3 mega Kolvin

REF NS/INC19007845/Klad302

Type: M.Car / M.Cycle / Bus / Van / Lorry / Table Prime Mover / Truck / Trailler or Truck / Trailler or Make: Hunt Zorig a.c 1580 El Workshop m/s Sp.Reading 32504 T/Radio: Ins@ed/Std/NI/NA S	ASS	RIGNMENT
Type: N.C.est M.C.gola / Bus / Van / Lerry / Top / Frime Mover! Truck / Treller or Mark Truck / Treller or Truck / Treller or Mark Truck / Treller or Mark Truck / Treller or Truck / Treller o	From Date:	Vertille SHC2767Y "12-2-8
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TP Claims against NTUC Income: Follow-Through Survey

Date: 06/05/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No. Income Vehicle No.	Income Vehicle No.
1	MT/1041958-002	COMFORT TRANSPORTATION PTE LTD	SHC 8955G	SLH 2238J
2	MT/1042268-002	COMFORT TRANSPORTATION PTE LTD	SHC 2230D	XD 7779K
	MT/1042493-002	COMFORT TRANSPORTATION PTE LTD	SHD 3252D	SBP 3006G
4	MT/1042595-002	COMFORT TRANSPORTATION PTE LTD	SHC 2767Y	GW 6100B
. 2	MT/1020313-003	SMRT TAXIS PTE LTD	SHC 4756R	SHC 6809J

ASK M&E PTE. 200815981K LTD.

5069836241-

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Continue

GCV

Third Party, GW6100B GW6100B 01/03/2019 29/02/2020 Fire & Theft

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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.

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

	ACCIDENT STATEMENT
Date Of Report	29/04/2019 15:43
Date Of Accident	29/04/2019 14:10
Exact Location Of Accident	HOUGANG AVE 3 BLK 15-18 CARPARK
Country/State of Loss	SINGAPORE

SINGAPORE
DETAILS OF OWN VEHICLE
SHC2767Y
COMFORT TRANSPORTATION PTE LTD
199303821R
FLEETSAFETY@CDGTAXI.COM.SG
OFFICE-65508768
HYUNDAI
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?

y 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
THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage Fleet Policy

YES

Policy Number

D-18088936MFSH

Cover Note Number

Driver

Name of Driver PNG SOON PENG

 NRIC No
 \$1344930I

 Date Of Birth
 29/12/1958

 Occupation
 OUTDOOR

 Date Of Driving Pass
 25/01/1979

Driving Experience 40 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96654838

Fax Number Contact Number

EMail Address PNGSOONPENG2912@YAHOO.COM

Address

BLK 601 JURONG WEST STREET 62 #07-173

Postcode

640601

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

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? 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 / Type Of Accident : 3P REVERSE

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

GW6100B

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

KAMSANI BIN MOHAMADI

NRIC/Passport Number

Contact Number

83447068

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

REAR

No. Of Passenger (Including Driver)

Page 2 of 16

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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:
 - 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: 29.04.2019@1530hrs

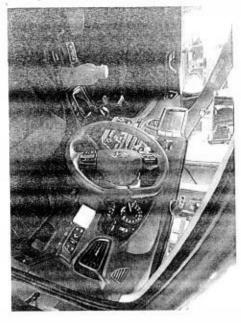
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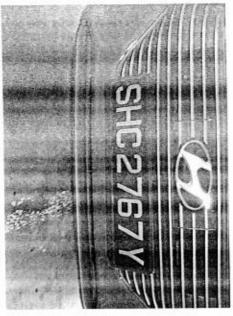
Reporting Centre Personnel's Signature

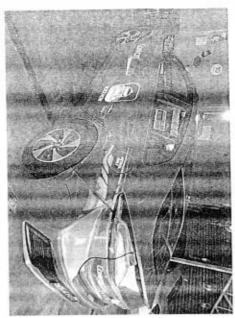
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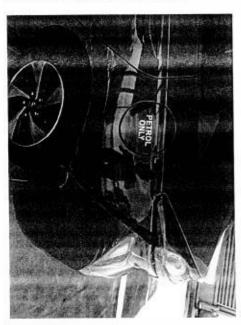
NRIC/FIN No.: June

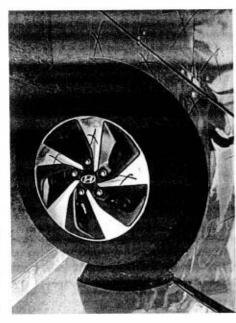
olicyholder's Signature Date & Time:	Driver's Signature (if driver is not the policyholder)	Reporting Centre Personnel's Signature Name: @1530hrs ^{NRIC/FIN No.:} June
DECLARATION We declare the foregoing particula FORT TRANSPORTATION PTE I CO. REG. NO. 199303821R	rs are true in every respect.	L.
TO ADAMO:		
Veli(D) WIT Namsalii	Bill Moriamaul Fir. 00	-1-1000
No injury in this accide	ent . Bin Mohamadi HP: 83	44 7068
		to support my dame.
	and photos at scene	
As it took place so fas	st. I could not take eva	sive action to prevent the collision.
As I was travelling stra and hit onto my vehice		GW 6100B reversed his vehicle
		OW 6100P reversed his vahials
carpark with no passe		
escribe circumstances of On 29 04 2019 @ 141		long Hougang Ave 3 Blk 15- 18
Along Hougang A		Carpark.
< IBK !!		
Jaka I		
		D-0440100B
1		A- SHC 2767Y B- GW 6100B





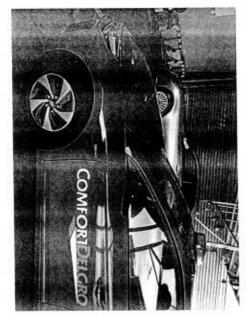




















COMFORTDELGRO ENGINEERING PTE-LTD REPAIR ESTIMATE*

VEHICLE NO: SHC 2767Y

MAKE

DATE 29/4/2019 17:05

MM-74-

MODEL Qty	: HYUNDAI IONIQ Parts Description/ Labour	Type	Unit Price		Amount	1
Qi)	n n n	1712		\$	459.40	1
	Rear Bumper Side Bracket (LH)			S	33.10	
	Rear Fender (LH) X M			S	1,768.30	
	Rear Fender Inner Lining (LH)			S	73.60	
	Page Windsgreen Moulding			s	28.20	
	Rear Windscreen Moulding Rear Wheel Hub Cap, LH Rear Worn (UI) XIPAL SUBTOTAL			S	346.00	
	Real wheel Hub Cap, Ell			NA.	2,10,00	
	Ren born (UI) X/Cpar SUB TOTAL			s	2,708.60	1
	LESS 20%	1		S	541.72	
	DISCOUNTED TOTAL	1		S	2,166.88	1
	DISCOUNTED TOTAL			.5	2,100.00	
	Rear Windscreen Sealant			s	46.00	Nett
	Rear Door Comfortdelgro & Apps Sticker (LH)	ner	10%	5		Nett 72
	Real Boot Connortatigio & Apps Steker (Err)	3/20	-1-1		00.00	11000
				s	126.00	
	Remove/Refix Rear Windscreen Glass Remove/Refix Reverse Sensor Rear Wheel Alignment TOTAL LABOUR	resurvey before lisplay damage in prices are su ind party survey i liegal modificant sementary item yeject to final ap	Iltants hence notify The following: The following: The following: The following resurvey The following resurvey The following resurvey The following resurvey The following resurveyed following resurveyed following resurveyed for the following resur	\$ \$ \$ \$ \$ \$ \$ \$ \$		× 50 × 50 × 50 ×
	Kahi May Solk/19 11ksh. 3 Pys PIP Rhae Pahl This is an initial estimate based on a visual inspection of the state of t	-			4,602.88	

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

COMFORTDELGRO ENGINEERING

 VEHICLE NO. : SHC2767Y
 TYPE OF CASE : NTUC

 JOBCARD NO. 305291498
 SURVEY BY : L;KK-KALVIN

 ACC.DATE 29.04.19
 DATE : ...

DESCRIPTION	DESCRIPTION QTY ESTIMATE		MATE	REMARKS		
REAR BUMPER MAT	1	N	\$50.00	NET		
FUEL TANK 'PETROL ONLY' STICKER	1	ne	\$15.00	NET	-16%	17.50
CHECK ITEMS	-					
			NS-20202			
				-		
2007/00/00						
	TOTAL:		\$65.00		JUMAN	Ě



. Date/Time: 29.04.2019 16:13 Page: 1 JOB CARD JC NO.: 305291498 Sales Order: ARC Repair TP(CLSO)1 leam: MILEAGE REGN NO. SHC2767Y COMFORT TRANSPORTATION PTE LTD FUEL MAKE: HYUNDAI 7010045 E.....1/2... MER NO 383 SIN MING DRIVE DATE/TIME IN MODEL 29.04.2019 14:50 IONIQ(G2) Singapore SINGAPORE 575717 YR OF MANU 11.12.2018 65508755 CHASSIS CODE KMHC851CVKU122151 COMPLETION DATE/TIME INTICARD NO. JOB DESCRIPTION Accident Date: 29.04.2019 NATURE: 3P 29.04.19 DESCRIPTION LABOR CODE 3/NO

ED & PASSED OUT BY: CUSTOMER'S SIGNATURE SERVICE ADVISOR Exit Pass

agement Slip

SHC2767Y

JU NTUC LKK

Vehicle No.:

SHC2767Y

Service Advisor Signature/Date

Name of Service Advisor

Date

rned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

Date: 03.05.2019 Time: 17:32:06

REPAIR ESTIMATE

Page: 1

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO REGN NO MILEAGE : 305291498 : SHC2767Y

MAKE

: 0000000000

MODEL

: HYUNDAI

DATE OF REGN

: IONIQ(G2) : 11.12.2018

DATE/TIME IN

: 29.04.2019 14:50

ACCIDENT DATE : 29.04.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0104-2282-G IONIQVC COVER-RR BUMPER# 1 L 459.40 20.00 367.52

0002 03-01-0104-2061-G IONIQV1/3 CAP ASSY-WHEEL 1 346.00 20.00 276.80

0003 28-01-0103-2013-A I40V3 APP LOGO REAR DOOR 1 N 80.00 10.00 72.00

1 N 15.00 10.00 13.50 0004 28-01-0302-2017-A PRIVC FUEL TANK LID (PETR

50.00 1.00- 50.00 0005 04-01-0104-1150-A IONIQVC PROTECTOR MAT 1

SUB-TOTAL : 779.82

JOB NATURE

PANEL BEATING 0000 PB

400.00

0001 SP

SPRAYPAINT CHARGE

600.00

0002 20-204

REMOVE/REFIX UPHOLSTERY ASST REPAIR

50.00

0003 L

REMOVE/REFIX REVERSE SENSOR

30.00

SUB-TOTAL : 1,080.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 03.05.2019 Time: 17:32:06

Page: 2

REPAIR ESTIMATE

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO : 305291498
REGN NO : SHC2767Y
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G2)
DATE OF REGN : 11.12.2018
DATE/TIME IN : 29.04.2019 14:50
ACCIDENT DATE : 29.04.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,859.82

AUTHORISED: YES/NO

MVA NAME & SIGNATURE

DATE:

DATE:

SURVEYOR NAME & SIGNATURE

COMFORTDELGRO ENGINEERING

Dur J	lob Ref	No 30529	1498		LINGINEERING		
)ate		: 03/05	/19			59 Loya	tDelGro Engineering Pte Ltd ang Drive Singapore 508969 46 8156
INA	LIZATI	ON FORM				Pax. 00	40 0 130
0		LK	K			Fax:	
Attn	_		LVIN	3			
		: SHC276			Date	of Accident :	29.04.19
The s	survey	and estimates of the	repairs of the a	above-mer	ntioned	vehicle are as	follows:-
١.		repair job shall bill to:	(4)	NTUC			GW6100B
						###	
2.	20074	inalized amount sha					2000
	(a)	Spare Parts after L	ist discount				\$779.82
	(b)	Labour Charges			###		\$1,080.00
		Total for Part-By-	Part Repair Co	ost			\$1,859.82
	V927-1811		440000000000000000000000000000000000000			N	
	(c.)	Lumpsum Repair (Total for Lumpsum		or Loca	20%		
		Final Lumpsum F		er Less.	2076		
	Wes	nated normal period shall treat the above in 7 working days		100		king days med if there i	is no reply from you
3. 4. 5.	We s	shall treat the above in 7 working days	amount as C	100	d Confi	0.000.000 (C.000.000.000.000.000.000.000.000.000.0	
	We s	shall treat the above	amount as C	100	d Confli	med if there i	
4.	We s	shall treat the above in 7 working days	amount as C	100	d Confli	med if there i	
4.	We s with	shall treat the above in 7 working days nk you for your assis	amount as C	100	d Confli We fina	med if there i confirm the en lized amount	
4.	We s with	shall treat the above in 7 working days nk you for your assis	amount as C	100	d Confli We fina	confirm the endized amount	
4.	We swith Than	shall treat the above in 7 working days nk you for your assis nature :	amount as C	100	We fina	confirm the endized amount	
4.	We swith Than Sign	shall treat the above in 7 working days nk you for your assis nature : ne : JUMANI : 6214 8315	amount as C	100	We fina Sig Na	confirm the endized amount	
4.	We swith Than Sign Nam Tel Fax	shall treat the above in 7 working days nk you for your assis nature: 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	amount as C	100	We fina Sig Na	confirm the endized amount	
4.	We swith Than Sign Nam Tel Fax	shall treat the above in 7 working days nk you for your assis nature : ne : JUMANI : 6214 8315	amount as C	orrect and	We fina Sig Na Da	confirm the endized amount	
4.	We swith Than Sign Nam Tel Fax	shall treat the above in 7 working days nk you for your assis nature: 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	amount as C	Doc Attr	We fina Sig Na	confirm the endized amount	
4. 5.	We swith Than Sign Nam Tel Fax Officia	shall treat the above in 7 working days nk you for your assis nature : in e : JUMANI in 65468156 al Use Only	amount as C	Doc Atte	We fina Sig Nai Da'	confirm the edulized amount nature: me : te :	Kalnh 6/5/11
4. 5.	We swith Than Sign Nam Tel Fax Officia	shall treat the above in 7 working days nk you for your assis nature: ine: JUMANI in 6214 8315 in 65468156 at Use Only Item	amount as C	Doc Atte	We fina Sig Nai Da	confirm the edulized amount nature: me : te :	Kalnh 6/5/11
4. 5.	We swith Than Sign Nam Tel Fax Officia	shall treat the above in 7 working days nk you for your assis nature : ine : JUMANI in 6214 8315 in 65468156 at Use Only Item Rate P/Day Income Paid	amount as C	Doc Atte	We fina Sig Nai Da' ument ached or No	confirm the edulized amount nature: me : te :	Kalnh 6/5/11
1. 1. 3. 4.	We swith Than Sign Nam Tel Fax Officia Rental Loss of Survey LTA Se	shall treat the above in 7 working days nk you for your assis nature: 1. 6214 8315 1. 65468156 1. Use Only Item Rate P/Day Income Paid Fees earch Fee	amount as C	Doc Atte	We fina Sig Nai Da' ument ached or No	confirm the edulized amount nature: me : te :	Kalnh 6/5/11
4. 5.	We swith Than Sign Nam Tel Fax Officia Rental Loss of Survey LTA Se	shall treat the above in 7 working days nk you for your assis nature: 1. 6214 8315 1. 65468156 1. Use Only Item Rate P/Day Income Paid Fees	amount as C tance.	Doc Atte	We fina Sig Nai Da' ument ached or No	confirm the edulized amount nature: me : te :	Kalnh 6/5/11



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 INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1900764	15/K1qd3n2
73 BF #05-0 1895		D JNION HOUSESINGAPORE	Date:	08-05-2019 INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	GW 6100B	Veh. I	nspected	SHC 2767Y
	Policy No.	5069836241-04	Cover	rage (\$)	0.00
	Claim No.	MT/1042595-002	Exces	ss (\$)	0.00
	Assign From		Assig	n Date	30/04/2019
2.	THE PROPERTY OF	Vehicle Parti	culars	& Condition	
	Make & Model	HYUNDAI IONIQ	c.c		1580
	Engine No.	HIDDEN	Year	of Reg.	2018
	Chassis No.	KMHC851CVKU122151	Colou	ır	BLUE
	Odometer	32504	Steer	ing	IN ORDER
	Brakes	IN ORDER	Modif	ication	STANDARD ALLOY RIM
	General	FAIR			
3.		Condit	ions of	Tyres	
		Size	Make		Balance
	R/H Front Tyre	195/65 R15	MICHE	ELIN	7 mm
	L/H Front Tyre	195/65 R15	MICHE	ELIN	7 mm
	R/H Rear Tyre	195/65 R15	MICHE	ELIN	7 mm
	L/H Rear Tyre	195/65 R15	MICHE	ELIN	7 mm
4.		Descript	SELEPHONOUS PRESCRI	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	MEAN PROPERTY.
	THE VEHICLE SU	STAINED DAMAGES AT THE N/ ETAILS.	S REAR	PORTION.	
5.		Genera	al Inforr	nation	THE WORLD PROPERTY.
	Accident Date	29/04/2019	Inspe	ction Date	30/04/2019
7-	Survey held at	COMFORTDELGRO ENGINEE	RING P	TE LTD	
	.538	59 LOYANG DRIVE SINGAPORE 508969			
5a.	State of the state	AND THE RESIDENCE OF THE PARTY	Remarks		AND THE PERSON
	A)THE INSPECTION B)IN ACCORDAN	ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, \	THOUT VE HAVI	PREJUDICE" BASIS E NOT AUTHORISE	S. ED REPAIRS.
5b.		Estimate	Days o	of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:		3 Working Days	



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



ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 2767Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	сит	459.40	459.40
	REAR BUMPER SIDE BRACKET (LH)	SERVICEABLE	33.10	-
	REAR FENDER (LH)	TO REPAIR SEE LABOUR	1,768.30	-
1	REAR FENDER INNER LINING (LH)	SERVICEABLE	73.60	-
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	28.20	
1	REAR WHEEL HUB CAP, LH	GRAZED	346.00	346.00
1	REAR DOOR (LH) (NPA)	TO REPAIR SEE LABOUR		
	LESS 20% DISCOUNT		-541.72	-161.08
			2,166.88	644.32
	NETT ITEMS			
1	REAR DOOR COMFORTDELGRO & APPS STICKER (LH) (N)	NECESSARY	80.00	80.00
1	FUEL TANK 'PETROL ONLY' STICKER (N)	NECESSARY	15.00	15.00
	LESS 10% DISCOUNT			-9.50
			95.00	85.50
	SPECIAL NETT ITEMS			
-	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	
	REAR BUMPER MAT (SN)	NECESSARY	50.00	50.00
			96.00	50.00
	LABOUR			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR FENDER (LH) AND REAR DOOR (LH).		800.00	400.0
	SPRAY PAINTING CHARGE.		900.00	600.0
	WIRING CHARGE.	NOT NECESSARY	50.00	P
	TUFF KOTE.	NOT NECESSARY	50.00	7
	REMOVE/REFIX CUSHION & UPHOLSTERY REAR.		150.00	50.0
	REMOVE/REFIX REAR WINDSCREEN GLASS.	NOT NECESSARY	120.00	700000000
	REMOVE/REFIX REVERSE SENSOR.		120.00	30.0

Report Ref No. NS/INC19007645/K1qd3n2



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315





Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REAR WHEEL ALIGNMENT.	NOT NECESSARY	120.00	
			2,310.00	1,080.00
	GRAND TOTAL		4,667.88	1,859.82

RECOMMENDED COST OF REPAIRS	1,859.82
(CONFIRMED)	

Report Ref No. NS/INC19007645/K1qd3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

h

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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