

ASS REC. BY:

REF: CS17M1 19013969 / KYf309

**Special Instruction:**

Surveyor : kalvin

ASSIGNMENT (Office)

From (Person): Piona Can Re Song of TMZ Date/Time: 13.8.19 11.41 a.m

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD (TP) / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SHC 79975 Insured: SLS 80606

at Workshop m/s Comfortallgro Tel: 62148300

of 59 Loyang drive

Policy No: MU 009805 Claim No: M1906082

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ DOA 10-8-19

(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 13.8.19 11.57 A.M. Person Contacted: Jumadi

Vehicle ~~IN~~OUT

Date/Time	Action/Instruction ( ✓ ) Estimate
	SHC 1005 - x
	SLS 80605 - x

Surveyor: Kelvin

REF:

## ASSIGNMENT

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

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

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

To Inspected Vehicle No: \_\_\_\_\_

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

of \_\_\_\_\_

Insured: SL 80609

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

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Veh No: SHC 79975 Yr Regn: 17 Sep 2015

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

Truck / Trailer or

Make: Hyundai 240 C.O. 1685Colour: Yellow A/C: Ins / Std / NI / NASp. Reading: 53 5972 T/Radio: Ins / Std / NI / NA

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

C/No: KMHLB416M4407 8578Gen. Cond: Good / F4 / Poor / BurntSteering: Inorder / J / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD B / Rim orTyre Size: F: 255/6.0R16

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

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

TOYO / YOKO or Wet Hk.

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

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 10/8/19 D.O.I. 13/8/19Survey held at CPGE (Loyang)

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

o/s Front.

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

Date / Time Action / Instruction

19/8/19 Check LP \$1600 / 3 Pys. (Red = 2409-42, 60%) To Ks41.

RECEIVED 20 AUG 2019

Date/Time, File Pass to?

☐ : Prel. Report☐ : Final Report

1)

Date/Time, File Return to?

2) 20/8 TypistDays Of Repair: 3Resurvey No. of Trip: 1

Survey Fee:

Transportation:

3.00 + 28.00

290

L/S \$1600

11

261

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	13 Aug 2019 Sendback Est	13 Aug 2019 11:19 S\$4,009.42	13 Aug 2019 11:41 Assign				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>									
Insured: <b>CHNG YEN LIN ELAINE, ID: S8015747I</b>									
Main Claimant: <b>CCPL</b>									
Vehicle Reg. No.:	<b>SHC7997S</b>	Date of Loss:	10/08/2019 00:00 - :59 [46 Months and 24 Days From LTA Reg Date (Man Yr)]						
Claim Type:	<b>TP / M1906082</b>	Policy/Cover Note No.:	MU009805 Coverage: 06/10/2017 - 05/10/2019						
Vehicle Reg. No. (Insured):	<b>SLS8060G</b>	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	<b>ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300</b>								
Handling Insurer:	<b>Tokio Marine Insurance Singapore Ltd (HQ) - Tel: 6221 6111 ... [Handled by Fiona Gan Bee Song - 65926378]</b>								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 22/08/2019]</b>								
Adj Asg. Remarks:	OI HAS NOT RPT THE ACCDT								
<b>ASSOCIATED MAIL RECEIVED</b> <a href="#">View All</a> <a href="#">Compose Case Mail</a>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a>									
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	13/08/2019 09:39
Date Of Accident	10/08/2019 11:00
Exact Location Of Accident	PIE(TUAS) BF JLN ANAK BUKIT EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7997S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I40
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-18088937MFSH
Cover Note Number	

### Driver

Name of Driver	STEPHEN YU AH KAU
NRIC No	S2503779J
Date Of Birth	25/01/1948
Occupation	OUTDOOR
Date Of Driving Pass	07/11/1978
Driving Experience	40 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96319773
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 101 WHAMPOA DRIVE #09-174
Postcode	323101
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)	2
Passenger 1	NAME: : - GENDER: : MALE

#### 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 N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO ATTACHED / POLICE REPORT : T/20190810/2052

#### 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	SLS8060G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD

Nature Of Damage

LEFT REAR

No. Of Passenger (Including Driver)

**IMPORTANT NOTICE**

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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.

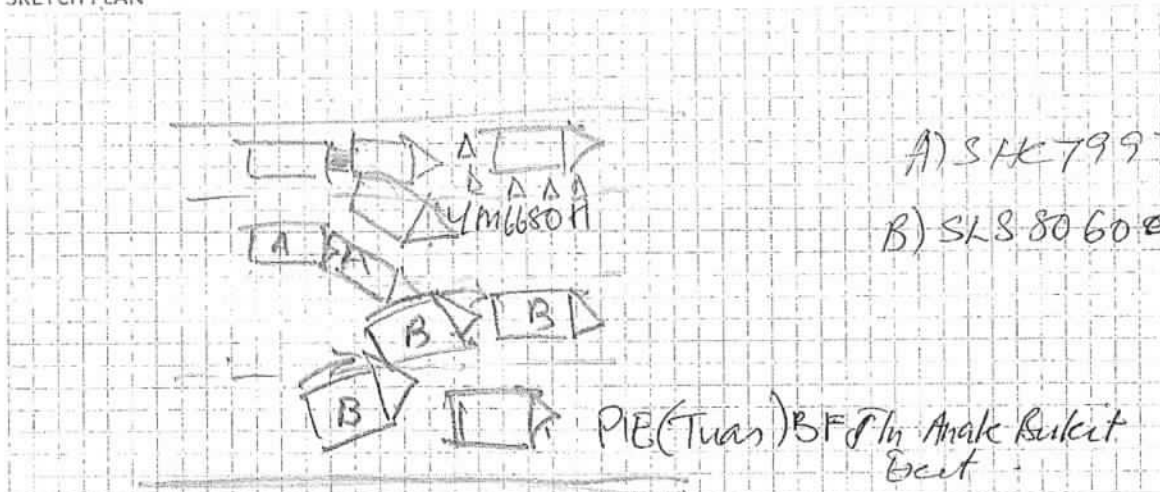
CITYCAB PTE LTD  
CO. REG. NO. 199502F39G

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.: 1318115

SKETCH PLAN



A) SK 79975

B) SK 80604

PE (Tuan) BF In Anak Bukit  
Exit

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/8/19 at about 1100hrs when I Veh A

Refer Police Report - T/20190810/2052

DECLARATION

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

CITYCAB PTE LTD  
CO. REG. NO. 199502F39C

Policyholder's Signature  
Date & Time:

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

S R Moorthy  
CSP  
13/8/19  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:





**SINGAPORE  
POLICE FORCE**



T/20190810/2052

1 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/20190810/2052

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/08/2019 13:53		Vide Report No.:		Station Diary No.: 65
<b>Informant's Particulars</b>				
Name of Informant: STEPHEN YU AH KAU		Address: APT BLK 101 WHAMPOA DRIVE #09-174 SINGAPORE 323101		
ID Type / ID No.: NRIC NO / S2503779J		Contact No.: Home/Office: Mobile: 96319773		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 71	Date of Birth: 25/01/1948	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class: Date of Expiry:		


**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/08/2019 11:00	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY  Towards Toh Tuck Avenue.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC7997S	Car				Slightly Damaged	1
SLS8060G	Car					0

 **SINGAPORE  
POLICE FORCE**

  
SIGNATURE



SINGAPORE  
POLICE FORCE



T/20190810/2052

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

2 of 3

Report No. T/20190810/2052

CONTINUATION OF REPORT

**Brief Details.**

On 10/8/2019, at about 11am earlier, I was driving my vehicle, a taxi SHC7997S at Pan Island Expressway towards Toh Tuck Avenue to drop off a passenger at Bukit Batok Crescent. While at the expressway, I was driving at the middle lane however was unsure if it was three or four lanes. Suddenly, there was a lorry driving vehicle number YM6680H that cut into my lane from the left lane, which caused me to execute an emergency break. That was when the vehicle, SLS8060G, on my right lane collided into my vehicle. I observed that the stated vehicle SLS8060G was moving at a fast speed. However upon collision, the vehicle SLS8060G did not stop and continued driving off. I was able to review the vehicle plate numbers with my in-car front camera.

The lorry driver did stop, however the saloon car did not. There was a dent observed on the front right bumper of my vehicle, above the right tyre. Nobody was injured.



**SINGAPORE  
POLICE FORCE**



T/20190810/2052

3 of 3

Report No. T/20190810/2052

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

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 /

Sgt 2 OH JIA KAI JACKIE

Signature Of Informant:

*[Handwritten Signature]*

Signature Of Interpreter:

Not applicable

Date/Time:

10/08/2019 13:53

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt TAN JEOK LENG

Contact No.: 65476144

Classification Of Case:

Authentication Stamp

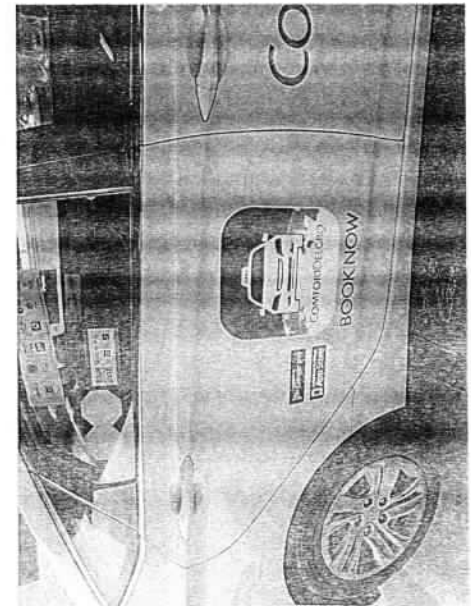
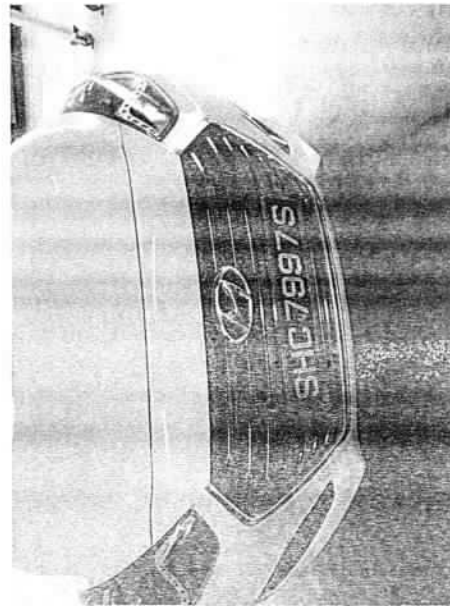
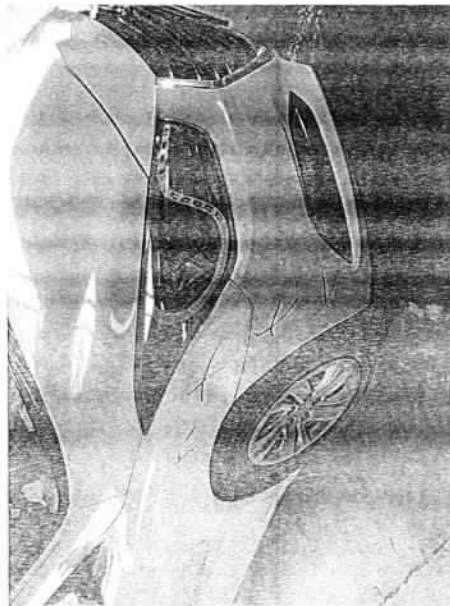
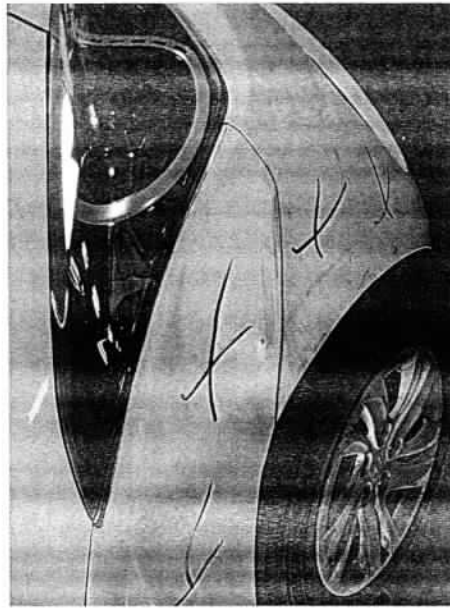
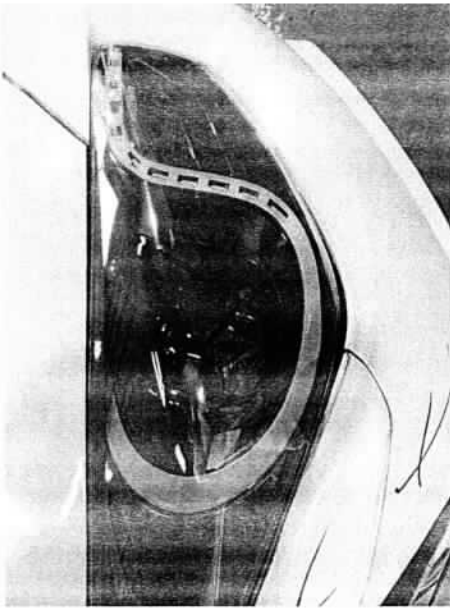
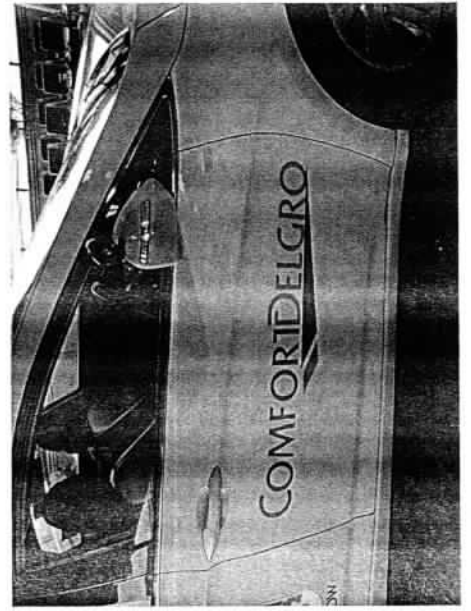
NP168



**SINGAPORE  
POLICE FORCE**

*[Handwritten Signature]*

SIGNATURE



COMFORT

Date: 10.08.2019 10:43

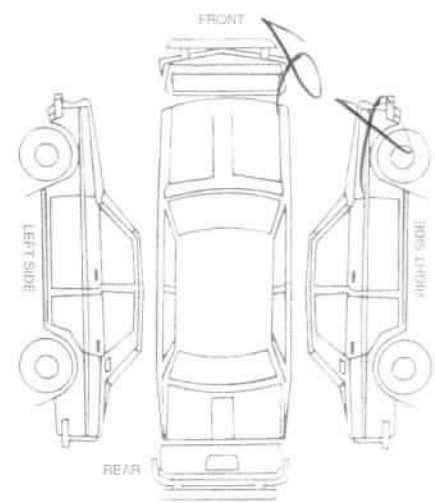
Page 1

Team: ARU Repair TP(CFSO)1	JOB CARD	Sales Order:	JC NO.: 305323966
STOMER		REGN NO: SHC7997S	MILEAGE
VMS CITYCAB PTE LTD		MAKE: HYUNDAI	FUEL
STOMER NO. 7010070		MODEL: I-40	E.....1/2.....F
DRESS 383 SIN MING DRIVE		YR OF MANU: 17.09.2015	DATE/TIME IN: 13.08.2019 08:15
Singapore SINGAPORE 575717		CHASSIS CODE: RMHLB41UMGU079538	TARGET DATE
65551188			COMPLETION DATE/TIME:
(R)	(O)		
(P)			
3COUNT CARD NO.			

JOB DESCRIPTION

Accident Date: 10.08.2019  
NATURE: 3P 10.08.19/C

S/NO	LABOR CODE	DESCRIPTION
		<i>Not take Fender bump Headlamp bracket - x2 cap - RM</i>



CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR	CUSTOMER'S SIGNATURE
-----------------	----------------------

Acknowledgement Slip	Exit Pass
Vehicle No.: SHC7997S	Vehicle No.: SHC7997S
JU TOKIO	
Name of Service Advisor	Name of Service Advisor
Signature/Date	Date
Returned to Service Reception upon collection	To be kept by Security Guard

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

59 Loyang Drive  
Singapore 508969  
Tel: 6214 8300

**TP INSURER:** Tokio Marine Insurance Singapore Ltd (HQ) — Jumani  
**CCPL**

Singapore

**PARTICULARS OF CLAIM**

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	10/08/2019
Vehicle Reg. No.:	SHC7997S	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	17/09/2015
Vehicle Colour:	YELLOW	Gen Condition:	GOOD
Engine No:	D4FDFU550917	Chassis No:	KMHLB41UMGU079538
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	4		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

<b>COST OF CLAIMS</b>	<b>Amount</b>
Parts	2,528.42
Miscellaneous Items	11.00
Labour	1,470.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (S\$)</b>	<b>4,009.42</b>
<b>+ GST 7.00% (S\$)</b>	<b>280.66</b>
<b>Nett Amount (S\$)</b>	<b>4,290.08</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: 13 Aug 2019)**Parts:** 143      HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's      (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHC7997S/13/08/2019 11:19**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 ASSY - <i>Rebuilt</i>	20.00	0.00	*1,052.20 FL
2	1		*FRT FENDER RH - <i>Rebuilt</i>	20.00	0.00	*566.23 FL
3	1		*HEADLAMP ASSY RH x <i>su</i>	20.00	0.00	*1,388.00 FL
4	1		*FRT BUMPER BRACKET TOP RH x <i>su</i>	20.00	0.00	*22.40 FL
5	1		*FRT BUMPER BRACKET RH x <i>su</i>	20.00	0.00	*24.60 FL
6	1		*FRT WHEEL HUP CAP RH x <i>su</i>	20.00	0.00	*107.10 FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)

**3,160.53**

- List Item Discount on L Items (S\$)

632.11

Total Parts (S\$)

**2,528.42****ComfortDelGro Engineering Pte Ltd/SHC7997S/13/08/2019 11:19. Not valid without Reference section.**Generated using **Merimen e-Claims IEAS**

## Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
<b>Miscellaneous Items</b>			
1	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			11.00

## Estimates on Labour

No	Particulars	Lab.Type	Amount
<b>Labour Items</b>			
1	PANEL BEATING	New	<del>600.00</del> 300
2	SPRAYPAINT	New	<del>600.00</del> 400
3	WIRING	New	<del>50.00</del> X 2
4	TUFF KOTE	New	<del>100.00</del> 20
5	FRT WHEEL ALIGNMENT	New	<del>120.00</del> X 4
Gross Labour Cost (S\$)			1,470.00

ComfortDelGro Engineering Pte Ltd/SHC7997S/13/08/2019 11:19. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Kalvin 16(RK)  
13/8/19 1130 Lr.  
3 Days  
4/5  
After Repair p Lr.





Our Job Ref No 305323966Date : 16/08/2019ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156**FINALIZATION FORM**To : LKK

Fax :

Attn : KALVIN: SHC7997SDate of Accident : 10/08/19

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

1. The repair job shall bill to: TOKIO --- SLS8060G  
###
2. The finalized amount shall be:
  - (a) Spare Parts after List discount
  - (b) Labour Charges ###
  - Total for Part-By-Part Repair Cost**
  - (c) Lumpsum Repair (if applicable) N
  - Total for Lumpsum repair cost after Less: 20% \$1,600.00
  - Final Lumpsum Repair cost**

3. Estimated normal period for repairs: 3 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 : JUMANITel : 6214 8315Fax : 65468156Signature : Name : KalvinDate : 19/8/19**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:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	13 Aug 2019 Sendback Est	13 Aug 2019 11:19 <b>S\$4,009.42</b>	13 Aug 2019 11:41 Edit Adj Rpt	<b>S\$1,600.00</b> Edit Estimates	<b>S\$1,600.00</b> View Rpt		<b>Pending for Survey Report</b> Cancel Case

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>									
Insured:	<b>CHNG YEN LIN ELAINE</b> , ID: S80157471								
Main Claimant:	<b>CCPL</b>								
Vehicle Reg. No.:	<b>SHC7997S</b>	Date of Loss:	10/08/2019 00:00 - :59 [ <b>46 Months and 24 Days</b> From LTA Reg Date (Man Yr)]						
Claim Type:	<b>TP / M1906082</b>	Policy/Cover Note No.:	MU009805 Coverage: 06/10/2017 - 05/10/2019						
Vehicle Reg. No. (Insured):	<b>SLS8060G</b>	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	<b>ComfortDelGro Engineering Pte Ltd (Loyang)</b> 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	<b>Tokio Marine Insurance Singapore Ltd (HQ)</b> - Tel: 6221 6111 ... [Handled by <b>Fiona Gan Bee Song</b> - 65926378]								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>KALVIN ANG WEI KUN</b> ] ... [Final Rpt due 22/08/2019]								
Adj Asg. Remarks:	OI HAS NOT RPT THE ACCDT								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;">View All   Compose Case Mail</span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;">View All   Search Tasks   Create New Task   Complete</span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

SHC7997S (M1906082)  
[SLS8060G]  
TP  
CCPL  
Aug 10 2019 12:00AM  
[CHNG YEN LIN ELAINE]  
ComfortDelGro Engineering Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			View		View in Browser	
Video									1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)							Thumbnail	Print		
1	14/08/19 15:56	Video - Accident From:SC - Reg. No: SLS8060G, Claimant: CHNG YEN LIN ELAINE							Load MP4			
Assessment Reports									1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)							Thumbnail	Print		
1	13/08/19 11:19	Repairer Estimates							Load HTM			
Photos/Images									3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)							Thumbnail	Print		
1	14/08/19 08:53	General View							Load JPG	<input checked="" type="checkbox"/>		
2	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
3	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
4	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
5	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
6	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
7	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
8	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
9	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
10	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
11	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
12	14/08/19 08:54	General View							Load JPG	<input checked="" type="checkbox"/>		
13	15/08/19 09:11	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>		
14	15/08/19 09:11	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>		
15	15/08/19 09:11	Reinspection Photo							Load JPG	<input checked="" type="checkbox"/>		
Documentation									1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)							Thumbnail	Print		
1	13/08/19 11:19	E-filed GIA report							Load PDF			

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b> <span style="float: right;">Reset Save Print</span>
There are no document checklists configured.
<div style="border: 1px solid black; height: 150px; margin-top: 10px;"> <div style="position: absolute; top: 5px; left: 5px; font-size: 0.8em;">           Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)         </div> </div>

**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/TMI19013969/K1YF3E2

Date: 22/08/2019

### REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MU009805

Claimant Vehicle No : SHC7997S

Insured Vehicle No : SLS8060G

Date of Loss: 10/08/2019

Nature of Claim: TP

Claim No: M1906082

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC7997S

Make &amp; Model: HYUNDAI I40, 1.7 D CRDi (A)

Engine No: D4DFDU550917

Reg. Date: 17/09/2015 (Man. Year: 2015)

Chassis No: KMHLB41UMGU079538

Colour: Yellow

Odometer: 535972 km

Engine Capacity: 1685 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Good	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Average

### CONDITION OF TYRES

Front Tyre Size:	205/60 R16	Rear Tyre Size:	205/60 R16
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	2,528.42	1,294.74	1,233.68	48.79
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	1,470.00	720.00	750.00	51.02
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>4,009.42</b>	<b>2,025.74</b>	<b>1,983.68</b>	<b>49.48</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,600.00</b>		
<b>(S\$)</b>	<b>4,009.42</b>	<b>1,600.00</b>	<b>2,409.42</b>	<b>60.09</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>280.66</b>	<b>112.00</b>	<b>168.66</b>	<b>60.09</b>
<b>Nett Amount (S\$)</b>	<b>4,290.08</b>	<b>1,712.00</b>	<b>2,578.08</b>	<b>60.09</b>

### INSPECTION

Date of Assignment:	13/08/2019 Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	13/08/2019 Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	3.0 days	

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**Adjuster:** KALVIN ANG WEI KUN**Manager:** YVONNE WONG YIN CHENG

*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: 22 Aug 2019)
<b>Parts:</b>	143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHC7997S)	
<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		*FRT BUMPER ASSY	Deformed	1,052.20 FL	*1,052.20 FL
2	1		*FRT FENDER RH	Buckled	566.23 FL	*566.23 FL
3	1		*HEADLAMP ASSY RH	Serviceable	1,388.00 FL	*- FL
4	1		*FRT BUMPER BRACKET TOP RH	Serviceable	22.40 FL	*- FL
5	1		*FRT BUMPER BRACKET RH	Serviceable	24.60 FL	*- FL
6	1		*FRT WHEEL HUP CAP RH	Serviceable	107.10 FL	*- FL
					<b>Sub Total (S\$)</b>	<b>3,160.53</b>
					<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	<b>632.11</b>
					<b>Total Parts (S\$)</b>	<b>2,528.42</b>
						<b>1,618.43</b>
						<b>323.69</b>
						<b>1,294.74</b>

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

No	Qty	Particulars	Repairer's	Amount
<b>Miscellaneous Items</b>				
1	1	OD/TP Case (Insurer)	11.00	11.00
<b>Sub Total (\$\$)</b>			<b>11.00</b>	<b>11.00</b>

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	PANEL BEATING	New	600.00	300.00
2	SPRAYPAINT	New	600.00	400.00
3	WIRING	New	50.00	0.00
4	TUFF KOTE	New	100.00	20.00
5	FRT WHEEL ALIGNMENT	New	120.00	0.00
<b>Gross Labour Cost (\$\$)</b>			<b>1,470.00</b>	<b>720.00</b>

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