Date Home Flig Plass to? 17/12/19 1) Typif	: Preli. Report		ys Of Repair: 2_ survey No. of Trip:	Survey Fee:	Service in the service of the servic
Dale/Time, File Return to?	<u> </u>	Arid Fee:	: Site Insp (\$	Transportation:	
	2 7.	Ī	: Interview (\$) Photos	
For extract	\$ 11's \$ 900/-	45	: Tech, thus (2)) (Special	
	\$ 71- 4 1001	f-	-	10131	160

eBaoTech								GeneralClaim		
Hello, NAC_PAYA_UBI_80	0601					· Change	Languag	e • Chan	ge Password	• Log Out
My Desktop	Policy Query									
Notice of Luss	Policy No.				Date o	f Accident		10/12/2019	10:02	
	Vehicle No.(For Motor)	SLR732	8Y		Certific	cate Number				
				1	Search					
	Select Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	5093574429- 02		LOO EI-LEEN	58004947A	GPC	drivo PREMIUM	SLR73281	SLR7328Y	25/08/2019	24/08/2020
				C	Continue					

TP Claims against NTUC Income: Follow-Through Survey

Date: 17/

17/12/2019

c Aus	Income Reference	Claimant (Quoor / Tavi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
NO		Claimant Council / Lavi Combanil			ı		-	*
	Not our insured	COMFORT TRANSPORTATION PTE LTD	SHA 1123Y	SJU 5226D	05/12/2019	07:45	\$ 3,275.08	^
	22.000.000.000					*****		4
	AAT/1075061-002	COMPORT TRANSPORTATION PTF LTD	SH 6545M	SLR 7328Y	10/12/2019	11:10	\$ 6,018.08	^
	100-TOOC /OT / IIA							
t	MT/1075118.007	COMFORT TRANSPORTATION PTE LTD	SHC 3383P	SFH 1618Z	08/12/2019	22:10	\$ 3,599.28	\$ 2,500.00
	TOO OTTO OOT / IIII							•
9	MAT/1074824-002	COMFORT TRANSPORTATION PTE LTD	SHD 7183T	SKG 5243R	05/12/2019	19:20	\$ 4,846.88	^

Claim received from LKK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number Contact Number EMail Address

- 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 <u>truthful and accurate</u> 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.
- 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.

aforesaid.	7 150 V 574 TV
	ACCIDENT STATEMENT
Date Of Report	10/12/2019 13:46
Date Of Accident	10/12/2019 11:10
Exact Location Of Accident	BLK 28A HAVELOCK ROAD MSCP
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SH6545M
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	140
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	TAY TSENG AIK @ TAY CHEN AIK
NRIC No	S2552914F
Date Of Birth	26/07/1952
Occupation	OUTDOOR
Date Of Driving Pass	01/08/1975
Driving Experience	44 YEARS AND 4 MONTHS
Gender	MALE

(LOCAL) +65-96313678

FRANCISTAY678@HOTMAIL.COM

Address

BLK 22 HAVELOCK ROAD #03-683

Postcode

160022

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 ON COLLISION

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

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)

1

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

PLS REFER TO ATTACHED / Type Of Accident : HEAD TO SIDE

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Was there any audio recorded?

SLR7328Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

FRT RIGHT

No. Of Passenger (Including Driver)

Page 2 of 18

Sketch Plan Pg. 1

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.
- 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.
- 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;
- 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)

Lunderstand, 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:
 - 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 LC

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Loke Well Yield

GIARRIC SEcted Planform V3

4 - 1 bir a

-

Sketch Plan Pg. 2

HIIIIII	1 284	Havelode	41111	146414
	11 1000			
			(B)	Timili
			AFY	
A 3H 65	415M			
B- 2187	3084			ATIME
DESCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT			
On	10/12/19	at about	11:10 ha	T 1/2h 1
	- 13	511-26-31	11 - 10 103	-1 - 1411 A
was diving	ont from e	above sala	1 location	without
pax Sudden	ny Ven B	coming -	Prem opp	ishe side
	40.		V.C.	
turning righ	it and i	it thort	FIGHT P	ortion collia
Contract of the	from right	- POT (US)	on my	-(axi
No injam	reported	in this	accident.	Beene p
		411.2		
taken to si	upport my	claims.		
ECLAPATION.				
DECLARATION /We declare the foregoing part	ticulars are true in every re	spect.]
We declare the foregoing part	PIELIA A	spect.		1 1011
/We declare the foregoing part	PIELIA A	ove	p. 24 25 24 20 20 20 20 20 20 20 20 20 20 20 20 20	10 1.

SWARMS ShetchelanForm, 95

Page 4 of 18

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755

Date/Time? 05100.72.2019 14:54

Page :

Team:	ARC Repair TP(CLSO)1	JOB CARD	Sales Order:	JC NO.: 305365749
STOMER		and the second	REGN NO.: SH 6545M	MILEAGE
VMS STOMER NO	COMFORT TRANSPORTATION PT 7010045	E LTD	MAKE: HYUNDAI	FUEL
ORESS	383 SIN MING DRIVE Singapore SINGAPORE 57571	7	MODEL I-40	DATE/TIME IN 10.12.2019 11:55
L (R) (P)	65508755 (O)	er E	YR OF MANU. 17.03.2016	TARGET DATE
SCOUNT CAP	NO NO		CHASSIS CODE IOMHLB41UMGU085566	COMPLETION DATE/TIME:

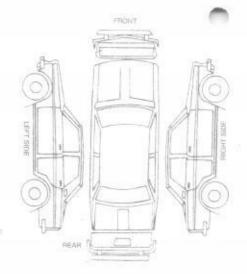
JOB DESCRIPTION

Accident Date: 10.12.2019 NATURE: 3P 10.12.2019

=/NO

LABOR CODE

DESCRIPTION



NTUC- R'ight Font LKK/Ram.

ECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

wiedgement Slip

of Service Advisor

SH 6545M

LARRY

Signature/Date

Name of Service Advisor

Exit Pass

Vehicle No.:

Date

returned to Service Reception upon collection

To be kept by Security Guard

SH 6545M

http://cdgek2srv1-82/Runtima/Duntima/Form/6

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SH 6545M

: HYUNDAI MAKE

10. Dec. 2019 DATE:

DEL	: i40		DOA:	10. Dec. 2019	NTUC	1
Qty	Parts Description		Туре	Unit Price	Amount	
	1 Front Bumper Cover × □	21101570			\$1,052.20	
	1 Front Bumper Side Bracket				\$24.60	
	1 Front Bumper Top Bracket				\$22.40	
	10 Front Bunmper Clips XVV	ME.		\$2.20	\$22.00	l
	1 Front Bumper Grille – RH	× V/ V)	- 1		\$41.60	l
	1 Headlamp – RH 🗴 🗸 🗸				\$1,388.00	
	1 Front Fender – RH 800				\$566.30	1
	1 Front Wheel Cover – RH	Cr-			\$107.10	-
	1 Front Rim – RH ×MA		- 1		\$325.30	
	1 Front Lower Arm – RH 🦓	25/2411/2010	- 1		\$529.30	
	1 Knuckle Arm – RH A XVV	n	- 1		\$552.00	
	1 Wheel Bearing – RH ? XII	N.			\$150.90	
	1 Front Shock Absorber – RH	WXVn			\$342.20	
	1 Front Absorber Mounting	-RH®×410			\$108.80	
	1 Steering Tie Rod End – RH	A×41			\$62.60	
	1 Sabiliazer Bar - RH 🦎 🗸	19			\$252.30	
		SUB TOTAL		-	\$5,547.60	
K Auto	o Consultants hence notify	LESS 20%			\$1,109.52	
	airer of the following: vey before/after spray painting	DISCOUNTED TOTAL		-	\$4,438.08	
Third par No illega Supplem s subjec	ces are subject to confirmation rty survey is on a "Without Prejudice" basis Il modification(s) is allowed sentally item(s) must be resurveyed and to 1 Advertisement ce RHF are end iged by Repairer	`	June 1	27827	\$100.00	N
ste:	-	20m (LKK) 20m (L	shis	cow	\$100.00	
	Labour Charge 1 Panel Beating	lavagua a ho	(LI))	\$600.00	7.0
	1 Spray Painting Charge	72710	v ph	1	\$500.00	0
	1 Tuff Kote	8860	1	NO 600	\$50.00	
	1 Wiring Charge	act ver		KAT INS	\$50.00	X
	1 Front Wheel Alignment	W.		Daily and	\$100.00	>
	1 Remov/refix Front Underca	arriage	(2 1/2 cod = 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$180.00	X
arry N	9	TOTAL LABOUR	-		\$1,480.00	
		ESTIMATE TOTAL		-	\$6,018.08	

be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Our Job Ref No . 305365749

Date

: 14. Dec. 2019

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

INA	LIZAII	ON FORM					
o	: -		LKK			Fax:	
ttn	*		RAM				
ehic	ehicle Reg No. : SH 6545M			Date	of Accident:	10. Dec. 2019	
he s	survey	and estimate	s of the repairs	of the at	oove-mentioned	vehicle are as f	follows:-
	Ther	epair job sha	ill bill to:		NTUC		SLR7328Y
	Th (inalized amo	et shall bar				
	1000	PORS CITATION					
	(a)	n Brown area	s after List disc	count			
	(b)	Labour Cha					
		Total for P	art-By-Part Re	epair Cos	st		
	(c.)	Total for Lu	Repair (if applie Impsum repair psum Repair (cost after	r Less:	6	\$900.0
	Estim	nated normal	period for repa	airs:	2wo	rking days.	
	withi	in 7 working	e above amou days or assistance.	nt as Co	We	confirm the es	s no reply from you
	Withi	in 7 working ik you for you	days or assistance.	nt as Co	We	e confirm the es alized amount	
	Than Signa	in 7 working ik you for you ature :	days or assistance.	·K	We find	e confirm the es alized amount gnature :	timates and
	Withi	in 7 working ik you for you ature :	days or assistance.	·K	Sig Na	e confirm the estalized amount gnature :	
	Than Signa Nam Tel	ature:e : _621	Larry N	·K	We find	e confirm the estalized amount gnature :	timates and
	Within Than Signa Nam	ature:e : _621	days or assistance. Larry N	·K	Sig Na	e confirm the estalized amount gnature :	timates and
i.	Signa Nam Tel Fax	ature:e : _621	Larry N	·K	Sig Na	e confirm the estalized amount gnature :	timates and
	Signa Nam Tel Fax	ature : e : : _6546	Larry N 4 8316	·K	Sig Na	e confirm the estalized amount gnature :	timates and
or (Signa Nam Tel Fax	ature : 621	Larry N 4 8316	- <i>L</i> z	Sig Na Da Document Attached	confirm the established amount gnature : me : te :	Ram 16/12/19
or (Within Than Signar Nam Tel Fax Officia	ature: e : 621 : 6546	Larry N 4 8316	- <i>L</i> z	Sig Na Da Document Attached Yes or No	confirm the established amount gnature : me : te :	Ram 16/12/19
. For (Within Than Signar Nam Tel Fax Officia	ature: e : 621 : 6546 I Use Only Item Rate P/Day Income Paid	Larry N 4 8316	- <i>L</i> z	Sig Na Da Document Attached Yes or No	confirm the established amount gnature : me : te :	Ram 16/12/19
. R	Signa Nam Tel Fax Officia	ature :	Larry N 4 8316 6 8156	- <i>L</i> z	Sig Na Da Document Attached Yes or No	confirm the established amount gnature : me : te :	Ram 16/12/19
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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 INSUF	RANCE CO-OPERATIVE LTD	Ref:	NS/INC1902179	92/Fsf3n2
73 BRAS BASAH ROA #05-01 NTUC TRADE 189556	D UNION HOUSESINGAPORE	Date:	27-12-2019 INC4	
	Policy Particulars	:- THIR	D PARTY CLAIM	
Insured Veh.	SLR 7328Y	Veh. I	nspected	SH 6545M
Policy No.	5093574429-02	Cover	age (\$)	0.00
Claim No.	MT/1075061-002	Exces	s (\$)	0.00
Assign From		Assig	n Date	10/12/2019
2.	Vehicle Parti	culars &	& Condition	
Make & Model	HYUNDAI 140	c.c		1685
Engine No.	HIDDEN	Year o	of Reg.	2016
Chassis No.	KMHLB41UMGU085566	Colou	r	BLUE
Odometer	633773	Steeri	ng	IN ORDER
Brakes	IN ORDER	Modifi	ication	STANDARD ALLOY RIM
General	FAIR			
3.	Conditi	ions of	Tyres	
	Size	Make		Balance
R/H Front Tyre	205/60 R16	WEST	LAKE	6 mm
L/H Front Tyre	205/60 R16	WEST	LAKE	6 mm
R/H Rear Tyre	205/60 R16	WEST	LAKE	6 mm
L/H Rear Tyre	205/60 R16	WEST	LAKE	6 mm
	Descripti	on of Da	amages	
DAMAGES SEE D	STAINED DAMAGES AT THE O/S ETAILS.	FRONT	PORTION.	
5.	Genera	I Inform	ation	
Accident Date	10/12/2019	Inspec	ction Date	10/12/2019
Survey held at	COMFORTDELGRO ENGINEER	RING PT	E LTD	
	59 LOYANG DRIVE SINGAPORE 508969		785-785	
5a.	R	emarks		
	ON WAS CONDUCTED ON A"WIT DE TO YOUR INSTRUCTIONS, W			
5b.	Estimate	Days of	Repair	
5b. ESTIMATED NOR	Estimate MAL PERIOD FOR REPAIR:	Days of	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



ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 6545M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER COVER	NOT NECESSARY	1,052.20	
1	FRONT BUMPER SIDE BRACKET-RH	NOT NECESSARY	24.60	-
1	FRONT BUMPER TOP BRACKET-RH	NOT NECESSARY	22.40	
10	FRONT BUMPER CLIPS @\$2.20	NOT NECESSARY	22.00	
1	FRONT BUMPER GRILLE-RH	NOT NECESSARY	41.60	
1	HEADLAMP-RH	NOT NECESSARY	1,388.00	
1	FRONT FENDER-RH	BUCKLED	566.30	566.30
1	FRONT WHEEL COVER-RH	SCRATCHED	107.10	107.10
1	FRONT RIM-RH	NOT NECESSARY	325.30	
1	FRONT LOWER ARM-RH	NOT NECESSARY	529.30	
1	KNUCKLE ARM-RH	NOT NECESSARY	552.00	
1	WHEEL BEARING-RH	NOT NECESSARY	150.90	
1	FRONT SHOCK ABSORBER-RH	NOT NECESSARY	342.20	
1	FRONT ABSORBER MOUNTING-RH	NOT NECESSARY	108.80	
1	STEERING TIE ROD END-RH	NOT NECESSARY	62.60	
1	STABILIZER BAR-RH	NOT NECESSARY	252.30	
	LESS 20% DISCOUNT	Particular Control Con	-1,109.52	-134.68
			4,438.08	538.72
	SPECIAL NETT ITEMS	WESESSA SW		100.00
1	ADVERTISEMENT-RHF FENDER (SN)	NECESSARY	100.00	100.00
	LABOUR		100.00	100.00
	PANEL BEATING.		600.00	280.00
	SPRAY PAINTING CHARGE.		500.00	200.00
	TUFF KOTE.		50.00	30.00
	WIRING CHARGE.	NOT NECESSARY	50.00	
	FRONT WHEEL ALIGNMENT.	NOT NECESSARY	100.00	
	REMOVE/REFIX FROTN UNDERCARRIAGE.	NOT NECESSARY	180.00	540.00
			1,480.00	510.00

Report Ref No. NS/INC19021792/Fsf3n2





	ray	Je 1402 UI Z
GRAND TOTAL	6,018.08	1,148.72
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)		900.00

Report Ref No. NS/INC19021792/Fsf3n2

PARASURAM S/O SHANMUGAM

Asst. Automotive Assessor

L

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.