



### Workshops

205 Braddell Road Singapore 579701  
59 Loyang Drive Singapore 508963  
383 Sin Ming Drive Singapore 575717

Date/Time: 18.04.2022 08:43

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 4197365

JC NO:305512613

|           |                   |                       |
|-----------|-------------------|-----------------------|
| STOMER    | REGN NO: SHC1133H | MILEAGE               |
| VMS       | MAKE: TOYOTA      | FUEL                  |
| STOMER NO | MODEL             | DATE/TIME IN          |
| DRESS     | YR OF MANU        | TARGET DATE           |
| (R)       | CHASSIS CODE      | COMPLETION DATE/TIME: |
| (P)       |                   |                       |

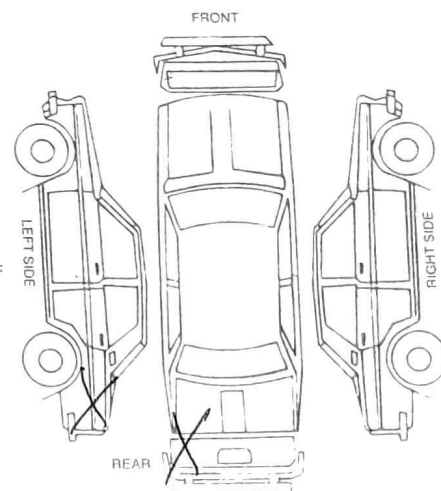
3COUNT CARD NO.

### JOB DESCRIPTION

Accident Date: 14.04.2022

NATURE: 3P 14.04.2022

S/NO LABOR CODE DESCRIPTION



ECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nowledgement Slip

Exit Pass

e No.: SHC1133H YY

Vehicle No.: SHC1133H

of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

| Qty  | Parts Description / Labour | Type | Unit Price | Amount       |
|--|----------------------------|------|------------|--------------|
|  | TOTAL LABOUR               |      |            | \$ 3,030.00  |
|  | ESTIMATE TOTAL             |      |            | \$ 12,411.62 |
| 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. |                            |      |            |              |

Thuan  
 82235169  
 19/4/22 1730  
 L/S 3clays w/p

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:

## COMFORT TRANSPORTATION PTE LTD

## REPAIR ESTIMATE

Vehicle No. : SHC1133H

Make : Toyota

Model : Prius (G4A)

Date: 18/04/2022

Insurance: ALLIANZ

MVA: MS. LOKE YY

| Qty | Parts Description / Labour               | Type | Unit Price | Amount       |                           |
|-----|--|------|------------|--------------|---------------------------|
| 1   | REAR BUMPER                              |      |            | \$ 503.04    | Cut                       |
| 10  | REAR BUMPER CLIPS                        |      |            | \$ 22.00     | pe                        |
| 1   | REAR BUMPER LOWER COVER                  |      |            | \$ 654.96    | Cut                       |
| 1   | REAR BUMPER UNDER SIDE CENTRE COVER      |      |            | \$ 654.96    | X SUC                     |
| 1   | COVER FLOOR UNDER NO. 2                  |      |            | \$ 220.50    | X SUC                     |
| 1   | REAR BUMPER UNDER SIDE COVER RH          |      |            | \$ 232.00    | X SUC                     |
| 1   | REAR BUMPER TOWING COVER                 |      |            | \$ 82.70     | oss                       |
| 1   | REAR BUMPER SIDE RETAINER LH             |      |            | \$ 112.70    | ner                       |
| 1   | REAR BUMPER REINFORCEMENT                |      |            | \$ 378.32    | X SUC                     |
| 1   | REAR BUMPER SIDE EXTENTION LH            |      |            | \$ 148.40    | X SUC                     |
| 1   | REAR END PANEL                           |      |            | \$ 738.96    | n.                        |
| 1   | REAR END PANEL GARNISH                   |      |            | \$ 165.80    | n.                        |
| 1   | BACK DOOR GARNISH SUB ASSY               |      |            | \$ 1,054.71  | Cra                       |
| 1   | REAR TRUNK LID LOGO (PRIUS)              |      |            | \$ 62.14     | nee                       |
| 1   | REAR TRUNK LID LOGO (HYBRID)             |      |            | \$ 62.14     | ne                        |
| 1   | REAR TRUNK LID LOGO (TOYOTA STAR)        |      |            | \$ 81.43     | nee                       |
| 1   | TAIL LAMP UPPER LH                       |      |            | \$ 557.90    | Cra                       |
| 1   | TAIL LAMP LOWER LH                       |      |            | \$ 570.00    | X SUC                     |
| 1   | REAR WINDSCREEN GLASS WITH MOULDING      |      |            | \$ 1,884.32  | nee                       |
| 1   | REAR TRUNK LID COVER                     |      |            | \$ 1,303.29  | nee                       |
| 1   | REAR TRUNK LID GLASS                     |      |            | \$ 1,569.70  | nee                       |
| 2   | REAR TRUNK LID HINGE LH RH               |      | \$ 69.32   | \$ 138.64    | X SUC                     |
| 1   | REAR EXHAUST PIPE CENTRE INSULATOR       |      |            | \$ 498.60    | cr                        |
| 1   | REAR EXHAUST PIPE HANGER                 |      |            | \$ 40.70     | X SUC                     |
| 1   | REAR EXHAUST PIPE                        |      |            | \$ 1,163.40  | cr                        |
|     | <b>SUB TOTAL</b>                         |      |            | \$ 12,901.31 |                           |
|     | <b>LESS 30%</b>                          |      |            | \$ 3,870.39  |                           |
|     | <b>DISCOUNTED TOTAL</b>                  |      |            | \$ 9,030.92  |                           |
| 1   | PETROL ONLY STICKER                      |      |            | \$ 15.00     | Nett / neC                |
| 1   | REPLACE REAR BUMPER ADVERTISEMENT LOGO   |      |            | \$ 50.00     | Nett / neC                |
| 1   | REAR TRUNK LID COMFORT & TEL NO. STICKER |      |            | \$ 60.00     | Nett / neC                |
| 1   | REAR TRUNK LID APPS STICKER              |      |            | \$ 40.00     | Nett / neC                |
| 1   | REAR BUMPER RUBBER MAT                   |      |            | \$ 50.00     | Nett / neC                |
| 1   | REAR REVERSE SENSOR                      |      |            | \$ 135.70    | Nett / neC                |
|     |  |      |            | \$ 350.70    | Nett / <del>neC</del> cut |
|     | <b>Labour Charge</b>                     |      |            |              |                           |
|     | PANEL BEATING                            |      |            | \$ 1,400.00  | 700                       |
|     | SPRAY PAINTING CHARGE                    |      |            | \$ 1,100.00  | 750                       |
|     | TOWING FEE                               |      |            | \$ 60.00     | ✓                         |
|     | CHECK ALL LIGHTING                       |      |            | \$ 60.00     | 30                        |
|     | TUFF KOTE                                |      |            | \$ 80.00     | 30                        |
|     | REMOVE/ REFIX EXHAUST PIPE               |      |            | \$ 150.00    | XNN                       |
|     | REMOVE/ REFIX REAR WINDSCREEN GLASS      |      |            | \$ 120.00    | ✓                         |
|     | REMOVE/REFIX REVERSE SENSOR              |      |            | \$ 60.00     | 30                        |



## 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              | 15/04/2022 12:11 (SGT) |
| Date of Accident                | 14/04/2022 18:20 (SGT) |
| Exact Location of Accident      | KPE, Singapore         |
| Additional Location Information | -                      |
| Country/State of Loss           | Singapore              |

### DETAILS OF OWN VEHICLE

|                             |                                |
|-----------------------------|--------------------------------|
| Vehicle Registration Number | SHC1133H                       |
| INSURED/POLICYHOLDER        |                                |
| Is company?                 | Yes                            |
| Name Of Registered Owner    | COMFORT TRANSPORTATION PTE LTD |
| Company Reg No              | 1XXXXX821R                     |
| Email Address               | fleetsafety@cdgtaxi.com.sg     |
| Mobile Phone No             | (Phone) +65-97925866           |
| Alternative Phone No        | (Office) +65-65508768          |

### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer   | Toyota                    |
| Model  | Prius                     |
| 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   | 1798                      |

### 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

|                |              |
|----------------|--------------|
| Name of Driver | LIM ENG HOCK |
| NRIC No        | SXXXX2821    |





|  |                                    |
|--|------------------------------------|
| Date Of Birth  | 13/02/1955                         |
| Occupation   | Outdoor                            |
| Date Of Driving Pass   | 16/04/1979                         |
| Driving experience   | 43 YEARS                           |
| Gender   | Male                               |
| Mobile Number  | (Phone) +65-97925866               |
| Alt. Phone Number  | -                                  |
| Email Address  | fleetsafety@cdgtaxi.com.sg         |
| Address  | BLK 241 SERANGOON AVENUE 3 #07-164 |
| Address complement   | -                                  |
| Postcode   | 550241                             |
| 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)   | 2   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No  |

#### PASSENGER 1

|        |         |
|--------|---------|
| 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 14/04/2022 AT ABOUT 1820HRS, I WAS DRIVING VEHICLE A (SHC1133H) ALONG KPE(ECP). I WAS DRIVING ON THE FIRST LANE OF A THREE LANE EXPRESSWAY. AS I WAS DRIVING, VEHICLES INFRONT STARTED TO SLOW DOWN AND I GRADUALLY APPLIED MY BRAKES. VEHICLE B(SMA9140K) COLLIDED ONTO MY REAR BUMPER. NOBODY WAS INJURED.

#### 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 | SMA9140K |
| Vehicle Manufacturer        | -        |
| Vehicle Model               | -        |

|   |                      |
|---|----------------------|
| Vehicle Variant                         | -                    |
| Vehicle Colour                          | -                    |
| Vehicle Category                        | Private car          |
| Name of Driver                          | -                    |
| Contact Number                          | (Phone) +65-97472639 |
| 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

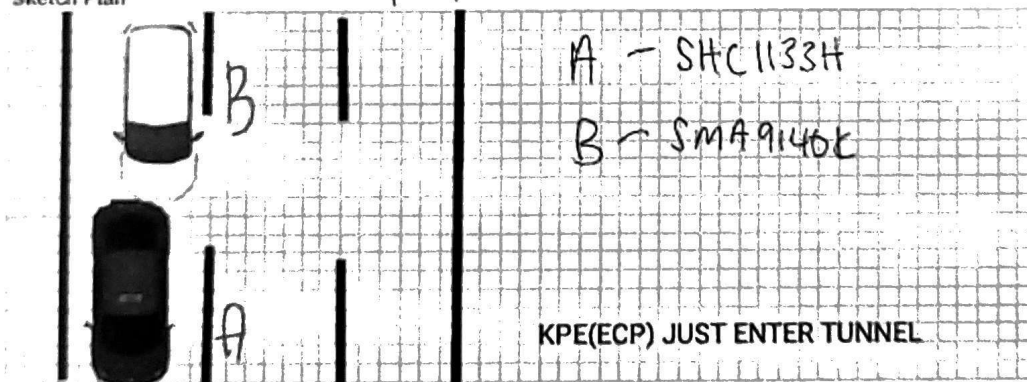
- 1 Please report correctly the details of the accident to speed up the claims process
- 2 This Form must be completed by the Policyholder and/or the Authorised Driver
- 3 Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 to 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





Describe Circumstances of the Accident

ON 14/04/2022 AT ABOUT 1820HRS, I WAS DRIVING VEHICLE A (SHC1133H) ALONG KPE(ECP). I WAS DRIVING ON THE FIRST LANE OF A THREE LANE EXPRESSWAY. AS I WAS DRIVING, VEHICLES INFRONT STARTED TO SLOW DOWN AND I GRADUALLY APPLIED MY BRAKES. VEHICLE B(SMA9140K) COLLIDED ONTO MY REAR BUMPER. NOBODY WAS INJURED.

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

14/04/2022

2330

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