

(08/11/13)

Surveyor: Kevin

REF: NS/INC19015371 K11F312

**ASSIGNMENT**

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

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

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

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

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

of \_\_\_\_\_

Insured: FBH 921B

Policy No: 50628-5071-05 (1/03/2019-10/03/2020)

Claims No: WT/1059784-002

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: SH 61312 Yr Regn: 23 Aug 2017

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Prius c.c. 1798

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading: 247105 T/Radio: Insured / Std / NI / NA

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

C/No: JTDKBJF4X03562292

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / A/Rim or

Tyre Size: F: 195/65R15

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

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / QHTSU / PIR / SUMI /

TOYO / YOKO or Westlake

Front Rear

R/Bal. 2 mm R/Bal. 2 mm

L/Bal. 2 mm L/Bal. 2 mm

D.O.A. 27/8/19 D.O.I. 29/8/19

Survey held at: CJGE (Loyang)

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

Rear

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

Date / Time	Action / Instruction
	SH 61312 X <span style="float: right;">INC</span>
	FBH 921B X <span style="float: right;">45</span>
2/9/19	Amount 45 \$ 650 / 26% (Red: 1444.23, 68%)
	RECEIVED 02 SEP 2019

Date/Time, File Pass to?  : Prell. Report

1) 219 Typist  : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee:  : Site Insp (\$ \_\_\_\_\_)  : S + RS, SI

: Interview (\$ \_\_\_\_\_) Photos

Survey Fee:

Transportation:

160

eBaoTech

General Claim

Hello, NAC\_PAYA\_UBI\_800601

Change Language

Change Password

Log Out

My Desktop  
Notice of Loss

Policy Query

Policy No.

Date of Accident

Vehicle No. (For Motor)

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5062825071-05		LOO LAY CHOO	S17373741	GMC	Third Party, Fire & Theft	FBH921B	FBH921B	11/03/2019	10/03/2020

Continue

## 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	29/08/2019 09:10
Date Of Accident	27/08/2019 22:45
Exact Location Of Accident	NORTH BRIDGE RD XJUNCTION OF STAMFORD RD.
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH6131Z
<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	TOYOTA
Model	PRIUS HYBRID 4G
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

### Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

### Driver

Name of Driver	LOW CHIN FARN
NRIC No	S1736329H
Date Of Birth	26/01/1966
Occupation	OUTDOOR
Date Of Driving Pass	24/06/1985
Driving Experience	34 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96810528
Fax Number	
Contact Number	
Email Address	CHINFARN@SINGNET.COM.SG

Address	BLK 28 GHIM MOH LINK #20-270
Postcode	270028
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

### 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

REFER 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	FBH921B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	LOO LAY CHOO
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

FRONT

No. Of Passenger (Including Driver)

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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

*[Handwritten Signature]*

28/8/19

JACKSON JIA

Policyholder's Signature  
Date & Time:

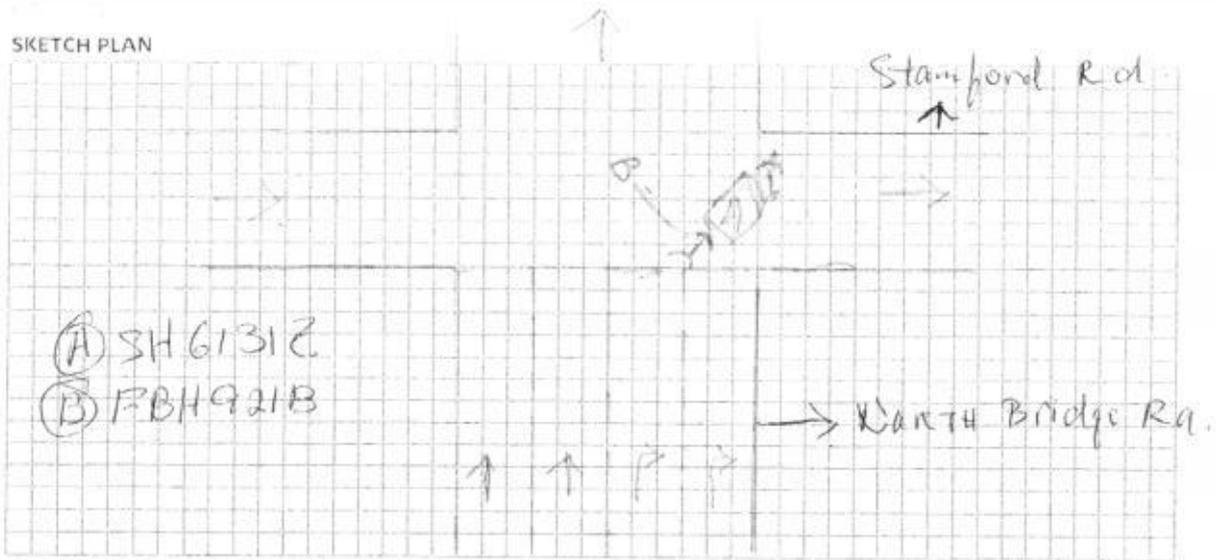
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/8/2019 at about 2245 hrs, I vehicle A was turning right to Stanford road - I was waiting for pedestrian to cross the road. while waiting vehicle B came from behind hit onto vehicle A rear portion. no one was injured at that time.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
 (C) REG NO: 198313821R

*[Handwritten Signature]*

28/8/19  
 JACKSON  
 (CARE)

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.:

Team: ARC Repair TP(CLSO)1

## JOB CARD

Sales Order:

JC NO.: 305328656

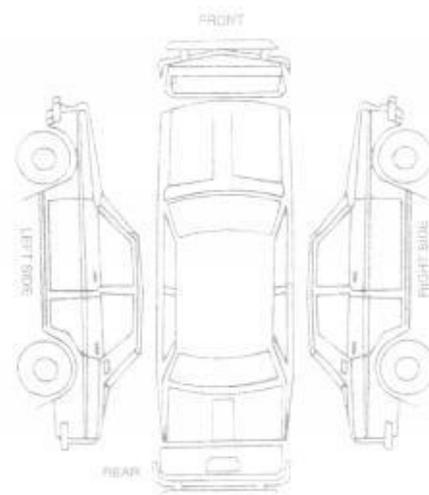
CUSTOMER:  COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (R) (P) (O)	REGN NO.:	SH 6131Z	MILEAGE
	MAKE:	TOYOTA	FUEL E.....1/2.....F
	MODEL	PRIUS HYBRID(G4)	DATE/TIME IN 28.08.2019 16:30
	YR OF MANU.	23.08.2017	TARGET DATE
	CHASSIS CODE	JTDKB3FUX03563392	COMPLETION DATE/TIME:

### JOB DESCRIPTION

Accident Date: 27.08.2019

NATURE: 3P 27.08.2019

S/NO                      LABOR CODE                      DESCRIPTION



CHECKED & PASSED OUT BY: \_\_\_\_\_

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SH 6131Z                      CHIANG

Vehicle No.: SH 6131Z

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE

VEHICLE NO: SH 6131Z

29/8/2019 11:32

*After*

MAKE :

*Quany*

MODEL : TOYOTA PRIUS

PARTS DESCRIPTION	QTY	UNIT PRICE	AMOUNT
REAR BUMPER <i>x repa</i>			\$ 458.60
REAR BUMPER RE-INFORCEMENT <i>x su</i>			\$ 318.80
REAR BUMPER UNDER COVER <i>- cut</i>			\$ 552.60
REAR BUMPER SIDE RETAINER <i>x su</i>			\$ 112.70
REAR BUMPER CLIPS <i>ne</i>			\$ 22.00
SUB TOTAL			\$ 1,464.70
LESS 25%			\$ 366.18
DISCOUNTED TOTAL			\$ 1,098.53
REAR BUMPER REVERSE SENSOR <i>x su</i>			\$ 135.70
REAR BUMPER RUBBER MAT <i>x m</i>			\$ 50.00
			\$ 185.70
LABOUR CHARGE			
Panel Beating			\$ <del>400.00</del> <sup>200</sup>
Spray Painting Charge			\$ <del>300.00</del> <sup>200</sup>
Wiring Charge			\$ 30.00 <i>x su</i>
Remove/Refix Reverse Sensor			\$ 80.00 <i>x su</i>
TOTAL LABOUR			\$ 810.00
ESTIMATE TOTAL			\$ 2,094.23

NETT  
NETT

*Kalvin LEE*  
*29/8/19 1335hrs*  
*2 Days*  
*U/S*  
*After Repair photo.*

*[Faint text and signature lines]*

Acknowledged by Repairer  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

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.

## COMFORTDELGRO ENGINEERING PTE LTD

Date: 30.08.2019

Time: 16:31:03

Page: 1

## REPAIR ESTIMATE

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

JOB NO : 305328656  
 REGN NO : SH 6131Z  
 MILEAGE : 0000000000  
 MAKE : TOYOTA  
 MODEL : PRIUS HYBRID(G4)  
 DATE OF REGN : 23.08.2017  
 DATE/TIME IN : 28.08.2019 16:30  
 ACCIDENT DATE : 27.08.2019

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001	04-01-0302-2287-G	PRIG4 GUARD-REAR BUMPER C	1	0.00	0.00	0.00
0002	04-01-0302-2267-G	PRIVC BUMPER PIECE	10	0.00	0.00	0.00

SUB-TOTAL : 0.00

## JOB NATURE

0000	PB	LUMP SUM		650.00		
------	----	----------	--	--------	--	--

SUB-TOTAL : 650.00

TOTAL : 650.00

AUTHORISED : YES / NO

MVA NAME & SIGNATURE  
 DATE :

SURVEYOR NAME & SIGNATURE  
 DATE :





# 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/INC19015371/K1tf3n2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 05-09-2019	
Code: INC4			
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	FBH 921B	Veh. Inspected	SH 6131Z
Policy No.	5062825071-05	Coverage (\$)	0.00
Claim No.	MT/1059784-002	Excess (\$)	0.00
Assign From		Assign Date	29/08/2019
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FUX03563392	Colour	BLUE
Odometer	247105	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	WEST LAKE	7 mm
L/H Front Tyre	195/65 R15	WEST LAKE	7 mm
R/H Rear Tyre	195/65 R15	WEST LAKE	7 mm
L/H Rear Tyre	195/65 R15	WEST LAKE	7 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	27/08/2019	Inspection Date	29/08/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days	



# National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

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



Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 6131Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	TO REPAIR SEE LABOUR	458.60	-
1	REAR BUMPER RE-INFORCEMENT	SERVICEABLE	318.80	-
1	REAR BUMPER UNDER COVER	CUT	552.60	552.60
1	REAR BUMPER SIDE RETAINER	SERVICEABLE	112.70	-
10	REAR BUMPER CLIPS	NECESSARY	22.00	22.00
	LESS 25% DISCOUNT		-366.18	-143.65
			1,098.52	430.95
<b>SPECIAL NETT ITEMS</b>				
1	REAR BUMPER REVERSE SENSOR (SN)	SERVICEABLE	135.70	-
1	REAR BUMPER RUBBER MAT (SN)	NOT NECESSARY	50.00	-
			185.70	-
<b>LABOUR</b>				
	PANEL BEATING.INCLUSIVE OF THE REPAIR OF REAR BUMPER.		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.	NOT NECESSARY	30.00	-
	REMOVE/REFIX REVERSE SENSOR.	NOT NECESSARY	80.00	-
			810.00	400.00
<b>GRAND TOTAL</b>			<b>2,094.22</b>	<b>830.95</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>650.00</b>

Report Ref No. NS/INC19015371/K1f3n2

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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