ASS, REC. BY:

## **BIFROST AUTO PTE LTD**

## REPAIR ESTIMATE

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3-Jul-20

INSURANCE: Tokio Marine

MODEL:

**HYUNDAI 140** 

VEHICLE NO.: SHC8660G

DESCRIPTION	QTY	LIST PRICE	AMOUNT
REAR BUMPER CH Philo	111	\$1,106.00	\$1,106.00
REAR BUMPER CLIP Nuc	1	\$19.00	\$19.00
REAR BUMPER UNDER COVER HH	1	\$228.00	\$228.00
REAR BUMPER REFLECTOR LAMP (I40)	1	\$32.00	\$32.00
REAR FENDER VIPE~	1	\$2,171.40	\$2,171.40
REAR FENDER UNDER SHIELD(RH)	1	\$338.60	\$338.60
REAR FENDER AIR-DUCT (RH) NA	1	\$51.60	\$51.60
REAR WINDSCREEN MOULDING NA	1	\$51.80	\$51.80
REAR DOOR (RH) Deuth	1	\$2,201.10	\$2,201.10
REAR DOOR RUBBER (RH)	1	\$185.40	\$185.40
REAR DOOR HINGE UPPER (RH) SVC	1	\$114.50	\$114.50
REAR DOOR HINGE LOWER (RH)	1	\$123.50	\$123.50
REAR DOOR CHECK (RH)	1	\$92.90	\$92.90
REAR DOOR TRIM BOARD (RH)	1	\$743.80	\$743.80
ROCKER PANEL OUTER GARNISH (RH)	1	\$732.80	\$732.80
ROCKER PANEL STEP GARNISH (FRT) (RH) de mul	1	\$26.40	
ROCKER PANEL OUTER PANEL	1	\$1,380.50	
ROCKER PANEL ENFORCEMENT (RH)	1	\$969.40	\$969.40
REAR TYRE RIM (RH) ?	1	\$650.60	\$650.60
REAR TYRE WHEEL CAP	1	\$214.20	
REAR WHEEL BEARING ING & HUB ?	1	\$724.00	\$724.00
REAR TRAILING ARM (RH)	1	\$384.00	\$384.00
REAR ASSIST (RH) NL	1	\$219.40	\$219.40
REAR SHOCK ABSORBER (RH)	1	\$683.70	\$683.70
REAR SHOCK ABSORBER MOUNTING (RH)	1	\$162.60	\$162.60
ABS SENSOR HM	1	\$217.90	\$217.90
REAR CROSS MEMBER NA	1	\$2,021.50	\$2,021.50
STABILIZER BAR NN	1	\$199.60	\$199.60
STABILIZER LINK HA	1	\$85.90	
REAR UPPER ARM (RH)	1	\$335.75	\$335.75
REAR LOWER ARM (RH)	1	\$353.80	\$353.80
REAR KNUCKLE ARM (RH) ?	1	\$545.60	
BONNET Ver	1	\$2,265.90	
BONNET RUBBER (RH) SVC	1	\$35.70	The state of the s
BONNET HINGE (LH/RH) 0 8 Bt N S M	2	\$126.70	
BONNET INSULATOR NA	1	\$202.50	\$202.50
BONNET SEAL N	1	\$31.90	
BONNET INSULATOR CLIPS HA	1	\$15.00	\$15.00
BONNET CABLE MA	1	\$69.60	
HEADLAMP SUPPORT PANEL ASSY NH	1	\$907.40	\$907.40
HEADLAMP (RH) MONNAY booker	1	\$2,776.00	
HEADLAMP SUPPORT TOP COVER N	1	\$222.60	\$222.60
FRONT FENDER (RH) Frc	1	\$566.30	\$566.30

FRONT FENDER APRON PANEL (RH)	4		
FRONT FENDER SHIELD (RH) detorned	1	\$637.0	+ + + + + + + + + + + + + + + + + + + +
FRONT DOOR MIRROR SIDE GARNISH MA	1	\$174.9	7
FRONT DOOR MIRROR (RH)	1	\$225.0	¥==0.00
FRONT DOOR (RH) Bue	1	\$670.0	0 \$670.00
FRONT DOOR RUBBER	1	\$2,256.4	
FRONT DOOR GEAR/REGULATOR (RH) ?	1	\$196.0	
FRONT DOOR POWER MOTOR	1	\$776.80	
EDONE	1	\$442.10	7.10.00
FRONT DOOR HINGE UPPER (RH) 7	1	\$113.60	T
FRONT DOOR HINGE LOWER (RH)	1	\$125.70	7.10.00
FRONT DOOR CHECK (RH)	1	\$91.80	+ . = 0.10
FRONT DOOR TRIM BOARD (RH)	1	\$997.40	
FRONT DOOR INNER LOCK (RH) 2 Dam 2 Photo	1	\$490.80	
FRONT DOOR KEY LOCK SET	1	\$71.70	
FRONT DOOR OUTER ANDLE (RH)	1		
FRONT DOOR OUTER MOULDING (RH)	1	\$132.30	7.02.00
FRONT DOOR GLASS (RH)	1	\$153.10	+.00.10
FRONT WINDSCREEN GLASS CYLLC	1	\$316.30	\$0.00
FRONT WINDSCREEN MOULDING Nec	4	\$882.70	+00L.10
FRONT WINDSCREEN PILLAR OUTER (RH)	1	\$133.70	4.00.10
FT WINDSCREEN ENFORCEMENT (RH)		\$1,535.90	1,100.00
WIPER PANEL TOP GARNISH NA	1	\$969.40	+000,10
FRONT WHEEL RIM (RH) ?	1	\$476.60	+ 0.00
KNUCKLE ARM (RH)	1	\$650.60	\$650.60
FRONT WHEEL BEARING HUB ASSY (RH)	1	\$595.90	\$595.90
	1	\$673.20	
FRONT SUSPENSION LOWER ARM (RH) ? FRONT SHOCK ABSORBER ASSY (RH) ?	1	\$1,104.00	\$1,104.00
FRONT SHOCK ARSOPPED MOUNTING (D.)	1	\$684.40	\$684.40
STG TIE ROD (RH) ?	1	\$217.60	\$217.60
STG TIE END (RH)	1	\$186.40	\$186.40
CTABILIZED	1	\$125.20	\$125.20
STABILIZER BAR ASSY HA	1	\$463.70	\$463.70
STABILIZER BAR LINK (RH)	1	\$68.10	The second name of the second na
	1	\$217.90	\$68.10 \$217.90
FRONT DRIVE SHAFT (RH)	1	\$2,061.60	T
RACK & PINION ASSY	1	\$1,820.00	\$2,061.60
ENGINE MOUNTING RH	1	\$401.60	\$1,820.00
SUB TOTAL		Ψ401.00	\$401.60
LESS 20%			\$45,852.95
DISCOUNTED TOTAL			\$9,170.59
			\$36,682.36
REAR WINDSCREEN SEALANT Nac SN			
Rear Door Comfortdelaro & Appa Sticker (DL)	1	\$46.00	\$46.00
Rear Door Comfortdelgro & Apps Sticker(RH)	1	\$ 80.00	\$ 80.00
FRONT DOOR COLOURED COMPONE SN	1	\$216.00	\$216.00
RONT DOOR COLOURED COMFORT LOGO HELL SN	1	\$75.00	\$75.00
RONT ERR STICKER AND NECESTION ON SN	1	\$45.00	
RONT TYPE (PL)	1	\$26.00	\$45.00
RONT TYRE (RH) NN SN	1	\$20.00	\$26.00
UB TOTAL		Ψ2 10.00	\$216.00
			\$704.00
abour Charge			
anel Beating	1	M4 000 00	
pray Painting Charge	1	\$1,800.00	\$1,800.00
Viring Charge		\$1,600.00	\$1,600.00
	1	\$160.00	\$160.00

Towing Charge	1	\$160.00	0.10
Remove/Refix Cushion & Upholstery Rear Remove/Refix Rear Wind	1	\$80.00	4.00.00
	1	\$150.00	\$80.00
TOTTOVE/IVE/IX RAVARCO Com-	1	\$150.00	HH \$150.00
Remove/Refix Indercarriage (DE)	1	\$120.00	\$120.00
No oct Neal ABS System	1	\$120.00	\$120.00
Transfer of Door Mechanism English	1	\$400.00	\$400.00
Title Set Fit Power Window Cont	1	\$400.00	\$400.00
Transfer of Door Mechanism REAR	1	\$80.00	\$80.00
Re-set Rear Power Window System	4	\$200.00	\$200.00
Four Wheel Alignment		\$80.00	\$80.00
Remove/Refix Under	1	\$200.00	000-
Remove/Refix Undercarriage (Frt)	1	\$120.00	\$200.00 \$1 <del>20.0</del> 0
Re-set Frt ABS System	1	\$400.00	
Remove/Refix Radiator	1	\$200.00	\$400.00
Remove/Refix Aircon & Refill Gas	1	\$90.00	\$200.00
remove/Reflx Flish Box	1	\$130.00	\$90.00
demove/Refix Front Windscreen Glass	1		\$130.00
Oli Cliassis Alianment Ol	1	\$120.00	\$120.00
iagnostic & Resetting To Erase Fault Code	1	\$120.00	\$120.00
	1	\$220.00	ΨZZU.00 F
OTAL LABOUR	·	\$550.00	\$550.00
STIMATE TOTAL			\$7,500.00

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.

06/07/2020 @ 1700 mm NA ANTIM L/Snm 14 days. Man

J Kt AND

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 <u>and</u> is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Provide Book Velne Check Pert prius

#### 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 aforecaid.

aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
William Control of the Control of th	ACCIDENT STATEMENT
Date Of Report	03/07/2020 10:56
Date Of Accident	01/07/2020 14:05
Exact Location Of Accident	MARINA COASTAL DRIVE X MARINA LINK
Country/State of Loss	SINGAPORE
· ·	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC8660G
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXX821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	140
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 STEVE TAI POH HUAT (DAI BAOFA)

 NRIC No
 SXXXX448J

 Date Of Birth
 27/09/1972

 Occupation
 OUTDOOR

 Date Of Driving Pass
 06/07/1990

Driving Experience 29 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84989127

Fax Number Contact Number

EMail Address STEVETAI@HOTMAIL.COM

Address

689D 03-124 WOODLANDS DRIVE 75

Postcode

734689

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - TAXI DRIVER

Vehicle

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CROSS JUNCTION

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?

YES

Was any injured conveyed to hospital by

ambulance?

YES

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)

Passenger 1

NAME:

GENDER: : MALE

**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

SKA551R

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

GEORGE HENRY SLORACH

NRIC/Passport Number

Contact Number

96391747

Address

Postcode

Insurance Company Name

Nature Of Damage

FRT LEFT

#### No. Of Passenger (Including Driver)

#### **DETAILS OF INJURED PERSON 1**

Name STEVE TAI POH HUAT (DAI BAOFA)

Approximate Age

GIDDY, BODY PAIN Injuries Sustain

Injured person in which vehicle? SHC8660G

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

YES

48

Address

Postcode

#### **DETAILS OF INJURED PERSON 2**

Name PAX

Approximate Age

Injuries Sustain HAND

Injured person in which vehicle? SHC8660G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode





1 of 2

Report No. A/20200702/7032

### POLICE REPORT (NP299)

Police Station Of Origin Central Division HQ A 391 New Bridge Road #03-112 Police Cantonment Complex SINGAPORE 088762 Tel No:1800-2240000

Date/Time Report Made	Vide Re	Vide Report No.				
02/07/2020 19:46						
Name Of Informant	Address					
STEVE TAI POH HUAT	APT BLI	K 689D WC	ODLANDS DRIVE	E 75 #03-124		
	SINGAF	SINGAPORE 734689				
ID Type / ID No.	Contact	No.				
NRIC NO / S7234448J	Home/O	ffice:	Mobile:	Mobile:		
		84989127				
Nationality	Email Address					
SINGAPORE CITIZEN	stevetai	stevetai@hotmail.com				
Occupation	Sex	Age	Date of Birth	Race		
Taxi driver	Male	47	27/09/1972	Chinese		
Institution/School Name	Language English					
Date/Time Of Incident	Location Of Incident					
01/07/2020 14:05 - 01/07/2020 14:05	MARINA COASTAL DRIVE					
Brief details						

On 01/07/2020 at about 14:05 hours, I was traveling along Marina Coastal Drive with one male passenger onboard who can be my witness, (Mr Raj mobile 96194997).

While the traffic light is green in my favour, I proceeded to make a right turn. Suddenly veh B (SKA 551R) from my right dash the red light and hit onto my taxi A - Whole Right Portion.

As it took place too fast I could not take evasive action to prevent it.

After the accident I was convey by the ambulance and my male passenger who also suffered from some injuries left the scene.

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 02/07/2020 19:46
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	





2 of 2

POLICE REPORT (NP299)

#### **CONTINUATION OF REPORT**

Report No. A/20200702/7032

Veh A (SHC 8660 G) - Mr Steve Tai Poh Huat mobile 8498 9127 Veh B (SKA 551 R) - Mr George Henry Solrach mobile 9639 1747 IO Officer Mr Syed mobile 9731 4610 Report number A/20200701/0058

Subjects Involved	die gewen der		
Victim			
Person Name	STEVE TAI POH HUAT		
ID Type	NRIC NO	ID No	S7234448J
Gender	Male	Age	47
Race	Chinese	Language	English
Occupation	Taxi driver	Address Type	
Address	APT BLK 689D WOODLANDS DRIVE 75 #03-124 SINGAPORE 734689	Mobile No	84989127
ls Informant A Victim?	Yes		
Person Name	STEVE TAI POH HUAT (Inform	ant)	

Signature Of Informant:
The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 02/07/2020 19:46
Classification Of Case:

**Authentication Stamp** 

#### SKETCH PLAN

## **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
- 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
- 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
- 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)
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
  - (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
- 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.

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

Driver's Signature

(If driver is not the policyholder)

Date & Time:

02.07.2020 @ 16:45

Reporting Centre Personnel's Signature

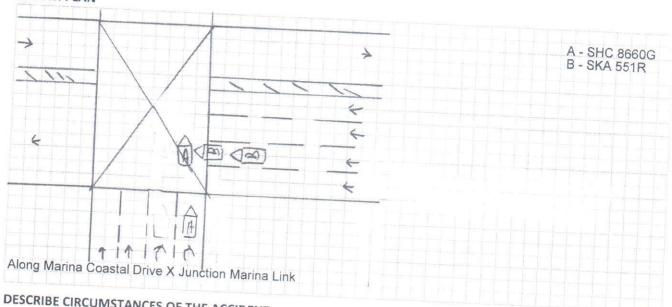
NRIC/FIN No .:

Name:

Policyholder's Signature

Date & Time:

## SKETCH PLAN



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 01	07 2020 -4 -4
01101.	07.2020 at about 14:05 hours I was travelling along Marina Coastal Drive with One
male passe	nger onboard .
While the	traffic links
ville trie	traffic light is green in my favour , I proceeded to make a right turn . Suddenly vel
	) from my right dash the red light and hit onto my taxi A - Whole Right Portion .
As it took p	lace too fast I could not take evasive action to prevent .
	take evasive action to prevent.
After the ac	cident I was convey by the ambulance and my male passenger also suffered from
some injurie	S .
Veh B ( SK4	2.551P.) Mr. O
(010	A 551R)- Mr George Henry Solrach H/P:9639 1747
LARATION	
declare the force	

I/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: 02.07.2020 @ 16:45

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.: