

APRIL (Yours)

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 28.10.2021
Time: 10:48:30
Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305492408
REGN NO : 5HC702AA ✓
MILEAGE : 000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 17.03.2016
DATE/TIME IN : 27.10.2021 17:55
ACCIDENT DATE : 27.10.2021

JOB / PARTS DESCRIPTION QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0103-0579-G	COVER ASSY-RR BUMPER//	1	553.00	20.00	442.40	/cut
0002	04-01-0103-0738-G	COVER-RR BUMPER LWR//	1	228.00	20.00	182.40	/scr
0003	04-01-0103-0739-G	ABSORBER-RR BUMPER ENERGY	1	119.50	20.00	95.60	?
0004	04-01-0103-0740-G	BEAM-RR BUMPER//	1	428.40	20.00	342.72	cut?
0005	04-01-0103-0743-G	STAY-RR BUMPER RH	1	160.60	20.00	128.48	ok / DES
0006	04-01-0103-0742-G	STAY-RR BUMPER LH	1	160.60	20.00	128.48	ok / DES
0007	04-01-0101-0111-G	BUMPER COVER CLIP REAR	10	22.00	20.00	17.60	hcc
0008	28-01-0103-2029-A	VEHICLE NUMBER PLATE REAR	1 N	50.00	10.00	45.00	/scr
0009	04-01-0103-1150-A	PROTECTOR MAT	1 N	50.00	1.00-	50.00	hcc
0010	04-01-0103-0786-G	EMBLEM-CRDI	1	52.40	20.00	41.92	wc
0011	04-01-0103-0787-G	EMBLEM-I40	1	67.90	20.00	54.32	hcc
0012	04-01-0103-0784-G	MLDG-BACK PANEL	1	227.90	20.00	182.32	hcc / DT
0013	04-01-0103-0785-G	MLDG-CR PIECE	1	85.00	20.00	68.00	hcc

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 SINGAPORE SINGAPORE 575717
 65551188

JOB NO : 305492408
 REGN NO : SHC7024A
 MILEAGE : 000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 17.03.2016
 DATE/TIME IN : 27.10.2021 17:5
 ACCIDENT DATE : 27.10.2021

JOB / PARTS DESCRIPTION	QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0014 04-01-0103-0696-G PANEL ASSY-BACK #	1		526.70	20.00	421.36

SUB-TOTAL : 2,200.60

JOB NATURE

0000 PB	PANEL BEATING	600.00	560		
0001 SP	SPRAYPAINT CHARGE	600.00	500		
0002 17-01	CHECK ALL LIGHTING	50.00	70		
0003 20-00	TUFF COAT ON AFFECTED PARTS.	50.00	70		
0004 L	REMOVE/REFIX REVERSE SENSOR	50.00	20		

SUB-TOTAL : 1,350.00

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 MODEL : I-40
 DATE OF REGN : 17.03.2016
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JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 3,550.60

AUTHORISED : YES / NO

MVA NAME & SIGNATURE

SURVEYOR NAME & SIGNATURE

DATE :

DATE :

Thuan@Ltkhanta.com

82235769

28/10/21 1630

4/5 after repair photo

3 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: 839G

Vehicle Details

Vehicle No.: SHC7024A

Vehicle to be Exported: No

Intended Deregistration Date: 01 Nov 2021

Vehicle Make: HYUNDAI

Vehicle Model: I40 1.7 CRDI F/L AT ABS AIRBAG 4DR

Primary Colour: Yellow

Manufacturing Year: 2015

Engine No.: D4FDGU651823

Chassis No.: KMHLB41UMGU085582

Maximum Power Output: 100.0 kW (134 bhp)

Open Market Value: \$20,900.00

Original Registration Date: 17 Mar 2016

First Registration Date: 17 Mar 2016

Transfer Count: 0

Actual ARF Paid: \$21,260.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 16 Mar 2024

PARF Rebate Amount: \$14,882.00

Intended COE Rebate Details

COE Expiry Date: 16 Mar 2024

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

COE Period(Years): 8

PQP Paid: \$39,633.00

COE Rebate Amount: \$11,759.00

Total Rebate Amount: \$26,641.00

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 01 Nov 2021

OK

Job: ARC Repair TP(CFSO)1

JOB CARD Sales Order: 4134935 JIC NO 305492408

Customer: CITYCAB PTE LTD
 Customer No: 7010070
 Address: 383 SIN MING DRIVE
 Singapore SINGAPORE 575717
 Contact: 65551188

REGN NO SHC7024A	MILEAGE
MAKE HYUNDAI	FUEL E 1/2 F
MODEL I-40	DATE/TIME IN 27.10.2021 17:55
YR OF MANU. 17.03.2016	TARGET DATE
CHASSIS CODE KMHLB41UMGU085582	COMPLETION DATE/TIME

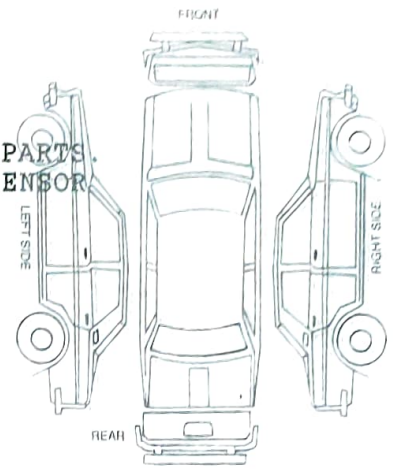
Job Card No

JOB DESCRIPTION

Incident Date: 27.10.2021
 Incident Time: 3P.27.10.2021

NO	LABOR CODE
00150	PB
00160	SP
00170	17-01
00180	20-00
00190	L

DESCRIPTION
 PANEL BEATING
 SPRAYPAINT CHARGE
 CHECK ALL LIGHTING
 TUFF COAT ON AFFECTED PARTS.
 REMOVE/REFIX REVERSE SENSOR



RECEIVED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Incident Slip

Exit Pass

Job No: SHC7024A Signature: JU NTUC

Vehicle No.: SHC7024A

Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

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	28/10/2021 11:22 (SGT)
Date of Accident	27/10/2021 16:50 (SGT)
Exact Location of Accident	Moulmein Rd, Singapore
Additional Location Information	TOWARDS BALESTIER ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7024A
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) +65-96723904
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	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419140
Cover Note Number	-

DRIVER

Name of Driver	TAN AH ENG
NRIC No	SXXXX634D

Date Of Birth	12/07/1959
Occupation	Outdoor
Date Of Driving Pass	27/12/1977
Driving experience	43 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96723904
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	APT BLK 196A PUNGGOL FIELD #11-515
Address complement	-
Postcode	821196
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SAGARZM
Gender	Male

PASSENGER 2

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 27/10/2021 AT ABOUT 1650HRS I WAS DRIVING MY VEHICLE A SHC7024A ON THE MOST RIGHT LANE OF MOULMEIN ROAD TOWARDS BALESTIER ROAD. JUST AFTER JALAN TAN TOCK SENG TRAFFIC JUNCTION I SLOWED DOWN AND STOP BEHIND VEHICLE IN FRONT. VEHICLE B SJF468J THEN REAR ENDED MY STATIONARY VEHICLE A. MY PASSENGERS ARE NOT 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	SJF468J
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	SMAIMAN BIN MANSOR
NRIC No	SXXXX651C
Contact Number	-
Address	APT BLK 351B CANBERRA ROAD #02-299
Address complement	-
Postcode	752351
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

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 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 enquires 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

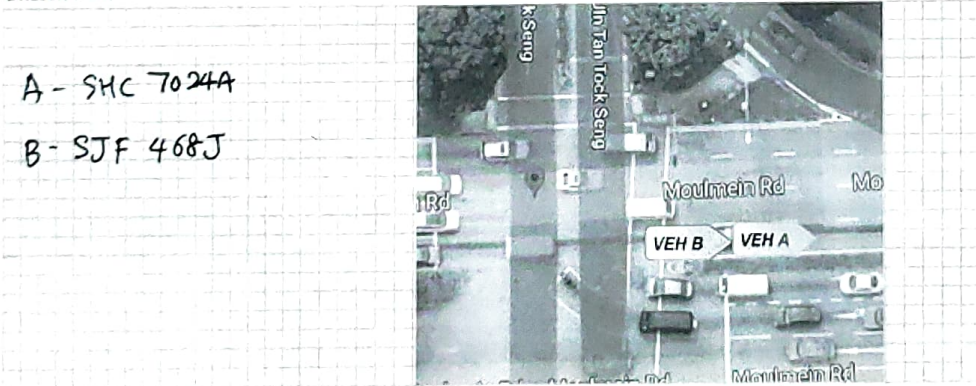
28.10.2021

0835HRS

Witnessed by Reporting Centre Personnel

Kyun Yong

Sketch Plan



Describe Circumstances of the Accident

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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 28-10-2021 0840HRS

Witnessed by Reporting Centre Personnel

