

10/1/13  
Surve: Kalvin

REF: NS/INC18007935/KIRb

### ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimate ☒ Cost

OD / TP / NS / TP RES / OD RES / EVA / INV / MV

To Insp ☒ Vehicle No: \_\_\_\_\_

at Work ☒ Shop n/s

of \_\_\_\_\_

Insured: SHD 1776Y

Policy No: 5095103893 20-10-2017

Claims No: 07/0992320 002

Sum Ins ☒ Und: \_\_\_\_\_

Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident 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

Vehicle: IN / OUT

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

Veh No: \_\_\_\_\_

SHA 4547M

Yr Regn: \_\_\_\_\_

22 / 27

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: \_\_\_\_\_

Lyda Pirs

C.C

1728

Colour: \_\_\_\_\_

Blue

A/C: \_\_\_\_\_

Insured / Std / NI / NA

Sp. Reading: \_\_\_\_\_

162166

T/Radio: \_\_\_\_\_

Insured / Std / NI / NA

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

C/No: \_\_\_\_\_

J70KBJF4963559544

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size: \_\_\_\_\_

F: \_\_\_\_\_

195/65R15

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

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

Front

Rear

R/Bal. \_\_\_\_\_

7

mm

R/Bal. \_\_\_\_\_

2

mm

L/Bal. \_\_\_\_\_

7

mm

L/Bal. \_\_\_\_\_

7

mm

D.O.A. \_\_\_\_\_

22/4/18

D.O.I. \_\_\_\_\_

30/4/18

Survey held at

CDGE (Loyang)

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

Rear

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

Date / Time	Action / Instruction		
	SHA 4547M - CS3/FC14010256/KIRb3	90A-2905114	Inc
	SHD 1776Y - CS3/TML14003906/Hlvms312	DIA-0805114	11
3/5/18	Contract P/P \$1484 / 2 Pys.		
	Red: 8345.70, 19%		
	P/P Car sum		
	08/04/18		
	RECEIVED 05 MAY 2018		

Date/Time, File Pass to?

☐

: Preli. Report

1)

Lyda Pirs

☒

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: \_\_\_\_\_

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech (\$

Survey Fee: \_\_\_\_\_

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

\$ + RS. \$1

Photos

Others



# 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/INC18007935/K1rb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 30-04-2018

189556



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHD 1776Y	Veh. Inspected	SHA 4547M
Policy No.	5095103893	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	30/04/2018

## 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	28/04/2018	Inspection Date	30/04/2018
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.
--

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"/>	5095103893	PREMIER TAXIS PTE. LTD.	200304975H	GFT	Third Party	SHD1776Y	SHD1776Y	20/10/2017	

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/0992386-002	COMFORT TRANSPORTATION PTE LTD	SHC 2815S	SLM 5072Z	29/04/2018	\$ 6,197.34	\$ 3,250.00
2	MT/0992320-002	COMFORT TRANSPORTATION PTE LTD	SHA 4547M	SHD 1776Y	28/04/2018	\$ 1,334.30	\$ 1,484.00
3	MT/0992554-002	COMFORT TRANSPORTATION PTE LTD	SHC 7707M	SLL 4056H	29/04/2018	\$ 7,919.90	\$ 3,600.00
4	MT/0992223-002	COMFORT TRANSPORTATION PTE LTD	SHC 8354R	SJS 8251X	27/04/2018	\$ 6,311.44	\$ 1,850.00

Claim received from LKK Auto

## 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	30/04/2018 09:58
Date Of Accident	28/04/2018 15:50
Exact Location Of Accident	CTE TWDS ANG MO KIO BEFORE JALAN BAHAGIA EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA4547M
<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

### 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	OH KIM BENG
NRIC No	S1276286J
Date Of Birth	25/11/1957
Occupation	OUTDOOR
Date Of Driving Pass	16/03/1978
Driving Experience	40 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address

BLK 629 SENJA ROAD #04-202

Postcode

670629

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?

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)

5

Passenger 1

NAME: : -

GENDER: : FEMALE

Passenger 2

NAME: : -

GENDER: : FEMALE

Passenger 3

NAME: : -

GENDER: : FEMALE

Passenger 4

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

PLS REFER TO 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

SHD1776Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver	CHIN CHEE SIN
NRIC/Passport Number	S1204683I
Contact Number	96388868
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	REAR AND FRT
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKQ9206U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BERNARD CHIN YIOW-MIN
NRIC/Passport Number	S7218363J
Contact Number	90010920
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
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.
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 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:

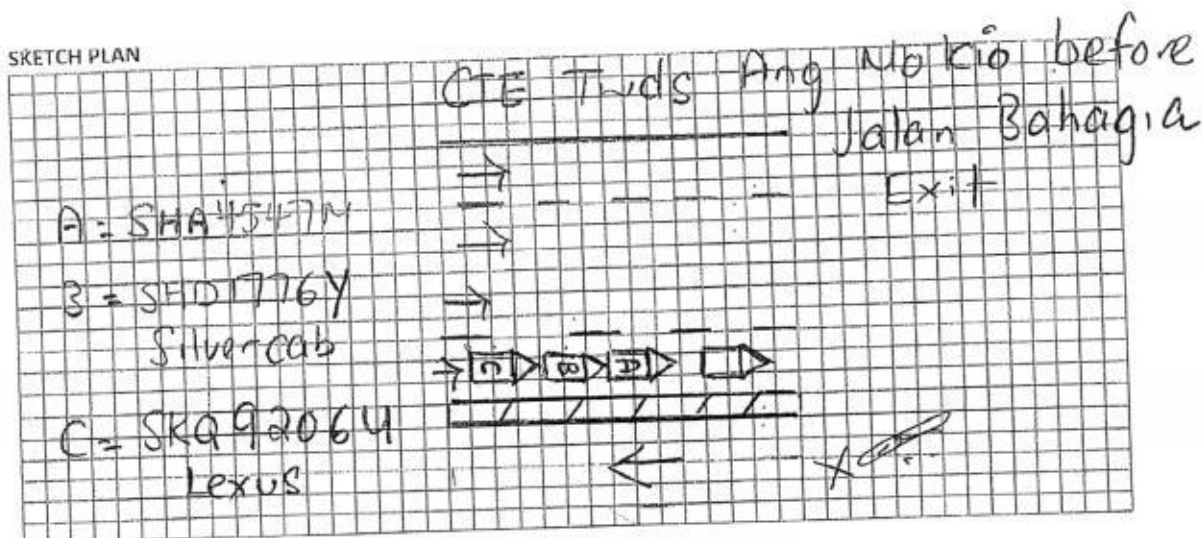
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

GIA/IMC SketchPlanForm\_V3





## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/4/18 @ abt 1550 hrs, I was driving along lane 1 CTE towards Ang Mo Kio direction before Jalan Bahagia exit. In front vehicle suddenly braked and stopped. I immediately braked and stopped as well.

Suddenly I felt an impact followed by a jerk coming from behind. Shortly after I stepped out from my taxi to check. Found that a Silvercab SHD1776Y came from behind collided on the rear portion of my taxi and there's another car SKQ92064 also involved in this chain collision.

04 female passengers on board my taxi. No injury reported at the point of accident.

## DECLARATION

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

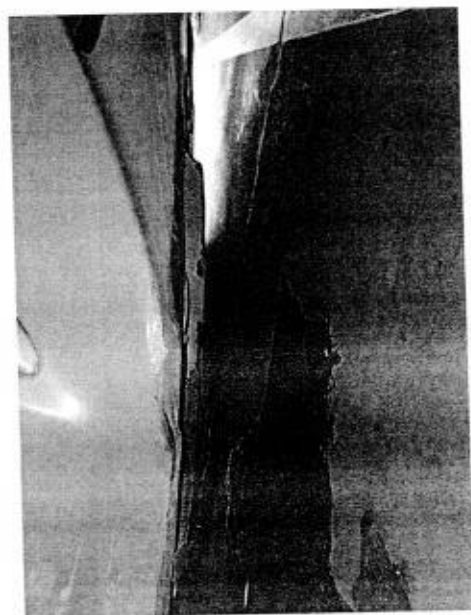
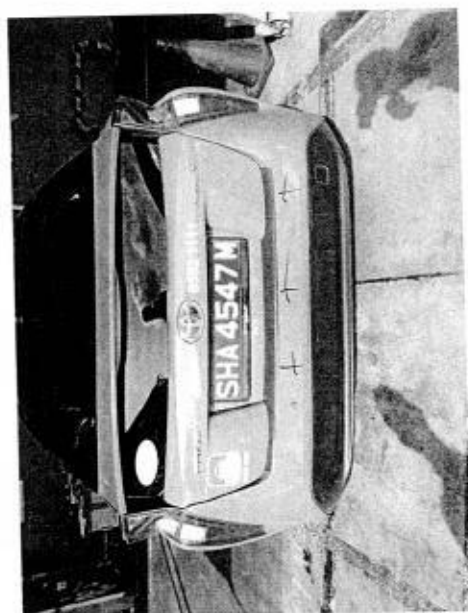
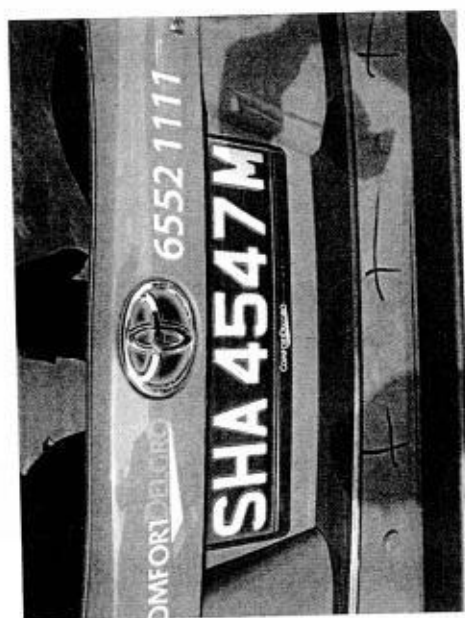
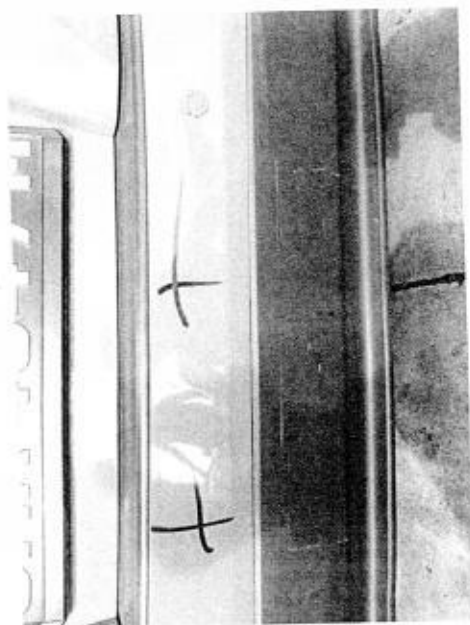
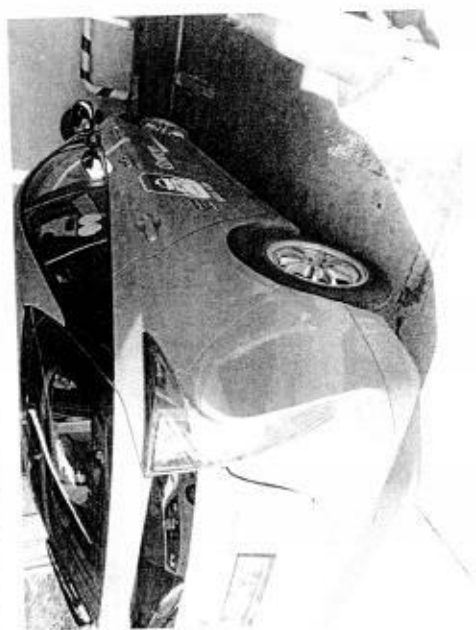
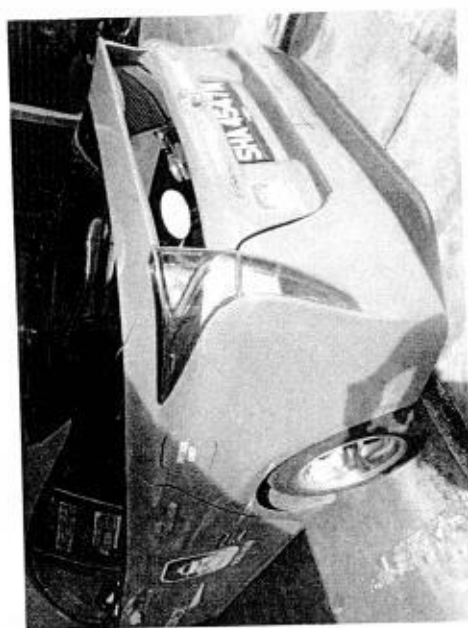
COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

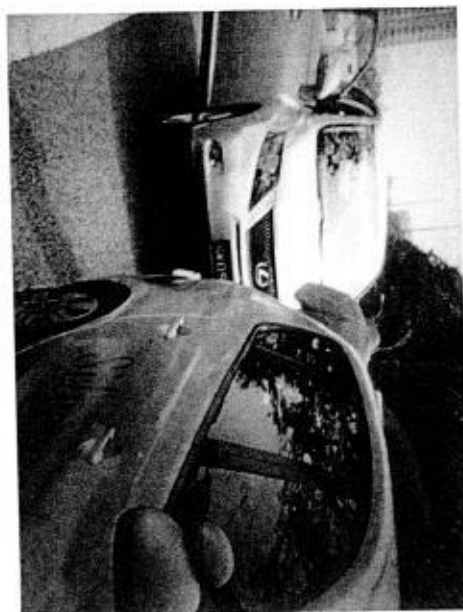
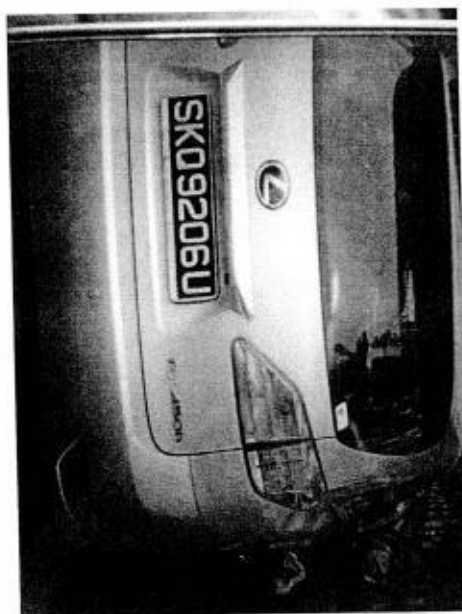
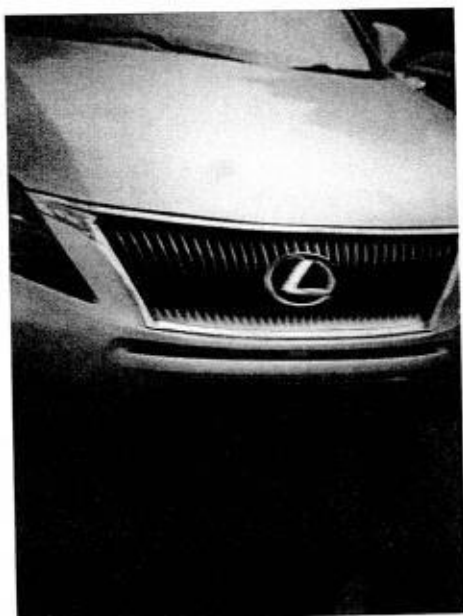
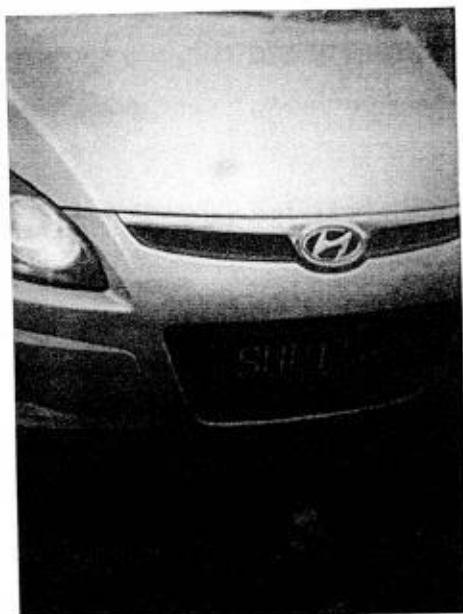
Policyholder's Signature  
Date & Time:

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

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

Teo Yen Yee





# COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

## ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 578701

Mainline + 65 6383 8280 Facsimile + 65 6280 9755

Workshops

29 Loring Drive Singapore 538988

383 Sin Ming Drive Singapore 573717

45 Pandan Road Singapore 608286

93 Raffles Road Singapore 508553

24 Serangoon Loop Singapore 758136

7 Sungai Kadut Way Singapore 728791

6 Defu Avenue 1 Singapore 536537

Date/Time: 30.04.2018 12:10

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO 305154741

CUSTOMER

R/MS COMFORT TRANSPORTATION PTE LTD

JSTOMER NO 7010045

ADDRESS 383 SIN MING DRIVE

Singapore SINGAPORE 575717

L: (R) 65508755 (O)

(P)

SCOUT CARD NO.

REGN NO:

SHA4547M

MILEAGE

MAKE:

TOYOTA

FUEL

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

MODEL

PRIUS HYBRID(G4)30.04.2018 09:50

YR OF MANU

29.06.2017

TARGET DATE

CHASSIS CODE

JTDLK3FU903559544

COMPLETION DATE/TIME:

### JOB DESCRIPTION

Accident Date: 28.04.2018

NATURE: 3P 28.04.2018

### LABOR CODE

### DESCRIPTION

NTUC - Taxi Rear damage  
LKK/Kehni -

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.:

SHA4547M

LARRY

Vehicle No.:

SHA4547M

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

**COMFORTDELGRO ENGINEERING PTE LTD**  
**REPAIR ESTIMATE\***

VEHICLE NO : SHA4547M

MAKE : TOYOTA

MODEL : PRIUS

Date : 30.04.2018

Qty	Parts Description / Labour	Type	Unit Price	Amount
1	REAR BUMPER — <i>Rebond</i>			458.60
1	REAR BUMPER UNDER COVER — <i>col</i>			552.60
10	REAR BUMPER CLIPS — <i>see</i>			22.00
	<i>Rear Bumper Reinforcement — Bond</i>			318.80
SUB TOTAL				\$ 1,033.20 <i>1352</i>
LESS 25%				514.60
DISCOUNTED TOTAL				\$ 518.60 <i>1014</i>
1	Reverse Sensor — <i>X see</i>			135.70
1	Rear Bumper Rubber Mat — <i>see</i>			50.00
				\$ 185.70
Labour Charge				200
Panel Beating				\$ 250.00
Spray Painting Charge				\$ 200 250.00
Wiring Charge				\$ 50.00
Remove/refix reverse sensor				\$ 20 80.00
TOTAL LABOUR				\$ 630.00
ESTIMATE TOTAL				\$ 1,334.30 <i>1825.70</i>

LKK Auto Consultants hereby 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
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

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 PTE LTD  
REPAIR ESTIMATE

Date: 03.05.2018  
Time: 09:41:31  
Page: 1

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

JOB NO : 305154741  
REGN NO : SHA4547M  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(G4)  
DATE OF REGN : 29.06.2017  
DATE/TIME IN : 30.04.2018 09:50  
ACCIDENT DATE : 28.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0302-2282-G	PRIG4 COVER REAR BUMPER	1	458.60	25.00	343.95
0002 04-01-0302-2267-G	PRIVC BUMPER PIECE	10	22.00	25.00	16.50
0003 04-01-0302-2287-G	PRIG4 GUARD-REAR BUMPER C	1	552.60	25.00	414.45
0004 04-01-0302-2288-G	PRIG4 REINFORCEMENT SUB-A	1	318.80	25.00	239.10

SUB-TOTAL : 1,014.00

JOB NATURE

0000 L	Rear Bumper Rubber Mat	50.00
0001 L	PANEL BEATING	200.00
0002 23-502	SPRAYPAINT ON AFFECTED AREA	200.00
0003 L	REMOVE/REFIX REVERSE SENSOR	20.00

SUB-TOTAL : 470.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 03.05.2018

Time: 09:41:31

Page: 2

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

JOB NO : 305154741  
REGN NO : SHA4547M  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(C  
DATE OF REGN : 29.06.2017  
DATE/TIME IN : 30.04.2018 09:50  
ACCIDENT DATE : 28.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,484.00

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :

# COMFORTDELGRO ENGINEERING

Our Job Ref No . 305154741

Date : 3. May. 2018

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA4547M

Date of Accident: 28.04.2018

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

- The repair job shall bill to: NTUC SHD1776Y (Premier)
- The finalized amount shall be:

(a) Spare Parts after List discount	\$1,064.00
(b) Labour Charges	\$420.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$1,484.00</b>
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less:	
Final Lumpsum Repair cost	
- 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 : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : KALVIN

Date : 3/5/18

### 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/INC18007935/K1rbn2

73 BRAS BASAH ROAD  
#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 11-05-2018  
189556



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHD 1776Y	Veh. Inspected	SHA 4547M
Policy No.	5095103893	Coverage (\$)	0.00
Claim No.	MT/0992320-002	Excess (\$)	0.00
Assign From		Assign Date	30/04/2018

## 2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU903559544	Colour	BLUE
Odometer	162166	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	BRIDGESTONE	7 mm
L/H Front Tyre	195/65 R15	BRIDGESTONE	7 mm
R/H Rear Tyre	195/65 R15	BRIDGESTONE	7 mm
L/H Rear Tyre	195/65 R15	BRIDGESTONE	7 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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## 5. General Information

Accident Date	28/04/2018	Inspection Date	30/04/2018
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.
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## 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



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 4547M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	DEFORMED	458.60	458.60
1	REAR BUMPER UNDER COVER	CUT	552.60	552.60
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
1	REAR BUMPER REINFORCEMENT	BENT	318.80	318.80
	LESS 25% DISCOUNT		-338.00	-338.00
			1,014.00	1,014.00
<b>SPECIAL NETT ITEMS</b>				
1	REVERSE SENSOR (SN)	SERVICEABLE	135.70	-
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
			185.70	50.00
<b>LABOUR</b>				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		380.00	220.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		250.00	200.00
			630.00	420.00
<b>GRAND TOTAL</b>			<b>1,829.70</b>	<b>1,484.00</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>1,484.00</b>

Report Ref No. NS/INC18007935/K1rbn2

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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