

NS/INC20002318 / 119d332

ASS. REC. BY:

Tangkhut

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: PH 2846G

Policy No:

Claims No: MT/1083574-002

Sum Insured:

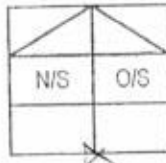
Excess:

(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: 4 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:

SHC1922Y

Yr Regn:

2019, Oct.

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

Truck / Trailer or

Make:

Hyundai iunig

c.c 1500

Colour:

Blue

A/C: Insured / Std / NI / NA

Sp. Reading

42592

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KMHCS8/CV64/86803

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:

195/65R15

R:

u r

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

TOYO / YOKO or

Hankook

Front

Rear

R/Bal.

6

mm

R/Bal.

16

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

10/2/20 @ 430pm

Survey held at

CDGE Loggry

Des. of Damages: Frt ☒ Rear ☒ O/S ☒ N/S ☒ UIC ☒ Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

No policy Found

SHC1922Y - CE3/AIC/1602/204/H/129342

DOA: 5/11/2016

PH 2846G - CC4/LPC/10022136/Ida3n2

DOA: 6/11/2018

Finalised front fig \$4783.54, 4 days. (ask RAN pass the copy to Larry)
Cred \$4740.28, 90%.

RECEIVED 10 FEB 2020

Date/Time, File Pass to?

☐

: Preli. Report

1) 8/2/2019

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

4

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

\$ + RS. SI

Photos:

Others:

TOTAL

Rep. Form:

Lump Sum / REP.:

7P
4783.54

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Shiau Chan (LKKAUTO)

From: MTCL@income.com.sg
Sent: Friday, 14 February 2020 2:33 PM
To: Shiau Chan (LKKAUTO)
Subject: RE: REQUEST CLAIM NUMBER

Dear Sir/Mdm,

We have registered the claim.

Our reference number: MT/1083574-002
Claim Officer: Jessie Wo

Please allow the claim officer 2-3 working days to respond to your case.

We appreciate if you do not respond to this email. Thank you

Best regards

Diana Tay
Senior Admin Assistant
www.income.com.sg



At Income, we are 'In with You' on Performance Innovation and Impact. These attributes reflect what we want as an employer and what we want our people to achieve. Find out more at income.com.sg/careers

From: Shiau Chan (LKKAUTO) [mailto:siewsc@lkkauto.com]
Sent: Friday, 14 February 2020 11:42 AM
To: MTCL@income.com.sg
Subject: REQUEST CLAIM NUMBER

Dear Sir/Madam,

Please refer to the below:

TP Claims against NTUC Income: Follow-Through Survey

Date : 14/02/2020

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Di
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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	08/02/2020 10:38
Date Of Accident	07/02/2020 22:45
Exact Location Of Accident	CHIN SWEE RD X OUTRAM RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC1922Y
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXXX21R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	HYUNDAI
Model	IONIQ

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	CHIN KIM KWONG
NRIC No	SXXXX888Z
Date Of Birth	30/05/1947
Occupation	OUTDOOR
Date Of Driving Pass	29/12/1981
Driving Experience	38 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96755005
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 805B KEAT HONG CLOSE #03-60
Postcode	682805
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?	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)	2
Passenger 1	NAME: : - GENDER: : MALE

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

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	PH2846G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	FRT

No. Of Passenger (Including Driver)

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 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.

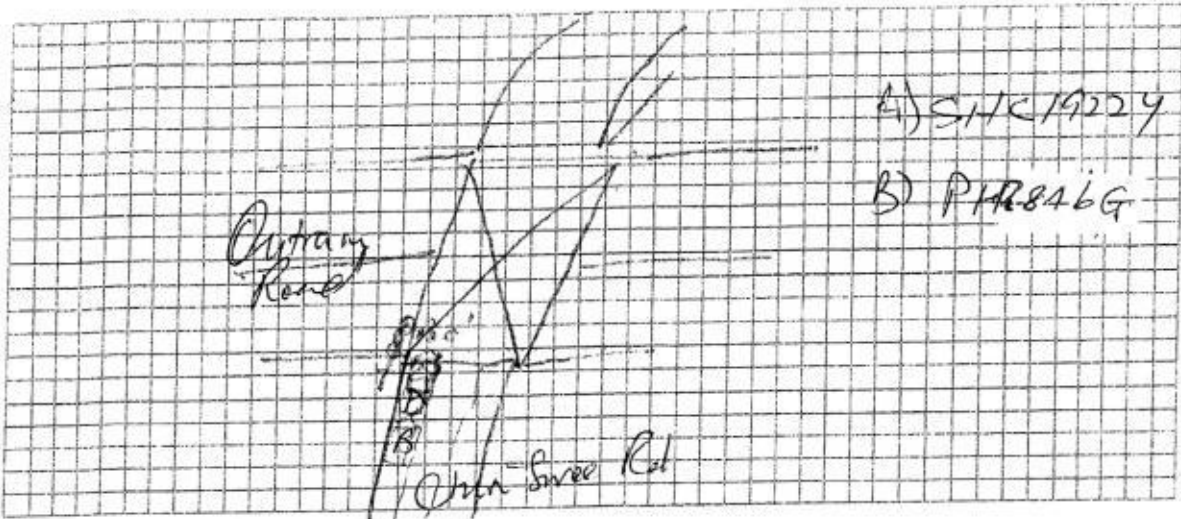
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821K

Policyholder's Signature
Date & Time:

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

Reporting Centre Person's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 7/2/20 at about 2245hr when I Veh A was stationary waiting at the traffic junction (Red), Veh B collided on the rear of my vehicle.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
 30/01/2020, POC: 15830512-13

Policyholder's Signature
 Date & Time:

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

8/2/20
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

30/01/2020 SketchPlanForm_V2

A member of COMFORTDELGRO

Date/Time: 10.02.2020 09:00

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order: 3990558

JC NO.: 305380054

STOMER

COMFORT TRANSPORTATION PTE LTD
7010045
383 SIN MING DRIVE
Singapore SINGAPORE 575717
65508755

VAR5

/MS

STOMER NO.

DRESS

(R)

(P)

ICOUNT CARD NO.

REGN NO.: SHC1922Y	MILEAGE
MAKE: HYUNDAI	FUEL E.....1/2.....F
MODEL IONIQ(G3)	DATE/TIME IN 08.02.2020 09:35
YR OF MANU 22.10.2019	TARGET DATE
CHASSIS CODE KMHC851CVLU186803	COMPLETION DATE/TIME:

JOB DESCRIPTION

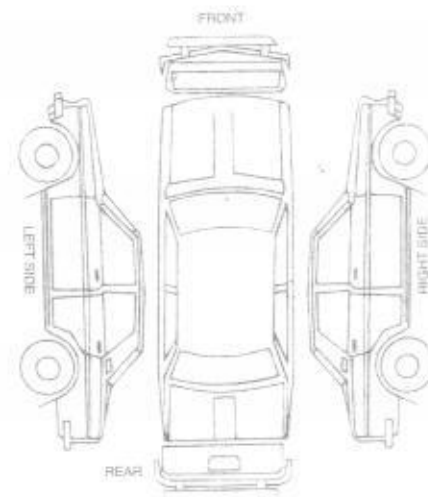
Accident Date: 07.02.2020

NATURE: 3P 07.02.2020

S/NO LABOR CODE

DESCRIPTION

NTUC - Rear
LKK/



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nowledgement Slip

Exit Pass

Vehicle No.: SHC1922Y LARRY

Vehicle No.: SHC1922Y

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHC1922Y

DATE: 10. Feb. 2020

MAKE : HYUNDAI

MODEL : IONIQ

DOA: 7. Feb. 2020

NTUC

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
1	Rear Bumper			\$459.40	one ✓
10	Rear Bumper Clips		\$2.20	\$22.00	net ✓
1	Rear Bumper Centre Molding			\$451.25	dis ✓
1	Rear Bumper Reinforcement			\$294.80	?-xnn ✓
2	Rear Bumper Reinforcement Bracket – RH/LH		\$138.10	\$276.20	?-xnn ✓
1	Rear Bumper Lower Centre Molding			\$47.50	xnn ✓
1	SMARTK Antenna			\$689.50	?-xnn ✓
1	Rear Panel			\$532.00	Xnn ✓
1	Boot Lid			\$2,480.40	bt ✓
1	Boot Lid 'H' Emblem			\$28.00	net-xnn ✓
1	Hybrid' Emblem			\$24.30	net ✓
1	Ioniq' Emblem			\$31.30	net ✓
1	Boot Lid Lower Glass			\$384.90	ar ✓
2	Tail Lamp (boot) – LH/RH		\$794.40	\$1,588.80	xnn ✓
2	Rear License Lamp – RH/LH		\$60.40	\$120.80	xnn ✓
1	Rear Foglamp			\$201.50	xnn ✓
SUB TOTAL				\$7,632.65	
LESS 20%				\$1,526.53	
DISCOUNTED TOTAL				\$6,106.12	
1	Reverse Sensor			\$135.70	net ✓
1	Rear License Plate & Casing			\$55.00	one 45 ✓
1	Rear Windscreen Sealant			\$46.00	net ✓
1	Comfort Sticker			\$15.00	net ✓
1	Tel No. Sticker			\$15.00	net ✓
1	Booking APP Sticker			\$40.00	net ✓
1	Rear License Plate and Casing			\$55.00	Replaced x ✓
1	Windscreen Sealant			\$46.00	net xnn ✓
				\$407.70	
Labour Charge					
1	Labour Charge			\$1,500.00	640 ✓
1	Spray Painting Charge			\$800.00	400 ✓
1	Wiring Charge			\$80.00	30 ✓
1	Tuff Kote			\$80.00	30 ✓
1	Remove/refix Rear Windscreen (Upper & Lower)			\$300.00	200 ✓
1	Computer Programming for BSD			\$250.00	150 ✓
TOTAL LABOUR				\$3,010.00	
ESTIMATE TOTAL				\$9,523.82	

Lary Ng

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305380054

Date : 14. Feb. 2020

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

FINALIZATION FORM

To : LKK

Fax :

Attn : TAUFIKH

Vehicle Reg No. : SHC1922Y

Date of Accident: 7. Feb. 2020

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

1. The repair job shall bill to: NTUC PH2846G
2. The finalized amount shall be:

(a) Spare Parts after List discount	\$3,333.54
(b) Labour Charges	\$1,450.00
Total for Part-By-Part Repair Cost	\$4,783.54
(c.) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: _____	
Final Lumpsum Repair cost	

3. Estimated normal period for repairs: 4 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.

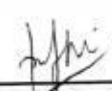
We confirm the estimates and finalized amount

Signature : 

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : _____

Date : 18/02/2020

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				
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
REPAIR ESTIMATE

Date: 14.02.2020
Time: 10:17:15
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 : 305380054
REGN NO : SHC1922Y
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G3)
DATE OF REGN : 22.10.2019
DATE/TIME IN : 08.02.2020 09:35
ACCIDENT DATE : 07.02.2020

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001	04-01-0104-2256-G	IONIQVC PANEL ASSY-TAIL G	1	2,480.40	20.00	1,984.32
0002	04-01-0104-2282-G	IONIQVC COVER-RR BUMPER#	1	459.40	20.00	367.52
0003	04-01-0101-0111-G	HYUNDAI BUMPER COVER CLIP	10 L	22.00	20.00	17.60
0004	04-01-0104-2533-G	IONIQV2 MOULDING ASSY-RR	1	451.25	20.00	361.00
0005	04-01-0104-2270-G	IONIQ EMBLEM-HYBRID	1	24.30	20.00	19.44
0006	04-01-0104-2271-G	IONIQ EMBLEM-IONIQ	1	31.30	20.00	25.04
0007	28-01-0103-0005-A	(I40/SONATA)REAR BOOT LOG	1	15.00		15.00
0008	28-01-0103-0006-A	(I40/SONATA)REAR BOOT TEL	1	15.00		15.00
0009	28-01-9999-2025-A	APP LOGO REAR BONNET CTPL	1	40.00		40.00
0010	04-01-0104-2257-G	IONIQ GLASS ASSY-TAIL GAT	1	384.90	20.00	307.92
0011	09-01-9999-0068-A	HYUNDAI REVERSE SENSOR AS	1	135.70		135.70
0012	FNPS	NO PLATE & CASING	1 N	45.00		45.00

SUB-TOTAL : 3,333.54

JOB NATURE

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 14.02.2020
Time: 10:17:15
Page: 2

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

JOB NO : 305380054
REGN NO : SHC1922Y
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : IONIQ(G3)
DATE OF REGN : 22.10.2019
DATE/TIME IN : 08.02.2020 09:3
ACCIDENT DATE : 07.02.2020

JOB / PARTS DESCRIPTION		QTY	IND	UNIT-PRICE	DISC%	AMOUNT
0000 PB	PANEL BEATING			640.00		
0001 23-502	SPRAYPAINT ON AFFECTED AREA			400.00		
0002 17-01	CHECK ALL LIGHTING			30.00		
0003 20-00	TUFF COAT ON AFFECTED PARTS.			30.00		
0004 L	REMOVE/REFIX REAR WINDSCREEN X 2			200.00		
0005 L	Computer Programming for BSD			150.00		
SUB-TOTAL :						1,450.00
TOTAL :						4,783.54

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :



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/INC20002318/T1qd3s2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 19-02-2020

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	PH 2846G	Veh. Inspected	SHC 1922Y
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1083574-002	Excess (\$)	0.00
Assign From		Assign Date	10/02/2020

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	KMHC851CVLU186803	Colour	BLUE
Odometer	42592	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	HANKOOK	6 mm
L/H Front Tyre	195/65 R15	HANKOOK	6 mm
R/H Rear Tyre	195/65 R15	HANKOOK	6 mm
L/H Rear Tyre	195/65 R15	HANKOOK	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	07/02/2020	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:	4 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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 1922Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	CRACKED	459.40	459.40
10	REAR BUMPER CLIPS @ \$2.20	NECESSARY	22.00	22.00
1	REAR BUMPER CENTRE MOULDING	DISTORTED	451.25	451.25
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	294.80	-
2	REAR BUMPER REINFORCEMENT BRACKET - RH/LH @ \$138.10	NOT NECESSARY	276.20	-
1	REAR BUMPER LOWER CENTRE MOULDING	NOT NECESSARY	47.50	-
1	SMARTK ANTENNA	NOT NECESSARY	689.50	-
1	REAR PANEL	NOT NECESSARY	532.00	-
1	BOOT LID	BENT	2,480.40	2,480.40
1	BOOT LID 'H' EMBLEM	NOT NECESSARY	28.00	-
1	HYBRID' EMBLEM	NECESSARY	24.30	24.30
1	IONIQ' EMBLEM	NECESSARY	31.30	31.30
1	BOOT LID LOWER GLASS	CRACKED	384.90	384.90
2	TAIL LAMP (BOOT) - LH/RH @ \$794.40	NOT NECESSARY	1,588.80	-
2	REAR LICENSE LAMP - RH/LH @\$60.40	NOT NECESSARY	120.80	-
1	REAR FOGLAMP	NOT NECESSARY	201.50	-
	LESS 20% DISCOUNT		-1,526.53	-770.71
			6,106.12	3,082.84
SPECIAL NETT ITEMS				
1	REVERSE SENSOR (SN)	NOT WORKING	135.70	135.70
1	REAR LICENSE PLATE & CASING (SN)	CRACKED	55.00	45.00
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	-
1	COMFORT STICKER (SN)	NECESSARY	15.00	15.00
1	TEL NO. STICKER (SN)	NECESSARY	15.00	15.00
1	BOOKING APP STICKER (SN)	NECESSARY	40.00	40.00
1	REAR LICENSE PLATE AND CASING (SN)	REPEATED	55.00	-
1	WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	-
			407.70	250.70

Report Ref No. NS/INC20002318/T1qd3s2



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 (\$)
	LABOUR			
	LABOUR CHARGE.		1,500.00	640.00
	SPRAY PAINTING CHARGE.		800.00	400.00
	WIRING CHARGE.		80.00	30.00
	TUFF KOTE.		80.00	30.00
	REMOVE / REFIX REAR WINDSCREEN (UPPER & LOWER).		300.00	200.00
	COMPUTER PROGRAMMING FOR BSD.		250.00	150.00
			3,010.00	1,450.00
	GRAND TOTAL		9,523.82	4,783.54
	RECOMMENDED COST OF REPAIRS (CONFIRMED)			4,783.54

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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

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