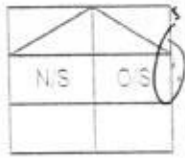


Surveyor: **Kalvin**

REF: **NS/INC17013385 / KHb02**

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To inspect Vehicle No: \_\_\_\_\_  
at Workshop/mils \_\_\_\_\_  
of \_\_\_\_\_  
Insured: **FBE 11449H**  
Policy No: **5063541529 - 03 23016 - 521217**  
Claims No: **WT/0972718-002**  
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
(Client's Record)  
Make of Veh: \_\_\_\_\_  
(Policy Condition)  
Remark: The veh had commenced its repair at the time of inspection.  
Bel. or Market Value: \_\_\_\_\_  
IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No  
GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
Lump Sum: \_\_\_\_\_ % 3 Val: Yes or No  
CA / REV / REP. / 24 HRS  
Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT



Veh No: **SHA 4630E** 3<sup>rd</sup> Dec 2016  
Type: M.Car / M.Cycle / Bus / Van / Lorry / T.O. / Prime Mover /  
Truck / Trailer or  
Make: **Toyota Prius** 1748  
Colour: **Blue** A.C. ☒ In / Std / NI / NA  
So. Reading: **115638** T. Radio ☒ In / Std / NI / NA  
Eng. No: \_\_\_\_\_  
C No: **JTDK03F4003529281**  
Gen. Cond: Good / ☒ Poor / Burnt  
Steering: In order / ☒ Jammed / Leaked / Burnt or  
Brake: In order / ☒ Jammed / Leaked / Burnt or  
Modi: Nil / S/Rim / STD A/Rim or  
Tyre Size: F: **195/65R15**  
R: \_\_\_\_\_  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or **Went like**  
Front Rear  
R. Bal. **7** mm R. Bal. **7** mm  
L. Bal. **7** mm L. Bal. **7** mm  
D.O.A. **6/12/12** D.O.I. **8/12/12**  
Survey held at: **CORRECTION**  
Des. of Damages: Fnt / Rear / O/S / N/S / U/C / Rooftop or  
**o/s d.b.**  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction  
**SHA 1120E - RS / FCI 3011827 / MXX** **DAF: 050715 INC**  
**FBE 11449H - X** **PIP**  
**26/1/18 Combined PIP \$3595.40 / 3 Pys (Red: 1867.68 : 33%)**

RECEIVED 20 JAN 2018

Date/Time File Passed: ☐ Preli. Report  
**26/1 Typist** ☒ Final Report  
Date/Time File Returned: \_\_\_\_\_  
Days Of Repair: **3**  
Resurvey No. of Trip: **1**  
Survey Fee: \_\_\_\_\_  
Add Fee: ☐ Site Insp \$ \_\_\_\_\_  
☐ Inter. Insp \$ \_\_\_\_\_  
☐ Tech. Insp \$ \_\_\_\_\_  
☐ Weekend \$ \_\_\_\_\_  
Report Format: **TP**  
Lump Sum / L.B.I. / S: **3595.40**  
160  
35  
195



## National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC17023385/K1tb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 08-12-2017  
189556



Code: INC4

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBE 1449H	Veh. Inspected	SHA 4630E
Policy No.	5063541529-03	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	08/12/2017

### 2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

### 4. Description of Damages

--

### 5. General Information

Accident Date	06/12/2017	Inspection Date	08/12/2017
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

### 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.  Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5063541529-03	HUAN YEE KWONG	S7265111A	GMC	Third Party	FBE1449H	FBE1449H	23/12/2016	22/12/2017

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
1	MT/0975403-002	SMRT TAXI PTE LTD	SHB 5086P	FBK 4667T	27/12/2017
2	MT/0977299-002	SMRT TAXI PTE LTD	SHB 192Z	SHC 6576E	11/01/2018
3	MT/0972718-002	COMFORT TRANSPORTATION	SHA 4630E	FBE 1449H	6/12/2017
4	MT/0976746-002	SMRT TAXI PTE LTD	SHF 200M	SHB 8676S	5/1/2018
5	MT/0977011-002	SMRT TAXI PTE LTD	SHC 4740K	GT 4929G	8/1/2018

## 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 Authorised 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 ability.
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 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 Report	07/12/2017 15:34
Date Of Accident	06/12/2017 18:00
Exact Location Of Accident	OPEN AIR CARPARK BEHIND BLK 123 BEDOK NORTH ST 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA4630E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

### Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-1572701MFSH
Cover Note Number	

### Driver

Name of Driver	KOH AIK KHIANG
NRIC No	S1336674H
Date Of Birth	26/09/1958
Occupation	OUTDOOR
Date Of Driving Pass	20/02/1979
Driving Experience	38 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 334B ANCHORVALE CRESCENT #11-126
Postcode	542334
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD ON COLLISION
Weather Conditions	CLEAR
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO ATTACHED / Type Of Accident : HEAD TO SIDE

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBE1449H
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	MUAN YEE KWONG
NRIC/Passport Number	S7265111A
Contact Number	83715869
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

**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 Authorised 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.
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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 centre 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

CONFIDENT TRANSPORTATION PTE LTD  
CO REG NO 192203321R

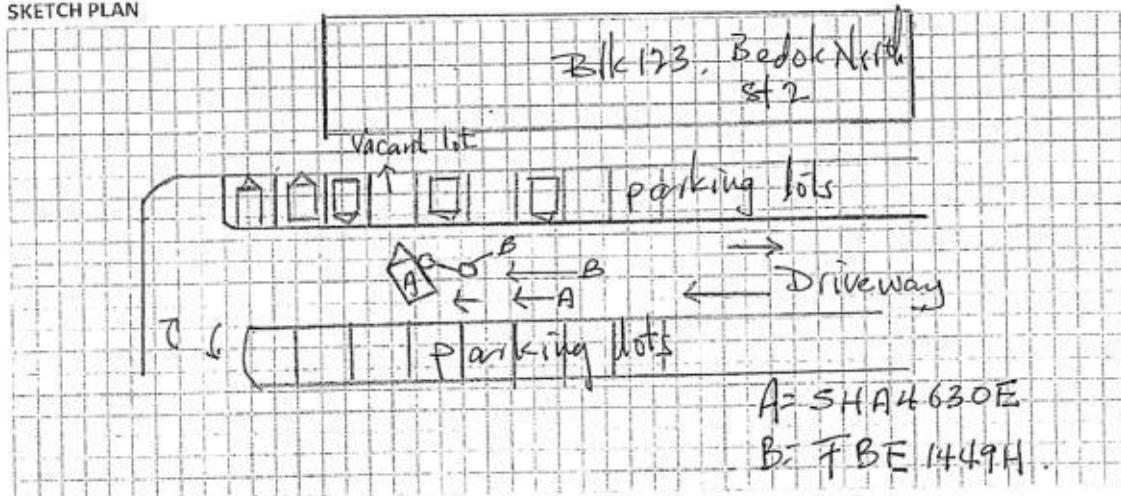
Policyholder's Signature  
Date & Time:

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

7/12/17  
Lim Ee Soon  
CSO  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As attached

## DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CO. REG NO. 192202301R

Policyholder's Signature  
Date & Time:

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

Lim Ee Soon  
CSO

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



SHA 4630 E

- ACCIDENT STATEMENT

It was drizzling when I travelled on Bedok North Street 2 yesterday evening(06/12/2017) at about 6.00 pm.

After exiting Street 2, I turned into the carpark driveway at Blk 123 as I intended to take my dinner in the coffeshop at this place.


As seen in the video footage, there was no oncoming car when I drove on the carpark driveway which was single lane 2-way road.

As I slowed down the speed to park my taxi in the vacant lot I sighted on the right side of the carpark, it was under such situation the motor cycle B (FBE 1449H) hit into the right front portion of my taxi after the rider following behind my taxi attempted to make an overtake instead of slowing down the speed.

I took photo of the m/cycle B at the scene. Its front portion sustained dents.

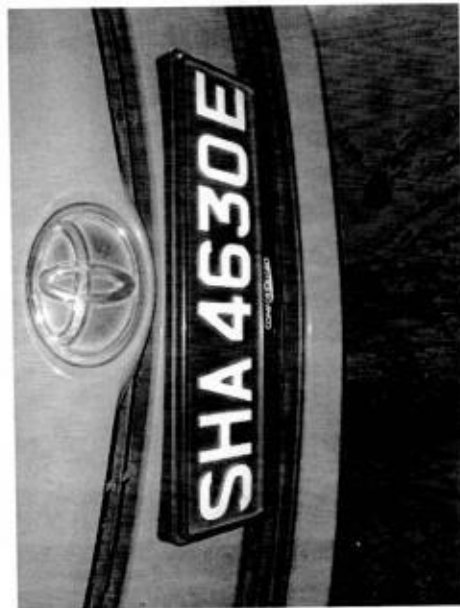
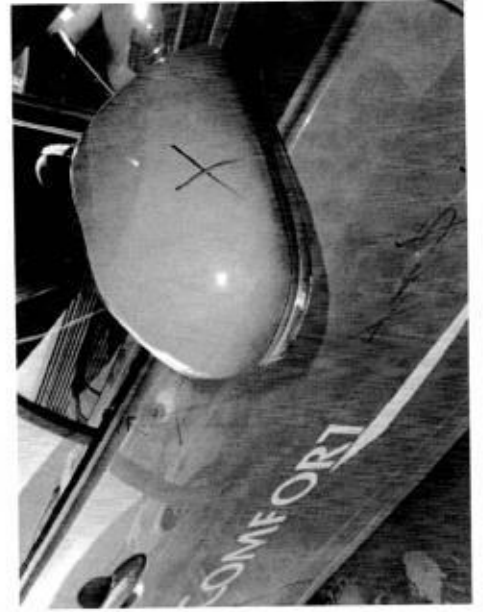
The rider, a male Chinese, claimed that he was unhurt following the accident.

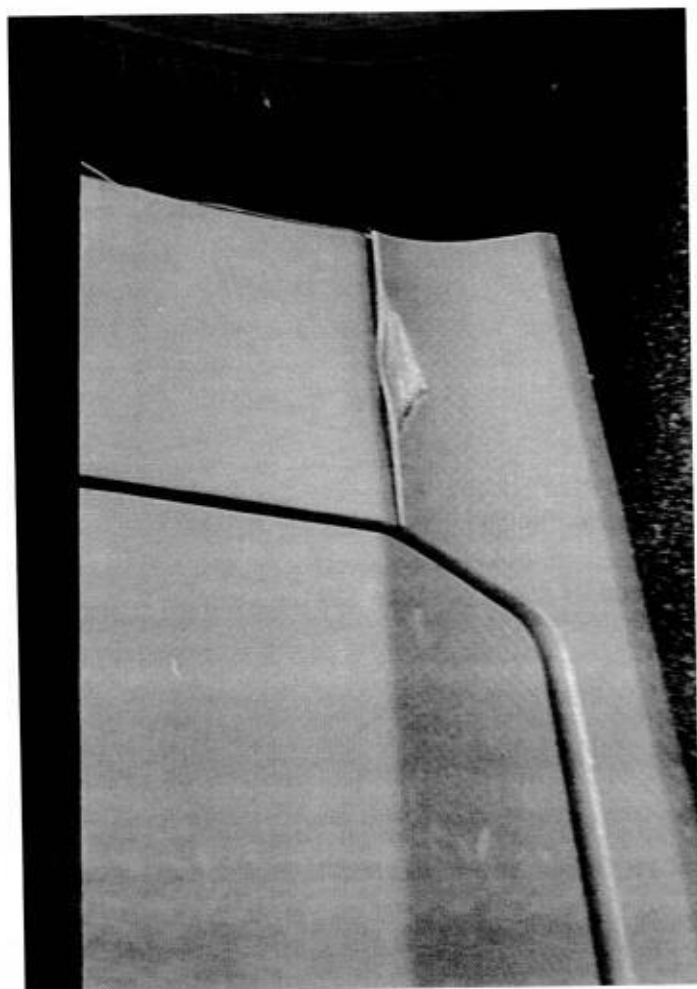
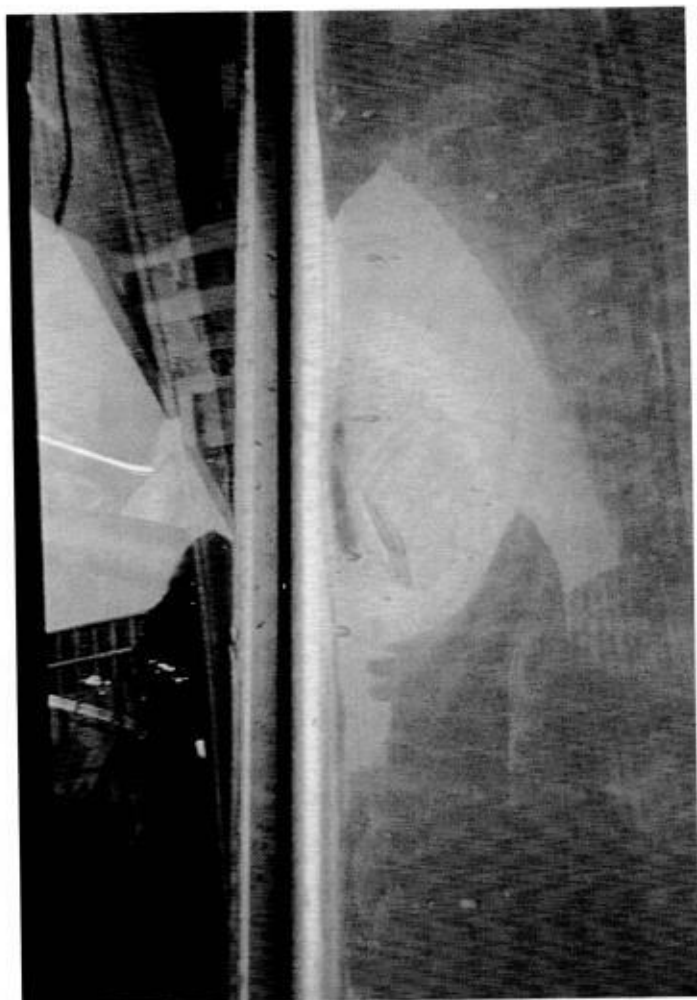
I affirmed the above-statement is true and correct.

  
Driver name : Koh Aik Kiang  
NRIC NO : S 1336674H  
Date: 07/12/2017

Recorded by Alex Lim







Date/Time: 07.12.2017 16:27

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO.305095709

CUSTOMER  
COMFORT TRANSPORTATION PTE LTD  
VMS 7010045  
CUSTOMER NO. 383 SIN MING DRIVE  
ADDRESS Singapore SINGAPORE 575717  
65508755 (O)  
L (R) (P)

REGN NO: SHA4630E	MILEAGE
MAKE: TOYOTA	FUEL E.....1/2.....F
MODEL PRIUS HYBRID(G4)07	DATE/TIME IN 12.2017 14:05
YR OF MANU 30.12.2016	TARGET DATE
CHASSIS CODE JTDKB3FU003539781	COMPLETION DATE/TIME:

SCOUT CARD NO.

JOB DESCRIPTION

Accident Date: 06.12.2017  
NATURE: 3P 06.12.2017

S/NO	LABOR CODE	DESCRIPTION
	NTUC - taxi	Right Front damage
	LKK/Kalvin -	

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Vehicle No.: SHA4630E  
LARRY

Exit Pass

Vehicle No.: SHA4630E

Larry Ng

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE

DATE 8/12/2017 10:55

VEHICLE: SHA 4630E

MAKE :

MODEL : TOYOTA PRIUS

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT	
FENDER SUB-ASSY, FRONT RH <i>— Bent</i>			\$ 933.10	
FRONT FENDER SHIELD <i>X succ</i>			\$ 198.50	
FRONT FENDER SHIELD CLIP <i>X ^^</i>			\$ 14.90	
FRONT FENDER HYBRID EMBLEM, RH <i>— ac Bent</i>			\$ 86.50	
PANEL SUB-ASSY, FRONT DOOR, RH <i>— Bent</i>			\$ 1,227.00	
GLASS, SUB-ASSY, FRONT DOOR, RH <i>— hrazel</i>			\$ 780.50	
MIRROR ASSY, OUTER REAR VIEW, RH <i>X succ</i>			\$ 1,374.00	
COVER, OUTER MIRROR, RH <i>X succ</i>			\$ 141.90	
MOULDING, FRONT DOOR WINDOW FRAME, REAR RH <i>X at an</i>			\$ 53.70	
<i>RH Rocker panel harness — or \$ 570.10</i>				
<b>SUB TOTAL</b>			\$ 4,810.10	
<b>LESS 20% <i>252</i></b>			\$ 962.02	
<b>DISCOUNTED TOTAL</b>			\$ 3,848.08	
FRONT FENDER ADVERTISEMENT LOGO (LH/RH) <i>X an</i>		\$ 100.00	\$ 200.00	NETT
FRONT DOOR COMFORT LOGO <i>— neu</i>		<i>-10%</i>	\$ 75.00	NETT
			\$ 275.00	
<b>Labour Charge</b>				
Panel Beating			\$ 560.00	
Spray Painting Charge			\$ 500.00	
Wiring Charge			\$ 50.00	<i>Xm</i>
Tuff Kote			\$ 50.00	<i>20</i>
Transfer of Door			\$ 120.00	<i>50</i>
<b>TOTAL LABOUR</b>			\$ 1,280.00	
<b>ESTIMATE TOTAL</b>			\$ 5,408.08	
			5859.16	

Larry Ng

*Kalvin CLK*  
*8/12/17 1130hrs*  
*2 Pay*  
*P/P*  
*Before Paint photo*

## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE

Date: 09.01.2018

Time: 08:55:47

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305095709  
REGN NO : SHA4630E  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(G4)  
DATE OF REGN : 30.12.2016  
DATE/TIME IN : 07.12.2017 14:05  
ACCIDENT DATE : 06.12.2017

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001	04-01-0302-0592-G	PRIG4 PANEL SUB-ASSY FRON	1	1,227.00	25.00	920.25
0002	04-01-0302-2270-G	PRIG4 PLATE-BACK DOOR NAM	1	86.50	25.00	64.87
0003	28-01-0103-0003-A	(I40)FRT DOOR LOGO SONATA	1	75.00	10.00	67.50
0004	04-01-0302-3932-G	PRIG4 GLASS SUB-ASSY FRT	1	780.50	25.00	585.37
0005	04-01-0302-0573-G	PRIG4 FENDER SUB-ASSY FRO	1	933.10	25.00	699.82
0006	04-01-0302-0810-G	PRIG4 MLDG ASSY BODY ROCK	1	570.10	25.00	427.57

SUB-TOTAL : 2,765.38

## JOB NATURE

0000 L	PANEL BEATING	400.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	360.00
0002 20-00	TUFF COAT ON AFFECTED PARTS.	20.00
0003 L	TRANSFER OF DOOR	50.00

SUB-TOTAL : 830.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 09.01.2018

REPAIR ESTIMATE

Time: 08:55:47

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305095709  
REGN NO : SHA4630E  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(C  
DATE OF REGN : 30.12.2016  
DATE/TIME IN : 07.12.2017 14:05  
ACCIDENT DATE : 06.12.2017

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 3,595.38

AUTHORISED : YES / NO

MVA NAME & SIGNATURE  
DATE :

SURVEYOR NAME & SIGNATURE  
DATE :

# COMFORTDELGRO ENGINEERING

Our Job Ref No . 305095709  
Date : 25/01/18

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA4630E

Date of Accident: 06/12/17

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

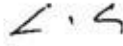
1. The repair job shall bill to: NTUC FBE1449H
2. The finalized amount shall be:
  - (a) Spare Parts after List discount \$2,765.40
  - (b) Labour Charges \$830.00
  - Total for Part-By-Part Repair Cost \$3,595.40**
  - (c.) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: \_\_\_\_\_  
**Final Lumpsum Repair cost** \_\_\_\_\_


3. Estimated normal period for repairs: 3 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature :   
Name : Larry Ng  
Tel : 6214 8316  
Fax : 6546 8156

Signature :   
Name : Kalvin  
Date : 26/1/18

## For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees				
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:



**National Assessment Centre Services**


51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Thatcham escribe

NTUC INCOME INSURANCE CO-OPERATIVE LTD		Ref: NS/INC17023385/K1tbn2	
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 31-01-2018	
		Code: INC4	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	FBE 1449H	Veh. Inspected	SHA 4630E
Policy No.	5063541529-03	Coverage (\$)	0.00
Claim No.	MT/0972718-002	Excess (\$)	0.00
Assign From		Assign Date	08/12/2017
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	JTDKB3FU003539781	Colour	BLUE
Odometer	115638	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	WEST LAKE	7 mm
L/H Front Tyre	195/65 R15	WEST LAKE	7 mm
R/H Rear Tyre	195/65 R15	WEST LAKE	7 mm
L/H Rear Tyre	195/65 R15	WEST LAKE	7 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.			
DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	06/12/2017	Inspection Date	08/12/2017
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days	



## National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



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### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 4630E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	FENDER SUB-ASSY,FRONT RH	DENTED	933.10	933.10
1	FRONT FENDER SHIELD	SERVICEABLE	198.50	-
1	FRONT FENDER SHIELD CLIP	NOT NECESSARY	14.90	-
1	FRONT FENDER HYBRID EMBLEM,RH	NECESSARY	86.50	86.50
1	PANEL SUB-ASSY,FRONT DOOR,RH	DENTED	1,227.00	1,227.00
1	GLASS SUB-ASSY,FRONT DOOR,RH	GRAZED	780.50	780.50
1	MIRROR ASSY,OUTER REAR VIEW,RH	SERVICEABLE	1,374.00	-
1	COVER,OUTER MIRROR,TH	SERVICEABLE	141.90	-
1	MOULDING,FRONT DOOR WINDOW FRAME,REAR RH	NOT NECESSARY	53.70	-
1	RH ROCKER PANEL GARNISH	CRACKED	570.10	570.10
	LESS 20% DISCOUNT		-1,076.04	-
	LESS 25% DISCOUNT		-	-899.30
			4,304.16	2,697.90
<b>NETT ITEMS</b>				
2	FRONT FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (N)	NOT NECESSARY	200.00	-
1	FRONT DOOR COMFORT LOGO (N)	NECESSARY	75.00	75.00
	LESS 10% DISCOUNT		-	-7.50
			275.00	67.50
<b>LABOUR</b>				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		730.00	450.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		550.00	380.00
			1,280.00	830.00
<b>GRAND TOTAL</b>			<b>5,859.16</b>	<b>3,595.40</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>3,595.40</b>

Report Ref No. NS/INC17023385/K1tbn2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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