REF: NS/INC19011160/K/3d3n2

ASSIGNMENT SHC 1623 K Yr Regni 10 Sep 2015 Veh No: Type: M.Car / M.Cycle / Bus / Van / Lorry / T / Prime Mover / Estimated Cost: Truck / Trailer or OD ITP IWS ITP RES I OD RES I EVA I INV I MV Make: To Insped Vehicle No: Colour at Workshop m/s T/Radio: Insered / Std / NI / NA 541474 Sp.Reading Eng/No: KM HLBX14M64078254 C/No: Policy No. Gen. Cond: Good / Par / Poor / Burnt MT/1050721-002 Claims No. Steering: Inorder / Jammed / Leaked / Burnt or Sum Insured: Brake: Inor / Jammed / Leaked / Burnt or (Client's Record) Modi: Nil / S/Rim / STDD/Rim or Make of Veh: (Policy Condition) BS / DUN / EXNOVA / GY / FS / LIZA / MIC (OHTSU / PIR / SUMI / O/S N/S Remark: The veh had commenced its repair at the time of inspection. TOYO/YOKO or Front Ball, or Market Value: R/Bal. R/Bal. Consistent? : Yes or No IDAC Accident Rport: L/Bal. Consistent?: Yes or No GIA / PR Seen: Res.: Yes or No days Est Repairs: 3 Val.: Yes or No Survey held at Lum Sum: Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or CA / REV / REP. / 24 HRS Vehicle: IN / OUT The U/C / Chassis frame / Body Structure affected due to collision. Person Contacted: Date / Time Action / Instruction Date/Time, File Pass to? Days Of Repair: : Preli. Report Survey Fee: Resurvey No. of Trip: : Final Report Transportation: Add Fee: : Site Insp (\$ S+RS. SI Interview (\$ 160 2.500/- HS

TP Claims against NTUC Income: Follow-Through Survey

Date: 01/07/2019

| | The state of the s | the second secon | | | | | | | |
|-----|--|--|----------------------|--------------------|------------------|------------------|----------|----------|-----------------------|
| No/ | Income Reference | Claimant (Owner / Taxi Company) | Claimant Vehicle No. | Income Vehicle No. | Date of Accident | Time of Accident | Estimato | ate | Tentative repair cost |
| | MT/1051614-001 | COMFORT TRANSPORTATION PTE LTD | SHC 3928T | 36955 VGS | 15/06/2019 | 02:15 | \$ 11, | 05'896'1 | \$ 5,550.00 |
| | MT/1050721-002 | COMFORT TRANSPORTATION PTE LTD | SHC 1623K | SJT 9049C | 22/06/2019 | 21:30 | \$ 3, | 496.00 | \$ 2,500.00 |
| | MT/1049907-002 | COMFORT TRANSPORTATION PTE LTD | SHD 4523R | SJU 7769R | 15/06/2019 | 12:30 | \$ 1, | ,405.68 | \$ 400.00 |

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 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.

- 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.

| ACCIDE | MT CT/ | V-1-1-1-1-1 | |
|--------|----------|-------------|--|
| ACCIDE | 41 O I V | A I EIVI | |

Date Of Report 24/06/2019 13:37 Date Of Accident 22/06/2019 21:30

Exact Location Of Accident ALONG CHANGIRD TOWARDS GEYLANG RD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHC1623K

Insured/Policyholder

Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD

199303821R Co Reg No

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

YES Fleet Policy

Policy Number MCOM0015

Cover Note Number

Driver

Name of Driver TAN CHENG HAI

NRIC No S0223910H Date Of Birth 04/12/1952 Occupation OUTDOOR Date Of Driving Pass 04/06/1974

Driving Experience 45 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96432575

Fax Number

Contact Number

EMail Address NOEMAIL Address

228B 05-310 COMPASSVALE WALK

Postcode

542228

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 (TP roverse)

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident? 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

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 Vehicle Make/Model/Colour

SJT9049C

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

ONG TIONG SOON

NRIC/Passport Number

S6846019J

Contact Number

Address

Postcode

Insurance Company Name

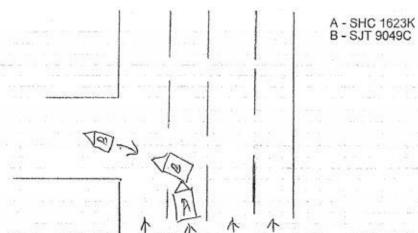
Nature Of Damage

LEFT REAR

Page 2 of 15

No. Of Passenger (Including Driver)

SKETCH PLAN



Along Changi Road Twds Geylang Road.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

| On 2 | 2.06.2019 @ 21:30hrs I was travelling along Changi Road Twds Geylang Road. |
|-------|---|
| with | one male Passenger onboad. |
| As I | was travelling straight, Veh(B) suddenly reversing hit into my lane from my right |
| Tax | i A - vehicle front right portion. |
| l ha | d company video and photo of scene to support my claims |
| No ii | njury in this acciddent. |
| Veh | B (SJT 9049C) - Mr.Ong Tiong Soon,Male Driver. |
| | |
| | |
| | |
| | |
| -772 | |
| | ATION |

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

Policyholder's Signature

Driver's Signature

Reporting Centre Personnel's Signature

SKETCH PLAN

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.
- 5. 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

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m

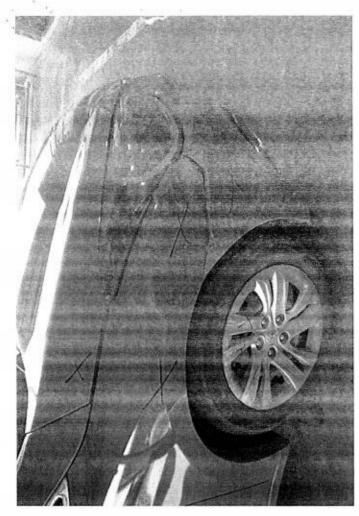
Reporting Centre Personnel's Signature

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder) Date & Time:24.06.2019@11:20hrs

NRIC/FIN No.:

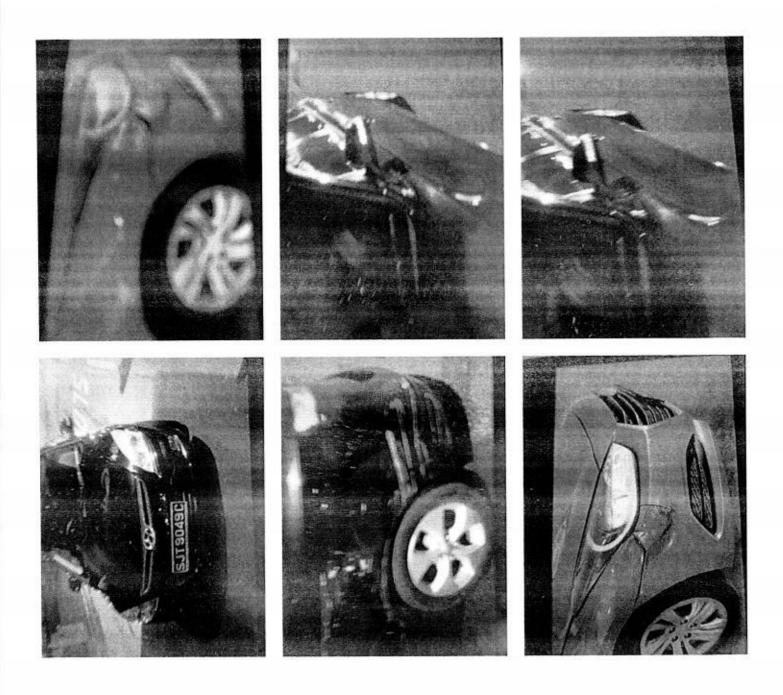
2 4 JUN 2019











COMFORTDELGRO ENGINEERING PTE LTD REPAIR ESTIMATE*

VEHICLE NO: SHC 1623K

MAKE

DATE 24/6/2019 15:16

Lille

| Qty | Parts Description/ Labour | Type | Unit Price | - | Amount |
|-----|---|------|--------------------------|------|----------|
| | Front Bumper Cover / Ca | | | _ | 1052.20 |
| | Front Bumper Grille (RH) | | | s | 41.60 |
| | Front Rumper Bracket Ton (RH) | | | S | 22.40 |
| | Front Bumper Bracket (RH) | | | s | 24.60 |
| | Headlamp (RH) — hazd | | | s | 1,388.00 |
| | Front Fender (RH) - L-ku | | | s | 566.30 |
| | Front Fender Shield (RH) | | | s | 175.90 |
| | Front Fender Retainer | | | s | 24.60 |
| | Front Wheel Hub Cap,RH | | | \$ | 107.10 |
| | SUB TOTAL | | | s | 2,895.00 |
| | LESS 20% | | | S | 579.00 |
| | DISCOUNTED TOTAL | | | \$ | 2,316.00 |
| | | | | | |
| | Labour Charge | | | | 300 |
| | Panel Beating | | | \$ | 400.00 |
| | Spray Painting Charge | | | S | 600.00 |
| | Wiring | | | \$ | 50.00 |
| | Tuff Kote | | | S | 50.00 |
| | Frt Wheel Alignment | | | \$ | 80.00 |
| | TOTAL LABOUR | | | S | 1,180.00 |
| | ESTIMATE TOTAL | | | 8 | 3,496.00 |
| | , 0,1/1, | | | | 3902-1 |
| | Ka Lh ICKK | | Viton | 744 | 1 |
| | 1/1/2 12-1 | | | Ser. | 50.5 |
| | 1/ 24/6/19 15382 | | | | south / |
| | Kahn ICKK 24/6/19 1550h 2 Rs Lls Alle Regat plate | 1.1 | | | |
| | Athe Ray I plat | | Achrowledged by Springer | 1 | |
| | | | Osio; | | |

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.



Date/Time: 24.06.2019 15:20 Page: 1

Team:

ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

MAKE:

MODEL

JG NO. 305305761

FUEL

DATE/TIME IN

TARGET DATE

COMFORT TRANSPORTATION PTE LTD

7010045 OMERINO.

383 SIN MING DRIVE

Singapore SINGAPORE 575717

65508755

YR OF MANU.

10.09.2015 CHASSIS CODE

SHC1623K

HYUNDAI

I - 40

COMPLETION DATE/TIME:

24.06.2019 10:40

KMHLB41UMGU078254

DUNT CARD NO.

JOB DESCRIPTION

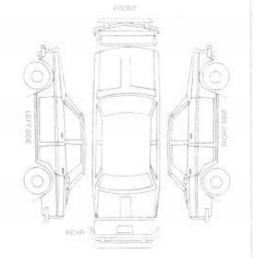
Accident Date: 22.06.2019

NATURE: 3P 22.06.2019

S/NO

LABOR CODE

DESCRIPTION



CKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

/ledgement Slip

SHC1623K

LKE

Vehicle No.

Exit Pass

SHC1623K

if Service Advisor

Signature/Date

Name of Service Advisor

sturned to Service Reception upon collection.

To be kept by Security Guard

COMFORTDELGRO ENGINEERING

| Our Job Ref No | | |)5761 | | 755 17 | | | |
|----------------|--|--|--|----------------------|-----------------------------|--|--|--|
| Date | | - | 27.0 | 6.19 | | 59 Loy | tDelGro Engineering Pte Ltd ang Drive Singapore 50896 546 8156 | |
| FINA | LIZAT | ION F | ORM | | | rax o | 940 0 136 | |
| To | 1 _ | | LH | KK | | Fax: | | |
| Attn | ; N | 1r | KAL\ | /IN ANG | | | | |
| Vehic | ole Reg | No. | SHC1623K | CTPL | | | 22.06.19 | |
| The s | survey | and es | timates of the repa | irs of the above-men | tioned vehicle a | are as follows:- | | |
| 1. | | | ob shall bill to: | | NTUC | | SJT9049C | |
| | | | d amount shall be: | | | | | |
| 2 | (a) | | | | | | | |
| | | | e Parts after List d | scount | | | | |
| | (b) | | ur Charges | 0 | | | | |
| | | Total | for Part-By-Part | Repair Cost | | | | |
| | (c.) | Lumn | sum Renair (if an | nlicable) | | | | |
| | (0.) | | Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: | | 20% | | \$2,500.00 \$2,500.00 | |
| | | Final | Lumpsum Repa | sum Repair cost | | | | |
| 1. | We s | hall tre | lays | ount as Correct and | | orking days. | oly from you within | |
| 4. | We s | hall tre | at the above am | ount as Correct and | d Confirmed it | | | |
| 4. | We s 7 wo | hall tre | eat the above am days | ount as Correct and | d Confirmed it W fin | there is no repe | timates and | |
| 4. | We s 7 wo | hall tre rking o | eat the above am days | ount as Correct and | d Confirmed if W fin | there is no rep e confirm the es alized amount | | |
| 4. | We s 7 wo | hall tre rking o | eat the above am lays or your assistance | ount as Correct and | d Confirmed it W fin | there is no repeted to the establishment of the est | timates and | |
| 4. | We s 7 wo Than Signa | hall tre rking o | eat the above am days or your assistance | ount as Correct and | d Confirmed it W fin | e confirm the es alized amount gnature : | timates and | |
| 3. 4. 5. | We s 7 wo Than Signa Name Tel Fax | hall tre rking o | LIM KWOK ENG | ount as Correct and | d Confirmed it W fin | e confirm the es alized amount gnature : | timates and | |
| 5. | We s 7 wo Than Signa Name Tel Fax | chall tre rking of kk you for ature : e : | LIM KWOK ENG | ount as Correct and | d Confirmed if W fin Sig | e confirm the es alized amount gnature : | timates and | |
| 4. 5. | We s 7 wo Than Signa Name Tel Fax Official | hall tre rking o k you fo ature : e : : | LIM KWOK ENG | ount as Correct and | d Confirmed if W fin Sig | e confirm the es alized amount gnature : | Kalmin 28/6/19 | |
| 4. 5. | We s 7 wo Than Signa Name Tel Fax Official | hall tre rking o k you fo | LIM KWOK ENG 62148316 65468156 | ount as Correct and | Document Attached Yes or No | e confirm the es alized amount gnature : | Kalmin 28/6/19 | |
| 4. 55. 1. Re | We s 7 wo Than Signa Name Tel Fax Official | hall tre rking o k you fo ature: e: : Use O Item ate P/D ncome | LIM KWOK ENG 62148316 65468156 | ount as Correct and | Document Attached Yes or No | e confirm the es alized amount gnature : | Kalmin 28/6/19 | |
| 4. For C | We s 7 wo Than Signa Name Tel Fax Official | hall tre rking o k you fo ature: e : Use O Item ate P/D ncome fees rch Fee | LIM KWOK ENG 62148316 65468156 Inly Paid | ount as Correct and | Document Attached Yes or No | e confirm the es alized amount gnature : | Kalmin 28/6/19 | |



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





| NTI | JC INCOME INSU | RANCE CO-OPERATIVE LTD | Ref: NS/INC1901116 | 60/K1sd3n2 |
|--------|--|--|---|--------------------|
| #05 | BRAS BASAH ROA -01 NTUC TRADE 556 | AD UNION HOUSESINGAPORE | Date: 05-07-2019 Code: INC4 | |
| 1. | | Policy Particulars | :- THIRD PARTY CLAIM | |
| | Insured Veh. | SJT 9049C | Veh. Inspected | SHC 1623K |
| | Policy No. | | Coverage (\$) | 0.00 |
| a a | Claim No. | MT/1050721-002 | Excess (\$) | 0.00 |
| | Assign From | | Assign Date | 24/06/2019 |
| 2. | | Vehicle Parti | culars & Condition | |
| | Make & Model | HYUNDAI 140 | c.c | 1685 |
| | Engine No. | HIDDEN | Year of Reg. | 2015 |
| | Chassis No. | KMHLB41UMGU078254 | Colour | BLUE |
| | Odometer | 551474 | Steering | IN ORDER |
| | Brakes | IN ORDER | Modification | STANDARD ALLOY RIM |
| | General | FAIR | | |
| 3. | | Conditi | ons of Tyres | |
| | | Size | Make | Balance |
| | R/H Front Tyre | 205/60 R16 | HANKOOK | 7 mm |
| | L/H Front Tyre | 205/60 R16 | HANKOOK | 7 mm |
| | R/H Rear Tyre | 205/60 R16 | HANKOOK | 7 mm |
| | L/H Rear Tyre | 205/60 R16 | HANKOOK | 7 mm |
| 4. | | The second secon | on of Damages | |
| | THE VEHICLE SU DAMAGES SEE D | STAINED DAMAGES AT THE O/S ETAILS. | FRONT PORTION. | |
| 5. | A STATE OF THE PARTY OF THE PAR | Genera | Information | |
| | Accident Date | 22/06/2019 | Inspection Date | 24/06/2019 |
| | Survey held at | COMFORTDELGRO ENGINEER | RING PTE LTD | |
| | | 59 LOYANG DRIVE SINGAPORE 508969 | | |
| 5a. | ARTHUR DESIGNATION OF THE PARTY | THE RESERVE THE PROPERTY OF THE PARTY OF THE | emarks | Chifa Star Star |
| | A)THE INSPECTION B)IN ACCORDANCE | ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W | HOUT PREJUDICE" BASIS. E HAVE 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

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



Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1623K

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|-------------------------------|---------------|------------------------------|-------------------|
| | REPLACEMENT OF PARTS | | C Section Section 2 | |
| 1 | FRONT BUMPER COVER | CRACKED | 1,052.20 | 1,052.20 |
| 1 | FRONT BUMPER GRILLE (RH) | SERVICEABLE | 41.60 | 27772775556 |
| 1 | FRONT BUMPER BRACKET TOP (RH) | SERVICEABLE | 22.40 | 10 |
| 1 | FRONT BUMPER BRACKET (RH) | SERVICEABLE | 24.60 | 152 |
| 1 | HEADLAMP (RH) | GRAZED | 1,388.00 | 1,388.00 |
| 1 | FRONT FENDER (RH) | BUCKLED | 566.30 | 566.30 |
| 1 | FRONT FENDER SHIELD (RH) | SERVICEABLE | 175.90 | |
| 1 | FRONT FENDER RETAINER | SERVICEABLE | 24.60 | 74 |
| 1 | FRONT WHEEL HUB CAP,RH | SERVICEABLE | 107.10 | 1- |
| | LESS 20% DISCOUNT | | -680.54 | -601.30 |
| | | | 2,722.16 | 2,405.20 |
| | LABOUR | | | |
| | PANEL BEATING. | | 400.00 | 300.00 |
| | SPRAY PAINTING CHARGE. | | 600.00 | 400.00 |
| | WIRING. | | 50.00 | 20.00 |
| | TUFF KOTE. | | 50.00 | 20.00 |
| | FRT WHEEL ALIGNMENT. | NOT NECESSARY | 80.00 | - |
| | | | 1,180.00 | 740.00 |
| | GRAND TOTAL | | 3,902.16 | 3,145.20 |

| RECOMMENDED COST OF LUMP SUM REPAIRS | The state of the s | 2,500.00 |
|--------------------------------------|--|----------|
| (TO ITS PRE-ACCIDENT CONDITION) | | |
| (CONFIRMED) | | |

Report Ref No. NS/INC19011160/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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