

Surveyor: Kalvin

REF: NS/INC 19007201 / KVD 3e2

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD TP WS / TP RES / OD RES / EVA / INV / MV
 To Inspected Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: PC 1403J
 Policy No. 5095391839-01 (27/10/2018 -
 Claims No. MT/1041000-002
 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
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SHA 7719P Yr Regn: 2 Apr 2015
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Hyundai Z40 c.c. 1600
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 526695 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMHLB416M4067864
 Gen. Cond: Good / OK / Poor / Burnt
 Steering: In order / OK / Jammed / Leaked / Burnt or
 Brake: In order / OK / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD / Rim or
 Tyre Size: F: 205/60R16
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Wetake
 Front _____ Rear _____
 R/Bal. 7 mm R/Bal. 7 mm
 L/Bal. 7 mm L/Bal. 7 mm
 D.O.A. 18/4/19 D.O.I. 18/4/19
 Survey held at CDGE (Loyang)
 Des. of Damages: Frl / Rear / O/S / N/S / U/C / Roof/top or
whole n/s.
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
24/4/19	Insured L/S \$ 3750 / 3 Pys. (Red 1440.08, 1890) <u>INC</u>
	SHA 7719P - CC3/CTI18020211/KIF6302 D.O.A - 07/11/2018 <u>4.</u>
	PC 1403J - CC3/INC13013511/119 D.O.A - 22/07/2013
RECEIVED 25 APR 2019	

Date/Time, File Pass to?

☐ : Prell. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 25/4 - typist

Report Format:

TP

Sumo/Insured L/S \$ 3750/3

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Insp (\$

☐ : Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

eBaoTech

General Claim

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="18/04/2019 12:53"/>
Vehicle No.(For Motor)	<input type="text" value="PC1403J"/>	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"/>	5095391839-01		A & S TRANSPORTATION PTE LTD	200001625C	GFT	Comprehensive	PC1403J	PC1403J	27/10/2018	

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	Tentative repair cost
1	MT/1040780-002	COMFORT TRANSPORTATION PTE LTD	SHA 2877Z	EJ 3030G	18/4/2019	7:00	\$9,993.32	\$6,700.00
2	MT/1040749-002	COMFORT TRANSPORTATION PTE LTD	SHB 6398H	YM 711SS	17/4/2019	11:50	\$8,498.40	\$4,450.00
3	MT/1041000-002	COMFORT TRANSPORTATION PTE LTD	SHA 7719P	PC 1403J	18/4/2019	7:50	\$5,190.08	\$3,750.00
4	MT/1041254-002	CITYCAB PTE LTD	SHA 8029R	SJT 8619P	18/4/2019	20:00	\$1,680.54	\$700.00
5	-	COMFORT TRANSPORTATION PTE LTD	SHD 6909Z	SMK 5784B	21/4/2019	0:30	\$4,027.84	\$2,650.00

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	18/04/2019 09:34
Date Of Accident	18/04/2019 07:50
Exact Location Of Accident	BEDOK SOUTH AVE 1 TWDS NEW UPP. CHANGI RD.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA7719P
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	DAVID KARENNAYER S/O MARIMUTHU
NRIC No	S2007325Z
Date Of Birth	12/03/1951
Occupation	OUTDOOR
Date Of Driving Pass	03/12/1976
Driving Experience	42 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92306400
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	484 #05-87 JURONG WEST AVENUE 1
Postcode	640484
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
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.

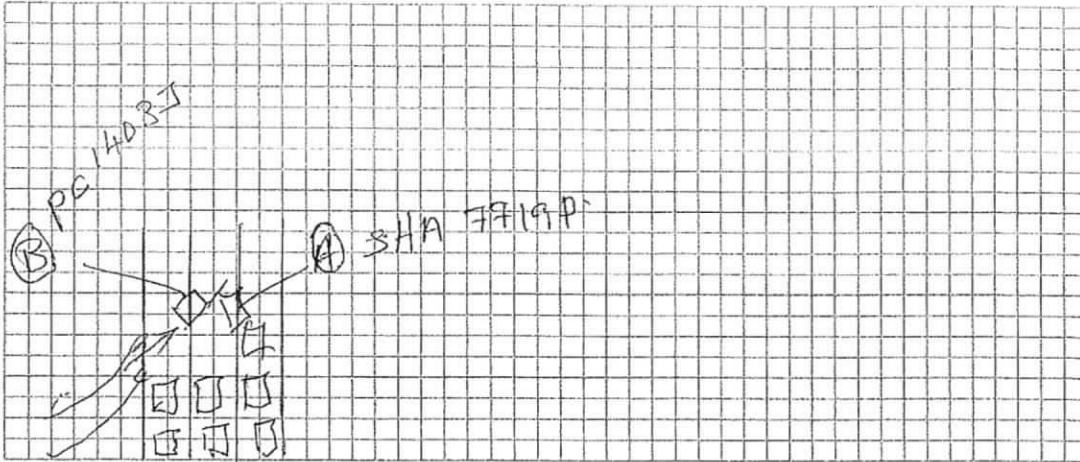
Attachment(s)

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	PC1403J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	TEY SING CHAI
NRIC/Passport Number	G2549285X
Contact Number	83631111
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	RHT FRT
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 18/4/19 I was travelling along Bedok South Ave 1 towards Bedok, I give signal left to turn left towards left about entering the centre halfway a bus (B) from the left first lane cut into my centre and bang onto my left hand side of my vehicle, no injury at the time. That all I have to say.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303321R

Policyholder's Signature
Date & Time:

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

18/4/19
Jackson Heng
CSO

Reporting Centre Personnel's Signature
Name:

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.

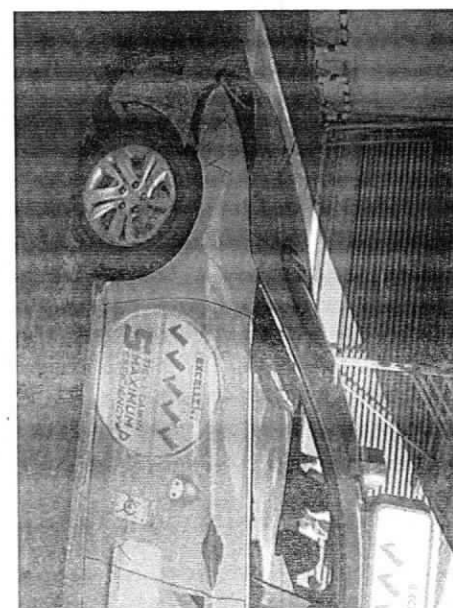
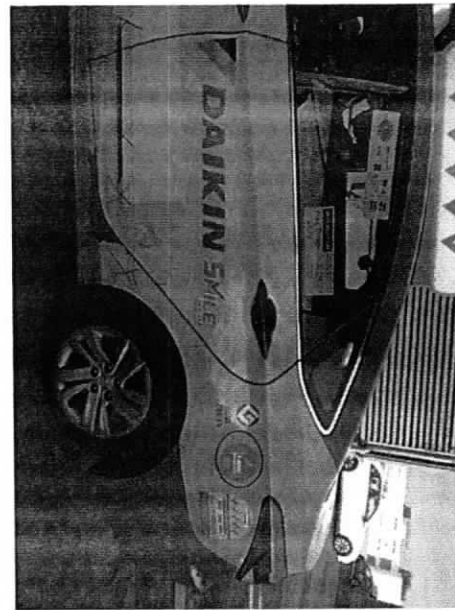
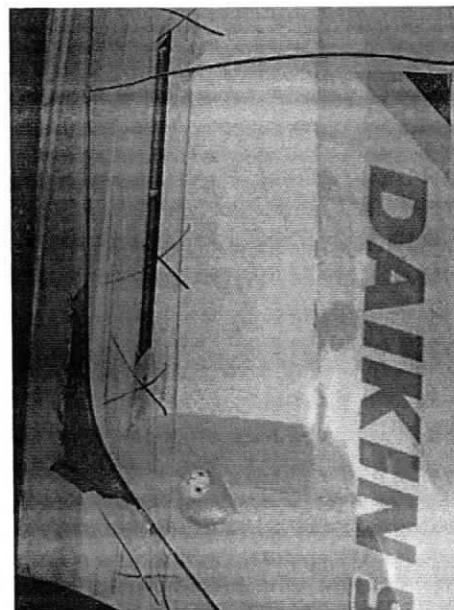
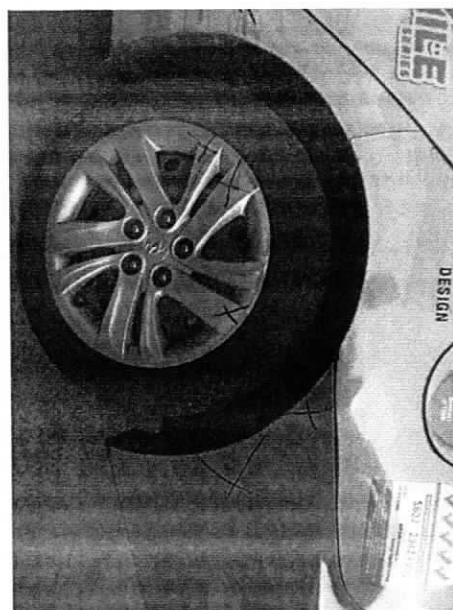
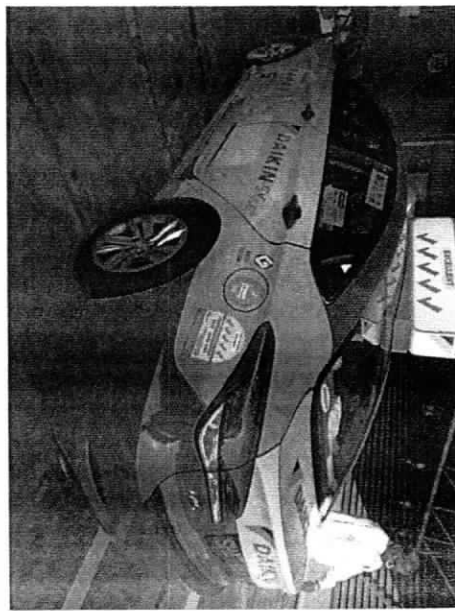
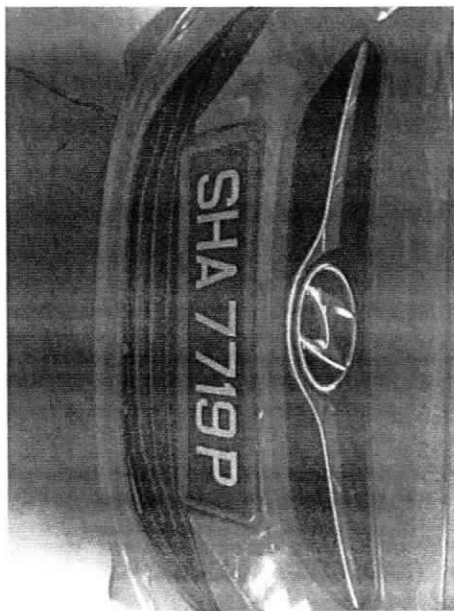
COMFORT TRANSPORTATION PTE. LTD.
CO. REG. NO. 199303821R

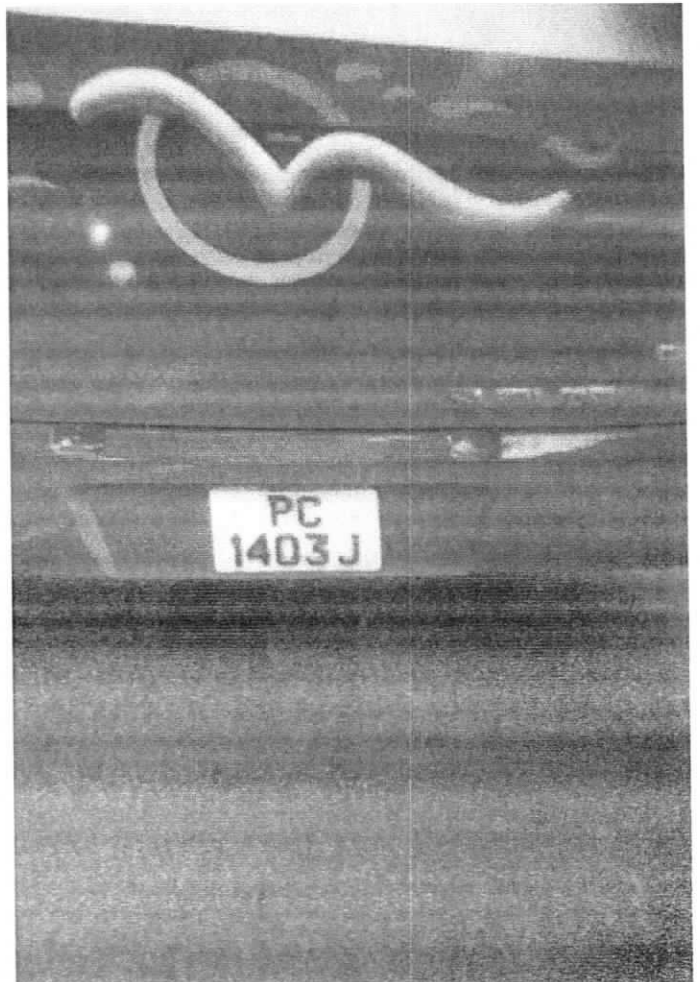
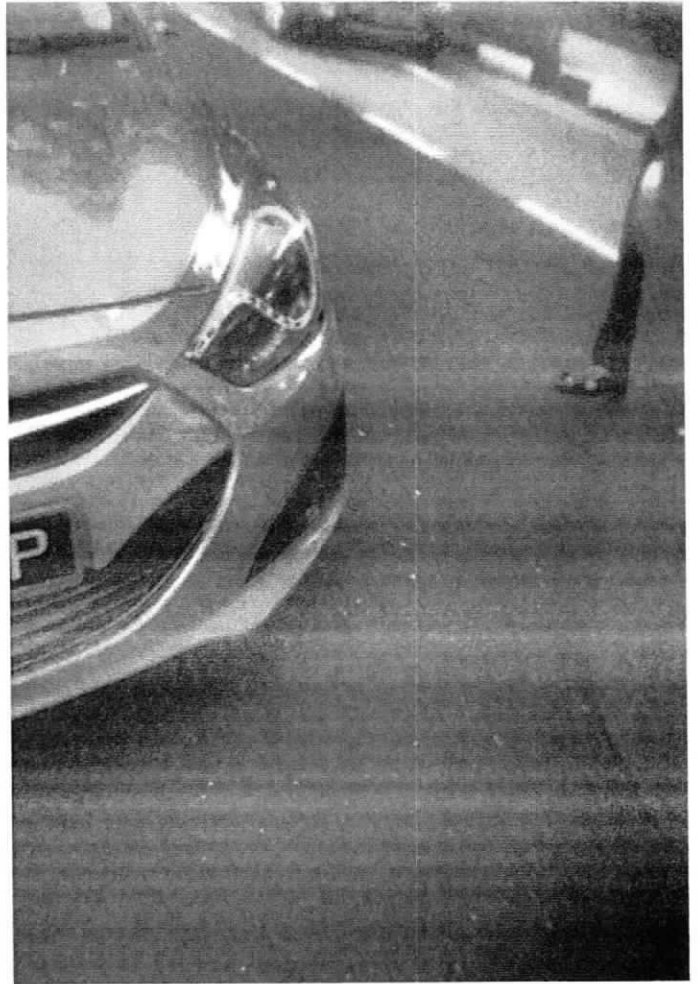
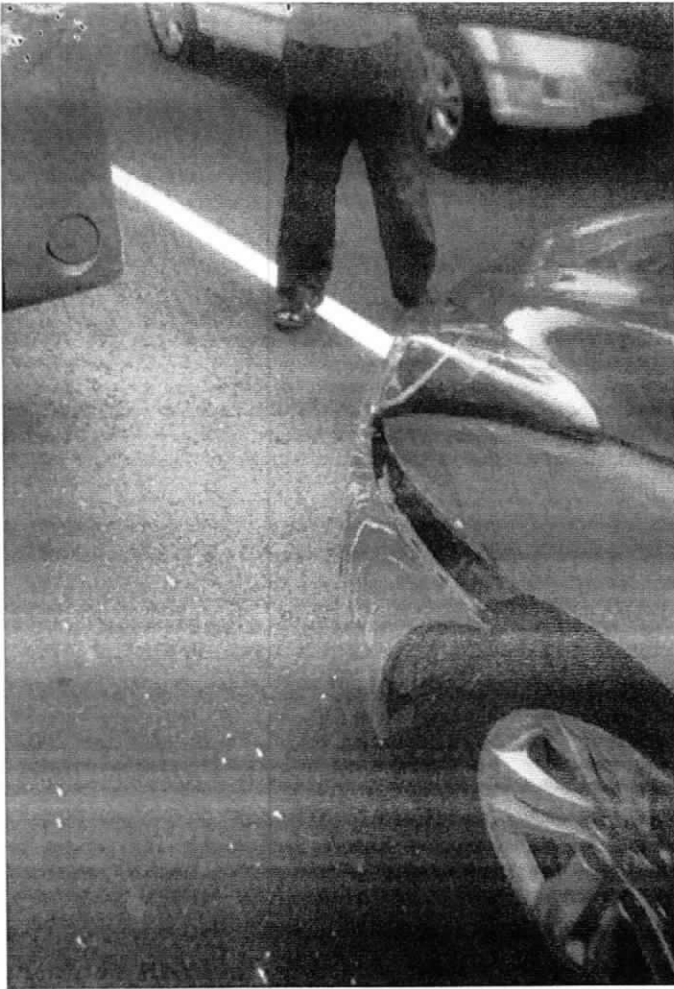
Policyholder's Signature
Date & Time:

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

18/4/19
Jackson Heng
CSO

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





member COMFORTDELGRO

Date/Time: 18.04.2019 10:51 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305288238

OMER

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

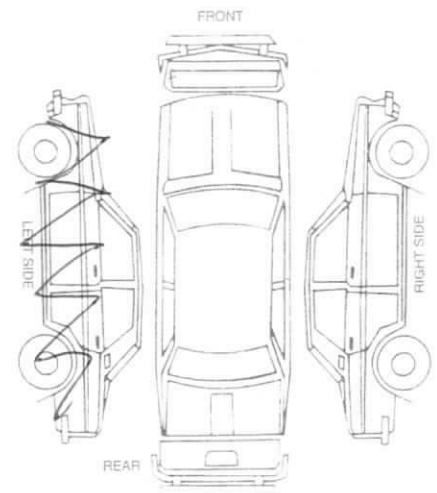
JUNT CARD NO.

REGN NO.: SHA7719P	MILEAGE
MAKE : HYUNDAI	FUEL E.....1/2.....F
MODEL I-40	DATE/TIME IN 18.04.2019 08:25
YR OF MANU 02.04.2015	TARGET DATE
CHASSIS CODE KMHLB41UMFU067865	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 18.04.2019
NATURE: 3P 18.04.19/C

S/NO LABOR CODE DESCRIPTION



BOOKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

No.: SHA7719P JU NTUC LKK

Vehicle No.: SHA7719P

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

gu.

DATE 18/4/2019 12:33

MODEL : HYUNDAI i40

NTUC

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover / ca			\$ 1,052.20
	Front Bumper Grille Airduct (LH) Xsu			\$ 26.20
	Front Bumper Bracket Top (LH) - org			\$ 22.40
	Front Bumper Retainer Mounting Xsu			\$ 9.20
	Headlamp (LH) - hazel			\$ 1,388.00
	Front Fender (LH) - Buckles			\$ 663.00
	Front Fender Shield (LH) - tan			\$ 174.90
	Front Fender Retainer Xsu			\$ 24.60
	Front Door Mirror Assy (LH) Repair x repair			\$ 670.00
	Front Wheel Hub Cap (LH) - bronze			\$ 107.10
	SUB TOTAL			\$ 4,137.60
	LESS 20%			\$ 827.52
	DISCOUNTED TOTAL			\$ 3,310.08
	Door Logo Front - nec		10%	\$ 75.00
	Door Logo Rear - nec		-10%	\$ 80.00
	Front Fender Advertisement Logo (LH) - nec			\$ 100.00
	Rear Fender Advertisement Logo (LH) - nec			\$ 100.00
	Front Door Advertisement Logo (LH) - nec			\$ 100.00
	Rear Door Advertisement Logo (LH) - nec			\$ 100.00
				\$ 555.00
	Labour Charge			
	Panel Beating			\$ 600.00
	Spray Painting Charge			\$ 1,200.00
	Wiring Charge			\$ 30.00
	Tuff Kote			\$ 50.00
	TOTAL LABOUR			\$ 1,880.00
	ESTIMATE TOTAL			\$ 5,190.08
	Kahr (CCK)			
	18/4/19 1420 L.			
	3 Dy,			
	L/S			
	After Repair photo			

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.

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.

COMFORTDELGRO ENGINEERING

Our Job Ref No 305288238
Date : 22/04/2019

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

FINALIZATION FORM

To : LKK
Attn : KALVIN
: SHA7719P

Fax :

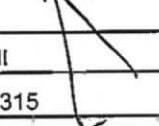
Date of Accident : 18.04.19


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

1. The repair job shall bill to: NTUC --- PC 1403J
###
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) NI
Total for Lumpsum repair cost after Less: 20% \$3,750.00
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 : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature : 
Name : Kahl
Date : 24/4/19

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/INC19007201/K1vd3e2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 03-05-2019	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	PC 1403J	Veh. Inspected	SHA 7719P	
Policy No.	5095391839-01	Coverage (\$)	0.00	
Claim No.	MT/1041000-002	Excess (\$)	0.00	
Assign From		Assign Date	18/04/2019	
2. Vehicle Particulars & Condition				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	KMHLB41UMFU067864	Colour	BLUE	
Odometer	526695	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	WEST LAKE	7 mm	
L/H Front Tyre	205/60 R16	WEST LAKE	7 mm	
R/H Rear Tyre	205/60 R16	WEST LAKE	7 mm	
L/H Rear Tyre	205/60 R16	WEST LAKE	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE WHOLE N/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	18/04/2019	Inspection Date	18/04/2019	
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.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 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. SHA 7719P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER COVER	CRACKED	1,052.20	1,052.20
1	FRONT BUMPER GRILLE AIRDUCT (LH)	SERVICEABLE	26.20	-
1	FRONT BUMPER BRACKET TOP (LH)	CRACKED	22.40	22.40
1	FRONT BUMPER RETAINER MOUNTING	SERVICEABLE	9.20	-
1	HEADLAMP (LH)	GRAZED	1,388.00	1,388.00
1	FRONT FENDER (LH)	BUCKLED	663.00	663.00
1	FRONT FENDER SHIELD (LH)	TORN	174.90	174.90
1	FRONT FENDER RETAINER	SERVICEABLE	24.60	-
1	FRONT DOOR MIRROR ASSY (LH)	TO REPAIR SEE LABOUR	670.00	-
1	FRONT WHEEL HUB CAP (LH)	GRAZED	107.10	107.10
	LESS 20% DISCOUNT		-827.52	-681.52
			3,310.08	2,726.08
<u>NETT ITEMS</u>				
1	DOOR LOGO FRT (N)	NECESSARY	75.00	75.00
1	DOOR LOGO REAR (N)	NECESSARY	80.00	80.00
	LESS 10% DISCOUNT		-	-15.50
			155.00	139.50
<u>SPECIAL NETT ITEMS</u>				
1	FRONT FENDER ADVERTISEMENT LOGO (LH)(SN)	NECESSARY	100.00	100.00
1	REAR FENDER ADVERTISEMENT LOGO (LH)(SN)	NECESSARY	100.00	100.00
1	FRONT DOOR ADVERTISEMENT LOGO (LH)(SN)	NECESSARY	100.00	100.00
1	REAR DOOR ADVERTISEMENT LOGO (LH)(SN)	NECESSARY	100.00	100.00
			400.00	400.00
<u>LABOUR</u>				
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF FRONT DOOR MIRROR ASSY (LH) .		600.00	400.00
	SPRAY PAINTING CHARGE.		1,200.00	1,000.00
	WIRING CHARGE.		30.00	20.00

Report Ref No. NS/INC19007201/K1vd3e2



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 (\$)
	TUFF KOTE.		50.00	20.00
			1,880.00	1,440.00
GRAND TOTAL			5,745.08	4,705.58
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				3,750.00

Report Ref No. NS/INC19007201/K1vd3e2

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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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.