

ASS. REC. BY:

Ram

REF:

NS/INC19022165/Fqf307

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured: SJM 7881R

Policy No.

Claims No. M7/1076101-002

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
X	X

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:

SHD 4852R

Yr Regn:

06/03/2014

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

Truck / Trailer or

Make:

Hyundai 140

c.c 1685

Colour:

blue

A/C:

Insured / Std / NI / NA

Sp. Reading:

S10852

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

10MHLB41UM#E0048529

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/60 R16

R:

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

TOYO / YOKO or

westlake

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

13/12/19

D.O.I.

16/12/19

Survey held at

Comfortelgro (Loyang)

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

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

Date / Time

Action / Instruction

SJM 7881R: NA/INC19020013/03 DCA: 11/11/2019

SHD 4852R: CC4/11119007915/Lp03q2 DCA: 21/04/2019

LIS: \$2300/= with 2 repair days (Reh \$7558.98, 53%)

confirm with chang on 23/12/19

RECEIVED 24 DEC 2019

Date/Time, File Pass to?

☐

Preli. Report

1) 24/12 typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

2

Resurvey No. of Trip:

1

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Insp (\$)

☐

Weekend (\$)

Survey Fee:

160

Transportation:

S + RS: \$1

Photos

Others

TOTAL

160

Report Format:

7r

Lump Sum / LRA: \$

2300

TP Claims against NTUC Income: Follow-Through Survey

Date : 24/12/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/1076078-002	COMFORTDELGRO ENGINEERING PTE LTD	SHC 3336B	SLG 7059G	14/12/2019	18:30	\$ 2,092.19
2	MT/1076101-002	COMFORTDELGRO ENGINEERING PTE LTD	SHD 4852R	SJM 7881R	13/12/2019	21:00	\$ 4,858.98

Enquire Vehicle Insurance Details

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SJM7881R	13 Dec 2019 / 21:00:00	Successful	N12	NTUC INCOME INS CO-OP LTD

[Previous](#)

[OK](#)

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	14/12/2019 10:42
Date Of Accident	13/12/2019 21:00
Exact Location Of Accident	CTE TOWARDS SLE BEFORE JALAN BAHAGIA EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4852R
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	TAN KING LEE
NRIC No	S0685207F
Date Of Birth	20/05/1951
Occupation	OUTDOOR
Date Of Driving Pass	12/02/1977
Driving Experience	42 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97739257
Fax Number	
Contact Number	
Email Address	TANKINGLEE8@HOTMAIL.COM

Address	BLK 157 WOODLANDS STREET #04-737
Postcode	730157
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	RAINING
Road Surface	WET

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?	YES
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	WOODLANDS WEST NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20191213/2172

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJM7881R
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JONATHAN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage FRONT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN KING LEE

Approximate Age

Injuries Sustain NECK

Injured person in which vehicle? SHD4852R

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

DETAILS OF INJURED PERSON 2

Name UNKNOWN(PAX)

Approximate Age

Injuries Sustain UNSURE

Injured person in which vehicle? SHD4852R

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

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.

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.

COMPART TRANSPORTATION PTE LTD

Policyholder's Signature
Date & Time:

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

Olivia Wendy

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No: 14 DEC 2021

SKETCH PLAN

A = SHD 4852R

B = SJM 7881R
(TOYOTA)

MOULAREIN
FLYOVER

CTE

CTE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Statement as per Police Report

(B) T12019121312172

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 1000000000000000

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.:



**SINGAPORE
POLICE FORCE**



T/20191213/2172

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

1 of 4

Report No. T/20191213/2172

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/12/2019 23.20	Vide Report No.: E/20191213/0137	Station Diary No.: 223
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Informant's Particulars

Name of Informant: TAN KING LEE			Address: APT BLK 157 WOODLANDS STREET 13 #04-737 SINGAPORE 730157		
ID Type / ID No.: NRIC NO / S0685207F			Contact No.: Home/Office: Mobile: 97739257		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 68	Date of Birth: 20/05/1951	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Comfort Taxi Driver			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/12/2019 21:00	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY SELETAR EXPRESSWAY along CTE heading towards SLE near to Jalan Bahagia exit on the fourth lane from the right				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD4852R	Car	HYUNDAI	I40 1.7L CRDI AT ABS AIRBAG 4DR	Blue	Slightly Damaged	1
SJM7881R	Car	TOYOTA	COROLLA AXIO 1.5X A	Grey	Totally Damaged	0



**SINGAPORE
POLICE FORCE**



T/20191213/2172

2 of 4

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

Report No. T/20191213/2172

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN KING LEE	ID No.	S0685207F
Related Vehicle	SHD4852R (Car)	Contact No.	97739257
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Jonathan	ID No.	S9779063C
Related Vehicle	SJM7881R (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 13/12/2019 around 2100hrs, I was driving my taxi bearing registration plate number SHD4852R along CTE heading towards SLE near to Jalan Bahagia exit on the fourth lane from the right. Suddenly, the vehicle in front of me did an emergency brake and I as well have to do an emergency brake as well.

Due to the wet weather and congested traffic flow, the vehicle behind me collided onto the rear of my vehicle. I then came down and make a check and saw another vehicle bearing registration plate number SJM7881R had collided onto the rear of my vehicle. I then called for traffic police assistance.

Subsequently, traffic police came and issued me with a traffic accident case card vide to E/20191213/0137 with in charge TP IO Hidayu and took away my in car camera's SD card after issuing me with an NP323. Ambulance came and conveyed my passenger to hospital. I exchanged particulars with the other driver as well.

No government property was damaged, my passenger was conveyed to hospital by ambulance.



**SINGAPORE
POLICE FORCE**



T/20191213/2172

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

3 of 4

Report No. T/20191213/2172

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20191213/2172

4 of 4

Report No. T/20191213/2172

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

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:
L /
Sgt 1 DAVID NG YU BOON

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MOHAMED SUFIAN BIN SUDIN
Contact No.: 65476395

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
13/12/2019 23:20

Classification Of Case:

OMFORTDELGRO
ENGINEERING

member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
Mainline + 65 6383 6280 Facsimile + 65 6280 9755
Workshops
59 Loyang Drive Singapore 508969 24 Senoko Loop Singapore 758156
383 Sin Ming Drive Singapore 575717 7 Sungai Kadut Way Singapore 728791
45 Pandan Road Singapore 609286 501 Yishun Industrial Park A Singapore 768732
220 Ubi Road 3 Singapore 408669

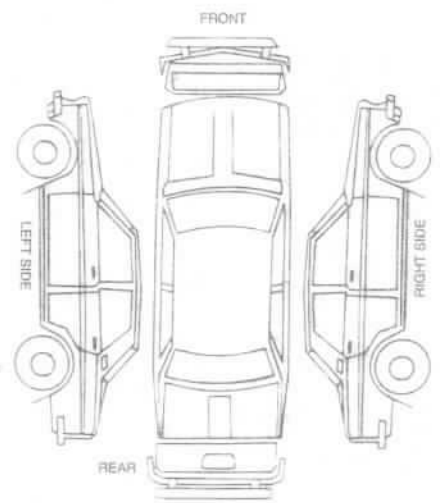
Date/Time: 14.12.2019 12:17 Page : 1

Team: ARC Repair TP(CLSO)1	JOB CARD	Sales Order:	JC NO.: 305367140
OMER COMFORT TRANSPORTATION PTE LTD OMER NO. 7010045 ESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (O) (P)	REGN NO.: SHD4852R MAKE: HYUNDAI MODEL I-40 YR OF MANU. 06.03.2014 CHASSIS CODE KMHLB41UMEU048529	MILEAGE FUEL E.....1/2.....F DATE/TIME IN 14.12.2019 09:50 TARGET DATE COMPLETION DATE/TIME:	
UNT CARD NO.			

Accident Date: 13.12.2019
NATURE: 3P 13.12.19

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



ED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

Exit Pass	Vehicle No.: SHD4852R
Signature/Date	Name of Service Advisor
Service Advisor	Date

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 4852R

DATE 16/12/2019 10:30

MAKE :

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>cut</i>			\$ 553.00
	Rear Bumper Reinforcement <i>70m</i>			\$ 428.40
	Rear Bumper Reinforcement Bracket (LH/RH) <i>BT</i>	\$	80.30	\$ 160.60 <i>\$80.30</i>
	Rear Bumper Clip 10 pcs <i>hec</i>			\$ 22.00
	Rear Bumper Bracket <i>xnn</i>	\$	35.60	\$ 71.20
	Rear Bumper Sponge <i>30m ora</i>			\$ 103.50
	Rear Bumper Under Cover <i>over</i>			\$ 228.00
	Rear Bumper Reflector Lamp (LH/RH) <i>cut/scr</i>	\$	30.60	\$ 61.20
	Rear Panel <i>Q xnn</i>			\$ 526.70
	Rear Panel Garnish <i>7 xnn</i>			\$ 57.70
	Rear Panel Lower Panel <i>7 xnn</i>			\$ 89.40
	Exhaust Pipe Insulator, LH <i>xnn</i>			\$ 58.55
	Exhaust Silencer, LH <i>BT</i>			\$ 967.70
	Exhaust Pipe Hanger, LH <i>hec</i>			\$ 58.55
	Exhaust Pipe Centre <i>Q xnn</i>			\$ 730.10
	SUB TOTAL			\$ 4,116.60
	LESS 20%			\$ 823.32
	DISCOUNTED TOTAL			\$ 3,293.28 <i>\$2539.36</i>
				<i>2002.12</i>
	Rear Bumper Reverse Sensor <i>xnn</i>			\$ 135.70 Nett
	Rear Bumper Rubber Mat <i>xnn</i>			\$ 50.00 Nett
	Rear Bumper Advertisement Logo			\$ 50.00 Nett
	Rear Fender Advertisement Logo (LH/RH)	\$	100.00	\$ 200.00 Nett
				\$ 435.70
	Labour Charge			
	Panel Beating			\$ 350.00 <i>16/12/19 144 chg</i>
	Spray Painting Charge			\$ 500.00 <i>\$200</i>
	Wiring Charge			\$ 50.00 <i>xnn</i>
	Remove/Refix Reverse Sensor			\$ 80.00 <i>\$350</i>
	Remove/Refix Exhaust Pipe			\$ 150.00 <i>\$100</i>
	TOTAL LABOUR			\$ 1,130.00
	ESTIMATE TOTAL			\$ 4,858.98
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 : 305367140

Date : 19/12/19

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

FINALIZATION FORM

To : LKK

Fax :

Attn : PARAM

: SHD4852R

13/12/2019

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

Z The repair job shall bill to: NTUC SJM7881R

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

\$2,300.00

Pic (signature)

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 : CHIANG

Tel : 62148314

Fax : 65468156

Signature : 

Name : Ram

Date : 23/12/19

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		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/INC19022165/Fqf3e2	
73 BRAS BASAH ROAD			
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Date: 27-12-2019	
		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJM 7881R	Veh. Inspected	SHD 4852R
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1076101-002	Excess (\$)	0.00
Assign From		Assign Date	16/12/2019
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	KMHLB41UMEU048529	Colour	BLUE
Odometer	510352	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 REAR PORTION.			
DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	13/12/2019	Inspection Date	16/12/2019
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

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



Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4852R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BUMPER	CUT	553.00	553.00
1	REAR BUMPER REINFORCEMENT	CRACKED	428.40	428.40
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$80.30	O/S BENT	160.60	80.30
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER BRACKET @\$35.60	NOT NECESSARY	71.20	-
1	REAR BUMPER SPONGE	CRACKED	103.50	103.50
1	REAR BUMPER UNDER COVER	CRACKED	228.00	228.00
2	REAR BUMPER REFLECTOR LAMP (LH/RH) @\$30.60	CUT / SCRATCHED	61.20	61.20
1	REAR PANEL	NOT NECESSARY	526.70	-
1	REAR PANEL GARNISH	NOT NECESSARY	57.70	-
1	REAR PANEL LOWER PANEL	NOT NECESSARY	89.40	-
1	EXHAUST PIPE INSULATOR, LH	NOT NECESSARY	58.55	-
1	EXHAUST SILENCER, LH	BROKEN	967.70	967.70
1	EXHAUST PIPE HANGER, LH	NECESSARY	58.55	58.55
1	EXHAUST PIPE CENTRE	NOT NECESSARY	730.10	-
	LESS 20% DISCOUNT		-823.32	-500.53
			3,293.28	2,002.12
<u>SPECIAL NETT ITEMS</u>				
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	135.70	-
1	REAR BUMPER RUBBER MAT (SN)	NOT NECESSARY	50.00	-
1	REAR BUMPER ADVERTISEMENT LOGO (SN)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN)	NECESSARY	200.00	200.00
			435.70	250.00
<u>LABOUR</u>				
	PANEL BEATING.		350.00	350.00
	SPRAY PAINTING CHARGE.		500.00	200.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	REMOVE / REFIX REVERSE SENSOR.		80.00	30.00

Report Ref No. NS/INC19022165/Fqf3e2



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



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REMOVE / REFIX EXHAUST PIPE.		150.00	100.00
			1,130.00	680.00
GRAND TOTAL			4,858.98	2,932.12
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				2,300.00

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PARASURAM S/O SHANMUGAM

Asst. 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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