

Surge Mr: Kalvin

REF:

NS/INC18006269/Klgbnz

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimate Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Insp Vehicle No: \_\_\_\_\_  
 at Work slip m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: FBH 582X  
 Policy No: 50759555 250218 - 210219  
 Claims No: 14/09/9855-01  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: SHC3443A Yr Regt: 26 24 2017  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / T/O / Prime Mover /  
 Truck / Trailer or  
 Make: Toyota Prius C.O. 17 98  
 Colour: Blu A/C: Insured / Std / NI / NA  
 Sp. Reading: 59090 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: JTDK03F4303562701  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD / R/Rim or  
 Tyre Size: F: 195/65R15  
 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  
 GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No  
 Est. Repairs: 3 days Res.: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

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

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Worth

Front Rear  
 R/Bal. 7 mm R/Bal. 7 mm  
 L/Bal. 7 mm L/Bal. 7 mm  
 D.O.A. 4/4/8 D.O.I. 4/4/8  
 Survey held at CD4E (Loyang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear o/s

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction	DA	IM
	SHC 3443A - RS/1114015966/Ktbu2	DA: 190314	IM
	FBH 582X - NA/ETL 8006104/h4	DA: 040418	P/P
9/4/8	Sub 1 1/1 \$ 3338.43/3 P, (Red 2009.37, 38%)		

RECEIVED 11 APR 2018

Date/Time, File Pass to?

1) 11/4 11/11

Date/Time, File Return to?

2)

☐ : Preli. Report  
☐ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)  
☐ : Interview (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Other

160
35

195

3338.43



## 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/INC18006269/K1qb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 05-04-2018

189556



Code: INC4

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

Insured Veh.	FBH 582X	Veh. Inspected	SHC 3443A
Policy No.	5097595595	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	04/04/2018

### 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	04/04/2018	Inspection Date	04/04/2018
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.
--

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/0985342-003	SMRT TAXIS PTE LTD	SHD 6406H	SJQ 9722H	07/03/2018	\$ 4,631.00	\$ 1,300.00
2	MT/0979446-002	SMRT TAXIS PTE LTD	SHB 5536H	GZ 2813M	16/01/2018	\$ 5,461.90	\$ 1,414.18
3	MT/0989855-001	COMFORT TRANSPORTATION PTE LTD	SHC 3443A	FBH 582X	04/04/2018	\$ 5,347.80	\$ 3,338.43
4	MT/0989856-001	COMFORT TRANSPORTATION PTE LTD	SHC 8954J	FBC 1025H	30/03/2018	\$ 1,686.18	\$ 550.00

Claim received from LKK Auto

eBaoTech

GeneralClaim

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"/>	5097595595	ONG PENG KWANG	S7033829G	GMC	Third Party, Fire & Theft	FBH582X	FBH582X	25/02/2018	21/02/2019

## 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	04/04/2018 13:46
Date Of Accident	04/04/2018 08:15
Exact Location Of Accident	PAN ISLAND EXPRESSWAY BEFORE JALAN BAHAR EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC3443A
<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
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	PRIUS
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
<b>Insurance Company</b>	
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	
<b>Driver</b>	
Name of Driver	KASSIM B TERIMON
NRIC No	S1189184E
Date Of Birth	06/12/1956
Occupation	OUTDOOR
Date Of Driving Pass	30/04/1981
Driving Experience	36 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 501 11-46 WOODLANDS DRIVE 14  
 Postcode 730501  
 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 CHAIN COLLISION  
 Weather Conditions CLEAR  
 Road Surface DRY

### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles involved in the accident  
 Was any body injured in the Accident? 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) 1

### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 POLICE STATION NAME [OTHER] NANYANG 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 FBH582X  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category MOTORCYCLE  
 Name of Driver ONG PONG KWANG  
 NRIC/Passport Number S7033829G  
 Contact Number 97996369  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage FRT & REAR  
 No. Of Passenger (Including Driver)

### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number CB6337T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

COMMERCIAL VEHICLE

LIM YEW KHIANG

S1627039C

96881679

FRT

**DETAILS OF INJURED PERSON 1**

Name

ONG PONG KWANG

Approximate Age

NOT SURE

Injuries Sustain

FBH582X

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

# Sketch Plan Pg. 1

## SKETCH PLAN

A: SHC 2443A  
 B: FBF 580X  
 C: CB 63371

Pan Island Expressway  
 Before Jalan Bahar Exit  
 FINISH

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached police report.

## DECLARATION

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

COMFORT TRANSPORTATION PTE LTD

CC REG NO 18330521R

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.:

4/4/18





**SINGAPORE  
POLICE FORCE**



T/20180404/2013

1 of 4

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

Report No. T/20180404/2013

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 04/04/2018 09:42	Vide Report No.: J/20180404/0063	Station Diary No.: 43
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**Informant's Particulars**

Name of Informant: KASSIM BIN TERIMON			Address: APT BLK 501 WOODLANDS DRIVE 14 #11-46 SINGAPORE 730501	
ID Type / ID No.: NRIC NO / S1189184E			Contact No.: Home/Office:	Mobile: 90889426
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 61	Date of Birth: 06/12/1956	Type of Informant: Driver	
Race: Javanese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class:	Date of Expiry:

**General Information of the Accident**

General Information of the Accident				Type of Location:
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/04/2018 08:15	Expressway
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Before Jalan Bahar Exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
CB6337T	Van				Slightly Damaged	0
FBH582X	Motorcycle				Slightly Damaged	0
SHC3443A	Car				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999



T/20180404/2013

2 of 4

Report No. T/20180404/2013

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
<b>Driver</b>			
Name	LIM YEW KHIANG	ID No.	S1627039C
Related Vehicle	CB6337T (Van)	Contact No.	96881679
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Rider</b>			
Name	ONG PONG KWANG	ID No.	S7033829G
Related Vehicle	FBH582X (Motorcycle)	Contact No.	97996369
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
<b>Driver</b>			
Name	KASSIM BIN TERIMON	ID No.	S1189184E
Related Vehicle	SHC3443A (Car)	Contact No.	90889426
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the 04/04/2018 at about 0815hrs, I was driving my taxi, SHC3443A, along PIE towards AYE, near Jalan Bahar Exit on the leftmost lane. I stopped my taxi as there was heavy traffic at that point of time. Suddenly, a motorcycle, FBH582X hit me on the rear of my taxi. I then saw a motorcyclist slide to the front of my taxi. I went out of my taxi and saw a van, CB6337T stopped behind my taxi. I saw the motorcyclist pants got stuck to the motorcycle stand. I helped him release his pants. I asked for the van drivers particulars but he did not want to give. I got the particulars from the AETOS road marshaller, who was at scene.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999



T/20180404/2013

3 of 4

Report No. T/20180404/2013

**CONTINUATION OF REPORT**

The motorcyclist, Ong Pong Kwang, S7033829G, HP: 97996369, was conveyed to hospital by ambulance for his injuries.

The accident was attended by TP officers, SSGT T01147 Yusuff Khan.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999



T/20180404/2013

4 of 4

Report No. T/20180404/2013

**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: J / Sgt 2 MUHAMMAD FARHAN BIN KHAMARULZAMAN MUHAMMAD FARHAN BIN KHAMARULZAMAN Signature Of Interpreter: Not applicable	Signature Of Informant:  Date/Time: 04/04/2018 09:42
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt NORASHIKIN BINTE DAUD Contact No.: 65476439	Classification Of Case: SN 127
Authentication Stamp 	Signature : 

NTUC  
LKK

Date/Time: 04.04.2018 14:48

Page : 1

A member of COMFORTDELGRU

## JOB CARD Sales Order:

JC NO305138474

Team: ARC Repair TP(CLSO)1

CUSTOMER

VMS COMFORT TRANSPORTATION PTE LTD  
CUSTOMER NO 7010045  
ADDRESS 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
L (R) 65508755 (O)  
(P)REGN NO:  
SHC3443A

MILEAGE

MAKE:  
TOYOTA

FUEL

E.....1/2.....F

MODEL PRIUS HYBRID(G4)04.04.2018 12:35

DATE/TIME IN

YR OF MANU  
26.07.2017

TARGET DATE

CHASSIS CODE  
JTDKB3FU303562701

COMPLETION DATE/TIME:

3 COUNT CARD NO.

## JOB DESCRIPTION

Accident Date: 04.04.2018  
NATURE: 3P 04.04.18

S/NO LABOR CODE DESCRIPTION

CHECKED &amp; PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

e:

to:

File No.:

SHC3443A

LIMITS

Signature of Service Advisor

Signature/Date

to be returned to Service Reception upon collection

Exit Pass

Vehicle No.:

SHC3443A

Name of Service Advisor

Date

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD  
REPAIR ESTIMATE

VEHICLE NO : SHC 3443A

MAKE :  
MODEL : TOYOTA PRIUS

NTUC-CPI  
LKK-Kalvin

DATE : 4/4/18

TS

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
REAR TRUNK LID LOGO(PRIUS) X 1			\$ 60.80
REAR TRUNK LID LOGO(HYBRID) X 1			\$ 52.40
REAR TRUNK LID LOGO(TOYOTA STAR) X 1			\$ 52.90
REAR BUMPER			\$ 458.60
REAR BUMPER RE-INFORCEMENT X 1			\$ 318.80
REAR BUMPER UNDER COVER X 1			\$ 552.60
REAR BUMPER SIDE RETAINER, RH X 1			\$ 112.70
REAR BUMPER SPONGE X 1			\$ 143.40
REAR BUMPER UNDER SIDE COVER (RH) X 1			\$ 167.60
REAR BUMPER TOWING COVER X 1			\$ 82.70
REAR BUMPER CLIPS			\$ 22.00
ARM SUB-ASSY, REAR BUMPER, RH X 1			\$ 139.60
TAIL LAMP ASSY (UPPER) (RH)			\$ 557.90
TAIL LAMP ASSY (LOWER) (RH)			\$ 548.40
REAR WINDSCREEN GLASS			\$ 1,555.80
REAR WINDSCREEN GLASS MOULDING X 1			\$ 208.60
REAR RH Fender X repair			
SUB TOTAL			\$ 5,034.80
LESS 25%			\$ 1,258.70
DISCOUNTED TOTAL			\$ 3,776.10
REAR TRUNK LID APPS STICKER X 1			\$ 40.00
REAR TRUNK LID COMFORT & TEL NO. STICKER X 1			\$ 60.00
REAR BUMPER REVERSE SENSOR X 1			\$ 135.70
REAR WINDSCREEN SEALANT			\$ 46.00
			\$ 281.70
			\$ 400
			\$ 500.00
			\$ 400 500.00
			\$ 20 50.00
			\$ 100 120.00
			\$ 20 120.00
			\$ 1,290.00
			\$ 5,347.80

NETT  
NETT  
NETT  
NETT 41.40

Kalvin/Kus  
4/4/18 1640h  
3 Rps  
P/P  
Before Paint photo

LABOUR CHARGE

- Panel Beating
- Spray Painting Charge
- Wiring Charge
- Remove/Refix Rear Windscreen Glass
- Remove/Refix Reverse Sensor

TOTAL LABOUR

ESTIMATE TOTAL

LKK A... Consultants hence notify the Repairer of the following:

- To resurvey the following
- To display damaged parts for survey
- Parts price list for survey
- Third party survey
- No illegal modifications without prior approval
- Supplementary items 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.

## REPAIR ESTIMATE

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305138474  
REGN NO : SHC3443A  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(G4)  
DATE OF REGN : 26.07.2017  
DATE/TIME IN : 04.04.2018 12:35  
ACCIDENT DATE : 04.04.2018

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0302-2282-G	REAR BUMPER	1	458.60	25.00	343.95
0002 04-01-0302-2267-G	REAR BUMPER CLIPS	10	22.00	25.00	16.50
0003 04-01-0302-0585-G	TAILLAMP UPR LAMP RH	1	557.90	25.00	418.42
0004 04-01-0302-0795-G	TAILLAMP LWR LAMP RH	1	548.40	25.00	411.30
0005 04-01-0302-2258-G	REAR WINDSCREEN GLASS	1	1,555.80	25.00	1,166.85
0006 05-01-0199-0032-A	WINDSCREEN AHESIVE-310ML	2	46.00	10.00	41.40

SUB-TOTAL : 2,398.42

## JOB NATURE

0000 L	PANEL BEATING	400.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	400.00
0002 17-01	CHECK ALL LIGHTING	20.00
0003 L	R/I REAR WINDSCREEN	100.00
0004 L	R/I REVERSE SENSOR	20.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 06.04.2018

Time: 17:50:25

Page: 2

REPAIR ESTIMATE

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305138474  
REGN NO : SHC3443A  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(C  
DATE OF REGN : 26.07.2017  
DATE/TIME IN : 04.04.2018 12:35  
ACCIDENT DATE : 04.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

SUB-TOTAL : 940.00

TOTAL : 3,338.42

  
MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :



# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305138474  
Date : 09/04/18

## FINALIZATION FORM

To : LKK  
Attn : KALVIN ANG  
Vehicle Reg No. : SHC3443A

Fax :

Date of Accident : 04-Apr-18

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

1. The repair job shall bill to: NTUC --- FBH 582X
2. The finalized amount shall be:
 

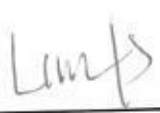
(a) Spare Parts after List discount	\$2,398.43
(b) Labour Charges	\$940.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$3,338.43</b>
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: 20%	
<b>Final Lumpsum Repair cost</b>	


3. Estimated normal period for repairs: 3 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 : 9/4/18

### 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/INC18006269/K1qbn2	
73 BRAS BASAH ROAD		Date: 13-04-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Code: INC4	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	FBH 582X	Veh. Inspected	SHC 3443A
Policy No.	5097595595	Coverage (\$)	0.00
Claim No.	MT/0989855-001	Excess (\$)	0.00
Assign From		Assign Date	04/04/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU303562701	Colour	BLUE
Odometer	59090	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	195/65 R15	WEST LAKE	7 mm
L/H Front Tyre	195/65 R15	WEST LAKE	7 mm
R/H Rear Tyre	195/65 R15	WEST LAKE	7 mm
L/H Rear Tyre	195/65 R15	WEST LAKE	7 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.			
DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	04/04/2018	Inspection Date	04/04/2018
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:		3 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 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 3443A

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR TRUNK LID LOGO (PRIUS)	NOT NECESSARY	60.80	-
1	REAR TRUNK LID LOGO (HYBRID)	NOT NECESSARY	52.40	-
1	REAR TRUNK LID LOGO (TOYOTA STAR)	NOT NECESSARY	52.90	-
1	REAR BUMPER	DEFORMED	458.60	458.60
1	REAR BUMPER RE-INFORCEMENT	SERVICEABLE	318.80	-
1	REAR BUMPER UNDER COVER	SERVICEABLE	552.60	-
1	REAR BUMPER SIDE RETAINER,RH	SERVICEABLE	112.70	-
1	REAR BUMPER SPONGE	NOT NECESSARY	143.40	-
1	REAR BUMPER UNDER SIDE COVER (RH)	TO REPAIR	167.60	-
1	REAR BUMPER TOWING COVER	SERVICEABLE	82.70	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	ARM SUB-ASSY,REAR BUMPER,RH	SERVICEABLE	139.60	-
1	TAIL LAMP ASSY (UPPER)(RH)	CRACKED	557.90	557.90
1	TAIL LAMP ASSY (LOWER)(RH)	CRACKED	548.40	548.40
1	REAR WINDSCREEN GLASS	SHATTERED	1,555.80	1,555.80
1	REAR WINDSCREEN GLASS MOULDING	NOT NECESSARY	208.60	-
1	REAR RH FENDER (NPA)	TO REPAIR	-	-
	LESS 25% DISCOUNT		-1,258.70	-785.67
			3,776.10	2,357.03
<b>NETT ITEMS</b>				
1	REAR WINDSCREEN SEALANT (N)	NECESSARY	46.00	46.00
	LESS 10% DISCOUNT		-	-4.60
			46.00	41.40
<b>SPECIAL NETT ITEMS</b>				
1	REAR TRUNK LID APPS STICKER (SN)	NOT NECESSARY	40.00	-
1	REAR TRUNK LID COMFORT & TEL NO STICKER (SN)	NOT NECESSARY	60.00	-
1	REAR BUMPER REVERSE SENSOR (SN)	SERVICEABLE	135.70	-
			235.70	-

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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>LABOUR</b> THATCHAM STANDARD REPAIR TIME ON BODY WORKS. THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		790.00 500.00 1,290.00	540.00 400.00 940.00
	<b>GRAND TOTAL</b>		<b>5,347.80</b>	<b>3,338.43</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>3,338.43</b>

Report Ref No. NS/INC18006269/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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