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 Rport: Consistent?: Yes or No Steering: Incoder / Jammed / Leaked / Burnt or Modi: Nin / S/Rim / STD A/Rim or Tyre Size: F: / 9 5 / 6 5 2 / 5 - R: W25 / 4 Leaked BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front Rear R/Bal. mm R/Bal. mm	ASS. REC. BY: Marcas Prom: Date: Estimated Cost: OD/TP/IWS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No: SHA U4950 at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: Cassing Confidence ASSIO ASS	Type: M.Car / M.Cycle / Bus / Van / Lorry (Taxi / Prime Mover / Truck / Trailer or S// Make: H.M. May: AEION 10 c.c / SB. Colour Blue A/C: Insured / Std / NI / NA Sp.Reading 1/9936 T/Radio: Insured / Std / NI / NA Eng/No: C/No: K.M. H.C.B.S. / C.V. K.U. 16.S. / 94 Gen. Cond: Good / Fair / Poor / Burnt Steering: Incree / Jammed / Leaked / Burnt or Brake: Incree / Jammed / Leaked / Burnt or Modi: NID / S/Rim / STD A/Rim or Tyre Size: F: / 9.S. / 6.S. / 3. R: W.S. / Insured / Std / NI / NA BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front C. Rear R/Bal. mm R/Bal. mm
From: Date: Date:	From: Date: Estimated Cost: OD/TF/WS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No: SHA UY9C) at Workshop m/s of Insured: SKU 1199M 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 Rport: Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Lum Sum: ASSIC	Type: M.Car / M.Cycle / Bus / Van / Lorry (Taxi / Prime Mover / Truck / Trailer or S// Make: H.M. May: AEION 10 c.c / SB. Colour Blue A/C: Insured / Std / NI / NA Sp.Reading 1/9936 T/Radio: Insured / Std / NI / NA Eng/No: C/No: K.M. H.C.B.S. / C.V. K.U. 16.S. / 94 Gen. Cond: Good / Fair / Poor / Burnt Steering: Incree / Jammed / Leaked / Burnt or Brake: Incree / Jammed / Leaked / Burnt or Modi: NID / S/Rim / STD A/Rim or Tyre Size: F: / 9.S. / 6.S. / 3. R: W.S. / Insured / Std / NI / NA BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front C. Rear R/Bal. mm R/Bal. mm
Estimated Cost: OD_TTP/WS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No: SHA WY95.) at Workshop m/s Conford Del Insured: SHA II99M 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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Lum Sum: /// % 3 Val.: Yes or No Lum Sum: /// % 3 Val.: Yes or No Lum Sum: /// % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN/OUT Date: Person Contacted: Veh No: SHA YY95 D Yr Regn: 8 / 9 Type: M.Carl M.Cycle / Bus / Van / Lorry (Tail Prime Mover) Truck/Trailer or A/C Insured / Std / NI/ NA AC: Insured / Std / NI/ NA Sp. Reading / 1990 6 T/Radio: Insured / Std / NI/ NA Eng/No: Colour 3 Lue A/C: Insured / Std / NI/ NA Sp. Reading / 1990 6 T/Radio: Insured / Std / NI/ NA Insured: Sp. Reading / 1990 6 T/Radio: Insured / Std / NI/ NA Sp. Reading / 1990 6 T/Radio: Insured / Std / NI/ NA Sp. Rea	Estimated Cost: OD/TP/WS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No: SHA U4950 at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: Cay days Res.: Yes or No Lum Sum: Condition Reservable Consistent?: Yes or No A Val.: Yes or No	Veh No: SHA YYGY Yr Regn: Type: M.Car / M.Cycle / Bus / Van / Lorry (Taxi / Prime Mover / Truck / Trailer or SA/ Make: MANGA : AEIONIO c.c /SB Colour Blue A/C: Insured / Std / NI / NA Sp.Reading 1/9936 T/Radio: Insured / Std / NI / NA Eng/No: C/No: KMHCBY / CVKU 165 / 94 Gen. Cond: Good / Fair / Poor / Burnt Steering: Incoder / Jammed / Leaked / Burnt or Brake: Incoder / Jammed / Leaked / Burnt or Modi: NiD / S/Rim / STD A/Rim or Tyre Size: F: /95 / 65 / 2 / 5 - R: Wls / Ialu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm
Estimated Cost: OD/TT/ I/WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: SHA U495.) at Workshop m/s Confort De(Insured: SKU / 199M 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 Rport: Consistent? : Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: / 27 % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Description: Truck / Trailer or 9/ Make: // Mrda ACIONIO	Estimated Cost: OD/ITP/WS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No: SHA U49C) at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: Cay days Res.: Yes or No Lum Sum: Consistent?: Yes or No A Val.: Yes or No	Make: Hydrad; AEIONIO c.c /SB) Colour Blue A/C: Insured / Std / NI / NA Sp.Reading 1/9936 T/Radio: Insured / Std / NI / NA Eng/No: C/No: KMHCBS/CVKU 665/9 Y Gen. Cond: Good / Fair / Poor / Burnt Steering: Insurer / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or Modi: NiD / S/Rim / STD A/Rim or Tyre Size: F: / 95 / 65 2 / 5 - R: Westale BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm
Truck / Trailer or 4/ To Inspect Vehicle No: SHA ULGS) at Workshop m/s Confort De(Insured: SKU 1199M 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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Lum Sum: 1/2	To Inspect Vehicle No: SHA WYSS at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: Can for Insured: N/S O/S N/S O/S Consistent?: Yes or No Consistent?: Yes or No Lum Sum: A Val.: Yes or No	Make: Hyunda; AEIONIQ c.c /SB Colour Blue A/C: Insured / Std / NI / NA Sp.Reading 1/9936 T/Radio: Insured / Std / NI / NA Eng/No: C/No: KMHCBS/CVKU 65 / 94 Gen. Cond: Good / Fair / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or Modi: NiD/S/Rim / STD A/Rim or Tyre Size: F: /95/65/2/5- R: W25/falu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm
To Inspect Vehicle No: SHA WYSSI at Workshop m/s Confort Del Shull 1990 at Workshop m/s Confort Del Shull 1990 Insured: Shull 1990 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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Lum Sum: 12-1 % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Person Contacted: Make: Myndai a GEIONIo c.c / Sho A/C: Insured / Std / NI / NA Sp.Reading / 19936 T/Radio: Insured / Std / NI / NA Eng/No: Colour 3/4e A/C: Insured / Std / NI / NA Sp.Reading / 19936 T/Radio: Insured / Std / NI / NA Eng/No: Colour 3/4e A/C: Insured / Std / NI / NA Sp.Reading / 19936 T/Radio: Insured / Std / NI / NA Eng/No: C/No: MHC & ST / CV KU 16 S' / 9 Gen. Condx:Goog / Fair / Poor / Burnt Steering: Incute! Jammed / Leaked / Burnt or Modi: NI) Sirim / STD AiRim or Tyre Size: F: / 9 S' / 6 S' 7 - R: W & St. / St.	To Inspect Vehicle No: at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: Cay days Res.: Yes or No Lum Sum: Consistent?: Yes or No 3 Val.: Yes or No	Colour Blue A/C: Insured / Std / NI / NA Sp.Reading // 996 T/Radio: Insured / Std / NI / NA Eng/No: C/No: KM + CBS / CV KU 165 / 9 / Gen. Cond: Good / Fair / Poor / Burnt Steering: Incoder / Jammed / Leaked / Burnt or Brake: Incoder / Jammed / Leaked / Burnt or Modi: NiD / S/Rim / STD A/Rim or Tyre Size: F: / 95 / 65 2 / 5 - R: W25 / Acc BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
at Workshop m/s of Insured: Skull99M Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Person Contacted: T/Radio: Insured / Std / NI / NA Eng/No: C/No: K M H C BS / CV K U 16 S / 9 Gen. Cond: Good / Fair / Poor / Burnt Steering: Incute! / Jammed / Leaked / Burnt or Modi: NIS O/S NIS O/S NIS O/S R: Was / Glu BB / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front Rear R/Bal. mm L/Bal. mm L/Bal. mm L/Bal. D.O.A. Survey held at Des. of Damages: Frt / Rear / O/S / NIS / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision.	Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Consistent?: Yes or No Est. Repairs: A Val.: Yes or No Lum Sum: Skull 199M N/S 0/S	Sp.Reading 119936 Eng/No: C/No: C/No: C/No: Gen. Cond: Good / Fair / Poor / Burnt Steering: Incoder / Jammed / Leaked / Burnt or Brake: Incoder / Jammed / Leaked / Burnt or Modi: NiD / S/Rim / STD A/Rim or Tyre Size: F: / 95 / 65 2 / 5 - R: West / Au BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm L/Bal. mm
Insured: Skul 199M	Insured: Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Consistent?: Yes or No Est. Repairs: A Val.: Yes or No Lum Sum: Skull 199M N/S 0/S	Eng/No: C/No: C/No: Gen. Cond: Good / Fair / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or Modi: NiD / S/Rim / STD A/Rim or Tyre Size: F: / 9 5 6 5 2 7 5 - R: Westawa BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
Policy No. Claims No. Sum Insured: (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 Rport: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Date: Person Contacted: C/No: KM H C & CV KU 16 C / Q Gen. Cond: Good / Fair / Poor / Burnt Steering: Insufer / Jammed / Leaked / Burnt or Modi: NIT/ S/Rim / STD A/Rim or Tyre Size: F: / 9 S / 6 S R R: W L C / Jammed / Leaked / Burnt or Modi: NIT/ S/Rim / STD A/Rim or Tyre Size: F: / 9 S / 6 S R R: R: W L C / Jammed / Leaked / Burnt or Modi: NIT/ S/Rim / STD A/Rim or Tyre Size: F: / 9 S / 6 S R R: R: W L C / Jammed / Leaked / Burnt or Modi: NIT/ S/Rim / STD A/Rim or Tyre Size: F: / 9 S / 6 S R R: R: W L C / Gen. Cond: Good / Fair / Poor / Burnt Steering: Insufer / Jammed / Leaked / Burnt or Modi: NIT/ S/Rim / STD A/Rim or Tyre Size: F: / 9 S / 6 S R R R R R R R R R R R R R R R R R R	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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	C/No: Gen. Cond: Good / Fair / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or Modi: NID / S/Rim / STD A/Rim or Tyre Size: F: / 9 5 / 65 2 / 5 - R: W25 / GLU BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: /// % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Steering: Incader / Jammed / Leaked / Burnt or Modi: Nit) S/Rim / STD A/Rim or Tyre Size: F: /// 95 / 65 2 / 5 - R: W/25 / 46 Luc BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front F/Bal. mm R/Bal. mm R/Bal. mm L/Bal. mm L/Bal. Do.o.1. 26 / In / 20 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Steering: Increte / Jammed / Leaked / Burnt or Brake: Increte / Jammed / Leaked / Burnt or Modi: NiD/S/Rim / STD A/Rim or Tyre Size: F: /95-/65-2-/5- R: Wlsf/alu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: /// % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Steering: Incader / Jammed / Leaked / Burnt or Modi: Nit) S/Rim / STD A/Rim or Tyre Size: F: /// 95 / 65 2 / 5 - R: W/25 / 46 Luc BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front F/Bal. mm R/Bal. mm R/Bal. mm L/Bal. mm L/Bal. Do.o.1. 26 / In / 20 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Steering: Increte / Jammed / Leaked / Burnt or Brake: Increte / Jammed / Leaked / Burnt or Modi: NiD/S/Rim / STD A/Rim or Tyre Size: F: /95-/65-2-/5- R: Wlsf/alu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
Steering: Incider / Jammed / Leaked / Burnt or Consistent Steering Incider / Jammed / Leaked / Burnt or	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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Brake: Igorder / Jammed / Leaked / Burnt or Modi: NID / S/Rim / STD A/Rim or Tyre Size: F: /95/65/2/5- R: W25/ala BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
Brake:	(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 Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Modi: NID/S/Rim / STD A/Rim or Tyre Size: F: /95/652/5- R: West/alu BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/ TOYO/YOKO or Front R/Bal. mm R/Bal. mm L/Bal. L/Bal. mm
Make of Veh: Modi: NiD/S/Rim / STD A/Rim or Tyre Size: F: /95 / 65 2 / 5- R: Wlst/alu Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: /// % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Modi: NiD/S/Rim / STD A/Rim or Tyre Size: F: /95 / 65 2 / 5- R: Wlst/alu Bs / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm L/Bal. mm D.O.A. 25/1/20 D.O.I. 26/11/20 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Modi: NID/S/Rim / STD A/Rim or Tyre Size: F: /95/652/5- R: West/alu BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/ TOYO/YOKO or Front R/Bal. mm R/Bal. mm L/Bal. L/Bal. mm
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Date: Person Contacted: Tyre Size: F: / 9 5 / 65 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6	(Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Tyre Size: F: /95/65/5- R: Westalu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. L/Bal. mm L/Bal. mm
Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Date: Person Contacted: R: Wls / alu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or R: Wls / alu BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Rear R/Bal. Mm R/Bal. Mm L/Bal. D.O.A. 25/11/20 D.O.I. 26/11/20 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: Adays Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	R: West late BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No Est. Repairs: Adays Res.: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Date: Person Contacted: N/S O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or R/Bal. R/Bal. mm R/Bal. mm L/Bal. D.O.A. D.O.A. Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision.	Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: Adays Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm
repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Consistent?: Yes or	repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No Consistent?: Yes or No Est. Repairs: Adays Res.: Yes or No Lum Sum: Adays Sum: Adays Sum: Consistent?: Yes or No Adays	TOYO / YOKO or Front R/Bal. mm R/Bal. mm L/Bal. mm mm
Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: /2/ % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Front R/Bal. mm L/Bal. mm L/Bal. D.O.A. 25/11/20 D.O.A. 25/11/20 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	Bal. or Market Value: IDAC Accident Rport: GIA / PR Seen: Consistent?: Yes or No Est. Repairs: Adays Res.: Yes or No Lum Sum: Market Value: Consistent?: Yes or No 3 Val.: Yes or No	Front R/Bal. mm R/Bal. mm L/Bal. mm
IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: /3 / % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: R/Bal. mm R/Bal. mm L/Bal. mm D.O.A. 25/11/20 D.O.I. 26/11/20 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	IDAC Accident Rport: GIA / PR Seen: Consistent?: Yes or No Consistent?: Yes or No days Res.: Yes or No Lum Sum: 3 Val.: Yes or No	R/Bal. mm R/Bal. mm
IDAC Accident Rport: Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Date: Person Contacted: Consistent?: Yes or No L/Bal. D.O.A. 25/11/20 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 2 days Res.: Yes or No Lum Sum: /// % 3 Val.: Yes or No	L/Bal. L/Bal. mm
Est. Repairs: 2 days Res.: Yes or No Lum Sum: /3 / % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Vehicle: IN / OUT Disc.: Person Contacted: Use or No Vehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision.	Est. Repairs: 2 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	L/Dal.
Lum Sum: /3 / % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	Lum Sum: /3 / % 3 Val.: Yes or No	D.O.A. 25/11/20 D.O.I. V6/11/20
Lum Sum: / % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision	Lum Sum: % 3 Val.: Yes or No	
Date: Person Contacted: Vehicle: IN / OUT Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision	CA / REV / REP. / 24 HRS	
Vehicle: IN / OUT Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision		
Date.	Vehicle: IN / OUT	
Date / Time Action / Instruction	Date.	The U/C / Chassis frame / Body Structure anected due to commission.
	Date / Time Action / Instruction	
		1
Date/Time, File Pass to? Days Of Repair:	Date/Time, File Pass to? ; Preli. Report	
: Final Report Resurvey No. of Trip: Survey Fee:	: Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?		
2) Add Fee: : Site Insp (\$)s + Rs,si	Add Fe	ee:: Site Insp (\$S+RS,SI
: Interview (\$) Photos		: Interview (\$) Photos
Report Format : : Tech. Invs (\$) Others	Penort Format :	: Tech. Invs (\$) Others
Vehore i orinee i	Lump Sum / I B I: (\$: Weekend (\$

TOTAL

COMFORTDELGRO ENGINEERING PTE LTD

Date: 25.11.2020 Time: 14:39:10

Page: 1

REPAIR ESTIMATE

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO

: 305435479 : SHA4495D

MILEAGE

: 0000000000

MAKE MODEL : HYUNDAI : IONIQ(G2)

DATE OF REGN

: 06.08.2019

DATE/TIME IN

: 25.11.2020 11:15

ACCIDENT DATE

: 25.11.2020

JOB / PARTS DESCRIPTION

OTY IND UNIT-PRICE DISC% AMOUNT

PART REOUISITION

0001 04-01-0104-2282-G IONIQVC COVER-RR BUMPER# 1 L 459.40 20.00 367.52

0002 04-01-0101-0111-G HYUNDAI BUMPER COVER CLIP 10 L 22.00 20.00 17.60 AL

0003 04-01-0104-2533-G IONIQV2-4 MOULDING ASSY-R 1 L 451.25 20.00 361.00

0004 04-01-0104-2545-G IONIQVC MOULDING-REAR BUM 1 L 155.00 2.00- 155.00 L 🗸

0005 09-01-9999-0068-A HYUNDAI REVERSE SENSOR AS 1 N 180.00 0.20 180.00 ?

0006 04-01-0104-1150-A IONIQVC PROTECTOR MAT 1 N 50.00 0.02- 50.00

0007 FNPS

NO PLATE(S) WITH TRIM COV 1 N 55.00 0.00 55.00

SUB-TOTAL : 1,186.12

JOB NATURE

0000 L

PANEL BEATING

350.00 - 320

0001 23-502

SPRAYPAINT ON AFFECTED AREA

250.00 - 200

0002 20-22

REMOVE/REFIX REVERSE SENSOR

80.00 - 40

SUB-TOTAL : 680.00

Not Authorial Male HP9009660R

125 he betore garen. 2 days
The petore garen. 2 days
The petore garen. 2 days
The petore garen.

OMFORTDELGRO

. member of COMFORTDELGRO

(R) (P)

OUNT CARD NO.

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701

Mainline + 65 6383 6280 Facsimile + 65 6280 9755

S9 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717 45 Pandan Road Singapore 609286

24 Senoko Loop Singapore 758156 7 Sungei Kadut Way Singapore 728791 501 Yishun Industrial Park A Singapore 768732

MILEAGE

Date/Time: 320 955 01 35 19 90 21 96 64 1 3:55

'eam: ARC Repair TP(CLSO)1

Accident Date: 25.11.2020

JOB CARD Sales Order:

MODEL

REAR

JC NO:305435479

Page: 1

OMER COMFORT TRANSPORTATION PTE LTD 15 7010045 OMER NO 383 SIN MING DRIVE RESS

Singapore SINGAPORE 575717 65508755 (O)

CHINA

REGN NO.: SHA4495D MAKE: HYUNDAI

IONIQ(G2)

FUEL1/2.... 25.11.2020 11:15 TARGET DATE

YR OF MANU. 06.08.2019 CHASSIS CODE KMHC851CVKU165194 COMPLETION DATE/TIME:

JOB DESCRIPTION

VATURE: 3P 25.11.2020 FRONT LABOR CODE DESCRIPTION 3/NO SIDE LEFT SIDE

KED	& PAS	SED	DUT	BY:

ledgement Slip

Service Advisor

Vo.:

SERVICE ADVISOR

Exit Pass

Vehicle No.: SHA4495D SHA4495D

Signature/Date

Name of Service Advisor

Date

CUSTOMER'S SIGNATURE

turned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 25.11.2020

Time: 14:39:10

Page: 2

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO

: 305435479 : SHA4495D

REGN NO MILEAGE

: 00000000000000

MAKE

: 0000000000 : HYUNDAI

MODEL

IONIQ(G2)

DATE OF REGN DATE/TIME IN 06.08.2019 25.11.2020 11:1

ACCIDENT DATE

25.11.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL

: 1,866.12

- 1

AUTHORISED : YES / NO SURVEYOR NAME & SIGNATURE

MVA NAME & SIGNATURE DATE:

DATE:

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:

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

ACCIDENT STATEMENT	ACCI	DENT	STAT	EMENT
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Date Of Report Date Of Accident 25/11/2020 13:16

Exact Location Of Accident

25/11/2020 09:45 BT TIMAH RD

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHA4495D

Insured/Policyholder

Name Of Registered Owner

COMFORT TRANSPORTATION PTE LTD 1XXXXX821R

Co Reg No **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?

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

SAMRI BIN HASSAN

NRIC No

SXXXX409Z

Date Of Birth

10/03/1962

Occupation

OUTDOOR

Date Of Driving Pass

14/11/1996

Driving Experience

24 YEARS AND 0 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-90995090

Fax Number

Contact Number

FMail Address

SAMRIHASSAN01@GMAIL.COM

Address

438 #06-408 FAJAR ROAD

Postcode (

670438

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

vernicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

CHAIN COLLISION

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

3

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

2

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:

120

Remarks/ Reasons.

-

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Make/Model/Colour SKU1199M

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Posicode

Insurance Company Name

Nature Of Damage

FRT & REAR

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SMM3368Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

, Postcode

Insurance Company Name

Nature Of Damage

FRT

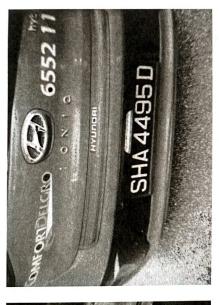
No. Of Passenger (Including Driver)

A-SHA 449	50	
B- SKU 119	9 M	
C-SMM 336	8 \/	
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DECLARATION		
I/We declare the foregoing particul	lars are true in every respect.	
COMFORT TRANSPOR CO. REG. NO. 19		
Della hall 1 0	> Your I	2.5
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. Larry Ng

11302

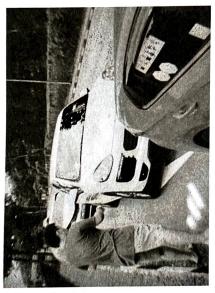
Sketch Plan Pg. 2

pescribe circumstances of the Accid	2611.		
On 25.11.2020, at about 0945hrs, I	was diving my Comfort taxi, SHA	4495D, on the right lan	e
long Bt Timah Rd wih 1 male pax.			
Veather was clear and moderate tr	affic. Somewhere after the Hum	e Ave, the front vehicle	es
raked and stopped. I stopped too	· Commence		
ight after I had stopped, I felt an ir	mpact from the rear. I went out	to check and saw a	
rivate car, B, had hit my taxi rear.	There was another car, C, that h	ad hit B rear involved	
n the chain collision. I have a video	recording of the accident impa	ct. Photos taken at the	
cene.			
lo injury at the time of accident.			
9-26-	No. of the second		
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eclaration			
We declare the foregoing particulars are t	true in every respect.		
COMFORT TRANSPORTATION PTE	LTL		
CO. REG. NO. 199303821R	11.		
×	ymy"	Larry No	
	Signature(If driver is not the policyholder)/Date	Witnessed by Rep	portin
me & Time	52.11-5050	Centre Personn	iel
	1130~,		

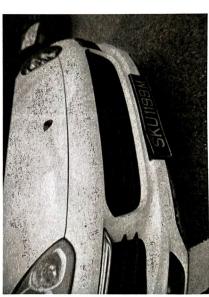












> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID: Vehicle Details	821R	
Vehicle No.:	SHA4495D	
Vehicle to be Exported:	No	
Intended Deregistration Date:	26 Nov 2020	
Vehicle Make:	HYUNDAI	
Vehicle Model:	AE IONIQ HEV 1.6 DCT	
Primary Colour:	Blue	
Manufacturing Year:	2019	
Engine No.:	G4LEKU299930	
Chassis No.:	KMHC851CVKU165194	
Maximum Power Output:	103.6 kW (138 bhp)	
Open Market Value:	\$25,018.00	
Original Registration Date:	06 Aug 2019	
First Registration Date:	06 Aug 2019	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$12,026.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	05 Aug 2027	
PARF Rebate Amount: Intended COE Rebate Details	\$9,019.00	
COE Expiry Date:	05 Aug 2027	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	8	
PQP Paid:	\$23,463.00	
COE Rebate Amount:	\$19,631.00	
Total Rebate Amount: Message	\$28,650.00	

vehicle reaches its statutory lifespan (if applicable), whichever is earlier. The information contained herein is correct as at 26 Nov 2020