

ASS. REC. BY:

RAM

REF: CS/TM120005536/Fgt 3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

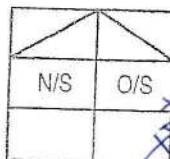
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 3 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: SHC 1712L Yr Regn: 20/12/2017Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hyundai 140 c.c 1685Colour: blue A/C: Insured / Std / NI / NASp. Reading: 297850 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHLB11UH100045Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/60R16

R: _____

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

TOYO / YOKO or WESTLAK

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 30/4/2020 D.O.I. 4/5/2020Survey held at comfort delgro (Loyang)Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orc/s rear & rear

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

Date / Time _____ Action / Instruction _____

TMI PR

PR: \$1797.88/- with 3 repair day 3 (Red \$1305.34, 42%)

confirm on 11/05/2020 with LIMITS

Date/Time, File Pass to?

☐ : Prel. Report

1) 11/05 Typist

☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 3Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS: \$

Photos

Others

Report Format: MER-TPEstimate / LCV: \$ 1797.88Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305397129

Date : 11/05/20

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

FINALIZATION FORM

To : LKK

Fax :

Attn : RAM

Vehicle Reg No. : SHC1712L

Date of Accident : 30-Apr-20

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

1. The repair job shall bill to: TOKIO MARINE --- SLN7206L

2. The finalized amount shall be:

(a) Spare Parts after List discount

\$316.88

(b) Labour Charges

\$1,481.00

Total for Part-By-Part Repair Cost

\$1,797.88

(c) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20%

Final Lumpsum Repair cost

3. Estimated normal period for repairs: 3 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and
finalized amount

Signature :

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature

Name

Date

RAM

11/05/2020

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

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

JOB NO : 305397129
REGN NO : SHC1712L
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 20.12.2017
DATE/TIME IN : 02.05.2020 08:50
ACCIDENT DATE : 30.04.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT


PART REQUISITION

0001 04-01-0103-0658-G	REAR WHEEL CAP RH	scr	1	107.10	20.00	85.68	Scr Scr
0002 28-01-9999-2023-A	REAR DOOR APPS RH		1	80.00		80.00	nec
0003 T-205 WL-RP26	REAR WESTLAKE TYRE RH		1	216.00	30.00	151.20	Cut
						SUB-TOTAL :	316.88

JOB NATURE

0000 PB	PANEL BEATING	560.00	/
0001 SP	SPRAYPAINT CHARGE	850.00	/
0002 L	R/I REVERSE SENSOR	60.00	/
0003 20-05	TP MERIMEN	11.00	/
		SUB-TOTAL :	1,481.00

TOTAL : 1,797.88


MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

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

TP INSURER:
CTPL

Tokio Marine Insurance Singapore Ltd (HQ)

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	30/04/2020
Vehicle Reg. No.:	SHC1712L	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI I40, 1.7 D CRDI (A)	Vehicle Reg. Date:	20/12/2017
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	D4FDHU731306	Chassis No:	KMHLB41UMHU100045
Odometer:	0 KM		
Paint Type:			
List Item Discount:	25.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	4		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

Parts	Amount
Miscellaneous Items	1,272.32
Labour	11.00
Paintwork Labour	1,820.00
Towing	0.00
	0.00
Gross Total (S\$)	3,103.32
+ GST 7.00% (S\$)	217.23
Nett Amount (S\$)	3,320.55

This claim is handled by: LIM TIEN SIONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference**

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 02 May 2020)

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/SHC1712L/02/05/2020 12:17

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 x(R)	25.00	0.00	*1,106.00 FL
2	1		*REAR BUMPER MAT xun	0.00	0.00	*50.00 F
3	1		*REAR WESTLAKE TYRE RH (CUT) cut	151.20	0.00	*216.00 F(SN)
4	1		*REAR WHEEL CAP RH Scr	25.00	0.00	*107.10 FL
5	10		*REAR BUMPER CLIPS xun	25.00	0.00	*22.00 FL
6	1		*REAR DOOR APPS STICKER RH nec	0.00	0.00	*80.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$) 1,581.10
 - List Item Discount on L Items (\$\$) 308.78

Total Parts (\$\$) 1,272.32

ComfortDelGro Engineering Pte Ltd/SHC1712L/02/05/2020 12:17. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

TS

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

\$560

600.00

2 SPRAY PAINTING - REAR FENDER RH / REAR DOOR RH / ROCKER PANEL GARNISH ETC

New

\$850

1,000.00

3 TUFF KOTE

New

\$Xnn

100.00

4 R/I REVERSE SENSOR

New

\$60

120.00

Gross Labour Cost (S\$)

1,820.00

ComfortDelGro Engineering Pte Ltd/SHC1712L/02/05/2020 12:17. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

- 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:

Ram (LKK)
4/5/2020 1256
Parasuram@ckkauto.com
88622728
aft repair photo
3 repair days
P/P

COMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops

59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
320 Upper Road Singapore 439649

24 Senoko Loop Singapore 758156
7 Sungei Kadut Way Singapore 728791
501 Yishun Industrial Park A Singapore 768732

Date/Time: 02.05.2020 11:29

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305397129

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

REGN NO.: SHC1712L	MILEAGE
MAKE : HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 02.05.2020 08:50
YR OF MANU. 20.12.2017	TARGET DATE
CHASSIS CODE KMHLB41UMHU100045	COMPLETION DATE/TIME:

UNT CARD NO.

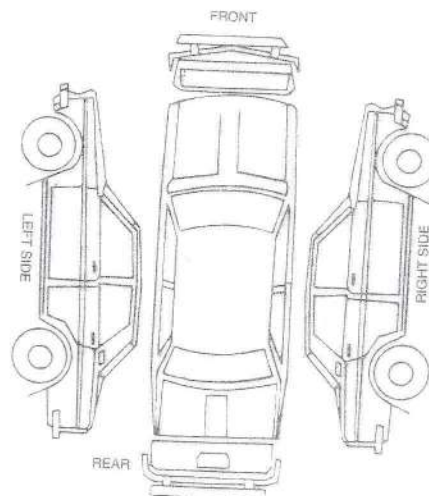
Accident Date: 30.04.2020
Signature: 3P 30.04.2020

JOB DESCRIPTION

/NO

LABOR CODE

DESCRIPTION



& PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ment Slip

Exit Pass

SHC1712L

LIMITS

Vehicle No.:

SHC1712L

e Advisor

Signature/Date

Name of Service Advisor

Date

o Service Reception upon collection

To be kept by Security Guard

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

ACCIDENT STATEMENT

Date Of Report	02/05/2020 09:36
Date Of Accident	30/04/2020 11:35
Exact Location Of Accident	OUTRAM ROAD TWDS TANJONG PAGAR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC1712L
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXX821R
Email Address	FLEETSAFETY@CDGETAXI.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	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	CHEW KOON CHENG
NRIC No	SXXXX493G
Date Of Birth	12/07/1962
Occupation	OUTDOOR
Date Of Driving Pass	25/09/1979
Driving Experience	40 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92262315
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 40 JALAN RUMAH TINGGI #15-270
Postcode	151040
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	SIDE SWIPE
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)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	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

REFER 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	SLN7206L
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	97809671
Address	

Postcode

Insurance Company Name

Nature Of Damage

LH FRONT

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.
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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.
8. **Consent under the Personal Data Protection Act (PDPA)**


I understand, acknowledge, agree and consent that:

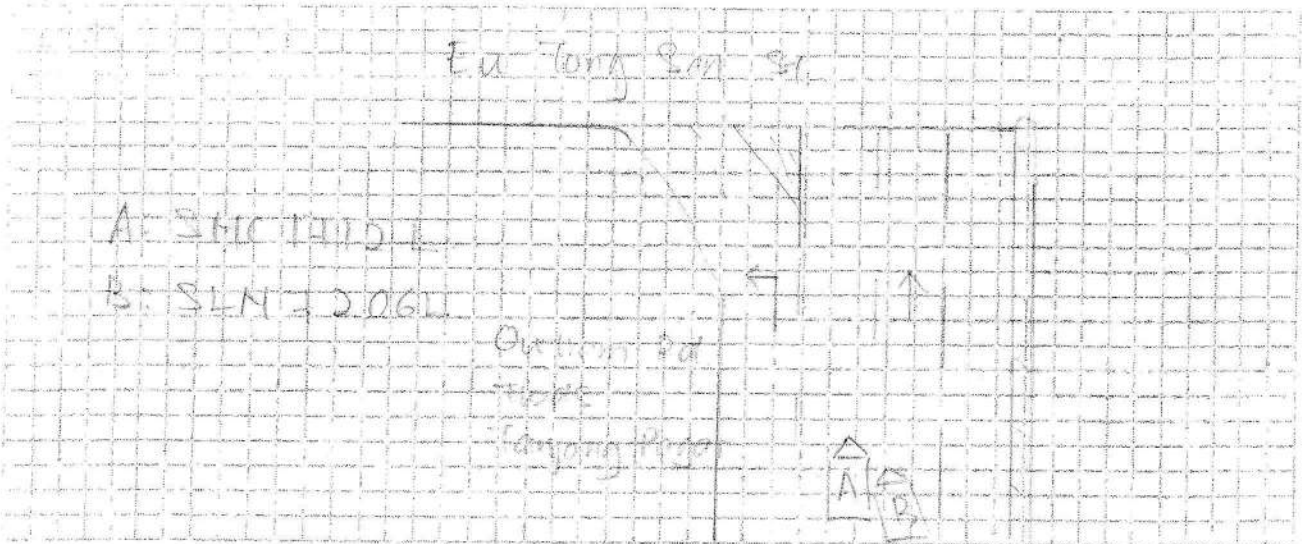
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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, investigation, 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:

 25/10/20
Reporting Centre Personnel's Signature
Name: Loke Wei Yiang
NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/4/2020 at about 11:35 hrs, I veh A was driving at above said location with 3 pax onboard. Out of sudden, veh B travelling on my right hand side encroached into my lane and it front left portion hit & grazed onto the right rear portion of my car. Both of us then alighted to take photo. No injury at the point of accident.

DECLARATION

We declare the foregoing particulars are true in every respect.

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: Loke Vial Yiang
NRIC/FIN No.:

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	821R

Vehicle Details

Vehicle No.:	SHC1712L
Vehicle to be Exported:	No
Intended Deregistration Date:	04 May 2020
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	D4FDHU731306
Chassis No.:	KMHLB41UMHU100045
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$18,885.00
Original Registration Date:	20 Dec 2017
First Registration Date:	20 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$18,885.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Dec 2025
PARF Rebate Amount:	\$14,163.00

Intended COE Rebate Details

COE Expiry Date:	19 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$34,159.00
COE Rebate Amount:	\$24,012.00
Total Rebate Amount:	\$38,175.00

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 04 May 2020

OK