ASS. REC. BY:	TONIMENT
Kenneth	SNO 5080 ZYr Regn: 01, 22
From: Date:	Veh No: Veh / Straf / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD TP / WS / TP RES / OD RES / EVA / INV / MY	Make: Toy Sienta c.c 1896
To Inspect Vehicle No:	Make: 109 STETTY
at Workshop m/s Cen De/	Colour /01-13/ve T/Radio: Insured / Std / NI / NA
of	Sp.Reading OOO)
Insured:	Eng/No: NHP170. 725134
Policy No.	
Claims No.	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess: 78/	Steering: Inorder / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	The surface of STDARM of
Make of Veh:	Modi: NII / S/Rim / STD A/Rim or Tyre Size: F: Davant: 85/60R 15
	17/18 0120.
(Policy Condition)	R: 70YO
Remark: The veh had commenced its N/S O/S	4 50 50 7 7 7
repair at the time of inspection.	TOYO / YOKO or
Bal, or Market Value: 8/05/c	Front Rear R/Bal. / mm
IDAC Accident Rport: Consistent? : Yes or No	POBAL. O mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. mm L/Bal. mm
Est. Repairs: 03 days Res.: Yes or No	D.O.A. 23/6/22 D.O.I. 27/6/20
	- Andrew Andrews
Lum Sum: /·B./ % 3 Val.: Yes or No	Survey held at
Lum Sum: /-B./ % 3 Val.: Yes or No	
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Darmages: Frt J. O/S / N/S / U/C / Rooftop or
Lum Sum: /-B./ % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Vehicle: IN / OU	Des. of Damages: Frt Rep O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Darmages: Frt J. O/S / N/S / U/C / Rooftop or
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CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction	Des. of Darmages: Frt J. O/S / N/S / U/C / Rooftop or
Lum Sum: /-3.) % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Time, File Pass to? Preli. Report	Des. of Damages: Frt Rear O/S N/S U/C Rooftop or The U/C Chassis frame Body Structure affected due to collision Days Of Repair:
Lum Sum: /-B./ % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Time, File Pass to? : Prell. Report : Final Report	Des. of Damages: Frt Page O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision Days Of Repair: Resurvey No. of Trip: Survey Fee:
Lum Sum: /-3./ % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Time, File Pass to? : Preli. Report : Final Report	Des. of Damages: Frt Page O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportative:
Lum Sum: /-3, / % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Time, File Pass to? : Prell. Report : Final Report	Des. of Damages: Frt Repr O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportative: 99: Site Insp (\$
Lum Sum: /-3./ % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Time, File Pass to? : Preli. Report : Final Report	Des. of Damages: Frt Page O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportative:
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Lum Sum: /-3, / % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Time, File Pass to? : Preli. Report : Final Report	Des. of Damages: Frt Repr O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportative: 99: Interview (\$) Finds

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

205 Braddell Road Singapore 579701

Tel: 63837613 Fax: 62815767/65462533 Email: teokeejin@cdge.com.sg

INSURFR:

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10 ia India International Insurance Pte Ltd (HQ)

PARTICULARS OF CLAIM

Claim Type:

OD (OWN DAMAGE)

Ref. No: Date of Loss:

23/06/2022

Policy No:

D18MFL0003414-02

Driveable?

Vehicle Reg. No.:

SND5080Z

PTE LTD

Party At Fault:

UNKNOWN

Driver Age/Info:

NO

Third Party

YES

TP Injury Involved? Insured/Claimant:

COMFORTDELGRO RENT-A-CAR

Involved?

Make/Model:

TOYOTA SIENTA HYBRID, 1.5 X

Vehicle Reg. Date:

05/01/2022

CVT (A)

Shicle Colour:

BLUE

Chassis No:

NHP1707251348

∟ngine No: Odometer:

0 KM

Paint Type:

(day)

Total Loss?

Est. Duration of Repair

NO

& 3day

1NZ9329578

Not Nothan's Report

Present Location:

COMFORTDELGRO ENGINEERING PTE LTD (BRADDELL)

COST OF CLAIMS		Amount
COST OF CLAIMS		2,522.31
Parts		11.00
Miscellaneous Items		1,430.00
Labour		0.00
intwork Labour		0.00
Towing		2 222 24
	Gross Total (S\$)	3,963.31
	+ GST 7.00% (S\$)	277.43
	Nett Amount (S\$)	4,240.74

This claim is handled by: PATRICK TIA JEE KIANG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

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Jurce: MRM-SG

Version: 1.0 (Last Synchronised: 27 Jun 2022)

Parts:

M1-MPV

TOYOTA SIENTA HYBRID 1.5 X CVT (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SND5080Z/27/06/2022 09:52

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

. Qty	Part No.	Particulars	%	Disc	%Depr	Amount	
1		*FRONT NUMBER PLATE W/CASE	CH	7 0	0.00	*45.00 FS	ر
1		*FRT BUMPER	cn	25	0.00		
8		*FRT BUMPER CLIP	M	25	0.00	THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IN COLUMN	
7		*FRT BUMPER RH SIDE RETAINER	DII	25	0.00		
1		*FRT BUMPER LH SIDE RETAINER	Jen	25	0.00		
1			cn	25	0.00		
1			My	25	0.00	*72.00 F	100
1					0.00	*46.00 FL	_
1			Me	25	0.00	The state of the s	
1		*FRT BUMPER SPONGE		25	0.00	*103.00 F	
1		*FRT BUMPER INFORCEMENT	ragida. A di affagina personal en aprocuplant la mendidande nel med Affai de april di la mana l'imperiment per l'une è en al di en den en e	25	0.00	*397.00 F	7
1		*FRT BUMPER TOP BEAM		25	0.00		
1		*RH HREADLAMP	hi	25	0.00	Contract to the Contract Contract to the Contract Contrac	
1		*FRT BUMPER LOWER CENTER GRILLE SIDE COVER	R Pe		0.00		
chise pa	art. S=SpcNe	tt.					/\ -
			Sub Total (S\$)			3,348.08	
		- List Item Discount o	on L Items (S\$)			825.77	
		T	otal Parts (S\$)			2,522.31	_
	1 1 8 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1	1 *FRONT NUMBER PLATE W/CASE 1 *FRT BUMPER 8 *FRT BUMPER CLIP 1 *FRT BUMPER RH SIDE RETAINER 1 *FRT BUMPER LH SIDE RETAINER 1 *RADIATOR GRILLE ASSY 1 *FRT LOGO 1 *FRT BUMPER TOW COVER RH 1 *FRT BUMPER TOP RUBBER SEAL 1 *FRT BUMPER SPONGE 1 *FRT BUMPER INFORCEMENT 1 *FRT BUMPER TOP BEAM 1 *RH HREADLAMP 1 *FRT BUMPER LOWER CENTER GRILLE SIDE COVER Chise part. S=SpcNett.	*FRONT NUMBER PLATE W/CASE *FRT BUMPER *FRT BUMPER CLIP *FRT BUMPER RH SIDE RETAINER *FRT BUMPER LH SIDE RETAINER *RADIATOR GRILLE ASSY *FRT LOGO *FRT BUMPER TOW COVER RH *FRT BUMPER TOP RUBBER SEAL *FRT BUMPER SPONGE *FRT BUMPER INFORCEMENT *FRT BUMPER TOP BEAM *TH HREADLAMP *FRT BUMPER LOWER CENTER GRILLE SIDE COVER	1 *FRONT NUMBER PLATE W/CASE 1 *FRT BUMPER 8 *FRT BUMPER CLIP 1 *FRT BUMPER RH SIDE RETAINER 1 *FRT BUMPER LH SIDE RETAINER 1 *FRT BUMPER LH SIDE RETAINER 25 1 *FRT LOGO 1 *FRT LOGO 1 *FRT BUMPER TOW COVER RH 25 1 *FRT BUMPER TOP RUBBER SEAL 1 *FRT BUMPER SPONGE 25 1 *FRT BUMPER NFORCEMENT 25 1 *FRT BUMPER NFORCEMENT 25 1 *FRT BUMPER TOP BEAM 35 1 *FRT BUMPER TOP BEAM 36 1 *FRT BUMPER LOWER CENTER GRILLE SIDE COVER 36 1 *FRT BUMPER LOWER CENTER GRILLE SIDE COVER 37 26 27 28 29 20 20 21 22 25 25 26 26 26 26 27 26 26 27 28 28 28 28 28 28 28 28 28 28 28 28 28	*FRONT NUMBER PLATE W/CASE	*FRONT NUMBER PLATE W/CASE *FRT BUMPER *FRT BUMPER CLIP *FRT BUMPER RH SIDE RETAINER *FRT BUMPER LH SIDE RETAINER *FRT BUMPER CLIP *RADIATOR GRILLE ASSY *FRT LOG *FRT LOG *FRT BUMPER TOW COVER RH *FRT BUMPER TOW COVER RH *FRT BUMPER TOP RUBBER SEAL *FRT BUMPER SPONGE *FRT BUMPER NFORCEMENT *FRT BUMPER INFORCEMENT *FRT BUMPER TOP BEAM *TRT BUMPER TOP BEAM *TRT BUMPER LOWER CENTER GRILLE SIDE COVER *Chise part. S=SpcNett. *Sub Total (\$\$) 3,348.08 *25 3,348.08

ComfortDelGro Engineering Pte Ltd/SND5080Z/27/06/2022 09:52. Not valid without Reference section. Generated using Merimen e-Claims IEAS

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:

aneous Items

OD/TP Case (Insurer)		Amount
		11.00
	Sub Total (S\$)	11.00

Estimates on Labour

Num

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140	Particulars		
Lab	our Items	Lab.Type	Amount
1	TO PANEL BEAT ON FRONT PANEL ,RH FENDER,REPLACE DAMAGE PARTS AND REALIGN AFFECTED AREAS	New	3 <i>0</i> 0/
2	TO PUTTY, RESPRAY ON FRT BUMPER , FRT PANEL, RH FRT FENDER AND AFFECTED AREAS	New	25 00 800.00
3	CHECK LIGHTING AND WIRING	New	30.0020
	Gross Labor	ır Cost (S\$)	1,430.00

ComfortDelGro Engineering Pte Ltd/SND5080Z/27/06/2022 09:52. Not valid without Reference section. Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >



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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

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.

5. Any false 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

23/06/2022 10:37 (SGT) Date of Submission Reported by 23/06/2022 07:05 (SGT) Date of Accident Sinaran Dr, Singapore xact Location of Accident

ditional Location Information

Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SND5080Z Vehicle Registration Number

INSURED/POLICYHOLDER

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

VEHICLE PARTICULARS

Toyota Sienta Exact purpose for which vehicle was being used at time of Private hire Are you claiming under your own insurance policy for repair to Yes your vehicle? Private hire Vehicle Category Auto Transmission 1496

INSURANCE COMPANY

India International Insurance Pte Ltd Name of Insurance Company D18MFL0003414_02 Policy Number / Cover Note Number

DRIVER

BILLY JAMES TAN Name of Driver SXXXX979E NRIC NO 07/06/1967 Date Of Birth Outdoor Occupation

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
- 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
- 8. Consent under the Personal Data Protection Act(PDPA)

lunderstand, acknowledge, agree and consent that :

- (a) My insurer , my w orkshop 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' law yers/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
- (ii) investigating the accident and/or my claims;
- (ii) carrying out and/or dealing w ith 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
- (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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Driver's Signature (if driver is not the policyholder) / Date Witnessed by Reporting Centre & Time Personnel 0945 Sketch Plan CINKNOWN MUTORYI

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NO

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