



TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

30/01/2023 12:49

OWNER'S PARTICULARS

JOB-NO: 50114814

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

VEHICLE DETAILS

LICENSE NO: SHC7236A

TRANS: AUTO

CHASSIS: KMHLB41UMGU092563

MAKE / MODEL: HYUNDAI / i40

ENGINE: D4FDGU661873

OWNER'S INSURER: AXA INSURANCE SINGAPORE PTE LTD

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
<b>LABOUR</b>							
1 TO STRAIGHTEN AND PANEL BEAT OF ACCIDENT AREAS	1.00	1,400.00	0.00	<del>1,400.00</del>		Y	<u>400</u>
2 TO RUST PROOFING OF AFFECTED AREAS	1.00	120.00	0.00	<del>120.00</del>		Y	<u>40</u>
3 TO DIAGNOSTIC, CHECK WIRING, LIGHTING SYSTEM AND CLEAR FAULT CODE	1.00	200.00	0.00	<del>200.00</del>		Y	<u>100</u>
4 TO CONDUCT TYRE BALANCING AND WHEEL ALIGNMENT	1.00	120.00	0.00	<del>120.00</del>		Y	<u>50</u>
5 TO READJUST AND REALIGN HEADLAMP AIM	1.00	100.00	0.00	<del>100.00</del>		Y	<u>30</u>
6 TO REMOVE AND REFIT FRONT UNDERCARRIAGE TO ENABLE BODYWORK REPAIR	1.00	350.00	0.00	<del>350.00</del>		Y	<u>120?</u>
7 TO VACUUM AND TOPUP A/C GAS	1.00	150.00	0.00	150.00		Y	<u>X</u>
8 TO REMOVE AND REFIT A/C CONDENSER, RADIATOR AND OTHER NECESSARY ITEMS TO ENABLE BODYWORK REPAIR	1.00	260.00	0.00	260.00		Y	<u>X</u>
9 TO RESPRAY FRONT BUMPER COVER	1.00	250.00	0.00	250.00		Y	<u>200</u>
10 TO RESPRAY FRONT BONNET	1.00	250.00	0.00	250.00		Y	<u>200</u>
11 TO RESPRAY FRONT FENDER PANEL	1.00	250.00	0.00	250.00		Y	<u>200</u>
12 TO RESPRAY FRONT FENDER APRON PANEL	1.00	250.00	0.00	250.00		Y	<u>100</u>
13 TO RESPRAY FRONT SIDE MIRROR	1.00	250.00	0.00	250.00		Y	<u>50</u>
14 TO RESPRAY FRONT DOOR PANEL	1.00	250.00	0.00	250.00		Y	<u>200</u>
15 TO RESPRAY SIDE SKIRT LH	1.00	250.00	0.00	250.00		Y	<u>X</u>
TOTAL:		4,450.00	0.00	4,450.00			

MATERIALS

1 FRONT BUMPER <i>de</i>	1.00	599.68	119.94	479.74	L	Y	_____
2 FRONT LH BUMPER RETAINER <i>re</i>	1.00	48.93	9.79	39.14	L	Y	_____
3 FRONT LH BUMPER SIDE SUPPORT BRACKET <i>}?</i>	1.00	38.83	7.77	31.06	L	Y	_____
4 FRONT BUMPER ENERGY ABSORBER <i>X</i>	1.00	99.86	19.97	79.89	L	Y	_____
5 FRONT LH HEADLAMP <i>ca</i>	1.00	1,808.10	361.62	1,446.48	L	Y	_____
6 FRONT LH WHEEL RIM COVER <i>de</i>	1.00	265.50	53.10	212.40	L	Y	_____
7 FRONT LH FENDER PANEL <i>bu</i>	1.00	659.50	131.90	527.60	L	Y	_____
8 FRONT LH FENDER LINER <i>de</i>	1.00	185.12	37.02	148.10	L	Y	_____
9 FRONT LH SIDE MIRROR <i>repair</i>	1.00	588.80	117.76	471.04	L	Y	_____
10 SIDE SKIRT LH <i>X</i>	1.00	697.80	139.56	558.24	L	Y	_____
11 FRONT LH WHEEL RIM <i>X</i>	1.00	285.63	57.13	228.50	L	Y	_____
12 FRONT LH KNUCKLE ARM <i>?</i>	1.00	552.20	110.44	441.76	L	Y	_____

**CLAIM DETAILS**

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
13 FRONT LH KNUCKLE HUB + BEARING ?	1.00	311.79	62.36	249.43	L	Y	_____
14 FRONT LH LOWER ARM ?	1.00	529.30	105.86	423.44	L	Y	_____
15 FRONT LH STEERING TIE ROD END ?	1.00	94.70	18.94	75.76	L	Y	_____
16 FRONT LH STEERING RACK END ?	1.00	107.40	21.48	85.92	L	Y	_____
17 FRONT BONNET <i>repair</i>	1.00	1,812.68	362.54	1,450.14	L	Y	_____
18 FRONT LH BONNET HINGE <i>XX</i>	1.00	68.45	13.69	54.76	L	Y	_____
19 AIR CLEANER BOX <i>X</i>	1.00	318.60	63.72	254.88	L	Y	_____
20 AIR CLEANER INTAKE RESONATOR <i>X</i>	1.00	151.60	30.32	121.28	L	Y	_____
21 FRONT END MODULE CARRIER ?	1.00	962.87	192.57	770.30	L	Y	_____
22 FRONT LH BUMPER FOG LAMP COVER <i>XX</i>	1.00	178.55	35.71	142.84	L	Y	_____
23 FRONT LH BUMPER AIR CURTAIN DUCT <i>XX</i>	1.00	85.63	17.13	68.50	L	Y	_____
24 FRONT LH SUSPENSION SHOCK ABSORBER <i>X</i>	1.00	342.20	68.44	273.76	L	Y	_____
25 FRONT LH FENDER AND BUMPER MOUNTING BRACKET <i>??</i>	1.00	45.12	9.02	36.10	L	Y	_____
26 FRONT LH FENDER INSULATOR <i>X</i>	1.00	53.30	10.66	42.64	L	Y	_____
27 FRONT BUMPER CLIP SET <i>W</i>	1.00	55.00	0.00	55.00 <i>30</i>	S	Y	_____
28 FRONT BUMPER RIVET SET <i>W</i>	1.00	50.00	0.00	50.00 <i>30</i>	S	Y	_____
29 RADIATOR COOLANT ?	1.00	120.00	0.00	120.00	S	Y	_____
30 FRONT FENDER INNER SHIELD CLIP SET <i>W</i>	1.00	55.00	0.00	55.00 <i>30</i>	S	Y	_____
31 FRONT DOOR STICKER-COMFORT DELGRO LH <i>W</i>	1.00	120.00	0.00	120.00 <i>30</i>	S	Y	_____
32 FRONT TYRE 205/60/16 <i>X</i>	1.00	350.00	0.00	350.00 <i>X</i>	S	Y	_____
33 FRONT BONNET INSULATOR CLIP <i>X</i>	1.00	50.00	0.00	50.00 <i>X</i>	S	Y	_____
<b>TOTAL:</b>		11,692.14	1,178.44	9,513.70			_____
<b>TOTAL PARTS &amp; LABOUR:</b>		16,142.14	2,178.44	13,963.70			_____

EXCESS/LOADING:\$\$ 0.00

No. Of Day: 6 days

RE-SURVEY: BEFORE AFTER PAINTING  
PART-BY-PART OR LUMP SUM \$\$ \_\_\_\_\_

DATE OF SURVEY: 31 / 01 / 23 @ 1430

SURVEYED BY: Rasmu

CONTACT NO: 9006068 FAX NO: \_\_\_\_\_

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto001  
Ding Auto User 1

ESTIMATOR  
STA AUTOCENTRE  
TEL: \_\_\_\_\_ FAX: \_\_\_\_\_

**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: \_\_\_\_\_

# 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	30/01/2023 11:36 (SGT)
Reported by	Driver
Date of Accident	29/01/2023 11:05 (SGT)
Exact Location of Accident	Lor Melayu, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7238A
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) +65-90122781
Alternative Phone No	(Office) +65-65508768

## VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	I40
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	1685

## INSURANCE COMPANY

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

## DRIVER

Name of Driver	TAN BOO HOE
NRIC No	SXXXX453B
Date Of Birth	15/06/1961
Occupation	

Of Driving Pass  
 ng experience  
 der  
 ile Number  
 Phone Number  
 ail 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

16/07/1979  
 43 YEARS AND 6 MONTHS  
 Male  
 (Phone) +65-90122781  
 -  
 fleetsafety@cdgtaxi.com.sg  
 505 ANG MO KIO AVENUE 8 # 10-2694  
 -  
 560505  
 No  
 Hirer  
 No  
 -  
 -

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident  
 Weather Conditions  
 Road Surface

Collision - Major/Minor Rd  
 Raining  
 Wet

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

No  
 2  
 No  
 -  
 Yes  
 1  
 No  
 -  
 -  
 -  
 -  
 -

DETAILS OF POLICE ACTION

Was the accident reported to the police?  
 Was notice of intended Prosecution given?  
 If yes, against whom?

No  
 No  
 -

CIRCUMSTANCES OF ACCIDENT

ON 29/01/23 AT ABOUT 1105HRS, I WAS DRIVING VEHICLE A (SHC7238A) ALONG LORONG MELAYU AFTER ALIGHTING PASSENGER AT UNIT 54. NEAR TO UNIT 51, SUDDENLY VEHICLE B (SLS2766T) PARKED ALONG THE ROADSIDE SUDDENLY TURNED OUT AND COLLIDED INTO THE LEFT PORTION OF MY VEHICLE. NO PARTICULARS EXCHANGED, NO INJURY.

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 NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number  
 Vehicle Manufacturer  
 Vehicle Model  
 Vehicle Variant  
 Vehicle Colour

SLS2766T  
 Toyota  
 -  
 -  
 -

Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

**SKETCH PLAN**

**IMPORTANT NOTICE**

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized 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 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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 AMIN

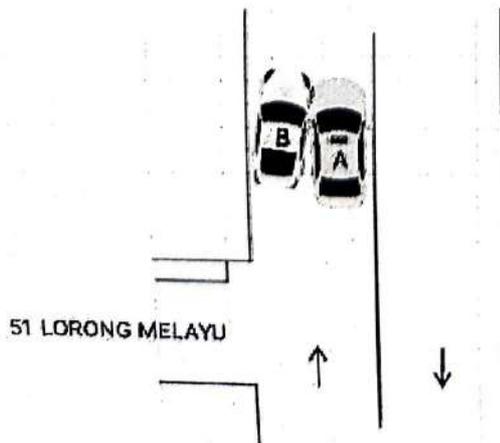


\_\_\_\_\_  
Policyholder's Signature / Date & Time

~~\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date & Time~~  
290123 1600

\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

**Sketch Plan**



A - SHC7238A  
B - SLS2766T

**Describe Circumstances of the Accident**

ON 29/01/23 AT ABOUT 1105HRS, I WAS DRIVING VEHICLE A (SHC7238A) ALONG LORONG MELAYU AFTER ALIGHTING PASSENGER AT UNIT 54. NEAR TO UNIT 51, SUDDENLY VEHICLE B (SLS2766T) PARKED ALONG THE ROADSIDE SUDDENLY TURNED OUT AND COLLIDED INTO THE LEFT PORTION OF MY VEHICLE. NO PARTICULARS EXCHANGED, NO INJURY.

**Declaration**

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  
290123 1600

**FLASH ACCIDENT  
REPORTING OFFICER**

FRO AMIN



\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	839G
Vehicle Details	
Vehicle No.:	SHC7238A
Vehicle to be Exported:	Yes
Intended Deregistration Date:	02 Feb 2023
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Primary Colour:	Yellow
Manufacturing Year:	2016
Engine No.:	D4FDGU661873
Chassis No.:	KMHLB41UMGU092563
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$18,731.00
Original Registration Date:	28 Jul 2016
First Registration Date:	28 Jul 2016
Transfer Count:	0
Actual ARF Paid:	\$18,731.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Jul 2024
PARF Rebate Amount:	\$12,175.00
Intended COE Rebate Details	
COE Expiry Date:	27 Jul 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$39,616.00
COE Rebate Amount:	\$7,348.00
<b>Total Rebate Amount:</b>	<b>\$19,523.00</b>
Message	
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 02 Feb 2023

OK

Vehicle NBV for Fleet Safety Division

Report ID : ZFICTPL32  
 DATE : 02.02.2023  
 TIME : 09:13:06

CityCab Pte Ltd  
 Vehicle NBV for Fleet Safety Division  
 AS AT 31.12.2022

USER ID : CTENZK03  
 PAGE : 1

Co.Code : CAB  
 Licence Pl.No : SHC7238A  
 Old Asset No :  
 Veh.Model : Hyundai I40  
 Reg.Date : 29.07.2016  
 Cap.Date : 29.07.2016  
 Accident.Date : 29.01.2023  
 Veh.Age : 078

Asset No	SA.No	Bal.Dep.Mths	Per.Mth.Dep	Bal.Dep.Value	Asset Description 1	Cost	Op.Acc.Dep	Cur.Year Dep	Accum. Dep	Net Book Value	Scrap value/Estimated	
											PARF	Refund
			\$	\$		\$	\$	\$	\$	\$		\$
10010810	0	012	294.43	3,533.16	SHC7238A H40 28.07.2016 BASIC COST W AIRCON	26,500.00	19,432.60-	3,533.20-	22,965.80-	3,534.20		1.00
10010810	1	012	41.62	499.44	SHC7238A H40 28.07.2016 IMPORT DUTY 20%OMV\$18731	3,746.19	2,747.20-	499.50-	3,246.70-	499.49		0.00
10010810	2	012	83.26	999.12	SHC7238A H40 28.07.2016 ARF X%OMV\$18731	18,731.00	5,494.87-	999.07-	6,493.94-	12,237.06		11,238.00
10010810	3	012	440.18	5,282.16	SHC7238A H40 28.07.2016 COE 80%	39,616.00	29,051.73-	5,282.14-	34,333.87-	5,282.13		0.00
10010810	4	000	0.00	0.00	SHC7238A H40 28.07.2016 COE TOP UP	0.00	0.00	0.00	0.00	0.00		0.00
10010810	5	012	0.00	0.00	SHC7238A H40 28.07.2016 AIR CONDITIONER	0.00	0.00	0.00	0.00	0.00		0.00
10010810	6	012	0.00	0.00	SHC7238A H40 28.07.2016 PRINTER DIGITAX THERMAL	0.00	0.00	0.00	0.00	0.00		0.00
10010810	7	012	0.00	0.00	SHC7238A H40 28.07.2016 TAXIMETER DIGITAX F1	0.00	0.00	0.00	0.00	0.00		0.00
10010810	8	012	1.56	18.72	SHC7238A H40 28.07.2016 VEH REG FEE	140.00	102.67-	18.67-	121.34-	18.66		0.00
			861.05	10,332.60		88,733.19	56,829.07-	10,332.58-	67,161.65-	21,571.54		

COE	440.18	5,282.16	Vehicle : Without I/M & COE	49,117.19	27,777.34-	5,050.44-	32,927.78-	16,289.41
Vehicle	420.87	5,050.44	Vehicle : Without I/M, With COE	88,733.19	56,829.07-	10,332.58-	67,161.65-	21,571.54
			Taximeter	0.00	0.00	0.00	0.00	0.00
		861.05	10,332.60					