





ComfortDelGro Engineering

205 Braddell Road S(579701)

**ACCIDENT REPAIR ESTIMATES**

Our Ref:

Type of Claim : TP

Vehicle No. : SLV2455A

Make & Model : TOYOTA COROLLA ALTIS

Year of Manufacture : 2017

Chassis No. : \_\_\_\_\_

Ins Company : CHINATAIPING INSURANCE

Engine No. : \_\_\_\_\_

Excess : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Date of Accident : 14/03/2023

Time of Accident : \_\_\_\_\_

Suggested Days of Repair : 4 DAYS

In-house Vehicle Assessor

**Repair Estimates**

Case Owner : \_\_\_\_\_

Signature : \_\_\_\_\_

Parts (a) Cost / List Price Items \$ 980.00

Contact No

Plus/Less 10% \$ 98.00

**Operation**

Total of Cost / List \$ 882.00

KELVIN SU

TEL: 9786 4236

(b) Nett Price Items \$ -

E: kelvinsukwen@cdge.com.sg

Less \_\_\_\_\_

JOHARI

TEL: 972103705

Total of Nett Item \_\_\_\_\_

E: joharibh@sparkcarcare.com

(c) Special Nett Items \$ 50.00

SUN PIN

TEL: 9728 8916

E: oisunpin@cdge.com.sg

Total Parts Cost (Appendix A) \$ 932.00

Labour (Appendix B) \$ 1,050.00

Total Repair Cost \$ 1,982.00

*Not Authorized  
Resurvey Repair*

The above total will be subjected to 8% G.S.T.

Name of Surveyor : Kenneth

Company : CLC

Survey conducted on : 7/7/23 at \_\_\_\_\_

Remarks By Surveyor

(a) The repair of this vehicle is not authorized / is not authorized until further notice.

(b) Recommended Days of Repair : 03 day(s)

(c) Resurvey : Required / Not Required

(d) Excess : \$ \_\_\_\_\_

(e) Signature of surveyor : He

Date: 7/7/23



# Spark Car Care

ComfortDelGro Engineering Pte Ltd  
 205 Braddell Road S (579701)  
 Tel: 63837168 / 63837466 Fax:62815767

**Spare Parts**

Vehicle No : SLV2455A Case Owner : 0

Make & Model : TOYOTA COROLLA ALTIS Year Manufacture : 2017

Chassis No : 0 Engine No : 0

Sales Order : \_\_\_\_\_ Supplier : \_\_\_\_\_

Order By : \_\_\_\_\_ Type of Claim : TP

S/No	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposition By Surveyor
1	REAR BUMPER	1	<i>But 120</i>	\$ 754.00			✓
2	REAR BUMPER RH REFLECTOR	1	<i>CM</i>	\$ 77.00			✓
3	REAR BUMPER RH RETAINER	1	<i>D's</i>	\$ 149.00			✓
4	REAR BUMPER CLIPS	1	<i>hu</i>			\$ 50.00	✓
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*Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge be charged accordingly under supplementary.*

# 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 ..... 14/03/2023 16:31 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 14/03/2023 09:40 (SGT)  
Exact Location of Accident ..... MacPherson Rd, Singapore  
Additional Location Information ..... TOWARDS BENDEMEER ROAD NEAR TO ESSO  
Country/State of Loss ..... MACPHERSON  
Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLV2455A

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... COMFORTDELGRO RENT A CAR PTE LTD  
Company Reg No ..... 1XXXXX775H  
Email Address ..... dannyng@cdgrentacar.com.sg  
Mobile Phone No ..... (Phone) +65-81265265  
Alternative Phone No ..... (Office) +65-68820888

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Corolla  
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? ..... No - Claiming third party  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1598

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Policy Number / Cover Note Number ..... D20MFL0000326\_02

### DRIVER

Name of Driver ..... YOSHIKATSU OGAWA  
Passport No/FIN ..... GXXXX762K  
Date Of Birth ..... 30/06/1973

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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.
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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.

*Signature*

**FLASH ACCIDENT REPORTING OFFICER**  
 FRO MING

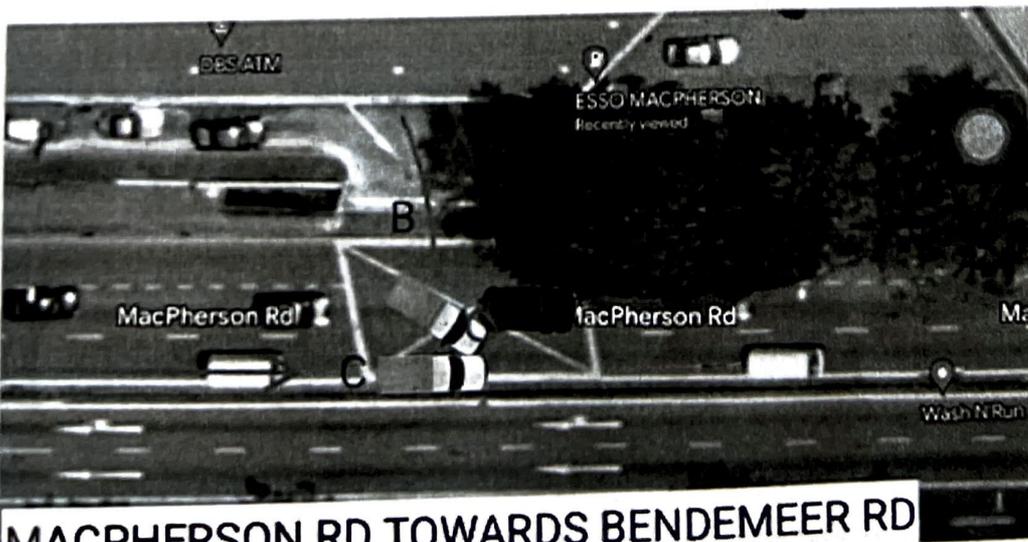


Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time  
14/03/2023- 1320HRS

Witnessed by Reporting Centre Personnel

**Sketch Plan**



A-SLV2455A  
 B-GBH1851M  
 C-YN2936S

**MACPHERSON RD TOWARDS BENDEMEER RD**