

Surveyor: Kavin

REF:

NS/INC 18022465/Klvbn2

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD (TP) WS / TP RES / OD RES / EVA / INV / MY  
 To Insured Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: **CB 5118R**  
 Policy No: **5092673343-01 18072018**  
 Claims No: **MT/1023742-002**  
 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: **SHA 5947K** Yr Regn: **13 Sep 2018**  
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / ☒ Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: **Hyundai Zonix** cc **1580**  
 Colour: **Blue** A/C: ☒ Ins. Std / NI / NA  
 Sp. Reading: **45825** T/Radio: ☒ Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: **1CMHC851CVK4107492**  
 Gen. Cond: Good / ☒ Fair / Poor / Burnt  
 Steering: Inorder / ☒ Jammed / Leaked / Burnt or  
 Brake: Inorder / ☒ Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STQ ☒ Rim or  
 Tyre Size: F: **195/65R15**  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / ☒ M / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal. **7** mm R/Bal. **7** mm  
 L/Bal. **7** mm L/Bal. **7** mm  
 D.O.A. **12/12/18** D.O.I. **13/12/18**  
 Survey held at **C D G E (Loyang)**  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooflop or  
**Front d/s**  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SHA 5947K - CS/LPC15013130/Hlvbn2 DIA: 040815 IMC
	CB 5118R - x
19/12/18	Lab and P/P \$2800.08 / 3 Pys. (Recd 289.12, 9%)

RECEIVED 2 DEC 2018

20/12/2018

Date/Time, File Pass to? ☐ : Prel. Report  
☐ : Final Report  
 Date/Time, File Return to? \_\_\_\_\_

Days Of Repair: **3**  
 Resurvey No. of Trip: **1**

2) 20/12 - typist

Report Format: **TP**  
 Lump Sum / I.B.I: (\$) **2800.08**

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

Survey Fee:	
Transportation:	
\$ + RS: \$	
Photos	
Others	
<b>160</b>	
TOTAL	

TP Claims against NTUC Income: Follow-Through Survey

20.12.2018

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Time of Accident	Estimate	Tentative repair cost
1	MT/1023742-002	COMFORT TRANSPORTATION PTE LTD	SHA 5947K	CB 5118R	12/12/2018	15:30	\$3,089.20	\$2,800.08
2	MT/1023784-002	COMFORT TRANSPORTATION PTE LTD	SHA 7209U	PC 1427R	12/12/2018	06:00	\$1,740.88	\$400.00
3	MT/1023043-002	COMFORT TRANSPORTATION PTE LTD	SHC 8080E	SJN 7699X	5/12/2018	15:40	\$10,766.00	\$6,400.00
4	MT/1024548-001	COMFORT TRANSPORTATION PTE LTD	SHA 7923R	SGR 9161G	11/12/2018	14:55	\$1,505.00	\$1,000.00
5	MT/1023028-002	COMFORT TRANSPORTATION PTE LTD	SHC 2765C	YP 1158S	7/12/2018	20:40	\$9,964.20	\$5,400.00
6	MT/1024551-001	COMFORT TRANSPORTATION PTE LTD	SH 6206S	SJT 4063M	15/12/2018	10:05	\$2,044.23	\$860.95
7	MT/1024552-001	COMFORT TRANSPORTATION PTE LTD	SHC 2967L	SJZ 8581G	14/12/2018	9:30	\$1,580.32	\$900.00
8	MT/1023443-002	COMFORT TRANSPORTATION PTE LTD	SHD 7164Z	SLK 9402P	11/12/2018	8:30	\$1,903.36	\$850.00
9	MT/1021314-002	SMRT TAXIS PTE LTD	SHB 1764S	SHD 1031M	26/11/2018	5:50	\$2,982.26	\$1,050.00

Claim received from LKK

eBaoTech

General Claim

Hello, NAC\_PAYA\_UBI\_800601

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## 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 checked="" type="radio"/>	5092673343-01		SEASON BUS SERVICES CO PTE LTD	200100721Z	GFT	Comprehensive	CB5118R	CB5118R	18/07/2018	

## 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 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	13/12/2018 08:51
Date Of Accident	12/12/2018 15:30
Exact Location Of Accident	VICOM INSPECTION CENTRE (CHANGI)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA5947K
<b>Insured/Policyholder</b>	
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
<b>Vehicle Particulars</b>	
Manufacturer	HYUNDAI
Model	IONIQ HYBRID
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
<b>Insurance Company</b>	
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	
<b>Driver</b>	
Name of Driver	SYED ASHRAFF ALI BIN NAHORGANI
NRIC No	S8231485G
Date Of Birth	13/10/1982
Occupation	OUTDOOR
Date Of Driving Pass	21/11/2002
Driving Experience	16 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91829363
Fax Number	
Contact Number	
Email Address	SYEFIZEEQ@GMAIL.COM

Address BLK 109 BEDOK NORTH ROAD #09-2302  
 Postcode 460109  
 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) 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 : 3P REVERSE

#### 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 CB5118R  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category BUS  
 Name of Driver GOH PENG KIAT  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name NTUC INCOME INSURANCE CO-OPERATIVE LTD  
 Nature Of Damage REAR LEFT  
 No. Of Passenger (Including Driver)

**IMPORTANT NOTICE**

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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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 1992032217

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

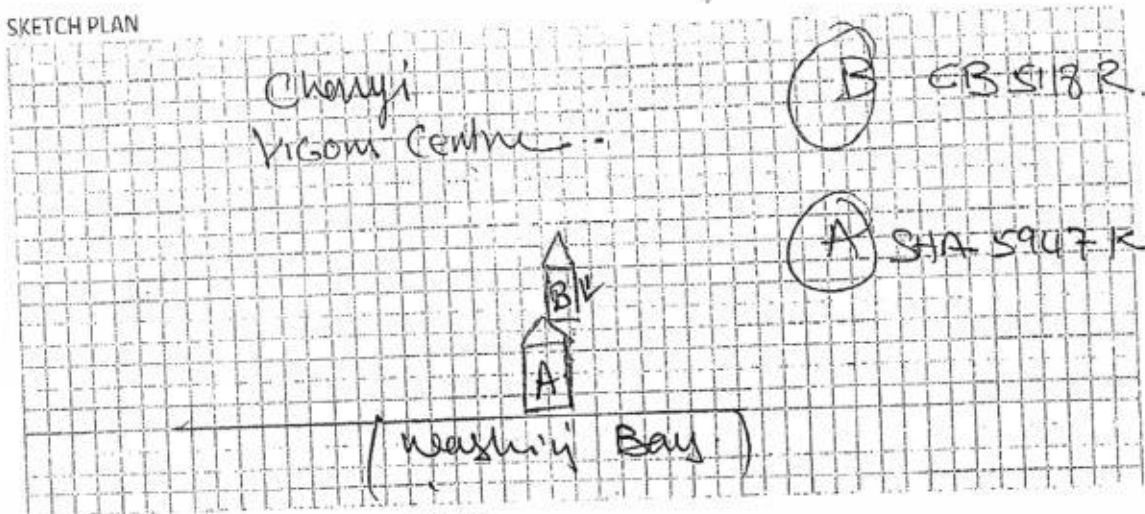
NRIC/FIN No.:

GIA/IMC SketchPlanForm\_V3



# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON. 12 Dec @ 15:30 hr. I VEH A  
 Parked at do washing, ~~at~~ 1. Suddenly  
 VEH B Reverse and hit VEH A  
 Front Right. NO PAX on VEH A.

## DECLARATION

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

COMFORT TRANSPORTATION PTE LTD

CO. REG. NO. 19020331R

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

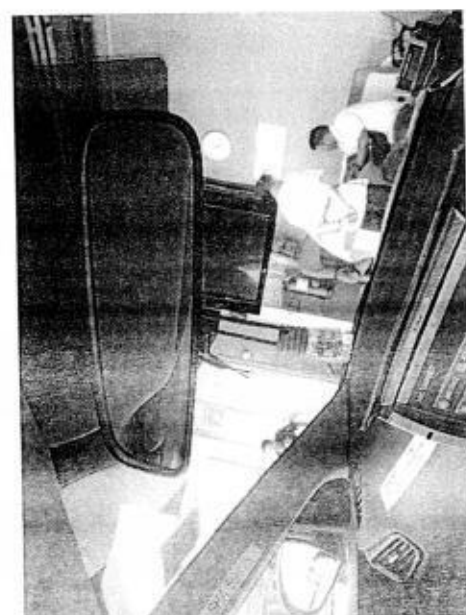
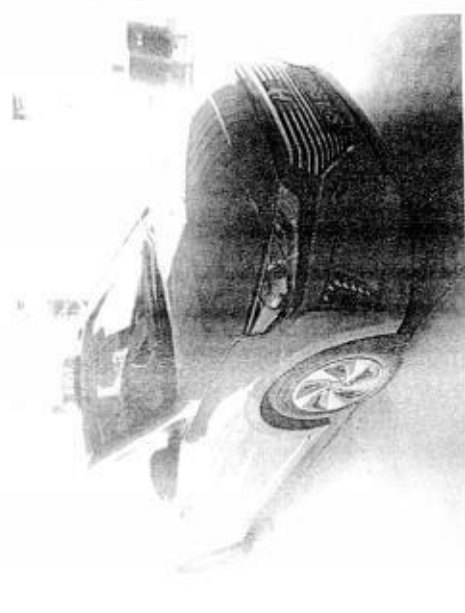
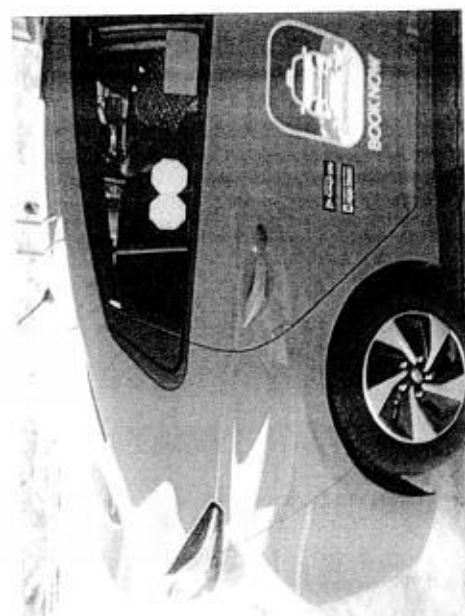
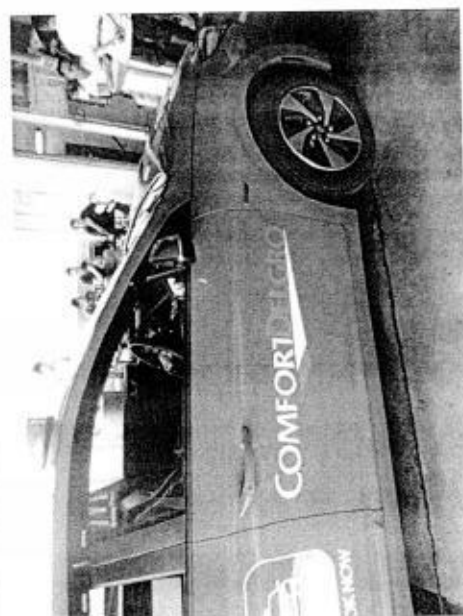
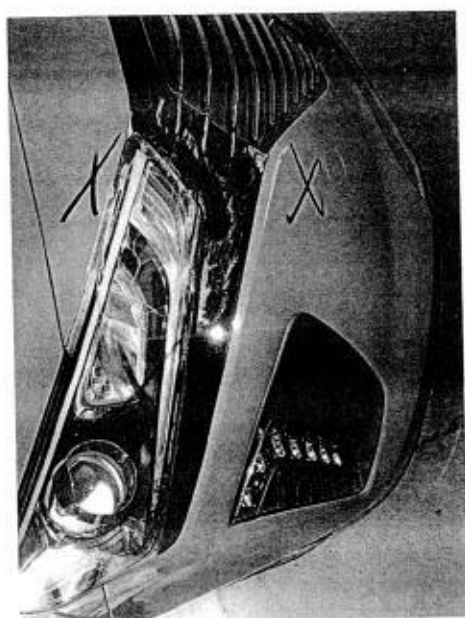
Name:

NRIC/FIN No.:

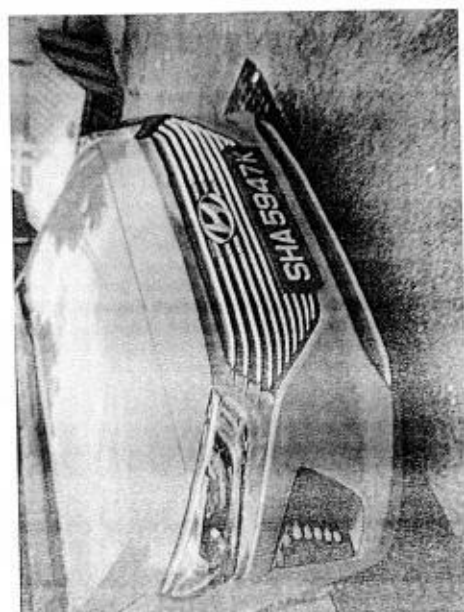
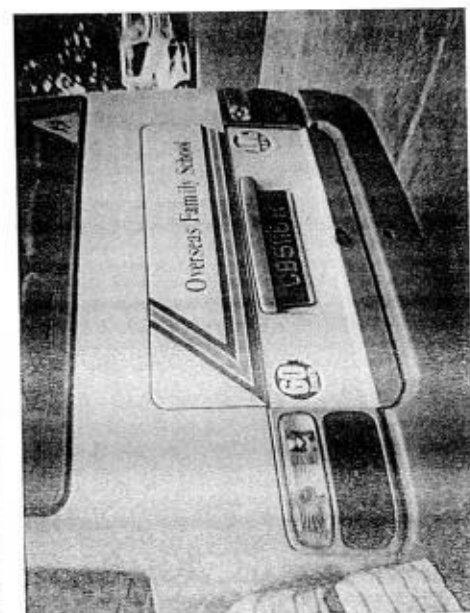
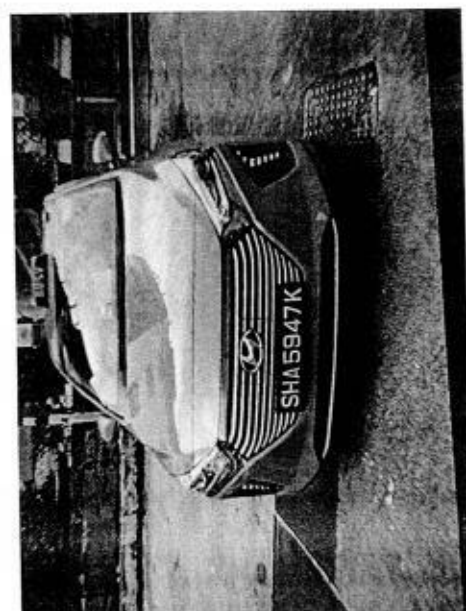
GIARMC SketchPlanForm\_V3

2









DATE 13/12/2018 10:09

MAKE :

**MODEL : HYUNDAI IONIQ**

Page 1 of 1

Team: ARC Repair TP(CLSO)1

### JOB CARD

Sales Order:

JC NO.: 305250626

STOMER: COMFORT TRANSPORTATION PTE LTD  
I/MS: 7010045  
STOMER NO.: 383 SIN MING DRIVE  
DRESS: Singapore SINGAPORE 575717  
65508755 (O)

REGN NO.: SHA5947K	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL: IONIQ(G2)	DATE/TIME IN 12.12.2018 16:30
YR OF MANU: 13.09.2018	TARGET DATE
CHASSIS CODE: KMHC851CVKU107492	COMPLETION DATE/TIME:

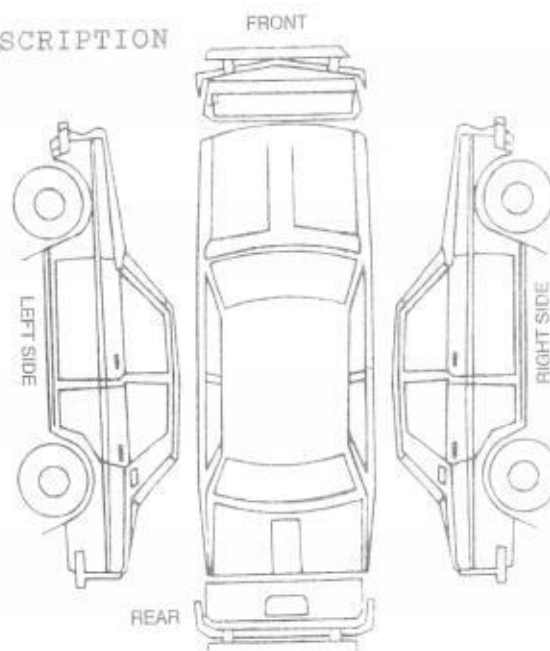
3COUNT CARD NO.

### JOB DESCRIPTION

Accident Date: 12.12.2018  
NATURE: 3P 12.12.2018

S/NO LABOR CODE

### DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHA5947K CHIANG

Vehicle No.: SHA5947K

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

Lkl

COMFORTDELGRO ENGINEERING PTE LTD  
REPAIR ESTIMATE

Date: 19.12.2018  
Time: 14:23:25  
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 : 305250626  
REGN NO : SHA5947K  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G2)  
DATE OF REGN : 13.09.2018  
DATE/TIME IN : 12.12.2018 16:30  
ACCIDENT DATE : 12.12.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0104-2534-G	IONIQV2 COVER-FR BUMPER#	1	418.30	20.00	334.64
0002	04-01-0104-2915-G	IONIQVC LAMP ASSY-HEAD RH	1	1,198.80	20.00	959.04
0003	04-01-0104-2361-G	IONIQ MOULDING-FRONT BUMP	1	108.50	20.00	86.80
0004	04-01-0101-0111-G	HYUNDAI BUMPER COVER CLIP	10 L	22.00	20.00	17.60
0005	04-01-0104-2164-G	IONIQVC GRILLE ASSY-RADIA	1	1,227.50	20.00	982.00
						SUB-TOTAL : 2,380.08

JOB NATURE

0000	L	PANEL BEATING	200.00
0001	23-502	SPRAYPAINT ON AFFECTED AREA	200.00
0002	17-01	CHECK ALL LIGHTING	20.00
			SUB-TOTAL : 420.00

3 day

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 19.12.2018

Time: 14:23:25

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 : 305250626  
REGN NO : SHA5947K  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G2)  
DATE OF REGN : 13.09.2018  
DATE/TIME IN : 12.12.2018 16:30  
ACCIDENT DATE : 12.12.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 2,800.08

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :

# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305250626  
Date : 19/12/18

## FINALIZATION FORM

To : LKK  
Attn : KALVIN  
Vehicle Reg No. : SHA5947K

Fax :

12/12/18

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

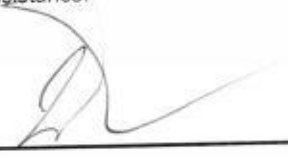
1. The repair job shall bill to: NTUC CB5118R
2. The finalized amount shall be:
  - (a) Spare Parts after List discount \$2,380.08
  - (b) Labour Charges \$420.00
  - Total for Part-By-Part Repair Cost** \$2,800.08
  - (c.) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: \_\_\_\_\_  
**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 : CHIANG  
Tel : 62148314  
Fax : 65468156

Signature :   
Name : Kalvin  
Date : 19/12/18

### 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/INC18022465/K1vbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 27-12-2018  
189556



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	CB 5118R	Veh. Inspected	SHA 5947K
Policy No.	5092673343-01	Coverage (\$)	0.00
Claim No.	MT/1023742-002	Excess (\$)	0.00
Assign From		Assign Date	13/12/2018

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	KMHC851CVKU107492	Colour	BLUE
Odometer	45825	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	MICHELIN	7 mm
L/H Front Tyre	195/65 R15	MICHELIN	7 mm
R/H Rear Tyre	195/65 R15	MICHELIN	7 mm
L/H Rear Tyre	195/65 R15	MICHELIN	7 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION.  
DAMAGES SEE DETAILS.

## 5. General Information

Accident Date	12/12/2018	Inspection Date	13/12/2018
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 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 5947K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	RADIATOR GRILLE	CRACKED	1,227.50	1,227.50
1	FRONT BUMPER COVER	DEFORMED	418.30	418.30
1	FRONT BUMPER SPONGE	SERVICEABLE	86.90	-
1	FRONT BUMPER MOULDING CENTRE UPPER	CUT	108.50	108.50
1	FRONT BUMPER BRACKET TOP (RH)	SERVICEABLE	12.00	-
10	FRONT BUMPER CLIPS	NECESSARY	22.00	22.00
1	HEADLAMP (RH)	GRAZED	1,198.80	1,198.80
	LESS 20% DISCOUNT		-614.80	-595.02
			2,459.20	2,380.08
<b>LABOUR</b>				
	PANEL BEATING.		350.00	200.00
	SPRAY PAINTING CHARGE.		250.00	200.00
	WIRING CHARGE.		30.00	20.00
			630.00	420.00
<b>GRAND TOTAL</b>			<b>3,089.20</b>	<b>2,800.08</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>2,800.08</b>

Report Ref No. NS/INC18022465/K1vbn2

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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