

(08/11/13)

Surveyor: Kalvin

REF:

CC3/TH1 19013013/K19A302ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Insp'd Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: 3554596CPolicy No: MU008997Claims No: M1905597

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 Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SH 6352 C Yr Regn: 6 Oct 2017Type: M.Car / M.Cycle / Bus / Van / Lorry / ~~Tr~~ / Prime Mover /

Truck / Trailer or

Make: Toyota Prius C.C. 1700Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 303911 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: J70KB3F4703565178Gen. Cond: Good / ~~Fair~~ / Poor / BurntSteering: Inorder / ~~Not~~ Jammed / Leaked / Burnt orBrake: Inorder / ~~Not~~ Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD ~~R~~ / Rim orTyre Size: F: 195/65 R15

R: \_\_\_\_\_

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

TOYO / YOKO or Went like

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 23/7/19 D.O.I. 23/7/19Survey held at CPHE (Loyang)

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

Rear o/s

The U/C / Chassis frame / Body Structure affected due to collision.

| Date / Time          | Action / Instruction                               |
|----------------------|--|
|                      | SH 6352C N5/INC/8218318/K19A302 020704/10/18 Tokio |
|                      | N5/INC/8015576/K19A302 020724/08/18                |
| 24/7/19 @ 10.29 am   | email GIA, police report & estimate to Tokio.      |
|                      | 675 4596C x  |
| 25/7/19              | Contract P/P \$411 / 2 Pys. (Red \$1440.83, 78%)   |
| RECEIVED 25 JUL 2019 |  |

Date/Time, File Pass to?

☐

: Preli. Report

1) 25/7/19 transfer

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp \$

Survey Fee:

Transportation:

S + RS \$

|     |
|-----|
| 250 |
| 11  |

261

**Shiau Chan (LKKAuto)**

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**From:** Shiau Chan (LKKAuto)  
**Sent:** Wednesday, 24 July 2019 10:29 AM  
**To:** motorclaims@tokiomarine.com.sg  
**Cc:** SUR  
**Subject:** DIRECT SURVEY INSPECTION ON WORKSHOP - COMFORTDELGRO ENGINEERING PTE LTD, DOA: 23/07/2019, SH 6352C (TP VEHICLE), SJS 4596C (OI VEHICLE)  
**Attachments:** SH6352 PR.pdf; SH6352 EST.pdf; SH6352 GIA.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SH 6352C at M/s: COMFORTDELGRO ENGINEERING PTE LTD, 59 LOYANG DRIVE SINGAPORE 508969 on 23/07/2019.

Enclosed herewith a copy of TP's GIA, police report and estimated cost of repair.

Kindly create claim in merimen for our necessary action.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [sjewsc@lkkauto.com](mailto:sjewsc@lkkauto.com) | fax: 6256-4315

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

## 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             | 23/07/2019 14:19                      |
| Date Of Accident           | 23/07/2019 06:50                      |
| Exact Location Of Accident | ANG MO KIO SECONDARY SCHOOL COMPOUND. |
| Country/State of Loss      | SINGAPORE                             |

### DETAILS OF OWN VEHICLE

|                             |                                |
|-----------------------------|--------------------------------|
| Vehicle Registration Number | SH6352C                        |
| <b>Insured/Policyholder</b> |                                |
| 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       | LIM TIONG GUAN        |
| NRIC No              | S1563772B             |
| Date Of Birth        | 25/10/1962            |
| Occupation           | OUTDOOR               |
| Date Of Driving Pass | 18/01/1980            |
| Driving Experience   | 39 YEARS AND 6 MONTHS |
| Gender               | MALE                  |
| Mobile Number        | (LOCAL) +65-90045024  |
| Fax Number           |                       |
| Contact Number       |                       |
| Email Address        | NOEMAIL               |

|   |                          |
|---|--------------------------|
| Address   | 23 11-219 TOA PAYOH EAST |
| Postcode  | 310023                   |
| 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   | HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED |
| 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)   | 2                             |
| Passenger 1   | NAME: : -<br>GENDER: : FEMALE |

#### Details of Police Action

|   |               |
|---|---------------|
| Was the accident reported to the police?  | YES           |
| If Yes, Please state which Police Station |               |
| POLICE STATION NAME [OTHER]               | PASIR RIS NPC |
| Was notice of intended Prosecution given? | NO            |
| If Yes, against whom?                     |               |

#### Circumstances of Accident

SEE POLICE REPORT.

#### 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 | SJS4596C    |
| Vehicle Make/Model/Colour   |             |
| Details Of Properties       |             |
| Vehicle Category            | PRIVATE CAR |
| Name of Driver              |             |
| NRIC/Passport Number        |             |
| Contact Number              |             |
| Address                     |             |
| Postcode                    |             |
| Insurance Company Name      |             |

SKETCH PLAN

King mo KID Secondary School.  
St 22

[B.] [A.] →

(A) SH 6352 C

(B) SJS 4596 e

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police report attached.

T/20190723/2054

DECLARATION

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

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

Policyholder's Signature

Driver's Signature

23/7/19 Jackson Heng  
CS

Reporting Centre Personnel's Signature



**SINGAPORE  
POLICE FORCE**



T/20190723/2054

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

1 of 3

Report No. T/20190723/2054

**REPORT OF A TRAFFIC ACCIDENT**

|  |                  |                          |
|--|------------------|--------------------------|
| Date/Time Report Made:<br>23/07/2019 12:27 | Vide Report No.: | Station Diary No.:<br>56 |
|--|------------------|--------------------------|

**Informant's Particulars**

|  |  |                              |                              |
|--|--|------------------------------|------------------------------|
| Name of Informant:<br>LIM TIONG GUAN     | Address:<br>APT BLK 23 TOA PAYOH EAST #11-219 SINGAPORE<br>310023    |                              |                              |
| ID Type / ID No.:<br>NRIC NO / S1563772B | Contact No.:<br>Home/Office: Mobile: 90045024                        |                              |                              |
| Nationality:<br>SINGAPORE CITIZEN        | Email:   |                              |                              |
| Sex:<br>Male                             | Age:<br>56   | Date of Birth:<br>25/10/1962 | Type of Informant:<br>Driver |
| Race:<br>Chinese                         | Language:<br>English   |                              | Institution / School Name:   |
| Occupation:<br>Taxi driver               | Driving Licence Information:<br>Class: 2B,2A,2,3,4,5 Date of Expiry: |                              |                              |

**General Information of the Accident**

|  |                           |                                    |  |                                     |
|--|---------------------------|------------------------------------|--|-------------------------------------|
| Type of Accident:  | Non-Injury<br>Hit and Run | Drink Drive:<br>No                 | Date/Time of Accident:<br>23/07/2019 08:45 | Type of Location:<br>DROP OFF POINT |
| Location:<br>Along Road 1<br>ANG MO KIO STREET 22            |                           |                                    |  |                                     |
| DROP OFF POINT INSIDE ANG MO KIO SECONDARY SCHOOL            |                           |                                    |  |                                     |
| Weather:<br>Clear  |                           | Road Surface:<br>Dry               | Road Speed Limit:                          |                                     |
| Traffic Flow:<br>One Way                                     |                           | Traffic Control:<br>Not Controlled | Traffic Volume:<br>Light                   |                                     |
| Type of Collision:<br>Between Moving Vehicles - Head To Rear |                           |                                    | Anyone conveyed by ambulance:<br>No        |                                     |

**Details of Vehicle Involved**

| Vehicle No. | Type | Make   | Model | Color | Condition        | No of Passenger |
|-------------|------|--------|-------|-------|------------------|-----------------|
| SH6352C     | TAXI | TOYOTA | PRIUS | Blue  | Slightly Damaged | 1               |
| SJS4596C    | Car  |        | honda |       |                  | 0               |

**Details of Person Involved**

|                                 |                                |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No     |                                |
| No. of Pedestrians Injured: Nil | Use of Pedestrian Crossing: NA |



**SINGAPORE  
POLICE FORCE**



T/20190723/2054

2 of 3

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

Report No. T/20190723/2054

## CONTINUATION OF REPORT

|                                   |                |                  |   |
|-----------------------------------|----------------|------------------|---|
| <b>Driver</b>                     |                |                  |   |
| Name                              | LIM TIONG GUAN |                  | ID No. S1563772B  |
| Related Vehicle                   | SH6352C (TAXI) |                  | Contact No. 90045024  |
| Hospital/Clinic                   | NIL            |                  | Class of Driving Licence & Expiry Date<br>Class: 2B,2A,2,3,4,5<br>Date of Expiry: NIL |
| Date Treatment                    | NIL            |                  | Date Discharge NIL  |
| No. of Days granted Medical Leave | NIL            | Degree of Injury | NIL   |

**Brief Details.**

On the 23/07/2019 at about 0650hrs, I was alighting a passenger at the drop of point of Ang Mo Kio Secondary school. While the passenger was making payment, I felt a collision at the rear of my vehicle (SH6352C). The vehicle that hit me then drove away without stopping (SJS4596C).

I then got down to make a check and discovered that there were damages on the right rear of my taxi bumper. The passenger was not injured at the point of the accident.

I have in-vehicle camera which may have caught the vehicle in action. I have submitted the footage to Comfort Delgro.



**SINGAPORE  
POLICE FORCE**



T/20190723/2054

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

3 of 3

Report No. T/20190723/2054

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report:

G /

Staff Sgt EDMUND TAN CHUN YANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt TAN JIEOK LENG

Contact No: 47514400

Authentication Stamp

Signature Of Informant:

Date/Time:

23/07/2019 12:27

Classification Of Case:





COMFORT

Date/Time: 23.07.2019 15:15 Page 1

Team: ARC Repair TP(CLSO)1

## JOB CARD

Sales Order:

JO NO: 305319286

CUSTOMER:

CUSTOMER: COMFORT TRANSPORTATION PTE LTD  
CUSTOMER NO: 7010045  
ADDRESS: 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755

L (R)  
(P)

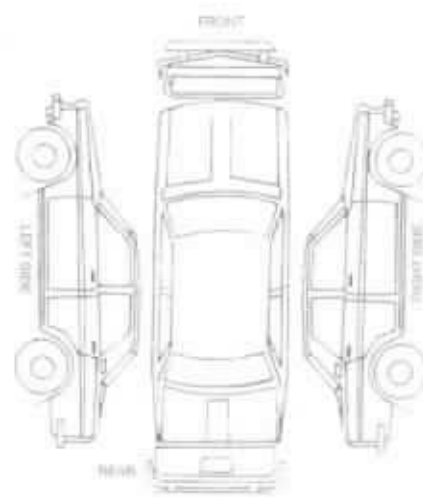
3 COUNT CARD NO.

|              |                   |                                  |
|--------------|-------------------|----------------------------------|
| REGN NO.     | SH 6352C          | MILEAGE                          |
| MAKE:        | TOYOTA            | FUEL<br>E 1/2 F                  |
| MODEL        | PRIUS HYBRID(G4)  | DATE/TIME IN<br>23.07.2019 10:15 |
| YR OF MANU   | 06.10.2017        | TARGET DATE                      |
| CHASSIS CODE | JTDKB3FU703565178 | COMPLETION DATE/TIME             |

Accident Date: 23.07.2019  
NATURE: 3P 23.07.19

## JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



CHECKED &amp; PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

1.

2.

Vehicle No: SH 6352C JU TOKIO

Vehicle No: SH 6352C

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

23/7/2019 14:32

MAKE :

MODEL : TOYOTA PRIUS

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:      | 23/07/2019        |
| Vehicle Reg. No.:             | <b>SH6352C</b>                             | Driveable?         | YES               |
| Party At Fault:               | UNKNOWN                                    |                    |                   |
| Make/Model:                   | TOYOTA PRIUS TAXI, 1.8 (A)                 | Vehicle Reg. Date: | 06/10/2017        |
| Vehicle Colour:               | BLUE                                       | Gen Condition:     | GOOD              |
| Engine No:                    | 2ZRS066731                                 | Chassis No:        | JTDKB3FU703565178 |
| Odometer:                     | 0 KM                                       |                    |                   |
| Paint Type:                   |  |                    |                   |
| List Item Discount:           | 25.00 %                                    |                    |                   |
| Total Loss?                   | <b>NO</b>                                  |                    |                   |
| Est. Duration of Repair (day) | 3  |                    |                   |
| Present Location:             | COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) |                    |                   |

| <b>COST OF CLAIMS</b>    | <b>Amount</b>   |
|--------------------------|-----------------|
| Parts                    | 957.30          |
| Miscellaneous Items      | 11.00           |
| Labour                   | 810.00          |
| Paintwork Labour         | 0.00            |
| Towing                   | 0.00            |
| <b>Gross Total (S\$)</b> | <b>1,778.30</b> |
| <b>+ GST 7.00% (S\$)</b> | <b>124.48</b>   |
| <b>Nett Amount (S\$)</b> | <b>1,902.78</b> |

**This claim is handled by: JUMANI BIN MASUDIN**

Generated using Merimen e-Claims Internet Estimation & Adjusting System

**REPAIR DETAILS****Reference****Part Source:** MRM-SG      Version: 1.0 (Last Synchronised: 23 Jul 2019)**Parts:** 144      TOYOTA PRIUS TAXI 1.8 (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's      (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SH6352C/23/07/2019 17:12**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   |          | *REAR BUMPER                  | 25.00 | 0.00  | *458.60 FL <i>FL</i> |
| 2   | 1   |          | *REAR BUMPER UNDER COVER      | 25.00 | 0.00  | *552.60 FL <i>FL</i> |
| 3   | 10  |          | *REAR BUMPER CLIPS            | 25.00 | 0.00  | *22.00 FL <i>FL</i>  |
| 4   | 1   |          | *RETAINER REAR BUMPER SIDE RH | 25.00 | 0.00  | *94.80 FL <i>FL</i>  |
| 5   | 1   |          | *SEAL REAR BUMPER SIDE RH     | 25.00 | 0.00  | *148.40 FL <i>FL</i> |

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$) **1,276.40**- List Item Discount on L Items (\$\$) **319.10**Total Parts (\$\$) **957.30**

ComfortDelGro Engineering Pte Ltd/SH6352C/23/07/2019 17:12. 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) | 11.00  |
| Sub Total (S\$)            |     |                      | 11.00  |

## Estimates on Labour

| No                      | Particulars                  | Lab.Type | Amount |
|-------------------------|------------------------------|----------|--------|
| <u>Labour Items</u>     |                              |          |        |
| 1                       | PANEL BEATING                | New      | 400.00 |
| 2                       | SPRAYPAINT                   | New      | 300.00 |
| 3                       | WIRING                       | New      | 30.00  |
| 4                       | REMOVE/ REFIX REVERSE SENSOR | New      | 80.00  |
| Gross Labour Cost (S\$) |                              |          | 810.00 |

ComfortDelGro Engineering Pte Ltd/SH6352C/23/07/2019 17:12. 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 : 305319286  
REGN NO : SH 6352C  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(G4)  
DATE OF REGN : 06.10.2017  
DATE/TIME IN : 23.07.2019 10:15  
ACCIDENT DATE : 23.07.2019

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

SUB-TOTAL : 0.00

## JOB NATURE

|         |                   |        |
|---------|-------------------|--------|
| 0000 PB | PANEL BEATING     | 200.00 |
| 0001 SP | SPRAYPAINT CHARGE | 200.00 |
| 0002 L  | MERIMEN           | 11.00  |

SUB-TOTAL : 411.00

TOTAL : 411.00

AUTHORISED : YES / NO

MVA NAME & SIGNATURE  
DATE :

SURVEYOR NAME & SIGNATURE  
DATE :

# COMFORTDELGRO ENGINEERING

Our Job Ref No 305319286  
Date : 22/07/2019

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

## FINALIZATION FORM

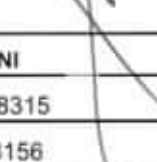
To : LKK Fax :  
Attn : KALVIN  
: SH6352C Date of Accident : 23.07.19


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

1. The repair job shall bill to: TOKIO --- SJS4596C  
###
2. The finalized amount shall be:
 

|  |     |                 |
|--|-----|-----------------|
| (a) Spare Parts after List discount                  | ### | \$0.00          |
| (b) Labour Charges                                   | ### | \$411.00        |
| <b>Total for Part-By-Part Repair Cost</b>            |     | <b>\$411.00</b> |
|  |     |                 |
| (c) Lumpsum Repair (if applicable)                   | N   |                 |
| Total for Lumpsum repair cost after Less: <u>20%</u> |     |                 |
| <b>Final Lumpsum Repair cost</b>                     |     |                 |
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 : JUMANI  
Tel : 6214 8315  
Fax : 65468156

Signature :   
Name : Kaka  
Date : 25/7/19

## 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 (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: CC3/TMI19013013/K1QF3N2

Date: 29/07/2019

**REFERENCE**

|                       |                                      |                      |          |
|-----------------------|--------------------------------------|----------------------|----------|
| Handling Insurer:     | Tokio Marine Insurance Singapore Ltd | Policy No:           | MU008897 |
| Claimant Vehicle No : | SH6352C                              | Insured Vehicle No : | SJS4596C |
| Date of Loss:         | 23/07/2019                           | Nature of Claim:     | TP       |
|                       |                                      | Claim No:            | M1905597 |

**DESCRIPTION & IDENTIFICATION OF VEHICLE**

|                             |                              |             |                   |
|-----------------------------|------------------------------|-------------|-------------------|
| Reg No:                     | SH6352C                      | Engine No:  | 2ZRS066731        |
| Make & Model:               | TOYOTA PRIUS TAXI, 1.8 (A)   | Chassis No: | JTDKB3FU703565178 |
| Reg. Date:                  | 06/10/2017 (Man. Year: 2017) | Odometer:   | 303911 km         |
| Colour:                     | Blue                         |             |                   |
| 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:  | Average |

**CONDITION OF TYRES**

|                   |                |                  |                |
|-------------------|----------------|------------------|----------------|
| Front Tyre Size:  | 195/65R15      | Rear Tyre Size:  | 195/65R15      |
| Front Left Side:  | West Lake 7 mm | Rear Left Side:  | West Lake 7 mm |
| Front Right Side: | West Lake 7 mm | Rear Right Side: | West Lake 7 mm |

The above values represent the remaining tyre treads depth

| COST OF CLAIMS                | Repairer's      | Adjuster's    | Difference      | Diff %       |
|-------------------------------|-----------------|---------------|-----------------|--------------|
| Parts                         | 957.30          | 0.00          | 957.30          | 100.00       |
| Miscellaneous Items           | 11.00           | 11.00         | 0.00            | 0.00         |
| Labour                        | 810.00          | 400.00        | 410.00          | 50.62        |
| Paintwork Labour              | 0.00            | 0.00          | 0.00            |              |
| Towing                        | 0.00            | 0.00          | 0.00            |              |
| <b>Gross Total (S\$)</b>      | <b>1,778.30</b> | <b>411.00</b> | <b>1,367.30</b> | <b>76.89</b> |
| <b>+ GST 7.00/7.00% (S\$)</b> | <b>124.48</b>   | <b>28.77</b>  | <b>95.71</b>    | <b>76.89</b> |
| <b>Nett Amount (S\$)</b>      | <b>1,902.78</b> | <b>439.77</b> | <b>1,463.01</b> | <b>76.89</b> |

**INSPECTION**

|                             |            |                   |   |
|-----------------------------|------------|-------------------|---|
| Date of Assignment:         | 24/07/2019 | Present Location: | ComfortDelGro Engineering Pte Ltd (Loyang)  |
| Date Inspected:             | 23/07/2019 | Inspected At:     | ComfortDelGro Engineering Pte Ltd (Loyang)<br>59 Loyang Drive<br>Singapore 508969 |
| Estimated Period of Repair: | 2.0 days   |                   |   |

Adjuster: KALVIN ANG WEI KUN

Manager: SHIAU CHAN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

## REPAIR DETAILS

|                            |  |
|----------------------------|--|
| <b>Reference</b>           |  |
| <b>Part Source:</b> MRM-SG | Version: 1.0 (Last Synchronised: 29 Jul 2019)  |
| <b>Parts:</b> 144          | TOYOTA PRIUS TAXI 1.8 (A) (Catalogue:Merimen Singapore 1.0)  |
| <b>Labour:</b> Repairer's  | (Price-denominated Standard List)  |
| <b>Print Code:</b>         | (Unsubmitted, no print-code for SH6352C)   |
| <b>Validity:</b>           | 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 |
| <b>Further Info:</b>       | Items/values not in reference catalogue are prefixed with an asterisk *.   |

## Recommended Parts

| No. | Qty | Part No. | Particulars                   | Condition     | Repairer's  | Amount                            |
|-----|-----|----------|-------------------------------|---------------|---|-----------------------------------|
| 1   | 1   |          | *REAR BUMPER                  | Repair        | 458.60 FL   | *- FL                             |
| 2   | 1   |          | *REAR BUMPER UNDER COVER      | Serviceable   | 552.60 FL   | *- FL                             |
| 3   | 10  |          | *REAR BUMPER CLIPS            | Not Necessary | 22.00 FL  | *- FL                             |
| 4   | 1   |          | *RETAINER REAR BUMPER SIDE RH | Serviceable   | 94.80 FL  | *- FL                             |
| 5   | 1   |          | *SEAL REAR BUMPER SIDE RH     | Repair        | 148.40 FL   | *- FL                             |
|     |     |          |                               |               |   | F=Franchise part. L=ListItemDisc. |
|     |     |          |                               |               | <b>Sub Total (S\$)</b>                                    | <b>1,276.40</b>                   |
|     |     |          |                               |               | <b>- List Item Discount on L Items 25.00/25.00% (S\$)</b> | <b>319.10</b>                     |
|     |     |          |                               |               | <b>Total Parts (S\$)</b>                                  | <b>957.30</b>                     |

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) | 11.00      | 11.00  |
| Sub Total (S\$)            |     |                      | 11.00      | 11.00  |

## Recommended Labour

| No                      | Particulars                  | Lab.Type | Repairer's | Amount |
|-------------------------|------------------------------|----------|------------|--------|
| <u>Labour Items</u>     |                              |          |            |        |
| 1                       | PANEL BEATING                | New      | 400.00     | 200.00 |
| 2                       | SPRAYPAINT                   | New      | 300.00     | 200.00 |
| 3                       | WIRING                       | New      | 30.00      | 0.00   |
| 4                       | REMOVE/ REFIX REVERSE SENSOR | New      | 80.00      | 0.00   |
| Gross Labour Cost (S\$) |                              |          | 810.00     | 400.00 |

|   |
|---|
| Report was unsubmitted during this print-out. |
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&lt; END OF ESTIMATES &gt;