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a Inspersive No. at Workshop m/s Colour Sp.Readi Insured: S1S 2664D Policy No. 5095035078-01 (28/10/18-27/10/10) No. Claims No. MT /1042160-002 Gen. Cor Sum Insuad: Excess: Steering: (Client's Record) Make of Wh. (Policy Condition) Remark: The veh had commenced Its (epair at the time of inspection. (Policy Condition) Remark: The veh had commenced Its (epair at the time of inspection. (DAC Accident Rport: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No Lum Suno: 4 3 Val.: Yes or No Survey CA 1 REV 1 REP. 1 24 HRS Date: Person Contacted: The Date 1 Time Action / Instruction SHD 31342-003/1007/1005/390/ Kl 26 S1526640-× 2/5/19 Characterists Colour Sp.Readi Eng/No: Steering: Ren. Cor Steering: Brake: N/S 0/S BS / DU Toyo Eront R/Bat. UBat. Vehicle: IN LOUT The Date 1 Time Action / Instruction SHD 31342-003/1007/1005/390/ Kl 26 S1526640-× 2/5/19 Colour Steering: Consistent?: Yes or No Consistent?: Yes or No Done - Time Action / Instruction SHD 31342-003/1007/1005/390/ Kl 26 S1526640-× 2/5/19 Colour STEERING: STEERING STEERI	Blue AIC: Insu@15td/NI/NA 524013 T/Radio: Insu@d15td/NI/NA KM HLB4/M64080662 Good/F&1Poor/Burnt order/Jammed/Leaked/Burnt or Order/Jammed/Leaked/Burnt or E: 205/60116 R: EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/ OKO or Parafura
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nashi ita	\$ 550/- HS				

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
1	MT/1042643-001	COMFORT TRANSPORTATION PTE LTD	SHD 6530G	GBD 5668X	27/4/2019
2	MT/1042160-002	COMFORT TRANSPORTATION PTE LTD	SHD 3134L	SLS 2664D	26/4/2019
3	MT/1035653-002	SMRT TAXIS	SHB 5819S	FE 5980R	9/3/2019
4	MT/1042102-002	COMFORT TRANSPORTATION PTE LTD	SH 8788R	SHB 8608P	27/4/2019
5	MT/1041880-002	COMFORT TRANSPORTATION PTE LTD	SH 7218B	YP 251L	25/4/2019
9	MT/1041969-002	COMFORT TRANSPORTATION PTE LTD	SHA 1749S	SKS 3400D	26/4/2019
7	MT/1042207-002	COMFORT TRANSPORTATION PTE LTD	SH 7982C	SFF 9629A	26/4/2019

Hello, NAC_PAYA_UBI_800601

· Change Language

· Change Password

Log Out

My Desktop Notice of Loss **Policy Query**

01

Policy No. Vehicle No.(For Motor) SLS2664D

Date of Accident Certificate Number 26/04/2019 17:27

Search

Policyholder Policyholder Product Cover Type
Name NRIC Product Cover Type
JOSEPH NG S7312398D GPC drivo Certificate Select Policy No. Number 5095035078-

KIAN KOK

S7312398D GPC drivo CLASSIC

Vehicle Insured No. Object Commence Expiry Date

SLS2664D SLS2664D 28/10/2018 27/10/2019

Continue



of Service Advisor

eturned to Service Reception upon collection

COMPONENTAL	. Date T	ime: 29.04.2019 18	:14 Page : 1
Team: ARC Repair TP(CLSO)1	JOB CARD	Sales Order:	JONO: 305291546
DMER	T.	REGN NO.: SHD3134L	MILEAGE
S COMFORT TRANSPORTATION PTE 7010045	LTD	MAKE: HYUNDAI	FUELF
ESS 383 SIN MING DRIVE Singapore SINGAPORE 575717		MODEL I-40	DATE/TIME IN 27.04.2019 10:20
(R) 65508755 (O)	ATUC	YR OF MANU 26.11.2015	TARGET DATE
DUNT CARD NO.	111111	CHASSIS CODE KMHLB41UMGU08	30602 COMPLETION DATE/TIME
Accident Date: 26.04.2019 NATURE: 3P 26.04.2019	JOB DESCRIPTION		
S/NO LABOR CODE	DESC	RIPTION	FRONT
		HEAR.	PROPERTY SIDE
		60	
CKED & PASSED OUT BY:			
SERVICE ADVISOR		CUSTOM	ER'S SIGNATURE
ledgement Slip	* Exit Pass		
No.: SHD3134L LARRY	Vehicle No.:	SHD3134L	

Name of Service Advisor

To be kept by Security Guard

Date

Signature/Date

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the dotails of the accident to speed up the claims process,
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

- 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.
- 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.

ACCI	DEN	TOT		ENT
ACCI	DEN	1 914	4 I E IV	

Date Of Report

27/04/2019 12:13

Date Of Accident

26/04/2019 15:10

Exact Location Of Accident

HAVELOCK RD TWDS PICKERING ST.NEAR MOM BUILDING

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHD3134L

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

140

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 KIM ENG

NRIC No

S7041371Z

Date Of Birth

14/11/1970

Occupation

OUTDOOR

Date Of Driving Pass

12/04/1991

Driving Experience

28 YEARS AND 0 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-97428155

Fax Number

Contact Number

EMail Address

LEE_KIMENG@HOTMAIL.COM

Address

BLK 479 PASIR RIS DRIVE 4 #02-437

Postcode

510479

Was driver an employed of the Insured's Company

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

DRIZZLING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle) involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

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

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

SLS2664D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

WHOLE LEFT SIDE

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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.
- 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.
- The Issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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 ma;
 - (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:
 - 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 PORTS.
CO. REG. NO. 1991/938318

Policyholder's Signature Date & Time:

unt to

Driver Veneture

(If driver is not the policyholder)

Date & Time:

Resorting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SHD A 81341	A + 5HD 3134L
S48 B) 2664	Haveline C
ESCRIBE CIRCUMSTANCES	ON. 26 14/19 @ KIOW I WH H
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	the above location: Wett B from lane 2.
	Cut across to 3 to 4 and lot vest A-
Whate	Eight Res Side. at the point of
	accobant vert A NO PAK.
200	

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

Oriver's Lignature (If driver is not the policyholder)

Date & Time:

COMFORT TRANSPORTATION #15 L C

Policyholder's Signature

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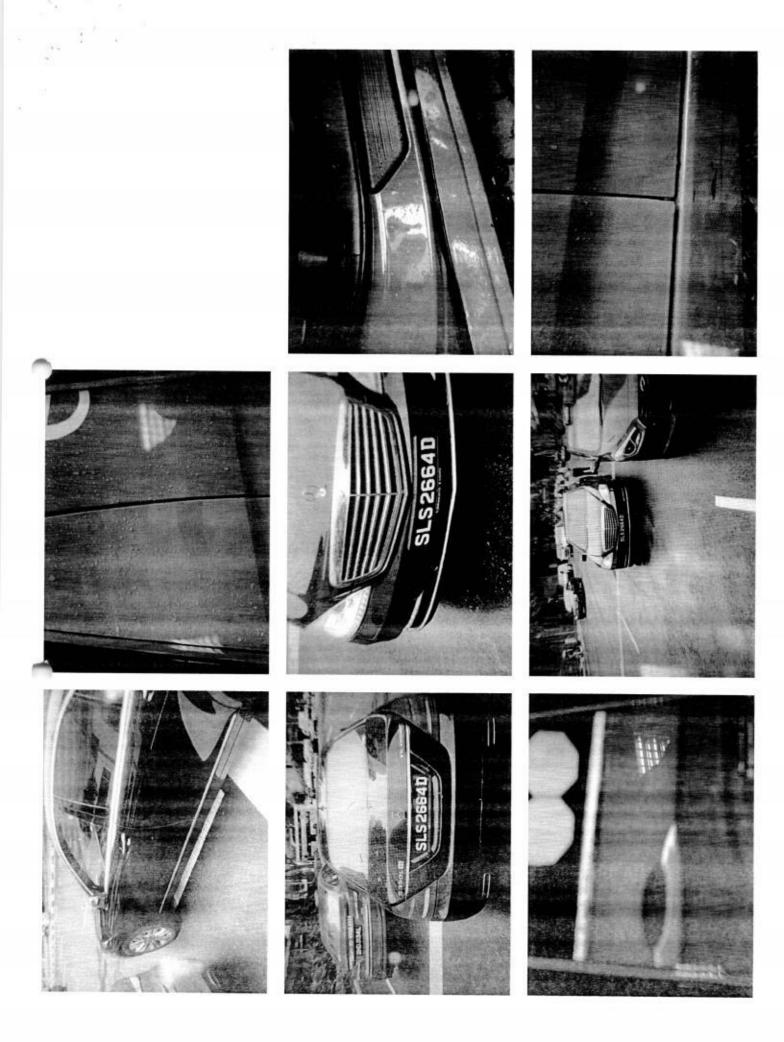
Date & Time:

Name:

Reporting Centre Personnel's Signature

NRIC/FIN No.:





COMFORTDELGRO ENGINEERING PTE LTD REPAIR ESTIMATE*

VEHICLE NO: SHD 3134L

Calva . L/Sun

DATE 29/4/2019 11:21

Larry NTUC

MAKE

· HVIINDAL SONATA

Rear Door Tel No. Sticker (RH) Front Door Coloured Comfort Logo (RH) Front Door Coloured Comfort Logo (RH) Front Power (RH) X repr Par Im (RH) X repr Panel Beating Spray Painting Charge Tuff Kote TOTAL LABOUR ESTIMATE TOTAL Call (Class) Second	Rear Door Tel No. Sticker (RH) Front Door Coloured Comfort Logo (RH) S 10.00 S 85.00 Labour Charge Panel Beating Spray Painting Charge Total Labour S 50.00 TOTAL LABOUR ESTIMATE TOTAL S 935.00 Ca lon (Cllus) Ca lon (Cllus)	DEL	: HYUNDAI SONATA		Lavy	(0)	
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Calr (Class) 1 30/4/19 11168 2 hr. Us LKK AND Cersultants and money are nonly to resurvey before after any animal and many and resurvey. Parts price are nonly and resurvey. Parts price are nonly and resurvey.	Assubject to final approval from Insurance Company		ESTIMATE TOTAL			\$ 935.00	
1 30/4/19 11108 2 An. US LKK Auto Consultants in the moting the Repairer of the la joining: "To display the legal narrey before after some painting "Paris prices and surpose of pring resurvey	Assubject to final approval from Insurance Company						
2 Pars prices and survey.	As Subject to final approval from Insurance Company		Kahr (Chis				
LKK Auto Consultants i Tidos notify Ine Repairer of the following: * To display damaged parity of any resurvey * Paris prices are surfaced.	Supplementary item(s) must be resurveyed and resurveyed and Acknowledged by Reserve		11 3-111				
LKK Auto Consultants) Those notify the Repairer of the to low into: "To resurvey before latter spread uniting "To display damaged man(s) during resurvey "Parts prices are surprised."	As Subject to final approval from Insurance Company		30/4/19 11108	. 1			
"To resurvey before a the factioning: "To display damaged man(s) during resurvey Paris prices are subject.	Assubject to final approval from Insurance Company		26		the Repair	TOP none	L
Paris prices and survivory	Asknowledged by Recoil		2 63.	- 1	* To resurvey before/allier	ving:	
The state of the s	Asknowledged by Recoil		Ws.	- 1	* Park da laged purify in	Chinting	
No Wears Strivey is on a TVI from Design	Asknowledged by Recoil		11		* Third party survey is on a now	Mation	П
11/VIa 1Challe 10K (1)	Acknowledged by Rose		After Ryon pll	- 1	Supplementary denvel re-	wed having property of the control o	И
The state of the s					is subject to final approval from	nesurmyed and Insurance Come	I
	PORTOR:			1 s		- with pany	
P 2 7 (0) (1)	Date:						
							1
			1		1		

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our	Job Ref I	No . 305	291546			ENGINEERING
Date		VIII. 10	ay. 2019		Comfor	DelGro Engineering Pte Ltd
FINA	ALIZATIO	ON FORM			59 Loya	ang Drive Singapore 508969 46 8156
То	4	1	LKK		Fax:	
Attn	4	H	KALVIN			
Vehi	icle Reg N	No. : SHD3	134L	Dat	e of Accident:	26. Apr. 2019
The	survey a	nd estimates of t	he repairs of the a		100	41 200
1.		pair job shall bill		NTUC		SLS2664D
2.	The fin	alized amount si	hall be:			
2007.00		Spare Parts afte				
		Labour Charges				
	7000		y-Part Repair Co	et		
		TOTAL TOT T AIR D	y-r art Kepair Co	50		
		Lumpsum Repai Total for Lumpsu	ım repair cost afte	er Less:		
	į.	Final Lumpsum	Repair cost			\$550.00
3.	Estima	ted normal perio	d for repairs:	2w	orking days.	
4.	We sha	all treat the abo 7 working days	ve amount as Co	rrect and Conf	irmed if there is	no reply from you
		3 8				
5.	Thank	you for your assi	stance.		e confirm the est	limates and
				tin	alized amount	
						И
	Signatu	100000	2.5	Sig	gnature :	//
	Name	:	arry Ng	Na	ime :	Kahi
	Tel	6214 8316	6	Da	ite :	2/5/19
	Fax	: 6546 8156		_		
For (Official U	se Only				
				Document		
	lt	em	Amount	Attached Yes or No	Confirm By (Signature)	Remarks
1. R	ental Rat	e P/Day		YES		
		come Paid				
	urvey Fe					
4. L	TA Searc	h Fee				
o. M	ledical Fe f driver, if	es (on behalf applicable)				
	verrun					
Rema	arks:					



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



NTL	IC INCOME INSUF	RANCE CO-OPERATIVE LTD	Ref:	NS/INC1900764	13/K1sd3s2
		ND UNION HOUSESINGAPORE	Date:	07-05-2019 INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	SLS 2664D	Veh. I	nspected	SHD 3134L
	Policy No.	5095035078-01	Cover	age (\$)	0.00
	Claim No.	MT/1042160-002	Exces	s (\$)	0.00
	Assign From		Assig	n Date	30/04/2019
2.		Vehicle Parti	culars &	& Condition	
	Make & Model	HYUNDAI 140	c.c		1685
	Engine No.	HIDDEN	Year o	of Reg.	2015
	Chassis No.	KMHLB41UMGU080602	Colou	r	BLUE
	Odometer	524013	Steeri	ng	IN ORDER
	Brakes	IN ORDER	Modif	cation	STANDARD ALLOY RIM
	General	FAIR			
3.		Conditi	ons of	Tyres	
		Size	Make		Balance
	R/H Front Tyre	205/60R16	DURAT	URN	7 mm
	L/H Front Tyre	205/60R16	DURAT	TURN	7 mm
	R/H Rear Tyre	205/60R16	DURAT	URN	7 mm
	L/H Rear Tyre	205/60R16	DURAT	URN	7 mm
4.		Descripti	on of Da	amages	
	THE VEHICLE SU	STAINED DAMAGES AT THE O/S ETAILS.	BODY.		
5.		Genera	I Inform	ation	
	Accident Date	26/04/2019	Inspec	tion Date	30/04/2019
	Survey held at	COMFORTDELGRO ENGINEER	RING PT	E LTD	
		59 LOYANG DRIVE SINGAPORE 508969			
5a.			emarks		
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT P	REJUDICE" BASIS. NOT AUTHORISED	REPAIRS.
5b.		Estimate	Days of	Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:		2 Working Days	



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315





ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 3134L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR DOOR TEL NO. STICKER (RH) (N)	NECESSARY	10.00	10.00
1	FRONT DOOR COLOURED COMFORT LOGO (RH) (N)	NECESSARY	75.00	75.00
1	FRONT DOOR (RH) (NPA) (N)	TO REPAIR SEE LABOUR	1-	9
1	REAR DOOR (RH) (NPA) (N)	TO REPAIR SEE LABOUR	-	3
	LESS 10% DISCOUNT		-	-8.50
			85.00	76.50
	LABOUR			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF FRONT DOOR (RH) AND REAR DOOR (RH).		200.00	200.00
	SPRAY PAINTING CHARGE.		600.00	400.00
	TUFF KOTE.	NOT NECESSARY	50.00	
			850.00	600.00
	GRAND TOTAL		935.00	676.50

RECOMMENDED COST OF LUMP SUM REPAIRS	550.00
(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)	

Report Ref No. NS/INC19007643/K1sd3s2

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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