TMi (C3/TM1 190 21267/Gyf3e2

	VENTINO SHC1164T	magni 09 Jan	2019
Estimated Cost	Type M.Car / M.Cycle / Bus / Van / Lor		
OD / P WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or		
To inspect Vehicle No:	Make: Tapta PY	ius = 17%	18
at Workshop m/s Grufot layang	Colour Blue	A/G: Insured / Std / N	IIINA
	Sp Reading 69769	T/Radio, Insured / Std / N	II / NA
Insured SMM 5339T	Eng/No:		
Policy No.	C/No: STDKB3	FU7030779	780
Claims No.	Gen. Cond. G 1 Fair / Poor / Burnt		
Sum Insured: Excess:	Steering: Inor ar / Jammed / Leaked /	Burnt or	
(Client's Record)	Brake: Inder / Jammed / Leaked /	Burnt or	
Make of Veh:	Modi: Nil / S/Rim / STI ARim or		1/0/0
	Tyre Size: F: 195/6	55 R 15	6. ha
(Policy Condition)	R:	И	
Remark: The veh had commenced its N/S 0/S	BS / DUN / EXNOVA / BY FS / LIZA /	MIC / OHTSU / PIR / SUMI	L
repair at the time of inspection.	TOYO / YOKO or		
Bal, or Market Value:	Front	Rear	
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm	R/Bal 6	mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm	L/Bal 6	11)[11
Est Repairs: days Res. Yes or No	D.O.A.	D.O.L. 02-12	- 49
Lum Sum: % 3 Val.: Yes or No	Survey held at		5pm
CA / REV / REP. / 24 HRS	Des. of Damages   Frt   Rear   O/S	N/S / U/C / Rooftop or	(
Vehicle: IN / OU	7 0/5	wt	
Date: Person Contacted:	The U/C / Chassis frame / Body	Structure affected due to	collision
Date / Time Action / Instruction SH( 1164T - (C3/T0 16001722/ kg)	1.3112 204-2401/201	ŀ	
Smm 5339T-X			
4/12/19 Revert via email Preli A	duise GIA and Estima	n+e	
4/12/19 Revert via email Preli A 08/1 MMi7/ \$ 2465.	21 M. 11	1 Lane.	20 2/0
08/1 TWHTH 9 2965.	TI WILL I'm.	( Red \$1445-)	54, 361
	RECEIVED	2 JVIII	
	A		
Date/Time File Pass NO : Preli, Report	Days Of Repair:	gassimon	
) : Final Report	Resurvey No. of Trip:		290
Date/Time. File Ratum Ini		Transportation	
a 9/1/20 Typist and Fa		N3+P30)	
	:Interview: 18	Planos	
	Taching 6		1/
P/D \$2465-21	Office Supplement		
1/V > /4L7-71			011

### Yvonne Wong (LKK Auto)

From:

Yvonne Wong (LKK Auto)

Sent:

Wednesday, December 04, 2019 4:44 PM

To:

'motorclaims@tokiomarine.com.sg'

Cc:

SUR

Subject:

DIRECT SURVEY INSPECTION ON WORKSHOP -COMFORTDELGRO ENGINEERING PTE

LTD, DOA: 30/11/2019, SHC 1164T (TP VEHICLE), SMM 5339T (OI VEHICLE)

Attachments:

SHC1164T ESTIMATE.pdf; SHC1164T GIA.pdf; SHC1164T DOA 30112019.pdf

Dear Sir/Madam,

Please be informed that we had inspected the vehicle SHC 1164T at M/s: COMFORTDELGRO ENGINEERING PTE LTD, NO. 59 LOYANG DRIVE

SINGAPORE 508969 on 02/12/2019.

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

Kindly create claim in merimen for our necessary action.

Thank you.

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <a href="mailto:yvonnewong@lkkauto.com">yvonnewong@lkkauto.com</a> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Your Ref:

Date: 04 Dec 2019

Our Ref: CC3/TMI19021267/Gyf3

The Motor Claims Department
TOKIO MARINE INSURANCE SINGAPORE LTD

Dear Sir/Madam,

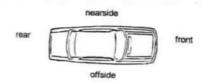
# INITIAL INSPECTION REPORT OF VEHICLE NO. SHC1164T .

Please be informed that we had conducted the inspection of the abovementioned vehicle on <u>02/12/2019</u> at the premises of M/s <u>COMFORTDELGRO ENGINEERING PTE LTD.</u> and have the following to report:-

Workshop Estimate Amount	: S\$	3,910.55	
Revised Estimate Amount	: S\$	2,454.22	
"Check" Items Amount	: <u>S</u> \$	9.	
Market Value	: <u>S</u> \$		
LTA Reimbursement Value	: <u>S</u> \$	ue.	
Nett Value	: <u>S</u> \$	-	

Description of Damage:

<u>The vehicle sustained damages</u>
at the o/s front.



Yours faithfully

XING GUO QIANG Licensed Appraiser

#### 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 witholding 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	02/12/2019 13:59
Date Of Accident	30/11/2019 19:30
Exact Location Of Accident	MBS CASINO TAXI STAND TO BAYFRONT AVE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC1164T
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES

Policy Number MCOM0015

Cover Note Number

### Driver

Name of Driver TAN AH HENG @ TAN HOE PHENG

NRIC No S2098241A Date Of Birth 14/08/1945 Occupation OUTDOOR Date Of Driving Pass 26/09/1968

Driving Experience 51 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97150533

Fax Number

Contact Number

EMail Address NOEMAIL Address

BLK 54 MINBU RD

#05-01

Postcode

308184

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - TAXI DRIVER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

Weather Conditions

CLEAR

SIDE SWIPE

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO 2

involved in the accident

NO

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

6

Number of Passengers (Including Driver)

Passenger 1

NAME:

GENDER:

: MALE

Passenger 2

NAME:

GENDER:

: FEMALE

Passenger 3

NAME:

GENDER:

: FEMALE

Passenger 4

NAME:

GENDER:

: FEMALE

Passenger 5

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]

KAMPONG JAVA NPC

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

SMM5339T

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

PANG YOON PING

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)

#### Sketch Plan Pg. 1

### 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 ladgment 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)

l 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)
  - (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
- 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.
- 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.

COMPORT TRANSPORTATION PTE

CO. REG. NO. 199303821R

Policyholder's Signature Date & Time:

(If driver is not the policyholder)

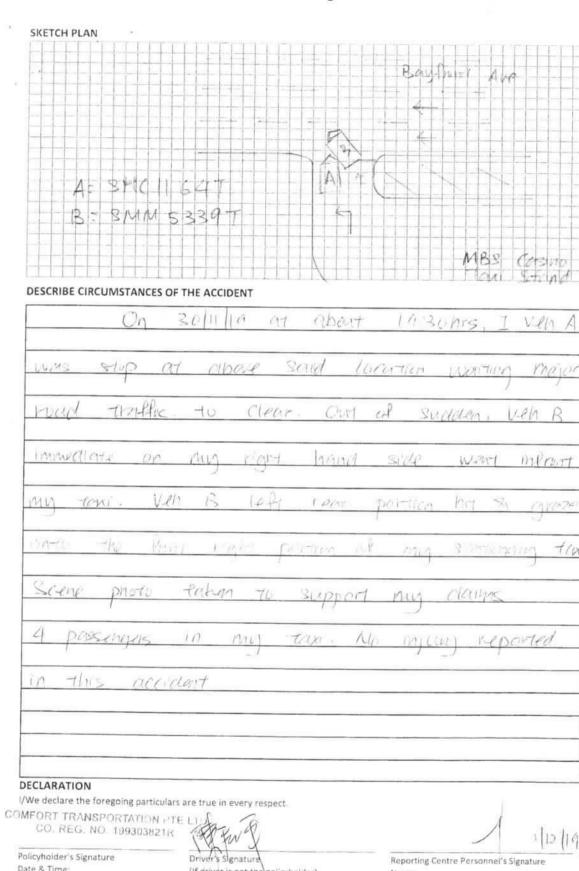
Date & Time: 1 1 2

Reporting Centre Personnel's Signature

NRIC/FIN No.

SLANDAY SELECTION OF UNIT VS

### Sketch Plan Pg. 2



(If driver is not the policyholder) Date & Time: ( 12 2019

Date & Time:

CIRCLAC Skeichringenm, V3

Reporting Centre Personnel's Signature

Name: NRIC/FIN No .:

Annex D

### NOTICE OF REPORTING

- This is to confirm that <u>Tan Ah Heng @ Tan Hoe Pheng</u>, NRIC: S2098241A, Address: No. 54 Minbu Road #05-01 Singapore 308184 HP: 97150533 had reported to the Police a non-injury traffic accident which occurred on <u>30/11/2019</u> along <u>Bayfront Avenue</u> at about <u>1930hrs</u>.
  - Complainant's vehicle:
     Vehicle No: SHC1164T, Toyota Prius, Blue
  - b) Other Party details / vehicle: Pang Yoon Ping S1691375H
     Apt Blk 486 Choa Chu Kang Avenue 5 #10-148 S(680486) SMM5339T, Toyota CHR, Silver
- 2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSSgt Nursyaima Aziz

Date: 30/11/201 Time: 2319hrs

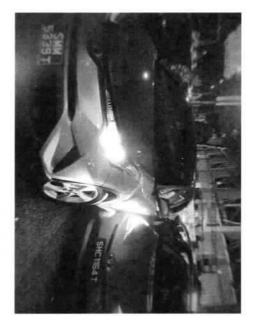
KAMPONG JAYA MERSERGURIHOOD POUCE CENTRE ET KERPENE JAYA HOAD SINCAPOHE 228882

Police Post/Unit Kampong Java NPC

Page 6 of 19











# **Enquire Vehicle Transfer Fee**

# **Vehicle Details**

Vehicle No. SHC1164T Make / Model TOYOTA / PRIUS 5DR HATCHBACK (AUTO) Vehicle Type: H10 - Public Transport Taxi (Motor Car) Vehicle Attachment 1: Air-Con (Taxi) Vehicle Scheme: Taxi (Company) Chassis No.: JTDKB3FU703077980 Propellant: Petrol-Electric Engine No.: 2ZR2B86204 Motor No.: 1NM2B86204 Engine Capacity: 1798 cc Power Rating: 53.0 kW Maximum Power Output:

90.0 kW (120 bhp)

# OMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

Team:

# ComfortDelGro Engineering Pte Ltd

205 Braduell Road Singapore 579701 Mainline + 65 6383 6280 Facatmile + 65 6280 9755

Mainthine + 65 d183 d289 Falsimile - 65 8280 9755
Workshops
58 Loyang Drive Singapore 508989
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 608285
320 Ubi Road 3 Singapore 408648
Date/Time: 02.12.2019 15:53

24 Senoko Loop Singapore 753156 7 Sungei Kadut Way Singapore 728791 501 Yishun Industrial Park A Singapore 758732

Team: ARC Repair TP(CLSO)1  JOB CARD  Sales Order: JC NO: 305:  REGN NO: SHC1164T  MAKE: FUEL  TOYOTA E	
COMPORT TRANSPORTATION PTE LTD OMER NO.' 7010045 ESS. 383 SIN MING DRIVE Singapore SINGAPORE 575717 (F) UNIT CARD NO.  ACCIDENT DATE: 100  ACCIDENT TRANSPORTATION PTE LTD  MAKE: TOYOTA  MODEL TOYOTA  MODEL PRIUS HYBRID(G4)02.12.2019  YR OF MANU. 09.01.2019  COMPLETION DATE: 30.000  LABOR CODE  DESCRIPTION  PRIUS HYBRID(G4)02.12.2019  ACCIDENT DATE: 30.000  COMPLETION DATE: 30.000  ACCIDENT DATE: 30.000  DESCRIPTION  PRIUS HYBRID(G4)02.12.2019  TARGET DATE  COMPLETION DATE: 30.000  ACCIDENT DATE: 30.000  DESCRIPTION  PRIUS HYBRID(G4)02.12.2019  TARGET DATE  COMPLETION DATE: 30.000  DESCRIPTION  PRIUS HYBRID(G4)02.12.2019  TARGET DATE  TOYOTA  DATE: MODEL DATE	
Accident Date: 30.11.2019 NATURE: 3P 30.11.2019 S/NO LABOR CODE  DATE: MODEL PRIUS HYBRID(G4)02.12.2019 VR OF MANU. 09.01.2019 CHASSIS CODE JTDKB3FU703077980  COMPLETION DATE: 3P 30.11.2019 DESCRIPTION  DESCRIPTION  DESCRIPTION  PRIUS HYBRID(G4)02.12.2019 VR OF MANU. 09.01.2019 COMPLETION DATE: 3P 30.11.2019 DESCRIPTION  PRIUS HYBRID(G4)02.12.2019 VR OF MANU. 09.01.2019 COMPLETION DATE: 3P 30.11.2019 DESCRIPTION	
UNIT CARD NO.  JOB DESCRIPTION  ACCIDENT DATE: 30.11.2019 NATURE: 3P 30.11.2019  EACONDE DESCRIPTION  DESCRIPTION  FROM IN THE COMPLETION DATE: 30.10.2019  DESCRIPTION DATE: 30.10.2019  DESCRIPTION DATE: 30.10.2019  DESCRIPTION DATE: 30.10.2019  DESCRIPTION DATE: 30.10.2019  FROM IN THE COMPLETION DATE: 30.10.2019  FROM IN TH	
Accident Date: 30.11.2019 NATURE: 3P 30.11.2019 S/NO LABOR CODE DESCRIPTION	
Accident Date: 30.11.2019 NATURE: 3P 30.11.2019 S/NO LABOR CODE DESCRIPTION	ATE/TIME:
NATURE: 3P 30.11.2019  S/NO LABOR CODE DESCRIPTION  FRONT	
SANO LABOR CODE DESCRIPTION	
	HIGHT SIDE 7
PEAR PEAR	=1"
ED & PASSED OUT BY:	
SERVICE ADVISOR CUSTOMER'S SIGNATURE	
gement Slip Exit Pass	
SHC1164T LKE Vehicle No.: SHC1164T	
ervice Advisor Signature/Date Name of Service Advisor Date	
ned to Service Reception upon collection  To be kept by Security Guard	

JOB CARD

### REPAIR ESTIMATE

VEHICLE NO: SHC 1164T

MAKE

MODEL: TOYOTA PRIUS

Lee

Tokio Maria

2/12/2019 15:30

MODEL	: TOYOTA PRIUS	·		
	PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
	FRONT BUMPER COVER			\$ 499.90
	FRONT BUMPER CLIPS			\$ 22.00
	FRONT BUMPER SIDE RETAINER, RH / W			\$ 77.00
	FENDER SUB-ASSY, FRONT RH / Buc			\$ 945.3
	FRONT FENDER SHIELD,RH / C			\$ 196.6
	FRONT FENDER SHIELD CLIP / H			\$ 38.0
	FRONT FENDER HYBRID EMBLEM, RH / MCC			\$ 53.5
	FRONT WHEEL RIM (RH) X NN			\$ 1,555.1
	/ / /			1,000.1
	SUB TOTAL			\$ 3,387.4
	LESS 25%	1		\$ 846.8
	DISCOUNTED TOTAL	1		\$ 2,540.5
	DISCOUNTED TOTAL			\$ 2,540.5
	LABOUR CHARGE			
				\$ 640 700.0
	Panel Beating			
	Spray Painting Charge			\$ (60 500.0
	Tuff Kote			\$ \(\psi_0\) 50.0
	FRT Wheel Alignment		NN	\$ X 120.0
	TOTAL LABOUR			4 070 0
	TOTAL LABOUR			\$ 1,370.0
	LIST ESTIMATE TOTAL			¢ 2040.5
	ESTIMATE TOTAL			\$ 3,910.5
	pat by put.  before paint photos.  Geno Qi op		2454	22
	Ways.		2454	. 22
	1 1-		945	
	put by mt.		Consultants hence	
		<ul> <li>the Repa</li> <li>To resurv</li> </ul>	iter of the followin before/after spray p	g: einting
	hate paint shites.	• To display	damaged part(s) duri	ng resurvey
	Major Providence		es are subject to confi survey is on a "With	
	Caro Ci ap		modification(s) is allow	
	1 1	Supplement	entary item(s) must be	resurveyed and
	02/12/19	is subject	to final approval from	insurance Company
	0 9/10/11		ged by Repairer	
	,	Signature: Date:		
		Date:		

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

# COMFORTDELGRO ENGINEERING

Our Job Ref No 305358427 ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156 Date 03.01.20 **FINALIZATION FORM** LKK Fax: QUO QIANG Attn : Mr\_ Vehicle Reg No. SHC1164T CTPL 30.11.19 The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-1. The repair job shall bill to: **TOKIO MARINE** SMM5339T 2. The finalized amount shall be: Spare Parts after List discount (a) \$1,374.21 (b) Labour Charges \$1,091.00 Total for Part-By-Part Repair Cost \$2,465.21 Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: 20% Final Lumpsum Repair cost 3. Estimated normal period for repairs: 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: Signature: Name : LIM KWOK ENG Name Tel : 62148316 Date : 65468156 Fax For Official Use Only Document Confirm By Item Amount Attached Remarks (Signature) Yes or No 1. Rental Rate P/Day YES Loss of Income Paid NO 3. Survey Fees LTA Search Fee \$7.49 5. Medical Fees (on behalf of driver, if applicable) 6 Overrun Remarks:

REPAIR ESTIMATE

VEHICLE NO: SHC 1164T

MAKE

MODEL : TOYOTA PRIUS

Lee

Tokio Maria

2/12/2019 15:30

QTY	UNIT PRICE	## AMOUNT  ## \$499.8  ## \$22.0  ## \$77.0  ## \$945.3  ## \$196.6  ## \$387.4  ## \$3,387.4  ## \$846.8
%		\$ 22.0 \$ 77.0 \$ 945.3 \$ 196.6 \$ 38.0 \$ 53.5 \$ 1,555.1
%		\$ 77.0 \$ 945.3 \$ 196.6 \$ 38.0 \$ 53.5 \$ 1,555.1 \$ 3,387.4
%		\$ 945.3 \$ 196.6 \$ 38.0 \$ 53.5 \$ 1,555.1 \$ 3,387.4
%		\$ 196.6 \$ 38.0 \$ 53.5 \$ 1,555.1 \$ 3,387.4
%		\$ 38.0 \$ 53.5 \$ 1,555.1 \$ 3,387.4
%	p.	\$ 53.5 \$ 1,555.1 \$ 3,387.4
%		\$ 1,555.1 \$ 3,387.4
%		\$ 1,555.1 \$ 3,387.4
%		
		\$ 846.8
L		
		\$ 2,540.5
a		\$640 700.0 \$600 500.0
		\$ 40 50.0
	1112	
3		\$ X 120.0
2		\$ 1,370.0
		\$ 3,910.5
	ľ	0,010.0
	2	NN

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.

Date: 03.01.2020

REPAIR ESTIMATE

Time: 18:33:13

Page: 1

COMPANY: THIRD PARTY'S CLAIMS (CAS)

**CUSTOMER: 7010045** 

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO MILEAGE

: 305358427 : SHC1164T : 0000000000

MAKE

: TOYOTA

MODEL

: PRIUS HYBRID(G4)

DATE OF REGN

DATE/TIME IN

: 09.01.2019

: 02.12.2019 09:40

ACCIDENT DATE : . 30.11.2019

### JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

### PART REQUISITION

0001 04-01-0302-2292-A PRIG4 COVER FRONT BUMPER 1 L 499.90 25.00 374.92

0002 04-01-0302-2267-G PRIVC BUMPER PIECE

10 L 22.00 25.00 16.50

0003 04-01-0302-2971-G PRIG4 SUPPORT FRONT BUMPE 1 L 77.00 25.00 57.75

0004 04-01-0302-0573-A PRIG4 FENDER SUB-ASSY FRO 1 L 945.30 25.00 708.97

0005 04-01-0302-2934-G PRIG4 LINER FRONT FENDER 1 L 196.60 25.00 147.45

0006 04-01-0302-2481-G PRIG4 FRT FENDER SHIELD C 10 L 38.00 25.00 28.50

0007 04-01-0302-2297-G PRIG4 EMBLEM SIDE PANEL ( 1 L 53.50 25.00 40.12

SUB-TOTAL : 1,374.21

### JOB NATURE

0000 L	PANEL BEATING	640.00

0001 23-502

SPRAYPAINT ON AFFECTED AREA

400.00

0002 20-00

TUFF COAT ON AFFECTED PARTS.

40.00

0003 L

MERIMEN CHARGE

11.00

SURVEYOR NAME & SIGNATURE

REPAIR ESTIMATE

Date: 03.01.2020 Time: 18:33:13

Page: 2

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO : 305358427 : SHC1164T

MILEAGE MAKE

: 0000000000

MODEL

: TOYOTA : PRIUS HYBRIL

DATE OF REGN

: 09.01.2019

DATE/TIME IN

: 02.12.2019 09:4

ACCIDENT DATE : 30.11.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

SUB-TOTAL : 1,091.00

TOTAL : 2,465.21

AUTHORISED: YES/NO

MVA NAME & SIGNATURE

DATE:

DATE:

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

LAIM SUB	FOLDER TRACE	KING					1000
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	02 Dec 2019 Sendback Est	02 Dec 2019 18:40 <b>\$\$4,090.92</b>	03 Dec 2019 16:33 Edit Adj Rpt	S\$2,465.22 Edit Estimates	S\$2,465.22 View Rpt		Pending for Survey Report Cancel Case
	Main	Ref	erence	Claim Det	ails	Documents	Show All
CLAIM SU	JBFOLDER DET	AILS					
Insured:	BINTANG T	RANSPORT PTE	LTD, Co. Reg. No.	: 201914450C			
Main Claimant:	CTPL						
Vehicle Re	9. SHC1164	т		Date of		9 19:00 - :59 s and <b>21</b> Days From l	TA Reg Date (Man Yr)]
Claim Type	: <b>TP</b> / M190	TP / M1909704 Policy/Cover MK000860 (Comprehensive) Note No.: Coverage: 15/10/2019 - 14/10/2020					2020
Vehicle Reg No. (Insured):	SMM5339T Policy No. (Claimant):						
				Excess:	S\$1,800.00	0	
Repairer:	ComfortDel	<b>Gro Engineering</b>	Pte Ltd (Loyang)	59 Loyang Drive, !	08969 Loyang - 1	Tel: 6214 8300	
Handling Insurer:	Tokio Marin	ne Insurance Sin	gapore Ltd (HQ) -	Tel: 6221 6111	[Handled by <b>Jeff</b>	rey Tay - 65926413]	
Adjuster:	LKK Auto C	onsultants Pte L	td (HQ) - Tel: 6256	5-3561 [Handled	by XING GUO Q	IANG] [Final Rp	t due 12/12/2019]
Adj Asg. Remarks:	OI HAS NOT	RPT THE ACCDT					
ASSOCIA	TED MAIL REC	EIVED				View A	II Compose Case Mai
There are	no mail for this ca	ase.					<del></del>
ALL ASS	OCIATED TASK	s⊟			View All	Search Tasks Crea	te New Task   Complet
Due Dat		Type Task G	roup Subject	Handler A	ssigned By	Completed On	Created On Done

### **Claim Documents**

SHC1164T (M1909704) [SMM5339T] TP CTPL Nov 30 2019 7:00PM [BINTANG TRANSPORT PTE LTD] ComfortDelGro Engineering Pte Ltd

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### **Documents Checklist**

DOCUMENTS CHECKLIST	Reset Save Prin	nt
There are no document checklists configured.		
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)		_
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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/TMI19021267/GYF3E2

14/01/2020 Date:

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd

Policy No:

Claimant Vehicle No:

**SHC1164T** 

Insured Vehicle No:

MK000860 SMM5339T

Date of Loss:

30/11/2019

Nature of Claim:

TP

Claim No: M1909704

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

**SHC1164T** 

Make & Model:

TOYOTA PRIUS HYBRID, 1.8 (A)

Engine No:

2ZR2B86204

Reg. Date:

09/01/2019 (Man. Year: 2018)

Chassis No: Odometer:

JTDKB3FU703077980 169769 km

Colour:

Blue

1798 cc

Engine Capacity: Market Value/New Car

N/A

Price: Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Good

Engine Modification:

Footbrake (Serviceable):

Pre-accident Condition:

Yes Good

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195/65 R15

Yes

Rear Tyre Size:

195/65 R15

Front Left Side:

Goodyear 6 mm

Rear Left Side:

Goodyear 6 mm

Front Right Side:

Goodyear 6 mm

Rear Right Side:

Goodyear 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,709.92	1,374.22	1,335.70	49.29
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	1,370.00	1,080.00	290.00	21.17
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,090.92	2,465.22	1,625.70	39.74
+ GST 7.00/7.00% (S\$)	286.36	172.57	113.79	39.74
Nett Amount (S\$)	4,377.28	2,637.79	1,739.49	39.74

INSPECTION

Date of Assignment:

03/12/2019 Present Location:

ComfortDelGro Engineering Pte Ltd

(Loyang)

Date Inspected: 02/12/2019 Inspected At: ComfortDelGro Engineering Pte Ltd

(Loyang)

59 Loyang Drive Singapore 508969

Estimated Period of Repair: 4.0 days

Adjuster: XING GUO QIANG 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.

Different 1 cents -Finalise confirm amount: \$2,465.21

# REPAIR DETAILS

Referen	ce					
Part Source	: MRM-SG	Version: 1.0 (Last Synchronised: 14 Jan 2020)				
Parts:	144	TOYOTA PRIUS HYBRID 1.8 (A) (Catalogue:Merimen Singapore 1.0)				
Labour:	Repairer's	(Price-denominated Standard List)				
Print Code:	(Unsubmitted	, no print-code for SHC1164T)				
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	Reference	Amount
1	1		*FRT BUMPER COVER	Deformed	499.90 FL		*499.90 FL
2	10		*FRT BUMPER CLIPS	Necessary	22.00 FL	-	*22.00 FL
3	1		*FRT BUMPER SIDE RETAINER RH	Deformed	77.00 FL	-0	*77.00 FL
4	1		*FRT FENDER RH	Buckled	945.30 FL	-	*945.30 FL
5	1		*FRT FENDER SHIELD RH	Deformed	196.60 FL		*196.60 FL
6	10		*FRT FENDER SHIELD CLIP RH	Necessary	38.00 FL	-	*38.00 FL
7	1		*FRT FENDER HYBRID EMBLEM RH	Necessary	53.50 FL	-	*53.50 FL
8	1		*FRT WHEEL RIM RH	Not Necessary	1,555.10 FL	-	*- FL
F=Franchise part. L=ListItemDisc.  - List Item Discount on L Items 2		Sub Total (S\$) 20.00/25.00% (S\$)		<b>1,832.30</b> 458.08			
				Total Parts (S\$)	2,709.92		1,374.22

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

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

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	PANEL BEATING	New	700.00	640.00
2	SPRAY PAINTING CHARGE	New	500.00	400.00
3	TUFF KOTE	New	50.00	40.00
4	FRT WHEEL ALIGNMENT	New	120.00	0.00
		Gross Labour Cost (S\$)	1,370.00	1,080.00
		90 Cl		

Report was unsubmitted during this print-out.

< END OF ESTIMATES >