

ASS. BY:

REF: CS/MSG 21002809/Dvd3

ASSIGNMENT

COB Aug 2024

From: _____ Date: _____

Estimate Cost: _____

OD / E / FS / TP RES / OD RES / EVA / INV / MV

To Insp Vehicle No: _____

at Work m/s _____

of _____

Insured _____

Policy # _____

Claims # _____

Sum Insured: _____

Excess: _____

(Check Record)

Make of Veh: _____

(Police Condition)

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

Bal. of Market Value: _____

IDAC Accident Report _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 7 days Res.: Yes or NoLump Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHB 3018A Yr Regn: Aug 2016

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

Truck / Trailer or

Make: Hyundai I40 C.D. 1685

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

Sp. Reading: 481307 T/Radio: Insured / Std / NI / NA

Eng/No: D4FDGU662599

C/No: KMH LB41UMG-U092611

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 A/Rim or

Tyre Size: F: 205/60R16

R: 11

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

TOYO / YOKO or

Westlake

Front

Rear

R/Bal: 8 mmR/Bal: 8 mmL/Bal: 8 mmL/Bal: 8 mm

D.O.A. 28/02/2021

D.O.L. 03/03/2021

Survey held at Bitrost Sin Ming

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

Front y Rear

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

Date / Time

Action / Instruction

MSG SLV 41057

Date/Time, File Pass to?

: Prefl. Report

1)

Date/Time, File Return to?

: Final Report

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Insp (\$)

Report Format: _____

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	839G
Vehicle Details	
Vehicle No.:	SHB3018A
Vehicle to be Exported:	Yes
Intended Deregistration Date:	02 Mar 2021
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Primary Colour:	Yellow
Manufacturing Year:	2016
Engine No.:	D4FDGU662599
Chassis No.:	KMHLB41UMGU092611
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$18,769.00
Original Registration Date:	11 Aug 2016
First Registration Date:	11 Aug 2016
Transfer Count:	0
Actual ARF Paid:	\$18,769.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	10 Aug 2024
PARF Rebate Amount:	\$14,076.00
Intended COE Rebate Details	
COE Expiry Date:	10 Aug 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$41,215.00
COE Rebate Amount:	\$17,713.00
Total Rebate Amount:	\$31,789.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 02 Mar 2021

OK

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	28/02/2021 17:24 (SGT)
Date of Accident	28/02/2021 11:55 (SGT)
Exact Location of Accident	MCE, Singapore
Additional Location Information	TOWARDS WEST COAST HIGHWAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB3018A
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) +65-90254816
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	Axa
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419140
Cover Note Number	-

DRIVER

Name of Driver	LOY SAI CHEE
NRIC No	SXXXX321A
Date Of Birth	09/12/1954
Occupation	Outdoor



Date Of Driving Pass	05/08/1976
Driving experience	44 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90254816
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 124 PAYA LEBAR WAY #19-2917
Address complement	-
Postcode	381124
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	HE FANG
Gender	Female

PASSENGER 2

Name	UNKNOWN
Gender	Female

PASSENGER 3

Name	UNKNOWN
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

ON 28/2/2021 AT ABOUT 1155HRS, I WAS DRIVING VEHICLE A (SHB3018A) ALONG MCE TOWARDS AYE. JUST AFTER EXITING THE TUNNEL, VEHICLE B (SJI5209B) MADE AN EMERGENCY BRAKE. I COULDN'T STOP ON TIME. MY VEHICLE REAR ENDED VEHICLE B DUE TO VEHICLE C (SLV4105Y) REAR ENDING ONTO MY VEHICLE. MY VEHICLE'S FRONT AND REAR DAMAGED. EXCHANGED PARTICULARS. ONE OF MY PASSENGERS SUSTAINED INJURY ON HER KNEE.

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	SJL5209B
Vehicle Manufacturer	Honda
Vehicle Model	Fit
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHEW KOK FEUNG
NRIC No	SXXXX085G
Contact Number	(Phone) +65-98767250
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLV4105Y
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	RADHA KRISHNAN
NRIC No	SXXXX573G
Contact Number	(Phone) +65-91518081
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	HE FANG (PEDESTRIAN)
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT BRUISES ON RIGHT KNEE
Injured person in which vehicle?	SHB3018A
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No



SKETCH PLAN

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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) of

(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.

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Larry Ng
02.03.2021

2/3/2021

Describe Circumstances of the Accident

On 28/1/2021 AT ABOUT 1155HRS, I WAS DRIVING VEHICLE A (SHB 3018A) ALONG MEK TOWARDS MYE. JUST AFTER EXITING THE TUNNEL, VEHICLE B (STK 3209B) MADE AN EMERGENCY BRAKE AND I COULD STOP ON TIME. MY VEHICLE REAR ENDED VEHICLE B DUE TO VEHICLE C (SLV 4105Y) REAR ENDED ONTO MY VEHICLE. MY VEHICLE FRONT AND REAR DAMAGED. EXCHANGED PARTICULARS. ONE OF PASSENGER FISTIAN INJURED ON HER KNEE.

Declaration

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

Witnessed by Reporting Centre Personnel



28/1/21 / 1434 hrs



Brany

BIFROST AUTO PTE LTD

REPAIR ESTIMATE

DATE: 1-Mar-21

INSURANCE: M S I G.

MODEL: HYUNDAI I40

VEHICLE NO.: SHB3018A

DESCRIPTION	QTY	LIST PRICE	AMOUNT
BOOTLID <i>bst</i>	1	\$2,174.90	\$2,174.90
BOOTLID RUBBER <i>damaged / torn</i>	1	\$96.50	\$96.50
BOOTLID I40 EMBLEM (I40) <i>has src</i>	1	\$67.90	\$67.90
BOOTLID 'H' EMBLEM <i>huc</i>	1	\$63.10	\$63.10
BOOTLID CRDI PLATE <i>HH</i>	1	\$52.40	\$52.40
BOOTLID LAMP (LH/RH) <i>crack 565.60 x 2</i>	2	\$1,131.20	\$2,262.40
REAR BOOT PROTECTOR <i>HF</i>	1	\$980.80	\$980.80
BOOTLID MOULDING (I40) <i>src</i>	1	\$385.30	\$385.30
REAR BUMPER <i>Rear 1 damaged</i>	1	\$1,106.00	\$1,106.00
REAR BUMPER REINFORCEMENT BRACKET <i>bst</i>	1	\$160.60	\$160.60
REAR BUMPER REINFORCEMENT <i>crack</i>	1	\$428.40	\$428.40
REAR BUMPER CLIP (10 pcs) <i>huc</i>	1	\$22.00	\$22.00
REAR BUMPER BRACKET <i>HH</i>	2	\$35.60	\$71.20
REAR BUMPER SPONGE <i>torn</i>	1	\$119.50	\$119.50
REAR BUMPER UNDER COVER <i>damaged</i>	1	\$228.00	\$228.00
REAR BUMPER PROTECTOR (LH/RH) <i>HF</i>	2	\$33.20	\$66.40
TAIL LAMP (LH/RH) <i>crack</i>	2	\$697.80	\$1,395.60
TAIL LAMP QUARTER PANEL (LH/RH) <i>HH</i>	2	\$453.00	\$906.00
TAIL LAMP PANEL TOP (LH/RH) <i>HH</i>	2	\$545.90	\$1,091.80
TAIL LAMP LOWER PANEL (LH/RH) <i>HH</i>	2	\$225.60	\$451.20
REAR PANEL <i>Rear</i>	1	\$526.70	\$526.70
REAR PANEL INNER PANEL (I40) <i>HH</i>	1	\$380.00	\$380.00
REAR PANEL LOWER <i>Rear</i>	1	\$495.50	\$495.50
REAR PANEL GARNISH <i>src</i>	1	\$57.70	\$57.70
SPARE TYRE HOLDER <i>HH</i>	1	\$248.00	\$248.00
SPARE WHEEL LOCK NUT <i>HH</i>	1	\$41.80	\$41.80
SPARE TYRE PANEL <i>Rear 1 repair</i>	1	\$852.80	\$852.80
SPARE TYRE PANEL CUSHION <i>HH</i>	1	\$223.10	\$223.10
EXHAUST PIPE INSULATOR (LH/RH) <i>HH</i>	2	\$117.10	\$234.20
EXHAUST SILENCER (LH/RH) <i>bst 0/S N/S HH</i>	2	\$1,935.40	\$3,870.80
RADIATOR GRILLE H EMBLEM <i>broken</i>	1	\$129.50	\$129.50
RADIATOR GRILLE <i>broken</i>	1	\$1,480.00	\$1,480.00
FRONT BUMPER COVER <i>damaged / bst</i>	1	\$1,052.20	\$1,052.20
FRONT BUMPER SPONGE <i>torn</i>	1	\$379.20	\$379.20
FRONT BUMPER REINFORCEMENT <i>src</i>	1	\$588.40	\$588.40
FRONT BUMPER LIP <i>HF</i>	1	\$152.00	\$152.00
FRONT BUMPER BRACKET TOP (LH/RH) <i>HH</i>	2	\$44.80	\$89.60
FRONT BUMPER CENTRE GRILLE TOP GARNISH (I40) <i>HH</i>	1	\$80.00	\$80.00
FRONT BUMPER BRACKET (LH/RH) <i>HH</i>	2	\$49.20	\$98.40
FRONT BUMPER SIDE BRACKET (LH/RH) <i>HH</i>	2	\$28.60	\$57.20
FRONT BUMPER RETAINER MOUNTING <i>HH</i>	2	\$76.20	\$152.40
HEADLAMP SUPPORT PANEL ASSY <i>src</i>	1	\$907.40	\$907.40
HEADLAMP (LH/RH) <i>money broken 130800 x 2</i>	2	\$2,776.00	\$5,552.00

HEADLAMP SUPPORT TOP COVER HH	1	\$222.60	\$222.60	X
RADIATOR 2 SN	1	\$1,637.20	\$1,637.20	2X
RADIATOR GUARD (LH/RH) HH	2	\$76.50	\$153.00	X
RADIATOR BRACKET (LH/RH) HH	2	\$13.00	\$26.00	X
COOLANT HH	1	\$ 45.00	\$ 45.00	X
RADIATOR FAN BLADE, COWLING, MOTOR ASSY HH	1	\$1,194.20	\$1,194.20	X
AIRCON CONDENSER 1st	1	\$947.80	\$947.80	✓
INTER COOLER HH	1	\$1,032.50	\$1,032.50	X
HOSE B TO INTER COOLER HH	1	\$229.70	\$229.70	X
HOSE C TO INTER COOLER INLET HH	1	\$294.50	\$294.50	X
SUB TOTAL			\$35,561.40	14757.50
LESS 20%			\$7,112.28	11806.00
DISCOUNTED TOTAL			\$28,449.12	
BOOTLID CITYCAB LOGO & TEL NO. STICKER Hec SN	1	\$39.00	\$39.00	✓
REAR BUMPER RESERVE SENSOR P=wh SN	1	\$118.00	\$118.00	✓
REAR BUMPER REVERSE SENSOR 1st SN	1	\$135.70	\$135.70	X
REAR BUMPER RUBBER MAT / I40 PLATE Hec SN	1	\$50.00	\$50.00	✓ 207.00
FRONT NUMBER PLATE HH SN	1	\$25.00	\$25.00	X
FRONT NO. PLATE TRIM COVER HH SN	1	\$30.00	\$30.00	X
SUB TOTAL			\$397.70	
Labour Charge				
Panel Beating	1	\$1,800.00	\$1,800.00	900/-
Spray Painting Charge	1	\$1,600.00	\$1,600.00	900/-
Wiring Charge	1	\$120.00	\$120.00	30/-
Tuff Kote	1	\$100.00	\$100.00	40/-
Towing Charge	1	\$80.00	\$80.00	HH 2100/-
Remove/Refix Reverse Sensor	1	\$120.00	\$120.00	40/-
Remove/Refix Exhaust Pipe	1	\$150.00	\$150.00	60/-
Remove/Refix Radiator	1	\$90.00	\$90.00	50/-
Remove/Refix Aircon & Refill Gas	1	\$130.00	\$130.00	80/-
Remove/Refix Fuse Box	1	\$120.00	\$120.00	HH
Diagnostic & Resetting To Erase Fault Code	1	\$550.00	\$550.00	HH
TOTAL LABOUR			\$4,860.00	
ESTIMATE TOTAL			\$ 33,706.82	
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				

03/03/21 @ 1130hrs

Not Anthony

2/3mm

7 days.

1 Jan

LKK Auto

14113.00

2/5 11,200/-

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: