ASS. REC. BY: COMMA ASSI From: Date: Estimated Cost: OD / P / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: S HC 57 & P at Workshop m/s D I	Weh No: SHC 578 P Yr Regn: SAR IMPR Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxif Prime Mover / Truck / Trailer or Make: Toyor A PRIMS HATCH PACK c.c 1798 Colour 4600 A/C: Insured / Std / NI / NA Sp.Reading 341812 T/Radio: Insured / Std / NI / NA Eng/No:
Estimated Cost: OD ICP WS TP RES OD RES EVA INV MV To Inspect Vehicle No: SHC 57 8 P at Workshop m/s DINA AMONO IVE. of 3 Corporation For Insured: FCI Policy No. Claims No.	Type: M.Car / M.Cycle / Bus / Van / Lorry / (axi) Prime Mover / Truck / Trailer or Make: Toyor PRIM HATCHPACK c.c 1798 Colour 4600 A/C: Insured / Std / NI / NA Sp.Reading 341812 T/Radio: Insured / Std / NI / NA Eng/No:
at Workshop m/s. DINK AMONOTIVE. of 31 Carpollation to Insured: PCI Policy No. Claims No.	Sp.Reading 341812 A/C: Insured / Std / NI / NA Eng/No:
	C/No: 170KB3FU303079810
(Client's Record) Make of Veh:	Gen. Cond: Good / Taip / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or Brake: (norder / Jammed / Leaked / Burnt or Modi: Nil / S/Rim / STD A/Rim or
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection.	Tyre Size: F:
Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No	Front Rear R/Bal. mm R/Bal. mm mm mm mm mm mm mm
CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted:	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or N/S FRT The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
Date/Time, File Return to? Add Fee:	Survey Fee:
Report Format :	: Tech. Invs (\$) Others

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

19/04/2021 11:00

JOB-NO: 50113302

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

ADDRESS: 383 SIN MING DRIVE

64739522

Page 1 of 2

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHC0578P

TRANS: AUTO

CHASSIS: JTDKB3FU303079810

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

ENGINE: 2ZR2C06352

OWNER'S INSURER: AXA INSURANCE SINGAPORE PTE LTD

JOB-CODE: TP

SA: Ding Auto User 2

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED	DISCOUNT	DISC PRICE	IND	SUR.DISP REV
LABOUR	Q I I			8382		.,,,,,,
1 STRAIGHTEN AND PANEL BEAT OF ACCIDENT AREA	1.00	1,100.00	0.00	1,100.00		y <u>400</u>
2 TO RUST PROOFING OF THE AFFECTED AREA	1.00	180.00	0.00	180 00		Y 40
3 TO REMOVE AND REFIT NECESSARY ITEMS TO FACILITATE REPAIR	1.00	250.00	0.00	250.00		Y X
4 TO DIAGNOSTIC, CHECK WIRING AND LIGHTING SYSTEM AND CLEAR FAULT CODE	1.00	270.00	0.00	279.00		4 100
5 TO TRANSFER FRONT BUMPER MECHANISM TO NEW BUMPER AND CONDUCT WATER SEEPAGE TEST	1.00	170.00	0.00	170.00		Y _X_
6 TO READJUST AND REALIGN HEADLAMP AIM	1.00	150.00	0.00	150.00		Y _X_
7 TO REMOVE AND REFIT FRONT UNDERCARRIAGE TO ENABLE REPAIR	1.00	250.00	0.00	250.00		Y 100?
8 TO CONDUCT TYRE BALANCING AND WHEEL ALIGNMENT	1.00	130.00	0.00	130.00		Y <u>30</u>
9 TO RESPRAY FRONT BUMPER	1.00	250.00	0.00	250.00		γ 2 υ)
10 TO RESPRAY FRONT BONNET	1.00	250.00	0.00	250.00		YX
11 TO RESPRAY FRONT LH FENDER PANEL	1.00	250.00	0.00	250.00		Y 200
12 TO RESPRAY FRONT LH SIDE MIRROR	1.00	250.00	0.00	250.00		Y 100
TOTAL:		3,500.00	0.00	3,500.00		. 100
MATERIALS						
1 FRONT BUMPER TOTAL	1.00	490.60	122.65	367.95	L	Υ
2 FRONT LH BUMPER RETAINER CM	1.00	96.20	24.05	72.15	L	Υ —
3 FRONT LH HEADLAMP CA	1.00	2,760.51	690.13	2,070.38	L	Υ
4 FRONT LH FOG LAMP?	1.00	970.50	242.63	727.87	L	Υ —
5 RADIATOR GRILLE 🗡	1.00	398.20	99.55	298.65	L	Υ
6 ENGINE UNDER COVER NO.2	1.00	287.60	71.90	215.70	L	Ý ——
7 RADIATOR GRILLE LOWER NO.1 X	1.00	198.60	49.65	148.95	L	·
8 FRONT BUMPER LOWER ABSORBER	1.00	148.59	37.15	111.44	L	·
9 FRONT BUMPER ENERGY ABSORBER 🗡	1.00	138.86	34.72	104.14	1	· —
10 HEADLAMP COMPUTER X	1.00	786.30	196.58	589.72	1	· —
11 HEADLAMP LEVELLING MOTOR LH 🗡	1.00	633.21	158.30	474.91	L	, ——
12 RADIATOR GRILLE EMBLEM	1.00	139.65	34.91	104.74	ī	-
13 FRONT LH FENDER PANEL 1	1.00	988.70	247.18	741.52	L	Ÿ ——
14 FRONT LH FENDER LINER &	1.00	213.30	53.33	159.97	0779	Ÿ ——
15 FRONT LH FENDER EMBLEM	1.00	75.86	18.97	56.89	L	Y

CLAIM DETAILS QUOTED DISCOUNT DISC PRICE DESCRIPTION REV QTY COSTS IND SUR.DISP PRICE 16 FRONT LH WHEEL RIM FOR 1.00 1,655.50 413.88 1,241.62 17 FRONT LH TYRE 195/65/15 1.00 265.57 66.39 199.18 18 FRONT LH WHEEL CAP 1.00 285.90 71.48 214.42 19 FRONT LH KNUCKLE ARM 1.00 496.50 124.13 372.37 20 FRONT LH KNUCKLE HUB+BEARING 1.00 388.40 97.10 291.30 21 FRONT LH LOWER ARM ? 1.00 420.98 105.25 315.73 22 FRONT LH SHOCK ABSORBER ASSY X 1.00 461.10 115.28 345.82 23 FRONT LH STABILIZER LINK X 1.00 135.96 33.99 101.97 24 FRONT LH DRIVE SHAFT X 1.00 1,389.55 1,042.16 347.39 25 FRONT BUMPER REINFORCEMENT 🗶 1.00 751.90 187 98 563.92 26 HEADLAMP BRACKET LH ? 1.00 186.90 46.73 140.17 27 FRONT LH BUMPER SIDE BRACKET 🗸 1.00 198.55 49.64 148.91 28 FRONT BUMPER CLIP SET */ 1.00 85.00 0.00 8500 30 S 29 FRONT FENDER LINER CLIP SET / 1.00 75.00 0.00 75/0030 S 30 RADIATOR GRILLE CLIP SET ⊀ 1.00 70.00 0.00 70.00 S 31 FRONT BUMPER RETAINER CLIP 🗡 1.00 60.00 0.00 60.00 S 32 ENGINE UNDER COVER CLIP 🗶 1.00 65.00 0.00 65.00 S 33 RADIATOR GRILLE TOP GARNISH CLIP 1.00 65.00 34 FRONT VEHICLE NUMBER PLATE WITH 0.00 65.00 S 1.00 150.00 0.00 150.00 S FRAME TOTAL: 15,533.49 740.94 11,792.55 TOTAL PARTS & LABOUR : 19,033.49 3,740.94 15,292.55 EXCESS/LOADING:S\$ No. Of Day: RE-SURVEY: BEFORE AFTER PAINTING BART-BY-PART OF LUMP SUM: \$\$ 20 104 121 @1440 DATE OF SURVEY: RASUL SURVEYED BY: 90010068 CONTACT NO: FAX NO:

LKK Auto Consultants hence notify the Repairer of the following:

To resurvey before/after spray painting

FAX:

- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed <u>and</u> is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

DAuto002 Ding Auto User 2

ESTIMATOR STA AUTOCENTRE

TEL:

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
- 2. This Form must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

- 4. The issue and acceptance of this Point 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.

ACCIDEN	IT STATEMENT
Date of Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	17/04/2021 10:35 (SGT) 17/04/2021 07:55 (SGT) Jurong Island Hwy, Singapore - Singapore
DETAILS O	F OWN VEHICLE
Vehicle Registration Number	SHC578P
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes CITYCAB PTE LTD 1XXXXX839G fleetsafety@cdgtaxi.com.sg (Phone) +65-85691681 (Office) +65-65508768
VEHICLE PARTICULARS	
Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Transmission CC INSURANCE COMPANY	Toyota Prius - Private hire No - Claiming third party Taxi Auto 1798
Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number	AXA Insurance Pte Ltd ThirdPartyFireTheft Yes VFX/P2419140

LEE KENG SEN SXXXX940H

DRIVER

Occupation Date Of Driving Pass Driving experience Gender	Outdoor
oriving experience	
oriving experience	12/02/1982
ander	39 YEARS AND 2 MONTHS
Jenus	Male
Nobile Number	(Phone) +65-85691681
It. Phone Number	=
mail Address	fleetsafety@cdgtaxi.com.sg
ddress	BLK 462 JURONG WEST STREET 41 #12-588
ddress complement	-
ostcode	640462
the driver the policyholder?	No
No, Relationship of the Driver with the Insured	Hirer
oes Driver Own Other Vehicles?	No
ehicle Registration Number of Other Vehicle Owned by Driver	
nsurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
ype of Accident	Side Swipe
Veather 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	TO A STATE OF THE PARTY OF THE
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	2.m.
CIRCUMSTANCES OF ACCIDENT	
). I WAS AT RIGHT LANE AND WANTED TO TURN RIGHT AT 1	E A SHC578P ALONG JURONG ISLAND HIGHWAY (PASS OFFICE I-JUNCTION. THERE WAS VEHICLE B YL225J AT LEFT LANE AND TO VEHICLE B. BUT VEHICLE B HIT ONTO MY VEHICLE LEFT
ATTACHMENT(S)	
\re accident photos available for attachment?	Van
Are accident photos available for attachment?	Yes
Vas there any video captured by Car Camera?	Yes
Vas there any video captured by Car Camera?	Yes FILE IS NOT SUITABLE
Vas there any video captured by Car Camera?	Yes
Vas there any video captured by Car Camera?	Yes FILE IS NOT SUITABLE
Vas there any video captured by Car Camera? Reasons for not uploading a video of the accident Vas there any audio recorded? DETAILS OF OTHER	Yes FILE IS NOT SUITABLE No R VEHICLE PROPERTY 1
Vas there any video captured by Car Camera? Reasons for not uploading a video of the accident Vas there any audio recorded? DETAILS OF OTHER Chicle Registration Number	Yes FILE IS NOT SUITABLE No
Vas there any video captured by Car Camera? Reasons for not uploading a video of the accident Vas there any audio recorded? DETAILS OF OTHER ehicle Registration Number ehicle Manufacturer	Yes FILE IS NOT SUITABLE No R VEHICLE PROPERTY 1
Vas there any video captured by Car Camera? Reasons for not uploading a video of the accident Vas there any audio recorded? DETAILS OF OTHER ehicle Registration Number ehicle Manufacturer ehicle Model	Yes FILE IS NOT SUITABLE No R VEHICLE PROPERTY 1
Vas there any video captured by Car Camera? Reasons for not uploading a video of the accident Vas there any audio recorded? DETAILS OF OTHER ehicle Registration Number ehicle Manufacturer ehicle Model ehicle Variant	Yes FILE IS NOT SUITABLE No R VEHICLE PROPERTY 1
Vas there any video captured by Car Camera? Reasons for not uploading a video of the accident Vas there any audio recorded? DETAILS OF OTHER ehicle Registration Number ehicle Manufacturer ehicle Model	Yes FILE IS NOT SUITABLE No R VEHICLE PROPERTY 1

Page 2 of 26

Accident report SJ04214H0005

SKETCH PLAN

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
- 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
- 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 lodgment 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)

lunderstand, acknowledge, agree and consent that:

- 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
- (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, ovestigation 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, investigating, 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.

Policyholder's Signature Date & Time:

Driver's Signature (if driver is not the policyholder)

17/4/21 / 0950 HES

Name: NRIC/FIN No :

Reporting Centre Pe

nnel's Signature

GIARMC SketchPlanForm 43

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DECLARATION	A. 415			
I/We declare the foregoing part	iculars are true in every	respect.	<i>N</i>	
	All	12		
Policyholder's Signature	Driver's Signatur		Reporting Centr	e Presonnel's Signature
Date & Time:	(if driver is not t		Name:	The same a signature
GLONIAL SHATE MASKAITH NA	Date & Time:	714121/09 50 H	NRIC/FIN No.	Brun
Cherry and Barrier Control Mills (1828)		19 0810/ 17	4	1

C Accident remark 2 16

7--- E of 26

, Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	839G
Venicle Details	0070
Vehicle No.:	SHC578P
Vehicle to be Exported:	No
Intended Deregistration Date:	21 Apr 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Yellow
Manufacturing Year:	2018
Engine No.:	2ZR2C06352
Chassis No.:	JTDKB3FU303079810
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,605.00
Original Registration Date:	01 Apr 2019
First Registration Date:	01 Apr 2019
Transfer Count:	0
Actual ARF Paid:	\$14,247.00
A Translation of the Control of the	have the first production of the second
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Mar 2027
PARF Rebate Amount:	\$10,685.00
COE Expiry Date:	24 Nov. 2007
COE Category:	31 Mar 2027
COE Period(Years):	A - Car up to 1600cc & 97kW (130bhp) 8
PQP Paid:	\$20,940.00
COE Rebate Amount:	\$15,557.00
Total Rebate Amount:	\$26,242.00

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 21 Apr 2021