

2246258

ASS. REC. BY:

REF: 08/TMI20001565/Nyd307

Special Instruction:

Driver: Naz
Meinhen

ASSIGNMENT (Office)

From (Person): Telma Gomez of TMI

Date/Time: 29/01/2020 @ 11:19am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SH 2614Z

Insured: SLU 9677K

at Workshop m/s Comfort delgro

Tel: 6214 8300

of 59 Loyeng Drive

Policy No: MK000577

Claim No: M2000701

Sum Insured: Excess:

Make of Veh: D.O.A. 27/01/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 11:25am @ 29/1/2020

Person Contacted: Jumeni

Vehicle: IN/OUT

Date/Time	Action/Instruction	Initials
	SH 2614Z - NSI/INC/7010699/11/19/3e2	DOA - 31/05/2017
	SLU 9677K - X	

Surveyor: N A Z

REF:

T M 1

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 C/D: TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Reward) _____
 Make of Vehl: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Est. or Market Value: _____
 IUAC Accident Report: _____ Consistent? : Yes or No
 Gt / PR / Scm: _____ Consistent? : Yes or No
 Est. Repairs: 2 days Res.: Yes or No
 Loss Sum: _____ % J Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SH 2614 Z Yr Regn: 1 MAR 2019
 Type: M.Car / M.Cycle / BUS / Van / Lorry / (Taxi) Prime Mover /
 Truck / Tractor or _____

Make: HYUNDAI IONIQ cc: 1,580
 Colour: BLUE AC: (Insured) Std / Nil / NA
 Sp. Reading: 104,916 T/Radip: (Insured) Std / Nil / NA

Engl No: _____
 C/Nr: KMH C851CV KU 139871
 Gen. Cond: Good (Falt) Poor / Burnt

Steering: (Inorder) Jammed / Leaked / Burnt or
 Brake: (Inorder) Jammed / Leaked / Burnt or
 Modl: III / SIRIm / (STD) WRIm or

Tyre Size: F: 195 / 65 R15
 R: 11

BS / DUN / EXROVA / GY / FS / LIZA / MIC / OITSU / PIR / SUMI /
 TOYO / YOKO or DAVANTI

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm
D.O.A. <u>27/1/2020</u>	U.O.A. <u>29/1/2020</u>

Survey held at EDGE COVANGT
 Dis. of Damages: Frt / Rear / O/S / N/S / U/C / Roof/Top or
O/S REAR

The U/C / Chassis frame / Body Structure effected due to collision

Date / Time	Action / Instruction
10/2/2020	FINALIZED PART BY PART REPAIR \$1,218.52 / 2 REPAIR DAYS (Red. 1050.70, 46%)
	RECEIVED 11 FEB 2020

Date/Time, File Pass 10? : Prelim Report
 1) : Final Report
 Date/Time, File Return 10? _____
 2) _____
 Report Format: TP
 Lump Sum: (8) (\$ 1,218.52)
 Days Of Repair: 2
 Resurvey No. of Trip: 1 Survey Fee: 290
 Add Fee: Site Insp (\$ _____) S - WS (\$ _____)
 Interview (\$ _____) Photos
 Tech. Invt (\$ _____) _____
 Weekend (\$ _____) _____
 TOTAL: 261

T M 1 P 1 P

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	28 Jan 2020 17:47 Sendback Est	28 Jan 2020 17:55 S\$2,269.22	29 Jan 2020 11:19 Assign				New Assignment Cancel Case

[Main](#)
[Reference](#)
[Claim Details](#)
[Documents](#)
[Show All](#)

CLAIM SUBFOLDER DETAILS

Insured:	LION CITY RENTALS PTE LTD , Co. Reg. No.: 201504621K		
Main Claimant:	CTPL		
Vehicle Reg. No.:	SH2614Z	Date of Loss:	27/01/2020 12:00 - :59 [10 Months and 26 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / M2000701	Policy/Cover Note No.:	MK000577 (Third Party Only) Coverage: 25/06/2019 - 24/02/2020
Vehicle Reg. No. (Insured):	SLU9677K	Policy No. (Claimant):	
		Excess:	S\$1,500.00
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 Telma Gomez - 65926402]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 07/02/2020]		

ASSOCIATED MAIL RECEIVED

[View All](#)
[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[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.									

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	28/01/2020 14:32
Date Of Accident	27/01/2020 12:30
Exact Location Of Accident	PAYA LEBAR RD X NEW UPP CHANGI RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH2614Z
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXXX21R
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	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	JUMINTAN SILAEN
NRIC No	SXXXX166C
Date Of Birth	07/07/1967
Occupation	OUTDOOR
Date Of Driving Pass	11/05/2010
Driving Experience	9 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93860364
Fax Number	
Contact Number	
Email Address	BRENDA_THO@SINGNET.COM.SG

Address	BLK 431C YISHUN AVENUE 1 #07-587
Postcode	763431
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?	
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)	4
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : MALE
Passenger 3	NAME: : - GENDER: : FEMALE

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	SLU9677K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GOH YONG KHIM
NRIC/Passport Number	

Contact Number

Address

Postcode

Insurance Company Name

TOKIO MARINE INSURANCE SINGAPORE LTD

Nature Of Damage

LEFT FRT

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 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.

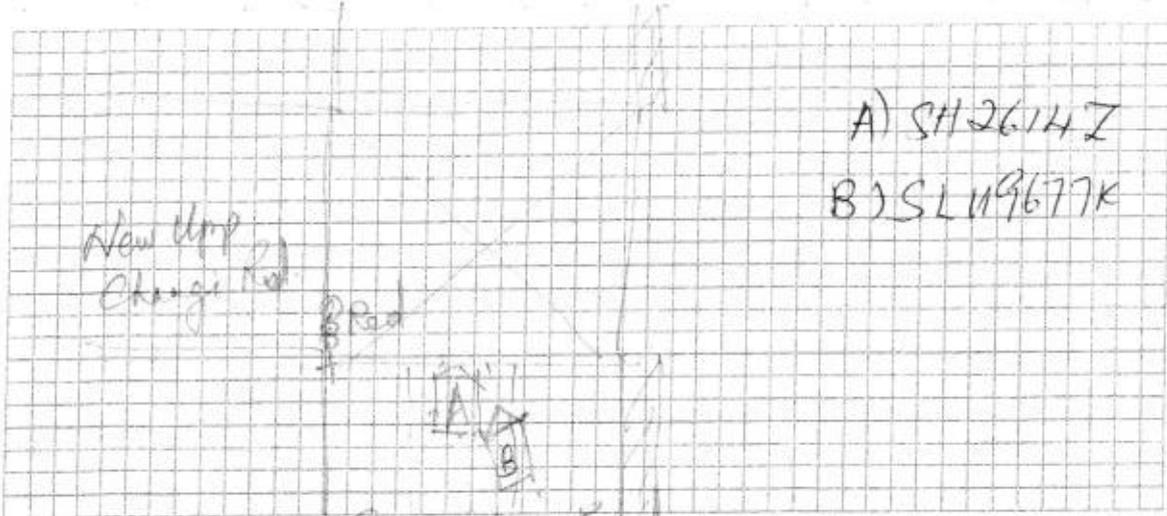
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

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.:

Sketch Plan Pg. 2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/1/20 at about 1230hrs when I Veh. A stopped at the traffic junction upon seeing the red light, Veh B collided onto the rear right ^{Rear} portion of my vehicle

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
GO. REG. NO: 199303021R

Policyholder's Signature
Date & Time:

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

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

G:\NFAC SketchPlanForm_V3



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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER: Tokio Marine Insurance Singapore Ltd (HQ)
CTPL

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	27/01/2020
Vehicle Reg. No.:	SH2614Z	Driveable?	YES
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI AE IONIQ HEV DCT, 1.6 (A)	Vehicle Reg. Date:	01/03/2019
Vehicle Colour:	BLUE	Gen Condition:	EXCELLENT
Engine No:	G4LEJU184183	Chassis No:	KMHC851CVKU139871
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	4		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	1,038.22
Miscellaneous Items	11.00
Labour	1,220.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	2,269.22
+ GST 7.00% (S\$)	158.85
Nett Amount (S\$)	2,428.07

This claim is handled by: CHIANG LIAT CHOON

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 28 Jan 2020)**Parts:** N/A HYUNDAI AE IONIQ HEV DCT 1.6 (A) (Model not available in database)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SH2614Z/28/01/2020 17:55**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		*REAR BUMPER 459.40	20.00	0.00	*459.40 FL /RL	
2	1		*REAR BUMPER CENTER MOULDING	20.00	0.00	*451.25 FL XSVL	
3	1		*REAR BUMPER LOWER MOULDING	20.00	0.00	*155.00 FL XSVL	
4	1		*REAR BUMPER REVERSE SENSOR	0	0.00	*135.70 FS XSVL	
5	1		*REAR BUMPER MAT	0	0.00	*50.00 FS /N/L	
						Sub Total (\$\$)	1,251.35
						- List Item Discount on L Items (\$\$)	213.13
						Total Parts (\$\$)	1,038.22

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

ComfortDelGro Engineering Pte Ltd/SH2614Z/28/01/2020 17:55. 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	320 650.00
2	SPRAY PAINTING	New	400 450.00
3	REMOVE/REFIX REVERSE SENSOR	New	30 60.00
4	TUFF KOTE	New	40 60.00
Gross Labour Cost (S\$)			1,220.00

ComfortDelGro Engineering Pte Ltd/SH2614Z/28/01/2020 17:55. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

NA2 LKK 29/10/2020 1705
 P/P
 2 DAYS
 BEFORE PAINT PHOTOS

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:

A member of COMFORTDELGRO

Date/Time: 28.01.2020 17:34 Page : 1

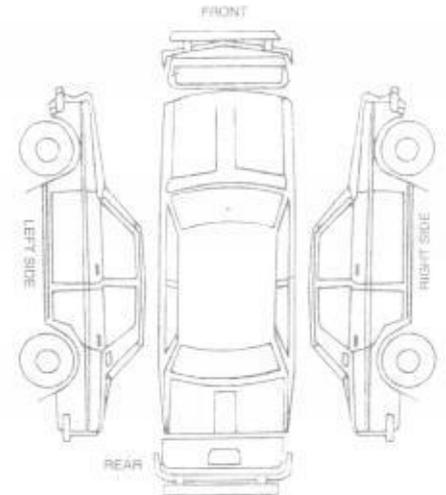
Team: ARC Repair TP(CLSO)1	JOB CARD	Sales Order:	JC NO.: 305377355
STOMER	REGN NO.: SHC2832S	MILEAGE	
VMS	MAKE: HYUNDAI	FUEL	
STOMER NO.	MODEL IONIQ(G2)	E.....1/2.....F	
DRESS	YR OF MANU 01.03.2019	DATE/TIME IN 28.01.2020 14:45	
(R)	CHASSIS CODE KMHC851CVKU141239	TARGET DATE	
(P)		COMPLETION DATE/TIME:	
ICOUNT CARD NO.			

COMFORT TRANSPORTATION PTE LTD
 7010045
 383 SIN MING DRIVE
 Singapore SINGAPORE 575717
 65508755

JOB DESCRIPTION

Accident Date: 28.01.2020
NATURE: 3P 28.01.2020

S/NO	LABOR CODE	DESCRIPTION
------	------------	-------------



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Wedge Slip

Exit Pass

Vehicle No.: SHC2832S

CHIANG

Vehicle No.: SHC2832S

Signature/Date

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

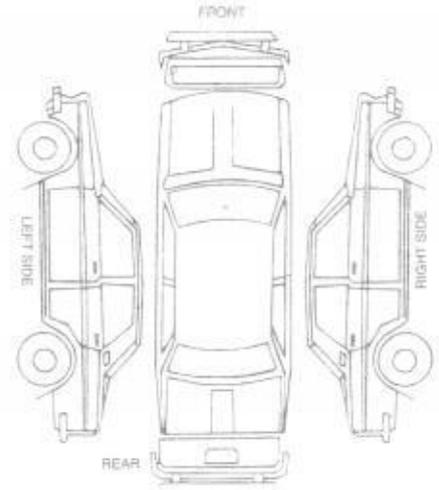
JC NO.: 305377322

STOMER /MS STOMER NO. DRESS (R) (P) COUNT CARD NO.	COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (O)	
	REGN NO.:	SH 2614Z
	MILEAGE	
	MAKE:	HYUNDAI
	FUEL	E.....1/2.....F
	MODEL	IONIQ(G2)
DATE/TIME IN	28.01.2020 12:40	
YR OF MANU	01.03.2019	
TARGET DATE		
CHASSIS CODE	KMHC851CVKU139871	
COMPLETION DATE/TIME:		

JOB DESCRIPTION

Accident Date: 27.01.2020
 NATURE: 3P 27.01.2020

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY: _____

 SERVICE ADVISOR CUSTOMER'S SIGNATURE

Acknowledgement Slip
 Vehicle No.: **SH 2614Z**
 Name: **CHIANG**
 Signature/Date: _____
 returned to Service Reception upon collection

Exit Pass
 Vehicle No.: **SH 2614Z**
 Name of Service Advisor: _____
 Date: _____
 To be kept by Security Guard

Our Job Ref No : 305377322

Date : 31/01/20

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

FINALIZATION FORM

To : LKK

Fax :

Attn : NAZ

: SH2614Z

27.01.20

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

Z The repair job shall bill to: TOKIO SLU9677K

2. The finalized amount shall be:

(a) Spare Parts after List discount \$417.52

(b) Labour Charges \$801.00

Total for Part-By-Part Repair Cost \$1,218.52

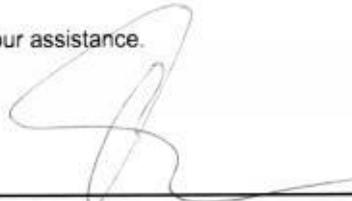
(c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: _____
Final Lumpsum Repair cost _____

3. Estimated normal period for repairs: 2 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 : CHIANG

Name : MUHD NAZUL

Tel : 62148314

Date : 10/2/2020

Fax : 65468156

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:

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305377322
 REGN NO : SH 2614Z
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ(G2)
 DATE OF REGN : 01.03.2019
 DATE/TIME IN : 28.01.2020 12:40
 ACCIDENT DATE : 27.01.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0104-2282-G	IONIQVC COVER-RR BUMPER#	1	459.40	20.00	367.52
0002	04-01-0104-1150-A	IONIQVC PROTECTOR MAT	1	50.00	2.00-	50.00

SUB-TOTAL : 417.52

JOB NATURE

0000	L	MERIMEN		11.00		
0001	PB	PANEL BEATING				320.00
0002	SP	SPRAYPAINT CHARGE				400.00
0003	20-22	REMOVE/REFIX REVERSE SENSOR				30.00
0004	20-00	TUFF COAT ON AFFECTED PARTS.				40.00

SUB-TOTAL : 801.00

TOTAL : 1,218.52

MVA NAME & SIGNATURE
 DATE :

AUTHORISED : YES / NO
 SURVEYOR NAME & SIGNATURE
 DATE :

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	28 Jan 2020 17:47 Sendback Est	28 Jan 2020 17:55 S\$2,269.22	29 Jan 2020 11:19 Edit Adj Rpt	S\$1,218.52 Edit Estimates	S\$1,218.52 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: CTPL									
Vehicle Reg. No.:	SH2614Z	Date of Loss:	27/01/2020 12:00 - :59 [10 Months and 26 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / M2000701	Policy/Cover Note No.:	MK000577 (Third Party Only) Coverage: 25/06/2019 - 24/02/2020						
Vehicle Reg. No. (Insured):	SLU9677K	Policy No. (Claimant):							
		Excess:	S\$1,500.00						
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 Telma Gomez - 65926402]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Muhammad Nazril Bin Abdullah] ... [Final Rpt due 07/02/2020]								
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

SH2614Z (M2000701)
[SLU9677K]
TP
CTPL
Jan 27 2020 12:00PM
[LION CITY RENTALS PTE LTD]
ComfortDelGro Engineering Pte Ltd

<input type="button" value="Upload Documents"/> <input type="button" value="Upload Photos"/> <input type="button" value="Compose New Letter"/>			View <input type="button" value="View in Browser"/>
			1 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>
Video			
No	Finalized On	Tokio Marine Insurance Singapore Ltd (HQ)	Thumbnail Print
1	29/01/20 11:07	OI SLU9677K - VIDEO From: SC - Reg. No: SLU9677K, Claimant: LION CITY RENTALS PTE LTD	<input checked="" type="checkbox"/> Load MP4
			1 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>
Assessment Reports			
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail Print
1	28/01/20 17:55	Repairer Estimates	<input checked="" type="checkbox"/> Load HTM
			3 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>
Photos/Images			
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail Print
1	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
2	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
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4	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
5	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
6	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
7	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
8	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
9	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
10	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
11	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
12	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
13	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
14	30/01/20 11:24	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
15	10/02/20 16:01	Replacement Part Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
16	10/02/20 16:01	Replacement Part Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
17	10/02/20 16:01	Replacement Part Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
18	10/02/20 16:01	Replacement Part Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
19	10/02/20 16:01	Replacement Part Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
20	10/02/20 16:01	Replacement Part Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
			1 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>
Documentation			
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)	Thumbnail Print
1	28/01/20 17:56	E-filed GIA report	<input checked="" type="checkbox"/> Load PDF

Documents Checklist

DOCUMENTS CHECKLIST	<input type="button" value="Reset"/> <input type="button" value="Save"/> <input type="button" value="Print"/>
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: CS/TM20001565/NYD3E2
Date: 12/02/2020

REFERENCE

Handling Insurer: Tokio Marine Insurance Singapore Ltd	Policy No: MK000577
Claimant Vehicle No : SH2614Z	Insured Vehicle No : SLU9677K
Date of Loss: 27/01/2020	Nature of Claim: TP Claim No: M2000701

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SH2614Z	Engine No: G4LEJU184183
Make & Model: HYUNDAI AE IONIQ HEV DCT, 1.6 (A)	Chassis No: KMHC851CVKU139871
Reg. Date: 01/03/2019 (Man. Year: 2018)	Odometer: 104916 km
Colour: Blue	
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: Excellent	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: Davanti 6 mm	Rear Left Side: Davanti 6 mm
Front Right Side: Davanti 6 mm	Rear Right Side: Davanti 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,038.22	417.52	620.70	59.79
Miscellaneous Items	11.00	11.00	0.00	0.00
Labour	1,220.00	790.00	430.00	35.25
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	2,269.22	1,218.52	1,050.70	46.30
+ GST 7.00/7.00% (S\$)	158.85	85.30	73.55	46.30
Nett Amount (S\$)	2,428.07	1,303.82	1,124.25	46.30

INSPECTION

Date of Assignment: 29/01/2020	Present Location: ComfortDelGro Engineering Pte Ltd (Loyang)
Date Inspected: 29/01/2020	Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969
Estimated Period of Repair: 2.0 days	

Adjuster: Muhammad Nazril Bin Abdullah

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: (Last Synchronised: 12 Feb 2020)

Parts: N/A HYUNDAI AE IONIQ HEV DCT 1.6 (A) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SH2614Z)

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		*REAR BUMPER	Cracked	459.40 FL	-	*459.40 FL
2	1		*REAR BUMPER CENTER MOULDING	Serviceable	451.25 FL	-	*. FL
3	1		*REAR BUMPER LOWER MOULDING	Serviceable	155.00 FL	-	*. FL
4	1		*REAR BUMPER REVERSE SENSOR	Serviceable	135.70 FS	-	*. FS
5	1		*REAR BUMPER MAT	Necessary	50.00 FS	-	*50.00 FS
					Sub Total (\$\$)	1,251.35	509.40
					- List Item Discount on L Items 20.00/20.00% (\$\$)	213.13	91.88
					Total Parts (\$\$)	1,038.22	417.52

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

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 (S\$)			11.00	11.00

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	650.00	320.00
2	SPRAY PAINTING	New	450.00	400.00
3	REMOVE/REFIX REVERSE SENSOR	New	60.00	30.00
4	TUFF KOTE	New	60.00	40.00
Gross Labour Cost (S\$)			1,220.00	790.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >