REF:

ASSIGNMENT

From: Date:	Veh No: SHD 4968R. Yr Regn: 2018, Dec.
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Tax I / Prime Mover /
OD (IP/WS/IP RES/OD RES/EVA/INV/MV	Truck / Traller or
To Inspect Vehicle No:	Make: Hyundailong, cc 1580
at Workshop m/s	Colour A/G: Insured / Std / Ni / NA
of .	Sp.Reading 416677 T/Radio; Insured / Std / N/ / NA
Insured:	Eng/No:
Policy No.	CINO: KMHC85/CVK4/29504
Clairns No.	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modl: (Ny IS/Rim I STD A/Rim or
	Tyre Size: F: 195/65/95
(Policy-Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYOTYOKO OF Westlake
Bal. or Market Value; `	Front Rear
IDAC Accident Roort Consistent? : Yes or No	R/Bal, 6 mm R/Bal. mm
GIA / PR Seem Consistent? : Yes or No	UBal. 6 mm UBal. 6 mm
Est Repairs: days Res.: Yes or No	D.O.A. 01/08/73
Lum Sum: % 3 Val.: Yes gr No	Survey held at Comfort Cogn.
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/G Y Rooktop- or
Date: Person Contacted: Yehlcle: IN / OUT	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The O/O / Ollassis Halle / Dody Salastate sixted decid solution
	· · · · · · · · · · · · · · · · · · ·
	Date Of Davids
Date/Time, File Pass to? : Prell. Report	Days Of Repair:
; Final Report	Resurvey No. of Trip: Survey Fee:
Data/Time, File Return to? Add Fed	
2) Add Feb	
Reput Format :	: Weel end (%
Lump Sun [LB.]: (F)	
	ATOTAL

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO

SHD4968R

MAKE

HYUNDAI

DATE: 31.07.23

MVA JUMANI

MODEL	IONIQ		30.07.23	INCOME	
Qty	Parts Description/ Labour	Туре	Unit Price	Amount	
	FRT FENDER LH		b	\$588.80	
1	1 FRT FENDER EMBLEM LH		1	\$26.60	
	1 FRT DOOR ASSY LH		h	\$1,797.20	
	1 REAR DOOR ASSY LH		R	\$1,789.90	1
{	1 FRT WHEEL CAP LH		und	\$346.40	ł
ŀ	1 REAR WHEEL CAP LH		· ·	\$346.40	
	1 ROCKER PANEL GARNISH LH		K	\$290.00	
	SUB TOTAL			ĆE 40E 20	
	SUB TOTAL			\$5,185.30	
	LESS 20%			\$1,037.06	7
*	DISCOUNTED TOTAL			\$2,996.68	
					1
	REAR DOOR APPS LOGO		a	\$80.00	NET
	FRT DOOR COMFORT LOGO)	ng	\$75.00	NET
1	ADVERTISEMENT LOGO - 4 PCS		a	\$400.00	NET
	SUB TOTAL			\$555.00	NET
	Labour Charge				
	PANEL BEATING		70	\$1,250.00	
	SPRAY PAINT				
	CHECK WIRING			\$1,250.00 \$50.00	
	TRANSFER DOOR PART		6		
	TOTAL LABOUR		. 60	\$2,670.00	
				\$2,070.00	ł
	ESTIMATE TOTAL			\$3,946.68	
	This is an initial estimate based on a visual inspection of the	Shavia			
	be prepared after the vehicle is surveyed by a motor Surveyo	apove vehi	cle. The final repair qua	ntum will	
	The state of the s	n appointe	a by the insurance com	nany	

tanthi 97445749

WP/ 1/8/23C 1245

LIS Romy after uparl

tamphin 0/hamfordin

03/day

LKK Auto Consultants hence notity 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



31

//\

51

C

3

Service Advisor

urned to Service Reception upon collection

Signature/Date

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Workshops
205 Braddell Road Singapore 579701
59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
455 and an Read Singapore 5609286
31:07.2023 15:51

Page: 1

am: ARC Repair TP(CLSO)1 JOB CARD Sales Order: 5906055 JC NO305562297 e OMER MILEAGE REGN NO. SHD4968R COMFORT TRANSPORTATION PTE LTD s FUEL MAKE OMER NO. / OLOGIO BESS 383 SIN MING DRIVE 7010045 HYUNDAI E.....1/2. MODEL IONIQ(G2) DATE/TIME IN Singapore SINGAPORE 575717 29. 07.2023 17:25 65508755 (R) TARGET DATE (O) YR OF MANU. 11.12.2018 (P) COMPLETION DATE/TIME: CHASSIS CODE KMHC851CVKU129504 DUNT CARD NO. JOB DESCRIPTION :cident Date: 31.07.2023 \TURE: 3P.29.07.23 FRONT NO LABOR CODE DESCRIPTION KED & PASSED OUT BY: SERVICE ADVISOR CUSTOMER'S SIGNATURE edgement Slip Exit Pass Vehicle No.: SHD4968R JU INCOME SHD4968R

Name of Service Advisor

To be kept by Security Guard

Date

SJ0G237T000Y / JP Knights Pte Ltd ENTRY DATE & TIME: 29/07/2023 19:51 (SGT) SUBMITTED BY: Weine Chieng VERSION: 1 (29/07/2023 19:51 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
 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 on incomment in the part of the insurance companies is not an admission of policy liability on the part of the insurance companies.

 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.

		JENT

Date of First Submission	29/07/2023 19:51 (SGT)
Reported by	Actual Driver
Date of Accident	29/07/2023 13:50 (SGT)
Exact Location of Accident	Merbau Rd & Unity St, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

Country/State of Loss	Singapore
DETAILS O	FOWN VEHICLE STATES
Vehicle Registration Number	SHD4968R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX\$21R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-94574278
Alternative Phone No	(Office) +65-65508768
VEHICLE PARTICULARS	the second control of the second
	the second of th
Manufacturer	Hyundai
Model	Ae ionig
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	AV. St.
your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1580
INSURANCE COMPANY	The second secon
THOUSE COMPANY	
Name of Insurance Company	
Name of manage Company	a supplication of the control of the

Name of Insurance Company Policy Number / Cover Note Number	HSBC Life (Singapore) Pte. Ltd VFX/P2419138
DRIVER	

SHIOW HAN HO NRIC No Date Of Birth SXXXX735I Occupation 29/03/1962 Outdoor

Date Of Driving Pass	24/04/1980
Driving experience	43 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94574278
Alt. Phone Number Email Address	- fleetsafety@cdgtaxi.com.sg
Address	484 ADMIRALTY LINK #02-49
Address complement	-
Postcode	750484
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	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry
April and the second of the se	والعامات والمناف والمراوية والمناس ومراكب فيعومون والمراوين
OTHER INFORMATION	
	The second to the property of the second to
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? Number of Passengers (Including Driver)	Yes
Has the driver been approached by unknown person(s)	1
soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	м
Translator's phone number	₩.
Translator's email	-
Original language used in the statement	•
in the second of	THE RESIDENCE OF THE PARTY OF T
DETAILS OF POLICE ACTION	
	The other properties of the state of the sta
Was the accident reported to the police?	No
Nas notice of intended Prosecution given?	No
f yes, against whom?	-
	NI NAME OF A PARTY OF A STATE OF
CIRCUMSTANCES OF ACCIDENT	The selection recovers the selection of
ON 29/07/2023 AT ABOUT 1350HRS, I WAS DRIVING VEHICLE	A/SHD/1068D) ALONG LINITY CTDEET LIVING A TOTAL
ATTACHMENT(S)	
re accident photos available for attachment?	V
/as there any video captured by Car Camera?	Yes
easons for not uploading a video of the accident	Yes
57 Me geologic movements	FILE NOT SUITABLE
Spetage of at lea	A POTACE EN AND AND AND AND AND AND AND AND AND AN
INDEX ARES UP UTHER	VEHICLE PROPERTY:
ehicle Registration Number	
enicle Manufacturer	SKA849H
Chicle Model	Volkswagen
whole variable	Polo
ehicle Colour	•

Accident report SJ0G237T000Y

Vehicle Category	Private car
Name of Driver	ERASMUS ANG ZHONG QING
NRIC No	TXXXX502D
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)

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 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.
- (n) investigating the accident and/or my claims.
- (iii) earrying out and or dealing with my instructions or responding to any enquiries by me.
- (n) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involved is closure of cortain 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 sixed outside of Singapore, for one or more of the above Purposes.

FLASHACCIDENT REPORTING OFFICER FRO FIRDAUS

Policyholder's Signature / Date &

Time

Sketch Plan

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

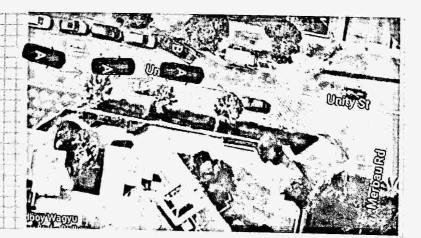
29/07/2023 1650hrs

Witnessed by Reporting CentrePersonnel



B - SKA849H

MERBAU RD AND UNITY ST



Describe Circumstances of the Accident ON 29/07/2023 AT ABOUT 1350HRS, I WAS DRIVING VEHICLE A(SHD4968R) ALONG UNITY STREET. I WAS ABOUT TO MAKE A RIGHT TURN INTO MERBAU ROAD, WHEN ALL OF A SUDDEN, VEHICLE B (SKA849H) CAME OUT FROM THE PARALLEL PARKING LOT AND COLLIDED INTO THE LEFT SIDE OF VEHICLE A(SHD4968R). NO ONE WAS INJURED AT THE TIME OF ACCIDENT.

Declaration

I/We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting CentrePersonnel

FRO FIRDAUS

Policyholder's Signature / Date & Time