

Surveyor: Kalvin

ASSIGNMENT (Office)

From (Person): Kin Wongof AWACDate/Time: 20/3/19 @ 11:41am

Estimated Cost:

Bill to:

OI / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To inspect Vehicle No:

SHD 3854S

Insured:

SGQ 9547H

at Workshop m/s:

Comfort Delgro

Tel:

6214 8314

of

Sa Loyang DrivePolicy No: AVPCS B0318191801

Claim No:

NCV1900140/SG

Sum Insured:

Excess:

Make of Veh:

D.O.A.

14/03/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

12:11pm @ 20/3/19

Person Contacted:

chingVehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SHD 3854S - CC4/III 19003961 / App 3D.O.A - 01/03/2019SGQ 9547H - X..

Surveyor: Kolvin

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: _____

at Workshop m/s _____

at _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Make (Value): _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % J Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time	Action / Instruction
21/3/19	Labour R/P \$ 814.45 / 2 hrs. (\$ 770.45 Red - 49%)

RECEIVED 25 MAR 2019

Veh No: SHD 38545 Yr Regn: 7 Jan 2019

Type: M. Car / M. Cycle / Bus / Van / Lorry / ☒ Prime Mover /

Truck / Trailer or

Make: Toyota Proace cc 1700

Colour: Blue A/C: Ins / Std / NI / NA

Sp. Reading: 16683 T/Radio: Ins / Std / NI / NA

Eng/No: _____

C/No: JTD1K83F460307784

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In / Out / Jammed / Leaked / Burnt or

Brake: In / Out / Jammed / Leaked / Burnt or

Modi: Nil / SIR / STD / AI or

Tyre Size: 195/65R15

BS / DUN / EXNOVA / ☒ FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front: _____ Rear: _____

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 14/3/19 D.O.I. 20/3/19

Survey held at C DGE (Loyang)

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Roof or

Penals

The UIC / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

25/3/19

1) Typist

Date/Time, File Return to?

2) _____

Reason For _____

☐ : Prel. Report

☒ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\$ = \$5.00

Photos

Other

Add Fee:

☐ : Site Insp. (\$)

☐ : Interview (\$)

☐ : Tech. Insp. (\$)

150

\$ 814.45 P/O

Nivitha (LKK Auto)

From: Wong, Kin <Kin.Wong@awac.com> on behalf of Motorsurvey
<Motorsurvey@awac.com>
Sent: Wednesday, 20 March 2019 11:41 AM
To: 'assignments@lkkauto.com'
Cc: 'chianglc@cdge.com.sg'; 'sur@lkkauto.com'
Subject: TP Survey assignment for SHD 3854 S DOA: 14/03/2019 Our ref: NSV1900140/SG

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us **do** have consensus in the appointment of **Mr Xing Guo Qiang and Mr Henry Ng** as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	SHD 3854 S
Insured Vehicle	:	SGQ 9547 H (Accident not reported)
Policy Number	:	AVPCSB0318191801
Name of Workshop	:	Comfortdelgro Engineering Pte Ltd
Contact Number	:	6214 8314
Person to Contact	:	Chiang Liat Choon
Estimated Cost of repairs	:	\$ 1,584.90

Regards,
Claims Division

Copy to Comfortdelgro Engineering Pte Ltd via Email

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards
Motor Claims
Claims Group
Global Market

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

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 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. 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	14/03/2019 14:40
Date Of Accident	14/03/2019 07:30
Exact Location Of Accident	YISHUN AVE 7 TWDS GAMBAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD3854S
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	TOYOTA
Model	PRIUS
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	SAFARI BIN ABDUL KADIR
NRIC No	S1140475H
Date Of Birth	21/11/1950
Occupation	OUTDOOR
Date Of Driving Pass	11/10/1977
Driving Experience	41 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92442455
Fax Number	
Contact Number	
Email Address	SAFARIKADIR.COM.SG@GMAIL.COM

Address	342 #08-633 WOODLANDS AVENUE 1
Postcode	730342
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

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
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)	1

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)

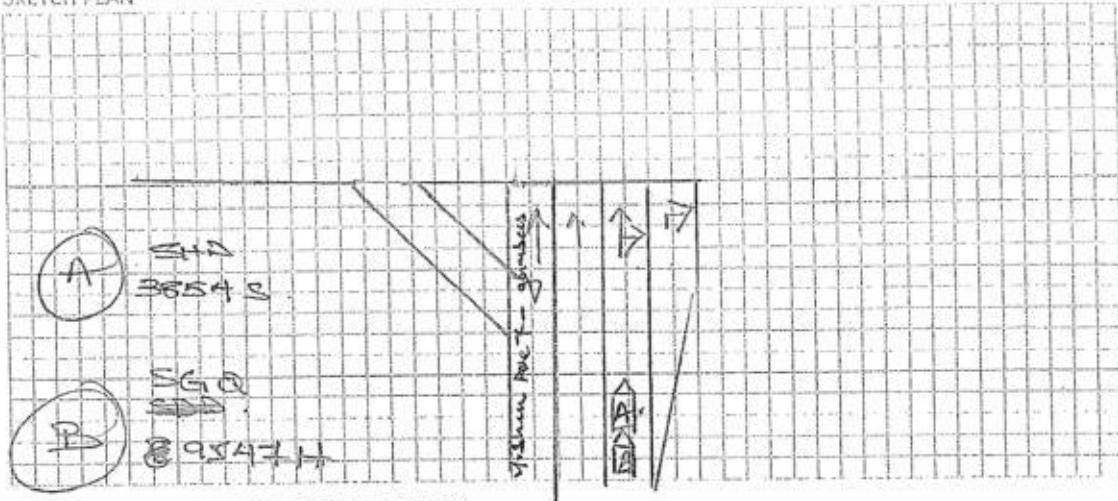
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGQ9547H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	WEE SUNG CHOW ,REX
NRIC/Passport Number	S9408201C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on . 14 March 2019 @ 07:30 hrs I VEH A

was driving straight and at one point I

VEH A slowdown and stop. Suddenly VEH B

from the rear hit VEH A Rear. at the

Point of accident VEH A no pax.

DECLARATION

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

COMFORT TRANSPORTATION PTE. L
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.:

N. S. Manis (284) 14/3

Sketch Plan Pg. 2

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 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.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

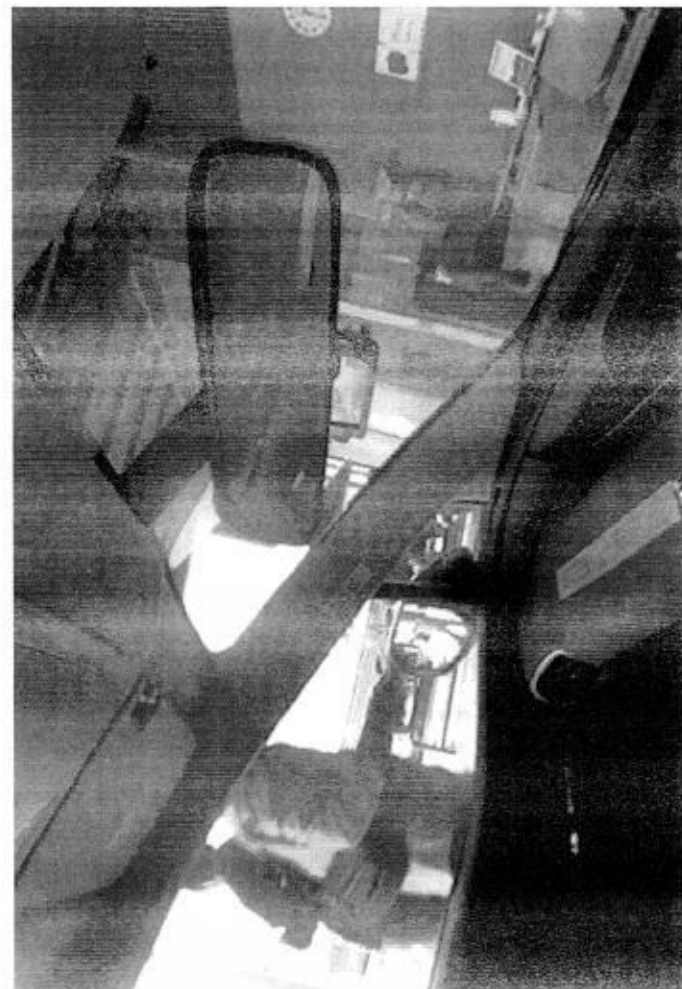
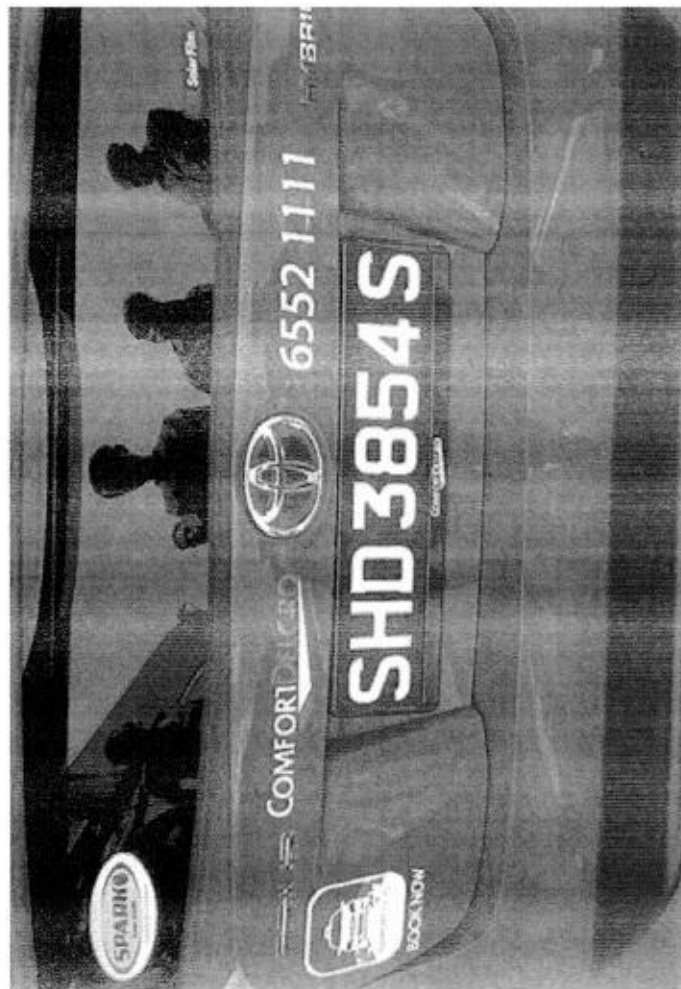
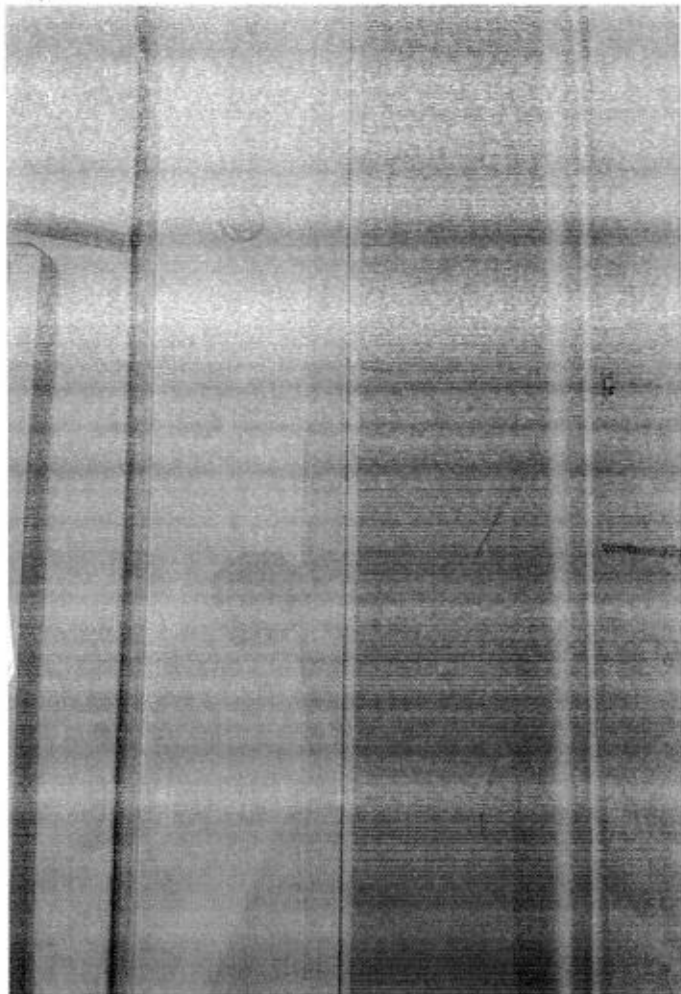
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

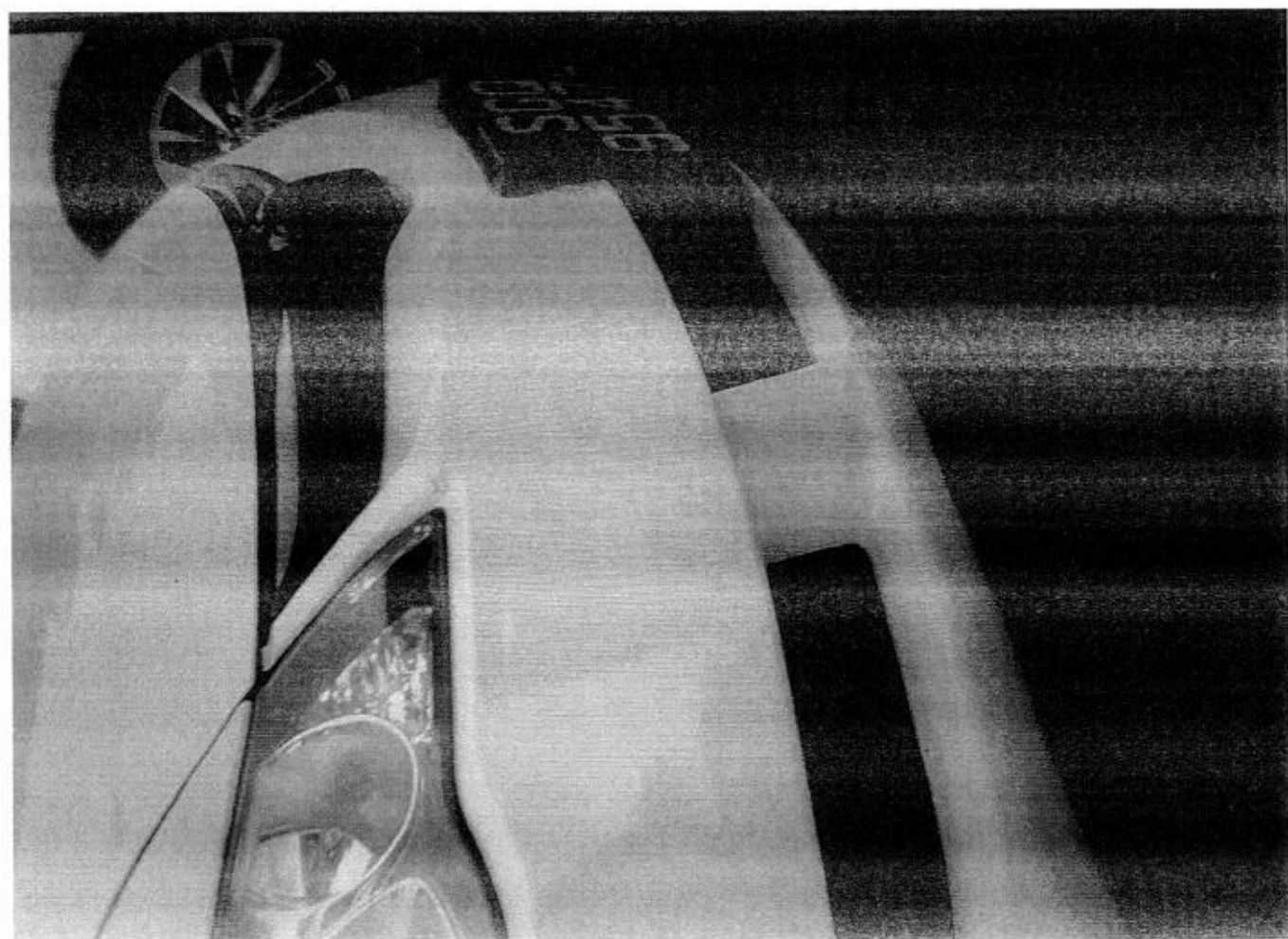
COMFORT TRANSPORTATION PTE LTD
CO REG NO 190303821R

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.:





Alfred Nord

18/3/2019 15:20

Charg

MODEL	PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
TOTOTA PRIUS	REAR BUMPER X 1 per			\$ 458.60
	REAR BUMPER UNDER COVER - 1 pc			\$ 552.60
	REAR BUMPER CLIPS X 2 "			\$ 22.00
	SUB TOTAL			\$ 1,033.20
	LESS 25%			\$ 258.30
	DISCOUNTED TOTAL			\$ 774.90
	LABOUR CHARGE			200
	Panel Beating			\$ 400.00
	Spray Painting Charge			\$ 300.00
	Wiring Charge			\$ 30.00
	Remove/Refix Reverse Sensor			\$ 80.00
	TOTAL LABOUR			\$ 810.00
	ESTIMATE TOTAL			\$ 1,584.90
	Kahri CKK			
	V 20/3/19 1410h.			
	2 by,			
	P/P			
	After Repair photo.			

Kahri (CKK)
20/3/91, 1410h.
2 by,
P'P
After Regar photo.

LINKAGE CONSULTANTS hence notify the Repairer of the following:

- To resurvey before return to service
- To do safety damage repair before resurvey
- Parts prices are listed in the quotation
- There are no duties or costs for the "Prejudice" band
- No "Prejudice" band is given if the repair is not done
- The repairer must be notified of the "Prejudice" band
- The repairer must be notified of the "Prejudice" band

Agreed with the Repairer

Signature

Date

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO

Date/Time: 18.03.2019 13:43

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO: 305278297

CUSTOMER

AR/MS COMFORT TRANSPORTATION PTE LTD

7010045

CUSTOMER NO: 383 SIN MING DRIVE

ADDRESS Singapore SINGAPORE 575717

TEL. (R) 65508755 (O)

(P)

DISCOUNT CARD NO

REGN NO: SHD3854S

MILEAGE

MAKE: TOYOTA

FUEL

E 1/2 F

MODEL PRIUS HYBRID(G4) DATE/TIME IN 18.03.2019 11:00

YR OF MANU 07.01.2019

TARGET DATE

CHASSIS CODE JTDKB3FU603077954

COMPLETION DATE/TIME

JOB DESCRIPTION

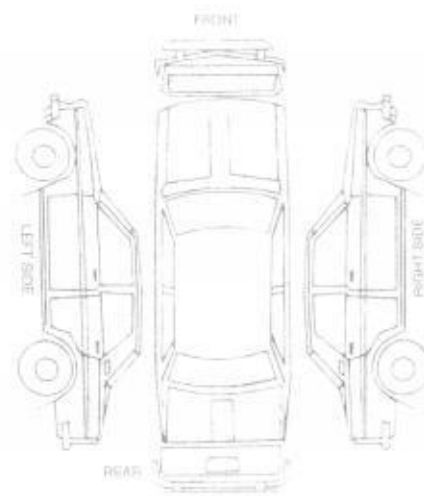
Accident Date: 14.03.2019

NATURE: 3P 14.03.2019

S/NO

LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

ime:

No:

hicle No:

SHD3854S

Vehicle No:

SHD3854S

ime of Service Advisor

Signature/Date

Name of Service Advisor

Date

be returned to Service Reception upon collection

To be kept by Security Guard

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305278297
REGN NO : SHD3854S
MILEAGE : 0000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(G4)
DATE OF REGN : 07.01.2019
DATE/TIME IN : 18.03.2019 11:00
ACCIDENT DATE : 14.03.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0302-2287-G PRIG4 GUARD-REAR BUMPER C 1 552.60 25.00 414.45

SUB-TOTAL : 414.45

JOB NATURE

0000 SP SPRAYPAINT CHARGE 200.00

0001 PB PANEL BEATING 200.00

SUB-TOTAL : 400.00

TOTAL : 814.45

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305278297
Date : 21/03/19

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SHD3854S

Fax :

14/03/2019

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-


1. The repair job shall bill to: ALLIED WORLD SGQ9547H
2. The finalized amount shall be:
- | | |
|---|-----------------|
| (a) Spare Parts after List discount | \$414.45 |
| (b) Labour Charges | \$400.00 |
| Total for Part-By-Part Repair Cost | \$814.45 |
| (c) Lumpsum Repair (if applicable) | |
| Total for Lumpsum repair cost after Less: | |
| Final Lumpsum Repair cost | |


3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : CHIANG
Tel : 62148314
Fax : 65468156

Signature : 
Name : Kaha
Date : 21/3/19

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

ALLIED WORLD ASSURANCE COMPANY LTD

Ref : CS/AWA19005047/K1sd3n2

(SINGAPORE BRANCH)
60 ANSON ROAD #08-01 (8th FLOOR)
MAPLETREE ANSON
SINGAPORE 079914

Date : 26-03-2019



Code : AWA

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SGQ 9547H	Veh. Inspected	SHD 3854S
Policy No.	AVPCSB0318191801	Coverage (\$)	0.00
Claim No.	NSV1900140/SG	Excess (\$)	0.00
Assign From	KIN WONG	Assign Date	20/03/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	JTDKB3FU603077954	Colour	BLUE
Odometer	16683	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	GOODYEAR	6 mm
L/H Front Tyre	195/65 R15	GOODYEAR	6 mm
R/H Rear Tyre	195/65 R15	GOODYEAR	6 mm
L/H Rear Tyre	195/65 R15	GOODYEAR	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	14/03/2019	Inspection Date	20/03/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 3854S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BUMPER	TO REPAIR SEE LABOUR	458.60	-
1	REAR BUMPER UNDER COVER	DEFORMED	552.60	552.60
10	REAR BUMPER CLIPS	NOT NECESSARY	22.00	-
	LESS 25% DISCOUNT		-258.30	-138.15
			774.90	414.45
	<u>LABOUR</u>			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR BUMPER.		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.	NOT NECESSARY	30.00	-
	REMOVE/REFIX REVERSE SENSOR.	NOT NECESSARY	80.00	-
			810.00	400.00
	GRAND TOTAL		1,584.90	814.45
RECOMMENDED COST OF REPAIRS				814.45

Report Ref No. CS/AWA19005047/K1sd3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.