

Time: Kolvin

REF:

NS/INC18019381 / K11b2

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: SJJ 8011U
 Policy No: _____
 Claims No: MT/1016845-002
 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 Report: _____ 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: SH8310K Yr Regn: Jan, 2017
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Hyundai C.C. 1600
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 3 62788 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMHLCB41UMH4098/86
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD / Rim or _____
 Tyre Size: F: 205/60R16
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Hankook
 Front Rear
 R/Bal. 7 mm R/Bal. 7 mm
 L/Bal. 7 mm L/Bal. 7 mm
 D.O.A. 22/10/18 D.O.I. 24/10/18
 Survey held at CDGE (Loyang)
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Front.
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>SH 8310K - G/TCL17019685 / bxx</u> <u>DA: 07/10/17</u> <u>Inc.</u>
	<u>SJJ 8011U - CG/AXA13015606 / UN10823</u> <u>DA: 24/08/13</u> <u>PIP</u>
<u>31/10/18</u>	<u>Checked P/P \$11554.64 / 4 days. Red: 1372.80 (10%)</u>

RECEIVED 01 NOV 2018

Date/Time, File Pass to? ☐ : Prell. Report

1/31 ☒ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

160

Report Format: TP

Lump Sum / P/P: \$ 11554.64

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

10/23/2018

Insurance Particulars Enquiry By Agents Detail

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJJ8011U	22 Oct 2018 / 21:30:00	Successful	N12	NTUC INCOME INS CO-OP LTD

Previous

OK

SH 8310K

TP Claims against NTUC Income: Follow-Through Survey

Date: 31/10/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/1017876-001	COMFORT TRANSPORTATION PTE LTD	SHC 3692Y	GBA 1318Z	27/10/2018	17:30	\$ 2,876.96	\$ 1,550.00
2	MT/1016845-002	COMFORT TRANSPORTATION PTE LTD	SH 8310K	SJJ 8011U	22/10/2018	21:30	\$ 12,927.44	\$ 11,554.64
3	MT/1017146-002	COMFORT TRANSPORTATION PTE LTD	SHC 2821Z	SMD 5979T	25/10/2018	6:35	\$ 1,320.00	\$ 940.00
4	MT/1017648-002	COMFORT TRANSPORTATION PTE LTD	SHA 7383Z	SKA 8811M	26/10/2018	10:00	\$ 1,490.00	\$ 900.00

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 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	23/10/2018 15:30
Date Of Accident	22/10/2018 21:30
Exact Location Of Accident	WEST COAST RD X CLEMENTI AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8310K
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	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	TAHIR B BONO
NRIC No	S1403012C
Date Of Birth	04/09/1960
Occupation	OUTDOOR
Date Of Driving Pass	27/09/1982
Driving Experience	36 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85513223
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 851 JURONG WEST STREET 81 #14-291
Postcode	640851
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 - CROSS JUNCTION
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)	1

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 / Type Of Accident : HEAD TO SIDE

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	SJJ8011U
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	FRT RIGHT
No. Of Passenger (Including Driver)	

SKETCH PLAN

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. 199303821R

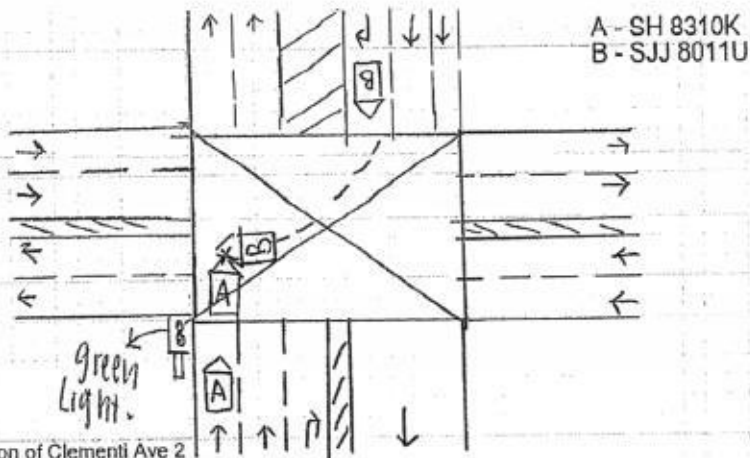
Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 23.10.2018
@ 11:00hrs


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

Sketch Plan Pg. 2

SKETCH PLAN



Along West Coast Road x Junction of Clementi Ave 2

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22.10.2018 at about 21:30 hours I was travelling along West Coast Road x Junction of Clementi
Ave 2 with no passenger onboard .
While travelling on the extreme left lane on West Coast Road with green light is in my favour I proceeded
straight , Suddenly Veh B - SJJ 8011U make a right turn without giving way to me and collided into my Taxi A -
Front Portion .
As it took place too fast I could not take evasive action to prevent this accident .
I have company video and photos at scene to support my claims .
No injury in this accident .
Veh B - Male Driver

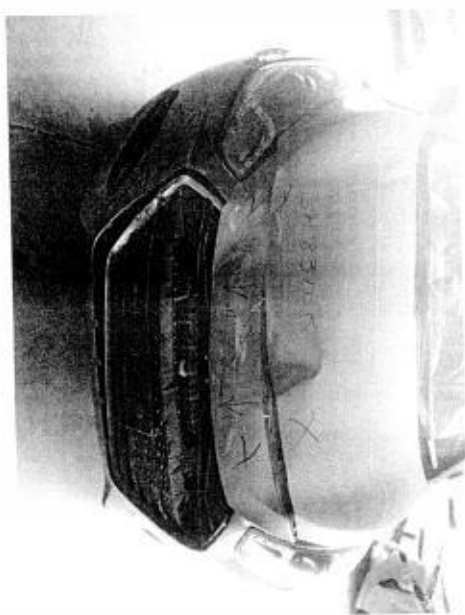
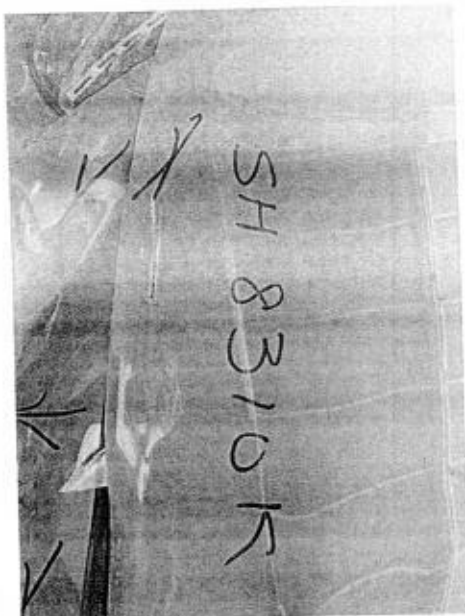
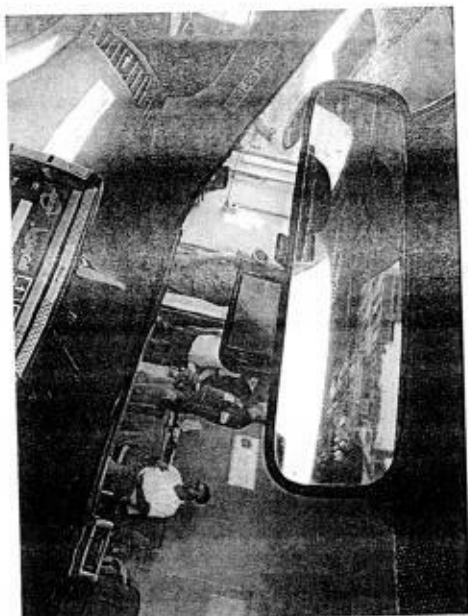
DECLARATION

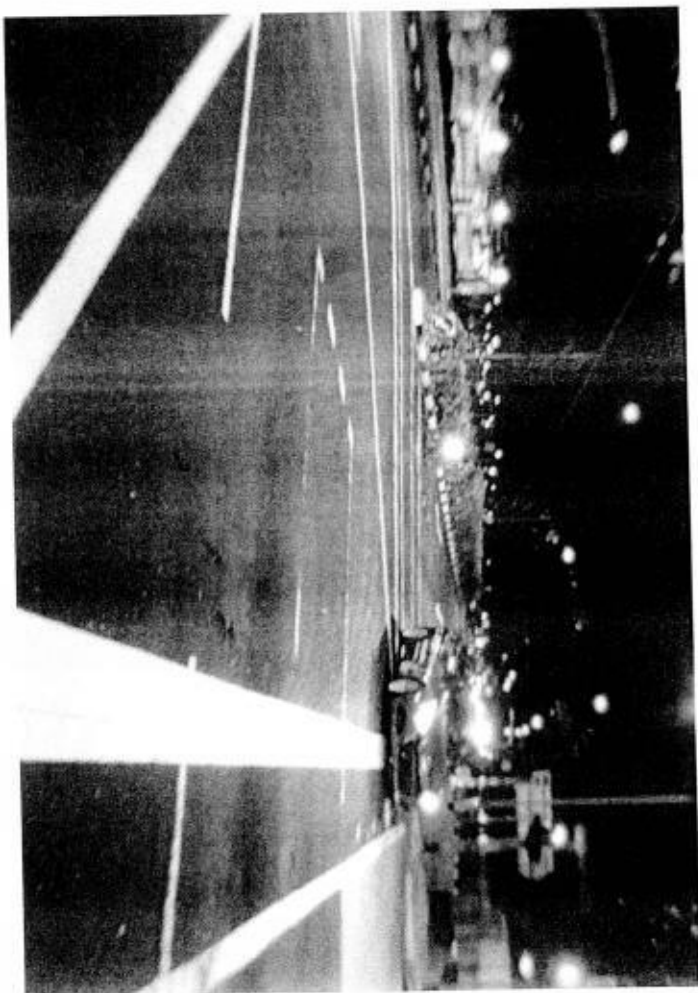
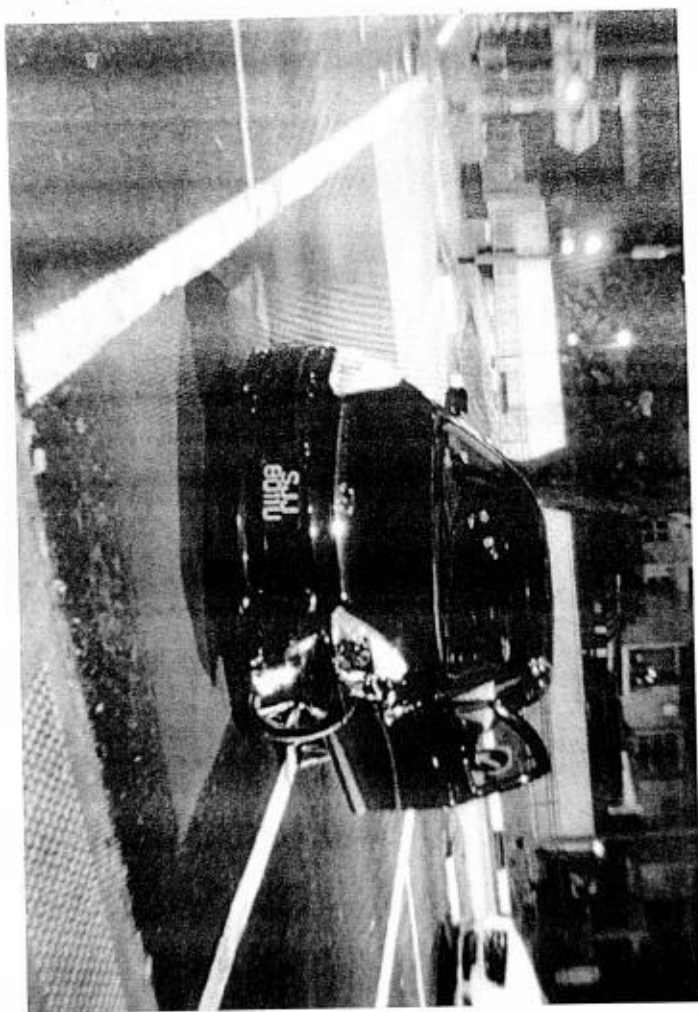
I/We declare the foregoing particulars are true in every respect.
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time 23.10.2018
@ 11:00hrs

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





REPAIR ESTIMATE*

VEHICLE NO : SH 8310K

DATE : 23.10.2018

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bonnet <i>Bonnet</i>			\$ 2,265.90
	Bonnet Hinge (LH/RH) <i>Pont</i>		\$ 41.00	\$ 82.00
	Radiator Grille <i>cr</i>			\$ 1,110.10
	Radiator Grille H Emblem <i>cr</i>			\$ 39.50
	Front Bumper Cover <i>Pont</i>			\$ 1,052.20
	Front Bumper Sponge <i>cr</i>			\$ 99.20
	Front Bumper Reinforcement <i>Pont</i>			\$ 402.10
	Front Bumper Lip <i>X sue</i>			\$ 54.90
	Front Bumper Bracket Top (LH/RH) <i>cr</i>		\$ 22.40	\$ 44.80
	Front Bumper Bracket (LH/RH) <i>cr</i>		\$ 24.60	\$ 49.20
	Headlamp Support Top Cover <i>X sue</i>			\$ 222.60
	Headlamp Support Panel Assy <i>cr</i>			\$ 907.40
	Headlamp (LH/RH) <i>cr</i>		\$ 1,388.00	\$ 2,776.00
	Radiator <i>Pont</i>			\$ 698.30
	Radiator Fan Blade, Cowling, Motor Assy <i>P cr</i>			\$ 792.95
	Radiator Bracket (RH/LH) <i>X sue</i>		\$ 6.50	\$ 13.00
	Radiator Guard <i>X sue</i>		\$ 20.00	\$ 40.00
	Horn Unit (LH/RH) <i>cr</i>		\$ 73.80	\$ 147.60
	Air Duct <i>X sue</i>			\$ 134.60
	Aircon Condenser <i>✓ Pont</i>			\$ 927.50
	Inter Cooler <i>✓ Pont</i>			\$ 1,032.50
	Inter Cooler Mounting (2 PCS) <i>X sue</i>			\$ 25.90
	SUB TOTAL			\$ 12,918.25
	LESS 20%			\$ 2,583.65
	DISCOUNTED TOTAL			\$ 10,334.60
	Front Number Plate <i>cr</i>			\$ 25.00
	Front No Plate Trim Cover <i>cr</i>			\$ 30.00
				\$ 55.00
	Labour Charge			\$ 800
	Panel Beating			\$ 1,000.00
	Spray Painting Charge			\$ 500.00
	Wiring Charge			\$ 50.00
	Tuff Kote			\$ 50.00
	Towing Charge			\$ 50.00
	Remove/Refix Aircon & Refill Gas			\$ 150.00
	Diagnostic & Resetting To Erase Fault Code			\$ 480.00
	TOTAL LABOUR			\$ 2,280.00
	ESTIMATE TOTAL			\$ 12,669.60

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.

Larry Ng

12922.44

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305229640

STOMER

COMFORT TRANSPORTATION PTE LTD

VARS

VMS 7010045

STOMER NO. 383 SIN MING DRIVE

DRESS Singapore SINGAPORE 575717

L (R) 65508755

(O)

(P)

SCOUNT CARD NO.

REGN NO.

SH 8310K

MILEAGE

MAKE:

HYUNDAI

FUEL

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

MODEL

I-40

DATE/TIME IN

22.10.2018 21:30

YR OF MANU

11.01.2017

TARGET DATE

CHASSIS CODE

KMHLB41UMHU098186

COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 22.10.2018

NATURE: 3P 22.10.2018

S/NO

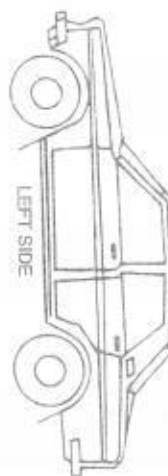
LABOR CODE

DESCRIPTION

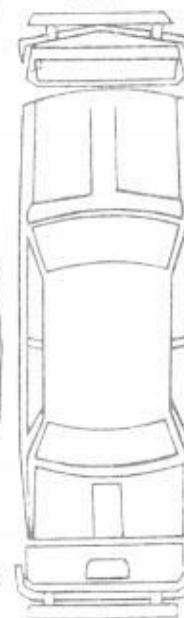
FRONT

NTUC - Front damage

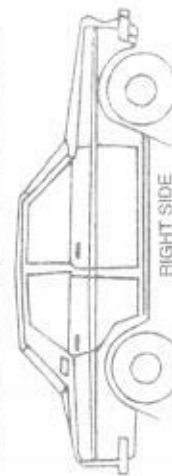
LICK/Kahni -



LEFT SIDE



REAR



RIGHT SIDE

CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SH 8310K LARRY

Vehicle No.: SH 8310K

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

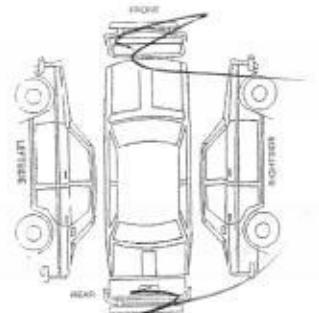
Job Requisition

1. Date: <u>22-10-18</u> Time Received: <u>2214</u>		3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)		4. Type of Towing: <input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up	
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer: <u>MR. TAJAR</u> Contact No.: <u>85513223</u> Vehicle No.: <u>SH 8310K</u> Make / Model / Colour: <u>340</u> Email: <u>340</u>		5. Nature of Service: <input type="checkbox"/> Jumpstart <input checked="" type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery		6. Parts Replaced/Remarks:	
7. Location: <u>170 WEST COAST RD</u>		8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi			
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____					

10. Odometer Reading: _____
Fuel Level: ☐ F ☐ 1/4 ☐ 1/2 ☐ 3/4 ☐ E

11. Radio / CD Player

☐ OK
☐ Faulty
☐ Not tested



: Cracked X : Dented
/ : Scratched O : Missing

Signature of Customer

Job Attended

12. Tow Truck / Recovery Van: ☐ VRS ☐ QA ☐ GAQ ☒ TZ ☐ YISHUN TOWING ☐ OTHERS
Name of Driver: T-JANE GONCK
Vehicle No.: YN 7337
Time Dispatch: 2214
Time of Arrival: 2250
Time Completed: 2345

Cash Invoice Details (if applicable)

13. Cash Invoice No.: _____

Customer Acknowledgement

- a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.
b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

22-10-18
Date

2250
Time

TAJAR
Signature of Customer

14. WORKSHOP

Name of Attending Staff/Guard

Date & Time of Arrival

Signature of Attending Staff/Guard

CUSTOMER'S COPY

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 26.10.2018

Time: 18:35:29

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 : 305229640
 REGN NO : SH 8310K
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : I-40
 DATE OF REGN : 11.01.2017
 DATE/TIME IN : 22.10.2018 21:30
 ACCIDENT DATE : 22.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 FNPS	NO PLATE(S) & TROM COVER	1 N	55.00	0.00	55.00
0002 04-01-0103-2322-A	I40V3 BUMPER COVER+	1	1,052.20	20.00	841.76
0003 04-01-0103-2164-A	I40V3 GRILLE ASSY-RADIATO	1	1,110.10	20.00	888.08
0004 04-01-0103-2175-G	I40V3 SYMBOL MARK-H	1	39.50	20.00	31.60
0005 04-01-0103-0572-A	I40VC PANEL ASSY-HOOD+	1	2,265.90	20.00	1,812.72
0006 04-01-0103-0651-G	I40VC HINGE ASSY-BONNET L	1	41.00	20.00	32.80
0007 04-01-0103-0652-G	I40VC HINGE ASSY-BONNET R	1	41.00	20.00	32.80
0008 04-01-0103-2294-G	I40V3 ABSORBER-FRONT BUMP	1	99.20	20.00	79.36
0009 04-01-0103-2296-A	I40VC RAIL ASSY-FR BUMPER	1	402.10	20.00	321.68
0010 04-01-0103-0604-G	I40VC LATCH ASSY-HOOD	1	36.90	20.00	29.52
0011 04-01-0103-0777-G	I40V2 WIRING HARNESS-FEM	1	107.30	20.00	85.84
0012 04-01-0103-0606-G	I40VC GUARD-RADIATOR	1	20.00	20.00	16.00
0013 04-01-0103-0639-G	I40VC BRACKET-FR BUMPER S	1	24.60	20.00	19.68

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 26.10.2018
Time: 18:35:29
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 : 305229640
REGN NO : SH 8310K
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 11.01.2017
DATE/TIME IN : 22.10.2018 21:30
ACCIDENT DATE : 22.10.2018

JOB / PARTS DESCRIPTION		QTY IND UNIT-PRICE DISC% AMOUNT		
0014 04-01-0103-0640-G	I40VC BRACKET-FR BUMPER S	1	24.60 20.00	19.68
0015 04-01-0103-0637-G	I40V2 BRKT ASSY-FR BPR UP	1	22.40 20.00	17.92
0016 04-01-0103-0638-G	I40V2 BRKT ASSY-FR BPR UP	1	22.40 20.00	17.92
0017 04-01-0103-0641-G	I40VC CARRIER ASSY-FR END	1	907.40 20.00	725.92
0018 04-01-0103-0781-A	I40V2 LAMP ASSY-HEAD LH#	1	1,388.00 20.00	1,110.40
0019 04-01-0103-0782-A	I40V2 LAMP ASSY-HEAD RH#	1	1,388.00 20.00	1,110.40
0020 09-01-0103-0092-G	I40VC HORN ASSY-LOW PITCH	1	73.80 20.00	59.04
0021 09-01-0103-0093-G	I40VC HORN ASSY-HIGH PITC	1	73.80 20.00	59.04
0022 01-01-0103-0039-A	I40V2 CONDENSER ASSY-COOL	1	927.50 20.00	742.00
0023 16-01-0103-0103-A	I40VC RADIATOR ASSY	1	698.30 20.00	558.64
0024 16-01-0103-0105-A	I40VC BLOWER ASSY	1	792.95 20.00	634.36
0025 16-01-0103-0067-G	I40V2 HOSE-RADIATOR LWR	1	36.80 20.00	29.44

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 26.10.2018

Time: 18:35:29

Page: 3

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

JOB NO : 305229640
REGN NO : SH 8310K
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 11.01.2017
DATE/TIME IN : 22.10.2018 21:30
ACCIDENT DATE : 22.10.2018

JOB / PARTS DESCRIPTION	QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0026 02-01-0103-0051-G I40VC INTERCOOLER	1	1,032.50	20.00		826.00
0027 10-01-0103-0262-G I40VC ^PULLEY-IDLER	1	59.60	20.00		47.68
0028 22-01-0103-0004-A I40VC V-RIBBED BELT	1	61.70	20.00		49.36
SUB-TOTAL					: 10,254.64

JOB NATURE

0000 L	PANEL BEATING	800.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	400.00
0002 17-01	WIRING CHARGE	20.00
0003 20-00	TUFF COAT ON AFFECTED PARTS.	20.00
0004 18-01	TO VAC. & TOP UP A/C GAS	60.00
SUB-TOTAL		: 1,300.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 26.10.2018

Time: 18:35:29

Page: 4

COMPANY : THIRD PARTY'S CLAIMS (CAS)
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REGN NO : SH 8310K
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 11.01.2017
DATE/TIME IN : 22.10.2018 21:30
ACCIDENT DATE : 22.10.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 11,554.64

AUTHORISED : YES / NO

MVA NAME & SIGNATURE
DATE :

SURVEYOR NAME & SIGNATURE
DATE :

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305229640
Date : 31. Oct. 2018

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

FINALIZATION FORM

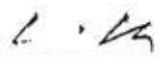
To : LKK
Attn : KALVIN
Vehicle Reg No : SH 8310K
Date of Accident: 22. Oct. 2018


Fax :

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

1. The repair job shall bill to: NTUC SJJ8011U
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$10,254.64
 - (b) Labour Charges \$1,300.00
 - Total for Part-By-Part Repair Cost \$11,554.64
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: _____
Final Lumpsum Repair cost _____
3. Estimated normal period for repairs: 4 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 : Larry Ng
Tel : 6214 8316
Fax : 6546 8156

Signature : 
Name : Kalvin
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				
3. Survey Fees				
4. LTA Search Fee				
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/INC18019381/K1tbn2				
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.	SJJ 8011U	Veh. Inspected	SH 8310K	
Policy No.		Coverage (\$)	0.00	
Claim No.	MT/1016845-002	Excess (\$)	0.00	
Assign From		Assign Date	24/10/2018	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	KMHLB41UMHU098186	Colour	BLUE	
Odometer	362788	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	HANKOOK	7 mm	
L/H Front Tyre	205/60 R16	HANKOOK	7 mm	
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm	
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	22/10/2018	Inspection Date	24/10/2018	
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:		4 Working Days		



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 8310K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BONNET	BUCKLED	2,265.90	2,265.90
2	BONNET HINGE (LH/RH) @\$41.00	BENT	82.00	82.00
1	RADIATOR GRILLE	CRACKED	1,110.10	1,110.10
1	RADIATOR GRILLE H EMBLEM	CRACKED	39.50	39.50
1	FRONT BUMPER COVER	DEFORMED	1,052.20	1,052.20
1	FRONT BUMPER SPONGE	TORN	99.20	99.20
1	FRONT BUMPER REINFORCEMENT	BENT	402.10	402.10
1	FRONT BUMPER LIP	SERVICEABLE	54.90	-
2	FRONT BUMPER BRACKET TOP (LH/RH) @\$22.40	CRACKED	44.80	44.80
2	FRONT BUMPER BRACKET (LH/RH) @\$24.60	CRACKED	49.20	49.20
1	HEADLAMP SUPPORT TOP COVER	SERVICEABLE	222.60	-
1	HEADLAMP SUPPORT PANEL ASSY	CRACKED	907.40	907.40
2	HEADLAMP (LH/RH) @\$1388.00	CRACKED	2,776.00	2,776.00
1	RADIATOR	BENT	698.30	698.30
1	RADIATOR FAN BLADE,COWLING,MOTOR ASSY	CRACKED	792.95	792.95
2	RADIATOR BRACKET (LH/RH) @\$6.50	SERVICEABLE	13.00	-
2	RADIATOR GUARD @\$20.00	SERVICEABLE	40.00	-
2	HORN UNIT (LH/RH) @\$73.80	CRACKED	147.60	147.60
1	AIR DUCT	SERVICEABLE	134.60	-
1	AIRCON CONDENSER	BENT	927.50	927.50
1	INTER COOLER	BENT	1,032.50	1,032.50
1	INTER COOLER MOUNTING (2 PCS)	SERVICEABLE	25.90	-
1	BONNET LOWER LOCK	BENT	36.90	36.90
1	WIRING HARNESS-FEM	TORN	107.30	107.30
1	RADIATOR HOSE-LOWER	CRACKED	36.80	36.80
1	IDLER PULLEY	TORN	59.60	59.60
1	V BELT	TORN	61.70	61.70
1	GUARD RADIATOR	CRACKED	20.00	20.00
	LESS 20% DISCOUNT		-2,648.11	-2,549.91
			10,592.44	10,199.64

Report Ref No. NS/INC18019381/K1tbn2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>SPECIAL NETT ITEMS</u>			
1	FRONT NUMBER PLATE (SN)	MISSING	25.00	25.00
1	FRONT NO PLATE TRIM COVER (SN)	MISSING	30.00	30.00
			55.00	55.00
	<u>LABOUR</u>			
	PANEL BEATING.		1,000.00	800.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.		50.00	20.00
	TOWING CHARGE.		50.00	-
	REMOVE/REFIX AIRCON & REFILL GAS.		150.00	60.00
	DIAGNOSTIC & RESETTING TO ERASE FAULT CODE.	NOT NECESSARY	480.00	-
			2,280.00	1,300.00
	GRAND TOTAL		12,927.44	11,554.64
RECOMMENDED COST OF REPAIRS (CONFIRMED)				11,554.64

Report Ref No. NS/INC18019381/K1tbn2

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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