ASSITECTORY TOUGHT 1 SET. CS/TM/	21004972/71453.
ASS. P.C. BI.	IGNMENT
	Veh No: SHD 4070E Yr Regn: 2019, June.
From: Date:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
OD / TP/WS/TP RES/OD RES/EVA/INV/MV	11 / 2/2 /2
To Inspect Vehicle No:	0.1
at Workshop m/s	77 90 50 50 100
of	Op. Rodding
Insured:	Eng/No: WM H C8 5 / CV K4 / 6 4 469
Policy No.	
Claims No.	Gen. Cond: 6000 / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: (95/65/71)
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or Wasflake
Bal, or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Balmm L/Balmm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 20/4/21
Lum Sum: % 3 Val.: Yes or No	Survey held at want to year
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vjehicle: IN / OU	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	•
	·
Dale/Time, File Pass to? Preli. Report	Dave Of Panairy
	Days Of Repair:
1) : Final Report  Date/Time, File Return to?	Resurvey No. of Trip:  Transportation:
Adde	
2) /400 F	
Stanziel E. modin	
Peport Formal : Lump Sum / ABUs na	
the study constitute and the state of the	: Weel end 's

Page 1p of 3P

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

59 Loyang Drive Singapore 508969 Tel: 6214 8300 TS

TP INSURER:

Tokio Marine Insurance Singapore Ltd (HQ)

**CTPL** 

Singapore

LKK-

PARTICULARS OF CLAIM

Claim Type:

THIRD PARTY

Ref. No:

19/04/2021

Policy No: Vehicle Reg. No.:

SHD4070E

Date of Loss: Driveable?

NO

Party At Fault:

UNKNOWN

\_\_\_\_

Make/Model:

HYUNDAI IONIQ HYBRID, 1.6

Date:

26/06/2019

Vehicle Colour:

**BLUE** 

0 KM

Gen Condition:

GOOD

Engine No: Odometer:

G4LEKU296104

GLS DCT (A)

Chassis No:

Vehicle Reg.

KMHC851CVKU164469

Paint Type:

List Item Discount:

20.00 %

Total Loss?

NO

Est. Duration of Repair 3

(day)

Present Location:

COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)

COST OF CLAIMS		A
		Amount
Parts		1,839.16
Miscellaneous Items		11.00
Labour		1,050.00
Paintwork Labour		0.00
Towing		0.00
	Gross Total (S\$)	2,900.16
	+ GST 7.00% (S\$)	203.01
	Nett Amount (S\$)	3,103.17

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: 20 Apr 2021)

Parts:

192

HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SHD4070E/20/04/2021 09:31 Validity:

These estimates are valid only if they contain the print code (above) on all estimate pages, running page

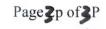
numbers with the END OF ESTIMATES marker on the last estimate page

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		*FRT DOOR LH		20.00	0.00	*1,789.90 FL
2	1		*FRT DOOR LOWER PR	OTECTOR LH	20.00	0.00	*125.30 FL de
3	1		*ROCKER PANEL GAR	NISH LH	20.00	0.00	*290.00 FL
4	1		*FRT DOOR COMFORT	DELGRO LH	0.00	0.00	*75.00 F 19
=Fra	anchise	part. L=ListItem	Disc.				
				Sub Total (S\$)			2,280.20
			- Lis	t Item Discount on L Items (S\$)			441.04
				Total Parts (S\$)			1,839.16

ComfortDelGro Engineering Pte Ltd/SHD4070E/20/04/2021 09:31. Not valid without Reference section. Generated using Merimen e-Claims IEAS



## Estimates on Miscellaneous Items

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

### Estimates on Labour

No	Particulars	Lab.Type		Amount
Lab	our Items		100	
1	PANEL BEATING	New	350.	400.00
2	SPRAY PAINTING	New	375	600.00
3	TUFF KOTE	New	30	50.00
		Gross Labour Cost (S\$)		1,050.00

ComfortDelGro Engineering Pte Ltd/SHD4070E/20/04/2021 09:31. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Tauphn 97415749

WP' 20/4/218 span

2 days

P/P Resum pepe paint

Janphin e/hharbour

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:



Advisor

Reception upon collection

Signature/Date

### ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
Manilire + 65 6383 6280 Facsimile + 65 6280 9755
Workshops
205 Braddell Road Singapore 579701
59 Loyang Drive Singapore 578707
59 Loyang Drive Singapore 575717

Date/Time: 20.04.2021 09:13

Page : 1

eam: ARC Repair TP(CLSO)1	OB CARD Sales Order:	JC NO.:305464617
OMER	REGN NO.: SHD4070E	MILEAGE
OMER NO. 7010045	MAKE: HYUNDAI	FUEL EF
RESS 383 SIN MING DRIVE Singapore SINGAPORE 575717	MODEL IONIQ(G2) 19	DATE/TIME IN . 04.2021 16:00
(R) 65508755 (O)	YR OF MANU. 26.06.2019	TARGET DATE
OUNT CARD NO.	CHASSIS CODE KMHC851CVKU164469	COMPLETION DATE/TIME:
	DB DESCRIPTION	
ATURE: 3P 19.04.2021		
/NO LABOR CODE	DESCRIPTION	RONT
	LEFT SIDE	RIGHT SIDE
	REAR	
KED & PASSED OUT BY:		
SERVICE ADVISOR	CUSTOMER'S SK	GNATURE
edgement Slip	Exit Pass	
lo.: SHD4070E LIMTS	Vehicle No.: SHD4070E	

Name of Service Advisor

To be kept by Security Guard

Date



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.

This Form must be completed by the Policyholder and/or the Authorised Driver

2. This Form thus be completed by the Following and the Administration of witholding of material facts may allow insurance companies to repudiate

3. Information provided 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.

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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

19/04/2021 17:31 (SGT) 19/04/2021 14:40 (SGT) 58 Telok Blangah Heights, Block 58, Singapore 100058 CARPARK Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

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

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

DRIVER

Name of Driver NRIC No

Accident report SJ04214J000S

SHD4070E

COMFORT TRANSPORTATION PTE LTD 1XXXXX821R fleetsafety@cdgtaxi.com.sg (Phone) +65-86604161 (Office) +65-65508768

Hyundai lonig

Private hire

No - Claiming third party

Taxi Auto 1580

AXA Insurance Pte Ltd ThirdPartyFireTheft Yes VFX/P2419138

GAN KOK CHENG SXXXX931J

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other material or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

PASSENGER 1

Name Gender

PASSENGER 2

Name Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

25/06/1973 Outdoor 11/06/1997 23 YEARS AND 10 MONTHS

(Phone) +65-86604161

fleetsafety@cdgtaxi.com.sg BLK 414A FERNVALE LINK #07-22

791414 No Hirer No

Collision - Head to Rear

Clear Dry

No 2

No

Yes

3

No

UNKNOWN Male

UNKNOWN Female

No No

1 1

ON 190421 AT AROUND 1440HRS I WAS DRIVING MY VEHICLE A SHD4070E IN THE CARPARK JUST BESIDE BLK 58 TELOK BLANGAH HEIGHTS. AS I WAS EXITING THE CARPARK SUDDENLY VEHICLE B GU7494T REVERSED OUT FROM THE PARKING LOT AND INTO MY VEHICLE. I DID GIVE A FEW HORNS BUT IT WAS IGNORED. VEHICLE B HIT MY VEHICLE LEFT FRONT PASSENGER DOOR. THERE WAS NO INJURIES.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Was there any audio recorded?

Yes

Yes

FILE NOT SUITABLE

No

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant

Vehicle Colour Vehicle Category

Name of Driver Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident No. Of Passenger (Including Driver)

GU7494T

Commercial vehicle

Accident report SJ04214J000S

### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the datails of the accident to speed up the circle process.
- 2. This form must be completed by the Policyholder and/or the Authorised Divor-
- 3. Information provided must be as trustrial and accurate expossible. If more presentation or with holding of material facts may allow incurance companies to repailder polytidally
- 4. The stole and acceptance of this Form by insurance companies in not an admission of policyl ability on the part of the insurancesomeanes.
- 5. Any falte reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Malager nort 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 purities.
- 7. By the bridgeness of triscreport to the Louises, washeren, consect to the archining of this report as the centre and complex of the opins being made washable
- 8. Consent under the Personal Data Protection Act (PUPA) i understand, acknowledge, agree and consent that

as My insurer , my workshop and the General insurance Association of Singapore ("GA") may/are permitted to do feet, use, disclose and/or process my selected deta/personal information and out in this (form) and involved personal information provided by me or possessed by my insurer (collective yithe "Personal information") and disclose and transfer such Personal information to a linear er(s) who have no and we delpt) have and in this action (a linear er(s) who have insurer or whichely in the personal information to a linear er(s) who have no and we delpt) have and in this action (a linear er(s) who have insurer or whichely in the personal information to a linear er(s). avolved in this accident shall be collectively referred to as the "irourers", the insurers' lawyers/law firms the Monetary Authority of Singapore and any relevant go we surrount agents galax faces in faces that profit of from toward suppressed of

- (1) processing handlings who idealing with my claims including the settlement of the diams and any nationary investigations relating set to diams.
- (ii) investigating the accident and/or ray daims.
- (ii) carrying out and/or dealing with my instructions or reaconding to any enquiries by me.
- (by) administering myclaims (including the mailing of correspondence, experient), evolutes, reports or not see to me, which see id involved account of certain personal his obtainmentalises about helicory of the same as said as in the external street of one-day enforced perhaps), and/or
- (V) complying with a patients of law in a training and easing, harding and in during with my claims. 'collectively the "Purposes")
- all tourrer(s) who have tourned vehicle(s) involved in this addition and the insurers lawyers/and time, may/are permitted to collect, use, cludose and/or process my Personal intermetion for one or more of the above Personal and
- (c) my Resease information marginary as disclosed by any of the inscress and/or fully to their their gesty service providers or a grants) actualing their lawys cylinius. firms), which may be sized outside of Singaporn, for one or more of the above Aurooses.

Princelo Heris Spinding / Phile & Himthe professional benefit Tales Attries Microsoph by Roper for a Posteriora 19/4/2021 KHAI 1630 Sketch Plan A-540 7040E e-GU 74947

scribe Circumstances of the Accident		
On 190421 at around 1440hr	s I was driving my vahiola A	
	t beside blk 58 telok blangah l	noighte
	suddenly vehicle B GU7494T re	
	into my vehicle. I did give a fe	
but it was ignored. Vehicle B	hit my vehicle left front passa	W HOITIS
door. There was no injuries.	int my vericle left nont passa	riger
There was no marres.		
		1
claration e declare the foregoing particulars are true in e	werv respect.	
position of the management of the me	The production of the producti	
	IN	3
	14	12
1	7	
	1	word by Reput they American
11171	1650	KHM