

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969

Our Ref :

305437875
08-12-2020

Date :

Time of Fax :

Via Fax :

EMail

Your Insured:

2R 5308J

Date of Acc :

08-12-2020

Attn: Motor Claims Department

WLG

Dear Sirs

SURVEY OF CLIENT'S DAMAGED VEHICLE REG NO. SH

6105X

Our client has engaged us to repair the above vehicle and submit claims against the other party/parties-involved in the accident __

In accordance to the motor claims framework, we hereby request your presence at 59 Loyang Drive, Singapore 508969 to survey our client's damaged vehicle.

Enclosed, please find:

- Our initial estimate of repairs of the damaged vehicle;
- Accident report made by our client.

I would appreciate it if you could call us to arrange for the survey of the vehicle:-

♦ Lim Kwok Eng	Tel: 6214 8316 or HP: 9824 0811	} jumanibm@cdge.com.sg Fax no. 6546 8156
♦ Jumanibm Masudin	Tel: 6214 8315 or HP: 9635 5305	
♦ Lim Tien Siong	Tel: 6214 8398 or HP: 9635 8546	
♦ Chiang Liat Choon	Tel: 6214 8314 or HP: 9296 6006	
♦ Larry Ng Nyuk Phin	Tel: 6214 8315 or HP: 9230 2824	
♦ Fauzy Bin Mokhtar	Tel: 6214 8319 or HP: 8125 9176	

→ If we do not hear from you within the next 48 hours, we shall deem that you have waived your rights to survey our client's vehicle and we shall proceed to engage independent surveyor without further reference to you. We henceforth reserve our rights to claim for Loss of Use and Loss of Rental during any delayed period of this survey arrangement.

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a Motor Surveyor appointed by the Insurance company.

Thank you.

Yours faithfully

for Vice President
Crash Repairs & Claims Recovery

COMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
Mainline + 65 6983 6280 Facsimile + 65 6280 9755

Workshops

59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
220 Upper Road Singapore 219649

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

Date/Time: 08.12.2020 15:39

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO.: 305437875

COMER
AS
COMER NO.
RESS
COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755

(R)
(P)

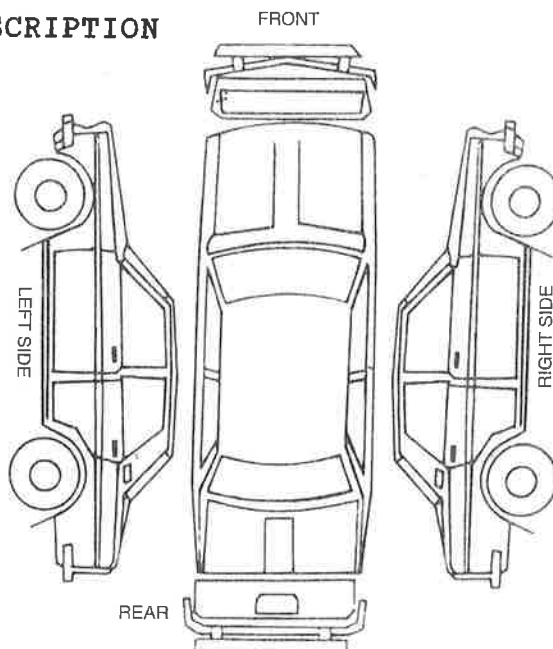
OUNT CARD NO.

REGN NO.	SH 6115X	MILEAGE
MAKE	HYUNDAI	FUEL
MODEL	I-40	E.....1/2.....F
YR OF MANU.	19.11.2015	DATE/TIME IN 08.12.2020 12:00
CHASSIS CODE	KMHLB41UMGU080269	TARGET DATE
		COMPLETION DATE/TIME:

Accident Date: 08.12.2020
NATURE: 3P 08.12.2020

JOB DESCRIPTION

3/NO LABOR CODE DESCRIPTION



OKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

Vehicle No.:

SH 6115X

No.: SH 6115X JU AIG

f Service Advisor

Signature/Date

Name of Service Advisor

Date

To be kept by Security Guard

turned to Service Reception upon collection

COMFORTDELGRO ENGINEERING PTE LTD

Date: 08.12.2020

REPAIR ESTIMATE

Time: 15:49:21

Page: 1

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

JOB NO : 305437875
REGN NO : SH 6115X
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 19.11.2015
DATE/TIME IN : 08.12.2020 12:00
ACCIDENT DATE : 08.12.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-2322-A	I40V3 BUMPER W LIP & FOG	1	1,052.20	20.00	841.76
0002 04-01-0103-0781-A	I40VC LAMP ASSY-HEAD LH#	1	1,800.00	20.00	1,440.00
0003 04-01-0103-0574-A	I40VC PANEL-FENDER LH+	1	663.00	20.00	530.40
0004 04-01-0103-0658-G	I40VC CAP ASSY-WHEEL HUB	1	217.20	20.00	173.76
0005 04-01-0103-0639-G	I40VC BRACKET-FR BUMPER S	1	24.60	20.00	19.68
0006 04-01-0103-0637-G	I40VC BRKT ASSY-FR BPR UP	1	22.40	20.00	17.92
0007 04-01-0103-2834-A	I40V3 GUARD ASSY-FRONT WH	1	174.90	20.00	139.92
0008 04-01-0103-4892-G	I40V3 AIR DUCT-FR BUMPER	1	126.20	20.00	100.96

SUB-TOTAL : 3,264.40

JOB NATURE

0000 PB	PANEL BEATING	600.00
0001 SP	SPRAYPAINT CHARGE	500.00
0002 17-01	CHECK ALL LIGHTING	50.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 08.12.2020

REPAIR ESTIMATE

Time: 15:49:21

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 : 305437875
REGN NO : SH 6115X
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 19.11.2015
DATE/TIME IN : 08.12.2020 12:0
ACCIDENT DATE : 08.12.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0003 20-00 TUFF COAT ON AFFECTED PARTS.

30.00

SUB-TOTAL : 1,180.00

TOTAL : 4,444.40

MVA NAME & SIGNATURE

DATE :

SURVEYOR NAME & SIGNATURE

DATE :

AUTHORISED : YES / NO

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	08/12/2020 15:21 (SGT)
Date of Accident	08/12/2020 12:00 (SGT)
Exact Location of Accident	Choa Chu Kang Way, Singapore
Additional Location Information	ALONG CHOA CHU KANG WAY TWDS SUNGEI KADUT DRIVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH6115X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXXXX1R
Email Address	FLEETSAFETY@CDGETAXI.COM.SG
Mobile Phone No	(Phone) +65-65508768
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	I40
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	India International
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	MCOM0015
Cover Note Number	-

DRIVER

Name of Driver	ABDUL JABBAR MAIDEEN ABDUL KADAR
NRIC No	SXXXX450G
Date Of Birth	02/08/1974
Occupation	Outdoor

Date Of Driving Pass	06/03/1997
Driving experience	23 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92215400
Alt. Phone Number	-
Email Address	THALADEEN@GMAIL.COM
Address	BLK 57 LENGKOK BAHRU
Address complement	#12-485
Postcode	151057
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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

REFER ATTACHED

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	SLR5308T
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	YANG FENGSHAN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AIG

Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

MODERATE
RIGHT FRONT
1

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 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 to 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.
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.

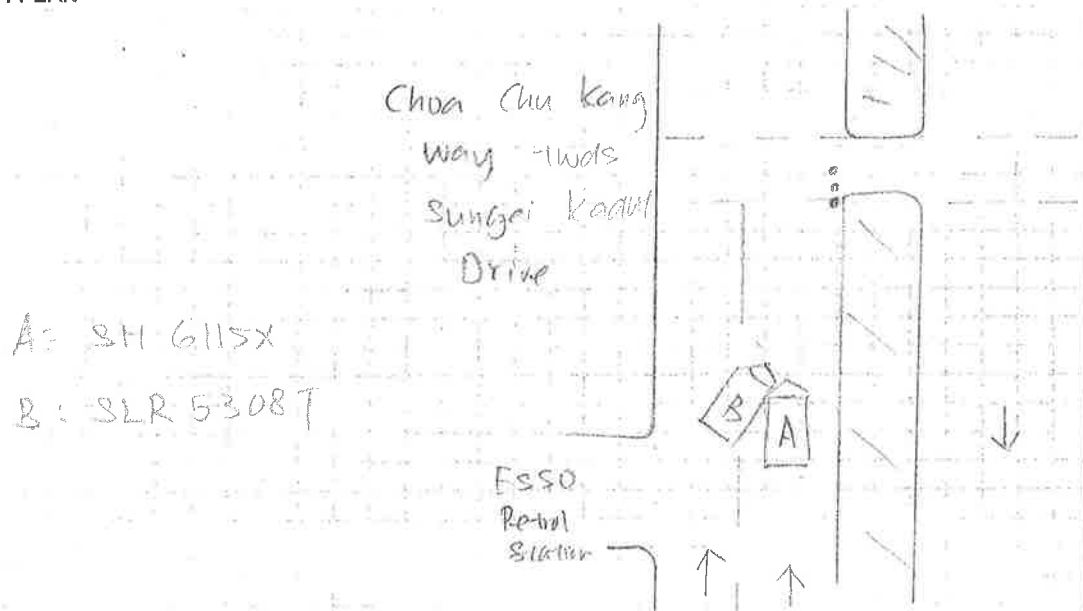
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 08/12/2020 at about 12:00 hrs, I Veh A was
stopped at above said location waiting traffic light to change.
I started to moving forward when traffic light turned green.
Shortly I felt an impact from left hand side then I realised
Veh B cut into my lane from left lane ran into accident
with my taxi. Veh B right front portion collided onto the left
front portion of my taxi. No passenger in my taxi and 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: Loke Wei Yeng
NRIC/Fin No.:

