	Ng Kwai ka	ytvanas _	IGNMENT (Office)		Date/Time;	6/3/201	19 10
Estimated Cost	The same of the sa		Bill to:				
To Inspect Veh	Δ Δ	HA 24342 HA DELAYO	/MV/CS	Insured: Tel:	PP (12)	552J	
of	100 Co. > 11 >	Conana	Drive				
Policy No: Sum Insured:	ms002562		Claim No: Excess:	M(901406		
Make of Veh: _ (Client's Record)					0.0.A. 43	19	
CA / REV / Date/Time;	REP. / REV 24 H	IRS (W) Person Con	facted:	Ve	H.O.D. Endorse		101
Date/Time	Action/Instruction	() [5	timate.				
					Birgas T	17500	
		-					

.

POR DE TO	REF: TN	A.)	
Similiar: NA2	17		
411.00	ASS	IGNMENT	
		Veh No: SHA 24842	Yr Regni 1 FEB
From: . Da	alo:	Type: M.Car/M.Cycle/BuS/Van/L	orry / (Tax) Prime Mover /
Eslimated Cost:		Truck / Traller or	
OD/TP/WS/TP RES/OD RES/EVA	IINV/MV	Make: HywbAl 10216	c.c. 1, 58
To Inspect Vehicle No:			A/C: (Insur.d/Std/N)
at Workshop m/s			T/Radio: Insured LStd / NI
ol		Sp.Reading 13 07 7	Mosphan
Innured:		Eng/No:	(K., 1.27.9.08
Policy No.		-	cv Ku 1:33808
Clairns No.		Gan. Cond: Good / Fair/ Poor / Burn	
	xcess:	Sleering: Inorder Jammed Leaker	•
(Client's Record)		Brake: \unorder Jammed Leaker Modl: \u20aNii SIRim STD AIRim	
Make of Veh;			195/65 RIS
	XXX	7	11
(Policy Condition)		R:	MUST OUTSULP IR / SUMI /
Remark; The veh had commenced its		BS / DUN / EXNOVA / GY / FS / LIZ	A / MIC/ OTTOOT I MI
repair at the time of inspect	ion.	TOYOTYOKO or	Rear
Bal, or Market Value:	·	Front R/Bal. mm	R/Bal.
IDAC Accident report.	sistent7: Yes or No	L/Bal. 6 mm	L/Bol. b
Gir. 1 P. Court	sistent? : Yes or No	D.O.A. 4/3/17	U.O.I. 6/3/17
Est, Repairs: days	Res.: Yes or No	Survey held at COGE	COYANG.
Luin Sum: %	3 Val.: Yes or No	Des. of Damages : Frt / Rear / O/S	S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS	Vehicle: IN/OU		
Dale: Person Contact		The U/C / Chassis frame / Bo	dy Structure affected due to c
Date / Time Action / Instruction			+ MI
	0 0 00 00	REPAIR \$ 1703,68 1	2 DAUS
1413 (19 PINALIZED.	914.40 35 M	REPAIR \$ 1703.68 1	
(Reel	(14.40) 23.17		
	RECEIVED	1 5 MAR 2019	
	. 1(==		
Dule/Ilma, File Pass to? : Pre !!	Report	Days Of Repair:	Survey Fee: 25
	I Report	Resurvey No. of Trip: 2	Survey Fee:
Date/Fine, File Roturn 107		sat Tisle Insp. (\$)'_S+R\$SI
2) 15/3 - tupist	Add F	ee: :Site Insp (\$;Interview (\$) Pholos
	000	: Tech. Inva (\$	
maggin		1833	V2
Report Format: Merin	68	:Weekend (\$)
Lump Sum / I.B.I: (\$ 1703.	68)	:Weakend (\$	TOTAL

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

	FOLDER TRACK	ING					
Case	National	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted		
Main	06 Mar 2019 Sendback Est	06 Mar 2019 08:39 \$\$1,659.04	06 Mar 2019 10:33 Assign		(Aug. Submitted	Ins Auth'ed	New Assignment
							Cancel Case
, A	teily	Referen	ıce	Claim Detail	s	Documents	\neg
CLAIM SUE	FOLDER DETAI	II S				Documents	Show All
Insured:			IE DTE 1 TO				
Main Claimant:	CTPL	TE AND ETHOUSIN	E PIE. LTD., (Co. Reg. No.: 20154	2167N		
Vehicle Reg. No.:	SHA2484Z			Date of Los	ss: 04/03/2019	13:00 - :59	
Claim Type:	TP / M19014	106		Policy/Cove	1 Months at MS002562	nd 3 Days From LTA R	eg Date (Man Yr)]
Vehicle Reg. No. (Insured):	SJD9852J			Note No.: Policy No. (Claimant):	Coverage: 0	1/03/2019 - 29/02/20	20
Repairer:	ComfortDelGr	o Engineering Pte	Ltd (Lovang)	Excess: 59 Loyang Drive, 50	S\$2,000.00		
Handling Insurer:	Tokio Marine I	Insurance Singapo	ore Ltd (HO) - T	Tel: 6221 6111 [F	8969 Loyang - Te	el: 6214 8300	
Adjuster:	LKK Auto Cons	Cultante Dto Ltd (10) = 1	iei. 6221 6111 [F	landled by Ng K	wai Kay Francis]	
Oriver/Custo lian Insured):	CHEONG KING I	IN (61), NRIC: S	1 Q) - Tel: 6256-: 51403688A Email	3561 [Final Rp	t due 15/03/2	2019]	
ldj Asg. lemarks:	OIUR INSD HAS	NOT REPORT THE	ACCIDENT.				
SSOCIATE	MAIL RECEIV	ED					
	nail for this case.					_View All	Compose Case Mail
ALL ASSOCI	ATED TASKS						
Due Date o results.	Priority Typ	e Task Group	Subject	Handler Assin			New Task Complete

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.

By the lodgement of this report to the insurers, you hereby coaforesaid.	onsent to the archiving of this report at the centre and to copies of the report being made available
ANT THE RESERVE OF THE PARTY OF THE PARTY.	ACCIDENT STATEMENT
Date Of Report	05/03/2019 14:19
Date Of Accident	04/03/2019 13:30
Exact Location Of Accident	MARKET STREET. (CAPITAL GREEN LOBBY DRIVE WAY)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHA2484Z
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	IONIQ HYBRID
Exact Purpose for which vehicle was being used time of accident	at
Are you claiming under your own insurance policy for repair to your vehicle?	y 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	CHEONG NEE BENG
NRIC No	S1376309G

 NRIC No
 \$1376309G

 Date Of Birth
 15/09/1959

 Occupation
 OUTDOOR

 Date Of Driving Pass
 25/03/1996

Driving Experience 22 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94351631

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 227 PENDING ROAD

#08-233

Postcode

670227

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

OTHER - TAXI DRIVER

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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

NO

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)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

2

Passenger 1

NAME:

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

REFER ATTACHED * TYPE OF ACCIDENT :- 3P REVERSED

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

SJD9852J

Vehicle Make/Model/Colour

TOYOTA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

CHEONG KING LIN

NRIC/Passport Number

S1403688A

Contact Number

98611571

Address

Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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.
- 3. 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)
 - (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
- (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.
- (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.

COMFORT 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: NRIC/FIN No .:

GIARIAC ShelchPlanForm V3

SKETCH PLAN

(A) ST/F 6/45/41

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

angeling my passenger of Capital Green tobby drive while my passenger pand taxi fare, vehicle B was ahead of me, Suddenly reverse his Can Callided onto my taxi Hald front pordion
B was ahead of me, Suddenly reverse his
Y
Car Collided outle try tax Hall froid poidion.
,

DECLARATION

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

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

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

GMRMC LketchFlanFarm_V3

5/3/19 Jackson Henel —

JACK 80 n

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

OMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

Date/Time: 05.03.2019 17:31

Page: 1

JOB CARD Sales Order: JC NO.: 305274776 Team: ARC Repair TP(CLSO)1 MILEAGE REGN NO.: OMER SHA2484Z COMFORT TRANSPORTATION PTE LTD FUEL MAKE IS: HYUNDAI 7010045 OMER NO. 383 SIN MING DRIVE 05.03.2019 13:25 MODEL Singapore SINGAPORE 575717 IONIO(G2) 65508755 YR OF MANU 01.02.2019 TARGET DATE (B) (P) CHASSIS CODE KMHC851CVKU133808 COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 04.03.2019

NATURE: 3P 04.03.19

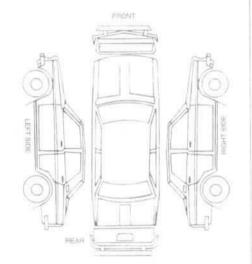
iturned to Service Reception upon collection

S/NO

DUNT CARD NO.

LABOR CODE

DESCRIPTION



KED & PA	ASSED OUT BY:				
	SERVICE ADVISOR	720		CUSTOMER'S SIGNATURE	
ledgemen	t Slip		Exit Pass		
No.:	SHA2484Z	LIMTS	Vehicle No.: SHA2484Z		
f Service	Advisor	Signature/Date	Name of Service Advisor	Date	

To be kept by Security Guard

Page 1 of 3

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

59 Loyang Drive Singapore 508969 Tel: 6214 8300 15

TP INSURER:

Tokio Marine Insurance Singapore Ltd (HQ)

CPP)

Singapore

CTPL

LKK-

PART	LICIL	ARS	OF	CI	MIA

Claim Type:

THIRD PARTY

Ref. No:

04/03/2019

Policy No:

SHA2484Z

Date of Loss: Driveable?

NO

Vehicle Reg. No.: Party At Fault:

UNKNOWN

GLS DCT (A)

Vehicle Reg.

01/02/2019

Make/Model:

HYUNDAI IONIQ HYBRID, 1.6

Date:

GOOD

Vehicle Colour:

BLUE

Gen Condition:

.....

Engine No:

G4LEJU167333

Chassis No:

KMHC851CVKU133808

Odometer:

0 KM

Paint Type:

List Item Discount:

20.00 %

Total Loss?

NO

Est. Duration of Repair 4

(day)

Present Location:

COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

COST OF CLAIMS			Amount
Parts			899.04
Miscellaneous Items			10.00
Labour			750.00
Paintwork Labour			0.00
Towing		2618.08	0.00
	Gross Total (S\$)		1,659.04
	+ GST 7.00% (S\$)		116.13
	Nett Amount (S\$)		1,775.17

This claim is handled by: LIM TIEN SIONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 06 Mar 2019)

Parts:

Repairer's

HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)

Labour:

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SHA2484Z/06/03/2019 08:39

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		*FRT BUMPER	20.00	0.00	*418.30 FL XC
2	1		*FRT BUMPER UPR BRKT RH	20.00	0.00	*35.00 FL × 5 V C
3	1		*FRT BUMPER BRKT RH	20.00	0.00	*28.00 FL 73 VC
4	1		*DAYLIGHT RH	20.00	0.00	*642.50 FL 🤰 XS
F=Fra	anchise	part. L=ListItemI	Disc.			
			Sub Total (S\$)			1,123.80
			- List Item Discount on L Items (S\$)			224.76
			Total Parts (S\$)			899.04

ComfortDelGro Engineering Pte Ltd/SHA2484Z/06/03/2019 08:39. Not valid without Reference section. Generated using Merimen e-Claims IEAS

Page 3 of 3

Estimates on Miscellaneous Items

No	Qty	Particulars		Amount
Misc	cellar	neous Items		
1	1	OD/TP Case (Insurer)		10.00
			Sub Total (S\$)	10.00

Estimates on Labour

No	Particulars	Lab.Type	Amount	
Lab	our Items			
1	PANEL BEATING	New	400.00	200
2	SPRAY PAINTING	New	300.00	200
3	WIRING CHECK	New	50.00	(とろ
		Gross Labour Cost (S\$)	750.00	

ComfortDelGro Engineering Pte Ltd/SHA2484Z/06/03/2019 08:39. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

NAZ LKIK
6/3/19 1600
PIP
2 DAYS
CAN AFTER REPAIR PHOTO J

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

Acknowledged by Repairer

Signature:

Date:

COMFORTDELGRO ENGINEERING

ur J	ob Ref	f No :305	274776			
ate		:11	/03/19		59 Lo	ortDelGro Engineering Pte Ltd yang Drive Singapore 508969 546 8156
INA	LIZATI	ION FORM				
0	: _		LKK		Fax:	
ttn	:		NAZ	_		
ehic	le Reg	No. : SHA2	2484Z	Date	of Accident :	04-Mar-19
he s	survey	and estimates of t	he repairs of the abo	ve-mentioned	vehicle are as	s follows:-
	The r	repair job shall bill	to: TOKIO	MARINE		SJD9852J
	The f	finalized amount s	hall be:			
	(a)	Spare Parts afte	er List discount			\$1,293.68
	(b)	Labour Charges	i			\$410.00
		Total for Part-B	ly-Part Repair Cost			\$1,703.68
	(c.)	Lumpsum Repa Total for Lumps Final Lumpsum	um repair cost after L	ess: <u>20%</u>		
			od for repairs:			
	We s		ove amount as Corre			is no reply from you
	We s withi	shall treat the abo	ove amount as Corres	ect and Confi		5. 70
	We s withi	shall treat the abo in 7 working days	ove amount as Corres	ect and Confi We fina	rmed if there	5.70
	We s withi	shall treat the abo in 7 working days ok you for your ass ature :	ove amount as Corres	oct and Confi We fine Sig	rmed if there e confirm the e alized amount	5. 70
	We s within Than	shall treat the about 7 working days ak you for your ass ature:	ove amount as Corres	oct and Confi We fine Sig	e confirm the e	stimates and
	We s within Than Signa Name	shall treat the about 7 working days onk you for your ass ature: e: LIMTS	ove amount as Corressistance.	ect and Confi We fins Sig Na	e confirm the e	NAZ
	We s within Than Signa Name Tel Fax	shall treat the about 7 working days onk you for your ass ature: e: LIMTS	ove amount as Corressistance.	ect and Confi We fins Sig Na	e confirm the e	NAZ
	We s within Than Signa Name Tel Fax	shall treat the about 7 working days onk you for your ass ature: e : LIMTS	ove amount as Corressistance.	ect and Confi We fins Sig Na	e confirm the e	NAZ
or (We s within Than Signa Name Tel Fax	shall treat the about 7 working days onk you for your ass ature: e: LIMTS :	62148398 65468156	Sig Na Document Attached	confirm the ealized amount mature me te :	NAZ
or (We s within Than Signa Name Tel Fax Official	shall treat the about 7 working days onk you for your ass ature:	62148398 65468156	Sig Na Da Document Attached Yes or No	confirm the ealized amount mature me te :	NAZ
or (We s within Than Signa Name Tel Fax Official	shall treat the about 7 working days ak you for your ass ature : e : LIMTS : : I Use Only Item Rate P/Day Income Paid	62148398 65468156	Document Attached Yes or No	confirm the ealized amount mature me te :	NAZ
or (We s within Than Signa Name Tel Fax Official	shall treat the about 7 working days ak you for your ass ature : Be : LIMTS : I Use Only Item Rate P/Day Income Paid Fees arch Fee	62148398 65468156	Document Attached Yes or No	confirm the ealized amount mature me te :	NAZ
. R	We s within Than Signa Name Tel Fax Official	shall treat the about 7 working days ak you for your ass ature : Be : LIMTS : I Use Only Item Rate P/Day Income Paid Fees	by e amount as Corress sistance. 62148398 65468156 Amount	Document Attached Yes or No	confirm the ealized amount mature me te :	NAZ

COMFORTDELGRO ENGINEERING PTE LTD

Date: 08.03.2019 Time: 17:23:19

Page: 1

REPAIR ESTIMATE

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

: 305274776 : SHA2484Z

MILEAGE

: 0000000000

MAKE

: HYUNDAI

MODEL

: IONIQ(G2)

DATE OF REGN

: 01.02.2019

DATE/TIME IN

: 05.03.2019 13:25

ACCIDENT DATE : 04.03.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0104-2534-G FRT BUMPER 1 418.30 20.00 334.64

0002 04-01-0104-2915-G HEADLAMP RH*

1 1,198.80 20.00 959.04

SUB-TOTAL : 1,293.68

JOB NATURE

0000 PB

PANEL BEATING

200.00

0001 SP

SPRAYPAINT CHARGE

200.00

0002 20-05 TP MERIMEN

10.00

SUB-TOTAL: 410.00

AUTHORISED: YES/NO

TOTAL : 1,703.68

SURVEYOR NAME & SIGNATURE

DATE:

MVA NAME & SIGNATURE DATE:

COMFORTDELGRO ENGINEERING

VEHICLE	: SHA2484Z		TYPE OF CLAIM:		TP
MODEL	:	Hyundai IONIQ	SURVEY BY	:_	LKK-NAZ
JOB NO	:	305274776	DATE		07/03/19

SUPPLEMENTARY OF PARTS AND LABOUR COSTS

S/No	DESCRIPTION	QTY	ESTIMATE \$	REMARKS
1	HEADLAMP RH	1	1198.80	/CRK
	* Last Entry *			
				_

Veron Chen (LKKAuto)

From:

Naz (LKKAuto)

Sent:

Thursday, 14 March 2019 5:04 PM

To:

Lim Tien Siong

Cc:

Veron Chen (LKKAuto); SUR Re: SHA 2484Z FINALIZATION

Subject: Attachments:

FINALIZED.pdf

Dear Mr Lim,

Finalized Part by Part Repair \$1703.68 / 2 Days subject to insurance approval.

Thank you.

Best Regards,

Naz | Technical Investigator

LKK Auto Consultants

Phone: 6841-2157 | Email: Naz@lkkauto.com | Fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Lim Tien Siong sent: Monday, 11 March 2019 11:59 AM

To: Naz (LKKAuto)

Subject: SHA2484Z - Finalize

Hi Naz,

Finalize at PP \$ 1,703.68 and 02 repair days. Relevant photos taken by Kalvin.

Best Regards,

. Lim Tien Siong

Taxi Crash Repair / ComfortDelgro Engineering Pte Ltd Off:62148398 / Fax:65468156

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ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

SBS Transit Ltd [Registration No. 199206653M]

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ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	A	dj Submitted	Ins Auth'ed	Status
Main	06 Mar 2019 Sendback Est	06 Mar 2019 08:39 \$\$1,659.04	06 Mar 2019 10:33 Edit Adj Rpt	S\$1,703.68 Edit Estimat		\$1,703.68 View Rpt		Pending for Survey Report Cancel Case
Supp #1	14 Mar 2019 17:32	14 Mar 2019 17:34 \$\$959.04	14 Mar 2019 17:34				(Combined)	Combined with Main Uncombine Suppl.
1	Main	Refer	ence	Claim I	etails	U	Documents	Show All
CLAIM SU	BFOLDER DETA	ILS						And the Part of th
Insured:	STARS RENTA	AL AND LIMOUS	INE PTE. LTD.,	Co. Reg. No.: 2	154216	7N		
Main Claimant:	CTPL							
Vehicle Reg No.:	SHA2484Z			Date	of Loss:	04/03/2019 : [1 Months an		A Reg Date (Man Yr)]
Claim Type:	e: TP / M1901406 Policy/Cover Note No.: MS002562 Coverage: 01/03/2019 - 29/02/2020					/2020		
Vehicle Reg No. (Insured):	SJD9852J			Policy (Clair	No. nant):			
				Exces		S\$2,000.00		
Repairer:	ComfortDelG	ro Engineering F	te Ltd (Loyang)) 59 Loyang Driv	e, 5089	69 Loyang - Te	I: 6214 8300	
Handling Insurer:				200 100720000	1000		vai Kay Francis]	
Adjuster:	15/03/2019		I (HQ) - Tel: 625	6-3561 [Hand	led by N	Muhammad N	azril Bin Abdullal	n] [Final Rpt due
Driver/Cust dian (Insured):		LIN (61), NRIG	C: S1403688A En	nail:				
Adj Asg. Remarks:	OIUR INSD HA	S NOT REPORT TI	HE ACCIDENT.					
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Claim Documents

SHA2484Z (M1901406)
[SJD9852J]
TP
CTPL
Mar 4 2019 1:00PM
[STARS RENTAL AND LIMOUSINE PTE. LTD.]
ComfortDelGro Engineering Pte Ltd

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Documents Checklist

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There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
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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/TMI19004139/NVD3E2

Date:

15/03/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No:

MS002562

Claimant Vehicle

SHA2484Z

Insured Vehicle No:

SJD9852J

No: Date of Loss:

04/03/2019

Nature of Claim:

TP

Claim No: M1901406

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SHA2484Z

Make & Model:

HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)

Engine No:

G4LEJU167333

Reg. Date:

01/02/2019 (Man. Year: 2018)

Chassis No:

KMHC851CVKU133808

Colour:

Odometer:

13077 km

Engine Capacity:

1580 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:

Yes

Good Steering (Serviceable): Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes Good

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195/65 R15

Rear Tyre Size:

195/65 R15

Front Left Side:

Michelin 6 mm

Rear Left Side:

Michelin 6 mm

Front Right Side:

Michelin 6 mm

Rear Right Side:

Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,858.08	1,293.68	564.40	30.38
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	750.00	400.00	350.00	46.67
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	2,618.08	1,703.68	914.40	34.93
+ GST 7.00/7.00% (S\$)	183.26	119.26	64.00	34.92
Nett Amount (S\$)	2,801.34	1,822.94	978.40	34.93

INSPECTION

Date of Assignment:

06/03/2019 Present Location:

ComfortDelGro Engineering Pte Ltd

(Loyang)

Date Inspected:

06/03/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd

(Loyang)

59 Loyang Drive Singapore 508969

Estimated Period of Repair:

2.0 days

Adjuster: Muhammad Nazril Bin Abdullah Manager:

VERON CHEN

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.

Adjuster Report Page 3 of 4

REPAIR DETAILS

Referen	ce	
Part Source	: MRM-SG	Version: 1.0 (Last Synchronised: 15 Mar 2019)
Parts:	192	HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted	, no print-code for SHA2484Z)
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 *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRT BUMPER	Cracked	418.30 FL	*418.30 FL
2	1		*FRT BUMPER UPR BRKT RH	Serviceable	35.00 FL	*-FL
3	1		*FRT BUMPER BRKT RH	Serviceable	28.00 FL	*-FL
4	1		*DAYLIGHT RH	Serviceable	642.50 FL	*-FL
Sup	pleme	entary #1				
5	1		*HEADLAMP RH	Cracked	1,198.80 FL	*1,198.80 FL
F=Fra	anchise	part. L=ListIte	mDisc.	-		
				Sub Total (S\$)	2,322.60	1,617.10
			- List Item Discount on L It	tems 20.00/20.00% (S\$)	464.52	323.42
				Total Parts (S\$)	1,858.08	1,293.68
			Report was unsubmitte	ed during this print-out.		

Recommended Miscellaneous Items

No	Qty	Particulars		Repairer's	Amount
Mis	cellar	eous 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	400.00	200.00
2	SPRAY PAINTING	New	300.00	200.00
3	WIRING CHECK	New	50.00	0.00
		Gross Labour Cost (S\$)	750.00	400.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >