

Kalin

REF:

NS/INC18010818 / Kltbhz

ASSIGNMENT

From:

Date:

Veh No:

SHA 1784P

Yr Regn:

24 Nov 2016

Estimated Cost:

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

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

Truck / Trailer or

To inspect Vehicle No:

Make:

Hyundai Z40

C.C.

168r

at Workshop n/s

Colour:

Blue

A/C:

Insured / Std / NI / NA

of

Sp. Reading

215455

T/Radio:

Insured / Std / NI / NA

Insured:

SJJ 2762A

Eng/No:

Policy No:

5073328869-02

080917-070918

C/No:

KM HLB414MH409 6543

Claims No:

MT 10998911-001

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

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

(Policy Condition)

Tyre Size:

F:

205/60R16

R:

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

N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Campeon

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

12/6/18

D.O.I.

13/6/18

Survey held at

CDHE (Loyang)

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

N/S Prod.

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

Date / Time

Action / Instruction

SHA 1784P - CC4 / TL / 7014921 / Rltb3g2

DUA: 300717

INC

PIP

14/6/18

SJJ 2762A - X
Contact PIP \$3105.68 / 2A, 2
Red: \$491.12, 13 1/2Signature
18/6/2018

RECEIVED 18 JUN 2018

Date/Time, File Pass to?



Preli. Report

Days Of Repair:

2

1) Enpost



Final Report

Resurvey No. of Trip:

1

Date/Time, File Return to?

2)

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$

Survey Fee:

Transportation

) S + RS \$

) Photos

) Others

Report Format:

TP

P/P: \$3105.68

160



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/INC18010818/K1rb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 13-06-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJJ 2762A	Veh. Inspected	SHA 1784P
Policy No.	5073328869-02	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	13/06/2018

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	12/06/2018	Inspection Date	13/06/2018
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

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="12/06/2018 17:24"/>																				
Vehicle No.(For Motor)	<input type="text" value="SJJ2762A"/>	<input type="button" value="Search"/>																					
<table><thead><tr><th>Select</th><th>Policy No.</th><th>Policyholder Name</th><th>Policyholder NRIC</th><th>Product</th><th>Cover Type</th><th>Vehicle No.</th><th>Insured Object</th><th>Commence Date</th><th>Expiry Date</th></tr></thead><tbody><tr><td><input checked="" type="radio"/></td><td>5073328869-02</td><td>D N G TRANSPORT</td><td>53313045W</td><td>GPC</td><td>drive CLASSIC</td><td>SJJ2762A</td><td>SJJ2762A</td><td>08/09/2017</td><td>07/09/2018</td></tr></tbody></table>				Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date	<input checked="" type="radio"/>	5073328869-02	D N G TRANSPORT	53313045W	GPC	drive CLASSIC	SJJ2762A	SJJ2762A	08/09/2017	07/09/2018
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date														
<input checked="" type="radio"/>	5073328869-02	D N G TRANSPORT	53313045W	GPC	drive CLASSIC	SJJ2762A	SJJ2762A	08/09/2017	07/09/2018														
<input type="button" value="Continue"/>																							

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/0997986-002	COMFORT TRANSPORTATION PTE LTD	SHB 4262D	YH 9914R	08/06/2018	\$ 4,432.08	\$ 950.00
2	MT/0998484-002	COMFORT TRANSPORTATION PTE LTD	SHC 8469T	SJE 5006G	11/06/2018	\$ 4,423.50	\$ 1,000.00
3	MT/0998302-002	COMFORT TRANSPORTATION PTE LTD	SHC 8216G	SIL 8294K	12/06/2018	\$ 4,846.50	\$ 2,500.00
4	MT/0998092-002	COMFORT TRANSPORTATION PTE LTD	SHA 1516Y	SLV 1256P	09/06/2018	\$ 6,632.76	\$ 1,350.00
5	MT/0997943-002	COMFORT TRANSPORTATION PTE LTD	SHA 7325S	YL 7550Z	08/06/2018	\$ 6,352.54	\$ 2,950.00
6	MT/0998908-001	COMFORT TRANSPORTATION PTE LTD	SHA 7595D	VJ 5050Z	08/06/2018	\$ 5,255.52	\$ 3,150.00
7	MT/0998211-002	CITYCAB PTE LTD	SHB 2173R	SIL 2667G	11/06/2018	\$ 2,761.58	\$ 830.00
8	MT/0998911-001	COMFORT TRANSPORTATION PTE LTD	SHA 1784P	SJJ 2762A	12/06/2018	\$ 3,596.80	\$ 3,105.68

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	12/06/2018 13:51
Date Of Accident	12/06/2018 09:55
Exact Location Of Accident	EUNOS LINK X UBI AVE 2/KAKI BUKIT AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA1784P
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	LIM HWA ANN
NRIC No	S1380769H
Date Of Birth	01/12/1959
Occupation	OUTDOOR
Date Of Driving Pass	23/06/1981
Driving Experience	36 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97885801
Fax Number	
Contact Number	
EMail Address	DANIEL_LIMHA@YAHOO.COM.SG

Address	BLK 669C JURONG WEST STREET 64 #09-64
Postcode	643669
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	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 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)	3
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJJ2762A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

RIGHT REAR

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	LIM HWA ANN
Approximate Age	59
Injuries Sustain	FELT PAIN ON RIGHT SHOULDER
Injured person in which vehicle?	SHA1784P
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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 189303821R

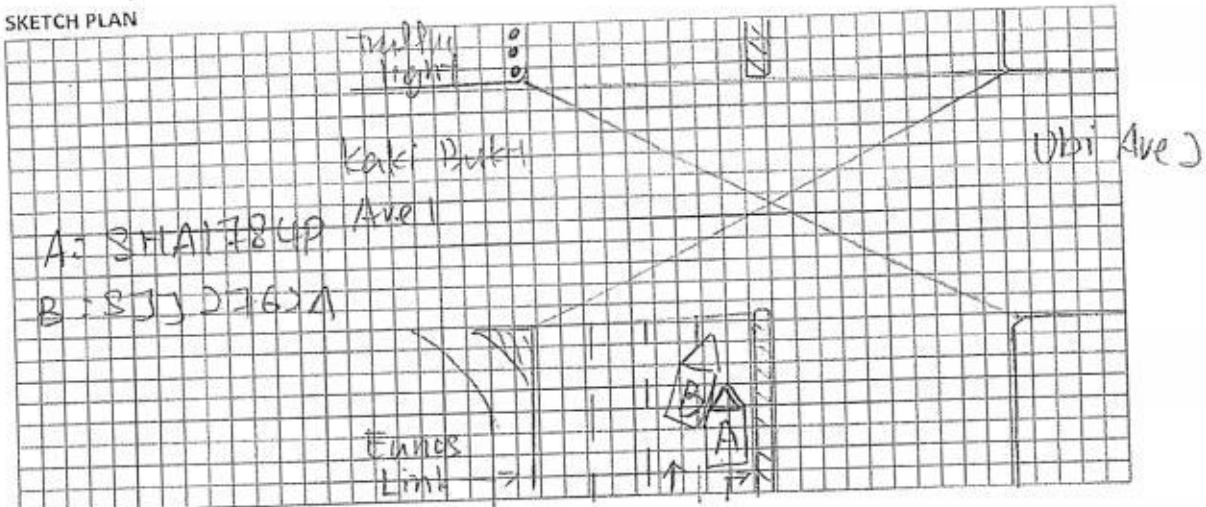
Policyholder's Signature
Date & Time:

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

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

Loke Wei Yieng

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/6/18 at about 09:55 hrs, I was driving on extreme right lane along Eunos link to Ubi Ave 2.

Suddenly a car SJJ2762A sharply encroached into my lane from my left hand side. Due to this cause, the car right rear portion hit and grazed onto the left front portion of my taxi.

02 female passengers on board my taxi. However I felt pain onto right shoulder after the accident, will consult doctor later on.

DECLARATION

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

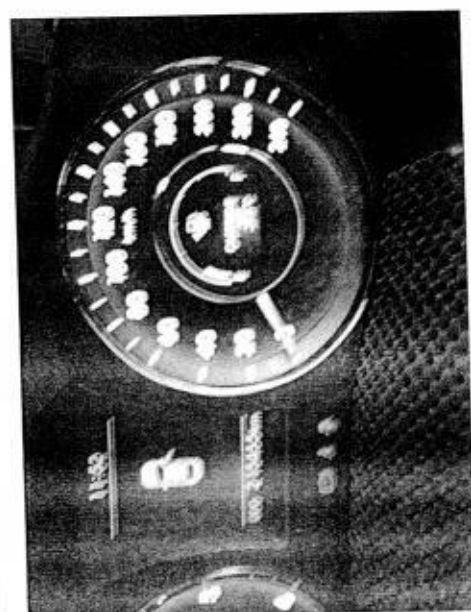
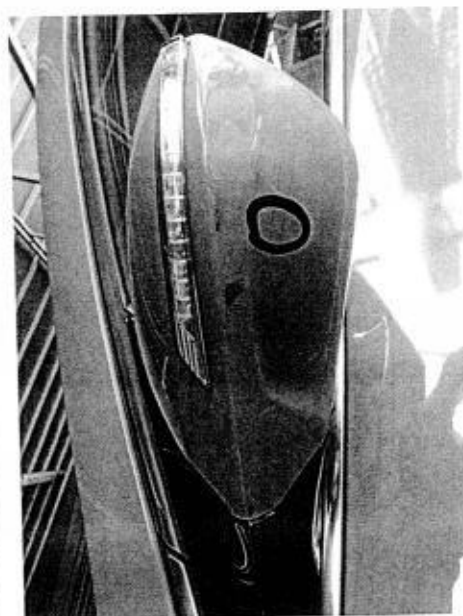
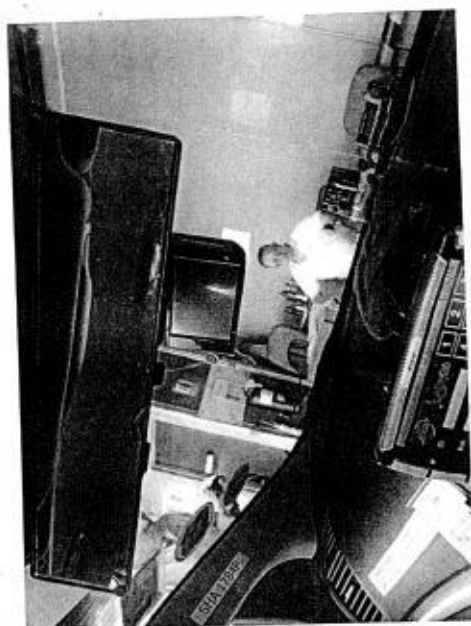
COMFORT TRANSPORTATION PTE LTD
CO REG NO 199303821R

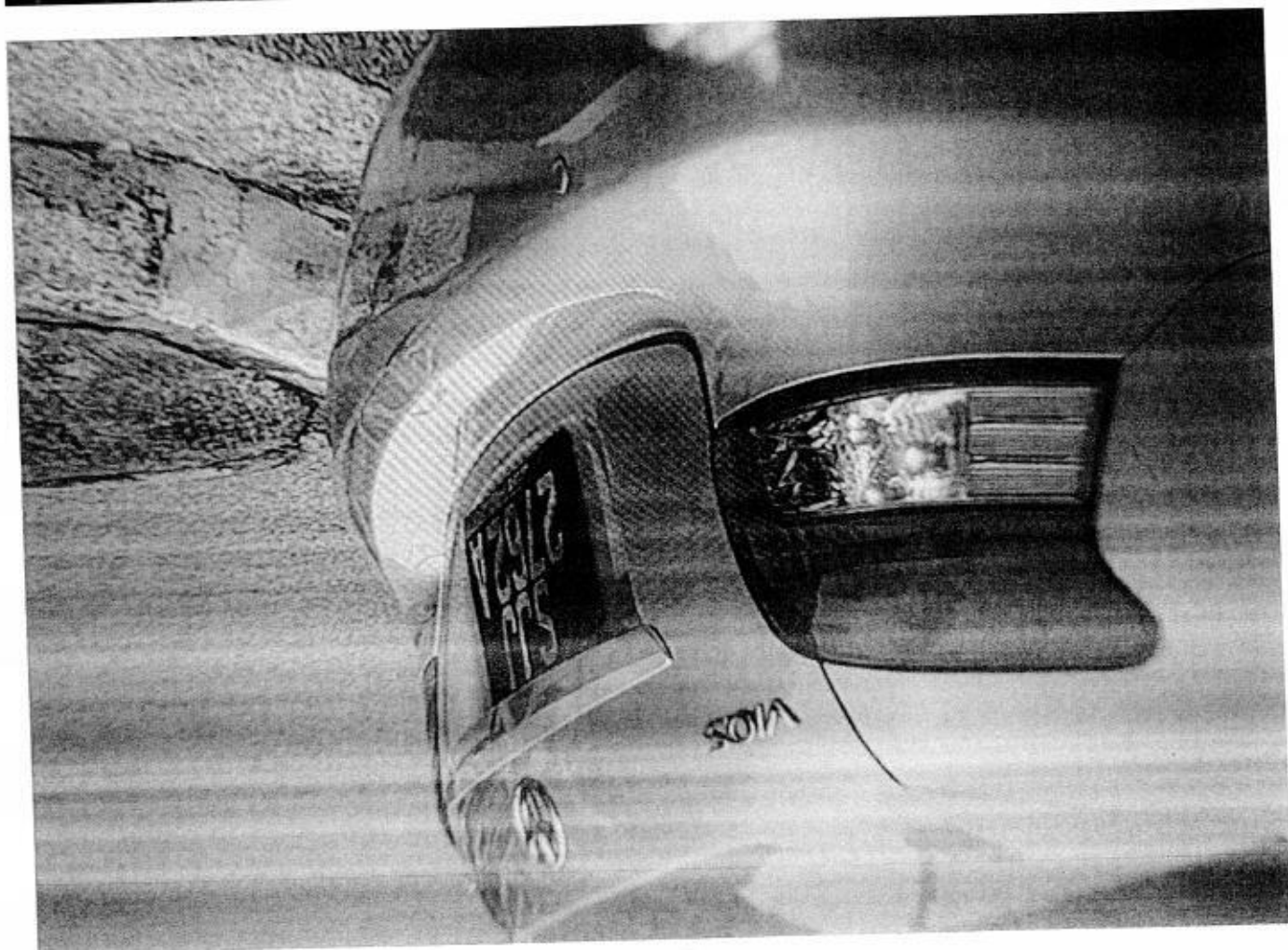
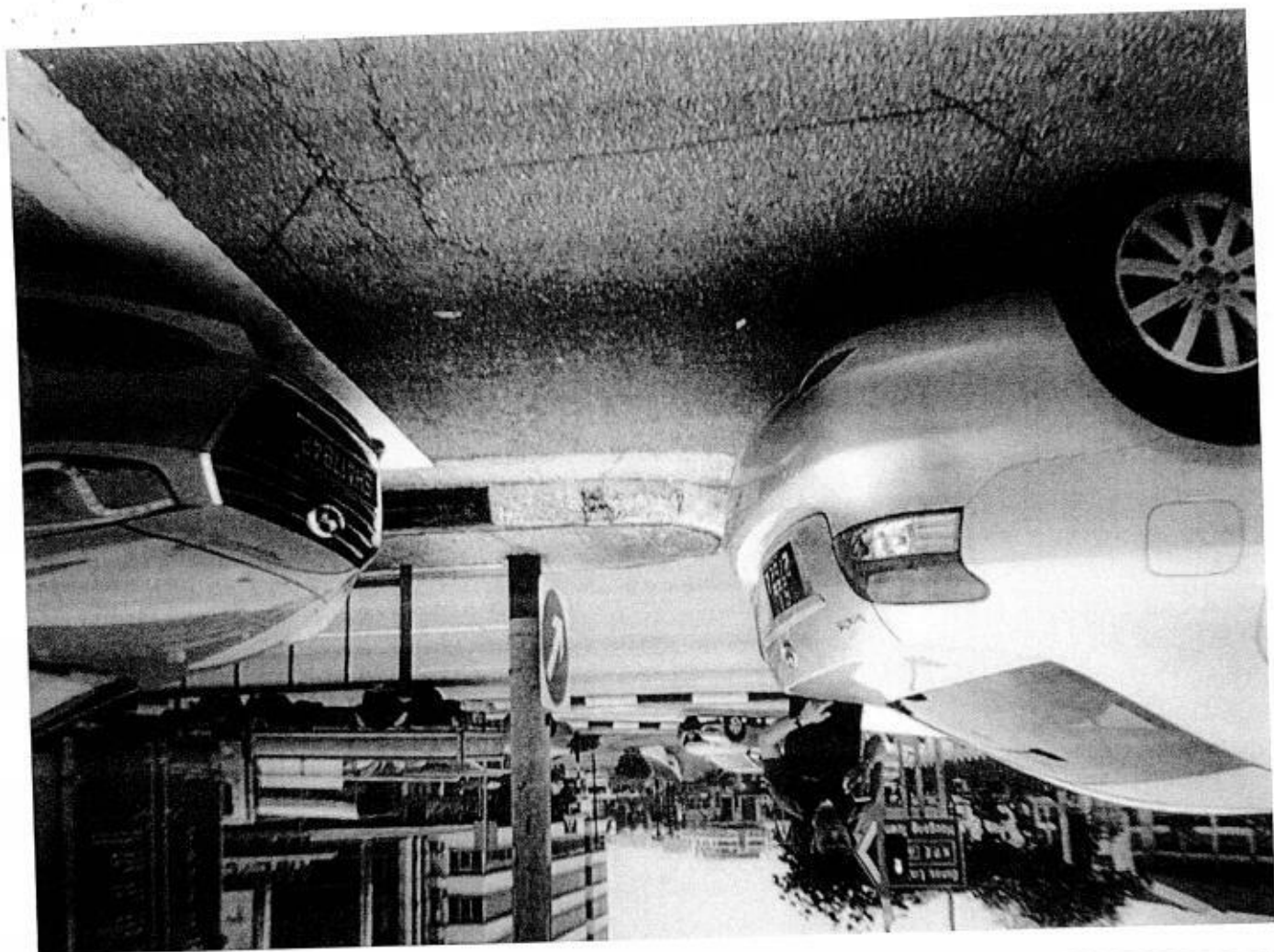
Policyholder's Signature
Date & Time:

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

Loke Wei Yieng

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





Date/Time: 12.06.2018 16:44

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD Sales Order:

JC NO305174601

CUSTOMER

COMFORT TRANSPORTATION PTE LTD

3/MS 7010045

CUSTOMER NO. 383 SIN MING DRIVE

ADDRESS Singapore SINGAPORE 575717

65508755

(O)

L. (R)

(P)

SCOUNT CARD NO.

REGN NO.

SHA1784P

MILEAGE

MAKE

HYUNDAI

FUEL

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

MODEL

I-40

DATE/TIME IN

12.06.2018 11:50

YR OF MANU

24.11.2016

TARGET DATE

CHASSIS CODE

KMHLB41UMHU096543

COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 12.06.2018

NATURE: 3P 12.06.2018

S/NO	LABOR CODE	DESCRIPTION
------	------------	-------------

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

to:

to:

Vehicle No.:

SHA1784P

CHIANG

Exit Pass

Vehicle No.:

SHA1784P

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

to be returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 1784P

DATE 12/6/2018 15:41

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>Refurb</i>			\$ 562.30
	Front Bumper Bracket Top (LH) <i>Refurb</i>			\$ 22.40
	Front Bumper Bracket (LH) <i>Refurb</i>			\$ 24.60
	Headlamp (LH) <i>Refurb</i>			\$ 1,388.00
	Front Fender (LH) <i>Refurb</i>			\$ 619.00
	Front Fender Shield (LH) <i>Refurb</i>			\$ 169.80
	Front Fender Retainer <i>Refurb</i>			\$ 9.20
	Frt Wheel Hub Cap, LH <i>Refurb</i>			\$ 150.70
SUB TOTAL				\$ 2,946.00
LESS 20%				\$ 589.20
DISCOUNTED TOTAL				\$ 2,356.80
Labour Charge				
	Panel Beating			\$ 560.00 <i>400</i>
	Spray Painting Charge			\$ 500.00 <i>400</i>
	Wiring Charge			\$ 50.00 <i>30</i>
	Tuff Kote			\$ 50.00 <i>20</i>
	Frt Wheel Alignment			\$ 80.00 <i>60</i>
TOTAL LABOUR				\$ 1,240.00
ESTIMATE TOTAL				\$ 3,596.80

Kahe 11/11/18
 13/6/18 1050h.
 2 hrs
 PIP
 Before Part p/h

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 PTE LTD
REPAIR ESTIMATE

Date: 14.06.2018
Time: 10:38:01
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 : 305174601
REGN NO : SHA1784P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 24.11.2016
DATE/TIME IN : 12.06.2018 11:50
ACCIDENT DATE : 12.06.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-2322-A	I40V3 BUMPER W LIP & FOG	1	562.30	20.00	449.84
0002 04-01-0103-0574-A	I40VC PANEL-FENDER LH+	1	619.00	20.00	495.20
0003 04-01-0103-0781-A	I40V2 LAMP ASSY-HEAD LH#	1	1,388.00	20.00	1,110.40
0004 04-01-0103-0639-G	I40VC BRACKET-FR BUMPER S	1	24.60	20.00	19.68
0005 04-01-0103-0658-G	I40VC CAP ASSY-WHEEL HUB	1	150.70	20.00	120.56

SUB-TOTAL : 2,195.68

JOB NATURE

0000 L	PANEL BEATING	400.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	400.00
0002 17-01	CHECK ALL LIGHTING	30.00
0003 20-00	TUFF COAT ON AFFECTED PARTS.	20.00
0004 20-08	ADJUST FRONT WHEEL ALIGNMENT	60.00

SUB-TOTAL : 910.00

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

JOB NO : 305174601
REGN NO : SHA1784P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 24.11.2016
DATE/TIME IN : 12.06.2018 11:50
ACCIDENT DATE : 12.06.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 3,105.68

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305174601
Date : 14/06/18

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

FINALIZATION FORM

To : LKK Fax :
Attn : KALVIN
Vehicle Reg No. : SHA1784P 12/06/18

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

1. The repair job shall bill to: NTUC SJJ2762A
2. The finalized amount shall be:

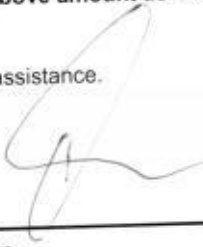
(a) Spare Parts after List discount	<u>\$2,195.68</u>
(b) Labour Charges	<u>\$910.00</u>
Total for Part-By-Part Repair Cost	<u>\$3,105.68</u>
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less:	
Final Lumpsum Repair cost	


3. Estimated normal period for repairs: 2 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 : CHIANG
Tel : 62148314
Fax : 65468156

Signature : 
Name : Kalvin
Date : 14/6/18

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		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:



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/INC18010818/K1rbn2	
73 BRAS BASAH ROAD		Date:		21-06-2018
#05-01 NTUC TRADE UNION HOUSESINGAPORE				
189556		Code:		INC4
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SJJ 2762A	Veh. Inspected	SHA 1784P	
Policy No.	5073328869-02	Coverage (\$)	0.00	
Claim No.	MT/0998911-001	Excess (\$)	0.00	
Assign From		Assign Date	13/06/2018	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	KMHLB41UMHU096543	Colour	BLUE	
Odometer	215455	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	CAMPEON	7 mm	
L/H Front Tyre	205/60 R16	CAMPEON	7 mm	
R/H Rear Tyre	205/60 R16	CAMPEON	7 mm	
L/H Rear Tyre	205/60 R16	CAMPEON	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	12/06/2018	Inspection Date	13/06/2018	
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.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		



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 1784P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER COVER	DEFORMED	562.30	562.30
1	FRONT BUMPER BRACKET TOP (LH)	SERVICEABLE	22.40	-
1	FRONT BUMPER BRACKET (LH)	CRACKED	24.60	24.60
1	HEADLAMP (LH)	GRAZED	1,388.00	1,388.00
1	FRONT FENDER (LH)	DENTED	619.00	619.00
1	FRONT FENDER SHIELD (LH)	SERVICEABLE	169.80	-
1	FRONT FENDER RETAINER	SERVICEABLE	9.20	-
1	FRT WHEEL HUB CAP, LH	GRAZED	150.70	150.70
	LESS 20% DISCOUNT		-589.20	-548.92
			2,356.80	2,195.68
LABOUR				
	PANEL BEATING.		560.00	400.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.		50.00	30.00
	TUFF KOTE.		50.00	20.00
	FRT WHEEL ALIGNMENT.		80.00	60.00
			1,240.00	910.00
GRAND TOTAL			3,596.80	3,105.68
RECOMMENDED COST OF REPAIRS (CONFIRMED)				3,105.68

Report Ref No. NS/INC18010818/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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