

Kalvin

NS/INC 18002622 / Kltbnz

ASSIGNMENT

SH 64 91J Page 14 Apr 31

Page: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / CD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop: _____
 of: _____
 Insured: **SVV 7934A**
 Policy No: _____
 Claims No: **MT/0931400-002**
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Van: _____

Vehicle: **SH 64 91J**
 Type: M/Car / M/Cycle / Bus / Van / Lorry / T/Truck / Prime Mover
 Truck / Trailer of: _____
 Make: **Hyundai Santa Fe** 1991
 Colour: **Blue** A/C: ☒ Ins: ☒ Std: NI / NA
 Sp. Reading: **286317** T-Pacer: Ins: ☒ Std: NI / NA
 Eng No: _____
 O No: **1CM HET41VMBA80727**
 Gen. Cond: Good / ☒ Poor / Burnt
 Steering: In order / ☒ Jammed / Leaked / Burnt / or
 Brakes: In order / ☒ Jammed / Leaked / Burnt / or
 Mod: Nil / S/Rim / STD / Rim / or
 Tyre Size: F: **215/60R16**
 R: _____

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

N/S	O/S

 Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent?: Yes or No
 GLA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lump Sum: _____ % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / RIR / SUMI /
 TOYO / YOKO or **Wellfa**

Front	Rear
R.Bal. 7 mm	R.Bal. 7 mm
L.Bal. 7 mm	L.Bal. 7 mm
D.O.A. 6/2/8	D.O.A. 7/2/8

 Survey held at **COGE (by me)**
 Des. of Damages: Fnt / 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	DOA	Inc
SH 64 91J - 004 / AXA / 6009821 / H12b592		250516	Inc
SVV 7934A - X			42
13/2/8	Credited 45% 6050 / 5 days (cred: 7548.68)		

RECEIVED 13 FEB 2010

Date/Time File Pass to: **13/2 Typist**
☐ : Prel. Report
☒ : Final Report
 Date/Time File Return to: _____
 Report Format: **TP**
 Lump Sum / I.B.I: **6050**
 Days Of Repair: **5**
 Resurvey No. of Trip: **1**
 Add Fee: ☐ Site Insp: \$
☐ Interf: \$
☐ Tech. ins: \$
☐ Assess: \$
 Survey Fee: **160**
 Transport: _____
 Photo: **35**
 Other: _____
 Total: **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/INC18002622/K1tb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 08-02-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJV 7934A	Veh. Inspected	SH 6491J
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	07/02/2018

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	06/02/2018	Inspection Date	07/02/2018
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.
--

2/7/2018

Insurance Particulars Enquiry By Agents Detail

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJV7934A	06 Feb 2018 / 22:40:00	Successful	N12	NTUC INCOME INS CO-OP LTD

[Previous](#) [OK](#)

SH6491J

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	Estimate	Tentative repair cost
1	MT/0981823-002	COMFORT TRANSPORTATION PTE LTD	SHC 1218Y	SLH 6315T	08/02/2018	\$ 1,570.56	\$ 1,240.56
2	MT/0981400-002	COMFORT TRANSPORTATION PTE LTD	SH 6491J	SIV 7934A	06/02/2018	\$ 13,598.68	\$ 6,050.00
3	MT/0981548-002	COMFORT TRANSPORTATION PTE LTD	SHA 5720Y	XD 7294S	07/02/2018	\$ 3,831.28	\$ 2,450.00
4	MT/0982165-001	COMFORT TRANSPORTATION PTE LTD	SHA 3116E	SJD 825Y	06/02/2018	\$ 2,744.72	\$ 600.00
5	MT/0982166-001	COMFORT TRANSPORTATION PTE LTD	SHC 3093B	SJE 5741S	06/02/2018	\$ 1,491.81	\$ 250.00
6	MT/0982171-001	SMRT TAXIS PTE LTD	SHF 222A	SIR 8859Z	24/01/2018	\$ 1,136.00	\$ 460.00
7	MT/0980814-002	COMFORT TRANSPORTATION PTE LTD	SHD 3596L	FW 9183D	02/02/2018	\$ 3,693.63	\$ 2,670.18
8	MT/0981591-002	COMFORT TRANSPORTATION PTE LTD	SH 6753D	SGE 2404X	08/02/2018	\$ 1,797.40	\$ 1,250.00
9	MT/0981398-002	COMFORT TRANSPORTATION PTE LTD	SHC 2157H	SLR 6449M	07/02/2018	\$ 6,534.58	\$ 3,150.00

Claim received from LKK Auto

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	07/02/2018 10:06
Date Of Accident	06/02/2018 22:40
Exact Location Of Accident	CTE TWDS SLE BEFORE ANG MO KIO AVE 1 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH6491J
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

Driver

Name of Driver	TAN SIEW KIAT
NRIC No	S0184918B
Date Of Birth	25/04/1948
Occupation	OUTDOOR
Date Of Driving Pass	07/08/1967
Driving Experience	50 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 459 ANG MO KIO AVENUE 10 #18-1596
Postcode	560459
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

PLS REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJV7934A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN WEISIONG
NRIC/Passport Number	S9123922A
Contact Number	98551288
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the Information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

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

Lim Ee Soon
CSO

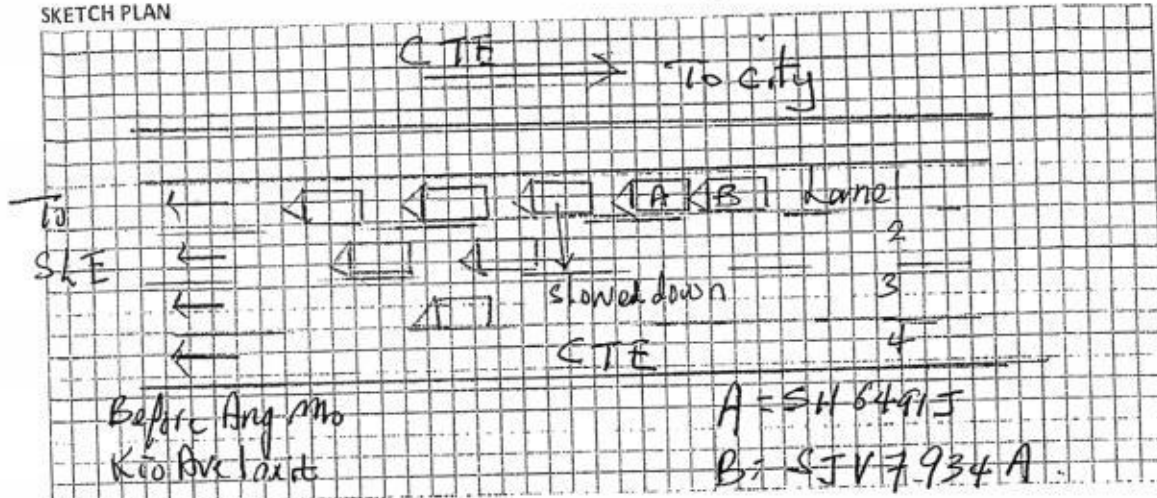
Policyholder's Signature
Date & Time:

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

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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As attached

DECLARATION

I/We declare the foregoing particulars are true in every respect.
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Lim Ee Soon
CSO

Policyholder's Signature
Date & Time:

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

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

ATUC
LKK

Team: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO 305114666

CUSTOMER	REGN NO: SH 6491J	MILEAGE
NAME: COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL E.....1/2.....F
CUSTOMER NO: 7010045	MODEL: SONATA	DATE/TIME IN 06.02.2018 23:40
ADDRESS: 383 SIN MING DRIVE	YR OF MANU: 14.04.2011	TARGET DATE
Singapore SINGAPORE 575717	CHASSIS CODE: KMHE141VMB807231	COMPLETION DATE/TIME:
65508755 (O)		
L (R)		
(P)		
SCOUNT CARD NO.		

JOB DESCRIPTION

Accident Date: 06.02.2018
NATURE: 3P 06.02.18

S/NO LABOR CODE DESCRIPTION

veh. Towed In.

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Acknowledgement Slip		Exit Pass	
Vehicle No.: SH 6491J	LIMITS	Vehicle No.: SH 6491J	
Signature/Date		Name of Service Advisor	Date
To be returned to Service Reception upon collection		To be kept by Security Guard	

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SH 6491J

DATE 7/2/2018

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid — <i>Det</i>			\$ 1,349.50
	Boot Lid Rubber X <i>su</i>			\$ 110.90
	Boot Lid Lock Upper X <i>su</i>			\$ 132.10
	Boot Lid Lock Lower X <i>su</i>			\$ 30.30
	Boot Lid Key Lock X <i>su</i>			\$ 78.20
	Boot Lid Sonata Plate — <i>su</i>			\$ 43.60
	Boot Lid Hyundai Plate — <i>su</i>			\$ 24.20
	Boot Lid 'H' Emblem — <i>su</i>			\$ 26.10
	Boot Lid CRDI Plate — <i>su</i>			\$ 22.70
	Boot Lid Lamp (LH/RH) X <i>su</i>	\$	230.20	\$ 460.40
	Boot Lid Trimboard X <i>su</i>			\$ 165.40
	Boot Lid Trimboard Clips (10pcs) X <i>su</i>			\$ 10.00
	Rear Bumper — <i>Det</i>			\$ 578.40
	Rear Bumper Reinforcement — <i>su</i>			\$ 483.30
	Rear Bumper Clip — <i>su</i>			\$ 22.00
	Rear Bumper Bracket — <i>su</i>	\$	49.00	\$ 98.00
	Rear Bumper Sponge — <i>su</i>			\$ 137.40
	Rear Bumper Under Cover — <i>su</i>			\$ 185.80
	Rear Bumper Protector (LH/RH) X <i>su</i>	\$	38.00	\$ 76.00
	Tail Lamp (LH/RH) — <i>su</i>	\$	344.00	\$ 688.00
	Tail Lamp Quarter Panel (LH/RH) X <i>su</i>	\$	93.80	\$ 187.60
	Rear Panel — <i>Det</i>			\$ 391.80
	Rear Panel Garnish — <i>su</i>			\$ 95.80
	Spare Tyre Holder X <i>su</i>			\$ 27.60
	Tail Lamp Panel Top (RH) X <i>su</i>			\$ 217.40
	Spare Tyre Panel X <i>su</i>			\$ 863.00
	Spare Tyre Panel Cushion X <i>su</i>			\$ 200.30
	Rear Towing Hook X <i>su</i>			\$ 135.30
	Member Assy- Rear Floor Centre X <i>su</i>			\$ 163.60
	Panel Assy-Rear Floor Side (LH/RH) X <i>su</i>	\$	88.55	\$ 177.10
	Rear Floor Chassis Member (RH) X <i>su</i>			\$ 756.80
	Exhaust Pipe Insulator X <i>su</i>			\$ 56.10
	Exhaust Silencer X <i>su</i>			\$ 723.00
	Exhaust Pipe Hanger X <i>su</i>			\$ 56.10
	Rear Fender (RH) — <i>Det</i>			\$ 1,935.90
	Rear Fender Inner Lining (RH) X <i>su</i>			\$ 74.10
	Rear Tray Lugg Side (RH) X <i>su</i>			\$ 37.40
	Rear Fender Trim Board (RH) X <i>su</i>			\$ 180.90
	Rear Windscreen Moulding — <i>su</i>			\$ 60.00
	Fire Extinguisher Holder X <i>su</i>			\$ 35.00
	SUB TOTAL			\$ 11,097.10
	LESS 20%			\$ 2,219.42
	DISCOUNTED TOTAL			\$ 8,877.68

NTUC-45 (LKK-Kalvin) B2/2

SH 6491J

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Boot Lid Comfort Logo & Tel No. Sticker <i>all</i>			\$ 30.00	Nett
	Rear No. Plate <i>one</i>			\$ 25.00	Nett
	Rear Bumper Advertisement Logo <i>all</i>			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH) <i>all</i>		\$ 100.00	\$ 200.00	Nett
	Rear Windscreen Sealant <i>all</i>			\$ 46.00	Nett
				\$ 351.00	
	Labour Charge				
	Panel Beating			\$ 2,000.00 ¹⁰⁸⁰	
	Spray Painting Charge			\$ 1,400.00 ¹⁰⁸⁰	
	Wiring Charge			\$ 50.00 ²⁰	
	Tuff Kote			\$ 100.00 ⁵⁰	
	Rear Chassis Alignment Charge			\$ 400.00 ²⁹⁹	
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00 ⁵⁰	
	Remove/Refix Rear Windscreen Glass			\$ 120.00 ¹⁸⁰	
	Remove/Refix Exhaust Pipe			\$ 150.00 ²⁹⁹	
	TOTAL LABOUR			\$ 4,370.00	
	ESTIMATE TOTAL			\$ 13,598.68	
<p><i>* veh. towed In *</i></p> <p><i>Kalvin LKK</i></p> <p><i>7/2/18 1500hr</i></p> <p><i>5 Pys.</i></p> <p><i>4/</i></p> <p><i>After Repair</i></p>					
<div> <p>LKK Auto Consultants hence notify 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</p> <p>Signature:</p> <p>Date:</p> </div>					
<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.</p>					

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition 1. Date: <u>6/2/2018</u> Time Received: <u>1340</u> 2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer: <u>MR Tan</u> Contact No: <u>98362168</u> Vehicle No: <u>5H64913</u> Make / Model / Colour: <u>Sonata / Blue</u> Email: _____		3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input type="checkbox"/> Normal Tow <input checked="" type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up
7. Location: <u>633 Amk Ave 6</u>		5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	6. Parts Replaced/Remarks: _____ _____ _____
3. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____		8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi <u>Accident</u>	
10. Odometer Reading: _____ 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		11. Radio / CD Player <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"/> STD <input checked="" type="checkbox"/> TZ <input type="checkbox"/> IRS <input type="checkbox"/> OTHERS Name of Driver: <u>LIEW</u> Vehicle No: <u>4P6TJ5C</u> Time Dispatch: <u>1340</u> Time of Arrival: <u>1355</u> Time Completed: <u>0030</u>		 #: Cracked X: Dented : Scratched O: Missing Signature of Customer: _____	

Cash Invoice Details (if applicable)

13. Cash Invoice No. _____

Customer Acknowledgement

- 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.
- I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
- Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

6/2/2018

Date

1355

Time

[Signature]

Signature of Customer

14. WORKSHOP

Name of Attending Staff/Guard

Date & Time of Arrival

Signature of Attending Staff/Guard

CUSTOMER'S COPY

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305114666

Date : 12/02/18

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SH 6491J

Date of Accident : 06-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 --- SJV7934A

2. The finalized amount shall be:

(a) Spare Parts after List discount

(b) Labour Charges

Total for Part-By-Part Repair Cost

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20% \$6,050.00

Final Lumpsum Repair cost \$6,050.00

3. Estimated normal period for repairs: 5 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 : 13/2/18

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:



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/INC18002622/K1tbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 14-02-2018



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJV 7934A	Veh. Inspected	SH 6491J
Policy No.		Coverage (\$)	0.00
Claim No.	MT/0981400-002	Excess (\$)	0.00
Assign From		Assign Date	07/02/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA807231	Colour	BLUE
Odometer	286317	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	WEST LAKE	7 mm
L/H Front Tyre	215/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	215/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	215/60 R16	WEST LAKE	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	06/02/2018	Inspection Date	07/02/2018
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 Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	5 Working Days
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**National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315

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



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 6491J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BOOT LID	DENTED	1,349.50	1,349.50
1	BOOT LID RUBBER	SERVICEABLE	110.90	-
1	BOOT LID LOCK UPPER	SERVICEABLE	132.10	-
1	BOOT LID LOCK LOWER	SERVICEABLE	30.30	-
1	BOOT LID KEY LOCK	SERVICEABLE	78.20	-
1	BOOT LID SONATA PLATE	NECESSARY	43.60	43.60
1	BOOT LID HYUNDAI PLATE	NECESSARY	24.20	24.20
1	BOOT LID "H" EMBLEM	NECESSARY	26.10	26.10
1	BOOT LID CRDI PLATE	NECESSARY	22.70	22.70
2	BOOT LID LAMP (LH/RH) @\$230.20	SERVICEABLE	460.40	-
1	BOOT LID TRIMBOARD	SERVICEABLE	165.40	-
10	BOOT LID TRIMBOARD CLIPS	NOT NECESSARY	10.00	-
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	CRACKED	483.30	483.30
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @\$49.00	CRACKED	98.00	98.00
1	REAR BUMPER SPONGE	TORN	137.40	137.40
1	REAR BUMPER UNDER COVER	CRACKED	185.80	185.80
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00	SERVICEABLE	76.00	-
2	TAIL LAMP (LH/RH) @\$344.00	CRACKED	688.00	688.00
2	TAIL LAMP QUARTER PANEL (LH/RH) @\$93.80	TO REPAIR	187.60	-
1	REAR PANEL	DENTED	391.80	391.80
1	REAR PANEL GARNISH	CRACKED	95.80	95.80
1	SPARE TYRE HOLDER	SERVICEABLE	27.60	-
1	TAIL LAMP PANEL TOP (RH)	TO REPAIR	217.40	-
1	SPARE TYRE PANEL	TO REPAIR	863.00	-
1	SPARE TYRE PANEL CUSHION	SERVICEABLE	200.30	-
1	REAR TOWING HOOK	SERVICEABLE	135.30	-
1	MEMBER ASSY-REAR FLOOR CENTRE	TO REPAIR	163.60	-
2	PANEL ASSY-REAR FLOOR SIDE (LH/RH) @\$88.55	TO REPAIR	177.10	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR FLOOR CHASSIS MEMBER (RH)	TO REPAIR	756.80	-
1	EXHAUST PIPE INSULATOR	SERVICEABLE	56.10	-
1	EXHAUST SILENCER	SERVICEABLE	723.00	-
1	EXHAUST PIPE HANGER	SERVICEABLE	56.10	-
1	REAR FENDER (RH)	DENTED	1,935.90	1,935.90
1	REAR FENDER INNER LINING (RH)	SERVICEABLE	74.10	-
1	REAR TRAY LUGG SIDE (RH)	SERVICEABLE	37.40	-
1	REAR FENDER TRIM BOARD (RH)	SERVICEABLE	180.90	-
1	REAR WINDSCREEN MOULDING	NECESSARY	60.00	60.00
1	FIRE EXTINGUISHER HOLDER	SERVICEABLE	35.00	-
	LESS 20% DISCOUNT		-2,219.42	-1,228.50
			8,877.68	4,914.00
	SPECIAL NETT ITEMS			
1	BOOT LID COMFORT LOGO & TEL NO STICKER (SN)	NECESSARY	30.00	30.00
1	REAR NO PLATE (SN)	CRACKED	25.00	25.00
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	46.00	46.00
			351.00	351.00
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		2,870.00	1,170.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		1,500.00	1,130.00
	-		-	-
	-		-	-
	-		-	-
			4,370.00	2,300.00
	GRAND TOTAL		13,598.68	7,565.00
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			6,050.00

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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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