

ASS. REC. BY:

REF:

08/7MI19007970/KLVd3⁵²

Special Instruction:

Surveyor's

Kalvin

ASSIGNMENT (Office)

Mainmen

From (Person):

Jeffrey Ten

of

7MI

Date/Time:

6/5/19 @ 18.50

Estimated Cost:

Bill to:

OD (TP) WS/TP RES / OD RES / EVA / INV / MVTCS

To Inspect Vehicle No.:

SHD3769G

Insured:

SMH 445D

at Workshop m/s:

Comfort Delgo

Tel:

624 8300

of

59 Laying Drive

Policy No.:

MJ001357

Claim No.:

M1903198

Sum Insured:

Excess:

Make of Veh:

D.O.A.

4/5/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Enclosure:

Date/Time:

9:22am 6/5/19

Person Contacted:

Farrel

Vehicle:

IN / OUT

Date/Time

Action/Instruction (✓) Estimate

Surveyor: Kelvin

REF: CS/TM19007970/klvd3

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MY
 To Inspected Vehicle No: _____
 At Workshop m/s _____
 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 Market Value: _____
 IDAC Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sun: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHD 3769E Yr Regn: 754 2017
 Type: M.Car / M.Cycle / Bus / Van / Lorry / T.O. / Prime Mover /
 Truck / Trailer or
 Make: Toyota Prius C.C. 1700
 Colour: Blue A/C: Insu G / Std / NI / NA
 Sp. Reading: 225359 T/Radio: Insu 0 / Std / NI / NA
 Eng/No: _____
 C/No: JTDKB3F410356x012
 Gen. Cond: Good / 6 / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD 0 / Rim or
 Tyre Size: F: 195/65R15
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Davanti
 Front Rear
 R/Bal. 7 mm R/Bal. 7 mm
 L/Bal. 7 mm L/Bal. 7 mm
 D.O.A. 4/5/19 D.O.I. 6/5/19
 Survey held at CPAE (Logan)
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
n/s Body
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SHD 3769E - NS/INC16015833/H1Vbn2 DOA-21/08/2016 To/ko
	SMH 4450 - X PIP
8/5/19	Colud PIP \$257145 / 2 Pp. (Red 1638, 387)

RECEIVED 08 MAY 2019

Date/Time, File Pass to? ☐ : Prel. Report
☐ : Final Report

Date/Time, File Return to?

2) 8/5 - typist

Product/Format: merimen

Amount: P/p \$2571.45

Days Of Repair: 2
 Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Insp (\$)

Survey Fee:	250
Transportation:	
Photocopy:	
Others:	10
TOTAL:	

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	06 May 2019 14:40 Sendback Est	06 May 2019 14:42 S\$4,209.52	06 May 2019 18:50 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

Show All

CLAIM SUBFOLDER DETAILS

Insured:	LUMENS AUTO PTE. LTD., Co. Reg. No.: 201426961K		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SHD3769E	Date of Loss:	04/05/2019 11:00 - :59 [19 Months and 27 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M1903198	Policy/Cover Note No.:	MJ001357 (Third Party Only) Coverage: 30/09/2018 - 29/09/2019
Vehicle Reg. No. (Insured):	SMH445D	Policy No. (Claimant):	
		Excess:	S\$2,000.00
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300		
Handling Insurer:	Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Jeffrey Tay - 65926413]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 15/05/2019]		

ASSOCIATED MAIL RECEIVED

View All

Compose Case Mail

There are no mail for this case.



ALL ASSOCIATED TASKS

View All

Search Tasks

Create New Task

Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

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	06/05/2019 08:16
Date Of Accident	04/05/2019 11:30
Exact Location Of Accident	BEACH ROAD TWDS CRAWFORD ST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD3769E
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 HYBRID 4G

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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

Driver

Name of Driver	CHUENG THIAM HOCK
NRIC No	S1587083D
Date Of Birth	21/08/1963
Occupation	OUTDOOR
Date Of Driving Pass	20/03/1984
Driving Experience	35 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81334062
Fax Number	
Contact Number	
Email Address	THIAMHOCKC@YAHOO.COM

Address	BLK 62 NEW UPPER CHANGI ROAD #10-1184
Postcode	461062
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	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)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	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

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	SMH445D
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM KIM CHEW
NRIC/Passport Number	S1587083D
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

RH FRONTLIM KIM CHEW

No. Of Passenger (Including Driver)

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. 199303821R

Policyholder's Signature
Date & Time:

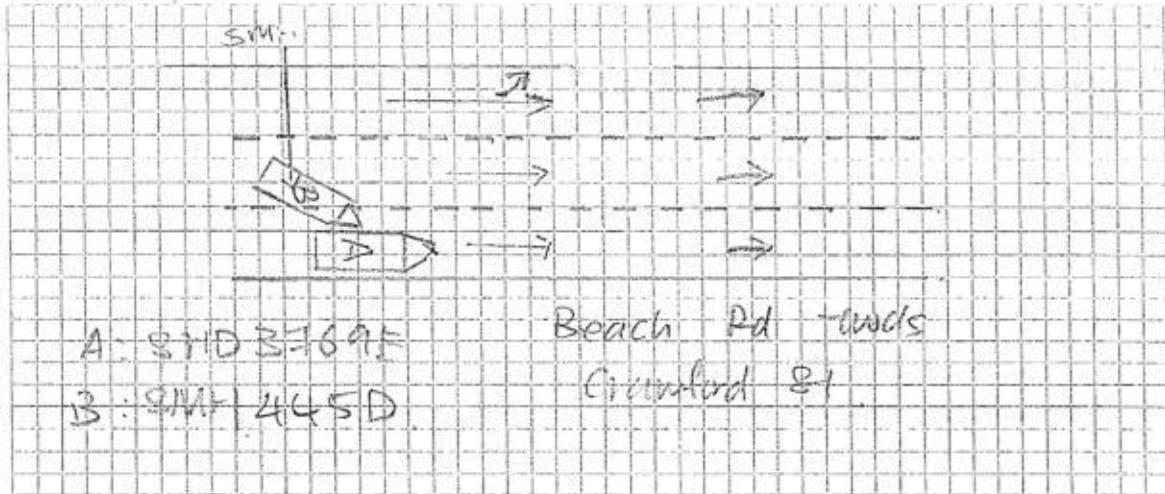
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Loke Wei Yong

5/5/19

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 4/5/19 at about 11:30 hrs, I was driving straight at above said location with 2 pax onboard. Suddenly Veh B cut into my lane from left hand side. As a result, Veh B hit right front portion of my taxi & grazed onto the whole left portion of my taxi. No injury reported in this accident.

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:

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

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

[Signature]
Loke Wei Yeng
5/5/19

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305292777

OMER

IS COMFORT TRANSPORTATION PTE LTD
OMER NO. 7010045
ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65508755 (O)
(P)

JUNT CARD NO.

REGN NO:	SHD3769E	MILEAGE
MAKE:	TOYOTA	FUEL
MODEL	PRIUS HYBRID(G4)	DATE/TIME IN
YR OF MANU	07.09.2017	TARGET DATE
CHASSIS CODE	JTDKB3FU103564012	COMPLETION DATE/TIME

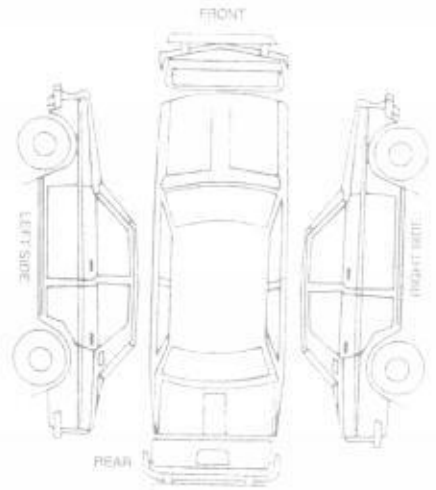
Accident Date: 04.05.2019
NATURE: 3P 04.05.19

JOB DESCRIPTION

S/O

LABOR CODE

DESCRIPTION



WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Redemption Slip

Exit Pass

No.: SHD3769E LIMTS

Vehicle No.: SHD3769E

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

VEHICLE NO : SHD 3769E

MAKE :

MODEL : TOYOTA PRIUS

Tokio Marine (P/P)
Merimen.

6/5/2019

IS

Tyre: *Pirelli*
195/65 R15

LKK - kalvin

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
FRONT FENDER HYBRID EMBLEM, LH <i>no</i>			\$ 53.50
PANEL SUB-ASSY, FRONT DOOR, LH <i>x repair</i>			\$ 1,264.00
FRONT WHEEL RIM (LH) <i>front</i>			\$ 1,555.10
<i>Rear Door (LH) x repair</i>			
<i>Front Bumper x repair</i>			
<i>Rear Fender (LH) x repair</i>			
<i>Rocker Panel Garnish (LH) x repair</i>			
SUB TOTAL			\$ 2,872.60
LESS 25%			\$ 718.15
DISCOUNTED TOTAL			\$ 2,154.45
FRONT DOOR COMFORT LOGO LH <i>no</i>			\$ 75.00
<i>Rear Door APPS LH</i> <i>no</i>			
LABOUR CHARGE			
Panel Beating			\$ 400.00
Spray Painting Charge			\$ 1,200.00
Tuff Kote			\$ 50.00
Transfer of Door			\$ 120.00
FRT Wheel Alignment			\$ 120.00
<i>Merimen Fee</i>			\$ 10.00
TOTAL LABOUR			\$ 1,590.00
ESTIMATE TOTAL			\$ 3,819.45
			4209.45

NETT

80.00 nett

Kalvin 16/11/19
6/5/19 12:15hrs.
2 Pys.
P/P
After Repair pls.

Parts of the vehicle are covered by the Third Party Insurance Company. No illegal or unlicensed work is subject to the Third Party Insurance Company. Acknowledged by 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 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:	
Policy No:		Date of Loss:	04/05/2019
Vehicle Reg. No.:	SHD3769E	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	TOYOTA PRIUS HYBRID, 1.8 CVT (A)	Vehicle Reg. Date:	07/09/2017
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	2ZRS063417	Chassis No:	JTDKB3FU103564012
Odometer:	0 KM		
Paint Type:			
List Item Discount:	25.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	4		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	2,309.52
Miscellaneous Items	10.00
Labour	1,890.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	4,209.52
+ GST 7.00% (S\$)	294.67
Nett Amount (S\$)	4,504.19

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 May 2019)

Parts: 144 TOYOTA PRIUS HYBRID 1.8 CVT (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: ComfortDelGro Engineering Pte Ltd/SHD3769E/06/05/2019 14:42

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 FENDER HYBRID EMBLEM	25.00	0.00	*53.50 FL nec
2	1		*FRT DOOR LH	25.00	0.00	*1,264.00 FL R
3	1		*FRT WHEEL RIM LH	25.00	0.00	*1,555.10 FL Graced
4	1		*FRT DOOR COMFORTDELGRO LH	0.00	0.00	*75.00 F nec
5	1		*REAR DOOR APPS STICKER LH	0.00	0.00	*80.00 F nec

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	3,027.70
- List Item Discount on L Items (S\$)	718.18
Total Parts (S\$)	2,309.52

ComfortDelGro Engineering Pte Ltd/SHD3769E/06/05/2019 14:42. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
<u>Miscellaneous Items</u>			
1	1	OD/TP Case (Insurer)	10.00
Sub Total (S\$)			10.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
<u>Labour Items</u>			
1	PANEL BEATING	New	400.00 ²⁰⁰
2	SPRAY PAINTING	New	1,200.00 ¹⁰⁰⁰
3	TUFF KOTE	New	50.00
4	TRANSFER OF DOOR	New	120.00
5	WHEEL ALIGNMENT	New	120.00
Gross Labour Cost (S\$)			1,890.00

ComfortDelGro Engineering Pte Ltd/SHD3769E/06/05/2019 14:42. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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

JOB NO : 305292777
REGN NO : SHD3769E
MILEAGE : 0000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(G4)
DATE OF REGN : 07.09.2017
DATE/TIME IN : 05.05.2019 09:15
ACCIDENT DATE : 04.05.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0302-2297-G	FRT FENDER (HYBRID) LH	1	53.50	25.00	40.12
0002 03-01-0302-2020-G	FRT WHEEL SPORT RIM LH	1	1,555.10	25.00	1,166.32
0003 28-01-0103-0003-A	Frt Door COMFORTDELGRO LH	1	75.00		75.00
0004 28-01-0103-2013-A	Rear Door APPS Sticker LH	1	80.00		80.00

SUB-TOTAL : 1,361.44

JOB NATURE

0000 PB	PANEL BEATING	200.00
0001 SP	SPRAYPAINT CHARGE	1000.00
0002 20-05	TP MERIMEN	10.00

SUB-TOTAL : 1,210.00

TOTAL : 2,571.44


MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE : AUTHORIZED : YES / NO

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305292777

Date : 07/05/19

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHD3769E

Date of Accident : 04-May-19

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

1. The repair job shall bill to: TOKIO MARINE --- SMH 445D
2. The finalized amount shall be:

(a) Spare Parts after List discount	\$1,361.45
(b) Labour Charges	\$1,210.00
Total for Part-By-Part Repair Cost	\$2,571.45
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: 20%	
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 : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 8/5/19

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		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	06 May 2019 14:40	06 May 2019 14:42 S\$4,209.52	06 May 2019 18:50	S\$2,571.45	S\$2,571.45 View Rpt		Pending for Survey Report

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

Insured:	LUMENS AUTO PTE. LTD., Co. Reg. No.: 201426961K		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SHD3769E	Date of Loss:	04/05/2019 11:00 - :59 [19 Months and 27 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M1903198	Policy/Cover Note No.:	MJ001357 (Third Party Only) Coverage: 30/09/2018 - 29/09/2019
Vehicle Reg. No. (Insured):	SMH445D	Policy No. (Claimant):	
		Excess:	S\$2,000.00
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300		
Handling Insurer:	Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Jeffrey Tay - 65926413]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 15/05/2019]		

ASSOCIATED MAIL RECEIVED

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There are no mail for this case.

ALL ASSOCIATED TASKS

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[Create New Task](#)
[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

SHD3769E (M1903198)
[SMH445D]
TP
CTPL
May 4 2019 11:00AM
[LUMENS AUTO PTE. LTD.]
ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter

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Assessment Reports

1 per page ▼ ☒

No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	06/05/19 14:42	Repairer Estimates	1	Load HTM	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)		Thumbnail	Print
1	06/05/19 16:36	Accident Statement Addm. #1 From:SC - Reg. No: SMH445D, Claimant: LUMENS AUTO PTE LTD	1	Load HTM	
2	06/05/19 18:50	Accident Statement From:SC - Reg. No: SMH445D, Claimant: LUMENS AUTO PTE LTD	1	Load HTM	
3	06/05/19 18:50	Addendum Sheet From:SC - Reg. No: SMH445D, Claimant: LUMENS AUTO PTE LTD	1	Load TIF	
4	06/05/19 18:50	Accident Statement Addm. #1 From:SC - Reg. No: SMH445D, Claimant: LUMENS AUTO PTE LTD	1	Load HTM	

Photos/Images

3 per page ▼ ☒

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	08/05/19 08:47	General View	1	Load JPG	<input checked="" type="checkbox"/>
2	08/05/19 08:47	General View	1	Load JPG	<input checked="" type="checkbox"/>
3	08/05/19 08:47	General View	1	Load JPG	<input checked="" type="checkbox"/>
4	08/05/19 08:47	General View	1	Load JPG	<input checked="" type="checkbox"/>
5	08/05/19 08:47	General View	1	Load JPG	<input checked="" type="checkbox"/>
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26	08/05/19 08:47	General View	1	Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page ▼	✓
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
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28	08/05/19 08:47	General View	 Load JPG	✓
29	08/05/19 08:47	General View	 Load JPG	✓
30	08/05/19 08:47	General View	 Load JPG	✓
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40	08/05/19 08:47	General View	 Load JPG	✓
41	08/05/19 08:47	General View	 Load JPG	✓
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48	08/05/19 09:00	Reinspection Photo	 Load JPG	✓
49	08/05/19 09:00	Reinspection Photo	 Load JPG	✓
50	08/05/19 09:00	Reinspection Photo	 Load JPG	✓
Documentation			1 per page ▼	✓
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)	Thumbnail	Print
1	08/05/19 16:27	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee	 Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	06/05/19 14:43	E-filed GIA report	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST

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There are no document checklists configured.

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

Show Remarks To: ☐ Repairer ☐ 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/TMI19007970/K1VD3S2

Date: 10/05/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MJ001357

Claimant Vehicle No : SHD3769E

Insured Vehicle No : SMH445D

Date of Loss: 04/05/2019

Nature of Claim: TP

Claim No: M1903198

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHD3769E

Make & Model: TOYOTA PRIUS HYBRID, 1.8 CVT (A)

Engine No: 2ZRS063417

Reg. Date: 07/09/2017 (Man. Year: 2017)

Chassis No: JTDKB3FU103564012

Colour: Blue

Odometer: 225359 km

Engine Capacity: 1798 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:	195/65R15	Rear Tyre Size:	195/65R15
Front Left Side:	Davanti 7 mm	Rear Left Side:	Davanti 7 mm
Front Right Side:	Davanti 7 mm	Rear Right Side:	Davanti 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,309.52	1,361.45	948.07	41.05
Miscellaneous Items	10.00	10.00	0.00	0.00
Labour	1,890.00	1,200.00	690.00	36.51
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,209.52	2,571.45	1,638.07	38.91
+ GST 7.00/7.00% (S\$)	294.67	180.00	114.67	38.91
Nett Amount (S\$)	4,504.19	2,751.45	1,752.74	38.91

INSPECTION

Date of Assignment:	06/05/2019	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	06/05/2019	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: 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.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 10 May 2019)
Parts:	144	TOYOTA PRIUS HYBRID 1.8 CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHD3769E)	
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 FENDER HYBRID EMBLEM	Necessary	53.60 FL	*53.50 FL
2	1		*FRT DOOR LH	Repair	1,264.00 FL	*- FL
3	1		*FRT WHEEL RIM LH	Grazed	1,555.10 FL	*1,555.10 FL
4	1		*FRT DOOR COMFORTDELGRO LH	Necessary	75.00 F	*75.00 FS
5	1		*REAR DOOR APPS STICKER LH	Necessary	80.00 F	*80.00 FS
6	1		*REAR DOOR (LH)(NPA)	Repair	-	*- FL
7	1		*FRONT BUMPER (NPA)	Repair	-	*- FL
8	1		*REAR FENDER (LH)(NPA)	Repair	-	*- FL
9	1		*ROCKER PANEL GARNISH (LH)(NPA)	Repair	-	-

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$)	3,027.70	1,763.60
- List Item Discount on L Items 25.00/25.00% (S\$)	718.18	402.15
Total Parts (S\$)	2,309.52	1,361.45

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

No	Qty	Particulars	Repairer's	Amount
<u>Miscellaneous Items</u>				
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
<u>Labour Items</u>				
1	PANEL BEATING	New	400.00	200.00
2	SPRAY PAINTING	New	1,200.00	1,000.00
3	TUFF KOTE	New	50.00	0.00
4	TRANSFER OF DOOR	New	120.00	0.00
5	WHEEL ALIGNMENT	New	120.00	0.00
Gross Labour Cost (S\$)			1,890.00	1,200.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >