

EMI ASSIGNMENT

SUB 2292E

17 Aug 2017

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Prius 1.8 cc 1798

Colour: yellow A/C Insured / Std / NI / NA

Sp Reading: 516665 T/Radio, Insured / Std / NI / NA

Eng/No.

C/No: JTDKB3FU163560316

Gen Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size: F: 195/65 R15

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or westlake

Front

Rear

R/Bal: 6 mm R/Bal: 6 mm

L/Bal: 6 mm L/Bal: 6 mm

D.O.A

D.O.I: 14-01-2021

Survey held at

W/S 3pm

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Estimated Cost

TP / WS / TP RES / OD RES / EVA / INV / MV

Inspect Vehicle No:

Workshop m/s: Comfort layang

Insured:

Policy No.

Claims No

Insured:

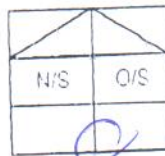
Excess

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Actual or Market Value:

DAC: Accident Report

Consistent? : Yes or No

IA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

7

days

Res: Yes or No

Sum Sum:

20

%

3 Val: Yes or No

CA / REV / REP. / 24 HRS

Vehicle IN / OUT

Date

Person Contacted

Date / Time

Action / Instruction

Confirmed COR \$1600 before GST @ 2days

(Red: 604.70; 27%)

Date/Time, File Pass to?



: Preli. Report



: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip:

And Fee:



Site Insp: (\$



Interview: (\$



Report: (\$



Other: (\$

Survey Fee:

Transportation

Site Fee: (\$

Phone

Other



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	13/01/2021 17:08 (SGT)
Date of Accident	13/01/2021 09:40 (SGT)
Exact Location of Accident	KPE, Singapore
Additional Location Information	BEFORE TUNNEL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB2292E
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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	Toyota
Model	Prius
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	Axa
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419140
Cover Note Number	-

DRIVER

Name of Driver	WONG KONG BENG
NRIC No	SXXXX376C
Date Of Birth	26/11/1951

Date Of Driving Pass	21/05/1970
Driving experience	50 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96906139
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 135 EDGEDALE PLAINS
Address complement	#10-90
Postcode	820135
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	DRIZZLING
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)	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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO ATTACHED
POLICE REPORT : T/20210113/2085

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	GBD518D
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Tokio Marine
Nature Of Damage	MODERATE
Details of property damaged in accident	FRT
No. Of Passenger (Including Driver)	-

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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.

CITYCAB PTE LTD
POLICY NO. 1995026316

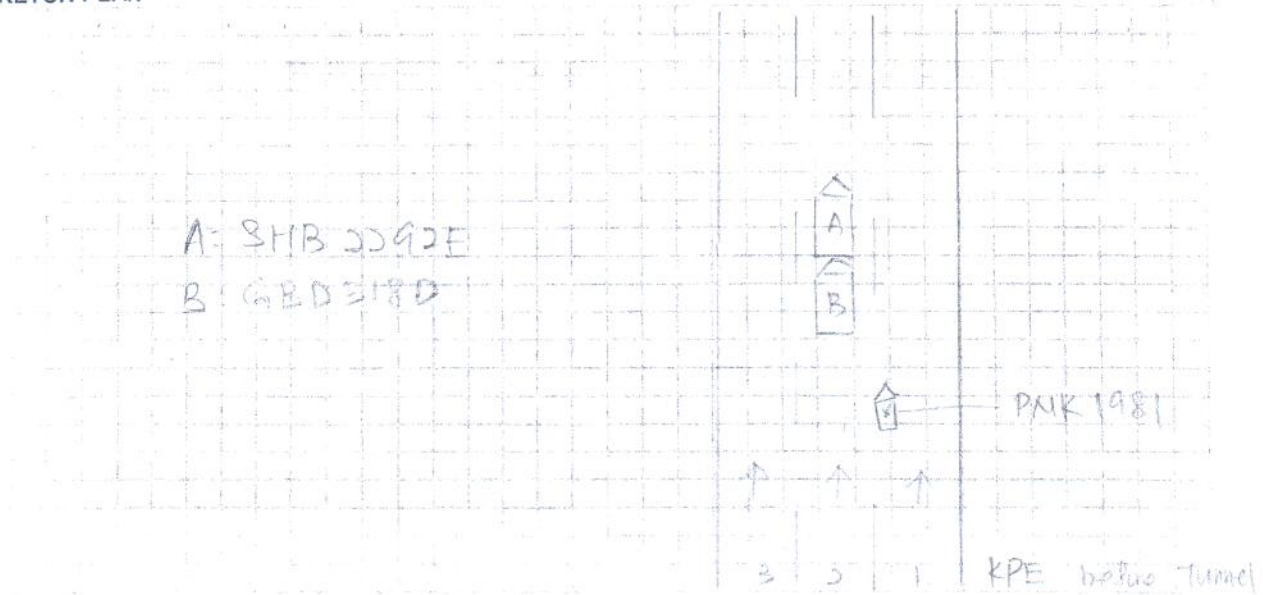
Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: *Indira Mohd Razak*
NRIC/Fin No.:

13-01-2021

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached police report.

T/2020113 / 2085

DECLARATION

I/We declare the foregoing particulars are true in every respect.

CITYCAB PTE LTD
C.V. REG. NO. 1895021300

Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: Loke Wei Yiang
NRIC/Fin No.:

13.01.2021



SINGAPORE
POLICE FORCE



T/20210113/2085

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20210113/2085

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2021 13:52	Vide Report No.: F/20210113/0063	Station Diary No.:
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Informant's Particulars

Name of Informant: WONG KONG BENG			Address: APT BLK 135 EDGEDALE PLAINS #10-90 SINGAPORE 820135		
ID Type / ID No.: NRIC NO / S0177376C			Contact No.: Home/Office: Mobile: 96906139		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 69	Date of Birth: 26/11/1951	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/01/2021 09:40	Type of Location:
Location: KALLANG PAYA LEBAR EXPRESSWAY				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB2292E	Car	TOYOTA	PRIUS HYBRID 1.8 CVT	Yellow		1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



SINGAPORE
POLICE FORCE



T/20210113/2085

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20210113/2085

CONTINUATION OF REPORT

Driver			
Name	WONG KONG BENG		ID No. S0177376C
Related Vehicle	SHB2292E (Car)		Contact No. 96906139
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL

Brief Details.

On the stated date, time and place,

I was driving my taxi, SHB2292E on the centre of 3-lanes along KPE, and a car in front of me suddenly applied an emergency brake. So, I also applied brake and managed to stop in time to avoid the collision with the car. Then, a van (GBD518D) from behind hit onto the back of my taxi. A few seconds later, I recalled that I had slightly opened the door to check for oncoming traffic. My leg was not out yet. I then saw a motorcycle self-skid from a distance away (about 4 cars length away from my taxi). The motorcycle self-skidded and fell near to the driver's side of my car. I approach the van driver and exchanged particulars with him as there were no injury on both of us. The van driver called the police and ambulance. I exchanged particulars with the van driver and took pictures of the scene. I assisted the rider as well and I could see that he has a minor bleeding on his right knee. I remembered giving my contact number to the LTA Marshal and the van driver. I did not give any contact number to the motorcyclist. But I managed to take a photo of his work permit. The rider is one Tai Fah Yah (S Pass No: 4 04896393). After I have settled with the van driver, I was told by the LTA marshal that I could leave the scene and so I did. I was also aware that Ambulance was at scene. No one was injured but I was not sure if the rider was sent by ambulance. There was no damage on my driver's door. The motorcyclist did not hit onto my door. I received a call from a private number and he said that I should come back to No. 38 Kim Chuan Rd to settle about the motorcycle accident. I was not sure about the procedure and the phone was private so I told the officer that I will be heading to my taxi company. Before I could reach to the taxi company, I received a call from Traffic Police Investigation Officer Abdillah. I came down to Traffic Police and provided my SD card to him and lodge an accident report. Case is under IO Abdillah, Ext: 65476246. That's all.

SINGAPORE
POLICE FORCE

T/20210113/2085

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20210113/2085

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
TP /
SC NAFEES ABDUL KADER

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sgt 2 HO JIEKANG, IVAN
Contact No.: 65476170

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
13/01/2021 13:52

Classification Of Case:

SINGAPORE
POLICE FORCE

Signature:

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

Lim Tien Siong

C. Park Lot: L8TP INSURER: Tokio Marine Insurance Singapore Ltd (HQ)
CCPL

Singapore

LKR-Taufik.
(45)

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	13/01/2021
Vehicle Reg. No.:	SHB2292E	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	TOYOTA PRIUS, 1.8 HYBRID CVT (A)	Vehicle Reg. Date:	17/08/2017
Vehicle Colour:	YELLOW	Gen Condition:	GOOD
Engine No:	2ZRS053273	Chassis No:	JTDKB3FU103560316
Odometer:	0 KM		
Paint Type:			
List Item Discount:	25.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	1,373.70
Miscellaneous Items	11.00
Labour	820.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	2,204.70
+ GST 7.00% (S\$)	154.33
Nett Amount (S\$)	2,359.03

This claim is handled by: LIM TIEN SIONG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 14 Jan 2021)**Parts:** 144 TOYOTA PRIUS 1.8 HYBRID CVT (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** ComfortDelGro Engineering Pte Ltd/SHB2292E/14/01/2021 08:41**Validity:** These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk *.**Estimates on Parts**

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*REAR BUMPER / RE	25.00	0.00	*458.60 FL
2	1		*REAR BUMPER CENTRE GUARD / CA	25.00	0.00	*552.60 FL
3	1		*REAR BUMPER REINFORCEMENT - BT	25.00	0.00	*318.80 FL
4	1		*REAR BUMPER EXTENSION LH - RE	25.00	0.00	*232.00 FL
5	10		*REAR BUMPER CLIPS - KC	25.00	0.00	*22.00 FL
6	1		*REAR BUMPER MAT - SCR	0.00	0.00	*50.00 F
7	1		*REVERSE SENSOR / DM	0.00	0.00	*135.70 F

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)

1,769.70

- List Item Discount on L Items (S\$)

396.00

Total Parts (S\$)

1,373.70

ComfortDelGro Engineering Pte Ltd/SHB2292E/14/01/2021 08:41. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Lim Tien Siong

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount
Miscellaneous Items			
1	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			11.00

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New	350 400.00
2	SPRAY PAINTING	New	250 300.00
3	R/I REVERSE SENSOR	New	40 120.00
Gross Labour Cost (S\$)			820.00

ComfortDelGro Engineering Pte Ltd/SHB2292E/14/01/2021 08:41. Not valid without Reference section.
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< END OF ESTIMATES >

2 Days.

1600

Carson repair

After repair photos.

Caro Qing.

14/1/2021

**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 items must be surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

OMFORTDELGRO 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 24 Seroko Loop Singapore 758156
383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 728791
45 Papdan Road, Singapore 609286 501 Yishun Industrial Park A Singapore 768732
320 Upper Road, Singapore 201549

Date/Time: 14.01.2021 08:20

Page : 1

Team: ARC Repair TP(CFSO)1

JOB CARD Sales Order:

JC NO.: 305448121

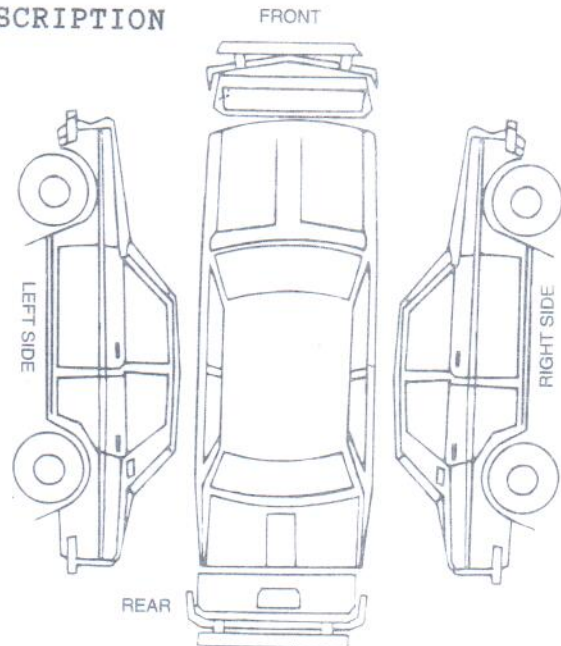
OMER S CITYCAB PTE LTD 7010070 OMER NO. 383 SIN MING DRIVE ESS Singapore SINGAPORE 575717 65551188 (R) (O) (P)	REGN NO. SHB2292E MAKE : TOYOTA MODEL PRIUS HYBRID(G4)13.01.2021 15:25 YR OF MANU. 17.08.2017 CHASSIS CODE JTDKB3FU103560316	MILEAGE FUEL E.....1/2.....F DATE/TIME IN TARGET DATE COMPLETION DATE/TIME:
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DUNT CARD NO.

JOB DESCRIPTION

Accident Date: 13.01.2021
NATURE: 3P 13.01.2021

3/NO LABOR CODE DESCRIPTION



WOKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

acknowledgement Slip

Exit Pass

No.: SHB2292E LIMITS

Vehicle No.: SHB2292E

Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard