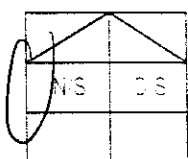


N9/2NC 18002453 / MHB2

From _____ Date _____
 Estimated Cost _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV _____
 To inspect vehicle No _____
 at / on / at this _____ **00844** _____
 of _____
 Insured **FBA 7842L**
 Policy No **5093638446** **300817-290818**
 Claims No **MT/0921697-002**
 Sum Insured _____ Excess _____
 Clients Record _____
 Make of Ven _____



(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

Ball or Market value _____
 IDAO Accident Report _____ Consistent? : Yes or No
 GIA / PP / Seen _____ Consistent? : Yes or No
 Est. Repairs _____ days Res. Yes or No
 LHM Sum _____ % 3 Year Yes or No
 OA / REV / REP / 24 HRS _____
 Date _____ Person Contacted _____ Vehicle IN / OUT _____

SHAA890X Reg **12 2011**
 Type **M Car** / Cycle / Bus / Van / Long / **7** / Prime Mover
 Truck / Trailer _____
 Make **HYN** **1991**
 Colour **Blue** Insured / Std / N / NA
 Se Reading **484249** T-Ratio Insured / Std / N / NA
 Eng No _____
 O No **KMAHET4NMB820543**
 Gen Cond **Good** / Fair / Poor / Burnt
 Steering **In order** / Jammed / Leaked / Burnt or
 Brake **In order** / Jammed / Leaked / Burnt or
 Mod **N/A** / S Rim / STD A Rim or
 Tyre Size **R** **D15/60/R/6**
R
 BS / DUN / EXNOVA / GY / FS / LIZA / MICH / OHTSU / PIR / SUMI
 TOYO / YOKO or **MAXXIS**
 Front _____ Rear _____
 R Ba **7** R Ba **7**
 L Ba **7** L Ba **7**
 D.O.A **05/02/2011** D.O **6/2/2018**
 Survey read at _____
 Des of Damages **Frt / Rear / O/S / N/S / U/C / Rooftop or**
N/S Body
 The U/C / Chassis frame / Body Structure affected due to collision

Date / Time _____ Action / Instruction _____
SHAA 890X - 008/09/21/300818/290818
FBA 7842L - X
09/21/2018

lump sum \$2300 (Red: 3523.52 / 60%)

One Time Fee Pass ☐ Prelim. Report
5B Typist ☒ Final Report
 Date Time Fee Return _____

Days Of Repair **4**
 Resurvey No. of Trip **1**

Add Fee: ☐ Site Visit \$
☐ Mileage \$
☐ Test \$
☐ Other \$

Survey Fee _____
 Total amount _____
 Date _____
 Signature _____
 Stamp _____
160
35
195

Record Number **TR**
 Lump Sum **2300**



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/INC18002453/M1tb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 07-02-2018	
			Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	FBA 7842L	Veh. Inspected	SHA 4890X	
Policy No.	5093638446	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	06/02/2018	
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	05/02/2018	Inspection Date	06/02/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
5a. Remarks				

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="05/02/2018 13:33"/>
Vehicle No. (For Motor)	<input type="text" value="FBA7842L"/>	<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"/>	5093638446	SURADI BIN KASSIM	S1659576D	GMC	Third Party, Fire & Theft	FBA7842L	FBA7842L	30/08/2017	29/08/2018

TP Claims against NTUC Income: Follow-Through Survey

Date : 28/02/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/0983576-002	COMFORT TRANSPORTATION PTE LTD	SHD 4024P	SKN 8240S	15/2/2018	23:10	\$ 3,560.32
2	MT/0984020-001	SMART BUSES LTD	SMB 204P	SKE 98588	29/11/2017	19:45	\$ 5,738.98
3	Not OI	COMFORT TRANSPORTATION PTE LTD	SHA 2884C	SJA 1679L	14/2/2017	9:25	\$ 2,700.23
4	MT/0983120-002	CITY CAB PTE LTD	SHC 924Z	XD 7245J	15/2/2018	9:20	\$ 4,406.92
5	MT/0981887-002	COMFORT TRANSPORTATION PTE LTD	SHD 4934M	SKU 4830D	10/2/2018	15:05	\$ 1,642.00
6	MT/0983380-002	COMFORT TRANSPORTATION PTE LTD	SHB 4346X	SKR 659A	23/2/2018	11:00	\$ 2,317.40
7	MT/0983670-002	CITY CAB PTE LTD	SHC 890L	FV 8454J	22/2/2018	11:00	\$ 8,805.04
8	MT/0982907-002	CITY CAB PTE LTD	SHB 3991P	GBF7872Z	20/2/2018	12:55	\$ 6,426.40
9	MT/0981697-002	COMFORT TRANSPORTATION PTE LTD	SHA 4890X	FBA 7842L	5/2/2018	13:50	\$ 5,888.52
10	MT/0982522-002	CITY CAB PTE LTD	SHD 8540P	SJP 794P	14/2/2018	16:40	\$ 3,913.44
11	MT/0983112-002	COMFORT TRANSPORTATION PTE LTD	SHD 4270U	SKX 1997K	20/2/2018	17:00	\$ 2,256.96
12	MT/0983124-002	COMFORT TRANSPORTATION PTE LTD	SH 7441Y	SGV 7511Y	21/2/2018	0:15	\$ 1,896.56
13	MT/0984051-001	COMFORT TRANSPORTATION PTE LTD	SHC 8670C	FBH 3132S	21/2/2018	6:45	\$ 5,361.42
14	MT/0982643-002	COMFORT TRANSPORTATION PTE LTD	SHD 3491E	SJE 952H	16/2/2018	14:55	\$ 2,711.58
15	MT/0982261-002	COMFORT TRANSPORTATION PTE LTD	SHD 3001L	GBF 5312L	13/2/2018	14:25	\$ 3,200.56
16	MT/0982776-002	COMFORT TRANSPORTATION PTE LTD	SHA 6401L	SHD 1426H	15/2/2018	17:30	\$ 7,021.12
17	MT/0984057-001	CITYCAB PTE LTD	SHB 3600T	SFA 4774Y	15/2/2017	7:55	\$ 4,027.60

COMFORT
ENGINEERING

A member of COMFORTDELGRO

Date/Time: 06.02.2018 09:17 Page : 1

Team: IN ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO.305114086

STOMER	REGN NO. SHA4890X	MILEAGE
COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
7010045	MODEL: SONATA	E.....1/2.....F
STOMER NO. 383 SIN MING DRIVE	YR OF MANU. 30.12.2011	DATE/TIME IN 05.02.2018 16:50
DRESS Singapore SINGAPORE 575717	CHASSIS CODE KMHT41VMB820543	TARGET DATE
65508755		COMPLETION DATE/TIME:
(R) (P) (O)		
SCOUNT CARD NO.		

JOB DESCRIPTION

Accident Date: 05.02.2018
NATURE: 3P 05.02.2018

LABOR CODE	DESCRIPTION
NTUC - taxi Left Front damaged	
LKK/	

IECKED & PASSED OUT BY:

SERVICE ADVISOR	CUSTOMER'S SIGNATURE
owledgement Slip	Exit Pass
Vehicle No.: SHA4890X	Vehicle No.: SHA4890X
Larry Ng	
e of Service Advisor	Name of Service Advisor
Signature/Date	Date
returned to Service Reception upon collection	To be kept by Security Guard

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	06/02/2018 07:54
Date Of Accident	05/02/2018 13:50
Exact Location Of Accident	TELOK PAKU RD TWDS LOYANG AVE NEAR LAMP POST 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA4890X
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA

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-18088936MFSH
Cover Note Number	

Driver

Name of Driver	ABD LATIF B DAUD
NRIC No	S1253034Z
Date Of Birth	21/01/1957
Occupation	OUTDOOR
Date Of Driving Pass	18/01/1982
Driving Experience	36 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NU.DEA@LIVE.COM

Address	566 02-466 HOUGANG STREET 51
Postcode	530566
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	SIDE SWIPE
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	PASIR RIS NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE POLICE REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBA7842L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	RHT FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	RIDER
Approximate Age	
Injuries Sustain	BACK,RHT LEG
Injured person in which vehicle?	FBA7842L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to P/Report T/20180205/2118

DECLARATION

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

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

Policyholder's Signature
Date & Time:

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

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



**SINGAPORE
POLICE FORCE**



T/20180205/2118

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20180205/2118

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/02/2018 16:21	Vide Report No.:	Station Diary No.: 93
--	------------------	--------------------------

Informant's Particulars

Name of Informant: ABDUL LATIF BIN DAUD			Address: APT BLK 566 HOUGANG STREET 51 #02-466 SINGAPORE 530566		
ID Type / ID No.: NRIC NO / S1253034Z			Contact No.: Home/Office: Mobile: 84552069		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 61	Date of Birth: 21/01/1957	Type of Informant: Driver		
Race: Malay			Language: English	Institution / School Name:	
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/02/2018 13:50	Type of Location: Bend
Location: Along Road 1 TELOK PAKU ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHA4890X	Car	HYUNDAI	SONATA	Blue	Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180205/2118

2 of 3

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20180205/2118

CONTINUATION OF REPORT

Driver			
Name	ABDUL LATIF BIN DAUD		ID No. S1253034Z
Related Vehicle	SHA4890X (Car)		Contact No. 84552069
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 05/02/2018 at about 1350hrs, while I was driving along Telok Paku Road I encountered a collision with a motorbike.

I had fetched a passenger from Cargo Agent Building C and was proceeding to Marina Square. While I was travelling along the bend of Telok Paku Road on the right lane when I heard a loud sound. I then stopped my vehicle and noticed that a motorcyclist had collided on the left of my vehicle. I then called the Police and the Ambulance. The motorcyclist was subsequently conveyed to the hospital.

I am unsure how the motorcyclist had collided into my vehicle. I was also unable to get his particulars as he was injured. Moreover, due to the collision, my vehicle suffered some damages on the left body; such as dents and scratches.



**SINGAPORE
POLICE FORCE**



T/20180205/2118

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3

Report No. T/20180205/2118

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report:

G /

Sgt 1 S NANDHINI DEVI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SSI TAN CHIN YONG

Contact No.: 65476178



**SINGAPORE
POLICE FORCE**

Signature Of Informant:

Date/Time:

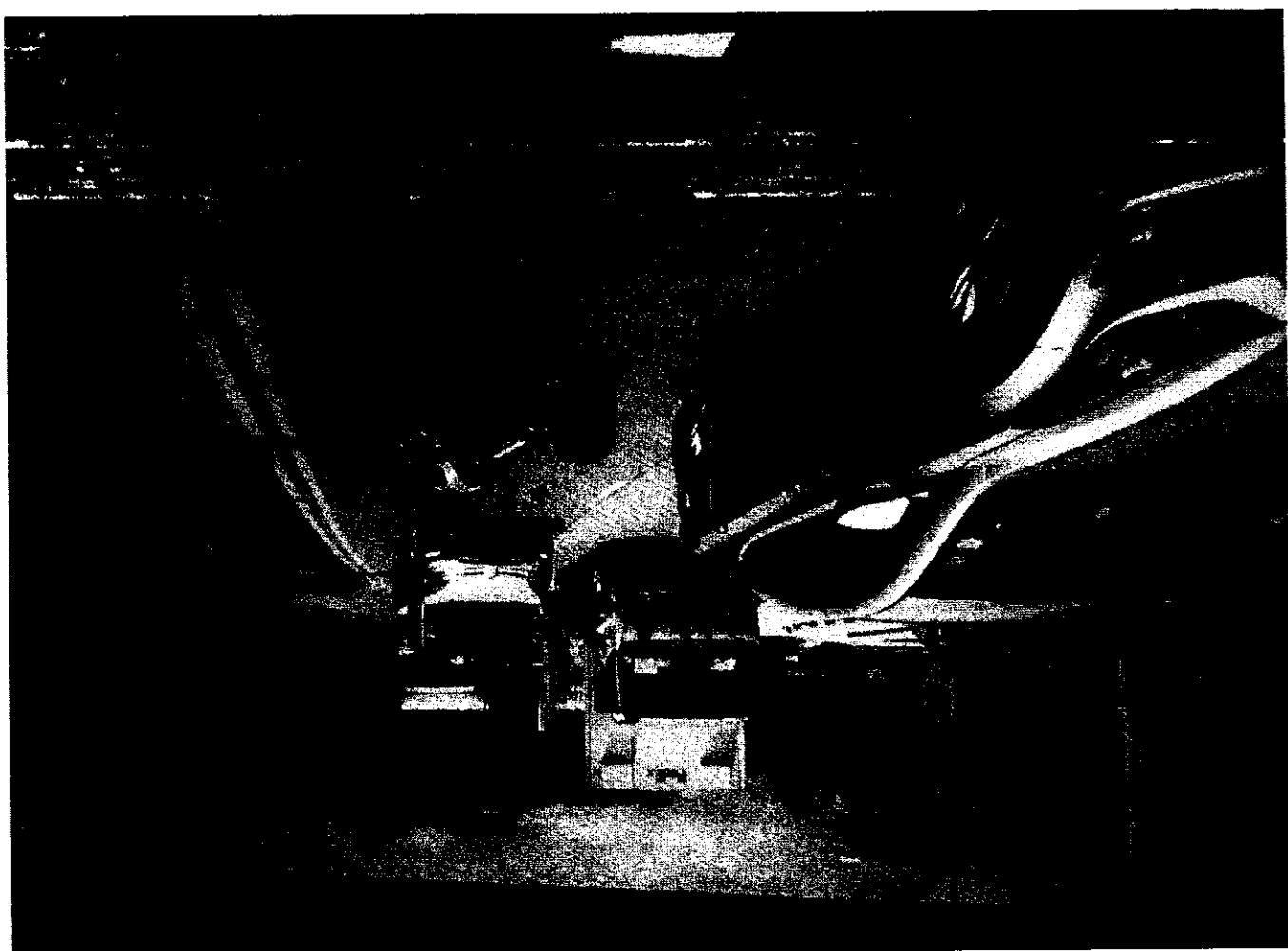
05/02/2018 16:21

Classification Of Case:

Authentication Stamp

NP168





COMFORTDELGRO ENGINEERING

Our Job Ref No . 305114086
Date : 09/02/18

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

FINALIZATION FORM

To : LKK
Attn : MA CF

Fax :

Vehicle Reg No. : SHA4890X Date of Accident: 05/02/18

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

1. The repair job shall bill to: NTUC FBA7842L
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:
 - Final Lumpsum Repair cost \$2,300.00
3. Estimated normal period for repairs: 4 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 : Larry Ng
Name : Larry Ng
Tel : 6214 8316
Fax : 6546 8156

Signature :
Name :
Date : 14/02/2018

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:

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 4890X

DATE 6/2/2018 10:18

MAKE :

MODEL : HYUNDAI SONATA

DUA 05 02 18

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>x 2</i>			\$ 538.80
	Front Bumper Bracket (LH) <i>x 2</i>			\$ 20.10
	Headlamp (LH) <i>over</i>			\$ 797.90
	Front Fender (LH) <i>dt</i>			\$ 593.00
	Front Fender Shield (LH) <i>dis</i>			\$ 86.00
	Front Fender Mudflap (LH) <i>dis</i>			\$ 15.50
	Rocker Panel Outer Garnish <i>x 2</i>			\$ 463.40
	Rear Door (LH) <i>x 2</i>			\$ 1,294.70
	Front Wheel Hub Cap (LH) <i>dis</i>			\$ 145.00
	SUB TOTAL			\$ 3,954.40
	LESS 20%			\$ 790.88
	DISCOUNTED TOTAL			\$ 3,163.52
	Front Door Comfort Logo (LH)		<i>new</i>	\$ 75.00
	Rear Door Tel No. Sticker (LH)		<i>new</i>	\$ 10.00
				\$ 85.00
	Labour Charge			
	Panel Beating			\$ 750.00
	Spray Painting Charge			\$ 1,100.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 100.00
	Transfer of Door			\$ 120.00
	Remove/Refix Undercarriage (FRT)			\$ 400.00
	FRT Wheel Alignment			\$ 120.00
	TOTAL LABOUR			\$ 2,640.00
	ESTIMATE TOTAL			\$ 5,888.52
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.				

Larry Ng

 Nett
 Nett

 600
 720
 30
 40
 X
 X
 80

REPAIR ESTIMATE*

VEHICLE NO : SHA 4890X

DATE 6/2/2018 10:18

MAKE :

MODEL : HYUNDAI SONATA

DUA 05-02-18

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>X 2</i>			\$ 538.80
	Front Bumper Bracket (LH) <i>X 2</i>			\$ 20.10
	Headlamp (LH) <i>✓ 1</i>			\$ 797.90
	Front Fender (LH) <i>✓ 1</i>			\$ 593.00
	Front Fender Shield (LH) <i>✓ 1</i>			\$ 86.00
	Front Fender Mudflap (LH) <i>✓ 1</i>			\$ 15.50
	Rocker Panel Outer Garnish <i>X 2</i>			\$ 463.40
	Rear Door (LH) <i>X 1</i>			\$ 1,294.70
	Front Wheel Hub Cap (LH) <i>✓ 1</i>			\$ 145.00
	SUB TOTAL			\$ 3,954.40
	LESS 20%			\$ 790.88
	DISCOUNTED TOTAL			\$ 3,163.52
	Front Door Comfort Logo (LH)		<i>Net</i>	\$ 75.00 Nett
	Rear Door Tel No. Sticker (LH)		<i>Net</i>	\$ 10.00 Nett
				\$ 85.00
	Labour Charge			
	Panel Beating			\$ 750.00
	Spray Painting Charge			\$ 1,100.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 100.00
	Transfer of Door			\$ 120.00
	Remove/Refix Undercarriage (FRT)			\$ 400.00
	FRT Wheel Alignment			\$ 120.00
				\$ 2,640.00
	ESTIMATE TOTAL			\$ 5,888.52
	<p>LKK Auto Consultants henceforth the Repairer of the following:</p> <ul style="list-style-type: none"> To resurvey before/after spray painting To display damaged part(s) during resurvey Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" basis No illegal modification(s) is allowed Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company <p>Acknowledged by Repairer Signature: _____ Date: _____</p>			

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.

**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

Thatcham *escribe*

NTUC INCOME INSURANCE CO-OPERATIVE LTD		Ref:	NS/INC18002453/M1tbe2
73 BRAS BASAH ROAD		Date:	08-03-2018
#05-01 NTUC TRADE UNION HOUSESINGAPORE			
189556			
		Code:	INC4

**1. Policy Particulars - THIRD PARTY CLAIM**

Insured Veh.	FBA 7842L	Veh. Inspected	SHA 4890X
Policy No.	5093638446	Coverage (\$)	0.00
Claim No.	MT/0981697-002	Excess (\$)	0.00
Assign From		Assign Date	06/02/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA820543	Colour	BLUE
Odometer	484349	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	MAXXIS	7 mm
L/H Front Tyre	215/60 R16	MAXXIS	7 mm
R/H Rear Tyre	215/60 R16	MAXXIS	7 mm
L/H Rear Tyre	215/60 R16	MAXXIS	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	05/02/2018	Inspection Date	06/02/2018
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.
--

5b. Estimate Day & Result

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 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 4890X

Qty	Description of Parts	Condition	Estimated Repair Cost (\$)	Adjusted Cost (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER COVER	TO REPAIR	538.80	-
1	FRONT BUMPER BRACKET (LH)	SERVICEABLE	20.10	-
1	HEADLAMP (LH)	CUT	797.90	797.90
1	FRONT FENDER (LH)	DENTED	593.00	593.00
1	FRONT FENDER SHIELD (LH)	DISTORTED	86.00	86.00
1	FRONT FENDER MUDFLAP (LH)	DISTORTED	15.50	15.50
1	ROCKER PANEL OUTER GARNISH	SERVICEABLE	463.40	-
1	REAR DOOR (LH)	TO REPAIR	1,294.70	-
1	FRONT WHEEL HUB CAP (LH)	DISTORTED	145.00	145.00
	LESS 20% DISCOUNT		-790.88	-327.48
			3,163.52	1,309.92
SPECIAL NETT ITEMS				
1	FRONT DOOR COMFORT LOGO (LH) (SN)	NECESSARY	75.00	75.00
1	REAR DOOR TEL NO. STICKER (LH) (SN)	NECESSARY	10.00	10.00
			85.00	85.00
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		1,440.00	710.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		1,200.00	760.00
			2,640.00	1,470.00
GRAND TOTAL			5,888.52	2,864.92

RECOMMENDED COST OF BODY AND PAINT REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)	2,300.00
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Report Ref No. NS/INC18002453/M1tbe2

MA CHIN FOOK

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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