- 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.
- +. The issue and acceptance of this norm 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	31/12/2018 13:25
Date Of Accident	29/12/2018 18:55
Exact Location Of Accident	CHANGI ROAD
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD9768T
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	RENAULT
Model	LATITUDE-2.0 L (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	
Driver	
Name of Driver	TAN TAI KHIEN
NRIC No	\$1408251D
Date Of Birth	18/07/1960
Occupation	OUTDOOR
Date Of Driving Pass	25/01/1983
Driving Experience	35 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90051918
Fax Number	
Contact Number	

NOEMAIL

BLK 124 KIM TIAN PLACE Address #05-185

Postcode 160124

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

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) Passenger 1

NAME:

: MUMTAZ - 91998134

GENDER:

: FEMALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UNKNOWN

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

On 29.12.2018 at about 1855hours, I was stationary on the extreme left lane along Changi Road. Suddenly I felt an impact. Vehicle B (SGL3265L) swerved into my lane and hit onto my taxi's right side front portion.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGL3265L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

ROHAIZAT BIN SURIANI

NRIC/Passport Number

S7039767F

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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.

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

Amanda

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

Sketch Plan #2 Pg. 1

SKETCH PLAN		
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DESCRIBE CIRCUMSTANCES OF THE	ACCIDENT	
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		·
Plea	ite see the attach GIA report	1
	Please see the attach GIA report	
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		·····
DECLARATION		
	e true in every nespect.	
	e true in every respect.	
	e true in every respect.	Amanda
I/We declare the foregoing particulars are	e true in every respect. Driver's Signature (If driver is not the policyholder)	Am and a Reporting Centre Personnel's Signature

GIARMC SketchPlanForm_V3

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	3878K
ehicle Details	
ehicle No.:	SHD9768T
'ehicle to be Exported:	Yes
ntended Deregistration Date:	31 Dec 2018
ehicle Make:	RENAULT
ehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
rimary Colour:	Red
1anufacturing Year:	2013
ngine No.:	M9R8839C001022
hassis No.:	VF1ABL15AUC277268
1aximum Power Output:	127.0 kW (170 bhp)
pen Market Value:	\$19,998.00
riginal Registration Date:	31 Mar 2014
irst Registration Date:	31 Mar 2014
ransfer Count:	0
ctual ARF Paid:	\$12,498.00
ntended PARF Rebate Details	
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	30 Mar 2022
ARF Rebate Amount:	\$9,373.00
ntended COE Rebate Details	
OE Expiry Date:	30 Mar 2022
OE Category:	A - Car up to 1600cc & 97kW (130bhp)
OE Period(Years):	8
QP Paid:	\$58,745.00
OE Rebate Amount:	\$23,845.00
otal Rebate Amount:	\$33,218.00
lessage	

The information contained herein is correct as at 31 Dec 2018

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