

ASS. REC. BY:

REF:

TMI/

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No:

at Workshop n/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

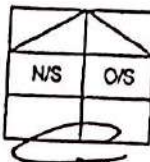
Excess:

(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:

14

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

1

Got BI

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS. SI

Fees

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Not Authored
L / Imp 8

AAD2008-069

Trans-cab Auto Services Pte Ltd
No. 2 Ang Mo Kio Street 63 Singapore 569111
Tel No. : 6287 6666 Fax No. : 6257 1330
CO./GST Reg. No. 201019626G
SHD 401K

18 AUG 2020

Vehicle No.:
Chassis No.:
Vehicle Make:
Vehicle Model:
Date of Accident :
Third Party Insurer :
Date of Registration :

SHD 401K
VF1ABL15AUC283412
RENAULT
LATITUDE
14.8.2020
TOKIO MARINE
17-10-16

	PART
1	BUMPER COVER REAR
1	BUMPER LOWER REAR
1	BUMPER BRACKET CTR REAR
1	BUMPER BRACKET SIDE RH REAR
1	BUMPER RETAINER RH REAR
1	BUMPER REFLECTOR RH
1	BUMPER BRACKET SIDE LH REAR
1	BUMPER RETAINER LH REAR
1	BUMPER REFLECTOR LH
1	BUMPER BEAM REAR
1	BUMPER BEAM BRACKET LH REAR
1	BUMPER BEAM BRACKET RH REAR
1	BUMPER BLOCK RH REAR
1	BUMPER HARNESS REAR
1	OUTER PANEL REAR (End Panel)
1	OUTER PANEL REAR (End Panel) TRIM
1	TAILLAMP RH
1	TAILLAMP PANEL RH
1	TAILLAMP LH
1	TAILLAMP PANEL LH
1	BOOT REAR
1	BOOT FINISHER
1	BOOT WEATHERSTRIP
1	BOOT REFLECTOR LAMP LH
1	BOOT REFLECTOR LAMP RH
1	BOOT BADGE 'RENAULT'

	LIST	
\$	R ₁	561.70 ✓
\$	Dis / CM	411.90 ✓
\$	'CMT	98.10 ✓
\$	B ₂	82.10 ✓
\$	D ₁₁	59.80 ✓
\$	CM	16.60 ✓
\$	S _L	80.80 X
\$	S _L	54.20 X
\$	S _L	16.60 X
\$	R ₁	547.80 ✓
\$	R ₂	114.50 ✓
\$	R ₂	114.50 ✓
\$	S _L	76.50 X
\$	S _L	301.10 X
\$	R ₂	745.80 ✓
\$	M ₂ / CM	404.56 ✓
\$	M ₂ / CM	401.40 ✓
\$	R ₂	401.40 ✓
\$	M ₂ / CM	401.40 ✓
\$	R	401.40 X
\$	R ₁	1,677.20 ✓
\$	S _L	344.70 X
\$	Dis / R ₂	178.20 50% S _L
\$	S _L	277.70 X
\$	CM	277.70 ✓
\$	R ₂	82.40 ✓

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SHD 401K**AAD2008-069**

- 1 BOOT BADGE
- 1 BOOT STRUT LH
- 1 BOOT TRIM BOARD
- 1 BOOT STRUT RH
- 1 BOOT HINGE LH
- 1 BOOT HINGE RH
- 1 BOOT LOCK
- 2 BOOT RUBBER PLUG
- 2 LICENCE PLATE LAMP
- 1 BOOT SWITCH
- 1 EXHAUST REAR
- 1 EXHAUST CAP REAR
- 1 REAR RH FENDER PANEL
- 1 WHEELARCH REAR RH
- 1 FENDER PANEL INNER TRIM REAR RH
- 1 SPARE WHEEL PANEL
- 1 SPARE WHEEL PANEL TRIM
- 1 SPARE WHEEL PANEL BRACKET RH
- 1 SPARE TYRE BOARD
- 1 CHASSIS PANEL REAR RH
- 1 FENDER PANEL INNER REAR RH
- 1 FENDER INNER BOARD RH
- 1 WHEEL HOUSING PANEL REAR RH
- 1 DOOR PANEL REAR RH
- 1 DOOR LOCK REAR RH
- 1 KNUCKLE ARM REAR RH
- 1 WHEEL HUB NUT
- 1 WHEEL HUB CAP
- 1 ABS SENSOR REAR RH
- 1 REAR AXLE
- 1 AXLE SPRING ARM RH
- 1 UPPER CONTROL ARM REAR RH
- 1 ABSORBER REAR
- 1 ABSORBER MOUNTING REAR

\$	M	95.80	✓
\$	SL	145.10	} X
\$	SL	611.00	
\$	SL	145.10	
\$	R	254.20	
\$	R	254.20	
\$	R	246.60	}
\$	SL	139.30	
\$	SL	26.30	
\$	SL	113.00	}
\$	R	5,263.60	
\$	N	125.40	✓
\$	Bu	1,933.20	✓
\$	Dir	275.40	✓
\$	R	671.45	X
\$	Atlan	1,229.40	✓
\$	SL	612.21	X
\$	R	69.20	X
\$	SL	680.90	X
\$	R	2,192.40	} X
\$	R	1,241.60	
\$	SL	561.40	
\$	R	4,682.09	
\$	R	2,844.66	
\$	R	467.30	
\$	SL	472.10	
\$	SL	41.80	
\$	SL	30.50	
\$	SL	190.50	
\$	SL	3,469.00	}
\$	SL	220.60	
\$	SL	543.50	
\$	SL	217.30	}
\$	SL	49.40	

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CO/GST Reg. No. 201019626G

SND 401K

AAD2008-069

- 1 STABILIZER BAR REAR
- 1 STABILIZER LINK REAR
- 1 SUBFRAME ARM REAR RH
- 1 ROD - LONG REAR RH
- 1 KNUCKLE HUB & BEARING RH
- 1 EXTENSION- REAR RH SIDE MEMBER

\$	Sn	427.90	}	X
\$	Sn	55.20		
\$	Sn	198.33		
\$	Sn	120.16		
\$	Sn	272.30		
\$	Sn	233.20		
TOTAL	\$	39,552.66		
10%	\$	3,955.27		
	\$	35,597.39		

Special Nett

- 1SET PARKING AID
- 1SET REAR BUMPER CLIP
- 1SET BUMPER BRACKET CTR CLIP
- 1SET BUMPER BRACKET SIDE CLIP RH RR
- 1SET BUMPER RETAINER RH CLIP RR
- 1SET BUMPER BRACKET SIDE CLIP LH RR
- 1SET BUMPER RETAINER CLIP LH RR
- 1SET BUMPER LOWER REAR RIVET
- 1SET BUMPER LOWER REAR CLIP
- 1 BOOT STICKER "Trans-cab"
- 1 BOOT STICKER "6555-3333"
- 1SET BOOT FINISHER CLIP
- 1 TAILLAMP CLIP LH
- 1 TAILLAMP CLIP RH
- 1 Rear Bumper Protector
- 1 REAR LICENCE PLATE WITH HOLDER
- 1 EXHAUST MOUNTING
- 1 FENDER INNER TRIM CLIP RH
- 1SET FENDER WHEELARCH REAR RH CLIP
- 2 REAR WINDSCREEN SEALANT
- 1 WINDSCREEN MOULDING
- 1 REAR WINDSCREEN INNER SPONGE SEAL
- 2 SEAM SEALANT

\$	Shan	700.00	400.00
\$	na	75.00	✓
\$	na	65.00	} X
\$	na	60.00	
\$	na	50.00	
\$	na	60.00	
\$	na	50.00	
\$	na	70.00	
\$	na	75.00	✓
\$	na	80.00	300.00
\$	na	80.00	300.00
\$	na	55.00	X
\$	na	40.00	5.00
\$	na	40.00	5.00
\$	na	180.00	300.00
\$	Sn	140.00	X
\$	Sn	90.00	X
\$	na	60.00	✓
\$	na	65.00	X
\$	na	150.00	400.00
\$	na	200.00	X
\$	na	130.00	300.00
\$	na	190.00	X

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AAD2008-069

1 REAR RENAULT TYRE 215/60/16	\$	PH	330.00	} X
1 REAR RENAULT TYRE RIM	\$	PH	380.00	
1 SPARE TYRE	\$	PH	330.00	
1 SET END PANEL TRIM CLIP	\$	NN	55.00	
1 SPARE TYRE 215/60/16	\$	PH	330.00	
1 SPARE TYRE RIM	\$	PH	380.00	
1 EXHAUST BRACKET	\$	PH	60.00	
1 EXHAUST SCREW	\$	PH	50.00	
1 EXHAUST CLAMP	\$	PH	68.80	
1 REAR DOOR STICKER "6555-3333"	\$	NN	100.00	
1 BOOT TRIM BOARD CLIP	\$	NN	65.00	
TOTAL	\$		4,853.80	

TOTAL PARTS \$ 40,451.19

LABOUR

To check steering geometry and computer wheel alignment	\$	NN	220.00	X
To drop rear exhaust box, renew the same, to repair and realign rear and centre exhaust pipe.	\$		380.00	801
To transfer of bootlid fittings, attachments and perform water seepage test.	\$		170.00	601
To remove and refit interior fittings, trimmings, garnish, fittings and other, to enable repair.	\$		380.00	1201
To transfer of rear bumper fittings, attachment and perform water seepage test.	\$	NN	170.00	X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	NN	380.00	X
Towing Fees	\$		150.00	501

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SHD 401K

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	2,800.00	2000
To transfer of tire, rim and on wheel balancing.	\$	nn 170.00	X
To transfer of rear fender fittings, attachment and perform water seepage test.	\$	nn 170.00	X
Labour charge to mount and dismount vehicle on jig bench, to facilitate repair.	\$	380.00	2500
To transfer of rear windscreen glass to facilitate bodywork repair.	\$	170.00	1200
To transfer of door fittings, attachment and perform water seepage test.	\$	nn 170.00	X
To Rust-Proofing and apply undercoat Of The Affected Areas.	\$	250.00	1200
To pull and jack out chassis frame and correct it to symmetrical position with the aid of hydraulic pneumatic jack.	\$	380.00	X
To transfer of rear luggage floor panel fittings, attachment and perform water seepage test.	\$	380.00	X
Putty and spray painting of the affected portion.	\$	2,800.00	1100
To dismantle and refit rear undercarriage parts, final checking and testing.	\$	380.00	2200
To dismantle and refit rear axle assy, remove and renewal of parts, final checking and testing.	\$	nn 380.00	X

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To reinstall rear bumper parking sensor.	\$	170.00	602
To Check Electrical Lighting Concerned.	\$	170.00	201
To repair and realign rear exhaust pipe.	\$	170.00	X
To check ABS and brake efficiency, final checking and testing.	\$	380.00	X
TOTAL	\$	11,170.00	
Over All Total	\$	51,621.19	

LUMP SUM (REPAIR DAY)

~~25 DAYS~~
14 days

For Official Use

Prepared By : _____ (Accident Dept)	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: _____
Verify By : _____ (Accident Workshop)	
Checked By : _____ (Finance Dept)	

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 17/08/2020 10:08
 Date Of Accident 14/08/2020 14:50
 Exact Location Of Accident CTE SLIP ROAD TOWARDS PIE
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD401K
Insured/Policyholder
 Name Of Registered Owner TRANS-CAB SERVICES PTE LTD
 Co Reg No 2XXXXX878K
 Email Address CLAIMS@TRANSCAB.COM.SG
 Mobile Phone No
 Alternative Phone No OFFICE-62866666

Vehicle Particulars

Manufacturer RENAULT
 Model LATITUDE-2.0 L (A)
 Exact Purpose for which vehicle was being used at time of accident HIRE AND REWARD
 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 AXA INSURANCE PTE LTD
 Type Of Coverage THIRD PARTY
 Fleet Policy YES
 Policy Number VFX/P2348706
 Cover Note Number

Driver

Name of Driver CHAN YEW WAH PETER
 NRIC No SXXXX105A
 Date Of Birth 24/01/1954
 Occupation OUTDOOR
 Date Of Driving Pass 05/01/1980
 Driving Experience 40 YEARS AND 7 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-98173493
 Fax Number
 Contact Number
 Email Address NOEMAIL

Address BLK 422 HOUGANG AVENUE 6
#10-132
Postcode 530422
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - RELIEF
Vehicle Registration Number of Driver's Own Vehicle -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
Weather Conditions RAINING
Road Surface WET

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) 3
Passenger 1 NAME: : UNKNOWN
GENDER: : MALE
Passenger 2 NAME: : UNKNOWN
GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
If Yes, Please state which Police Station
Police Station Name TAMPINES NORTH NPP
Police Station Address ROAD: 461 TAMPINES ST 44 #01-56 , POSTCODE: 520461 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: - FAX NO:
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT : T/20200814/2113

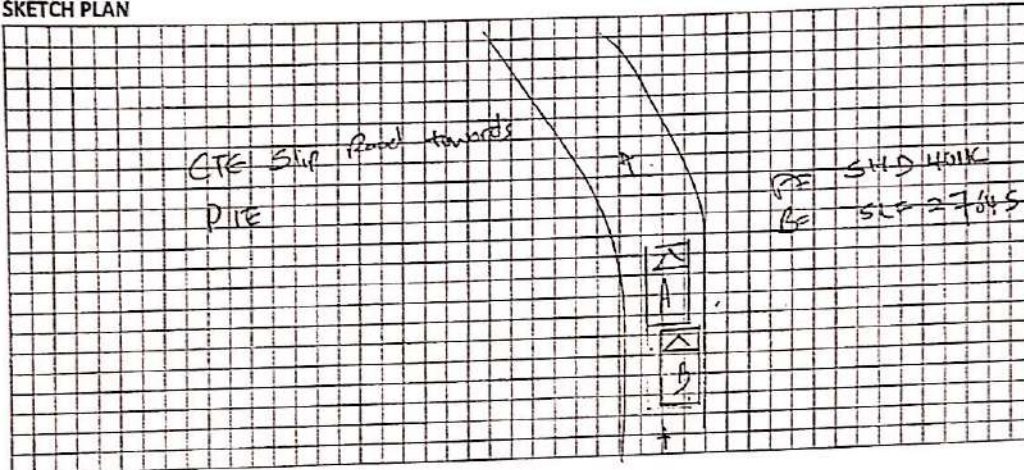
Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Remarks/ Reasons: VIDEO WITH TP
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLF2764S
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see attach Police Report

DECLARATION

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

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.:

GIAPMC SketchPlanForm_V3

2



**SINGAPORE
POLICE FORCE**



T/20200814/2113

1 of 3

Report No. T/20200814/2113

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/08/2020 20:19	Video Report No.:	Station Diary No.: 23
--	-------------------	--------------------------

Name of Informant: CHAN YEW WAH PETER		Address: APT BLK 422 HOUGANG AVENUE 6 #10-132 SINGAPORE 530422	
ID Type / ID No.: NRIC NO / S0008105A		Contact No.: Home/Office: Mobile: 98173493	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 66	Date of Birth: 24/01/1954	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: Date of Expiry:	

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/08/2020 14:50	Type of Location: Bridge
Location: CENTRAL EXPRESSWAY				
Lamp Post Number: 7F				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Vehicle No.	Vehicle Type	Driver	Witness	Remarks
SHD401K	Car			2
SLF2764S	Car			0

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



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999



T/20200814/2113

2 of 3

Report No. T/20200814/2113

CONTINUATION OF REPORT

Name	CHAN YEW WAH PETER	ID No.	S0008105A
Related Vehicle	SHD401K (Car)	Contact No.	98173493
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	NIL

Brief Details.

On 14/08/2020 at 1450hrs, I was driving my Taxi bearing carplate SHD401K along Central Expressway (SLE). As I approached a slip road leading towards Pan-Island Expressway (Airport) near lamp post number '7F', I noticed a Jorry (I can't recall the number plate) skidded in front of me. I slowed down my vehicle and suddenly a car behind me bearing carplate SLF2764S, collided with the rear of my taxi.

At the point of accident, I had 2 passengers (1 male 1 female) seated at my rear seat. Both drivers alighted and shortly after, Traffic Police Officers and Ambulance attended to our scene. The female passenger was conveyed by ambulance. I have an in-car camera installed in my taxi during this incident. The TP officers have seized the memory card of my camera. I was also given 5 days of Medical Certificate (MC) from 14 August 2020 till 18 August 2020.