

ASS. REC. BY:

REF:

EQ / 22001114/Kt

Kenneth

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.

Claims 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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

02

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

14/12 11:15pm @ 1600k Cahul (Red: 4971.31; 75%)

Veh No:

S/HO 253X

Yr Regn:

11.15

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Renault Latitude

c.c

1995

Colour

M. White / R

A/C:

Insured / Std / NI / NA

Sp. Reading

787765

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

VFIAB215AUC 282282

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/60R16

R:

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

TOYO / YOKO or

Pirelli

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

14/1/12

D.O.I.

7/2/2022

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

2

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Fees

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD253X**AAD2201-087**

Not Authorised
61 Sep 8/600p
Recovery After Repair

Vehicle No.:
 Chassis No.:
 Vehicle Make:
 Vehicle Model:
 Date of Accident :
 Third Party Insurer :
 Date of Registration :

07 FEB 2022

07 FEB 2022

SHD253X

VF1ABL15AUC282282

RENAULT

LATITUDE

14/01/2022

EQ

03/11/2015

PART**LIST**

1 BUMPER COVER REAR
 1 BUMPER LOWER REAR
 1 BUMPER REFLECTOR LH
 1 BUMPER BRACKET CTR REAR
 1 BUMPER BRACKET SIDE LH REAR
 1 BUMPER RETAINER LH REAR
 1 BUMPER BEAM REAR
 1 OUTER PANEL REAR (End Panel)
 1 OUTER PANEL REAR (End Panel)TRIM

\$	<i>Bu/um</i>	561.70	✓
\$	<i>bu</i>	411.90	✓
\$	<i>cm</i>	16.60	✓
\$	<i>h</i>	98.10	✓
\$	<i>su</i>	80.80	✓
\$	<i>h</i>	54.20	✓
\$	<i>Bu</i>	547.80	✓
\$	<i>R</i>	745.80	✓
\$	<i>h</i>	404.56	✓
\$		2,921.46	
10% \$		292.15	
\$		2,629.31	

Special Nett

1SET PARKING AID
 1SET REAR BUMPER CLIP
 1SET BUMPER RETAINER CLIP LH RR
 1SET BUMPER LOWER REAR CLIP

\$	<i>h</i>	700.00	✓
\$	<i>re</i>	66.00	✓
\$	<i>re</i>	20.00	✓
\$	<i>re</i>	66.00	✓
TOTAL \$		852.00	
TOTAL PARTS \$		3,481.31	

LABOUR

To Remove And Refit Rear Big and Small W/Screen
 Glass To Facilitate Bodywork Repair.

\$	<i>re</i>	300.00	✓
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Putty And Spray Painting Of The Affected Portion.

\$	<i>800p. 220p</i>		
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Trans-cab Auto Services Pte Ltd**AAD2201-087**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD253X

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	800	2001	
To Rust-Proofing Of The Affected Areas.	\$	nn	170.00	X
To reinstall rear bumper parking sensor.	\$		170.00	601
To transfer of bootlid fittings, attachments and perform water seepage test.	\$	nn	170.00	X
To repair and realign rear exhaust pipe.	\$	5	170.00	X
To drop rear exhaust box, renew the same, to repair and realign centre exhaust pipe.	\$	5	170.00	X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	5	170.00	X
To transfer of rear windscreen fittings and conduct water seepage test.	\$	5	170.00	X
steering geometry and alignment	\$			X
To Check Electrical Lighting Concerned.	\$		170.00	151

TOTAL \$ 7,880.00**Over All Total \$ 13,990.63****6571.31****(LUMP SUM)****Repair Days****20 DAYS**
2 days**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:

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	17/01/2022 15:14 (SGT)
Date of Accident	14/01/2022 21:35 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TOWARDS SLE BETWEEN MOULMEIN ROAD AND JALAN BAHAGIA EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD253X
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Company Reg No	2XXXXX878K
Email Address	claims@transcab.com.sg
Mobile Phone No	(Phone) +65-62876666
Alternative Phone No	(Office) +65-62876666

VEHICLE PARTICULARS

Manufacturer	Renault
Model	Latitude
Variant	2.0L DCI AUTO D/AB 4DR
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	1998

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	VFX/P2413997
Cover Note Number	NA

DRIVER

Name of Driver	KWOK CHONG YUM
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NRIC No	SXXXX272H
Date Of Birth	09/07/1949
Occupation	Outdoor
Date Of Driving Pass	17/03/1975
Driving experience	46 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91386727
Alt. Phone Number	-
Email Address	Claims@transcab.com.sg
Address	HDB Jurong East 32, 316 Jurong East Street 32 #08-267
Address complement	-
Postcode	600316
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LYN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO.T/20220115/2010

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME9380M
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Vehicle Manufacturer	Mazda
Vehicle Model	3
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	TAY CHIN BOON IVAN
Contact Number	(Phone) +65-92345967
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	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 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 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)**

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
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation 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.

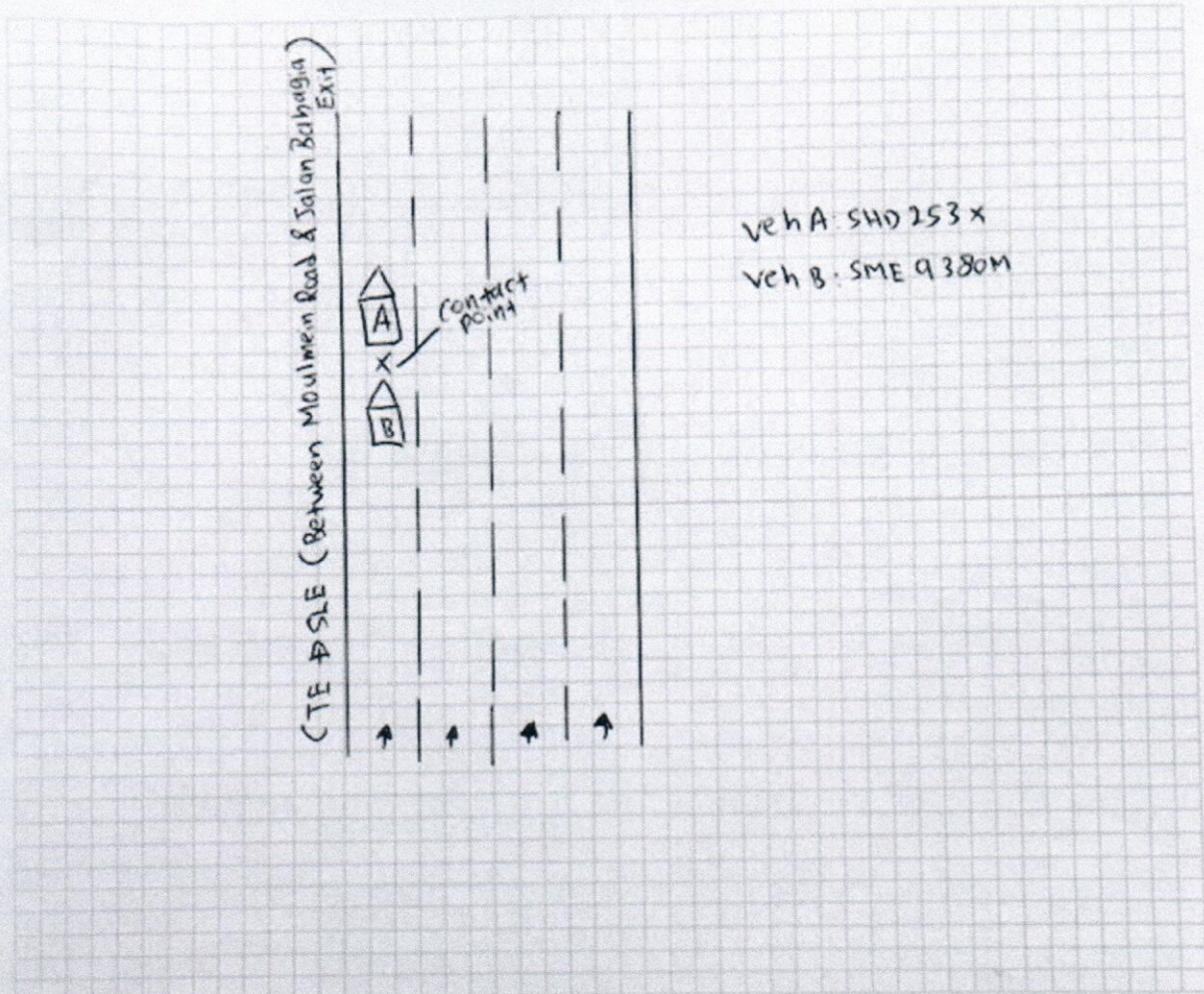
Policyholder's Signature
Date & Time:

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
ANG QI HAO, VICTOR

Reporting Centre Personnel's Signature
Name
NRIC/FIN No.:

ACCIDENT DIAGRAM



Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
ANG QI HAO, VICTOR

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Ver. 30042021


**SINGAPORE
POLICE FORCE**


T/20220115/2010

2 of 4

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20220115/2010

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	Lyn	ID No.	NIL
Related Vehicle	SHD253X (Car)	Contact No.	98758079
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	KWOK CHONG YUM	ID No.	S0005272H
Related Vehicle	SHD253X (Car)	Contact No.	91386727
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAY CHIN BOON IVAN	ID No.	NIL
Related Vehicle	SME9380M (Car)	Contact No.	92345967
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 14/01/2022 at about 9.35pm, I was performing cabby duties on board my taxi (Reg Plate: SHD253X) conducting ferry service of a female passenger from Paragon Shopping Centre to Pasir Ris. During which, I was travelling along CTE (towards SLE) and was on the extreme left lane of the 4 lane road. At that point in time, the traffic was heavy and slow moving. My passenger was seated on the left rear passenger seat.

When I was at the location between Moulmein Road Exit and Jalan Bahagia Exit, a vehicle in front of me came to a gradual stop. As such, I applied my brakes and also came to a gradual stop. Out of a sudden, I

Ang Mo Kio North N.P.C
No 51 Ang Mo Kio Ave 9
Singapore 569784
Tel: 1800-4849999

780 Bedok
Reservoir
Road

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	878K
Vehicle Details	
Vehicle No.:	SHD253X
Vehicle to be Exported:	Yes
Intended Deregistration Date:	17 Jan 2022
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	M9R8839C002836
Chassis No.:	VF1ABL15AUC282282
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	03 Nov 2015
First Registration Date:	03 Nov 2015
Transfer Count:	0
Actual ARF Paid:	\$19,998.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 Nov 2023
PARF Rebate Amount:	\$12,998.00
Intended COE Rebate Details	
COE Expiry Date:	02 Nov 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$45,267.00
COE Rebate Amount:	\$10,146.00
Total Rebate Amount:	\$23,144.00
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 17 Jan 2022

OK