

Surveyor: Kelvin

REF: NS/INC 19007232/Klvd302

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Insp'd Vehicle No: _____

at Workshop m/s _____

of _____

Insured: EJ 3030G

Policy No. 5078603349-03 (24/03/2019-23/03/2020)

Claims No. MT/1040780-002

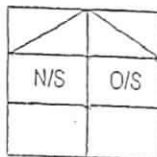
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAG Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: _____ days Res.: Yes or No

Cum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SHA 28772 Yr Regn: 20sep, 2013

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

Truck / Trailer or

Make: Mercedes-Benz E 220 c.c. 2143

Colour: White AJC: Insured / Std / NI / NA

Sp. Reading: 851239 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WDD2120224760664

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 A/Rim or

Tyre Size: F: 205 / 60 R16

R: _____

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

TOYO / YOKO or Yokohama

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: Frt / 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

SHA 28772-X

EJ 3030G - MJA/INC09018201/YIK1 DOA-16/08/2009 INC

25/4/19 6 hrs 45 \$6700 / 4 hrs (Red 3293.32, 339) 45.

RECEIVED 25 APR 2019

Date/Time, File Pass to?

☐ : Prel. Report

1) _____

☐ : Final Report

Date/Time, File Return to?

2) 25/4 - typist

3) _____

TP

45 \$6700/2

Days Of Repair: 4

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

160

160

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[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"/>	5078603349-03		ANITA KEVIN SAMY D/O PARATHASARATHEE KEVIN SAMY	S1534943C	GPC	Third Party, Fire & Theft	EJ3030G	EJ3030G	24/03/2019	23/03/2020

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 7115S	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 11:37
Date Of Accident	18/04/2019 07:00
Exact Location Of Accident	LANE 2 TPE TO PIE CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA2877Z
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	MERCEDES-BENZ
Model	E220
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	MURUGANANTHAN S/O PANNIR SELVAM
NRIC No	S7770908H
Date Of Birth	24/03/1977
Occupation	OUTDOOR
Date Of Driving Pass	07/08/2001
Driving Experience	17 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86851224
Fax Number	
Contact Number	
Email Address	M.ANANTHAN.PS@GMAIL.COM

Address	BLK 321B ANCHORVALE DRIVE #02-184
Postcode	542321
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?	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)	2
Passenger 1	NAME: : - GENDER: : MALE

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

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	EJ3030G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANITA KEVIN SAMY D.O PARATHASA
NRIC/Passport Number	S1534943C
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	MURUGANANTHAN S/O PANNIR SELVAM
Approximate Age	42
Injuries Sustain	PAIN ON NECK AND BACK
Injured person in which vehicle?	SHA2877Z
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.
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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. 199203821R

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.:

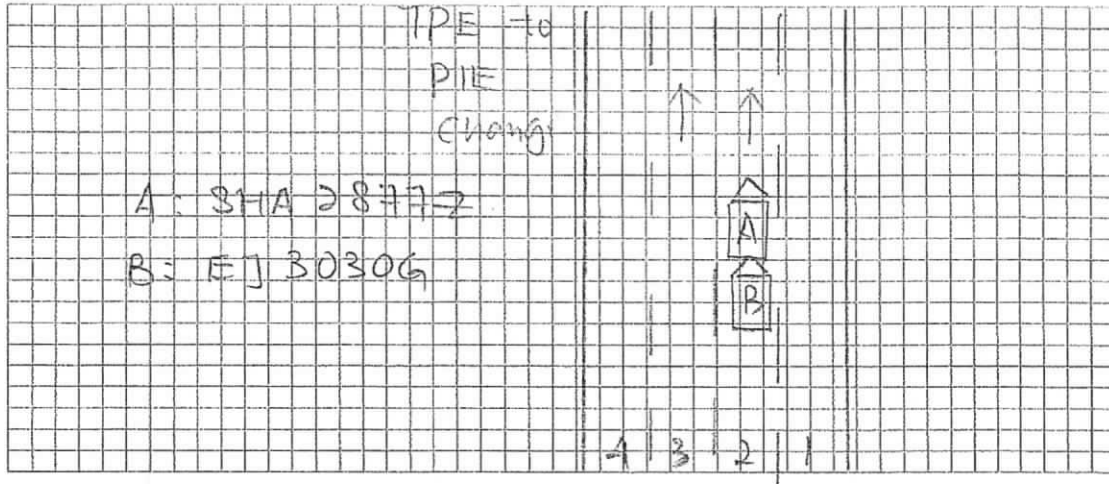
Loke Wei Yeng

GIARMC SketchPlanForm_V3

1

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 18/4/19 at about 07:00 hrs, I was driving on lane 2 along TPE to PIE Changi. Shortly veh in front braked to stopped and I follow suit. A few second later, I felt an impact from behind followed by a jerk. Then I stopped car to take photo and exchange particulars. I felt pain on my neck and back, will consult doctor later on. 01 male passenger on board my taxi.

DECLARATION

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

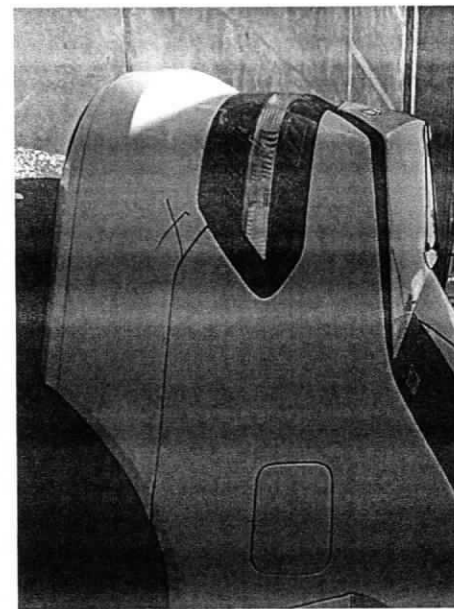
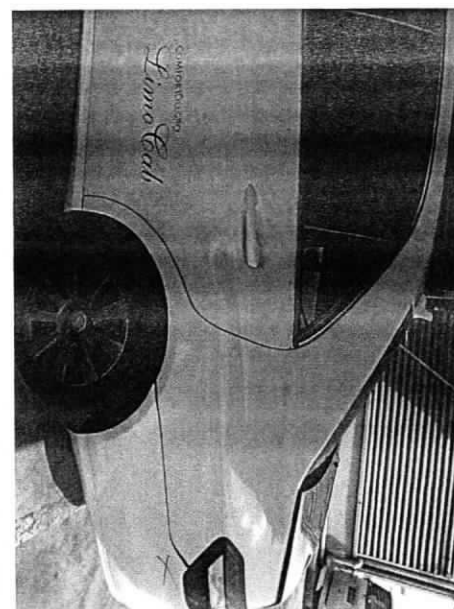
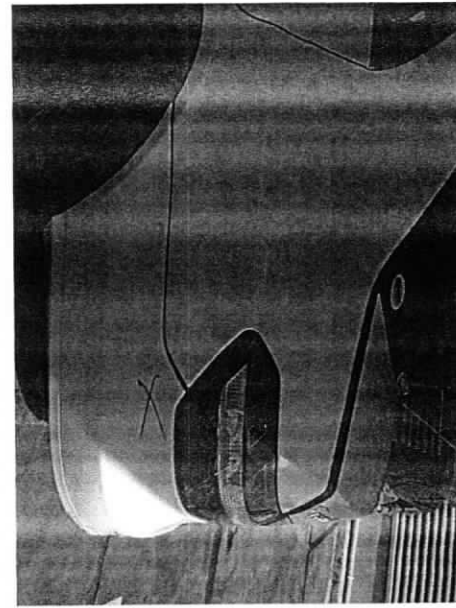
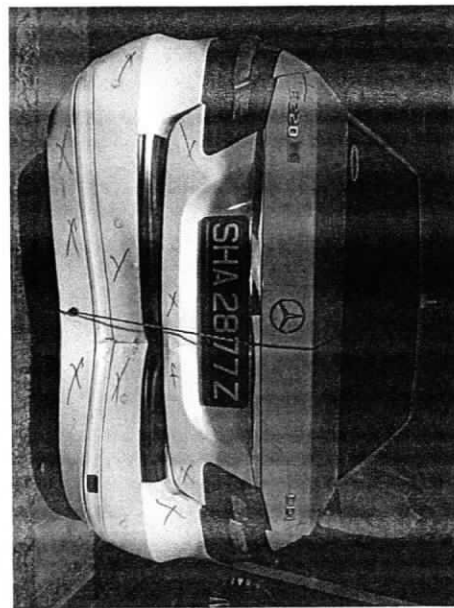
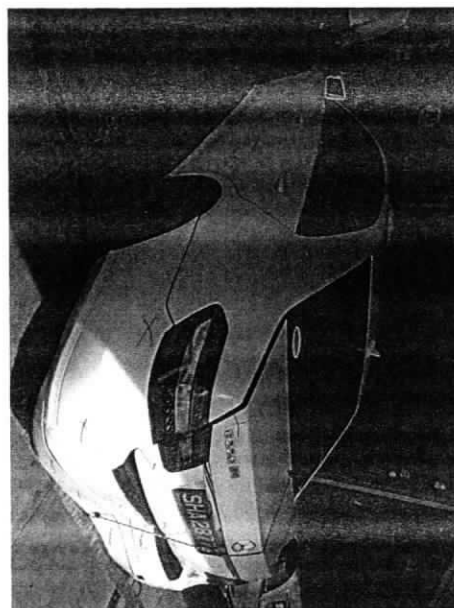
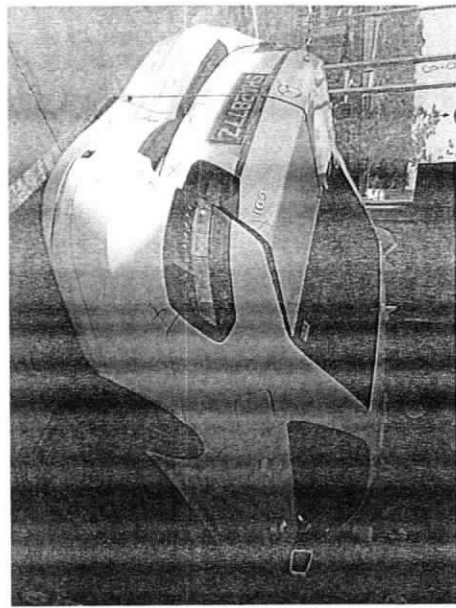
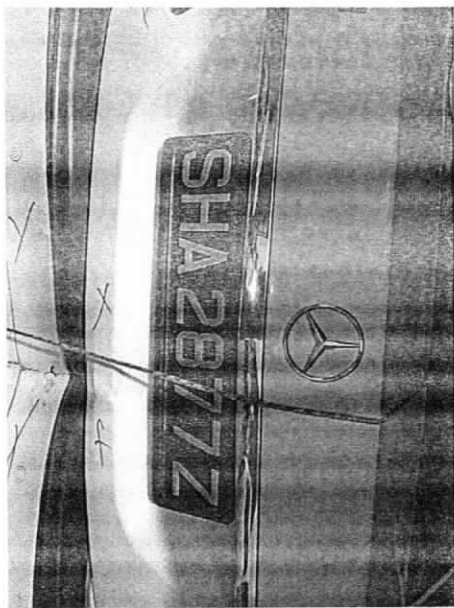
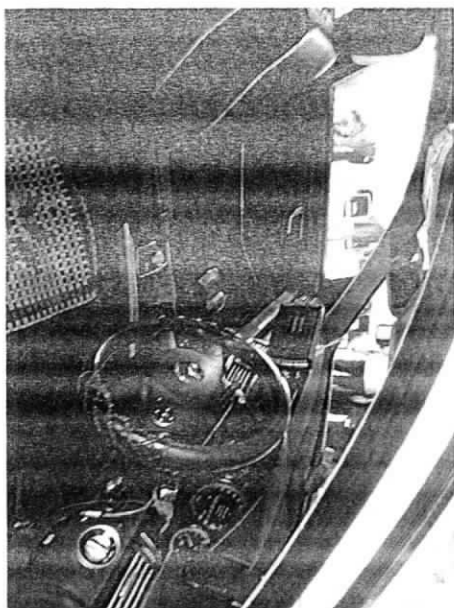
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199203321R

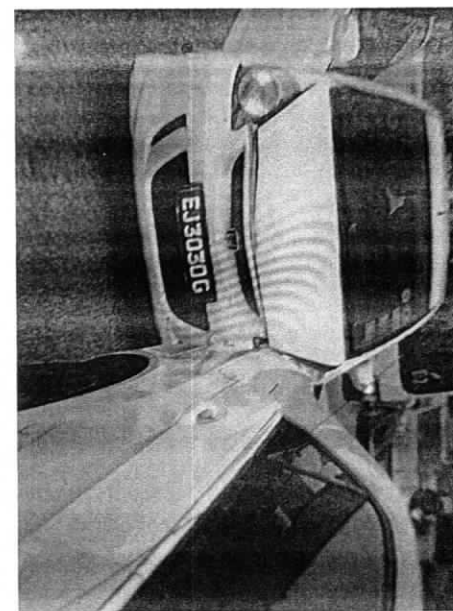
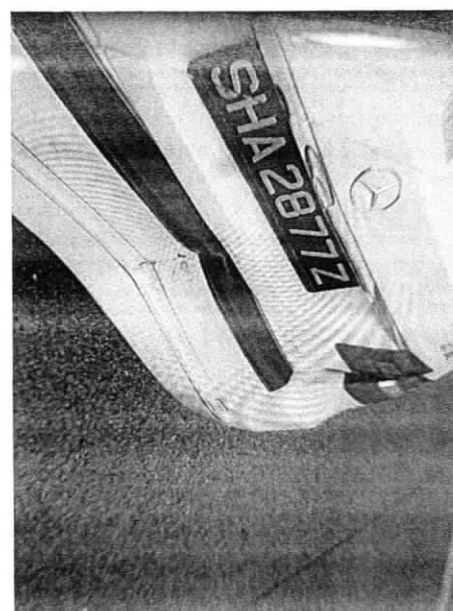
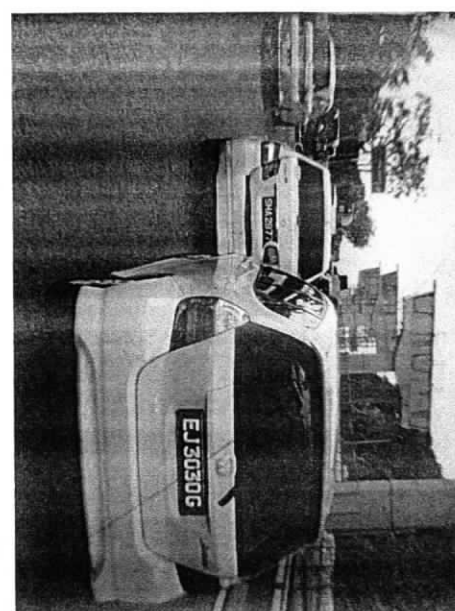
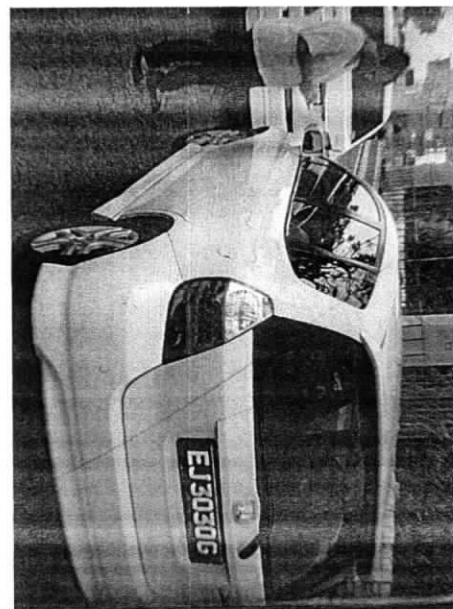
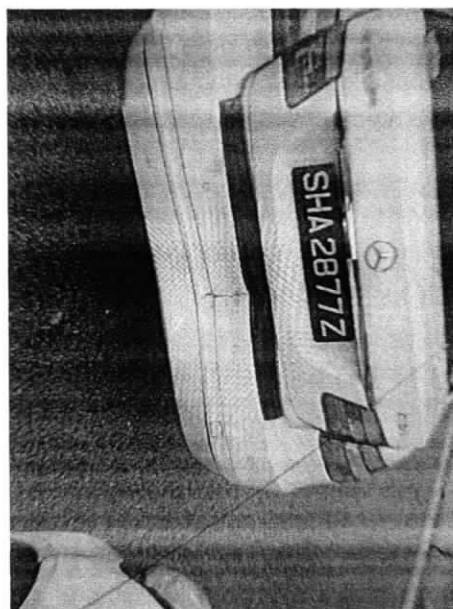
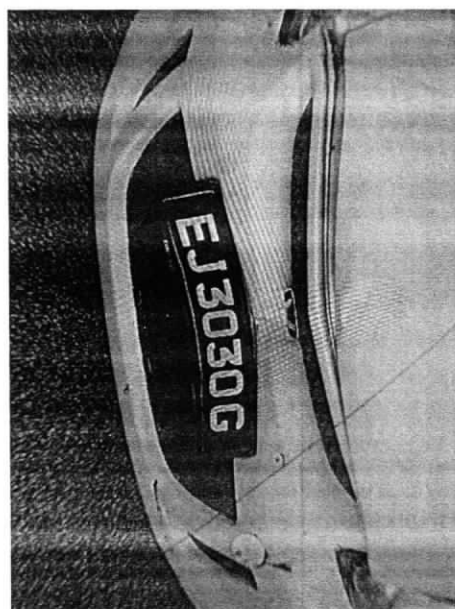
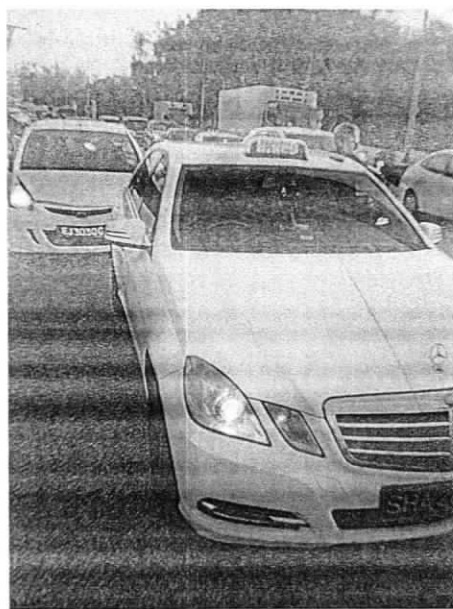
Policyholder's Signature
Date & Time:

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

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

Loke Wei Yiong





COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd

25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

Workshops

29 Loyang Drive Singapore 608968

383 Sin Ming Drive Singapore 575717

45 Pandan Road Singapore 609288

320 Ubi Road Singapore 680039

24 Serangoon Loop Singapore 756196

7 Sungei Kadut Way Singapore 728791

361 Yishun Industrial Park A Singapore 768732

A member of COMFORTDELGRO

Date/Time: 18.04.2019 12:51

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO.: 305288475

CUSTOMER

/MS

CUSTOMER NO.

ADDRESS

(R)

(P)

COUNT CARD NO.

COMFORT TRANSPORTATION PTE LTD

7010045

383 SIN MING DRIVE

Singapore SINGAPORE 575717

65508755

(O)

VARS

REGN NO.:

SHA2877Z

MILEAGE

MAKE :

MERCEDES BENZ

FUEL

E.....1/2.....F

MODEL

E220CDI(E5)

DATE/TIME IN

18.04.2019 10:50

YR OF MANU.

30.09.2013

TARGET DATE

CHASSIS CODE

WDD2120022A760664

COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 18.04.2019

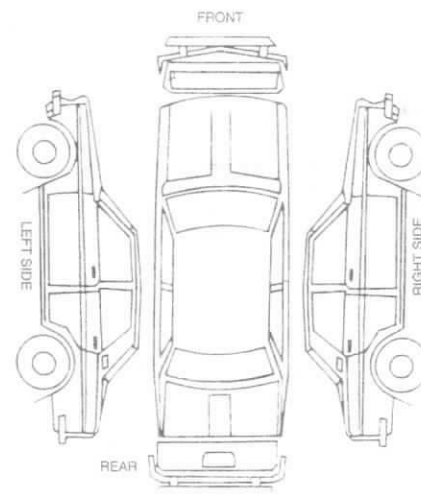
NATURE: 3P 18.04.2019

S/NO

LABOR CODE

DESCRIPTION

NTUC - Rear
LRC/Kelmi -



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.:

SHA2877Z

LARRY

Vehicle No.:

SHA2877Z

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

Larry Ng

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

NTUC

VEHICLE NO : SHA 2877Z

DATE 18/4/2019 12:58

MAKE :

MODEL : MERCEDES BENZ

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Boot Lid <i>Bent</i>			\$ 2,470.00
	Boot Lid Moulding <i>Force</i>			\$ 110.00
	Boot Lid Lock <i>X sue</i>			\$ 275.00
	Boot Lid 'E220' Emblem <i>me</i>			\$ 54.30
	Boot Lid Star Logo <i>me</i>			\$ 45.00
	Boot Lid Emblem <i>me</i>			\$ 54.30
	Rear Bumper <i>Blue</i>			\$ 1,510.00
	Rear Bumper Reinforcement <i>Bent</i>			\$ 1,150.00
	Rear Bumper Bracket Lower (RH) <i>X sue</i>			\$ 135.00
	Rear Bumper Absorber (RH) <i>X sue</i>			\$ 196.45
	Rear Bumper Centre Frame <i>X sue</i>			\$ 177.55
	Rear Bumper Towing Cover <i>me</i>			\$ 175.00
	Rear Bumper Under Side Cover <i>X sue</i>			\$ 245.30
	Taillamp (RH) <i>old</i>			\$ 1,280.00
	Rear Panel End <i>Replaced</i>			\$ 1,380.00
	Rear Panel Inner Garnish <i>me</i>			\$ 240.00
	Rear Panel Inner Garnish Clip (10pcs) <i>me</i>			\$ 40.00
SUB TOTAL				\$ 9,537.90
LESS 20%				\$ 1,907.58
DISCOUNTED TOTAL				\$ 7,630.32
	Rear Bumper Sensor <i>sLhd</i>			\$ 388.00
	Boot Lid Sovereign' Sticker <i>me</i>			\$ 25.00
	Rear Bumper Rubber Mat <i>me</i>			\$ 50.00
				\$ 463.00
Labour Charge				
	Panel Beating			\$ 800.00
	Spray Painting Charge			\$ 900.00
	Wiring Charge			\$ 30.00
	Tuff Kote			\$ 50.00
	Remove/Refix Reverse Sensor			\$ 120.00
TOTAL LABOUR				\$ 1,900.00
ESTIMATE TOTAL				\$ 9,993.32

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary facts must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature: *Kalvin*
Date: *18/4/19*

Larry Ng

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.

349.21
Nett
Nett
Nett

600
600
20
20
30

COMFORTDELGRO ENGINEERING

Our Job Ref No . 305288475

Date : 24. Apr. 2019

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA2877Z

Date of Accident: 18. Apr. 2019

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

1. The repair job shall bill to: NTUC EJ3030G

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

\$6,700.00

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 : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : Kalvi

Date : 25/4/19

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				
3. Survey Fees				
4. LTA Search Fee				
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/INC19007232/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.	EJ 3030G	Veh. Inspected	SHA 2877Z
Policy No.	5078603349-03	Coverage (\$)	0.00
Claim No.	MT/1040780-002	Excess (\$)	0.00
Assign From		Assign Date	18/04/2019
2. Vehicle Particulars & Condition			
Make & Model	MERCEDES BENZ E 220	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	WDD2120022A760664	Colour	WHITE
Odometer	851239	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 REAR O/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:		4 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 2877Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID	BENT	2,470.00	2,470.00
1	BOOT LID MOULDING	SERVICEABLE	110.00	-
1	BOOT LID LOCK	SERVICEABLE	275.00	-
1	BOOT LID 'E220' EMBLEM	NECESSARY	54.30	54.30
1	BOOT LID STAR LOGO	NECESSARY	45.00	45.00
1	BOOT LID - EMBLEM	NECESSARY	54.30	54.30
1	REAR BUMPER	DEFORMED	1,510.00	1,510.00
1	REAR BUMPER REINFORCEMENT	BENT	1,150.00	1,150.00
1	REAR BUMPER BRACKET LOWER (RH)	SERVICEABLE	135.00	-
1	REAR BUMPER ABSORBER (RH)	SERVICEABLE	196.45	-
1	REAR BUMPER CENTRE FRAME	SERVICEABLE	177.55	-
1	REAR BUMPER TOWING COVER	MISSING	175.00	175.00
1	REAR BUMPER UNDER SIDE COVER	SERVICEABLE	245.30	-
1	TAILLAMP (RH)	BENT	1,280.00	1,280.00
1	REAR PANEL END	BUCKLED	1,380.00	1,380.00
1	REAR PANEL INNER GARNISH	CRACKED	240.00	240.00
10	REAR PANEL INNER GARNISH CLIP	NECESSARY	40.00	40.00
	LESS 20% DISCOUNT		-1,907.58	-1,679.72
			7,630.32	6,718.88
<u>NETT ITEMS</u>				
1	REAR BUMPER SENSOR (N)	SHORTED	388.00	388.00
1	BOOT LID SOVEREIGN' STICKER (N)	NECESSARY	25.00	25.00
	LESS 10% DISCOUNT		-	-41.30
			413.00	371.70
<u>SPECIAL NETT ITEMS</u>				
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
			50.00	50.00
<u>LABOUR</u>				
	PANEL BEATING.		800.00	600.00

Report Ref No. NS/INC19007232/K1vd3e2



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



Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	SPRAY PAINTING CHARGE.		900.00	600.00
	WIRING CHARGE.		30.00	20.00
	TUFF KOTE.		50.00	20.00
	REMOVE / REFIX REVERSE SENSOR.		120.00	30.00
			1,900.00	1,270.00
GRAND TOTAL			9,993.32	8,410.58

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				6,700.00
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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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