Churs 45 \$71.0/ 4Mgs. (Ded. 6149.18:46%)

RECEIVED 2 0 JUN 2018

Date/Time, File Pass to?	: Preli. Report	Days Of Repair:		
1,2016 Typist [	: Final Report	Resurvey No. of Trip:	Survey Fee:	160
Date/Time, File Return to?	and the second		Transportation	
3)		Add Fee: : Site Insp (\$	)S+RSSI	
		: Interview (\$ -	) Pholos	
Report Format :	TP	Tech Invs (\$	) 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 INSU	RANCE CO-OPERATIVE LTD	Ref:	NS/INC180107	45/K1tb
73 BRAS BASAH RO. #05-01 NTUC TRADE 189556	AD E UNION HOUSESINGAPORE	Date:	12-06-2018	
1.	Policy Particulars	Code:	INC4	e - 11/
Insured Veh.	Policy Particulars YM 5162T		SELECTION OF SELECTION OF	
Policy No.		_	nspected	SHD 4460M
Claim No.		_	age (\$)	0.00
Assign From		Exces		0.00
2.	Vehicle Pesti		27.77.27.36.0	12/06/2018
Make & Model	Vehicle Parti	1	Condition	<b>创新的企业的企业的企业企业</b>
Engine No.	HIDDEN	c.c		0
Chassis No.	HIDDEN	Year o	NAME OF STREET	
Odometer	72	Colour		
Brakes		Steerin		
General		Modifie	cation	
3.	Conditi			
Matter 18 to 2 Am Proposite	Size	ons of T	yres	
R/H Front Tyre	Size	Make		Balance
L/H Front Tyre				mm
				mm
R/H Rear Tyre L/H Rear Tyre				mm
1.			SAUST Was SHITTED	mm
the process of the second	Description	on of Da	mages	MARKET SERVED
5.	General	Informa	ation	CONTRACTOR OF STREET
Accident Date	10/06/2018	2:3534tenico036	tion Date	12/06/2018
Survey held at	COMFORTDELGRO ENGINEER			12/00/2016
900000 Sept. \$1.000000000 Sept. \$1.00000000000000000000000000000000000	59 LOYANG DRIVE SINGAPORE 508969	motorete (An		
ā.		marks	SEASON A	
A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WITH CE TO YOUR INSTRUCTIONS, WE	HOUT PR	EJUDICE" BASIS. NOT AUTHORISED	REPAIRS.

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Ü	stimate	Tentative repair cost
1	MT/0998684-002	COMFORT TRANSPORTATION PTE LTD	SHC 8054G	SJP 1495X	12/06/2018	s	3,688.00	\$ 1,500.00
2	MT/0998356-002	COMFORT TRANSPORTATION PTE LTD	SHD 4460M	YM 5162T	10/06/2018	\$	13,249.18	\$ 7,100.00
8	MT/0998675-002	COMFORT TRANSPORTATION PTE LTD	SHA 5719C	SKA 112A	13/06/2018	s	4,673.20	\$ 3,050.00

Claim received from LKK Auto

<b>eBao</b> Tech								Gene	ralClaim
Hello, NAC_PAYA_UBI_80	0601			in the Continues of		Change La	nguage	· Change Passwo	rd • Log Out
My Desktop	Policy Query								
Notice of Loss	Policy No.		Date of Accident 1		10/06	/2018 18:31			
	Vehicle No.(For Motor)	YM5162T							
					Search				
	Select Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	© 5083660258-01	FARREL TRANSPORT & TRADING PTE. LTD	201008016M	GCV	Third Party	YM5162T	YM5162T	26/09/2017	25/09/2018
		1419,40400		50	Continue				

# COMFORTDELGRO -ENGINEERING

A member of COMFORTDELGRO

#### ComfortDelGro Engineering Pte Ltd

Date/Time: 11.06.2018 16:11 Page : 1

Team: ARC Repair TP(CLSO)1	JOB CARD Sales Order:	JC NO305173841
JSTOMER	REGN NO.: SHD4460M	MILEAGE
3/MS COMFORT TRANSPORTATION JSTOMER NO. 7010045	MAKE HYUNDAI	FUEL EF
STOMER NO. 7010045 DORESS 383 SIN MING DRIVE Singapore SINGAPORE 575	717 MODEL SONATA	10.06.2018 13:00
L (R) 65508755 (O)	YR OF MANU. 28,09.2012	TARGET DATE
SCOUNT CARD NO.	CHASSIS CODE KMHET41VMCA83037	9 COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 10.06.2018

NATURE: 3P 10.06.2018

S/NO

LABOR CODE

DESCRIPTION

HECKED & PASSED OUT BY		_	
SERVICE	ADVISOR		CUSTOMER'S SIGNATURE
nowledgement Slip		Exit Pass	
ie: 4o.: cle No.: SHD4460M	CHIANG	Vehicle No.: SHD4460M	
ne of Service Advisor e returned to Service Recept	Signature/Date	Name of Service Advisor  To be kept by Security Guard	Date

#### 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.

aforesaid,	sent to the archiving of this report at the centre and to copies of the report being made available
year and a state of the Manager and the state of the	ACCIDENT STATEMENT
Date Of Report	11/06/2018 13:46
Date Of Accident	10/06/2018 13:00
Exact Location Of Accident	GEYLANG ROAD BEFORE PPAYA LEBAR ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD4460M
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	SONATA
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
Incurance Company	

Insurance Company

Name of Insurance Company
Type Of Coverage

MS FIRST CAPITAL INSURANCE LTD THIRD PARTY FIRE AND/OR THEFT

Fleet Policy YES

Policy Number D-18088936MFSH

Cover Note Number

Driver

Name of Driver JUMANI BIN ISMAIL

 NRIC No
 \$14891601

 Date Of Birth
 24/11/1961

 Occupation
 OUTDOOR

 Date Of Driving Pass
 18/09/1995

Driving Experience 22 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92381770

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 27 MARSILING DRIVE #11-247

Postcode

730027

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - TAXI DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

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)

NO

soliciting/offering accident claims assistance.

2

Number of Passengers (Including Driver) Passenger 1

NAME: GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

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

YM5162T

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

M PRABHU

NRIC/Passport Number

S8941981F

Contact Number

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

FRT RIGHT

## DETAILS OF INJURED PERSON 1

Name

JUMANI BIN ISMAIL

Approximate Age

57

Injuries Sustain

FELT PAIN ON NECK AND BACK

Injured person in which vehicle?

SHD4460M

Were seat belts worn?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address Postcode

#### Sketch Plan Pg. 1

#### 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.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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 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:

- (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")
- 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.

COMFORT TRANSPORTATION PTE LTD CO REG NO 199303821R

Policyholder's Signature

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Loke Wei Yiend

Name:

NRIC/FIN No.:

GIARMC SketchPlanForm\_V3

9-7

Date & Time:

[

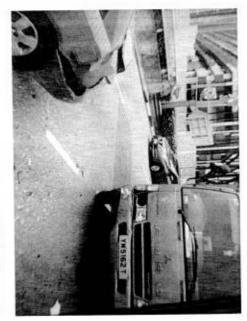
SKETCH PLAN	· · · · · · · · · · · · · · · · · · ·		ПП
	West Plie	Paya	Lebor Poo
	The state of the s		## "
A-8-104460A			
B-14W 3165			
THE WAR			
1 8000 108	1 Paggaraj		
	N 000-17 1		
		1111118111111	
DESCRIBE CIRCUMSTANCES OF			
On	1 10/6/18 are abo	ut 13:00 hrs,	1145
driving along	Geylang road b	dap. Paya Lebo	in road.
Shortly	after the car in	front of my to	axi
_			
reduce speed i	and gradually a	omes to stop	and.
F 19			- 1
I doma so. A	Split second later	+ , I flet an im	Dact
	The state of the s		
from my behind	d A truck YM !	5162T collided	outo
	0	21 1 10.	
the rear loff	portion of my	stationaly tal	X /'
	*		
01 fen	rale passenger on	board my texi-	<u>!</u>
J Ün	1 1 1	10000 20044 2	dod
Il fett pain on	neck and buck	, have consult a	doctor
DECLARATION		Λ	
I/We declare the foregoing particula	irs are true in every respect.	Loke Well leng	1
MFORT TRANSPORTATION PT. CO REG. NO 199303821R	ELTO ·	. A	
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Sign	ature
Date & Time:	(If driver is not the policyholder)  Date & Time:	Name: NRIC/FIN No.:	

GIARMC SketchPlanForm\_V3





















#### COMFORTDELGRO ENGINEERING

Our Job Ref No : \_ 305175282 ComfortDelGro Engineering Pte Ltd 59 Loyang Drive Singapore 508969 Fax: 6546 8156 18/06/18 Date FINALIZATION FORM Fax: LKK KALVIN Attn : 10/06/18 : SHD4460M Vehicle Reg No. The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-YM5162T The repair job shall bill to: NTUC The finalized amount shall be: Spare Parts after List discount (a) Labour Charges (b) Total for Part-By-Part Repair Cost Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: \$7100.00 Final Lumpsum Repair cost 4 working days. Estimated normal period for repairs: 3. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days We confirm the estimates and 5. Thank you for your assistance. finalized amount Signature: Signature : Name Name : CHIANG Date : 62148314 Tel : 65468156 Fax For Official Use Only Document Confirm By Remarks Attached Amount Item (Signature) Yes or No YES 1. Rental Rate P/Day Ν Loss of Income Paid Survey Fees 7.49 LTA Search Fee Medical Fees (on behalf of driver, if applicable) Overrun Remarks:

# COMFORTDELGRO ENGINEERING PTE LTD

EHICLE NO AKE ODEL Qty	: SHD 4460M :	/ 10	11/6/20			7.45
ODEL	**	/ / //			- 10	
	: HYUNDAI SONATA	(11)	lanc	4		
Qty	Parts Description/ Labour	Type	Un	it Price	A	mount
	Boot Lid _ hu				\$	1,349.50
	Boot Lid Rubber ×				\$	110.90
	Boot Lid Hinge (LH/RH)		S	170.60	S	341.20
	Boot Lid Lock Upper ×		7		S	132.10
	Boot Lid Lock Lower >				\$	30.30
	Boot Lid Key Lock				S	78.20
	Boot Lid Sonata Plate				\$	43.60
	Boot Lid Hyundai Plate				\$	24.20
	Boot Lid 'H' Emblem —				S	26.10
	.46				S	22.70
	Boot Lid CRDI Plate		s	230.20	S	460.40
	TOTAL TOTAL STATE OF THE STATE			230.20	S	165.40
	Boot Lid Trimboard X				S	10.00
	Boot Lid Trimboard Clips (10pcs)				S	578.40
	Rear Bumper				S	483.30
	Rear Bumper Reinforcement				S	22.00
	Rear Bumper Clip				S	49.00
	Rear Bumper Bracket , LH  Rear Bumper Sponge				S	137.40
	Rear Bumper Sponge				s	185.80
	Rear Bumper Under Cover				S	38.00
	Rear Bumper Protector (LH)			344.00	S	688.00
	Tail Lamp (LH/RH)		S	344.00	\$	93.80
	Tail Lamp Quarter Panel (LH)					391.80
	Rear Panel Kryskin				\$	95.80
	Rear Panel Garnish				S	217.40
	Tail Lamp Panel Top (LH)				\$	56.10
	Exhaust Pipe Insulator				\$	723.00
	Exhaust Silencer				S	56.1
	Exhaust Pipe Hanger X					1,935.9
	Rear Fender (LH)				\$	
	Rear Fender Inner Panel (LH)				\$	1,255.0
	Rear Fender Inner Lining (LH)				S	74.1
	Rear Fender Corner Hardboard Cover (LH)		1		\$	204.3 49.4
	Real Telidel All-Duct				\$	15.5
	Rear Fender Mudflap (LH)				\$	180.9
	Rear Fender Trim Board (LH)				\$	
	Rear Windscreen Glass				\$	639.0
	Rear Windscreen Moulding		1		\$	60.0
	Fuel Tank Upper Neck				S	221.6
	Fuel Lid Cover				\$	94.4
	SUB TOTAL				S	11,340.6
	LESS 20%				\$	2,268.1
	DISCOUNTED TOTAL				S	9,072.4

SHD 4460M

Qty	Parts Description/ Labour	Type	Unit Price	Amount	_
	Boot Lid Comfort Logo & Tel No. Sticker			\$ 30.00	7
	Bass No Plata V	- 1		\$ 25.00	1
	Rear Bumper Reverse Sensor - Allel			\$ 135.70	)
	Rear Windscreen Sealant			\$ 46.00	) [
				\$ 236.70	
	Labour Charge			1000	
	Panel Beating			\$ 1,800.00	-
	Spray Painting Charge			S 1,250:00	5
	Wiring Charge			\$ 50.00	5
	Tuff Kote			\$ 100.00	T
	Towing Charge			\$ 50.0	0
	Remove/Refix Cushion & Upholstery Rear			\$ 150.0	of
	Remove/Refix Rear Windscreen Glass			S 120-0	
	Remove/Refix Reverse Sensor			\$ 120.0	0
	A STATE OF THE STA			\$ 150.0	1
	Remove/Refix Fuel Tank	1		\$ 150.0	-
	Remove/Refix Exhaust Pipe			3 13926	0
	TOTAL LABOUR			\$ 3,940.0	0
	ESTIMATE TOTAL			\$ 13,249.1	8
	Kahn'Ille4 112/6/18 1020 hrs 4 Rg.	the rich	o Consultants hence later of the following: livery beforelater spray partial during and damaged partial during an option of the continuous cont	1 tesulver	
	4 Rg. 45 Athe Report Lh	To dis To dis Paris Third No Su	lay damaged partition of the confidence are subject to confidence are subject to confidence are subject to final approval from the confidence are	mation but Prejudice" basis	

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

Page 2 of 2



5b.

ESTIMATED NORMAL PERIOD FOR REPAIR:

## **National Assessment Centre Services**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





NS/INC18010745/K1tbs2 NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: 73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 25-06-2018 189556 Code: INC4 Policy Particulars :- THIRD PARTY CLAIM 1. Veh. Inspected SHD 4460M Insured Veh. YM 5162T 0.00 5083660258-01 Coverage (\$) Policy No. 0.00 MT/0998356-002 Excess (\$) Claim No. 12/06/2018 **Assign Date** Assign From **Vehicle Particulars & Condition** 2. HYUNDAI SONATA 1991 C.C Make & Model 2012 HIDDEN Year of Reg. Engine No. BLUE KMHET41VMCA830379 Colour Chassis No. IN ORDER 512284 Steering Odometer STANDARD ALLOY RIM Modification IN ORDER **Brakes** FAIR General **Conditions of Tyres** 3. Balance Make Size WEST LAKE 7 mm R/H Front Tyre 215/60R16 WEST LAKE 7 mm L/H Front Tyre 215/60R16 7 mm WEST LAKE 215/60R16 R/H Rear Tyre WEST LAKE 7 mm 215/60R16 L/H Rear Tyre **Description of Damages** 4. THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS. General Information 5. 12/06/2018 Inspection Date 10/06/2018 **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** 

4 Working Days



# **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





Page No.:1 of 3

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4460M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS		1	
1	BOOT LID	DENTED	1,349.50	1,349.50
1	BOOT LID RUBBER	SERVICEABLE	110.90	
2	BOOT LID HINGE (LH/RH) @\$170.60	BENT	341.20	341.20
	BOOT LID LOCK UPPER	SERVICEABLE	132.10	
1	BOOT LID LOCK LOWER	SERVICEABLE	30.30	
1	BOOT LID KEY LOCK	SERVICEABLE	78.20	
1	BOOT LID SONATA PLATE	NECESSARY	43.60	43.60
1	BOOT LID HYUNDAI PLATE	NECESSARY	24.20	24.20
1	BOOT LID 'H' EMBLEM	NECESSARY	26.10	26.10
1	BOOT LID CRDI PLATE	NECESSARY	22.70	22.70
	BOOT LID LAMP (LH/RH) @\$230.20	N/S CRACKED / O/S SERVICEABLE	460.40	230.20
1	BOOT LID TRIMBOARD	SERVICEABLE	165.40	
10	BOOT LID TRIMBOARD CLIPS	NOT NECESSARY	10.00	
1	REAR BUMPER	DEFORMED	578.40	578.4
1	REAR BUMPER REINFORCEMENT	CRACKED	483.30	483.3
	REAR BUMPER CLIP	NECESSARY	22.00	22.0
1	REAR BUMPER BRACKET-LH	CRACKED	49.00	49.0
1	REAR BUMPER SPONGE	SERVICEABLE	137.40	
	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	
	REAR BUMPER PROTECTOR (LH)	CRACKED	38.00	38.0
2	TAIL LAMP (LH/RH) @\$344.00	CRACKED	688.00	688.0
	TAIL LAMP QUARTER PANEL (LH)	DENTED	93.80	93.8
	REAR PANEL	TO REPAIR SEE LABOUR	391.80	
9	REAR PANEL GARNISH	SERVICEABLE	95.80	
	TAIL LAMP PANEL TOP (LH)	DENTED	217.40	217.4
	EXHAUST PIPE INSULATOR	SERVICEABLE	56.10	o l
	EXHAUST SILENCER	SERVICEABLE	723.00	O
	EXHAUST PIPE HANGER	SERVICEABLE	56.10	
89	REAR FENDER (LH)	DENTED	1,935.90	1,935.9

Report Ref No. NS/INC18010745/K1tbs2



### **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.: 2 of

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR FENDER INNER PANEL (LH)	DENTED	1,255.00	1,255.00
1	REAR FENDER INNER LINING (LH)	TORN	74.10	74.10
1	REAR FENDER CORNER HARDBOARD COVER (LH)	SERVICEABLE	204.30	V-
া	REAR FENDER AIR-DUCT	SERVICEABLE	49.40	
1	REAR FENDER MUDFLAP (LH)	SERVICEABLE	15.50	
1	REAR FENDER TRIM BOARD (LH)	SERVICEABLE	180.90	-
1	REAR WINDSCREEN GLASS	SHATTERED	639.00	639.00
-1	REAR WINDSCREEN MOULDING	NECESSARY	60.00	60.00
1	FUEL TANK UPPER NECK	SERVICEABLE	221.60	-
1	FUEL LID COVER	SERVICEABLE	94.40	
	LESS 20% DISCOUNT		-2,268.12	-1,634.28
			9,072.48	6,537.12
	SPECIAL NETT ITEMS			
1	BOOT LID COMFORT LOGO & TEL NO STICKER (SN)	NECESSARY	30.00	30.00
1	REAR NO PLATE (SN)	SERVICEABLE	25.00	
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	46.00	A 27.75.0
			236.70	211.70
	LABOUR			075471000
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR PANEL.		1,800.00	1,000.00
	SPRAY PAINTING CHARGE.		1,250.00	800.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.		100.00	50.00
	TOWING CHARGE.		50.00	
	REMOVE / REFIX CUSHION & UPHOLSTERY REAR.		150.00	
	REMOVE / REFIX REAR WINDSCREEN GLASS.		120.00	
	REMOVE / REFIX REVERSE SENSOR.		120.00	30.00
	REMOVE / REFIX FUEL TANK.		150.00	80.00
	REMOVE / REFIX EXHAUST PIPE.	NOT NECESSARY	150.00	-
			3,940.00	2,130.00
	GRAND TOTAL		13,249.18	8,878.82

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RECOMMENDED COST OF LUMP SUM REPAIRS	7,100.00
(TO ITS PRE-ACCIDENT CONDITION)	
(CONFIRMED)	

Report Ref No. NS/INC18010745/K1tbs2

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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