

(00/11/13)

Surveyor: Kelvin

REF: NS/INC18015475/Klv3n2

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

Insured: GBB1783H

Policy No. 5096221112 (28/11/17-27/8/18)

Claims No. MT/1008665-002

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHB 32695 Yr Regn: 30Z / 201

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

Truck / Trailer or

Make: Nya Tai Suck cc 1.99l

Colour: Yellow A/C: Insured / Std / NI / NA

Sp. Reading: 34798 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: CMHET41VMOA 813235

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inord / Jammed / Leaked / Burnt or

Brake: Inord / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215 / 60R16

R: _____

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

TOYO / YOKO or Hankook

Front

R/Bal. 3 mm

L/Bal. 7 mm

D.O.A. 24/8/18

Rear

R/Bal. 7 mm

L/Bal. 7 mm

D.O.I. 24/8/18

Survey held at CDE (Loyang)

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

Rear

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

Date / Time	Action / Instruction
	SHB 32695 - CS/TMP/ISO/SS88/Hlv3n2 DOA: 12/9/15 INC
	GBB1783H - NBA/INC/3019082/3 DOA: 12/10/13 4
27/8/18	Continue 45 \$3600/3 hrs. (Red 2699.34, 435)

RECEIVED 20 AUG 2018

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 29/8 - typist

Report Format: TP

Lump Sum / I.B.I: (\$

3600/-)

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee:

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

Survey Fee:

Transportation:

S + RS, SI

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/INC18015475/K1vd3				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 27-08-2018	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBB 1783H	Veh. Inspected	SHB 3269S	
Policy No.	5096221112	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	27/08/2018	
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				
5. General Information				
Accident Date	24/08/2018	Inspection Date	24/08/2018	
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.				

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	SU 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

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.

Date of Accident

24/08/2018 07:58

Vehicle No. (For Motor)

GBB1783H

Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5096221112		BTS TRADING & MANAGEMENT PTE. LTD.	200603927C	GCV	Third Party	GBB1783H	GBB1783H	28/11/2017	27/08/2018

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	24/08/2018 12:02
Date Of Accident	24/08/2018 07:40
Exact Location Of Accident	CTE(CITY) BF BALESTIER EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB3269S
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
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
TAXI

Vehicle Category

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-18088937MFSH
Cover Note Number	

Driver

Name of Driver	CHONG CHIN FATT
NRIC No	S1249094A
Date Of Birth	12/03/1957
Occupation	OUTDOOR
Date Of Driving Pass	20/07/1976
Driving Experience	42 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91251761
Fax Number	
Contact Number	
Email Address	ATYME7852@YAHOO.COM.SG

Address	BLK 671 JALAN DAMAI #05-07
Postcode	410671
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	CHAIN 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	
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: : 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

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	GBB1783H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KANDASAMY NANDAKUMAR
NRIC/Passport Number	G7724494N
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	REAR AND FRT

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJC1810M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

IMPORTANT NOTICE

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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.

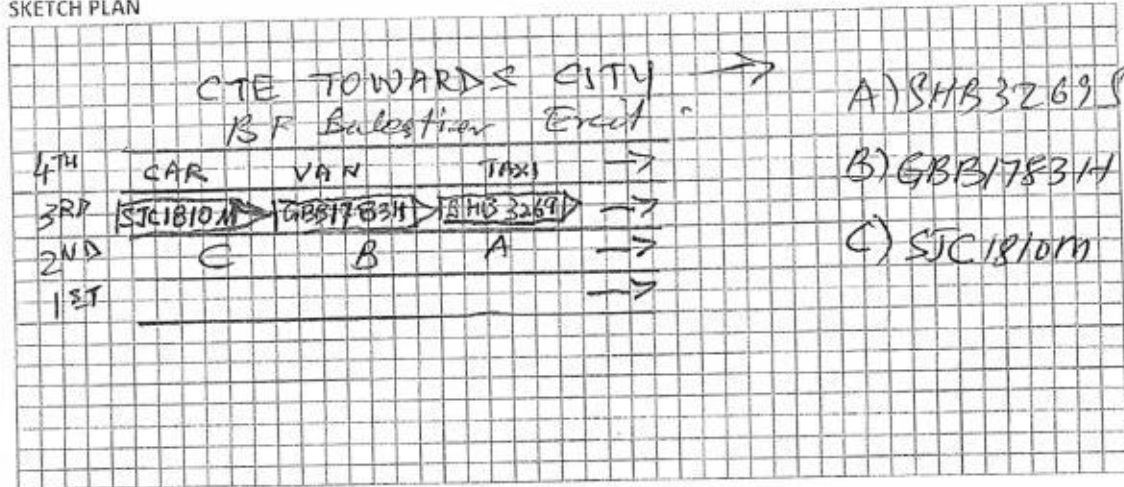
CITYCAB PTE LTD
CO. REG. NO. 199502839G

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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 1) Front car stop
- 2) I stop
- 3) Behind van bang me
- 4) Full stop

On 24/8/18 at about 0740hrs while I was A gradually stopped because vehicle in front stopped. Veh B collided on on the rear of my stationary. When I came out to check, it was realized that Veh C was also involved in the chain collision.

DECLARATION

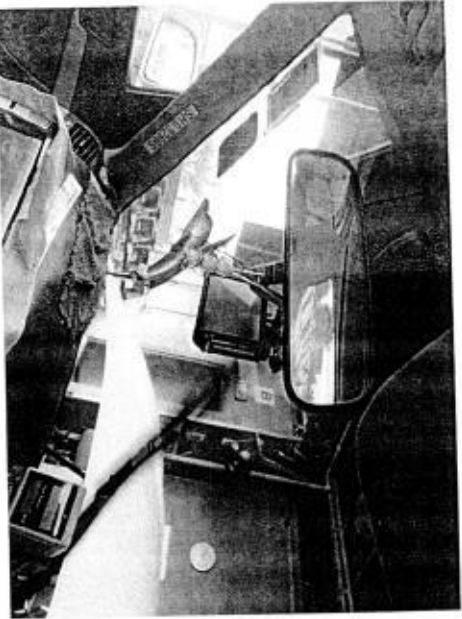
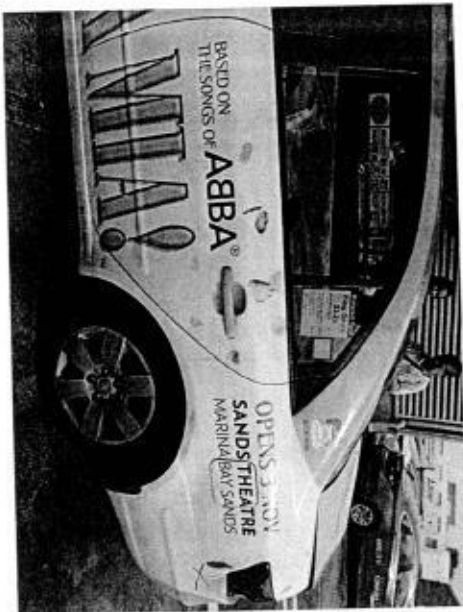
I/We declare the foregoing particulars are true in every respect.

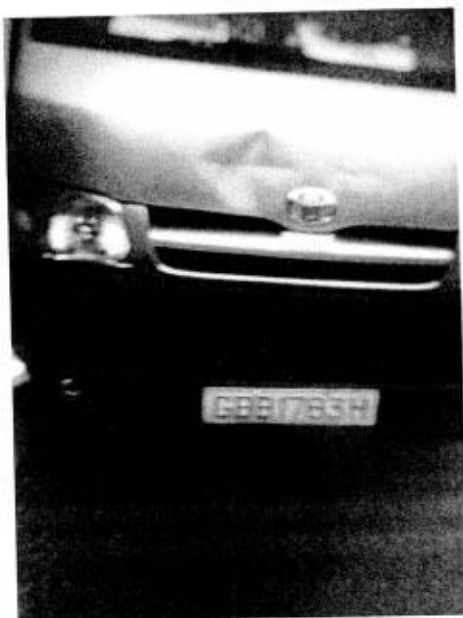
CITYCAB PTE LTD
CO. REG. NO. 199502839G

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.:





CITY CAB PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHB 32695

DATE 24/8/2018 14:40

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid — <i>Ant</i>			\$ 1,349.50
	Boot Lid Rubber <i>X su</i>			\$ 110.90
	Boot Lid Lock Upper <i>X su</i>			\$ 132.10
	Boot Lid Lock Lower <i>X su</i>			\$ 30.30
	Boot Lid Sonata Plate — <i>su</i>			\$ 43.60
	Boot Lid Hyundai Plate — <i>su</i>			\$ 24.20
	Boot Lid 'H' Emblem — <i>su</i>			\$ 26.10
	Boot Lid CRDI Plate — <i>su</i>			\$ 22.70
	Boot Lid Lamp (LH/RH) <i>LH RH X su</i>	\$	230.20	\$ 460.40
	Licence Lamp (LH/RH) <i>X su</i>	\$	32.50	\$ 65.00
	Rear Bumper — <i>Rehnd</i>			\$ 578.40
	Rear Bumper Reinforcement — <i>su</i>			\$ 483.30
	Rear Bumper Clip — <i>su</i>			\$ 22.00
	Rear Bumper Sponge — <i>su</i>			\$ 137.40
	Rear Bumper Under Cover <i>X su</i>			\$ 185.80
	Rear Bumper Protector (LH/RH) <i>X su</i>	\$	38.00	\$ 76.00
	Tail Lamp (LH/RH) — <i>su</i>	\$	344.00	\$ 688.00
	Rear Panel <i>X repair</i>			\$ 391.80
	Rear Panel Garnish <i>X su</i>			\$ 95.80
	SUB TOTAL			\$ 4,923.30
	LESS 20%			\$ 984.66
	DISCOUNTED TOTAL			\$ 3,938.64
	Boot Lid City Cab Logo & Tel No. Sticker — <i>su</i>			\$ 30.00 Nett
	Boot Lid Advertisement Logo — <i>su</i>			\$ 100.00 Nett
	Rear No. Plate <i>X su</i>			\$ 25.00 Nett
	Rear Bumper Reverse Sensor <i>X su</i>			\$ 135.70 Nett
	Rear Bumper Advertisement Logo — <i>su</i>			\$ 50.00 Nett
	Rear Fender Advertisement Logo (LH/RH) — <i>su</i>			\$ 200.00 Nett
	Labour Charge			\$ 540.70
	Panel Beating <i>Ka lu 16/11/18</i>			\$ 850.00 <i>600</i>
	Spray Painting Charge <i>24/8/18 1505 hrs</i>			\$ 750.00 <i>600</i>
	Wiring Charge <i>3 days</i>			\$ 50.00 <i>20</i>
	Tuff Kote <i>4/5</i>			\$ 50.00 <i>20</i>
	Remove/Refix Reverse Sensor <i>After Repair photo</i>			\$ 120.00 <i>Xnn</i>
	TOTAL LABOUR			\$ 1,820.00
	ESTIMATE TOTAL			\$ 6,299.34

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.

Date/Time: 24.08.2018 12:41

Page : 1

JOB CARD

Sales Order:

JC NO.: 305203942

Team: CK ARC Repair TP(CFSO)1

OMER

S CITYCAB PTE LTD
OMER NO. 7010070
ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65551188 (O)

(P)

JUNT CARD NO.

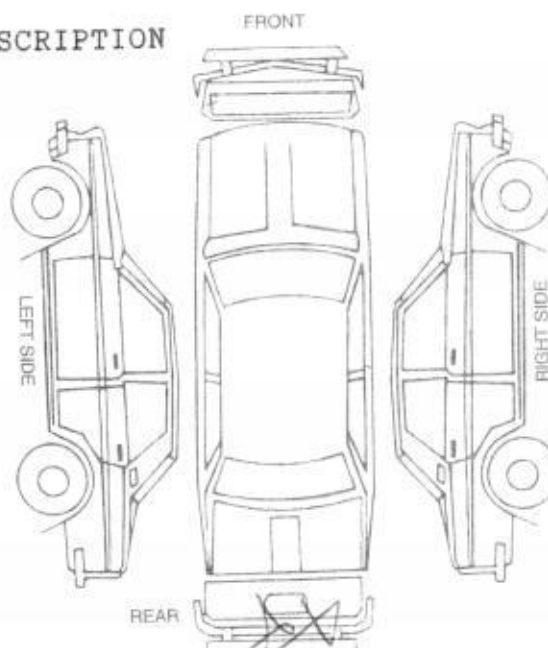
REGN NO:	SHB3269S	MILEAGE
MAKE:	HYUNDAI	FUEL E.....1/2.....F
MODEL	SONATA	DATE/TIME IN 24.08.2018 10:05
YR OF MANU	30.06.2011	TARGET DATE
CHASSIS CODE	KMHET41VMBA813235	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 24.08.2018
NATURE: 3P 24.08.18

S/NO LABOR CODE

DESCRIPTION



WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

No.: SHB3269S JU NTUC LKK

Vehicle No.: SHB3269S

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305203942

Date : 27/08/2018

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHB3269S

Date of Accident : 24/08/2018

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

1. The repair job shall bill to: NTUC --- GBB1783H
###
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges ###
 - Total for Part-By-Part Repair Cost
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$3,600.00
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 : 

Name : JUMANI

Tel : 6214 8315

Fax : 65468156

Signature : 

Name : KALVIN

Date : 27/8/18

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/INC18015475/K1vd3n2

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.	GBB 1783H	Veh. Inspected	SHB 3269S
Policy No.	5096221112	Coverage (\$)	0.00
Claim No.	MT/1008665-002	Excess (\$)	0.00
Assign From		Assign Date	24/08/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHET41VMBA813235	Colour	YELLOW
Odometer	34798	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	HANKOOK	7 mm
L/H Front Tyre	215/60 R16	HANKOOK	7 mm
R/H Rear Tyre	215/60 R16	HANKOOK	7 mm
L/H Rear Tyre	215/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	24/08/2018	Inspection Date	24/08/2018
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:	3 Working Days
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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



Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 3269S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID	DENTED	1,349.50	1,349.50
1	BOOT LID RUBBER	SERVICEABLE	110.90	-
1	BOOT LID LOCK UPPER	SERVICEABLE	132.10	-
1	BOOT LID LOCK LOWER	SERVICEABLE	30.30	-
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
2	BOOT LID LAMP (LH/RH) @\$230.20	N/S CRACKED / O/S SERVICEABLE	460.40	230.20
2	LICENCE LAMP (LH/RH) @\$32.50	SERVICEABLE	65.00	-
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	CRACKED	483.30	483.30
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	TORN	137.40	137.40
1	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	-
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00	SERVICEABLE	76.00	-
2	TAIL LAMP (LH/RH) @\$344.00	CRACKED	688.00	688.00
1	REAR PANEL	TO REPAIR SEE LABOUR	391.80	-
1	REAR PANEL GARNISH	SERVICEABLE	95.80	-
	LESS 20% DISCOUNT		-984.66	-721.08
			3,938.64	2,884.32
<u>SPECIAL NETT ITEMS</u>				
1	BOOT LID CITY CAB LOGO & TEL NO STICKER (SN)	NECESSARY	30.00	30.00
1	BOOT LID ADVERTISEMENT LOGO (SN)	NECESSARY	100.00	100.00
1	REAR NO PLATE (SN)	SERVICEABLE	25.00	-
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00

Report Ref No. NS/INC18015475/K1vd3n2



National Assessment Centre Services

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



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN) <u>LABOUR</u> PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR PANEL. SPRAY PAINTING CHARGE. WIRING CHARGE. TUFF KOTE. REMOVE/REFIX REVERSE SENSOR.	NECESSARY	200.00	200.00
			540.70	380.00
			850.00	600.00
		750.00	600.00	
		50.00	20.00	
		50.00	20.00	
		120.00	-	
		1,820.00	1,240.00	
GRAND TOTAL			6,299.34	4,504.32
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				3,600.00

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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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