

Surveyor: Kelvin

REF:

NS/INC19004045/K14302

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop m/s _____

at _____

Insured: _____

Policy No: 508545287D-02

Claims No: MT/1034094-002

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

NIS	OIS

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

Sum Sum: _____ % Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No:

SHC 8174T

Yr Regn:

21 Apr, 2016

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

Truck / Trailer or

Make:

Hyundai

cc

1600

Colour

Blue

A/C:

Ins

Std / Nil / NA

Sp. Reading

401627

T/Radio:

Ins

Std / Nil / NA

Eng/No:

C/N:

KMHLB814M5408780r

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inord / Jammed / Leaked / Burnt or

Brake: Inord / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Air / or

Tyre Size:

F:

205/60R16

R:

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

TOYO/YOKO or

Phuok

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

27/2/19

D.O.I.

1/3/19

Survey held at

C D G E (Layang)

Des. of Damages: Frl / Rear / OIS / NIS / VIC / Rooftop or

Rear

The VIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

7/3/19 Check L/S \$6650 / 4 Bz. URed: 5107.82; 43% Im L/S

RECEIVED 07 MAR 2019

Date/Time, File Pass to?

7/3 Typist

Date/Time, File Return to?

☐

Prell. Report

☒

Final Report

Days Of Repair:

4

Resurvey No. of Trip:

2

Survey Fee:

160

Transportation:

160

66507

My Desktop
Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="27/02/2019 15:37"/>
Vehicle No.(For Motor)	<input type="text" value="YN5332P"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5085452870-02		ALLBEST MARINE SUPPLIES PTE. LTD.	200501577K	GFT	Comprehensive	YN5332P	YN5332P	14/11/2018	

Continue

TP Claims against NTUC Income: Follow-Through Survey

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Time of Accident	Estimate
1	MT/1034113-002	COMFORT TRANSPORTATION PTE LTD	SHB 4078U	SGV 2985X	28/2/2019	6:50	\$4,100.98
2	MT/1034094-002	COMFORT TRANSPORTATION PTE LTD	SHC 8174T	YN 5332P	27/2/2019	15:20	\$11,757.82

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	28/02/2019 15:35
Date Of Accident	27/02/2019 15:20
Exact Location Of Accident	TUAS SOUTH AVE 5 X TUAS SOUTH AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8174T
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	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	LEE CHEE KIONG
NRIC No	S6844792E
Date Of Birth	28/11/1968
Occupation	OUTDOOR
Date Of Driving Pass	09/02/1989
Driving Experience	30 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81578870
Fax Number	
Contact Number	
EMail Address	RCHEEKIONG@YAHOO.COM.SG

Address	BLK 425 CANBERRA ROAD #05-469
Postcode	750425
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 (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	TAMPINES NORTH NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO POLICE REPORT : T/20190228/2076

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN5332P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SINGARAM ILAYA RAJA
NRIC/Passport Number	G2635331P
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	3P PASSENGER
Approximate Age	
Injuries Sustain	NOT SURE
Injured person in which vehicle?	YN5332P
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	3P PASSENGER
Approximate Age	
Injuries Sustain	NOT SURE
Injured person in which vehicle?	YN5332P
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 3

Name	LEE CHEE KIONG
Approximate Age	50
Injuries Sustain	BACK AND NECK PAIN. ON 6 DAYS MC.
Injured person in which vehicle?	SHC8174T
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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.
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.

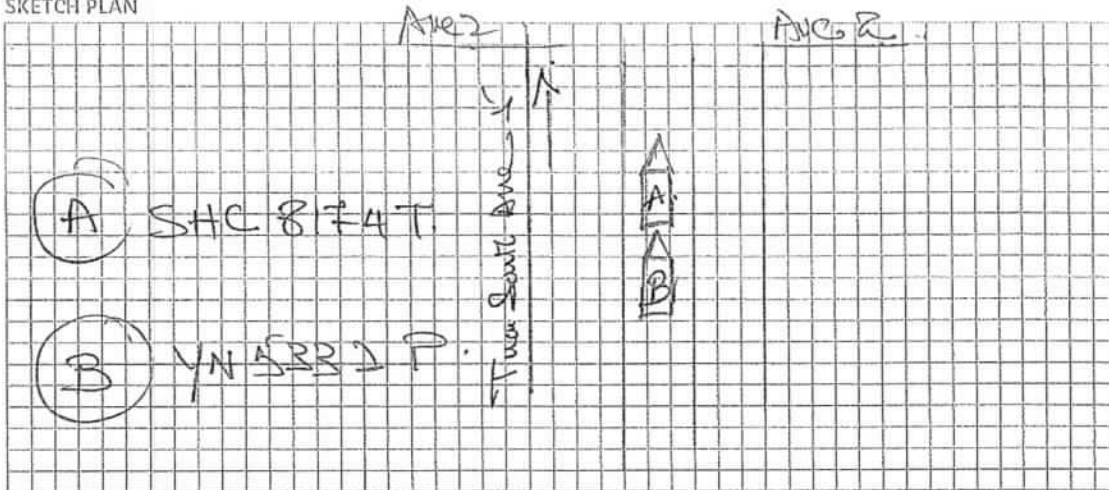
COPIED AT THE REPORTING CENTRE
CO. REG NO. 199303821R

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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police

Report:- T/20190228/2076.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG NO 19202351R

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.:

END OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190228/2076

1 of 3

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20190228/2076

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/02/2019 14:06	Vide Report No.: J/20190227/0081	Station Diary No.: 14
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Informant's Particulars			
Name of Informant: LEE CHEE KIONG		Address: APT BLK 425 CANBERRA ROAD #05-469 SINGAPORE 750425	
ID Type / ID No.: NRIC NO / S6844792E		Contact No.: Home/Office: Mobile: 81578870	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 50	Date of Birth: 28/11/1968	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 2B,3,4 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/02/2019 15:20	Type of Location: Straight Road
Location: Along Road 1 TUAS SOUTH AVENUE 5 junction Tuas South Avenue 2				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC8174T	Car	HYUNDAI	I40	Blue		0
YN5332P	Lorry	MITSUBISHI	FUSO	White		0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



SINGAPORE
POLICE FORCE



T/20190228/2076

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

2 of 3

Report No. T/20190228/2076

CONTINUATION OF REPORT

Driver			
Name	LEE CHEE KIONG	ID No.	S6844792E
Related Vehicle	SHC8174T (Car)	Contact No.	81578870
Hospital/Clinic	OEI FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	28/02/2019	Date Discharge	28/02/2019
No. of Days granted Medical Leave	06	Degree of Injury	NIL
Driver			
Name	SINGARAM ILAYA RAJA	ID No.	G2635331P
Related Vehicle	YN5332P (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 27.02.2019 at about 1520hrs, I was driving my vehicle SHC8174T along Tuas South Ave 5 on lane 2 of a 3 lane road. Out of a sudden, I felt an impact on the rear portion of my vehicle. I came out from my vehicle and noticed that my vehicle is involved in an accident. A white colour lorry YN5332P who is ferrying a group of foreign workers have collided to my vehicle. Ambulance was called in and 2 of the foreign workers were conveyed to Ng Teng Fong Hospital condition conscious.

Traffic Police were at scene. On 28.02.2019 at about 1100hrs, I went to Oei Family Clinic to seek medical treatment and was given 6 days of out patient leave. That is all.

[Signature]
S6844792E



SINGAPORE
POLICE FORCE



T/20190228/2076

3 of 3

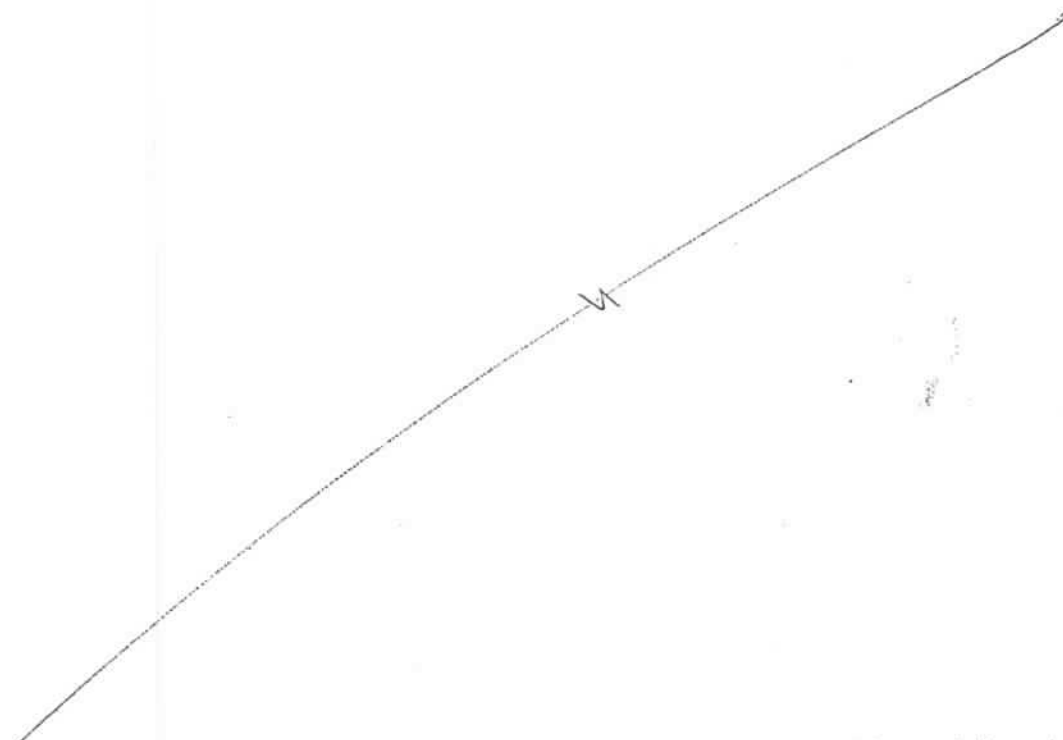
Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20190228/2076

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan



IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Staff Sgt TAN HOCK CHYE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

28/02/2019 14:06

Officer In Charge Of Case:

TP / AEIT /

SSI 2 SITIMARSITA BINTE BOHARI

Contact No.: 65476219

Classification Of Case:

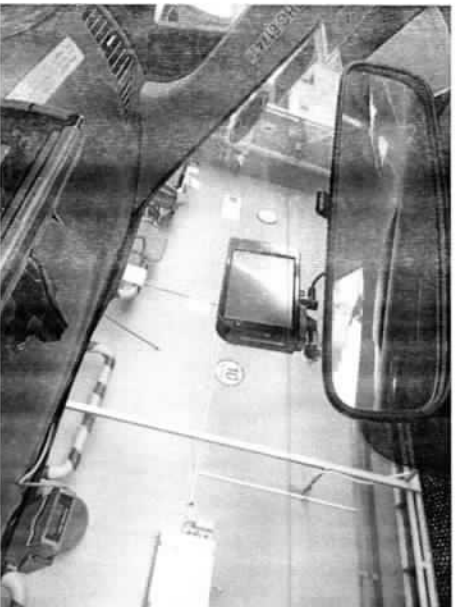
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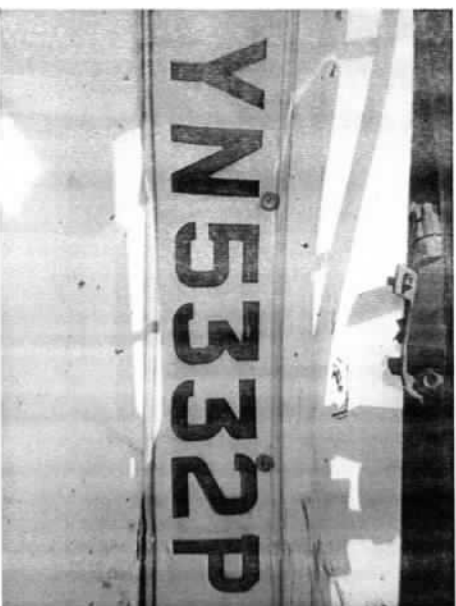
NP168



SINGAPORE
POLICE FORCE

SIGNATURE





COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC 8174T

DATE 1/3/2019 11:25

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Boot Lid / <i>Paint</i>			\$ 2,174.90	
	Boot Lid Rubber <i>X / trim</i>			\$ 96.50	
	Boot Lid Hinge (LH/RH) / <i>Paint</i>		\$ 142.30	\$ 284.60	
	Boot Lid Lock Upper / <i>Trim</i>			\$ 102.60	
	Boot Lid Lock Lower <i>X repair</i>			\$ 31.70	
	Boot Lid 'H' Emblem / <i>new</i>			\$ 28.70	
	Boot Lid CRDI Plate / <i>new</i>			\$ 27.90	
	Boot Lid Lamp (LH/RH) / <i>unit</i>		\$ 565.60	\$ 1,131.20	
	Licence Lamp (LH/RH) <i>X new</i>		\$ 33.95	\$ 67.90	
	Boot Lid Trimboard <i>X new</i>			\$ 116.40	
	Boot Lid Trimboard Clips (10pcs) <i>X 4</i>			\$ 11.00	
	Bootlid Moulding / <i>new</i>			\$ 85.00	
	Bootlid i40 Emblem / <i>new</i>			\$ 27.90	
	Bootlid Lower Garnish / <i>new</i>			\$ 227.90	
	Rear Bumper / <i>Paint</i>			\$ 553.00	
	Rear Bumper Reinforcement / <i>new</i>			\$ 428.40	
	Rear Bumper Reinforcement Bracket (LH/RH) / <i>new</i>		\$ 80.30	\$ 160.60	
	Rear Bumper Clip 10 pcs / <i>new</i>			\$ 22.00	
	Rear Bumper Bracket <i>X new</i>		\$ 35.60	\$ 71.20	
	Rear Bumper Sponge / <i>trim</i>			\$ 103.50	
	Rear Bumper Under Cover / <i>new</i>			\$ 228.00	
	Rear Bumper Reflector Lamp (LH/RH) / <i>new</i>		\$ 30.60	\$ 61.20	
	Tail Lamp (LH/RH) / <i>unit</i>		\$ 697.80	\$ 1,395.60	
	Rear Panel / <i>Paint</i>			\$ 526.70	
	Rear Panel Garnish / <i>new</i>			\$ 57.70	
	Rear Panel Lower Panel / <i>Paint</i>			\$ 89.40	
	Rear Fender (LH) <i>X repair</i>			\$ 2,171.40	
	Rear Fender Inner Lining (LH) <i>X new</i>			\$ 169.30	
	Rear Windscreen Moulding <i>X new</i>			\$ 28.30	
	Fuel Lid Cover / <i>new</i>			\$ 70.90	
SUB TOTAL				\$ 10,551.40	
LESS 20%				\$ 2,110.28	
DISCOUNTED TOTAL				\$ 8,441.12	
	Boot Lid Comfort Logo & Tel No. Sticker / <i>new</i>			\$ 30.00	Nett
	Rear No. Plate / <i>new</i>			\$ 25.00	Nett
	Rear Bumper Reverse Sensor <i>X new</i>			\$ 135.70	Nett
	Rear Bumper Rubber Mat / <i>new</i>			\$ 50.00	Nett
	Rear Fender Advertisement Logo (LH/RH) / <i>new</i>		\$ 100.00	\$ 200.00	Nett
	Rear Windscreen Sealant <i>X new</i>			\$ 46.00	Nett
				\$ 486.70	

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Labour Charge			
	Panel Beating			\$ 1,200.00 ⁸⁰⁰
	Spray Painting Charge			\$ 1,200.00 ⁸⁰⁰
	Wiring Charge			\$ 30.00 ³⁰
	Tuff Kote			\$ 50.00 ³⁰
	Remove/Refix Cushion & Upholstery Rear			\$ 150.00 ⁵⁰
	Remove/Refix Rear Windscreen Glass			\$ 120.00 ^{X 1/2}
	Remove/Refix Reverse Sensor			\$ 80.00 ^{X 1/2}
	TOTAL LABOUR			\$ 2,830.00
	ESTIMATE TOTAL			\$ 11,757.82
<p><i>Kahua 10/10/19</i></p> <p><i>1/3/19 1150 Ls.</i></p> <p><i>4 Dngs</i></p> <p><i>4/1/19</i></p> <p><i>After Repair plz</i></p>				
<div> <p>hence notify</p> <p>following:</p> <p>survey</p> <p>on</p> <p>"dispute" basis</p> <p>and</p> <p>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(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305273410

OMER
S: COMFORT TRANSPORTATION PTE LTD
OMER NO. 7010045
ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
(R) 65508755 (O)

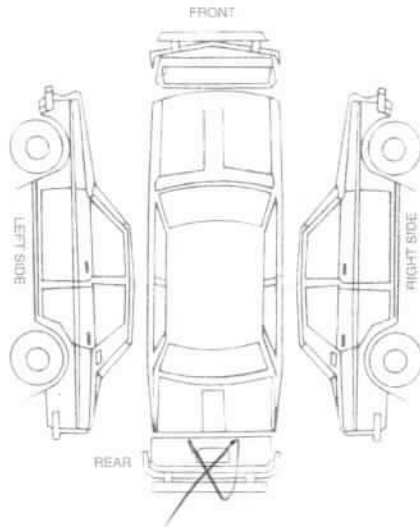
OUNT CARD NO.

REGN NO.: SHC8174T	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL: I-40	DATE/TIME IN 27.02.2019 17:45
YR OF MANU. 21.04.2016	TARGET DATE
CHASSIS CODE KMHLB41UMGU087805	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 27.02.2019
NATURE: 3P 27.02.19 -

S/NO LABOR CODE DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

No.: SHC8174T

JU NTUC

Vehicle No.:

SHC8174T

f Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

Our Job Ref No 305279410

Date : 06/03/19

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHC8174T

Date of Accident : 27.02.19

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

1. The repair job shall bill to: NTUC --- YN5332P
###

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%
Final Lumpsum Repair cost

\$ 6650.00

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 : JUMANI

Tel : 6214 8315

Fax : 65468156

Signature : 

Name : KALVIN

Date : 7/3/19

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/INC19004045/K1td3e2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE

189556

Date: 08-03-2019



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YN 5332P	Veh. Inspected	SHC 8174T
Policy No.	5085452870-02	Coverage (\$)	0.00
Claim No.	MT/1034094-002	Excess (\$)	0.00
Assign From		Assign Date	01/03/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU087805	Colour	BLUE
Odometer	401627	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	6 mm
L/H Front Tyre	205/60 R16	HANKOOK	6 mm
R/H Rear Tyre	205/60 R16	HANKOOK	6 mm
L/H Rear Tyre	205/60 R16	HANKOOK	6 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	27/02/2019	Inspection Date	01/03/2019
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:	4 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



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 8174T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID	DENTED	2,174.90	2,174.90
1	BOOT LID RUBBER	TORN	96.50	96.50
2	BOOT LID HINGE (LH/RH) @\$142.30	BENT	284.60	284.60
1	BOOT LID LOCK UPPER	JAMMED	102.60	102.60
1	BOOT LID LOCK LOWER	TO REPAIR SEE LABOUR	31.70	-
1	BOOT LID 'H' EMBLEM	NECESSARY	28.70	28.70
1	BOOT LID CRDI PLATE	NECESSARY	27.90	27.90
2	BOOT LID LAMP (LH/RH) @\$565.60	CUT	1,131.20	1,131.20
2	LICENCE LAMP (LH/RH) @\$33.95	SERVICEABLE	67.90	-
1	BOOT LID TRIMBOARD	SERVICEABLE	116.40	-
10	BOOT LID TRIMBOARD CLIPS	NOT NECESSARY	11.00	-
1	BOOTLID MOULDING	CUT	85.00	85.00
1	BOOTLID I40 EMBLEM	NECESSARY	27.90	27.90
1	BOOTLID LOWER GARNISH	CRACKED	227.90	227.90
1	REAR BUMPER	DEFORMED	553.00	553.00
1	REAR BUMPER REINFORCEMENT	CRACKED	428.40	428.40
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$80.30	BENT	160.60	160.60
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @\$35.60	SERVICEABLE	71.20	-
1	REAR BUMPER SPONGE	TORN	103.50	103.50
1	REAR BUMPER UNDER COVER	CRACKED	228.00	228.00
2	REAR BUMPER REFLECTOR LAMP (LH/RH) @\$30.60	CRACKED	61.20	61.20
2	TAIL LAMP (LH/RH) @\$697.80	CUT	1,395.60	1,395.60
1	REAR PANEL	DENTED	526.70	526.70
1	REAR PANEL GARNISH	CRACKED	57.70	57.70
1	REAR PANEL LOWER PANEL	DENTED	89.40	89.40
1	REAR FENDER (LH)	TO REPAIR SEE LABOUR	2,171.40	-
1	REAR FENDER INNER LINING (LH)	NOT NECESSARY	169.30	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	28.30	-
1	FUEL LID COVER	MISSING	70.90	70.90
	LESS 20% DISCOUNT		-2,110.28	-1,576.84
			8,441.12	6,307.36
	<u>SPECIAL NETT ITEMS</u>			
1	BOOT LID COMFORT LOGO & TEL NO. STICKER (SN)	NECESSARY	30.00	30.00
1	REAR NO PLATE (SN)	CRACKED	25.00	25.00
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	-
			486.70	305.00
	<u>LABOUR</u>			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF BOOT LID LOCK LOWER AND REAR FENDER (LH).		1,200.00	800.00
	SPRAY PAINTING CHARGE.		1,200.00	800.00
	WIRING CHARGE.		30.00	30.00
	TUFF KOTE.		50.00	30.00
	REMOVE / REFIX CUSHION & UPHOLSTERY REAR.		150.00	50.00
	REMOVE / REFIX REAR WINDSCREEN GLASS.	NOT NECESSARY	120.00	-
	REMOVE / REFIX REVERSE SENSOR.	NOT NECESSARY	80.00	-
			2,830.00	1,710.00
GRAND TOTAL			11,757.82	8,322.36
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				6,650.00

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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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