

Yard.

REF: NS/INC18019608/Crtbr

ASSIGNMENT

From: Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s Camfort

of

Insured YN 78JSM

Policy No. 508563870-01 020418 - 01-04-19

Claims No. MT/1017408-002

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SMD6800C Yr Regn: 23 Apr 2015

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

Truck / Trailer or

Makes: Hyundai cc 1685

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

Sp. Reading: 477 247 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KMHLB41UMFU 068059

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/60R16 R: 11

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

TOYO / YOKO or westlake

Front

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. D.O.I. 26-10-18

Survey held at w/s 3:48pm

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

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

Date / Time Action / Instruction

SHD 6800C - x

YN 78JSM - x

Lump Sum 3600 (Red. 2897.70: 44%)

RECEIVED 02 NOV 2018

Date/Time, File Pass to?

11/11 Typist

Date/Time, File Return to?

3)

Report Format:

Lump Sum / I.B.I: (\$ 3600)

☐ : Preli. Report

☒ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: -

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (\$

☐ Weekend (\$

Survey Fee:

Transportation

) \$ - RS \$

) Photos

) Others

TOTAL

Denise Tay (LKKAuto)

From: mtreg <mtreg@income.com.sg>
Sent: Friday, 2 November 2018 11:36 AM
To: Denise Tay (LKKAuto)
Subject: REQUEST CLAIM NUMBER

Hi,

Claim created.

With Regards

Samsia
Senior Admin Assistant,
Motor Insurance
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify. Find out more at income.com.sg/careers

in with you

'With effect from 1 Oct 2018, we will be discontinuing our fax number 6338 1504.

Please forward all motor claims related correspondences to mtcl@income.com.sg so that we can attend to it accordingly.'

From: Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]
Sent: Friday, November 02, 2018 11:19 AM
To: mtreg <mtreg@income.com.sg>
Subject: REQUEST CLAIM NUMBER

Dear Sir/Madam,

TP Claims against NTUC Income: Follow-Through Survey

Date : 2/11/2018

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/1017408-002	COMFORT TRANSPORTATION	SHD 6800C	YN 7828M	26/10/2018	07:40	6497.70	3600

eBaoTech

GeneralClaim

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="26/10/2018 14:27"/>
Vehicle No.(For Motor)	<input type="text" value="YN7828M"/>	Certificate Number	<input type="text"/>

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5088563870-01		F.S. FREIGHT SYSTEMS PTE LTD	198104470N	GCV	Preferred Workshop Plan	YN7828M	YN7828M	02/04/2018	01/04/2019

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508959
Fax: 6546 8156

Our Job Ref No : 305230903

Date : 30/10/18

FINALIZATION FORM

To : LKK

Fax :

Attn : GUO QIANG

Vehicle Reg No. : SHD6800C

Date of Accident : 26-Oct-18

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

1. The repair job shall bill to: NTUC --- YN7828M

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 \$3,600.00

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 : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : GUO QIANG

Date : 01/11/18

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:

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	26/10/2018 11:19
Date Of Accident	26/10/2018 07:40
Exact Location Of Accident	SLIP RD FROM PENJURU RD TO AYE TWDS JURONG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6800C
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	TEO CHENG CHWEE
NRIC No	S0283260G
Date Of Birth	28/04/1949
Occupation	OUTDOOR
Date Of Driving Pass	01/11/1968
Driving Experience	49 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91766154
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 524 BUKIT BATOK ST 52 #06-751
Postcode	650524
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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	YN7828M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUTHIAH SIYAKUMAR
NRIC/Passport Number	G7811407Q
Contact Number	90533577
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	NO VISIBLE DAMAGE

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD
CO. REG NO. 193203921R

Policyholder's Signature
Date & Time:

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

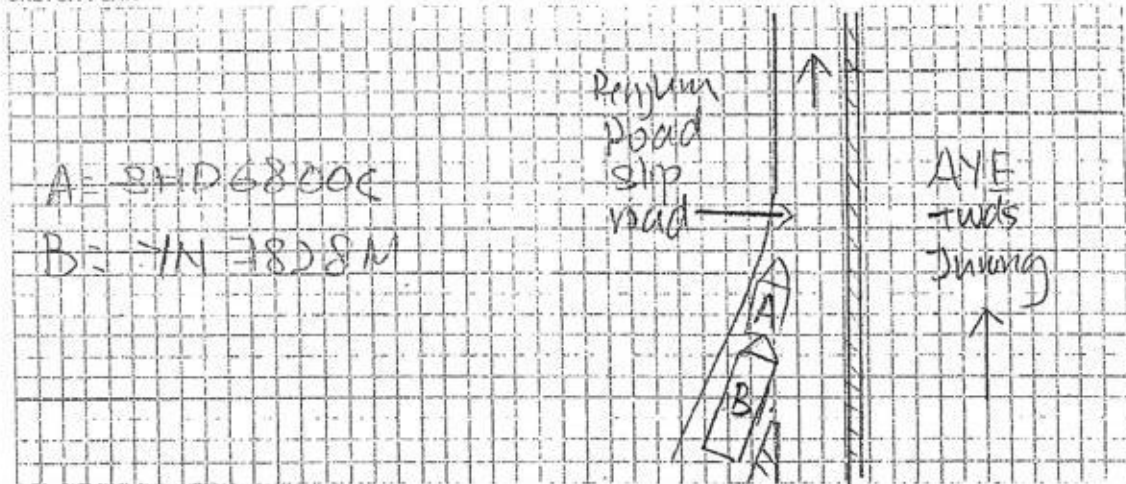
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

GIA/MC SketchPlanForm_V3



Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199203821R

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/BAC SketchPlanForm_V3

Sketch Plan Pg. 3

Describe Circumstances of the Accident.

On 26 Oct 2018 at about 0740hrs, I was slowly driving along a slip road from Penjuru Road to AYE heading towards Jurong direction.

As I approached the give way lines, I slowed down and stopped to give way to the traffic from my right.

Suddenly a few seconds later a truck YN7828M came from behind collided onto the rear portion of my taxi.

01 male passenger on board my taxi. No injury reported at the point of the accident.

Declaration

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303921R

Policyholder's Signature/Date &
Time

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

Lu Xia Wei Yong

Witnessed by Reporting
Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3821R
Vehicle Details	
Vehicle No.:	SHD6800C
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Oct 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7L CRDI AT ABS AIRBAG 4DR
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	D4FDEU497688
Chassis No.:	KMHLB41UMFU068059
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$20,140.00
Original Registration Date:	23 Apr 2015
First Registration Date:	23 Apr 2015
Transfer Count:	0
Actual ARF Paid:	\$12,696.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Apr 2023
PARF Rebate Amount:	\$9,522.00
Intended COE Rebate Details	
COE Expiry Date:	22 Apr 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,177.00
COE Rebate Amount:	\$28,118.00
Total Rebate Amount:	\$37,640.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 29 Oct 2018

OK

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305230903

OMER

IS COMFORT TRANSPORTATION PTE LTD

OMER NO. 7010045

LESS: 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

DUNT CARD NO.

REGN NO.: SHD6800C	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 26.10.2018 09:50
YR OF MANU 23.04.2015	TARGET DATE
CHASSIS CODE RMHLB41UMFU068059	COMPLETION DATE/TIME:

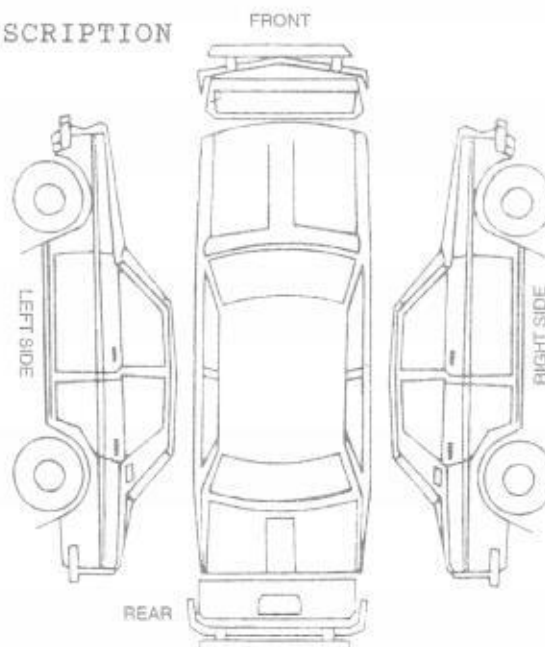
JOB DESCRIPTION

Accident Date: 26.10.2018

NATURE: 3P 26.10.18

S/NO LABOR CODE

DESCRIPTION



BOOKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Recognition Slip

Exit Pass

No.: SHD6800C

LIMITS

Vehicle No.:

SHD6800C

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 PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 6800C

MAKE :

MODEL : HYUNDAI i40

KK Auto Consultants
the Repairer of the vehicle
• To survey before repair work
• To display damage on the survey
• Parts prices based on the latest
• Third party survey is on a "No
• To display damage on the survey

DATE 26/10/2018

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid / <i>enc</i> - BT			\$ 2,174.90
	Boot Lid Lock Upper - BT			\$ 102.60
	Boot Lid Lock Lower X <i>MN</i>			\$ 31.70
	Boot Lid 'H' Emblem			\$ 28.70
	Boot Lid CRDI Plate			\$ 27.90
	Bootlid Moulding - <i>MCC</i>			\$ 227.90
	Bootlid i40 Emblem			\$ 27.90
	Bootlid Lower Garnish X <i>MN</i>			\$ 227.90
	Rear Bumper - <i>re</i> X <i>MN</i>			\$ 553.00
	Rear Bumper Reinforcement X <i>MN</i>			\$ 428.40
	Rear Bumper Reinforcement Bracket (LH/RH) X <i>MN</i>		\$ 80.30	\$ 160.60
	Rear Bumper Clip 10 pcs - <i>MCC</i>			\$ 22.00
	Rear Bumper Bracket X <i>MN</i>		\$ 35.60	\$ 71.20
	Rear Bumper Sponge - <i>car</i>			\$ 103.50
	Rear Bumper Under Cover - <i>cut</i>			\$ 228.00
	Rear Panel X <i>Repair</i> X <i>MN</i>			\$ 526.70
	Rear Panel Garnish X <i>MN</i>			\$ 57.70
	Rear Panel Lower Panel X <i>Repair</i>			\$ 89.40
	SUB TOTAL			\$ 5,090.00
	LESS 20%			\$ 1,018.00
	DISCOUNTED TOTAL			\$ 4,072.00
	Boot Lid Comfort Logo & Tel No. Sticker			\$ 30.00
	Boot Lid Advertisement Logo			\$ 100.00
	Rear Bumper Reverse Sensor - <i>DM</i>			\$ 135.70
	Rear Bumper Rubber Mat			\$ 50.00
	Rear Bumper Advertisement Logo			\$ 50.00
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	\$ 200.00
				\$ 565.70
	Labour Charge			
	Panel Beating			\$ 800.00
	Spray Painting Charge			\$ 900.00
	Wiring Charge			\$ 30.00
	Tuff Kote			\$ 50.00
	Remove/Refix Reverse Sensor			\$ 80.00
	TOTAL LABOUR			\$ 1,860.00
	ESTIMATE TOTAL			\$ 6,497.70

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.

TS

Sum (Fri)

3486.4

2797.12

Nett

Nett

Nett

Nett

Nett

Nett

Nett

500

400

600

20

X MN

40.

1160



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/INC18019608/Gtbs2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 07-11-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YN 7828M	Veh. Inspected	SHD 6800C
Policy No.	5088563870-01	Coverage (\$)	0.00
Claim No.	MT/1017408-002	Excess (\$)	0.00
Assign From		Assign Date	26/10/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMFU068059	Colour	BLUE
Odometer	437247	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60R16	WEST LAKE	6 mm
L/H Front Tyre	205/60R16	WEST LAKE	6 mm
R/H Rear Tyre	205/60R16	WEST LAKE	6 mm
L/H Rear Tyre	205/60R16	WEST LAKE	6 mm

4. Description of Damages

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

5. General Information

Accident Date	26/10/2018	Inspection Date	26/10/2018
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
-------------------------------------	----------------

**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. SHD 6800C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID	BUCKLED	2,174.90	2,174.90
1	BOOT LID LOCK UPPER	BENT	102.60	102.60
1	BOOT LID LOCK LOWER	NOT NECESSARY	31.70	-
1	BOOT LID 'H' EMBLEM	NECESSARY	28.70	28.70
1	BOOT LID CRDI EMBLEM	NECESSARY	27.90	27.90
1	BOOTLID MOULDING	NECESSARY	227.90	227.90
1	BOOTLID I40 EMBLEM	NECESSARY	27.90	27.90
1	BOOTLID LOWER GARNISH	NOT NECESSARY	227.90	-
1	REAR BUMPER	DEFORMED	553.00	553.00
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	428.40	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @ \$80.30	NOT NECESSARY	160.60	-
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @ \$35.60	NOT NECESSARY	71.20	-
1	REAR BUMPER SPONGE	CRACKED	103.50	103.50
1	REAR BUMPER UNDER COVER	CUT	228.00	228.00
1	REAR PANEL	TO REPAIR SEE LABOUR	526.70	-
1	REAR PANEL GARNISH	NOT NECESSARY	57.70	-
1	REAR PANEL LOWER PANEL	TO REPAIR SEE LABOUR	89.40	-
	LESS 20% DISCOUNT		-1,018.00	-699.28
			4,072.00	2,797.12
<u>SPECIAL NETT ITEMS</u>				
1	BOOT LID CONFORT LOGO & TEL NO. STICKER (SN)	NECESSARY	30.00	30.00
1	BOOT LID ADVERTISEMENT LOGO (SN)	NECESSARY	100.00	100.00
1	REAR BUMPER REVERSE SENSOR (SN)	DAMAGED	135.70	135.70
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00

Report Ref No. NS/INC18019608/Gtbs2



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.:2 of 2

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 AND REAR PANEL LOWER PANEL. SPRAY PAINTING CHARGE. WIRING CHARGE. TUFF KOTE. REMOVE / REFIX REVERSE SENSOR.	NECESSARY	200.00	200.00
			565.70	565.70
			800.00	500.00
		900.00	600.00	
		30.00	20.00	
		50.00	-	
		80.00	40.00	
		1,860.00	1,160.00	
GRAND TOTAL			6,497.70	4,522.82
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				3,600.00

Report Ref No. NS/INC18019608/Gtbs2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,
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REGD Auto Consultant-SAE, Licensed Appraiser

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