

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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

CP/P)

TS

TP INSURER: Tokio Marine Insurance Singapore Ltd (HQ)

CTPL

LKK - Ram.

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	03/06/2020
Vehicle Reg. No.:	SHD4044G	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	11/03/2020
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	G4LEKU408597	Chassis No:	KMHC851CVLU189802
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	1,802.20
Miscellaneous Items	11.00
Labour	1,260.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$\$)	3,073.20
+ GST 7.00% (\$\$)	215.12
Nett Amount (\$\$)	3,288.32

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: 03 Jun 2020)**Parts:** 192 HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHD4044G/03/06/2020 13:24**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		*FRT FENDER LH cut/dm	20.00	0.00	*490.70 FL
2	1		*FRT FENDER (HYBRID) LH nec	20.00	0.00	*26.60 FL
3	1		*WING MIRROR LH dm/scr	20.00	0.00	*1,391.70 FL
4	1		*FRT DOOR (COMFORTDELGRO) LH nec	0.00	0.00	*75.00 F
5	1		*FRT FENDER ADVERTISEMENT STICKER LH nec	0.00	0.00	*100.00 F
6	1		*FRT DOOR ADVERTISEMENT STICKER LH nec	0.00	0.00	*100.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	2,184.00
- List Item Discount on L Items (S\$)	381.80
Total Parts (S\$)	1,802.20

ComfortDelGro Engineering Pte Ltd/SHD4044G/03/06/2020 13:24. 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 (\$\$)			11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New \$480	600.00
2	SPRAY PAINTING	New \$400	600.00
3	TUFF KOTE	New \$30	60.00
Gross Labour Cost (\$\$)			1,260.00

ComfortDelGro Engineering Pte Ltd/SHD4044G/03/06/2020 13:24. 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:

3/06/2020
Parasuram@lkkauto.com
88622728
Best paint photo
P/P
3 repair legs
Ram (LKK)
1410

OMFORTDELGRO
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 24 Senoko Loop Singapore 758156
383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 728791
45 Pandan Road Singapore 609286 501 Yishun Industrial Park A Singapore 768732
320 Old Road Singapore 36845

Date/Time: 03.06.2020 13:02 Page : 1

eam: ARC Repair TP(CLS0)1 JOB CARD Sales Order: JC NO.:305402212

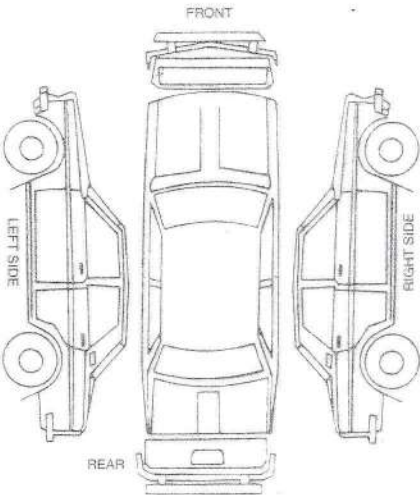
OMER	REGN NO: SHD4044G	MILEAGE
S COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
7010045	MODEL IONIQ(G3)	E.....1/2.....F
OMER NO 383 SIN MING DRIVE	DATE/TIME IN 03.06.2020 10:45	
ESS Singapore SINGAPORE 575717	YR OF MANU 11.03.2020	TARGET DATE
65508755 (R) (O)	CHASSIS CODE KMHC851CVLU189802	COMPLETION DATE/TIME:
(P)		

DUNT CARD NO.

JOB DESCRIPTION

ccident Date: 03.06.2020
ATURE: 3P 03.06.2020

/NO LABOR CODE DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

ledgement Slip

Exit Pass

vo.: SHD4044G LIMITS

Vehicle No.: SHD4044G

Service Advisor Signature/Date Name of Service Advisor Date

turned to 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	03/06/2020 11:10
Date Of Accident	03/06/2020 08:00
Exact Location Of Accident	ANG MO KIO AVE 10 X AMK AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4044G
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	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	HUSSIN BIN IDRIS
NRIC No	SXXXX839J
Date Of Birth	02/05/1958
Occupation	OUTDOOR
Date Of Driving Pass	29/05/1984
Driving Experience	36 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96248328
Fax Number	
Contact Number	
EEmail Address	KAWAII_SITI@YAHOO.COM.SG

Address	BLK 109 ANG MO KIO AVENUE 4 #12-26
Postcode	560109
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T20200603/2018 * TYPE OF ACCIDENT :- HIT & RUN

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	YN8297M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

UNSURE

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)

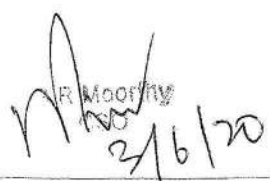
I understand, acknowledge, agree and consent that:

- (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

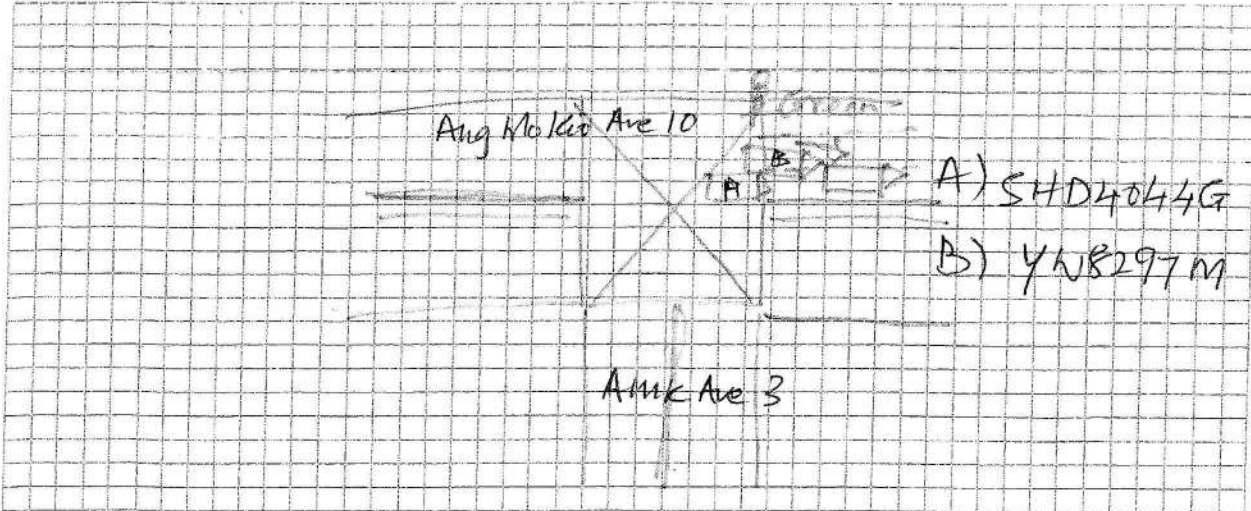
Policyholder's Signature
Date & Time:


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


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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police Report 7/20200603/2018

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:
NRIC/FIN No.:

[Signature] 3/6/20



**SINGAPORE
POLICE FORCE**



T/20200603/2018

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20200603/2018

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/06/2020 10:30	Vide Report No.:	Station Diary No.: 28
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Informant's Particulars

Name of Informant: HUSSIN BIN IDRIS			Address: APT BLK 109 ANG MO KIO AVENUE 4 #12-26 SINGAPORE 560109	
ID Type / ID No.: NRIC NO / S1310839J			Contact No.: Home/Office: Mobile: 96248328	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 62	Date of Birth: 02/05/1958	Type of Informant: Driver	
Race: Malay			Language: English	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/06/2020 08:00	Type of Location: Straight Road
Location: Along Road 1 ANG MO KIO AVENUE 10 Right Turn towards Ang Mo Kio Ave 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD4044G	Car				Seriously Damaged	0
YN8297M	Lorry					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20200603/2018

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20200603/2018

CONTINUATION OF REPORT

Driver			
Name	HUSSIN BIN IDRIS	ID No.	S1310839J
Related Vehicle	NIL	Contact No.	96248328
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 03/06/2020 at about 0800hrs I was driving my taxi travelling along Ang Mo Kio Ave 10. I was at a traffic light junction turning right onto Ang Mo Kio Ave 3. I was waiting for my turn on the right turn lane. There were 5 to 6 cars in front of me. Suddenly a lorry cut into the right turning lane where I was waiting. As the result the lorry side swiped the left side of my taxi. It caused my left side mirror to be damaged and there is also dent and scratches on the left side of my taxi. The lorry did not stop after the accident.



**SINGAPORE
POLICE FORCE**



T/20200603/2018

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3

Report No. T/20200603/2018

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sr Staff Sgt HUANG ZHENJIE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 03/06/2020 10:30
Officer In Charge Of Case: TP / HRT / Insp GOH GEOK LYE Contact No.: 65476148	Classification Of Case:
Authentication Stamp NP168	