

(08/11/13)

Surveyor: Kelvin

REF: (C3) TMI 19017218/ Klyf352

## 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: \_\_\_\_\_

Policy No. MJ001454Claims No. TP/M1907683

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: SHA 927B Yr Regn: 904, 218

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

Truck / Trailer or

Make: Yun Tai I 40 c.c. 1685Colour: Yellow A/C: Insured / Std / NI / NASp. Reading: 528467 T/Radio: Insured / Std / NI / NA

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

C/No: KMH1844A E40 61610

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / RIM or

Tyre Size: F: 205/60R16

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

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

TOYO / YOKO or Wet 1/4

Front

Rear

R/Bal. 7 mm R/Bal. 2 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 28/9/19 D.O.I. 30/9/19Survey held at C/DHE (Loyang)

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

N/S AS

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

Date / Time	Action / Instruction
	SHA 927B - CC3/EQI 17016414/ K166242 D.O.A. - 22/03/2017 Tokia
	YP 21721 - X 45
4/10/19	Labour 4/5 \$5750/ 4 Rep. (Red \$7268-92, 55%)

RECEIVED 16 OCT 2019

Date/Time, File Pass to?

☐ : Prel. Report

1) \_\_\_\_\_

☐ : Final Report

Date/Time, File Return to?

2) 16/10/19 Typist4/5 \$5750fDays Of Repair: 4Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)Survey Fee: 250

Transportation: \_\_\_\_\_

S + RS, SI

Photos

## 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	30/09/2019 10:08
Date Of Accident	28/09/2019 14:40
Exact Location Of Accident	CHANGI SOUTH AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA927B
<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	ANG GEOK SOON
NRIC No	S0171171G
Date Of Birth	23/03/1950
Occupation	OUTDOOR
Date Of Driving Pass	05/11/2012
Driving Experience	6 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96625332
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 706 CLEMENTI WEST STREET 2 #12-385
Postcode	120706
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 - OPENING DOOR OF VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

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

#### Circumstances of Accident

PLS REFER TO ATTACHED / Type Of Accident : 3P OPEN DOOR

#### 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	YP2172T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	S KARTHIK S/O SOWOSAISMUTHU
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	TOKIO MARINE INSURANCE SINGAPORE LTD
Nature Of Damage	RIGHT FRT DOOR
No. Of Passenger (Including Driver)	

**IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

CITYCAB PTE LTD  
CO. REG. NO. 199502830C

Policyholder's Signature:  
Date & Time:

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

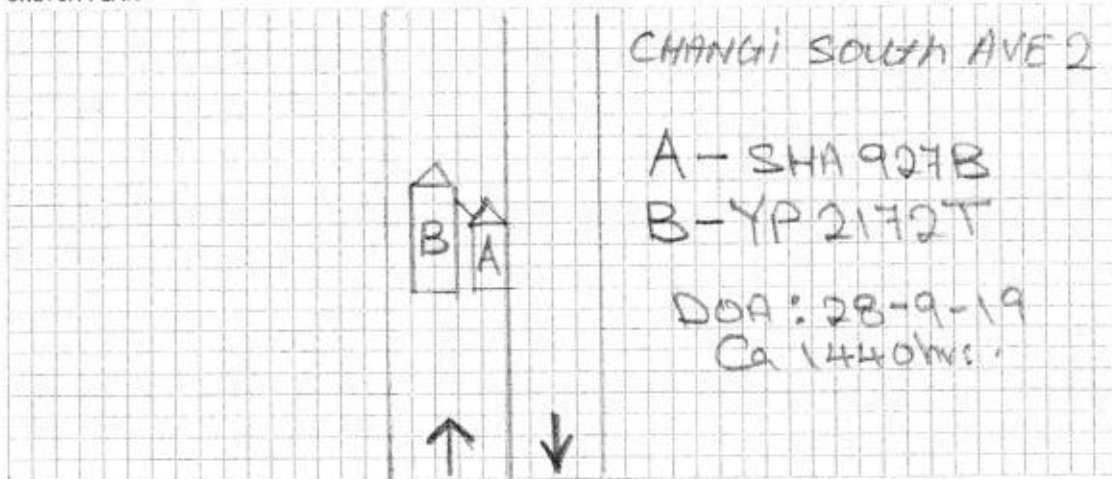
Reporting Centre Personnel's Signature:  
Name:  
NRIC/FIN No.:

GUARANTEE Sketch Plan Form 10



# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 28-9-19 Ca 1440hrs, I was driving along Changi South Ave 2. There is Long Park Side of the road. When my taxi passing thru, Suddenly the Vehicle (B) YP 2172T driver Open door and Cause hit my taxi LH Portion Cause damaged.

There is Video Footage on the Scene  
No Pax on board at my taxi

## DECLARATION

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

CITYCAB PTE LTD  
CO. REG. NO. 199502839G

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.:

CCP/HR/SpecOps/Genl: 95

# COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

## ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Mainline + 65 6383 8280 Facsimile + 65 6280 8755

### Workshops

59 Loyang Drive Singapore 508869

383 Sin Ming Drive Singapore 575717

45 Pandan Road Singapore 609286

501 Yishun Industrial Park A Singapore

24 Serangoon Loop Singapore 758115

7 Sungei Kadut Way Singapore 72

501 Yishun Industrial Park A Singapore

Date/Time: 30.09.2019 11:34

Page :

Team: ARC Repair TP(CFSO)1

## JOB CARD

Sales Order:

JC NO.: 305337

### CUSTOMER

MR/MS CITYCAB PTE LTD  
7010070  
CUSTOMER NO. 383 SIN MING DRIVE  
ADDRESS Singapore SINGAPORE 575717  
65551188  
TEL (R) (O)  
(P)

DISCOUNT CARD NO.

REGN NO.: SHA 927B

MILEAGE

MAKE: HYUNDAI

FUEL

E.....1/2.....

MODEL I-40

DATE/TIME IN

29.09.2019 05

YR OF MANU 09.10.2014

TARGET DATE

CHASSIS CODE KMHLB41UMEU061610

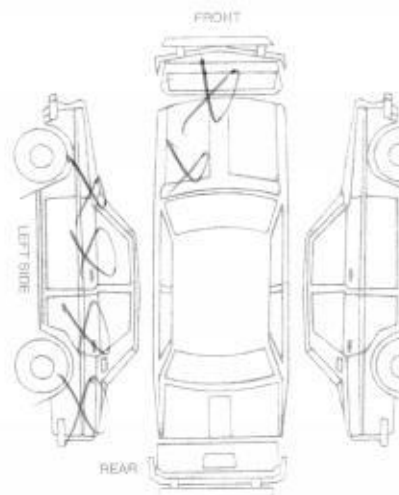
COMPLETION DATE/T

### JOB DESCRIPTION

Accident Date: 28.09.2019  
NATURE: 3P 28.09.19

S/NO LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Name:  
I/C No.:  
Vehicle No.: SHA 927B JU TOKIO LKK

Vehicle No.: SHA 927B

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

To be returned to Service Reception upon collection

To be kept by Security Guard

## REPAIR ESTIMATE\*

DATE 30/9/2019 11:37

**MODEL : HYUNDAI i40**

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bonnet / <i>Repl</i>			\$ 2,265.90
	Bonnet Lock X <i>see</i>			\$ 36.90
	Radiator Grille X <i>see</i>			\$ 251.00
	Radiator Grille H Emblem X <i>see</i>			\$ 27.50
	Front Bumper Cover X <i>repair</i>			\$ 544.50
	Front Bumper Bracket Top (LH/RH) X <i>see</i>		\$ 22.40	\$ 44.80
	Front Bumper Bracket (LH/RH) X <i>see</i>		\$ 24.60	\$ 49.20
	Front Door (LH) X <i>repair</i>			\$ 2,256.40
	Front Door Mirror Assy (LH) / <i>Repl</i>			\$ 670.00
	Front Headlamp (LH) / <i>int</i>		\$ 1388	
	<b>SUB TOTAL</b>			<b>\$ 6,146.20</b>
	<b>LESS 20%</b>			<b>\$ 1,229.24</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 4,916.96</b>
	Front Door Comfort Logo (LH) / <i>see</i>			<b>\$ 75.00</b> <b>Nett</b>
	Rear Fender (LH) X <i>repair</i>			\$ 2,171.40
	Rear Fender Inner Lining (LH) X <i>see</i>			\$ 169.30
	Rear Windscreen Moulding X <i>see</i>			\$ 28.30
	Rear Door (LH) / <i>Repl</i>			\$ 2,201.10
	Fuel Tank Upper Neck X <i>see</i>			\$ 221.10
	<b>SUB TOTAL</b>			<b>\$ 4,791.20</b>
	<b>LESS 20%</b>			<b>\$ 958.24</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 3,832.96</b>
	Rear Windscreen Sealant X <i>see</i>			\$ 46.00 <b>Nett</b>
	Rear Door Comfortdelgro & Apps Sticker (LH) / <i>see</i>			\$ 80.00 <b>Nett</b>
	<b>Labour Charge</b>			<b>\$ 126.00</b>
	Panel Beating			<del>\$ 850.00</del> <i>560</i>
	Spray Painting Charge			<del>\$ 1,300.00</del> <i>1200</i>
	Wiring Charge			<del>\$ 50.00</del> <i>20</i>
	Tuff Kote			<del>\$ 50.00</del> <i>20</i>
	Remove/Refix Cushion & Upholstery Rear			<del>\$ 150.00</del> <i>1200</i>
	Remove/Refix Rear Windscreen Glass			<del>\$ 120.00</del> <i>1200</i>
	Transfer of Door		\$ 80.00	<del>\$ 160.00</del> <i>50</i>
	<i>Marine Fee</i>			<del>\$ 11</del>
	<b>TOTAL LABOUR</b>			<b>\$ 2,680.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 11,630.92</b>

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

Our Job Ref No 305337335

Date : 03/10/19

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHA 927B

305333809 28/09/2019

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

1. The repair job shall bill to: TOKIO --- YP 2172T  
###

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)

Total for Lumpsum repair cost after Less: 20%

**Final Lumpsum Repair cost**

###

\$5750.00  
~~\$6,800.00~~

3. Estimated normal period for repairs: 4 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 : Kalvin

Date : 4/10/19

### 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:

\_\_\_\_\_



**REPAIR DETAILS****Reference****Part Source:** MRM-SG      **Version:** 1.0 (Last Synchronised: 03 Oct 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/SHA927B/03/10/2019 17:18**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		*HEADLAMP ASSY LH <i>cut</i>	20.00	0.00	*1,388.00 FL
						<b>Sub Total (S\$)</b> 1,388.00
						<b>- List Item Discount on L Items (S\$)</b> 277.60
						<b>Total Parts (S\$)</b> 1,110.40

F=Franchise part. L=List/ItemDisc.

ComfortDelGro Engineering Pte Ltd/SHA927B/03/10/2019 17:18. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

## 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**

<b>Claim Type:</b>	THIRD PARTY	<b>Ref. No:</b>	
<b>Policy No:</b>		<b>Date of Loss:</b>	28/09/2019
<b>Vehicle Reg. No.:</b>	SHA927B	<b>Driveable?</b>	YES
<b>Party At Fault:</b>	UNKNOWN		
<b>Make/Model:</b>	HYUNDAI I40, 1.7 D CRDI (A)	<b>Vehicle Reg. Date:</b>	09/10/2014
<b>Vehicle Colour:</b>	YELLOW	<b>Gen Condition:</b>	FAIR
<b>Engine No:</b>	D4FDEU461373	<b>Chassis No:</b>	KMHLB41UMEU061610
<b>Odometer:</b>	0 KM		
<b>Paint Type:</b>			
<b>List Item Discount:</b>	20.00 %		
<b>Total Loss?</b>	NO		
<b>Est. Duration of Repair (day)</b>	7		
<b>Present Location:</b>	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

<b>COST OF CLAIMS</b>	<b>Amount</b>
Parts	8,774.04
Miscellaneous Items	11.00
Labour	2,650.00
Paintwork Labour	0.00
Towing	0.00
<b>Gross Total (\$)</b>	<b>11,435.04</b>
<b>+ GST 7.00% (\$)</b>	<b>800.45</b>
<b>Nett Amount (\$)</b>	<b>12,235.49</b>

This claim is handled by: JUMANI BIN MASUDIN

12545-404

Generated using Merimen e-Claims Internet Estimation & Adjusting System

**REPAIR DETAILS****Reference****Part Source:** MRM-SG      **Version:** 1.0 (Last Synchronised: 30 Sep 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/SHA927B/30/09/2019 13:00**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		*BONNET	20.00	0.00	*2,265.90 FL	Buc
2	1		*BONNET LOCK	20.00	0.00	*36.90 FL	SVC
3	1		*RADIATOR GRILLE	20.00	0.00	*251.00 FL	SVC
4	1		*RADIATOR GRILLE H EMBLEM	20.00	0.00	*27.50 FL	nn
5	1		*FRT BUMPER ASSY	20.00	0.00	*544.50 FL	R
6	2		*FRT BUMPER BRACKET TOP (LH/RH)	20.00	0.00	*44.80 FL	SVC
7	2		*FRT BUMPER SIDE BRACKET (LH/RH)	20.00	0.00	*49.20 FL	SVC
8	1		*FRT DOOR LH	20.00	0.00	*2,256.40 FL	R
9	1		*FRT DOOR LH SIDE MIRROR	20.00	0.00	*670.00 FL	Buc
10	1		*REAR FENDER LH	20.00	0.00	*2,171.40 FL	R
11	1		*REAR FENDER INNER LINING LH	20.00	0.00	*169.30 FL	SVC
12	1		*REAR DOOR LH	20.00	0.00	*2,201.10 FL	Buc
13	1		*REAR WINDSCREEN MOULDING	20.00	0.00	*28.30 FL	nn
14	1		*FRT DOOR COMFORT LOGO LH	0.00	0.00	*75.00 F	nec
15	1		*REAR DOOR COMFORTDELGRO AND APPS LOGO LH	0.00	0.00	*80.00 F	nec
16	2		*REAR WINDSCREEN SEALANT	0.00	0.00	*46.00 F	nn

F=Franchise part. L=ListItemDisc.

<b>Sub Total (S\$)</b>	<b>10,917.30</b>
<b>- List Item Discount on L Items (S\$)</b>	<b>2,143.26</b>
<b>Total Parts (S\$)</b>	<b>8,774.04</b>

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## Estimates on Miscellaneous Items

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

## Estimates on Labour

No	Particulars	Lab.Type	Amount
<b>Labour Items</b>			
1	PANEL BEATING	New	850.00
2	SPRAYPAINT	New	1,300.00
3	WIRING	New	50.00
4	TUFF KOTE	New	50.00
5	REMOVE/REFIX CUSHION & UPHOLSTERY REAR	New	120.00
6	REMOVE/REFIX REAR WINDSCREEN GLASS	New	120.00
7	TRANSFER DOOR PARTS	New	160.00
<b>Gross Labour Cost (S\$)</b>			<b>2,650.00</b>

ComfortDelGro Engineering Pte Ltd/SHA927B/30/09/2019 13:00. Not valid without Reference section.  
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	30 Sep 2019 12:45 <a href="#">Sendback Est</a>	30 Sep 2019 13:00 <b>S\$11,435.04</b>	01 Oct 2019 18:50 <a href="#">Edit Adj Rpt</a>	<b>S\$5,750.00</b> <a href="#">Edit Estimates</a>	<b>S\$5,750.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>
Supp #1	03 Oct 2019 17:16	03 Oct 2019 17:18 <b>S\$1,110.40</b>	03 Oct 2019 17:18			(Combined)	<b>Combined with Main</b> <a href="#">Uncombine Suppl.</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

Insured:	<b>PAN PACIFIC VAN &amp; TRUCK LEASING PTE LTD</b> , Co. Reg. No.: 201511635R		
Main Claimant:	<b>CCPL</b> , Co. Reg. No.: 199502839G		
Vehicle Reg. No.:	<b>SHA927B</b>	Date of Loss:	28/09/2019 14:00 - :59 [59 Months and 19 Days From LTA Reg Date (Man Yr)]
Claim Type:	<b>TP / M1907683</b>	Policy/Cover Note No.:	MJ001454 (Comprehensive) Coverage: 15/10/2018 - 14/10/2019
Vehicle Reg. No. (Insured):	<b>YP2172T</b>	Policy No. (Claimant):	
		Excess:	S\$2,000.00
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>Ngo Sau Wei Shawn</b> ]		
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>KALVIN ANG WEI KUN</b> ] ... [Final Rpt due 10/10/2019]		

### ASSOCIATED MAIL RECEIVED

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There are no mail for this case.

### ALL ASSOCIATED TASKS

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



## Claim Documents

SHA927B (M1907683)  
[YP2172T]

TP  
CCPL

Sep 28 2019 2:00PM

[PAN PACIFIC VAN & TRUCK LEASING PTE LTD]

ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter

View View in Browser








































### Assessment Reports

No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	30/09/19 13:00	<b>Repairer Estimates</b>	Load HTM	
2	03/10/19 17:18	<b>Repairer Estimates Suppl. #1</b>	Load HTM	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail	Print
1	01/10/19 17:52	<b>Accident Statement</b> From:SC - Reg. No: YP2172T, Claimant: PAN PACIFIC VAN & TRUCK LEASING PTE LTD	Load HTM	

### Photos/Images

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	02/10/19 08:32	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
2	02/10/19 08:32	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
3	02/10/19 08:32	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
4	02/10/19 08:32	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
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6	02/10/19 08:32	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
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Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
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Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Braddell)	Thumbnail	Print
1	07/10/19 14:14	LOD, Invoice, LOR, Mileage Record, LA, LTA Search Fee	 Load PDF	
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail	Print
1	30/09/19 13:01	E-filed GIA report	 Load PDF	
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail	Print
1	14/10/19 20:00	Letter of Demand from Third Party	 Load TIF	

## Documents Checklist

### DOCUMENTS CHECKLIST

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There are no document checklists configured.

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

Show Remarks To: ☐ Repairer ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC3/TMI19017218/K1YF3S2  
Date: 18/10/2019

## REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd Policy No: MJ001454  
Claimant Vehicle No: SHA927B Insured Vehicle No: YP2172T  
Date of Loss: 28/09/2019 Nature of Claim: TP Claim No: M1907683

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SHA927B Engine No: D4FDEU497687  
Make & Model: HYUNDAI I40, 1.7 D CRDi (A) Chassis No: KMHLB41UMEU061610  
Reg. Date: 09/10/2014 (Man. Year: 2014) Odometer: 528467 km  
Colour: Yellow  
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: Fair Steering (Serviceable): Yes Footbrake (Serviceable): Yes  
Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Average

## CONDITION OF TYRES

Front Tyre Size: 205/60R16 Rear Tyre Size: 205/60R16  
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	9,884.44	5,375.00	4,509.44	45.62
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	2,650.00	1,850.00	800.00	30.19
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>12,545.44</b>	<b>7,236.00</b>	<b>5,309.44</b>	<b>42.32</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>5,750.00</b>		
(S\$)	12,545.44	5,750.00	6,795.44	54.17
<b>+ GST 7.00/7.00% (S\$)</b>	878.18	402.50	475.68	54.17
<b>Nett Amount (S\$)</b>	<b>13,423.62</b>	<b>6,152.50</b>	<b>7,271.12</b>	<b>54.17</b>

## INSPECTION

Date of Assignment: 01/10/2019 Present Location: ComfortDelGro Engineering Pte Ltd (Loyang)  
Date Inspected: 30/09/2019 Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang)  
Estimated Period of Repair: 4.0 days 59 Loyang Drive  
Singapore 508969

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

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 18 Oct 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 SHA927B)	
<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		*BONNET	Buckled	2,265.90 FL	*2,265.90 FL
2	1		*BONNET LOCK	Serviceable	36.90 FL	*- FL
3	1		*RADIATOR GRILLE	Serviceable	251.00 FL	*- FL
4	1		*RADIATOR GRILLE H EMBLEM	Not Necessary	27.50 FL	*- FL
5	1		*FRT BUMPER ASSY	Repair	544.50 FL	*- FL
6	2		*FRT BUMPER BRACKET TOP (LH/RH)	Serviceable	44.80 FL	*- FL
7	2		*FRT BUMPER SIDE BRACKET (LH/RH)	Serviceable	49.20 FL	*- FL
8	1		*FRT DOOR LH	Repair	2,256.40 FL	*- FL
9	1		*FRT DOOR LH SIDE MIRROR	Buckled	670.00 FL	*670.00 FL
10	1		*REAR FENDER LH	Repair	2,171.40 FL	*- FL
11	1		*REAR FENDER INNER LINING LH	Serviceable	169.30 FL	*- FL
12	1		*REAR DOOR LH	Buckled	2,201.10 FL	*2,201.10 FL
13	1		*REAR WINDSCREEN MOULDING	Not Necessary	28.30 FL	*- FL
14	1		*FRT DOOR COMFORT LOGO LH	Necessary	75.00 F	*75.00 FS
15	1		*REAR DOOR COMFORTDELGRO AND APPS LOGO LH	Necessary	80.00 F	*80.00 FS
16	2		*REAR WINDSCREEN SEALANT	Not Necessary	46.00 F	*- FS

#### Supplementary #1

17	1		*HEADLAMP ASSY LH	Cut	1,388.00 FL	*1,388.00 FL
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F=Franchise part, S=SpcNett, L=ListItemDisc.

<b>Sub Total (S\$)</b>	<b>12,305.30</b>	<b>6,680.00</b>
<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	2,420.86	1,305.00
<b>Total Parts (S\$)</b>	<b>9,884.44</b>	<b>5,375.00</b>

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 (S\$)</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	850.00	560.00
2	SPRAYPAINT	New	1,300.00	1,200.00
3	WIRING	New	50.00	20.00
4	TUFF KOTE	New	50.00	20.00
5	REMOVE/REFIX CUSHION & UPHOLSTERY REAR	New	120.00	0.00
6	REMOVE/REFIX REAR WINDSCREEN GLASS	New	120.00	0.00
7	TRANSFER DOOR PARTS	New	160.00	50.00
<b>Gross Labour Cost (S\$)</b>			<b>2,650.00</b>	<b>1,850.00</b>

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