NS/ZNC18002189 / Kltbnz

Kalin



# **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

NTU	C INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC180021	89/K1tb
		D UNION HOUSESINGAPORE	Date:	05-02-2018 INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	SJQ 488T	Veh. II	nspected	SHA 339
	Policy No.	5097105386	Cover	age (\$)	0.00
	Claim No.		Exces	s (\$)	0.00
	Assign From		Assig	n Date	02/02/20
2.		Vehicle Parti	culars 8	& Condition	AND RECEIPT
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year	of Reg.	
	Chassis No.		Colou	r	
	Odometer	•	Steeri	ng	
	Brakes		Modif	ication	
	General				
3.		Condit	ions of	Tyres	
		Size	Make		Balanc
	R/H Front Tyre				mm
	L/H Front Tyre				mm
	R/H Rear Tyre				mm
	L/H Rear Tyre				mm
4.	100	Descript	ion of D	amages	
5.		Genera	al Inforn	nation	
	Accident Date	02/02/2018	Inspe	ction Date	02/02/2
	Survey held at	COMFORTDELGRO ENGINEE	1000000	Selection of the select	
		59 LOYANG DRIVE SINGAPORE 508969			
5a.	Serveral	F	Remarks		A BUY-
	A)THE INSPECTION B)IN ACCORDAN	ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, V	THOUT F	PREJUDICE" BASI NOT AUTHORISE	S. ED REPAIRS.



TP Claims against NTUC Income: Follow-Through Survey

Date: 05/02/2018

						The Accelerate	Fetimate	440
			All all the state of the	Nobirla No	Date of Accident	Time of Accident	racullar	
1		Mann	Claimant Vehicle No.	INCOME VEHICLE INC.			4	2000
o fair	proper Deference	Claimant (Owner / Taxi Corripativ)		2000		11.00	5 2,10	06.10
S/NO	S/NO INCOME NEIGHT	CAT : Jan	CHA 2201R	510 4881		00.11		1
		COMMEDIAT TRANSPORTATION PIE LID	SHA SSSTO		١	13.60	100	21 500
-	IMT/09808/0-003		200 744 CA 18285	CEA 18385	1/2/2018	13:30	0	1100011
		DIELTO	SHU /ITBIM	COCOT UIC				50000
c	1 AAT /0080609-002			20000		16:10	5 T,88	267.32
V	INI / DOODOO CO-	Car . see	CLIA 205AD	SGD 1293K		01101		
1	COO SECONDA		ILCOZ HUC			03.55	1 50	398 96
m	MT/0980625-002		VO. 2 4 4 0 V	DC 1771X		00:11	4	2000
,		DIFITO	SHC 14491	LCIVITA				
	1AAT /0090654.007	COMPORT INANSPORTATION LIE STO						

Claim received from LKK

MCD618016479 / ComfortDelGro Engineering Pte Ltd - Layang ENTRY DATE & TIME: 02/02/2018 14:27 SUBMITTED BY: Catherine Por Moy Juan

### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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 14:27

Date Of Accident

02/02/2018 11:00

Exact Location Of Accident

LOBBY DRIVEWAY IN FRONT BLK 19 JALAN MEMBINA

SINGAPORE

#### Country/State of Loss DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHA3391B

Insured/Policyholder

Name Of Registered Owner

COMFORT TRANSPORTATION PTE LTD

199303821R

Co Reg No Email Address

FLEETSAFETY@CDGTAXI.COM,SG

Mobile Phone No

Alternative Phone No

OFFICE-65508768

Vehicle Particulars

Manufacturer

HYUNDAI

Model

140

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

MCOM0015

Cover Note Number

Driver

NG CHONG HUAT Name of Driver

S0928080D NRIC No 23/06/1953 Date Of Birth OUTDOOR Occupation 21/01/1975

Date Of Driving Pass

43 YEARS AND 0 MONTHS

Driving Experience

MALE

Gender

Mobile Number

Fax Number

Contact Number

**EMail Address** 

NOEMAIL

Page 1 of 16

Address

813 #10-552 TAMPINES STREET 81

Postcode

520813

NO Was driver an employee of the Insured's Company

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

NO

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

3

Passenger 1

NAME:

. -

: MALE GENDER:

Passenger 2

NAME:

1 -

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

SJQ488T

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

ANG MON KNG

NRIC/Passport Number

S2037168D

Contact Number

Address

Postcode

Page 2 of 16

Insurance Company Name

Nature Of Damage

FRT & REAR

No. Of Passenger (Including Driver)

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLQ5558T

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

REAR

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

KETCH PLAN  TO THE	Salan BESJULIAN SLIGH	CD Diveway
HITCHTTE		The transfer and the same and t
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
	Aladus	
DECLARATION  I/We declare the foregoing pai  JMFORT TRANSPORT CO REG. NO. 1	rticulars are true in every respect.  RTATION PTE C. 99303821R	Med Toppa
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:

Page 4 of 16

#### Sketch Plan Pg. 2

#### SHA 3391 B - ACCIDENT STATEMENT

This morning (02/02/2018), I ferried an Indian couple from city to their destination at Blk 19, Jalan Membina.

When I arrived at the location, I drove them to the lobby of Blk 19 and came to a halt behind car B( SJQ 488J), a private car that stopped at the lobby driveway.

As seen in the video footage, while my passengers were in the midst of settling the fare payment with me, car B suddenly lurched forward to crash into a stationary car C( SLQ 5558T) in front. After this collision, car B moved backward at a very high speed and crashed into the front of my taxi in an unusual occurrence.

Both my passengers and myself were suffered from shocks but without any physical injury.

I took photos at the scene.

I also took down the particulars of the driver of car B.

The impact inflicted substantive damage to the front of my car.

I affirmed the above-statement is true and correct.

Driver name : Ng Chong Huat NRIC NO : S 0928080D

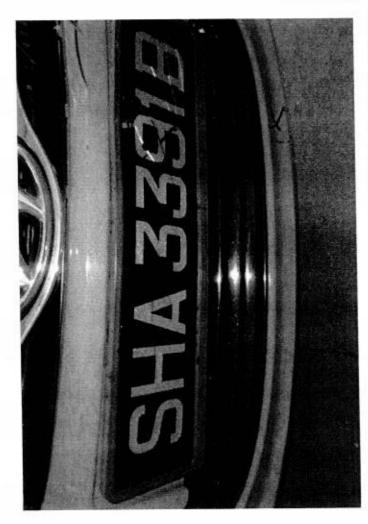
Date:

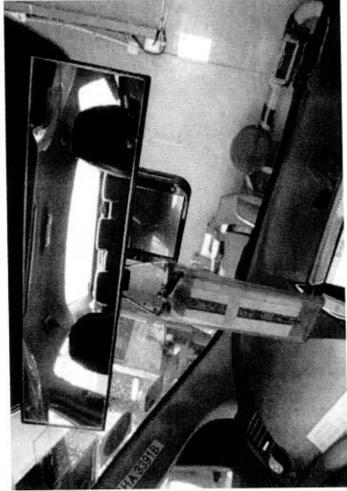
02/02/2018

Recorded by Alex Lim













member of, ComfortDelorg

Date/Time: 02.02.2018 14:52 Page: 1

am:	ARC	Repair	TP(	CLSO	)1
CA410 T		and the second	777777	A CONTRACTOR OF THE PARTY OF TH	F

JOB CARD Sales Order: JC NO.305113060

am: ARC Repair IF(CLSO/I	The boards of the	
OMER	REGN NO SHA3391B	MILEAGE
S COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL EF
OMER NO 383 SIN MING DRIVE ESS Singapore SINGAPORE 575717	MODEL I-40 02	02.2018 11:50
(R) 65508755 (O)	YR OF MANU 05. 2015	TARGET DATE
(P)	CHASSIS CODE KMHLB41UMFU069034	COMPLETION DATE/TIME:
DUNT CARD NO.		L.

JOB DESCRIPTION

ccident Date: 02.02.2018

ATURE: 3P 02.02.18

/NO

LABOR CODE

DESCRIPTION

CKED & PASSED OUT BY:			
SERVICE ADVISOR			CUSTOMER'S SIGNATURE
rledgement Slip		Exit Pass	
No.: SHA3391B	JU NTUC LKK	Vehicle No.: SHA339	91B
if Service Advisor	Signature/Date action	Name of Service Advisor To be kept by Security Guard	Date

### COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO: SHA 3391B

DATE 2/2/2018 15:22

NTUC

MAKE

MODEL : HYUNDAI i40

Ty

Qty	Parts Description/ Labour	Type	Unit Price	1	Amount	
	Radiator Grille / 6			\$	294.35	
	Radiator Grille H Emblem			\$	113.65	
	Front Bumper Cover			S	562.30	
	Front Bumper Sponge 2			S	142.20	l
	Front Bumper Reinforcement			S	526.10	l
	Front Bumper Centre Grille		1	\$	176.90	l
	Front Bumper Bracket Top (LH/RH)		\$ 22.40	S	44.80	l
	Front Bumper Retainer Mounting		s 9.20	s	18.40	l
	Front CH Herdling - va \$ 1388		20	410		١
	Front CH Med 1000 SUB TOTAL		1)	S	1,878.70	1
	LESS 20%			s	375.74	ı
	DISCOUNTED TOTAL			s	1,502.96	1
					71.	
					25.00	
	Front Number Plate			S	25.00	N
	Front No Plate Trim Cover			S	30.00	I
				\$	55.00	
	Labour Charge Panel Beating Spray Painting Charge			s s	200 350:00	
	Spray Laming Charge				-180	
	TOTAL LABOUR			S	550.00	+
	ESTIMATE TOTAL			s	2,107.96	1
	Kali (CK) 153. 4.				321234	
	Kalii (CKH  2/2/13 153. L.  2091  45  Afthe Report p LA	the Re To res To dis Parts Third No ille	uto Consultants hence no pairer of the following: uwey betoetative stray paintingly damaged part(s) during respect to confirmationally survey is on a "Without Progal modification (s) is allowed ementary temis," must be mean to final approval from them.	urvey n epidice	a basis	

# COMFORTDELGRO ENGINEERING

VEHICLE NO.	: SHA3391B	_ TYPE OF CASE	:	NTUC	
JOBCARD NO.	305113060	SURVEY BY	:	LKK-KALVIN	
ACC.DATE	02/02/18	DATE		90	

DESCRIPTION	QTY	ESTIMATE	REMARKS
HEADALAMP ASSY LH	1	\$1,388.00	CPA
CHECK ITEMS			
FRT BUMPER SPONGE	1		
FRT BUMPER REINFORCEMENT	1		
			***
	++	10-95-105-54	
- <del> </del>	+		
	$\perp$		
	-		
		- //-	
	++		 
			v
	TOTAL:	\$1,388.00	JUMANI

# COMFORTDELGRO

Our	JOD RE	1140		05113060				ENGINEERING
Date	)		:(	05/02/18			Com 59 L	fortDelGro Engineering Pte Ltd oyang Drive Singapore 50896
INA	LIZAT	ION F	ORM				Fax:	6546 8156
o	: _			LKK			Fax:	
Attn				KALVIN			5.75333	
/ehi	cle Re	g No.	: SHA	3391B		Da	te of Accident :	02/02/18
he	survey	and es	stimates o	f the repairs of th	e above-mer	ntione	ed vehicle are a	
0			job shall b		NTUC			SJQ 489T
			ed amount	7			###	330 4891
	(a)			ter List discount				
	(b)		ur Charge			##	4	
				By-Part Repair	Cost	***	**	
				,	0031			1
	(c.)	Total	for Lump	air (if applicable) sum repair cost a m Repair cost	after Less:	20%	L	\$2,400.00
	Wes	hall tre	eat the ab	ove amount as	2 Correct and		orking days firmed if there	is no reply from you
	We s	hall tro		ove amount as	No.	Conf	firmed if there	is no reply from you
	We s	hall tro n 7 wo	eat the ab orking day	ove amount as	No.	Conf W fin	firmed if there e confirm the e alized amount	
	We s within	hall tro n 7 wo k you f	eat the ab orking day	ove amount as	No.	Conf W fin	firmed if there	stimates and
	We s within Thank	hall tro n 7 wo k you f	eat the ab orking day or your as	ove amount as	No.	Conf W fin	firmed if there e confirm the e alized amount gnature:	
	We s within Thank Signa Name	hall tro n 7 wo k you f	eat the ab orking day or your as	sistance.	No.	Conf W fin Sig	firmed if there e confirm the e alized amount gnature:	stimates and
	We s within Thank Signa Name Tel	hall tron 7 work you f	eat the ab orking day or your as JUMANI	sistance.	No.	Conf W fin Sig	firmed if there e confirm the e alized amount gnature:	stimates and
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97	We s within Thank Signa Name Tel Fax	hall tron 7 work you f	JUMANI	sistance. 6214 8315 65468156	Correct and	Conf W fin Sig Na Da	e confirm the eralized amount gnature: ime :	Kalus
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Re Lo	We s within Thank Signa Name Tel Fax Afficial	hall tron 7 work you f k you f ture : : : : : : : : : : : : : : : : : : :	JUMANI	sistance. 6214 8315 65468156	Docum Attact Yes or	Conf W fin Sig Na Da	e confirm the eralized amount gnature: ime :	Kalus
Re Lo Su	We s within Thank Signa Name Tel Fax ental Rass of In	hall tron 7 work you f  ture : : : : : : : : : : : : : : : : : : :	JUMANI Day Paid	sistance. 6214 8315 65468156	Docum Attact Yes or	Conf W fin Sig Na Da	e confirm the eralized amount gnature: ime :	Kalus
Re Lo. Su LT.	We s within Thank Signa Name Tel Fax ental Rass of In	hall tron 7 work you f  ture : : : : : : : : : : : : : : : : : : :	JUMANI Day Paid	sistance.  6214 8315 65468156	Docum Attact Yes or	Conf W fin Sig Na Da	e confirm the eralized amount gnature: ime :	Kalus



## **National Assessment Centre Services**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





Thatcham escribe

#05-01 189556 1.	Insured Veh. Policy No. Claim No. Assign From Make & Model Engine No.	Policy Particulars SJQ 488T 5097105386 MT/0980870-003  Vehicle Parti	Veh. In Cover Exces Assig	nspected age (\$)	SHA 3391B 0.00
2.	Policy No. Claim No. Assign From Make & Model Engine No.	SJQ 488T 5097105386 MT/0980870-003 Vehicle Parti	:- THIR Veh. II Cover Exces Assig	D PARTY CLAIM nspected age (\$)	SHA 3391B
2.	Policy No. Claim No. Assign From Make & Model Engine No.	SJQ 488T 5097105386 MT/0980870-003 Vehicle Parti	Veh. In Cover Exces Assig	nspected age (\$)	SHA 3391B
2. I	Policy No. Claim No. Assign From Make & Model Engine No.	MT/0980870-003  Vehicle Parti	Cover Exces Assig	age (\$)	0.00
2.	Claim No. Assign From Make & Model Engine No.	Vehicle Parti	Exces Assig		
2.	Assign From  Make & Model  Engine No.				0.00
2.	Make & Model Engine No.			n Date	02/02/2018
1	Engine No.		culars &	& Condition	
1	Engine No.	HYUNDAI 140	c.c		1685
(		HIDDEN	Year o	of Reg.	2015
-	Chassis No.	KMHLB41UMFU069034	Colou	r	BLUE
_	Odometer 423715 Steering		IN ORDER		
1	Brakes	IN ORDER	Modif	ication	STANDARD ALLOY RIM
-	General	FAIR			
3.		Condit	ions of	Tyres	
		Size	Make		Balance
	R/H Front Tyre	205/60 R16	HANK	оок	7 mm
1	L/H Front Tyre	205/60 R16	HANK	оок	7 mm
	R/H Rear Tyre	205/60 R16	HANK	оок	7 mm
	L/H Rear Tyre	205/60 R16	HANK	оок	7 mm
4.		Descripti			NO. OF THE RESERVE
	THE VEHICLE SUS DAMAGES SEE D	STAINED DAMAGES AT THE FR	ONT PO	RTION.	
5.			al Inform	nation	
	Accident Date	02/02/2018	Inspe	ction Date	02/02/2018
	Survey held at	COMFORTDELGRO ENGINEE	RING PT	TE LTD	
		59 LOYANG DRIVE SINGAPORE 508969			
5a.			Remarks		
	A)THE INSPECTION B)IN ACCORDANG	ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, V	THOUT I	PREJUDICE" BASIS NOT AUTHORISE	S. ED REPAIRS.
5b.		Estimate	Days o	of Repair 2 Working Days	



#### **National Assessment Centre Services**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315

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



Page No.:1 of 1

#### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 3391B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			3800-0
1	RADIATOR GRILLE	CRACKED	294.35	294.35
1	RADIATOR GRILLE H EMBLEM	CRACKED	113.65	113.65
1	FRONT BUMPER COVER	DEFORMED	562.30	562.30
1	FRONT BUMPER SPONGE	TORN	142.20	142.20
1	FRONT BUMPER REINFORCEMENT	BENT	526.10	526.10
1	FRONT BUMPER CENTRE GRILLE	CRACKED	176.90	176.90
2	FRONT BUMPER BRACKET TOP (LH/RH) @\$22.40	SERVICEABLE	44.80	25
2	FRONT BUMPER RETAINER MOUNTING @\$9.20	SERVICEABLE	18.40	12
	FRONT LH HEADLAMP	CRACKED	1,388.00	1,388.00
	LESS 20% DISCOUNT		-653.34	-640.70
			2,613.36	2,562.80
	SPECIAL NETT ITEMS			
1	FRONT NUMBER PLATE (SN)	CRACKED	25.00	25.00
1	FRONT NO PLATE TRIM COVER (SN)	CRACKED	30.00	30.00
			55.00	55.00
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		350.00	200.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		200.00	180.00
			550.00	380.00
	GRAND TOTAL		3,218.36	2,997.80
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,400.00

Report Ref No. NS/INC18002189/K1tbn2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.