menmen Ralvir	ASSI ASSI	GNMENT (Office)			4401000000
	anthillen of	TMI	Da	te/Time:_	19/2/198 3.12pr
Estimated Cost:		Bill to:			
OD TP WS / TP RES / O To Inspect Vehicle No:		MV7C8	Insured:	SF	u 61999 48300
at Workshop m/s	Comforto		Tel:	621	48300
of	sa loving s				
Policy No: MIOO1	630		M190	1002	
Sum Insured:		Excess:			
Make of Veh: (Client's Record)			D.0	D.A. 17	12/19
CA / REV / REP. / REV				I.O.D. Endo	
Date/Time: 19 2/1904	Person Con	tacted:	Vehi		DUT
Date/Time Action/Instru	ction () Est	imate			
	- American	CR17013184/	1c1-ma 30	12	DoA: 6/4/12
	19P->)	-	
9,000	PT				

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	18 Feb 2019 19:00	18 Feb 2019 19:12	19 Feb 2019 15:12				New Assignment
	Sendback Est	S\$1,839.30	Assign				Cancer Case

Ma	Main Reference C		Claim Details	Docu	uments	Show All	
CLAIM SUB	FOLDER DETAILS			and the owner, the same	AND THE RESERVE TO SERVE THE PARTY OF THE PA		
Insured:	SECTION CREDI	T & MOTOR LEASI	NG PTE LTD, Co.	Reg. No.: 19870	3128Z		
Main Claimant:	Service Alexanders and	o. Reg. No.: 199303					
Vehicle Reg. No.:	SHB4454S			Date of Loss:	17/02/2019 14:00 - [32 Months and 29 D		eg Date (Man Yr)]
Claim Type:	TP / M1901002	2		Policy/Cover Note No.:	MI001630 (Comprehe Coverage: 15/10/201	ensive)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Vehicle Reg. No. (Insured):	SFU6199P			Policy No. (Claimant):			
				Excess:	S\$1,800.00		
Repairer:	ComfortDelGro I	Engineering Pte Lt	d (Loyang) 59 Loy	ang Drive, 5089	69 Loyang - Tel: 6214	8300	
Handling Insurer:					ndled by Dillen Senth		joo]
Adjuster:	LKK Auto Consu	Itants Pte Ltd (HQ) - Tel: 6256-3561 .	[Final Rpt	due 28/02/2019]		
ASSOCIATE	D MAIL RECEIVE	D				View All	Compose Case Ma
There are no	mail for this case.					TIGHT.	compose case me
ALL ASSOC	IATED TASKS⊟				View All Search To	asks Create N	ew Task Comple
Due Date No results.	Priority Type	e Task Group	Subject Hand	dler Assign	ed By Complete	ed On Cre	ated On Done

VIVIFURIUELGRO

COMFORTDELGRO

Date/Time: 18.02.2019 17:29

Page :

Team: OMER

ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

GRASSIS C

JC NO .: 3052701

COMFORT TRANSPORTATION PTE LTD

7010045

OMER NO. **IESS**

383 SIN MING DRIVE

Singapore SINGAPORE 575717

65508755

(R) (P)

DUNT CARD NO.

REGN NO.: SHB4454S MILEAGE MAKE: FUEL HYUNDAI MODEL 18.02.2019 13: I-40 YR OF MANU 19.05.2016 TARGET DATE

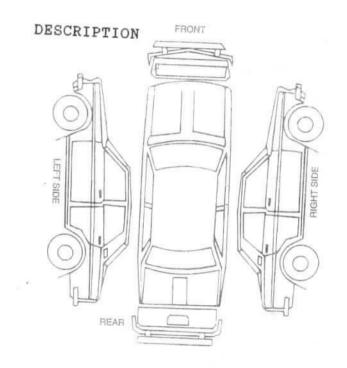
ODE KMHLB41UMGU089738 COMPLETION DATE/TIME

JOB DESCRIPTION

Accident Date: 17.02.2019 NATURE: 3P 17.02.2019/B

S/NO

LABOR CODE



DKED & PASSED OUT BY:				
SERVICE ADVISOR				
dest.		ep.	CUSTOMER'S SIGNATURE	
No.: SHB4454S L	KE Kalvin	Vehicle No.: SHB4454S		
Service Advisor urned to Service Receatlan upon collection	Signature/Date	Name of Service Advisor	Date	
		To be kept by Security Guard		

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	18/02/2019 15:55
Date Of Accident	17/02/2019 14:45
Exact Location Of Accident	CTE TO PIE NEAR TO BRADDELL EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB4454S
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 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	CHUA KIM LEE
NRIC No	S1241417Z
Date Of Birth	08/03/1957
Occupation	OUTDOOR
Date Of Driving Pass	04/04/1975
Driving Experience	43 YEARS AND 10 MONTHS
Gender	MALE
at works the above market terminal controls	TARGET AND ADDRESS

(LOCAL) +65-90608072

CHUAKIMLEE57@HOTMAIL.COM

Address

636B SENJA ROAD 11-321

Postcode

672636

800 VO

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

OTHER - TAXI DRIVER

Vehicle

-

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

CHAIN COLLISION

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

3

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:

E: :

: 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

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

SFU6199P

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

Name of Driver

PRIVATE CAR TAY LIANG KIAT

NRIC/Passport Number

S8608811H

Contact Number

Address

. . .

Postcode

Insurance Company Name

Nature Of Damage

FRT & REAR

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKW2030Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

ALVIN LOH CHIN LOKE

NRIC/Passport Number

S8225145F

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

SKETCH PLAN			
A-3+118 44543			
RISEU 61998			HHMH
C-8KW3C302-CTF			
H-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
HILL PIE HIL		#####	
Near-Co			
Braddell			
	1 2 13		
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT		112111111	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	The state of the s	1 - 1	, 1
On 17/2/19 at	abart 14	:45 hrs,	was
			Λ
driving at above some	d location	with a	Hemale par
2) 1/	: 1		- /
Shortly veh mfrn	1 bribed	10 800	oped and
1 0 11 2 4 1 0	4 1	1 1	0.
1 follow suit. A few	second lotte	or, 1 te	lt an
in a contract of the same from	. 1 0/- 1	1 de	·
impact from my tex	i bening !	Wein au	un 10
check Nels B finet	0041 011	and com	-160
check Veh B front	portion colli	aca one	io The
Kense partition of man	feer and	011-11-0	2015 VOIA
rear portion of my	certi ann	another	car ven
C also involved in t	this Chaus	callistica	
C 3150 1/10/14 1/1 1	rus croun	(DIIISION	
Llo minm reported	at the c	rough al	cinable and
TOTAL TRIPLET	at the f	JOINT OF	Accident
DECLARATION			1
I/We declare the foregoing particulars are true in every resi	pect.		1
CO. REG. NO. 19930383 R	5	_	1
Policyholder's Signature Driver's Signature		Reporting Centre Perso	
Date & Time: (If driver is not the r	coliculation	Managar	11 - 11 la Charre

Sketch Plan Pg. 2

IMPORTANT NOTICE

- 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
- 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.
- 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.
- 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.

COMFORT TRANSPORTATION PTE Policyholder Signature 199303821R

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

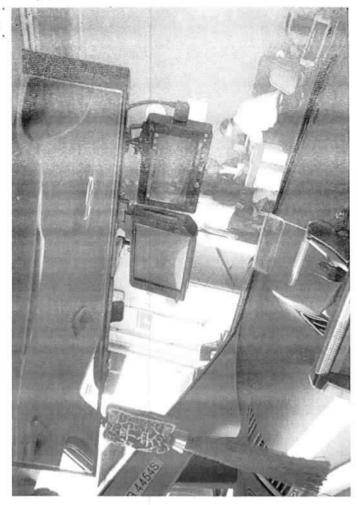
Reporting Centre Personnel's Signature

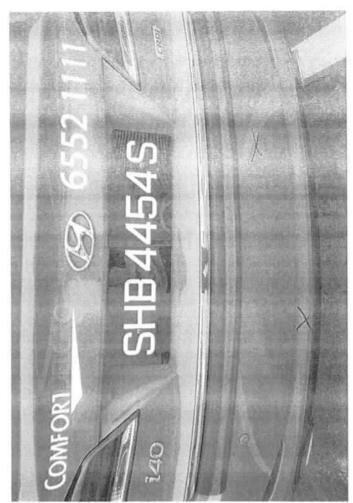
Name:

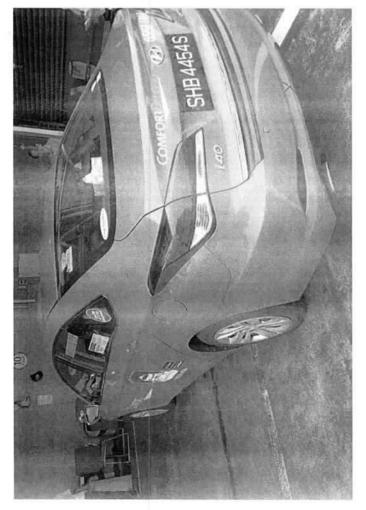
NRIC/FIN No .:

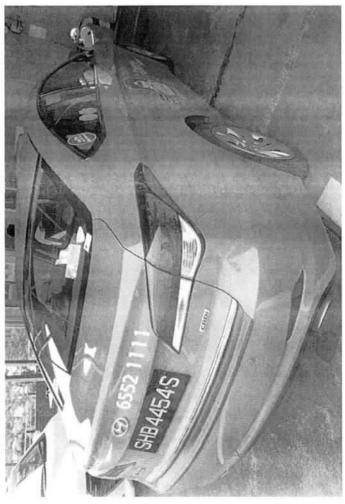
Loke Wei Yieng

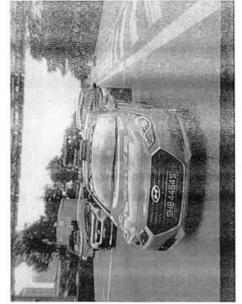
18/2/19

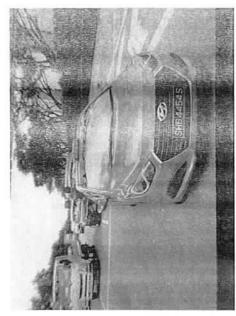






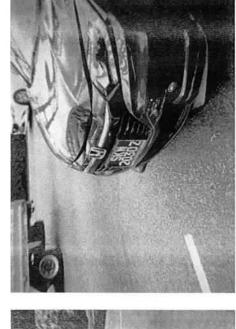


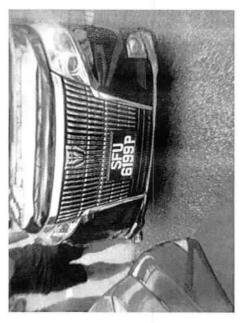
















ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

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:

17/02/2019

Policy No:

SHB4454S

Date of Loss: Driveable?

YES

Vehicle Reg. No.: Party At Fault:

UNKNOWN

Vehicle Reg.

19/05/2016

Make/Model:

HYUNDAI 140, 1.7 D CRDI (A)

Date:

Vehicle Colour:

BLUE

0 KM

Gen Condition:

GOOD

Engine No:

D4FGU624587

Chassis No:

KMHLB41UMGU089738

Odometer:

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		Amount
Parts		1,199.30
Miscellaneous Items		10.00
Labour		630.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	1,839.30
	+ GST 7.00% (S\$)	128.75
	Nett Amount (S\$)	1,968.05

This claim is handled by: LIM KWOK ENG

2464, 10

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 18 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: ComfortDelGro Engineering Pte Ltd/SHB4454S/18/02/2019 19:12

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 *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1	Rev	*FRT BUMPER COVER X	20.00	0.00	*553.00 FL
2	10	, •	*FRT BUMPER CLIP × **	20.00	0.00	*22.00 FL
3	1		*FRT BUMPER UNDER COVER	20.00	0.00	*228.00 FL
4	1		*FRT BUMPER REINFORCEMENT	20.00	0.00	*428.40 Fl
5	1		*FRT BUMPER SIDE BRACKET LH	20.00	0.00	*35.60 Fl
3	1		*FRT BUMPER MAT × 4n nu	0.00	0.00	*50.00 F
7	1	V	*FRT BUMPER REVERSE SENSOR X	0.00	0.00	*135.70 F
=Fra	nchise i	oart. L=ListItem	Disc.			
			Sub Total (S	\$)		1,452.70
			- List Item Discount on L Items (S	\$)		253.40
			Total Parts (S	\$)		1,199.30

ComfortDelGro Engineering Pte Ltd/SHB4454S/18/02/2019 19:12. Not valid without Reference section. Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No Q	ty Particulars		Amount
Miscell 1 1	aneous Items OD/TP Case (Insurer)		10.00
		Sub Total (S\$)	10.00

Estimates	On	ahou	r
Lauratea		Labou	

No	Particulars	Lab.Type	Amount
Lab	our Items		200_
1	PANEL BEATING	New	300.00
2	SPRAY PAINTING CHARGE	New	250.00 200
3	REMOVE/REFIX REVERSE SENSOR	New	80.00 ×12
		Gross Labour Cost (S\$)	630.00

ComfortDelGro Engineering Pte Ltd/SHB4454S/18/02/2019 19:12. Not valid without Reference section.

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< END OF ESTIMATES >

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Part the Property of the Prope

COMFORTDELGRO ENGINEERING

Our Job Ref No		f No	305270121			Confed Col Con Francisco De Led		
Date		2	21.02.1	21.02.19		ComfortDelGro Engineering Pte L 59 Loyang Drive Singapore 5089 Fax: 6546 8156		
FINA	LIZAT	ION FORM	ı			Fax. 60	46 6136	
То	1		LKK			Fax:		
Attn	: N	1r	KALVIN	ANG				
Vehicle Reg No. SHB4454S		SHB4454S	CTPL		_	17.02.19		
The	SURVEY	and estima	tes of the renairs	of the above-men	ntioned vehicle a	re as follows:-		
1110						e do follotto.		
1.	The	repair job sl	nall bill to:	ток	A MARINE		SFU6199P	
2.	The	finalized am	nount shall be:					
	(a)	Spare Pa	rts after List disc	ount			\$182.40	
	(b)	Labour C	harges				\$410.00	
		Total for	Part-By-Part R	epair Cost			\$592.40	
	(c.)		n Repair (if applic Lumpsum repair		20%			
			mpsum Repair		2070			
3.	Estir	nated norm	al period for repa	irs:	wo	rking days.		
4.				ınt as Correct ar	d Confirmed if	there is no rep	oly from you within	
	7 wo	orking days	5					
5.	Thar	nk you for y	our assistance.	,	We confirm the estimates and finalized amount			
				A	1111	alizeu amount	1/	
				AV				
	Sign	ature:			Sig	gnature :		
	Nam	ne : LIM	M KWOK ENG		Na	me :	Kalmi	
	Tel	: 62	62148316		Da	te :	21/2/19	
	Fax	: 65	468156		_		1 15	
For	Officia	I Use Only	0					
					Document			
		Item		Amount	Attached Yes or No	Confirm By (Signature)	Remarks	
1. F	Rental F	Rate P/Day			YES			
2. L	Loss of Income Paid			NO				
3. 8	Survey	Fees						
		arch Fee Fees (on b	ehalf	\$7.49				
C	of driver	r, if applicab						
	Overrur							
Rem	narks:							

COMFORTDELGRO ENGINEERING PTE LTD

Date: 21.02.2019 Time: 09:12:02

REPAIR ESTIMATE

Page: 1

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

: 305270121

MILEAGE

: SHB4454S : 0000000000

MAKE

: HYUNDAI

MODEL

: I-40

DATE OF REGN : 19.05.2016 DATE/TIME IN : 18.02.2019

: 18.02.2019 13:55

ACCIDENT DATE : 17.02.2019

JOB / PARTS DESCRIPTION

OTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0738-G I40VC COVER-RR BUMPER LWR 1 L 228.00 20.00 182.40

SUB-TOTAL : 182.40

JOB NATURE

0000 L

MERIMEN CHARGE

10.00

0001 L PANEL BEATING

200.00

0002 23-502 SPRAYPAINT ON AFFECTED AREA

200.00

SUB-TOTAL: 410.00

TOTAL : 592.40

AUTHORISED: YES / NO

MVA NAME & SIGNATURE

DATE:

DATE:

SURVEYOR NAME & SIGNATURE

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W) 59 Loyang Drive Singapore 508969 Tel: 6214 8300

(SUPPLEMENTARY)

TP INSURER:

Present Location:

Tokio Marine Insurance Singapore Ltd (HQ)

SECTION CREDIT & MOTOR LEASING PTE LTD

Singapore

PARTICULARS OF CL	AIM	
Claim Type:	Third Party	Ref. No:
Policy No:	MI001630	Date of 17/02/2019 Loss:
Vehicle Reg. No.:	SHB4454S	Driveable? YES
Party At Fault:	UNKNOWN	
Make/Model:	HYUNDAI I40, 1.7 D CRDi (A)	Vehicle 19/05/2016 Reg. Date:
Vehicle Colour:	Blue	Gen Good Condition:
Engine No:	D4FGU624587	Chassis KMHLB41UMGU089738 No:
Odometer:	0 KM	
Paint Type:		
List Item Discount:	20.00 %	
Total Loss?	NO	
Est. Duration of Repair	(day) 3	

COST OF CLAIMS		Amount
Parts		624.80
Miscellaneous Items		0.00
Labour		0.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	624.80
	+ GST 7.00% (S\$)	43.74
	Nett Amount (S\$)	668.54
	+ Previous Estimates (S\$)	1,968.05
	Claim Total (S\$)	2,636.59

COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 21 Feb 2019)

Parts:

143

3 Hi

HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: ComfortDelGro Engineering Pte Ltd/SHB4454S/21/02/2019 14:36

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 *.

Estimates on Parts

No.	Qty P	art No.	Particulars	Repeated	%Disc	%Depr	Amount
1	1		*REAR BUMPER COVER HEAD 1 X	Lotts Reiko	10.120.00	0.00	*553.00 FL
2	1		*REAR BUMPER UNDER COVER 140m 3	- Ent	20.00	0.00	*228.00 FL
F=Fra	anchise part	t. L=ListItemDis		Sub Total (S\$)			781.00
							450.00
			- List Item Discount or	L items (5\$)			156.20

ComfortDelGro Engineering Pte Ltd/SHB4454S/21/02/2019 14:36. Not valid without Reference section.

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Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

There are no labour items selected.

ComfortDelGro Engineering Pte Ltd/SHB4454S/21/02/2019 14:36. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	18 Feb 2019 19:00 Sendback Est	18 Feb 2019 19:12 \$\$1,839.30	19 Feb 2019 15:12 Edit Adj Rpt	S\$592.40 Edit Estimates	\$\$592.40 View Rpt		Pending for Survey Report Cancel Case	
Supp #1	21 Feb 2019 14:33	21 Feb 2019 14:36 \$\$624.80	21 Feb 2019 14:36			(Combined)	Combined with Main Uncombine Suppl.	
	Main		rence	Claim Det	ails	Documents	Show All	
	JBFOLDER DETA		FACTNIC DEF LE	, Co. Reg. No.: 1	07021207			
Insured: Main Claimant:	CTPL (1/3),	NAMES AND ADDRESS OF THE		, Co. Reg. No.: 1	567031262			
Vehicle Re No.:	g. SHB4454S			Date of L	oss: 17/02/2019 [32 Months		LTA Reg Date (Man Yr)]	
Claim Type	E: TP / M1901	.002		Policy/Co Note No.		MI001630 (Comprehensive) Coverage: 15/10/2018 - 14/10/2019		
Vehicle Re	g.			Policy No				

ASSOCIATED MAIL RECEIVED

28/02/2019]

Priority Type

There are no mail for this case. ALL ASSOCIATED TASKS

Due Date No results.

(Insured):

Repairer: Handling

Insurer:

Adjuster:

Task Group

Subject

ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300

View All Handler Assigned By

(Claimant):

Excess:

Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Dillen Senthilan so Selvaraĵoo]

LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due

S\$1,800.00

Search Tasks Completed On

Create New Task

View All

Created On

Compose Case Mail

Complete

Claim Documents

SHB4454S (M1901002)

[SFU6199P]

TP

CTPL (1/3)

Feb 17 2019 2:00PM

[SECTION CREDIT & MOTOR LEASING PTE LTD]

ComfortDelGro Engineering Pte Ltd

Ass	essment Reports		1 per p	page V	~
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	I pui	Thumbnail	777
1	18/02/19 19:12	Repairer Estimates	0	Load HTM	71111
2	21/02/19 14:36	Repairer Estimates Suppl. #1	0	Load HTM	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumi		Print
1	19/02/19 12:19	Accident Statement From:SC - Reg. No: SFU6199P, Claimant: SECTION CREDIT & MOTOR LEASING PTE. LTD. (2/3)	0	Load HTM	
Pho	tos/Images		3 per j	page 🔻	V
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	_
1	21/02/19 08:14	General View	0	Load JPG	V
2	21/02/19 08:14	General View	0	Load JPG	V
3	21/02/19 08:14	General View	0	Load JPG	V
4	21/02/19 08:14	General View	0	Load JPG	V
5	21/02/19 08:14	General View	0	Load JPG	V
6	21/02/19 08:14	General View	0	Load JPG	V
7	21/02/19 08:14	General View	0	Load JPG	V
8	21/02/19 08:14	General View	0	Load JPG	V
9	21/02/19 08:14	General View	0	Load JPG	V
10	21/02/19 08:14	General View	0	Load JPG	~
11	21/02/19 08:14	General View	0	Load JPG	V
12	21/02/19 08:14	General View	0	Load JPG	V
13	21/02/19 08:14	General View	0	Load JPG	V
14	21/02/19 08:14	General View	O	Load JPG	V
15	21/02/19 08:14	General View	0	Load JPG	~
16	21/02/19 08:14	General View	0	Load JPG	V
17	21/02/19 08:14	General View	0	Load JPG	V
18	21/02/19 08:39	Reinspection Photo	0	Load JPG	V
19	21/02/19 08:39	Reinspection Photo	0	Load JPG	V
20	21/02/19 08:39	Reinspection Photo	0	Load JPG	V
Doc	umentation		1 per p	page V	V
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)	T bei	Thumbnail	-
1	25/02/19 09:26	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee	0	Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	-	Thumbnail	Print
1	18/02/19 19:25	E-filed GIA report	0	Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	25/02/19 10:54	Supplementary	0	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print	
				44

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	

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/TMI19003193/K1SD3E2

Date:

25/02/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No:

MI001630

Claimant Vehicle

SHB4454S

Insured Vehicle No:

SFU6199P

Date of Loss:

17/02/2019

Nature of Claim:

TP

Claim No: M1901002

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHB4454S

Make & Model:

HYUNDAI I40, 1.7 D CRDi (A)

Engine No:

D4FDGU624587

315794 km

Reg. Date: Colour:

19/05/2016 (Man. Year: 2016)

Chassis No: Odometer:

KMHLB41UMGU089738

Engine Capacity:

Blue

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:

Good Steering (Serviceable): Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No Pre-accident Condition:

Good

CONDITION OF TYRES

Front Tyre Size:

205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side: Front Right Side: Hankook 7 mm Hankook 7 mm Rear Left Side: Rear Right Side: Hankook 7 mm Hankook 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
Parts		1,824.10	182.40	1,641.70	90.00
Miscellaneous Items		10.00	10.00	0.00	0.00
Labour		630.00	400.00	230.00	36.51
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Gross Total (S\$)	2,464.10	592.40	1,871.70	75.96
3	+ GST 7.00/7.00% (S\$)	172.49	41.47	131.02	75.96
	Nett Amount (S\$)	2,636.59	633.87	2,002.72	75.96

INSPECTION

Date of Assignment:

19/02/2019 Present Location:

ComfortDelGro Engineering Pte Ltd

(Loyang)

Date Inspected:

19/02/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd

(Loyang)

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

2.0 days

Adjuster: KALVIN ANG WEI KUN

Manager:

Hiew May Fung

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: 25 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 SHB4454S)	
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		*FRT BUMPER COVER SHOULD BE REAR BUMPER COVER INSTEAD OF FRT BUMPER COVER	Repair	553.00 FL	*-FL
2	10		*FRT BUMPER CLIP SHOULD BE REAR BUMPER CLIP INSTEAD OF FRT BUMPER CLIP	Not Necessary	22.00 FL	*-FL
3	1		*FRT BUMPER UNDER COVER SHOULD BE REAR BUMPER UNDER COVER INSTEAD OF FRT BUMPER UNDER COVER	Cut	228.00 FL	*228.00 FL
4	1		*FRT BUMPER REINFORCEMENT SHOULD BE REAR BUMPER REINFORCEMENT INSTEAD OF FRT BUMPER REINFORCEMENT	Serviceable	428.40 FL	*-FL
5	1		*FRT BUMPER SIDE BRACKET LH SHOULD BE REAR BUMPER SIDE BRACKET LH INSTEAD OF FRT BUMPER SIDE BRACKET LH	Serviceable	35.60 FL	*-FL
6	1		*FRT BUMPER MAT SHOULD BE REAR BUMPER MAT INSTEAD OF FRT BUMPER MAT	Not Necessary	50.00 F	*-F
7	1		*FRT BUMPER REVERSE SENSOR SHOULD BE REAR BUMPER REVERSE SENSOR INSTEAD OF FRT BUMPER REVERSE SENSOR	Serviceable	135.70 F	*-F
Sup	pleme	entary a	<u>#1</u>			
8	1		*REAR BUMPER COVER	Repeated	553.00 FL	*-FL
9	1		*REAR BUMPER UNDER COVER	Repeated	228.00 FL	*- FL
F=Fra	anchise	part. L=L	ListItemDisc.		7	
				Sub Total (S\$)	2,233.70	228.00
			- List Item Discount on L Items 20.	00/20.00% (S\$)	409.60	45.60
			1	otal Parts (S\$)	1,824.10	182.40

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

No	Qty	Particulars		Repairer's	Amount
Mis	cella	neous 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
Lab	our Items			
1	PANEL BEATING	New	300.00	200.00
2	SPRAY PAINTING CHARGE	New	250.00	200.00
3	REMOVE/REFIX REVERSE SENSOR	New	80.00	0.00
		Gross Labour Cost (S\$)	630.00	400.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >