



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/INC18011849/K1vb	
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556	Date: 28-06-2018
Code: INC4	



1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLR 8609E	Veh. Inspected	SH 9359P
Policy No.	5094401283	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	28/06/2018

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	28/06/2018	Inspection Date	28/06/2018
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.

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"/>	5094401283	PRIVILEGE LEASING PTE. LTD.	201308268W	GFT	drivo CLASSIC	SLR8609E	SLR8609E	19/09/2017	

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	28/06/2018 10:24
Date Of Accident	28/06/2018 07:20
Exact Location Of Accident	THE RIVERVALE CONDO LOBBY DRIVEWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH9359P
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	TOYOTA
Model	PRIUS HYBRID 4G
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	ONG QUEE KEE
NRIC No	S1589225J
Date Of Birth	25/10/1953
Occupation	OUTDOOR
Date Of Driving Pass	28/08/1987
Driving Experience	30 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92978968
Fax Number	
Contact Number	
EMail Address	OQK.MARGARET@GMAIL.COM

Address BLK 483 CHOA CHU KANG AVENUE 5
#11-174

Postcode 680483

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 ON 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 2

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) 2

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

REFER 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 SLR8609E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TANIA LIM GEK SIANG

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage FRONT RH

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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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

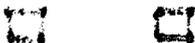
Teo Yen Yee

Policyholder's Signature
Date & Time:

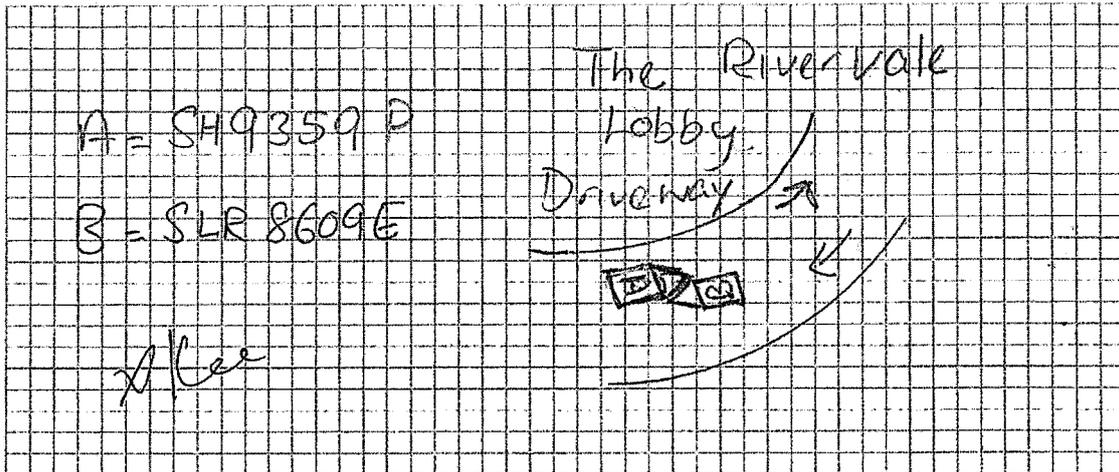
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

GIA/IMC SketchPlanForm_V3



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/6/18 @ abt 0720 hrs, I was driving along above location. Somewhere along the bend, suddenly a car SLR8609E from the opposite direction (front right portion) collided onto the front right portion of my taxi. I female pax on board & no one was injured 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.:

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305180936

CUSTOMER
 NAME: COMFORT TRANSPORTATION PTE LTD
 V/M/S: 7010045
 CUSTOMER NO: 383 SIN MING DRIVE
 ADDRESS: Singapore SINGAPORE 575717
 65508755

VAR S

REGN NO: SH 9359P	MILEAGE
MAKE: TOYOTA	FUEL
MODEL: PRIUS HYBRID(G4)	E.....1/2.....F
YR OF MANU: 26.07.2017	DATE/TIME IN: 28.06.2018 08:25
CHASSIS CODE: JTDKB3FU403562934	TARGET DATE
	COMPLETION DATE/TIME:

(C)

SCOUT CARD NO.

JOB DESCRIPTION

Accident Date: 28.06.2018
 NATURE: 3P 28.06.2018

QTY/NO	LABOR CODE	DESCRIPTION
		<i>NTUC - taxi front damage</i>
		<i>LKK/Kadmi -</i>

CHECKED & PASSED OUT BY: _____

 SERVICE ADVISOR CUSTOMER'S SIGNATURE

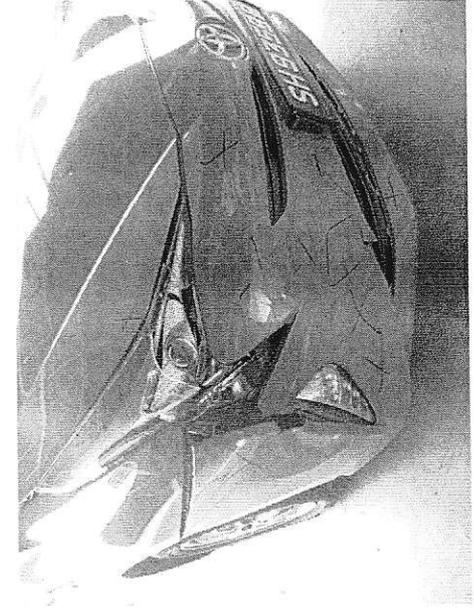
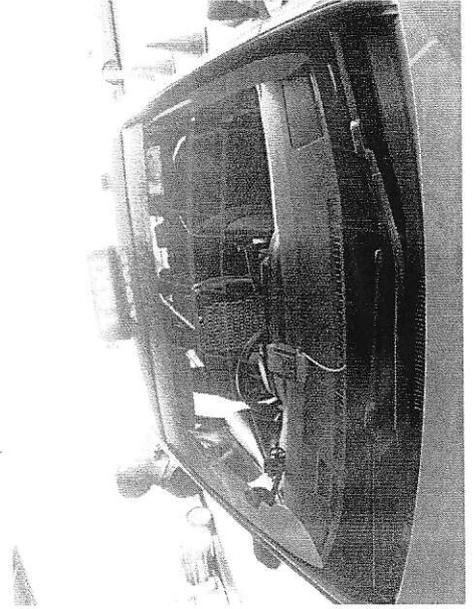
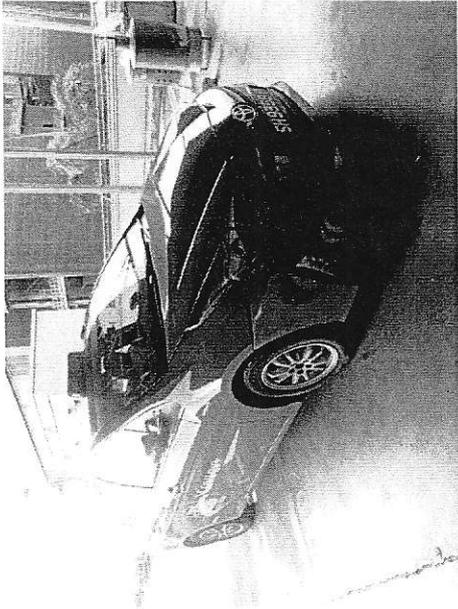
Acknowledgement Slip
 Name: _____
 Job No.: SH 9359P
Larry Ng
 Signature of Service Advisor: _____
 Signature/Date: _____

Exit Pass
 Vehicle No.: SH 9359P
 Name of Service Advisor: _____
 Date: _____

Returned to Service Reception upon collection

To be kept by Security Guard

305180936



REPAIR ESTIMATE

VEHICLE : SH 9359P

NTUC

DOA : 28.06.18

MODEL : TOYOTA PRIUS

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
BONNET X ^{sc}			\$ 883.10
INSULATOR, HOOD X ^{sc}			\$ 394.10
INSULATOR CLIPS X ^m			\$ 3.60
EMBLEM, RADIATOR GRILLE / ^{sc}			\$ 86.50
GRILLE, RADIATOR ?			\$ 310.60
FRONT BUMPER COVER / ^{sc}			\$ 490.50
FRONT BUMPER REINFORCEMENT X ^{sc}			\$ 691.50
FRONT BUMPER REINFORCEMENT ABSORBER X ^{sc}			\$ 115.70
FRONT BUMPER SPONGE / ^{sc}			\$ 78.80
FRONT BUMPER CENTRE GRILLE / ^{sc}			\$ 301.90
FRONT BUMPER SIDE RETAINER X ^{sc} 4x ^{sc} RH ^{sc} LH		\$ 77.00	\$ 154.00
FRONT UNDER COVER X ^{sc}			\$ 178.30
FRONT BUMPER TOP GARNISH X ^{sc}			\$ 225.40
ABSORBER, FRONT BUMPER, LOWER (SPONGE LOWER) X ^{sc}			\$ 127.70
UNIT ASSY, HEADLAMP, RH (LED) / ^{sc}			\$ 3,380.30
UNIT ASSY, HEADLAMP, LH (LED) X ^{sc}			\$ 3,380.30
BRACKET, HEADLAMP MOUNTING, RH X ^{sc}			\$ 25.50
BRACKET, HEADLAMP MOUNTING, LH X ^{sc}			\$ 25.50
Front RH Fender to repair			
Front RH Lower Fog lamp / ^{sc}			\$ 10,853.30
SUB TOTAL		910.20	\$ 2,170.66
LESS 20% 252			\$ 8,682.64
DISCOUNTED TOTAL			
Front Fender Emblem (RH) ^{sc} 60.80			
wiper Washer Tank / ^{sc} 181.80			
FRONT NUMBER PLATE X ^{sc}			\$ 25.00
FRONT NO. PLATE GARNISH X ^{sc}			\$ 99.00
			\$ 124.00
Labour Charge			\$ 400
Panel Beating			\$ 540.00
Spray Painting Charge			\$ 460.00
Wiring Charge			\$ 50.00
Tuff Kote			\$ 50.00
Towing Charge			\$ 50.00
TOTAL LABOUR			\$ 1,050.00
ESTIMATE TOTAL			\$ 9,856.64

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: _____

Kahar (11/11/18)
28/6/18 1426
3 Pp,
PIP
Bhara Pind P/L

Larry Ng

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 . 305180936

Date : 6. Jul. 2018

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SH 9359P

Date of Accident: 28.06.2018

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

1. The repair job shall bill to: NTUC SLR8609E

2. The finalized amount shall be:

(a) Spare Parts after List discount \$4,408.80

(b) Labour Charges \$820.00

Total for Part-By-Part Repair Cost \$5,228.80

(c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: _____
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 : [Signature]

Signature : [Signature]

Name : Larry Ng

Name : Kalvin

Tel : 6214 8316

Date : _____

Fax : 6546 8156

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:

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

JOB NO : 305180936
 REGN NO : SH 9359P
 MILEAGE : 0000000000
 MAKE : TOYOTA
 MODEL : PRIUS HYBRID(G4)
 DATE OF REGN : 26.07.2017
 DATE/TIME IN : 28.06.2018 08:25
 ACCIDENT DATE : 28.06.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0302-0988-G	PRIG4 EMBLEM ASSY RADIATO	1	86.50	25.00	64.87
0002	04-01-0302-2292-G	PRIG4 COVER FRONT BUMPER	1	490.50	25.00	367.87
0003	04-01-0302-0635-G	PRIG4 ABSORBER FRONT BUMP	1	78.80	25.00	59.10
0004	04-01-0302-2915-G	PRIG4 UNIT ASSY HEADLAMP	1	3,380.30	25.00	2,535.22
0005	04-01-0302-4991-G	PRIG4 LAMP ASSY FOG RH	1	910.20	25.00	682.65
0006	04-01-0302-2271-G	PRIG4 PLATE-BACK DOOR NAM	1	60.80	25.00	45.60
0007	04-01-0302-2971-G	PRIG4 SUPPORT FRONT BUMPE	1	77.00	25.00	57.75
0008	04-01-0302-2062-G	PRIG4 GRILLE RADIATOR LOW	1	310.60	25.00	232.95
0009	04-01-0302-2164-G	PRIG4 GRILLE SUB-ASSY RAD	1	301.90	25.00	226.42
0010	05-01-0302-2018-G	PRIG4 JAR ASSY- WINDSHIEL	1	181.80	25.00	136.35

SUB-TOTAL : 4,408.78

JOB NATURE

0000 L PANEL BEATING 400.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 05.07.2018

REPAIR ESTIMATE

Time: 15:05:19

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 : 305180936
REGN NO : SH 9359P
MILEAGE : 000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(C
DATE OF REGN : 26.07.2017
DATE/TIME IN : 28.06.2018 08:25
ACCIDENT DATE : 28.06.2018

JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0001	23-502			SPRAYPAINT ON AFFECTED AREA		400.00
0002	17-01			CHECK ALL LIGHTING		20.00
						SUB-TOTAL : 820.00
						TOTAL : 5,228.78

MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO

Kalvin Ang (LKKAuto)

From: Ng Nyuk Phin <ngnp@cdge.com.sg>
Sent: Tuesday, 10 July 2018 8:58 AM
To: Calvin Ang (LKKAuto)
Subject: Fw: RE: SH 9359P DOA: 28.06.2018 *** DROP CLAIM ***

Importance: High

Dear Calvin,

Please be informed that we have dropped claim against NTUC, the insurer of SLR8609E as we are in the process of having a mutual settlement with SLR8609E.

However, we wish to inform that we reserve the right to reopen the case and pursue a Third Party claim if the mutual settlement is not successful.

Thank you for your kind understanding and cooperation.

Regards,
Larry Ng
CDGE
Loyang Taxi Crash Repairs
6214 8316

-----Forwarded by Ng Nyuk Phin/cdge/delgronotes on 07/10/2018 08:42AM -----
To: Ng Nyuk Phin <ngnp@cdge.com.sg>
From: "Kalvin Ang (LKKAuto)" <kalvinang@lkkauto.com>
Date: 07/09/2018 04:24PM
Subject: RE: SH 9359P FINALISATION DOA: 28.06.2018 ** ON HOLD **

Ok, content noted.

Best Regards,

Kalvin Ang | Automotive Assessor

Technical Investigation & Accident Reconstructionist (SAE-A)

LKK Auto Consultants

phone: 6256-3561 | email: kalvinang@lkkauto.com | fax: 6256-4315