



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/INC18007937/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.	SJS 8251X	Veh. Inspected	SHC 8354R
Policy No.	5098439336	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

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5. General Information

Accident Date	27/04/2018	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

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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"/>	5098439336	NG SOON SENG	S6819311G	GPC	drive CLASSIC	SJS8251X	SJS8251X	09/03/2018	08/03/2019

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 281SS	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	28/04/2018 10:46
Date Of Accident	27/04/2018 20:40
Exact Location Of Accident	TIONG BAHRU RD X ZION RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8354R
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	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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
Driver	
Name of Driver	ENG BUCK HIN
NRIC No	S0213830A
Date Of Birth	13/01/1953
Occupation	OUTDOOR
Date Of Driving Pass	06/06/1979
Driving Experience	38 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	BROADEN@SINGNET.COM.SG

Address	529 08-592 BEDOK NORTH STREET 3
Postcode	460529
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	CLEAR
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 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)	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)

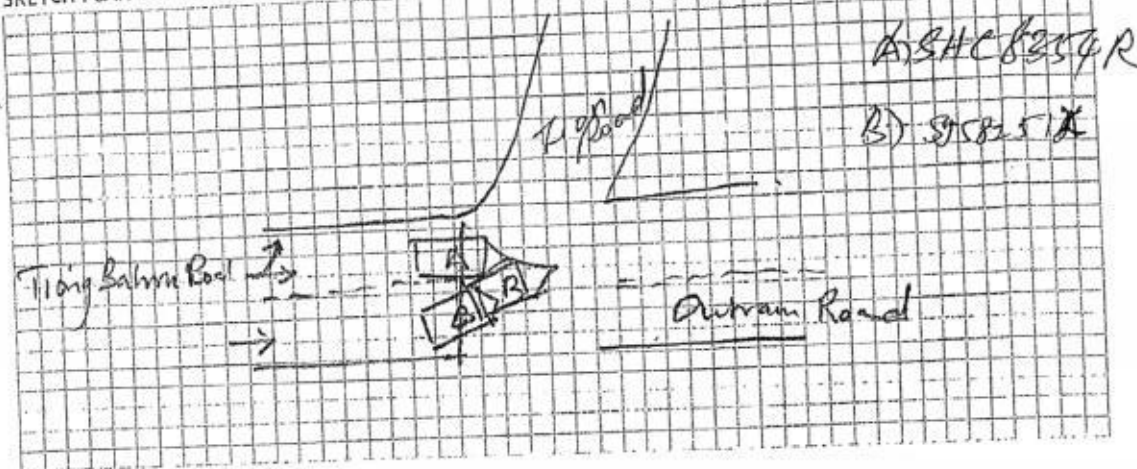
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJS8251X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG SOON SENG
NRIC/Passport Number	S6819311G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LEFT CENTRE
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/4/18 at about 2040hrs while I was A was travelling straight when the traffic lights turned green. My vehicle was going towards Outram Road along my lane (left turn + straight) when Veh B from the right lane (straight only lane) filtered to the left into my lane and caused a collision that damaged the right front portion of my vehicle.

DECLARATION

I/We declare the foregoing particulars are true in every respect.
OMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)

Reporting Centre Personnel's Signature
Name:

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.

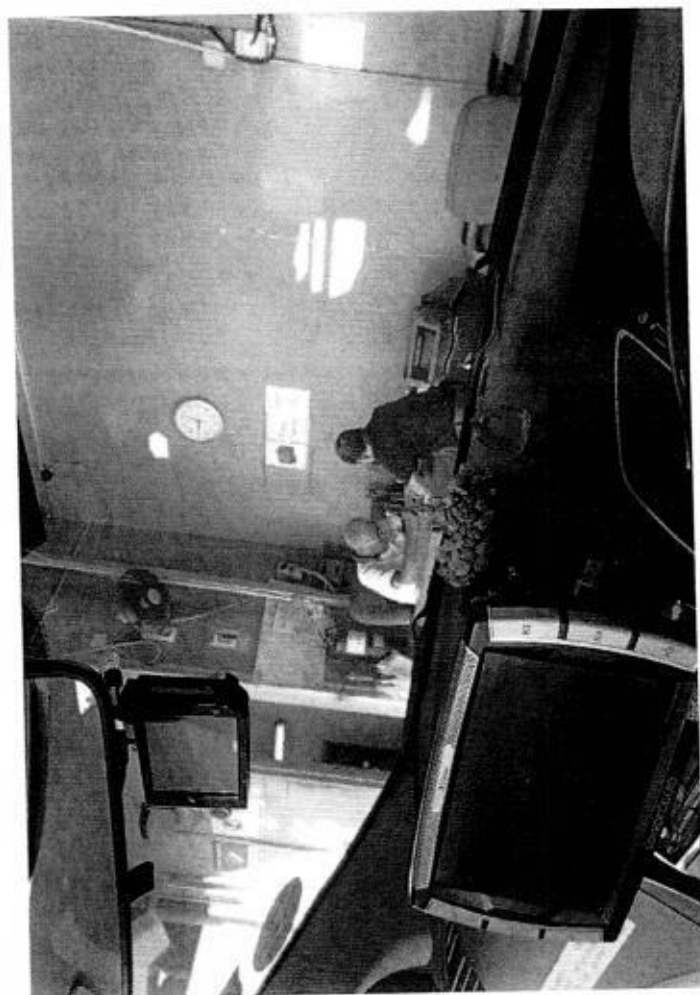
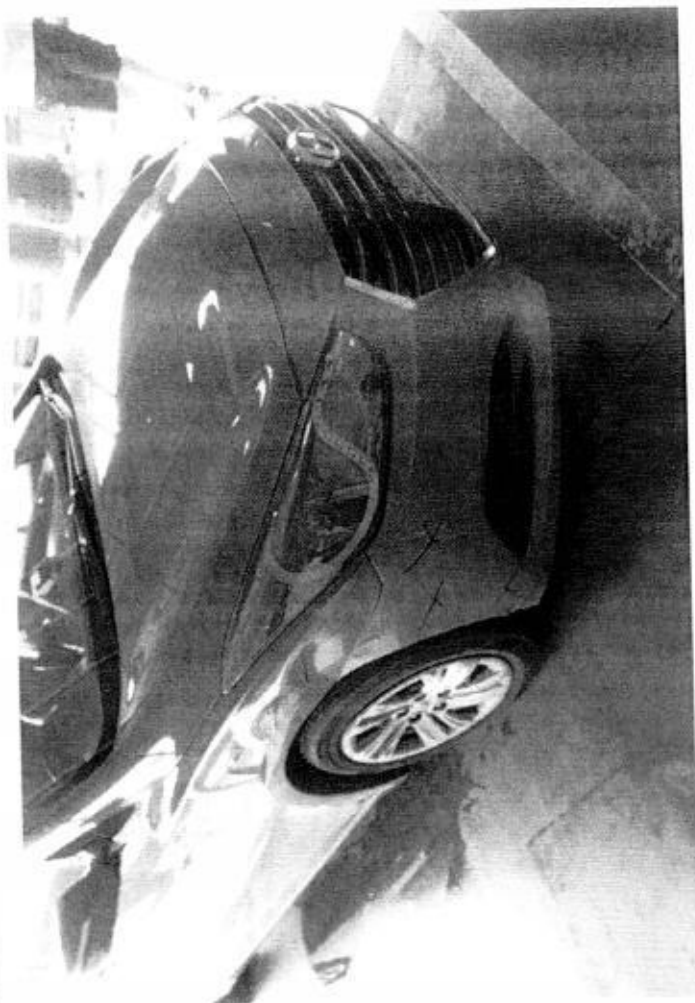
COMFORT TRANSPORTATION PTE LTD

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.:





Date/Time: 28.04.2018 11:53

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO305154317

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

VARs

REGN NO: SHC8354R	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 28.04.2018 09:00
YR OF MANU. 13.08.2015	TARGET DATE
CHASSIS CODE KMHLE41UMGU076946	COMPLETION DATE/TIME:

(B)

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 27.04.2018
NATURE: 3P 27.04.2018

LABOR CODE

DESCRIPTION

NTUC - taxi Right front damage
LCC/Kalini -

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHC8354R
LARRY

Vehicle No.: SHC8354R

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC8354R

MAKE : HYUNDAI

MODEL : i40

Date : 30.04.2018

Qty	Parts Description / Labour	Type	Unit Price	Amount
1	Front Bumper			\$ 1,052.20
10	Front Bumper Clips		\$2.20	\$ 22.00
1	Front Bumper Grille - RH			\$ 40.30
1	Front Bumper Bracket - RH			\$ 24.60
1	Headlamp - RH			\$ 1,388.00
1	Headlamp Support Panel			\$ 1,067.50
1	Front Fender - RH			\$ 619.00
1	Front Fender Shield - RH			\$ 169.80
1	Front Wheel Rim - RH			\$ 351.90
1	Front Wheel Cover - RH			\$ 150.70
1	Front Wheel bearing - RH			\$ 258.50
1	Front Shock Absorber - RH			\$ 342.20
1	Front Lower Arm - RH			\$ 715.10
SUB TOTAL				\$ 6,201.80
LESS 20%				1,240.36
DISCOUNTED TOTAL				\$ 4,961.44
				\$ 0.00
Labour Charge				
1	Panel Beating			\$ 450.00
1	Spray Painting Charge			\$ 450.00
1	Wiring Charge			\$ 50.00
1	Tuff Kote			\$ 80.00
1	Remove/Refix Front Undercarriage			\$ 200.00
1	Front Wheel Alignment			\$ 120.00
TOTAL LABOUR				\$ 1,350.00
ESTIMATE TOTAL				\$ 6,311.44

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 is subject to final approval from insurance Company

Acknowledged by Repairer:

Signature:

Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305154317
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. : SHC8354R Date of Accident: 27.04.2018

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

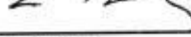
1. The repair job shall bill to: NTUC SJS8251X
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges
 - Total for Part-By-Part Repair Cost
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: \$1,850.00
Final Lumpsum Repair cost


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 : Larry Ng
Tel : 6214 8316
Fax : 6546 8156

Signature : 
Name : Calvin
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

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NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18007937/K1rbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 11-05-2018



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJS 8251X	Veh. Inspected	SHC 8354R
Policy No.	5098439336	Coverage (\$)	0.00
Claim No.	MT/0992223-002	Excess (\$)	0.00
Assign From		Assign Date	30/04/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMGU076946	Colour	BLUE
Odometer	403125	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	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	27/04/2018	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:	3 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 8354R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER	CRACKED	1,052.20	1,052.20
10	FRONT BUMPER CLIPS @\$2.20	NECESSARY	22.00	22.00
1	FRONT BUMPER GRILLE-RH	SERVICEABLE	40.30	-
1	FRONT BUMPER BRACKET-RH	SERVICEABLE	24.60	-
1	HEADLAMP-RH	SERVICEABLE	1,388.00	-
1	HEADLAMP SUPPORT PANEL	SERVICEABLE	1,067.50	-
1	FRONT FENDER-RH	DENTED	619.00	619.00
1	FRONT FENDER SHIELD-RH	SERVICEABLE	169.80	-
1	FRONT WHEEL RIM-RH	SERVICEABLE	351.90	-
1	FRONT WHEEL COVER-RH	GRAZED	150.70	150.70
1	FRONT WHEEL BEARING-RH	SERVICEABLE	258.50	-
1	FRONT SHOCK ABSORBER-RH	SERVICEABLE	342.20	-
1	FRONT LOWER ARM-RH	SERVICEABLE	715.10	-
	LESS 20% DISCOUNT		-1,240.36	-368.78
			4,961.44	1,475.12
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		820.00	400.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		530.00	420.00
			1,350.00	820.00
GRAND TOTAL			6,311.44	2,295.12
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,850.00

Report Ref No. NS/INC18007937/K1rhn2

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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