

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD528D*Not Notified
11 By \$2250/h***AAD2212-071**

Vehicle No.:

Chassis No.:

UEN No:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration :

27 DEC 2022**SHD528D**

VF1ABL15AUC283512

200303878K

RENAULT

LATITUDE

15/12/2022

SLD8292H/AIG

17/11/2017

PART

- 1 BUMPER COVER FRT
- 1 BUMPER BRACKET KIT FRT RH
- 1 BUMPER RETAINER FRT RH
- 1 FENDER PANEL FRT RH
- 1 WHEELARCH FRT RH
- 1 WIPER RESERVOIR
- 1 HEADLAMP RH

LIST

\$	<i>Bu</i>	747.20	✓
\$	<i>Bu</i>	101.40	X
\$	<i>0.1</i>	101.40	✓
\$	<i>Bu</i>	437.10	✓
\$	<i>Bu</i>	191.40	X
\$	<i>Bu</i>	179.60	X
\$	<i>mfcm</i>	743.60	✓
\$		2,501.70	
10% \$		250.17	
\$		2,251.53	

Special Nett

- 1 FRONT BUMPER CLIP
- 1 RIM
- 1 TYRE
- 1 FENDER LINER CLIP

\$	<i>Bu</i>	66.00	✓
\$	<i>Bu</i>	350.00	X
\$	<i>1/2</i>	300.00	X
\$	<i>Bu</i>	65.00	X
TOTAL \$		781.00	
TOTAL PARTS \$		3,032.53	

LABOUR

To Remove And Refit Rear Big and Small W/Screen
Glass To Facilitate Bodywork Repair.

\$ *nn* 300.00 X

Putty And Spray Painting Of The Affected Portion.

\$ 3,000.00 *4401*

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SHD528D

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	3,000.00	4001
To Rust-Proofing Of The Affected Areas.	\$	170.00	301
To reinstall rear bumper parking sensor.	\$	170.00	nn X
To transfer of bootlid fittings, attachments and perform water seepage test.	\$	170.00	nn X
To repair and realign rear exhaust pipe.	\$	170.00	nn X
To drop rear exhaust box, renew the same, to repair and realign centre exhaust pipe.	\$	170.00	nn X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	170.00	nn X
To transfer of rear windscreen fittings and conduct water seepage test.	\$	170.00	nn X
To check steering geometry and computer wheel alignment	\$	220.00	nn X
To Check Electrical Lighting Concerned.	\$	170.00	201

TOTAL \$ 7,880.00**Over All Total \$ 13,164.06****(LUMP SUM)****Repair Days****02 DAYS**

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:

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 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	15/12/2022 13:08 (SGT)
Reported by	Driver
Date of Accident	15/12/2022 10:35 (SGT)
Exact Location of Accident	Near 73 Killiney Rd, Singapore 239528
Additional Location Information	KILLINEY ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD528D

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Company Reg No	2XXXXX878K
Email Address	claims@transcab.com.sg
Mobile Phone No	(Phone) +65-62876666
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Renault
Model	Latitude
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	1998

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	VFX/P2413997

DRIVER

Name of Driver	ENG TSE YANG
NRIC No	SXXXX194D
Date Of Birth	07/08/1970
Occupation	Outdoor

Date Of Driving Pass	14/09/1990
Driving experience	32 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97856298
Alt. Phone Number	-
Email Address	claims@transcab.com.sg
Address	1 JALAN EMAS URAI
Address complement	-
Postcode	678701
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	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)	2
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	-

PASSENGER 1

Name	P1
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 15/12/2022 AT ABOUT 1035HOURS , I WAS DROPPING OFF MY PASSENGER AT ROAD SIDE OF KILLINEY ROAD .
SUDDENLY I FELT AN IMPACT AND NOTICED THAT VEHICLE B HAD COLLIDED ONTO RIGHT SIDE OF MY VEHICLE WHILE HE
FILTERING INTO MY LANE.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLD8292H
Vehicle Manufacturer	Toyota

Describe Circumstances of the Accident

ON 15/12/2022 AT ABOUT 1035HOURS , I WAS DROPPING OFF MY PASSENGER AT ROAD SIDE OF KILLINEY ROAD . SUDDENLY I FELT AN IMPACT AND NOTICED THAT VEHICLE B HAD COLLIDED ONTO RIGHT SIDE OF MY VEHICLE WHILE HE FILTERING INTO MY LANE.

Declaration

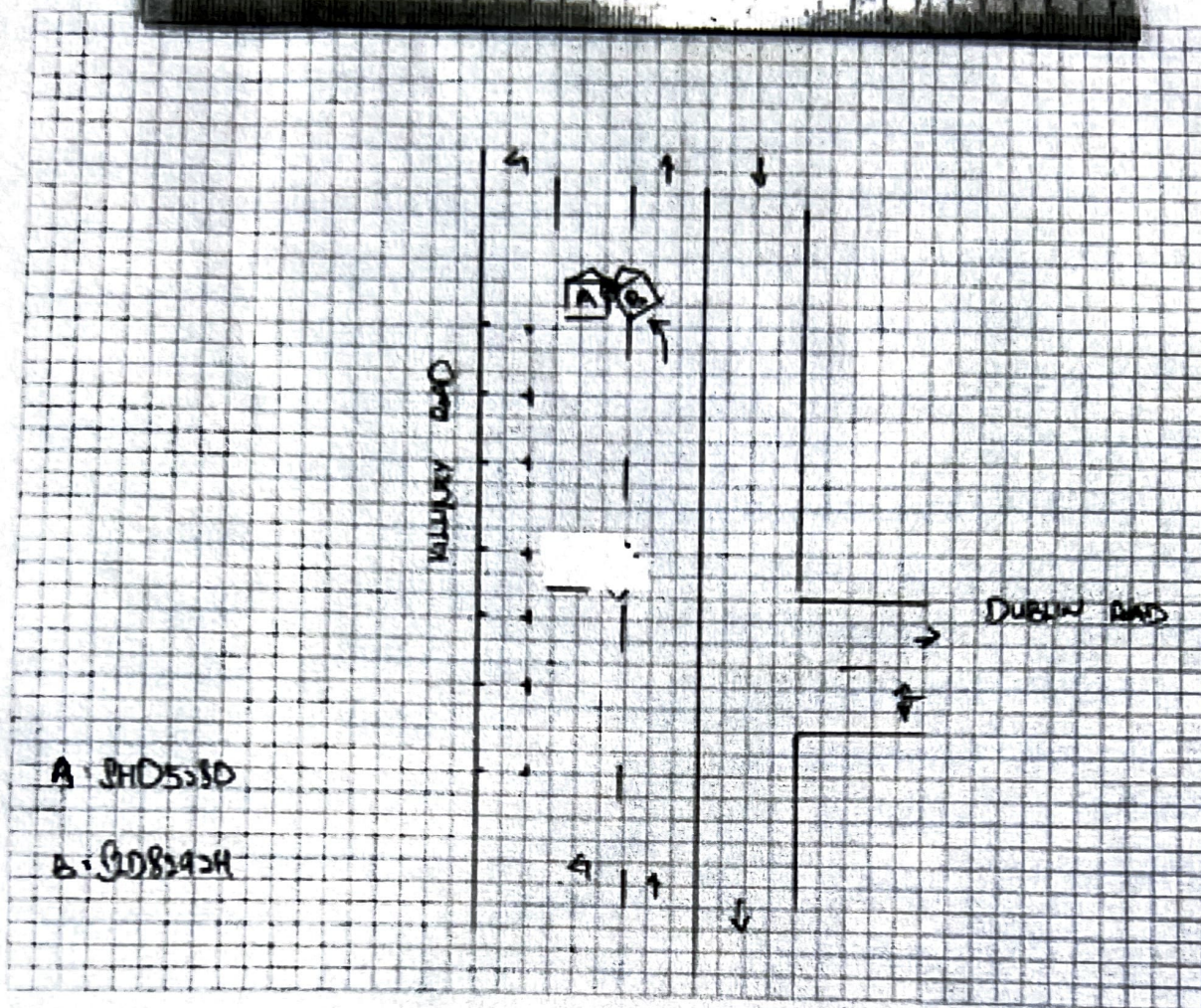
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

Driver's Signature (If driver is not the policyholder) / Date
& Time 15/12/2022

Witnessed By Reporting Officer
Wong Jun Keat

Witnessed by Reporting Centre
Personnel



Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer
Wong Jun Keat
Witnessed by Reporting Centre
Personnel