GIA / PR Seen: Consistent?: Yes or No Est. Repairs: Gays Res.: Yes or No Lum Sum: Do % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Vehicle: IN / OUT Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision Date/Time Action / Instruction Vehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision Date/Time, File Pass to? TYPIST Date/Time, File Pass to? TYPIST Date/Time, File Redum to? Add Fee: Site Insp (\$) \$+RS. \$1 Finterview (\$) Person	From: Date: Veh No: StC 2334 M Yr Regn: Dcc / e	3017
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Type: MLCar / M.Cycle / Bus / Van / Lorry / Tadi) Prime Mover / Truck / Trailer or		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Modif: Vill Sirim / STD Arim or Tyre Size: F: 205 60 2 U Remark Tale veh had commenced its repair at the time of inspection. Bob. Vehicle: IV / Old Condition Best / Dun / EXNOVA / SY / FS / LIZA / NIC / OHTSU / PIR / SUMI / TOYO / YOKO or Front Reset RUBAL Mmm RBell mm RBell mm RBell mm LBal Mmm RBell Mmm LBal Mmm LBal Mmm LBal Mmm LBal Mmm LBal Mmm CA / REP / REP. / 24 HRS Vehicle: IN / OUT Deta / Time Action / Instruction Vehicle: IN / OUT Deta / Time Action / Instruction Vehicle: IN / OUT The UIC / Chassis frame / Body Structure effected due to collision Actid Fee: Site insp Actid Fee: Site insp Interview (\$ 2000) Survey Fee: Transportation: Actid Fee: Site insp Interview (\$ 2000)	101-11-2	
Tyre Size: F: 205 60 7 14 Remark: Tiple veh had commenced its repair at the time of inspection. Book. Value? - no. log. covol. Book. value? - no. log. covo	Notice of Viche	
Remark: Tiple veth had commenced its repair at the time of inspection. Boy No	- Contraction of	3.5
repair at the time of inspection. **Pools Notice** of Notice** **Pools Notice*** **Pools Notice** *	(De fee (Zindillion)	
TOYO/YOKO or Front Person Consistent?: Yes or No SIA / PR Seen: Consistent?: Yes or No SIA / PR Seen: Consistent?: Yes or No SIA / PR Seen: Gays Res.: Yes or No SIA / REP / REP. / 24 HRS Wehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision Toyo/Yoko or Front RBaL mm RBaL mm RBaL mm LBaL mm	I DO I DUN / PANITVA / GV / EQ / I DA / SINC / OUTCIL / DID / CTIEN	
Sel. or Market Value: DAC Accident Rport: Consistent?: Yes or No SIA / PR Seen: Consistent?: Yes or No Six Repairs: days Res.: Yes or No Jun Sum: D.O.A.	repair at the title of inspection.	© (∓)
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Date / Time Action / Instruction Learn SFB 6040 M	AGE LEISH I DITECTOR	
Verifice before 36 months at the grains (Red \$ 22,605.04/81) 13 23 MN J J S S 401 - 2 th 6 days gray (Red \$ 22,605.04/81) 14 3 23 MN J J S S 401 - 2 th 6 days gray (Red \$ 22,605.04/81) 15 13 203 Preli. Report Days Of Repair: 6 TYPIST V: Final Report Resurvey No. of Trip: Survey Fee: Transportation: Add Fee: Site Insp (\$) S+RS_8	The U/C / Chassis frame / Body Structure affected due to d	:noisillo:
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Add Fee: Site Insp (\$)S+RSSI		
: Interview (\$) shows	Transportation:	1
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Front Format : TP : Tech. Inve (2)	week Borness TP	

BIFROST AUTO PTE LTD

REPAIR ESTIMATE

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13-Dec-22

INSURANCE:

MODEL:

HYUNDAI 140

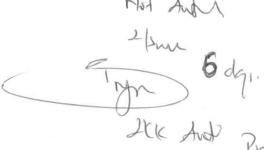
VEHICLE NO.: SHC 2334M

				-
DESCRIPTION	QTY		E AMOUNT	
REAR BUMPER W	1	\$ 1,106.		-
REAR BUMPER CLIP (10 pcs) →	1	\$ 22.		
REAR BUMPER BRACKET 🛏	1	\$ 35.		— *
REAR FENDER (LH/RH) 1	1	\$ 2,171.		- T-
REAR WINDSCREEN MOULDING ~~	1	\$ 51.		
REAR DOOR (LH/RH) Duch	1	\$2,707.	70 \$2,707.70	L 2201-70
REAR DOOR RUBBER (LH/RH) Sn	1	\$ 280.	50 \$280.50	*
REAR DOOR REGULATOR (LH/RH) →	1	\$ 660.	90 \$660.90	4
REAR DOOR POWER WINDOW MOTOR	1	\$ 386.	20 \$386.20	<u>/</u>
REAR DOOR LOCK ASSY	1	\$ 468.	20 \$468.20	1
ROCKER PANEL OUTER GARNISH (LH/RH) (wt	1	\$ 732.	80 \$732.80	1
ROCKER PANEL OUTER GARNISH CLIP(LH/RH) Hec	1	\$ 65.	00 \$65.00	
REAR TYRE RIM (LH/RH) →	1	\$ 650.	60 \$650.60	1×
REAR TYRE WHEEL CAP LH COA	1	\$ 214.	20 \$214.20	L 107.10
REAR WHEEL BEARING ING & HUB	1	\$ 724.	00 \$724.00	1 \times
REAR TRAILING ARM (LH/RH)	1	\$ 384.	00 \$384.00	
REAR ASSIST (LH/RH)	1	\$ 219.	40 \$219.40	
REAR SHOCK ABSORBER (LH/RH) ⊢√	1	\$ 683.	70 \$683.70	
REAR UPPER ARM (LH/RH) - M-4	1	\$ 335.	75 \$335.75	12
REAR LOWER ARM (LH/RH) H-1	1	\$ 353.	80 \$353.80	12
REAR KNUCKLE ARM (LH/RH) ⊢⊷	1	\$ 545.	60 \$545.60	12
FRONT BUMPER COVER HH	1	\$ 1,052.	20 \$1,052.20	12
FRONT BUMPER BRACKET TOP (LH/RH)	1	\$ 44.	80 \$44.80	14
FRONT BUMPER BRACKET (LH/RH) ₩	1	\$ 49.	20 \$49.20	4
FRONT BUMPER RETAINER MOUNTING LH/RH	1	\$ 76.	20 \$76.20	\star
HEADLAMP (LH/RH) WW	1	\$ 2,776.	00 \$2,776.00	× 2
FRONT FENDER (LH/RH) Dewn	1	\$ 663.	00 \$663.00	
FRONT FENDER SHIELD (LH/RH) ►	1	\$ 174.	90 \$174.90	\times
FRONT DOOR MIRROR ASSY (LH/RH)	1	\$ 893.	50 \$893.50	×
FRONT DOOR (LH/RH) Den	1	\$2,707.	70 \$2,707.70	L 2256.40
FRONT DOOR RUBBER HA	1	\$ 290.	50 \$290.50	
FRONT WHEEL RIM (LH/RH)	1	\$ 650.	60 \$650.60	×
FRONT WHEEL HUB CAP (LH/RH)	1	\$ 214.	20 \$214.20	107.10
KNUCKLE ARM (LH/RH)	1	\$ 1,104.	00 \$1,104.00	1
FRONT WHEEL BEARING AND HUB (LH/RH)	1	\$ 863.	80 \$863.80	14
FRONT SUSPENSION LOWER ARM (LH/RH)	1	\$ 595.	90 \$595.90	14
FRONT SHOCK ABSORBER ASSY (LH/RH)	1	\$ 684.	40 \$684.40	\prec
		, , , , , , , , , , , , , , , , , , ,		1 122.10
SUB TOTAL			\$25,640.05	6,133.10
LESS 20%			\$5,128.01	4,906.48
DISCOUNTED TOTAL			\$20,512.04	1 ′
				1
REAR WINDSCREEN SEALANT HA SN	1	\$ 46.	00 \$46.00	X

DEAD BOOK TELLING					
REAR DOOR TEL NO. STICKER (LH/RH) Hu	V 1	\$	10.00	\$10.00	71/
Rear Door Comfortdelgro & Apps Sticker(LH/RH) Hau St	V 1	\$	80.00		
REAR TYRE (LH/RH) had SI	V 1	\$	216.00	\$216.00	×
FRONT DOOR COMFORT LOGO (LH/RH) HLLO SI	V 1	\$	75.00	10400, 11400 17400 11400	
FRONT TYRE (LH/RH) H	V 1	\$	216.00		
SUB TOTAL				\$643.00	165-00
Labour Charge					1
Panel Beating	+	+	1 000 00		1
Spray Painting Charge	1	\$	1,800.00	\$1,800.00	4001-
Wiring Charge	1	\$	1,600.00	\$1,600.00	8001-
Tuff Kote	1	\$	100.00	\$100.00	Hu!
Towing Charge	1	\$	100.00	\$100.00	401-
Remove/Pofix Cushion & Unbalaton B	1	\$	80.00	\$80.00	Med
Remove/Refix Cushion & Upholstery Rear Remove/Refix Rear Windscreen Glass	1	\$	150.00	\$150.00	HJ
Remove/Refix Rear Windscreen Glass	1	\$	120.00	\$120.00	HU
Remove/Refix Reverse Sensor	1	\$	120.00	\$120.00	HH
Remove/Refix Undercarriage (RR)	1	\$	400.00	\$400.00	H
Re-set Rear ABS System	1	\$	400.00	\$400.00	H
Remove/Refix Fuel Tank	1	\$	150.00	\$150.00	Hel
Transfer of Door Mechanism FRONT	1	\$	80.00	\$80.00	
Re-set Frt Power Window System	1	\$	200.00	\$200.00	
Transfer of Door Mechanism REAR	1	\$	80.00	\$80.00	(50.00)
Re-set Rear Power Window System	1	\$	200.00	\$200.00	
Four Wheel Alignment	1	\$	120.00	\$120.00	
Remove/Refix Undercarriage (Frt)	1	\$	400.00	\$400.00	HU
Re-set Frt ABS System	1	\$	200.00	\$200.00	
Diagnostic & Resetting To Erase Fault Code	1	\$	550.00	\$550.00	, ,
		Ť		\$300.00	H
TOTAL LABOUR				\$6,850.00	1720.00
ESTIMATE TOTAL					
ESTIMATE TOTAL				\$ 28,005.04	

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. Please send your book value request to: claims_ltr@bifrostauto.com

LIS 5,4001-



It k And Provide W before

Thomas - Reprise Limit.

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:

Customer:

LIM TAN

Date:

12/14/2022 1:14 PM

Company:

01-42

License NO:

SHC 2334M

VIN

Technician:

Odometer:

Order NO:

VEHICLE ALIGNMENT REPORT

HYUNDAI, i40 VF Series, 15-15 (Customized)

Primary	Primary Angles		Initial	Specif	Final	
· · · · · · · · · · · · · · · · · · ·				Min.	Max.	
	Caster	Left	4°10'	3°54'	4°54'	4°24'
		Right	4°17'	3°54'	4°54'	4°36'
F	Camber	Left	-0°48'	-1°00'	0°00'	-0°48'
Front		Right	-0°36'	-1°00'	0°00'	-0°30'
	Toe	Left	-0°09'	-0°06′	0°06′	-0°03'
		Right	-0°12'	-0°06'	0°06'	-0°24'
		Total	-0°21'	-0°12'	0°12'	-0°27'
	Camber `	Left .	-2°00'	-1°30'	-0°30'	-2°42'
		Right	-1°36'	-1°30'	-0°30,	-1°36'
Rear	Toe	Left	-0°18'	0.00,	0°12'	-0°21'
, , , ,		Right	0°09'	0.00,	0°12'	0°09'
		Total	-0°09'	0°00'	0°24'	-0-12
	Thrust Angle		-0°14'			0°15'
Second	ary Angles		Initial	Specif	ications	Final
Occorna	ally Aligies		1111101	Min.	Max.	1 11101
SAI		Left	13°38'	13°18'	14°18'	13°38'
		Right	14°07'	13°18'	14°18'	14°07'
Included Ar	nale	Left	12°50'	T	****	12°50'
		Right	13°31'			13°37'
Toe Out On	Turns	Left				
		Right				
Max Turn In	side	Left		1		
00000000000000000000000000000000000000		Right				
Toe Curve (Change . /	Left		1		
5		Right				
Setback		Front	-1mm	†		-1mm
		Rear	-1mm			-1mm
Track Width	Diff		-3mm	+		-3mm
Wheel Base			0mm	Wheelstern and the second		1mm
Front Ride I	Height	Left	T			
		Right				
Rear Ride H	leight	Left	T	1		
	70 g	Right				
Frame Angl	Α			-		

ONE STOP AUTOMOTIVE SOLUTION

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company	
Owner ID: Vehicle Details	821R	
Vehicle No.:	SHC2334M	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	31 Dec 2022	
Vehicle Make:	HYUNDAI	
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DI	
Primary Colour:	Blue	
Manufacturing Year:	2016	
Engine No.:	D4FDGU660655	
Chassis No.:	KMHLB41UMHU098648	
Maximum Power Output:	100.0 kW (134 bhp)	
Open Market Value:	\$18,946.00	
Original Registration Date:	13 Dec 2017	
First Registration Date:	13 Dec 2017	
Transfer Count:	0	
Actual ARF Paid: ntended PARF Rebate Details	\$18,946.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	12 Dec 2025	
PARF Rebate Amount: ntended COE Rebate Details	\$13,262.00	
COE Expiry Date:	12 Dec 2025	
COE Category:	A - Car up to 1600cc & 97kW (130bhp	
COE Period(Years):	8	
QP Paid:	\$34,159.00	
OE Rebate Amount:	\$12,591.00	
otal Rebate Amount: ⁄lessage	\$25,853.00	

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 13 Dec 2022

SJOG22CD0009 / JP Knights Pte Ltd ENTRY DATE & TIME: 13/12/2022 12:44 (SGT) SUBMITTED BY: Weine Chieng VERSION: 1 (13/12/2022 12:44 (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 Actual 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
Reported by
Date of Accident
Exact Location of Accident
Additional Location Information
Country/State of Loss

13/12/2022 12:44 (SGT) Driver 13/12/2022 07:35 (SGT) Woodlands Ave 1, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHC2334M

INSURED/POLICYHOLDER

Is company?
Name Of Registered Owner
Company Reg No
Email Address
Mobile Phone No
Alternative Phone No

Yes
COMFORT TRANSPORTATION PTE LTD
1XXXXX821R
fleetsafety@cdgtaxi.com.sg
(Phone) +65-98302513

VEHICLE PARTICULARS

Manufacturer Model

Variant
Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission CC

Hyundai I40

Private hire

No - Claiming third party

(Office) +65-65508768

Taxi Auto 1685

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

AXA Insurance Pte Ltd VFX/P2419138

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LAY TEO KOO SXXXX673E 14/07/1954 Outdoor Date Of Driving Pass Driving experience

Gender

Mobile Number

Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

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?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

Translator's name

Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

PASSENGER 1

Name

Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police?

CIRCUMSTANCES OF ACCIDENT

30/11/1978

44 YEARS AND 1 MONTH

(Phone) +65-98302513

fleetsafety@cdgtaxi.com.sg

BLK 251 JURONG EAST STREET 24 # 05 - 118

600251

No

Hirer

No

Collision - Change/cross lane

Clear

Dry

No No

> Yes 2

No

UNKNOWN Female

Was notice of intended Prosecution given?

If yes, against whom?

No No

ON 13.12.2022 AT ABOUT 0735HRS I WAS DRIVING MY VEHICLE A SHC2334M FETCHING MY PASSENGER TO JALAN BESAR. MY VEHICLE A WAS ON THE MIDDLE LANE OF WOODLANDS AVE 2. NEAR BLOCK 500, VEHICLE B SFB6040M ON MY LEFT, CUT INTO MY LANE AND SIDE SWIPE HIS VEHICLE B RIGHT FRONT ONTO MY VEHICLE A WHOLE LEFT SIDE. MY PASSENGER IS NOT INJURED AND I PROCEEDED TO SEND HER TO DESTINATION AFTER TAKING SCENE PHOTOS AND

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident

Yes

Yes

FILE IS NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

NRIC No

Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

SFB6040M

Private car LEE WU TECK

SXXXX0011

(Phone) +65-91802001

RIGHT FRONT

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 Tability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forw anded 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.
- Consent under the Personal Data Protection Act(PDPA)

lunderstand, acknowledge, agree and consent that

- (a) Myinsurer, myw 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) 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 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 the claims;
- (ii) investigating the accident and/or my claims;
- (ii) carrying out and/or dealing with my instructions or responding to any enquines by me.
- (w) 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 wiell as on the external cover of envelopes/marl
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims, (collectively the "Purposes")
- (b) altinsurer(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

Driver's Signature (if driver is not the policyholder) / Date

FLASH ACCIDENT
REPORTING OFFICER
KYMI YONG

Witnessed by Reporting Centre

1040HRS

Policyholder's Signature / Date & Time

Sketch Plan

A - SHC2334M

B-SFB6040M

WOODLANDS AVE 2

13.12.2022



Describe Circumstances of the Accident

ON 13.12.2022 AT ABOUT 0735HRS I WAS DRIVING MY VEHICLE A SHC2334M FETCHING MY PASSENGER-TO JALAN BESAR. MY VEHICLE A WAS ON THE MIDDLE LANE OF WOODLANDS AVE 2. NEAR BLOCK 500, VEHICLE B SFB6040M ON MY LEFT, CUT INTO MY LANE AND SIDE SWIPE HIS VEHICLE B RIGHT FRONT ONTO MY VEHICLE A WHOLE LEFT SIDE.

MY PASSENGER IS NOT INJURED AND I PROCEEDED TO SEND HER TO DESTINATION AFTER TAKING SCENE PHOTOS AND PARTICULARS EXCHANGED.

Declaration

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

Policyholder's Signature / Date & Time

© Time 13.12.2022 1045HRS

FLASH ACCIDENT.
REPORTING OFFICER
KYMI YONG

Witnessed by Reporting Centre Personnel