

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

NTUC-CP(P)

LKK

Date: 04.12.2020

Time: 12:37:37

Page: 1/3

TS

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305436869
 REGN NO : SH 8099X
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ(G3)
 DATE OF REGN : 30.09.2020
 DATE/TIME IN : 03.12.2020 10:50
 ACCIDENT DATE : 03.12.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0104-0578-G	FRT BUMPER	1	430.90	20.00	344.72	one ✓
0002 04-01-0104-2687-G	FRT BUMPER CTR MOULDING	1	188.00	20.00	150.40	✓
0003 04-01-0104-4994-G	DAY RUNNING LIGHT RH	1	624.50	20.00	499.60	?
0004 04-01-0104-2686-G	FRT BUMPER MOULDING RH	1	93.90	20.00	75.12	cut ✓
0005 04-01-0104-2971-G	FRT BUMPER SIDE SUPT RH	1	35.00	20.00	28.00	?
0006 04-01-0104-3918-G	FRT BUMPER SIDE BRKT RH	1	28.00	20.00	22.40	?
0007 04-01-0104-0641-G	HEADLAMP SUPPORT PANEL	1	949.30	20.00	759.44	?
0008 04-01-0104-2684-G	AIR CURTAIN DUCT RH	1	153.80	20.00	123.04	?
0009 04-01-0104-0810-G	ROCKER PANEL GARNISH RH	1	290.00	20.00	232.00	RP
0010 04-01-0104-0592-G	FRT DOOR RH	1	1,797.20	20.00	1,437.76	bt ✓
0011 04-01-0104-2468-G	FRT DR LWR MOULDING RH	1	186.20	20.00	148.96	mis ✓
0012 04-01-0104-2935-G	HEADLAMP RH	1	1,993.65	20.00	1,594.92	one ✓
0013 04-01-0104-0573-G	FRT FENDER RH	1	588.80	20.00	471.04	bt ✓

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JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0014 04-01-0104-3913-G	FRT FENDER BLUE-DRIVE RH	1	26.60	20.00	21.28	nei
0015 04-01-0104-2934-G	FRT FENDER SHIELD RH	1	164.70	20.00	131.76	?
0016 04-01-0104-2538-G	WING MIRROR RH	1	1,391.70	20.00	1,113.36	ent
0017 03-01-0104-2137-G	FRT WHEEL CAP RH	1	346.40	20.00	277.12	ent
0018 04-01-0104-2470-G	REAR DR LWR MOULDING RH	1	166.20	20.00	132.96	ent
0019 28-01-0103-0003-A	Frt Door ComfortDelGro RH	1	75.00	10.00	67.50	nei
0020 28-01-0103-2013-A	Rear Door APPS Sticker RH	1	80.00	10.00	72.00	nei
0021 04-01-0104-2572-G	FRT DOOR OTR HANDLE RH	1	108.40	20.00	86.72	fy

SUB-TOTAL : 7,790.10

JOB NATURE

0000 PB PANEL BEATING

900.00

640 .

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JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0001 SP	SPRAYPAINT CHARGE	1500.00		800.		
0002 17-01	CHECK ALL LIGHTING	50.00		30.		
0003 20-00	TUFF COAT ON AFFECTED PARTS.	100.00		30.		
0004 L	TRANSFER OF DOOR	120.00		60.		
0005 L	WHEEL ALIGNMENT	120.00		80.		
0006 L	R/I AIR CON CONDENSER ETC	150.00		100?		

SUB-TOTAL : 2,940.00

TOTAL : 10,730.10

MVA NAME & SIGNATURE
 DATE :

AUTHORISED : YES / NO
 SURVEYOR NAME & SIGNATURE
 DATE :

Taufik 97495749
 WP 4/12/20 @ 3pm
 P/P Resurvey before paint
 24 days
 taufik@lkkandb.com
 +66

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:

COMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops

59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
320 Joo Road Singapore 408649

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

Date/Time: 03.12.2020 15:18

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.:305436869

CUSTOMER
COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (O)
(P)

REGN NO: SH 8099X	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ(G3)	DATE/TIME IN 03.12.2020 10:50
YR OF MANU. 30.09.2020	TARGET DATE
CHASSIS CODE KMH851CVLU189637	COMPLETION DATE/TIME:

UNIT CARD NO.

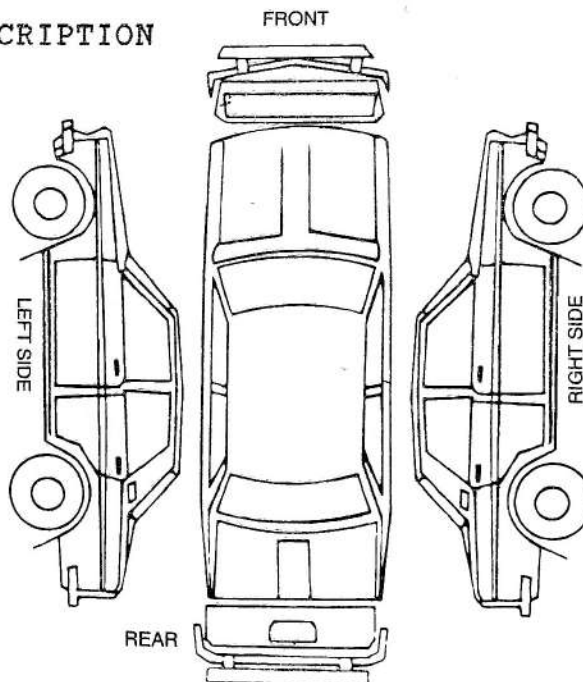
JOB DESCRIPTION

Accident Date: 03.12.2020
NATURE: 3P 03.12.2020/C

/NO

LABOR CODE

DESCRIPTION



D & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

gement Slip

Exit Pass

SH 8099X

LIMITS

Vehicle No.:

SH 8099X

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 Submission 03/12/2020 12:29 (SGT)
Date of Accident 03/12/2020 09:10 (SGT)
Exact Location of Accident Tuas South Street 5, Singapore
Additional Location Information ALONG TUAS SOUTH STREET 5
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SH8099X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD
Company Reg No 1XXXXX821R
Email Address fleetsafety@cdgtaxi.com.sg
Mobile Phone No (Phone) +65-65508768
Alternative Phone No (Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Ioniq
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Taxi

INSURANCE COMPANY

Name of Insurance Company First Capital
Type of Coverage ThirdPartyFireTheft
Fleet Policy Yes
Policy Number D-18088936MFSH
Cover Note Number -

DRIVER

Name of Driver WONG KWEE LIAN (MS)
NRIC No SXXXX467I
Date Of Birth 22/08/1954
Occupation Outdoor

Date Of Driving Pass	27/06/1979
Driving experience	41 YEARS AND 6 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91209859
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	307a 01-34 ANCHORVALE ROAD
Address complement	-
Postcode	541037
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	-
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
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
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE2270M
Vehicle Manufacturer	Adiva
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	slight
Details of property damaged in accident	rear left
No. Of Passenger (Including Driver)	-

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.
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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.
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 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, investigation, 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:

Reporting Centre Personnel's Signature
Name:
NRIC/Fin No.: 03 DEC 2020

SKETCH PLAN

A = S H 8099 X

B = X E 2270 M

(MITSUBISHI TRAILER)

W/S

TUAL SOUTH ST 5

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 31/12/2020 @ 0910hrs, I was driving along Tual South ST 5 direction with passenger on board my taxi.

There was a Lorry of XE 2270M ahead and stop in the middle lane of the two way lane. As the lorry stopping there, I proceed to drive and stop at the stopping line.

Just as I was about to drive off, Suddenly the said lorry drive off and turning towards my taxi right side portion. The results caused my taxi whole right side damage.

No injury at the point of accident.

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:

Reporting Centre Personnel's Signature
Name: Olivia Wendy
NRIC/Fin No.:

03 DEC 2020