



**Veron Chen (LKKAUTO)**

**From:** MTCL@income.com.sg  
**Sent:** Thursday, 5 December 2019 2:14 PM  
**To:** Veron Chen (LKKAUTO)  
**Subject:** FW: REQUEST FOR CLAIM NUMBER

Hi,

Claim created.

With Regards

Samsia  
Senior Admin Assistant,  
Motor Insurance  
[www.income.com.sg](http://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](http://income.com.sg/careers)

in with you

**From:** Veron Chen (LKKAUTO) [mailto:veronchen@lkkauto.com]  
**Sent:** Thursday, 5 December 2019 9:42 AM  
**To:** MTCL@income.com.sg  
**Subject:** REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Kindly provides us claim number.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle
1	MT/1074463-001	COMFORT TRANSPORTATION PTE LTD	SH 8608C	SMQ 6953S

D.O.A	Time of Accident	Estimate	Tentative repair cost
29/11/19	16:45	\$1103.52	\$540.00

Best Regards,

**Veron Chen** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**Disclaimer**

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

**Enquire Vehicle Insurance Details**

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SMQ6953S	29 Nov 2019 / 16:45:00	Successful	N12	NTUC INCOME INS CO-OP LTD

[Previous](#)[OK](#)

SH 8608C

## 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	02/12/2019 09:53
Date Of Accident	29/11/2019 16:45
Exact Location Of Accident	SERANGOON CENTRAL OUTSIDE NEX TAXI STAND
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH8608C
<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
<b>Vehicle Particulars</b>	
Manufacturer	HYUNDAI
Model	IONIQ HYBRID
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	TAY KENG LENG
NRIC No	S1657631Z
Date Of Birth	06/07/1964
Occupation	OUTDOOR
Date Of Driving Pass	29/02/1988
Driving Experience	31 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90872166
Fax Number	
Contact Number	
EMail Address	JAMESTAY.JAPACE@GMAIL.COM

Address	BLK 345 TAMPINES STREET 33 #08-356
Postcode	520345
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 AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	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]	PASIR RIS NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

### Circumstances of Accident

REFER POLICE REPORT NO: T/20191129/2149 \* TYPE OF ACCIDENT :- HIT & RUN

### 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	SMQ6953S
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

UNSURE

No. Of Passenger (Including Driver)

**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.

QUANTRON TRANSPORTATION SERVICES LTD  
CO. DIR. LIAISON OFFICER

Policyholder's Signature  
Date & Time:

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

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

QUANTRON TRANSPORTATION SERVICES LTD





Alex  
 Taxi  
 71201

A E H 2 6 0 8 0  
 B 3 J A I Q 6 9 5 3 S

A hand-drawn sketch of a building with a chimney and a flag. The building is drawn with simple lines. A chimney is on the left side, and a flag is on the right side. There are arrows pointing in different directions: one pointing up, one pointing down, and one pointing left. The sketch is drawn on a grid background.

Refer to attached police report

7/21/91/29/2149

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

Policyholder's Signature  
Date & Time:

Driver's Signature

1

Loka Vihar Yiang



**SINGAPORE  
POLICE FORCE**



T/20191129/2149

1 of 3

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

Report No. T/20191129/2149

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 29/11/2019 18:33	Vide Report No.:	Station Diary No.: 78
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**Informant's Particulars**

Name of Informant: TAY KENG LENG			Address: APT BLK 345 TAMPINES STREET 33 #08-356 SINGAPORE 520345	
ID Type / ID No.: NRIC NO / S1657631Z			Contact No.: Home/Office:	Mobile: 90041892
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 55	Date of Birth: 06/07/1964	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3	Date of Expiry:

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 29/11/2019 16:45	Type of Location: Straight Road
Location: Along Road 1 SERANGOON CENTRAL				
At Taxi Stand of Nex Shopping Mall				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SH8608C	Car				Slightly Damaged	2

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20191129/2149

2 of 3

Police Station Of Origin:

Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

Report No. T/20191129/2149

## CONTINUATION OF REPORT

Driver			
Name	TAY KENG LENG	ID No.	S1657631Z
Related Vehicle	SH8608C (Car)	Contact No.	90041892
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above mentioned date time and location, I had just arrived at Nex Shopping Mall taxi stand as I had intended to pick up a passenger and continuing my usual routine. At that point of time traffic was moderate and the road was wet as it was currently raining. As my passenger had just boarded my car and I was about to move off, all of a sudden I felt an impact from the right rear side of my car. I noticed that the vehicle involved with the accident with me was a White Mazda.

I then horned at the said car to inform that he had been involved with an accident with my vehicle instead he just continued moving and subsequently moved off slowly away from my vision. With permission of my passenger I then tried to give chase to the car and similarly tried to take down the number plate. However it was raining thus the vision was also compromised.

While along Serangoon Central, all of a sudden the White Mazda all of a sudden made an illegal U-turn at a traffic light where pedestrians were crossing and as such I had to stop the chase let the vehicle flee away as it was already dangerous for other road users. I later informed my company on what had happened and was advised to lodge a report on the matter.

The damages sustained on my car was slight dents and scratches on the right rear portion of my car where bumper and boot is also. My car has an in-car camera however I have not reviewed the footage to see if it had captured the license plate number.



**SINGAPORE  
POLICE FORCE**



T/20191129/2149

3 of 3

Report No. T/20191129/2149

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

## CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /  
Sgt 2 MUHAMMAD KHIRUL NA'EM BIN  
KHIRUDIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

29/11/2019 18:33

Officer In Charge Of Case:

TP / HRT /  
Insp GOH GEOK LYE  
Contact No.: 65476148

Classification Of Case:

Authentication Stamp  
NP168



SINGAPORE  
POLICE FORCE

SIGNATURE

Officer- In -Charge: TP IO  
Investigation Section  
Traffic Police

No. 10 Ubi Avenue 3  
Singapore 408865

Name : Tay Keng Leng  
NRIC : S1657631Z  
Address:  
Blk 345 Tampines Street 33 #08-356

Singapore (520345)  
Tel :  
Pg / Hp : 90041892

Dear Sir

Accident involving SH8608C at at Serangoon Central, Taxi Stand of Nex Shopping Mall on 29th November 2019 at about 4.45pm vide T/20191129/2149.


With reference to the above, I have made a police report on the 29th November 2019 at about 6.33pm at Pasir Ris NPC.

2 On 30<sup>th</sup> November 2019 at about 11.07am, at Pasir Ris NPC, I make the following amendments to the above report.

3 I would like to add on the vehicle SMQ6953S which hit my vehicle and drove off. My company Comfort viewed the in car camera footage and saw the above stated vehicle who hit my vehicle and drove off. I do not have a copy of the footage however, my company have the footage.

Yours faithfully

  
Signature

If a police officer records this amendment, please complete the following;	
Name / Rank No: SGT(2) T180128 Johnny Tan	Station Diary No. 23
Signature 	

**Pasir Ris NPC**  
No. 1 Pasir Ris Drive 4  
#01-01 Singapore S19457  
Tel: 1800-5852999

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	821R
<b>Vehicle Details</b>	
Vehicle No.:	SH8608C
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Dec 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	AE IONIQ HEV 1.6 DCT
Primary Colour:	Blue
Manufacturing Year:	2019
Engine No.:	G4LEKU296100
Chassis No.:	KMHC851CVKU164480
Maximum Power Output:	103.6 kW (138 bhp)
Open Market Value:	\$25,373.00
Original Registration Date:	02 Jul 2019
First Registration Date:	02 Jul 2019
Transfer Count:	0
Actual ARF Paid:	\$12,523.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Jul 2027
PARF Rebate Amount:	\$9,392.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	01 Jul 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$24,410.00
COE Rebate Amount:	\$23,121.00
<b>Total Rebate Amount:</b>	<b>\$32,513.00</b>
<b>Message</b>	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 03 Dec 2019

OK

## Enquire Vehicle Transfer Fee

### Vehicle Details

Vehicle No.  
**SH8608C**

Make / Model  
**HYUNDAI / AE IONIQ HEV 1.6 DCT**

Vehicle Type :  
**H10 - Public Transport Taxi (Motor Car)**

Vehicle Attachment 1 :  
**Air-Con (Taxi)**

Vehicle Scheme :  
**Taxi (Company)**

Chassis No. :  
**KMHC851CVKU164480**

Propellant :  
**Petrol-Electric**

Engine No. :  
**G4LEKU296100**

Motor No. :  
**PM04K4W342DJ**

Engine Capacity :  
**1580 cc**

Power Rating :  
**32.0 kW**

Maximum Power Output :  
**103.6 kW (138 bhp)**

Date/Time: 02.12.2019 11:23

Page : 1

Team: ARC Repair TP(CLSO)1

### JOB CARD

Sales Order:

JC NO: 305358328

COMER

AS COMFORT TRANSPORTATION PTE LTD

COMER NO. 7010045

RESS 383 SIN MING DRIVE  
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

OUNT CARD NO.

REGN NO.:

SH 8608C

MILEAGE

MAKE :

HYUNDAI

FUEL

E.....1/2.....F

MODEL

IONIQ(G2)

DATE/TIME IN

02.12.2019 08:00

YR OF MANU.

02.07.2019

TARGET DATE

CHASSIS CODE

KMHC851CVKU164480

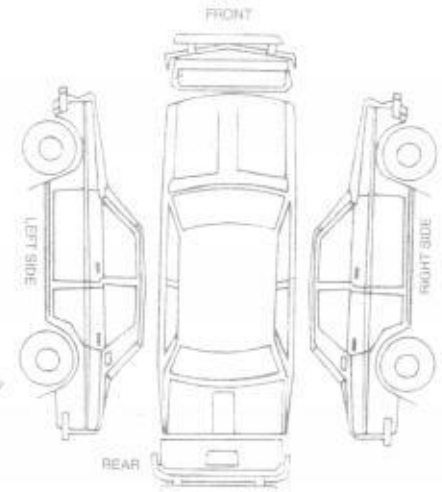
COMPLETION DATE/TIME:

### JOB DESCRIPTION

Accident Date: 29.11.2019

NATURE: 3P 29.11.19

S/NO LABOR CODE DESCRIPTION



IKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

ledgement Slip

Exit Pass

No. SH 8608C

LIMITS

Vehicle No.:

SH 8608C

Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard



## COMFORTDELGRO ENGINEERING PTE LTD

Date: 02.12.2019

## REPAIR ESTIMATE

Time: 12:05:41

Page: 1

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

NTUC - CP(P)  
 LKK - Gao Qiang TS

JOB NO : 305358328  
 REGN NO : SH 8608C  
 MILEAGE : 0000000000  
 MAKE : HYUNDAI  
 MODEL : IONIQ(G2)  
 DATE OF REGN : 02.07.2019  
 DATE/TIME IN : 02.12.2019 08:00  
 ACCIDENT DATE : 29.11.2019

## JOB / PARTS DESCRIPTION

## QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0104-2282-G REAR BUMPER *X repair* 459.40 20.00 367.52  
 0002 04-01-0101-0111-G REAR BUMPER CLIPS *X 10 L* 20.00 20.00 16.00  
*NN*

SUB-TOTAL : 383.52

## JOB NATURE

0000 PB PANEL BEATING 350.00 *320*  
 0001 SP SPRAYPAINT CHARGE 250.00 *200*  
 0002 L R/I REVERSE SENSOR 120.00 *~~20~~ 20*  
 SUB-TOTAL : 720.00

TOTAL : 1,103.52

*Limfs*  
 MVA NAME & SIGNATURE  
 DATE :

AUTHORISED : YES / NO  
 SURVEYOR NAME & SIGNATURE  
 DATE :

LKK Auto Consultants hence notify the Repairer of the following:

- 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 modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

*3/12/19 2 Days.*  
*P/P.*  
*After repair photos*  
*Gao Qiang*  
*02/12/19*

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305358328

Date : 04/12/19

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : GUO QIANG

Vehicle Reg No. : SH 8608C

Date of Accident : 29-Nov-19

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

1. The repair job shall bill to: NTUC --- SMQ6953S

2. The finalized amount shall be:

(a) Spare Parts after List discount

NIL

(b) Labour Charges

\$640.00

**Total for Part-By-Part Repair Cost**

**\$640.00** 540

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20%

**Final Lumpsum Repair cost**

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 : GUO QIANG

Date : 04/12/19

### 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:

\_\_\_\_\_

\_\_\_\_\_

## COMFORTDELGRO ENGINEERING PTE LTD

Date: 04.12.2019

## REPAIR ESTIMATE

Time: 07:19:15

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 : 305358328  
REGN NO : SH 8608C  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G2)  
DATE OF REGN : 02.07.2019  
DATE/TIME IN : 02.12.2019 08:00  
ACCIDENT DATE : 29.11.2019

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION


SUB-TOTAL : 0.00

JOB NATURE

0000 PB	PANEL BEATING	320.00
0001 SP	SPRAYPAINT CHARGE	200.00
0002 L	R/T REVERSE SENSOR	20.00

SUB-TOTAL : 540.00

TOTAL : 540.00

  
MVA NAME & SIGNATURE  
DATE :

\_\_\_\_\_  
SURVEYOR NAME & SIGNATURE  
DATE : AUTHORIZED : YES / NO

**Veron Chen (LKKAUTO)**

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**From:** Veron Chen (LKKAUTO)  
**Sent:** Wednesday, 4 December 2019 1:37 PM  
**To:** 'Lim Tien Siong'; Guo Qiang (LKKAUTO); SUR  
**Subject:** RE: SH 8608C - Finalize  
**Attachments:** FINALISE.pdf

Dear Mr Lim,

WITHOUT PREJUDICE

Finalize at P/P \$ should be \$540.00 and 02 repair days.

Best Regards,

**Veron Chen** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Lim Tien Siong <limts@cdge.com.sg>  
**Sent:** Wednesday, 4 December 2019 10:56 AM  
**To:** Guo Qiang (LKKAUTO) <GuoQiang@lkkauto.com>  
**Cc:** Admin-D (LKKAUTO) <admin-d@lkkauto.com>; admin <admin@lbs-auto.com>  
**Subject:** SH 8608C - Finalize

Hi Guo Qiang,

Finalize at PP \$ 640.00 and 02 repair days.  
After paint.

Best Regards,

**Lim Tien Siong**

**Taxi Crash Repair / ComfortDelgro Engineering Pte Ltd**

**Off:62148398 / Fax:65468156**



Think Before Printing

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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



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC19021270/Gvf3s2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 06-12-2019	
Code: INC4				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SMQ 6953S	Veh. Inspected	SH 8608C	
Policy No.		Coverage (\$)	0.00	
Claim No.	MT/1074463-001	Excess (\$)	0.00	
Assign From		Assign Date	02/12/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI IONIQ	c.c	1580	
Engine No.	HIDDEN	Year of Reg.	2019	
Chassis No.	KMHC851CVKU164480	Colour	BLUE	
Odometer	34746	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	MICHELIN	6 mm	
L/H Front Tyre	195/65 R15	MICHELIN	6 mm	
R/H Rear Tyre	195/65 R15	MICHELIN	6 mm	
L/H Rear Tyre	195/65 R15	MICHELIN	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	29/11/2019	Inspection Date	02/12/2019	
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		

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Page No.:1 of 1

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 8608C**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR BUMPER	TO REPAIR SEE LABOUR	459.40	-
10	REAR BUMPER CLIPS	NOT NECESSARY	20.00	-
	LESS 20% DISCOUNT		-95.88	-
			383.52	-
	<b><u>LABOUR</u></b>			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR BUMPER.		350.00	320.00
	SPRAY PAINT CHARGE.		250.00	200.00
	R/I REVERSE SENSOR.		120.00	20.00
			720.00	540.00
	<b>GRAND TOTAL</b>		<b>1,103.52</b>	<b>540.00</b>
	<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>			<b>540.00</b>

Report Ref No. NS/INC19021270/Gvf3s2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

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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