

(08/11/13)

Surveyor: Kalvin

REF:

NS/INC(18002872)/K14602

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

To Inspected Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: SJW 37217Policy No. 5090059390 170417 - 180318Claims No. 11/0981951-02

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SHD46464 Yr Regn: 6 Jun 2013

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hyundai Santa Fe C.C. 1.9Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 547621 T/Radio: Insured / Std / NI / NA

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

C/No: 1CMHET41VADA834651Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size: F: 215/60R16

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or W44Front 2 mm Rear 2 mmR/Bal. 2 mmL/Bal. 2 mmD.O.A. 12/2/18 D.O.I. 12/2/18Survey held at COLE (6 years)

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
	SHD 46464 - NS/FC(16019204)/K14602
	SJW 37217 - X
13/2/18	Continue & 45 + 2400 / 2 hrs. (Paid \$ 8445.34, 78%)

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 21) 2/2/18 Insured☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

2) \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:

\$ + RS, SI

Photos

Others

TOTAL

Report Format: 7PLump Sum / I.B.I. (\$) 2400

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/INC18002872/K1qb			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 13-02-2018	
Code: INC4			
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SJW 3721T	Veh. Inspected	SHD 4646U
Policy No.	5090059390	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	12/02/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	12/02/2018	Inspection Date	12/02/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

# Survey Department Check List (Case Handler)

Reference No.: NS/NCI 8002872/K196  
Policy Type: OD / TP / TP RES / TL / EVA

SHD 46464

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
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		Y-Date	N-Date	Y-Date	N-Date
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	✓			
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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				

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

C	Resurvey photo Uploaded	✓			
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Check By: Calvin 27/2/18  
Case Handler Date

TP Claims against NTUC Income: Follow-Through Survey

Date : 09/02/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/0981755-002	CITY CAB PTE LTD	SHA 8200L	XD 8727D	9/2/2018	10:45	\$ 3,200.60
2	MT/0982396-001	COMFORT TRANSPORTATION PTE LTD	SHD 3647Z	SGS 8593U	10/2/2018	14:00	\$ 3,295.25
3	MT/0981948-002	COMFORT TRANSPORTATION PTE LTD	SH 6220A	SIF 3837H	12/2/2018	11:05	\$ 2,411.58
4	MT/0981751-002	COMFORT TRANSPORTATION PTE LTD	SHC 3347U	SIW 4835S	9/2/2018	14:35	\$ 2,139.60
5	MT/0982377-002	COMFORT TRANSPORTATION PTE LTD	SHC 3681D	SLJ 8137S	10/2/2018	19:45	\$ 1,550.48
6	MT/0982406-001	COMFORT TRANSPORTATION PTE LTD	SHC 8886Y	SGZ 2197H	10/2/2018	15:15	\$ 4,760.32
7	MT/0982117-002	COMFORT TRANSPORTATION PTE LTD	SHD 6796G	SLP 9383J	9/2/2018	21:35	\$ 1,310.47
8	MT/0981974-002	COMFORT TRANSPORTATION PTE LTD	SHC 3496Y	FBI 7434J	9/2/2018	11:45	\$ 3,453.26
9	MT/0981747-002	COMFORT TRANSPORTATION PTE LTD	SHB 6696Y	SLC 4221U	9/2/2018	9:05	\$ 2,437.18
10	MT/0981951-002	COMFORT TRANSPORTATION PTE LTD	SHD 4646U	SIW 3721T	12/2/2018	8:30	\$ 10,845.34

eBaoTech

General Claim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)

## Policy Query

Policy No.  Date of Accident

Vehicle No. (For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5090059390	MUTHIAH KANDIAH	S0226904Z	GPC	drivo CLASSIC	SJW3721T	SJW3721T	17/04/2017	18/03/2018

## 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	12/02/2018 11:47
Date Of Accident	12/02/2018 08:30
Exact Location Of Accident	PIE (CHANGI)BF EUNOS EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4646U
<b>Insured/Policyholder</b>	
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	GOH ENG LEONG
NRIC No	S1445023H
Date Of Birth	31/08/1960
Occupation	OUTDOOR
Date Of Driving Pass	18/09/1979
Driving Experience	38 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	JULIETLIM@HOTMAIL.SG

Address 459 12-686 JURONG WEST STREET 41  
 Postcode 640459  
 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) 4

Passenger 1 NAME: : -  
 GENDER: : MALE  
 Passenger 2 NAME: : -  
 GENDER: : MALE  
 Passenger 3 NAME: : -  
 GENDER: : MALE

#### 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 SJW3721T  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 Name of Driver MUTHIAH KANDIAH  
 NRIC/Passport Number S0226904Z

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

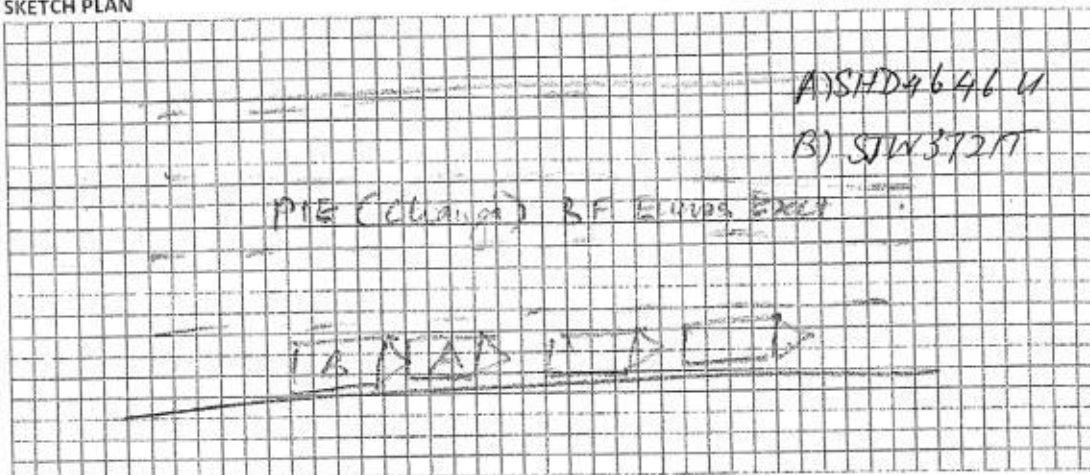
FRT

No. Of Passenger (Including Driver)



# Sketch Plan Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/2/18 at about 0830hrs while I Vch A stopped my vehicle gradually because vehicles in front stopped. Vch B collided on the rear of my stationary vehicle.

## DECLARATION

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

COMFORT TRANSPORTATION LTD  
CO REG. NO. 1893178-118

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:

*[Signature]* 12/2/18  
SR Moortin,  
CSO

**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:

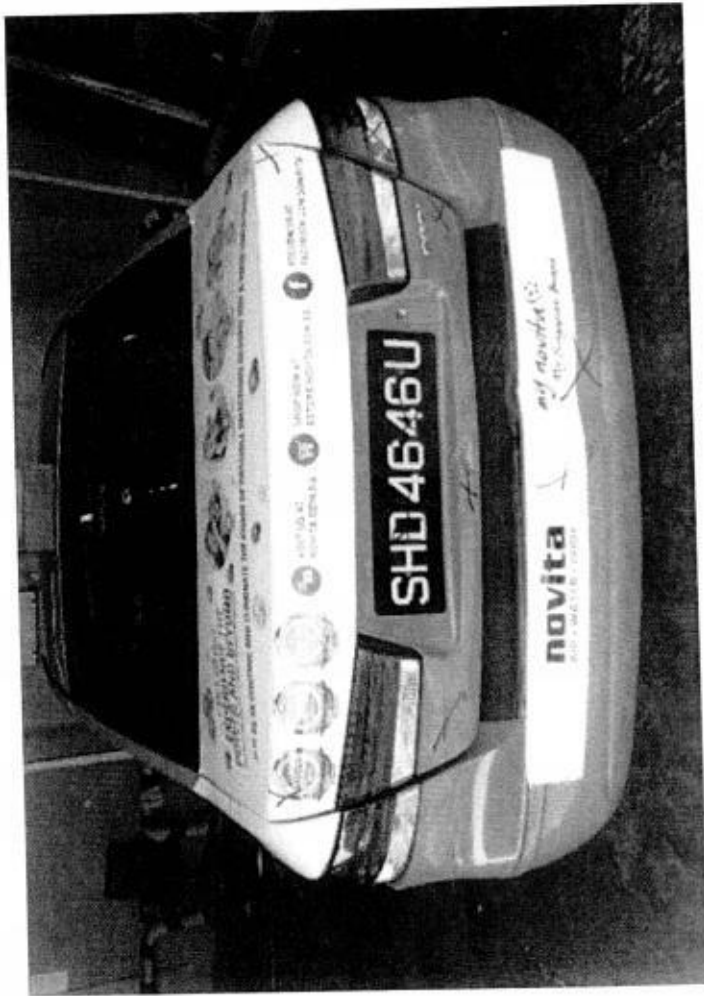
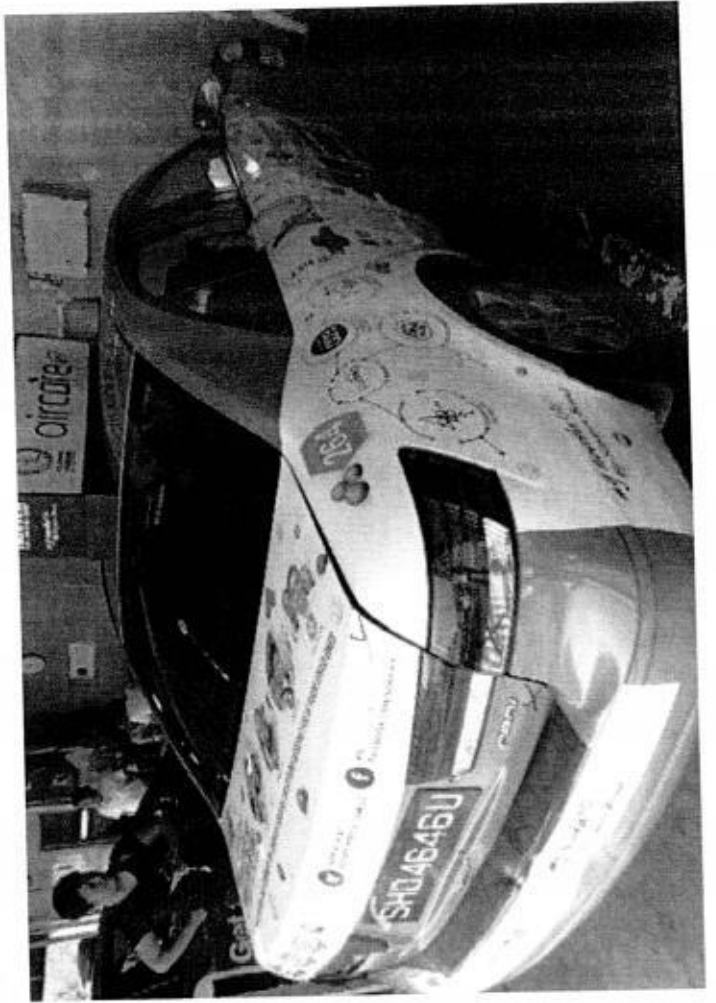
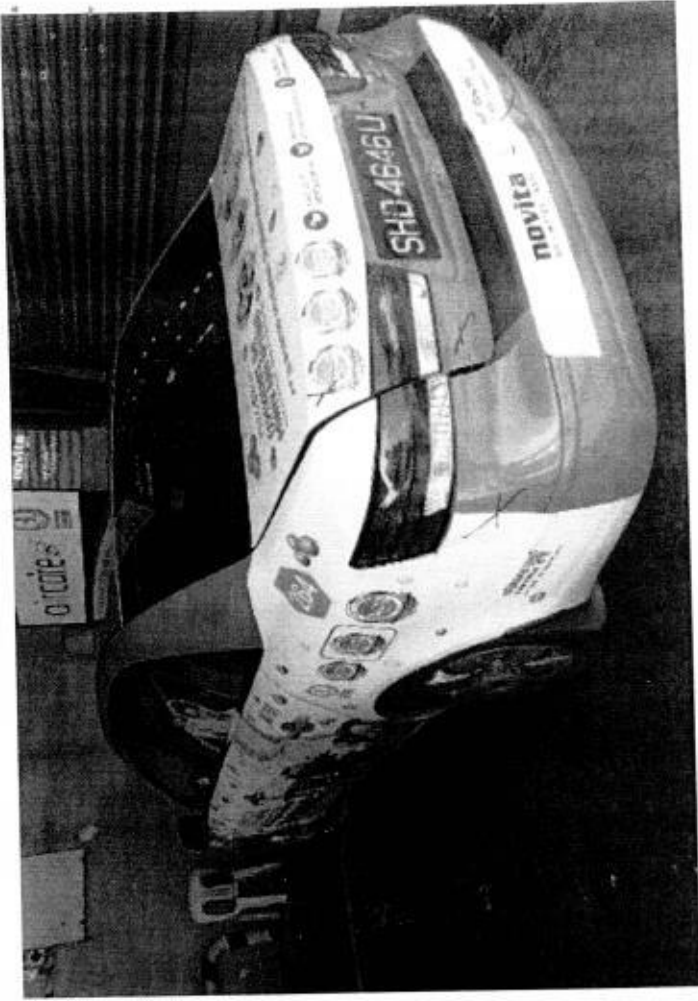
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

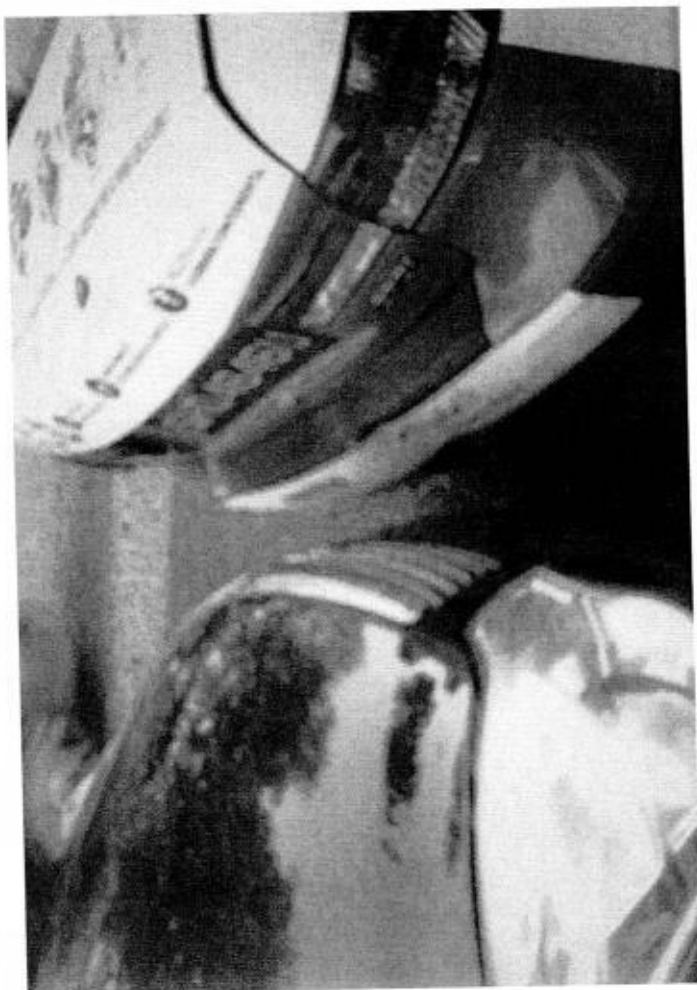
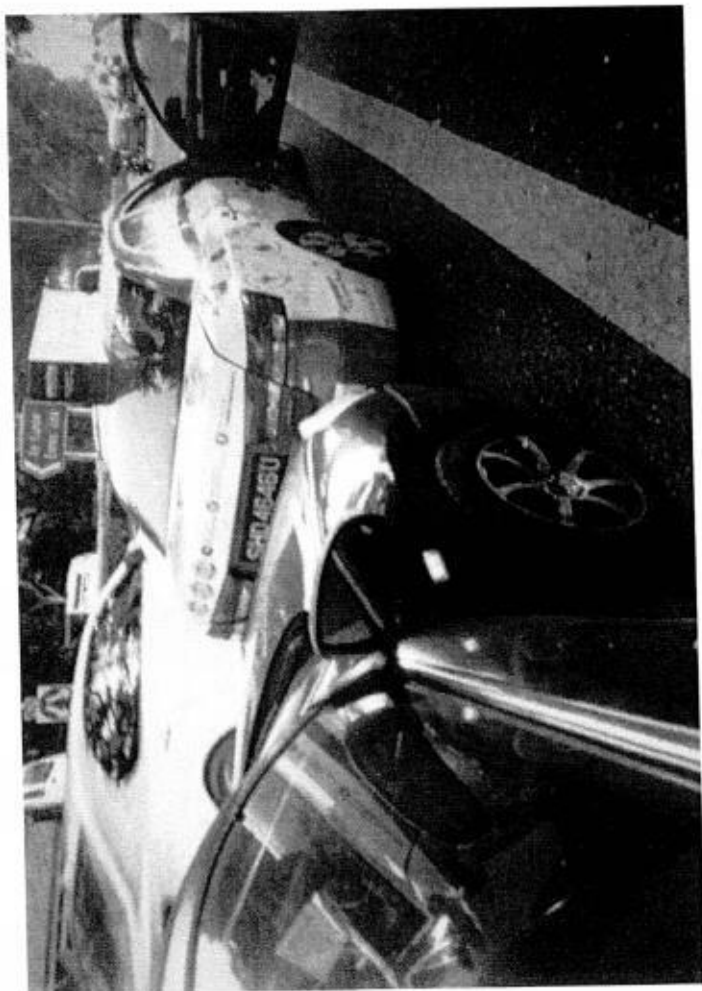
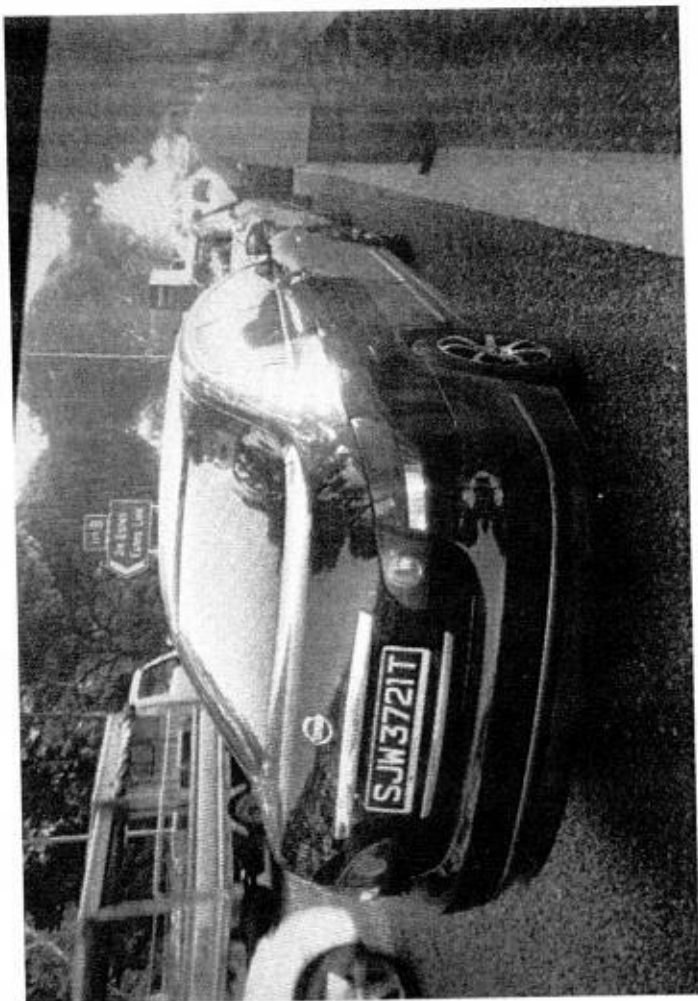
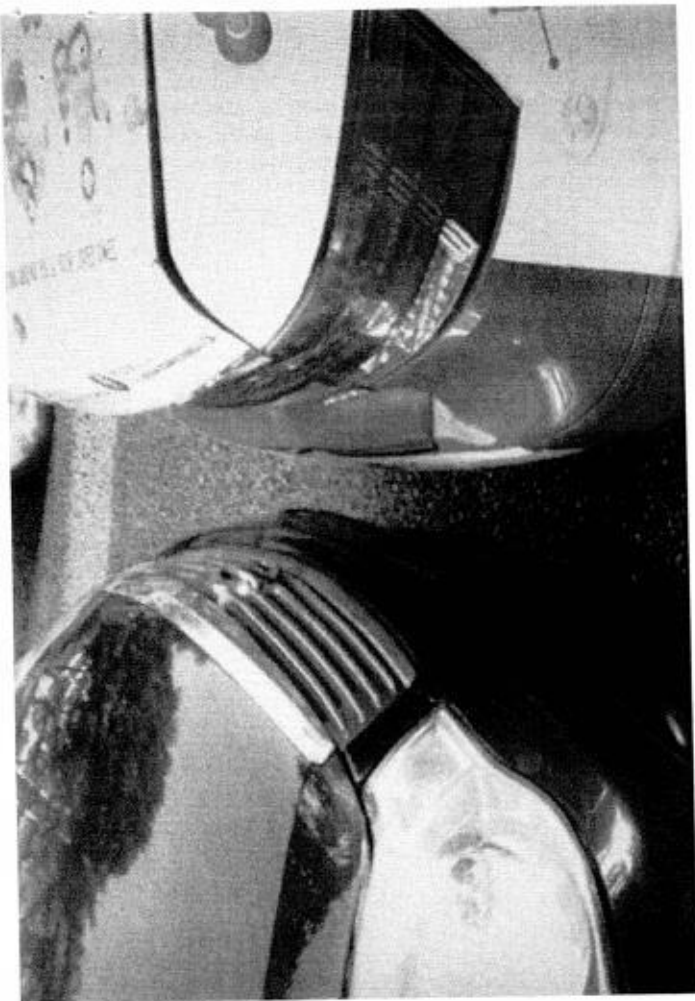
COMFORT TRANSPORTATION P.L.C.  
CO REG NO. 190301P21R

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.:







Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO: 305116141

CUSTOMER  
R/MS  
CUSTOMER NO  
ADDRESS  
L (R)  
(P)

COMFORT TRANSPORTATION PTE LTD  
7010045  
383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755 (O)

REGN NO	SHD4646U	MILEAGE
MAKE	HYUNDAI	FUEL E.....1/2.....F
MODEL	SONATA	DATE/TIME IN 12.02.2018 09:50
YR OF MANU	06.06.2013	TARGET DATE
CHASSIS CODE	KMHET41VMDA834651	COMPLETION DATE/TIME:

SCOUNT CARD NO.

## JOB DESCRIPTION

Accident Date: 12.02.2018  
NATURE: 3P 12.02.2018

S/NO	LABOR CODE	DESCRIPTION
		NTUC - taxi Rcr damage
		LKK/Kelmi -

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHD4646U  
LARRY

Vehicle No.: SHD4646U

Larry Ng

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	<b>Labour Charge</b>			\$ 1,800.00 <del>400</del>
	Panel Beating			\$ 1,400.00 <del>540</del>
	Spray Painting Charge			\$ 50.00 <del>X 11</del>
	Wiring Charge			\$ 100.00 <del>20</del>
	Tuff Kote			\$ 400.00 <del>X 11</del>
	Rear Chassis Alignment Charge			\$ 120.00 <del>20</del>
	Remove/Refix Reverse Sensor			\$ 150.00 <del>X 11</del>
	Remove/Refix Fuel Tank			\$ 150.00 <del>X 11</del>
	Remove/Refix Exhaust Pipe			
	<b>TOTAL LABOUR</b>			\$ 4,170.00
	<b>ESTIMATE TOTAL</b>			\$ 10,845.34
				10815.34

16/12/14

12/2/18 15054

2 By

43

After Repair p 16

Larry Ng

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification is allowed
- Supplementary work must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer  
Signature:  
Date:

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.

COMFORTDELGRO ENGINEERING PTE LTD  
REPAIR ESTIMATE\*

VEHICLE NO : SHD4646U

MAKE :

MODEL : HYUNDAI SONATA

None

DOA: 12.02.08

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Boot Lid — <i>Del</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>nc</i>			\$ 43.60	
	Boot Lid Hyundai Plate — <i>nc</i>			\$ 24.20	
	Boot Lid 'H' Emblem — <i>nc</i>			\$ 26.10	
	Boot Lid CRDI Plate — <i>nc</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 (11 pcs) X <i>su</i>			\$ 11.00	
	Rear Bumper — <i>Del</i>			\$ 578.40	
	Rear Bumper Reinforcement X <i>su</i>			\$ 483.30	
	Rear Bumper Clip — <i>nc</i>	\$	22.00	\$ <del>44.00</del>	
	Rear Bumper Sponge X <i>su</i>			\$ 137.40	
	Rear Bumper Under Cover X <i>su</i>			\$ 185.80	
	Rear Bumper Protector (LH/RH) X <i>su</i>	\$	38.00	\$ 76.00	
	Tail Lamp (LH/RH) X <i>su</i>	\$	344.00	\$ 688.00	
	Tail Lamp Quarter Panel (LH) X <i>su</i>			\$ 93.80	
	Rear Panel X <i>su</i>			\$ 391.80	
	Rear Panel Garnish X <i>su</i>			\$ 95.80	
	Spare Tyre Holder X <i>su</i>			\$ 27.60	
	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	
	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	
				<b>\$ 7,630.80</b>	
				<b>\$ 1,526.16</b>	
				<b>\$ 6,104.64</b>	
	Boot Lid Comfort Logo & Tel No. Sticker — <i>nc</i>			\$ 30.00	Nett
	Boot Lid Advertisement Logo — <i>nc</i>			\$ 100.00	Nett
	Rear No. Plate — <i>nc</i>			\$ 25.00	Nett
	Rear Bumper Reverse Sensor X <i>su</i>			\$ 135.70	Nett
	Rear Bumper Advertisement Logo — <i>nc</i>			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH) — <i>nc</i>	\$	100.00	\$ 200.00	Nett
				<b>\$ 570.70</b>	

Larry Ng

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305116141  
Date : 13.02.2018

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

## FINALIZATION FORM

To : LKK  
Attn : KALVIN  
Vehicle Reg No. : SHD4646U

Fax :

Date of Accident: 12/02/18

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

- The repair job shall bill to: NTUC SJW3721T
- The finalized amount shall be:
  - Spare Parts after List discount
  - Labour Charges
  - Total for Part-By-Part Repair Cost**
  - Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less:                       
**Final Lumpsum Repair cost** \$2,400.00

3. Estimated normal period for repairs: 2 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 : Kalvin  
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:





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/INC18002872/K1qbn2			
73 BRAS BASAH ROAD		Date: 28-02-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE		Code: INC4	
189556			
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SJW 3721T	Veh. Inspected	SHD 4646U
Policy No.	5090059390	Coverage (\$)	0.00
Claim No.	MT/0981951-002	Excess (\$)	0.00
Assign From		Assign Date	12/02/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	KMHET41VMDA834651	Colour	BLUE
Odometer	547621	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
<b>3. Conditions of Tyres</b>			
	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
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	12/02/2018	Inspection Date	12/02/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.			
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4646U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>REPLACEMENT OF PARTS</b>			
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	-
11	BOOT LID TRIMBOARD CLIPS	NOT NECESSARY	11.00	-
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	483.30	-
10	REAR BUMPER CLIP	NECESSARY	44.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	137.40	-
1	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	-
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00	TO REPAIR	76.00	-
2	TAIL LAMP (LH/RH) @\$344.00	SERVICEABLE	688.00	-
1	TAIL LAMP QUARTER PANEL (LH)	SERVICEABLE	93.80	-
1	REAR PANEL	TO REPAIR	391.80	-
1	REAR PANEL GARNISH	SERVICEABLE	95.80	-
1	SPARE TYRE HOLDER	SERVICEABLE	27.60	-
1	SPARE TYRE PANEL	SERVICEABLE	863.00	-
1	SPARE TYRE PANEL CUSHION	SERVICEABLE	200.30	-
1	REAR TOWING HOOK	SERVICEABLE	135.30	-
1	MEMBER ASSY-REAR FLOOR CENTRE	SERVICEABLE	163.60	-
2	PANEL ASSY-REAR FLOOR SIDE (LH/RH) @\$88.55	SERVICEABLE	177.10	-
1	EXHAUST PIPE INSULATOR	SERVICEABLE	56.10	-
1	EXHAUST SILENCER	SERVICEABLE	723.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	EXHAUST PIPE HANGER	SERVICEABLE	56.10	-
	LESS 20% DISCOUNT		-1,526.16	-413.30
			6,104.64	1,653.20
	<b>SPECIAL NETT ITEMS</b>			
1	BOOT LID COMFORT LOGO & TEL NO STICKER (SN)	NECESSARY	30.00	30.00
1	BOOT LID ADVERTISEMENT LOGO (SN)	NECESSARY	100.00	100.00
1	REAR NO PLATE (SN)	CRACKED	25.00	25.00
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
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
			540.70	405.00
	<b>LABOUR</b>			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		2,670.00	420.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		1,500.00	560.00
			4,170.00	980.00
	<b>GRAND TOTAL</b>		<b>10,815.34</b>	<b>3,038.20</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>			<b>2,400.00</b>

Report Ref No. NS/INC18002872/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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