

(06/11/13)

Surveyor: Kelvin

REF:

NS/INC/18015399/K1+d3n2

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

CD/TP/Ws/TP RES/OD RES/EVA/INV/INV

To Insp'd Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SFK 1386 BPolicy No: 5099849327 (28/4/18-27/4/19)Claims No: MT/1008416-002

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHA 7241A Yr Regn: 30 Jun 2011

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

Truck / Trailer or

Make: Hyundai Sonata c.c. 1991Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 241369 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: K M HETXIVMBA 813428

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60 R16

R: _____

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

TOYO / YOKO or Went/da

Front

Rear

R/Bal. 7 mmR/Bal. 7 mmL/Bal. 7 mmL/Bal. 7 mmD.O.A. 21/8/18D.O.I. 23/8/18Survey held at CHE (Loyang)

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

o/s Front.

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

Date / Time Action / Instruction

SHA 7241A - NS/INC/12005117 / H1P

Dof: 10/3/12 IK

SFK 1386 B - CS3 / CTT 18001505 / Wbe 2

Dof: 31/12/17 4127/8/18 Check ups \$1150/ 2 hrs.

RECEIVED 20 AUG 2018

Date/Time, File Pass to?

1)

Typest

☐ : Prel. Report☐ : Final Report

Date/Time, File Return to?

2)

Report Format:

Lump Sum / I.B.I.: (\$ 1150)Days Of Repair: 2Resurvey No. of Trip: 1

Add Fee:

☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

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/INC18015399/K1td3

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 24-08-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SFK 1386B	Veh. Inspected	SHA 7241A
Policy No.	5099849327	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	24/08/2018

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	21/08/2018	Inspection Date	23/08/2018
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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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="21/08/2018 13:37"/>
Vehicle No.(For Motor)	<input type="text" value="SFK1386B"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5099849327		GORIDE	53358820X	GPC	Third Party	SFK1386B	SFK1386B	28/04/2018	27/04/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/1008665-002	COMFORT TRANSPORTATION PTE LTD	SHB 3269S	GBB 1783H	24/8/2018	7:40	\$ 6,299.34
2	MT/1009047-001	COMFORT TRANSPORTATION PTE LTD	SHC 3368J	SKS 4492G	21/8/2018	12:20	\$ 2,094.70
3	MT/1008670-002	COMFORT TRANSPORTATION PTE LTD	SHB 6363H	GV 7181R	17/8/2018	9:20	\$ 6,435.74
4	MT/1008491-002	COMFORT TRANSPORTATION PTE LTD	SHA 6925S	SLJ 6705R	22/8/2018	2:25	\$ 3,963.12
5	MT/1008416-002	COMFORT TRANSPORTATION PTE LTD	SHA 7241A	SFK 1386B	21/8/2018	13:35	\$ 3,433.52
6	MT/1007858-002	COMFORT TRANSPORTATION PTE LTD	SHC 8600E	SJM 5967R	18/8/2018	6:15	\$ 2,968.84
7	MT/1008496-002	COMFORT TRANSPORTATION PTE LTD	SHC 8731K	SKQ 1872Z	22/8/2018	12:15	\$ 2,481.58

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	23/08/2018 08:47
Date Of Accident	21/08/2018 13:35
Exact Location Of Accident	LOR CHUAN TWDS BRADELL RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA7241A
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-2.0 (A)

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	KHOO CHEE CHUAN
NRIC No	S1491636I
Date Of Birth	20/11/1961
Occupation	OUTDOOR
Date Of Driving Pass	13/07/1983
Driving Experience	35 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90259292
Fax Number	
Contact Number	
Email Address	KOOLFOUR@LIVE.COM.SG

Address	BLK 863 YISHUN AVENUE 4 #06-65
Postcode	760863
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	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	SFK1386B
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	97897968
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	LH CENTRE

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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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
21/8/18

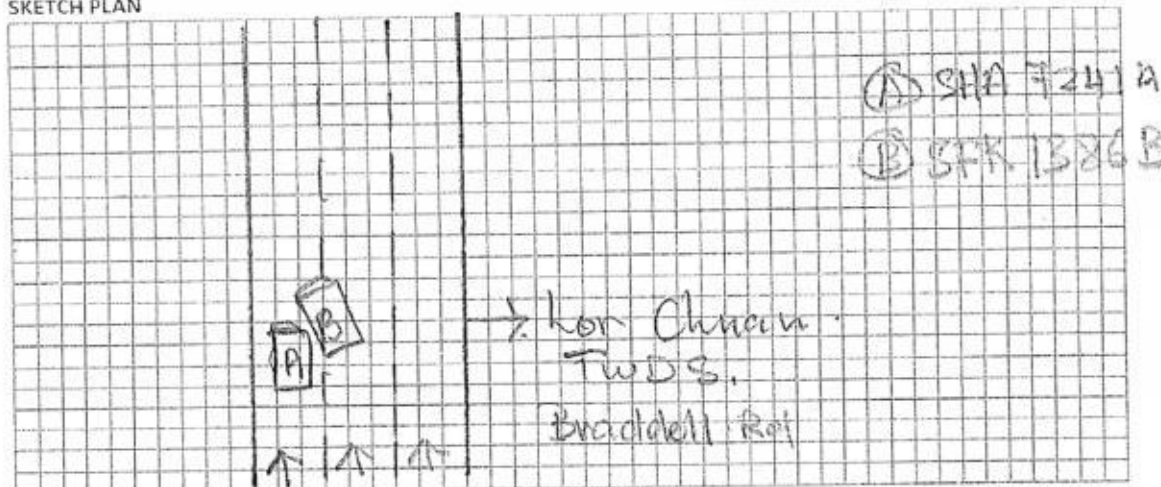
Policyholder's Signature
Date & Time:

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 21/8/2018 at about 1335 hrs, I vehicle A was driving along Lorong Chuan toward braddell road on the extreme left lane, Vehicle B Came from my right cuts into my lane and grazed against Vehicle A right front portion lose Control no one was injured at that time

DECLARATION

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

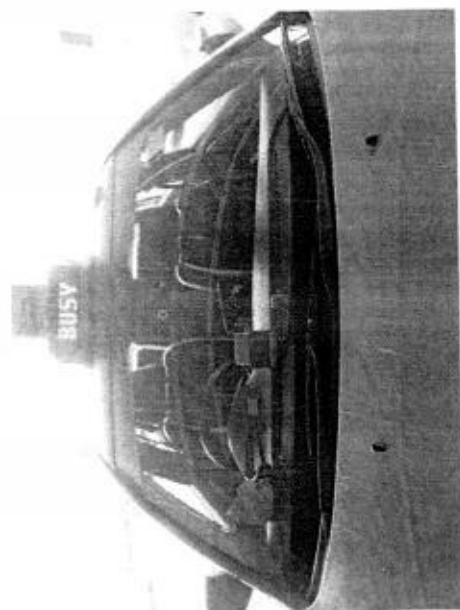
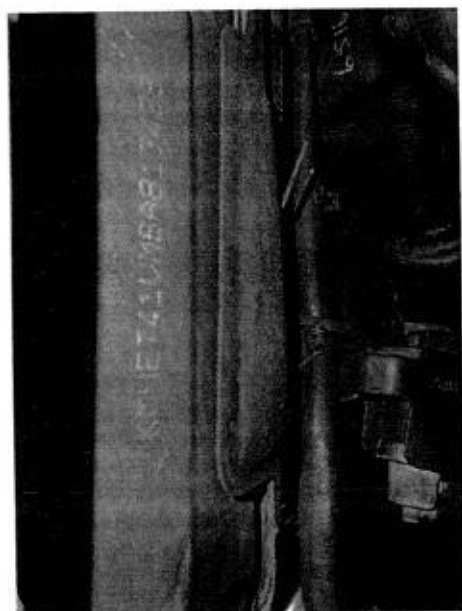
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

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.:

21/8/18
Jackson Heng
CSO
JACKSON



REPAIR ESTIMATE*

VEHICLE NO : SHA 7241A

DATE 23/8/2018 3:01

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover <i>X repair</i>			\$ 538.80
	Front Bumper Sponge <i>X 500</i>			\$ 136.30
	Front Bumper Reinforcement <i>X 500</i>			\$ 504.10
	Front Bumper Bracket Top (RH) <i>X 22.40</i>			\$ 22.40
	Front Bumper Protector (RH) <i>X repair</i>			\$ 29.20
	Headlamp (RH) <i>hatched</i>			\$ 797.90
	Front Fender (RH) <i>X repair</i>			\$ 593.00
	Front Fender Shield (RH) <i>X 86.00</i>			\$ 86.00
	Front Fender Retainer <i>X 9.20</i>			\$ 9.20
	SUB TOTAL			\$ 2,716.90
	LESS 20%			\$ 543.38
	DISCOUNTED TOTAL			\$ 2,173.52
	Front Fender Advertisement Logo (RH) <i>ne</i>			\$ 100.00
				\$ 100.00
	Labour Charge			
	Panel Beating			\$ 560.00 <i>300</i>
	Spray Painting Charge			\$ 500.00 <i>400</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	Tuff Kote			\$ 50.00 <i>X 1</i>
	TOTAL LABOUR			\$ 1,160.00
	ESTIMATE TOTAL			\$ 3,433.52
<p><i>Kalvin (LKK)</i></p> <p><i>23/8/18 1540 hrs.</i></p> <p><i>2 Days</i></p> <p><i>4/5</i></p> <p><i>After Repair photo</i></p> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> • To take 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 <p>Acknowledged by Repairer</p> <p>Signature:</p> <p>Date:</p>				
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.				

member of COMFORTDELGRO

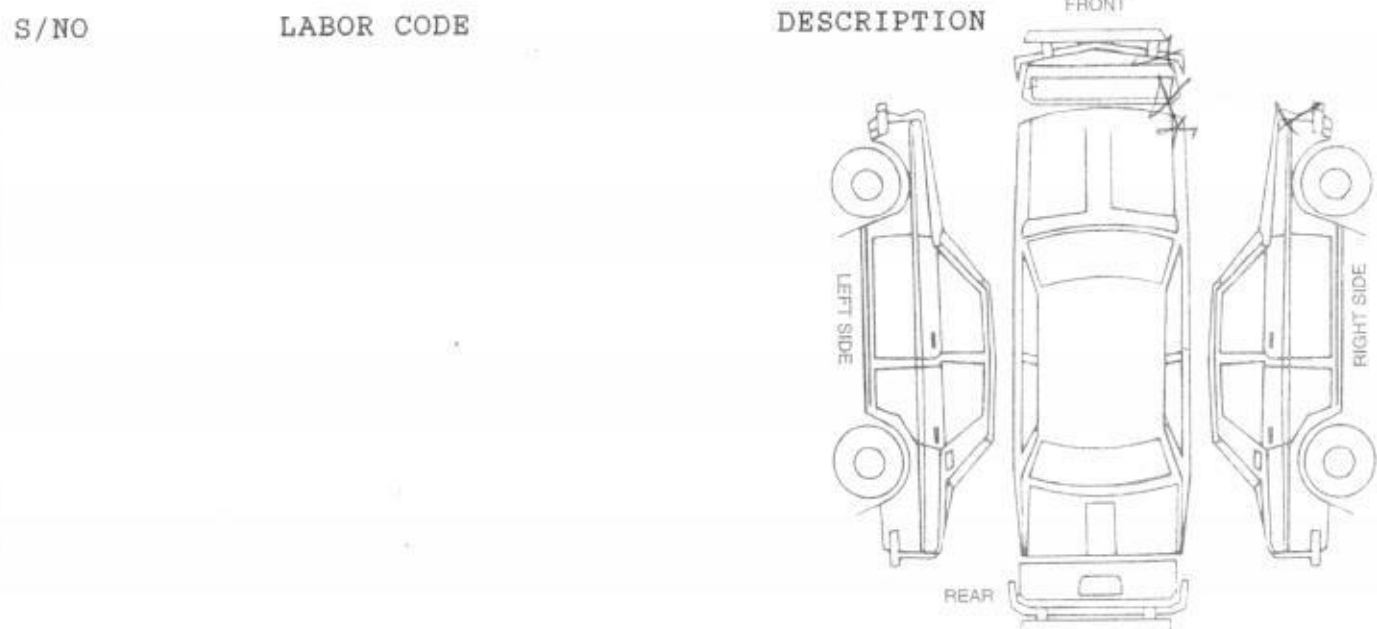
Date/Time: 23.08.2018 11:01 Page : 1

Team: IN ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO.: 305203208

OWNER	REGN NO.: SHA7241A	MILEAGE
COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
7010045	MODEL: SONATA	E.....1/2.....F
OWNER NO. 383 SIN MING DRIVE	DATE/TIME IN 23.08.2018 10:20	
ESS SINGAPORE SINGAPORE 575717	YR OF MANU 30.06.2011	TARGET DATE
65508755 (O)	CHASSIS CODE KMHET41VMB813428	COMPLETION DATE/TIME
(P)		
UNT CARD NO.		

JOB DESCRIPTION

Accident Date: 21.08.2018
NATURE: 3P 21.08.2018



KED & PASSED OUT BY:			
SERVICE ADVISOR		CUSTOMER'S SIGNATURE	
Signature/Date: 		Exit Pass	
Vehicle No.: SHA7241A	LKE	Vehicle No.: SHA7241A	
Service Advisor		Date	
Returned to Service Reception upon collection		To be kept by Security Guard	




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/INC18015399/K1td3n2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 03-09-2018	
Code: INC4			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SFK 1386B	Veh. Inspected	SHA 7241A
Policy No.	5099849327	Coverage (\$)	0.00
Claim No.	MT/1008416-002	Excess (\$)	0.00
Assign From		Assign Date	23/08/2018
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA813428	Colour	BLUE
Odometer	241369	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/60 R16	WEST LAKE	7 mm
L/H Front Tyre	215/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	215/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	215/60 R16	WEST LAKE	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	21/08/2018	Inspection Date	23/08/2018
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



Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 7241A

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	FRONT BUMPER COVER	TO REPAIR SEE LABOUR	538.80	-
1	FRONT BUMPER SPONGE	SERVICEABLE	136.30	-
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	504.10	-
1	FRONT BUMPER BRACKET TOP (RH)	SERVICEABLE	22.40	-
1	FRONT BUMPER PROTECTOR (RH)	TO REPAIR SEE LABOUR	29.20	-
1	HEADLAMP (RH)	GRAZED	797.90	797.90
1	FRONT FENDER (RH)	TO REPAIR SEE LABOUR	593.00	-
1	FRONT FENDER SHIELD (RH)	SERVICEABLE	86.00	-
1	FRONT FENDER RETAINER	SERVICEABLE	9.20	-
	LESS 20% DISCOUNT		-543.38	-159.58
			2,173.52	638.32
	<u>SPECIAL NETT ITEMS</u>			
1	FRONT FENDER ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
			100.00	100.00
	<u>LABOUR</u>			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT BUMPER COVER,FRONT BUMPER PROTECTOR (RH) AND FRONT FENDER (RH).		560.00	300.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.	NOT NECESSARY	50.00	-
	-		-	-
	-		-	-
	-		-	-
			1,160.00	720.00
	GRAND TOTAL		3,433.52	1,458.32

Report Ref No. NS/INC18015399/K1td3n2

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,150.00
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Report Ref No. NS/INC18015399/K1td3n2



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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