

10/11/13

Surveyor: Kalvin

REF:

NS/INC18019048/Klpn2

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD/TP/WS/TPRES/ODRES/EVA/INV/MV

To Inspected Vehicle No: _____

at Workshop no/s _____

of _____

Insured: XD 9615LPolicy No. 5083522048-02 010918-310818Claims No. MT/1016198-007

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 Report: _____ Consistent?: Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHB 326K Yr Regn: Jan 2017Type: M.Car / M.Cycle / Bus / Van / Lorry / T₀ / Prime Mover /

Truck / Trailer or

Make: Hyundai Z80 cc. 1600Colour: Yellow A/O: Insured / Std / NI / NASp. Reading: 216215 T/Radio: Insured / Std / NI / NA

Eng No: _____

C/No: KMHL041444H097856Gen. Cond: Good / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / SD A/Rim orTyre Size: F: 205/60R16

R: _____

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

TOYO / YOKO or Campar

Front: _____ Rear: _____

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 17/10/18 D.O.I. 19/10/18Survey held at CDHE (Layang)

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

O/S Bty

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

Date / Time Action / Instruction

SHB 326K - X

XD 9615L - X

31/10/18 General PIP \$ 7100.22 / 3 Pys (Red B 2044.54, 27%)

RECEIVED 31 NOV 2018

Date/Time, File Pass to?

☐ : Prel. Report11/01/19 typist☐ : Final Report

Date/Time, File Return to?

2)

Report Format: 7PLump Sum / I.B.I. (\$) 7100.22Days Of Repair: 3Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

160

eBaoTech

General Claim

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) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5083522048-02		HOCK CHUAN HONG WASTE MANAGEMENT PTE LTD	199305775C	GCV	Third Party, Fire & Theft	XD9615L	XD9615L	01/09/2018	31/08/2019

Date : 29/10/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.
1	MT/1017706-002	COMFORT TRANSPORTATION PTE LTD	SHD 4701T	XD 3489Z
2	MT/1017524-002	COMFORT TRANSPORTATION PTE LTD	SHB 4146G	SLV 7887D
3	MT/1017402-002	COMFORT TRANSPORTATION PTE LTD	SHC 1706E	SJR 7536L
4	MT/1016198-002	CITYCAB PTE LTD	SHB 3262K	XD 9615L
5	MT/1017995-001	COMFORT TRANSPORTATION PTE LTD	SH 9128P	SKT 8473E
6	MT/1017667-002	COMFORT TRANSPORTATION PTE LTD	SHC 2639J	SGL 3007R
7	MT/1017764-002	COMFORT TRANSPORTATION PTE LTD	SHC 1323B	SDY 1368D

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 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. 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	17/10/2018 14:06
Date Of Accident	17/10/2018 09:50
Exact Location Of Accident	RIVER VALLEY RD TWDS CITY.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB3262K
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	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	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	LIM SEONG HUI
NRIC No	S7234453G
Date Of Birth	16/09/1972
Occupation	OUTDOOR
Date Of Driving Pass	18/05/1998
Driving Experience	20 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97785584
Fax Number	
Contact Number	
Email Address	LSTRIM@YAHOO.COM.SG

Address	30 01-04 LORONG M TELOK KURAU
Postcode	425312
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE POLICE REPORT,

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	XD9615L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	NOT SURE
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	LIM SEONG HUI
Approximate Age	46

Approximate Age

46

Injuries Sustain

BODY PAIN

Injured person in which vehicle?

SHB3262K

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

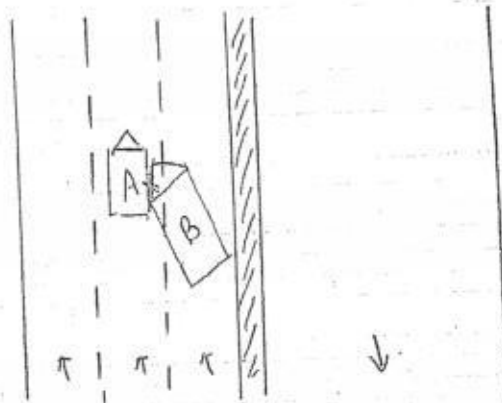
NO

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN



A - SHB 3262K.

B - Unknown.

XD 9615 L

Along River Valley Road Twds City Aft Shanghai Road.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report : T/20181017/2054.

DECLARATION

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

CITYCAB PTE LTD
J. REG. NO. 199502839G

Policyholder's Signature
Date & Time:

Driver's Signature
If driver is not the policyholder:

Reporting Centre Personnel's Signature
Name: J. J. J.

Sketch Plan Pg. 2



**SINGAPORE
POLICE FORCE**



T/20181017/2054

1 of 3

Report No. T/20181017/2054

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/10/2018 12:02		Vide Report No.: E/20181017/0063		Station Diary No.: 40	
Informant's Particulars					
Name of Informant: LIM SEONG HUI			Address: 30 LORONG M TELOK KURAU #01-04 SINGAPORE 425312		
ID Type / ID No.: NRIC NO / S7234453G			Contact No.: Home/Office: Mobile: 88121681		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 16/09/1972	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 17/10/2018 09:50	Type of Location: Straight Road
Location: Along Road 1 RIVER VALLEY ROAD RIVER VALLEY ROAD TOWARDS CITY, AFTER SHANGHAI ROAD.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB3262K	Car	HYUNDAI			Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20181017/2054

2 of 3

Report No. T/20181017/2054

Police Station Of Origin:

Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

CONTINUATION OF REPORT

Brief Details.

On the 17/10/2018, I was driving my taxi (SHB3262K) along River Valley Road toward the city. There were a total of 3 lanes and I was on the middle lane. While my taxi was still on the move, I suddenly felt an impact coming from the right side of my taxi. I look to the right and saw a blue truck that was just beside me.

The truck left side graze against the right side of my taxi. I stop my taxi immediately and keep on honning however the truck still did not stop. I then called for the police assistance. The traffic police came to the scene and took the SD card of my taxi camera. I made a checked on my taxi and discovered a long scratch mark on the right side and the right side mirror dislodged from my taxi. I try to find the side mirror on the road however it was no where to be found. I did not managed to get the plate number of the truck as I was in the state of shock.

While was at scene, I felt pain on my body due to the impact however I did not request for medical attention as it was not urgent. However I will be proceeding to the clinic after lodging the report.



**SINGAPORE
POLICE FORCE**



T/20181017/2054

3 of 3

Report No. T/20181017/2054

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Staff Sgt MUHAMMAD AZLAN BIN ANEE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/10/2018 12:02

Officer In Charge Of Case:

TP / GIT /

Insp MOHAMMED FADZLY BIN ABDUL AZIZ

Contact No.: 65476355

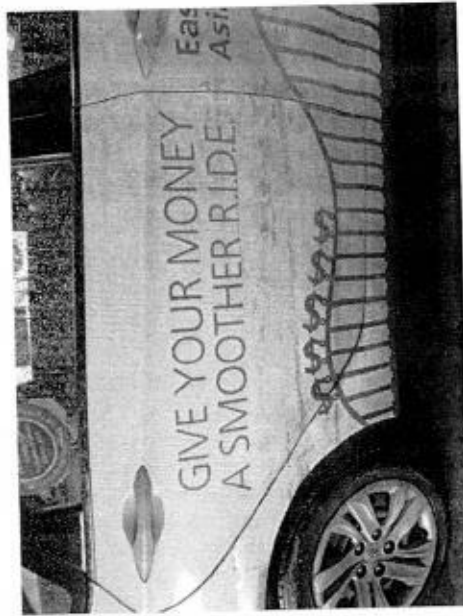
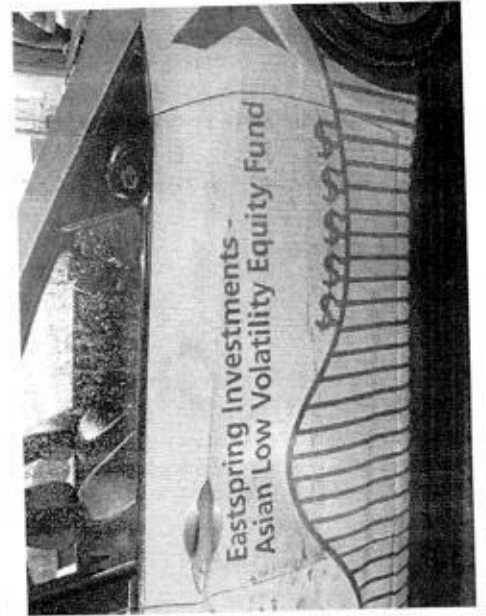
Classification Of Case:

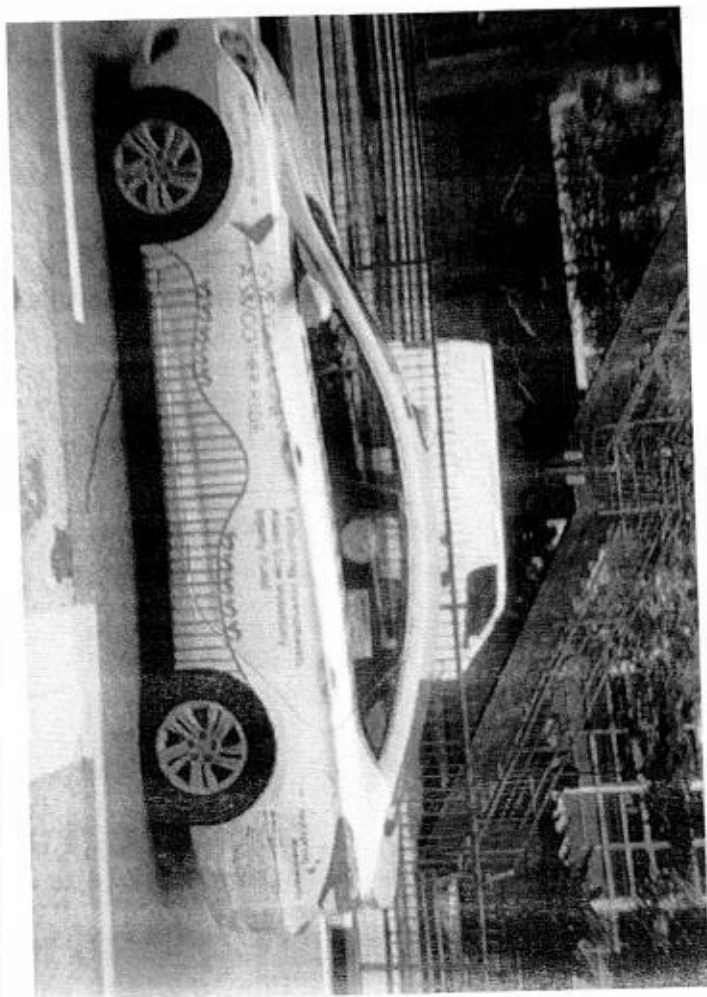
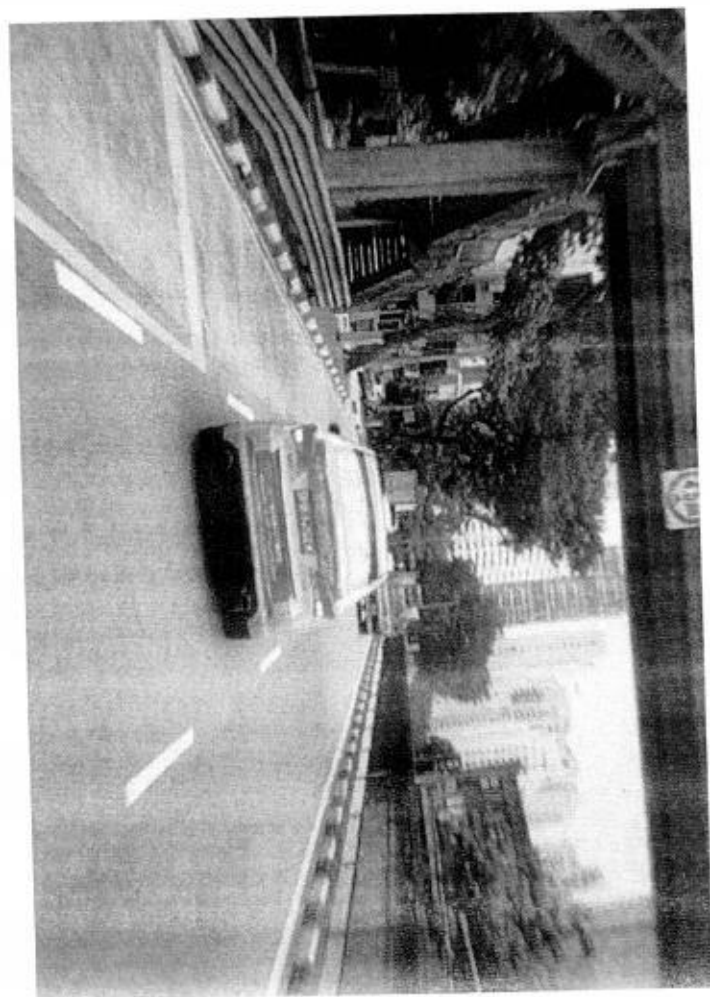
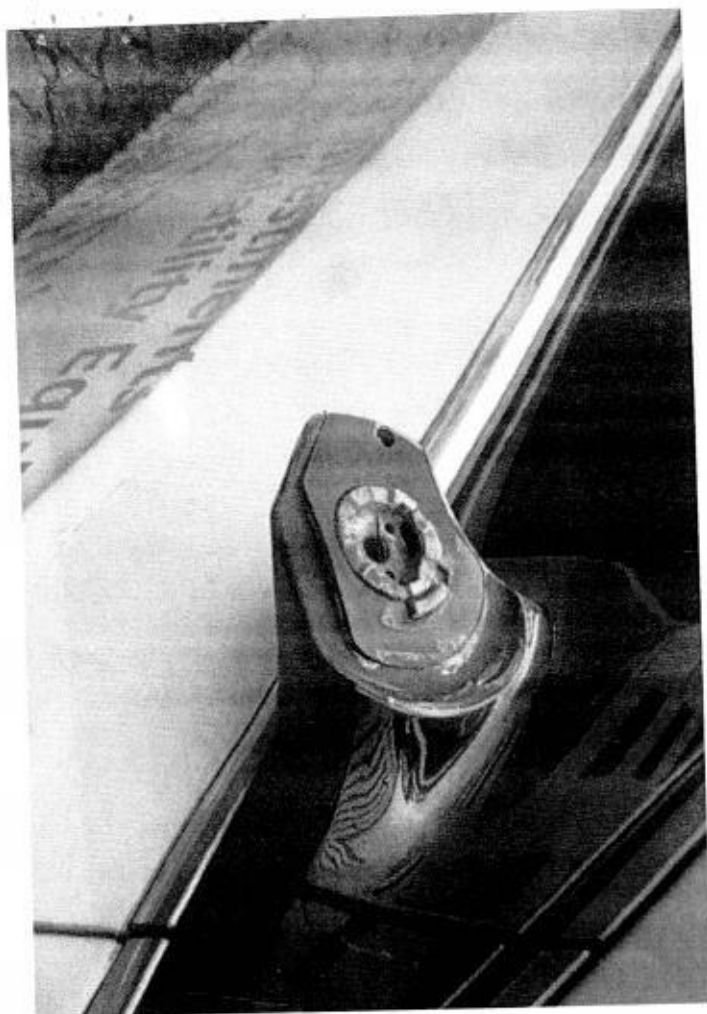
Authentication Stamp

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**SINGAPORE
POLICE FORCE**





CITY CAB PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHB 3262K

DATE 18/10/2018 16:29

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Door (RH) — <i>Paint</i>			\$ 2,201.10
	Front Door (RH) — <i>Paint</i>			\$ 2,256.40
	Front Door Outer Handle (RH) x <i>repair</i>			\$ 36.30
	Front Door Mirror Assy (RH) — <i>Back</i>			\$ 670.00
	Rear Wheel Hub-Cap (RH) — <i>Hubcap</i>			\$ 107.10
	Front Fender (RH) — <i>Paint</i>			\$ 566.30
	<i>Rear Bumper x repair</i>			
	SUB TOTAL			\$ 5,837.20
	LESS 20%			\$ 1,167.44
	DISCOUNTED TOTAL			\$ 4,669.76
	Rear Bumper Advertisement Logo — <i>net</i>			\$ 50.00 Nett
	Rear Bumper Rubber Mat x <i>" "</i>			\$ 50.00 Nett
	Rear Fender Advertisement Logo (LH/RH) — <i>net</i>		\$ 100.00	\$ 200.00 Nett
	Rear Door Advertisement Logo (RH) — <i>net</i>			\$ 100.00 Nett
	Rear Door Comfortdelgro & Apps Sticker (RH) — <i>net</i>			\$ 80.00 Nett
	Front Door Coloured Comfort Logo (RH) — <i>net</i>			\$ 75.00 Nett
	Front Door Advertisement Logo (RH) — <i>net</i>			\$ 100.00 Nett
	Front Fender Advertisement Logo (RH) — <i>net</i>			\$ 100.00 Nett
				\$ 755.00
	Labour Charge			
	Panel Beating-Repair Fender — <i>3 hrs</i>			\$ 1,200.00 <i>600</i>
	Spray Painting Charge — <i>PIP</i>			\$ 2,100.00 <i>1050</i>
	Wiring Charge			\$ 50.00 <i>20</i>
	Tuff Kote			\$ 50.00
	Remove/Refix Reverse Sensor			\$ 80.00 <i>20</i>
	Transfer of Door			\$ 160.00 <i>80.00</i>
	Rear Wheel Alignment			\$ 80.00 <i>20</i>
	TOTAL LABOUR			\$ 3,720.00
	ESTIMATE TOTAL			\$ 9,144.76

LKR Auto Consultants hereby notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to assessment
- Third party survey is on a "Without prejudice" basis
- No illegal modification is allowed
- Supplementary items 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.

Date/Time: 18.10.2018 16:21

Page : 1

Team: ARC Repair TP(CFS0)1

JOB CARD

Sales Order:

JO NO.: 305227616

TOMER

REGN NO.: SHB3262K

MILEAGE

MS CITYCAB PTE LTD

7010070

MAKE: HYUNDAI

FUEL

TOMER NO. 383 SIN MING DRIVE
RESS Singapore SINGAPORE 575717
65551188 (P) (O)

MODEL I-40

DATE/TIME IN 17.10.2018 12:30

YR OF MANU 05.01.2017

TARGET DATE

NTUC

CHASSIS CODE KMHLB41UMHU097856

COMPLETION DATE/TIME:

COUNT CARD NO.

JOB DESCRIPTION

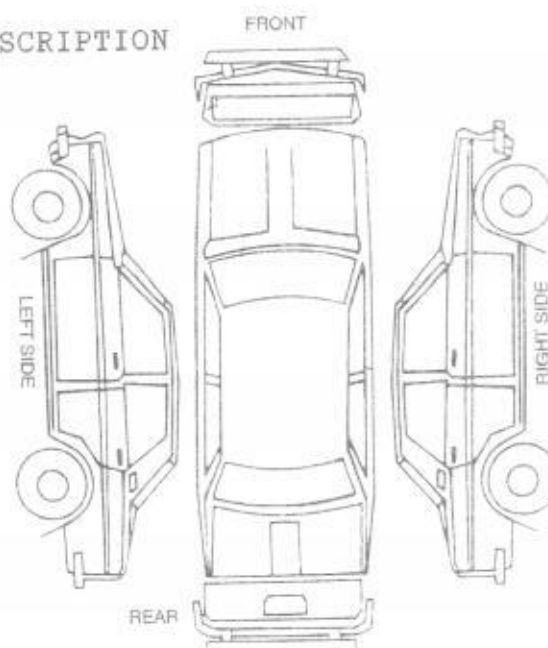
Accident Date: 17.10.2018

NATURE: 3P 17.10.2018

S/NO

LABOR CODE

DESCRIPTION



BOOKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

wedgement Slip

Exit Pass

3 No.:

SHB3262K

LKE

Vehicle No.:

SHB3262K

of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010070
 ADDRESS : CITYCAB PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65551188

JOB NO : 305227616
 REGN NO : SHB3262K
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 05.01.2017
 DATE/TIME IN : 17.10.2018 12:30
 ACCIDENT DATE : 17.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0592-G	I40VC PANEL ASSY-FR DR RH	1 L	2,256.40	20.00	1,805.12
0002 04-01-0103-0595-G	I40VC PANEL ASSY-RR DR RH	1 L	2,201.10	20.00	1,760.88
0003 04-01-0103-0658-G	I40VC CAP ASSY-WHEEL HUB	1 L	107.10	20.00	85.68
0004 28-01-0103-0007-A	(I40)FRT DOOR LOGO CCTPL	1 N	75.00	10.00	67.50
0005 28-01-0103-2014-A	I40V3 APP LOGO REAR DOOR	1 N	80.00	10.00	72.00
0006 04-01-0103-0573-A	I40VC PANEL-FENDER RH+	1 L	566.30	20.00	453.04
0007 04-01-0103-0594-G	I40VC MIRROR ASSY-RR VIEW	1 L	670.00	20.00	536.00

SUB-TOTAL : 4,780.22

JOB NATURE

0000 20-05	RENEW ADVERTISMENT STICKER-	550.00
0001 L	PANEL BEATING	600.00
0002 23-502	SPRAYPAINT ON AFFECTED AREA	1050.00
0003 20-00	TUFF COAT ON AFFECTED PARTS.	20.00

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305227616
REGN NO : SHB3262K
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 05.01.2017
DATE/TIME IN : 17.10.2018 12:30
ACCIDENT DATE : 17.10.2018

JOB / PARTS DESCRIPTION	QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0004 20-02 REMOVE/REFIX DOOR PARTS TO ASSIST REP			100.00		

SUB-TOTAL : 2,320.00

TOTAL : 7,100.22

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No 305227616
Date : 30/10/18

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

FINALIZATION FORM

To : LKK
Attn : Mr KALVIN ANG
Vehicle Reg No. SHB3262K CCPL

Fax :

17.10.18

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

1. The repair job shall bill to: NTUC --- XD9615L
2. The finalized amount shall be:


(a) Spare Parts after List discount	<u>\$4,780.22</u>
(b) Labour Charges	<u>\$2,320.00</u>
Total for Part-By-Part Repair Cost	<u>\$7,100.22</u>
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	<u> </u>
Final Lumpsum Repair cost	<u> </u>


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 : LIM KWOK ENG
Tel : 62148316
Fax : 65468156

Signature : 
Name : Calvin
Date : 31/10/18

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		NO		
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/INC18019048/K1qbn2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 09-11-2018	
			Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	XD 9615L	Veh. Inspected	SHB 3262K	
Policy No.	5083522048-02	Coverage (\$)	0.00	
Claim No.	MT/1016198-002	Excess (\$)	0.00	
Assign From		Assign Date	19/10/2018	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	KMHLB41UMHU097856	Colour	YELLOW	
Odometer	216215	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 O/S BODY. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	17/10/2018	Inspection Date	19/10/2018	
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		

**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 3262K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR DOOR (RH)	DENTED	2,201.10	2,201.10
1	FRONT DOOR (RH)	DENTED	2,256.40	2,256.40
1	FRONT DOOR OUTER HANDLE (RH)	TO REPAIR SEE LABOUR	36.30	-
1	FRONT DOOR MIRROR ASSY (RH)	BROKEN	670.00	670.00
1	REAR WHEEL HUP-CAP (RH)	GRAZED	107.10	107.10
1	FRONT FENDER (RH)	DENTED	566.30	566.30
1	REAR BUMPER (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-1,167.44	-1,160.18
			4,669.76	4,640.72
<u>NETT ITEMS</u>				
1	REAR DOOR COMFORTDELGRO & APPS STICKER (RH) (N)	NECESSARY	80.00	80.00
1	FRONT DOOR COLOURED COMFORT LOGO (RH)(N)	NECESSARY	75.00	75.00
	LESS 10% DISCOUNT		-	-15.50
			155.00	139.50
<u>SPECIAL NETT ITEMS</u>				
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
1	REAR BUMPER RUBBER MAT (SN)	NOT NECESSARY	50.00	-
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
1	REAR DOOR ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
1	FRONT DOOR ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
1	FRONT FENDER ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
			600.00	550.00
<u>LABOUR</u>				
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT DOOR OUTER HANDLE (RH) AND REAR BUMPER.		1,200.00	600.00
	SPRAY PAINTING CHARGE.		2,100.00	1,050.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-

Report Ref No. NS/INC18019048/K1qbn2



National Assessment Centre Services

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

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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 (\$)
	TUFF KOTE.		50.00	20.00
	REMOVE/REFIX REVERSE SENSOR.	NOT NECESSARY	80.00	-
	TRANSFER OF DOOR.		160.00	100.00
	REAR WHEEL ALIGNMENT.	NOT NECESSARY	80.00	-
			3,720.00	1,770.00
	GRAND TOTAL		9,144.76	7,100.22

RECOMMENDED COST OF REPAIRS (CONFIRMED)			7,100.22
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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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