



**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

**SHD189Z**

Not Notarised  
 L/Ry & 4400 Max AAD2301-

Vehicle No.:

Chassis No.:

Co UEN:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration :

**01 FEB 2023****SHD189Z**

VF1ABL15AUC282712

200303878K

RENAULT

LATITUDE

31/01/2023

**SJK2915X/AIG**

22/03/2016

**PART**

1 BUMPER COVER REAR  
 1 BUMPER LOWER REAR  
 1 BUMPER BRACKET CTR REAR  
 1 BUMPER BRACKET SIDE RH REAR  
 1 BUMPER RETAINER RH REAR  
 1 BUMPER BRACKET SIDE LH REAR  
 1 BUMPER RETAINER LH REAR  
 1 ABSORBER REAR  
 1 BUMPER BEAM REAR  
 1 BUMPER BEAM BRACKET LH REAR  
 1 BUMPER BEAM BRACKET RH REAR  
 1 OUTER PANEL REAR (End Panel)  
 1 OUTER PANEL REAR (End Panel)TRIM  
 1 SPARE WHEEL PANEL  
 1 SPARE WHEEL PANEL BRACKET LH  
 1 SPARE WHEEL PANEL BRACKET RH  
 1 FENDER PANEL REAR RH  
 1 WHEELARCH REAR RH  
 1 FENDER PANEL INNER TRIM REAR RH  
 1 FENDER PANEL INNER REAR RH  
 1 FENDER INNER BOARD RH  
 1 SPARE TYRE BOARD  
 1 TAILLAMP RH  
 1 EXHAUST REAR  
 1 EXHAUST BRACKET REAR  
 1 EXHAUST CAP REAR  
 1 BOOT REAR

**LIST**

\$ *Ry* 561.70 ✓  
 \$ *R* 411.90 ✓  
 \$ *R* 98.10 X  
 \$ *Di* 82.10 ✓  
 \$ *Di* 59.80 ✓  
 \$ *R* 80.80 X  
 \$ *R* 54.20 X  
 \$ *usp* 217.30 X  
 \$ *Ry* 547.80 ✓  
 \$ *R* 114.50 X  
 \$ *Ry* 114.50 ✓  
 \$ *Ry* 745.80 ✓  
 \$ *R* 404.56 X  
 \$ *R* 1,229.40 X  
 \$ *R* 70.60 X  
 \$ *R* 69.20 X  
 \$ *Bu* 1,933.20 ✓  
 \$ *R* 275.40 X  
 \$ *Return* 671.45 ✓  
 \$ *R* 1,241.60 X  
 \$ *R* 561.40 X  
 \$ *R* 680.90 X  
 \$ *cm* 401.40 ✓  
 \$ *R* 5,263.60 X  
 \$ *R* 24.80 X  
 \$ *R* 125.40 X  
 \$ *Ry* 1,677.20 ✓



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1 BOOT BADGE 'RENAULT'	\$	<i>nc</i>	82.40	—
1 BOOT BADGE	\$	<i>na</i>	95.80	—
1 BOOT REFLECTOR LAMP RH	\$	<i>cm</i>	277.70	✓
1 BUMPER REFLECTOR RH	\$	<i>cm</i>	16.60	✓
1 BOOT HINGE LH	\$	<i>n</i>	254.20	X
1 BOOT HINGE RH	\$	<i>n</i>	254.20	X
1 BOOT STRUT LH	\$	<i>pu</i>	145.10	X
1 BOOT STRUT RH	\$	<i>pu</i>	145.10	X
1 BOOT LOCK LINKAGE	\$	<i>pu</i>	20.60	X
1 BOOT LOCK LINKAGE HOLDER	\$	<i>pu</i>	99.50	X
1 BOOT LOCK	\$	<i>n</i>	246.60	X
1 BOOT LOCK CATCH	\$	<i>n</i>	41.70	X
1 BOOT FINISHER	\$	<i>pu</i>	344.70	X
1 BUMPER COVER FRT	\$	<i>n</i>	747.20	X
1 BUMPER ABSORBER FRT	\$	<i>pu</i>	394.68	X
1 RADIATOR GRILLE	\$	<i>nc</i>	969.90	—
1 RADIATOR GRILLE BADGE 'RENAULT'	\$	<i>na</i>	225.36	—
1 RADIATOR GRILLE FRAME	\$	<i>pu</i>	686.00	X
1 FRAME FULL SUPPORT PANEL	\$	<i>nc</i>	592.70	X
	\$		<b>23,358.65</b>	
	10% \$		<b>2,335.86</b>	
	\$		<b>21,022.78</b>	

**Specical Nett**

1SET BUMPER CLIP FRT	\$	<i>na</i>	95.00	✓
1 FRONT NUMBER PLATE WITH MOULDING	\$	<i>pu</i>	200.00	X
1 END PANEL TRIM CLIP	\$	<i>na</i>	65.00	X
1SET PARKING AID	\$	<i>short</i>	700.00	<i>400.00</i>
1SET REAR BUMPER CLIP	\$	<i>na</i>	66.00	—
1SET BUMPER BRACKET CTR CLIP	\$	<i>na</i>	33.00	—
1SET BUMPER BRACKET SIDE CLIP RH RR	\$	<i>na</i>	10.00	X
1SET BUMPER RETAINER RH CLIP RR	\$	<i>na</i>	20.00	X
1SET BUMPER BRACKET SIDE CLIP LH RR	\$	<i>na</i>	10.00	X
1SET BUMPER RETAINER CLIP LH RR	\$	<i>na</i>	20.00	X
1 REAR NUMBER PLATE WITH MOULDING	\$	<i>pu</i>	200.00	X
1SET BUMPER LOWER REAR CLIP	\$	<i>na</i>	66.00	—
1 EXHAUST MOUNTING REAR	\$	<i>na</i>	17.82	X
1 REAR BOOT STICKER 'Trans-cab'	\$	<i>na</i>	80.00	<i>30.00</i>

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- 1 REAR BOOT STICKER '6555-3333'
- 2 WINDSCREEN SEALANT
- 1 WINDSCREEN MOULDING
- 1 WINDSCREEN INNER SPONGE SEAL

\$	<i>nn</i>	80.00	<i>30sn</i>
\$	<i>nn</i>	150.00	<i>40sn</i>
\$	<i>nn</i>	200.00	X
\$	<i>nn</i>	130.00	X
<b>TOTAL</b>		\$	<b>1,302.82</b>
<b>TOTAL PARTS</b>		\$	<b>22,325.60</b>

**LABOUR**

Putty And Spray Painting Of The Affected Portion.	\$	3,000.00	<i>1100l</i>
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	3,000.00	<i>1200l</i>
To Rust-Proofing Of The Affected Areas.	\$	170.00	<i>90l</i>
To reinstall rear bumper parking sensor.	\$	170.00	<i>60l</i>
To transfer of bootlid fittings, attachments and perform water seepage test.	\$	170.00	<i>60l</i>
To repair and realign rear exhaust pipe.	\$	<i>nn</i> 170.00	X
To drop rear exhaust box, renew the same, to repair and realign centre exhaust pipe.	\$	<i>nn</i> 170.00	X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	170.00	<i>60l</i>
To transfer of rear windscreen fittings and conduct water seepage test.	\$	170.00	<i>120l</i>
To check steering geometry and computer wheel alignment	\$	<i>nn</i> 220.00	X

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To Check Electrical Lighting Concerned.

\$

170.00

*201*

**TOTAL \$**

**7,580.00**

**Over All Total \$**

**50,928.38**

**(LUMP SUM)**

**Repair Days**

*18 DAYS*

*8 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:**

**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	01/02/2023 02:55 (SGT)
Reported by	Driver
Date of Accident	31/01/2023 13:04 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG DOVER ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number SHD189Z

### 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	0

### INSURANCE COMPANY

Name of Insurance Company	HSBC Life (Singapore) Pte. Ltd
Policy Number / Cover Note Number	VFX/P2413997

### DRIVER

Name of Driver	TAN BENG SENG
NRIC No	SXXXX976J
Date Of Birth	27/04/1970
Occupation	Outdoor

Date Of Driving Pass	24/07/1990
Driving experience	32 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90613887
Alt. Phone Number	-
Email Address	claims@transcab.com.sg
Address	459, ANG MO KIO AVENUE10
Address complement	#02-1592
Postcode	S560459
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

#### 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?	Yes
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

#### PASSENGER 1

Name	LYNETTE 96226217
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 THE DATE AND TIME MENTIONED, I WAS TRAVELLING AT THAT SAID MENTIONED ROAD ON THE LEFT LANE AND MADE A STOP BEHIND VEHICLE C. WHEN MY VEHICLE WAS STATIONARY, IT WAS HIT FROM THE REAR BY VEHICLE B WHO HAD EARLIER HIT THE REAR OF VEHICLE D. VEHICLE D THEN HIT THE REAR OF VEHICLE E. THE IMPACT TO MY VEHICLE CAUSED MY VEHICLE TO MOVE FORWARD AND HIT THE REAR OF VEHICLE C. NO ONE WAS INJURED. STATEMENT WAS READ TO ME AND I ACKNOWLEDGED IT.

#### 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	SJK2515X
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Vehicle Manufacturer	Kia
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	CHAN YING XUAN YVETTE
Contact Number	(Phone) +65-96832736
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGX990H
Vehicle Manufacturer	Audi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	NO DETAIL
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBF1507T
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Commercial vehicle
Name of Driver	TAN
Contact Number	(Phone) +65-82005388
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SHB5301T
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-




**Describe Circumstances of the Accident**

ON THE DATE AND TIME MENTIONED, I WAS TRAVELLING AT THAT SAID MENTIONED ROAD ON THE LEFT LANE AND MADE A STOP BEHIND VEHICLE C. WHEN MY VEHICLE WAS STATIONARY, IT WAS HIT FROM THE REAR BY VEHICLE B WHO HAD EARLIER HIT THE REAR OF VEHICLE D. VEHICLE D THAN HIT THE RAER OF VEHICLE E. THE IMPACT TO MY VEHICLE CAUSED MY VEHICLE TO MOVE FORWARD AND HIT THE REAR OF VEHICLE C. NO ONE WAS INJURED. STATEMENT WAS READ TO ME AND I ACKNOWLEDGED IT.

**Declaration**

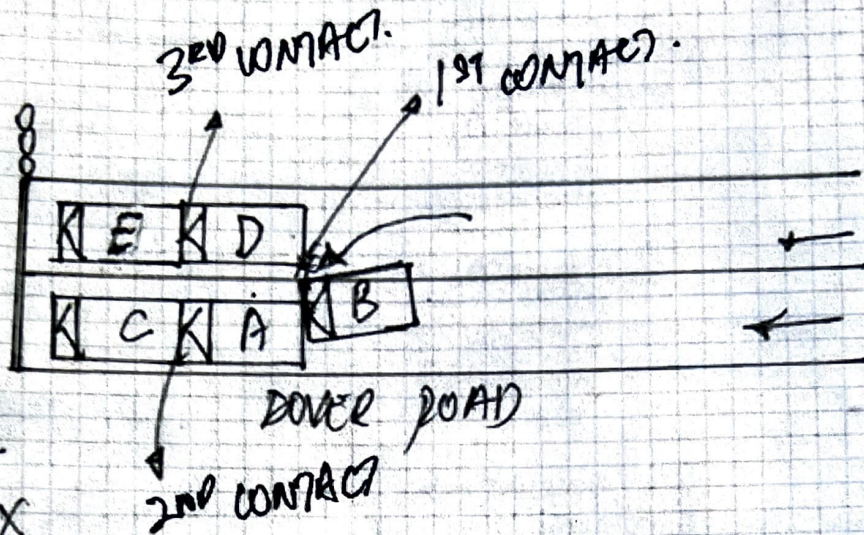
We declare the foregoing particulars are true in every respect.

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

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

\_\_\_\_\_  
Witnessed By Reporting Officer  
Hashim Bin Kamari  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel





A: SHD189Z  
 B: STK2515X  
 C: SGX 990H  
 D: GBF1507T  
 E: SHB5301T.

X. Lee

VERIFIED BY AJAX MARS (ARC)  
 REPORTING OFFICER

Policyholder's Signature  
 Date & Time:

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

Reporting Centre Personnel's Signature  
 Name: HAELIA  
 NRIC/FIN No.: