

NSI INC 20002315 / T15f332

ASS. REC. BY:

Tanph

REF:

INC

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: GBB 3315M

Policy No.

Claims No. MT/1085904 - 001

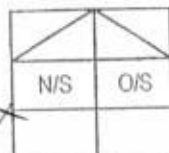
Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



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:

SH9465R. Yr Regn: 2015, 8p.

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

Truck / Trailer or

Make: Hyundai I40 c.c. 1685

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading: 466525 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KMHLB414W1G4U677237

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 / 60R16 R: 1 / -

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

TOYO / YOKO or Wex/leke

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. D.O.I. 10/2/2020 44532

Survey held at CD4E Logany

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

NO Policy

SH 9465R - CC41 A x 12 1701 3030 / K12332 D.O.A - 18/09/2017

GBB 3315 M - M17 / A16 1500453121 D.O.A - 27/06/2015

Tanph Confirmed US \$ 2,000/- @ 2 days with List Choon.
C \$ 600.88 Red - 23% ?

RECEIVED 27 FEB 2020

25/2/2020

Date/Time, File Pass to?

☐ : Prel. Report

☒ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

Rep. Form:

Lump Sum / L.R. \$ 2,000/- US

TP Claims against NTUC Income: Follow-Through Survey

Date : 26/02/2020

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/1085904-001	COMFORT TRANSPORTATION PTE LTD	SH 9465R	GBB 3315M	08/02/2020	12.45	\$ 2,600.88	\$ 2,000.00

Date/Time: 10.02.2020 13:23

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305380315

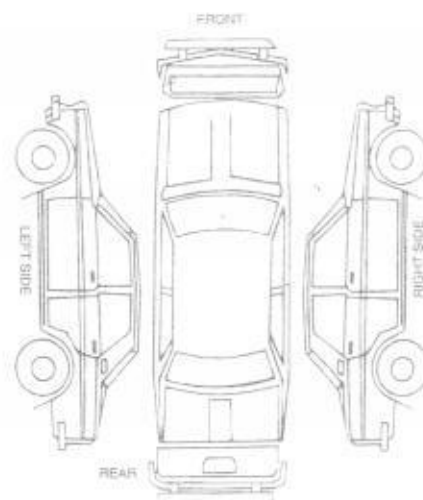
STOMER	REGN NO. SH 9465R	MILEAGE
COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL
7010045	MODEL I-40	E 1/2 F
STOMER NO. 383 SIN MING DRIVE	YR OF MANU. 03.09.2015	DATE/TIME IN 08.02.2020 12:45
DRESS Singapore SINGAPORE 575717	CHASSIS CODE KMHLB41UMGU077237	TARGET DATE
65508755 (R) (P)		COMPLETION DATE/TIME:
ICOUNT CARD NO.		

JOB DESCRIPTION

Accident Date: 08.02.2020

NATURE: 3P 08.02.2020

S/NO LABOR CODE DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

SH

Vehicle No.: SH 9465R CHIANG

Vehicle No.: SH 9465R

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard

Shirley Hiew (LKK Auto)

From: Taufikh (LKKAuto)
Sent: Monday, 24 February 2020 10:37 am
To: 'Chiang Liat Choon'
Cc: Shirley Hiew (LKK Auto)
Subject: RE: SH9465R FINALIZE

Hi Chiang,

COR I/s \$2000 , 2 days.

Regards
Taufikh
Lkk Auto

From: Chiang Liat Choon [mailto:chianglc@cdge.com.sg]
Sent: Tuesday, 18 February 2020 5:28 PM
To: Taufikh (LKKAuto)
Cc: Veron Chen (LKKAuto)
Subject: Fw: SH9465R FINALIZE

Best Regards
Chiang Liat Choon
Taxi Crash Repair ComfortDelGro Engineering Pte Ltd
Off: 62148314 Fax: 65468156



Think Before Printing

From: canon@comfortdelgro.com.sg <canon@comfortdelgro.com.sg>
Sent: Tuesday, 18 February 2020 5:24 PM
To: Chiang Liat Choon
Subject: Scan Image

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to

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	10/02/2020 12:04
Date Of Accident	08/02/2020 12:45
Exact Location Of Accident	GEYLANG LOR 16
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH9465R
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXX821R
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	PHUA SZE YANG
NRIC No	SXXXX788H
Date Of Birth	11/09/1977
Occupation	OUTDOOR
Date Of Driving Pass	03/11/2016
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91093705
Fax Number	
Contact Number	
Email Address	SPENCERPHUA77@GMAIL.COM

Address	214 07-181 YISHUN STREET 21
Postcode	760214
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	SIDE SWIPE
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)	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

SEE ATTACH.

Attachment(s)

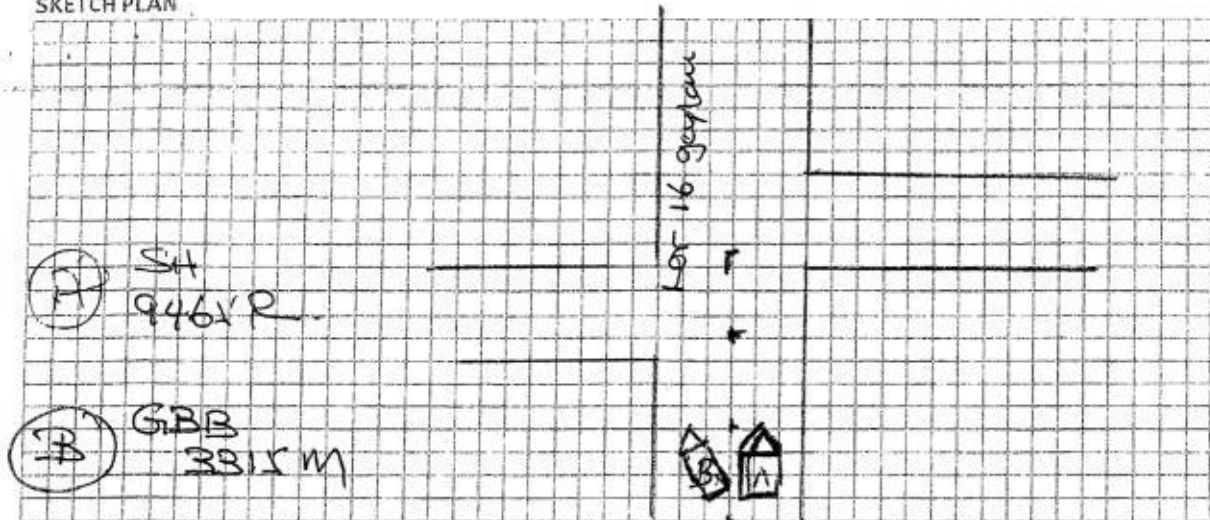
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB3315M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TEO RONG EN
NRIC/Passport Number	TXXXX190A
Contact Number	98607817
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	RHT REAR
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON. 8 Feb 2020 @ 11.45 hr I, Vert (A)

Take the vehicle @ the above location.

and wait inside. Suddenly veh (B) hit veh A

left rear door. @ the point of accident.

veh. (A) No par.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
 CO. REG. NO. 199393821R

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.:

Sketch Plan Pg. 2

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)**

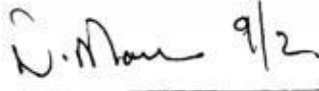
I understand, acknowledge, agree and consent that:

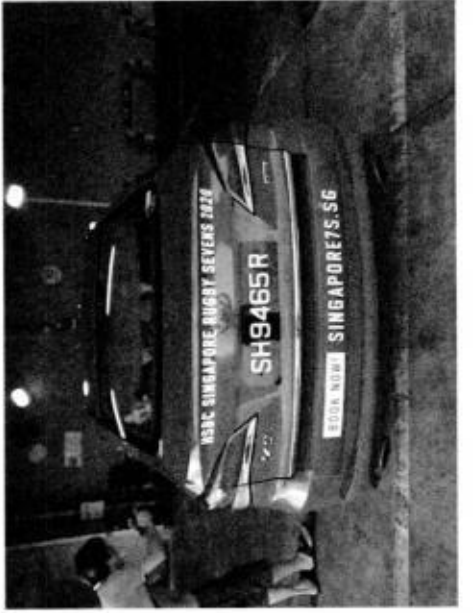
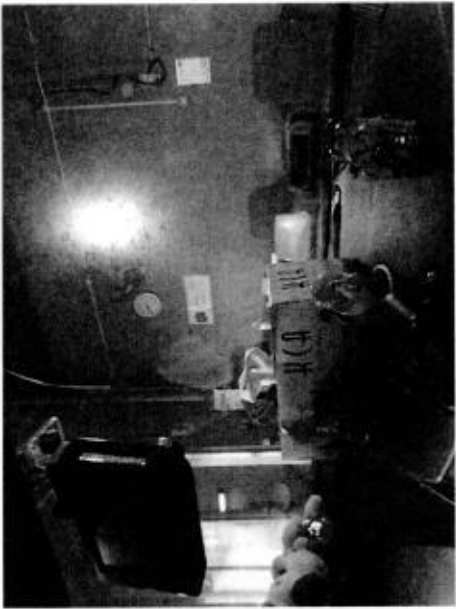
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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.

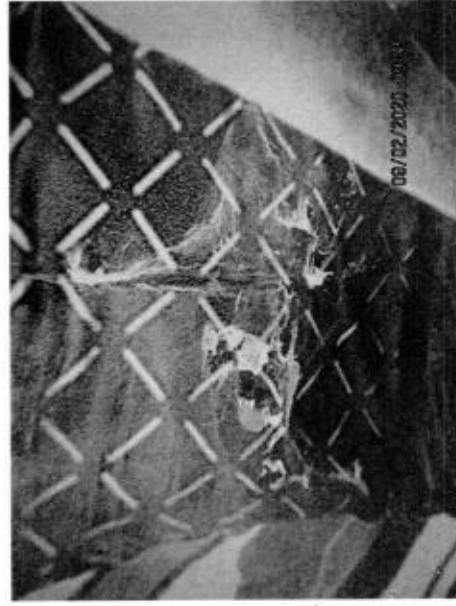
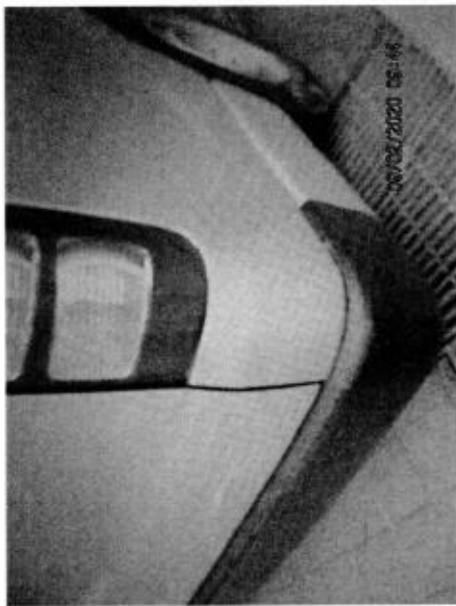
COMFORT TRANSPORTATION PTE LTD
CD. REG. NO. 199303821R

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.:





REPAIR ESTIMATE*

VEHICLE NO SH9465R

DATE 10/02/20 12:00 AM

MAKE :

CHIANG /NTUC

MODEL HYU- I40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	REAR DOOR LH		del ✓	\$2,201.10
	SUB TOTAL			\$2,201.10
	20.00%			\$440.22
	DISCOUNTED TOTAL			\$1,760.88
1	REAR DOOR ADVERTISEMENT		au ✓	\$100.00
1	REAR LH DOOR APP LOGO		au ✓	\$80.00
				\$180.00
	Labour Charge			
	Panel Beating		✓	\$280.00
	Spray Painting Charge		200	\$240.00
	Check Lighting		30	\$60.00
	Remove/tranfer door parts		60	\$80.00
	TOTAL LABOUR			\$660.00
	ESTIMATE TOTAL			\$2,600.88
				2510.88
			1/5 \$2000	
			* 02days	
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.				

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:



Tayfun 97495249

10/2/20 C 445pm

02days

4/5, Resurvey after repair

Sun Ckhauto.com

Our Job Ref No : 305380315

Date : 18/02/20

COMFORTDELGRO ENGINEERING

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

FINALIZATION FORM

To : LKK

Fax :

Attn : TAUFIKH

: SH 9465R

08/02/20

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

Z The repair job shall bill to: NTUC GBB3315M

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

\$2,000.00

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 : CHIANG

Tel : 62148314

Fax : 65468156

Signature : 

Name : _____

Date : _____

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/INC20002315/T1sf3s2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 02-03-2020

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBB 3315M	Veh. Inspected	SH 9465R
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1085904-001	Excess (\$)	0.00
Assign From		Assign Date	10/02/2020

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMGU077237	Colour	BLUE
Odometer	466525	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions 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

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	08/02/2020	Inspection Date	10/02/2020
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 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 9465R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR DOOR LH	DENTED	2,201.10	2,201.10
	LESS 20% DISCOUNT		-440.22	-440.22
			1,760.88	1,760.88
	<u>SPECIAL NETT ITEMS</u>			
1	REAR DOOR ADVERTISEMENT (SN)	NECESSARY	100.00	100.00
1	REAR LH DOOR APP LOGO (SN)	NECESSARY	80.00	80.00
			180.00	180.00
	<u>LABOUR</u>			
	PANEL BEATING.		280.00	280.00
	SPRAY PAINTING CHARGE.		240.00	200.00
	CHECK LIGHTING.		60.00	30.00
	REMOVE / TRANSFER DOOR PARTS.		80.00	60.00
			660.00	570.00
	GRAND TOTAL		2,600.88	2,510.88
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			2,000.00

Report Ref No. NS/INC20002315/T1sf3s2

MOHAMAD TAUFIKH

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

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 contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.