

TS

REPAIR DETAILS**Reference**

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 03 Sep 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/SHC8108K/03/09/2021 08:32
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	20.00	0.00	*459.40 FL Xr
2	10		*REAR BUMPER CLIPS	20.00	0.00	*22.00 FL /ncl
3	1		*REAR BUMPER MAT	0.00	0.00	*50.00 FL /cat
4	1		*REAR BUMPER CENTRE MOULDING	20.00	0.00	*451.25 FL /scr
Sub Total (S\$)						982.65
- List Item Discount on L Items (S\$)						186.53
Total Parts (S\$)						796.12

F=Franchise part. L=ListItemDisc.

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Estimates on Miscellaneous Items

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

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	PANEL BEATING	New	400.00 350
2	SPRAY PAINTING	New	300.00 250
3	R/I REVERSE SENSORS	New	120.00 30
Gross Labour Cost (\$\$)			820.00

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< END OF ESTIMATES >

Therun Lkh

therun@lkhayp.com

82235769

2 days w/p

PIP bfr paint & photos

3/9/21 1500

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:

Date/Time: 03.09.2021 08:20

Page : 1

am: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305485458

MER

COMFORT TRANSPORTATION PTE LTD

7010045

MER NO.

SS

383 SIN MING DRIVE

Singapore SINGAPORE 575717

R)

65508755

(O)

P)

JNT CARD NO.

REGN NO.:

SHC8108K

MILEAGE

MAKE:

HYUNDAI

FUEL

E.....1/2.....F

MODEL

IONIQ(G3)

DATE/TIME IN

02.09.2021 15:25

YR OF MANU.

30.10.2019

TARGET DATE

CHASSIS CODE

KMHC851CVLU187709

COMPLETION DATE/TIME:

cident Date: 02.09.2021

TURE: 3P 02.09.2021

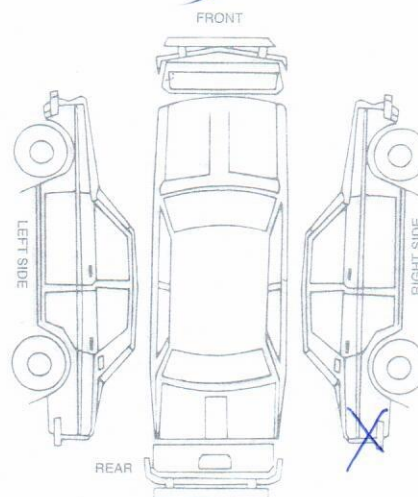
JOB DESCRIPTION

(SAS provided later)

NO

LABOR CODE

DESCRIPTION



0 & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ement Slip

Exit Pass

SHC8108K

LIMITS

Vehicle No.:

SHC8108K

vice Advisor

Signature/Date

Name of Service Advisor

Date

d to Service Reception upon collection

To be kept by Security Guard

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

821R

Vehicle Details

Vehicle No.:

SHC8108K

Vehicle to be Exported:

No

Intended Deregistration Date:

08 Sep 2021

Vehicle Make:

HYUNDAI

Vehicle Model:

AE IONIQ HEV FL 1.6 DCT

Primary Colour:

Blue

Manufacturing Year:

2019

Engine No.:

G4LEKU400856

Chassis No.:

KMHC851CVLU187709

Maximum Power Output:

103.6 kW (138 bhp)

Open Market Value:

\$25,485.00

Original Registration Date:

30 Oct 2019

First Registration Date:

30 Oct 2019

Transfer Count:

0

Actual ARF Paid:

\$12,679.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

29 Oct 2027

PARF Rebate Amount:

\$9,509.00

Intended COE Rebate Details

COE Expiry Date:

29 Oct 2027

COE Category:

A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):

8

PQP Paid:

\$24,460.00

COE Rebate Amount:

\$18,772.00

Total Rebate Amount:

\$28,281.00

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 08 Sep 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	03/09/2021 11:59 (SGT)
Date of Accident	02/09/2021 14:31 (SGT)
Exact Location of Accident	Grange Rd, Singapore
Additional Location Information	OUTSIDE CATHAY CINELEISURE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8108K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-92378188
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ae ioniq
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
Transmission	Auto
CC	1580

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419138
Cover Note Number	-

DRIVER

Name of Driver	LOH YEOW SENG
NRIC No	SXXXX088E

Date Of Birth	21/07/1958
Occupation	Outdoor
Date Of Driving Pass	14/11/1979
Driving experience	41 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92378188
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	APT BLK 325 SERANGOON AVENUE 3 #03-302
Address complement	-
Postcode	550325
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RELIEF DRIVER
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle 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	UNKNOWN
Gender	Male

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 THE 02092021 AT ABOUT 1431 HOURS, VEHICLE A (SHC8108K) WAS IN STANDSTILL TRAFFIC ON GRANGE ROAD OUTSIDE CATHAY CINELEISURE ON THE LAST LANE STATIONARY WHEN VEHICLE B (SMM3091U) APPROACHED FROM THE REAR AND ATTEMPTED TO GET AROUND VEHICLE A AND GLAZED AGAINST THE SIDE. DRIVER OF VEHICLE A SUFFERED DULL PAIN IN THE BACK.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE IS NOT SUITABLE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMM3091U
Vehicle Manufacturer	Honda



Vehicle Model	Vezel
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LOH YEOW SENG
Gender	Male
Phone No	(Phone) +65-92378188
Address	APT BLK 325 SERANGOON AVENUE 3 #03-302
Address Complement	-
Post Code	550325
Approximate Age Years Old	63
Injuries Sustained	DULL PAIN IN THE BACK
Injured person in which vehicle?	SHC8108K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

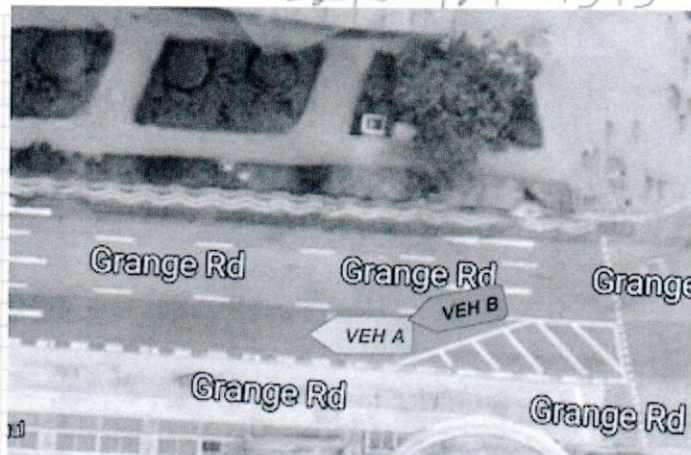
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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. 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



A-SHC8108K
B-SMM3091U

Describe Circumstances of the Accident

ON THE 02092021 AT ABOUT 1431 HOURS, VEHICLE A (SHC8108K) WAS IN STANDSTILL TRAFFIC ON GRANGE ROAD OUTSIDE CATHAY CINELEISURE ON THE LAST LANE STATIONARY WHEN VEHICLE B (SMM3091U) APPROACHED FROM THE REAR AND ATTEMPTED TO GET AROUND VEHICLE A AND GLAZED AGAINST THE SIDE. DRIVER OF VEHICLE A SUFFERED DULL PAIN IN THE BACK.

Declaration

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

Policyholder's Signature / Date &

7/9

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

02/09/21

1545

Witnessed by Reporting Centre Personnel

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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

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TS

TP INSURER:
CTPL

Tokio Marine Insurance Singapore Ltd (HQ)

CP(P)

Singapore

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	02/09/2021
Vehicle Reg. No.:	SHC8108K	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	30/10/2019
Vehicle Colour:	BLUE	Gen Condition:	GOOD
Engine No:	G4LEKU400856	Chassis No:	KMHC851CVLU187709
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	3		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS	Amount
Parts	796.12
Miscellaneous Items	11.00
Labour	820.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (\$\$)	1,627.12
+ GST 7.00% (\$\$)	113.90
Nett Amount (\$\$)	1,741.02

This claim is handled by: LIM TIEN SIONG

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