

ASS. REC. BY: RAMREF: NS/INC20003305/Fsd302

## 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: SLX1052A

Policy No. \_\_\_\_\_

Claims No. MT/1086144-002

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

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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SHC 88253 Yr Regn: 10/12/2015Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or \_\_\_\_\_

Make: Hundai 140 c.c. 1685Colour: blue A/C: Insured / Std / NI / NASp. Reading: 748972 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: KMILPDLUMGUC82941Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 205/60 R16

R: \_\_\_\_\_

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

TOYO / YOKO or

Wastake

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 27/02/2020 10:55 D.O.I. 27/02/2020Survey held at ramanlalga (Lofor)Des. of Damages: Frnt / 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 foundSHC 88253-NS/INC18015692/Klibn2SLX1052A-X5550/-

RECEIVED 09 MAR 2020

LIS: \$5500 with 1 repair days( \$ 8,629.42 - Red - 61% )confirmed on 8/3/2020 with LIS9/3/2020

Date/Time, File Pass to?

09/03/201) Typist

Date/Time, File Return to?

2)

☐ : Prel. Report☒ : Final ReportDays Of Repair: 4Resurvey No. of Trip: 2Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Insp (\$☐ : Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Photos:

Others:

TOTAL

160160

Report Format:

Lump Sum / L.E. \$5,550/- 45

TP Claims against NTUC Income: Follow-Through Survey

Date : 09/03/2020

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/1086144-002	COMFORT TRANSPORTATION PTE LTD	SHC 8825Z	SLX 1052A	27/02/2020	10:35	\$ 14,179.42	\$ 5,550.00
2	MT/1087438-001	COMFORT TRANSPORTATION PTE LTD	SHC 8015U	PC 7600S	24/02/2020	07:10	\$ 2,128.80	\$ 2,050.00
3	MT/1085391-002	COMFORT TRANSPORTATION PTE LTD	SHD 6605A	SLT 9655D	21/02/2020	16:30	\$ 6,839.28	\$ 2,500.00

135

Janet Lim Need Taxi Replacement  
Yes / No**COMFORTDELGRO  
ENGINEERING**

ComfortDelGro Engineering Pte Ltd

256 Braddell Road Singapore 571701  
Hotline + 65 6283 6280 Facsimile + 65 6280 9150

Workshops

18 Loring Drive Singapore 308888 24 Serangoon Road Singapore 758116  
383 Serangoon Drive Singapore 557117 7 Bungeo Road Singapore 728781  
25 Park Road Singapore 138685 400 North Bridge Road Singapore 06721  
320 Loo Road Singapore 150044

Date/Time: 27.02.2020 14:24 Page: 1

member of COMFORTDELGRO

Team: ARC Repair TP(CLSO)

**JOB CARD**

Sales Order:

305384133

JC NO.:

MEMBER

COMFORT TRANSPORTATION PTE LTD

7010045

MEMBER 200 SIN MING DRIVE

SS Singapore SINGAPORE 575717

65508755

(P) (O)

(P)

REGN NO.: SHC8825Z

MILEAGE

MAKE: HYUNDAI

FUEL

MODEL: I-40

E 27.02.2020 11:40 F  
DATE/TIME IN

YR OF MANU: 10.12.2015

TARGET DATE

CHASSIS CODE: KMHLB41UMGU052941

COMPLETION DATE/TIME:

JUNT CARD NO.

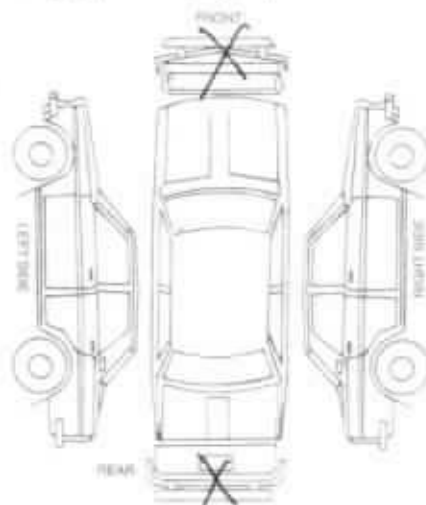
Accident Date: 27.02.2020

NATURE: 3P 27.02.2020

JOB DESCRIPTION

45 LKX  
NTUC - SLX 1052A

S/NO LABOR CODE DESCRIPTION



CHECKED &amp; PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Ledgement Slip

Exit Pass

SHC8825Z

LIMITS

Vehicle No.

SHC8825Z

No.

f Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	821R

### Vehicle Details

Vehicle No.:	SHC8825Z
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Feb 2020
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	D4FDEU429947
Chassis No.:	KMHLB41UMGU082941
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$21,032.00
Original Registration Date:	10 Dec 2015
First Registration Date:	10 Dec 2015
Transfer Count:	0
Actual ARF Paid:	\$21,445.00

### Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Dec 2023
PARF Rebate Amount:	\$16,083.00

### Intended COE Rebate Details

COE Expiry Date:	09 Dec 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$45,466.00
COE Rebate Amount:	\$21,497.00
<b>Total Rebate Amount:</b>	<b>\$37,580.00</b>

### Message

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 27 Feb 2020

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	27/02/2020 13:30
Date Of Accident	27/02/2020 10:35
Exact Location Of Accident	PIE TWDS TUAS BEFORE CTE EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC8825Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	1XXXXX821R
Email Address	FLEETSAFETY@CDGETAXI.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	ONG CHEE WEI (WANG ZHIWEI)
NRIC No	SXXXX657Z
Date Of Birth	20/12/1975
Occupation	OUTDOOR
Date Of Driving Pass	06/07/2012
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90298391
Fax Number	
Contact Number	
EMail Address	CHEEWEI_75@HOTMAIL.COM

Address	BLK 429 CLEMENTI AVENUE 3 #04-422
Postcode	120429
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	CHAIN 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	4
Was any body injured in the Accident?	YES
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: : FEMALE

#### 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

REFER 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	SLX1052A
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage FRONT

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLN1179X

Vehicle Make/Model/Colour TOYOTA

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage FRONT & REAR

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number GBB7160R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage REAR

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name UNKNOWN(PAX)

Approximate Age

Injuries Sustain GIDDY

Injured person in which vehicle? SHC8825Z

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

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 regulate 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.

COMPANY SEAL (POLICYHOLDERS)  
DO NOT SIGN HERE

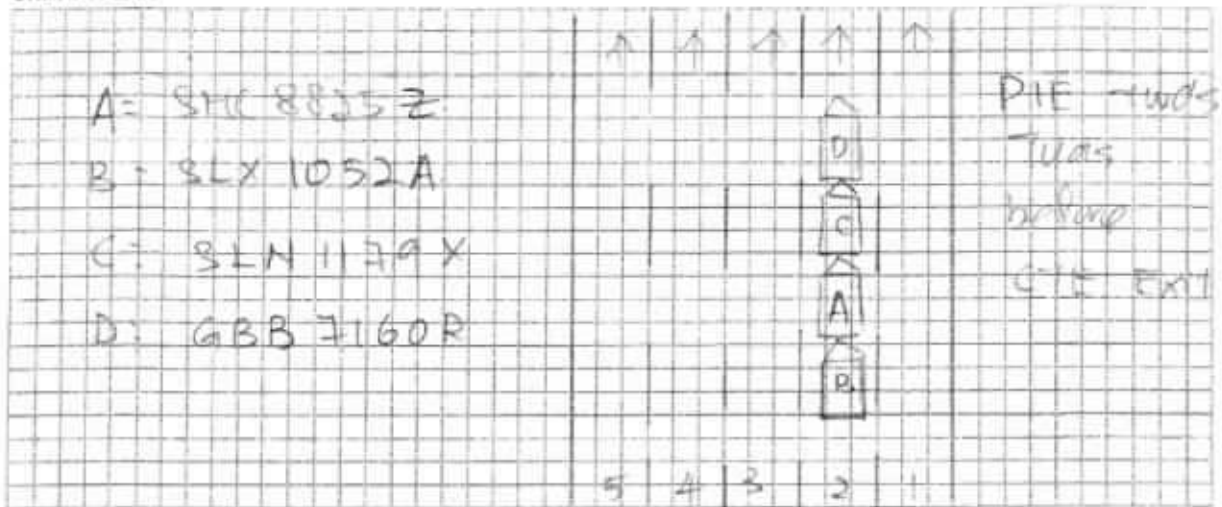
Policyholder's Signature  
Date & Time:

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

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



## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/2/2020 at about 10:35 hrs, I

veh was driving at above said location with a

female passenger onboard. Shortly vehicle instant

brake to stopped and I doing so. Suddenly I felt

an impact from behind caused my taxi surged forward

have a slight contact onto ven C rear portion.

Veh B front portion collided onto the rear portion

of my taxi, another ven D also involved in this

chain collision. The female passenger said she feel

giddy at the point of accident.

## DECLARATION

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

COMFORT TRADING CORPORATION LTD  
CO. REG. NO. 10101021R

Policyholder's Signature

Date &amp; Time:

Driver's Signature  
(If driver is not the Policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Loka Veei Tieng

SGPAC SketchPlanForm\_02

# ComfortDelGro Engineering Pte Ltd

## REPAIR ESTIMATE

DATE: 27.02.2020

P1/2

MODEL: Hyundai i40

INSURANCE: NTUC

VEH NO.: SHC8825Z

MVA: LIM T S

PART NO.	DESCRIPTION	QTY	UNIT PRICE	LIST PRICE
	Boot Lid <del>XBR</del> XBR	1		\$2,174.90
	Boot Lid Rubber xun	1		\$96.50
	Boot Lid Hinge (LH/RH) xun	2	\$142.30	\$284.60
	Boot Lid Lock Upper xun	1		\$102.60
	Boot Lid Lock Lower xun	1		\$31.70
	Bootlid i40 Emblem xun	1		\$27.90
	Boot Lid 'H' Emblem xun	1		\$28.70
	Boot Lid CRDI Plate xun	1		\$27.90
	Boot Lid Lamp (LH/RH) xun	2	\$565.60	\$1,131.20
	Bootlid Moulding xun	1		\$85.00
	Bootlid Lower Garnish xun	1		\$227.90
	Rear Bumper cna	1		\$553.00
	Rear Bumper Reinforcement T xun	1		\$428.40
	Rear Bumper Reinforcement Bracket (LH/RH) T xun	2	\$80.30	\$160.60
	Rear Bumper Clip 10 pcs nec	10		\$22.00
	Rear Bumper Side Bracket (LH/RH) T Br	2	\$35.60	\$71.20
	Rear Bumper Sponge T xun	1		\$103.50
	Rear Bumper Under Cover cna	1		\$228.00
	Rear Bumper Reflector Lamp (LH/RH) LH RH cna	2	\$30.60	\$61.20
	Tail Lamp (LH/RH) xun	2	\$697.80	\$1,395.60
	Rear Panel xun	1		\$526.70
	Rear Panel Garnish xun	1		\$57.70
	Rear Panel Lower Panel xun	1		\$495.50
	Rear Towing Hook xun	1		\$94.60
	Exhaust Silencer (LH/RH) scr/Bt	2	\$967.70	\$1,935.40
	Exhaust Pipe Centre Bt	1		\$730.10
	Front Bumper cna	1		\$1,052.20
	Radiator Grille cna	1		\$1,110.10
	Radiator Grille H Emblem nec	1		\$27.50
	Exhaust Fr 2 Bt			\$176.20
	<b>SUB TOTAL</b>			<b>\$13,272.20</b>
	<b>LESS 20%</b>			<b>\$2,654.44</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$10,617.76</b>

\$5028.16



VEHICLE : SHC8825Z TYPE OF CLAIM : 3P

MODEL : I40 SURVEY BY : RAM

JOB NO : 305384133 DATE : 28.02.2020

## SUPPLEMENTARY OF PARTS AND LABOUR COSTS

S/No	DESCRIPTION	QTY	ESTIMATE \$	REMARKS
1	EXHAUST – FRT	1	476.20	ET
	* Last Entry *			
	OTHER ITEMS – REPLACED			
1	BOOTLID I40 EMBLEM	1	27.90	nee
2	BOOTLID H EMBLEM	1	28.70	nee
3	BOOTLID CRDI EMBLEM	1	27.90	nee
4	EXHAUST CENTRE PIPE	1	730.10	ET
5	FRONT BUMPER	1	1052.20	GTN
	* Last Entry *			

already  
in est

Our Job Ref No : 305384133

Date : 03/03/20

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : RAM

Vehicle Reg No. : SHC8825Z

Date of Accident : 27-Feb-20

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

1. The repair job shall bill to: NTUC -- SLX1052A
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: 20% \$5,550.00
  - Final Lumpsum Repair cost \$5,550.00**

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 : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : RAM

Date : 5/3/2020

## 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		NO		
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/INC20003305/Fsd3e2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 10-03-2020	
Code: INC4				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SLX 1052A	Veh. Inspected	SHC 8825Z	
Policy No.		Coverage (\$)	0.00	
Claim No.	MT/1086144-002	Excess (\$)	0.00	
Assign From		Assign Date	27/02/2020	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HYUNDAI I40	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	KMHLB41UMGU082941	Colour	BLUE	
Odometer	748972	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	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	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	27/02/2020	Inspection Date	27/02/2020	
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:		4 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. SHC 8825Z**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	BOOT LID	TO REPAIR SEE LABOUR	2,174.90	-
1	BOOT LID RUBBER	NOT NECESSARY	96.50	-
2	BOOT LID HINGE (LH/RH) @\$142.30	NOT NECESSARY	284.60	-
1	BOOT LID LOCK UPPER	NOT NECESSARY	102.60	-
1	BOOT LID LOCK LOWER	NOT NECESSARY	31.70	-
1	BOOTLID I40 EMBLEM	NECESSARY	27.90	27.90
1	BOOT LID 'H' EMBLEM	NECESSARY	28.70	28.70
1	BOOT LID CRDI PLATE	NECESSARY	27.90	27.90
2	BOOT LID LAMP (LH/RH) @\$565.60	NOT NECESSARY	1,131.20	-
1	BOOTLID MOULDING	NOT NECESSARY	85.00	-
1	BOOTLID LOWER GARNISH	NOT NECESSARY	227.90	-
1	REAR BUMPER	CRACKED	553.00	553.00
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	428.40	-
2	REAR BUMPER REINFORCEMENT BRACKET (LH/RH) @\$80.30	NOT NECESSARY	160.60	-
10	REAR BUMPER CLIP	NECESSARY	22.00	22.00
2	REAR BUMPER SIDE BRACKET (LH/RH) @\$35.60	N/S BROKEN	71.20	35.60
1	REAR BUMPER SPONGE	NOT NECESSARY	103.50	-
1	REAR BUMPER UNDER COVER	CRACKED	228.00	228.00
2	REAR BUMPER REFLECTOR LAMP (LH/RH) @\$30.60	N/S CRACKED	61.20	30.60
2	TAIL LAMP (LH/RH) @\$697.80	NOT NECESSARY	1,395.60	-
1	REAR PANEL	NOT NECESSARY	526.70	-
1	REAR PANEL GARNISH	NOT NECESSARY	57.70	-
1	REAR PANEL LOWER PANEL	NOT NECESSARY	495.50	-
1	REAR TOWING HOOK	NOT NECESSARY	94.60	-
2	EXHAUST SILENCER (LH/RH) @\$967.70	SCRATCHED / BENT	1,935.40	1,935.40
1	EXHAUST PIPE CENTRE	BENT	730.10	730.10
1	FRONT BUMPER	CRACKED	1,052.20	1,052.20
1	RADIATOR GRILLE	CRACKED	1,110.10	1,110.10

Report Ref No. NS/INC20003305/Fsd3e2



# 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 (\$)
1	RADIATOR GRILLE H EMBLEM	NECESSARY	27.50	27.50
1	EXHAUST FRT	BENT	476.20	476.20
	LESS 20% DISCOUNT		-2,749.68	-1,257.04
			10,998.72	5,028.16
	<b>SPECIAL NETT ITEMS</b>			
1	BOOT LID COMFORTDELGRO STICKER (SN)	NECESSARY	30.00	30.00
1	BOOT LID 65521111 STICKER (SN)	NECESSARY	30.00	30.00
1	REAR BUMPER REVERSE SENSOR (SN)	DAMAGED	135.70	135.70
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
1	FRONT NO. PLATE W/TRIM COVER (SN)	NOT NECESSARY	55.00	-
			300.70	245.70
	<b>LABOUR</b>			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF BOOT LID.		1,200.00	840.00
	SPRAY PAINTING CHARGE.		1,250.00	600.00
	WIRING CHARGE.		60.00	50.00
	TUFF KOTE.		100.00	50.00
	REMOVE / REFIX REVERSE SENSOR.		120.00	60.00
	REMOVE / REFIX EXHAUST PIPES.		150.00	100.00
			2,880.00	1,700.00
<b>GRAND TOTAL</b>			<b>14,179.42</b>	<b>6,973.86</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>5,550.00</b>

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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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