

ASS. REC. BY: Kenneth REF: TII / 230088481KV

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / QD RES / EVA / INV / MV
To Inspect Vehicle No: _____
at Workshop m/s Cam Rd
of _____
Insured: _____
Policy No. _____
Claims No. _____
Sum Insured: _____ Excess: TBA
(Client's Record)
Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: 8100k
IDAC Accident Report: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: 02 days Res.: Yes or No
Lum Sum: 1.121 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SMT 3584B Regn: 11.18
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or Wagon
Make: NIS XTrail G.C. 1997
Colour: M. P. Brown A/C: Insured / Std / NI / NA
Sp. Reading: 36020 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: JN1JANT3280011785
Gen. Cond: Good / Fair / Poor / Burnt
Steering: Inorder / Jammed / Leaked / Burnt or
Brake: Inorder / Jammed / Leaked / Burnt or
Mod: NII / S/Rlm / STD ADRM or
Tyre Size: F: 235/50R19
R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Creslander

Front: _____ Rear: _____
R/Bal. 9 mm R/Bal. 9 mm
L/Bal. 9 mm L/Bal. 9 mm
D.O.A. 23/6/23 D.O.I. 7/7/2023
Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
151 N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Prell. Report
☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation

Add Fee: ☐ : Site Insp (\$ _____)
☐ : Interview (\$ _____)
☐ : Tech Invs (\$ _____)
☐ : Weekend (\$ _____)

\$ - RS. \$

Fees

Others

Report Format :

ump Sum / I.B.I.: (\$ _____)

TOTAL

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

205 Braddell Road
Singapore 579701

Tel: 63837613 Fax: 62815767/65462533 Email: tanpw@cdge.com.sg; kelvinsukwen@cdge.com.sg; oisunpin@cdge.com.sg; joharibh@sparkcarcare.com; kristytay@sparkcarcare.com

INSURER: **India International Insurance Pte Ltd (HQ)**

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	
Policy No:	D20MFL0000326_02	Date of Loss:	23/06/2023
Vehicle Reg. No.:	SMF3584B	Driveable?	
Driver Age/Info:		Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	COMFORTDELGRO RENT-A-CAR PTE LTD		

Make/Model:	NISSAN X-TRAIL, 2.0 CVT (A)	Vehicle Reg. Date:	04/11/2018
Vehicle Colour:	BROWN		
Engine No:	MR20394723C	Chassis No:	JN1JANT32Z0011785
Odometer:	0 KM		

Paint Type:	
List Item Discount:	10.00 %
Total Loss?	NO
Est. Duration of Repair (day)	8 2 day,

*Not Notarized
Penalty B4pains
Ex TBA*

Present Location: COMFORTDELGRO ENGINEERING PTE LTD (BRADDELL)

COST OF CLAIMS	Amount
Parts	4,164.30
Miscellaneous Items	61.00
Labour	1,450.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	5,675.30
+ GST 8.00% (S\$)	454.02
Nett Amount (S\$)	6,129.32

This claim is handled by: OI SUN PIN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source:

(Last Synchronised: 05 Jul 2023)

Parts: N/A

NISSAN X-TRAIL 2.0 CVT (A) (Model not available in database)

Labour: Repairer's

(Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SMF3584B/05/07/2023 14:11

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRONT BUMPER	10.00	0.00	*662.00 FL ✓
2	1		*FRONT RADIATOR GRILLE ASSY	10.00	0.00	*504.00 FL ✓
3	1		*LH HEADLAMP	10.00	0.00	*2,690.00 FL ✓
4	1		*FRONT LH FENDER	10.00	0.00	*714.00 FL X
5	1		*FRONT TOP LEFT SUPPORT PANEL	10.00	0.00	*57.00 FL X

F=Franchise part. L=ListItemDisc.

Sub Total (S\$) 4,627.00

- List Item Discount on L Items (S\$) 462.70

Total Parts (S\$) 4,164.30

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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:

Estimates on Miscellaneous Items

No Qty Particulars

Amount

Miscellaneous Items

1	1	FRONT BUMPER CLIPS	50.00
2	1	OD/TP Case (Insurer)	11.00
Sub Total (S\$)			61.00

Estimates on Labour

No Particulars

Lab.Type

Amount

Labour Items

1	To knock & straighten on accident area, to remove & refit Front damage parts.	New	600.00
2	To putty & respray on Front damage parts.	New	800.00
3	To check wiring & focus headlamp.	New	50.00
Gross Labour Cost (S\$)			1,450.00

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< END OF ESTIMATES >

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	26/06/2023 21:59 (SGT)
Reported by	Actual Driver
Date of Accident	23/06/2023 18:00 (SGT)
Exact Location of Accident	Rangoon Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF3584B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORTDELGRO RENT A CAR PTE LTD
Company Reg No	1XXXXX775H
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-88181440
Alternative Phone No	(Office) +65-81337662

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	X-trail
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1997

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D20MFL0000326_02

DRIVER

Name of Driver	WONG HENSKE YIN FUN JANET
NRIC No	FXXXX384K
Date Of Birth	25/05/1969
Occupation	Outdoor

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.

Policyholder's Signature / Date & Time

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

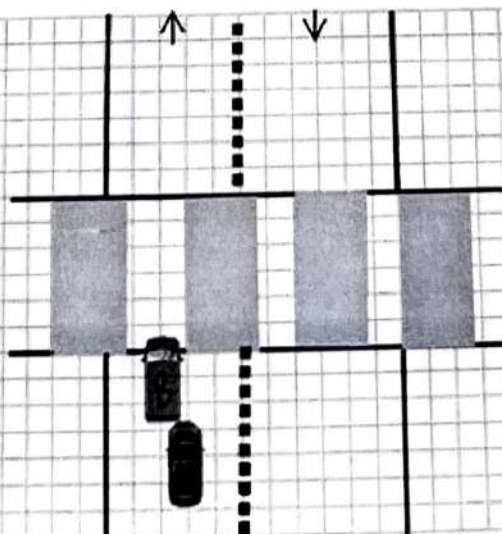
23062023 2100HRS

Witnessed by Reporting Centre Personnel

Sketch Plan

A-SMF3584B
B-GY1670U

RANGOON ROAD



[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Owner ID:

Company

775H

Vehicle Details

Vehicle No.:

SMF3584B

Vehicle to be Exported:

No

Intended Deregistration Date:

04 Jul 2023

Vehicle Make:

NISSAN

Vehicle Model:

X-TRAIL 2.0 CVT

Primary Colour:

Brown

Manufacturing Year:

2018

Engine No.:

MR20394723C

Chassis No.:

JN1JANT32Z0011785

Maximum Power Output:

106.0 kW (142 bhp)

Open Market Value:

\$24,412.00

Original Registration Date:

05 Nov 2018

First Registration Date:

05 Nov 2018

Transfer Count:

0

Actual ARF Paid:

\$26,177.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

04 Nov 2028

PARF Rebate Amount:

\$19,632.00

Intended COE Rebate Details

COE Expiry Date:

04 Nov 2028

COE Category:

B - Car above 1600cc or 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$31,301.00

COE Rebate Amount:

\$16,693.00

Total Rebate Amount:

\$36,325.00

The information contained herein is correct as at 04 Jul 2023

OK