

ASSIGNMENT

12 Nov

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s: \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: SKJ 623TJ  
 Policy No: 5088519138 240417 - 230418  
 Claims No: MT/0989045-002  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

(Policy Condition)

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

NIS	OIS

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Report: \_\_\_\_\_ Consistent?: Yes or No  
 GIA / 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

Veh No: SHA 924IL Yr Reg: 12 2015  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: HYUNDAI 1-40 1685  
 Colour: YELLOW A/C: Insured / Std / NI / NA  
 Sp. Reading: 434,165 T/Radio: Insured / Std / NI / NA  
 Eng No: \_\_\_\_\_  
 C/No: KMHLB41UM64080608  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or  
 Brake: Inorder / Jammed / Leaked / Burnt or  
 Mod: Nil / S/Rim / STD A/Rim or  
 Tyre Size: F: 205/60 R16  
 R: 205/60 R16  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or HANKOOK  
 Front Rear  
 R/Bal. 5 mm R/Bal. 5 mm  
 L/Bal. 5 mm L/Bal. 5 mm  
 D.O.A. 4/4/18 D.O.I. 5/4/18  
 Survey held at CDGE LOYANG  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
FRONT O/S  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

SHA 924IL - RS/ECI 7014423 / Ktbn2  
SKJ 623TJ - X

DA: 200717

NTUC

13/4/18 FINALIZED LUMP SUM \$1,950 / 2 DAYS (Red: 1756.16 .47%)

RECEIVED 10 APR 2018

Date/Time File Pass to:

16/4 Typist

Date/Time File Return to:

2

Report Format:

Lump Sum / I.B.I. IS

☐ Preli. Report  
☒ Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee

Transportation

Add Fee:

☐

Site Insp

\$

☐

Interview

\$

☐

Technical

\$

☐

Weekend

\$

Photos

Other

TOTAL

160
35
145



# 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/INC18006335/Ntb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 05-04-2018	
Code: INC4				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SKJ 6237J	Veh. Inspected	SHA 9241L	
Policy No.	5088519238	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	05/04/2018	
<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	04/04/2018	Inspection Date	05/04/2018	
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.				

eBaoTech

General Claim

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"/>	5088519238	CHNG CHOON HIANG	579125658	GPC	drivo CLASSIC	SKJ6237L	SKJ6237L	24/04/2017	23/04/2018

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.
1	MT/0989809-002	COMFORT TRANSPORTATION	SH 7032U	SLU 9220U
2	MT/0986682-002	SMRT TAXI PTE LTD	SHF 243P	SLC 1382H
3	MT/0990239-002	COMFORT TRANSPORTATION	SHD 3689C	SLV 2508G
4	MT/0990490-001	COMFORT TRANSPORTATION	SHA 2258K	GZ 3691R
5	MT/0989768-002	CITYCAB PTE LTD	SHA 8769M	FBL 6863A
6	MT/0989478-002	COMFORT TRANSPORTATION	SHA 7625B	FC 1037B
7	MT/0989906-002	COMFORT TRANSPORTATION	SHC 1583S	GBB 557B
8	MT/0989127-002	COMFORT TRANSPORTATION	SHD 4936H	SJR 7916Z
9	MT/0989972-002	COMFORT TRANSPORTATION	SHC 8253Z	FY 4003M
10	MT/0989045-002	CITYCAB PTE LTD	SHA 9241L	SKJ 6237L
11	MT/0968779-002	SMRT BUSES LTD	SMB 1430X	SJG 2543G
12	MT/0988223-002	SMRT TAXIS PTE LTD	SHB 833H	SLS 5507E

# COMFORT DELCRO ENGINEERING

A member of COMFORTDELGRO

Workshops  
 89 Lorong Drive Singapore 60266  
 383 Sin Ming Drive Singapore 575717  
 43 Pandan Road Singapore 608285  
 11 Tanjong Pagar Road Singapore 068933  
 21 Serangoon Road Singapore 159127  
 75 Serangoon Road Singapore 159127  
 11 Serangoon Road Singapore 159127  
 11 Serangoon Road Singapore 159127

Date/Time: 05.04.2018 11:57 Page : 1

Team: ARC Repair TP(CFSO)1

**JOB CARD** Sales Order: 3815628

JC NO305138766

CUSTOMER

VMS CITYCAB PTE LTD  
 CUSTOMER NO 7010070  
 ADDRESS 383 SIN MING DRIVE  
 Singapore SINGAPORE 575717  
 L (R) 65551188 (O)  
 (P)

SCOUNT CARD NO.

REGN NO: SHA9241L	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 05.04.2018 10:00
YR OF MANU. 12.11.2015	TARGET DATE
CHASSIS CODE KMHLE41UMGU080608	COMPLETION DATE/TIME:

Accident Date: 04.04.2018  
 NATURE: 3P 04.04.18

## JOB DESCRIPTION

S/NO	LABOR CODE	DESCRIPTION
000040	L	PANEL BEATING
000050	23-502	SPRAYPAINT ON AFFECTED AREA
000060	17-01	CHECK ALL LIGHTING

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Knowledge Slip

Exit Pass

Vehicle No.: SHA9241L  
 License No.: LIMTS

Vehicle No.: SHA9241L

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

### ACCIDENT STATEMENT

Date Of Report	05/04/2018 11:07
Date Of Accident	04/04/2018 12:00
Exact Location Of Accident	BEDOK NORTH AVE 4 OPEN AIR CAR PARK BLK 97
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA9241L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I40
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-18088937MFSH
Cover Note Number	

### Driver

Name of Driver	TAN SOO TECK
NRIC No	S0195459H
Date Of Birth	24/04/1953
Occupation	OUTDOOR
Date Of Driving Pass	15/12/1978
Driving Experience	39 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	610 #07-164 ELIAS ROAD
Postcode	510610
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

#### Details of Police Action

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

#### Circumstances of Accident

SEE POLICE REPORT.

#### Attachment(s)

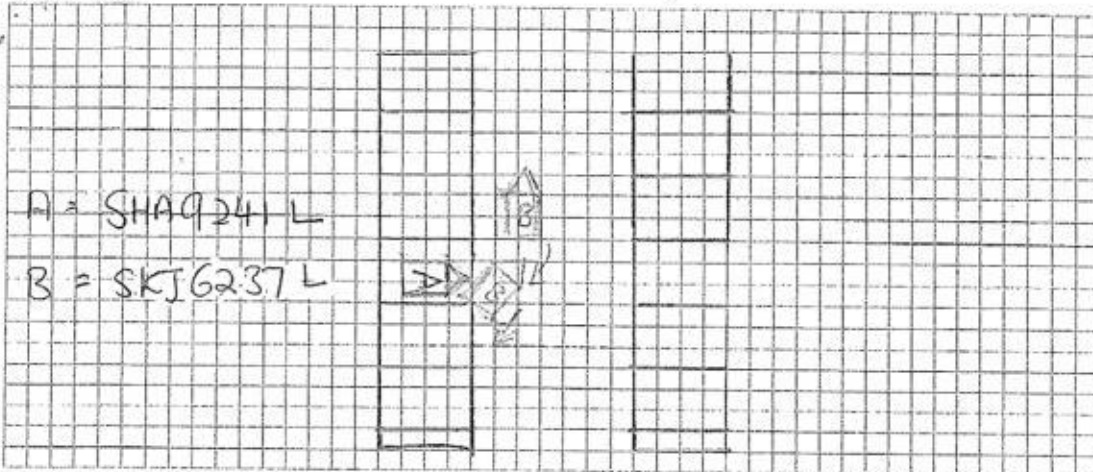
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ6237L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	NOT SURE
No. Of Passenger (Including Driver)	

# Sketch Plan Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to report no. T/20180404/2086

*[The rest of the section is crossed out with a diagonal line.]*

## DECLARATION

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

CITYCAR PT LTD  
CO. REG. NO. 19950280221R  
Policyholder's Signature *[Signature]*  
Date & Time: \_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: \_\_\_\_\_

*[Signature]* 5/4/18  
Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/FIN No: \_\_\_\_\_





**SINGAPORE  
POLICE FORCE**



T/20180404/2086

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20180404/2086

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 04/04/2018 14:39		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN SOO TECK			Address: APT BLK 610 ELIAS RD #07-164 HDB-PASIR RIS SINGAPORE 510610		
ID Type / ID No.: NRIC NO / S0195459H			Contact No.: Home/Office: Mobile: 97862152		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 64	Date of Birth: 24/04/1953	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/04/2018 12:00	Type of Location:
Location: Along Road 1 BEDOK NORTH AVENUE 4 BLOCK 97 CARPARK				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA9241L	Car	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR		Slightly Damaged	0
SHC6505K	Car	KIA	OPTIMA 1.7(A)		No Damage	0

not involved



**SINGAPORE  
POLICE FORCE**



T/20180404/2086

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20180404/2086

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TAN SOO TECK	ID No.	S0195459H
Related Vehicle	SHA9241L (Car)	Contact No.	97862152
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 4/4/18 at about 1140hrs

I went for lunch and parked my taxi (SHA9241L) at the carpark. When I came back at about 1320hrs I realised that my car has been involved in a hit and run. The front bumper has come off and there were scratches on the faring.

A silver cab taxi (SHC6505K) parked opposite my vehicle has a in-car camera on 24/7 that might have captured the culprit.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20180404/2086

3 of 3

Report No. T/20180404/2086

**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:  
TP /  
WONG ZI WEI

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / HRT /  
SI ABDUL KAREEM BIN ABDUL HAGUE  
Contact No.: 65476079

Authentication Stamp

Signature Of Informant:

*[Handwritten Signature]*

Date/Time:  
04/04/2018 14:39

Classification Of Case: SINGAPORE  
POLICE FORCE



*[Handwritten Mark]*



T/20180404/2142

1 of 2

Report No. T/20180404/2142

**Case Summary Form (CSF For NP168)**

Manual NP168 Form Serial No 1

Report Number T/20180404/2142

Vide Report Number T/20180404/2086

Date/Time of Report Made 04/04/2018 17:32

Place Report Lodged Traffic Police Division HQ

Type of Informant Driver

Name of Informant TAN SOO TECK

ID Type / ID No. NRIC NO / S0195459H

Home/Office

Mobile 97862152

Email

Type of Accident Non-Injury / Hit and Run

Drink Drive No

Anyone conveyed by ambulance No

Date/Time of Accident 04/04/2018 12:00

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKJ6237L	Car					0

**Brief Facts.**

I wish to add on that from the in-car camera footage of SHC6505K, it was shown that the vehicle who hit my taxi, SHA9241L, is one SKJ6237L.

# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305138766  
Date : 09/04/18

## FINALIZATION FORM

To : LKK  
Attn : NAZ

Fax :


Vehicle Reg No. : SHA9241L Date of Accident : 04-Apr-18


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

- The repair job shall bill to: NTUC --- SKJ6237L
- 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: 20% \$1,950.00  
**Final Lumpsum Repair cost** **\$1,950.00**
- Estimated normal period for repairs: 2 working days.
- We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
- Thank you for your assistance. We confirm the estimates and finalized amount

Signature :   
Name : LIM T S  
Tel : 62148398  
Fax : 65468156

Signature :   
Name : NAZ  
Date :

## 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:

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
 CUSTOMER: 7010070  
 ADDRESS : CITYCAB PTE LTD  
 383 SIN MING DRIVE  
 SINGAPORE SINGAPORE 575717  
 65551188

JOB NO : 305138766  
 REGN NO : SHA9241L  
 MILEAGE : 0000000000  
 MAKE : HYUNDAI  
 MODEL : I-40  
 DATE OF REGN : 12.11.2015  
 DATE/TIME IN : 05.04.2018 10:00  
 ACCIDENT DATE : 04.04.2018

NTUC - 4S  
 LKK - Calvin

TS

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0103-2322-A	FRT BUMPER	1	1,052.20	20.00	841.76	✓ dented
0002 04-01-0103-2164-G	RADIATOR GRILLE	1	1,480.00	20.00	1,184.00	✓ cracked
0003 04-01-0103-0782-A	HEADLAMP RH	1	1,388.00	20.00	1,110.40	X nn

SUB-TOTAL : 3,136.16

## JOB NATURE

0000 L	PANEL BEATING					<del>280.00</del> 200
0001 23-502	SPRAYPAINT ON AFFECTED AREA					<del>250.00</del> 200
0002 17-01	CHECK ALL LIGHTING					40.00 X nn

SUB-TOTAL : 570.00

TOTAL : 3,706.16

Lim Ye  
 MVA NAME & SIGNATURE  
 DATE :

\_\_\_\_\_  
 SURVEYOR NAME & SIGNATURE  
 DATE :

AUTHORISED : YES / NO

NA2  
 LKK 5/4/18 1335  
 L/S  
 2 days  
 After Repair Photo

**LKK Auto Consultants** hence notify the Repairer of the following:

- 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 submitted to final approval from Insurance Company

Repairer



# 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 describe

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18006335/Ntbe2

73 BRAS BASAH ROAD  
#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 20-04-2018  
189556



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKJ 6237J	Veh. Inspected	SHA 9241L
Policy No.	5088519238	Coverage (\$)	0.00
Claim No.	MT/0989045-002	Excess (\$)	0.00
Assign From		Assign Date	05/04/2018

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMGU080608	Colour	YELLOW
Odometer	434165	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	5 mm
L/H Front Tyre	205/60 R16	HANKOOK	5 mm
R/H Rear Tyre	205/60 R16	HANKOOK	5 mm
L/H Rear Tyre	205/60 R16	HANKOOK	5 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.
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## 5. General Information

Accident Date	04/04/2018	Inspection Date	05/04/2018
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.
--

## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 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. SHA 9241L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	FRT BUMPER	DENTED	1,052.20	1,052.20
1	RADIATOR GRILLE	CRACKED	1,480.00	1,480.00
1	HEADLAMP RH	NOT NECESSARY	1,388.00	-
	LESS 20% DISCOUNT		-784.04	-506.44
			3,136.16	2,025.76
<b>LABOUR</b>				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		320.00	200.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		250.00	200.00
			570.00	400.00
<b>GRAND TOTAL</b>			<b>3,706.16</b>	<b>2,425.76</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>1,950.00</b>

Report Ref No. NS/INC18006335/Ntbe2

MUHAMMAD NAZRIL BIN ABDULLAH

Automotive Assessor

K.K. LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE,  
MInstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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