

11/11/16 11/11/16

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No: \_\_\_\_\_

Clinics No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_

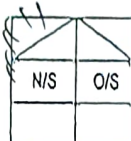
Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? Yes or No

Est Repairs: 4 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SH8229M

Yr Regn: 21/7/16

Type: M/Car / M/Cycle / Bus / Van / Lorry / Truck / Prime Mover /

Truck / Trailer or

Make: Hyundai

cc 1685

Colour: blue

AC: Insured / Std / NI / NA

Sp. Reading: 642740

T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: km1LB41umG4091903

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Good / Jammed / Leaked / Burnt or

Brake: Good / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD A/Rim or

Tyre Size: F: 206/60R16

R: 206/60R16

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

TOYO / YOKO or

Westlake

Front

Rear

R/Bal. 5 mm

R/Bal. 5 mm

L/Bal. 5 mm

L/Bal. 5 mm

D.O.A. 19/10/21

D.O.A. 19/10/21

Survey held at

Comfort

Des. of Damages: Front / Rear / NI / NIS / UIC / Roof/Top or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Rebate: 26691

Case/Time. File Pass to?

☐

: Procl. Report

1/

☐

: Final Report

Case/Time. File Return to?

3/

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee: \_\_\_\_\_

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Insp (\$)

☐

: W&A (\$)

\$ + RS. \$

Finals

Follow

Final

Request Form:

11/11/16

## COMFORT TRANSPORTATION PTE LTD

## REPAIR ESTIMATE

Vehicle No. : SH8229M ✓

Make : HYUNDAI ✓

Model : I-40

Date 19/10/2021

Insurance: AIG

MVA. MS. LOKE YY

Qty	Parts Description / Labour	Type	Unit Price	Amount
1	FRT FENDER LH			\$663.00
1	FENDER RETAINER LH			\$24.80
1	HEADLAMP LH			\$1,800.00
1	FRT WHEEL HUP CAP LH			\$217.20
1	FRONT BUMPER COVER			\$1,052.20
10	FRT BUMPER CLIPS			\$22.00
1	FRT BUMPER BRACKET TOP LH			\$44.80
1	FRT DOOR MIRROR LH			\$670.00
	SUB TOTAL			\$4,493.80
	LESS 20%			\$898.76
	DISCOUNTED TOTAL			\$3,595.04
	FRT DOOR COMFORT LOGO LH			\$75.00
				\$75.00
	Labour Charge			
	PANEL BEATING			\$1,200.00
	SPRAY PAINTING CHARGE			\$1,000.00
	TUFF KOTE			\$60.00
	CHECK ALL LIGHTING			\$60.00
	TOTAL LABOUR			\$2,320.00
	ESTIMATE TOTAL			\$5,990.04

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 company.

Thiruvannamalai@LKKAuto.com

82235769

19/10/21 1645

L/s after repair photo  
4 days wp

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	821R

Vehicle Details

Vehicle No.:	SH8229M
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Oct 2021
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	D4FDGU669711
Chassis No.:	KMHLB41UMGU091903
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$18,846.00
Original Registration Date:	21 Jul 2016
First Registration Date:	21 Jul 2016
Transfer Count:	0
Actual ARF Paid:	\$18,846.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Jul 2024
PARF Rebate Amount:	\$13,192.00

Intended COE Rebate Details

COE Expiry Date:	20 Jul 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$39,616.00
COE Rebate Amount:	\$13,499.00
Total Rebate Amount:	\$26,691.00

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 28 Oct 2021

OK

SINGAPORE J&P Holdings Pte Ltd  
ENTRY DATE & TIME: 19/10/2021 16:43 (SGT)  
SUBMITTED BY: SGT  
VERSION: 1 (19/10/2021 16:43 (SGT))



## 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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 the 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	19/10/2021 16:43 (SGT)
Date of Accident	19/10/2021 08:30 (SGT)
Exact Location of Accident	Loi Sallen, Singapore
Additional Location Information	JALAN AWANG
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8223M
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	lfeisafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-82323256
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
Transmission	Auto
CC	1685

### INSURANCE COMPANY

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

### DRIVER

Name of Driver	OW BOON HENG
NRIC No	SXXXXX436H

Accident report SJ0421AJ000N



Date Of Birth	27/08/1950
Occupation	Outdoor
Date Of Driving Pass	29/03/1985
Driving experience	36 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82332356
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLOCK 3 JOO CHIAT VROAD
Address complement	#13-1185
Postcode	420003
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hlrer
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	Side Swipe
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle 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

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

ON 19/10/2021 AT ABOUT 0830HRS I WAS DRIVING MY VEHICLE A SH8229M ALONG JALAN SALLEH TOWARDS JALAN ISHAK. AS I DROVE PASS JALAN AWANG VEHICLE B GBJ981S WHICH WAS STATIONARY ON THE LEFT SIDE SUDDENLY SWERVED OUT. VEHICLE B FRONT RIGHT SIDE SWIPE MY VEHICLE A LEFT SIDE. NO ONE WAS INJURED. PARTICULARS EXCHANGED BUT NO HANDPHONE

#### 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	GBJ981S
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Commercial vehicle
Name of Driver	HASAN MAHADY

Work Permit No	GXXXX756W
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	FRONT RIGHT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	4



× COMFORT T\_EPORT (1)

### 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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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

Sketch Plan

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

Witnessed by Reporting Centre Personnel

A - SK8229M  
B - GBJ981S

JALAN AWANG

VEH B

VEH A

JALAN SALLEH

Describe Circumstances of the Accident

ON 19/10/2021 AT ABOUT 0830HRS I WAS DRIVING MY VEHICLE A SH8229M ALONG JALAN SALLEH TOWARDS JALAN ISHAK. AS I DROVE PASS JALAN AWANG VEHICLE B GBJ981S WHICH WAS STATIONARY ON THE LEFT SIDE SUDDENLY SWERVED OUT. VEHICLE B FRONT RIGHT SIDE SWIPE MY VEHICLE A LEFT SIDE. NO ONE WAS INJURED. PARTICULARS EXCHANGED BUT NO HANDPHONE

Declaration

I/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



Team: ARC Repair TP(CLSO)1

Date/Time: 19.10.2021 10:35

Page : 1

JOB CARD Sales Order: 4131449

JC NO 305491371

CUSTOMER  
NAME: COMFORT TRANSPORTATION PTE LTD  
CUSTOMER NO: 7010045  
ADDRESS: 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
(R) 65508755 (O)

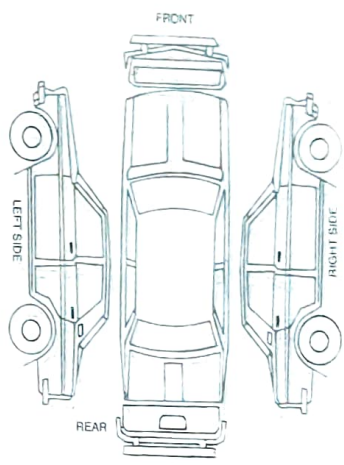
REGN NO SH 8229M	MILEAGE
MAKE HYUNDAI	FUEL
MODEL I-40	DATE/TIME IN 19.10.2021 09:10
YR OF MANU. 21.07.2016	TARGET DATE
CHASSIS CODE KMHLB41UMGU091903	COMPLETION DATE/TIME

COUNT CARD NO.

Accident Date: 19.10.2021  
NATURE: 3P 19.10.2021

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SH 8229M YY

Vehicle No.: SH 8229M

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

RE: DOA19.10.2021 SH8229M with your insured GBJ981S

AIG SGP, Claims-Survey <AIGSGP\_ClaimsSurvey@aig.com>

Tue 19/10/2021 10:47 AM

To: Loke Wei Yieng <LokeWY@sparkcarcare.com>

CAUTION: This email originated from an external party outside ComfortDelGro. Do not click on links or open attachment unless you know the sender.

---

Hi YY,

We'll appoint LKK to conduct survey.

Thanks.

AIG Claims Survey

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From: Loke Wei Yieng <LokeWY@sparkcarcare.com>

Sent: Tuesday, October 19, 2021 10:43 AM

To: AIG SGP, Claims-Survey <AIGSGP\_ClaimsSurvey@aig.com>

Subject: [EXTERNAL] DOA19.10.2021 SH8229M with your insured GBJ981S

This message is from an external sender; be cautious with links and attachments.

Hi officer in-charge,

Herewith repair estimate and Insurance search of your client.

Save as to costs,

Kindly arrange to pre-inspection vehicle at 59 Loyang Drive (S)508969 4th floor ASAP, SAS report will be provided once it ready.

Best regards,

Ms. Loke YY

Loyang Accident Repair

ComfortDelgro Engineering Pte Ltd

DID: 62148355