

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

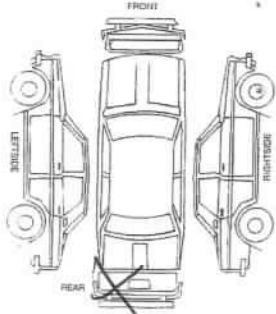
Job Requisition

1. Date: <u>26/8/19</u> Time Received: <u>2048</u>		3. Vehicle Type: <input type="checkbox"/> Private <input type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)		4. Type of Towing: <input type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up	
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : <u>MR. CHUA</u> Contact No. : <u>98503672</u> Vehicle No. : <u>SHC7595T</u> Make / Model / Colour : Email :		5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery		6. Parts Replaced/Remarks:	

7. Location: <u>690E Wlands</u>		8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi	
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____			

10. Odometer Reading : _____ Fuel Level : <table border="1"><tr><td>F</td><td>1/4</td><td>1/2</td><td>3/4</td><td>E</td></tr></table>		F	1/4	1/2	3/4	E	11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested	
F	1/4	1/2	3/4	E				

Job Attended

12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input type="checkbox"/> QA <input type="checkbox"/> GAO <input checked="" type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS		 <p># : Cracked X : Dented / : Scratched O : Missing</p> <p><u>[Signature]</u> Signature of Customer</p>
Name of Driver : <u>Ben</u>		
Vehicle No. : <u>YP6723C</u>		
Time Dispatch : <u>2048</u>		
Time of Arrival : <u>2107</u> Time Completed : <u>2139</u>		

Cash Invoice Details (if applicable)

3. Cash Invoice No. :	_____
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Customer Acknowledgement

- I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.
- I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
- Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

<u>26/8/19</u> Date	<u>2107</u> Time	<u>[Signature]</u> Signature of Customer
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4. WORKSHOP

Name of Attending Staff/Guard	Date & Time of Arrival	Signature of Attending Staff/Guard
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Team: ARC Repair TP(CFSO)1

JOB CARD

Sales Order:

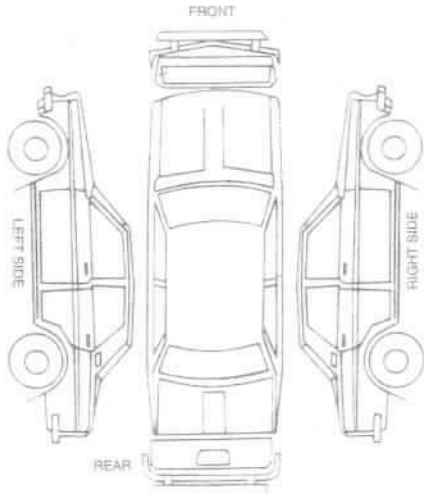
JC NO.: 305327969

MEMBER NO.	REGN NO.: SHC7595T	MILEAGE
CITYCAB PTE LTD	MAKE: HYUNDAI	FUEL
7010070	MODEL IONIQ(G2)	E.....1/2.....F
383 SIN MING DRIVE	YR OF MANU 17.07.2019	DATE/TIME IN 26.08.2019 20:45
Singapore SINGAPORE 575717	CHASSIS CODE KMHC851CVKU165003	TARGET DATE
65551188 (O)		COMPLETION DATE/TIME:
INT CARD NO.		

JOB DESCRIPTION

Accident Date: 26.08.2019
NATURE: 3P 26.08.19

3/NO LABOR CODE DESCRIPTION



ED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

gement Slip

Exit Pass

SHC7595T LIMITS

Vehicle No.: SHC7595T

Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

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	27/08/2019 11:46
Date Of Accident	26/08/2019 19:10
Exact Location Of Accident	T JUNCTION OF RODYK ST AND MARTIN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7595T
Insured/Policyholder	
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	IONIQ
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	CHUA AH HUAT
NRIC No	S0026682E
Date Of Birth	02/09/1952
Occupation	OUTDOOR
Date Of Driving Pass	16/10/1975
Driving Experience	43 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98503672
Fax Number	
Contact Number	
Email Address	CHUAHHUAT24@GMAIL.COM

Address	BLK 690B WOODLANDS DRIVE 75 #14-204
Postcode	735690
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	WET

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?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO 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	SLK9965G
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	FRT RIGHT
No. Of Passenger (Including Driver)	

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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.

CITYCAR PTE LTD
CO. REG. NO. 1995028300

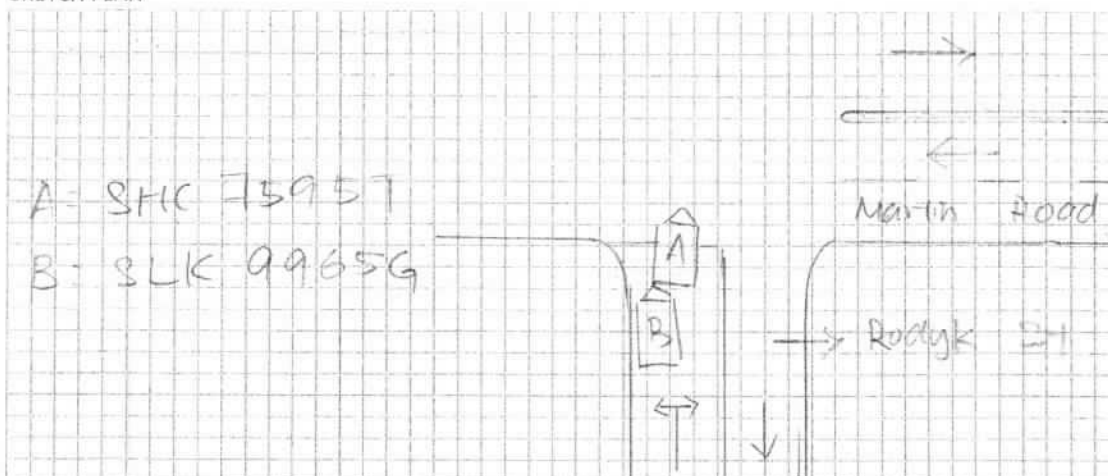
Policyholder's Signature
Date & Time:

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

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

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/8/19 at about 19:10 hrs, I was stop at above said location waiting traffic to clear. Shortly I brake to stop my taxi upon seeing gnt traffic oncoming. A split second later, I felt an impact from behind. Veh B front right portion collided with the rear left portion of my taxi. No injury at the point of accident.

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:

27/8/19
Loke Wai Yee

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

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)
 59 Loyang Drive
 Singapore 508969
 Tel: 6214 8300

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

Singapore

PARTICULARS OF CLAIM			
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Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	26/08/2019
Vehicle Reg. No.:	SHC7595T	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	17/07/2019
Vehicle Colour:	YELLOW	Gen Condition:	GOOD
Engine No:	G4LEKU298734	Chassis No:	KMHC851CVKU165003
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair	4		
(day)			
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	1,502.50
Miscellaneous Items	11.00
Labour	960.00
Paintwork Labour	0.00
Towing	0.00
	Gross Total (S\$)
	2,473.50
	+ GST 7.00% (S\$)
	173.15
	Nett Amount (S\$)
	2,646.65

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: 27 Aug 2019)**Parts:** 192 HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHC7595T/27/08/2019 18:26**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		*NO.PLATE	0.00	0.00	*25.00 F CRA
2	1		*REAR BUMPER	20.00	0.00	*459.40 FL CRA
3	1		*REAR BUMPER CTR MOULDING	20.00	0.00	*451.25 FL CRA
4	1		*REAR BUMPER BEAM	20.00	0.00	*294.80 FL CRA
5	1		*REAR BUMPER LWR MOULDING	20.00	0.00	*47.50 FL XR
6	1		*REAR BUMPER FOGLAMP	20.00	0.00	*201.50 FL XSVL
7	1		*REAR BUMPER TOW COVER	20.00	0.00	*5.40 FL XSVL
8	1		*REVERSE SENSOR	0.00	0.00	*135.70 F SHO
9	1		*REAR BUMPER MAT	0.00	0.00	*50.00 F NEL
10	10		*REAR BUMPER CLIPS	20.00	0.00	*22.00 FL NEL
11	1		*BOOTLID (HYBRID)	20.00	0.00	*35.90 FL NEL
12	1		*BOOTLID (IONIQ)	20.00	0.00	*22.00 FL NE L
13	1		*BOOTLID (COMFORTDELGRO)	0.00	0.00	*30.00 F NEL
14	1		*BOOTLID (65521111)	0.00	0.00	*30.00 F NEL

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	1,810.45
- List Item Discount on L Items (\$\$)	307.95
Total Parts (\$\$)	1,502.50

ComfortDelGro Engineering Pte Ltd/SHC7595T/27/08/2019 18:26. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

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

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New	280.00 200 ✓
2	SPRAY PAINTING	New	500.00 400 ✓
3	R/I REVERSE SENSOR	New	120.00 30 ✓
4	TOWING FEE	New	60.00 X
Gross Labour Cost (S\$)			960.00

ComfortDelGro Engineering Pte Ltd/SHC7595T/27/08/2019 18:26. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

COMPANY : THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010070

ADDRESS : CITYCAB PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65551188

JOB NO : 305327969

REGN NO : SHC7595T

MILEAGE : 0000000000

MAKE : HYUNDAI

MODEL : IONIQ(G2)

DATE OF REGN : 17.07.2019

DATE/TIME IN : 26.08.2019 20:45

ACCIDENT DATE : 26.08.2019

Tyre Michelin
195/65 R15

Tokio Marine (P/P)
LKK - Calvin

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 FNPS	NO PLATE(S)	1 L	25.00	0.00	25.00	—	on
0002 04-01-0104-2282-G	REAR BUMPER	1	459.40	20.00	367.52	—	on
0003 04-01-0104-2533-G	REAR BUMPER CTR MOULDING	1	451.25	20.00	361.00	—	on
0004 04-01-0104-2288-G	REAR BUMPER BEAM	1	294.80	20.00	235.84	—	on
0005 04-01-0104-2545-G	REAR BUMPER LWR MOULDING	1	47.50	20.00	38.00	—	x rep
0006 04-01-0104-2370-G	REAR BUMPER FOGLAMP	1	201.50	20.00	161.20	—	x rep
0007 04-01-0104-2544-G	REAR BUMPER TOW COVER	1	5.40	20.00	4.32	—	x rep
0008 04-01-0101-0111-G	REAR BUMPER CLIPS	10	22.00	20.00	17.60	—	on
0009 09-01-9999-0068-A	REVERSE SENSOR	1	135.70	2.00	135.70	—	sketch
0010 04-01-0104-1150-A	REAR BUMPER MAT	1	50.00	0.20	50.00	—	on
Bentid combined sketched		—	\$60				
Bentid Emblem (Hybrid)		—	\$35.90	-20%			
Bentid Emblem (Truck)		—	\$22	-20%			
					SUB-TOTAL	1,396.18	

JOB NATURE

0000 PB PANEL BEATING

280.00 200

60.00
28.72
17.60

COMFORTDELGRO ENGINEERING PTE LTD

Date: 27.08.2019

REPAIR ESTIMATE

Time: 14:34:49

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010070

ADDRESS : CITYCAB PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65551188

JOB NO : 305327969

REGN NO : SHC7595T

MILEAGE : 0000000000

MAKE : HYUNDAI

MODEL : IONIQ(G2)

DATE OF REGN : 17.07.2019

DATE/TIME IN : 26.08.2019 20:45

ACCIDENT DATE : 26.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0001 SP SPRAYPAINT CHARGE

~~500~~ 400

0002 L R/I REVERSE SENSOR

~~120.00~~ 30

0003 20-05 TP MERIMEN

11.00 /

0004 23-01 TOWING FEE

~~60.00~~ x

SUB-TOTAL : 721.00

TOTAL : ~~2,117.18~~ 2223.50

MVA NAME & SIGNATURE

DATE :

AUTHORISED : YES / NO

SURVEYOR NAME & SIGNATURE

DATE :

1/Calvin (C/K)

27/8/19 1515L

3 Dgs

P/P

Before Paint photo



2223.50

Our Job Ref No : 305327969

Date : 30/08/19

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHC7595T

Date of Accident : 26-Aug-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 --- SLK9965G
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$1,298.98
 - (b) Labour Charges \$641.00
 - Total for Part-By-Part Repair Cost \$1,939.98**
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20%
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 amountSignature : 

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 2/9/19

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:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305327969
REGN NO : SHC7595T
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G2)
DATE OF REGN : 17.07.2019
DATE/TIME IN : 26.08.2019 20:45
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QTY IND UNIT-PRICE DISC% AMOUNT

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0003	04-01-0104-2533-G	REAR BUMPER CTR MOULDING	1		451.25	20.00	361.00
0004	04-01-0104-2288-G	REAR BUMPER BEAM	1		294.80	20.00	235.84
0005	04-01-0101-0111-G	REAR BUMPER CLIPS	10		22.00	20.00	17.60
0006	09-01-9999-0068-A	REVERSE SENSOR	1		135.70		135.70
0007	04-01-0104-1150-A	REAR BUMPER MAT	1		50.00		50.00
0008	04-01-0104-2270-G	TAILGATE (HYBRID)	1		35.90	20.00	28.72
0009	04-01-0104-2271-G	TAILGATE (IONIQ)	1		22.00	20.00	17.60
0010	28-01-0103-0009-A	TAILGATE (COMFORTDELGRO)	1		30.00		30.00
0011	28-01-0103-0010-A	TAILGATE (65521111)	1		30.00		30.00

SUB-TOTAL : 1,298.98

JOB NATURE

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	27 Aug 2019 18:20 Sendback Est	27 Aug 2019 18:26 S\$2,473.50	28 Aug 2019 10:47 Edit Adj Rpt	S\$1,939.98 Edit Estimates	S\$1,939.98 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured:	LION CITY RENTALS PTE LTD, Co. Reg. No.: 201504621K								
Main Claimant:	LION CITY RENTALS PTE LTD, Co. Reg. No.: 201504621K								
Vehicle Reg. No.:	SHC7595T	Date of Loss:	26/08/2019 19:00 - :59 [1 Months and 9 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M1906606	Policy/Cover Note No.:	MK000575 (Third Party Only) Coverage: 25/06/2019 - 24/02/2020						
Vehicle Reg. No. (Insured):	SLK9965G	Policy No. (Claimant):							
		Excess:	S\$1,600.00						
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 Clara Milah Yeo]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 06/09/2019]								
ASSOCIATED MAIL RECEIVED									
View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS <input type="checkbox"/>									
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.									

Claim Documents

SHC7595T (M1906606)
[SLK9965G]
TP
LION CITY RENTALS PTE LTD
Aug 26 2019 7:00PM
[LION CITY RENTALS PTE LTD]
ComfortDelGro Engineering Pte Ltd

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Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On			Thumbnail	Print
1	27/08/19 18:26	ComfortDelGro Engineering Pte Ltd (Loyang)			
		Repairer Estimates		Load HTM	
No	Finalized On			Thumbnail	Print
1	28/08/19 10:48	Tokio Marine Insurance Singapore Ltd (HQ)			
		Accident Statement		Load HTM	
From: SC - Reg. No: SLK9965G, Claimant: LION CITY RENTALS PTE LTD					
Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
2	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
3	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
4	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
5	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
6	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
7	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
8	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
9	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
10	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
11	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
12	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
13	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
14	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
15	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
16	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
17	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
18	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
19	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
20	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
21	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
22	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
23	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
24	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
25	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
26	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
27	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
28	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
29	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
30	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
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34	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
35	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
36	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>
37	29/08/19 09:23	General View		Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
38	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
39	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
40	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
41	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
42	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
43	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
44	29/08/19 09:28	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)	Thumbnail	Print
1	03/09/19 16:27	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee	 Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	27/08/19 18:26	E-filed GIA report	 Load PDF	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail	Print
1	10/09/19 13:00	Letter of Demand from Third Party	 Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST		Reset	Save	Print
There are no document checklists configured.				
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>				
Show Remarks To: <input type="checkbox"/> Repairer <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>				

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/TMI19015129/K1SF3E2

Date: 18/09/2019

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No: MK000575

Claimant SHC7595T

Insured Vehicle No: SLK9965G

Date of Loss: 26/08/2019

Nature of Claim: TP

Claim No: M1906606

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC7595T

Make & Model: HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)

Engine No: G4LEKU298734

Reg. Date: 17/07/2019 (Man. Year: 2019)

Chassis No: KMHCH851CVKU165003

Colour: Yellow

Odometer: 14448 km

Engine Capacity: 1580 cc

Market Value/New Car Price: N/A

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

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

Front Tyre Size:	195/65 R15	Rear Tyre Size:	195/65 R15
Front Left Side:	Michelin 9 mm	Rear Left Side:	Michelin 9 mm
Front Right Side:	Michelin 9 mm	Rear Right Side:	Michelin 9 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,502.50	1,298.98	203.52	13.55
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	960.00	630.00	330.00	34.38
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	2,473.50	1,939.98	533.52	21.57
+ GST 7.00/7.00% (S\$)	173.15	135.80	37.35	21.57
Nett Amount (S\$)	2,646.65	2,075.78	570.87	21.57

INSPECTION

Date of Assignment:	28/08/2019	Present Location:	ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected:	27/08/2019	Inspected At:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair:	3.0 days		

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

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 18 Sep 2019)
Parts:	192	HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC7595T)	
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		*NO.PLATE	Cracked	25.00 F	*25.00 FS
2	1		*REAR BUMPER	Cracked	459.40 FL	*459.40 FL
3	1		*REAR BUMPER CTR MOULDING	Cracked	451.25 FL	*451.25 FL
4	1		*REAR BUMPER BEAM	Cracked	294.80 FL	*294.80 FL
5	1		*REAR BUMPER LWR MOULDING	Repair	47.50 FL	*- FL
6	1		*REAR BUMPER FOGLAMP	Serviceable	201.50 FL	*- FL
7	1		*REAR BUMPER TOW COVER	Serviceable	5.40 FL	*- FL
8	1		*REVERSE SENSOR	Shorted	135.70 F	*135.70 FS
9	1		*REAR BUMPER MAT	Necessary	50.00 F	*50.00 FS
10	10		*REAR BUMPER CLIPS	Necessary	22.00 FL	*22.00 FL
11	1		*BOOTLID (HYBRID)	Necessary	35.90 FL	*35.90 FL
12	1		*BOOTLID (IONIQ)	Necessary	22.00 FL	*22.00 FL
13	1		*BOOTLID (COMFORTDELGRO)	Necessary	30.00 F	*30.00 FS
14	1		*BOOTLID (65521111)	Necessary	30.00 F	*30.00 FS

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

Sub Total (\$\$)	1,810.45	1,556.05
- List Item Discount on L Items 20.00/20.00% (\$\$)	307.95	257.07
Total Parts (\$\$)	1,502.50	1,298.98

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

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

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	280.00	200.00
2	SPRAY PAINTING	New	500.00	400.00
3	R/I REVERSE SENSOR	New	120.00	30.00
4	TOWING FEE	New	60.00	0.00
Gross Labour Cost (\$\$)			960.00	630.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >