

## **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





NS/INC18008968/Sqb NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: 73 BRAS BASAH ROAD 17-05-2018 #05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 189556 Code: INC4 Policy Particulars :- THIRD PARTY CLAIM 1. Veh. Inspected SHC 4446K **GBF 4952X** Insured Veh. 0.00 5095048173 Coverage (\$) Policy No. 0.00 Claim No. Excess (\$) 15/05/2018 **Assign Date** Assign From Vehicle Particulars & Condition 2. 0 Make & Model HIDDEN Year of Reg. Engine No. Chassis No. Colour Steering Odometer Modification Brakes General Conditions of Tyres 3. Make Balance Size mm R/H Front Tyre mm L/H Front Tyre mm R/H Rear Tyre mm L/H Rear Tyre **Description of Damages** 4. General Information 5. 15/05/2018 Inspection Date 12/05/2018 **Accident Date** SMRT AUTOMOTIVE SERVICES PTE LTD Survey held at 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705 Remarks 5a. A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

eBaoTech					The Gree				Gener	alClaim
Hello, NAC_PAYA_UBI_80	0601	1000000		The second second	THE PERSON NAMED IN	,	Change Lar	guage ,	Change Password	l • Log Out
My Desktop	Polic	y Query								
Notice of Loss	Policy N	0.				Date of Acci	ident	12/05/	2018 13:45	
	Vehicle	No.(Far Motor)	G8F4952X							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5095048173	KWAN INN VEGETARIAN CUISINE PTE. LTD.	201319205D	GCV	Comprehensive	G8F4952X	GBF4952X	18/11/2017	17/11/2018
					- 1	Continue				

TP Claims against NTUC Income: Follow-Through Survey

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t	4 1	Transfer de la	Claimant Vohirla No.	Income Vehicle No. D	Date of Accident	Date of Accident	3	
N/O	Income Reference	Claimant (Owner / Taxi Company)	Cigillians remove re-			None and a second	4 2512910	\$ 20,973.28
2			Control of the contro	2000	7100/10/190	10.30	Description of	
-	IO TON	CAADT TAVIC DTE I TO	SMB 5013R	PC 2533K	707/70/97	20.07		00000
	10 100	SMINI LAND FILLING				-	\$ 2,576.90	DO'OCO
İ			ASSESS STORE	Car A952X	12/05/2018	10:6		
	MT/0994304-002	SMRT TAXIS PTE LTD	SHC 4440N	100				
Ī								

#### 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.

- 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

14/05/2018 09:13

Date Of Accident

12/05/2018 09:05

Exact Location Of Accident

CTE TOWARDS CITY

Country/State of Loss

SINGAPORE

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SHC4446K

Insured/Policyholder

Name Of Registered Owner

SMRT TAXIS PTE LTD

Co Reg No

198905369K

Email Address

NOEMAIL

Mobile Phone No

Alternative Phone No.

OFFICE-80000000

Vehicle Particulars

Manufacturer

TOYOTA

Model

PRIUS TAXI-1,8 (A)

Exact Purpose for which vehicle was being used at

time of accident

HIRE AND REWARD

Are you claiming under your own insurance policy

Are you claiming under yo 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 THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

YES

Policy Number

D-18090213MFSH

Cover Note Number

Type Of Coverage

Driver

Name of Driver

LEE KHENG HOWE

NRIC No

S1717638B

Date Of Birth

08/06/1965

Occupation

OUTDOOR

Date Of Driving Pass

24/09/1985

Driving Experience

32 YEARS AND 7 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-80000000

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

210

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - RELIEF

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

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)

0.7855

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

4

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 2

NAME:

UNKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: MALE

**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

I WAS TRAVELLING ALONG CTE AT THE LEFT MOST LANE WITH THREE PASSENGERS ON BOARD AND HAD STOPPED DUE TO FRONT VEHICLE STOPPING AS TRAFFIC WAS CONGESTED AHEAD WHEN THE LORRY GBF4952X FROM BEHIND COLLIDED ONTO THE REAR PORTION OF MY TAXI.

#### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

GBF4952X

Vehicle Make/Model/Colour

TOYOTA DYNA SILVER

**Details Of Properties** 

Vehicle Category

MOTORCYCLE

Name of Driver

VENKAT

NRIC/Passport Number

Contact Number Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### **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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- By the ladgment 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:
  - 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:
  - 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.

Policyholder's Signature

outhart declaration of

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

alw 14/8/211

Name:

NRIC/FIN No.:

## Sketch Plan Pg. 2

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ETCH PLAN		1 6 1 4	N I A I			
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2414-000 H = 12						
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ECLARATION						
We declare the foregoing part	iculars are true in every	respect.				
1 121	iculars are true in every				Λ	.415/2
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ZIXA	nuch	<u> </u>		Description Co.		
olicyholder's Signature	Driver's Signatur	e 7	-A	Reporting Centre I Name:	rersonners Sig	nature
ate & Time:	(If driver is not to Date & Time:	ne policynoider	,	NRIC/FIN No.:		
	Date of THISE			Charles of the Proof.		

Page 5 of 9

# > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

nquire PARF/COE Rebate for Registered Venicle	
Vehicle Owner Particulars	Company
Owner ID Type:	5369K
Owner ID:	300711
Vehicle Details	SHC4446K
Vehicle No.:	No
Vehicle to be Exported:	16 May 2018
Intended De-registration Date:	TOYOTA
Vehicle Make:	PRIUS TAXI (SMRT)
Vehicle Model:	
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR5937762
Chassis No.:	JTDKN36U605737325
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$33,120.00
Original Registration Date:	26 Mar 2014
First Registration Date:	26 Mar 2014
Transfer Count:	0
Actual ARF Paid:	\$8,368.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Mar 2022
PARF Rebate Amount:	\$6,276.00
Intended COE Rebate Details	25 Mar 2022
COE Expiry Date:	A - Car up to 1600cc & 97kW (130bhp)
COE Category:	8
COE Period(Years):	\$58,745.00
PQP Paid:	\$28,326.00
COE Rebate Amount:	
Total Rebate Amount:	\$34,602.00
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 16 May 2018

OK



60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

GIA

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

## SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No

SHC4446K

Ref. No

TAX/05/18/2056

Reg. Date

26/03/2014

Vehicle Type

TAXI

Make

TOYOTA PRIUS

Model

**PRIUS** 

Name of Driver

LEE KHENG HOWE

Type of Accident

HEAD TO REAR

Date / Time of Accident

12/05/2018 09:07:00 AM

Accident Reported Date / Time :

14/05/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Vehicle is Towed Back?

No

Towed Back Date/Time

Replacement Vehicle issued? :

Accident Repair Job Card No : 000024096049

Special Instruction to ARC, if any :

DROVE IN / GBF4952X

Prepared Date

14/05/2018 10:19:47 AM

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:

Section B - To be Completed by Service Advisor, Accident Repair Centre

JTDKN36U605737325 Chassis No :

Mileage

0.00

0.00

0.00

0.00

919.42 0.00

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable 0.00

0

Total Labout Charges

338.00

Total Spray Painting Charges

378.00 919.42

Total Material Charges Other Charges

TOTAL

280.00

Lum Sum Total

1,915.42 1,900.00

No. of Repair Days

3.00

Prepared / Adjusted By

Arc / Surveyor Sing Off Date

14/05/2018 04:20:23 PM

J. goods

01/01/1900 12:00:00 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 14/05/2018 04:20:23 PM

Section C - To be Completed by Admin Assistant, Accident Repair Centre, Upon Completion of Repair

Quotation No

Invoice No

Quotation Date

Invoice Date :

Invoice Amount :

Prepared Date:

## Section D - Details of Repair Estimates

#### Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	338.00	0.00 Dec
Total Labour	338.00	0.00

## Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY REAR BUMPER	378.00	0.00, 200
Total Spray Painting & Panel Beating	378.00	0.00

## Part 3 - Other Costs - Accident and Accident Repair Related Expenses

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00 30
TO REPLACE SUNDRY PARTS	100.00	0.00 🗙
TO WASH AND VACUUM	60.00	0.00 ×
Total Other Costs	280.00	0.00

# Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
52159- 47905		6505548	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace 2	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace VA	No
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace 7.	No
52023- 12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.27	Replace	Replace 7	No
52016- 47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Replace 7	No
52015- 47050			ARM SUB-ASSY, RR BUMPER RH	1	139.60	25.00	104.70	Replace	Replace 7	No
89997- 30070			ANTENNA, ELECTRICAL LOWER REAR	1	157.40	10.00	141.66	Replace	Replace 7	No
		3	TOTAL MATERIALS					1,149.29	1,149.28	
		TOTAL	MATERIALS(Discour	nted)				919.42	919.42	

# Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
	то	TAL SUPPLEMENTARY	MATERIA	ALS	Ar				

#### Section D - Details of Repair Estimates

#### Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if a
TO REPAIR REAR PORTION	338.00	300.00
Total Labour	338.00	300.00

## Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surve
TO REPSRAY REAR BUMPER	378.00	200.00
TO RESPRAY REAR PANEL	180.00	100.00
Total Spray Painting & Panel Beating	558.00	300.00

#### Part 3 - Other Costs - Accident and Accident Repair Related Expenses

Job Scope	Quotation from ARC	Adjusted by Surveyor,
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	30.00
TO REPLACE SUNDRY PARTS	100.00	0.00
TO WASH AND VACUUM	60.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-234.27
Total Other Costs	280.00	-204.27

TAX/05/18/2056 Page:

Supplementary Guan

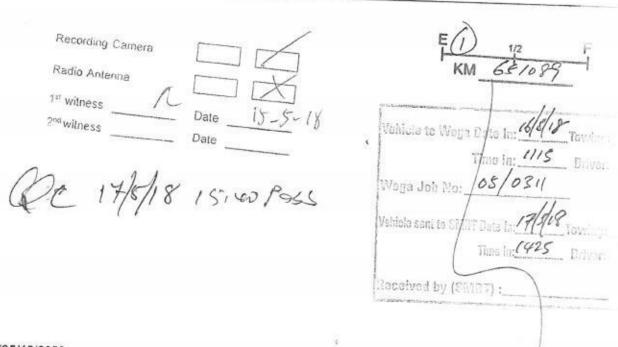
+10ay 17-4-18/12:30 60 Woodlands Industrial Park E4, SI 17-5-18/16:30

Estimator Telephone Minimum Accident Reporting Name of

SMRT Automotive Sor

# SMRT Accident Vehicle Repair Estimates

			10 0-18
Section A - To be comple	eted by claims Advisor/Duty officer	at Accident Dansett	
Reg. No	: SHC4446K	at Accident Reporting (	Jentre
Ref. No	: TAX/05/18/2056		
Reg. Date	26/03/2014	( Carrier and Aller	And and a
Vehicle Type	TAXT	COLUMN TO THE PARTY OF THE PART	AND EAST
Make	V: TOYOTA PRIUS	A -	E - F
Model	: PRIUS		(
Name of Driver	: LEE KHENG HOWE	6	
Type of Accident	: HEAD TO REAR	Som	A Print
Date / Time of Accident	: 12/05/2018 09:07:00 AM	<u> </u>	4 - 6
Accident Reported Date / T	ime: 14/05/2018 12:00:00 AM		
Surveyor is Required?	: Yes	-/	
Survey by	: Sebastian	0/	1 2/
Vehicle is Towed Back?	: No/	-	, N. S.
Towed Back Date/Time		lens.	
Replacement Vehicle issued	17 : No	Sun Osmu	6555 8888
Accident Repair Job Card N	0 : 000024096049		33388
Special Instruction to ARC, if	any :	C	
DROVE IN / GBF4952X - NT BEFORE PAINT PHOTO AN		CK ITEM AND REPLACE to.com HP:90036121	EITEM PLEA
Prepared Date	: 14/05/2018 10:19:47 AM		



Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Survey Appro-		ned	
52159- 47905		6505548	BUMPER REAR	1	458.60	100.00	0.00	Replace	Repair		R	
		-	PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace		/	N
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace	5	1	0)
52023- 12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.28	Replace	Ky.	Š	1	- 1
52016- 47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Check		×	1
52015- 47050			ARM SUB-ASSY, RR BUMPER RH	1	139.60	25.00	104.70	Replace	Check		X	
89997- 30070			ANTENNA, ELECTRICAL LOWER REAR	1	157.40	10.00	141.66	Replace			X	
-			TOTAL MATERIALS					805.34	454.			
	TOTAL MATERIALS(Discounted)						805.33	154.2				

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Check
	TOTA	AL SUPPLEMENTARY	MATERIA	ALS				



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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



ITUC	INCOME INSURA	ANCE CO-OPERATIVE LTD	Ref: NS/INC18008	968/Sqbn2
3 BB	AS BASAH ROAD 1 NTUC TRADE U		Date: 06-06-2018	
	30.00		Code: INC4	
		Policy Particulars	:- THIRD PARTY CLAI	
	Insured Veh.	GBF 4952X	Veh. Inspected	SHC 4446K
	Policy No.	5095048173	Coverage (\$)	0.00
	Claim No.	MT/0994304-002	Excess (\$)	0.00
	Assign From		Assign Date	15/05/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model	TOYOTA PRIUS	c.c	1798
	Engine No.	HIDDEN	Year of Reg.	2014
	Chassis No.	JTDKN36U605737325	Colour	MAROON
	Odometer	651090	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	FAIR		
3.	THE WAR IN THE	Condit	tions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	195/65 R15	FALKEN	6 mm
	L/H Front Tyre	195/65 R15	FALKEN	6 mm
	R/H Rear Tyre	195/65 R15	FALKEN	6 mm
	L/H Rear Tyre	195/65 R15	FALKEN	6 mm
4.		Descript	tion of Damages	
		STAINED DAMAGES AT THE R	EAR PORTION.	
5.	DAMAGES SEE D	Gener Gener	ral Information	
0.	Accident Date	12/05/2018	Inspection Date	15/05/2018
	Survey held at	SMRT AUTOMOTIVE SERVICE	ES PTE LTD	
	Sairey mana ar	60 WOODLANDS INDUSTRIA		757705
5a.	O PARENTAL A		Remarks	SECTION STATE
	A)THE INSPECTI B)IN ACCORDAN	ON WAS CONDUCTED ON A"W ICE TO YOUR INSTRUCTIONS,	ITHOUT PREJUDICE" BA WE HAVE NOT AUTHOR	ASIS. ISED REPAIRS.
5b.	HOSE ROTALIST		e Days of Repair	
	ESTIMATED NO	RMAL PERIOD FOR REPAIR:	3 Working D	ays



# 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



# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4446K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BUMPER REINFORCEMENT REAR (DISC 25%)	DENTED	205.70	
	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	
	SENSOR REVERSE (SN)	DAMAGED	180.00	180.00
	ARM SUB-ASSY,RR BUMPER,LH	NOT NECESSARY	139.60	-
	ARM SUB-ASSY,RR BUMPER,RH	NOT NECESSARY	139.60	
	ANTENNA, ELECTRICAL LOWER REAR	NOT NECESSARY	157.40	1
	BUMPER REAR	TO REPAIR	458.60	
	BOWN LIVING AN		1,400.90	454.28
	LABOUR			220.00
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		458.00	
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		558.00	
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	1
			1,176.00	630.00
	GRAND TOTAL		2,576.9	1,084.2
	RECOMMENDED COST OF LUMP SUM REPAIRS			850.0
	(TO ITS PRE-ACCIDENT CONDITION)	48		

Report Ref No. NS/INC18008968/Sqbn2

1

YEANG WAI KEEN

**Automotive Assessor** 

(CONFIRMED)

K.K.LAU CPT(RET)

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