

Income: Follow-Through Survey

Date : 26/12/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate
1	MT/1023223-002	CITYCAB PTE LTD	SHC 7921K	SMA 7034Y	10/12/2018	\$ 2,703.40
2	MT/1024005-002	COMFORT TRANSPORTATION PTE LTD	SH 7897R	SFU 8029J	16/12/2018	\$ 9,646.26
3	MT/1024171-002	CITYCAB PTE LTD	SHA 9227D	GBE 7717U	14/12/2018	\$ 10,051.12
4	MT/1011897-002	SMRT TAXIS PTE LTD	SHB 1861U	SIK 5027P	17/9/2018	\$ 3,729.10
5	MT/1024163-002	CITYCAB PTE LTD	SHA 8047M	YP 8151P	15/12/2018	\$ 2,094.23

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

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[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 checked="" type="radio"/>	5092894557-01		MAHINDAR SINGH S/O GANGA SINGH	504886391	GPC	drive CLASSIC	SFU80293	SFU80293	14/08/2018	13/08/2019

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	17/12/2018 10:26
Date Of Accident	16/12/2018 21:00
Exact Location Of Accident	AIRPORT BLVD > ECP(CITY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH7897R
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	SONATA

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY
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	NG SIEW AI
NRIC No	S1215900E
Date Of Birth	21/11/1956
Occupation	OUTDOOR
Date Of Driving Pass	15/03/1977
Driving Experience	41 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81612277
Fax Number	
Contact Number	
Email Address	NGAIAI@HOTMAIL.COM

Address 393 #03-259 TAMPINES AVENUE 7
Postcode 520393
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 -
Vehicle -
Insurance Company of Driver's Own Vehicle -
-

General Information of the Accident

Type Of Accident CHAIN COLLISION
Weather Conditions RAINING
Road Surface WET

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) 5
Passenger 1 NAME: : -
GENDER: : MALE
Passenger 2 NAME: : -
GENDER: : FEMALE
Passenger 3 NAME: : -
GENDER: : FEMALE
Passenger 4 NAME: : -
GENDER: : FEMALE

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

SEE ATTACH.

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 SFU8029J
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR

Name of Driver	MAHINDAR SINGH
NRIC/Passport Number	S0488639I
Contact Number	96513354
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT & REAR
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHB8999K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT & REAR
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

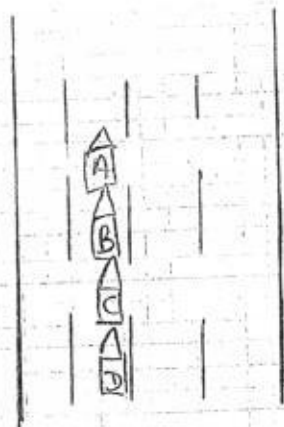
Vehicle Registration Number	SGZ3534L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	NG SIEW AI
Approximate Age	62
Injuries Sustain	NECK,BACK
Injured person in which vehicle?	SH7897R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan Pg. 1

SKETCH PLAN



A- SH 7897R
B- SFU 8029J
C-SHB 8999K
D- SGZ 3534L

Airport Boulevard TWD ECP (CITY)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16 Dec 2018 @ 2100HRS I was travelling along Airport Boulevard TWD ECP (CITY) with 4 passengers 3 Female and 1 Male onboard.

I was travelling straight and suddenly vehicle in front of me brake and I braked too and suddenly veh (B) banged into my rear right . As the accident took place too fast I could not take evasive action to prevent the accident.

I have company and video to support my claims.

I will consult a doctor later.

Veh(B) SFU 8029J MR Manhindar Singh s/o Ganga Singh HP no. 9651 3354

Veh (C)SHB 8999K

Veh(D) SGZ 3534L

DECLARATION

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: 17 DEC 2018 @ 0900HRS

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: June Tan

SKETCH PLAN

IMPORTANT NOTICE

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

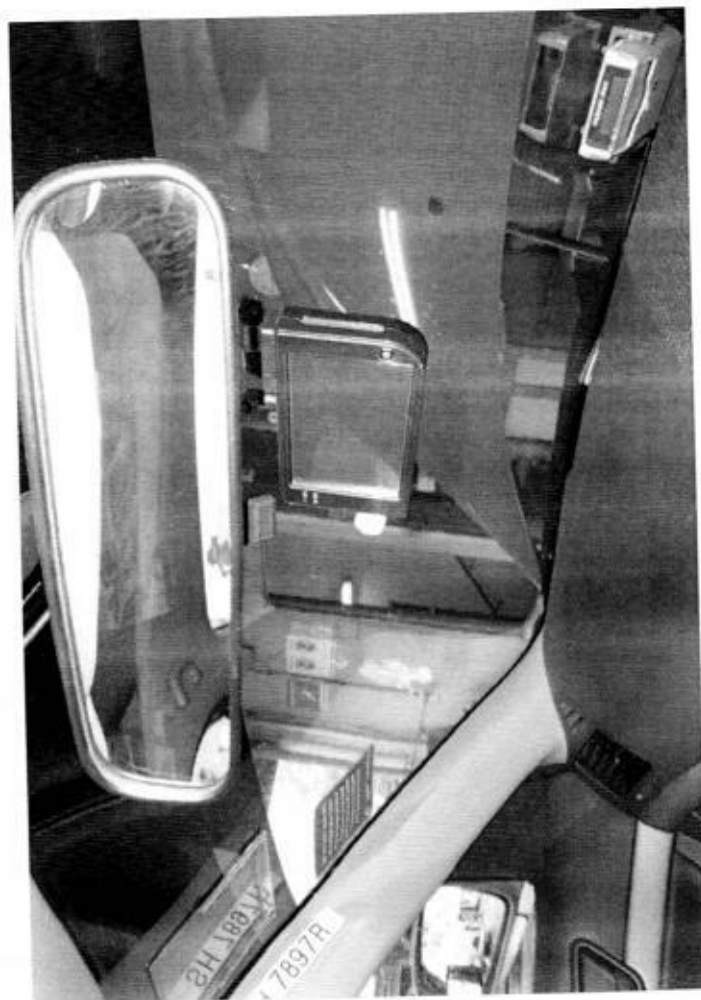
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 17 DEC 2018 @ 0900HRS

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



Orange Health *good* Keweenaw







COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SH 7897R

DATE 18/12/2018 8:59

MAKE :

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid <i>butklid</i>			\$ 1,349.50
	Boot Lid Rubber <i>X sm</i>			\$ 110.90
	Boot Lid Lock Upper <i>X sm</i>			\$ 132.10
	Boot Lid Lock Lower <i>X sec</i>			\$ 30.30
	Boot Lid Sonata Plate <i>- ne</i>			\$ 43.60
	Boot Lid Hyundai Plate <i>- ne</i>			\$ 24.20
	Boot Lid 'H' Emblem <i>- ne</i>			\$ 26.10
	Boot Lid CRDI Plate <i>- ne</i>			\$ 22.70
	Boot Lid Lamp (RH) <i>- on</i>			\$ 230.20
	Boot Lid Trimboard <i>X sm</i>			\$ 165.40
	Boot Lid Trimboard Clips (10pcs) <i>X an</i>			\$ 10.00
	Rear Bumper <i>- butklid</i>			\$ 578.40
	Rear Bumper Reinforcement <i>- on</i>			\$ 483.30
	Rear Bumper Clip <i>- ne</i>			\$ 22.00
	Rear Bumper Sponge <i>- fm</i>			\$ 137.40
	Rear Bumper Under Cover <i>X sm</i>			\$ 185.80
	Rear Bumper Protector (LH/RH) <i>X ne</i>		\$ 38.00	\$ 76.00
	Tail Lamp (RH) <i>- on</i>			\$ 344.00
	Rear Panel <i>- butklid</i>			\$ 391.80
	Rear Panel Garnish <i>X ne</i>			\$ 95.80
	Spare Tyre Holder <i>X sm</i>			\$ 27.60
	Spare Tyre Panel <i>X ne</i>			\$ 863.00
	Spare Tyre Panel Cushion <i>X ne</i>			\$ 200.30
	Rear Towing Hook <i>X ne</i>			\$ 135.30
	Rear Fender (RH) <i>- butklid</i>			\$ 1,935.90
	Rear Fender Inner Lining (RH) <i>X sm</i>			\$ 74.10
	Rear Windscreen Moulding <i>- ne</i>			\$ 60.00
				SUB TOTAL
				\$ 7,755.70
				LESS 20%
				\$ 1,551.14
				DISCOUNTED TOTAL
				\$ 6,204.56
	Boot Lid Comfort Logo & Tel No. Sticker <i>- ne</i>			\$ 30.00
	Rear Bumper Reverse Sensor <i>- sld</i>			\$ 135.70
	Rear Bumper Advertisement Logo <i>- ne</i>			\$ 50.00
	Rear Bumper Rubber Mat <i>- ne</i>			\$ 50.00
	Rear Windscreen Sealant <i>- ne</i>			\$ 46.00
				\$ 311.70

Nett

Nett

Nett

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SH 7897R

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Labour Charge			800
	Panel Beating			\$ 1,200.00 800
	Spray Painting Charge			\$ 1,500.00 800
	Wiring Charge			\$ 30.00 20
	Tuff Kote			\$ 50.00 20
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00 50
	Remove/Refix Rear Windscreen Glass			\$ 120.00 100
	Remove/Refix Reverse Sensor			\$ 80.00 20
	TOTAL LABOUR			\$ 3,130.00
	ESTIMATE TOTAL			\$ 9,646.26
<p>Ka/hu 10/11/18</p> <p>18/12/18 123. L.</p> <p>H5 D72</p> <p>L1</p> <p>After Rep + ph</p>				
<div> <p>... notify</p> <p>... painting</p> <p>... survey</p> <p>... based</p> <p>... subject to final approval from insurance company</p> <p>Acknowledged by Repairer</p> <p>Signature:</p> <p>Date:</p> </div>				
<p>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.</p>				

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305251616

CUSTOMER:

COMFORT TRANSPORTATION PTE LTD
7010045
CUSTOMER NO. 383 SIN MING DRIVE
ADDRESS Singapore SINGAPORE 575717
65508755 (C)
L (R)
(P)

REGN NO.: SH 7897R	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL SONATA	DATE/TIME IN 16.12.2018 23:00
YR OF MANU 13.12.2012	TARGET DATE
CHASSIS CODE KMHET41VMCA831535	COMPLETION DATE/TIME:

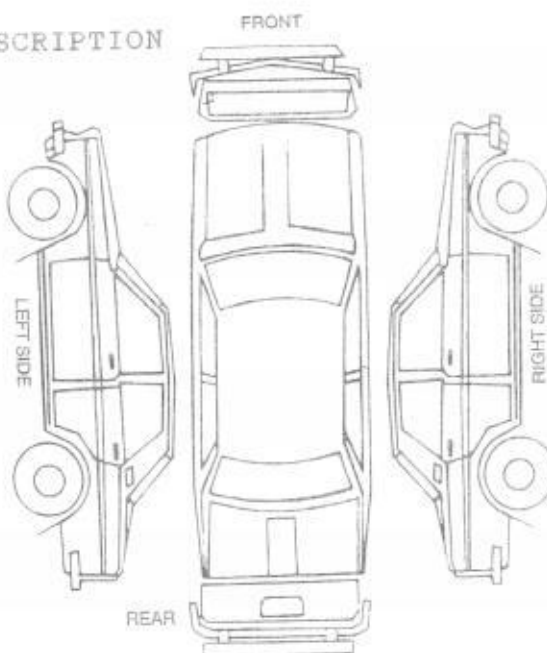
SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 16.12.2018
NATURE: 3P 16.12.2018

S/NO LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Vehicle No.: SH 7897R CHIANG

Exit Pass

Vehicle No.: SH 7897R

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

Our Job Ref No : 305251616
Date : 26/12/18

COMFORTDELGRO ENGINEERING

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
Vehicle Reg No. : SH 7897R

Fax :

16/12/2018

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


1. The repair job shall bill to: NTUC SFU8029J
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:**
 - Final Lumpsum Repair cost** \$5300.00


3. Estimated normal period for repairs: 6 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 : 26/12/18

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/INC18022735/K1vbn2

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 28-12-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SFU 8029J	Veh. Inspected	SH 7897R
Policy No.	5092894557-01	Coverage (\$)	0.00
Claim No.	MT/1024005-002	Excess (\$)	0.00
Assign From		Assign Date	18/12/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	KMHET41VMCA831535	Colour	BLUE
Odometer	559733	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	HANKOOK	7 mm
L/H Front Tyre	215/60 R16	HANKOOK	7 mm
R/H Rear Tyre	215/60 R16	HANKOOK	7 mm
L/H Rear Tyre	215/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	16/12/2018	Inspection Date	18/12/2018
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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	6 Working Days
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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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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 7897R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BOOT LID	BUCKLED	1,349.50	1,349.50
1	BOOT LID RUBBER	SERVICEABLE	110.90	-
1	BOOT LID LOCK UPPER	SERVICEABLE	132.10	-
1	BOOT LID LOCK LOWER	SERVICEABLE	30.30	-
1	BOOT LID SONATA PLATE	NECESSARY	43.60	43.60
1	BOOT LID HYUNDAI PLATE	NECESSARY	24.20	24.20
1	BOOT LID "H" EMBLEM	NECESSARY	26.10	26.10
1	BOOT LID CRDI PLATE	NECESSARY	22.70	22.70
1	BOOT LID LAMP (RH)	CRACKED	230.20	230.20
1	BOOT LID TRIMBOARD	SERVICEABLE	165.40	-
10	BOOT LID TRIMBOARD CLIPS	NOT NECESSARY	10.00	-
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	CRACKED	483.30	483.30
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	TORN	137.40	137.40
1	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	-
2	REAR BUMPER PROTECTOR (LH/RH) @\$38.00	TO REPAIR SEE LABOUR	76.00	-
1	TAIL LAMP (RH)	CRACKED	344.00	344.00
1	REAR PANEL	BUCKLED	391.80	391.80
1	REAR PANEL GARNISH	SERVICEABLE	95.80	-
1	SPARE TYRE HOLDER	SERVICEABLE	27.60	-
1	SPARE TYRE PANEL	TO REPAIR SEE LABOUR	863.00	-
1	SPARE TYRE PANEL CUSHION	SERVICEABLE	200.30	-
1	REAR TOWING HOOK	SERVICEABLE	135.30	-
1	REAR FENDER (RH)	BUCKLED	1,935.90	1,935.90
1	REAR FENDER INNER LINING (RH)	SERVICEABLE	74.10	-
1	REAR WINDSCREEN MOULDING	NECESSARY	60.00	60.00
	LESS 20% DISCOUNT		-1,551.14	-1,129.82
			6,204.56	4,519.28

Report Ref No. NS/INC18022735/K1vbn2



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 (\$)
	<u>SPECIAL NETT ITEMS</u>			
1	BOOT LID COMFORT LOGO & TEL NO STICKER (SN)	NECESSARY	30.00	30.00
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	46.00	46.00
			311.70	311.70
	<u>LABOUR</u>			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR BUMPER PROTECTOR (LH/RH) AND SPARE TYRE PANEL.		1,200.00	800.00
	SPRAY PAINTING CHARGE.		1,500.00	800.00
	WIRING CHARGE.		30.00	20.00
	TUFF KOTE.		50.00	20.00
	REMOVE/REFIX CUSHION & UPHOLSTERY REAR.		150.00	50.00
	REMOVE/REFIX REAR WINDSCREEN GLASS.		120.00	100.00
	REMOVE/REFIX REVERSE SENSOR.		80.00	30.00
			3,130.00	1,820.00
	GRAND TOTAL		9,646.26	6,650.98
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			5,300.00

Report Ref No. NS/INC18022735/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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