Downers, rate rass to:	: Prell. Report	Day	s Of Repair:	3	
1)	: Final Report	Res	survey No. of Trip	): l	Survey Fe
Date/Time, File Return to?			95 N		Transportation
2) 288-typist	•	Add Fee:	Site Insp (\$		)S+RS,_
1 0			: Interview (\$		) Photos
Reson Format			S. S		200000

\_SI

TP Claims against NTUC Income: Follow-Through Survey

Date: 28/08/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	L	Fetimate
н	MT/1058784-002	COMFORT TRANSPORTATION PTE LTD	SHC2223A	SIR9200S	21/08/2019	v	2 251 02
2	MT/1058925-002	CITYCAB PTE LTD	SHA233U	SKV8847A	21/08/2019	2	2 602 64
3	MT/1059829-001	COMFORT TRANSPORTATION PTE LTD	SHD3625L	SJH5186D	22/08/2019		1 933 85
4	MT/1059135-002	COMFORT TRANSPORTATION PTE LTD	SHA47191	SIR7693R	22/08/2019		A 30 A 75
2	MT/1058712-002	COMFORT TRANSPORTATION PTE LTD	SH7169J	SHC63217	20/08/2019	2	0 545 62
9	MT/1059834-001	COMFORT TRANSPORTATION PTE LTD	SHC1574T	SI F3769C	23/08/2019	2	0,040.00

Claim received from LKK Auto

#### 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.
- 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.

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.
- ent 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	21/08/2019 10:52
Date Of Accident	20/08/2019 16:20
Exact Location Of Accident	NEWTON CIRCUS NEAR TO BUKIT TIMAH RD JUNCTION
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SH7169J
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	тоуота
Model	PRIUS
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

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

-	550	•		
		и	10	

Name of Driver	TAY TENG KEE
NRIC No	S1153394I
Date Of Birth	13/11/1955
Occupation	OUTDOOR
Date Of Driving Pass	26/07/1977
Driving Experience	42 YEARS AND

D 0 MONTHS

MALE Gender

Mobile Number (LOCAL) +65-96660662

Fax Number Contact Number

PETERTAY1122@GMAIL.COM **EMail Address** 

Address

BLK 153 MEI LING STREET #11-22

Postcode

140153

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

SIDE SWIPE

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

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)

2

Passenger 1

NAME:

: FEMALE GENDER:

**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

SHC6321Z

Vehicle Make/Model/Colour **Details Of Properties** 

TAXI

Vehicle Category Name of Driver

TAN BIN HUAT

NRIC/Passport Number

S1268202F

Contact Number

97958564

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

**FRT LEFT** 

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.
- 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 LTO CO. REG. NO. 199303621R

> 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.:

Loke Wei Yieng

CIABAC ShatchPlanform\_V3

11

1"

# Sketch Plan Pg. 2

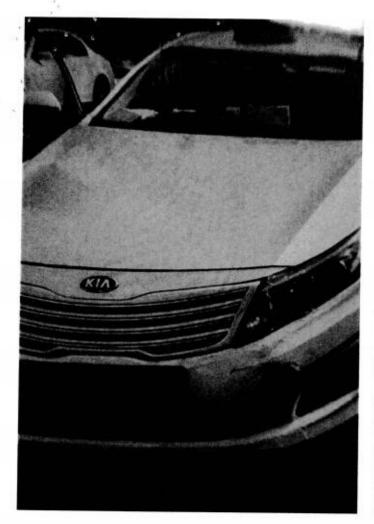
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DESCRIBE CIRCUMSTANCES OF T	THE ACCIDENT							
On	20 8 19	of	abo	ut	16:	20	Ars.	Lu
				10.54				
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pericentar. 740								***************************************
ECLARATION								
ECLARATION	are true in every resp	ect.					1	
ECLARATION We declare the foregoing particulars FORT TRANSPORTATION 1-TE. CO. REG. NO. 19930382113	1	ect.					1	عدا ا

NRIC/FIN No.:

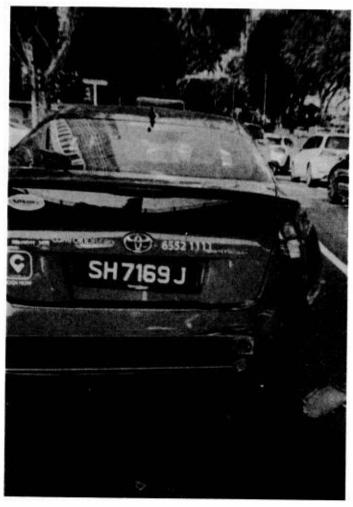
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Page 5 of 19











# :OMFORTDELGRO ENGINEERING

member of COMFORTDELGRO

## ComfortDelGro Engineering Pte Ltd

59 Loyang Drive Singapore 508969 383 Sin Ming Drive Singapore 575717

24 Senoko Loop Singapore 7581 56 7 Sungei Kadut Way Singapore 728791 501 Yehun Industrial Park A Singapore 768732 : 56 Page: 1

Date/Time# Ub2124 0884 2049 11:56

Team: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO.: 305326377 TOMER. REGN NO. SH 7169J MILEAGE COMFORT TRANSPORTATION PTE LTD MAKE: FUEL 7010045 TOYOTA TOMER NO. 383 SIN MING DRIVE RESS MODEL PRIUS HYBRID(G4)20.08.2019 17:15 Singapore SINGAPORE 575717 65508755 YR OF MANUA . 08.2017 (R) (0)TARGET DATE (P) CHASSIS CODE KB3FUX03563389 COMPLETION DATE: TIME: OUNT CARD NO.

JOB DESCRIPTION Accident Date: 20.08.2019

NATURE: 3P 20.08.2019

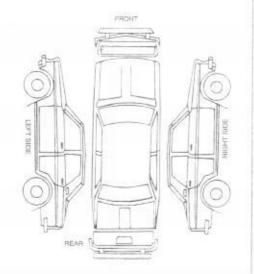
S/NO

f Service Advisor

turned to Service Reception upon collection

LABOR CODE

DESCRIPTION



Date

CUSTOMER'S SIGNATURE
Ēxit Pass
Vehicle No.: SH 7169J

Name of Service Advisor

To be kept by Security Guard

Signature/Date

REPAIR ESTIMATE

VEHICLE NO: SH 7169J

MAKE :

21/8/2019 12:59 Like NTUC

MODEL	: TOYOTA PRIUS		1-10	< -		Minc
	PARTS DESCRIPTION	QTY	UNIT PRICE	1	MOUNT	1
	REAR TRUNK LID COVER > 5 <sup>∞</sup>			\$	1,126.60	
	REAR TRUNK LID LOCK 💃 5th			\$	457.90	
	REAR TRUNK LID GLASS (BLACK COLOR)			\$	733.50	
	GARNISH SUB-ASSY, BACK DOOR, OUTSIDE		ton	\$	889.70	
	REAR TRUNK LID LOGO(PRIUS)	1000		\$	52.90	
	REAR TRUNK LID LOGO(HYBRID)			\$	52.90	
	REAR TRUNK LID LOGO(TOYOTA STAR)			\$	47.00	,
	REAR BUMPER			\$	458.60	
	REAR BUMPER UNDER COVER			\$	552.60	,
	REAR BUMPER SIDE RETAINER			\$	112.70	
	REAR BUMPER TOWING COVER			\$	82.70	
	REAR BUMPER CLIPS + AT			\$	22.00	
	RETAINER, REAR BUMPER, SIDE, RH			\$	94.80	
	SEAL, REAR BUMPER SIDE, RH			\$	148.40	
	TAIL LAMP ASSY (UPPER) (RH) X			\$	557.90	
	TAIL LAMP ASSY (LOWER) (RH)			\$	548.40	
	REAR WINDSCREEN GLASS WITH MOULDING X	See		\$	1,778.30	
	REAR TYRE RIM ,RH			\$	1,555.00	
	Fonde Rea (RM) tryait SUB TOTAL			\$	9,271.90	
	LESS 25%			\$	2,317.98	
	DISCOUNTED TOTAL			\$	6,953.93	]
	· · ·		sherce nouty			
	REAR TRUNK LID APPS STICKER	~	Mounty -10%	\$	40.00	
	REAR TRUNK LID COMFORT & TEL NO. STCIKER	Tribles 1	committee eschelling	S		NETT TY
	REAR BUMPER REVERSE SENSOR	damaged 9	ct to contain proportion	\$		NETT (32.13
	REAR BUMPER RUBBER MAT	iti anned q	on a Villion instruction of our process of the result of the control of the contr	\$	50.00	NETT
	REAR WINDSCREEN SEALANT × ~ \ . THIRD WINDSCREEN SEALANT	gat modifications re-	on a showed train insurance company to a showed from insurance company in the contract of the	\$	46.00	NETT
	* Sup?	owledged by		\$	331.70	
	LABOUR CHARGE	<sup>OMJedded</sup> ni				
	LABOUR CHARGE	8;		40	11 -	
	Panel Beating	133-	hos	5	890.00	8 88
	Spray Painting Charge	100	0.853884	\$	1,290.00	600
	Wiring Charge 3 Pogs			S	50.00	-20
	Tuff Kote 010			S	50.00	
	Remove/Refix Reverse Sensor		1.	\$	80.00	2
	Rear Wheel Alignment Refere Page	nt	photo	\$	80.00	to
	TOTAL LABOUR			\$	2,260.00	J. AMERICAN
	the conductive for the conductive and the conductiv		9916.58			
	ESTIMATE TOTAL	- 1	4416.20	S	9,545.63	

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.

# COMFORT ENGINEERING

VEHICLE NO. : SH7169J

TYPE OF CASE : TP-SHC6321Z

MODEL

PR148 (G4)

SURVEY BY : LKK/kalvin Amp
DATE : 21/8/19

JOB NO

305326377

DESCRIPTION	QTY	ESTIMATE	REMARKS
Rear Bunger Reinforcement. Rear Wheel Cover Rh	1	#318.80	/ B.J
- Rear Wheel Cover Rh	1	#175.80	- 432
1			
*			
	+		
	-		
	+		
	TOTAL:	\$0.00	

REPAIR ESTIMATE

Date: 27.08.2019 Time: 18:38:38

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 : 305326377
REGN NO : SH 7169J
MILEAGE : 0000000000
MAKE : TOYOTA
MODEL : PRIUS HYBRID(G4)
DATE OF REGN : 23.08.2017
DATE/TIME IN : 20.08.2019 17:15
ACCIDENT DATE : 20.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

#### PART REQUISITION

0001 04-01-0302-2269-G	PRIG4 ORNAMENT SUB-ASSY B	1	47.00 25.00	35.25
0002 04-01-0302-2271-G	PRIG4 PLATE-BACK DOOR NAM	1	52.90 25.00	39.67
0003 04-01-0302-2270-G	PRIG4 PLATE-BACK DOOR NAM	1	52.90 25.00	39.67
0004 28-01-0302-2013-A	PRIVC REAR BONNET APP TAX	1	40.00 10.00	36.00
0005 28-01-0302-0006-A	PRIVC REAR BOOT 65521111 1		30.00 10.00 2	7.00
0006 28-01-9999-2025-A	APP LOGO REAR BONNET CTPL	1	30.00 10.00	27.00
0007 04-01-0302-2282-G	PRIG4 COVER REAR BUMPER	1	458.60 25.00	343.95
0008 04-01-0302-2287-G	PRIG4 GUARD-REAR BUMPER C	1	552.60 25.00	414.45
0009 04-01-0302-2286-G	PRIG4 COVER REAR BUMPER-T	1	82.70 25.00	62.02
0010 04-01-0302-2965-G	PRIG4 FILLER-REAR BUMPER	1	148.40 25.00	111.30
0011 04-01-0302-0795-G	PRIG4 LENS AND BODY REAR	1	548.40 25.00	411.30
0012 03-01-0302-2020-G	PRIG4 WHEEL DISC 1 1,55	5.0	0 25.00 1,166.2	5
0013 09-01-0302-2005-A	PRIG4 REVERSE SENSOR ASSY	1	135.70 10.00	122.13

REPAIR ESTIMATE

Date: 27.08.2019 Time: 18:38:38

Page: 2

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

: 305326377 : SH 7169J

MAKE

: 0000000000

TOYOTA

MODEL : PRIUS HYBRII DATE OF REGN : 23.08.2017 DATE/TIME IN : 20.08.2019 17:1

ACCIDENT DATE : 20.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

0014 04-01-0302-2346-G PRIG4 GARNISH SUB ASSY BA 1 889.70 25.00 667.27

0015 04-01-0302-2288-G PRIG4 REINFORCEMENT SUB-A 1 318.80 25.00 239.10

0016 03-01-0302-2057-G PRIG4 CAP WHEEL

1 175.80 25.00 131.85

SUB-TOTAL : 3,874.21

JOB NATURE

0000 L

REAR BUMPER MAT

50.00

0001 L

PANEL BEATING

400.00

0002 23-502

SPRAYPAINT ON AFFECTED AREA

600.00

0003 17-01

CHECK ALL LIGHTING

20.00

0004 20-22

REMOVE/REFIX REVERSE SENSOR

30.00

SUB-TOTAL : 1,100.00

REPAIR ESTIMATE

Date: 27.08.2019 Time: 18:38:38

Page: 3

COMPANY: THIRD PARTY'S CLAIMS (CAS)

CUSTOMER: 7010045

ADDRESS: COMFORT TRANSPORTATION PTE LTD

383 SIN MING DRIVE

SINGAPORE SINGAPORE 575717

65508755

JOB NO

: 305326377 : SH 7169J

REGN NO MILEAGE

: 0000000000

MAKE

: TOYOTA

MODEL

: PRIUS HYBRII

DATE OF REGN : 23.08.2017

DATE/TIME IN : 20.08.2019 17:1

ACCIDENT DATE : 20.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 4,974.21

MVA NAME & SIGNATURE

DATE:

AUTHORISED: YES / NO SURVEYOR NAME & SIGNATURE

DATE:

### COMFORTDELGRO ENGINEERING

Our Job Ref No 305326377 ComfortDelGro Engineering Pte Ltd Date 27.08.19 59 Loyang Drive Singapore 508969 Fax: 6546 8156 FINALIZATION FORM To : \_ LKK Fax: Attn : Mr KALVIN ANG Vehicle Reg No. SH7169J 20.08.19 The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-The repair job shall bill to: NTUC SHC6321Z The finalized amount shall be: (a) Spare Parts after List discount \$3,874.23 Labour Charges \$1,100.00 Total for Part-By-Part Repair Cost \$4,974.23 (c.) Lumpsum Repair (if applicable) Total for Lumpsum repair cost after Less: 20% Final Lumpsum Repair cost Estimated normal period for repairs: 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 : Signature: Name : LIM KWOK ENG Name Tel 62148316 Date Fax : 65468156 For Official Use Only Document Confirm By Item Amount Attached Remarks (Signature) Yes or No 1. Rental Rate P/Day YES 2. Loss of Income Paid NO 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





NTU	C INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1901473	38/K1vf3s2		
			Date:	10-09-2019 INC4			
1.		Policy Particulars	:- THIR	D PARTY CLAIM			
	Insured Veh.	SHC 6321Z	Veh. I	nspected	SH 7169J		
	Policy No.		Cover	age (\$)	0.00		
	Claim No.	MT/1058712-002	Exces	s (\$)	0.00		
	Assign From		Assign Date		21/08/2019		
2.		The state of the s					
	Make & Model	TOYOTA PRIUS	c.c		1798		
	Engine No.	HIDDEN	Year	of Reg.	2017		
	Chassis No.	JTDKB3FUX03563389	Colou	r	BLUE		
	Odometer	222082	Steering Modification		IN ORDER		
	Brakes	IN ORDER			STANDARD ALLOY RIM		
	General	FAIR					
3.		Condit	ions of	Tyres			
		Size	Make		Balance		
	R/H Front Tyre	195/65 R15	DAVA	NTI	7 mm		
	L/H Front Tyre	195/65 R15	DAVA	NTI	7 mm		
	R/H Rear Tyre	195/65 R15	DAVA	NTI	7 mm		
	L/H Rear Tyre	195/65 R15	DAVA	NTI	7 mm		
4.		Descripti	on of D	amages			
	THE VEHICLE SU	STAINED DAMAGES AT THE RE ETAILS.	AR O/S	PORTION.			
5.		100 - 100 - 100 - 100	al Inform	nation			
	Accident Date	20/08/2019	Inspe	ction Date	21/08/2019		
	Survey held at	COMFORTDELGRO ENGINEE	RING PT	E LTD			
		59 LOYANG DRIVE SINGAPORE 508969					
5a.		R	emarks				
		ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, V					
5b.		Estimate	Days o	f Repair			
	ESTIMATED NORMAL PERIOD FOR REPAIR: 3 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



# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 7169J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR TRUNK LID COVER	SERVICEABLE	1,126.60	
1	REAR TRUNK LID LOCK	SERVICEABLE	457.90	
1	REAR TRUNK LID GLASS (BLACK COLOR)	SERVICEABLE	733.50	
1	GARNISH SUB-ASSY, BACK DOOR, OUTSIDE	CRACKED	889.70	889.70
1	REAR TRUNK LID LOGO (PRIUS)	NECESSARY	52.90	52.90
1	REAR TRUNK LID LOGO (HYBRID)	NECESSARY	52.90	52.90
1	REAR TRUNK LID LOGO (TOYOTA STAR)	NECESSARY	47.00	47.00
1	REAR BUMPER	DEFORMED	458.60	458.60
1	REAR BUMPER UNDER COVER	CRACKED	552.60	552.60
1	REAR BUMPER SIDE RETAINER	SERVICEABLE	112.70	82
1	REAR BUMPER TOWING COVER	сит	82.70	82.70
10	REAR BUMPER CLIPS	NOT NECESSARY	22.00	
1	RETAINER, REAR BUMPER, SIDE, RH	SERVICEABLE	94.80	
1	SEAL, REAR BUMPER SIDE, RH	CRACKED	148.40	148.40
1	TAIL LAMP ASSY (UPPER) (RH)	SERVICEABLE	557.90	
1	TAIL LAMP ASSY (LOWER) (RH)	CRACKED	548.40	548.40
1	REAR WINDSCREEN GLASS WITH MOULDING	SERVICEABLE	1,778.30	
1	REAR TYRE RIM, RH	GRAZED	1,555.00	1,555.00
1	FENDER REAR (RH) (NPA)	TO REPAIR SEE LABOUR	-	-
1	REAR BUMPER REINFORCEMENT	BENT	318.80	318.80
1	REAR WHEEL COVER RH	MISSING	175.80	175.80
	LESS 25% DISCOUNT		-2,441.62	-1,220.70
	ports along a structured of the food of the state of the		7,324.88	3,662.10
	NETT ITEMS			
1	REAR TRUNK LID APPS STICKER (N)	NECESSARY	40.00	40.00
1	REAR TRUNK LID COMFORT & TEL NO. STICKER (N)	NECESSARY	60.00	60.00
1	REAR BUMPER REVERSE SENSOR (N)	SHORTED	135.70	135.70
	LESS 10% DISCOUNT	WINDSHITATE-OF		-23.57
			235.70	212.13

Report Ref No. NS/INC19014738/K1vf3s2



#### **National Assessment Centre Services**

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







Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	SPECIAL NETT ITEMS			
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	
			96.00	50.00
	LABOUR			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF FENDER REAR (RH).		800.00	400.00
	SPRAY PAINTING CHARGE.		1,200.00	600.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE / REFIX REVERSE SENSOR.	Constitution of the section of	80.00	30.00
	REAR WHEEL ALIGNMENT.	NOT NECESSARY	80.00	
	Delivery purchased the control of the Charles of th		2,260.00	1,050.00
	GRAND TOTAL		9,916.58	4,974.23
100	RECOMMENDED COST OF REPAIRS (CONFIRMED)			4,974.23

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KALVIN ANG WEI KUN

Automotive Assessor / Investigator

the

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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