

REF: INC

NS/INC17018683/Std 2

Surveyor:

ASSIGNMENT

From: _____ Date: 28/09/2017

Estimated Cost: _____

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

To Inspect Vehicle No: SMB 1580

at Workshop m/s SMRT

of Woodlands

Insured: SLD 90176

Policy No: 5071257549-01 30092016

Claims No: MT/0959634-002

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: _____ 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: SMB 1580X

Yr Regn: 50/12/2014

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

Truck / Trailer or

Make: Man NL320F c.c. 16578

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

Sp. Reading: 239977 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WM4H 22265F 7002549

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: 275/70 R22-5

R: _____

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

TOYO / YOKO or

Continental

Front

Rear

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

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

D.O.A. 29/8/2017 D.O.I. 28/9/2017

Survey held at SMRT

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

Frt N/S

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

Date / Time Action / Instruction

SMB 1580X - X

SLD 90176 - X

Lump Sum \$600 (Red: 468 (43%))

RECEIVED 22 NOV 2017

Date/Time, File Pass to?

11/11/11 Typist

Date/Time, File Return to?

2)

Report Format: TP

Lump Sum / I.B.I: (\$ 600)

☐ : Preli. Report
☒ : Final Report

Days Of Repair: 1

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee: 160

Transportation:

S + RS, SI

Photos

Others

TOTAL

160



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/INC17018683/Stb			
73 BRAS BASAH ROAD		Date: 29-09-2017	
#05-01 NTUC TRADE UNION HOUSESINGAPORE			
189556		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLD 9017E	Veh. Inspected	SMB 1580X
Policy No.	5077257549-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	28/09/2017
2. Vehicle Particulars & Condition			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	29/08/2017	Inspection Date	28/09/2017
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.

Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5077257549-01	LUMENS AUTO PTE LTD	201426961K	GFT	drive CLASSIC	SLD9017E	SLD9017E	30/09/2016	

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.
1	MT/0967919-002	SMRT TAXIS PTE LTD	SHF 472U	GBF 6529Y
2	MT/0962029-002	SMRT BUSES LTD	SMB 1572U	SKX 6335M
3	MT/0968532-003	SMRT TAXIS PTE LTD	SHB 1953M	SDB 6808P
4	MT/0969143-002	SMRT TAXIS PTE LTD	SHD 6476E	SJK 7469J
5	MT/0912702-002	SMRT BUSES LTD	SMB 1630K	FQ 8465D
6	MT/0970438-001	SMRT TAXIS PTE LTD	SHB5851Y	SLQ 3128P
7	MT/0970441-001	SMRT TAXIS PTE LTD	SHB 1960S	SKM 5998P
8	MT/0959634-002	SMRT BUSES LTD	SMB 1580X	SLD 9017E
9	MT/0968476-002	SMRT TAXIS PTE LTD	SHB 5800U	SHD 2021K
10	MT/0953202-003	SMRT TAXIS PTE LTD	SHC 4540X	WC3406E

Enquire Transfer Fee

Vehicle Details																
Vehicle No.	SMB1580X															
Vehicle Type	H20 - Public Transport Bus/Coach/Minibus															
Vehicle Attachment 1	Air-Conditioned															
Vehicle Scheme	OmniBus (SMRT - ARF-exempted)															
Vehicle Make	MAN															
Vehicle Model	NL 320F (A22) 11L AUTO ABS TURBO															
Chassis No.	WMAA22ZZ5F7002549															
Propellant	Diesel															
Engine No.	50339360523929															
Engine Capacity	10518 cc															
Maximum Power Output	-															
Maximum Laden Weight	18000 kg															
Unladen Weight	11280 kg															
Year Of Manufacture	2014															
Original Registration Date	30 Dec 2014															
Lifespan Expiry Date	29 Dec 2031															
Road Tax Expiry Date	29 Dec 2017															
Inspection Due Date	29 Dec 2018															
Intended Transfer Date	01 Dec 2017															
CO2 Emission	-															
<p>The current road tax expiry is 29 Dec 2017. You may renew the road tax from 30 Sep 2017 with all pre-requisite(s) fulfilled. If the road tax is renewed after 29 Dec 2017, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.</p> <p>Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.</p> <p>Amount Payable (From 30 Dec 2017 to 29 Jun 2018)</p>																
	<table><tr><th>Amount Before GST (S\$)</th><th>GST Amount (S\$)</th><th>Amount After GST (S\$)</th></tr><tr><td>Transfer Fee</td><td>11.00</td><td>-</td><td>11.00</td></tr><tr><td>Sub Total</td><td></td><td></td><td>11.00</td></tr><tr><td>Nett Road Tax Amount (After Offsetting Over Payment)</td><td>850.00</td><td>-</td><td>850.00</td></tr></table>	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)	Transfer Fee	11.00	-	11.00	Sub Total			11.00	Nett Road Tax Amount (After Offsetting Over Payment)	850.00	-	850.00
Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)														
Transfer Fee	11.00	-	11.00													
Sub Total			11.00													
Nett Road Tax Amount (After Offsetting Over Payment)	850.00	-	850.00													

Total Amount Payable**861.00**

You may print this page for reference.

OK

Print

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Best viewed with IE 10 and above, Chrome, Firefox, and Safari.

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Last updated on 19 Nov 2017 at 12:12 AM

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 ability.
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 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	21/09/2017 16:08
Date Of Accident	29/08/2017 20:45
Exact Location Of Accident	JUNCTION OF WOODLANDS SQUARE & WOODLANDS AVE 7
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB1580X
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81111111

Vehicle Particulars

Manufacturer	MAN
Model	12M
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	BUS

Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-II027592MFBP
Cover Note Number	

Driver

Name of Driver	MOHAMMED MASHUDI BIN MANSOL ATAN MASRUM
NRIC No	S7011416Z
Date Of Birth	10/04/2017
Occupation	OUTDOOR
Date Of Driving Pass	10/04/2017
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? 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

I WAS DRIVING ON BUS LANE ON THE RIGHTMOST LANE, WAITING TO TURN RIGHT INTO WOODLANDS SQUARE. WHEN THE TRAFFIC LIGHT TURNED GREEN IN MY FAVOR, I PROCEED FORWARD TO MAKE THE RIGHT TURN. SUDDENLY, A PRIVATE CAR CUT INTO MY LANE FROM MY LEFT AND COLLIDED ONTO MY BUS. I CHECKED ON MY PAX, NO INJURY WAS REPORTED.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? YES

Remarks/ Reasons: PEND FOR DOWNLOADING

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLD9017E

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Sketch Plan Pg. 1

SKETCH PLAN

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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.
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.



Policyholder's Signature / Date & Time

[Signature]

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



Witnessed by Reporting Centre Personnel

Sketch-Plan



Describe Circumstances of the Accident

Refer to report.

Declaration

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



Policyholder's Signature / Date & Time

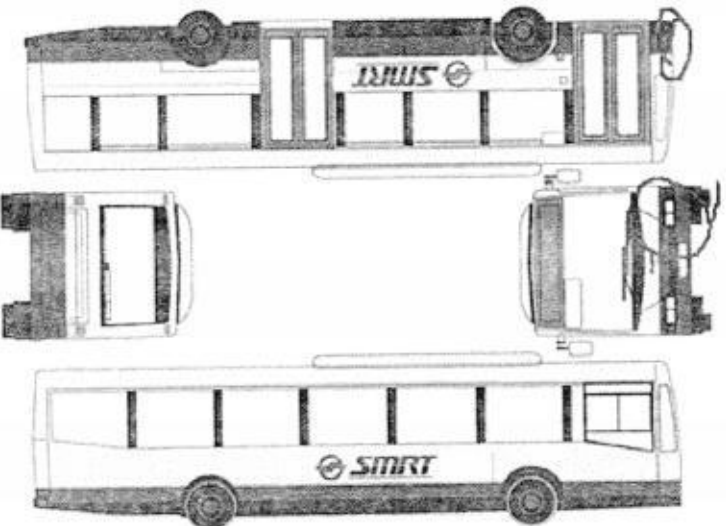
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No : SMB1580X
 Ref. No : BUS/08/17/7069
 Reg. Date : 01/01/1900
 Vehicle Type : BUS -12M
 Make : MAN
 Model : MAN
 Name of Driver : Mohammed Mashudi Bin Mansol Atan Masrum
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 29/08/2017 08:45:00 PM
 Accident Reported Date / Time : 21/09/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : IDAC
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No :
 Special Instruction to ARC, if any :
 TP: SLD9017E
 FRONT LEFT PORTION DAMAGED
 Prepared Date : 21/09/2017 05:52:35 PM



Sebastian
 24/10/2017
 910036121
 Sebastian.gan@kwaun.com

Chassis No :
Work Shop :

Mileage : 0
Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	530.00	0.00
Total Spray Painting Charges	538.00	0.00
Total Material Charges	0.00	0.00
Other Charges	0.00	0.00
TOTAL	1,068.00	0.00
Lum Sum Total	0.00	0.00
No. of Repair Days	1.00	0.00
Prepared / Adjusted By		
Arc / Surveyor Sing Off Date	24/10/2017 10:19:45 AM	01/01/1900 12:00:00 AM



Prepared / Adjusted Date :
Remarks :

Prepared Date : 28/09/2017 09:53:53 AM

Section C - To be Completed by Admin Assistant, Accident Repair Centre, Upon Completion of Repair

Quotation No :
Quotation Date :
Invoice Amount :

Invoice No :
Invoice Date :
Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH FRONT PORTION	530.00	0.00 265
Total Labour	530.00	0.00

Part 2 - Spraying Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	538.00	0.00 446
Total Spray Painting & Panel Beating	538.00	0.00

Part 3 - Other Costs - Accident and Accident Repair Related Expenses

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Other Costs		

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
TOTAL MATERIALS										
TOTAL MATERIALS(Discounted)								0.00	0.00	

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
TOTAL SUPPLEMENTARY MATERIALS									

LKX Auto Consult is hereby notifying 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 modifications is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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Date Of Report	21/09/2017 16:08
Date Of Accident	29/08/2017 20:45
Exact Location Of Accident	JUNCTION OF WOODLANDS SQUARE & WOODLANDS AVE 7
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB1580X
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81111111

Vehicle Particulars

Manufacturer	MAN
Model	12M
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	BUS

Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-II027592MFBP
Cover Note Number	

Driver

Name of Driver	MOHAMMED MASHUDI BIN MANSOL ATAN MASRUM
NRIC No	S7011416Z
Date Of Birth	10/04/2017
Occupation	OUTDOOR
Date Of Driving Pass	10/04/2017
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? 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

I WAS DRIVING ON BUS LANE ON THE RIGHTMOST LANE, WAITING TO TURN RIGHT INTO WOODLANDS SQUARE. WHEN THE TRAFFIC LIGHT TURNED GREEN IN MY FAVOR, I PROCEED FORWARD TO MAKE THE RIGHT TURN. SUDDENLY, A PRIVATE CAR CUT INTO MY LANE FROM MY LEFT AND COLLIDED ONTO MY BUS. I CHECKED ON MY PAX, NO INJURY WAS REPORTED.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? YES

Remarks/ Reasons: PEND FOR DOWNLOADING

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLD9017E

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name




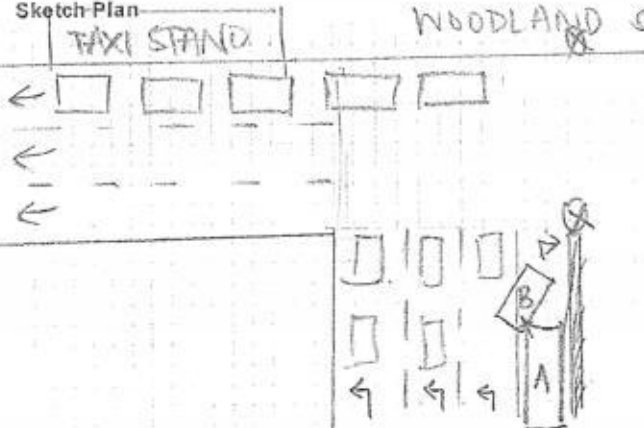
Phone Number

Email Address

SKETCH PLAN

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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.
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
<p>Sketch-Plan</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;">  <p style="text-align: center;">WOODLAND SQUARE</p> <p style="text-align: center;">WOODLAND AVE 7</p> </div> <div style="width: 50%; border-left: 1px solid black; padding-left: 10px;"> <p>A - SMB1580X</p> <p>B - SLD9017E</p> </div> </div>		

Describe Circumstances of the Accident

Refer to report.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

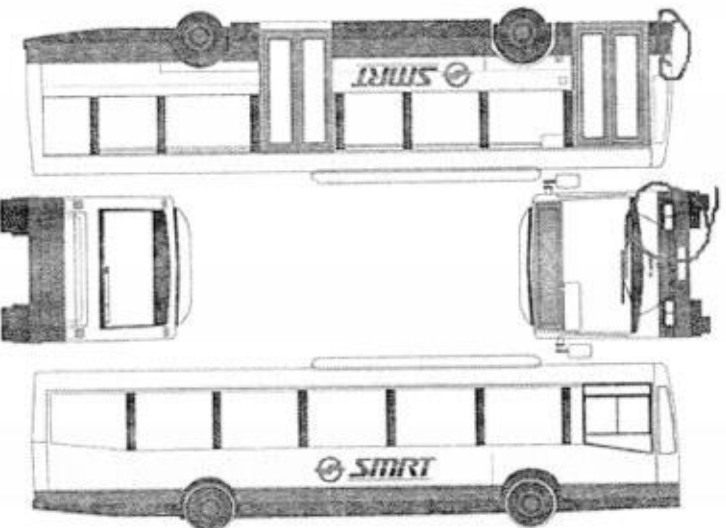


Witnessed by Reporting Centre Personnel

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No : SMB1580X
 Ref. No : BUS/08/17/7069
 Reg. Date : 01/01/1900
 Vehicle Type : BUS -12M
 Make : MAN
 Model : MAN
 Name of Driver : Mohammed Mashudi Bin Mansol Atan Masrum
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 29/08/2017 08:45:00 PM
 Accident Reported Date / Time : 21/09/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : IDAC
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle Issued? : No
 Accident Repair Job Card No :
 Special Instruction to ARC, if any :
 TP: SLD9017E
 FRONT LEFT PORTION DAMAGED
 Prepared Date : 21/09/2017 05:52:35 PM



Sebastian.
 28/9/2017.
 - Part by part repair.
 - Photo After Paint.

Chassis No :
Work Shop :

Mileage : 0
Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	530.00	0.00
Total Spray Painting Charges	538.00	0.00
Total Material Charges	0.00	0.00
Other Charges	0.00	0.00
TOTAL	1,068.00	0.00
Lum Sum Total	0.00	0.00
No. of Repair Days	1.00	0.00
Prepared / Adjusted By		
Arc / Surveyor Sing Off Date	01/01/1900 12:00:00 AM	01/01/1900 12:00:00 AM
Prepared / Adjusted Date		
Remarks		
Prepared Date	28/09/2017 09:53:53 AM	

Section C - To be Completed by Admin Assistant, Accident Repair Centre, Upon Completion of Repair

Quotation No :
Quotation Date :
Invoice Amount :

Invoice No :
Invoice Date :
Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH FRONT PORTION	530.00	0.00 265
Total Labour	530.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	538.00	0.00 400
Total Spray Painting & Panel Beating	538.00	0.00

Part 3 - Other Costs - Accident and Accident Repair Related Expenses

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Other Costs		

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
TOTAL MATERIALS										
TOTAL MATERIALS(Discounted)								0.00	0.00	

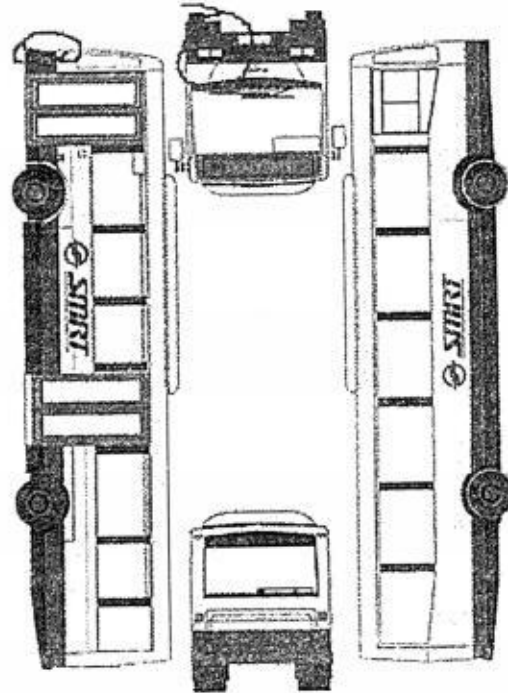
Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
TOTAL SUPPLEMENTARY MATERIALS									

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No : SMB1580X
 Ref. No : BUS/08/17/7069
 Reg. Date : 30/12/2014
 Vehicle Type : BUS -12M
 Make : MAN
 Model : MAN
 Name of Driver : Mohammed Mashudi Bin Mansol Atan Masrum
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 29/08/2017 08:45:00 PM
 Accident Reported Date / Time : 21/09/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : IDAC
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024092767
 Special Instruction to ARC,if any :
 TP: SLD9017E
 FRONT LEFT PORTION DAMAGED
 Prepared Date : 21/09/2017 05:52:35 PM



Section B - To be Completed by Service Advisor, Accident Repair Centre

Chassis No : WMAA22ZZ5F7002549

Mileage

0

Work Shop :

Repair Completed Date / Time : 01/01/2000

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 530.00	265.00
Total Spray Painting Charges	: 538.00	446.00
Total Material Charges	: 0.00	0.00
Other Charges	: 0.00	-100.00
TOTAL	: 1,068.00	611.00
Lum Sum Total	: 1,050.00	600.00
No. of Repair Days	: 1.00	1.00
Prepared / Adjusted By	:	SEBASIAN YEANG (Surveyed on 24/10/17)
Arc / Surveyor Sing Off Date	: 24/10/2017 10:19:45 AM	09/11/2017 11:01:42 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 28/09/2017 09:53:53 AM

Section C - To be Completed by Admin Assistant, Accident Repair Centre, Upon Completion of Repair

Quotation No :	Invoice No :
Quotation Date :	Invoice Date :
Invoice Amount :	Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH FRONT PORTION	530.00	265.00 /
Total Labour	530.00	265.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	538.00	446.00 /
Total Spray Painting & Panel Beating	538.00	446.00

Part 3 - Other Costs - Accident and Accident Repair Related Expenses

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Lump Sum Adjustment by Surveyor	0.00	-100.00
Total Other Costs	0.00	-100.00

1068.00

$$\begin{array}{r}
 265 \\
 + 446 \\
 \hline
 711 \\
 - 20\% \\
 \hline
 568.80
 \end{array}$$

L/S : \$550

Sebastian

20/11/2017

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommended	Surveyor Approved	Photos Attached
TOTAL MATERIALS										
TOTAL MATERIALS(Discounted)							0.00	0.00		

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
TOTAL SUPPLEMENTARY MATERIALS									

**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/INC17018683/Stbe2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 01-12-2017

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLD 9017E	Veh. Inspected	SMB 1580X
Policy No.	5077257549-01	Coverage (\$)	0.00
Claim No.	MT/0959634-002	Excess (\$)	0.00
Assign From		Assign Date	28/09/2017

2. Vehicle Particulars & Condition

Make & Model	MAN NL 320F	c.c	10518
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	WMAA22ZZ5F7002549	Colour	MULTI COLOUR
Odometer	239977	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	275/70 R22.5	CONTINENTAL	6 mm
L/H Front Tyre	275/70 R22.5	CONTINENTAL	6 mm
R/H Rear Tyre	275/70 R22.5 (D)	CONTINENTAL	6/6 mm
L/H Rear Tyre	275/70 R22.5 (D)	CONTINENTAL	6/6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	29/08/2017	Inspection Date	28/09/2017
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	1 Working Days
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National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMB 1580X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	TO REPAIR LH FRONT PORTION.		530.00	265.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		538.00	446.00
			1,068.00	711.00
	GRAND TOTAL		1,068.00	711.00
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			600.00

Report Ref No. NS/INC17018683/Stbe2

YEANG WAI KEEN

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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