

Surveyor: KGM

REF: NS/INC 19067259/KH43

ASSIGNMENT

From: _____ Date: _____

Estimated cost: _____

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

To Inspect Vehicle No: _____

at Workshop no: _____

of _____

Insured: 984 5944C

Policy No: 5102368726 (19/07/2018 - 18/07/2019)

Claims No: MT/1041824-001

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Vch: _____

(Policy Condition)

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

N/S	O/S

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

Cum Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SH 8121P Yr Regn: 11 Dec, 2018

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

Truck / Trailer or

Make: Hyundai 2012 cc 1580

Colour: Blue A/C: Insu ~~6~~ / Std / NI / NASp. Reading: 29719 T/Radio: Insu ~~6~~ / Std / NI / NA

Eng/No: _____

C/No: KM HC 851CRK4122069

Gen. Cond: Good / ~~6~~ / Poor / BurntSteering: Inor ~~6~~ / Jammed / Leaked / Burnt orBrake: Inor ~~6~~ / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD ~~6~~ / Rim or

Tyre Size: F: 195/65R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / ~~6~~ / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 20/4/19 D.O.I. 24/4/19

Survey held at: CDAE (Loyang)

Des. of Damages: Fnt / Rear / O/S / N/S / U/C / Rooftop or

Rear n/s.

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

Date / Time	Action / Instruction
	SH 8121P - CC4/11113225769 / Sub 392 D.O.A. 22/04/2018 INC
	984 5944C - PIP
26/4/19	Contract PIP 8439121 / 30% (Red: 2976.48; 40%)

RECEIVED 29 APR 2019

Date/Time, File Pass to? ☐ : Prel. Report1) ☐ : Final Report

Date/Time, File Return to?

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Intervention (\$ _____)

Travel: _____

Other: _____

Total: _____

Total: _____

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"/>	5102368726		THL AIR-CON SERVICES PTE LTD	201316061W	GCV	Comprehensive	GBH5944C	GBH5944C	19/07/2018	18/07/2019

Denise Tay (LKKAUTO)

From: MTCL@income.com.sg
Sent: Friday, 26 April 2019 2:03 PM
To: Denise Tay (LKKAUTO)
Subject: FW: REQUEST CLAIM NUMBER

Dear Sir/ Mdm,

Claim created. For your attention.

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/1041569-002	COMFORT TRANSPORTATION	SHC 2281G	GBC 9034D	23/04/2019	08:00	1537	1819.14
1	MT/1041824-001	COMFORT DELGRO	SHB 8121P	GBH 5944C	20/04/2019	10:15	7367.69	4391.21

With Regards

Joreen Ang
Senior Admin Assistant
Motor Insurance
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify. Find out more at Income.com.sg/careers

in with you

From: Denise Tay (LKKAUTO) [mailto:denisetay@lkkauto.com]
Sent: Friday, 26 April 2019 11:40 AM
To: MTCL@income.com.sg
Subject: REQUEST CLAIM NUMBER

Dear Sir/Madam,

Request claim number

Date : 26/4/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1		COMFORT TRANSPORTATION	SHC 2281G	GBC 9034D	23/04/2019	08:00	1537	1819.14
1		COMFORT DELGRO	SHB 8121P	GBH 5944C	20/04/2019	10:15	7367.69	4391.21

NTUC-CP/P

2

COMFORTDELGRO

Date/Time: 22.04.2019 08:05 Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order:

JC NO. 305288883

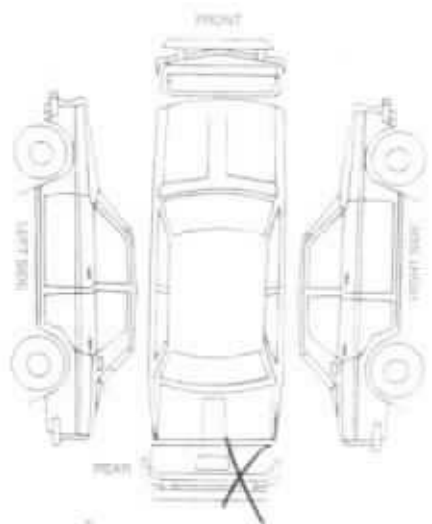
CUSTOMER
NAME
COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755
PHONE NO.
JUNT CARD NO.

REGN NO.	SH 8121P	MILEAGE
MAKE	HYUNDAI	FUEL
MODEL	IONIQ (G2)	DATE/TIME IN
YR OF MANU.	11.12.2018	TARGET DATE
CHASSIS CODE	KMHC851CVKU122069	COMPLETION DATE/TIME

Accident Date: 20.04.2019
NATURE: 3P 20.04.19

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



ISSUED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Management Sign

Exit Pass

SH 8121P LIMITS

Vehicle No. SH 8121P

Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

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 willful 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	21/04/2019 07:46
Date Of Accident	20/04/2019 10:15
Exact Location Of Accident	ADAM ROAD TWDS THOMSON RD.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8121P
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	IONIQ HYBRID
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	LIM SIAH HWA
NRIC No	S1107747A
Date Of Birth	25/04/1955
Occupation	OUTDOOR
Date Of Driving Pass	09/06/1976
Driving Experience	42 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92359531
Fax Number	
Contact Number	
Email Address	LIMSIAHWA@YAHOO.COM

Address	534 #07-217 SERANGOON NORTH AVENUE 4
Postcode	550534
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?	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)	5
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : MALE
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)

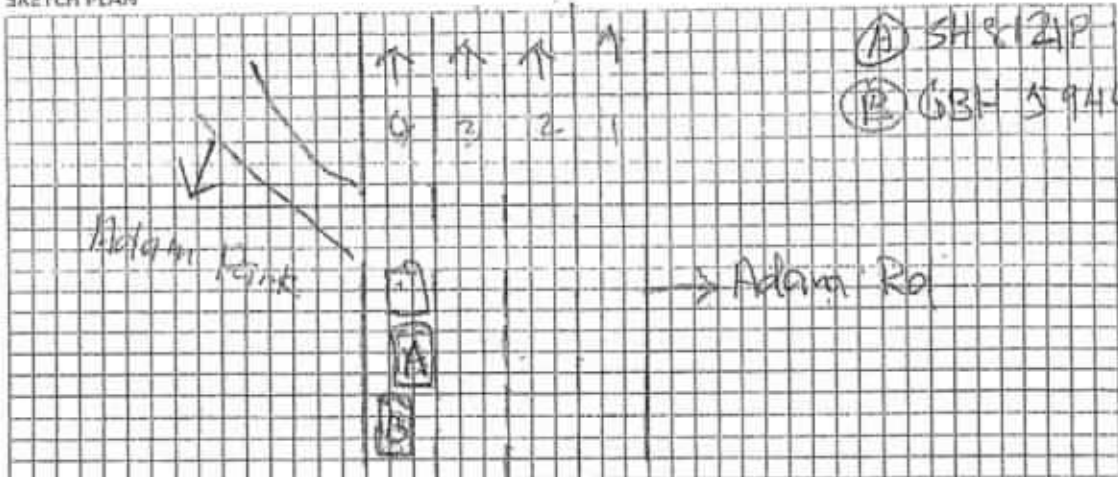
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH5944C
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	AHMAD RIDZUAN BIN MOHAMAD
NRIC/Passport Number	G2312148X
Contact Number	63583219
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/4/2019 at about 1015 hrs, I vehicle A was driving up taxi along adam road toward Morrison Rd while I was on the extreme left-lane and the front car suddenly jam the brake and stop. I also brake and stop. Vehicle B came from behind. Collided onto vehicle A rear position. No one was injured at that time.

DECLARATION

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

COMFORT TRANSPORTATION PTE

CG REG-1
Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

LAWMC Sketch2Uniform V1

Jackson Heng
CFO

C90

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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. 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.

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

Policyholder's Signature
Date & Time:

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

20/4/19
Jackson Heng
C88

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

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

NTUC-CPI
LKK-Kalvin

Date: 22.04.2019

Time: 14:23:44

Page: 1

13 IS

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305288883
 REGN NO : SH 8121P
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ(G2)
 DATE OF REGN : 11.12.2018
 DATE/TIME IN : 20.04.2019 11:15
 ACCIDENT DATE : 20.04.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0104-2282-G	REAR BUMPER	1	459.40	20.00	367.52	-	Pls
0002	04-01-0104-2533-G	REAR BUMPER CENTRE-BLACK	1	322.30	20.00	257.84	-	on
0003	04-01-0104-2544-G	REAR BUMPER TOW COVER	1	5.40	20.00	4.32	X	m
0004	04-01-0104-2288-G	REAR BUMPER REINFORCEMENT	1	294.80	20.00	235.84	X	su
0005	04-01-0104-2545-G	R/BUMPER LWR CTR MOULDING	1	451.30	20.00	361.04	X	su
0006	04-01-0104-3819-G	REAR BUMPER STAY LH	1	138.10	20.00	110.48	X	su
0007	04-01-0104-2531-G	REAR BUMPER SIDE BRKT LH	1	33.10	20.00	26.48	X	su
0008	04-01-0104-0851-G	REAR BUMPER REFLECTOR LH	1	31.90	20.00	25.52	X	su
0009	04-01-0104-2256-G	TAILGATE ASSY	1	2,480.40	20.00	1,984.32	-	Pls
0010	04-01-0104-2270-G	TAILGATE EMBLEM-HYBRID	1	35.90	20.00	28.72	-	me
0011	04-01-0104-2271-G	TAILGATE EMBLEM-IONIQ	1	22.70	20.00	18.16	-	me
0012	04-01-0104-2395-G	TAILLAMP LH	1	870.40	20.00	696.32	X	m
0013	04-01-0104-2397-G	TAILGATE LAMP LH	1	794.40	20.00	635.52	-	on

NTUC - CP/P

13 TS

COMPANY : THIRD PARTY'S CLAIMS (CAS)
 CUSTOMER: 7010045
 ADDRESS : COMFORT TRANSPORTATION PTE LTD
 383 SIN MING DRIVE
 SINGAPORE SINGAPORE 575717
 65508755

LKC kalvin

JOB NO : 305288883
 REGN NO : SH 8121P
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ(G2)
 DATE OF REGN : 11.12.2018
 DATE/TIME IN : 20.04.2019 11:15
 ACCIDENT DATE : 20.04.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0014 09-01-9999-0068-A	REVERSE SENSOR	1	135.70	10.00	122.13	— shd
0015 04-01-0104-1150-A	REAR BUMPER MAT	1	50.00	1.00-	50.00	X m
0016 28-01-0103-0005-A	TAILGATE COMFORTDELGRO	1	15.00	10.00	13.50	— m
0017 28-01-0103-0006-A	TAILGATE 65521111	1	15.00	10.00	13.50	— m
0018 04-01-0104-2258-G	TAIL GATE GLASS	1	607.20	20.00	485.76	X sm
0019 04-01-0104-2257-G	TAIL GATE BLACK GLASS	1	384.90	20.00	307.92	X sk
0020 05-01-0199-0032-A	WINDSCREEN AHESIVE-310MLC	2	92.00	10.00	82.80	X m

SUB-TOTAL : 5,827.69

JOB NATURE

0000 PB PANEL BEATING
 0001 SP SPRAYPAINT CHARGE

~~560.00~~ 400~~600.00~~ 400

NTUC-CP/P)
LKK - kalvin

IS

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305288883
REGN NO : SH 8121P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G2)
DATE OF REGN : 11.12.2018
DATE/TIME IN : 20.04.2019 11:15
ACCIDENT DATE : 20.04.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0002 20-00 TUFF COAT ON AFFECTED PARTS.
0003 L R/I TAILGATE GLASSes
0004 L R/I REVERSE SENSOR

~~60.00~~ 20
~~200.00~~ 100
~~120.00~~ 30

SUB-TOTAL : 1,540.00

TOTAL : 7,367.69

Lim

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

Kalvin LKK

22/4/19 1505h
3 by,

PIP
Betac Pict photo



COMFORTDELGRO ENGINEERING

Our Job Ref No : 305288883

Date : 25/04/19

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

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SH 8121P

Date of Accident : 20-Apr-19

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

1. The repair job shall bill to: NTUC --- GBH5944C

2. The finalized amount shall be:

(a) Spare Parts after List discount \$3,441.21

(b) Labour Charges \$950.00

Total for Part-By-Part Repair Cost \$4,391.21

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20%

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 : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 26/4/19

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		NO		
3. Survey Fees	*****			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

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 SINGAPORE SINGAPORE 575717
 65508755

JOB NO : 305288883
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 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ(G2)
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QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

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0005 04-01-0104-2271-G	TAILGATE EMBLEM-IONIQ	1	22.70	20.00	18.16
0006 04-01-0104-2397-G	TAILGATE LAMP LH	1	794.40	20.00	635.52
0007 09-01-9999-0068-A	REVERSE SENSOR	1	135.70	10.00	122.13
0008 28-01-0103-0005-A	TAILGATE COMFORTDELGRO	1	15.00	10.00	13.50
0009 28-01-0103-0006-A	TAILGATE 65521111	1	15.00	10.00	13.50

SUB-TOTAL : 3,441.21

JOB NATURE

0000 PB	PANEL BEATING	400.00
0001 SP	SPRAYPAINT CHARGE	400.00

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305288883
REGN NO : SH 8121P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G2)
DATE OF REGN : 11.12.2018
DATE/TIME IN : 20.04.2019 11:15
ACCIDENT DATE : 20.04.2019

JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0002 20-00	TUFF COAT ON AFFECTED PARTS.	20.00				
0003 L	R/I TAILGATE GLASSes	100.00				
0004 L	R/I REVERSE SENSOR	30.00				
SUB-TOTAL :						950.00
TOTAL :						4,391.21


MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :



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/INC19007259/K1td3q2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 15-05-2019



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBH 5944C	Veh. Inspected	SH 8121P
Policy No.	5102368726	Coverage (\$)	0.00
Claim No.	MT/1041824-001	Excess (\$)	0.00
Assign From		Assign Date	22/04/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	KMHC851CVKU122069	Colour	BLUE
Odometer	29719	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	MICHELIN	7 mm
L/H Front Tyre	195/65 R15	MICHELIN	7 mm
R/H Rear Tyre	195/65 R15	MICHELIN	7 mm
L/H Rear Tyre	195/65 R15	MICHELIN	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	20/04/2019	Inspection Date	22/04/2019
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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 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. SH 8121P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BUMPER	DEFORMED	459.40	459.40
1	REAR BUMPER CENTRE -BLACK	CRACKED	322.30	322.30
1	REAR BUMPER TOW COVER	SERVICEABLE	5.40	-
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	294.80	-
1	R/ BUMPER LWR CTR MOULDING	SERVICEABLE	451.30	-
1	REAR BUMPER STAY LH	SERVICEABLE	138.10	-
1	REAR BUMPER SIDE BRKT LH	SERVICEABLE	33.10	-
1	REAR BUMPER REFLECTOR LH	SERVICEABLE	31.90	-
1	TAILGATE ASSY	DENTED	2,480.40	2,480.40
1	TAILGATE EMBLEM -HYBRID	NECESSARY	35.90	35.90
1	TAILGATE EMBLEM -IONIQ	NECESSARY	22.70	22.70
1	TAILLAMP LH	SERVICEABLE	870.40	-
1	TAILGATE LAMP LH	CRACKED	794.40	794.40
1	TAIL GATE GLASS	SERVICEABLE	607.20	-
1	TAIL GATE BLACK GLASS	SERVICEABLE	384.90	-
	LESS 20% DISCOUNT		-1,386.44	-823.02
			5,545.76	3,292.08
<u>NETT ITEMS</u>				
1	REVERSE SENSOR (N)	SHORTED	135.70	135.70
1	TAILGATE COMFORTDELGRO (N)	NECESSARY	15.00	15.00
1	TAILGATE 65521111 (N)	NECESSARY	15.00	15.00
2	WINDSCREEN AHESIVE -310MLC (N)	NOT NECESSARY	92.00	-
	LESS 10% DISCOUNT		-25.77	-16.57
			231.93	149.13
<u>SPECIAL NETT ITEMS</u>				
1	REAR BUMPER MAT (SN)	NOT NECESSARY	50.00	-
			50.00	-
<u>LABOUR</u>				
	PANEL BEATING.		560.00	400.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	SPRAYPAINT CHARGE.		600.00	400.00
	TUFF COAT ON AFFECTED PARTS.		60.00	20.00
	R/I TAILGATE GLASSES .		200.00	100.00
	R/I REVERSE SENSOR .		120.00	30.00
			1,540.00	950.00
GRAND TOTAL			7,367.69	4,391.21
RECOMMENDED COST OF REPAIRS (CONFIRMED)				4,391.21

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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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