

08/11/2018

Surveyor: Kelvin

REF: NS/INC18023024 / K/gb02

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD/TP/WS/TPRES/ODRES/EVA/INV/MV  
 To Inspected Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: SIN 5816M  
 Policy No: 5097349532 120118-190219  
 Claims No: MT/1177231-01  
 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

Est. or Market Value: \_\_\_\_\_  
 IDAC Accident Report: \_\_\_\_\_ Consistent?: Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No  
 Est. Repairs: 7 days Res.: Yes or No  
 Turn Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SHC 8082A Yr Regn: 28 May 2015  
 Type: M. Car / M. Cycle / Bus / Van / Lorry / T. / Prime Mover /  
 Truck / Trailer or  
 Make: Montes Per E22 cc 2143  
 Colour: White A/C: Insured / Std / HI / NA  
 Sp. Reading: 603519 T/Radio: Insured / Std / HI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: W002120012817550  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD / S/Rim or  
 Tyre Size: F: 225/55R16  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Worthlife  
 Front: 7 mm Rear: 7 mm  
 R/Bal. 7 mm L/Bal. 7 mm  
 D.O.A. 2/12/8 D.O.I. 28/12/16  
 Survey held at C D G E (Loyang)  
 Des. of Damages: Frl / Rear / O/S / N/S / U/C / Rooftop or  
Rear o/s.  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SHC 8082A - (C3/EGL/6001487/6601) DUA: 21012016 INC
	SIN 5816M - X 4s
2/1/19	Confirmed L/S \$1300 / 2 logs. (Red B2326, 69%)

RECEIVED 10 JAN 2019

Date/Time, File Pass to? ☐ : Prell. Report  
11/01/19 trans ☐ : Final Report  
 Date/Time, File Return to? \_\_\_\_\_

Days Of Repair: 2  
 Resurvey No. of Trip: 1

Report Format: TP  
 Lump Sum / L/S: 1300

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

Survey Fee:	
Transportation:	
S + RS \$	
Photos	
Others	
	160

eBaoTech

General Claim

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"/>	5097348532		HL LIMO PTE. LTD.	201624645Z	GPC	drive CLASSIC	SJN5816M	SJN5816M	12/01/2018	19/02/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate
1	MT/1018818-003	SMRT TAXIS PTE LTD	SHB 996X	GQ 8343K	05/11/2018	\$ 13,972.60
2	MT/1024768-002	CITYCAB PTE LTD	SHA 9592Z	SKA 5169D	19/12/2018	\$ 2,273.54
3	MT/1024650-002	COMFORT TRANSPORTATION PTE LTD	SHD 3102D	SIQ 7181G	19/12/2018	\$ 4,301.92
4	MT/1025318-002	COMFORT TRANSPORTATION PTE LTD	SH 8356D	SMC 3831D	26/12/2018	\$ 1,868.80
5	MT/1025432-002	COMFORT TRANSPORTATION PTE LTD	SHA 3267C	SGU 5180L	26/12/2018	\$ 6,430.12
6	MT/1027231-001	COMFORT TRANSPORTATION PTE LTD	SHC 8082A	SJN 5816M	21/12/2018	\$ 4,226.00
7	MT/1011204-002	SMRT TAXIS PTE LTD	SHB 360E	PC 5013A	11/09/2018	\$ 9,044.20

## 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	22/12/2018 09:12
Date Of Accident	21/12/2018 23:00
Exact Location Of Accident	WOODLANDS CIRCLE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8082A
<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

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	MERC
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

### Driver

Name of Driver	KUAH TECK WEE
NRIC No	S7007874J
Date Of Birth	12/03/1970
Occupation	OUTDOOR
Date Of Driving Pass	27/09/2011
Driving Experience	7 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81282557
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	733 08-89 WOODLANDS CIRCLE
Postcode	730733
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE (TP reverse)
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
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

SEE ATTACH.

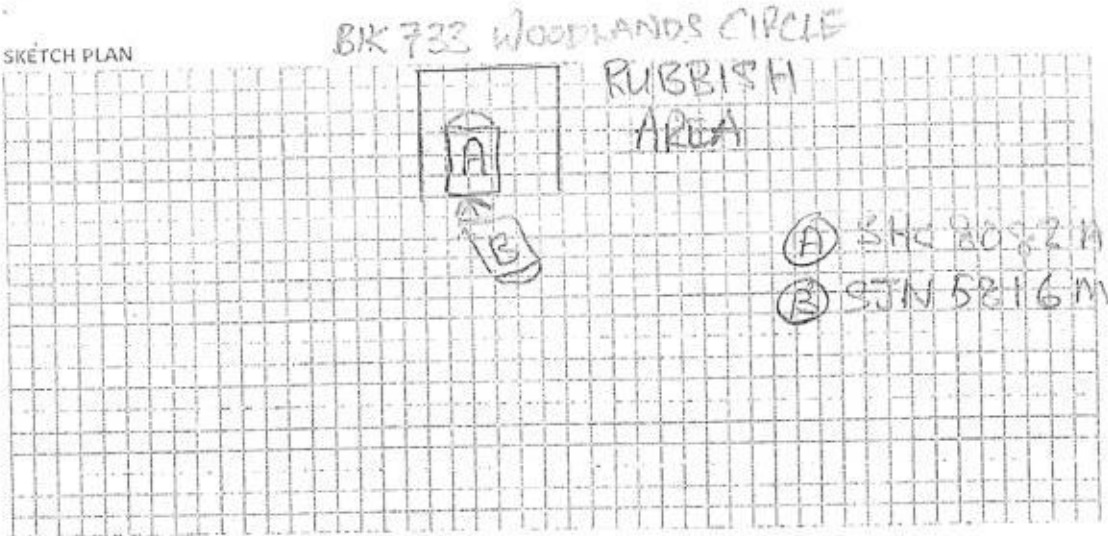
#### Attachment(s)

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	SJN5816M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MOHD PERDAUS BIN ABD MANAFF
NRIC/Passport Number	S1503767I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 21/12/2018 at about 2200 hrs, I vehicle A was waiting for my passenger at woodland Circle rubbish area. Suddenly vehicle B reverse and bang onto vehicle A rear bumper.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CC REG NO: 19903821R

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)

22/12/18  
Jackson Heng  
CSO

Reporting Centre Personnel's Signature  
Name: 110304

## Sketch Plan Pg. 2

### 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.
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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.

UNEPD TRANSPORTATION PTE LTD

Policyholder's Signature NO 1993038218

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

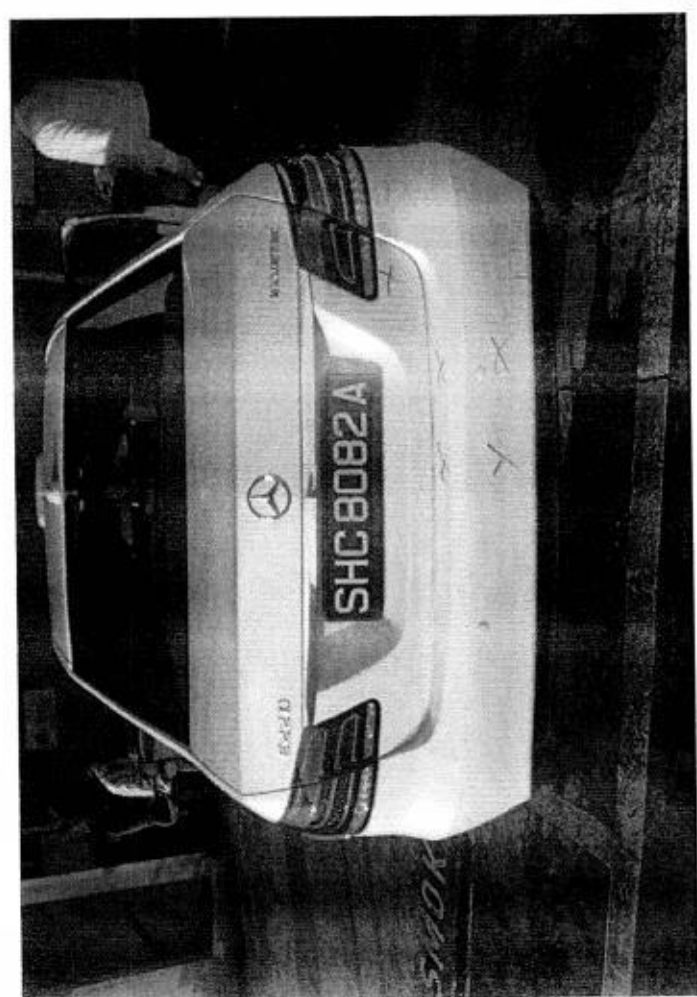
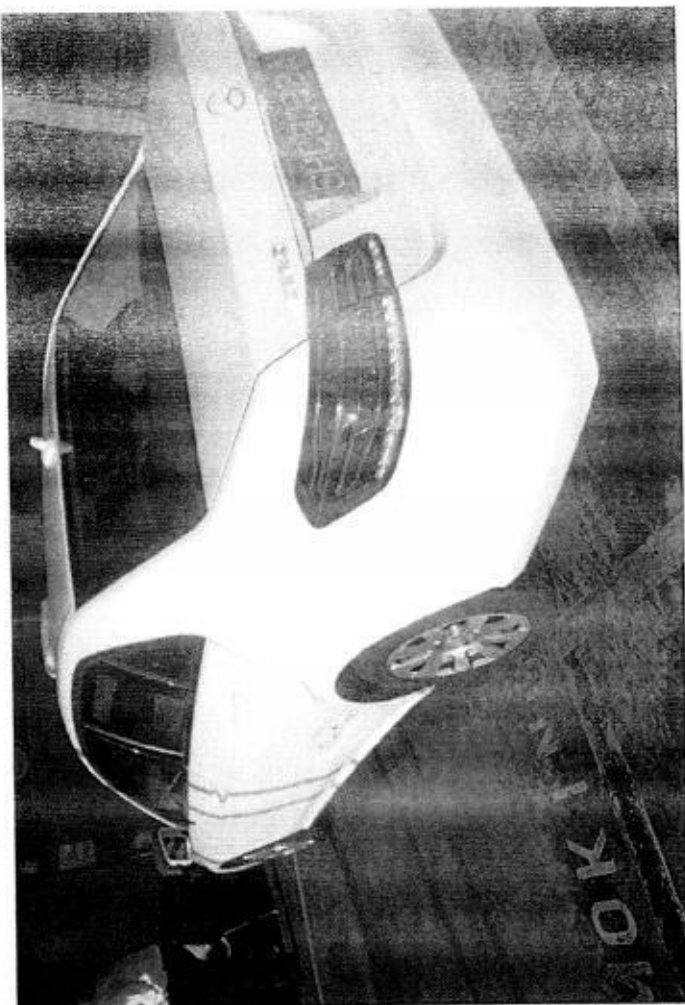
22/12/18  
Jackson H. H.  
CSO

Reporting Centre Personnel's Signature

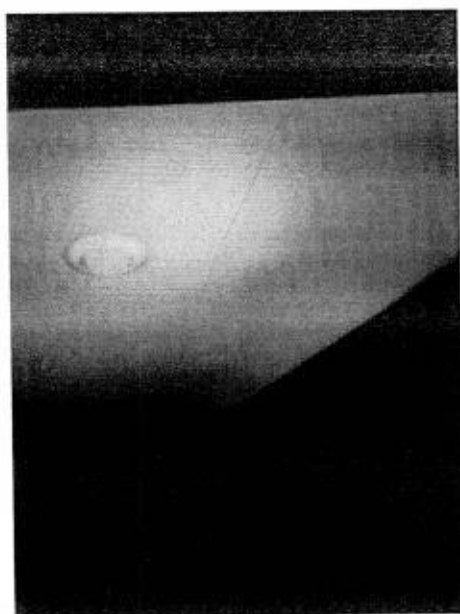
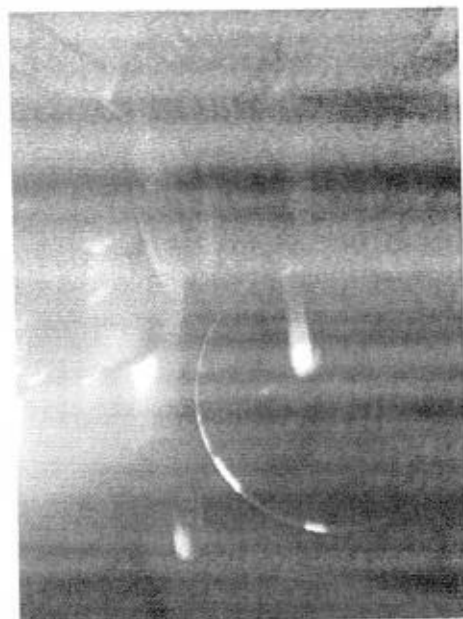
Name:

NRIC/FIN No.:









**COMFORTDELGRO ENGINEERING PTE LTD**  
**REPAIR ESTIMATE\***

VEHICLE NO : SHC 8082A

DATE 22/12/2018 11:28

MAKE :

MODEL : MERCEDES BENZ

*Like*

*L/Sum*

*NTUC*

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>Defend</i>			\$ 1,510.00
	Rear Bumper Reinforcement <i>Xsu</i>			\$ 1,150.00
	Rear Bumper Bracket Lower (LH/RH) <i>Xsu</i>		\$ 135.00	\$ 270.00
	Rear Bumper Bracket Top (LH/RH) <i>Xsu</i>		\$ 125.00	\$ 250.00
	Rear Bumper Retainer Mounting (LH/RH) <i>Xsu</i>		\$ 115.00	\$ 230.00
	Rear Bumper Lower Cover <i>X su</i>			\$ 325.00

Date/Time: 22.12.2018 11:22

Page : 1

Team: ARC Repair TP(CLSO)1

### JOB CARD

Sales Order:

JC NO.: 305253268

OMER  
IS COMFORT TRANSPORTATION PTE LTD  
OMER NO. 7010045  
LESS 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
(R) 65508755 (Q)  
(P)

NTUC

REGN NO.: SHC8082A	MILEAGE
MAKE: MERCEDES BENZ	FUEL E.....1/2.....F
MODEL E220CDI (E6)	DATE/TIME IN 22.12.2018 08:10
YR OF MANU. 28.05.2015	TARGET DATE
CHASSIS CODE WDD2120012B175580	COMPLETION DATE/TIME:

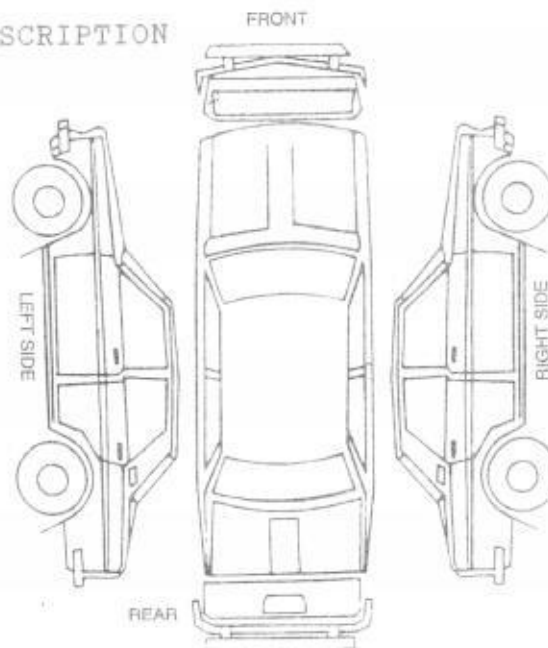
JUNT CARD NO.

### JOB DESCRIPTION

Accident Date: 21.12.2018  
NATURE: 3P 21.12.2018

S/NO LABOR CODE

### DESCRIPTION



WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Checklist Slip

Exit Pass

No.: SHC8082A LKE

Vehicle No.: SHC8082A

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  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

Date : 02/01/19

## Fax :

Vehicle Reg No. SHC8082A CTPL

21.12.18

Date : 2/1/19

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:




# National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18023024/K1qbn2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 10-01-2019	
Code: INC4				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SJN 5816M	Veh. Inspected	SHC 8082A	
Policy No.	5097348532	Coverage (\$)	0.00	
Claim No.	MT/1027231-001	Excess (\$)	0.00	
Assign From		Assign Date	24/12/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	MERCEDES BENZ E220	c.c	2143	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	WDD2120012B175580	Colour	WHITE	
Odometer	603519	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	225/55 R16	WEST LAKE	7 mm	
L/H Front Tyre	225/55 R16	WEST LAKE	7 mm	
R/H Rear Tyre	225/55 R16	WEST LAKE	7 mm	
L/H Rear Tyre	225/55 R16	WEST LAKE	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	21/12/2018	Inspection Date	24/12/2018	
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 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



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 8082A

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	DEFORMED	1,510.00	1,510.00
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	1,150.00	-
2	REAR BUMPER BRACKET LOWER (LH/RH) @\$135.00	SERVICEABLE	270.00	-
2	REAR BUMPER BRACKET TOP (LH/RH) @\$125.00	SERVICEABLE	250.00	-
2	REAR BUMPER RETAINER MOUNTING (LH/RH) @\$115.00	SERVICEABLE	230.00	-
1	REAR BUMPER LOWER COVER	SERVICEABLE	325.00	-
	LESS 20% DISCOUNT		-747.00	-302.00
			2,988.00	1,208.00
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR BUMPER SENSOR (SN)	SERVICEABLE	388.00	-
			388.00	-
<b><u>LABOUR</u></b>				
	PANEL BEATING.		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.	NOT NECESSARY	30.00	-
	REMOVE/REFIX REVERSE SENSOR.		120.00	30.00
			850.00	430.00
<b>GRAND TOTAL</b>			<b>4,226.00</b>	<b>1,638.00</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>1,300.00</b>

Report Ref No. NS/INC18023024/K1qbn2

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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