ASS. REC. BY: Tayph - | REF: CS | E 9 | 2 3003045 / Tuys ASSIGNMENT SHB2139 R. Yr Regn: 2019, Jun. From: Type: M.Car / M.Cycle / Bus / Van / Lorry (Tax) Prime Mover / Estimated Cost: Truck / Trailer or OD (TP) WS / TP RES / OD RES / EVA / INV / MV Mylaud c.c 1798 Make: To Inspect Vehicle No: Insured / Std / NI / NA Colour at Workshop m/s T/Radio: Insured / Std / NI / NA Sp.Reading Eng/No: Insured: 5TDKB3F49030781 C/No: Policy No. Gen. Cond: Good/ Fair / Poor / Burnt Claims No. Steering: Inorder / Jammed / Leaked / Burnt or Excess: Sum Insured: Brake: Inorder / Jammed / Leaked / Burnt or (Client's Record) Modi: Nil / S/Rim / STD A/Rim or Make of Veh: Tyre Size: (Policy Condition) BS / DUN / EXNOVA / GY /-FS / LIZA / MIC / OHTSU / PIR / SUMI / OIS N/S Remark: The veh had commenced its Trigual TOYO I YOKO or repair at the time of inspection. Rear Front Bal. or Market Value: R/Bal. R/Bal. Consistent?: Yes or No IDAC Accident Rport: mm ∐Bal. mm L/Bal. Consistent?: Yes or No GIA / PR Seen: D.O.I. D.O.A. Res.: Yes or No days Est. Repairs: 3 Val.: Yes or No Survey held at Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or Lum Sum: CA | REV | REP. | 24 HRS Vehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision. Person Contacted: Action / Instruction Date / Time Days Of Repair: : Preli. Report Date/Time, File Pass to? Survey Fee: Resurvey No. of Trip: : Final Report Transportation: Date/Time, File Return to? S + RS __ SI : Site Insp (\$ Add Fee: **Photos** : Interview (\$: Tech. Invs (\$ Others Repear Format : Weellend (\$ Lump Sum / LBJ: (% TOTAL

TO :

ESTIMATE REPORT 1ST Quotation

FAX NO:

23/03/2023 14:07 JOB-NO: 50114949

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 3

64739522

ADDRESS: 383 SIN MING DRIVE

SINGAPORE 575717 0

CHASSIS: JTDKB3FU903078161

VEHICLE DETAILS LICENSE NO: SHB2139R

TRANS: AUTO

2ZR2B88029 ENGINE:

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

OWNER'S INSURER: AXA INSURANCE SINGAPORE PTE LTD

JOB-CODE: TP

SA: Ding Auto User 1

CLAIM DETAILS

CLAIM DETAILS			DISCOUNT	DISC PRICE	IND	SUR.DISP	REV
DESCRIPTION	QTY	COSTS			1140	0011.0101	PRICE
LABOUR						10.00	7,00
1 TO STRAIGHTEN AND PANEL BEAT OF	1.00	2,000.00	0.00	2,000.00		Y	7
ACCIDENT AREAS 2 TO RUST PROOFING OF AFFECTED AREAS	1.00	160.00	0.00	160.00		~	40
	1.00	350.00	0.00	350.00		V	10
3 TO REMOVE AND REFIT OF NECESSARY ITEMS TO ENABLE BODYWORK REPAIR	1.00	330.00	0.00	000.00			
4 TO DIAGNOSTIC, CHECK WIRING, LIGHTING SYSTEM AND CLEAR FAULT CODE	1.00	200.00	0.00	200.00		Y	30
5 TO REFIT REAR REVERSE SENSOR	1.00	100.00	0.00	100.00		Y	30
6 TO TRANSFER REAR BOOT MECHANISM TO NEW BOOT AND PERFORM WATER SEEPAGE TEST	1.00	180.00	0.00	180.00		Υ	60
7 TO REMOVE AND REFIT REAR TAILGATE UPPER AND LOWER WINDSCREEN GLASS TO ENABLE BODYWORK REPAIR	1.00	260.00	0.00	260.00	e:	Υ	180
8 TO CHECK AND REPAIR WIRE HARNESS	1.00	200.00	0.00	200.00		Y	×
9 TO VACUUM AND CLEAN UP GLASS SHARDS AND WASH REAR LUGGAGE COMPONENTS	1.00	150.00	0.00	150.00		Υ	×
10 TO RESPRAY REAR BUMPER COVER	1.00	250.00	0.00	250.00		Y	200
11 TO RESPRAY REAR BUMPER EXTENSION FILLER	1.00	250.00	0.00	250.00		Υ	100
12 TO RESPRAY REAR REVERSE SENSOR	1.00	250.00	0.00	250.00		Y	50.
13 TO RESPRAY REAR TAILGATE PANEL	1.00	250.00	0.00	250.00		Y	200
14 TO RESPRAY REAR TAILGATE OUTER GARNISH	1.00	250.00	0.00	250.00		Y	100
15 TO RESPRAY REAR TAILGATE SPOILER	1.00	250.00	0.00	250.00		Y	100
16 TO RESPRAY REAR END PANEL	1.00	250.00	0.00	250.00		Y	100
17 TO RESPRAY REAR FLOOR PAN	1.00	250.00	0.00	250.00		Y	X
18 TO RESPRAY REAR LH QUARTER PANEL	1.00	250.00	0.00	250.00		Y	X
19 TO RESPRAY REAR RH QUARTER PANEL	1.00	250.00	0.00	250.00		Y	×
TOTAL:		6,100.00	0.00	6,100.00			
MATERIALS							
1 REAR BUMPER	1.00	442.60	110.65	331.95	L	Υ	de
2 REAR BUMPER CENTER GUARD	1.00	576.30	144.08	432.22	L	Y	M/
3 REAR BUMPER TOWING COVER	1.00	15.40	3.85	11.55	L	Y	de
4 REAR LH BUMPER RETAINER	1.00	116.50	29.13	87.37	Ľ	Y	de
5 REAR RH BUMPER RETAINER	1.00	117.70	29.43	88.27	L	Υ	X
6 REAR LH BUMPER EXTENSION FILLER	1.00	123.70	30.93	92.77	L	Υ	RY
7 REAR RH BUMPER EXTENSION FILLER	1.00	123.70	30.93	92.77	L	Y	X

CLAIM DETAILS		QUOTED	DISCOUNT	DISC PRICE			REV
DESCRIPTION	QTY	COSTS			IND	SUR.DISP	PRICE
8 REAR BUMPER REINFORCEMENT	1.00	332.70	83.18	249.52	L	Υ	bt
9 SMART KEY ANTENNA	1.00	72.00	18.00	54.00	L	Υ	?
10 SPARE TYRE LOCK	1.00	20.80	5.20	15.60	L	Υ	?
11 REAR BUMPER CENTER UNDER COVER	1.00	229.90	57.48	172.42	L	Υ	×
12 REAR LH BUMPER UNDER COVER	1.00	241.90	60.48	181.42	L	Y	X
13 REAR RH BUMPER UNDER COVER	1.00	175.10	43.78	131.32	L	Y	×
14 TAILLAMP LOWER RH	1.00	502.00	125.50	376.50	L	Y	X
15 TAILLAMP UPPER RH	1.00	451.80	112.95	338.85	L	Υ	×
16 TAILLAMP LOWER LH	1.00	502.00	125.50	376.50	L	Y	ling
17 TAILLAMP UPPER LH	1.00	443.30	110.83	332.47	L	Y	Cu4-
18 REAR TAILGATE PANEL ASSY	1.00	1,147.80	286.95	860.85	L	Y	bt-
19 REAR TAILGATE OUTER GARNISH	1.00	925.60	231.40	694.20	L	Y	cus
20 REAR TAILGATE TOYOTA EMBLEM	1.00	47.90	11.98	35.92	L	Υ	10,
21 REAR TAILGATE PRIUS EMBLEM	1.00	54.60	13.65	40.95	L	Y	19
22 REAR TAILGATE HYBRID EMBLEM	1.00	54.60	13.65	40.95	L	Y	701
23 REAR BOOT WEATHERSTRIP	1.00	372.30	93.08	279.22	L	Y	-
24 REAR BOOT LOCK	1.00	467.00	116.75	350.25	L	Y	0
25 REAR END PANEL	1.00	650.30	162.58	487.72	L	Y	Ry
26 REAR END PANEL TRIM BOARD	1.00	126.70	31.68	95.02	L	Y	
27 REAR LH LUGGAGE SIDE TRIM	1.00	355.90	88.98	266.92	L	Y	?
28 REAR RH LUGGAGE SIDE TRIM	1.00	355.90	88.98	266.92	L	Y	<u>X</u>
29 SPARE TYRE BOARD	1.00	519.00	129.75	389.25	L	Y	7
30 TAILLAMP COVER LH	1.00	64.50	16.13	48.37	L	Y	-
31 TAILLAMP COVER RH	1.00	64.50 761.40	16.13 190.35	48.37 571.05	Ļ	Y	Cra
32 REAR TAILGATE LOWER WINDSCREEN	1.00	35.50	8.88	26.62	L L	Y	wh-
33 REAR TAILGATE LOWER WINDSCREEN MOULDING	1.00	28.90	7.23	21.67			iner_
34 REAR TAILGATE LOWER WINDSCREEN ADHESIVE DAM					L	Y	.0.
35 REAR TAILGATE UPPER WINDSCREEN MOULDING	1.00	35.50	8.88	26.62	L	Y	ue
36 REAR TAILGATE UPPER WINDSCREEN ADHESIVE DAM	1.00	28.90	7.23	21.67	L	Y	ue_
37 REAR LH TAILGATE LOWER WINDSCREEN MOULDING NO.2	1.00	30.90	7.73	23.17	L	Y	wei
38 REAR RH TAILGATE LOWER WINDSCREEN MOULDING NO.2	1.00	30.90	7.73	23.17	L	Y	
39 REAR FLOOR PAN ASSY	1.00	583.40	145.85	437.55	L	Y	<u>×</u>
40 REAR TAILGATE SPOILER ASSY	1.00	1,575.40	393.85	1,181.55	L	Y	Ry
41 REAR BOOT LOCK OPEN SWITCH	1.00	179.10	44.78	134.32	L	Y	X
42 REAR LICENCE PLATE LAMP ASSY	1.00	287.80	71.95	215.85	L	Y	-5-
43 REAR TAILGATE INNER TRIM BOARD (BIG)	1.00	259.20	64.80	194.40	L	Y	7
44 REAR TAILGATE INNER TRIM BOARD (SMALL)	1.00	225.20	56.30	168.90	L	Y	2
45 REAR LH DECK FLOOR BOX	1.00	313.60	78.40	235.20	L	Y	
46 REAR RH DECK FLOOR BOX	1.00	313.60	78.40	235.20	L	Y	
47 TAILLAMP PANEL LH	1.00	103.40	25.85	77.55	L	Y	KY - 20
48 REAR BUMPER CLIP SET	1.00	55.00	0.00	55.00	S	Y	her - 30
49 REAR REVERSE SENSOR SET	2.00	300.00	0.00	300.00	S	Y	FD
50 REAR BUMPER PROTECTOR	1.00	120.00 55.00	0.00	120.00 55.00	S	Y	30.00
51 REAR BUMPER UNDER COVER CLIP SET 52 REAR LICENCE PLATE NUMBER WITH	1.00	80.00	0.00	80.00	S	Y	4561-
FRAME	1.00	100.00	0.00	100.00	c	37	BOW -
53 REAR TAILGATE "6552-1111" STICKER 54 REAR TAILGATE "COMFORT DELGRO"	1.00	100.00	0.00	100.00	S	Y	504/
STICKER	4.00	100.00	0.00	400.00	_		-OW -
55 REAR TAILGATE "BOOK NOW" STICKER 56 REAR TAILGATE INNER TRIM BOARD CLIP	1.00	50.00	0.00	50.00	S	Y	730
SET 57 TAILLAMP GUIDE CLIP SET	1.00	50.00	0.00	50.00	s	Υ	20mg
58 REAR END PANEL SEALANT	2.00	120.00	0.00	120.00	S	Y	7

CLAIM DETAILS

G-STAR-WI-ET-001-02-Rev00

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
59 REAR FLOOR PAN SEALANT	2.00	120.00	0.00	120.00	S	Y	X
60 TAILLAMP PANEL SEALANT	2.00	100.00	0.00	100.00	S	Υ	X
61 REAR SPOILER CLIP AND PAD SET	1.00	50.00	0.00	50.00	S	Y	×
62 REAR WINDSCREEN SEALANT	3.00	150.00	0.00	150.00	S	Y	60 m
63 REAR WINDSCREEN PRIMER	2.00	100.00	0.00	100.00	S	Y	5040
64 REAR BUMPER EXTENSION FILLER CLIP	1.00	50.00	0.00	50.00	S	Y	X
TOTAL:		16,186.70	,621.80	12,564.90			
TOTAL PARTS & LABOUR :		22,286.70	3,621.80	18,664.90			
EXCESS/LOADING:S\$ 0.00 No. Of Day: RE-SURVEY: BEFORE/AFTER PAINTING PART-BY-PART OR LUMP SUM: S\$							
DATE OF SURVEY: 17 /	upper 1	LKIK.		•			
CONTACT NO: 9749574	FAX NO	56356		_			
NOTE: LUMP SUM AMOUNT WOULD BE DAuto001 Ding Auto User 1	REVISED IF	SUPPLEME	NT REPAIR I	S REQUIRED			
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 allewed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

SJ0G233N0011 / JP Knights Pte Ltd ENTRY DATE & TIME: 23/03/2023 15:13 (SGT) SUBMITTED BY: Weine Chieng VERSION: 1 (23/03/2023 15:13 (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 Submission23/03/2023 15:13 (SGT)Reported byActual DriverDate of Accident23/03/2023 11:45 (SGT)xact Location of AccidentTuas West Rd, SingaporeAdditional Location InformationTUAS LINK 4Country/State of LossSingapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

1xxxxx839G

Email Address

Mobile Phone No

(Phone) +65-81943755

Alternative Phone No

(Office) +65-65508768

VEHICLE PARTICULARS

Model Prius

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 1798

INSURANCE COMPANY

Name of Insurance Company HSBC Life (Singapore) Pte. Ltd Policy Number / Cover Note Number VFX/P2419140

DRIVER

 Name of Driver
 LEK MENG KIANG

 NRIC No
 SXXXX084J

 Date Of Birth
 25/09/1962

 Occupation
 Outdoor

Date Of Driving Pass	07/11/1981
Driving experience	41 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81943755
Alt. Phone Number	•
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 268C BOON LAY DRIVE #10-552
Address complement	-
Postcode Is the driver the policyholder?	643268
If No, Relationship of the Driver with the Insured	No RELIEF DRIVER
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	110
STATE OF THE PROPERTY OF THE PARTY OF THE PA	
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	2.
Translator's phone number	-
Translator's email	-
Original language used in the statement	
PASSENGER 1	
Name	UNKNOWN
Gender	Male
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 23/03/23 AT ABOUT 1145HRS, I WAS DRIVING VEHICLE A CAME TO A STOP AT THE JUNCTION OF TUAS LINK 4 AS THI VEHICLE B (XE3181E) COLLIDED INTO THE REAR OF MY VEH	(SHB2139R) ALONG TUAS WEST ROAD ON THE CENTER LANE. I E TRAFFIC LIGHT HAD TURNED RED, WHEN SUDDENLY HICLE. WILL SEEK MEDICAL ATTENTION.
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	R VEHICLE PROPERTY 1

XE3181E

Macidant rapart & Inc. 222NIA11

Vehicle Registration Number

Vehicle Manufacturer	Isuzu
Vehicle Model	But to the state of the state o
Vehicle Variant	_
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	RAJENDIRAN SENTHIL KUMAR
Passport No/FIN	GXXXX500Q
Contact Number	-
Address	2
Address complement	_
Postcode	-
Insurance Company Name	-
Nature Of Damage	4,60
Details of property damaged in accident	
No. Of Passenger (Including Driver)	
the contracting billion	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LEK MENG KIANG
Gender	Male
Phone No	(Phone) +65-81943755
Idress	268C BOON LAY DRIVE #10-552
Address Complement	-
Post Code	643268
Approximate Age Years Old	60
Injuries Sustained	MINOR INJURY
Injured person in which vehicle?	SHB2139R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No
INJURED 2	
Name of injured person	LINIKALOVAJNI
Gender	UNKNOWN
Phone No	Male
Address	
	-
Address Complement Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	UNKNOWN INJURY
	SHB2139R
	Yes
√as this injured conveyed to hospital by ambulance?	No

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)

lunderstand, 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, handing 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 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 OFFICE

FRO AMIN

Policyholder's Signature / Date &

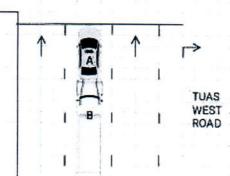
Sketch Plan

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

230323 1320

Witnessed by Reporting Centre

TUAS LINK 4



A - SHB2139R B-XE3181E

Describe Circumstances of the Accid	ont

ENTER LANE I CAME TO A	STOP AT THE JUNCTION OF B (XE3181E) COLLIDED INTO	TUAS LINK 4 AS THE TRA	AFFIC LIGHT HAD TURNED RED

Declaration

IWe declare the foregoing particulars are true in every respect.

(The

FLASH ACCIDENT COME

FRC AMIN

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 230323 1320

Witnessed by Reporting Centre Personnel