

Veron Chen (LKKAUTO)

From: MTCL@income.com.sg
Sent: Wednesday, 11 December 2019 11:07 AM
To: Veron Chen (LKKAUTO)
Subject: RE: REQUEST FOR CLAIM NUMBER

Dear Sir/Mdm,

We have registered the claim.

Please refer below

Please allow the claim officer 2-3 working days to respond to your case.

We appreciate if you do not respond to this email. Thank you

Best regards

Diana Tay
Senior Admin Assistant
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

in with you

From: Veron Chen (LKKAUTO) [mailto:veronchen@lkkauto.com]
Sent: Wednesday, 11 December 2019 9:20 AM
To: MTCL@income.com.sg
Subject: REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Kindly provides us claim number.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle
1	MT/1074122-002	COMFORT TRANSPORTATION PTE LTD	SHA 4779K	FBQ 2598F
2	MT/1074312-002	COMFORT TRANSPORTATION PTE LTD	SHD 6588R	SCY 9018Z

D.O.A	Time of Accident	Estimate	Tentative repair cost
1/12/2019	18:45	\$4,037.92	\$1,400.00
2/12/2019	08:20	\$5,364.34	\$1,100.00

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

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	02/12/2019 13:39
Date Of Accident	02/12/2019 08:20
Exact Location Of Accident	UNITY ST X MOHAMED SULTAN RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6588R
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSIFTY@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-18088936MFSH
Cover Note Number	

Driver

Name of Driver	ONG BOON HOE
NRIC No	S7134035Z
Date Of Birth	25/09/1971
Occupation	OUTDOOR
Date Of Driving Pass	16/07/1993
Driving Experience	26 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97474752
Fax Number	
Contact Number	
EMail Address	AISONG2@YAHOO.COM.SG

Address	2 07-35 LORONG 7 TOA PAYOH
Postcode	310002
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	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

see attach.

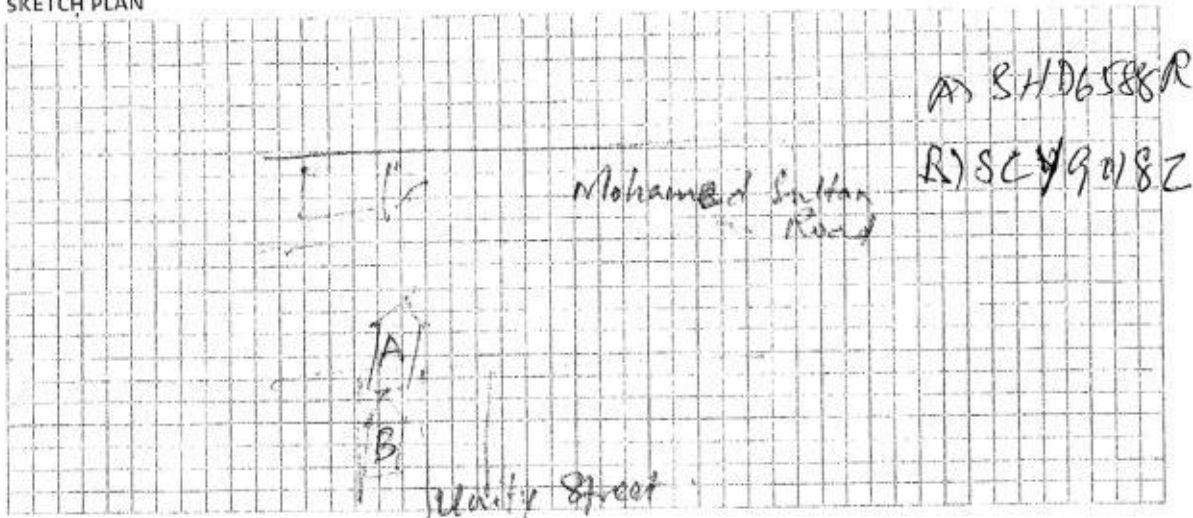
Attachment(s)

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	SCY9018Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CAROLINE JONES
NRIC/Passport Number	
Contact Number	81153311
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT RHT
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 2/12/19 at about 0830hrs when I Veh A slowed down and stopped to give allow a vehicle in the main road to pass, Veh B collided onto the rear of my stationary vehicle.

DECLARATION

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

OMFORT TRANSPORTATION PTE LTD

CO REG NO 199001821R

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.:

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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.

COMFORT TRANSPORTATION PTE LTD
CO REG. NO. 199303621R

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.:

GIA/IAIG Sketch Plan Form 93



Enquire Vehicle Insurance Details

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SCY9018Z	02 Dec 2019 / 08:20:00	Successful	N12	NTUC INCOME INS CO-OP LTD

[Previous](#)[OK](#)

SUN 688R

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	821R
Vehicle Details	
Vehicle No.:	SHD6588R
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Dec 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7L CRDI AT ABS AIRBAG 4DR
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	D4DFU564952
Chassis No.:	KMHLB41UMFU067905
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$20,616.00
Original Registration Date:	09 Apr 2015
First Registration Date:	09 Apr 2015
Transfer Count:	0
Actual ARF Paid:	\$13,363.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	08 Apr 2023
PARF Rebate Amount:	\$10,022.00
Intended COE Rebate Details	
COE Expiry Date:	08 Apr 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,177.00
COE Rebate Amount:	\$20,994.00
Total Rebate Amount:	\$31,016.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 03 Dec 2019

OK

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No.
SHD6588R

Make / Model
HYUNDAI / I40 1.7L CRDI AT ABS AIRBAG 4DR

Vehicle Type :
H10 - Public Transport Taxi (Motor Car)

Vehicle Attachment 1 :
Air-Con (Taxi)

Vehicle Scheme :
Taxi (Company)

Chassis No. :
KMHLB41UMFU067905

Propellant :
Diesel

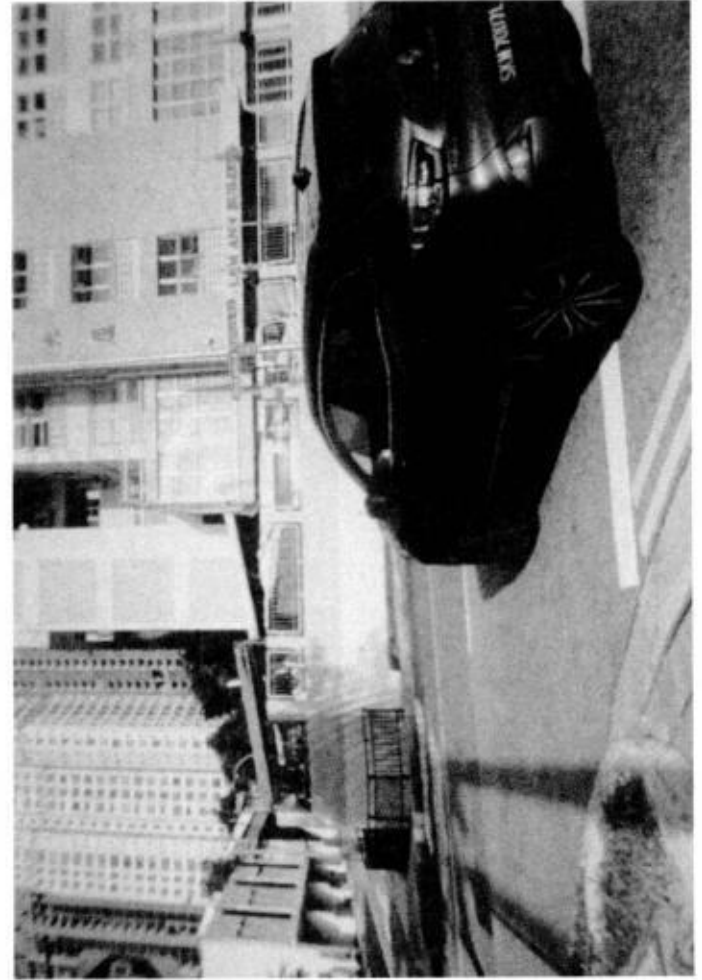
Engine No. :
D4FDFU564952

Motor No. :
-

Engine Capacity :
1685 cc

Power Rating :
-

Maximum Power Output :
100.0 kW (134 bhp)



Date/Time: 02.12.2019 15:45 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305358425

TOMER

AS COMFORT TRANSPORTATION PTE LTD

TOMER NO. 7010045

RESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

OUNT CARD NO.

NTUC

REGN NO.:

SHD6588R

MILEAGE

MAKE:

HYUNDAI

FUEL

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

MODEL

I-40

DATE/TIME IN

02.12.2019 09:55

YR OF MANU.

09.04.2015

TARGET DATE

CHASSIS CODE

KMHLB41UMFU067905

COMPLETION DATE/TIME:

JOB DESCRIPTION

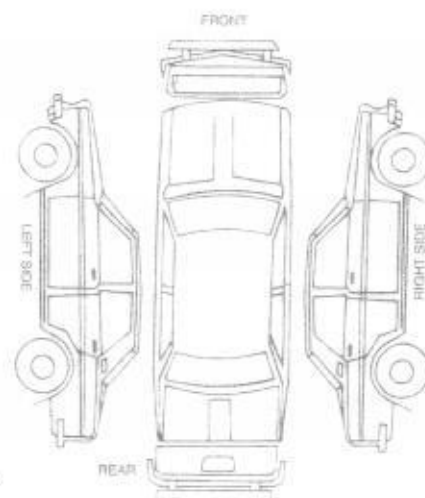
Accident Date: 02.12.2019

NATURE: 3P 02.12.2019

S/NO

LABOR CODE

DESCRIPTION



OKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

Guo Qiang

Vehicle No.:

SHD6588R

LKE

SHD6588R

Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 6588R

DATE 2/12/2019 15:27

MAKE :

MODEL : HYUNDAI i40

LKE

NTUC

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid X			\$ 2,174.90
	Boot Lid Lock Upper X			\$ 102.60
	Boot Lid Lock Lower X			\$ 31.70
	Boot Lid 'H' Emblem X			\$ 28.70
	Boot Lid CRDI Plate X			\$ 27.90
	Bootlid Moulding X			\$ 85.00
	Bootlid i40 Emblem X			\$ 27.90
	Bootlid Lower Garnish X			\$ 227.90
	Rear Bumper / Re			\$ 553.00
	Rear Bumper Reinforcement / X			\$ 428.40
	Rear Bumper Reinforcement Bracket (LH/RH) / X		\$ 80.30	\$ 160.60
	Rear Bumper Clip 10 pcs / MC			\$ 22.00
	Rear Bumper Bracket / Re X NN		\$ 35.60	\$ 71.20
	Rear Bumper Sponge / X			\$ 103.50
	Rear Bumper Under Cover / Cat			\$ 228.00
	SUB TOTAL			\$ 4,273.30
	LESS 20%			\$ 854.66
	DISCOUNTED TOTAL			\$ 3,418.64
	Boot Lid Comfort Logo & Tel No. Sticker / MC		10%	\$ 30.00
	Rear Bumper Reverse Sensor / DM			\$ 135.70
				\$ 165.70
	Labour Charge			
	Panel Beating			\$ 850.00
	Spray Painting Charge			\$ 750.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Remove/Refix Reverse Sensor			\$ 80.00
	TOTAL LABOUR			\$ 1,780.00
	ESTIMATE TOTAL			\$ 5,364.34
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.				

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

280

200

X GMA

40

2 Days

upsum repair

After repair photos

GMA Rep

22/12/19

REPAIR ESTIMATE*

DATE 2/12/2019 15:27

MODEL : HYUNDAI i40

like

NTU e

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.

Remarks:

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Tuesday, 10 December 2019 5:16 PM
To: Lim Kwok Eng; Guo Qiang (LKKAUTO); SUR
Cc: Roger How Keen Meng; Tan Pei Wei
Subject: RE: SHD6588R finalize
Attachments: IMG.pdf

Dear Mr Lim,

WITHOUT PREJUDICE

Confirmed Lump Sum \$1100 @ 2 working days.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

From: Lim Kwok Eng <limke@cdge.com.sg>
Sent: Tuesday, 10 December 2019 12:13 PM
To: Guo Qiang (LKKAUTO) <GuoQiang@lkkauto.com>
Cc: Roger How Keen Meng <rogerhow@cdge.com.sg>; Tan Pei Wei <tanpw@cdge.com.sg>
Subject: SHD6588R finalize

Dear Guo Qiang,

Pls refer attachments

Best Regards
Lim Kwok Eng
Taxi Crash Repairs / ComfortDelgro Engineering Pte Ltd
Tel. 6214-8355 / 6214-8156



Think Before Printing



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC19021269/Gvf3s2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 20-12-2019

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SCY 9018Z	Veh. Inspected	SHD 6588R
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1074312-002	Excess (\$)	0.00
Assign From		Assign Date	02/12/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMFU067905	Colour	BLUE
Odometer	858441	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	6 mm
L/H Front Tyre	205/60 R16	HANKOOK	6 mm
R/H Rear Tyre	205/60 R16	HANKOOK	6 mm
L/H Rear Tyre	205/60 R16	HANKOOK	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	02/12/2019	Inspection Date	02/12/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 6588R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID	NOT NECESSARY	2,174.90	-
1	BOOT LID LOCK UPPER	NOT NECESSARY	102.60	-
1	BOOT LID LOCK LOWER	NOT NECESSARY	31.70	-
1	BOOT LID 'H' EMBLEM	NOT NECESSARY	28.70	-
1	BOOT LID CRDI PLATE	NOT NECESSARY	27.90	-
1	BOOTLID MOULDING	NOT NECESSARY	85.00	-
1	BOOTLID I40 EMBLEM	NOT NECESSARY	27.90	-
1	BOOTLID LOWER GARNISH	NOT NECESSARY	227.90	-
1	REAR BUMPER	DEFORMED	553.00	553.00
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	428.40	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @ \$80.30	NOT NECESSARY	160.60	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @ \$35.60	DEFORMED	71.20	71.20
1	REAR BUMPER SPONGE	NOT NECESSARY	103.50	-
1	REAR BUMPER UNDER COVER	CUT	228.00	228.00
	LESS 20% DISCOUNT		-854.66	-174.84
			3,418.64	699.36
<u>NETT ITEMS</u>				
1	BOOT LID COMFORT LOGO & TEL NO. STICKER (N)	NECESSARY	30.00	30.00
1	REAR BUMPER REVERSE SENSOR (N)	DAMAGED	135.70	135.70
	LESS 10% DISCOUNT		-	-16.57
			165.70	149.13
<u>LABOUR</u>				
	PANEL BEATING.		850.00	280.00
	SPRAY PAINTING CHARGE.		750.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE / REFIX REVERSE SENSOR.		80.00	40.00
			1,780.00	520.00

Report Ref No. NS/INC19021269/Gvf3s2



Page No.:2 of 2

GRAND TOTAL		5,364.34	1,368.49
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,100.00

Report Ref No. NS/INC19021269/Gvf3s2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE,
MinstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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