

(08/11/13) wef

ASS. REC. BY: AKM

REF:

CS/TM122006351/Rcy3

8396

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SHC 3326
at Workshop m/s COMFORT MECHANICAL
of S9, Lymington

Insured:

TM1

Policy No.

Claims No.

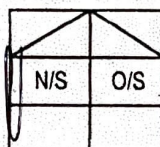
Sum Insured:

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: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHC 3326

Yr Regn: 2019 / NOV

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

Truck / Trailer or

Make:

HYUNDAI AE IONIQ 1.6 DCT c.c. 1580

Colour:

yellow

A/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KM HC 851CV LU 183135

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

P5/65R15

R:

22

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

02/01/22

D.O.I.

04/07/22

Survey held at

COMFORT

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

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

) S + RS, SI

) Photos

) Others

Report Format :

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

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

59 Loyang Drive
Singapore 508969
Tel: 6214 8300

TP INSURER:
CCPL

Tokio Marine Insurance Singapore Ltd (HQ)

CP(P)

Singapore

LKK-Rasif

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	
Policy No:		Date of Loss:	02/07/2022
Vehicle Reg. No.:	SHC332G	Driveable?	NO
Party At Fault:	UNKNOWN		
Make/Model:	HYUNDAI IONIQ HYBRID, 1.6 GLS DCT (A)	Vehicle Reg. Date:	14/11/2019
Vehicle Colour:	YELLOW	Gen Condition:	GOOD
Engine No:	G4LEKU385606	Chassis No:	KMHC851CVLU183135
Odometer:	0 KM		
Paint Type:			
List Item Discount:	20.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	5		
Present Location:	COMFORTDELGRO ENGINEERING PTE LTD (LOYANG)		

COST OF CLAIMS

	Amount
Parts	3,222.92
Miscellaneous Items	11.00
Labour	3,000.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	6,233.92
+ GST 7.00% (S\$)	436.37
Nett Amount (S\$)	6,670.29

This claim is handled by: LIM TIEN SIONG

PAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 04 Jul 2022)
Parts:	192	HYUNDAI IONIQ HYBRID 1.6 GLS DCT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	ComfortDelGro Engineering Pte Ltd/SHC332G/04/07/2022 11:17	
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		*REAR DOOR LH <i>repair</i>	20.00	0.00	*2,147.90 FL
2	1		*REAR WHEEL CAP LH <i>scr</i>	20.00	0.00	*346.40 FL
3	1		*ROCKER PANEL GARNISH LH <i>repair</i>	20.00	0.00	*915.60 FL
4	1		*FRT DOOR COMFORTDELGRO LH <i>scr</i>	0.00	0.00	*75.00 F
5	1		*REAR DOOR APPS LH <i>scr</i>	0.00	0.00	*80.00 F
6	1		*FRT DOOR ADV.STICKER LH <i>scr</i>	0.00	0.00	*100.00 F
7	1		*REAR DOOR ADV.STICKER LH <i>scr</i>	0.00	0.00	*100.00 F
8	1		*REAR FENDER ADV.STICKER LH <i>scr</i>	0.00	0.00	*100.00 F
9	1		*REAR FENDER (PETROL ONLY) LH <i>scr</i>	0.00	0.00	*40.00 F

F=Franchise part. L=ListItemDisc.

Sub Total (\$\$)	3,904.90
- List Item Discount on L Items (\$\$)	681.98
Total Parts (\$\$)	3,222.92

ComfortDelGro Engineering Pte Ltd/SHC332G/04/07/2022 11:17. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

Qty Particulars

Amount

Miscellaneous Items

1 OD/TP Case (Insurer)

11.00

Sub Total (S\$)

11.00

Estimates on Labour

No Particulars

Lab.Type

Amount

Labour Items

1 PANEL BEATING-Rear Fender LH Etc

New

700 ~~1,200.00~~

2 SPRAY PAINTING-Frt Door LH & Rear Bumper Etc

New

1000 1,500.00

3 TUFF KOTE

New

X 60.00

4 TRANSFER OF DOOR

New

X 120.00

5 WHEEL ALIGNMENT

New

60 ~~120.00~~

Gross Labour Cost (S\$)

3,000.00

ComfortDelGro Engineering Pte Ltd/SHC332G/04/07/2022 11:17. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

Paul

Hp 90010068

5 days

P/P

04/07/22 @ 1500

Reay after repair

Reay new wheel hub cap
& stickers

Date/Time: 04.07.2022 10:46

Page : 1

Job: ARC Repair TP(CFS0)1

JOB CARD Sales Order: 4353630

JC NO 305521881

OWNER

CITYCAB PTE LTD
7010070
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65551188

(R) (O)
(P)

OUNT CARD NO.

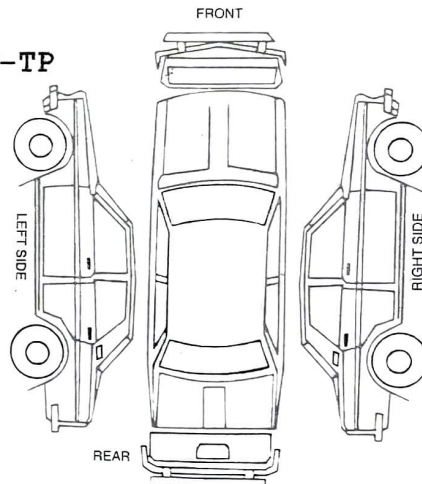
REGN NO: SHC 332G	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ(G3)	DATE/TIME IN 02.07.2022 11:10
YR OF MANU. 14.11.2019	TARGET DATE
CHASSIS CODE KMHC851CVLU183135	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 02.07.2022
NATURE: 3P 02.07.2022

/NO LABOR CODE
00010 PB

DESCRIPTION
PANEL BEATING-SHC 332G-TP



BOOKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Edge Slip

Exit Pass

No.: SHC 332G

LIMITS

Vehicle No.:

SHC 332G

Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

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	02/07/2022 10:52 (SGT)
Reported by	Driver
Date of Accident	02/07/2022 04:10 (SGT)
Exact Location of Accident	Hougang Ave 2, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC332G
-----------------------------	---------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CITYCAB PTE LTD
Company Reg No	1XXXXX839G
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-90697998
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ae ioniq
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	1580

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	VFX/P2419140

DRIVER

Name of Driver	KOH CHUAN HUAT
NRIC No	SXXXX975F
Date Of Birth	24/04/1959
Occupation	Outdoor

Date Of Driving Pass 17/03/1978
 Driving experience 44 YEARS AND 4 MONTHS
 Gender Male
 Mobile Number (Phone) +65-90697998
 Alt. Phone Number -
 Email Address fleetsafety@cdgtaxi.com.sg
 Address BLK 596C ANG MO KIO STREET 52 #20-339
 Address complement -
 Postcode 563596
 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 Side Swipe
 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) 1
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No
 Translator's name -
 Translator's ID -
 Translator's phone number -
 Translator's email -
 Original language used in the statement -

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 02/07/22 AT ABOUT 0410HRS I WAS DRIVING VEHICLE A SHC332G ALONG HOUGANG AVENUE 2.I WAS AT EXTREME RIGHT LANE AS I TRAVELLING WITHIN MY LANE SUDDENLY VEHICLE B SND6443D WHICH WAS TRAVELLING ALONG CENTER LANE TURN INTO MY LANE AND SIDE SWIPE MY VEHICLE LEFT PORTION.EXCHANGED PARTICULAR AND NO INJURIES AT POINT OF TIME.

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SND6443D
 Vehicle Manufacturer Toyota
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -

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 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.



FLASH ACCIDENT
REPORTING OFFICER

FRO BALAJI



Policyholder's Signature / Date &
Time

Sketch Plan

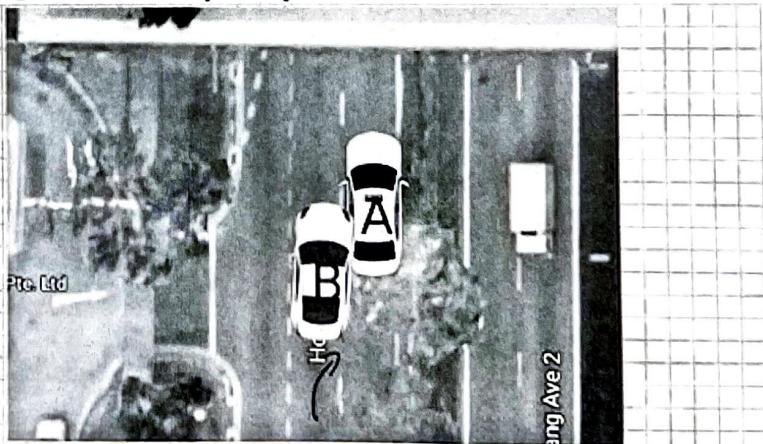
Driver's Signature (If driver is not the policyholder) / Date
& Time

0530HRS 02/07/22

Witnessed by Reporting Centre
Personnel

A.SHC332G
B.SND6443D

HOUGANG AVE 2



Describe Circumstances of the Accident

ON 02/07/22 AT ABOUT 0410HRS I WAS DRIVING
VEHICLE A SHC332G ALONG HOUGANG AVENUE
2.I WAS AT EXTREME RIGHT LANE AS I
TRAVELLING WITHIN MY LANE SUDDENLY
VEHICLE B SND6443D WHICH WAS TRAVELLING
ALONG CENTER LANE TURN INTO MY LANE AND
SIDE SWIPE MY VEHICLE LEFT
PORTION.EXCHANGED PARTICULAR AND NO
INJURIES AT POINT OF TIME.

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

0530HRS 02/07/22

FLASH ACCIDENT
REPORTING OFFICER

FRO BALAJI

Witnessed by Reporting Centre
Personnel



[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	839G
Vehicle No.:	SHC332G
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Jul 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	AE IONIQ HEV FL 1.6 DCT
Primary Colour:	Yellow
Manufacturing Year:	2019
Engine No.:	G4LEKU385606
Chassis No.:	KMHC851CVLU183135
Maximum Power Output:	103.6 kW (138 bhp)
Open Market Value:	\$25,680.00
Original Registration Date:	14 Nov 2019
First Registration Date:	14 Nov 2019
Transfer Count:	0
Actual ARF Paid:	\$12,952.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Nov 2027
PARF Rebate Amount:	\$9,714.00
COE Expiry Date:	13 Nov 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$25,933.00
COE Rebate Amount:	\$17,360.00
Total Rebate Amount:	\$27,074.00

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 05 Jul 2022

OK