

eBaoTech

General Claim

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Policy Query

Policy No.

Date of Accident

12/10/2019 08:22

Vehicle No. (For Motor)

GBE3280M

Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5075077936-03		CHUAN HON GAS SUPPLIES	\$3055865C	GCV	Third Party	GBE3280M	GBE3280M	27/10/2018	26/10/2019

TP Claims against NTUC Income: Follow-Through Survey

Date : 17/10/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	tentative repair cost
1	MT/1066542-002	COMFORT TRANSPORTATION PTE LTD	SHA 1293P	SJD 6389A	11/10/2019	\$ 4,461.58	\$ 2,400.00
2	MT/1067289-001	COMFORT TRANSPORTATION PTE LTD	SHD 7193P	GNE 3280M	12/10/2019	\$ 2,354.64	\$ 1,800.00
3	MT/1063880-002	SMRT TAXIS PTE LTD	SHB 5830H	SKM 8555P	25/09/2019	\$ 13,558.41	\$ 4,317.73

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.
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	14/10/2019 08:22
Date Of Accident	12/10/2019 20:20
Exact Location Of Accident	PIE TOWARDS TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD7193P
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	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?	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	ABDUL RASHID BIN HARON
NRIC No	S7209970B
Date Of Birth	05/04/1972
Occupation	OUTDOOR
Date Of Driving Pass	15/03/2001
Driving Experience	18 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81121954
Fax Number	
Contact Number	
Email Address	YUMARQ@YAHOO.COM.SG

Address	BLK 27 TELOK BLANGAH WAY #06-1018
Postcode	090027
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	HIT BY FALLEN TREE / OTHER OBJECTS
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: : MALE

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 * TYPE OF ACCIDENT :- HIT BY FALLING OBJECT FROM LORRY

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	GBE3280M
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM ZHIN LIANG
NRIC/Passport Number	
Contact Number	97889842
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

NO DAMAGED

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. 199303321R

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/PIN No.: 13 OCT 2017

SIAMSK SketchPlanForm_V2



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 12/10/19 AT ABOUT 20:20, I WERE DRIVING ON
 P/E TOWARDS TUNE. A METAL OBJECT FELL FROM
 A LORRY (GBE 3280M) AND HIT INFRONT OF MY
 TAXI CAUSING DAMAGE TO MY FRONT TAXI BOTH
 OF US STOP AND CHANGE PARTICULARS. THE LORRY
 DRIVER ADMIT OBJECT CAME FROM HIS LORRY.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
 CO. REG. NO. 100303821R

Policyholder's Signature
 Date & Time:

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

Ofivia Wendy

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

Team: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO: 305340923

MEMO	REGN NO. SHD7193P	MILEAGE
COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
7010045	MODEL: I-40	E. 1/2 F.
MEMO NO. 383 SIN MING DRIVE	DATE/TIME IN: 13.10.2019 08:50	
SSS Singapore SINGAPORE 575717	YR OF MANU: 11.11.2016	TARGET DATE
65508755	CHASSIS CODE: RMFLB41UMHU096433	COMPLETION DATE/TIME
UNT CARD NO.		

Accident Date: 12.10.2019
NATURE: 3P 12.10.19

JOB DESCRIPTION

3/NO	LABOR CODE	DESCRIPTION
		

ED & PASSED OUT BY: _____

SERVICE ADVISOR _____ CUSTOMER'S SIGNATURE _____

Engement Slip	Exit Pass
Vehicle No.: SHD7193P	Vehicle No.: SHD7193P
Signature/Date	Signature/Date
Name of Service Advisor	Name of Service Advisor
Date	Date

REPAIR ESTIMATE

Page: 1

JOB NO	:	305340923
REGN NO	:	SHD7193P
MILEAGE	:	0000000000
MAKE	:	HYUNDAI
MODEL	:	I-40
DATE OF REGN	:	11.11.2016
DATE/TIME IN	:	13.10.2019 08:50
ACCIDENT DATE	:	12.10.2019

QTY	IND	UNIT-PRICE	DISC%	AMOUNT
-----	-----	------------	-------	--------

0001	04-01-0103-2322-A	FRONT BUMPER	1	1,052.20	20.00	841.76	/	cr
0002	04-01-0103-2164-A	RADIATOR GRILLE	1	1,110.00	20.00	888.00	/	cr
0003	04-01-0103-4891-G	FRT BUMPER GRILLE LH	1	93.60	20.00	74.88	/	cut

SUB-TOTAL : 1,804.64

0000 PB	PANEL BEATING
0001 SP	SPRAYPAINT CHARGE

SUB-TOTAL : 550.00

TOTAL : 2,354.64

_____ AUTHORIZED : YES / NO
 SURVEYOR NAME & SIGNATURE
 DATE : _____

Kalvin 10/19
14/10/19 1050h
2 Days
4s
After Repair photo

[illegible]

Our Job Ref No : 305340923

Date : 16/10/19

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHD7193P

Date of Accident : 12-Oct-19

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

1. The repair job shall bill to: NTUC --- GBE3280M

2. The finalized amount shall be:

(a) Spare Parts after List discount

(b) Labour Charges

Total for Part-By-Part Repair Cost

(c) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20%

Final Lumpsum Repair cost

\$1800.00

~~\$1,850.00~~

~~\$1,850.00~~

3. Estimated normal period for repairs: 2 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 amount

Signature : 

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 17/10/19

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/INC19018104/K1sf3n2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 18-10-2019	
		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	GBE 3280M	Veh. Inspected	SHD 7193P
Policy No.	5075077936-03	Coverage (\$)	0.00
Claim No.	MT/1067289-001	Excess (\$)	0.00
Assign From		Assign Date	14/10/2019
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMHU096433	Colour	BLUE
Odometer	344373	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	12/10/2019	Inspection Date	14/10/2019
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:		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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 7193P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER	CRACKED	1,052.20	1,052.20
1	RADIATOR GRILLE	CRACKED	1,110.00	1,110.00
1	FRT BUMPER GRILLE LH	CUT	93.60	93.60
	LESS 20% DISCOUNT		-451.16	-451.16
			1,804.64	1,804.64
LABOUR				
	PANEL BEATING.		300.00	280.00
	SPRAYPAINT CHARGE.		250.00	200.00
			550.00	480.00
GRAND TOTAL			2,354.64	2,284.64
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,800.00

Report Ref No. NS/INC19018104/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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