

(08/11/13)

Signature: KevinREF: NS/INC 19014130/CLVf302

## ASSIGNMENT

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

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

OD (TP) NS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: \_\_\_\_\_

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

of \_\_\_\_\_

Insured: SMJ 3102mPolicy No: 5076629064-03 (27/02/2019)Claims No: MT 1056681-002

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

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

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SHD 73092 Yr Regn: 4th 2018Type: M.Car / M.Cycle / Bus / Van / Lorry / Trailer / Prime Mover /

Truck / Trailer or

Make: Hyundai Zing C.O. 1580Colour: Black A/C: Ins / Std / NI / NASp. Reading: 56678 T/Radio: Ins / Std / NI / NA

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

C/No: 1CMHC 85/CLKY122 028Gen. Cond: Good / Fair / Poor / BurntSteering: Ins / Jammed / Leaked / Burnt orBrake: Ins / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15

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

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

TOYO / YOKO or

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

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 5/8/19 D.O.I. 13/8/19Survey held at CPGE (Loyang)

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

o/s & f.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

SHD 73092 - CS / FC1 190130123 / d3 DOA - 05/08/2019 INC

SMJ 3102m - CS / FC1 190130123 / d3 DOA - 05/03/2019 PP

19/8/19 Colud P/P \$ 672 / 2 hrs. (Red 710, 5170)

RECEIVED 20 AUG 2019

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

20/8-typerDays Of Repair: 2Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S+PS: \_\_\_\_\_

160

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	Estimate	Tentative repair cost
1	MT/1055159-002	SMRT TAXIS PTE LTD	SHC 4418S	SJT 6151J	25/7/2019	\$9,087.80	\$1,400.00
2	MT/1055666-002	SMRT TAXIS PTE LTD	SHF 499T	SJL 8166X	29/7/2019	\$3,807.90	\$700.00
3	MT/1057531-002	COMFORT TRANSPORTATION PTE LTD	SH 9008C	CB 7115K	13/8/2019	\$3,716.60	\$1,250.00
4	MT/1057475-002	COMFORT TRANSPORTATION PTE LTD	SHB 4184X	SCL 7799J	11/8/2019	\$3,297.04	\$2,100.00
5	MT/1056681-002	COMFORT TRANSPORTATION PTE LTD	SHD 7309Z	SMJ 3102M	5/8/2019	\$1,382.00	\$672.00
6	MT/1057180-002	COMFORT TRANSPORTATION PTE LTD	SHD 3029H	SGQ 7012Y	9/8/2019	\$2,269.06	\$1,000.00

Claim received from LKK Auto

eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="05/08/2019 14:56"/>
Vehicle No.(For Motor)	<input type="text" value="SMJ3102M"/>	Certificate Number	<input type="text"/>

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5076629069-03		VFM PTE. LTD.	201523773K	GFT	drivo CLASSIC	SMJ3102M	SMJ3102M	27/02/2019	

## 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	08/08/2019 15:36
Date Of Accident	05/08/2019 16:20
Exact Location Of Accident	TAMPINES HUB DROP OF POINT DRIVE WAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD7309Z
<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	HYUNDAI
Model	IONIQ
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

### Driver

Name of Driver	TAN CHEE PHING
NRIC No	S0095385G
Date Of Birth	07/10/1954
Occupation	OUTDOOR
Date Of Driving Pass	24/01/1977
Driving Experience	42 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97662286
Fax Number	
Contact Number	
Email Address	CHEEPHING@GMAIL.COM

Address	BLK 725 TAMPINES STREET 71 #10-171
Postcode	520725
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 - OPENING DOOR OF VEHICLE
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

PLS REFER TO ATTACHED / Type Of Accident : 3P OPEN DOOR

#### 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	SMJ3102M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAM LAI YOKE
NRIC/Passport Number	S7128065I
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	LEFT REAR DOOR
No. Of Passenger (Including Driver)	

**IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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. 199303821R

Policyholder's Signature  
Date & Time:

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

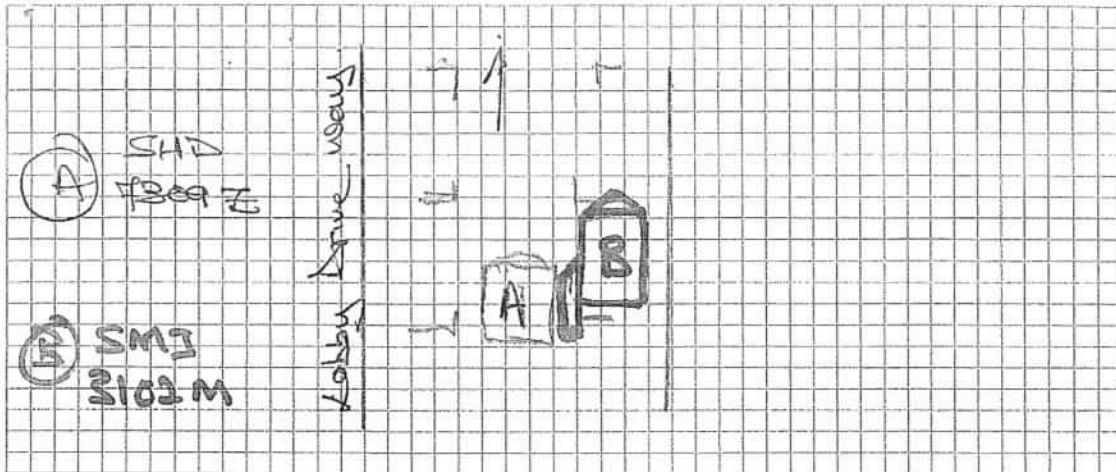
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

GIA/RC SketchPlanForm\_V3

10-1  
01-0

04-0  
01-0

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON. 5 Aug 2019 @ 1630 hr I vet A.

Drive through the lobby drive way

to above location slowly suddenly

veh B PAK open the sliding door

and hit vet (A) the whole Right

Side at the point of accident

veh A NO PAK.

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.:

GIARFAC SketchPlanForm\_V3

e: 13.08.2019 10:52 Page : 1

eam: ARC Repair TP(CLSO)1

## Sales Order:

JC NO.: 305323965

383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
65508755

JNT CARD NO.

REGN NO.: SHD7309Z

MILEAGE

MAKE : HYUNDAI

FUEL  
E.....1/2.....F

MODEL IONIQ(G2)

DATE/TIME IN  
13.08.2019 09:30

YR OF MANU 04.12.2018

TARGET DATE

CHASSIS CODE  
KMHC851CVKU122028

COMPLETION DATE/TIME:

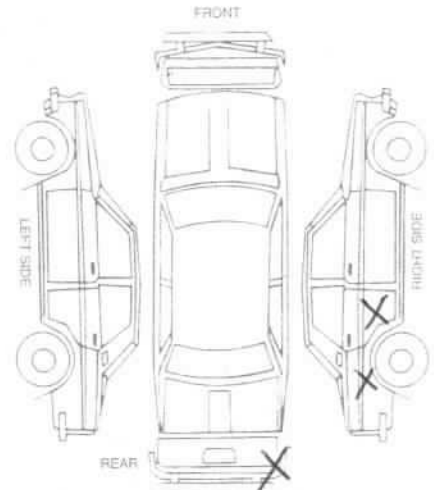
Accident Date: 05.08.2019

ATURE: 3P 05.08.19

: / NO

LABOR CODE

DESCRIPTION



RECEIVED & PASSED OUT BY:

## SERVICE ADVISOR

CUSTOMER'S SIGNATURE \_\_\_\_\_

Judgement Slip

Exit Pass

SHD7309Z

## LIMITS

Vehicle No.:

SHD7309Z

Service Advisor

Signature/Date \_\_\_\_\_

Name of Service Advisor

Date \_\_\_\_\_

urned to Service Reception upon collection.

To be kept by Security Guard



COMFORTDELGRO ENGINEERING PTE LTD

Date: 13.08.2019

REPAIR ESTIMATE

Time: 11:05:34

Page: 1

NTUC-CP/P/  
LKK - Kalvin

TS

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

JOB NO : 305323965  
 REGN NO : SHD7309Z  
 MILEAGE : 0000000000  
 MAKE : HYUNDAI  
 MODEL : IONIQ(G2)  
 DATE OF REGN : 04.12.2018  
 DATE/TIME IN : 13.08.2019 09:30  
 ACCIDENT DATE : 05.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 28-01-9999-2023-A REAR DOOR APPS STICKER RH 1 80.00 10.00 72.00 / *nc*

*Rear Door (RH) x reg 2h  
 Rear Fender (RH) x repair*

SUB-TOTAL : 72.00

## JOB NATURE

0000 PB PANEL BEATING-~~Rear Fender RH~~

560.00 *200*

0001 SP SPRAYPAINT-Rear Bumper ETC

750.00 *400*

SUB-TOTAL : 1,310.00

TOTAL : 1,382.00

MVA NAME & SIGNATURE  
 DATE :

AUTHORISED : YES / NO  
 SURVEYOR NAME & SIGNATURE  
 DATE :

*Kalvin LKK*  
*13/8/19 1145h*  
*2 Days*  
*P 18*  
*Aftn Repair p Loto*



# COMFORTDELGRO ENGINEERING

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

Our Job Ref No : 305323965  
Date : 15/08/19


## FINALIZATION FORM

To : LKK Fax :  
Attn : KALVIN ANG  
Vehicle Reg No. : SHD7309Z Date of Accident : 05-Aug-19

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

- The repair job shall bill to: NTUC --- SMJ3102M
- The finalized amount shall be:
  - Spare Parts after List discount \$72.00
  - Labour Charges \$600.00
  - Total for Part-By-Part Repair Cost \$672.00**
  - Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20%  
**Final Lumpsum Repair cost**
- Estimated normal period for repairs: 2 working days.
- We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
- 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 : 19/8/19

## 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:

COMFORTDELGRO ENGINEERING PTE LTD

Date: 14.08.2019

REPAIR ESTIMATE

Time: 18:03:38

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 : 305323965  
REGN NO : SHD7309Z  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G2)  
DATE OF REGN : 04.12.2018  
DATE/TIME IN : 13.08.2019 09:30  
ACCIDENT DATE : 05.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 28-01-9999-2023-A REAR DOOR APPS STICKER RH 1 80.00 10.00 72.00

SUB-TOTAL : 72.00

JOB NATURE

0000 PB PANEL BEATING-Rear Fender RH

200.00

0001 SP SPRAYPAINT AFFECTED AREAS

400.00

SUB-TOTAL : 600.00

TOTAL : 672.00

  
MVA NAME & SIGNATURE  
DATE :

\_\_\_\_\_  
SURVEYOR NAME & SIGNATURE  
DATE : AUTHORIZED : YES / NO



## 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/INC19014130/K1vf3e2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 20-08-2019



189556

Code: INC4

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SMJ 3102M	Veh. Inspected	SHD 7309Z
Policy No.	5076629069-03	Coverage (\$)	0.00
Claim No.	MT/1056681-002	Excess (\$)	0.00
Assign From		Assign Date	13/08/2019

### 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	KMHC851CVKU122028	Colour	BLUE
Odometer	56678	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 O/S BODY. DAMAGES SEE DETAILS.
------------------------------------------------------------------------

### 5. General Information

Accident Date	05/08/2019	Inspection Date	13/08/2019
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:	2 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



Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 7309Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR DOOR APPS STICKER RH (N)	NECESSARY	80.00	80.00
	LESS 10% DISCOUNT		-8.00	-8.00
			72.00	72.00
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	REAR DOOR (RH)(SN)(NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR FENDER (RH)(SN)(NPA)	TO REPAIR SEE LABOUR	-	-
			-	-
	<b><u>LABOUR</u></b>			
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR DOOR (RH) AND REAR FENDER (RH).		560.00	200.00
	SPRAYPAINT-REAR BUMPER ETC.		750.00	400.00
			1,310.00	600.00
<b>GRAND TOTAL</b>			<b>1,382.00</b>	<b>672.00</b>

<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>			<b>672.00</b>
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Report Ref No. NS/INC19014130/K1vf3e2

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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