

REPAIR ESTIMATE*

VEHICLE NO SHC3588X

DATE 11/08/20 12:00 AM

MAKE :

MODEL : HYUNDAI IONIQ G3

CHIANG/AIG

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	FRONT BUMPER COVER			\$418.30
1	FRONT BUMPER BRACKET RH			\$35.00
1	FRONT BUMPER REINFORCEMENT			\$1,075.10
1	FRONT BUMPER CENTRE MOULDING			\$368.50
1	FRONT RADIATOR GRILLE			\$1,409.10
1	FRONT BUMPER LOWER STIFFNER			\$285.10
1	HEAD LAMP SUPPORT PANEL			\$949.30
1	HEAD LAMP RH			\$1,993.65
1	FRONT DAY LIGHT RH			\$642.50
1	BUMPER GRILLE RH			\$186.90
	SUB TOTAL			\$7,363.45
	LESS 20%			\$1,472.69
	DISCOUNTED TOTAL			\$5,890.76
1	FRONT NUMBER PLATE W/HOLDER			\$55.00
				\$55.00
	Labour Charge			
	Panel Beating		320	\$640.00
	Spray Painting Charge		300	\$500.00
	WIRING		30	\$60.00
	Tuff Kote		X	\$60.00
	TOTAL LABOUR			\$1,260.00
	ESTIMATE TOTAL			\$7,205.76

Tanphie 97495749
 wr 16/12/2025
 62 days
 p/o Reusing new parts
 Reusing after repair
 Tanphie Khambum

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:

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.

Date/Time: 16.12.2020 10:48

Page : 1

Team: ARC Repair TP(CFSO)1

JOB CARD

Sales Order:

JC NO.: 305439291

STOMER

CITYCAB PTE LTD

/MS 7010070
STOMER NO. 383 SIN MING DRIVE
DRESS Singapore SINGAPORE 575717
65551188

(R) (O)

(P)

COUNT CARD NO.

REGN NO.

SHB3588X

MILEAGE

MAKE :

HYUNDAI

FUEL

E.....1/2.....F

MODEL

IONIQ(G3)

16.12.2020 08:15

YR OF MANU.

24.09.2019

TARGET DATE

CHASSIS CODE

KMHC851CVLU178576

COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 15.12.2020

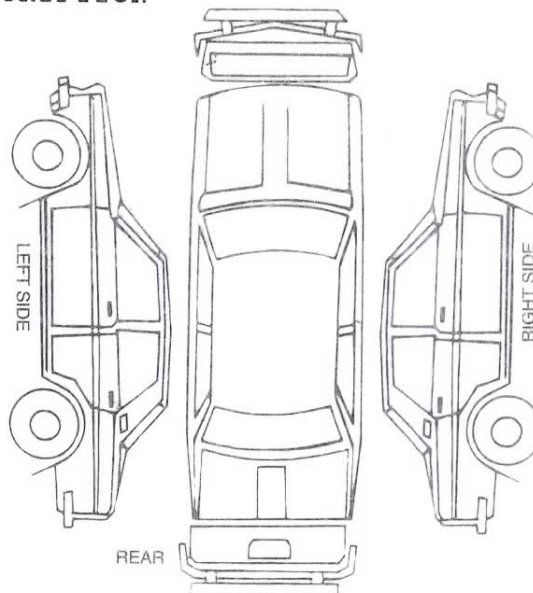
NATURE: 3P 15.12.2020

S/NO

LABOR CODE

DESCRIPTION

FRONT



LOCKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

No.: SHB3588X

CHIANG

Vehicle No.:

SHB3588X

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

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	16/12/2020 10:35 (SGT)
Date of Accident	15/12/2020 16:20 (SGT)
Exact Location of Accident	Cuscaden Rd, Singapore
Additional Location Information	ALONG CUSCADEN ROAD TWDS ORCHARD AND ST REGIS RESIDENCE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB3588X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CITYCAB PTE LTD
Company Reg No	1XXXXX839G
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-18088937MFSH
Cover Note Number	-

DRIVER

Name of Driver	TAY YONG CHAI
NRIC No	SXXXX325E
Date Of Birth	07/01/1972

Occupation	Outdoor
Date Of Driving Pass	19/10/1995
Driving experience	25 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96189358
Alt. Phone Number	-
Email Address	ADRIANTAY2009@HOTMAIL.COM
Address	BLK 700A ANG MO KIO AVENUE 6
Address complement	#18-304
Postcode	561700
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	Collision - Head on collision
Weather Conditions	Raining
Road Surface	Wet

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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	-
Gender	Female

PASSENGER 2

Name	-
Gender	Female

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

PLS REFER TO ATTACHED
Type of accident : HEAD TO SIDE

ATTACHMENT(S)

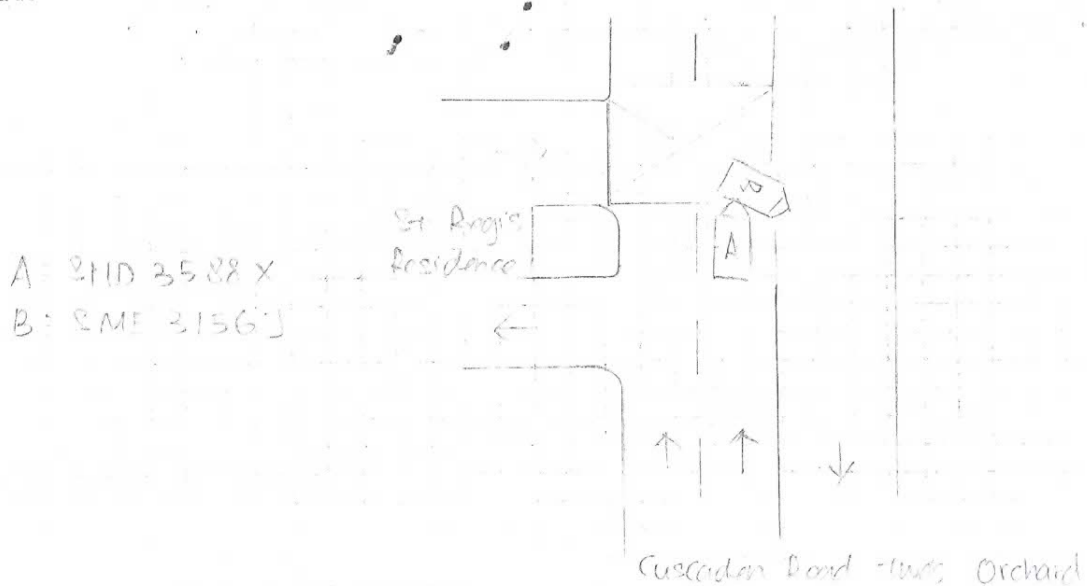
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME3156J
Vehicle Manufacturer	Mitsubishi

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	HONG KING SCIN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AIG
Nature Of Damage	MODERATE
Details of property damaged in accident	RIGHT REAR
No. Of Passenger (Including Driver)	-

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 15/12/2020 at about 16:30 hrs, I Veh A was proceeding
straight at above said location. Out of sudden, Veh B drove out
from minor went in front my taxi. I attempt to applied brake to
avoid collision upon seeing this. However, Veh B right rear portion
still collided onto the front right portion of my taxi.
Both of us then alighted to take scene photo and exchange particulars.
02 female passenger in my taxi and no injury at the point of
accident.

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: 16.12.2020
NRIC/Fin No.:

