

Kalin

NS/INC18002188/K19bn2

## ASSIGNMENT

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

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

To inspect / Vehicle No: \_\_\_\_\_

at Workshop / Ins: \_\_\_\_\_

Insured: **GY 1953D**

Policy No: **5063 469899 - 04 22018 - 210119**

Claims No: **MT/0980815-002**

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: \_\_\_\_\_

ICAO Accident Report: \_\_\_\_\_ Consistent? Yes or No

QIA: PR Seen: \_\_\_\_\_ Consistent? Yes or No

Est. Repair: **3** days Res: Yes or No

Lump Sum: \_\_\_\_\_ S. Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT



**SHA 8343H** **31 May 2017**

Truck / M/Cat / M/Cycle / Bus / Van / Lorry / **6** Prime Mover

Truck / Trailer: \_\_\_\_\_

Make: **Toyota Prius** **1798**

Colour: **White** Ins: **0** / Std / NI / NA

Sp. Reading: **62153** T. Paid: **0** / Cred / Std / NI / NA

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

C No: **J70KBJ F4X 03557012**

Gen. Cond: Good / **6** / Poor / Burnt

Steering: Incl: **6** / Jammed / Leaked / Burnt / or

Brake: Incl: **6** / Jammed / Leaked / Burnt / or

Mod: Nil / S/Rim / STD / **6** / or

Tyre Size: **195/65R15**

**6** / DUN / EXNOVA / GY / FS / LIZA / MID / OHTSU / PIR / SUMI / TOYO / YOKO / or

Front: **7** mm **7** mm

R. Bal: **7** mm **7** mm

L. Bal: **7** mm **7** mm

D.O.A: **1/2/18** **2/2/18**

Survey held at: **COAS (16744)**

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

**Rear**

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

Date: Time: Action: Instruction

SHA 8343H - 08/FCL16022127/K19bn2

DOA: 161116

INC  
PIP

GY 1953D - X

7/2/18 Cont. PIP \$ 7013.88 / 3 Pys (Paid \$ 3352.47, 37%)

RECEIVED 08 FEB 2018

Date/Time File Pass: ☐ Prel. Report

**08/2** **Final** ☐ Final Report

Days Of Repair: **3**Resurvey No. of Trip: **1**

Survey Fee: \_\_\_\_\_

Add Fee: ☐Site Insp: ☐Inst. Insp: ☐Tech. Insp: ☐Admin. Insp: ☐Report Format: **7P**Lump Sum / I.B.B. **7093.88**

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/INC18002188/K1

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 05-02-2018  
189556

Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GY 1953D	Veh. Inspected	S
Policy No.	5063469899-04	Coverage (\$)	0
Claim No.		Excess (\$)	0
Assign From		Assign Date	0

## 2. Vehicle Particulars & Condition

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

## 3. Conditions of Tyres

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

## 4. Description of Damages

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## 5. General Information

Accident Date	01/02/2018	Inspection Date	
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 R
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# Survey Department Check List (Case Handler)

Reference No.: NS/INC 18002188/Klab  
Policy Type: OD (TP) TP RES / TL / EVA

SHA 83434

Case Handler

Typist

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

## (1) Office Assign Form

Y-Date	N-Date	Y-Date	N-Date
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			

- 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

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

## (1) Assignment Form

<input checked="" type="checkbox"/>			
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<input checked="" type="checkbox"/>			
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<input checked="" type="checkbox"/>			

- 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

<input checked="" type="checkbox"/>		
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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

<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		

## (4) System - (Views/Merimen)

- C Resurvey photo Uploaded

<input checked="" type="checkbox"/>		
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Check By: Chen 08/2/18  
Case Handler Date

eBaoTech

aim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[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.	Ins. C	Expiry Date
<input checked="" type="radio"/>	5063469899-04	CHU HOE HIN TRADING PTE LTD	197500497Z	GCV	Third Party, Fire & Theft	GY1953D	GY1	/2019

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/0981516-001	COMFORT TRANSPORTATION PTE LTD	SHC 8582Z	SKF 3224P	01/02/2018
2	MT/0981519-001	COMFORT TRANSPORTATION PTE LTD	SHB 6244T	SJX 2481L	2/2/2018
3	MT/0981075-003	COMFORT TRANSPORTATION PTE LTD	SHD 3883H	YP 975G	30/1/2018
4	MT/0980815-002	CITY CAB PTE LTD	SHA 8343H	GY 1953D	1/2/2018
5	MT/0981523-001	COMFORT TRANSPORTATION PTE LTD	SHA 4608X	SLM 2957R	2/2/2018
6	MT/0980875-002	CITY CAB PTE LTD	SHA 9261D	SJS 5966L	3/2/2018

## 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 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	02/02/2018 11:57
Date Of Accident	01/02/2018 17:30
Exact Location Of Accident	CTE TWDS CITY PARALLEL TO BRADDELL RD EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA8343H
<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

### 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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	

### Driver

Name of Driver	CHEAH YIAH KWEE
NRIC No	S1501031B
Date Of Birth	12/06/1961
Occupation	OUTDOOR
Date Of Driving Pass	18/03/1980
Driving Experience	37 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	466B #07-325 SEMBAWANG DRIVE
Postcode	752466
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	CHAIN COLLISION
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)	2
Passenger 1	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

SEE ATTACH.

#### 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	GY1953D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KAMALRUDIN BIN MAMAT
NRIC/Passport Number	S6917526J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT & REAR

No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number	GZ2666X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	



### SKETCH PLAN

GTE TUDAS CITY  
PARALLEL TO BRADBELL RD EXIT

A: SHA8343H  
B: 6Y1953D  
KAMAL RUBIN  
BIN MAMAT  
11C S6A17526J  
C: GZ2666X  
KIA LORRY

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

Driver's Signature  
(If driver is not the policyholder)

Reporting Centre Personnel's Signature  
Name:

Describe Circumstances of the Accident

On 01 Feb 2018 at about 17:30 hrs I was driving straight on Lane 4 along CTE leading towards the direction of the City.

Somewhere parallel to Braddell Rd exit the front car braked abruptly and stopped. I immediately braked and stopped as well. Fortunately I was able to brake in time.

Suddenly a few seconds later a lorry GY1953D came from behind collided onto the Rear Portion of my taxi. Shortly after I found that there is another lorry GZ2666X also involved in this chain collision accident.

01 lady passenger on board my taxi. No injury at the point of the accident.

Enclosed is a video footage and scene photos to support my claims

## Declaration

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

SINGAB PTE LTD  
REG. NO. 199502839G

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

02/02/18-  
Witnessed by Reporting  
Centre Personnel

Team: ARC Repair TP(CFSO)1

JOB CARD Sales Order: JC NO.305113028

Customer

CITYCAB PTE LTD  
7010070  
383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65551188

L (R)  
(P)

REGN NO

SHA8343H

MAKE

TOYOTA

MODEL

PRIUS HYBRID(G4)01

YR OF MANU

31.05.2017

CHASSIS CODE

JTDKB3FUX03557012

MILEAGE

FUEL

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

DATE/TIME IN

02.2018 18:05

TARGET DATE

COMPLETION DATE/TIME

SCOUNT CARD NO.

Accident Date: 01.02.2018  
NATURE: 3P 01.02.18

JOB DESCRIPTION

\* vehicle Towed In \*

S/NO

LABOR CODE

DESCRIPTION

PP

NTUC - GY 1953 D

Rear LKK - Kalvin

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHA8343H

Signature/Date

Name of Service Advisor

Date

ie of Service Advisor

To be kept by Security Guard

ie returned to Service Reception upon collection

## REPAIR ESTIMATE

VEHICLE NO : SHA 8343H

MAKE :

MODEL : TOYOTA PRIUS

2/2/2018 14:55

NTUC - P/P)

LKK - Kalvin

TS

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
REAR TRUNK LID COVER / <i>me</i>			\$ 922.50
REAR TRUNK LID LOCK X <i>me</i>			\$ 447.70
REAR TRUNK LID COVER TRIM BOARD X <i>me</i>			\$ 216.50
REAR TRUNK LID RUBBER X <i>me</i>			\$ 357.00
REAR TRUNK LID GLASS (BLACK COLOR) - <i>slid</i>			\$ 721.30
BOARD ASSY, BACK DOOR TRIM X <i>me</i>			\$ 246.90
GARNISH SUB-ASSY, BACK DOOR, OUTSIDE X <i>repair</i>			\$ 889.70
REAR TRUNK LID LOGO (PRIUS) - <i>me</i>			\$ 60.80
REAR TRUNK LID LOGO (HYBRID) - <i>me</i>			\$ 52.40
REAR TRUNK LID LOGO (TOYOTA STAR) - <i>me</i>			\$ 52.90
ROOF TOP MOULDING (CENTRE) X <i>me</i>			\$ 950.00
ROOF TOP GARNISH SUB, LH - <i>me</i>			\$ 75.00
ROOF TOP GARNISH SUB, RH - <i>me</i>			\$ 75.00
REAR BUMPER - <i>me</i>			\$ 458.60
REAR BUMPER RE-INFORCEMENT - <i>me</i>			\$ 318.80
REAR BUMPER UNDER COVER - <i>me</i>			\$ 552.60
REAR BUMPER SIDE RETAINER - <i>me</i>			\$ 112.70
REAR BUMPER SPONGE X <i>me</i>			\$ 143.40
REAR BUMPER TOWING COVER - <i>me</i>			\$ 82.70
REAR BUMPER CLIPS - <i>me</i>			\$ 22.00
RETAINER, REAR BUMPER, SIDE, RH X <i>me</i>			\$ 94.80
SEAL, REAR BUMPER SIDE, RH X <i>me</i>			\$ 148.40
TAIL LAMP ASSY (UPPER) X <i>me</i>			\$ 557.90
TAIL LAMP ASSY (LOWER) X <i>me</i>			\$ 548.40
SUB TOTAL			\$ 8,105.00
LESS 25%			\$ 2,026.25
DISCOUNTED TOTAL			\$ 6,078.75
REAR NO. PLATE WITH TRIM COVER - <i>me</i>			\$ 100.00
REAR TRUNK LID APPS STICKER - <i>me</i>			\$ 40.00
REAR TRUNK LID COMFORT & TEL NO. STICKER - <i>me</i>			\$ 60.00
REAR BUMPER REVERSE SENSOR - <i>me</i>			\$ 135.70
			\$ 335.70
Labour Charge			\$ 850.00
Panel Beating			\$ 600.00
Spray Painting Charge			\$ 50.00
Wiring Charge			\$ 50.00
Tuff Kote			\$ 120.00
Remove/Refix Reverse Sensor			\$ 120.00
TOTAL LABOUR			\$ 1,670.00
ESTIMATE TOTAL			\$ 8,084.45

LKK Advise to notify the Repairer of the following:

- To resurvey before repair or building
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Survey is on a "Without Prejudice" basis
- No illegal modifications are allowed
- Supplementary items must be resurveyed and is subject to the approval of the Company

Acknowledge by Signature:

Signature:

Date:

1 Calvin (LKK)  
 2/2/18 1520L  
 3 Days  
 P/P  
 Before Paint photo

NETT 90  
 NETT 36  
 NETT 54  
 NETT 122.13



## JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

### Job Requisition

1. Date: <u>1-2-18</u> Time Received: <u>6:05 PM</u>		3. Vehicle Type:	4. Type of Towing:
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis		<input type="checkbox"/> Private	<input type="checkbox"/> Normal Tow
Name of Customer: <u>Cheah Yiah Kwee</u>		<input checked="" type="checkbox"/> Taxi (CTPL/CCPL)	<input type="checkbox"/> King Dolly
Contact No.: <u>97340830</u>		<input type="checkbox"/> Fleet	<input checked="" type="checkbox"/> Flat Bed
Vehicle No.: <u>SHA 8342H</u>		<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>Maybank branch</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
	<input type="checkbox"/> Return Taxi

10. Odometer Reading: _____	11. Radio / CD Player
Fuel Level: <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E	<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 type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS	
Name of Driver: <u>K. Muthu</u>	
Vehicle No.: <u>7199185K</u>	
Time Dispatch: <u>6:05 PM</u>	
Time of Arrival: _____	
Time Completed: _____	# : Cracked X : Dented / : Scratched O : Missing <u>Signature of Customer</u>

### 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™.

<u>1-2-18</u>	<u>7:30 PM</u>	Signature of Customer
Date	Time	

### 14. WORKSHOP

Name of Attending Staff/Guard	Date & Time of Arrival	Signature of Attending Staff/Guard
-------------------------------	------------------------	------------------------------------

VEHICLE	:	<u>SHA8343H</u>	TYPE OF CLAIM	:	<u>TP</u>
MODEL	:	<u>TOYOTA PRIUS</u>	SURVEY BY	:	<u>LKK-KALVIN</u>
JOB NO	:	<u>305113028</u>	DATE	:	<u>03/02/18</u>

[illegible]

3562

-10% 4/42

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010070  
 ADDRESS : CITYCAB PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65551188

JOB NO : 305113028  
 REGN NO : SHA8343H  
 MILEAGE : 0000000000  
 MAKE : TOYOTA  
 MODEL : PRIUS HYBRID(G4)  
 DATE OF REGN : 31.05.2017  
 DATE/TIME IN : 01.02.2018 18:05  
 ACCIDENT DATE : 01.02.2018

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001	04-01-0302-2256-G	BOOTLID	1	922.50	25.00	691.87
0002	04-01-0302-2257-G	BOOTLID BLACK GLASS	1	721.30	25.00	540.97
0003	04-01-0302-2271-G	BOOTLID EMBLEM-PRIUS	1	60.80	25.00	45.60
0004	04-01-0302-2270-G	BOOTLID EMBLEM-HYBRID	1	52.40	25.00	39.30
0005	04-01-0302-2269-G	BOOTLID EMBLEM-TOYOTA STAR	1	52.90	25.00	39.67
0006	04-01-0302-0960-G	TOP ROOF CENTRE MOULDING	1	950.00	25.00	712.50
0007	04-01-0302-3841-G	TOP ROOF GARNISH RH	1	75.00	25.00	56.25
0008	04-01-0302-3941-G	TOP ROOF GARNISH LH	1	75.00	25.00	56.25
0009	04-01-0302-2282-G	REAR BUMPER	1	458.60	25.00	343.95
0010	04-01-0302-2288-G	REAR BUMPER REINFORCEMENT	1	318.80	25.00	239.10
0011	04-01-0302-2286-G	REAR BUMPER TOW COVER	1	82.70	25.00	62.02
0012	04-01-0302-2267-G	REAR BUMPER CLIPS	10	22.00	25.00	16.50
0013	04-01-0302-2258-G	REAR WINDSCREEN GLASS**	1	1,554.90	25.00	1,166.17



## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE

Date: 07.02.2018

Time: 10:41:45

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010070  
 ADDRESS : CITYCAB PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65551188

JOB NO : 305113028  
 REGN NO : SHA8343H  
 MILEAGE : 0000000000  
 MAKE : TOYOTA  
 MODEL : PRIUS HYBRID(C  
 DATE OF REGN : 31.05.2017  
 DATE/TIME IN : 01.02.2018 18:05  
 ACCIDENT DATE : 01.02.2018

JOB / PARTS DESCRIPTION		QTY IND UNIT-PRICE DISC% AMOUNT			
0014 28-01-0302-2014-A	BOOTLID APPS STICKER	1	40.00	10.00	36.00
0015 28-01-0302-2016-A	BOOTLID COMFORTDELGRO	1	30.00	10.00	27.00
0016 28-01-0302-0010-A	BOOTLID 65521111	1	30.00	10.00	27.00
0017 09-01-0302-2005-A	REVERSE SENSOR	1	135.70	10.00	122.13
0018 04-01-0302-2346-G	BOOTLID LOWER GARNISH**	1	889.70	25.00	667.27
0019 04-01-0302-3839-G	BOOTLID HINGE RH/LH**	2	356.20	25.00	267.15
0020 04-01-0302-2965-G	REAR BUMPER SIDE COVER RH	1	148.40	25.00	111.30
0021 04-01-0302-2287-G	REAR BUMPER UNDER COVER**	1	552.60	25.00	414.45
0022 05-01-0199-0032-A	WINDSCREEN AHESIVE-310ML**	2	46.00	10.00	41.40
0023 FNPS	NO PLATE(S)W/TRIM COVER	1 L	100.00	10.00	90.00

SUB-TOTAL : 5,813.85

JOB NATURE



COMPANY : THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010070

ADDRESS : CITYCAB PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65551188

JOB NO : 305113028

REGN NO : SHA8343H

MILEAGE : 0000000000

MAKE : TOYOTA

MODEL : PRIUS HYBRID(C

DATE OF REGN : 31.05.2017

DATE/TIME IN : 01.02.2018 18:05

ACCIDENT DATE : 01.02.2018

JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0000 L	PANEL BEATING			600.00		
0001 23-502	SPRAYPAINT ON AFFECTED AREA			540.00		
0002 20-00	TUFF COAT ON AFFECTED PARTS.			20.00		
0003 L	R/I REVERSE SENSOR			20.00		
0004 L	R/I REAR WINDSCREEN**			100.00		

SUB-TOTAL : 1,280.00

TOTAL : 7,093.85

MVA NAME &amp; SIGNATURE

DATE :

SURVEYOR NAME &amp; SIGNATURE

DATE :

AUTHORISED : YES / NO

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305113028  
Date : 07/02/18

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHA8343H

Date of Accident : 01-Feb-18

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

1. The repair job shall bill to: NTUC --- GY1953D
2. The finalized amount shall be:
 

(a) Spare Parts after List discount	\$5,813.88
(b) Labour Charges	\$1,280.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$7,093.88</b>
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: 20%	
<b>Final Lumpsum Repair cost</b>	

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 : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 7/2/18

### 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:



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/INC18002188/K1qbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 13-02-2018



Code: INC4

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

Insured Veh.	GY 1953D	Veh. Inspected	SHA 8343H
Policy No.	5063469899-04	Coverage (\$)	0.00
Claim No.	MT/0980815-002	Excess (\$)	0.00
Assign From		Assign Date	02/02/2018

### 2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FUX03557012	Colour	YELLOW
Odometer	62153	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	BRIDGESTONE	7 mm
L/H Front Tyre	195/65 R15	BRIDGESTONE	7 mm
R/H Rear Tyre	195/65 R15	BRIDGESTONE	7 mm
L/H Rear Tyre	195/65 R15	BRIDGESTONE	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	01/02/2018	Inspection Date	02/02/2018
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:	3 Working Days
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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 8343H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR TRUNK LID COVER	CRACKED	922.50	922.50
1	REAR TRUNK LID LOCK	SERVICEABLE	447.70	-
1	REAR TRUNK LID COVER TRIM BOARD	SERVICEABLE	216.50	-
1	REAR TRUNK LID RUBBER	SERVICEABLE	357.00	-
1	REAR TRUNK LID GLASS (BLACK COLOR)	SHATTERED	721.30	721.30
1	BOARD ASSY, BACK DOOR TRIM	SERVICEABLE	246.90	-
1	GARNISH SUB-ASSY, BACK DOOR, OUTSIDE	TO REPAIR	889.70	-
1	REAR TRUNK LID LOGO (PRIUS)	NECESSARY	60.80	60.80
1	REAR TRUNK LID LOGO (HYBRID)	NECESSARY	52.40	52.40
1	REAR TRUNK LID LOGO (TOYOTA STAR)	NECESSARY	52.90	52.90
1	ROOF TOP MOULDING (CENTRE)	MISSING	950.00	950.00
1	ROOF TOP GARNISH SUB, LH	MISSING	75.00	75.00
1	ROOF TOP GARNISH SUB, RH	CUT	75.00	75.00
1	REAR BUMPER	DEFORMED	458.60	458.60
1	REAR BUMPER RE-INFORCEMENT	BENT	318.80	318.80
1	REAR BUMPER UNDER COVER	CRACKED	552.60	552.60
1	REAR BUMPER SIDE RETAINER	SERVICEABLE	112.70	-
1	REAR BUMPER SPONGE	NOT NECESSARY	143.40	-
1	REAR BUMPER TOWING COVER	MISSING	82.70	82.70
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	RETAINER, REAR BUMPER SIDE, RH	SERVICEABLE	94.80	-
1	SEAL REAR BUMPER SIDE, RH	TO REPAIR	148.40	-
1	TAIL LAMP ASSY (UPPER)	SERVICEABLE	557.90	-
1	TAIL LAMP ASSY (LOWER)	SERVICEABLE	548.40	-
1	REAR WINDSCREEN GLASS	NECESSARY	1,554.90	1,554.90
1	BOOTLID LOWER GARNISH	CRACKED	889.70	889.70
2	BOOTLID HINGE RH/LH	BENT	356.20	356.20
1	REAR BUMPER SIDE COVER RH	CRACKED	148.40	148.40
	LESS 25% DISCOUNT		-2,764.30	-1,823.45
			8,292.90	5,470.35

Report Ref No. NS/INC18002188/K1qbn2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>NETT ITEMS</b>			
2	WINDSCREEN AHESIVE-310ML (N)	NECESSARY	46.00	46.00
1	REAR NO PLATE WITH TRIM COVER (N)	CRACKED	100.00	100.00
1	REAR TRUNK LID APPS STICKER (N)	NECESSARY	40.00	40.00
1	REAR TRUNK LID COMFORT & TEL NO STICKER (N)	NECESSARY	60.00	60.00
1	REAR BUMPER REVERSE SENSOR (N)	SHORTED	135.70	135.70
	LESS 10% DISCOUNT		-	-38.17
			381.70	343.53
	<b>LABOUR</b>			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		1,170.00	720.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		650.00	560.00
			1,820.00	1,280.00
	<b>GRAND TOTAL</b>		<b>10,494.60</b>	<b>7,093.88</b>

<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>			<b>7,093.88</b>
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Report Ref No. NS/INC18002188/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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