(3/TM120007492/T1693

KEF:

ASS. REC. BY: Taufuh ASSIGNMENT SHA9521D. Yr Regn: 2016, Oct Type: M.Car / M.Cycle / Bus / Van / Lorry / Prime Mover / Estimated Cost: Truck / Trailer or OD / TP / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: Colour at Workshop m/s T/Radio: Insured / Std / NI / NA Sp.Reading Eng/No: JTDKB3FUS0353 Policy No. Claims No. Steering: Inolder / Jammed / Leaked / Burnt or Excess: Sum insured: Brake: Inofter / Jammed / Leaked / Burnt or (Client's Record) Modl: Nil /S/Rim / STD A/Rim or Make of Veh: Tyre Size: (Policy Condition) Remark: The veh had commenced its OIS BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / repair at the time of inspection. TOYO / YOKO or Bal. or Market Value: Front Rear Consistent?: Yes or No R/Bal. R/Bal. IDAC Accident Rport: L/Bal. Consistent?: Yes or No GIA / PR Seen: Res.: Yes or No D.O.A. D.O.I. days Est. Repairs: 3 Val.: Yes or No Lum Sum; Survey held at Des. of Damages: Frt / Rear CA / REV / REP. / 24 HRS Xehicle: IN / OUT Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date / Time | Action / Instruction COR I/s \$3050, 3 days.(red: 2638.97; 46%) Date/Time, File Pass to? : Prell. Report Days Of Repair: : Final Report Resurvey No. of Trip: Survey Fee: Date/Time, File Return to? Transportation: Add Fee: Site Insp (\$ S + RS. SI Interview (\$ **Photos** Report Former: Tech. Invs 13 Others Lump Sum H.B.J. Co.

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

59 Loyang Drive Singapore 508969 Tel: 6214 8300

TP INSURER:

Tokio Marine Insurance Singapore Ltd (HQ)

CCPL

Singapore

PARTICULARS OF CL	AIM			
Claim Type:	THIRD PARTY	Ref. No:		
Policy No:		Date of Loss:	18/07/2020 YES	
Vehicle Reg. No.:	SHA9521D	Driveable?		
Party At Fault:	UNKNOWN			
Make/Model:	TOYOTA PRIUS HYBRID, 1.8 CVT (A)	Vehicle Reg. Date:	21/10/2016	
Vehicle Colour:	YELLOW	Gen Condition:	GOOD	
Engine No:	2ZRR946010	Chassis No:	JTDKB3FU503534284	
Odometer:	527390 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			Amount	
Parts		-	3,802.97	
Miscellaneous Items			11.00	
Labour			1,870.00	
Paintwork Labour			0.00	
Towing			0.00	

This claim is handled by: CHIANG LIAT CHOON

Generaled using Merimen e-Claims Internet Estimation & Adjusting System

Gross Total (S\$)

+ GST 7.00% (S\$)

Nett Amount (S\$)

0.00

5,683.97

6,081.85

397.88

## REPAIR DETAILS

# Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 20 Jul 2020)

Parts:

TOYOTA PRIUS HYBRID 1.8 CVT (A) (Catalogue: Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SHA9521D/20/07/2020 13:54

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 FENDER RH	25.00	0.00	<b>₹</b> ≯ *836.70 FL
2	1		*REAR DOOR RH	25.00	0.00	<b>光ン*1,258.30FL</b>
3	1		*REAR ROCKER RH	25.00	0.00	Ry *576.00 FL
4	1		*REAR BUMPER	25.00	0.00	Ry *458.60 FL
5	1		*REAR BUMPER BRACKET RH	25.00	0.00	≺ *112.70FL
6	1		*REAR RIM RH	25.00	0.00	at 1,555.00 FL
7	1		*FRT DOOR CCPL LOGO	0	0.00	Nel~ *75.00 FS
8	1		*REAR DOOR CCPL APP LOGO	0	0.00	180.00 FS
9	1		*BUMPER MAT	0	0.00	¥ *50.00 FS
F=Fra	nchise	part. S=SpcNett.	L=ListItemDisc.			
			Sub Total (S\$)			5,002.30
			- List Item Discount on L Items (S\$)			1,199.33
			Total Parts (S\$)			3,802.97

ComfortDelGro Engineering Pte Ltd/SHA9521D/20/07/2020 13:54. Not valid without Reference section. Generated using Merimen e-Claims IEAS

# Estimates on Miscellaneous Items

No Qty Particulars Amount Miscellaneous Items 1 OD/TP Case (Insurer) 11.00 11.00 Sub Total (S\$)

	<b>★</b> * * * * * * * * * * * * * * * * * * *			•
-0	timo	too	-	Labour
		112	$\alpha$	Lanour
			$\sim$ 11	Labour

No	Particulars	Lab.Type		Amount
Lab	our Items			
1	PANEL BEATIING	New	640	760.00
2	SPRAY PAINTING	New	/	800.00
3	REMOVE/REFIX DOOR PARTS	New	60	120.00
4	TOFF KOTE	New	40	100.00
5	CHECK WIRING	New	30	90.00
		Gross Labour Cost (S\$)		1,870.00

ComfortDelGro Engineering Pte Ltd/SHA9521D/20/07/2020 13:54. Not valid without Reference section. Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Taylor 97495741 2/2/20C4pm lumpsur Perny after repair. Fanfhir @ Ihhandown 03 days

LKK Auto Consultants hence notify

- the Repairer of the following:
- To resurvey before/after spray painting
- To display damaged parties during requivey
- Parts prices are subject to confirmation.
- Third party survey is on a 10 thout Finance\* basis No illegal modification is allowed.
- Supplementary items rust be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

# COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Bradden Road Singapore 579791 Maintes - 55 5383 5280 Facsimile - 65 6280 9755

Workshops
59 Los org since flingapore 508969
383 Sin Ming Drive Singapore 575747
45 fliam tim Physical India

24 Semisistono Singapine 158 No. 7 Surger Kadut Way or gasteri (1974)

Date/Time: 20.07.2020 12:44

Page: 1

Team: ARC Repair TP(CFSO)1 **JOB CARD** Sales Order: JC NO.: 305412001 ISTOMER REGN NO SHA9521D MILEAGE CITYCAB PTE LTD VMS FUEL MAKE: STOMER NO. 70100.5 7010070 TOYOTA E......F PRIUS HYBRID(G4)20.07.2020 09:40 MODEL Singapore SINGAPORE 575717 65551188 L. (R) YR OF MANU. 21.10.2016 TARGET DATE P CHASSIS CODE JTDKB3FU503534284 COMPLETION DATE/TIME SCOUNT CARD NO

JOB DESCRIPTION

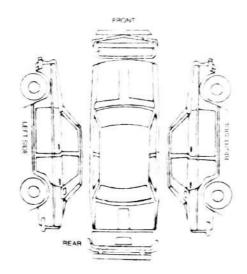
Accident Date: 18.07.2020

NATURE: 3P.18.07.2020

S/NO

LABOR CODE

DESCRIPTION



ECKED & PASSED OUT BY	
SERVICE ADVISOR	CUSTOMER'S SIGNATURE
Owledgement Stip	Exit Pass
SHA9521D CHIANG	Vehicle No.: SHA9521D
returned 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 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 aforesaid.

ACCIDENT		E.MENT	G
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 Date Of Report
 20/07/2020 11:07

 Date Of Accident
 18/07/2020 15:50

Exact Location Of Accident NORTH BRIDGE ROAD

Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SHA9521D

Insured/Policyholder

Name Of Registered Owner CITYCAB PTE LTD

Co Reg No 1XXXXX839G

Email Address FLEETSAFETY@CDGTAXI COM SG

Mobile Phone No

Alternative Phone No OFFICE-65508768

Vehicle Particulars

Manufacturer TOYOTA
Model PRIUS

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-18088937MFSH

Cover Note Number

Driver

 Name of Driver
 CHUA BEE HUAT

 NRIC No
 SXXXX126A

 Date Of Birth
 22/10/1965

 Occupation
 OUTDOOR

 Date Of Driving Pass
 08/04/1991

Driving Experience 29 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81288367

Fax Number Contact Number

EMail Address ERICCHUA7441@GMAIL.COM

Address

BLK 340 WOODLANDS AVENUE 1 #02-573

Postcode

730340

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)

2

involved in the accident 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)

2

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

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 180

Vehicle Registration Number

**SLF9570M** 

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

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)

### HAPSHI METHOD

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& Time	(If driver is not the policyholder) N.	ame.
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