

(08/11/13)

Surveyor: KalvinREF: NS/INC18003033/Klt3n2**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: G232014Policy No. 5088109536 - 15/3/17 - 14/3/18Claims No. MT10982304-002

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: \_\_\_\_\_ 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: SHC8020D Yr Regn: 6 May 2015Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mercedes Benz E200 C.C. 2143Colour: White A/C: Ins / Std / NI / NASp. Reading: 407173 T/Radio: Ins / Std / NI / NA

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

C/No: WDD21200120458559Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD / Rim orTyre Size: F: 225/55 R16

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

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

TOYO / YOKO or Wet

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 15/2/18 D.O.I. 14/2/18Survey held at 104 B (bnd)Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or26 km, minor

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

Date / Time	Action / Instruction
	<u>SHC8020D-cc3 / Ax A11026141 / H/ec3 D.O.A: 18/12/11 2NL</u>
	<u>G232014 - X</u>
<u>15/2/18</u>	<u>contact 4/5 \$1150 / 17, (Red: 647.20 : 36%)</u>

RECEIVED 20 FEB 2018

Date/Time, File Pass to?

1) 19/2 Typist

Date/Time, File Return to?

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

☐ : Preli. Report☒ : Final ReportDays Of Repair: 1Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)Survey Fee: 160

Transportation: \_\_\_\_\_

S + RS, SI

Photos

Others

TOTAL

35195Report Format: TPLump \$ 1150 / I.B.I. (\$)



# 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/INC18003033/K1td3

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 14-02-2018  
189556



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GZ 3201Y	Veh. Inspected	SHC 8020D
Policy No.	5088109536	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	14/02/2018

## 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

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## 5. General Information

Accident Date	13/02/2018	Inspection Date	14/02/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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Hello, NAC\_PAYA\_UBI\_800601

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

## Policy Query

Policy No.

Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5088109536	HUI LOON GENERAL SERVICES	53062558W	GCV	Comprehensive	GZ3201Y	GZ3201Y	15/03/2017	14/03/2018

## Denise Tay (LKKAuto)

**From:** mtreg <mtreg@income.com.sg>  
**Sent:** Monday, 19 February 2018 10:28 AM  
**To:** Denise Tay (LKKAuto)  
**Subject:** REQUEST CLAIM NUMBER

Hi,

Claims created.

With Regards

Samsia  
Senior Admin Assistant, Motor Insurance  
[www.income.com.sg](http://www.income.com.sg)



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**From:** Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]  
**Sent:** Monday, February 19, 2018 9:18 AM  
**To:** mtreg <mtreg@income.com.sg>  
**Subject:** REQUEST CLAIM NUMBER

### TP Claims against NTUC Income: Follow-Through Survey

Date : 19/02/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative
1	MT/0982304-002	COMFORT TRANSPORTATION PTE LTD	SHC 8020D	GX 3201Y	13/02/2018	08:45	\$ 1,797.20	\$
2	MT/0981593-002	CITYCAB PTE LTD	SHC 7022E	SFX 4400E	07/02/2018	19:40	\$ 12,719.78	\$

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

## 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	13/02/2018 16:36
Date Of Accident	13/02/2018 08:45
Exact Location Of Accident	SLIP RD FROM CTE TWDS PIE/AIRPORT DIRECTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8020D
<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	MERCEDES-BENZ
Model	MERC

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	ONG TAI CHAU
NRIC No	S2003257Z
Date Of Birth	29/09/1953
Occupation	OUTDOOR
Date Of Driving Pass	19/07/1973
Driving Experience	44 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	SIMONG92@YAHOO.COM.SG

Address	111 #02-162 BISHAN STREET 12
Postcode	570111
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?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : - GENDER: : 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)

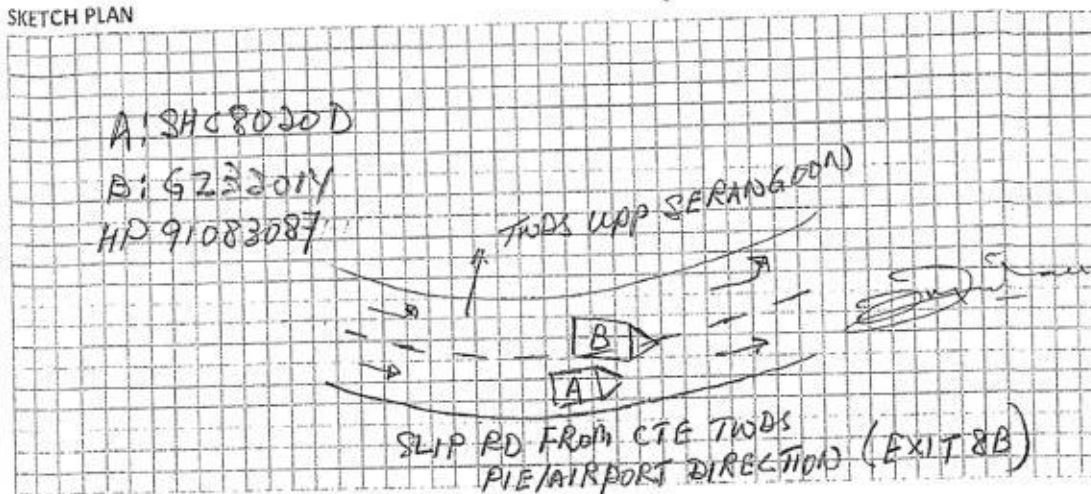
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GZ3201Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LEE CHEE CHUEN
NRIC/Passport Number	S6818849J
Contact Number	91083087
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	NO DAMAGE

No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached.

DECLARATION

I/We declare the foregoing particulars are true in every respect.  
 CO REG NO 19930387 TR

Policyholder's Signature  
 Date & Time:

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

Reporting Centre Personnel's Signature  
 Name:

13/02/18



Describe Circumstances of the Accident

On 13 Feb 2018 at about 08:45 hrs I was driving on the right lane along a Slip Rd from CTE leading towards PIE/Airport direction.

Suddenly a few seconds later a lorry GZ3201Y coming from my left cut into my lane and caused this accident to happen(see video footage).

In the process, the right hand side rear of the lorry hit the left hand side wing mirror of my taxi.

01 passenger(via on current booking call) on board my taxi. No injury at the point of the accident.

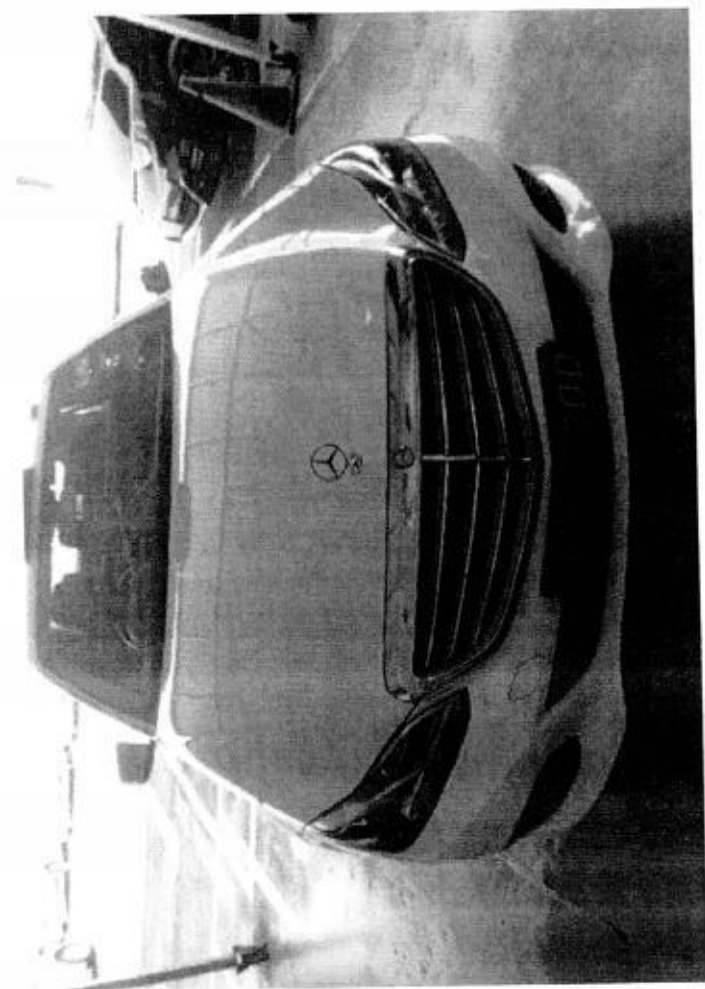
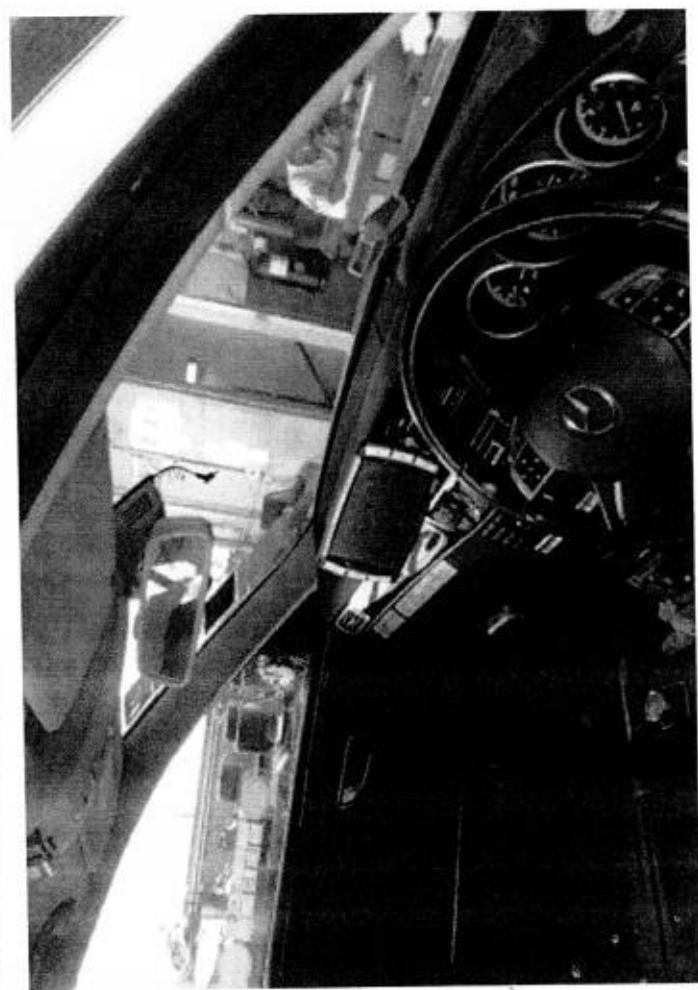
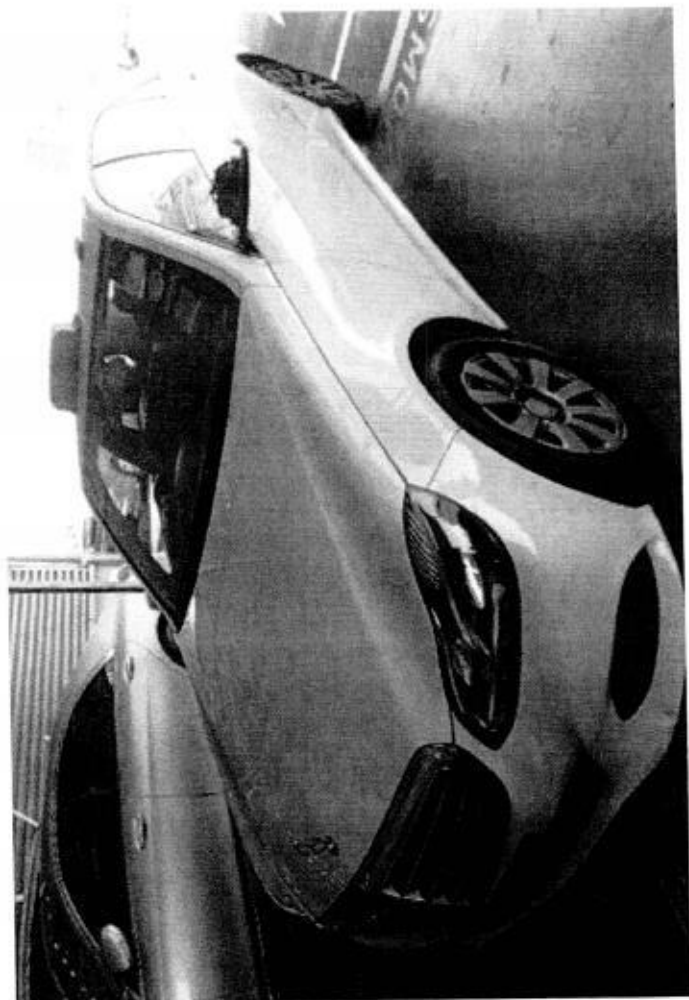
## Declaration

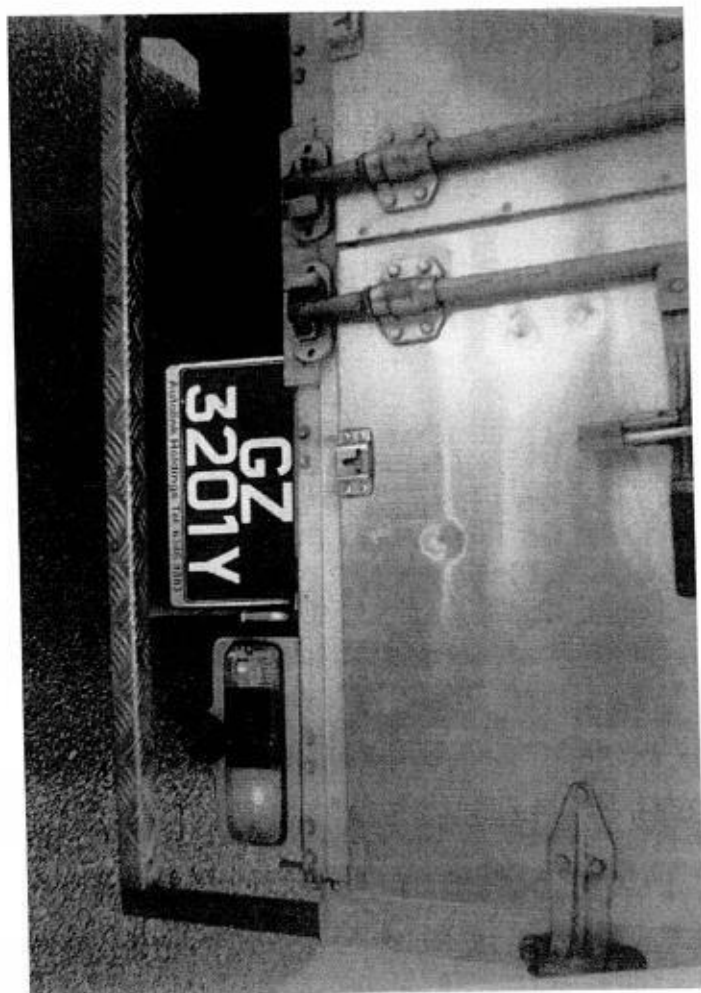
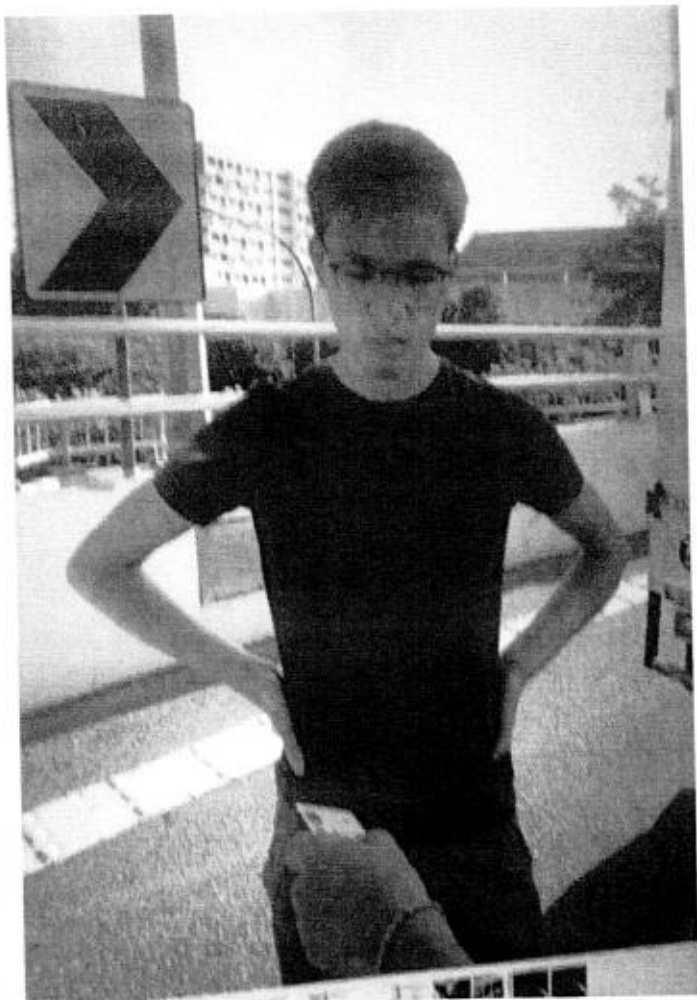
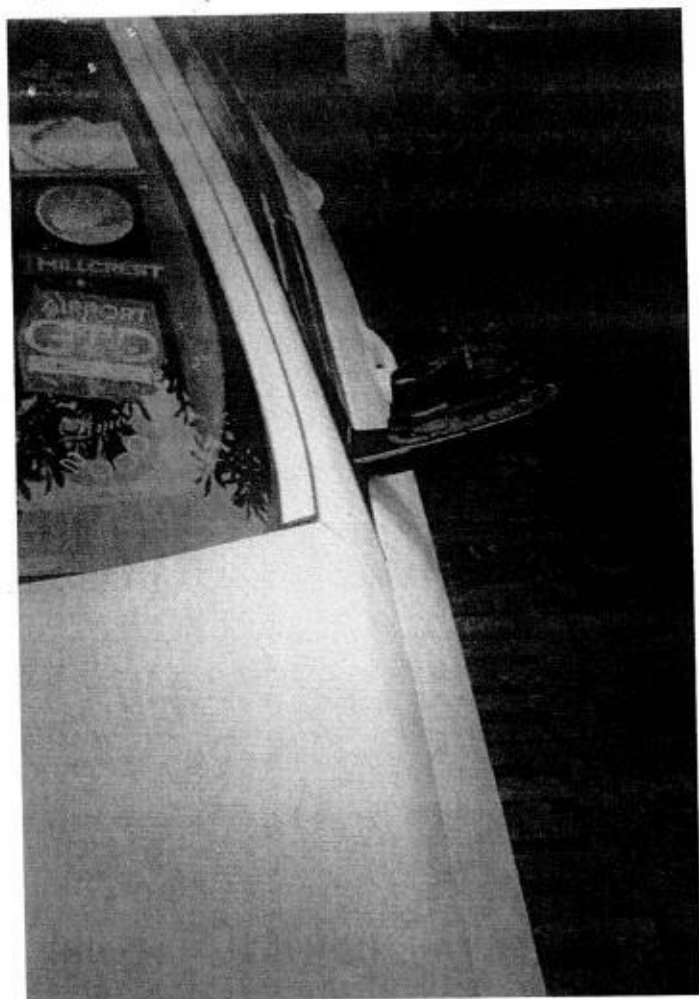
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature/Date &  
Time

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

Witnessed by Reporting  
Centre Personnel





Team: ARC Repair TP(CLS0)1 JOB CARD Sales Order: JC NO: 305116693

CUSTOMER  R/MS CUSTOMER NO ADDRESS  TEL (R) (P)  SCOUT CARD NO.	COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (O)	REGN NO SHC8020D	MILEAGE
		MAKE MERCEDES BENZ	FUEL E.....1/2.....F
		MODEL E220CDI (E6)	DATE/TIME IN 13.02.2018 15:30
		YR OF MANU 06.05.2015	TARGET DATE
		CHASSIS CODE WDD2120012B158559	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 13.02.2018  
NATURE: 3P 13.02.2018

S/NO	LABOR CODE	DESCRIPTION
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CHECKED & PASSED OUT BY: \_\_\_\_\_

_____ SERVICE ADVISOR	_____ CUSTOMER'S SIGNATURE
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Acknowledgement Slip		Exit Pass	
Vehicle No.: SHC8020D	CHIANG	Vehicle No.: SHC8020D	
Signature of Service Advisor	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 : SHL 8020D

DATE 13/2/2018 15:08

MAKE :

MODEL : MERCEDES

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Mirror Glass, Frt/ LH <i>missing</i>			\$ 240.00
	Mirror Glass Cover, Frt/ LH <i>missing</i>			\$ 70.00
	Mirror Housing W/Signal Lamp, Frt/ LH <i>missing</i>			\$ 414.00
	Mirror Motor Assy, Frt/ LH <i>shaft</i>			\$ 860.00
	<b>SUB TOTAL</b>			<b>\$ 1,584.00</b>
	<b>LESS 20%</b>			<b>\$ 316.80</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 1,267.20</b>
	<b>Labour Charge</b>			
	Panel Beating			\$ <del>280.00</del> <sup>100</sup>
	Spray Painting Charge			\$ <del>200.00</del> <sup>50</sup>
	Wiring Charge			\$ <del>50.00</del> <sup>20</sup>
	<b>TOTAL LABOUR</b>			<b>\$ 530.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 1,797.20</b>
<p><i>Kali (Kaly)</i></p> <p><i>14/2/18 1100hr</i></p> <p><i>1 Bay</i></p> <p><i>4/5</i></p> <p><i>After Rep pht.</i></p>				
<p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>To resurvey before repair and painting</li> <li>To display damaged part(s) for resurvey</li> <li>Parts prices are subject to variation</li> <li>Third party survey on a "Without prejudice" basis</li> <li>No illegal modification(s) is allowed</li> <li>Supplementary charges for repair and is subject to the applicable insurance Company</li> </ul> <p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p> <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>				

Our Job Ref No : 305116693  
Date : 14/02/18

## COMFORTDELGRO ENGINEERING

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

### FINALIZATION FORM

To : LKK  
Attn : KALVIN  
Vehicle Reg No. : SHC8020D

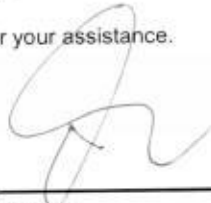
Fax :


13/02/2018

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

1. The repair job shall bill to: NTUC GZ3201Y
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**
3. Estimated normal period for repairs: 1 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 : CHIANG  
Tel : 62148314  
Fax : 65468156

Signature :   
Name : KALVIN  
Date : 15/2/18

### 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		N		
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/INC18003033/K1td3n2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 21-02-2018



Code: INC4

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

Insured Veh.	GZ 3201Y	Veh. Inspected	SHC 8020D
Policy No.	5088109536	Coverage (\$)	0.00
Claim No.	MT/0982304-002	Excess (\$)	0.00
Assign From		Assign Date	14/02/2018

### 2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ E220	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	WDD2120012B158559	Colour	WHITE
Odometer	407173	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	225/55 R16	WEST LAKE	7 mm
L/H Front Tyre	225/55 R16	WEST LAKE	7 mm
R/H Rear Tyre	225/55 R16	WEST LAKE	7 mm
L/H Rear Tyre	225/55 R16	WEST LAKE	7 mm

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S WING MIRROR. DAMAGES SEE DETAILS.
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### 5. General Information

Accident Date	13/02/2018	Inspection Date	14/02/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

### 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	1 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



Page No.:1 of 1

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 8020D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	MIRROR GLASS,FRT/LH	MISSING	240.00	240.00
1	MIRROR GLASS COVER,FRT/LH	MISSING	70.00	70.00
1	MIRROR HOUSING W/SIGNAL LAMP,FRT/LH	MISSING	414.00	414.00
1	MIRROR MOTOR ASSY,FRT/LH	SHATTERED	860.00	860.00
	LESS 20% DISCOUNT		-316.80	-316.80
			1,267.20	1,267.20
<b>LABOUR</b>				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		330.00	120.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		200.00	50.00
			530.00	170.00
<b>GRAND TOTAL</b>			<b>1,797.20</b>	<b>1,437.20</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>1,150.00</b>

Report Ref No. NS/INC18003033/K1td3n2

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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