

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

VEHICLE NO SHD4968R
MAKE HYUNDAI
MODEL IONIQ

DATE: 31.07.23
MVA JUMANI
DOA: 30.07.23

INCOME

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	FRT FENDER LH			bt \$588.80
1	FRT FENDER EMBLEM LH			we \$26.60
1	FRT DOOR ASSY LH			bt \$1,797.20
1	REAR DOOR ASSY LH			Rp \$1,789.90
1	FRT WHEEL CAP LH			we \$346.40
1	REAR WHEEL CAP LH			we \$346.40
1	ROCKER PANEL GARNISH LH			Rp \$290.00
	SUB TOTAL			\$5,185.30
	LESS 20%			\$1,037.06
	DISCOUNTED TOTAL			\$2,996.68
	REAR DOOR APPS LOGO			we \$80.00 NET
	FRT DOOR COMFORT LOGO			we \$75.00 NET
	ADVERTISEMENT LOGO - 4 PCS			we \$400.00 NET
	SUB TOTAL			\$555.00 NET
	Labour Charge			
	PANEL BEATING			700 \$1,250.00
	SPRAY PAINT			✓ \$1,250.00
	CHECK WIRING			x \$50.00
	TRANSFER DOOR PART			60 \$120.00
	TOTAL LABOUR			\$2,670.00
	ESTIMATE TOTAL			\$3,946.68
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				

Tanji 97445745
wp 11/8/23 C 1245
2/3 Body after repair
Tanji 21 hours
03 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:

Date/Time: 31.07.2023 15:51

Page : 1

am: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 5906055

JC NO305562297

OMER :
S COMFORT TRANSPORTATION PTE LTD
OMER NO. 7010045
ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65508755 (O)
(P)

REGN NO.:
SHD4968R

MILEAGE

MAKE :
HYUNDAI

FUEL

E.....1/2.....F

MODEL
IONIQ(G2)

DATE/TIME IN
29.07.2023 17:25

YR OF MANU.
11.12.2018

TARGET DATE

CHASSIS CODE
KMHC851CVKU129504

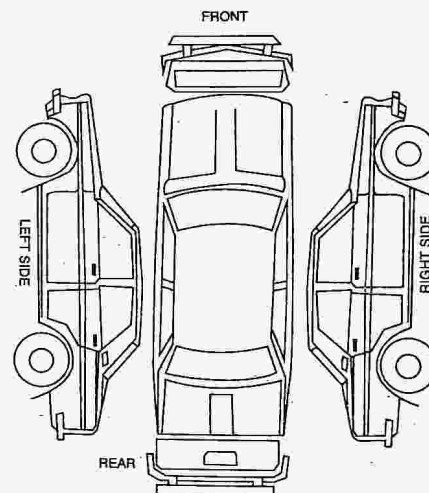
COMPLETION DATE/TIME:

DUNT CARD NO.

JOB DESCRIPTION

cident Date: 31.07.2023
TURE: 3P.29.07.23

NO LABOR CODE DESCRIPTION



ED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

Vehicle No.:

SHD4968R

lo.: SHD4968R

JU INCOME

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

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 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

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4968R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-94574278
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ae ioniq
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	1580

INSURANCE COMPANY

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

DRIVER

Name of Driver	SHIOW HAN HO
NRIC No	SXXXX7351
Date Of Birth	29/03/1962
Occupation	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

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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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 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.

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 NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	SKA849H
Vehicle Manufacturer	Volkswagen
Vehicle Model	Polo
Vehicle Variant	-
Vehicle 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)

I understand, acknowledge, agree and consent that:

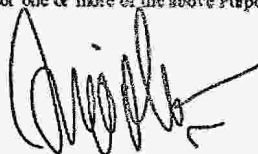
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

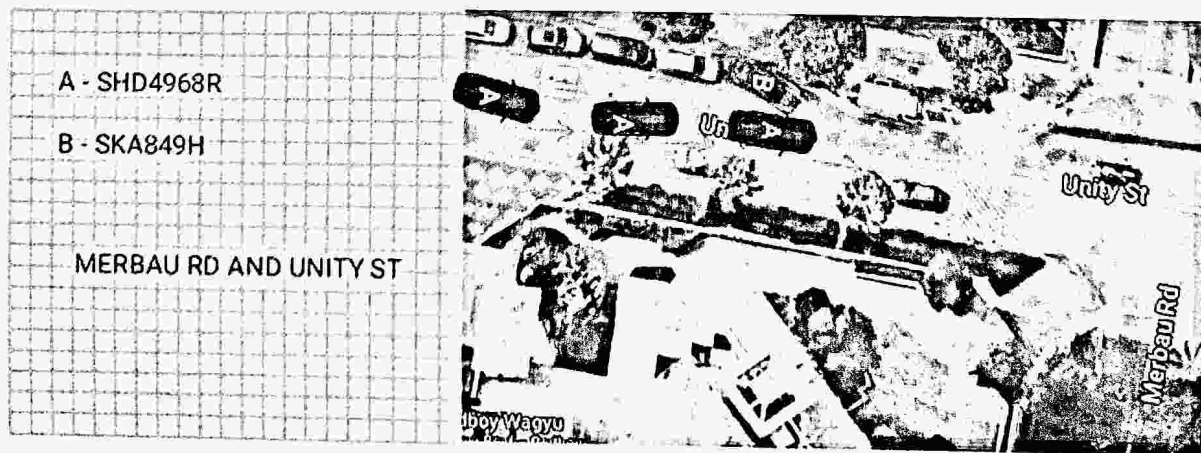
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

29/07/2023

1650hrs



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.



FLASH ACCIDENT
REPORTING OFFICER
FRO FIRDAUS



Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre Personnel

29/07/2023

1650hrs