Quiveum: Kalvin REF: NS/NC/901	5363/Kl9f3 n2
	GNMENT
From: Date:	Veh No: SHA 4175 C Yr Regn: 15 Dec 2516
From: Date:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Tox / Prime Mover /
Management (Control of the Control o	Truck / Trailer or
ODITP WS/TP RES/OD RES/EVA/INV/MV	1/- / 7
To Insped Vehicle No:	:/2/
at WorKshop m/s	
Insured: SFX 3228T	
	Eng/No:
Policy Na 5088.490014-02 (27/03/2017-20/03/20)	C/No: KMILBYIUMH4097083
Claims No. MT / 1059928 -002	Gen. Cond: Good / Far / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder Jammed / Leaked / Burnt or
(Client's Record) Make of Veh;	Brake: Inorder/Jammed / Leaked / Burnt or
Make Of Yell,	Modi: NII / S/Rim / STD A/Rim or Tyre Size: F: 205/60 116
	1605.70746
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
	TOYO/YOKO or Hankish
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 1 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. + mm
Est Repairs:days Res.: Yes or No	D.O.A. 28/8/19 D.O.I. 29/8/19
Lum Sum: % 3 Val.: Yes or No	Survey held at CDGE (Loyang)
CA / REV / REP. / 24 HRS	Des, of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
SHA 4975C X	INC
SFX 3228T X	Us.
2/9/19 Cohmol 45\$2300/3Pgs	
C\$ 1.296-00 Red - 36%	
RECEIVED 0	2 SEP 2019
Date/Time, File Pass to? : Prell. Report	Days Of Repair:3
Ozbalia : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
Add Fee:	: Site Insp (\$)s+Rssi
	Interview (\$) Photos
Patent Format	160
2/8 \$ 2.300/-	

Policy Search Page 1 of 1



TP Claims against NTUC Income: Follow-Through Survey

Date: 2/9/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Claimant Vehicle No. Income Vehicle No. Date of Accident	Date of Accident
1	MT/1059899-002	COMFORT TRANSPORTATON PTE LTD	SHD 4765J	SMJ 6619U	27/8/2019
2	MT/1059928-002	COMFORT TRANSPORTATON PTE LTD	SHA 4175C	SFX 3228T	28/8/2019
3	MT/1060206-002	CITYCAB PTE LTD	SHA 8510S	SJJ 3777B	28/8/2019
4	MT/1060492-001	COMFORT TRANSPORTATON PTE LTD	SHB 6640H	PC 8446P	28/8/2019
2	MT/1059784-002	COMFORT TRANSPORTATON PTE LTD	SH 6131Z	FBH 921B	27/8/2019

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 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.

- 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.
- 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 15:07
Date Of Accident	28/08/2019 09:45
Exact Location Of Accident	ALONG BUKIT TIMAH ROAD TOWARDS NEWTON
Country/State of Loss	SINGAPORE

Country/State of Loss	SINOAFORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHA4175C	
Insured/Policyholder		
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD	
Co Reg No	199303821R	
Email Address	FLEETSAFTY@CDGTAXI.COM.SG	

Mobile Phone No

Alternative Phone No

OFFICE-65508768

Vehicle Particulars

Manufacturer HYUNDAI

Model I40

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?

If No, Please state action to be taken THIRD PARTY

Vehicle Category TAXI

Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT YES

Policy Number MCOM0015

Cover Note Number

Driver

Insurance Company

Name of Driver TING GUAN YONG

 NRIC No
 \$1501556Z

 Date Of Birth
 31/12/1961

 Occupation
 OUTDOOR

 Date Of Driving Pass
 18/10/1989

Driving Experience 29 YEARS AND 10 MONTHS

Gender MALI

Mobile Number (LOCAL) +65-90624802

Fax Number Contact Number

EMail Address NOEMAIL

Address

128A #07-500 CANBERRA STREET

Postcode

751128

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)

2

involved in the accident

YES

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?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

TAMPINES N NPP

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

SEE POLICE REPORT.

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

SFX3228T

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 17

Nature Of Damage

LEFT REAR

No. Of Passenger (Including Driver)

DETA		AI II ID	EDD	==	CON 4
DETA	ILS OF II	NJUR	EUF		SON I

Name

TING GUAN YONG

Approximate Age

58

Injuries Sustain

NECK, ARM

Injured person in which vehicle?

SHA4175C

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan Pg. 1

		NO WITH N
SKETCH PLAN	756	
BFSFX3	7787 78)	
DECCRIPE CIRCUMSTANCES OF T		
DESCRIBE CIRCUMSTANCES OF T		BUTCH TIMES
S(1,10)1 X11 X	THE TOTAL	2 1 (1017 (10)
ECLARATION We declare the foregoing particulars a OMFORT TO THE FOREGOINE APPORT		Ofivia Wendy
olicyholder's Signature ate & Time:	Oriver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: 2 8 AUG 2019 NRIC/FIN No.:

CIATRAC NeachPlanForm, VO



REPORT OF A TRAFFIC ACCIDENT

Race: Chinese

Occupation:

TAXI DRIVER



Date of Expiry:

1 of 3

Report No. T/20190828/2063

Police Station Of Origin: Tampines North NPP 461 Tampines Street 44 #01-56 SINGAPORE 520461 Tel No: 1800-7818999

Station Diary No.: Date/Time Report Made: Vide Report No.: 28/08/2019 12:59 Informant's Particulars Address: Name of Informant: APT BLK 128A CANBERRA STREET #07-500 SINGAPORE TING GUAN YONG 751128 Contact No .: ID Type / ID No .: Mobile: 90624802 Home/Office: NRIC NO / \$1501556Z Email: Nationality: SINGAPORE CITIZEN Type of Informant: Date of Birth: Age: Sex: Driver 57 31/12/1961 Male Institution / School Name: Language:

Driving Licence Information:

Class: 3

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/08/2019 09:45	Type of Location
Location: Along Road ' BUKIT TIMAI	H ROAD			One of Connect Limits
		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Traffic Control:		1157	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			É	Anyone conveyed by ambulance: No

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SFX3228T	Car					0
SHA4175C	Car				Slightly Damaged	1

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





2 of 3

Report No. T/20190828/2063

Police Station Of Origin:
Tampines North NPP

461 Tampines Street 44 #01-56 SINGAPORE
520461 CONTINUATION OF REPORT

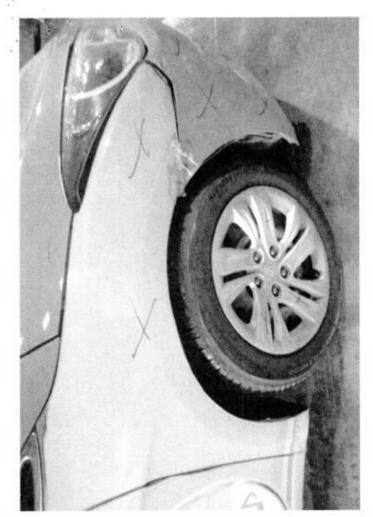
Tel No: 1800-7818999

Driver	SHESH HILL AND SHESH STORY OF THE SHESH			ID No.		S1501556Z	
Name	TING GUAN YONG			ID No.		313013302	
Related Vehicle	SHA4175C (Car)		Contact No.		90624802		
Hospital/Clinic	Y M CHAN CLINIC & SURGERY		Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL		
Date Treatment	28/08/2019 Date Dis		charge	NIL			
	ted Medical Leave	03	Degree	of Injury	Sligh	t	

Brief Details.

On 28/08/2019 at about 0945hr, I was driving my vehicle SHA4175C with one passenger along Bukit Timah Rd towards Newton on the extreme left lane. As I was driving, one vehicle bearing SFX3228T who was driving on the lane beside me, suddenly changed into my lane. I applied the brake however I could not stop in time thus I collided into the rear of the vehicle. I made a check on my passenger and he inform that he does not require any medical assistance at that point of time. I got out of my vehicle t take photos of the incident and left the location. I did not manage to exchange any particulars with the other driver.

I went to the clinic on 28/08/2019 and received 3 days of MC from 28/08/2019 to 30/08/2019. I have a in car camera that is facing the front only. That is all.

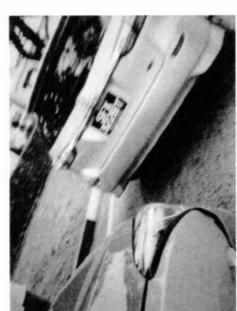


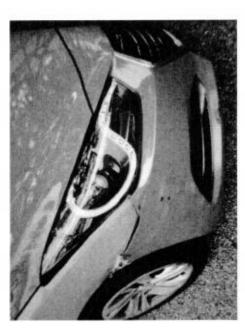


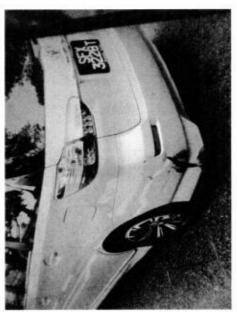
















COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

24 Senoko Loop Singapote 758150 7 Surigel Kadut Way Singapore 728791 501 Yehun Industrial Park A Singapore 76

Date/Time: 29.08.2019 10:06

Page: 1

Team:

ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305328527

STOMER

VMS ISTOMER NO.

DRESS

L. (A) (P) COMFORT TRANSPORTATION PTE LTD 7010045

383 SIN MING DRIVE Singapore SINGAPORE 575717

65508755

MILEAGE REGN NO.: SHA4175C MAKE: HYUNDAI 28.08.2019 13:45 MODEL I - 40YR OF MANU 15.12.2016 TARGET DATE CHASSIS CODE KMHLB41UMHU097083 COMPLETION DATE/TIME:

SCOUNT CARD NO.

JOB DESCRIPTION

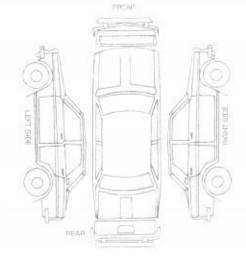
Accident Date: 28.08.2019 NATURE: 3P 28.08.2019

S/NO

A LABOR CODE

NOTUC-Right Front LICK/Kahin -

DESCRIPTION



UECHIE	200	E POLICE HE IN	-	
THE RESERVE OF THE RE	THE WAY	BURGING BUILDING	1.15	T. D.W.
HECKE	W. Alb. C 7	アンシー		I DTD

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nowledgement Slip

No.:

icle No.:

SHA4175C

LARRY

Vehicle No.:

Exit Pass

SHA4175C

ne of Service Advisor

Signature/Date

Name of Service Advisor

Date

To be kept by Security Guard

pe returned to Service Reception upon collection

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHA 4175C

DATE 28/8/2019 15:40

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	I A	Amount	
	Front Bumper Cover / Jefermel			\$	544.50	
	Front Bumper Grille (RH)			\$	41.60	
	Front Bumper Bracket Top (RH)			S	22.40	
	Front Bumper Bracket (RH)			S	24.60	
	Hoodlenn (BH)			S	1,388.00	
	Front Fender (RH)			S	566.30	
	Front Fender Shield (RH) X			S	175.90	
	Front Fender Retainer			S	24.60	
	Front Wheel Hub Cap,RH × 5			\$	107.10	
	SUB TOTAL			\$	2,895.00	
	LESS 20%			\$	579.00	
	DISCOUNTED TOTAL			S	2,316.00	
	Front Fender Advertisement Logo (RH)			\$	100.00	N
				s	100.00	
	Labour Charge				2	
	Panel Beating			s	400.00	
				S	600.00	4
	Spray Painting Charge			5	_	22
	Wiring		1111	0		
	Tuff Kote	no Consulta	ins hence notify	16	50.00	1
	Frt Wheel Alignment		PROPERTY OF THE STANDARDS	13	8000	1
	TOTAL LABOUR	orany belotic a spility damaged sprices are sub	partial furnity resurvey ect to confirmation on a "Nimout Prejudice" b	35/5 \$	1,180.00	
	- P8"	o party safety	Carlotte Manual Control Control	-21	2.507.00	
	ESTIMATE TOTAL	megal modifica eniemercary in	nontal is moved most most be resurveyed to approval from Insurance Co	mpa y\$	3,596.00	1
	Kahralle	24 Charles	Repairer			
rach Ma	K. Lincke 1 29/8/19 11156	genure:				
	3 Prys Us AAe Rom p	4				
	This is an initial estimate based on a visual inspection of th		hicle. The final rena	ir quant	um will	
	be prepared after the vehicle is surveyed by a motor Survey					



Our Job Ref No .

6 Overrun

Remarks:

305328527

Date

: 30. Aug. 2019

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

FINA	LIZAT	ION FORM						
То	LKK				Fax:			
Attn		KALVIN						
Vehi	/ehicle Reg No. : SHA4175C				Date	e of Accident:	28. Aug. 2019	
The	survey	and estimates of th	e repairs of the	above-mer	ntioned	d vehicle are as f	follows:-	
1.	The	repair job shall bill t	o:	NTUC			SFX3228T	
2.	The	finalized amount sh	all be:					
	(a) Spare Parts after List discount							
	(b)	Labour Charges						
	3.00	Total for Part-By-Part Repair Cost						
	(c.)	Lumpsum Repair Total for Lumpsu Final Lumpsum	m repair cost af	ter Less:			\$2,300.00	
3.	Estir	nated normal period	d for repairs:	3	wo	orking days.		
4.		shall treat the abovin 7 working days		orrect and	Conf	irmed if there is	no reply from you	
5.	Thank you for your assistance.				We confirm the estimates and finalized amount			
	Signature :				Signature: Name: Calab Date: 2/9/19			
For	Officia	l Use Only						
		Item	Amount	0.0000000000000000000000000000000000000	ment ched or No	Confirm By (Signature)	Remarks	
1. F	Rental F	Rate P/Day		YE	S			
2. L	oss of	Income Paid						
3. 5	Survey	Fees						
		arch Fee	\$7.49					
		Fees (on behalf	,					



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 INSUI	RANCE CO-OPERATIVE LTD	Ref:	NS/INC1901536	63/K1sf3n2		
73 BRAS BASAH ROA #05-01 NTUC TRADE 189556	ND UNION HOUSESINGAPORE	Date:	05-09-2019 INC4			
1. Indonesia.	Policy Particulars	:- THIR	D PARTY CLAIM			
Insured Veh.	SFX 3228T	_	nspected	SHA 4175C		
Policy No.	5088490014-02	Coverage (\$)		0.00		
Claim No.	MT/1059928-002	Excess (\$) Assign Date		0.00		
Assign From				29/08/2019		
2.	Vehicle Parti	culars &	& Condition			
Make & Model	HYUNDAI 140	c.c		1685		
Engine No.	Engine No. HIDDEN		of Reg.	2016		
Chassis No.	KMHLB41UMHU097083	Colour		BLUE		
Odometer	486631	Steering		IN ORDER		
Brakes	IN ORDER	Modification		STANDARD ALLOY RIM		
General	FAIR					
3.	Condit	ions of	Tyres	RANGE (BLOCK		
	Size	Make		Balance		
R/H Front Tyre	205/60 R16	HANK	оок	7 mm		
L/H Front Tyre	205/60 R16	HANK	ООК	7 mm		
R/H Rear Tyre	205/60 R16	HANK	ООК	7 mm		
L/H Rear Tyre	205/60 R16	HANK	оок	7 mm		
4.	Descripti	on of D	amages			
THE VEHICLE SU	JSTAINED DAMAGES AT THE O/	S FRON	T PORTION.			
5.		I Inform	nation			
Accident Date	28/08/2019	Inspe	ction Date	29/08/2019		
Survey held at	/ Toolston Suit					
	59 LOYANG DRIVE SINGAPORE 508969					
5a.		emarks		L HARVING THE WAY		
A)THE INSPECTI B)IN ACCORDAN	ON WAS CONDUCTED ON A"WI ICE TO YOUR INSTRUCTIONS, V	THOUT F	PREJUDICE" BASIS NOT AUTHORISE	S. D REPAIRS.		
5b.	Estimate	Days o	f Repair			
ESTIMATED NO	RMAL 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. SHA 4175C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER COVER	DEFORMED	544.50	544.50
1	FRONT BUMPER GRILLE (RH)	SERVICEABLE	41.60	82
-1	FRONT BUMPER BRACKET TOP (RH)	SERVICEABLE	22.40	100
1	FRONT BUMPER BRACKET (RH)	CRACKED	24.60	24.60
1	HEADLAMP (RH)	CRACKED	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	8.
1	FRONT WHEEL HUB CAP,RH	SERVICEABLE	107.10	
	LESS 20% DISCOUNT		-579.00	-504.68
			2,316.00	2,018.72
	SPECIAL NETT ITEMS			
1	FRONT FENDER ADVERTISEMENT LOGO (RH)(SN)	NECESSARY	100.00	100.00
	33 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m		544.50 41.60 22.40 24.60 1,388.00 566.30 175.90 24.60 107.10 -579.00 2,316.00	100.00
	LABOUR			
	PANEL BEATING.		400.00	300.00
	SPRAY PAINTING CHARGE.		600.00	400.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.		50.00	20.00
	FRT WHEEL ALIGNMENT.	NOT NECESSARY	80.00	
	6 (1930 - 1) - 3 (1930 - 193) 17 (1930 - 1940) 18 (1930 - 1930) 18 (1930		1,180.00	740.00
	GRAND TOTAL		3,596.00	2,858.72
i i inc	RECOMMENDED COST OF LUMP SUM REPAIRS	Water State State		2,300.0

RECOMMENDED COST OF LUMP SUM REPAIRS	2,300.00
(TO ITS PRE-ACCIDENT CONDITION)	
(CONFIRMED)	

Report Ref No. NS/INC19015363/K1sf3n2

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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