Estimated C	Telma Gomez	-91111 (0	10.1
it Workshop of	EN DIM DE		
olicy No ium Insured	MT106972	Claim No:	1.0
Make of Veli Client's Recor		D.O.A. 04/01/19	. 6
A / REV	REP. / REV 24 HRS (UP) 10:17um 81119 Person Contacted		
ate/Time	Action/Instruction () Estimal SHC21821-CC3/AXA1201	nte	lia .
	GBE 2268G-X	14864 Hedz WA: 30/07	112

REF: -

...CLAIM SUBFOLDER...(New Assignment)

Case	Notified	Est Submitted	A dr. A							
	TADITIELE.	ESC Submitted	AdJ Assigned	Adj Rpt	Adj Sut	amitted	Ins Auth'ed	Status		
Main	07 Jan 2019		08 Jan 2019 10:11 Assign						Assignme el Case	ent
	dain	Ref	erence		Claim Details		Documen	ts	7	Show All
CLAIM SU	BFOLDER DE	TAILS	The same of the sa	ENGLY SOUR		TC1		ACTION NAMED	William Str.	
Insured:	CHUA AH	TEE, Co. Reg. No	: 53317091F			Created	d by insurer]			
Main Claimant:		TRANSPORTATIO	-71-57-57-57-57-57	Co. Reg. No	.: 199303821R					
Vehicle Reg. No.:	SHC218	23			Date of Loss:	04/01/20	19 21:00 - :59			
Claim Type:	TP / M1900104			Policy/Cover Note No.:	MT106972 (Comprehensive) Coverage: 01/10/2018 - 30/09/2019					
Vehicle Reg. No. (Insured):	GBE2268G				Policy No. (Claimant):	Coverage	: 01/10/2018 - 30	0/09/2019)	
Repairer:	C				Excess:	S\$750.00				
Handling	ComfortDe	elGro Engineering	Pte Ltd (Loya	ing) 59 Loya	ing Drive, 5089	69 Loyang	- Tel: 6214 8300			
Insurer:	Tokio Mari	ine Insurance Sin	gapore Ltd (H	Q) - Tel: 62	21 6111 [Har	ndled by Te	lma Gomez - 65	9264021		
Adjuster:	LKK Auto	Consultants Pte L	td (HQ) - Tel:	6256-3561 .	. [Final Rot	due 17/0	1/20191	220,02		
ASSOCIATI	D MAIL REC						1,2015]			
	mail for this o						_\	/iew All	Compos	Case Mai
ALL ASSOC	IATED TASK	(S⊟				View All				
Due Date	Priority	Type Task G	oup Subje	ct Hand	los Assissi		Search Tasks		ew Task	Complete
No results.			- Junio	rianu	ler Assign	ed by	Completed On	Cre	ated On	Done

Shiau Chan (LKKAuto)

From:

Taufikh (LKKAuto)

Sent:

Friday, 25 January 2019 6:12 PM

To:

'Chiang Liat Choon'

Cc:

Shiau Chan (LKKAuto) RE: SHC2182J FINALIZE

Hi Chiang,

Subject:

COR \$1202.40, 2 days.

Regards Taufikh Lkk Auto

From: Chiang Liat Choon [mailto:chianglc@cdge.com.sg]

Sent: Thursday, 17 January 2019 9:02 AM

To: Taufikh (LKKAuto)

Subject: Fw: SHC2182J FINALIZE

Dear Taufikh,

Before paint with kalvin camera.

Best Regards Chiang Liat Choon

Taxi Crash Repair ComfortDelGro Engineering Pte Ltd

Off: 62148314 Fax: 65468156

From: ApeosPort-IV C5570 <sbs-singnalling@sbstransit.com.sg>

Sent: Thursday, 17 January 2019 8:57 AM

To: Chiang Liat Choon

Subject: Scan Data from CDG_LO_AW_A5570

Number of Images: 3 Attachment File Type: PDF

Device Name: ApeosPort-IV C5570

Device Location:

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number Fax Number Contact Number

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.
- 3. Information provided must be as <u>truthful and accurate</u> 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	07/01/2019 09:34
Date Of Accident	04/01/2019 21:40
Exact Location Of Accident	PIE JALAN TOA PAYOH TOWARDS NEWTON RD
Country/State of Loss	SINGAPORE
Harrist Control of the Control of th	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC2182J
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	140
Exact Purpose for which vehicle was being used a time of accident	t
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	YEO YONG KOON
NRIC No	\$72510111
Date Of Birth	29/02/1972
Occupation	OUTDOOR
Date Of Driving Pass	11/12/2003
Driving Experience	15 YEARS AND 0 MONTHS
Gender	MALE

(LOCAL) +65-96732429

JEFFREYYEO90@YAHOO.COM

Address

BLK 488B TAMPINES STREET 45 #09-147

Postcode

521488

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

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

OTHER - TAXI DRIVER

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

YES

Was any body injured in the Accident? 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?

YES

If Yes. Please state which Police Station

POLICE STATION NAME [OTHER]

CHANGI N.P.C

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT: T/20190105/2050

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 Vehicle Make/Model/Colour

GBE2268G

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

CAIFU JIE

NRIC/Passport Number

S8935178B

Contact Number

87495689

Address

Postcode

Insurance Company Name

TOKIO MARINE INSURANCE SINGAPORE LTD

Page 2 of 18

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

YEO YONG KOON

Approximate Age

46

Injuries Sustain

BACK AND NECK PAIN. ON 3 DAYS MC.

Injured person in which vehicle?

SHC2182J

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
- 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
- (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.
- 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.

COMPURT TRANSPORTATION PTE LTD CO. REG. NO. 199303821R

> Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

Fauzy NRIC/FIN No.:

GIARMIC SketchPlanForm_V3

Page 4 of 18

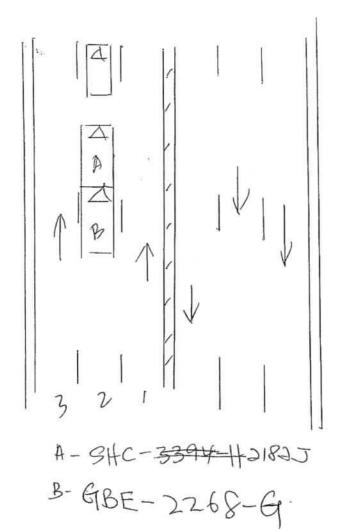
SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Refere Police report NO. 2050. (1) Male Pax on 1 here poord DECLARATION I/We declare the foregoing particulars are true in every respect. COMFORT TRANSPORTATION PTE LTD CO. REG. NO. 199203321R Policyholder's Signature Reporting Centre Personnel's Signature Driver's Signature (If driver is not the policyholder) Name: Date & Time: Fauzy

Date & Time:

CMRMCSheebstanform v3

Page 5 of 18

NRIC/FIN No .:







Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No. 1800-5872999

1	of 3
Report No. T/20190105	/2050

Date/Time Report Made: 05/01/2019 11:24			Vide Report No.:	Station Diary No.: 31
Informa	nt's Partic	ulars		
	Informant: NG KOON		Address: APT BLK 488B TAMPINES S 521488	TREET 45 #09-147 SINGAPORE
	/ ID No.; D / S72510	111	Contact No.: Home/Office:	Mobile: 96732429
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age: 46	Date of Birth: 29/02/1972	Type of Informant: Driver	
Race: Chinese	9		Language:	Institution / School Name:
Occupat Taxi driv		2	Driving Licence Information: Class: 3,4	Date of Expiry:
1				

Conoral Pfor	mation of the Acc	dont		S. C. S. Charles T. L. Carlotte Street Carlot	
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/01/2019 21:40	Type of Location: Straight Road	
Location:			7	7040	
PAN-ISLAND Weather:	EXPRESSWAY (J	ALAN TOA PAYOH) Road Surface: Dry	R	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Re		d To Rear	а	nyone conveyed by mbulance:	

Details of V	T	A STATE OF THE STA		1.	1	
Vahicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE2268G	Lorry					0
SHC3394H	Car				Slightly Damaged	1

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



T/20190105/2060

2013

Police Station Of Origin: Changi N.P.C

9 Simei Street 2 SINGAPORE 529914

Tel No: 1800-5872999

Report No. T/20190105/2050

CONTINUATION OF REPORT

Driver		green and a second		ID No.		S8935178B
Name	Cai Fu Jie		10,40.			
Related Vehicle	GBE2268G (Lorry)			Contact No.		87495689
Hospital/Clinic	NIL			Cidoo o		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	SERVICE OF THE PARTY OF THE PARTY OF THE PARTY.
Driver						
Name	YEO YONG KOON			ID No		\$72510111
Related Vehicle	SHC3894H (Car)			Conta	ct No.	96732429
Hospital/Clinic	SUNSHINE CLINIC FAMILY PRACTICE & SURGERY		Class Drivin Licen Expire	g	Class: 3,4 Date of Expiry: NIL (
Date Treatment	05/01/2019		Date Disc	charge		1/2019
the bearing the second	ted Medical Leave	03	Degree o	f Injury	Sligh	t

Brief Details.

On 04/01/2019 at about 2140hrs, I was driving from airport towards Jalan Toa Payoh. I was along Jalan Toa Payoh and was on lane 2 of the road. There was a car in front of who suddenly applied brake. As such, I also step on brake but the vehicle behind me could not react on time and hit my vehicle. After which, we exchange particular and left the scene. I suffer slight discomfort on my body. My vehicle suffered damages on the bumper. There is no government property damage.

On 05/01/2019, I went to see a doctor and was given 3 days of medical leave. There is an in-car camera installed in my vehicle however I am not too sure whether it is recording.





Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 3 of 3 Report No. T/20190105/2050

9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999

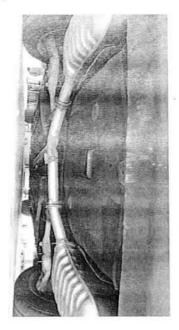
CONTINUATION OF REPORT

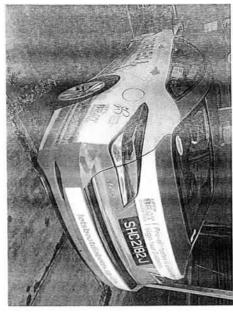
Sketch Plan

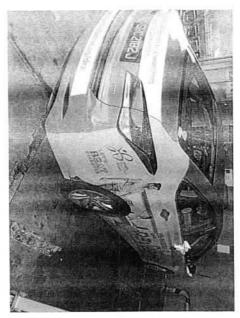
Informant is not able to provide sketch plan

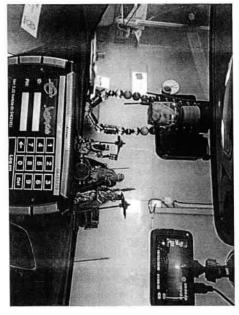
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Staff Sgt KOH SIEN KHAI, KELVIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/01/2019 11:24
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case:
Authentication Stamp NP168 SIGNATURE	:







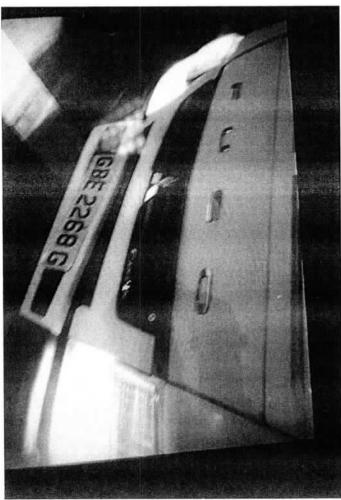












ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive Singapore 508969 Tel: 6214 8300

TP INSURER:

Tokio Marine Insurance Singapore Ltd (HQ)

CTPL

Singapore

PARTICULARS OF CLAIM

Claim Type:

THIRD PARTY

Ref. No:

04/01/2019

Policy No:

SHC2182J

Driveable?

Date of Loss:

YES

Vehicle Reg. No.: Party At Fault:

UNKNOWN

Vehicle Reg.

13/10/2016

Make/Model:

HYUNDAI 140, 1.7 D CRDI F/L ABS AIRBAG 4DR (A)

Date:

Vehicle Colour:

BLUE

Gen Condition:

GOOD

Engine No:

D4FDGU683902

Chassis No:

KMHLB41UMHU095384

Odometer:

293295 KM

Paint Type:

List Item Discount:

20.00 %

Total Loss?

NO

Est. Duration of

Repair (day)

3

Present Location:

COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

COST OF CLAIMS Parts Miscellaneous Items Labour Paintwork Labour	LKK Auto Consultants hence notify the Repairer of the following: To resurvey before/after spray painting To display damaged part(s) during resurvey Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" basis No illegal modification(s) is allowed Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company	Amount 760.00 10.00 810.00 0.00
Towing	Acknowledged by Repairer	0.00
	Signature: Gross Total (S\$) Date: + GST 7.00% (S\$)	1,580.00 110.60
	Nett Amount (S\$)	1,690.60

This claim is handled by: JUMANI BIN MASUDIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR	DETAILS	S
Referen	ce	
Part Source	: MRM-SG	Version: 1.0 (Last Synchronised: 07 Jan 2019)
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:	ComfortDel	Gro Engineering Pte Ltd/SHC2182J/07/01/2019 16:01
Validity:	These estim numbers with	ates are valid only if they contain the print code (above) on all estimate pages, running page in the END OF ESTIMATES marker on the last estimate page
Further Info	: Items/values	not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*REAR BUMPER	20.00	0.00	- 1.553.00 FLde_
2	10		*REAR BUMPER CLIPS	20.00	0.00	*22.00 FLACX NV
3	1		*REAR BUMPER RUBBER MAT	0	0.00	✓ *50.00 FS N
4	1		*REAR BUMPER ADVERTISEMENT	0	0.00	*50.00 FS~46
5	1	and C-Canblatt	*REAR FENDER ADVERTISEMENT	0	0.00	- *200.00 FS ~ ()
F-F18	inchise	part 5-Spcivett	. L=ListItemDisc.			875.00
			Sub Total (S\$)			
			- List Item Discount on L Items (S\$)			115.00
			Total Parts (S\$)			760.00

ComfortDelGro Engineering Pte Ltd/SHC2182J/07/01/2019 16:01. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

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Estimates	On	Miccal	langous	Itame
	OH	MISCEI	lalicous	1101113

No	Qty	Particulars		Amount	
Mis 1	cellan 1	eous Items OD/TP Case (Insurer)		10.00	/
			Sub Total (S\$)	10.00	

				 ć
- cti	mai	100	On	bour
511	1110	153	OH	oou

No	Particulars	Lab.Type		Amount
Lab	our Items			
1	PANEL BEATING	New	200	400.00
2	SPRAY PAINTING	New	200	300.00
3	WIRING	New	20	30.00
4	REMOVE /REFIX REVERSE SENSOR	New	30	80.00
		Gross Labour Cost (S\$)		810.00

ComfortDelGro Engineering Pte Ltd/SHC2182J/07/01/2019 16:01. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

742.40 10 450. 1202.40

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6260 Facsimile + 65 6260 9760

Workshops
59 Loyang Drive Singapore 56958
383 Sin Ming Drive Singapore 576717
45 Pandan Fload Singapore 609285
501 Yehun Industrial Pank A Singapore 76873

Date/Time: 47.30T.2019 10:47 Page : 1

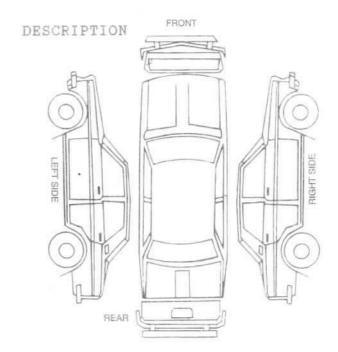
Team:	ARC Repair TP(CLSO)1	JOB CARD	Sales Order:	JC No.: 305257292
TOMER			REGN NO.: SHC2182J	MILEAGE
MS STOMER NO	COMFORT TRANSPORTATION PTE 7010045	LTD	MAKE: HYUNDAI	FUEL E
IRESS	383 SIN MING DRIVE Singapore SINGAPORE 575717		MODEL I-40	DATE/TIME IN 05.01.2019 12:15
(R) (P)	65508755 (O)		YR OF MANU. 13.10.2016	TARGET DATE
COLINT CAF	BD NO		CHASSIS CODE KMHLB41UMHU09538	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 04.01.2019

NATURE: 3P 04.01.19

S/NO LABOR CODE



					27
ECKED & P	ASSED OUT BY:				
	SERVICE ADVISOR			CUSTOMER'S SIGNATURE	
wiedgeme	nt Slip		M Exit Pass		
: o.: e No.:	SHC2182J	CHIANG	Vehicle No.: SHC2182J		
of Service		Signature/Date	Name of Service Advisor	Date	
returned to	Service Reception upon o	collection	To be kept by Security Guard		

COMFORTDELGRO ENGINEERING

	Our Job Ref No :3		305257292			ENGINEERING	
Date :		: 08	8/01/19		59 Loya	tDelGro Engineering Pte Ltd ang Drive Singapore 50896 46 8156	
FINALIZATION FORM					Pax: 65	46 6 106	
То	: _		LKK		Fax:		
Attn	:		TAUFIKH				
Vehic	cle Reg	No. : SHC218	2J		<u></u>	04/01/19	
The:	survey	and estimates of the	repairs of the above-n	nentioned vehicle	are as follows:-		
1.	The	epair job shall bill to:		токіо		GBE2268G	
2.	The f	inalized amount shall	be:				
	(a)	Spare Parts after Li	ist discount			\$492.40	
	(b)	Labour Charges				\$710.00	
		Total for Part-By-F	Part Repair Cost			\$1,202.40	
	(c.)	Lumpsum Repair (i Total for Lumpsum Final Lumpsum Re	repair cost after Less:			H	
4.	Wes	hall treat the above	amount as Correct a	and Confirmed if	there is no rep	ly from you within 7	
5.		ting days	artice.		e confirm the es alized amount	stimates and	
5.	Than	ok you for your assista	ance.	fin	alized amount		
5.	Than	ature ;	ance.	fin Sig	alized amount		
5.	Than Signa Nam	ature :		fin Sk Na	gnature:		
5.	Than Sign: Nam Tel	ature : CHIANG 62148314	V	fin Sig Na Da	gnature:		
	Sign: Nam Tel Fax	ature : CHIANG 65468156		fin Sig Na Da	gnature:		
	Sign: Nam Tel Fax	ature : CHIANG 62148314	V	fin Siç Na Da	gnature:		
	Sign: Nam Tel Fax	ature : CHIANG 65468156	V	fin Sig Na Da	gnature:		
For	Signa Nam Tel Fax	ature : e : CHIANG : 62148314 : 65468156		Sig Na Da Document Attached	gnature : time :		
For	Signa Nam Tel Fax Officia	ature : e : CHIANG : 62148314 : 65468156		Sig Na Da Document Attached Yes or No	gnature : time :		
1. F	Signa Nam Tel Fax Officia	ature : e : CHIANG : 62148314 : 65468156 I Use Only Item Rate P/Day Income Paid		Document Attached Yes or No	gnature : time :		
1. F 2. L 3. S 4. L	Signa Nam Tel Fax Officia	ature : e : CHIANG : 62148314 : 65468156 I Use Only Item Rate P/Day Income Paid Fees arch Fee		Document Attached Yes or No	gnature : time :		
1. F 2. L 3. S 4. L 5. M	Signa Nam Tel Fax Officia Rental F Loss of Survey	ature : e : CHIANG : 62148314 : 65468156 I Use Only Item Rate P/Day Income Paid Fees	Amount	Document Attached Yes or No	gnature : time :		

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 08.01.2019 Time: 11:04:59

Page: 2

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO : 305257292

MILEAGE

: SHC2182J : 0000000000

MAKE

: HYUNDAI

MODEL

: I-40

DATE OF REGN

: 13.10.2016

DATE/TIME IN

: 05.01.2019 12:15

ACCIDENT DATE : 04.01.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,202.40

MVA NAME & SIGNATURE DATE:

AUTHORISED: YES/NO

SURVEYOR NAME & SIGNATURE

DATE:

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

LAIM SUB	FOLDER TRA	CKING		Fine constant	T		1	
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	_
Main	07 Jan 2019		08 Jan 2019 10:11 Edit Adj Rpt	S\$1,202.40 Edit Estimates	S\$1,202.40 View Rpt		Pending for Report Cancel Case	-
	Main	R	eference	Claim De	tails	Documents		Show All
CLAIM SU	BFOLDER DI	ETAILS			[Created	by insurer]		
Insured:	CHUA AH	TEE, Co. Reg. N	lo.: 53317091E					
Main Claimant:	COMFOR	TRANSPORTAT	ION PTE LTD, C	o. Reg. No.: 199303	821R			
Vehicle Reg No.:	SHC218	23		Date of		9 21:00 - :59 s and 22 Days Fro	m LTA Reg Date	(Man Yr)]
Claim Type	TP / M1	900104		Policy/0 Note N		(Comprehensive) 01/10/2018 - 30/0	9/2019	
Vehicle Reg No. (Insured):	GBE2268G				No. ant):			
,				Excess	S\$750.00			
Repairer:	Comfort	elGro Engineeri	ng Pte Ltd (Loyan	g) 59 Loyang Drive,	508969 Loyang -	Tel: 6214 8300		
Handling Insurer:) - Tel: 6221 6111 .				
Adjuster:	17/01/2	Consultants Pto 019]	e Ltd (HQ) - Tel: 6	256-3561 [Handle	ed by MOHD TAUF	IKH BIN HAMID	[Final Rpt	due
ASSOCIA	TED MAIL RE	CEIVED				Viev	w All Compos	se Case Ma
There are r	o mail for this	case.						
ALL ASSO	CIATED TAS	sks⊟			View All	Search Tasks C	reate New Task	Complet
Due Dat	e Priority	Type Tasi	Group Subje	ct Handler	Assigned By	Completed On	Created O	n Don

Claim Documents

*SHC2182J (M1900104)

[GBE2268G]

TP

COMFORT TRANSPORTATION PTE LTD

Jan 4 2019 9:00PM

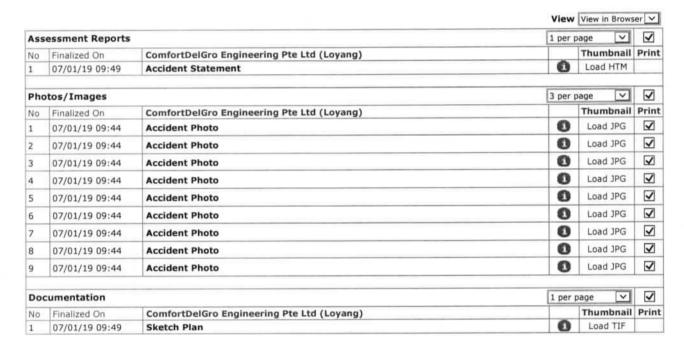
[CHUA AH TEE]

ComfortDelGro Engineering Pte Ltd

Ass	sessment Reports		1 per page
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail Pri
1	07/01/19 12:22	Accident Statement From:SC - Reg. No: GBE2268G, Claimant: CHUA AH TEE	1 Load HTM
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail Pri
1	07/01/19 09:49	Accident Statement	1 Load HTM
Pho	otos/Images		3 per page
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail Pri
1	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
2	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
3	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
4	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
5	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
6	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
7	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
8	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
9	07/01/19 09:44	Accident Photo [Linked Accident Report Documents]	1 Load JPG
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail Pri
1	25/01/19 18:10	General View	■ Load JPG
2	25/01/19 18:10	General View	1 Load JPG
3	25/01/19 18:10	General View	1 Load JPG
4	25/01/19 18:10	General View	1 Load JPG
5	25/01/19 18:10	General View	1 Load JPG
6	25/01/19 18:10	General View	1 Load JPG
7	25/01/19 18:10	General View	1 Load JPG
8	25/01/19 18:10	General View	1 Load JPG
9	25/01/19 18:10	General View	1 Load JPG
10	25/01/19 18:10	General View	1 Load JPG
11	25/01/19 18:10	General View	Load JPG
12	25/01/19 18:10	General View	1 Load JPG
13	25/01/19 18:10	General View	■ Load JPG
14	25/01/19 18:10	General View	1 Load JPG
15	25/01/19 18:10	General View	1 Load JPG
16	25/01/19 18:10	General View	Load JPG
17	25/01/19 18:10	General View	1 Load JPG
18	25/01/19 18:10	General View	1 Load JPG
19	25/01/19 18:10	General View	Load JPG

Assessment Reports		1 per	page 🔻		
No	Finalized On Tokio Marine Insurance Singapore Ltd (HQ)			Thumbnail	-
					~
20	25/01/19 18:12	Replacement Part Photo	0	Load JPG	V
21	25/01/19 18:12	Replacement Part Photo	0	Load JPG	V
22	25/01/19 18:12	Replacement Part Photo	0	Load JPG	✓
Doc	cumentation		1 per	page 🔻	V
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)		Thumbnail	Print
1	08/02/19 18:00	Letter of Demand from Third Party	0	Load TIF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	07/01/19 09:49	Sketch Plan [Linked Accident Report Documents]	0	Load TIF	

Linked Accident Report Documents



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: 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:

CS/TMI19000405/T1QD3E2

Date:

13/02/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No:

MT106972

Claimant Vehicle SHC2182J

Insured Vehicle No:

GBE2268G

Date of Loss:

04/01/2019

Nature of Claim:

TP

Claim No: M1900104

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHC2182J

Make & Model:

HYUNDAI I40, 1.7 D CRDi (A)

Engine No:

D4FDGU683902

293295 km

Reg. Date: Colour:

13/10/2016 (Man. Year: 2016) Blue

Chassis No: Odometer:

KMHLB41UMHU095384

Engine Capacity:

1685 cc

Market Value/New Car Price: N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

Pre-accident Condition: No

CONDITION OF TYRES

Front Tyre Size:

205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side:

Hankook 6 mm

Rear Left Side: Rear Right Side: Hankook 6 mm Hankook 6 mm

Front Right Side: Hankook 6 mm The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	760.00	742.40	17.60	2.32
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	810.00	450.00	360.00	44.44
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	1,580.00	1,202.40	377.60	23.90
+ GST 7.00/7.00% (S\$)	110.60	84.17	26.43	23.90
Nett Amount (S\$)	1,690.60	1,286.57	404.03	23.90

INSPECTION

Date of Assignment:

08/01/2019

Date Inspected:

07/01/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd

(Loyang)

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

2.0 days

MOHD TAUFIKH BIN HAMID Adjuster:

Manager: SHIAU CHAN

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

Referen	ce		
Part Source:	: MRM-SG	Version: 1.0 (Last Synchronised: 13 Feb 2019)	
Parts:	143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)	
Labour:	Repairer's	(Price-denominated Standard List)	
Print Code:	(Unsubmitted, no print-code for SHC2182J)		
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 n	ot in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Deformed	553.00 FL	*553.00 FL
2	10		*REAR BUMPER CLIPS	Not Necessary	22.00 FL	*-FL
3	1		*REAR BUMPER RUBBER MAT	Necessary	50.00 FS	*50.00 FS
4	1		*REAR BUMPER ADVERTISEMENT	Necessary	50.00 FS	*50.00 FS
5	1		*REAR FENDER ADVERTISEMENT	Necessary	200.00 FS	*200.00 FS
F=Fra	anchise	part. S=SpcN	ett. L=ListItemDisc.			
				Sub Total (S\$)	875.00	853.00
			- List Item Discount on L	Items 20.00/20.00% (S\$)_	115.00	110.60
				Total Parts (S\$)	760.00	742.40
			Report was unsubmitted of	during this print-out.		

450.00

810.00

Recommended Miscellaneous Items

No	Qty Particulars		Repairer's	Amount
Misc	cellaneous Items			
1	1 OD/TP Case (Insurer)		10.00	10.00
		Sub Total (S\$)	10.00	10.00
Re	commended Labour			
No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	400.00	200.00
2	SPRAY PAINTING	New	300.00	200.00
3	WIRING	New	30.00	20.00
4	REMOVE / REFIX REVERSE SENSOR	New	80.00	30.00

Report was unsubmitted during this print-out.

Gross Labour Cost (S\$)

< END OF ESTIMATES >