

ASS. REC. BY:

REF:

TV / 22003358/Kny3

C

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. \_\_\_\_\_

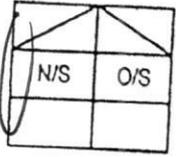
Sum Insured: \_\_\_\_\_ Excess: 750

(Client's Record)

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

(Policy Condition)

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



Bal. or Market Value: \$105k

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

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

Est. Repairs: 08 days Res.: Yes or No

Lum Sum: 1.B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SNB 4373X Yr Regn: 08, 21

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

Truck / Trailer or \_\_\_\_\_

Make: Kia Cerato c.c. 1591

Colour: M. Blue A/C: Insured / Std / NI / NA

Sp. Reading: 2427 T/Radio: Insured / Std / NI / NA

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

C/No: KNAI-3416MM 5107423

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/55R16

R: \_\_\_\_\_

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

TOYO / YOKO or Nexen

Front R/Bal. 9 mm

L/Bal. 9 mm

D.O.A. 16/3/22

D.O.I. 12/4/2022

Survey held at \_\_\_\_\_

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

N/S body

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

| Date / Time | Action / Instruction               |
|-------------|------------------------------------|
| 1           | Est not ready                      |
| 2018        | 86403-20 Carat (Red, 4374.60, 41%) |

Date/Time, File Pass to?

: Prell. Report

: Final Report

1) 15/9/22

Date/Time, File Return to?

2)

Days Of Repair: 8

Resurvey No. of Trlp: 1

Survey Fee:

Transportation:

\$ - RS. SI

Fees

Others

TOTAL

Add Fee:  : Site Insp (\$)

: Interview (\$)

: Tech Invs (\$)

: Weekend (\$)

Report Format :

Lump Sum / I.B.I: (\$ 6403.20)

# 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 ..... 17/03/2022 16:18 (SGT)  
Date of Accident ..... 16/03/2022 17:00 (SGT)  
Exact Location of Accident ..... 390 Havelock Rd, Singapore 169662  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNB4373X

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... COMFORTDELGRO RENT-A-CAR PTE LTD  
Company Reg No ..... 1XXXXX775H  
Email Address ..... dannyng@cdgrentacar.com.sg  
Mobile Phone No ..... (Phone) +65-84985960  
Alternative Phone No ..... (Office) +65-68820888

### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... Cerato  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Private use  
Are you claiming under your own insurance policy for repair to your vehicle? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1591

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... Yes  
Policy Number ..... D20MFL0000326\_01  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... CHEVALLIER FRANCOIS ROGER ANDRE  
Passport No/FIN ..... GXXXX117N



|  |                            |
|--|----------------------------|
| Date Of Birth  | 09/05/1985                 |
| Occupation   | Outdoor                    |
| Date Of Driving Pass   | 13/07/2021                 |
| Driving experience   | 8 MONTHS                   |
| Gender   | Male                       |
| Mobile Number  | (Phone) +65-84985960       |
| Alt. Phone Number  | -                          |
| Email Address  | dannyng@cdgrentacar.com.sg |
| Address  | 15 LEEDON HEIGHT #2-52     |
| Address complement   | -                          |
| Postcode   | 267951                     |
| 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   | Collided into Motorcyclist |
| Weather Conditions | Clear                      |
| Road Surface       | Dry                        |

#### OTHER INFORMATION

|   |     |
|---|-----|
| Was any foreign vehicle involved in the accident?   | Yes |
| Number of vehicles involved in the accident   | 2   |
| Was anybody injured in the Accident?  | Yes |
| Was any injured conveyed to hospital by ambulance?  | Yes |
| 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  |

#### FOREIGN VEHICLE 1

|                             |            |
|-----------------------------|------------|
| Vehicle Registration Number | JUV4751    |
| Vehicle Category            | Motorcycle |

#### DETAILS OF POLICE ACTION

|   |   |
|---|---|
| Was the accident reported to the police?  | Yes                                     |
| Police Station Name                       | Bukit Timah Neighbourhood Police Centre |
| Police Station Phone No                   | (Phone) +65-18004629999                 |
| Alt. Police Station Phone No              | (Fax) +65-64628933                      |
| Police Station Address                    | 1 Duke Road Singapore 268914            |
| Was notice of intended Prosecution given? | No                                      |
| If yes, against whom?                     | -                                       |

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20220317/2016

#### 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 | JUV4751 |
| Vehicle Manufacturer        | -       |

|   |       |            |
|---|-------|------------|
| Vehicle Model                           | ..... | -          |
| Vehicle Variant                         | ..... | -          |
| Vehicle Colour                          | ..... | -          |
| Vehicle Category                        | ..... | Motorcycle |
| 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)     | ..... | -          |

**INJURED PERSONS DETAILS**

INJURED 1

|   |       |         |
|---|-------|---------|
| Name of injured person                              | ..... | RIDER   |
| Gender  | ..... | Female  |
| Phone No  | ..... | -       |
| Address   | ..... | -       |
| Address Complement                                  | ..... | -       |
| Post Code   | ..... | -       |
| Approximate Age Years Old                           | ..... | -       |
| Injuries Sustained                                  | ..... | UNKNOWN |
| Injured person in which vehicle?                    | ..... | JUV4751 |
| Were seat belts worn?                               | ..... | -       |
| Was this injured conveyed to hospital by ambulance? | ..... | Yes     |

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 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 - SNB4373X

B - JUV4751

390 HAVELOCK ROAD

Describe Circumstances of the Accident

PLEASE REFER TO POLICE REPORT T/20220317/2016

**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

*[Signature]*  
17/03/2022 1430

*[Signature]*  
LATIFF


**SINGAPORE  
POLICE FORCE**


T/20220317/0016

Police Station Of Origin:  
Bukit Timah N.P.C  
1 Duke's Road SINGAPORE 268914  
Tel No: 1800-4629999

1 of 3

Report No: T/20220317/0016

**REPORT OF A TRAFFIC ACCIDENT**

|  |            |  |                              |
|--|------------|--|------------------------------|
| Date/Time Report Made:<br>17/03/2022 11:24               |            | Vide Report No.:<br>A/20220316/0117                    | Station Diary No.<br>30      |
| <b>Informant's Particulars</b>                           |            |  |                              |
| Name of Informant:<br>CHEVALLIER FRANCOIS ROGER<br>ANDRE |            | Address:<br>11 TUAS SOUTH AVENUE 12 SINGAPORE 637131   |                              |
| ID Type / ID No.:<br>FIN NO / G4030117N                  |            | Contact No.:<br>Home/Office: Mobile: 84985960          |                              |
| Nationality:<br>FRENCH                                   |            | Email:<br>chevallier255@gmail.com                      |                              |
| Sex:<br>Male   | Age:<br>36 | Date of Birth:<br>09/05/1985                           | Type of Informant:<br>Driver |
| Race:<br>Caucasian                                       |            | Language:  | Institution / School Name:   |
| Occupation:<br>ENGINEERING MANAGER                       |            | Driving Licence Information:<br>Class: Date of Expiry: |                              |

|  |                                 |                                    |   |  |
|--|---------------------------------|------------------------------------|---|--|
| <b>General Information of the Accident</b>                   |                                 |                                    |   |  |
| Type of Accident:  | Injury<br>Conveyed By Ambulance | Drink<br>Drive:<br>No              | Date/Time of<br>Accident:<br>16/03/2022 17:00 | Type of Location:<br>Bend              |
| Location:<br>HAVELOCK ROAD                                   |                                 |                                    |   |  |
| Weather:<br>Clear  |                                 | Road Surface:<br>Dry               | Road Speed Limit:                             |  |
| Traffic Flow:  |                                 | Traffic Control:<br>Not Controlled | Traffic Volume:<br>Light                      |  |
| Type of Collision:<br>Between Moving Vehicles - Head To Side |                                 |                                    |   | Anyone conveyed by<br>ambulance:<br>No |

| <b>Details of Vehicle Involved</b> |            |      |       |       |                      |                 |
|------------------------------------|------------|------|-------|-------|----------------------|-----------------|
| Vehicle No.                        | Type       | Make | Model | Color | Condition            | No of Passenger |
| JUV4751                            | Motorcycle |      |       |       | Seriously<br>Damaged | 0               |
| SNB4373X                           | Car        |      |       |       | Seriously<br>Damaged | 1               |



SINGAPORE  
POLICE FORCE



T/20220317/2016

Police Station Of Origin:  
Bukit Timah N.P.C  
1 Duke's Road SINGAPORE 268914  
Tel No: 1800-4629999

2 of 3

Report No. T/20220317/2016

CONTINUATION OF REPORT

and slightly veered right to ease my turn

Brief Details

On 16/03/2022 at 1700hrs, I was driving my vehicle (SNB4373X) along Havelock road. I was on lane 4, I signaled left as I was making a sharp left turn into a small road outside My Millennium hotel. When I was making the turn, one motorcycle (JUV4751) collided into me from lane 4 into the left side of my vehicle. I immediately stopped my vehicle and the rider flew off her motorcycle.

Passerby assisted to call for police and ambulance. After the ambulance arrived, the rider was conveyed and she was conscious. My vehicle suffered major dents on the left passenger side door, left front fender and side mirror. The motorcycle suffered major damages throughout her motorcycle.

The traffic police then arrested me, I was then bailed out on 16/03/2022 at 2359hrs and they informed me to lodge a police report.

I am lodging this report for record purposes.



SINGAPORE  
POLICE FORCE



T/20220317/2016

3 of 3

Report No. T/20220317/2016

Police Station Of Origin:  
Bukit Timah N.P.C  
1 Duke's Road SINGAPORE 268914  
Tel No: 1800-4629999

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

|   |                                |
|---|--------------------------------|
| Signature of Officer Recording The Report:<br>E / Other CHAN JUN MIN,<br>STANLEY      | Signature Of Informant:        |
| Signature Of Interpreter:<br>Not applicable   | Date/Time:<br>17/03/2022 11:24 |
| Officer In Charge Of Case:<br>TP / GIT /<br>Other NG BEIFENG<br>Contact No.: 65476845 | Classification Of Case:        |

NP168

|                           |        |        |
|---------------------------|--------|--------|
| SINGAPORE<br>POLICE FORCE | VN 115 | SN 065 |
| SINGAPORE<br>POLICE FORCE |        |        |



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SJ04223H000E Vehicle Registration No: SNB4373X  
 Name (as shown in NRIC: COMFORTDELGRD RENT-A-CAR PTE LTD NRIC/FIN/Passport No: 1XXXXX775H  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: \_\_\_\_\_ Singapore ( )  
 Contact (Tel): \_\_\_\_\_ Mobile No.: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Date of Accident: 16/03/2022 Time of Accident: 17:00  
 Place of Accident: 390 Havelock Rd,  
 Insurance Company: India International Insurance Pte Ltd

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

UPDATE TO OWN DAMAGE CLAIM

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Policyholder / Driver's Signature  
Date:

*siti*

Reporting Centre Personnel's Signature  
Name: Siti  
NRIC/FIN No.:  
Date: 08.04.2022

# REPAIR DETAILS

## Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 13 Apr 2022)  
 Parts: 143 KIA CERATO 1.6 EX (A) (Catalogue:Merimen Singapore 1.0)  
 Labour: Repairer's (Price-denominated Standard List)  
 Print Code: ComfortDelGro Engineering Pte Ltd/SNB4373X/13/04/2022 13:49  
 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   |          | *LH REAR DOOR                        | 10.00 | 0.00  | *1,138.00 FL | / |
| 2   | 1   |          | *LH REAR DOOR GLASS                  | 10.00 | 0.00  | *181.00 FL   | / |
| 3   | 2   |          | *LH REAR DOOR GLASS BLACK STICKER    | 10.00 | 0.00  | *30.00 FL    | / |
| 4   | 1   |          | *LH REAR FENDER                      | 10.00 | 0.00  | *1,133.00 FL | / |
| 5   | 1   |          | *LH REAR FENDER INNER SHIELD         | 10.00 | 0.00  | *75.00 FL    | X |
| 6   | 10  |          | *LH REAR FENDER INNER SHIELD CLIPS   | 10.00 | 0.00  | *75.00 FL    | X |
| 7   | 1   |          | *LH REAR FENDER 1/4 GLASS            | 10.00 | 0.00  | *252.00 FL   | X |
| 8   | 1   |          | *FUEL LIP COVER                      | 10.00 | 0.00  | *54.00 FL    | / |
| 9   | 1   |          | *FUEL LIP COVER INNER                | 10.00 | 0.00  | *60.00 FL    | X |
| 10  | 1   |          | *LH REAR RIM R16                     | 10.00 | 0.00  | *926.00 FL   | / |
| 11  | 1   |          | *LH REAR SHOCK ABSORBER              | 10.00 | 0.00  | *231.00 FL   | X |
| 12  | 1   |          | *LH REAR KNUCKLE BEARING             | 10.00 | 0.00  | *437.00 FL   | X |
| 13  | 1   |          | *REAR AXEL ASSY                      | 10.00 | 0.00  | *1,031.00 FL | X |
| 14  | 1   |          | *SEALANT                             | 0     | 0.00  | *40.00 ES    | / |
| 15  | 1   |          | *INNER SEAL                          | 0     | 0.00  | *30.00 ES    | / |
| 16  | 2   |          | *FRT DOOR BLACK STICER               | 10.00 | 0.00  | *36.00 FL    | / |
| 17  | 1   |          | *FUEL CAP                            | 10.00 | 0.00  | *112.00 FL   | X |
| 18  | 1   |          | *REAR WINDSCREEN GLASS WITH MOULDING | 10.00 | 0.00  | *1,321.00 FL | X |

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (\$\$) 7,162.00  
 - List Item Discount on L Items (\$\$) 709.20  
**Total Parts (\$\$) 6,452.80**

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 Generated using Merimen e-Claims IEAS

3558  
 SN 70

Estimates on Miscellaneous Items

| No                         | Qty | Particulars          | Amount |
|----------------------------|-----|----------------------|--------|
| <u>Miscellaneous Items</u> |     |                      |        |
| 1                          | 1   | OD/TP Case (Insurer) | 11.00  |
| Sub Total (\$\$)           |     |                      | 11.00  |

Estimates on Labour

| No                       | Particulars  | Lab.Type | Amount        |
|--------------------------|--|----------|---------------|
| <u>Labour Items</u>      |  |          |               |
| 1                        | TO REMOVE AND INSTALL REAR WINDSCREEN GLASS  | New      | 120.00 ✓      |
| 2                        | TO CUT, STRAIGHTEN AND RENEW ACCIDENT AREA SUCH AS LH REAR FENDER, LH REAR DOOR, LH SIDE ROOF TOP PANEL, REAR BUMPER AND ETC                     | New      | 1080 1,440.00 |
| 3                        | TO TRANSFER LH REAR DOOR INNER PARTS FROM DAMAGE TO NEW  | New      | 80 120.00     |
| 4                        | TO REMOVE AND INSTALL REAR UNDER CARRIAGE  | New      | ? 240.00 X    |
| 5                        | TO CONDUCT WHEEL ALGNIEMENT  | New      | 60 80.00      |
| 6                        | TO REMOVE AND INSTALL REAR SEAT, FUEL TANK, LH REAR FENDER INNER TRIM, SPARE TYRE BOARD TO FACILITATE REPAIR                                     | New      | 120 180.00    |
| 7                        | TO REMOVE AND INSTALL ROOF LINING  | New      | 80 240.00     |
| 8                        | TO PUTTY AND RESRPAY ACCIDENT AREA SUCH AS LH FRT FENDER, LH FRT DOOR, LH REAR FENDER, LH REAR DOOR, LH SIDE ROOF TOP PANEL, REAR BUMPER AND ETC | New      | 1440 1,700.00 |
| Gross Labour Cost (\$\$) |  |          | 4,120.00      |

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< END OF ESTIMATES >

2980

To: Kenneth

Parts = 3498.00  
 + Supp = 60.00  
 -----  
 = 3558.00  
 -10% = 355.80  
 -----  
 = 3202.20  
 + SN 70.00  
 + SN 140.00  
 -----  
 = 3412.20  
 + Labour 2980.00  
 -----  
 = ~~6395.50~~ 6403.20

18/17/22

Hishy

**REPAIR DETAILS**

**Reference**

Part Source: MRM-SG      Version: 1.0 (Last Synchronised: 09 May 2022)  
Parts: 143      KIA CERATO 1.6 EX (A) (Catalogue:Merimen Singapore 1.0)  
Labour: Repairer's      (Price-denominated Standard List)  
Print Code: **ComfortDelGro Engineering Pte Ltd/SNB4373X/09/05/2022 15:53**  
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   |          | *FUEL LID BASE BRACKET         | <i>CM</i> 10 | 0.00  | *60.00 FL  |
| 2                                     | 1   |          | *REAR LH DOOR GLASS SOLAR FILM | <i>M</i> 0   | 0.00  | *140.00 FS |
| Sub Total (S\$)                       |     |          |                                |              |       | 200.00     |
| - List Item Discount on L Items (S\$) |     |          |                                |              |       | 6.00       |
| Total Parts (S\$)                     |     |          |                                |              |       | 194.00     |

F=Franchise part. S=SpcNett. L=ListItemDisc.

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*60*      *SN 140*

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars     |                                      |
|-------------------------------|--------------------------------------|
| Owner ID Type:                | Company                              |
| Owner ID:                     | 775H                                 |
| Vehicle Details               |                                      |
| Vehicle No.:                  | SNB4373X                             |
| Vehicle to be Exported:       | Yes                                  |
| Intended Deregistration Date: | 12 Apr 2022                          |
| Vehicle Make:                 | KIA                                  |
| Vehicle Model:                | CERATO 1.6(A) EX                     |
| Primary Colour:               | Blue                                 |
| Manufacturing Year:           | 2021                                 |
| Engine No.:                   | G4FGMH703126                         |
| Chassis No.:                  | KNAF3416MM5107423                    |
| Maximum Power Output:         | 93.8 kW (125 bhp)                    |
| Open Market Value:            | \$14,606.00                          |
| Original Registration Date:   | 23 Aug 2021                          |
| First Registration Date:      | 23 Aug 2021                          |
| Transfer Count:               | 0                                    |
| Actual ARF Paid:              | \$14,606.00                          |
| Intended PARF Rebate Details  |                                      |
| PARF Eligibility:             | Yes                                  |
| PARF Eligibility Expiry Date: | 22 Aug 2031                          |
| PARF Rebate Amount:           | \$10,954.00                          |
| Intended COE Rebate Details   |                                      |
| COE Expiry Date:              | 22 Aug 2031                          |
| COE Category:                 | A - Car up to 1600cc & 97kW (130bhp) |
| COE Period(Years):            | 10                                   |
| QP Paid:                      | \$48,002.00                          |
| COE Rebate Amount:            | \$38,401.00                          |
| <b>Total Rebate Amount:</b>   | <b>\$49,355.00</b>                   |

The information contained herein is correct as at 12 Apr 2022

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