

(08/5/11/3)

Surveyor: Kalvin

REF:

NS/INC19010085/Kled372

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

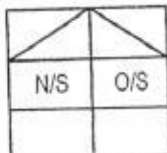
Insured: SGW 6244UPolicy No. 5074695065-03Claims No. MT/1048455-002

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: \_\_\_\_\_

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: SHD 7265R Yr Regn: 27 Nov 2018

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

Truck / Trailer or

Make: Toyota Prius C.C. 1700Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 78560 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JTOKB3F4003077464

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 / Rim or

Tyre Size: F: 195/65R15

R: \_\_\_\_\_

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

TOYO / YOKO or Parvati

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 4/6/19 D.O.I. 6/6/19Survey held at CPHE (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
	SHD 7265R-X
	SGW 6244U-X
12/6/19	Initial P/P \$1249.90 / 2 P/P.
	(\$679.80 Red - 35%)

RECEIVED 13 JUN 2019

Date/Time, File Pass to?

☐ : Preli. Report1) Typist☒ : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 2Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:

\_\_\_\_ \$ + RS. \_\_\_\_ \$

Photos

Others

TOTAL

Report Format:

Lump Sum / I.B.I: (\$ 1,249.90 P/P)

160

eBaoTech

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## Policy Query

Policy No.

Vehicle No.(For Motor)

Date of Accident

Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5074695065-03		RENT MY CAR PTE LTD	201535871N	GFT	Third Party	SGW6244U	SGW6244U	05/10/2018	

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/1048446-002	CITYCAB PTE LTD	SHA 98T	SJU 2238P	7/6/2019	22:15	\$530.00	\$400.00
2	MT/1047235-002	COMFORT TRANSPORTATION PTE LTD	SH 9359P	SHB 8092B	31/5/2019	16:15	\$2,009.70	\$1,566.13
3	MT/1048455-002	COMFORT TRANSPORTATION PTE LTD	SHD 7265R	SGW 6244U	4/6/2019	16:00	\$1,929.70	\$1,249.90

Claim received from LKK Auto

COMFORT DELCRO

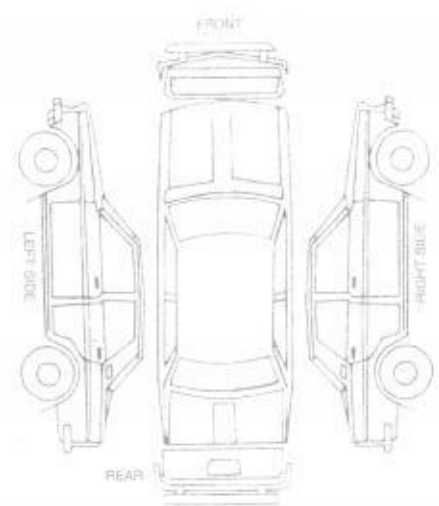
Date/Time: 06.06.2019 15:30 Page : 1

Team:	ARC Repair TP(CLSO)1	JOB CARD	Sales Order:	JC NO:	305301148
CUSTOMER	COMFORT TRANSPORTATION PTE LTD	REGN NO:	SHD7265R	MILEAGE	
CUSTOMER NO:	7010045	MAKE:	TOYOTA	FUEL	E 1/2 F
ADDRESS	383 SIN MING DRIVE	MODEL	PRIUS HYBRID(G4)	DATE/TIME IN	06.06.2019 10:15
	Singapore SINGAPORE 575717	YR OF MANU	27.11.2018	TARGET DATE	
	65508755 (O)	CHASSIS CODE	JTDKB3FU003077464	COMPLETION DATE/TIME:	
SCOUNT CARD NO.					

JOB DESCRIPTION

Accident Date: 04.06.2019  
NATURE: 3P 04.06.2019

S/NO	LABOR CODE	DESCRIPTION
	XTCUC - Rear	
	LEK / Kalmi -	



CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR	CUSTOMER'S SIGNATURE
-----------------	----------------------

Acknowledgement Slip

Exit Pass

Vehicle No.: SHD7265R LARRY

Vehicle No.: SHD7265R

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 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	06/06/2019 13:25
Date Of Accident	04/06/2019 16:00
Exact Location Of Accident	BT BATOK EAST AVE 6
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD7265R
<b>Insured/Policyholder</b>	
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	TOYOTA
Model	PRIUS HYBRID 4G
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	HO KHAI MUN
NRIC No	S1103631G
Date Of Birth	03/01/1955
Occupation	OUTDOOR
Date Of Driving Pass	29/09/1981
Driving Experience	37 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96223571
Fax Number	
Contact Number	
EEmail Address	WEI_LIN_@HOTMAIL.COM

Address	BLK 243 JURONG EAST STREET 24 #04-643
Postcode	600243
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)	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

REFER 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	SGW6244U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MUHAMAD MUSTAQIM BIN MUSTAFA
NRIC/Passport Number	S9230181H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT
No. Of Passenger (Including Driver)	

# 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.

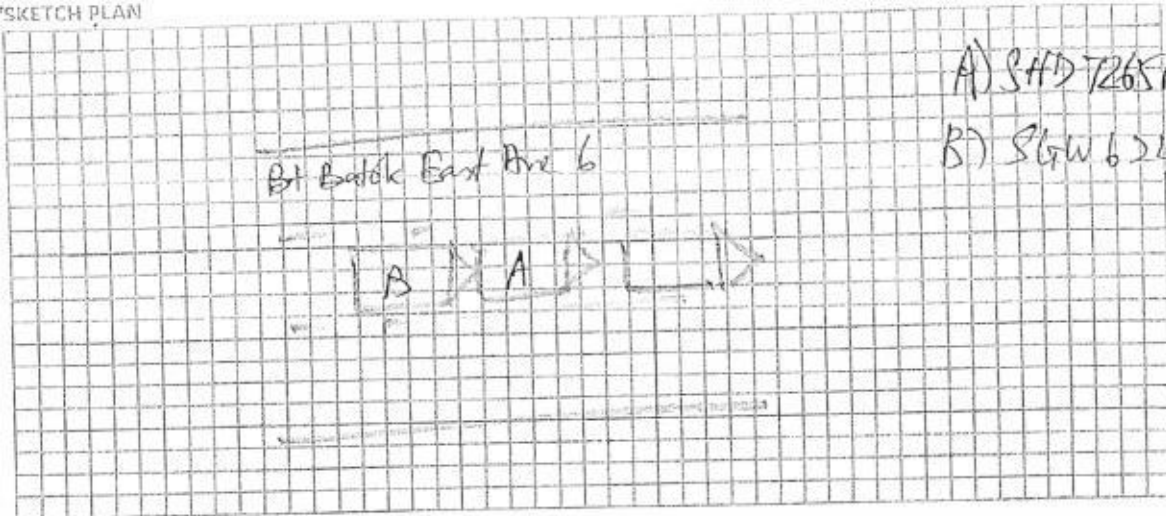
COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 4/6/19 at about 1600hrs while I drive A was travelling very slowly behind other vehicles in front and I stopped because vehicles in front stopped. Veh B collided onto the rear of my vehicle.

DECLARATION

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

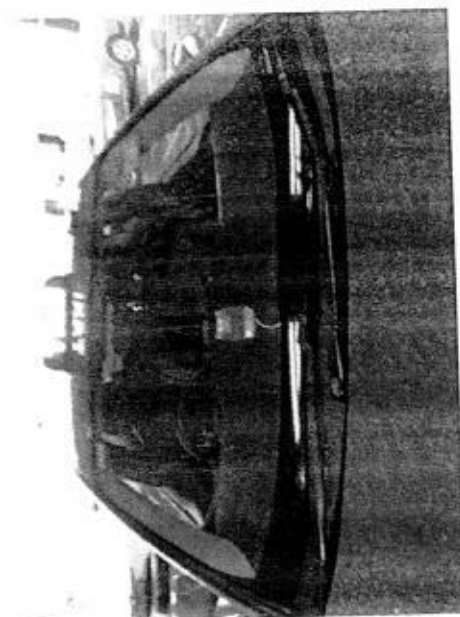
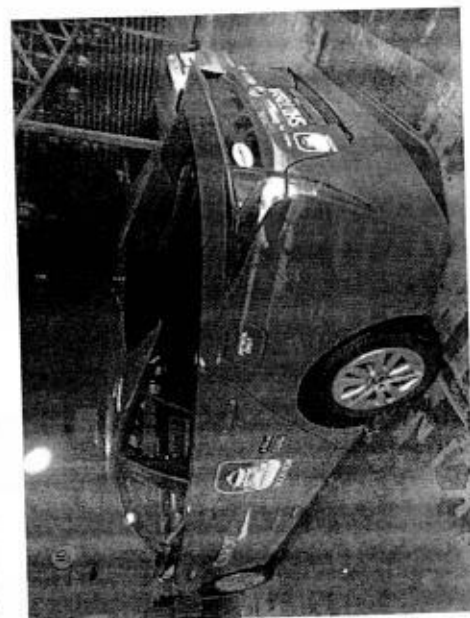
COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

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.:





## REPAIR ESTIMATE

VEHICLE NO: SHD 7265R

MAKE :

MODEL : TOYOTA PRIUS

6/6/2019 10:41

MODEL	: TOYOTA PRIUS		QTY	UNIT PRICE	AMOUNT
	PARTS DESCRIPTION				
	REAR BUMPER				\$ 458.60
	REAR BUMPER RE-INFORCEMENT				\$ 318.80
	REAR BUMPER UNDER COVER				\$ 552.60
	REAR BUMPER CLIPS				\$ 22.00
	SUB TOTAL				\$ 1,352.00
	LESS 25%				\$ 338.00
	DISCOUNTED TOTAL				\$ 1,014.00
	REAR BUMPER REVERSE SENSOR	X			\$ 135.70
	REAR BUMPER RUBBER MAT	/			\$ 50.00
					\$ 185.70
	LABOUR CHARGE				\$ 200
	Panel Beating				\$ 350.00
	Spray Painting Charge				\$ 250.00
	Wiring Charge				\$ 50.00
	Remove/Refix Reverse Sensor				\$ 80.00
	TOTAL LABOUR				\$ 730.00
	ESTIMATE TOTAL				\$ 1,929.70

NETT

NETT

200

200

X 4

30

Larry Ng

Kahar ILK

6/6/19

2 Days

RIP

After Repair & LA

1415 L

I hereby acknowledge that I have received the repaired vehicle from the repairer and I am satisfied with the quality of the work done. I understand that the repairer is not responsible for any damage to the vehicle or its contents while it is in his/her possession. I also understand that the repairer is not responsible for any loss or theft of the vehicle or its contents while it is in his/her possession. I further understand that the repairer is not responsible for any delay in the completion of the repairs.

Accepted by Repaired Party:

Signature:

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 PTE LTD

## REPAIR ESTIMATE

Date: 12.06.2019

Time: 08:18:46

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 : 305301148  
REGN NO : SHD7265R  
MILEAGE : 0000000000  
MAKE : TOYOTA  
MODEL : PRIUS HYBRID(G4)  
DATE OF REGN : 27.11.2018  
DATE/TIME IN : 06.06.2019 10:15  
ACCIDENT DATE : 04.06.2019

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0302-2287-G	PRIG4 GUARD-REAR BUMPER C	1	552.60	25.00	414.45
0002 04-01-0302-2267-G	PRIVC BUMPER PIECE	10	22.00	25.00	16.50
0003 04-01-0302-2282-G	PRIG4 COVER REAR BUMPER	1	458.60	25.00	343.95
0004 04-01-0302-1150-A	PRIG4 BUMPER PROTECTOR MA	1	50.00	10.00	45.00
SUB-TOTAL :					819.90

## JOB NATURE

0000 PB	PANEL BEATING	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	200.00
0002 L	REMOVE/REFIX REVERSE SENSOR	30.00
SUB-TOTAL :		430.00
TOTAL :		1,249.90

AUTHORISED : YES / NO

MVA NAME & SIGNATURE  
DATE :

SURVEYOR NAME & SIGNATURE  
DATE :

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305301148  
Date : 12. Jun. 2019

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

## FINALIZATION FORM

To : LKK  
Attn : KALVIN  
Vehicle Reg No. : SHD7265R

Fax :

Date of Accident: 4. Jun. 2019

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

1. The repair job shall bill to: NTUC SGW6244U
2. The finalized amount shall be:
 

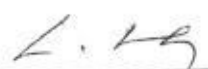
(a) Spare Parts after List discount	\$819.90
(b) Labour Charges	\$430.00
<b>Total for Part-By-Part Repair Cost</b>	<b>\$1,249.90</b>
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less:	
<b>Final Lumpsum Repair cost</b>	


3. Estimated normal period for repairs: 2 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 : Kahm  
Date : 12/6/19

### 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/INC19010085/K1sd3n2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 19-06-2019



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SGW 6244U	Veh. Inspected	SHD 7265R
Policy No.	5074695065-03	Coverage (\$)	0.00
Claim No.	MT/1048455-002	Excess (\$)	0.00
Assign From		Assign Date	06/06/2019

## 2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	JTDKB3FU003077464	Colour	BLUE
Odometer	78560	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	DAVANTI	7 mm
L/H Front Tyre	195/65 R15	DAVANTI	7 mm
R/H Rear Tyre	195/65 R15	DAVANTI	7 mm
L/H Rear Tyre	195/65 R15	DAVANTI	7 mm

## 4. Description of Damages

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

## 5. General Information

Accident Date	04/06/2019	Inspection Date	06/06/2019
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: 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

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 7265R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	CRACKED	458.60	458.60
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	318.80	-
1	REAR BUMPER UNDER COVER	CUT	552.60	552.60
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
	LESS 25% DISCOUNT		-338.00	-258.30
			1,014.00	774.90
<b><u>NETT ITEMS</u></b>				
1	REAR BUMPER REVERSE SENSOR (N)	SERVICEABLE	135.70	-
1	REAR BUMPER RUBBER MAT (N)	NECESSARY	50.00	50.00
	LESS 10% DISCOUNT		-	-5.00
			185.70	45.00
<b><u>LABOUR</u></b>				
	PANEL BEATING.	NOT NECESSARY	350.00	200.00
	SPRAY PAINTING CHARGE.		250.00	200.00
	WIRING CHARGE.		50.00	-
	REMOVE/REFIX REVERSE SENSOR .		80.00	30.00
			730.00	430.00
<b>GRAND TOTAL</b>			<b>1,929.70</b>	<b>1,249.90</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>1,249.90</b>

Report Ref No. NS/INC19010085/K1sd3n2

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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