

Submit: **Kalvin**

REF:

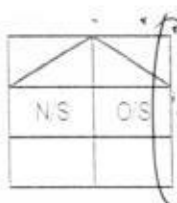
NS/INC17023866/K16092

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop no: _____
 of _____
 Insured: **SLB 2300P**
 Policy No: **5092415467** **04-07-17 - 200118**
 Claims No: **MT/0974613-001**
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

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



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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle IN / OUT

Veh No: **SHC2492P** In Reg: **30 Aug 2012**
 Type: M/Car / M/Cycle / Bus / Van / Lorry / T/O / Prime Mover /
 Truck / Trailer or
 Make: **Hyundai Sonata** cc: **1991**
 Colour: **Blue** A/C Ins: **6** Std / Nil / NA
 Sp. Reading: _____ T. Radio Ins: **0** Std / Nil / NA
 Eng/No: _____
 C.No: **KMHET41VMCA829030**
 Gen. Cond: Good / ~~Bad~~ / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Mod: Nil / S/Rim / ~~SP~~ A/Rim or
 Tyre Size F: **215/60R16**
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Westlake**
 Front: _____ Rear: _____
 R.Bal: **7** mm R.Bal: **7** mm
 L.Bal: **7** mm L.Bal: **7** mm
 D.O.A: **10/12/17** D.O.A: **15/12/17**
 Survey held at: **(OHE 107 mg)**
 Des. of Damages: Fnt / Rear / O/S / N/S / U/C / Rooftop or
o/s B/H / u/c
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

SHC 2492P - 006 / III 16020665 / Veh 392 Don't start Veh to Battery **INC 45**
SLB 2300P - x

21/12/17 Submit Unsafe - structure affected **Not safe to repair.**
 Basic Value: **\$45766.91**; **U/A. & 26838**; **NBV \$18928.91** **Scrapped**

RECEIVED 21 DEC 2017

Date/Time File Pass to?

☐ : Preli. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

Date/Time File Return to?

3:

Add Fee:

☐ Site Insp. \$
☐ Interview \$
☐ Tech Insp \$
☐ Workshop \$

Site Insp. \$

Interview \$

Tech Insp \$

Workshop \$

Report Format:

Unsafe - structure affected

Lump Sum / I.B.I. \$

Site Insp. \$

Interview \$

Tech Insp \$

Workshop \$

160

Survey Department Check List (Case Handler)

Reference No. : NS/INC17073866/Klp
 Policy Type: OD/TP/TP RES/TL/EVA

SHC 2492P

Case Handler

Typist

Admin (Cath): Case handler to make sure all Information created by the assignment team are **ACCURATE**.

(1) Office Assign Form

- C Reference No.
- C Customer Code
- N Assign From
- C Assign Date
- C Veh No (Inspected)
- C Veh No (Insured)
- C D.O.A
- C Policy No
- C Claim No
- C Insurance Authorisation (CA /REV/REP)
- C Report Type
- C Weekend Charges
- N Survey held at/Repairer
- C Excess

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

Surveyor (): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

- C Vehicle No
- C Regn Month/Year
- N Vehicle Type
- N Make & Model
- C Engine Capacity. (C.C)
- N Colour
- C Odometer. (Sp.Reading)
- C Chassis No
- N General Condition
- N Steering
- N Brake
- N Modification (Modi)
- C Tyre Size
- N Tyre Make
- C Tyre Balance
- C Date of Inspection
- N Survey held
- N Des.of Damages

✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

(2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

✓			
---	--	--	--

(3) Workshop Estimate/Assignment Form

- N ALL Parts condition
- C Market Value for OD cases
- C Estimate Repair Cost for PRI (RSI, TMI, MSIG)
- C Days of repair
- C Finalised Amount
- C Re-inspection Cases to Finalize within 5 Days

✓			

(4) System - (Views/Merimen)

- C Resurvey photo Uploaded

--	--	--	--

Check By:

Cath 21/1/17
 Case Handler Date



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/INC17023866/K1qb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 15-12-2017

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLQ 2300P	Veh. Inspected	SHC 2492P
Policy No.	5092415467	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	15/12/2017

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	10/12/2017	Inspection Date	15/12/2017
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.
--

TP Claims against NTUC Income: Follow-Through Survey

Date : 21/12/2017

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/0974613-001	COMFORT TRANSPORTATION	SHC 2492P	SLQ 2300P	10/12/2017	2:50	\$ 38,537.65	TOTAL LOSS
2	MT/0974113 002	COMFORT TRANSPORTATION	SHD 4942P	GBC 7893D	16/12/2017	23:35	\$ 13,720.90	\$ 6,450.00
3	MT/0974165-002	COMFORT TRANSPORTATION	SHC 3973L	PC 983H	17/12/2017	17:00	\$ 2,447.80	\$ 735.00
4	MT/0973989-002	COMFORT TRANSPORTATION	SHB 4019R	SKC 8233X	16/12/2017	12:20	\$ 3,389.36	\$ 1,950.00
5	MT/0974329-002	COMFORT TRANSPORTATION	SHC 3610J	SFH 8613R	17/12/2017	16:15	\$ 3,823.58	\$ 1,000.00

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="10/12/2017 17:16"/>						
Vehicle No.(For Motor)	<input type="text" value="SLQ2300P"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5092415467	CTG LEASING PTE. LTD.	201711631Z	GPC	Third Party	SLQ2300P	SLQ2300P	04/07/2017	20/01/2018
<input type="button" value="Continue"/>									

SHC 2492P

$$\textcircled{1} \text{ cost of taxi} = 88539.03$$

$$\text{ARF } 65\% = 9575.15$$

$$\begin{aligned} \text{Depreciation} &= (88539.03 - 9575.15) \div 96 \\ &= 822.54 \end{aligned}$$

$$\begin{aligned} \textcircled{2} \text{ Book value} &= (822.54 \times 44) + 9575.15 \\ &= 45766.91 \end{aligned}$$

$$\begin{aligned} \textcircled{3} \text{ Net value} &= 45766.91 - 26838.00 \\ &= \underline{\underline{\$18928.91}} \end{aligned}$$

Omniport Transportation PL
Vehicle NSW for Fleet Safety Division
AS AT 30.11.2017

Report ID : ZFICTPL32
DATE : 15.12.2017
TIME : 15:47:12

Co. Code	: CTP/L
License Pl.No	: SHC2422P
Old Asset No	
Veh. Model	: Hyundai Sonata
Reg. Date	: 30.08.2012
Cap. Date	: 30.08.2012
Accident. Date	: 10.12.2017
Veh. Age	: 064

Asset No.	SA No	Bal. Dep. Mths	Per Mth. Dep	Bal. Dep. Value	Asset Description 1	Cost	Op. Acc. Dep.	Cur. Year Dep.	Accum. Dep.	Net Book Value	Scrap value/Estimated EBF Refund
			\$	\$		\$	\$	\$	\$	\$	\$
10029442	0	026	242.54	6,306.04	SHC2492P HSN 30.08.2012 BASIC COST \$21830 W AIRCON	21,830.00	12,854.88-	2,648.00-	15,522.85-	6,307.15	1.00
10029442	1	026	32.73	850.98	SHC2492P HSN 30.08.2012 IMPORT DUTY	2,946.00	1,734.88-	360.08-	2,094.96-	851.07	0.00
10029442	2	026	65.47	1,702.22	SHC2492P HSN 30.08.2012 ASF 100%COMS14731	14,731.00	3,469.73-	720.13-	4,189.86-	10,541.14	8,839.00
10029442	3	026	543.24	14,124.24	SHC2492P HSN 30.08.2012 COE 80%	48,892.00	28,793.95-	5,975.70-	34,767.65-	14,124.35	0.00
10029442	4	000	0.00	0.00	SHC2492P HSN 30.08.2012 COE TOP UP	0.00	0.00	0.00	0.00	0.00	0.00
10029442	5	026	0.00	0.00	SHC2492P HSN 30.08.2012 AIR CONDITIONER	0.00	0.00	0.00	0.00	0.00	0.00
10029442	6	026	0.00	0.00	SHC2492P HSN 30.08.2012 PRINTER DIGITAX THERMAL	0.00	0.00	0.00	0.00	0.00	0.00
10029442	7	026	0.00	0.00	SHC2492P HSN 30.08.2012 TAXIMETER DIGITAX FI	0.00	0.00	0.00	0.00	0.00	0.00
10029442	8	026	1.56	40.56	SHC2492P HSN 30.08.2012 VEH REG FEE	140.00	82.45-	17.11-	99.56-	40.44	0.00
			885.54	23,024.04		88,539.03	46,933.86-	9,741.02-	56,674.88-	31,864.15	
					Vehicle : Without T/M & COE						
			543.24	14,124.24	Vehicle : Without T/M, With COE	39,647.03	18,141.91-	3,765.32-	21,907.23-	17,739.80	
			342.30	8,899.80	Taximeter	88,539.03	56,933.86-	9,741.02-	56,674.88-	31,864.15	
						0.00	0.00	0.00	0.00	0.00	
			885.54	23,024.04							

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	11/12/2017 11:35
Date Of Accident	10/12/2017 02:50
Exact Location Of Accident	GEYLANG RD X PAYA LEBAR RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC2492P
Insured/Policyholder	
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	HYUNDAI
Model	SONATA-2.0 (A)
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0016
Cover Note Number	
Driver	
Name of Driver	FUH HONG SHIN
NRIC No	S1707945Z
Date Of Birth	26/02/1965
Occupation	OUTDOOR
Date Of Driving Pass	28/05/1987
Driving Experience	30 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	GAMESEVO@GMAIL.COM

Address BLK 408 HOUGANG AVENUE 10
#06-1076
Postcode 530408
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 -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? YES
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

REFER POLICE REPORT NO: T/20171214/2022 * TYPE OF ACCIDENT :- HEAD TO SIDE

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLQ2300P
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage FRONT
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF INJURED PERSON 1

Name FUH HONG SHIN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

Address

Postcode

COLLAR BONE

SHC2492P

YES

YES

BLK 408 HOUGANG AVENUE 10

#06-1076

530408

Sketch Plan Pg. 1

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.
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 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

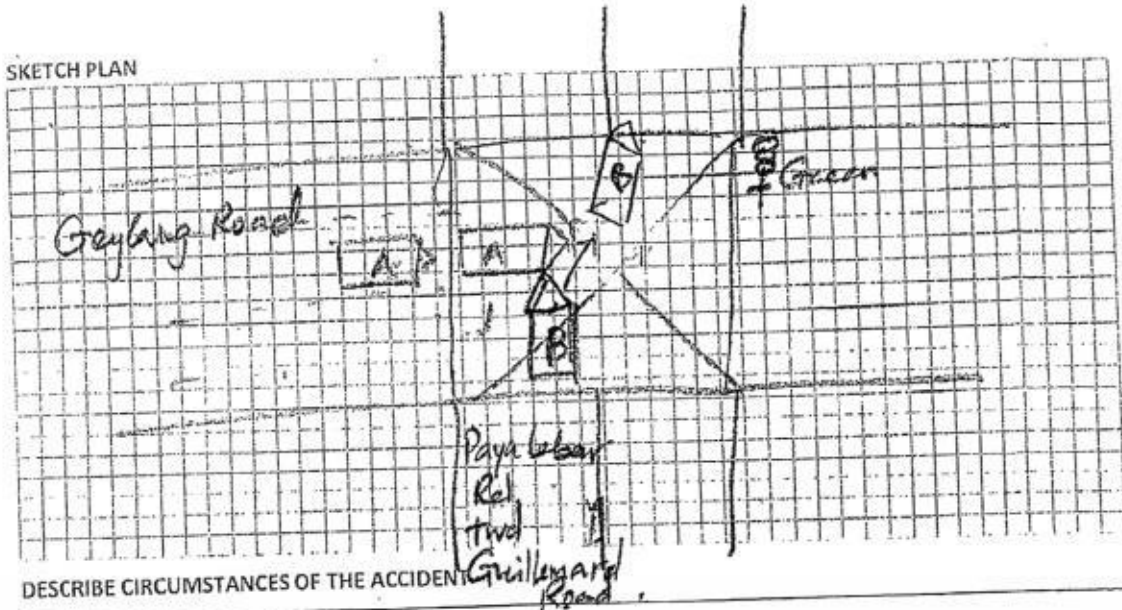
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SR Moorthy
CSO

Sketch Plan Pg. 2

SKETCH PLAN



Refer Police Report 7/20171214/2022

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

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

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

[Signature]
S. N. Moorthy
CSO

Sketch Plan Pg. 3



**SINGAPORE
POLICE FORCE**



T/20171214/2022

1 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20171214/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/12/2017 06:12	Vide Report No.:	Station Diary No.: 24
--	------------------	--------------------------

Informant's Particulars

Name of Informant: FUH HONG SHIN		Address: APT BLK 408 HOUGANG AVENUE 10 #06-1076 SINGAPORE 530408	
ID Type / ID No.: NRIC NO / S1707945Z		Contact No.: Home/Office:	Mobile: 82468246
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 52	Date of Birth: 26/02/1965	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/12/2017 02:50	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 GEYLANG ROAD PAYA LEBAR ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHC2492P	Taxi	HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Blue	Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



**SINGAPORE
POLICE FORCE**



T/20171214/2022

2 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20171214/2022

CONTINUATION OF REPORT

Driver			
Name	FUH HONG SHIN		ID No. S1707945Z
Related Vehicle	SHC2492P (Taxi)		Contact No. 82468246
Hospital/Clinic	GLENEAGLES HOSPITAL		Class of Driving Licence & Expiry Date Class: 3,4 Date of Expiry: NIL
Date Treatment	10/12/2017	Date Discharge	13/12/2017
No. of Days granted Medical Leave	36	Degree of Injury	Serious

Brief Details.

On 10/12/2017 at around 0250hrs, I was driving, SHC2492P, along Geylang Road passing the junction of Paya Lebar Road and Guillemard Road when a vehicle travelling from Paya Lebar Road collided onto my taxi. The traffic light was green when I drove pass the junction.

Ambulance and Police attended to us. I was conveyed to Tan Tock Seng Hospital and later discharged.

On the same day at around 1000hrs, I seek medical treatment again but at Gleneagles Hospital. I was hospitalized in Gleneagles Hospital till 13/12/2017 for a broken right collar bone. After discharged, I was given hospitalization leave till 14/01/2018.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999



T/20171214/2022

3 of 3

Report No. T/20171214/2022

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /
Sr Staff Sgt MOHAMED AZMI BIN MOHAMED
RIDUAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /

Contact No.:

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
14/12/2017 06:12

Classification Of Case:

SN 085



Signature: _____

Singapore Police Force

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type	Company
Owner ID	3821R

Vehicle Details

Vehicle No.	SHC2492P
Vehicle to be Exported	Yes
Intended De-registration Date	15 Dec 2017
Vehicle Make	HYUNDAI
Vehicle Model	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO
Primary Colour	Blue
Manufacturing Year	2012
Engine No.	D4EAC146149
Chassis No.	KMHET41VMCA829030
Maximum Power Output	110.0 kW (147 bhp)
Open Market Value	\$14,731.00
Original Registration Date	30 Aug 2012
First Registration Date	30 Aug 2012
Transfer Count	0
Actual ARF Paid	\$14,731.00

Intended PARF Rebate Details

PARF Eligibility	Yes
PARF Eligibility Expiry Date	29 Aug 2020
PARF Rebate Amount	\$10,311.00

Intended COE Rebate Details

COE Expiry Date	29 Aug 2020
COE Category	A - Car (1600cc & below)
COE Period(Years)	8
PQP Paid	\$48,892.00
COE Rebate Amount	\$16,527.00
Total Rebate Amount	\$26,838.00

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 15 Dec 2017

OMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

100, North Bridge Road, Singapore 079501

Workshops

100, North Bridge Road, Singapore 079501

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100, North Bridge Road, Singapore 079501

Date/Time: 15.12.2017 08:27

Page : 1

am: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO.305096549

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

REGN NO: SHC2492P	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL SONATA	DATE/TIME IN 10.12.2017 02:50
YR OF MANU 30.08.2012	TARGET DATE
CHASSIS CODE RMHET41VMCA829030	COMPLETION DATE/TIME:

DUNT CARD NO.

JOB DESCRIPTION

Accident Date: 10.12.2017
ATURE: TP/3P 10.12.17/C *Traffic Pound*

/NO LABOR CODE DESCRIPTION

KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

Io.: SHC2492P

LIMITS

Vehicle No.: SHC2492P

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 2492P

MAKE :

MODEL : HYUNDAI SONATA

DATE 15/12/2017 11:28

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bonnet ✓			\$ 1,151.80
	Bonnet Hinge (LH/RH) X		\$ 87.50	\$ 175.00
	Front Bumper Cover ✓			\$ 538.80
	Front Bumper Bracket (RH) ?			\$ 20.10
	Headlamp (LH/RH) ?		\$ 797.90	\$ 1,595.80
	Front Fender (RH) ✓			\$ 593.00
	Front Fender Shield (RH) ✓			\$ 86.00
	Front Fender Mudflap (RH) ✓			\$ 15.50
	Front Fender Signal Lamp (RH) ✓			\$ 45.40
	Front Door (RH) ✓			\$ 1,345.00
	Front Door Rubber ✓			\$ 110.40
	Front Door Glass (RH) ✓			\$ 363.70
	Front Door Gear / Regulator (RH) ✓			\$ 313.10
	Front Door Hinge Upper (RH) ✓			\$ 51.10
	Front Door Hinge Lower (RH) ✓			\$ 51.10
	Front Door Check (RH) ✓			\$ 105.50
	Front Door Inner Lock (RH) ✓			\$ 334.40
	Front Door Key Lock Set (RH) ✓			\$ 82.40
	Front Door Outer Handle (RH) ✓			\$ 37.00
	Front Door Outer Moulding (RH) ✓			\$ 61.00
	Front Door Mirror (RH) ✓			\$ 545.50
	Front Door Power Motor ✓			\$ 508.40
	Front Door Trim Board (RH) ✓			\$ 1,147.00
	Front Door Protector (RH) ✓			\$ 74.90
	Door Centre Pillar Outer (LH/RH) ✓			\$ 1,711.70
	Door Pillar Inner Garnish ✓			\$ 30.00
	Rocker Panel Outer Garnish ✓			\$ 463.40
	Rocker Panel Outer ✓			\$ 1,280.50
	Rocker Panel Step Garnish (Front) (LH/RH) ✓			\$ 30.30
	Rear Door (RH) X repair			\$ 1,294.70
	Rear Door Protector (RH) X repair			\$ 54.50
	Front Windscreen Glass ✓			\$ 1,015.00
	Front Windscreen Moulding ✓			\$ 60.00
	Front Windscreen Pillar Outer (RH) X repair			\$ 1,766.20
	Front Wheel Rim (RH) ?			\$ 284.70
	Front Wheel Hub Cap (RH) ✓			\$ 145.00
	Front Wheel Bearing ✓			\$ 258.50
	Front Shock Absorber (Assy) (RH) ✓			\$ 203.70
	Front Shock Absorber Mounting (RH) ?			\$ 72.00
	Front Shock Absorber Fork (RH) ✓			\$ 203.30
	Front Suspension Upper Arm (RH) 1			\$ 240.00
	Front Drive Shaft (RH) ?			\$ 1,025.00
	Rack & Pinion Assy ?			\$ 2,093.00
	STG Tie End ?		\$ 66.50	\$ 133.00

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Stabilizer Bar ?			\$ 213.20	
	Stabilizer Bar Bush (RH) ?		TS	\$ 12.80	
	Stabilizer Bar Link ?			\$ 78.30	
	Stabilizer Bracket ?		P2/2	\$ 23.00	
	Front Suspension Lower Arm (RH) ✓			\$ 685.20	
	Knuckle Arm (RH) ✓			\$ 558.60	
	Engine Under Cover ?		NTUC	\$ 328.70	
	Engine Crossmember ?		LSUM	\$ 2,143.70	
	Front Cushion Seat (RH) ✓		LKK-Kalvin	\$ 5,742.30	
	Front Seat Adjuster (RH) ✓			\$ 1,162.00	
	Dashboard Complete ✓			\$ 2,576.00	
	Dashboard Speedo Meter Assy ?			\$ 2,760.00	
	Steering Column & Shaft Assy ?			\$ 1,211.87	
	Frt Floor Padel ✓			\$ 350.00	
	SUB TOTAL			\$ 39,562.07	
	LESS 20%			\$ 7,912.41	
	DISCOUNTED TOTAL			\$ 31,649.65	
	Front Door Comfort Logo (RH) ✓			\$ 75.00	Nett
	Rear Door Tel No. Sticker (RH) ✓			\$ 10.00	Nett
	Front Windscreen Sealant ✓			\$ 46.00	Nett
	Front ERP Sticker ✓			\$ 30.00	Nett
	Front Tyre (RH) ✓ 50%			\$ 207.00	Nett
				\$ 368.00	
	Labour Charge				
	Panel Beating			\$ 1,800.00	
	Spray Painting Charge			\$ 1,800.00	1440
	Wiring Charge			\$ 100.00	50
	Tuff Kote			\$ 150.00	50
	Towing Charge			\$ 50.00	X
	Transfer of Door			\$ 240.00	50
	Remove/Refix Undercarriage (FRT)			\$ 400.00	200
	FRT Wheel Alignment			\$ 120.00	60
	Remove/Refix Dashboard			\$ 450.00	150
	Remove/Refix Front Windscreen Glass			\$ 120.00	100
	Remove/Refix Cushion & Upholstery Front			\$ 90.00	50
	TOTAL LABOUR			\$ 6,520.00	
	ESTIMATE TOTAL			\$ 38,537.65	

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.

Signature:

Date:

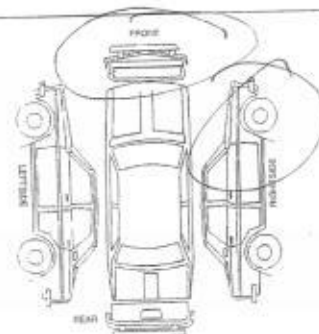
JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: <u>14/12/17</u> Time Received: <u>2:30pm</u>		3. Vehicle Type:	4. Type of Towing:
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis		<input type="checkbox"/> Private	<input checked="" type="checkbox"/> Normal Tow
Name of Customer: <u>TP</u>		<input checked="" type="checkbox"/> Taxi (CTPL/CCPL)	<input type="checkbox"/> King Dolly
Contact No.:		<input type="checkbox"/> Fleet	<input type="checkbox"/> Flat Bed
Vehicle No.:		<input type="checkbox"/> STK (Boon Lay)	<input type="checkbox"/> Crane-up
Make / Model / Colour:		5. Nature of Service:	6. Parts Replaced/Remarks:
Email:		<input type="checkbox"/> Jumpstart	
		<input type="checkbox"/> Recovery	
		<input type="checkbox"/> Change Tyre / Battery	
7. Location: <u>Tv road</u>		8. Vehicle Tow - In Workshop:	
9. Preferred Workshop:		<input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed	
<input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan		<input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty	
<input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi		<input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty	
<input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD)		<input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power	
<input type="checkbox"/> Others:		<input type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled	
10. Odometer Reading:		<input type="checkbox"/> Return Taxi	
Fuel Level: <u>F</u> <u>1/4</u> <u>1/2</u> <u>3/4</u> <u>E</u>		11. Radio / CD Player	
		<input type="checkbox"/> OK	
		<input type="checkbox"/> Faulty	
		<input type="checkbox"/> Not tested	

Job Attended

12. Tow Truck / Recovery Van:	<input type="checkbox"/> VRS <input type="checkbox"/> QA <input checked="" type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS
Name of Driver:	<u>Kubai</u>
Vehicle No.:	<u>5138</u>
Time Dispatch:	<u>2:30</u>
Time of Arrival:	<u>3</u>
Time Completed:	<u>3:45</u>



: Cracked X : Dented
/ : Scratched O : Missing

Signature of Customer

Cash Invoice Details (if applicable)

13. Cash Invoice No.:

Customer Acknowledgement

- a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.
- b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
- c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

Date

Time

Signature of Customer

14. WORKSHOP

Name of Attending Staff/Guard

Date & Time of Arrival

Signature of Attending Staff/Guard

CUSTOMER'S COPY



**NATIONAL ASSESSMENT CENTRE SERVICES
(LKK GROUP)**

**51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933, TEL: 68410055 FAX: 68416315**

Your Ref : MT/0974613-001

Date: 02nd January 2018

Our Ref : NS/INC17023866/K1qbs2

M/s NTUC Income Insurance Co-Operative Ltd

73 Bras Basah Road
#05-01 NTUC Trade Union House
Singapore 189556

Dear Sirs/Madam,

**AUTOMOBILE INSPECTION REPORT OF ACCIDENT VEHICLE SHC 2492P
ACCIDENT ON 10/12/2017
INSURED VEHICLE SLQ 2300P**

Instruction was received to inspect the vehicle Reg. No. SHC 2492P. The inspection was conducted on 15/12/2017 at the premises of M/s Comfortdelgro Engineering Pte Ltd, 59 Loyang Drive Singapore 508969.

The following vehicle information was recorded:

Registration Number	: SHC 2492P
Make/Model	: Hyundai Sonata
Year of Registration	: 2012
Body Colour	: Blue
Chassis Number	: KMHET41VMCA829030
Engine Capacity	: 1991cc

The following are our comments:-

- (a) The vehicle sustained damages at the o/s body and undercarriage . (Details see photographs enclosed)
- (b) In view of this, we are of the opinion that it would be **unsafe** to proceed with the repairs due to extensive damages on the chassis under the category of **the section 2 of THE ROAD TRAFFIC ACT on THE MOTOR VEHICLES (CONSTRUCTION AND USE) (AMENDMENT NO.2) RULES 1989**, that:
no vehicle shall be fitted with a replacement chassis or any body part where the chassis is an integral part of the vehicle.
and we therefore recommend it to be written off as **"Total Loss"**



**NATIONAL ASSESSMENT CENTRE SERVICES
(LKK GROUP)**

**51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933, TEL: 68410055 FAX: 68416315**

Book Value	S\$ 45,766.91
Less: LTA Reimbursement Value (RV)	(S\$ 26,838.00)
Nett Liability	<u>S\$ 18,928.91</u>

Vehicle Inspected By:

KALVIN ANG WEI KUN
Automotive Assessor / Investigator

K.K.LAU
*MSc(Eng M), B Eng(Hons), Peng(UK),
MASME(USA), B Bus(Aust), MBA(UK),
IEng(UK), MIIE(mech), MinstAEA, MFIEA,
MIRTE, MIMI, MSAE, MCI Ard, AM, NIJAAR(USA),
AM CATARI(CAN), M.MATA(USA), M.MdATA(USA),
Licensed Appraiser*

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