

REF:

NS/INC18006535/Nwber

NAZ

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle No: _____

at Workshop m/s: _____

of: _____

Insured: GZ 3691RPolicy No: 5092915159 22B2018Claims No: MT/0990490-001

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
X	

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

Lum Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHA 2258K Page: 30 DEC 2011Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: HYUNDAI SONATA : 1991Colour: BLUE A/C: Insured / Std / Nil / NASp. Reading: 750,130 T. Radio: Insured / Std / Nil / NA

Eng No: _____

C No: KMHET41UM3A820447Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD / Rim orTyre Size: F: 215/60R16R: 215/60R16

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

TOYO / YOKO or HANKOOK

Front

Rear

R.Bal. 5 mm R.Bal. 5 mmL.Bal. 5 mm L.Bal. 5 mmD.O.A. 9/4/18 D.O.L. 9/4/18Survey held at: CDGE LOYANG

Des. of Damages: Fnt / Rear / O/S / N/S / UIC / Rooftop or

REAR LEFT, N/S REAR

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

Date / Time Action / Instruction

SHA 2258K - RC3 / A41 / 5000652 / Hwy 3WDAF 090115N7UCGZ 3691R - XL/S12/4/18 FINALIZED Lump sum \$3,450 / 3 DAYS (Red 4400.82, 561)16/4

RECEIVED 17 APR 2019

Date/Time File Pass to:

☐

Preli. Report

☐

Final Report

Date/Time File Return to:

Days Of Repair: 3Resurvey No. of Trip: 2

Survey Fee

Transportation

Add Fee:

☐

Site Insp \$

☐

Interview \$

☐

Tech Insp \$

☐

Web Insp \$

Report Format:

Lump Sum / L.B. : \$

TP

3450/p

160

39

199



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/INC18006535/Nvb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 09-04-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GZ 3691R	Veh. Inspected	SHA 2258K
Policy No.	5092915159	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	09/04/2018

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	09/04/2018	Inspection Date	09/04/2018
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.
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

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 type="radio"/>	5092915159	DIGO CORPORATION PTE LTD	200313006C	GFT	Third Party, Fire & Theft	GZ3691R	GZ3691R	22/03/2018	

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	09/04/2018 11:50
Date Of Accident	09/04/2018 08:00
Exact Location Of Accident	ALONG BKE TWDS PIE BEFORE KJE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA2258K
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-2.0 (A)
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	KAMARUDDIN BIN MD SAHABUDIN
NRIC No	S1586097I
Date Of Birth	11/12/1963
Occupation	OUTDOOR
Date Of Driving Pass	03/09/1984
Driving Experience	33 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	KAMARUDDIN_SAHABUDIN@YAHOO.CO.UK

Address	BLK 307 WOODLANDS AVENUE 1 #07-301
Postcode	730307
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	2
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: : FEMALE

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

REFER 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	GZ3691R
Vehicle Make/Model/Colour	MITSUBISHI FUSO
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	UDDIN SHAHAB
NRIC/Passport Number	G6576646P
Contact Number	83450227
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT RH

No. Of Passenger (Including Driver)

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.
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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

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

A: SHA 2258K
 B: GZ 3691R (Fuso)
 Uddin Shahab
 G6576646P
 HIP: 83450337
 C: GBF 3407K (NO CONTACT)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 9/4/18 at about 08:00 hrs, I was driving on forth lane along BKE towards PIE before the exit to KJE.

Shortly after the van in front of my taxi brake to stopped, and i immediately brake upon seeing this. I able to stop my taxi in time to avoid accident with ahead vehicle, however, I saw a unknown motorcycle hit onto the rear portion of ahead van.

At the same time, I felt an impact from my behind. There is a lorry bearing GZ 3691R collided onto Rear left portion of my taxi.

01 female passenger on board my taxi. No injury at the point of accident.

DECLARATION

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

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

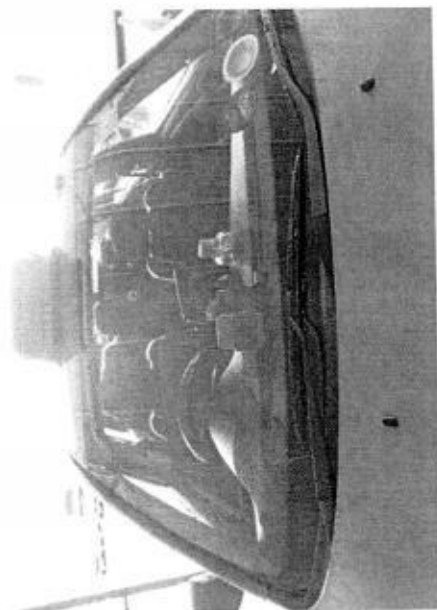
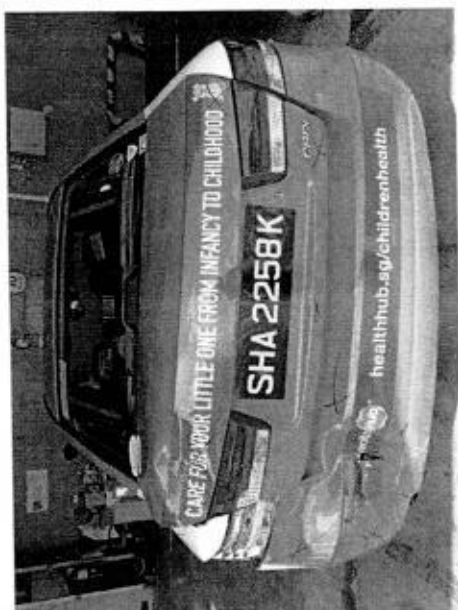
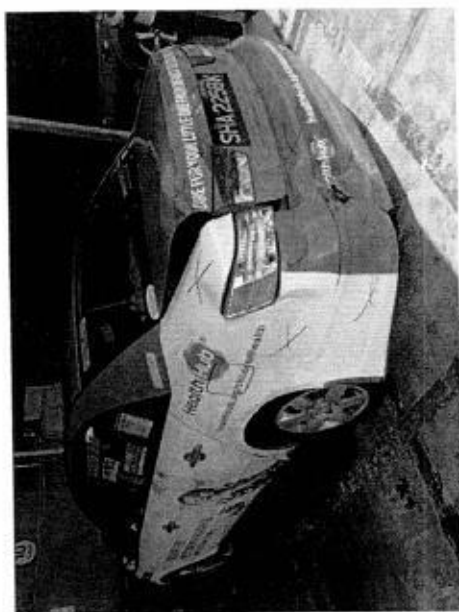
Policyholder's Signature
Date & Time:

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

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

SIATPAC SketchPlanForm_V3

9/4/18



am: IN ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO305139839

TOMER
VS COMFORT TRANSPORTATION PTE LTD
TOMER NO 7010045
RESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755 (R) (O)

REGN NO:
SHA2258K

MILEAGE

MAKE:
HYUNDAI

FUEL

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

MODEL
SONATA

DATE/TIME IN
09.04.2018 10:45

YR OF MANU.
30.12.2011

TARGET DATE

CHASSIS CODE
KMHET41VMBA820447

COMPLETION DATE/TIME:

OUNT CARD NO.

JOB DESCRIPTION

ccident Date: 09.04.2018
ATURE: 3P 09.04.18

/NO LABOR CODE DESCRIPTION

CKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

wledgement Slip

Exit Pass

No.: SHA2258K

FZ NTUC

Vehicle No.:

SHA2258K

of Service Advisor

Signature/Date

Name of Service Advisor

Date

eturned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 2258K

DATE 9/4/2018 11:39

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid		detent ✓	\$ 1349.50
	Boot Lid Rubber			\$ 110.90
	Boot Lid Lock Upper			\$ 132.10
	Boot Lid Lock Lower			\$ 30.30
	Boot Lid Sonata Plate			\$ 43.60
	Boot Lid Hyundai Plate			\$ 24.20
	Boot Lid 'H' Emblem			\$ 26.10
	Boot Lid CRDI Plate			\$ 22.70
	Rear Bumper			\$ 578.40
	Rear Bumper Reinforcement			\$ 483.30
	Rear Bumper Clip			\$ 22.00
	Rear Bumper Sponge			\$ 137.40
	Rear Bumper Under Cover			\$ 185.80
	Rear Bumper Protector (LH/RH) (LH)		\$ 38.00	\$ 76.00
	Rear Panel			\$ 391.80
	Rear Panel Garnish			\$ 95.80
	Rear Fender (LH)			\$ 1,935.90
	Rear Fender Inner Lining (LH)			\$ 74.10
	Rear Windscreen Moulding			\$ 60.00
	L&R Tail Light		broken	\$ 344.00
	SUB TOTAL			\$ 5,779.90
	LESS 20%			\$ 1,155.98
	DISCOUNTED TOTAL			\$ 4,623.92
	Boot Lid Comfort Logo & Tel No. Sticker 10%			\$ 30.00
	Rear Bumper Reverse Sensor 10%			\$ 135.70
	Rear Bumper Advertisement Logo			\$ 50.00
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00
	Rear Windscreen Sealant			\$ 46.00
	Labour Charge			\$ 461.70
	Panel Beating			\$ 1,000.00
	Spray Painting Charge-Bumper/Fender/Bootlid/Rear Panel			\$ 1,000.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00
	Remove/Refix Rear Windscreen Glass			\$ 120.00
	Remove/Refix Reverse Sensor			\$ 120.00
	TOTAL LABOUR			\$ 2,490.00
	ESTIMATE TOTAL			\$ 7,575.62

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

Our Job Ref No : 305139839

Date : 12.04.2018

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

FINALIZATION FORM

To : LKK

Fax :

Attn : NAZ

Vehicle Reg No. : SHA2258K

Date of Accident : 09.04.2018

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

1. The repair job shall bill to: NTUC -- GZ 3691R
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$0.00
 - (b) Labour Charges \$0.00
 - Total for Part-By-Part Repair Cost \$0.00
 - (c) Lumpsum Repair (if applicable)
 - Total for Lumpsum repair cost after Less: 20%
 - Final Lumpsum Repair cost \$3,450.00

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 : FAUZY BIN MOKHTAR

Tel : 62148319

Fax : 65468156

Signature : 

Name : NAZ

Date : 13/4/18

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		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

VEHICLE NO : SHA 2258K

DATE 9/4/2018 11:39

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid			\$ 1,349.50
	Boot Lid Rubber			\$ 110.90
	Boot Lid Lock Upper			\$ 132.10
	Boot Lid Lock Lower			\$ 30.30
	Boot Lid Sonata Plate			\$ 43.60
	Boot Lid Hyundai Plate			\$ 24.20
	Boot Lid 'H' Emblem			\$ 26.10
	Boot Lid CRDI Plate			\$ 22.70
	Rear Bumper			\$ 578.40
	Rear Bumper Reinforcement			\$ 483.30
	Rear Bumper Clip			\$ 22.00
	Rear Bumper Sponge			\$ 137.40
	Rear Bumper Under Cover			\$ 185.80
	Rear Bumper Protector (LH/RH) (LH)	\$	38.00	\$ 76.00
	Rear Panel			\$ 391.80
	Rear Panel Garnish			\$ 95.80
	Rear Fender (LH)			\$ 1,935.90
	Rear Fender Inner Lining (LH)			\$ 74.10
	Rear Windscreen Moulding			\$ 60.00
	Left Taillight			\$ 344.00
	SUB TOTAL			\$ 5,779.90
	LESS 20%			\$ 1,155.98
	DISCOUNTED TOTAL			\$ 4,623.92
	Boot Lid Comfort Logo & Tel No. Sticker			\$ 30.00
	Rear Bumper Reverse Sensor			\$ 135.70
	Rear Bumper Advertisement Logo			\$ 50.00
	Rear Fender Advertisement Logo (LH/RH)	\$	100.00	\$ 200.00
	Rear Windscreen Sealant			\$ 46.00
	Labour Charge			\$ 461.70
	Panel Beating			\$ 1,000.00
	Spray Painting Charge-Bumper/Fender/Bootlid/Rear Panel			\$ 1,000.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00
	Remove/Refix Rear Windscreen Glass			\$ 120.00
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	ESTIMATE TOTAL			\$ 7,575.62

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.

**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/INC18006535/Nvbe2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 23-04-2018



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GZ 3691R	Veh. Inspected	SHA 2258K
Policy No.	5092915159	Coverage (\$)	0.00
Claim No.	MT/0990490-001	Excess (\$)	0.00
Assign From		Assign Date	09/04/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA820447	Colour	BLUE
Odometer	750130	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	HANKOOK	5 mm
L/H Front Tyre	215/60 R16	HANKOOK	5 mm
R/H Rear Tyre	215/60 R16	HANKOOK	5 mm
L/H Rear Tyre	215/60 R16	HANKOOK	5 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S AND N/S REAR PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	09/04/2018	Inspection Date	09/04/2018
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:	3 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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 2258K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID	DENTED	1,349.50	1,349.50
1	BOOT LID RUBBER	NOT NECESSARY	110.90	-
1	BOOT LID LOCK UPPER	NOT NECESSARY	132.10	-
1	BOOT LID LOCK LOWER	NOT NECESSARY	30.30	-
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
1	REAR BUMPER	CRACKED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	CRACKED	483.30	483.30
1	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	TORN	137.40	137.40
1	REAR BUMPER UNDER COVER	DENTED	185.80	185.80
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00	N/S DENTED	76.00	38.00
1	REAR PANEL	NOT NECESSARY	391.80	-
1	REAR PANEL GARNISH	CRACKED	95.80	95.80
1	REAR FENDER (LH)	TO REPAIR	1,935.90	-
1	REAR FENDER INNER LINING (LH)	NOT NECESSARY	74.10	-
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	60.00	-
1	LEFT TAILLIGHT	BROKEN	344.00	344.00
	LESS 20% DISCOUNT		-1,224.78	-670.16
			4,899.12	2,680.64
<u>NETT ITEMS</u>				
1	BOOT LID COMFORT LOGO & TEL NO. STICKER (N)	NECESSARY	30.00	30.00
1	REAR BUMPER REVERSE SENSOR (N)	NECESSARY	135.70	135.70
	LESS 10% DISCOUNT		-	-16.57
			165.70	149.13
<u>SPECIAL NETT ITEMS</u>				
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00

Report Ref No. NS/INC18006535/Nvbe2

**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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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
1	REAR WINDSCREEN (SN)	NOT NECESSARY	46.00	-
			296.00	250.00
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		1,440.00	640.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		1,050.00	600.00
			2,490.00	1,240.00
GRAND TOTAL			7,850.82	4,319.77
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				3,450.00

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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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