

BIFROST AUTO PTE LTD

REPAIR ESTIMATE

DATE: 20-Oct-20

INSURANCE: MSIG

MODEL: HYUNDAI IONIC

VEHICLE NO.: SHA 3699 P

Description	Qty	List Price	Amount	
Boot Lid <i>Deudul</i>	1	\$ 2,480.40	\$ 2,480.40	✓
Boot Lid Rubber <i>Hec</i>	1	\$ 187.40	\$ 187.40	✓
Boot Lid Hinge (LH/RH) <i>NH</i>	2	\$ 71.30	\$ 142.60	X
Boot Lid Absorber (LH/RH) <i>NH</i>	2	\$ 86.70	\$ 173.40	X
Boot Lid 'H' Emblem <i>Hec</i>	1	\$ 28.00	\$ 28.00	✓
Emblem-Hybrid <i>Hec</i>	1	\$ 24.30	\$ 24.30	✓
Emblem-Ioniq <i>Hec</i>	1	\$ 31.30	\$ 31.30	✓
Rear Spoiler <i>End</i>	1	\$ 665.40	\$ 665.40	✓
Boot Lid Lamp(LH) <i>broken</i>	1	\$ 794.40	\$ 794.40	✓
Boot Lid Trimboard <i>NH</i>	1	\$ 259.70	\$ 259.70	X
Boot Lid Trimboard Clips (10pcs) <i>NH</i>	1	\$ 11.00	\$ 11.00	X
Boot Lid Trimboard SIDE (LH) <i>NH</i>	1	\$ 92.50	\$ 92.50	X
Boot Lid Trimboard REAR <i>NH</i>	1	\$ 124.80	\$ 124.80	X
Rear Bumper <i>broken</i>	1	\$ 459.40	\$ 459.40	✓
Rear Bumper Reinforcement <i>Hec/Cracked</i>	1	\$ 394.80	\$ 394.80	X✓
Rear Bumper Reinforcement Bracket (LH/RH) <i>NH O/S 2/3 1st</i>	2	\$ 188.10	\$ 376.20	X✓
Antenna Assy-SMARTK <i>broken NH</i>	1	\$ 689.50	\$ 689.50	X
Rear Bumper Lower Centre Moulding Assy <i>NH</i>	1	\$ 47.50	\$ 47.50	X
Rear Bumper Stay <i>NH</i>	1	\$ 138.10	\$ 138.10	X
Rear Bumper Side retainer (LH) <i>broken</i>	1	\$ 85.80	\$ 85.80	✓
Rear Bumper Cover Clips <i>Hec</i>	1	\$ 22.00	\$ 22.00	✓
Rear Bumper Under Centre <i>NH</i>	1	\$ 123.85	\$ 123.85	X
Rear Bumper Side Under(LH) <i>NH</i>	1	\$ 123.10	\$ 123.10	X
Rear Bumper Rear Hook <i>NH</i>	1	\$ 94.60	\$ 94.60	X
Rear Bumper Reflector Lamp(LH) <i>End</i>	1	\$ 82.90	\$ 82.90	✓
Rear Bumper Towing Cover <i>NH</i>	1	\$ 98.80	\$ 98.80	X
Rear Bumper Reserve Light (Parking Brake Light) <i>NH</i>	1	\$ 328.60	\$ 328.60	X
Tail Lamp(LH) <i>broken</i>	1	\$ 870.40	\$ 870.40	✓
Tail Lamp Quarter Panel(LH) <i>End</i>	1	\$ 208.90	\$ 208.90	✓
Rear Panel <i>Deudul</i>	1	\$ 532.00	\$ 532.00	✓
Antenna Assy - TRUNK <i>NH</i>	1	\$ 689.50	\$ 689.50	X
Rear Panel Garnish <i>NH</i>	1	\$ 346.80	\$ 346.80	X
Spare Tyre Holder <i>NH</i>	1	\$ 223.10	\$ 223.10	X
Spare Wheel Lock Nut <i>NH</i>	1	\$ 89.50	\$ 89.50	X
Spare Tyre Panel <i>NH</i>	1	\$ 892.50	\$ 892.50	X
Panel Assy-Rear Floor Side (LH) <i>NH</i>	1	\$ 39.40	\$ 39.40	X
Rear tray tools box LH <i>NH</i>	1	\$ 693.20	\$ 693.20	X
Rear Fender(LH) <i>End</i>	1	\$ 1,768.30	\$ 1,768.30	✓
Rear Fender Inner Panel (LH) <i>2x Deudul</i>	1	\$ 1,406.20	\$ 1,406.20	2✓
Rear Fender SHIELD REAR PIECE (LH) <i>form</i>	1	\$ 173.60	\$ 173.60	✓
Rear Fender SHIELD Frt Piece (LH) <i>NH</i>	1	\$ 165.50	\$ 165.50	X
Rear Fender Corner inner upper garnish (LH) <i>NH</i>	1	\$ 486.70	\$ 486.70	X

Phone Number:

Fax Number:

Customer:		Date:	23/10/2020 11:39 AM
Company:		VIN	
License NO:	SHA3699P	Technician:	
Odometer:		Order NO:	

VEHICLE ALIGNMENT REPORT

HYUNDAI, IONIQ hybrid 17> AE Series All Models, 17-17 (Customized)

Primary Angles			Initial	Specifications		Final
				Min.	Max.	
Front	Caster	Left	4°49'	4°00'	5°00'	4°50'
		Right	4°52'	4°00'	5°00'	4°53'
	Camber	Left	-0°25'	-1°00'	0°00'	-0°25'
		Right	-0°19'	-1°00'	0°00'	-0°19'
	Toe	Left	1°29' *	-0°02'	0°05'	1°50' *
		Right	-1°52' *	-0°02'	0°05'	-2°05' *
Total		-0°22' *	-0°04'	0°11'	-0°15' *	
Rear	Camber	Left	-2°15' *	-1°25'	-0°25'	-2°12' *
		Right	-1°37' *	-1°25'	-0°25'	-1°37' *
	Toe	Left	-3°37' *	0°00'	0°11'	-3°38' *
		Right	0°05'	0°00'	0°11'	0°05'
		Total	-3°32' *	0°00'	0°22'	-3°34' *
	Thrust Angle		1°51'	----		1°52'
Secondary Angles			Initial	Specifications		Final
				Min.	Max.	
SAI		Left	11°40' *	13°18'	14°18'	11°40' *
		Right	10°57' *	13°18'	14°18'	10°57' *
Included Angle		Left	11°15'	----	----	11°15'
		Right	10°38'	----	----	10°39'
Toe Out On Turns		Left	----	----	----	----
		Right	----	----	----	----
Max Turn Inside		Left	----	38°00'	41°00'	----
		Right	----	38°00'	41°00'	----
Toe Curve Change		Left	----	----	----	----
		Right	----	----	----	----
Setback		Front	-0.12"	----	----	-0.12"
		Rear	-0.80"	----	----	-0.80"
Track Width Diff.			-0.05"			-0.05"
Wheel Base Diff.			0.68"			0.68"
Front Ride Height		Left	----	----	----	----
		Right	----	----	----	----
Rear Ride Height		Left	----	----	----	----
		Right	----	----	----	----
Frame Angle						----

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	20/10/2020 14:51
Date Of Accident	20/10/2020 12:30
Exact Location Of Accident	SENGKANG EAST AVE TWDS SENGKANG WEST AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA3699P
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	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	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	FOO HIN
NRIC No	SXXXX964B
Date Of Birth	06/07/1950
Occupation	OUTDOOR
Date Of Driving Pass	10/02/1976
Driving Experience	44 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97735689
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 408B FERNVALE ROAD #16-18
Postcode	792408
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?	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?	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 1

Vehicle Registration Number	YM3604Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM CHIA YANG
NRIC/Passport Number	
Contact Number	84972786
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT RIGHT
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE


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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

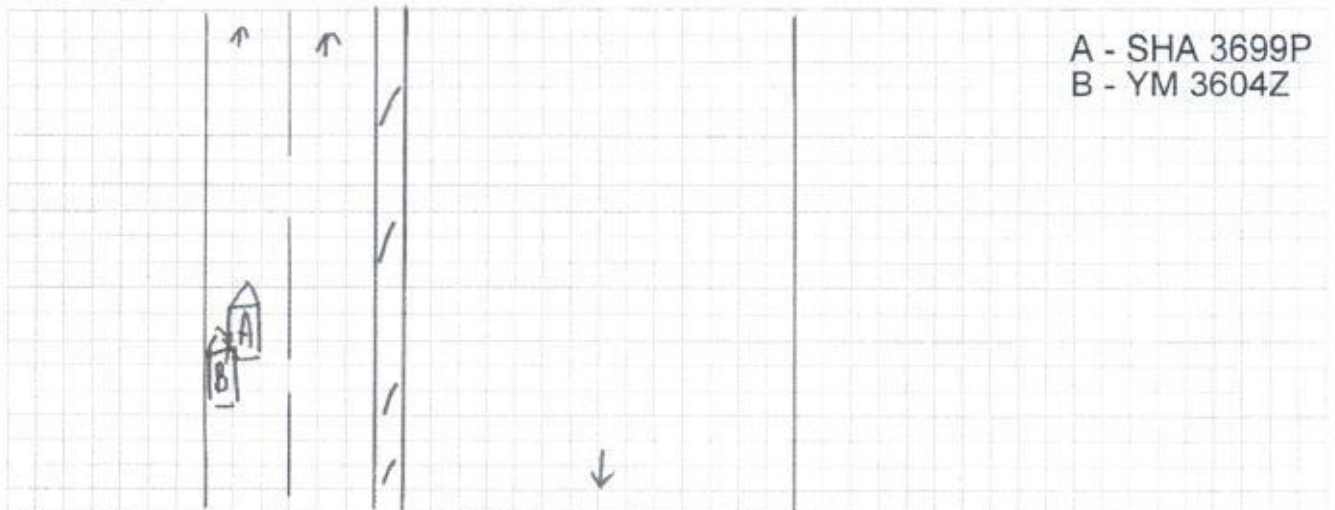
Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 20.10.2020
@ 14:00 hrs


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

Regina

SKETCH PLAN



Along Sengkang East Ave TWDS Sengkang West Ave

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20.10.2020 at about 12:30 hours I was travelling along Sengkang East Ave
TWDS Sengkang West Ave with No passenger onboard .
While I saw the vehicle infront of me slowed down and stop I followed too ,
Suddenly veh B (YM 3604Z) lost control and collided into my taxi A - Left Rear
Portion .
As it take place too fast I could not take evasive action to prevent .
I have company video and photo to support my claims .
Veh B (YM 3604Z) - Mr Lim Chia Yang H/P : 8497 2786

DECLARATION

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: 20.10.2020
@ 14:00 hrs

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

Regina