ASSIGNMENT Deta: Deta	11413)	REF: NO /	MC18007170/K	11/2		
The Letting Le	une Kolvin	143/				
Type: M.Car / M.Cycle / Bus / Van / Lorry / 16 / Frime Mover / Truck / Trellar or Type: M.Car / M.Cycle / Bus / Van / Lorry / 16 / Frime Mover / Truck / Trellar or Make: Trellar or			ASSIGNMENT	(1/ - 22 /	1 1 30-	2 -2
Type: M.Car / M.Cycle / Bus / Van / Lorry 16 Prime Mover / Truck / Trailer or Water Selection No: Verte Sele	- mc	Date:	72 N 10 N 20 N 10 N 10 N 10 N 10 N 10 N 1			
Truck Trailer or Make: Mak			Type: M.Car /	M.Cycle / Bus / Van /	Lorry / T💋 / Prime Move	r/
Make: Make		S / EVA / INV / MV	Truck /	Trailer or		
Vivint ship mile Sund : SIM 9186B Sulfy PJ a 5097H1 1188			Make:	Hyan Sir	back 0.0	194
Sp. Reading 7 1478 Tiredic the seed of Stid / NI / Na Eng/No: Sp. Reading 7 1478 Tiredic the seed of Stid / NI / Na Eng/No: Conc. Conc.),		Colour	Yeller	A/C: insu Q d/St	d/NI/NA
Engillo: SIM 91868 Siller NJ 5097-11 11685 JODITS - 1901 9 gains PA WT 09 90517 - 007 Imin soud: Excess: Excess: Excess: Excess: Excess: Seeing Incord J dammed / Leaked / Burnt or Brake: Incord J dammed / Leaked / Burnt or Modi: NI / I / I / I / I / I / I / I / I / I /	AAOLE - July 1189			7 44738	T/Radio: Insufed / S	td / NI / NA
Solid Part Section Consistent? Yes or No State Person Consistent? Yes or No State Person Contacted: The Action / Instruction Date / Time Act	TIM GINE			1213		
Gen. Cond: Good / Fg / Poor / Burnt Sieering: Inorga / demmed / Lesked / Burnt or Brake: Inorga / demmed / Lesked / Burnt or Brake: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / demmed / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / Lesked / Burnt or Modi: Nill / SirRim / Sieering: Inorga / Lesked / Burnt or Modi: Nill / SirRim / Siering: Air Air Air Inorga / I				KAUE	THINM(A RJI	386
Steering: Incred 1 Sammed / Leaked / Burnt or Brake: Incoder / Jammed / Leaked / Burnt or Brake: Incoder / Jammed / Leaked / Burnt or Modi: Nil / Sirkim / S	110 mal	1 300110 1101		The second district the second second second second		
Colen 2 transcord Cole				0		
Modi: Nil / S/Rim / S & Aritm or Tyre Size: F: 2.15 / 60 R/6	ıminsud:	Excess:		1		
(Pelicy Condition) (Pelic		the state of the s	Secretary States			
(Policy Condition) R: Certark: The veh had commenced its tepair at the time of inspection. Ital. or Market Value: DAG Acodent Rport: Consistent?: Yes or No SIA / PR Seent: Consistent?: Yes or No DAG Acodent Rport: Consistent Rport: Consistent Rport: Consistent Rport: Consi	akeof Veh:	(6)				-
Remark: The veh had commenced its repair at the time of inspection. NS			Tyre Size;	355 p. 4	20/10/116	
repair at the time of inspection. Sala, or Market Value: Consistent?: Yes or No Survey held at Consistent?: Consistent.: Consistent?: Consistent.: Consi	(Policy Condition)	_			x.e	
Each of Market Value: DAC A Coddent Rport: Consistent?: Yes or No BIA / PR Seen: Consistent?: Yes or No Biat / PR Seen: Consistent?: Yes or No Biat / PR Seen: Consistent?: Yes or No Biat / PR Seen: Do.O.A. 15 / 4/1 Do.O.A. 17 / 4/1 The U/C / Chassis frame / Body Structure affected due to collision. Do.O.A. 17 / 4/1 The U/C /	emark: The veh had commen	iced its N/S	S O/S BS/DUN/E		1 1 1/1	SUMI/
DAC A Coldent Roort: Consistent?: Yes or No SIA / PR Seen: Consistent?: Yes or No SIA / PR Seen: Consistent?: Yes or No Sist Repeirs: days Res.: Yes or No Set Repeirs: days Res.: Yes or No Des. of Days Of Repairs: days Res.: Yes of Days Of Repeirs: days Res.: Yes of No Set Repeirs: days Res.: Yes or No Des. of Days Of Repeirs: days Res.: Yes or No Days Of Repeirs: days Res.: days R	repair at the time of I	nspection.	TOYO / YOI	KO or .	Westfok	
Data Time Action / Instruction Data Time Action / Instruction	al.or Market Value:		Front	0	Rear	
Data Time Action / Instruction RECEIVED 3 ATM ZUIJ Data Time, File Pass to? Profile Resurvey No. of Trip: Survey Fee: Too Transportation: Transportation: 35 Add Fee: Site Insp (\$) \$+88. Si Interview (\$) Photos 195	DACA coldent Roort:	Consistent? : Yes or No	R/Bal.	7 mm	R/Bal.	mm
Date: days Res.: Yes or No D.O.A. 15/4/4 D.O.I. 13/4/8 Survey held at D4E (Loyeas) Des, of Damages: Frt Rear O/S N/S U/C Reoftop or O/S Date: Person Contacted: The U/C Chassis frame Body Structure affected due to collision. Date Time Action Instruction RECEIVED SAFE 2013 Regular Resurvey Regular Resurvey Resur	MAIA / PR Seen:	Consistent?: Yes or No	L/Bal.	+ mm	L/Bal. +	mm
Survey held at Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/G / Rooftop or Des. of Damages: Frt / Rear / O/S / U/G / Rooftop or Des. of Damages: Frt / Rear / O/S / U/G / Rooftop or Des. of Damages: Frt / Rear / O/S / U/G / Rooftop or Des. of Damages: Frt / Rear / O/S / U/G / Rooftop or Des. of Damages: Frt / Rear / O/S / U/G / Rooftop or Des. of Damages: Frt / Rear / O/S / U/G / Rooftop or Damages: Frt / Rear / O/S / U/G / Rooftop or Damages: Frt / Rear / O/S / U/G /		 days Res.: Yes or No	D.O.A. /5	14/18	D.O.I. 17/	4/-8
Date: Person Contacted: Vehicle: IN / OUT Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date: Time Action / Instruction HACH 196 H - CC4 (AAA 1901881) / KINC3C2 SIMP 91868 X Y2 19/8/8 Coden / U/S 9240 / 21420 (Red : 1454-16 ', 3496) RECEIVED 23 AFR 2013 Date: Preli. Report Days Of Repair: 3 Resurvey No. of Trip: Survey Fee: Transportation: 35 Transportation: 35 Add Fee: Site Insp (\$)S+RS_8 Interview (\$) Fhotos	- 1.52,000 * 200-533		Survey held	at	CDGE (Loy	49)
Date: Person Contacted: Vehicle: IN/OUT Date / Time			Des, of Dam	ages: Frt / Rear / O	IS I NIS I UIC I Roofto	p or
Date / Time Action / Instruction 3HK 7760H - CC4 (ANA 17015817 / Klm352) 9JM 91868 × 19/4/8 Cadre 1 4/5 \$1400/19/2. (Red. 1464-16', 34%) RECEIVED 3 ARR 2013 Date Time, File Pass to? 1) 2314 Tup 184 Date Time, File Return to? 2) Add Fee: Site Insp (\$ 988.51) Photos 195	CA / REV / REP. / 241		D. 2001.004.000-1040.00		0/5 Bry-	
The state of the s	Date:Person			/ Chassis frame / B	ody Structure affected d	ue to collision.
Paterline, File Pass to? Daterline, File Return to? Add Fee: Site Insp (\$	Date / Time Action / Instr	ruction				
RECEIVED 28 APR 2013 Deterline, File Pass to? 1) 23 4 Tup 8 Final Report Days Of Repair: 3 Survey Fee: 160 Transportation: 35 Add Fee: Site Insp (\$) SHR_SI Fhotos	The second secon		015819 / Klha362	90		
RECEIVED 7 3 AFR 2013 Date Time, File Pass to? 1) 23 14 Tup 18		0B - X	10 1 115	TI	42	
RECEIVED 7 8 APR 2013 Date Time, File Pass to? 1) 23 14 Tup 18	19/4/8 Contined	45 \$2400/2	12. (Ked: 145	4.16,346)		
Date/line, File Pass to? 1) 23 14 Tup 18t		,				
Date/Time, File Pass to? 1) 23 14 Tup 18t						
DateTime, File Pass to? 1) 23 14 Tup 18t		ACTIVED 9 8 80	0. 2010			
1) 23 4 Tup 8 Survey Fee: 160 Transportation: 35 2) Add Fee: Site Insp (\$)S+RSSI Interview (\$) Photos	KE	PEINER CAU	11 6010			
1) 23 4 Tup 8 Survey Fee: 160 Transportation: 35 2) Add Fee: Site Insp (\$)S+RSSI Interview (\$) Photos						
1) 23 4 Tup 5 Final Report Resurvey No. of Trip: Survey Fee: 160 Transportation: 35 2) Add Fee: Site Insp (\$)S+RS,SI : Interview (\$) Photos	Date/lime, File Pass to?	: Preli. Report	Days Of Re	epair: 3		
DataTime, File Return to? Add Fee: Site Insp (\$)S+RSSI Interview (\$) Photos	DRILL TUDIET				Survey Fee:	
2) Add Fee: Site Insp (\$)s+Rssi	Date/Time, File Return to?	mar report			Transportation:	35
:Interview (\$) Photos			Add Fee: Site	Insp (\$)S+RS,SI	
TP 195	-1		THE REAL PROPERTY.) Photos	
	2	TP		4 0 3 3	Sec. 1	195
		24100/-				



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 IN	ISURANCE CO-OPERATIVE LTD	Ref: NS/INC18007	170/K1tb	
73 BRAS BASAH #05-01 NTUC TRA 189556	ROAD ADE UNION HOUSESINGAPORE			
		Code: INC4		
		:- THIRD PARTY CLAI		
Insured Vel	n. SJM 9186B	Veh. Inspected	SHC 7760H	
Policy No.	5097114689	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign Fro	m	Assign Date	17/04/2018	
2.	Vehicle Part	iculars & Condition		
Make & Mo	del	c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No	le:	Colour		
Odometer		Steering		
Brakes		Modification		
General				
	Condi	tions of Tyres		
	Size	Make	Balance	
R/H Front T	yre		mm	
L/H Front T	yre		mm	
R/H Rear Ty	yre		mm	
L/H Rear Ty	re		mm	
1	Descript	ion of Damages		
5.	Genera	al Information	47	
Accident D	ate 15/04/2018	Inspection Date	17/04/2018	
Survey held	at COMFORTDELGRO ENGINEE	RING PTE LTD		
no-roll max users a	59 LOYANG DRIVE SINGAPORE 508969			
5a.	A CANADA CONTRACTOR	Remarks	LANCE LANCE FOR	
A)THE INSPE	ECTION WAS CONDUCTED ON A"WI DANCE TO YOUR INSTRUCTIONS, V	THOUT PREJUDICE" BAS	IS. SED REPAIRS.	

eBaoTech									Gene	ralClaim
Hello, NAC_PAYA_UBI_80	00601			A STATE OF THE STA			Change La	nguage	Change Passwo	rd · Log Out
My Desktop	Polic	y Query								
Notice of Loss	Policy N	io.				Date of Acc	ident	15/04	/2018 14:31	
	Vehicle	No.(For Motor)	SJM91868							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5097114689	CHAN WEI	581745418	GPC	drivo CLASSIC	S)M9186B	SJM9186B	20/01/2018	19/01/2019
					- 1	Continue				

C/N/O	Incomo Deference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
2	NAT /0080232-002	SMRT TAXIS PTE LTD	SHB 606Y	PC 659U	03/04/2018
	MT/0088033.002	SMRT TAXIS PTE LTD	SHC 4622T	SKK 5387M	26/03/2018
	MT/090/162-002	COMFORT TRANSPORTATION PTE LTD	SHC 3053S	GY 2779J	12/04/2018
	MT/090053-002	COMFORT TRANSPORTATION PTE LTD	SHA 7586E	SJE 7264P	12/04/2018
	MT/0981684-003	SMRT TAXIS PTE LTD	SHD 6453X	PA 9223U	08/02/2018
	MT/0990655-002	COMFORT TRANSPORTATION PTE LTD	SHC 8854P	SKG 3498K	16/4/2018
	MT/0990517-002	CITYCAB	SHC 7760H	SJM 9186B	15/4/2018
1	MT/0990876-002	COMFORT TRANSPORTATION PTE LTD	SH 6210D	SLB 9287C	17/4/2018

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 witholding 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.
- 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.

40	\sim 1	ne	мт е	$T \wedge T$	-161	- 61	•
AC	u	ы	NT S	HAU.	-111	-1	

Date Of Report

16/04/2018 14:39

Date Of Accident

15/04/2018 14:25

Exact Location Of Accident

BOON TAT ST TWDS X JUNCTION ROBINSON RD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHC7760H

Insured/Policyholder

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

SONATA

Exact Purpose for which vehicle was being used at

Are you claiming under your own insurance policy

time of accident

NO

for repair to your vehicle?

THIRD PARTY

If No, Please state action to be taken

TAXI

Vehicle Category

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

MOK KWEE SEOW

NRIC No

S1236981F

Date Of Birth Occupation 02/08/1957 OUTDOOR

Date Of Driving Pass

07/07/1978

Driving Experience

39 YEARS AND 9 MONTHS

Gender

MALE

Mobile Number

.....

Fax Number Contact Number

EMail Address

MOKSUNNY@HOTMAIL.COM

Address

497J 06-74

Postcode

527497

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

RAINING

Road Surface

WET

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

NO

ambulance?

YES

Was any other material or property damaged? 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?

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

SJM9186B

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category

CHAN WEI LOON

NRIC/Passport Number

S8174541B

Contact Number

Name of Driver

Address

Postcode

Insurance Company Name

Nature Of Damage

LEFT FRT

No. Of Passenger (Including Driver)

		Sketch Pla	n Pg. 1		
ETCH PLAN			28		
ETCH PLAN	HHHH	HHH	HHH		Healin San
					Bon at
	Polymer				
	THE BUNSON	V KA	A		
(A) 3HC	11460 H	-0			
B) STW	191868	1 12 1	1		
		G G			
ESCRIBE CIRCUMST	TANCES OF THE ACCIDI	ENT	dan) is book alternative for		
			14.25 hr	I vel	A
	was driv	my along	Roon tat e	h twee	Lober
	PA V	1 , , ,	Frank w	0.00	>~L 1001
	100 X	Lunchy	+ com + co	aus m	3 - (400
	going &	hiver ut 9	udderly U	eh B f	oun I long
	0				
	Cut o	unces to	2rt lane	to meet	a a left
					CA
	twn.	veh-13	I am only	an g	o Shrughot
	at tu	Dant	of accident	- 7 we	n A NO
	W. 1	9 PO110	designed	4_ 0-	
	passar	ym.			
		U			
		2			

DECLARATION

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

COMFORT TRANSPORTATION PTE LTC CO RSG NO 1993038218 V

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.:

GLABRAC SketchPlanForm_V3

Sketch Plan Pg. 2

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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
- 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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)
 - (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")
- 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
- 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.
- 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.
- 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 N.S. Maniam (,50)

(ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION FIL -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

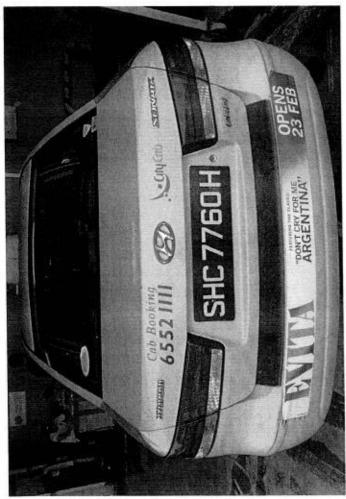
Name:

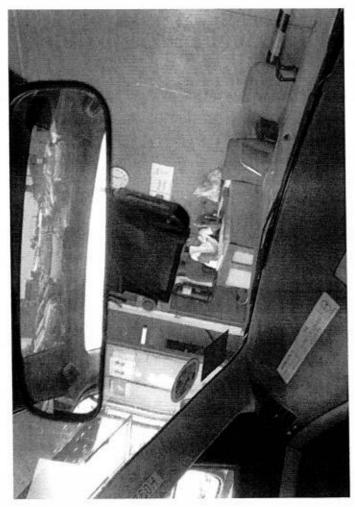
NRIC/FIN No.:

GIANIAC ShetchPlanform_V3



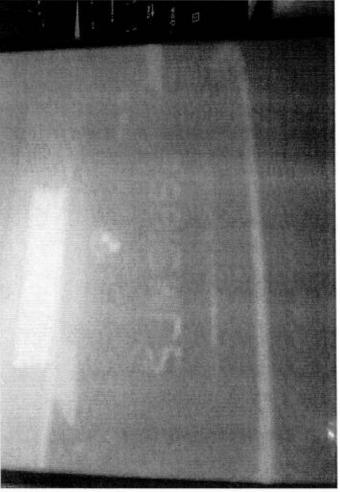














A member of COMFORTDELGRO

Date/Time: 16.04.2018 16:25

Page: 1

leam:	ARC Repair TP(CFSO)1	JOB CARD S	JOB CARD Sales Order:	
STOMER		n anid	REGN NO.C7760H	MILEAGE
/MS STOMER	CITYCAB PTE LTD 7010070	manus	MAKE : HYUNDAI	FUEL E1/2F
DRESS	383 SIN MING DRIVE Singapore SINGAPORE 57	5717	MODEL SONATA 16	DATE/TIME IN 04.2018 12:25
(R)	65551188 (0)		YR OF MANU. 30.01.2013	TARGET DATE
SCOUNT	CARD NO.	(B)	CHASSIS CODE KMHET41VMCA831386	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 15.04.2018 NATURE: 3P 15.04.2018

S/NO

LABOR CODE

DESCRIPTION

NTIC- tax; Right Pen damage

HECKED & PASSED OUT BY:							
SERVICE ADVISOR	CUSTOMER'S	SIGNATURE					
rowledgement Slip	Exit Pass						
e: lo.: shc7760H LARRY	Vehicle No.: SHC7760H						

ie of Service Advisor

Signature/Date

Name of Service Advisor

Date

To be kept by Security Guard

e returned to Service Reception upon collection

Yourc

CITY CAB PTE LTD

VEHICLE NO: SHC 7760H

MAKE

DATE 16/4/2018 15:03

DOA: 15.04.18

DEL	: HYUNDAI SONATA		4: (5.04.	_	1 mount	1
Qty	Parts Description/ Labour	Type	Unit Price	\rightarrow	Amount	
	Rear Door (RH)			\$	1,294.70	
	Rear Door Outer Handle (RH) × 4-7			\$	39.60	
	Rocker Panel Outer Garnish (RH)			S	463.40	
	Rear Wheel Hup-Cap (RH) Rear Fee Sa (PH) X75 SUB TOTAL			S	145.00	
	- 1 course ment					
	Ker fee de (1941) XIII SUBTOTAL			s	1,942.70	1
	LESS 20%			\$	388.54	
	DISCOUNTED TOTAL			S	1,554.16	
					347347#18	
	Rear Fender Advertisement Logo (RH)			s	100.00	No
	Rear Door Advertisement Logo (RH)			S		N
	Rear Door Tel No. Sticker (RH)			\$	10.00	
	Real Bool Tel No. Stekel (RII)			46395	95000000000	
				S	210.00	
	Labour Charge				600	
	Panel Beating-Repair Fender			\$	1.000.00	
	Spray Painting Charge			\$	750.00	1
	Wiring Charge			S	50.00	×
	Tuff Kote			s	50.00	
	Remove/Refix Reverse Sensor			S	120.00	1
	and the state of t			S		Ľ
	Transfer of Door			3	120.00	ľ
	TOTAL LABOUR			\$	2,090.00	1
	ESTIMATE TOTAL			S	3,854.16	
	Ka h ((KG)	the R	iuto Consultants hence epairer of the following survey before/after spray p	Doutole	1	
NO	Kahr ((KG) 17/4/18 1055hs 3 hys	• To re • To d • Par • Thi	survey belocated part(s) duri splay damaged part(s) duri s prices are subject to conf d party survey is on a "With the party survey is on a "With the party survey is on a "With	imation nout Preju owed	dice basis	
149	Athe Report pll	* St	illegal modification(s) is all optementary item(s) must be subject to final approval fro nowledged by Repairer	e resurve m Insuran	ice Company	
	////	Sig	nature:			1
		De	113.00	_		

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our.	59 Loyang Drive S Fax: 6546 8156					
Date					59 Loya	DelGro Engineering Pte Ltd ing Drive Singapore 508969 46 8156
FINALIZATION FORM						
То	1	L	KK		Fax:	
Attn	111	K	ALVIN			
Vehi	cle Reg No	: SHC77	60H	Dat	e of Accident:	15.04.2018
The	survey and	estimates of the	e repairs of the a	shove-mentione	d vehicle are as f	follows -
1.	The repa	ir job shall bill to):	NTUC		SJM9186B
2.	The final	ized amount sha	all be:			
	(a) S ₁	pare Parts after	List discount			
	(b) La	abour Charges				
	To	otal for Part-By-	-Part Repair Co	st		
	To	umpsum Repair otal for Lumpsum nal Lumpsum f	n repair cost afte	or Less:		\$2400.00
3.		d normal period	8	*	orking days.	
3. 4.	We shal		8	*		no reply from you
	We shal within 7	I treat the above	e amount as Co	orrect and Con		3
4.	We shall within 7 Thank you Signatur Name	I treat the above working days ou for your assis	e amount as Co	orrect and Con	firmed if there is the confirm the est halized amount gnature:	3
4.	We shal within 7 Thank you Signatur Name Tel	I treat the above working days ou for your assis	e amount as Co	orrect and Con	firmed if there is the confirm the est halized amount gnature:	kaluk
4.	We shal within 7 Thank you Signatur Name Tel	treat the above working days ou for your assistance: Example 1: 6214 8316 Example 2: 6546 8156	e amount as Co	orrect and Con	firmed if there is the confirm the est halized amount gnature:	kaluk
4.	We shall within 7 Thank your Signatur Name Tel Fax	treat the above working days ou for your assistant to the control of the control	e amount as Co	orrect and Con	firmed if there is the confirm the est halized amount gnature:	kaluk
4. 5.	We shal within 7 Thank you Signatur Name Tel Fax	treat the above working days ou for your assistant to be a second or a second of the s	e amount as Co	Document Attached	firmed if there is the confirm the est alized amount gnature : ame : ate :	Kaluk 19/4/18
4. 5.	We shal within 7 Thank you Signatur Name Tel Fax Official Us	treat the above working days ou for your assis e:	e amount as Co	Document Attached Yes or No.	firmed if there is the confirm the est alized amount gnature : ame : ate :	Kaluk 19/4/18
4. 5.	We shal within 7 Thank you Signatur Name Tel Fax Official Us	treat the above working days ou for your assis e: : La : 6214 8316 : 6546 8156 e Only m P/Day ome Paid	e amount as Co	Document Attached Yes or No.	firmed if there is the confirm the est alized amount gnature : ame : ate :	Kaluk 19/4/18
4. For 1. F 2. L 3. S 4. L	We shal within 7 Thank you signatur Name Tel Fax Official Us Ite Rental Rate Loss of Inco	treat the above working days ou for your assis e: : 6214 8316 : 6546 8156 e Only m P/Day ome Paid s Fee	e amount as Co	Document Attached Yes or No.	firmed if there is the confirm the est alized amount gnature : ame : ate :	Kaluk 19/4/18
4. For 1. F 2. L 3. S 4. L 5. M	We shal within 7 Thank you signatur Name Tel Fax Official Us Ite Rental Rate Loss of Inco	treat the above working days ou for your assis e: : 6214 8316 : 6546 8156 e Only m P/Day ome Paid s of Fee es (on behalf	e amount as Co	Document Attached Yes or No.	firmed if there is the confirm the est alized amount gnature : ame : ate :	Kaluk 19/4/18



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315





NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18007170/K1tbn2 73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 26-04-2018 189556 Code: INC4 Policy Particulars :- THIRD PARTY CLAIM 1. SHC 7760H Veh. Inspected Insured Veh. SJM 9186B Coverage (\$) 0.00 Policy No. 5097114689 0.00 Claim No. MT/0990517-002 Excess (\$) 17/04/2018 Assign From **Assign Date** Vehicle Particulars & Condition 2. HYUNDAI SONATA 1991 Make & Model C.C HIDDEN 2013 Year of Reg. Engine No. YELLOW KMHET41VMCA831386 Colour Chassis No. 754338 IN ORDER Odometer Steering STANDARD ALLOY RIM IN ORDER Modification Brakes FAIR General **Conditions of Tyres** 3. Balance Size Make 7 mm WEST LAKE 215/60 R16 R/H Front Tyre WEST LAKE 7 mm L/H Front Tyre 215/60 R16 WEST LAKE 7 mm 215/60 R16 R/H Rear Tyre WEST LAKE 7 mm 215/60 R16 L/H Rear Tyre **Description of Damages** 4. THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS. General Information 5. 17/04/2018 Inspection Date 15/04/2018 **Accident Date** COMFORTDELGRO ENGINEERING PTE LTD Survey held at 59 LOYANG DRIVE SINGAPORE 508969 Remarks 5a. A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. **Estimate Days of Repair** 5b. 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





ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 7760H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			31/72/
1	REAR DOOR (RH)	DENTED	1,294.70	1,294.70
1	REAR DOOR OUTER HANDLE (RH)	TO REPAIR	39.60	
1	ROCKER PANEL OUTER GARNISH (RH)	CRACKED	463.40	463.40
1	REAR WHEEL HUP-CAP (RH)	GRAZED	145.00	145.00
1	REAR FENDER (RH)(NPA)	TO REPAIR		
	LESS 20% DISCOUNT		-388.54	-380.62
			1,554.16	1,522.48
	SPECIAL NETT ITEMS			
1	REAR FENDER ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
1	REAR DOOR ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
1	REAR DOOR TEL NO STICKER (RH)(SN)	NECESSARY	10.00	10.00
			210.00	210.00
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		1,290.00	650.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		800.00	620.00
			2,090.00	1,270.00
	GRAND TOTAL		3,854.16	3,002.48

RECOMMENDED COST OF LUM	P SUM REPAIRS	2,400.00
(TO ITS PRE-ACCIDENT CONDIT	TION)	
(CONFIRMED)		

Report Ref No. NS/INC18007170/K1tbn2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

M

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser