Sinsilar	A	SSIGNMENT	 -		•
From:	Date:	Veh No:	SG, ≤452 <u>7</u> /M.Cycle / (€us) Va	∳r Regn:	5/4/2017.
Estimated Cost:		Type: M.Car	/ M.Cycle / Rus) Va	n / Lorry / Taxi / Pri	ne Mover /
OD / TP / WS / TP RES / OD RES	S/EVA/INV/MV	1	/Trailer or		
To Inspect Vehicle No:		Make: \	/oluc BaTL		c.c 9164
at Markehan mle		Colour		A/C: Ins	
		Sp.Reading	5194L	T/Radio: Ins	ured / Std / NI / NA
Insured: SKO 34947		Eng/No:			
Policy No. 509422626		C/No:	yv3541	292 x HA 18	741
Claims No. M7/0984	r 462-001	Gen. Cond: 0	Good / Pary / Poor / E	Burnt	
Sum Insured:	Excess:	Steering: Ino	/ Jammed / Lea	iked / Burnit or	m . m . masser' sterr
(Client's Record)	·	1 /-	der / Jammed / Lea		
Make of Veh:			S/Rim / STD A/Ri	,	
	, 	Tyre Size:	F: 275/7	ORILY	
(Policy Condition)	1110	A	K:		
Remark: The veh had commenc repair at the time of ins	<u></u>	-111 00,000,7	XNOVA/GY/FS/L		PIR / SUMI /
·	spection.	TOYO / YOI	(O or $\frac{1}{2}$)	dyestere	
Bal. or Market Value:		Front	/	<u>Réar</u>	6/6
	Consistent?: Yes or No Consistent?: Yes or No	R/Bal. L/Bal.	<u>C</u> mm	R/Bai.	mm
GIA / PR Seen: Est. Repairs:	-		/1/18 mm	L/Bal. D.O.I. 7€	Tilia mm
Lum Sum: %	3 Val.: Yes or No	Survey held a		· · · · · ·	/ //IK
Alberta and the Ample Andrews of the Ample Andrews			ges: Frt / Rear / (Rooftop or
CA / REV / REP. / 24 HR	:S Vehicle: IN / OU	i	3		
Date: Person Cor			Chassis frame / E	Sody Structure affect	ted due to collision
Date / Time Action / Instructi					1 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
:3h 5H52]					e in the second
	- X				
trad tog	\$761.7, 4 da	ys (Red	\$11944.	08,676)	- No. 100 No.
		· ·			-
			m pr. gran armone and a second a		INVESTIGATION TO THE CONTRACT OF A CONTRACT
ga ya sa			· · · · · · · · · · · · · · · · · · ·	ì	
Le bree -	reli. Report		air: 4		
06/3 MMA : File Return to?	inal Report	Resurvey No.	. of Trip:	Survey Fee:	160
ater ime, rije netom tor		Site In	sp (\$	Transportation:	
	Add Fa				
	Add Fe	<u></u>	to resemble the) Photos	



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315





NTL	JC INCOME INSUI	RANCE CO-OPERATIVE LTD	Ref:	NS/INC1800167	4/Sqb
	BRAS BASAH ROA -01 NTUC TRADE 556	AD UNION HOUSESINGAPORE	Date:	29-01-2018	
			Code:	INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	And the second second
_	Insured Veh.	SKQ 3494T	Veh. lı	nspected	SG 5452J
	Policy No.	5094226262	Cover	age (\$)	0.00
	Claim No.		Exces	s (\$)	0.00
	Assign From		Assign	n Date	26/01/2018
2.		Vehicle Parti	culars 8	Condition	
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year o	f Reg.	
	Chassis No.		Colou	r	
	Odometer	-	Steeri	ng	
	Brakes		Modifi	cation	
	General				
3.		Conditi	ons of	Tyres.	
		Size	Make		Balance
	R/H Front Tyre		1		mm
	L/H Front Tyre			•	mm
	R/H Rear Tyre				mm
	L/H Rear Tyre	-			mm
J		Description	on of Da	mages	
5	and the second s	Genera	Inform	ation	and the second s
	Accident Date	05/01/2018	Inspec	tion Date	26/01/2018
	Survey held at	SMRT AUTOMOTIVE SERVICE	S PTE L	TD	
		60 WOODLANDS INDUSTRIAL	PARK E4	SINGAPORE 7577	05
a.	· · · · · · · · · · · · · · · · · · ·	R	marks		
	A)THE INSPECTIO	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT P	REJUDICE" BASIS.	· · · · · · · · · · · · · · · · · · ·

Policy Type: OD /TP / TP RES / TL / EVA Case Handler **Typist** Admin (Csth —): Case handler to make sure all Information created by the assignment team are ACCURATE. Y-Date N-Date Y-Date N-Date (1) Office Assign Form Reference No. C C **Customer Code** Ν Assign From C Assign Date C Veh No (Inspected) C Veh No (Insured) C D.O.A C Policy No C Claim No Insurance Authorisation (CA /REV/REP) C C Report Type C Weekend Charges N Survey held at/Repairer C Excess **Surveyor** (Schastan): Case handler to make sure the surveyor completed all required information. (1) Assignment Form C Vehicle No Regn Month/Year Ν. Vehicle Type Ν Make & Model C Engine Capacity. (C.C) Colour Ν C Odometer. (Sp.Reading) C Chassis No General Condition Ν Steering Ν **Brake** Ν Modification (Modi) Ν C Tyre Size Tyre Make Ν C Tyre Balance Date of Inspection Ν Survey held Des.of Damages (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form **ALL Parts condition** Ν Market Value for OD cases C C Estimate Repair Cost for PRI (RSI, TMI, MSIG) C Days of repair C **Finalised Amount** Re-inspection Cases to Finalize within 5 Days C (4) System - (Views/Merimen) Resurvey photo Uploaded Check By:

Survey Department Check List (Case Handler)

Reference No.: NS/INC18001674/Sab

Case Handler

TP Claims against NTUC Income: Follow-Through Survey

Date: 5/3/2018

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		SMRT BUSES LTD	SMB 3529H	FV 3043U	11/12/2018	16:15	\$ 3,858.03	\$ 2,550.00
2	MT/0983770-002	COMFORT TRANSPORTATION PTE LTD	SHC 8339K	FY 5545J	25/2/2018	2:25	\$ 6,898.96	\$ 4,100.00
m	MT/0984758-001	COMFORT TRANSPORTATION PTE LTD	SHC 3155G	GBG 1237S	22/2/2018	14:40	\$ 2,549.36	\$ 1,400.00
4	MT/0980882-004	COMFORT TRANSPORTATION PTE LTD	SHD 31325	GBC 3328X	3/2/2018	2:55	\$ 3,503.26	\$ 1,348.21
2	MT/0984276-002	COMFORT TRANSPORTATION PTE LTD	SHC 746X	SLR 7216L	28/2/2018	2:00	TOTAL LOSS	TOTAL LOSS
٥	MT/0984762-001	SMRT BUSES LTD	SG 54521	SKQ 3494T	5/1/2018	13:22	\$ 8,131.29	\$ 7,161.29
_	MT/0984765-001	SMRT BUSES LTD	SMB 336S	SHD 1237L	27/1/2018	18:30	\$ 2,990.00	\$ 700.00
∞	MT/0979197-002	SMRT BUSES LTD	TIB 1116B	GBD 5665D	23/1/2018	10:05	\$ 3,964.77	\$ 3,000.00
6	MT/0983952-002	COMFORT TRANSPORTATION PTE LTD	SH8 6713G	SLA 46X	26/2/2018	6:05	\$ 6,740.80	\$ 4,950.00
10	1	COMFORT TRANSPORTATION PTE LTD	SHA 6973C	FBB 4102D	23/2/2018	17:15	\$ 1,250.48	\$ 600.00
11		CITY CAB PTE LTD	SHA 9243G	PC 4246B	23/2/2018	18:05	\$ 2,681.58	\$ 2,400.00
12	$\overline{}$	CITY CAB PTE LTD	SHB 4736D	FBL 7388Z	22/2/2018	12:30	\$ 2,487.18	\$ 950.48
13	-	COMFORT TRANSPORTATION PTE LTD	SH 6763A	SJP 3496E	13/2/2018	22:00	\$ 2,324.08	\$ 1,295.76
14		CITY CAB PTE LTD	SHC 926T	SDX 6942T	18/2/2018	16:50	\$ 3,181.90	\$ 1,400.00
51	$\overline{}$	COMFORT TRANSPORTATION PTE LTD	SHA 4722Z	SJR 294E	16/2/2018	16:40	\$ 5,637.20	\$ 2,237.52
16	_	COMFORT TRANSPORTATION PTE LTD	SHC 3372X	SLU 1543R	18/2/2018	5:35	\$ 4,132.08	\$ 560.00
17		CITY CAB PTE LTD	SHC 7866L	SLP 4518X	18/2/2018	17:50	\$ 1,375.12	\$ 660.00
182	$\overline{}$	COMFORT TRANSPORTATION PTE LTD	SH9111L	SHC 6770K	24/2/2018	22:50	\$ 2,605.10	\$ 975.48
19		COMFORT TRANSPORTATION PTE LTD	SH A 3341X	1275 US	24/2/2018	14:05	\$ 6,414.38	\$ 1,200.00
20		COMFORT TRANSPORTATION PTE LTD	SMB 3141S	GBE 9185R	4/12/2017	14:25	\$ 6,153.67	\$ 6,090.67
21	MT/0983749-002	COMFORT TRANSPORTATION PTE LTD	SHA 7760T	SJD 3446M	25/2/2018	22:15	\$ 6,759.82	\$ 1,850.00

Policy Search Page 1 of 1

eBaoTech GeneralClaim Hello, NAC_PAYA_UBI_800601 Change Password · Change Language My Desktop **Policy Query** Notice of Loss 05/01/2018 10:56 Policy No. Date of Accident Vehicle No.(For Motor) SKQ3494T Search Policyholder Name Policyholder NRIC Vehicle No. Insured Object Commence Date Select Policy No. Product Cover Type Expiry Date EZ-SWIFT CAR RENTAL & LEASING PTE LTD Third Party, Fire & Theft 5094226262 201724540N GFT SKQ3494T SKQ3494T 12/09/2017 #Continue

PARF Eligibility Expiry Date:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Owner ID Type: Company Owner ID: 2292D Vehicle Details Vehicle No.: SG5452J Vehicle to be Exported: No Intended De-registration Date: 29 Jan 2018 Vehicle Make: **VOLVO B9TL 9.4L AUTO TURBO ABS** Vehicle Model: Multi-Colour **Primary Colour:** Manufacturing Year: 2016 Engine No.: D9195707 Chassis No.: YV3S4P92XHA181741 Maximum Power Output: \$505,887.00 Open Market Value: 05 Apr 2017 Original Registration Date: 05 Apr 2017 First Registration Date: **Transfer Count:** 0 Actual ARF Paid: \$0.00 **Intended PARF Rebate Details** PARF Eligibility: No

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Rebate Amount: \$0.00

Total Rebate Amount: \$0.00

The information contained herein is correct as at 29 Jan 2018

OK :

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 witholding 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.

aforesaid.	,	•	,	, ,	
		ACCIDENT STATEMENT			*
Date Of Report		09/01/2018 15:09			
Date Of Accident		05/01/2018 13:25			
Exact Location Of Accident		PAN ISLAND EXPRESSWAY			
Country/State of Loss		SINGAPORE			
	***	DETAILS OF OWN VEHICLE		3	
Vehicle Registration Number		SG5452J			
Insured/Policyholder	i i				
Name Of Registered Owner		SMRT BUSES LTD			
Co Reg No		198202292D			
Email Address		NOEMAIL			

Mobile Phone No

Alternative Phone No OFFICE-64823888

Vehicle Particulars

Manufacturer MERCEDES-BENZ

Model BUS

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 BUS

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-17087563MFBP

Cover Note Number

 Driver
 YANG LI JING

 Name of Driver
 YANG LI JING

 NRIC No
 G2055851U

 Date Of Birth
 20/11/1971

Occupation OUTDOOR
Date Of Driving Pass 08/05/2012

Driving Experience 5 YEARS AND 7 MONTHS

Gender MALE

Mobile Number Fax Number

Contact Number

EMail Address NOEMAIL

SKETCH PLAN

IMPORTANT NOTICE

Bus 01/18/1007.

- 1. Please report correctly the details of the accident to speed up the claims process.
- 1. 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.
- E The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 1. Any false reporting may be referred to the Police for Investigation.
- The report unifice framenosed in the insure such the Bull Records Niens genter in land a exist which is the decise. 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.
- 1. By the lodgment of this report to the insurers, you hereby content to the anchiving of this report to the centre and to copies of the report to ingread a piletie of the selfetic and to copies of
- L. Consent under the Personal Data Protection Act (PDPA)

funderstand, 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 Monerary Authority of Singapore and any relevant government agency/authority (such as the police), for the purposets) of:
 - processing, handling and/or dealing with my claims including the sertlement 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.

SMRT BUST

Policyholder's Signature Date & Time:

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

Sketch Plan Pg. 3

Vide Report No.:



REPORT OF A TRAFFIC ACCIDENT
Date/Time Report Made:

No. of Pedestrians Injured: NIL



Police Station Of Origin: Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

1 of 3 Report No. T/20180105/2166

Station Diary No.:

00/01/2010	23:37						2	66
Name of Info	ormant:		Addre					
YANG LI JIN			Addie	33.				
ID Type / ID			Conta				2450	2540
FIN NO / G2 Nationality:	20558510	<u> </u>	Home/	/Office:		Mobile	: 8150	9516
CHINESE			Linair.					
	Age: 46	Date of Birth: 20/11/1971	Type of Driver	of Informant:				
Race: Chinese			Langu Chines			Institut	ion / Si	chool Name:
Occupation: Bus driver		*	Driving Class:	g Licence Info 3,4A	rmation:	Date o	Expin	y:
	·							
第一步								
Type of Accident:		on-Injury tended by Police		Drink Drive: No	Date/Tim Accident: 05/01/20			Type of Location: Straight Road
Location:						· · · · · · · · · · · · · · · · · · ·		
Along Road PAN ISLANI		SSWAY						
WITH A 26K Weather:	<u>M SIGN</u>	POST AT THE SI		THE ROAD Surface:			Road	Speed Limit:
Clear			Dry	_			, (000	
Traffic Flow:				Control:				c Volume:
One Way			NOT CO	ontrolled			Light	
Type of Call							Δηνοι	ne conveyed by
Type of Colli Between Mo		nicles - Head To S	ide				ambu	ne conveyed by lance:
		nicles - Head To S	ide					
		nicles - Head To S	ide				ambu	
	Bus/Co		ide				ambu No htly	lance:
Between Mo	oving Veh		ide			Dar Ser	ambu No htly maged iously	lance:
Between Mo	Bus/Co		ide			Dar Ser	ambu No htly naged	lance:

Use of Pedestrian Crossing: NA

Sketch Plan Pg. 5





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 3 of 3 Report No. T/20180105/2166

CONTINUATION OF REPORT

OL.	-4-6	01
OK (51CH	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: J / CHEN JIAN YU	Signature Of Informant:
Signature Of Interpreter	Date/Time:
Not applicable	05/01/2018 23:37
Officer In Charge Of Case: TP / GIT / Sr_Staff Sgt MOHAMMAD ABDILLSAHIBIN PALIL	Classification Of Case:
Contact No.: 65476246	
Authorication Stamp NP Signature:	
Singapore Police Force	



60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No

SG5452J

Ref. No

BUS/01/18/5007

Reg. Date

12/01/2018

Vehicle Type

DOUBLE DECK

Model

Make

VOLVO Volvo B9TL DD

Name of Driver

Yang Li Jing

Type of Accident

SIDE SWIPE

Date / Time of Accident

05/01/2018 01:22:00 PM

Accident Reported Date / Time:

09/01/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

IDAC

Vehicle is Towed Back?

No

Towed Back Date/Time

No

Replacement Vehicle issued? :

Accident Repair Job Card No :

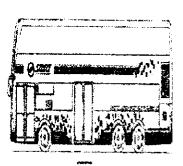
Special Instruction to ARC, if any :

SG5452J - RIGHT REAR SCRATCHES

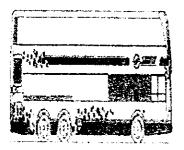
SKQ3494 F (TP) - INSURED WITH NTUC

Prepared Date

: 12/01/2018 03:24:57 PM









Sepastion. 2011/18.
-Part by part repair. - Photo Before & After

90036121 Sign Date Seisastion years @ likearto com

LKK Auto Consultants hence notify the Repairer of the following:

- To recurvey before/after apray painting
- To display demaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal medification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:





9

60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No

SG5452J

Ref. No

BUS/01/18/5007

Reg. Date

05/04/2017

Vehicle Type

DOUBLE DECK

Make

VOLVO

Model

: Volvo B9TL DD

Name of Driver

: Yang Li Jing

Type of Accident

SIDE SWIPE

Date / Time of Accident

Accident Reported Date / Time :

05/01/2018 01:22:00 PM

09/01/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

IDAC

Vehicle is Towed Back?

10/10

Towed Back Date/Time

No

TOWEG Dack Date/Time

Replacement Vehicle issued?: No

Accident Repair Job Card No :

000024094365

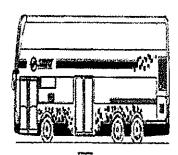
Special Instruction to ARC, if any :

SG5452J - RIGHT REAR SCRATCHES SKQ3494T (TP) - INSURED WITH NTUC

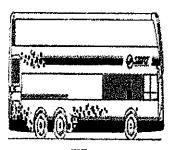
photo before & after paint.

Prepared Date

: 12/01/2018 03:24:57 PM









SOCION D. TO DE COMPLETEU DY SELVICE MUVISON, MODIUENT REPAIL GENTLE

Chassis No: YV3S4P92XHA181741

Mileage

0

Work Shop :

Repair Completed Date / Time:

01/01/2000

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges Total Spray Painting Charges 2,650.00 1,800.00 2,120.00 1,360.00

Total Material Charges

3,681.29

3,681.29

Other Charges

TOTAL

0.00

0.00 7,161.29

Lum Sum Total

8,131.29 0.00

:

0.00

4.00

No. of Repair Days

Prepared / Adjusted By

5.00

LKK Sebastian

Arc / Surveyor Sing Off Date

: 10/02/2018 04:33:00 PM

30/01/2018 11:15:55 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 25/01/2018 02:14:59 PM

Section C - To be Completed by Admin Assistant, Accident Repair Centre, Upon Completion of Repair

Quotation No

Invoice No

Quotation Date :

Invoice Date :

Invoice Amount :

Prepared Date:

section b - betails of Repair Estimates

Part 1 - Labour Works

lob Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
O REPAIR RH PORTION	2,650.00	6.60 2120
「otal Labour	2,650.00	0.00

'art 2 - Spray Painting & Panel Beating Related Works

lob Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	1,800.00	0.00 1360
otal Spray Painting & Panel Beating	1,800.00	0.00

'art 3 - Other Costs - Accident and Accident Repair Related Expenses

cb Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
otal Other Costs		

3US/01/18/5007 Page: 3

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
ELU- 00300		6012151	LED REVERSE LIGHT 24	1	647.08	10.00	582.37	Replace	Replace	No JOKK
A12- 01979			O/S LOWER ENGINE ACC	1	3,443.25	10.00	3,098.92	Replace	Replace	No Const
A12- 02043			SIDE SHEETMETAL PANEL	1	2,185.18	100.00	0.00	Repair	Repair	No ₹
A12- 01984			SIDE SHEETMETAL PANEL	1	1,763.50	100.00	0.00	Repair	Repair	No F
A12- 01974			SIDE SHEETMETAL PANEL	1	1,488.98	100.00	0.00	Repair	Repair	No K
A12- 01990			SIDE SHEETMETAL PANEL	1	558.35	100.00	0.00	Repair	Repair	No R
A12- 01983			SIDE SHEETMETAL PANEL	1	1,589.65	100.00	0.00	Repair	Repair	No R
A12- 02043			SIDE SHEETMETAL PANEL	1	2,185.18	100.00	0.00	Repair	Repair	No Æ
A12- 01981		1	SIDE SHEETMETAL PANEL	1	394.20	100.00	0.00	Repair	Repair	No 🧸
		1	OTAL MATERIALS	-				3,681.30	3,681.29	
		TOTAL	MATERIALS(Discour	ited)	·			3,681.29	3,681.29	

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
		TAL SUPPLEMENTARY MA	TERIA	LS					

3681.29 2120.00 -+ 1360 00 7161-29

> > 18705.37



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/INC18001674	/Sqbe2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date:	09-03-2018					
		Code:	INC4					
	Policy Particulars	en dia	STREET STATE	Sing Company of the C				
Insured Veh.	SKQ 3494T	Veh. Ir	nspected	SG 5452J				
Policy No.	5094226262	Cover	age (\$)	0.00				
Claim No.	MT/0984762-001	Exces	s (\$)	0.00				
Assign From		Assigi	n Date	26/01/2018				
2.	Vehicle Partic	ula fina						
Make & Model	VOLVO B9TL	c.c	A BANK TALAHAN AN TANAH BANK BANK BANK BANK BANK BANK BANK BANK	9364				
Engine No.	HIDDEN	Үеаг о	f Reg.	2017				
Chassis No.	YV3S4P92XHA181741	Colou	T	GREEN				
Odometer	51942	Steeri	ng	IN ORDER				
Brakes	IN ORDER	Modifi	cation	NIL				
General	FAIR							
3								
	Size	Make		Balance				
R/H Front Tyre	275/70 R22.5	BRIDGI	ESTONE	6 mm				
L/H Front Tyre	275/70 R22.5	BRIDGESTONE		6 mm				
R/H Rear Tyre	275/70 R22.5 (D)	BRIDGESTONE		6/6 mm				
L/H Rear Tyre	275/70 R22.5 (D)	BRIDGESTONE		6/6 mm				
4.								
THE VEHICLE SUS	THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.							
DAMAGES SEE DI	DAMAGES SEE DETAILS.							
5. July 19. 7	N. Golina	Ino.	YIP THE TAXABLE					
Accident Date	05/01/2018	Inspec	tion Date	26/01/2018				
Survey held at								
	60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705							
5a-	THE CALL WAS THE	mirk		15 - 72 74 or 48 5 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.								
	E TO YOUR INSTRUCTIONS, W	- / · · · · ·	110111011101110					
B)IN ACCORDANC	E TO YOUR INSTRUCTIONS, W	MINECONOMINACED IN A POST NO	to a bending the entirency management operated appropriate appropriate ACACOM					



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315





ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SG 5452J

Otty	Programme (Programme)	Carrier (1) (1)		
	REPLACEMENT OF PARTS			
1	LED REVERSE LIGHT 24	CRACKED	647.08	647.08
1	O/S LOWER ENGINE ACC	DEFORMED	3,443.25	3,443.25
1	SIDE SHEETMETAL PANEL	TO REPAIR	2,185.18	-
1	SIDE SHEETMETAL PANEL	TO REPAIR	1,763.50	-
1	SIDE SHEETMETAL PANEL	TO REPAIR	1,488.98	-
1	SIDE SHEETMETAL PANEL	TO REPAIR	558.35	-
1	SIDE SHEETMETAL PANEL	TO REPAIR	1,589.65	-
1	SIDE SHEETMETAL PANEL	TO REPAIR	2,185.18	-
1	SIDE SHEETMETAL PANEL	TO REPAIR	394.20	-
	LESS 10% DISCOUNT		_	-409.04
			14,255.37	3,681.29
	LABOUR			
	TO REPAIR RH PORTION.		2,650.00	2,120.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		1,800.00	1,360.00
			4,450.00	3,480.00
	GRAND TOTAL		18,705.37	7,161.29

RECOMMENDED COSTO PREPAIRE (CONTRAME)

Report Ref No. NS/INC18001674/Sqbe2

YEANG WAI KEEN

Automotive Assessor

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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