REF: NG/THC170	21792/Sgbn2		
355	IGNMENI		
From Date:	Vah No SHBASCE	Yr Regn: _!L 7	
Estimated Cost	Type: M.Car / M.Cycle / Bus / Van / L	orry / Tayi / Prime Move	er
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or		
To Inspect Vehicle No.	Mare Toupon Print.		
et Workshop m/s	Colour Marson	A/C Insured / S	
of	Sp.Reading 44586	T/Radic: Insured / S	td / NI / NA
Insured FY 4059 C	Eng/No:	-	
Policy No. 5094747859 03-10-7 -07-10-18			
Claims No. MT/0969589-002	Gen. Cond: Good / Fair / Poor / Burn		
Sum insured: Excess:	Steering: Inorder / Jammed / Leaked		
(Client's Record)	Brake: Inforder / Jammed / Leaked		
Make of Veh	Modi: (N) /S/Rim / STD A/Rim of Tyre Size: F: /95/65/K/5		
(Policy Condition)	Tyre Size: F: 777/57/57		
Remark. The veh had commenced its N/S 0/S	BS / DUN / EXNOVA / GY / FS / LIZA	A / MIC / OHTSU / PIR /	SUMI/
repair at the time of inspection.	TOYOTYOKO or Fallen		
Ball or Market Value:	Front	Rear	
IDAC Accident Rport: Consistent? : Yes or No	R/Bal 6 mm	R/Bal.	mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal mm	L/Bal €	mm
Est Repairs:	. Flor /11/21 A.O.D	DOI. 14/11/20	15.
Lum Sum: % 3 Val.: Yes or No	Survey held at SMRT		
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O) N/S U/C Roofto	op or
Date: Person Contacted: Vehicle: IN / OU	The U/C / Chassis frame / Bo	dy Structure affected d	ue to collision.
Date / Time Action / Instruction SHB 736D - NBA / LEP16001555 /Y	D(A: 240116	for FI 11 XAT	R
FY 4059 C - X		Licle.	
15 \$ 1450, 4 days Cled	9 5096.54, 78%)	Niuc,	
- RECEIVED 2 9 May 2011			
Sate/Time File Pass to? : Preli. Report	Days Of Repair: 4		
29/1 1/M/m Final Report	Resurvey No. of Trip:	/ Survey Fee: [160
Sata Time File Return to?	meaning man or miles	Transportation	35
Add F	ee: Site Insp (\$) \$+RSSI	
Section 2	Interview (S) Photos	
Report Format :	Tach Inva I\$) Inen	
Lump Sum / 18/1: (8 14/50	Weiverd S		
		70740	195



51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315



ITU(INCOME INSURA	ANCE CO-OPERATIVE LTD	Ref: NS/INC1702179	2/Sqb	
3 BI 05-0 895) INION HOUSESINGAPORE	Date: 15-11-2017 Code: INC4		
		Policy Particulars	:- THIRD PARTY CLAIM		
	Insured Veh.	FY 4059C	Veh. Inspected	SHB 736E	
	Policy No.	5094749859	Coverage (\$)	0.00	
	Claim No.		Excess (\$)	0.00	
	Assign From		Assign Date	14/11/2017	
2.	SERVICE NAME OF STREET	Vehicle Parti	culars & Condition		
	Make & Model		c.c	0	
	Engine No. HIDDEN		Year of Reg.		
Chassis No.		Colour			
	Odometer -		Steering		
	Brakes		Modification		
	General				
3.		Condit	tions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre			mm	
	L/H Front Tyre			mm	
	R/H Rear Tyre			mm	
	L/H Rear Tyre	Q		mm	
4.	z Trigornian (* ty	Descript	ion of Damages		
5.		Gener	al Information		
J.	Accident Date	12/11/2017	Inspection Date	14/11/2017	
	Survey held at	STEP AND THE CO.	PROPERTY OF THE PROPERTY OF		
	Survey field at	60 WOODLANDS INDUSTRIA		7705	
5a.			Remarks		
100	A)THE INSPECTION	ON WAS CONDUCTED ON A"W CE TO YOUR INSTRUCTIONS,	ITHOUT PREJUDICE" BASI WE HAVE NOT AUTHORIS	S. ED REPAIRS.	

Reference No.: NS (NC) 797 896
Policy Type: OD / TP / TP RES / TL / EVA Case Handler : Case handler to make sure all Information created by the assignment team are ACCURATE. Admin (Y-Date N-Date Y-Date N-Date (1) Office Assign Form C Reference No. Customer Code C Assign From N Assign Date C Veh No (Inspected) C Veh No (Insured) C D.O.A C Policy No. C Claim No C Insurance Authorisation (CA /REV/REP) C C Report Type Weekend Charges C Survey held at/Repairer N Excess Separtian): Case handler to make sure the surveryor completed all required information. Surveyor ((1) Assignment Form Vehicle No C Regn Month/Year C N . Vehicle Type Make & Model N Engine Capacity. (C.C) Colour Odometer. (Sp.Reading) C Chassis No C General Condition Steering Brake N Modification (Modi) Tyre Size C Tyre Make N Tyre Balance C Date of Inspection C Survey held N Des.of Damages N (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form ALL Parts condition N Market Value for OD cases C Estimate Repair Cost for PRI (RSI, TMI, MSIG) Days of repair C Finalised Amount C Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo Uploaded Check By: Date Case Handler

Survey Department Check List (Case Handler)

Denise Tay (LKKAuto)

From:

mtreg <mtreg@income.com.sg>

Sent:

Wednesday, 29 November, 2017 12:43 PM Denise Tay (LKKAuto) REQUEST CLAIM NUMBER

To: Subject:

Hi,

All claims created.

Samsia

Senior Admin Assistant, Motor Insurance www.income.com.sg











From: Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]

Sent: Wednesday, November 29, 2017 10:51 AM

To: mtreg <mtreg@income.com.sg> Subject: REQUEST CLAIM NUMBER

Dear Sir,

TP Claims against NTUC Income: Follow-Through Survey

c/N-	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Da
S/No		SMRT TAXIS PTE LTD	SHB 535T	FBG 907Z	1
1	MT/0971613-001	SMRT TAXIS PTE LTD	SHC 4736Z	SJA 2764S	
2	MT/0971616-001	SMRT TAXIS PTE LTD	SHB 736E	FY 4059C	
3	MT/0969589-002	SMRT TAXIS PTE LTD	SHB 5261A	FY 8785M	
4	MT/0971621-001		SHF 210J	SJQ 586T	
5	MT/0965908-003	SMRT TAXIS PTE LTD	3111 2200		- 1

eBaoTech									Gener	alClaim
Hello, NAC_PAYA_UBI_80	0601		100000000000000000000000000000000000000	TO STATE OF THE PERSON	The state of the s		Change Lan	guage	· Change Password	
My Desktop	Polic	y Query					900100	FORMU		
Notice of Loss	Policy No	0.				Date of Acc	ident	12/11	/2017 10:47	
	Vehicle !	No.(Far Motor)	FY4059C							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5094749859	SALMON BARIS UJYARMUNAVAR	59175966G	GMC	Third Party	FY4059C	FY4059C	03/10/2017	02/10/2018
			- MANUFACTURE CONTRACTOR		1	Continue				

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 witholding of material facts may allow insurance companies to
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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	STAT	ΈM	ENT
ACCIDENT			

Date Of Report

13/11/2017 09:29

Date Of Accident

12/11/2017 19:35

Exact Location Of Accident

JUNCTION OF WOODLANDS AVE 1 & CHAMPIONS WAY

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHB736E

Insured/Policyholder

Name Of Registered Owner

SMRT TAXIS PTE LTD

Co Reg No

198905369K

Email Address

NOEMAIL

Mobile Phone No

Alternative Phone No

OFFICE-80000000

Vehicle Particulars

Manufacturer

TOYOTA

PRIUS TAXI-1.8 (A)

Exact Purpose for which vehicle was being used at

time of accident

HIRE AND REWARD

Are you claiming under your own insurance policy

for repair to your vehicle?

If No. Please state action to be taken

THIRD PARTY

Vehicle Category

TAXI

Insurance Company

Name of Insurance Company

FIRST CAPITAL INSURANCE LTD THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage Fleet Policy

YES

Policy Number

D-17087562MFSH

Cover Note Number

Driver

KOK MON KIT

NRIC No

S8080402D 29/03/1980

Date Of Birth

Name of Driver

OUTDOOR

Occupation

Date Of Driving Pass

13/06/2001

Driving Experience

16 YEARS AND 4 MONTHS

Gender

MALE

Mobile Number

Fax Number

Contact Number

EMail Address

NOFMAIL

Page 1 of 14

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

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

Was any body injured in the Accident?

YES

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

4

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/2017112/7006 On 12/11/2017 at about 1936hrs, I was at Woodlands Avenue 1 junction to Champions Way and Woodlands Avenue 4 trying yo make a U-turn towards Avenue 2. As I was approaching the traffic light, it was red light however there was a green turn right light. I then signalled right and wanted to make a U-turn. As I was making th Uturn, a motor bike FY4059C that was behind me suddenly moved forward and collided onto my right passenger door. After the collision, he did not fall down and managed to stay on his bike. I then moved the vehicle to the side and exchange particulars with the rider, the rider informed me that he felt pain on his right leg however does not require ambulance. I wish to inform that I am not injured in the process.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

FILE TOO LARGE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FY4059C

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

SALMON BARIS UJYARMUNAVAR

NRIC/Passport Number

S9175966G

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 14

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name

SALMON BARIS UJYARMUNAVAR

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FY4059C

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
 - 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, involces, 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;
 - 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

Torcomplying with requirements under any regulations, laws or court orders.

Mar MAT

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

Date & Time:

alu 13/11/212

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

ETCH PLAN		
OD CLANDS AVE 4		CHAMPIONS WAY
	DA	
-		
- SUR736E	(/ ;	
- FY 4059C		
	VI TO	£ 1
ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT WIRELANDS AV	
	1/20 1/20 1/20 1/20 1/20 1/20 1/20 1/20	o Z
REFER TO POLICE	EFFORT - 7/20171112/40	- 6
- H		
	-	
	10100000	
DECLARATION	the state of the s	
(()\$)	rticulars are true in every respect.	da 13/11/2013
2 314	Non Not	
Policyholder's Signature Date & Time:	Oriver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:





1 of 3

Report No. T/20171112/7006

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT		Station Diary No.:	
Date/Time Report Made: 12/11/2017 20:31	Vide Report No.: Station Diary No.		
	CHARLES AND THE	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Name of Informant: KOK MON KIT	Address: APT BLK 876 WOODL SINGAPORE 730876	ANDS AVENUE 9 #04-254	
ID Type / ID No.: NRIC NO / S8080402D	Contact No.: Home/Office:	Mobile: 97771495	

Email: Nationality: Kennykok80@yahoo.com SINGAPORE CITIZEN Type of Informant: Age: 37 Date of Birth: Sex: Driver 29/03/1980 Male Institution / School Name: Language: Race: English Chinese Driving Licence Information: Class: 2B,3 Occupation: Date of Expiry: TAXI DRIVER

SHARE SHARES	AND DESCRIPTION OF THE PARTY OF	可是是一种的特殊的特别的		
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/11/2017 19:36	Type of Location: X-Junction
Location:				
CHAMPIONS	WAY			
Junction of C	hampions Way and	Woodlands Avenue 1		
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - W	orking	Traffic Volume: Light
Type of Collis	sion: ving Vehicles - Hea		1	Anyone conveyed by ambulance: No

			San Paragola de La Caración de la Ca		
FY4059C	Motorcycle	HONDA	PHANTOM	Slightly Damaged	0
SHB736E	Car	TOYOTA	PRIUS	Slightly Damaged	0

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20171112/7006

2 of 3

Report No. T/20171112/7006

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Name	SALMON BARIS UJ	YARMUNA	VAR	ID No.		S9175966G
Related Vehicle	FY4059C (Motorcyc	ile)		Contac	t No.	81112540
Hospital/Clinic	NIL			Class Driving Licens Expiry	e&	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	COLUMN TWO IS NOT THE	Sligh	TO YOUR ROLL TO BE
Name	KOK MON KIT			ID No	NA MERCE	S8080402D
Related Vehicle	SHB736E (Car)			Conta	ct No.	97771495
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: 2B,3 Date of Expiry: NIL
	NIL Date			scharge	NIL	
Date Treatment	INIL			of Injury	NIL	

Brief Details.

On 12/11/2017 at about 1936hrs, I was at Woodlands Avenue 1 junction to Champions way and Woodlands avenue 4 trying to make a U turn towards Avenue 2.

As I was approaching the traffic light, it was red light however there was a green turn right light. I then signalled right and wanted to make a U turn. As i was making the U turn, a motor bike FY4059C that was behind me suddenly moved forward and collided onto my right passenger door. After the collision, he did not fall down and manage to stay on his bike. I then moved the vehicle to the side and exchange particulars with the rider. The rider informed me that he felt pain on his right leg however does not require ambulance.

I wish to inform that i am not injured in the process.





7

Report No. T/20171112/7006

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865

CONTINUATION OF REPORT

Sketch Plan

Tel No: 65470000

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / TPIB / LEE SOON LYE Contact No.: 65476239

Authentication Stamp NP158

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time: 12/11/2017 20:31

Classification Of Case:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	Company
Owner ID Type	5369K
Owner ID	33071
Vehicle Details	
Vehicle No.	SHB736E
Vehicle to be Exported	No
Intended De-registration Date	15 Nov 2017
Vehicle Make	TOYOTA
Vehicle Model	PRIUS TAXI (SMRT)
Primary Colour	Maroon
Manufacturing Year	2014
Engine No.	2ZR6098897
Chassis No.	JTDKN36UX05747159
Maximum Power Output	100.0 kW (134 bhp)
Open Market Value	\$32,920.00
Original Registration Date	16 Jul 2014
First Registration Date	16 Jul 2014
Transfer Count	0
Actual ARF Paid	\$8,088.00
Intended PARF Rebate Details	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	15 Jul 2022
PARF Rebate Amount	\$6,066.00
Intended COE Rebate Details	
COE Expiry Date	15 Jul 2022
COE Category	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years)	8
PQP Paid	\$53,269.00
COE Rebate Amount	\$31,073.00
Total Rebate Amount	\$37,139.00

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 15 Nov 2017

OK

Land Transport Authority

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60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

NTUC

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

Reg. No

SHB736E

Ref. No.

TAX/11/17/2078

Reg. Date

16/07/2014

Vehicle Type

TAXI

Make

TOYOTA PRIUS

Model

PRIUS

Name of Driver

KOK MON KIT

Type of Accident

HEAD TO SIDE

Date / Time of Accident

12/11/2017 07:36:00 PM

Accident Reported Date / Time :

13/11/2017 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Yes

Vehicle is Towed Back? Towed Back Date/Time

12/11/2017

Replacement Vehicle issued? :

Accident Repair Job Card No :

000024093063

Special Instruction to ARC if any :

TOWED \$50 / FY4059C

Prepared Date

13/11/2017 10:00:06 AM

Sebastian. 14/11/2017.

Lump Sun Repair.

Question Mark Itu Photo

Photo After Paint.

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:





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

Chassis No : JTDKN36UX05747159

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

1,014.00

1,494.00

Total Spray Painting Charges Total Material Charges

1,634.26

2.094.34

Total Labout Charges

780.00

0.00

0.00

0.00

Other Charges TOTAL

0.00

Lum Sum Total

4,922.26

0.00

No. of Repair Days

4,900.00

6.00

0.00 3 days

Prepared / Adjusted By

Arc / Surveyor Sing Off Date

13/11/2017 05:20:48 PM

01/01/1900 12:00:00 AM

Prepared / Adjusted Date

Remarks

Prepared Date :

13/11/2017 05:20:04 PM

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:

Section D - Details of Repair Estimates

Part 1 - Labour Works

. 100
pplicable

Part 2 - Spray Painting & Panel Beating Related Works

Lib Casas	Quotation from ARC	Adjusted by Surveyor, if applicable
Job Scope TO REPSRAY REAR BUMPER	378.00	0.00 ×
TO RESPRAY REAR FENDER RH	378.00	0.00 200
RESPRAY WHEEL CAP	180.00	0.00 ×
TO RESPRAY ROCKER PANEL MOULDING	180.00	0.00 100
TO RESPRAY REAR DOOR RH	378.00	0.00 200
Total Spray Painting & Panel Beating	1,494.00	0.00

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

Lik Caana	Quotation from ARC	Adjusted by Surveyor, if applicable
Job Scope	80.00	0.00 X
TOWING CHARGE		0.00 ×
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	- August 1975
TO APPLY RUST-PROOFING ON AFFECTED	100.00	0.00 ×
AREA TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	0.00 ×
TO TRANSFER DOOR MECHANISM	120.00	0.00 60
TO TEST AND REFIX REVERSE SENSOR	120.00	0.00
SYSTEM TO REPLACE SUNDRY PARTS	100.00	0.00 >0
TO WASH AND VACUUM	60.00	0.00 ×
Total Other Costs	780.00	0.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
		CEOEE49	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace	No.
52159- 47905		6505548		6		or fender	(NEC)	Replace	Replace	No
			PIXEL STICKER	(2	60.00	3.00		_ '. ×	Devless	No
52575-		6505549	BUMPER SIDE RETAINER RR/RH	1	94.80	25.00	71.10	Replace ×	Replace	and the street of the street
47020			FENDER RR/RH	ां	766.80	25.00	575.10	Repair	Replace	No
61604- 47090	соммо		SMRT LOGO	1	7.80	0.00	7.80	Replace	Replace	No
	N		STICKER DECAL 6555 8888	ii) (1 21.60	0.00	21.60	Replace	Replace	No
67003-		6505486	DOOR RR/RH		1 954.50	25.00	715.87	Replace	Replace	No
47080 75851-			MOULDING BODY,		1 673.60	25.00	505.20	Replace (R	Replace	No
47900		6503707	RH TYRE		1 126.74	0.00	126.74	Replace ×	Replace	No -
42602-		6505676	CAP SUB-ASSY,		1 174.10	25.00	130.57	Replace	Replace	No
47060			WHEEL					2,042.8	4 2,617.93	
			TOTAL MATERIALS						6 2,094.34	
-		TOTA	L MATERIALS(Discou	nted				1,634.2	2,034.34	

Added Spare Parts / Material Usage After Surveyor Signed off

Part	Portion	Part Name	Qty	List Price	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT- Check
Number	TOTA	L SUPPLEMENTARY	MATERIA	ALS					

SMRT Automotive Service Pte Ltd

60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

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

Reg. No

SHB736E

Ref. No

TAX/11/17/2078

Reg. Date

16/07/2014

Vehicle Type

TAXI

Make

TOYOTA PRIUS

Model

PRIUS

Name of Driver

KOK MON KIT

Type of Accident

HEAD TO SIDE

Date / Time of Accident

12/11/2017 07:36:00 PM

Accident Reported Date / Time :

13/11/2017 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Schastian

Vehicle is Towed Back?

Yes

Towed Back Date/Time

12/11/2017

Replacement Vehicle issued? :

Accident Repair Job Card No :

000024093063

Special Instruction to ARC, if any :

TOWED \$50 / FY4059C - NTUC IDAC

AFTER PAINT PHOTO, LUMPSUM REPAIR, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL

SURVEYOR SEBASTIAN (LKK) & Email :sebastianyeang @lkkauto.com HP:90036121

Prepared Date

: 13/11/2017 10:00:06 AM

Wega Job No: Valuicle sent to SMINY Dato in: Driver: Time In: Received by (SMRT):

Page:

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

Chassis No: JTDKN36UX05747159

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

1,014.00

Total Labout Charges Total Spray Painting Charges

1,494.00

Total Material Charges

515.38

Other Charges

700.00

TOTAL

3,723.38

Lum Sum Total No. of Repair Days

6.00

Prepared / Adjusted By

Arc / Surveyor Sing Off Date

0.00

13/11/2017 05:20:48 AM

0.00 4.00 /

400.00

500.00

805.27

-255.27

1,450.00

SEBASTIAN (LKK)

14/11/2017 04:51:03 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 13/11/2017 05:20:04 AM

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

Quotation No

: QN-1711-0488 : 21/11

Invoice No

Quotation Date Invoice Amount

Invoice Date :

Prepared Date:

Section D - Details of Repair Estimates

Part 1 - Labour Works

Joh Scone	Quotation from ARC	Adjusted by Surveyor, if applicable	
Job Scope TO REPAIR RH PORTION	1,014.00	400.00	
Total Labour	1,014.00	400.00	

Part 2 - Spray Painting & Panel Beating Related Works

Joh Coops	Quotation from ARC	Adjusted by Surveyor, if applicable
Job Scope TO REPSRAY REAR BUMPER	378.00	0.00
TO RESPRAY REAR FENDER RH	378.00	200.00
RESPRAY WHEEL CAP	180.00	0.00
TO RESPRAY ROCKER PANEL MOULDING	180.00	100.00 /
TO RESPRAY REAR DOOR RH	378.00	200.00
Total Spray Painting & Panel Beating	1,494.00	500.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00
TO APPLY RUST-PROOFING ON AFFECTED	100.00	0.00
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	0.00
TO TRANSFER DOOR MECHANISM	120.00	60.00 /
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00
TO REPLACE SUNDRY PARTS	100.00	20.00 /
TO WASH AND VACUUM	60.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-335.27
Total Other Costs	700.00	-255.27

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
52159-		6505548	BUMPER REAR	0	458.60	25.00	0.00	Replace	Not given	No X
7905			PIXEL STICKER	1	60.00	0.00	60.00	Replace	Replace	No /
52575- 47020		6505549	BUMPER SIDE RETAINER RR/RH	0	94.80	25.00	0.00	Replace	Not given	No X
61604-			FENDER RR/RH	1	766.80	100.00	0.00	Repair	Repair	No R
47090	COMMO		SMRT LOGO	1	7.80	0.00	7.80	Replace	Replace	No /
	N		STICKER DECAL 6555 8888	1	21.60	0.00	21.60	Replace	Replace	No
67003- 47080		6505486	DOOR RR/RH	1	954.50	25.00	715.87	Replace	Replace	No /
75851- 47900			MOULDING BODY,		673.60	100.00	0.00	Replace	Repair	No C
47300	1	6503707	TYRE	(126.74	0.00	0.00	Replace	Not given	No X
42602- 47060		6505676	CAP SUB-ASSY, WHEEL	(174.10	25.00	0.00	Replace	Not given	No X
47000			TOTAL MATERIALS	100				805.28	805.27	
			L MATERIALS(Discou	nted)				515.38	805.27	

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
Number	TOTA	L SUPPLEMENTARY	MATERIA	ALS		- A.P			2341520

\$05.27 + 400.00/ + 580.00/ + 580.00/ + 580.00/ - 200/ -

Page:



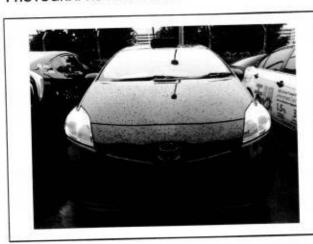
51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

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

PHOTOGRAPHS FOR VEHICLE NO. SHB 736E

INSPECTION

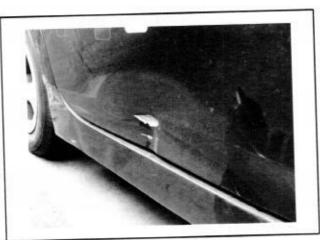








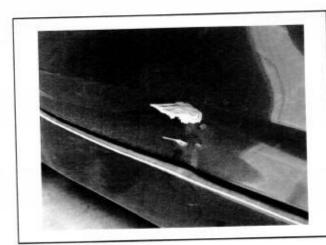


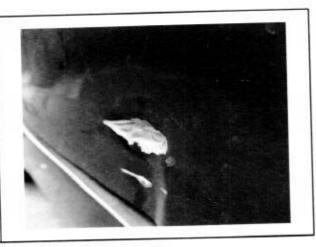




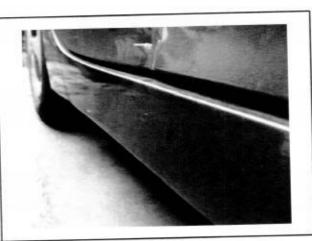
51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

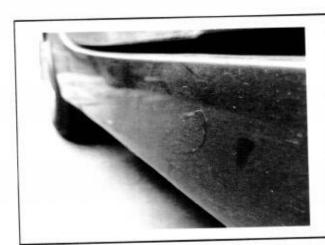
TEL: 6841 0055 FAX: 6841 6315

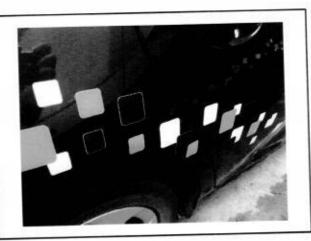














51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

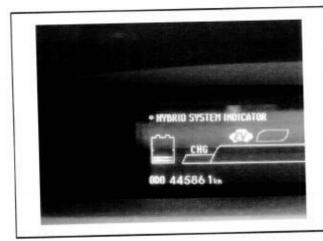
TEL: 6841 0055 FAX: 6841 6315















51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





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

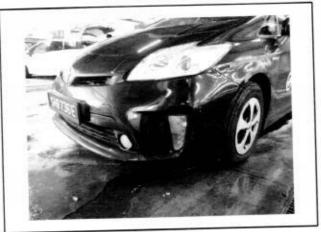
TEL: 6841 0055 FAX: 6841 6315

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

PHOTOGRAPHS FOR VEHICLE NO. SHB 736E

RE-INSPECTION













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



Thatcham escribe

NS/INC17021792/Sqbn2 NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref:

TOC INCOME INCOME	ANCE CO-OPERATIVE LTD			
BRAS BASAH ROAL 05-01 NTUC TRADE U 39556	D UNION HOUSESINGAPORE	Date:	04-12-2017	
3330		Code:	INC4	
	Policy Particulars	:- THIR	D PARTY CLAIM	
Insured Veh.	FY 4059C	Veh. I	nspected	SHB 736E
Policy No.	5094749859	Cover	rage (\$)	0.00
Claim No.	MT/0969589-002	Exces	ss (\$)	0.00
Assign From		Assig	ın Date	14/11/2017
	Vehicle Part	iculars	& Condition	CHIC PRESSERVE
Make & Model	TOYOTA PRIUS	c.c		1798
Engine No.	HIDDEN	Year	of Reg.	2014
Chassis No.	JTDKN36UX05747159	Colo	ur	MAROON
Odometer	445861	Steering		IN ORDER
Brakes	IN ORDER	Modi	fication	NIL
General	FAIR			
3.	Condi	tions of	f Tyres	
	Size	Make		Balance
R/H Front Tyre	195/65 R15	FALK	EN	6 mm
L/H Front Tyre	195/65 R15	FALK	EN	6 mm
R/H Rear Tyre	195/65 R15	FALK	EN	6 mm
L/H Rear Tyre	195/65 R15	FALK	EN	6 mm
4.			Damages	
THE VEHICLE SU	JSTAINED DAMAGES AT THE C	o/S BOD	Υ.	
DAMAGES SEE I	DETAILS.	ral Info	rmation	
5.	12/11/2017	_	ection Date	14/11/2017
Accident Date				V-707-1-X60000
Survey held at	60 WOODLANDS INDUSTRIA			57705
	60 WOODLANDS INDOSTRU	Remark		The second second
5a.	ION WAS CONDUCTED ON A"V	MTHOU	PREJUDICE" BAS	SIS.
B)IN ACCORDA	NCE TO YOUR INSTRUCTIONS	, VVL TIM	VE NOT NOTHER	SED REPAIRS.
5b.	Estima	te Days	of Repair	AND REPORTED IN
	RMAL PERIOD FOR REPAIR:		4 Working Day	ys



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

TEL: 6841 0055 FAX: 6841 6315





ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 736E

Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS			245700000
DOOR RR/RH (DISC 25%)	DENTED	954.50	715.87
PIXEL STICKER (SN)	NECESSARY	60.00	P13333
	NECESSARY	7.80	111111111111111111111111111111111111111
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NECESSARY	21.60	21.60
	NOT NECESSARY	458.60	100
	NOT NECESSARY	94.80	114
	NOT NECESSARY	126.74	
- CONTROL OF CONTROL O	NOT NECESSARY	174.10	-
	TO REPAIR	766.80	-
T (N C) T (TO REPAIR	673.60)
		3,338.54	805.27
LABOUR			
THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		4 V. S.	
THATCHAM TTS STANDARD SPRAY PAINTING COST		1,594.00	
TO REPLACE SUNDRY PARTS.		100.00	20.00
TO WASH AND VACUUM.	NOT NECESSARY	60.00	
		3,208.00	980.00
GRAND TOTAL		6,546.54	1,785.2
RECOMMENDED COST OF LUMP SUM REPAIRS			1,450.0
	DOOR RR/RH (DISC 25%) PIXEL STICKER (SN) SMRT LOGO (SN) STICKER DECAL 65558888 (SN) BUMPER REAR BUMPER SIDE RETAINER RR/RH TYRE CAP SUB-ASSY,WHEEL FENDER RR/RH MOULDING BODY,RH LABOUR THATCHAM STANDARD REPAIR TIME ON BODY WORKS. THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR. TO REPLACE SUNDRY PARTS. TO WASH AND VACUUM.	DOOR RR/RH (DISC 25%) PIXEL STICKER (SN) SMRT LOGO (SN) SICKER DECAL 65558888 (SN) BUMPER REAR BUMPER SIDE RETAINER RR/RH TYRE CAP SUB-ASSY, WHEEL FENDER RR/RH MOULDING BODY, RH LABOUR THATCHAM STANDARD REPAIR TIME ON BODY WORKS. THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR. TO REPLACE SUNDRY PARTS. TO WASH AND VACUUM. RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)	DOOR RR/RH (DISC 25%) PIXEL STICKER (SN) SMRT LOGO (SN) SMRT LOGO (SN) STICKER DECAL 65558888 (SN) BUMPER REAR BUMPER REAR BUMPER SIDE RETAINER RR/RH TYRE CAP SUB-ASSY, WHEEL FENDER RR/RH MOULDING BODY, RH THATCHAM STANDARD REPAIR TIME ON BODY WORKS. THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR. TO REPLACE SUNDRY PARTS. TO WASH AND VACUUM. DENTED 954.50 60.00 954.50 NECESSARY 7.80 NOT NECESSARY 94.80 126.74 174.10 176.80 174.10 176.80

Report Ref No. NS/INC17021792/Sqbn2

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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