· ·	· ·
ASS. REC. BY: Thevan REF: China	
ASSI	GNMENT
From: Date:	Veh No: SH6114 Z Yr Regn: 16/6//6
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxiy Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Hyundai 140 c.c. 1685
at Workshop m/s	Colour hly C A/C: Insured / Std / NI / NA
of	Sp.Reading 811007 T/Radio: Insured / Std / NI / NA
Incured:	Eng/No:
Policy No.	C/No: MWHLBUIUM64091350
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / (Rim) / STD A/Rim or
	Tyre Size: F: 76660 1/16
(Policy Condition)	R: 706/601/6
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or Westlahe
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 5 mm R/Bal. 5 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 5 mm L/Bal. 5 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 1914/22 D.O.I. 14/4/22/700
Lum Sum: % 3 Val.: Yes or No	Survey held at CDGE
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / NIS U/C / Rooftop or
Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fee	: : Site Insp (\$)s+Rs,sı
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$)	: Weekend (\$



ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singrouse 579701 Mainline + 65 5383 6230 Facsimile + 65 6230 8765

Mainline 4 no nobal passi inace Workshops 205 Bradiael Roda Singapore 57,9781 59 Loyang Drive Singapore 57,988 383 Sin Ming Drive Singapore 57,988

Date/Time: 19.04.2022 13:15

Page : 1

Team: JOB CARD Sales Order: 4197789 ARC Repair TP(CLSO)1 JC NO.305513116 STOMER REGN NO.: 6114Z MILEAGE COMFORT TRANSPORTATION PTE LTD ₹/MS FUEL 7010045 STOMER NO 383 SIN MING DRIVE HYUNDAI E.....F MODEL 1-40 Singapore SINGAPORE 575717 18.04.2022 11:30 65508755 _. (R) (O) YR OF MANU 6.2016 TARGET DATE (P) CHASSIS CODE KMHLB41UMGU091350 COMPLETION DATE/TIME: 3COUNT CARD NO.

JOB DESCRIPTION

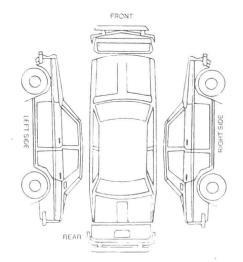
Accident Date: 19.04.2022

NATURE: 3P 13.04.2022 '

S/NO

LABOR CODE

DESCRIPTION



ECKED & PASSED OUT BY:			
SERVICE ADVISOR			CUSTOMER'S SIGNATURE
owledgement Slip	ď	Exit Pass	
: o.: e No.: SH 6114Z	CHIANG	Vehicle No.: SH 6114Z	
of Service Advisor	Signature/Date	Name of Service Advisor	Date
returned to Service Reception upon co	ellection	To be kept by Security Guard	
- '		-	

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO

SH6114Z

MAKE

HYUNDAI

DATE 13.04.2022

MVA CHIANG/CHINA

MODEL

1-40

MODEL	1-40			
Qty	Parts Description/ Labour	Туре	Unit Price	Amount
	FRONT DOOR PANEL LH			\$2,707.70
	REAR DOOR PANEL LH			\$2,204.10
	SUB TOTAL			\$4,911.80
	20.00%			\$982.36
	DISCOUNTED TOTAL			\$3,923.44
				· ·
	1 FRONT DOOR ADVERTISEMENT LH			\$100.00
	1 REAR DOOR ADVERTISEMENT LH			\$100.00
	1 FRONT DOOR COMFORT STICKER			\$75.00
	1 REAR DOOR COMFORT APP STICKER			\$80.00
				\$355.00
	Labour Charge			\$600.00
	Panel Beating			\$600.00
	Spray Painting Charge			3000.001
	Remove/Refix door part front & rear.			\$180.00
	Tuff coat			\$90.00 3
	TOTAL LABOUR			\$1,470.00
	ESTIMATE TOTAL			\$5,754.44
	This is an initial estimate based on a visual inspection of th	ie above ve	hicle. The final repair o	uantum will
	be prepared after the vehicle is surveyed by a motor Survey			

Theval 82235769 19/2/22 1700 L15 3day 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:

8J04224D000J / JP Knights Pte 너d ENTRY DATE & TIME: 13/04/2022 19:37 (SGT) SUBMITTED BY: Kavi VERSION: 1 (13/04/2022 19:37 (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 Authorised Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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 13/04/2022 19:37 (SGT) Date of Accident 13/04/2022 13:05 (SGT) **Exact Location of Accident** 44 Jln Merah Saga, Singapore 278116 Additional Location Information Country/State of Loss Singapore

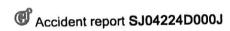
DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH6114Z
INSURED/POLICYHOLDER	
NOTICE OF THE LEET	
Is company? Name Of Registered Owner	Yes COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-94684465
Alternative Phone No	(Office) +65-65508768
VEHICLE PARTICULARS	
Manufacturer	Hyundai
Model	140
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/P2419138
Cover Note Number	-
DRIVER	
UNIVER	
Name of Driver	JUBREE BIN SAAD

JUBREE BIN SAAD SXXXX489E

Date Of Birth 02/06/1967 Occupation Outdoor Date Of Driving Pass 28/10/1993 Driving experience 28 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-94684465 Alt. Phone Number **Email Address** fleetsafety@cdgtaxi.com.sg Address BLK 641 YISHUN STREET 61 #02-214 Address complement Postcode 760641 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 - Major/Minor Rd Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? 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 UNKNOWN Name Female Gender 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 13/04/2022 AT ABOUT 1305HRS I WAS DRIVING MY SH6114Z ALONG JALAN MERAH SAGA. VEHICLE B SJM5786X THEN DROVE OUT FROM UNIT 44 AND COLLIDED HER VEHICLE B ONTO MY VEHICLE A LEFT SIDE DOORS. MY PASSENGER IS NOT INJURED. PARTICULARS EXCHANGED ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes FILE IS NOT SUITABLE Reasons for not uploading a video of the accident No Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJM5786X
Vehicle Manufacturer Vehicle Model -



Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-94507007
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	•
No. Of Passenger (Including Driver)	1

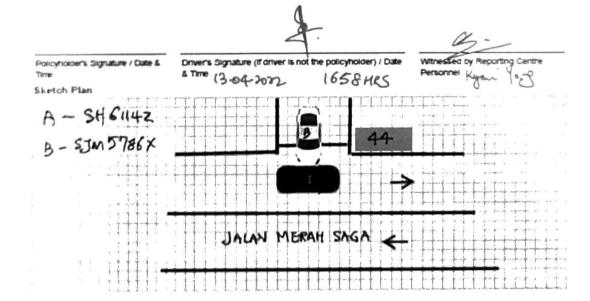
SKETCH PLAN

IMPORTANT NOTICE

- 1. Choose report postably the recision of the annother to execut up the risking proposes.
- 3. This from must be completed by the fromcyholder and/or the Authorised Driver
- 3. Information provided must be as trusticial and accurate an possible. Any in this manapresentation or informating of maketal casts may introd treasurative everyconous to papurdiple policy feetifely
- a. The lease ann arresplance of this Error, by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any take reporting may be referred to the Police for Investigation
- E. This require is to think sinter by this inscirors of this CSA Percents Association. or timpagness (ISA), by permitting permitting primiting of the requires of the permitted for the matter permitted interested parties.
- 7. By the evigenment of this recent to the insurant, you hereby consent to the archiving of this report at the centre and to copies of the וועמילע פרקבועה פוער קרוופן ויעקפן
- 6 Consent under the Personal Data Profestion Act (POPA)
- I previous term are remainingly agrees and remained that
- (a) bity insurer: myre intertrap and the General Insurance Association of Singapore ("GMC) may are permitted to collect, use, disclose anchry provides my personal datamensanal information set each to this floring and any other personal information provided by me or processed by my insurer (order/surery the "hereunal information") and disclose and transfer such Personal information to all insurers) to have insured websters) bredwed in this accident call insurer's) who have insured vebsters) muchand in this accident shall be collectively referred to as the "Insurers"). the insurers taw yers taw from the Monetary Authority of Singapore and any relevant government agencytauthority (such as the police), for the purpose(s) of
- (I) processing, handling and/or dealing with my dame including the settlement of the dame and any necessary investigations relating to the cases.
- (ii) investigating the accident and/or my dams,
- (III) carrying out and/or dealing with my instructions or responding to any enquires by fire;
- (iv) administering my daims (including the mating of correspondence, statements, invoices, reports or notices to me, which could involve discreture of certain personal data about me to bring about delivery of the same as wiell as on the external cover of envelopes/mail packages; and/or
- $\langle v \rangle$ complying with applicable law in administering, processing, handling and/or dealing with my claims

(collectively the "Purposes")

- (b) at insurer(s) who have insured venicle(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.



Describe Circumstances of the Accident

ON 13/04/2022 AT ABOUT 1305HRS I WAS DRIVING MY SH6114Z ALONG JALAN MERAH SAGA. VEHICLE B SJM5786X THEN DROVE OUT FROM UNIT 44 AND COLLIDED HER VEHICLE B ONTO MY VEHICLE A LEFT SIDE DOORS. MY PASSENGER IS NOT INJURED. PARTICULARS EXCHANGED

Declaration

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