

# COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969

Our Ref : 308440294  
Date : 22.12.2020  
Time of Fax : —

Via Fax : EMAIL  
Your Insured : SGS 21182  
Date of Acc : 18.12.2020

Attn: Motor Claims Department

ALG

Dear Sirs

**SURVEY OF CLIENT'S DAMAGED VEHICLE REG NO. SH D 3284 L**

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:

- i) Our initial estimate of repairs of the damaged vehicle;
- ii) 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 8355 or HP: 9824 0811
◆ Jumani Bin Masudin	Tel: 6214 8315 or HP: 9635 5305
◆ Lim Tien Siong	Tel: 6214 8398 or HP: 9635 8546
◆ <b>Chiang Liat Choon</b>	<b>Tel: 6214 8314 or HP: 9296 6006</b>

} **chianglc@cdge.com.sg**  
**Fax no. 6546 8156**

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  
Taxi Accident Repair

## COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO SHD3284L

DATE 18.12.20

MAKE :

CHIANG/AIG

MODEL I-40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	FRONT BUMPER COVER			\$1,052.20
10	BUMPER CLIP			\$22.00
1	FRONT BUMPER BRACKET TOP LH/			\$44.80
1	FRONT BUMPER BRACKET SIDE /LH			\$49.20
	<b>SUB TOTAL</b>			<b>\$1,168.20</b>
	<b>20.00%</b>			<b>\$233.64</b>
				<b>\$934.56</b>
	<b>Labour Charge</b>			
	Panel Beating			\$480.00
	Spray painting			\$400.00
	Check lighting			\$50.00
				<b>\$930.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$1,864.56</b>
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.				



## 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	21/12/2020 16:06 (SGT)
Date of Accident	18/12/2020 16:00 (SGT)
Exact Location of Accident	Tanglin Rd, Singapore
Additional Location Information	ESSO TANGLIN RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD3284L
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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	HSU CHEN TAN WINSON (XU ZHENDAN)
NRIC No	SXXXX149G
Date Of Birth	24/01/1978
Occupation	Outdoor

Date Of Driving Pass	21/08/1995
Driving experience	25 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97558168
Alt. Phone Number	-
Email Address	winelimo@gmail.com
Address	BLK 880 YISHUN STREET 81
Address complement	#03-263
Postcode	760880
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 to Rear
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  
\* TYPE OF ACCIDENT :- 3P REVERSED

#### 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	SGS2118Z
Vehicle Manufacturer	Kia
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MASROMANO BIN ROHIN
Contact Number	(Phone) +65-98754337
Address	-
Address complement	-
Postcode	-

Insurance Company Name	AIG
Nature Of Damage	NO DAMAGE
Details of property damaged in accident	
No. Of Passenger (Including Driver)	1

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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 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.:

Olive Wendy  
21 950 7100

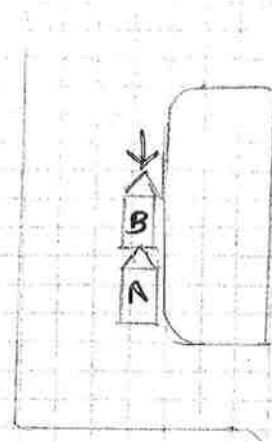
SKETCH PLAN

A 2 SHD 3284L

ESSO

B = SGS 21182  
(Kia)

OH



TANGLIN RD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 18/12/2020 @ 1600hrs, I was driving towards ESSO Petrol Station at Tanglin Rd direction with no passenger on board my taxi.

I parked my taxi behind the vehicle of SGS 21182. I then heard a sound and found out the said vehicle had reversed and hit onto my parked taxi.

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. 103303621R

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: 21 DEC 2020