

Suzuki

Kabin

REF:

NS/INC17024326/K196n2

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured SKN 4852C

Policy No: 5079801474-01 340617-260618

Claims No: MT/0974964-003

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? Yes or No

Est. Repairs: 7 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: SHC 926T

Type: M/Car / M/Cycle / Bus / Van / Lorry / T/ Prime Mover /

Truck / Trailer or

Make: Mercedes Benz

Colour: white

Sp Reading: 608658

Eng No: \_\_\_\_\_

C/No: WDF 63981323

Gen Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD Rim or

Tyre Size: F: 225 / 60 R16C

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal: 7 mm

L/Bal: 7 mm

D/OA: 24/2/12

Survey held at: LDK (Lang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action Instruction

SHC 926T - NS/INC0902501/CN

Date: 12.11.09

SKN 4852C - X

11/1/18 continued L/S \$1400/24hrs (Pzd \$1831.90, 57%)

RECEIVED 10 JAN 2018

Date/Time File Pass to?

18/1 turner

Date/Time File Return to?

3

Report Format: 78

Lump Sum / I.B. 1400

☐

Prel. Report

☐

Final Report

Days Of Repair: 2

Resurvey No. of Trip:

Add Fee:

☐

Site Insp \$

☐

Interview \$

☐

Tech. Ins. \$

☐

Weekend \$

Survey Fee

Transport

Fuel

Shop

Lunch

Other

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/INC17024526/K1qb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 27-12-2017



Code: INC4

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

Insured Veh.	SKN 4852C	Veh. Inspected	SHC 926T
Policy No.	5079801474-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	26/12/2017

### 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	24/12/2017	Inspection Date	26/12/2017
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.
--

# Survey Department Check List (Case Handler)

Reference No. :

Policy Type: OD / TP / RES / TL / EVA

Case Handler

Typist

**Admin** (Cathy): 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** (Kevin): 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

✓		
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## (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

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Check By:

Case Handler

Date

**TP Claims against NTUC Income: Follow-Through Survey**

Date : 12/01/2018

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/0974964-003	CITYCAB PTE LTD	SHC 926T	SKN 4852C	24/12/2017	16:10	\$ 3,231.90	\$ 1,400.00
2	MT/0965594-002	SMRT BUSES LTD	SG 1046A	SJK 9733H	10/10/2017	11:20	\$ 12,108.35	\$ 9,303.66
3	MT/0974611-002	SMRT TAXI PTE LTD	SHB 1023Y	GW 2992U	18/12/2017	7:40	\$ 7,209.04	\$ 1,100.00
4	MT/0974888-002	SMRT TAXI PTE LTD	SHF 466M	PA 8025G	21/12/2017	8:10	\$ 7,656.80	\$ 1,250.00
5	MT/0973641-002	SMRT TAXI PTE LTD	SHD 6318D	FBC 2047M	11/12/2017	6:27	\$ 4,497.17	\$ 2,857.60
6	MT/0976356-002	SMRT TAXI PTE LTD	SHF 301E	SFT 68D	1/1/2018	6:11	\$ 8,472.24	\$ 1,100.00
7	MT/0977899-001	SMRT TAXI PTE LTD	SHB 5827T	SDS 6588J	4/1/2018	10:20	\$ 1,978.61	\$ 924.77
8	MT/0975474-002	SMRT TAXI PTE LTD	SHB 152P	GBE 7429B	28/12/2017	11:00	\$ 6,344.44	\$ 3,500.00
9	MT/0973932-002	SMRT TAXI PTE LTD	SHF 441J	SJL 7917C	15/12/2017	18:10	\$ 9,147.71	\$ 1,850.00
10	MT/0970425-002	SMRT BUSES LTD	SMB 21A	SKH 2771Y	17/11/2017	17:05	\$ 2,929.36	\$ 1,900.00
11	MT/0976470-002	SMRT TAXI PTE LTD	SHC 4700B	SLT 752R	4/1/2018	8:35	\$ 2,057.39	\$ 1,050.00
12	NOT INCOME	SMRT TAXI PTE LTD	SHB 5040X	SDG 1662Z	31/12/2017	21:35	\$ 2,759.80	\$ 1,467.80
13	MT/0974170-002	SMRT TAXI PTE LTD	SHC 4021C	SJD 3664A	17/12/2017	18:20	\$ 2,551.82	\$ 550.00

eBaoTech

GeneralClaim

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="24/12/2017 17:57"/>						
Vehicle No. (For Motor)	<input type="text" value="SKN4852C"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5079801474-01	ELEVATION	53333957W	GPC	drivo CLASSIC	SKN4852C	SKN4852C	27/06/2017	26/06/2018
<input type="button" value="Continue"/>									

## 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	26/12/2017 12:00
Date Of Accident	24/12/2017 16:10
Exact Location Of Accident	PIE(TUAS) BF STEVENS ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC926T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
<b>Vehicle Particulars</b>	
Manufacturer	MERCEDES-BENZ
Model	VIANO
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-15072702MFSH
Cover Note Number	

### Driver

Name of Driver	TAN KONG MENG
NRIC No	S1293603F
Date Of Birth	16/02/1958
Occupation	OUTDOOR
Date Of Driving Pass	16/03/1976
Driving Experience	41 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	KMTAN8888@YAHOO.COM

Address	BLK 247 SIMEI STREET 5 #10-27
Postcode	520247
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 TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	6
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : FEMALE
Passenger 3	NAME: : - GENDER: : FEMALE
Passenger 4	NAME: : - GENDER: : FEMALE
Passenger 5	NAME: : - GENDER: : FEMALE

#### 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 ATTACHED

#### 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	SKN4852C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT
No. Of Passenger (Including Driver)	



**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.

CITYCAB PTE LTD  
CO. REG. NO. 199502839G

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.:

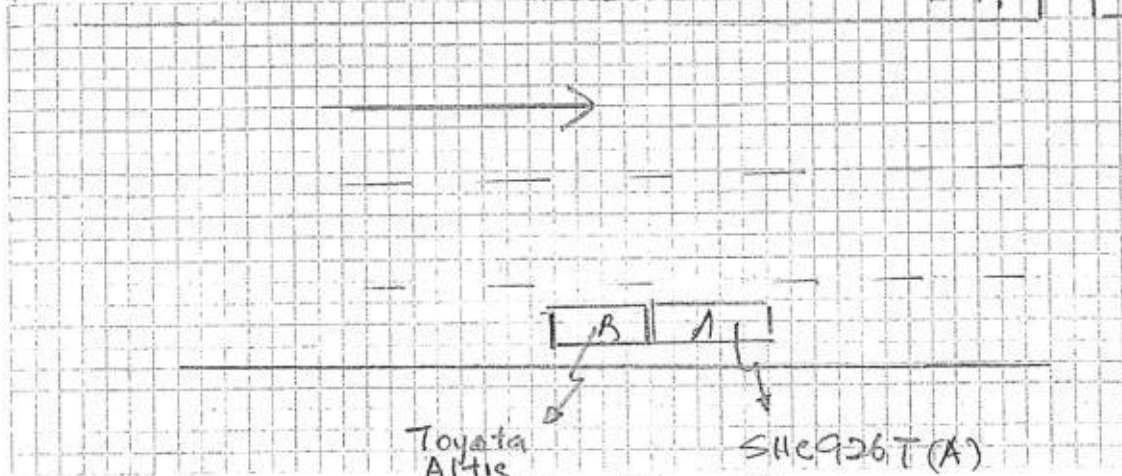
  
S R Moorthy  
CSO

# Sketch Plan Pg. 2

SKETCH PLAN

PIE Toward Turas

Steven Rd  
Exit



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SKN 4852C(B)

On 24 December 2017 at about 1610hrs, I pick up 5 passengers from Changi Airport going to Jurong West St 65. While I was driving along PIE toward Jurong direction just before Steven Road Exit / After Thomson there was a traffic Jam due to roadwork on the left side of PIE. Traffic was heavy and congested. I was driving at about 10kmph and suddenly vehicle no SKN 4852C hit the rear of my car SHC926T causing damage on the rear bumper of my car.

## DECLARATION

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

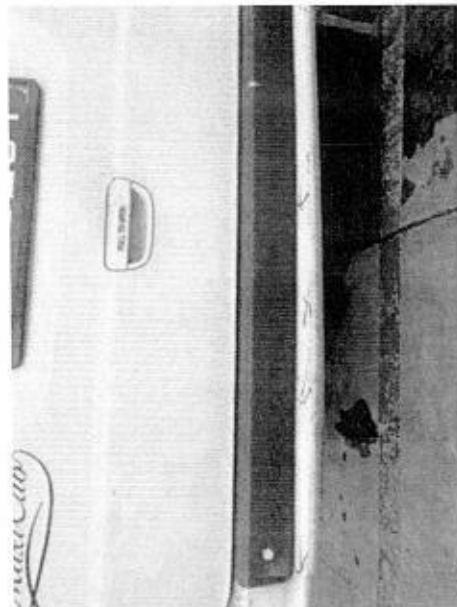
CITYCAB PTE LTD  
CO. REG. NO. 199502839G

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.:

S R Moorthy  
CSO  
26/12/17



Team: ARC Repair TP(CFSO)1 **JOB CARD** Sales Order: JC NO305100827

CUSTOMER  CITYCAB PTE LTD 7010070 383 SIN MING DRIVE Singapore SINGAPORE 575717 65551188 (O) (P)  SCOUNT CARD NO.	REGN NO: SHC 926T	MILEAGE
	MAKE: MERCEDES BENZ	FUEL E.....1/2.....F
	MODEL VIANO CDI 2.2L 26	DATE/TIME IN 12.2017 09:45
	YR OF MANU 10.10.2013	TARGET DATE
	CHASSIS CODE WDF63981323802109	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 24.12.2017  
NATURE: 3P 24.12.2017

S/NO	LABOR CODE	DESCRIPTION
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CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR	CUSTOMER'S SIGNATURE
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Acknowledgement Slip  No.: Vehicle No.: SHC 926T  Signature of Service Advisor  To be returned to Service Reception upon collection	Exit Pass  Vehicle No.: SHC 926T  Signature/Date	Name of Service Advisor  To be kept by Security Guard	Date

# CITY CAB PTE LTD

## REPAIR ESTIMATE\*

VEHICLE NO : SHC 926T

DATE 26/12/2017 11:50

MAKE :

MODEL : MERCEDES BENZ VIANO (REAR)

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>Refined</i>			\$ 1,372.00
	Bumper L/H Side, RR <i>X repair</i>			\$ 473.60
	Bumper R/H Side, RR <i>X repair</i>			\$ 473.60
	Bumper Reflector RR/LH <i>X sun</i>			\$ 46.00
	Bumper Protector <i>X sun</i>			\$ 205.18
	Rear Bumper Clips <i>add</i>			\$ 22.00
	<b>SUB TOTAL</b>			<b>\$ 2,592.38</b>
	<b>LESS 20%</b>			<b>\$ 518.48</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 2,073.90</b>
	Reverse Sensor <i>should</i>			\$ 288.00
	Rear Bumper Rubber Mat <i>add</i>			\$ 50.00
				<b>\$ 338.00</b>
	<b>Labour Charge</b>			
	Panel Beating			\$ <del>400.00</del> <i>200</i>
	Spray Painting Charge			\$ <del>250.00</del> <i>200</i>
	Wiring Charge			\$ <del>50.00</del> <i>20</i>
	Remove/Refix Reverse Sensor			\$ <del>120.00</del> <i>20</i>
	<b>TOTAL LABOUR</b>			<b>\$ 820.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 3,231.90</b>

*Kalvin IC/KIC*  
*26/12/17 1506h*  
*2 days*  
*45*  
*After Repair p/h*

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Part's prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- Any 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:

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.

Our Job Ref No : 305100827  
Date : 28/12/17

## COMFORTDELGRO ENGINEERING

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



### FINALIZATION FORM

To : LKK  
Attn : KALVIN  
Vehicle Reg No. : SHC 926T

Fax :

24/12/2017

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

1. The repair job shall bill to: NTUC SKN4852C
  2. The finalized amount shall be:
    - (a) Spare Parts after List discount
    - (b) Labour Charges
    - Total for Part-By-Part Repair Cost**
    - (c) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20%  
**Final Lumpsum Repair cost** \$1,400.00
  3. Estimated normal period for repairs: 2 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 :  Signature :   
Name : CHIANG Name : KALVIN  
Tel : 62148314 Date : 11/1/18  
Fax : 65468156

### 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		N		
3. Survey Fees				
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:



Thatcham escribe

## 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/INC17024526/K1qbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 19-01-2018



Code: INC4

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

Insured Veh.	SKN 4852C	Veh. Inspected	SHC 926T
Policy No.	5079801474-01	Coverage (\$)	0.00
Claim No.	MT/0974964-003	Excess (\$)	0.00
Assign From		Assign Date	26/12/2017

### 2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ VIANO	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	WDF63981323802109	Colour	WHITE
Odometer	608658	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	225/60 R16C	HANKOOK	7 mm
L/H Front Tyre	225/60 R16C	HANKOOK	7 mm
R/H Rear Tyre	225/60 R16C	HANKOOK	7 mm
L/H Rear Tyre	225/60 R16C	HANKOOK	7 mm

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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### 5. General Information

Accident Date	24/12/2017	Inspection Date	26/12/2017
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.
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### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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# 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. SHC 926T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	DEFORMED	1,372.00	1,372.00
1	BUMPER L/H SIDE,RR	TO REPAIR	473.60	-
1	BUMPER R/H SIDE,RR	TO REPAIR	473.60	-
1	BUMPER REFLECTOR RR/LH	SERVICEABLE	46.00	-
1	BUMPER PROTECTOR	SERVICEABLE	205.18	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
	LESS 20% DISCOUNT		-518.48	-278.80
			2,073.90	1,115.20
<b>SPECIAL NETT ITEMS</b>				
1	REVERSE SENSOR (SN)	SHORTED	288.00	288.00
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
			338.00	338.00
<b>LABOUR</b>				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		570.00	220.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		250.00	200.00
			820.00	420.00
<b>GRAND TOTAL</b>			<b>3,231.90</b>	<b>1,873.20</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>1,400.00</b>

Report Ref No. NS/INC17024526/K1qbn2

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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