

Surveyor: Kalvin

REF: NS/INC 19019219/KISf312

# 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: YN 9336C  
 Policy No: 5033987593-04 (28-01/2019 - 27/01/2020)  
 Claims No: MT/1069193 -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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SHA 3533J Yr Regn: 28 Apr, 2016  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / ~~Truck~~ / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Hyundai Ix35 C.C. 165  
 Colour: Blue A/C: Insured / Std / NI / NA  
 Sp. Reading: 547568 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: KMHL84UM64087866  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / ~~Inorder~~ / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Inorder / ~~Inorder~~ / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modl: Nil / S/Rim / STD / ~~S/Rim~~ or \_\_\_\_\_  
 Tyre Size: F: 205/60R16  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Waltale  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal. 7 mm R/Bal. 7 mm  
 L/Bal. 7 mm L/Bal. 7 mm  
 D.O.A. 30/10/19 D.O.I. 30/10/19  
 Survey held at C/DHE (Loyang)  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
Front O/S  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SHA 3533J - (24) TO 18014473/ Gish/Lg2 DOA - 07/06/2012 <u>Inc</u>
	YN 9336C - NSI INC 17022239/ R/H02 DOA - 21/11/2017 <u>4r.</u>
<u>5/11/19</u>	<u>Chk 4/3 \$4300 / 30%.</u> <u>( \$ 2,108.56 Red - 33% )</u>

RECEIVED 05 NOV 2019

Date/Time, File Pass to? 06/11/19 ☐ : Prel. Report

1) Typeist ☒ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: 1

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

☐ : Interview (\$ \_\_\_\_\_) Photos

Survey Fee:

Transportation:

\$ 4,300/- 45

160

eBaoTech

General Claim

Hello, NAC\_PAYA\_USI\_800601

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## Policy Query

Policy No.  Date of Accident   
Vehicle No. (For Motor)  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"/>	5073967573-04		KINDLY CONSTRUCTION & SERVICES PTE LTD	198703902E	GCV	Comprehensive	YN9336C	YN9336C	26/09/2019	27/09/2020

**TP Claims against NTUC Income: Follow-Through Survey**

Date : 05/11/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/1069193-002	COMFORT TRANSPORTATION PTE LTD	SHA 3533J	VN 9336C	30/10/2019	08:30	\$ 6,408.56	\$ 4,300.00
1	MT/1068944-002	COMFORT TRANSPORTATION PTE LTD	SHC 8505Y	SMM 6169K	27/10/2019	21:30	\$ 2,436.64	\$ 1,750.00
1	MT/1068819-002	COMFORT TRANSPORTATION PTE LTD	SHD 4506R	SKJ 2113L	28/10/2019	04:45	\$ 2,201.92	\$ 1,250.00

Claim received from LKK

## 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	30/10/2019 10:28
Date Of Accident	30/10/2019 08:30
Exact Location Of Accident	BLK 979A BUANGKOK CRESCENT SERVICE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA3533J
<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	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	DON WONG HONG YEOW
NRIC No	S8207111C
Date Of Birth	02/03/1982
Occupation	OUTDOOR
Date Of Driving Pass	15/12/2017
Driving Experience	1 YEAR AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96397927
Fax Number	
Contact Number	
Email Address	DONWHY82@GMAIL.COM

Address	BLK 352 UBI AVENUE 1 #06-991
Postcode	400352
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?	YES
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)	5
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : MALE
Passenger 3	NAME: : - GENDER: : FEMALE
Passenger 4	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	YN9336C
Vehicle Make/Model/Colour	MITSUBISHI LORRY

**Details Of Properties**

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

REAR LH

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name

DON WONG HONG YEOW

Approximate Age

Injuries Sustain

BACK

Injured person in which vehicle?

SHA3533J

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

**IMPORTANT NOTICE**

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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 lodging 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.

(COMPANY TRANSPORTATION PTE LTD  
CO-INSURANCE (2021))

Policyholder's Signature  
Date & Time: .....

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

Reporting Centre Personnel's Signature  
Name: **Loke Yew Feng**  
NRIC/FIN No.: .....

Reported Accident Date: .....



## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/10/19 at about 08:30hrs, I was driving at above said location with 4 passengers onboard. Shortly van B lorry in front brake to stop and I doing so. Suddenly Van B reversing towards my taxi without checking. As a result, Van B rear left portion collided onto the front right portion of my stationary taxi. Scene photo and details taken. I suffered back pain, will consult doctor later on.

## DECLARATION

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

CHAMPION TRANSPORTATION PTE LTD  
POLICE NO. 33003292

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.:

Lok's Vw Tjing

30/10/19







# COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

## ComfortDelGro Engineering Pte Ltd

205, Braddell Road Singapore 578701  
 Mobile: + 65 8260 8260 Facsimile: + 65 8260 0133

### Workshops

08 Loyang Drive Singapore 508666 04 Serangoon Singapore 756196  
 385 Sin Ming Drive Singapore 575711 7 Sengkang Way Singapore 725791  
 40 Ponggol Road Singapore 600096 801 Yehun Industrial Park A Singapore 1401  
 222 Upper C Street Singapore 347640

Date/Time: 30.10.2019 11:14 Page : 1

Team: ARC Repair TP(CLSO)1

## JOB CARD

Sales Order:

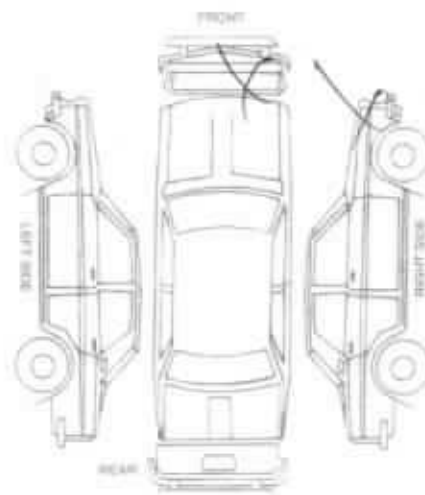
JC NO.: 305345068

CUSTOMER	REGN NO.: SHA3533J	MILEAGE
VMS	MAKE: HYUNDAI	FUEL
CUSTOMER NO. 7010045	MODEL: I-40	DATE/TIME IN 30.10.2019 09:40
ADDRESS 383 SIN MING DRIVE	YR OF MANU 28.04.2016	TARGET DATE
Singapore SINGAPORE 575717	CHASSIS CODE KMHLB41UMGU087866	COMPLETION DATE/TIME
65508755 (D)		
3 COUNT CARD NO.		

## JOB DESCRIPTION

Accident Date: 30.10.2019  
 NATURE: 3P 30.10.2019

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHA3533J CHIANG

Vehicle No.: SHA3533J

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\***

DATE 30/10/2019 11:46

**MAKE :**

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Bonnet / <i>Replaced</i>			\$ 2,265.90
	Bonnet Lock X <i>see</i>			\$ 36.90
	Radiator Grille / <i>cm</i>			\$ 1,110.10
	Radiator Grille H Emblem - <i>acc</i>			\$ 39.50
	Front Bumper Cover / <i>cm</i>			\$ 1,052.20
	Front Bumper Sponge X <i>see</i>			\$ 99.20
	Front Bumper Reinforcement X <i>see</i>			\$ 402.10
	Front Bumper Grille (RH) X <i>see</i>			\$ 93.60
	Front Bumper Grille Airduct (RH) X <i>see</i>			\$ 26.20
	Front Bumper Bracket Top (RH) X <i>see</i>			\$ 22.40
	Front Bumper Bracket (RH) X <i>see</i>			\$ 24.60
	Headlamp (RH) / <i>broken</i>			\$ 1,388.00
	SUB TOTAL			\$ 6,560.70
	LESS 20%			\$ 1,312.14
	DISCOUNTED TOTAL			\$ 5,248.56
	<b>Labour Charge</b>			
	Panel Beating			\$ <del>560.00</del> <i>280</i>
	Spray Painting Charge			\$ <del>500.00</del>
	Wiring Charge			\$ <del>50.00</del>
	Tuff Kote			\$ <del>50.00</del>
	TOTAL LABOUR			\$ 1,160.00
	ESTIMATE TOTAL			\$ 6,408.56
	Ka hui (KCA)			
	30/10/19 1325 hr.			
	3 Reps.			
	L/S			
	After Repair photo			
	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.

Our Job Ref No : 305345068

Date : 04/11/19

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHA3533J

30.10.19

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

Z The repair job shall bill to: NTUC YN9336C

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:

Final Lumpsum Repair cost

\$4,300.00

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 amount

Signature : 

Name : CHIANG

Tel : 62148314

Fax : 65468156

Signature : 

Name : KALVIN

Date : 5/11/19

## 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		N		
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/INC19019219/K1sf3n2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 06-11-2019

189556



Code: INC4

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	YN 9336C	Veh. Inspected	SHA 3533J
Policy No.	5073987573-04	Coverage (\$)	0.00
Claim No.	MT/1069193- 002	Excess (\$)	0.00
Assign From		Assign Date	30/10/2019

**2. Vehicle Particulars & Condition**

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU087866	Colour	BLUE
Odometer	547568	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	WEST LAKE	7 mm
L/H Front Tyre	205/60 R16	WEST LAKE	7 mm
R/H Rear Tyre	205/60 R16	WEST LAKE	7 mm
L/H Rear Tyre	205/60 R16	WEST LAKE	7 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.
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**5. General Information**

Accident Date	30/10/2019	Inspection Date	30/10/2019
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.
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**5b. Estimate Days of Repair**

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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## 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. SHA 3533J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	BONNET	BUCKLED	2,265.90	2,265.90
1	BONNET LOCK	SERVICEABLE	36.90	-
1	RADIATOR GRILLE	CRACKED	1,110.10	1,110.10
1	RADIATOR GRILLE H EMBLEM	NECESSARY	39.50	39.50
1	FRONT BUMPER COVER	CRACKED	1,052.20	1,052.20
1	FRONT BUMPER SPONGE	SERVICEABLE	99.20	-
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	402.10	-
1	FRONT BUMPER GRILLE (RH)	SERVICEABLE	93.60	-
1	FRONT BUMPER GRILLE AIRDUCT (RH)	SERVICEABLE	26.20	-
1	FRONT BUMPER BRACKET TOP (RH)	SERVICEABLE	22.40	-
1	FRONT BUMPER BRACKET (RH)	SERVICEABLE	24.60	-
1	HEADLAMP (RH)	GRAZED	1,388.00	1,388.00
	LESS 20% DISCOUNT		-1,312.14	-1,171.14
			5,248.56	4,684.56
<b>LABOUR</b>				
	PANEL BEATING.		560.00	280.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	WIRING CHARGE.		50.00	20.00
	TUFF KOTE.		50.00	20.00
			1,160.00	720.00
<b>GRAND TOTAL</b>			<b>6,408.56</b>	<b>5,404.56</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>4,300.00</b>

Report Ref No. NS/INC19019219/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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