

Shiau Chan (LKKAUTO)

From: MTCL@income.com.sg
Sent: Monday, 2 September 2019 2:01 PM
To: Shiau Chan (LKKAUTO)
Subject: FW: REQUEST CLAIMS NUMBER

Hi,

Claim created.

With Regards

Samsia
Senior Admin Assistant,
Motor Insurance
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

in with you

From: Shiau Chan (LKKAUTO) [mailto:siewsc@lkkauto.com]
Sent: Monday, 2 September 2019 11:14 AM
To: MTCL@income.com.sg
Subject: REQUEST CLAIMS NUMBER

Dear Sir/Madam,

Please refer to the below:

TP Claims against NTUC Income: Follow-Through Survey

Date : 02/09/2019

| S/No | Income Reference | Claimant (Owner / Taxi Company) | Claimant Vehicle No. | Income Vehicle No. | D |
|------|------------------|---------------------------------|----------------------|--------------------|---|
| 1 | MT/1059953-002 | COMFORT TRANSPORTATION PTE LTD | SHD 7306G | SGU 863H | |
| 2 | MT/1060513-001 | CITYCAB PTE LTD | SHB 2386T | SJV 4533T | |

Best Regards,

Shiau Chan (Ms) | Case Handler
LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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 | 28/08/2019 11:09 |
| Date Of Accident | 28/08/2019 02:55 |
| Exact Location Of Accident | ANG MO KIO AVE 5 X JUNCTION OF BAUGKOK GREEN |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--------------------------------|
| Vehicle Registration Number | SHD7306G |
| 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 | 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 | YOU CHAAI |
| NRIC No | S1850362Z |
| Date Of Birth | 13/08/1962 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 15/01/1983 |
| Driving Experience | 36 YEARS AND 7 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-93834013 |
| Fax Number | |
| Contact Number | |
| Email Address | YOUCHAAI@GMAIL.COM |

| | |
|---|------------------------------------|
| Address | BLK 844 WOODLANDS AVENUE 4 #08-608 |
| Postcode | 730844 |
| 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 ON COLLISION |
| 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? | YES |
| Was any injured conveyed to hospital by ambulance? | YES |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | YES |
| Number of Passengers (Including Driver) | 2 |
| Passenger 1 | NAME: : - GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| POLICE STATION NAME [OTHER] | TRAFFIC POLICE 10 UBI AVE 3 SINGAPORE 408865 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLS REFER TO ATTACHED / POLICE REPORT : T/20190828/7001 /Type Of Accident : HEAD TO HEAD

Attachment(s)

| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | NO |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|--|
| Vehicle Registration Number | SGU863H |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | JOTHI KRISHNAN |
| NRIC/Passport Number | S8732665I |
| Contact Number | 97678197 |
| Address | |
| Postcode | |
| Insurance Company Name | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Nature Of Damage | FRT |

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name 3P PASSENGER

Approximate Age

Injuries Sustain NOT SURE

Injured person in which vehicle? SGU863H

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

DETAILS OF INJURED PERSON 2

Name JOTHI KRISHNAN

Approximate Age

Injuries Sustain NOT SURE

Injured person in which vehicle? SGU863H

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

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.
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. 199303478K

Policyholder's Signature
Date & Time:

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

28/8/19
Jackson Lim
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

GIA/MAC SketchPlanForm_V3



SKETCH PLAN

Hand-drawn diagram of a water distribution network on grid paper. The network consists of a main horizontal pipe at the top, a vertical pipe on the left, and a diagonal pipe at the bottom. A small rectangular structure, possibly a pump or storage tank, is located in the center. Arrows indicate the flow direction: from the top pipe down to the vertical pipe, then right to the diagonal pipe, and finally down to the bottom pipe. The diagram is labeled with 'A' and 'B' at the top, 'C' and 'D' on the left, and 'E' and 'F' on the right. The bottom pipe is labeled 'Hing 100 Kilo'.

Re: Police report attached

T/20190828/1001

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

Catalytic SearchPlatform V11

Date & Time:

NRIC/FIN No.:

Sketch Plan Pg. 3



**SINGAPORE
POLICE FORCE**



T/20190828/7001

1 of 4

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190828/7001

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|-------------------------------------|--------------------|
| Date/Time Report Made: 28/08/2019 05:03 | Vide Report No.: F/20190828/0032 | Station Diary No.: |
|--|-------------------------------------|--------------------|

| Informant's Particulars | | | |
|--|------------|--|------------------------------|
| Name of Informant: YOU CHAAI | | Address: 844 WOODLANDS AVENUE 4 #08-608 HDB-WOODLANDS SINGAPORE 730844 | |
| ID Type / ID No.: NRIC NO / S1850362Z | | Contact No.: Home/Office: Mobile: 93834013 | |
| Nationality: SINGAPORE CITIZEN | | Email: youchai@gmail.com | |
| Sex: Male | Age: 57 | Date of Birth: 13/08/1962 | Type of Informant: Driver |
| Race: Chinese | | Language: English | Institution / School Name: |
| Occupation: | | Driving Licence Information: Class: 2B,3,4,5 | Date of Expiry: |

| General Information of the Accident | | | | |
|--|----------------------------------|---|--|---------------------------------|
| Type of Accident: | Non-Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 28/08/2019 02:55 | Type of Location: X-Junction |
| Location: ANG MO KIO AVENUE 5 | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: 60 Km/h | |
| Traffic Flow: Dual Carriage Way | | Traffic Control: Traffic Light - Working | Traffic Volume: Light | |
| Type of Collision: Between Moving Vehicles - Head To Side | | | Anyone conveyed by ambulance: No | |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|---------|-------|-------|------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| SGU863H | Car | | | White | Slightly Damaged | 2 |
| SHD7306G | Car | HYUNDAI | IONIQ | Blue | Slightly Damaged | 1 |

| Details of Person Involved | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |

Sketch Plan Pg. 4



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20190828/7001

2 of 4

Report No. T/20190828/7001

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|----------------|--|--|
| Driver | | | |
| Name | JOTHI KRISHNAN | ID No. | S87326651 |
| Related Vehicle | SGU863H (Car) | Contact No. | 97678197 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | YOU CHAAI | ID No. | S1850362Z |
| Related Vehicle | SHD7306G (Car) | Contact No. | 93834013 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 2B,3,4,5 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Passenger | | | |
| Name | UNKNOWN | ID No. | UNKNOWN |
| Related Vehicle | SHD7306G (Car) | Contact No. | NIL |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 28/08/2019 at 2.55 a.m., I was driving my taxi, SHD7306G, Comfort Delgro, Blue Hyundai Ionic, along Ang Mo Kio Avenue 5, turning into Yio Chu Kang Road, at the cross junction.

The traffic light was green, and there was no vehicle from Buangkok Green direction, and hence I had made the right turn.

After turning, out of a sudden, I saw a white, SGU863H, coming towards my direction. I was unable to avoid the collision and hence there was an accident.

The white car had collided with the side of my taxi. My taxi damages are front left area badly damage.

Ambulance and traffic police officers came to the place. The driver and passengers of the white car



**SINGAPORE
POLICE FORCE**



T/20190828/7001

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 4

Report No. T/20190828/7001

CONTINUATION OF REPORT

were conveyed to hospital. My passenger left before the police officers came after she said she was okay and not injured.

Sketch Plan Pg. 6



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20190828/7001

4 of 4

Report No. T/20190828/7001

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

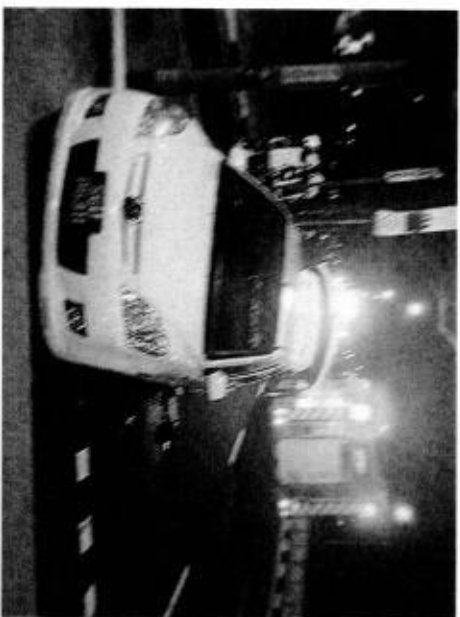
Officer In Charge Of Case:
TP / TPHQ /
MOHAMMED FEROUZ BIN HUSSEIN
Contact No.: 65476206

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
28/08/2019 05:03

Classification Of Case:



Attn: Kalvin Ang

Enquire Vehicle Insurance Details

SGU863H

28 Aug 2019 / 02:55:00

Successful

N12

NTUC INCOME INS CO-OP LTD

Previous

OK

SHD 73066

Team: ARC Repair TP(CLSO)1 JOB CARD Sales Order: 3949092 JC NO.: 305328520

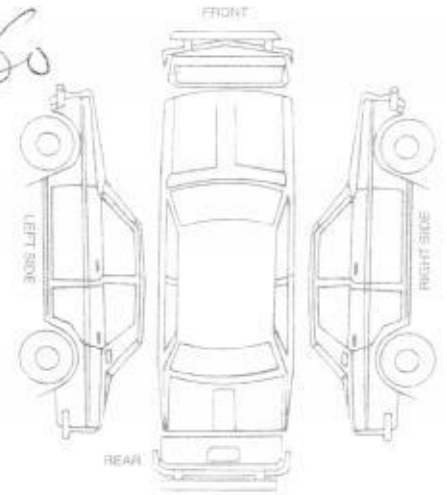
| | | |
|--------------------------------|--------------------------------|-------------------------------|
| OWNER | REGN NO.: SHD7306G | MILEAGE |
| COMFORT TRANSPORTATION PTE LTD | MAKE : HYUNDAI | FUEL |
| 7010045 | MODEL IONIQ(G2) | E.....1/2.....F |
| OWNER NO. | YR OF MANU 04.12.2018 | DATE/TIME IN 28.08.2019 02:55 |
| 383 SIN MING DRIVE | CHASSIS CODE KMHC851CVKU122015 | TARGET DATE |
| Singapore SINGAPORE 575717 | | COMPLETION DATE/TIME: |
| 65508755 (R) (P) (O) | | |
| OUNT CARD NO. | | |

JOB DESCRIPTION

Accident Date: 28.08.2019
NATURE: 3P 28.08.2019

S/NO LABOR CODE
000010 23-01

DESCRIPTION
TOWING FEE - \$60



KEYED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

| | |
|---|------------------------------|
| Signature Slip | Exit Pass |
| No.: SHD7306G | Vehicle No.: SHD7306G |
| LKE | |
| Signature/Date | Name of Service Advisor |
| Signature/Date | Date |
| turned to Service Reception upon collection | To be kept by Security Guard |

REPAIR ESTIMATE*

VEHICLE NO : SHD 7306G

DATE 28/8/2019 14:05

MAKE :

MODEL : HYUNDAI IONIQ

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|-----|---|------|------------|--------------|
| | Bonnet — Rklh | | | \$ 2,253.80 |
| | Bonnet Hinge (LH/RH) x repair | | \$ 118.70 | \$ 237.40 |
| | Bonnet Lock x su | | | \$ 127.30 |
| | Radiator Grille — ca | | | \$ 1,227.50 |
| | Front Bumper Cover — ca | | | \$ 418.30 |
| | Front Bumper Sponge — tm | | | \$ 86.90 |
| | Front Bumper Reinforcement — Bnd | | | \$ 1,075.10 |
| | Front Bumper Grille (RH) — m300g | | | \$ 186.90 |
| | Front Bumper Towing Cover — m300g | | | \$ 29.00 |
| | Front Bumper Centre Moulding — ca | | | \$ 188.00 |
| | Front Bumper Lower Stiffener + repair | | | \$ 85.10 |
| | Front Bumper License Plate + SAC | | | \$ 17.40 |
| | Front Bumper Lip — cut | | | \$ 35.10 |
| | Front Bumper Bracket Top (LH/RH) LH x RH ✓ ca | \$ | 35.00 | \$ 70.00 |
| | Front Bumper Bracket (LH/RH) LH x RH — ca | \$ | 28.00 | \$ 56.00 |
| | Front Bumper Side Bracket Support Xsu | \$ | 12.00 | \$ 24.00 |
| | Front Bumper Clips 10 pcs — me | | | \$ 22.00 |
| | Front Bumper Strip Assy Xsu | | | \$ 29.40 |
| | Headlamp Support Panel Assy ✓ ca | | | \$ 949.30 |
| | Headlamp (RH) — ca | | | \$ 1,198.80 |
| | Day Light, RH — m300g | | | \$ 642.50 |
| | Day Light Wire, RH Xsu | | | \$ 585.50 |
| | Front Fender (RH) — Rklh | | | \$ 490.70 |
| | Front Fender Shield (RH) x su | | | \$ 114.70 |
| | Front Fender Retainer x su | | | \$ 41.40 |
| | Emblem-Blue Drive (RH) — me | | | \$ 26.60 |
| | Wiper Container Xsu | | | \$ 68.00 |
| | Wiper Container Motor Xsu | | | \$ 78.00 |
| | Front Door (RH) x repair | | | |
| | Tube - liquid / \$ 245.70 SUB TOTAL | | | \$ 10,364.70 |
| | Lumish Assy - Jelle RH / \$ 41.90 LESS 20% | | | \$ 2,072.94 |
| | DISCOUNTED TOTAL | | | \$ 8,291.76 |
| | Front Number Plate — ca | | -10% | \$ 25.00 |
| | Front No Plate Trim Cover — ca | | -10% | \$ 30.00 |
| | Front Door Comfort Log. — me | | -10% | \$ 75 |
| | | | | \$ 55.00 |

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|---|----------------------------------|------|------------|---------------------|
| | Labour Charge | | | |
| | Panel Beating | | | \$ 1,200.00 800 |
| | Spray Painting Charge | | | \$ 900.00 800 |
| | Wiring Charge | | | \$ 50.00 20 |
| | Tuff Kote | | | \$ 50.00 20 |
| | Towing Charge | | | \$ 90.00 X |
| | Remove/Refix Aircon & Refill Gas | | | \$ 150.00 60 |
| | TOTAL LABOUR | | | \$ 2,440.00 |
| | ESTIMATE TOTAL | | | \$ 10,786.76 |
| | | | | 11092.56 |
| <p>Kaluz 16/11/15</p> <p>28/8/15 1500L</p> <p>3 Days</p> <p>P/P</p> <p>Before Paint photo</p> | | | | |
| <div> <p>LKS Auto Centre Ltd hereby notifies the Repairer of the following:</p> <ul style="list-style-type: none"> To resurvey before/after spray painting To display damaged part(s) during resurvey Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" basis No illegal modifications are allowed Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company <p>Acknowledged by Repairer</p> <p>Signature:</p> <p>Date:</p> </div> | | | | |
| 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. | | | | |



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

| | | | |
|--|--|--|--|
| 1. Date: <u>28-8-19</u> Time Received: | | 3. Vehicle Type: | 4. Type of Towing: |
| 2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : | | <input type="checkbox"/> Private <input type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay) | <input type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up |
| Contact No. : <u>SHD 73064</u> | | 5. Nature of Service: | 6. Parts Replaced/Remarks: |
| Vehicle No. : <u>93834013</u> | | | |
| Make / Model / Colour : | | | |
| Email : | | <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery | |

| | | | |
|---|--|--|--|
| 7. Location: <u>9880 BUNGAOK GREEN</u> | | 8. Vehicle Tow - In Workshop: | |
| 9. Preferred Workshop: | | <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi | |
| <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: | | | |

| | | | |
|---|--|---|--|
| 10. Odometer Reading : <u>149203</u> | | 11. Radio / CD Player | |
| Fuel Level : <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E | | <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested | |

Job Attended

| | | |
|---|--|--|
| 12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input checked="" type="checkbox"/> QA <input type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS | | |
| Name of Driver : <u>WEE</u> | | |
| Vehicle No. : <u>YQ 1673</u> | | |
| Time Dispatch : <u>28-8-19</u> | | |
| Time of Arrival : _____ | | |
| Time Completed : _____ | | # : Cracked X : Dented / : Scratched O : Missing Signature of Customer |

Cash Invoice Details (if applicable)

| | |
|------------------------|--|
| 13. Cash Invoice No. : | |
|------------------------|--|

Customer Acknowledgement

I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.

I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.

Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

28-8-19 Date _____ Time _____

Signature of Customer _____

4. WORKSHOP

| | | |
|-------------------------------|------------------------|------------------------------------|
| Name of Attending Staff/Guard | Date & Time of Arrival | Signature of Attending Staff/Guard |
|-------------------------------|------------------------|------------------------------------|

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 31.08.2019
Time: 11:15:52
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 : 305328520
REGN NO : SHD7306G
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G2)
DATE OF REGN : 04.12.2018
DATE/TIME IN : 28.08.2019 02:55
ACCIDENT DATE : 28.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

| | | | | | | | |
|------|-------------------|---------------------------|---|---|----------|-------|----------|
| 0001 | 04-01-0104-0572-G | IONIQVC PANEL ASSY HOOD# | 1 | L | 2,253.80 | 20.00 | 1,803.04 |
| 0002 | 04-01-0104-2164-G | IONIQVC GRILLE ASSY-RADIA | 1 | L | 1,227.50 | 20.00 | 982.00 |
| 0003 | 04-01-0104-2534-G | IONIQV2 COVER-FR BUMPER# | 1 | L | 418.30 | 20.00 | 334.64 |
| 0004 | 04-01-0104-2419-G | IONIQ BEAM COMPLETE-FR BU | 1 | L | 1,075.10 | 20.00 | 860.08 |
| 0005 | 04-01-0104-0635-G | IONIQ ABSORBER-FRONT BUMP | 1 | L | 86.90 | 20.00 | 69.52 |
| 0006 | 04-01-0104-0633-G | IONIQ MOULDING-FRONT BUMP | 1 | L | 35.00 | 20.00 | 28.00 |
| 0007 | 04-01-0104-4991-G | IONIQ LAMP ASSY-DAY RUNNI | 1 | L | 642.50 | 20.00 | 514.00 |
| 0008 | 04-01-0104-2915-G | IONIQVC LAMP ASSY-HEAD RH | 1 | L | 1,198.80 | 20.00 | 959.04 |
| 0009 | 04-01-0104-0573-G | IONIQVC PANEL-FENDER RH# | 1 | L | 490.70 | 20.00 | 392.56 |
| 0010 | 04-01-0104-0653-G | IONIQ CAP-FRONT HOOK | 1 | L | 29.00 | 20.00 | 23.20 |
| 0011 | 04-01-0104-0634-G | IONIQ GRILLE-FRONT BUMPER | 1 | L | 186.90 | 20.00 | 149.52 |
| 0012 | 04-01-0104-2417-G | IONIQVC MOULDING-FRT BUMP | 1 | L | 188.00 | 20.00 | 150.40 |
| 0013 | 04-01-0104-2418-G | IONIQ LIP-FR BUMPER | 1 | L | 35.10 | 20.00 | 28.08 |

COMFORTDELGRO ENGINEERING PTE LTD

Date: 31.08.2019

REPAIR ESTIMATE

Time: 11:15:52

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 : 305328520
 REGN NO : SHD7306G
 MILEAGE : 0000000000
 MAKE : HYUNDAI
 MODEL : IONIQ(G2)
 DATE OF REGN : 04.12.2018
 DATE/TIME IN : 28.08.2019 02:5
 ACCIDENT DATE : 28.08.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

| | | | | | |
|------------------------|------------------------------|------|--------|-------|----------------------|
| 0014 04-01-0104-3913-G | IONIQ EMBLEM-BLUE DRIVE R | 1 L | 26.60 | 20.00 | 21.28 |
| 0015 04-01-0104-3918-G | IONIQ BRACKET-FR BUMPER S | 1 L | 28.00 | 20.00 | 22.40 |
| 0016 04-01-0101-0111-G | HYUNDAI BUMPER COVER CLIP | 10 L | 22.00 | 20.00 | 17.60 |
| 0017 28-01-0103-0003-A | (I40)FRT DOOR LOGO SONATA | 1 N | 75.00 | 10.00 | 67.50 |
| 0018 FNPS | NO PLATE(S)W TRIM COVER F | 1 N | 55.00 | 10.00 | 49.50 |
| 0019 04-01-0104-0641-G | IONIQ CARRIER ASSY-FRONT | 1 L | 949.30 | 20.00 | 759.44 |
| 0020 01-01-0104-2063-G | IONIQV2 TUBE-LIQUID | 1 L | 245.70 | 20.00 | 196.56 |
| 0021 04-01-0104-2589-G | IONIQV2&3 GARNISH ASSY-DELTA | 1 L | 42.80 | 20.00 | 34.24 |
| | Rh | | | | |
| | | | | | SUB-TOTAL : 7,462.60 |

JOB NATURE

0000 23-01 TOWING FEE 0.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 31.08.2019

Time: 11:15:52

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 : 305328520
REGN NO : SHD7306G
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G2)
DATE OF REGN : 04.12.2018
DATE/TIME IN : 28.08.2019 02:5
ACCIDENT DATE : 28.08.2019

| JOB / PARTS DESCRIPTION | | QTY | IND | UNIT-PRICE | DISC% | AMOUNT |
|-------------------------|------------------------------|-----|-----|------------|-------|------------|
| 0001 L | PANEL BEATING | | | 800.00 | | |
| 0002 23-502 | SPRAYPAINT ON AFFECTED AREA | | | 800.00 | | |
| 0003 17-01 | CHECK ALL LIGHTING | | | 20.00 | | |
| 0004 20-00 | TUFF COAT ON AFFECTED PARTS. | | | 20.00 | | |
| 0005 18-01 | TO VAC. & TOP UP A/C GAS | | | 60.00 | | |
| SUB-TOTAL | | | | | | : 1,700.00 |
| TOTAL | | | | | | : 9,162.60 |

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

**COMFORTDELGRO
ENGINEERING**

Our Job Ref No 305328520

Date : 31.08.19

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

To : LKK

Fax :

Attn : Mr KALVIN ANG

Vehicle Reg No. SHD7306G CTPL

28.08.19

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

1. The repair job shall bill to: **NTUC** **SGU863H**
2. The finalized amount shall be:
- | | |
|---|-------------------|
| (a) Spare Parts after List discount | \$7,462.60 |
| (b) Labour Charges | \$1,700.00 |
| Total for Part-By-Part Repair Cost | \$9,162.60 |
| (c.) Lumpsum Repair (if applicable) | |
| Total for Lumpsum repair cost after Less: 20% | |
| Final Lumpsum Repair cost | |

3. Estimated normal period for repairs: 3 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 amountSignature : 

Name : LIM KWOK ENG

Tel : 62148316

Fax : 65468156

Signature : 

Name : Calvin

Date : 2/9/19

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:

**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/INC19015237/K1qf3n2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 11-09-2019



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

| | | | |
|--------------|----------------|----------------|------------|
| Insured Veh. | SGU 863H | Veh. Inspected | SHD 7306G |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | MT/1059953-002 | Excess (\$) | 0.00 |
| Assign From | | Assign Date | 28/08/2019 |

2. Vehicle Particulars & Condition

| | | | |
|--------------|-------------------|--------------|--------------------|
| Make & Model | HYUNDAI IONIQ | c.c | 1580 |
| Engine No. | HIDDEN | Year of Reg. | 2018 |
| Chassis No. | KMHC851CVKU122015 | Colour | BLUE |
| Odometer | 149203 | 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 O/S FRONT PORTION.
DAMAGES SEE DETAILS.

5. General Information

| | | | |
|----------------|--|-----------------|------------|
| Accident Date | 28/08/2019 | Inspection Date | 28/08/2019 |
| 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.

5b. Estimate Days of 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



Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 7306G

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|--|-------------------------------|---------------------------|-------------------|
| | <u>REPLACEMENT OF PARTS</u> | | | |
| 1 | BONNET | BUCKLED | 2,253.80 | 2,253.80 |
| 2 | BONNET HINGE (LH/RH) @\$118.70 | TO REPAIR SEE LABOUR | 237.40 | - |
| 1 | BONNET LOCK | SERVICEABLE | 127.30 | - |
| 1 | RADIATOR GRILLE | CRACKED | 1,227.50 | 1,227.50 |
| 1 | FRONT BUMPER COVER | CRACKED | 418.30 | 418.30 |
| 1 | FRONT BUMPER SPONGE | TORN | 86.90 | 86.90 |
| 1 | FRONT BUMPER REINFORCEMENT | BENT | 1,075.10 | 1,075.10 |
| 1 | FRONT BUMPER GRILLE (RH) | MISSING | 186.90 | 186.90 |
| 1 | FRONT BUMPER TOWING COVER | MISSING | 29.00 | 29.00 |
| 1 | FRONT BUMPER CENTRE MOULDING | CRACKED | 188.00 | 188.00 |
| 1 | FRONT BUMPER LOWER STIFFNER | TO REPAIR SEE LABOUR | 85.10 | - |
| 1 | FRONT BUMPER LICENSE PLATE | SERVICEABLE | 17.40 | - |
| 1 | FRONT BUMPER LIP | CUT | 35.10 | 35.10 |
| 2 | FRONT BUMPER BRACKET TOP (LH/RH) @\$35.00 | O/S CRACKED / N/S SERVICEABLE | 70.00 | 35.00 |
| 2 | FRONT BUMPER BRACKET (LH/RH) @\$28.00 | O/S CRACKED / N/S SERVICEABLE | 56.00 | 28.00 |
| 2 | FRONT BUMPER SIDE BRACKET SUPPORT @\$12.00 | SERVICEABLE | 24.00 | - |
| 10 | FRONT BUMPER CLIP | NECESSARY | 22.00 | 22.00 |
| 1 | FRONT BUMPER STRIP ASSY | SERVICEABLE | 29.40 | - |
| 1 | HEADLAMP SUPPORT PANEL ASSY | CRACKED | 949.30 | 949.30 |
| 1 | HEADLAMP (RH) | CRACKED | 1,198.80 | 1,198.80 |
| 1 | DAY LIGHT,RH | MISSING | 642.50 | 642.50 |
| 1 | DAY LIGHT WIRE,RH | SERVICEABLE | 585.50 | - |
| 1 | FRONT FENDER (RH) | BUCKLED | 490.70 | 490.70 |
| 1 | FRONT FENDER SHIELD (RH) | SERVICEABLE | 114.70 | - |
| 1 | FRONT FENDER RETAINER | SERVICEABLE | 41.40 | - |
| 1 | EMBLEM-BLUE DRIVE (RH) | NECESSARY | 26.60 | 26.60 |
| 1 | WIPER CONTAINER | SERVICEABLE | 68.00 | - |
| 1 | WIPER CONTAINER MOTOR | SERVICEABLE | 78.00 | - |

Report Ref No. NS/INC19015237/K1qf3n2

**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.:2 of 2

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|--|--|----------------------|---------------------------|-------------------|
| 1 | FRONT DOOR (RH)(NPA) | TO REPAIR SEE LABOUR | - | - |
| 1 | TUBE-LIQUID | BENT | 245.70 | 245.70 |
| 1 | GARNISH ASSY-DELTA RH | CRACKED | 42.80 | 42.80 |
| | LESS 20% DISCOUNT | | -2,130.64 | -1,836.40 |
| | | | 8,522.56 | 7,345.60 |
| | NETT ITEMS | | | |
| 1 | FRONT NUMBER PLATE (N) | CRACKED | 25.00 | 25.00 |
| 1 | FRONT NO PLATE TRIM COVER (N) | CRACKED | 30.00 | 30.00 |
| 1 | FRONT DOOR COMFORT LOGO (N) | NECESSARY | 75.00 | 75.00 |
| | LESS 10% DISCOUNT | | - | -13.00 |
| | | | 130.00 | 117.00 |
| | LABOUR | | | |
| | PANEL BEATING.INCLUSIVE OF THE REPAIR OF BONNET HINGE (LH/RH),FRONT BUMPER LOWER STIFFNER AND FRONT DOOR (RH). | | 1,200.00 | 800.00 |
| | SPRAY PAINTING CHARGE. | | 900.00 | 800.00 |
| | WIRING CHARGE. | | 50.00 | 20.00 |
| | TUFF KOTE. | | 50.00 | 20.00 |
| | TOWING CHARGE. | | 90.00 | - |
| | REMOVE/REFIX AIRCON & REFILL GAS. | | 150.00 | 60.00 |
| | | | 2,440.00 | 1,700.00 |
| | GRAND TOTAL | | 11,092.56 | 9,162.60 |
| RECOMMENDED COST OF REPAIRS (CONFIRMED) | | | | 9,162.60 |

Report Ref No. NS/INC19015237/K1qf3n2

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

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.