Juliune.	ASSIGNMENT
rom: Date:	Veh No: 51+B52882. Yr Regn: 5/3/2014.
stimated Cost.	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
D/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
o Inspect Vehicle No:	Make: Toupta Prins. c.c 1798
Workshop m/s	Golour Marcon A/C: Insured / Std / NI / NA
f	Sp.Reading 38/667 T/Radio: Insured / Std / NI / NA
nsured: PC 5447 G	Eng/No:
olicy No. 50 9318 4587 05082017	C/No: JTDEN 364 JOST 21 (308
laims No. MT 0971608-002	Gen. Cond: Good / Fair / Poor / Burnt
um Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
flake of Veh:	Modi: Ni) / S/Rim / STD A/Rim or
**************************************	Tyre Size: F: 195/65/415
(Policy Condition)	R: 11
lemark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or Faller
al. or Market Value:	Front Rear
OAC Accident Rport: Consistent? : Yes or No	R/Bal, 6 mm R/Bal. 6 mm
IA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. cmm
st, Repairs: days Res.: Yes or No	D.O.A. 28/11/2017 D.O.I. 78/11/2017
um Sum: % 3 Val.: Yes or No	Survey held at SMRT
	Des. of Damages (Frt) Rear O/S N/S U/C Rooftop or
CA / REV / REP. / 24 HRS Vehicle:	IN / OUT
Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction	353/Kluy3w2 DOA: 150614 TAX/11/17/243
	222/ Landon 001: 120014 11/1/14 Laux
: PC 5443(7 - x	NTUK.
11/12/17 Sebasticin confirmed LS	Filippe Refer = Felix: Filippe
MISTIA SERSAMON COMMITTEE ES	7.00
DECEIVED I	2 [] 2 [] 3 [] 4 [] 5
THE CONTROL OF THE PROPERTY O	g pgc 2017
KEOLIVE	Days Of Repair: 3
ate/Time, File Pass to? : Preli. Report	Days Of Repair: 3 Resurvey No. of Trip: \ Survey Fee: 160
: Preli. Report	
: Preli. Report : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: 160
: Preli. Report : Final Report Date/Time, File Return to?	Resurvey No. of Trip: \ Survey Fee: /60
: Preli. Report : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: 160 Transportation: Street Str

Survey Department Check List (Case Handler)

Admin	(): Case handler to make sure all Infor		and the second s		
	e Assign Form		N-Date	Y-Date	N-Date
С	Reference No.	~			
С	Customer Code				
N	Assign From				
С	Assign Date	~			
С	Veh No (Inspected)	~			
С	Veh No (Insured)	-			
С	D.O.A	v			
С	Policy No	v			
C	Claim No	_			
С	Insurance Authorisation (CA /REV/REP)				
С	Report Type	~			
С	Weekend Charges				
N	Survey held at/Repairer	~			
С	Excess				
Survey (1) Assig C	or (): Case handler to make sure gnment Form Vehicle No	the surveryor co		ii required	Imorma
С	Regn Month/Year	~			/
N	Vehicle Type	~			
N	Make & Model	~	7.7		
c	Engine Capacity. (C.C)	_			
N	Colour	~			
С	Odometer. (Sp.Reading)	-			
C	Chassis No	~			
N	General Condition	~			
N	Steering	~			
N	Brake				
N	Modification (Modi)	~			
С	Tyre Size	~			
N	Tyre Make				
С	Tyre Balance	~			
С	Date of Inspection	~			
N	Survey held	~			0
N	Des.of Damages	-			
	7 (M. 17 - 200 Mg) 26 - 26	0			
Control Control Printers (Control	em - (Views/Merimen) Damaged Vehicle Photographs Uploaded			-	
С					
(3) Wor	kshop Estimate/Assignment Form				
N	ALL Parts condition	~			
С	Market Value for OD cases				-
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)		F 9		

Resurvey photo	Uploaded			
Check By:	VERON	12	1>	R
	Case Handler		' D	ate

Re-inspection Cases to Finalize within 5 Days

C

Days of repair Finalised Amount

(4) System - (Views/Merimen)



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

NTU	C INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1702277	76/Svb		
		D UNION HOUSESINGAPORE	Date:	30-11-2017			
1.		Policy Particulars	SECTION 1	Interest .			
1.	Insured Veh.	PC 5447G		nspected	SHB 5288Z		
_	Policy No.	5093184587		age (\$)	0.00		
	Claim No.		Exces		0.00		
_	Assign From		-	n Date	29/11/2017		
2.		Vehicle Parti	_				
	Make & Model		c.c		0		
	Engine No.	HIDDEN	Year	of Reg.			
	Chassis No.		Colou	r			
	Odometer	⊘	Steering				
	Brakes		Modif				
	General						
3.		Condit	ions 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.	A CONTRACTOR	Descripti	ion of D	amages			
5.		Genera	al Inforn	nation			
٠.	Accident Date	28/11/2017		ction Date	29/11/2017		
	Survey held at	State of the state	3.000 Pt 300	TROUTE LIVE CONT. 1	Society of March 1855		
			L PARK E4 SINGAPORE 757705				
5a.		NO - AND - MARKET IN FIRST	Remarks	STATE OF THE STATE OF			
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WI	THOUT	PREJUDICE" BASIS	S. PEDAIRS		
	B)IN ACCORDANG	CE TO YOUR INSTRUCTIONS, V	VE HAVE	NOT AUTHORISE	U KEPAIKS.		

TP Claims against NTUC Income: Follow-Through Survey

S	Income Reference	S/NO Income Reference Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Time of Accident	Estimate	Tentative repair cost
-	MT/0971003-002	SMRT TAXIS PTE LTD	SHB 5289X	SLL 2472C	20/11/2017	14:40	\$24,786.78	
2	MT/0973267-001	SMRT TAXIS PTE LTD	SHB 268P	FT 9299U	1/12/2017	9:05	\$4,341.40	S
"	MT/0972092-002	SMRT TAXIS PTE LTD	SHF 179S	SGS 4228B	3/12/2017	3:10	\$4,339.88	\$
4	MT/0973271-001	SMRT TAXIS PIE LTD	SHB 5239R	FE 1205Y	5/12/2017	9:50	\$389.50	
5	MT/0971608-002	SMRT TAXIS PTE LTD	SHB 5288Z	PC 5447G	28/11/2017	13:15	\$10,285.60	0,
9	MT/0972214-003	COMFORT TRANSPORTATION PTE LTD	SHC 3205X	SJE 2792P	4/12/2017	8:35	\$5,053.62	\$2,900.00

Claim received from LKK

								Gene	ralClaim
300601				-	,	Change La	nguage	THE RESIDENCE AND ADDRESS.	The second second
Polic	y Query							NACONIE GOSTOTATA	
Policy N	0.				Date of Acci	dent	28/11	/2017 13:19	
Vehicle	Na.(For Mator)	PC5447G							
					Search				
Select	Policy Na.	Policyholder Name EMPEROR	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
0	5093184587	INTERNATIONAL TRAVEL PTE LTD	201502886W	GFT	Comprehensive	PC5447G	PC5447G	05/08/2017	
	Policy N Vehicle Select	Policy Query Policy No. Vehicle No.(For Motor) Select Policy No.	Policy Query Policy No. Vahicle No. (For Motor) Select Policy No. Policyholder Name EMPEROR INTERNATIONAL TRAVEL PTE	Policy Query Policy No. PC5447G Vehicle No. (For Motor) PC5447G Select Policy No. Policyholder Name NRIC EMPEROR INTERNATIONAL TRAVEL PTE 201502886W	Policy Query Policy No. Vahicle Na. (For Motor) PC5447G Policyholder Policyholder NRIC EMPEROR INTERNATIONAL TRAVEL PTE TRAVEL PTE TRAVEL PTE TRAVEL PTE	Policy Query Policy No. Vahicle No. (For Motor) PC5447G Search Select Policy No. Policyholder Name NRIC EMPEROR INTERNATIONAL TRAVEL PTE 201502886W GFT Comprehensive	Policy Query Policy No. Vehicle No. (For Motor) PC5447G Date of Accident Search Select Policy No. Policyholder Name NRIC Product Cover Type Vehicle No. EMPEROR INTERNATIONAL TRAVEL PTE 201502886W GFT Comprehensive PC5447G	Policy Query Policy No. Date of Accident 28/11 Vahicle No. (For Motor) PC5447G Search Select Policy No. Policyholder Name NRIC Product Cover Type Vehicle Insured No. Object EMPEROR INTERNATIONAL TRAVEL PTE	Policy Query Policy No. Vahicle No. (For Motor) Select Policy Na. Policy Na. Policy Name NRIC Product Cover Type Vehicle No. Object Date EMPEROR INTERNATIONAL TRAVEL PTE TRAV

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type	Company
Owner ID	5369K
Vehicle Details	
Vehicle No.	SHB5288Z
Vehicle to be Exported	No
Intended De-registration Date	30 Nov 2017
Vehicle Make	TOYOTA
Vehicle Model	PRIUS TAXI (SMRT)
Primary Colour	Maroon
Manufacturing Year	2013
Engine No.	2ZR5937067
Chassis No.	JTDKN36U305721308
Maximum Power Output	100.0 kW (134 bhp)
Open Market Value	\$33,120.00
Original Registration Date	05 Mar 2014
First Registration Date	05 Mar 2014
Transfer Count	0
Actual ARF Paid	\$8,368.00
Intended PARF Rebate Details	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	04 Mar 2022
PARF Rebate Amount	\$6,276.00
Intended COE Rebate Details	
COE Expiry Date	04 Mar 2022
COE Category	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years)	8
PQP Paid	\$58,745.00
COE Rebate Amount	\$31,287.00
Total Rebate Amount	\$37,563.00
Message	

The information contained herein is correct as at 30 Nov 2017

. .

OK

Land Transport Authority

Please read through the Privacy Statement, Terms of Use, and Disclaimer.

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Last updated on 19 Nov 2017 at 12:12 AM

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 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.

- 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.

2012年1月20日 李明明 1980年 1980年 1980年	ACCIDENT STATEMENT
Date Of Report	28/11/2017 14:57
Date Of Accident	28/11/2017 13:15
Exact Location Of Accident	SHORT STREET
Country/State of Loss	SINGAPORE
超级数据,他们	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB5288Z
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	ТОУОТА
Model	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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-17087562MFSH
Cover Note Number	
Driver	
Name of Driver	LEONG SOON WEI JOHNNY
NRIC No	S7319794E
Date Of Birth	11/06/1973
Occupation	OUTDOOR
Date Of Driving Pass	03/07/1997
Driving Experience	20 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	

NOEMAIL

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

70

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

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)

400

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

MY TAXI WAS STATIONARY BEHIND THE BUS PC5447G AND I WAS WAITING FOR MY PASSENGER. SUDDENLY THE BUS PC5447G ENGAGED REVERSE GEAR AND STARTED TO REVERSE. IMMEDIATELY I SOUNDED MY HORN TRY TO ALERT THE BUS. HOWEVER, THE BUS CONTINUE REVERSING AND COLLIDED ONTO THE FRONT PORTION OF MY TAXI.

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

PC5447G

Vehicle Make/Model/Colour

Details Of Properties Name of Driver

TUA KIM FOOK

NRIC/Passport Number

G7694589L

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

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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>.
- 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.
- 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:
 - 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.

Policyholder's Signature Date & Time: Driver's Signature

(If driver is not the policyholder) Date & Time:

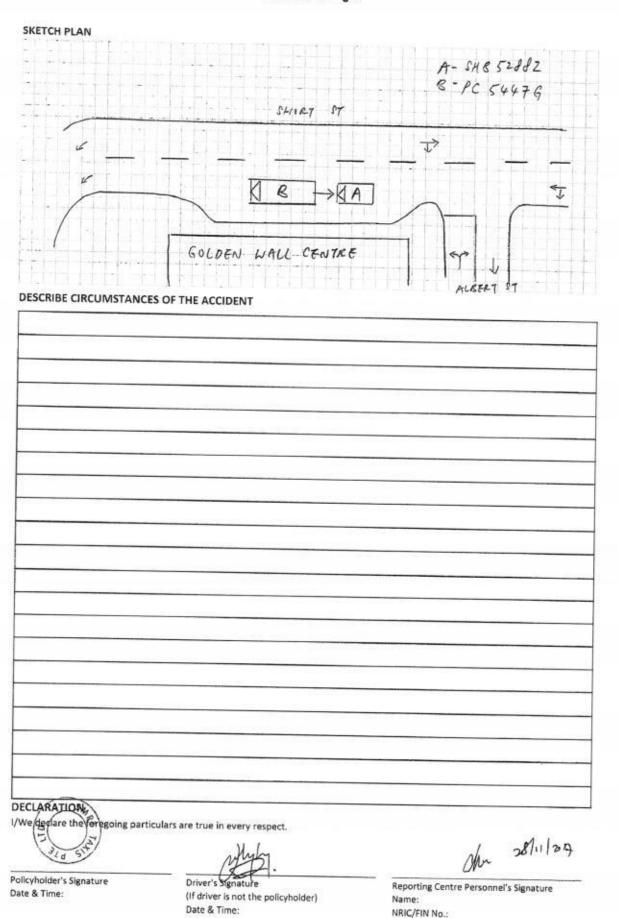
nuer) Nam

Reporting Centre Personnel's Signature

du Milas

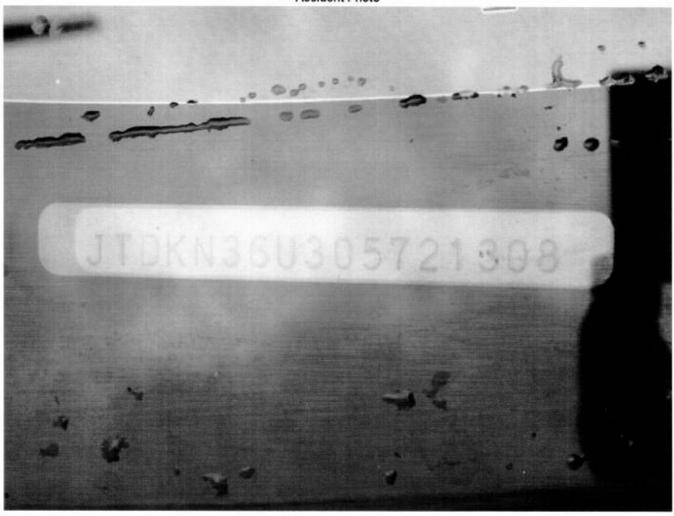
NRIC/FIN No .:

Sketch Plan Pg. 2



Page 4 of 10















60 Woodlands Industrial Park E4, Singapore 757705"

FAX Number : 63685592

Estimator Telephone Number : 68662623**

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

NIME

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

Reg. No

SHB5288Z

Ref. No.

TAX/11/17/2173

Reg. Date

05/03/2014

Vehicle Type

TAXI

Make

TOYOTA PRIUS

Model

PRIUS

Name of Driver

LEONG SOON WEI JOHNNY

Type of Accident

OTHERS

Date / Time of Accident

28/11/2017 01:17:00 PM

Accident Reported Date / Time :

28/11/2017 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Vehicle is Towed Back?

No

Towed Back Date/Time

Replacement Vehicle issued? :

Accident Repair Job Card No :

000024093340

Special Instruction to ARC, if any :

PC5447G

Prepared Date

28/11/2017 03:20:11 PM

Sebasijan.

- Photo After Point.

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 : JTDKN36U30-5721308

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

845.00

0.00

Total Spray Painting Charges

1,872.00

0.00

Total Material Charges

3,641.30

4,509.38

Other Charges

440.00

0.00

TOTAL

Lum Sum Total

6,798.30

0.00

6,800.00

0.00

No. of Repair Days

5.00

0.00

Prepared / Adjusted By

3 days

Arc / Surveyor Sing Off Date

28/11/2017 06:03:05 PM

01/01/1900 12:00:00 AM

Prepared / Adjusted Date

Remarks

Prepared Date :

28/11/2017 06:01:55 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

Job Scope	Quotation from ARC	Adjusted by Survey	or, if applicable
TO REPAIR FRONT PORTION	845.00	0:00 400	
Total Labour	845.00	0.00	

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Survey	or, if applicable
TO REPSRAY FRONT BUMPER	378.00	0.00 200	
TO RESPRAY FRONT SUPPORT PANEL	180.00	0:00. 100	1. Communication
TO REPSRAY FRONT HOOD	378.00	0.00 200	
TO RESPRAY FRONT FENDER LH	378.00	0.00 200	S militario della constitución
TO RESPRAY FRONT FENDER RH	378.00	0.00 ×	
TO RESPRAY ARM , FR WIPER , RH	180.00	0.00 ×	- Interest
Total Spray Painting & Panel Beating	1,872.00	0.00	

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

Total Other Costs	440.00	0.00	-tr-vitagently
TO APPLY RUST-PROOFING ON AFFECTED AREA	200.00	0.00 ×	The second secon
TO WASH AND VACUUM	60.00	0.00 ×	
TO REPLACE SUNDRY PARTS	100.00	0.00- 20	
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00 ×	an annual and a
Job Scope	Quotation from ARC	Adjusted by Surveyor, if appli	

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
52119- 47930	-	6505517	BUMPER FRT	7	482.00	25.00	361.50	Replace	Replace	No
75310- 47010		6505638	EMBLEM FRONT	1	86.50	25.00	€4.87	Replace	Replace	No
53111- 47040		6505573	GRILLE, RADIATOR	1	310.60	25.00	232.95	Replace	Replace ?	No.
			NUMBER PLATE	1	15.00	0.00	15.00	Replace	Replace	No
			NUMBER PLATE FRAME	1	12.00	0.00	12.00	Replace	Replace	No
53301- 47060		6505555	HOOD PANEL	1	748.10	25.00	561.07	Replace	Replace 07	No
53510- 47102			HOOD LOCK	1	128.90	25.00	96.67	Replace	Replace	No
53420- 47070			HOOD HINGE LH	1	55.90	25.00	41.92	Replace	Replace	No
53410- 47070			HOOD HINGE RH	1	55.90	25.00	41.92	Replace	Replace	No.
53395- 47020			HOOD END PANEL SEAL	1	35.50	25.00	26.62	Replace	Replace -	No
53201- 47902			SUPPORT SUB-ASSY	1	1,460.40	25.00	1,095.30	Replace	Replace	No
81170- 47500		6505436	HEAD LAMP LH	1	945.20	10.00	850.68	Replace	Replace	No
81130- 47500		6505437	HEAD LAMP RH	1	945.20	10.00	850.68	Replace	Replace	No .
85211- 47100			ARM, FR WIPER, RH	1	296.80	25.00	222.60	Replace	Replace	No
53802- 47050		6505558	FENDER FRT/LH	1	723.40	25.00	542.55	Repair	Replace	No
75374- 47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No
53801- 47050		6505557	FENDER FRT/RH	1	723.40	25.00	542.55	Repair	Replace	No
75374- 47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No
			TOTAL MATERIALS					4,551.66	5,636.72	

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									ti - riku sa Miga sa sa Tima Miga



dia 2-12-17/14:44

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 Reg. No SHB5288Z AX/11/17/2173 Ref. No Reg. Date 05/03/2014 Vehicle Type Make TOYOTA PRIUS Model PRIUS Name of Driver LEONG SOON WEI JOHNNY Type of Accident **OTHERS** Date / Time of Accident 28/11/2017 01:17:00 PM Accident Reported Date / Time : 28/11/2017 12:00:00 AM Surveyor is Required? Sebastian Survey by Vehicle is Towed Back? Towed Back Date/Time 6555 8888 Replacement Vehicle issued? : Accident Repair Job Card No : 000024093340 Special Instruction to ARC, if any : PC5447G - NTUC IDAC BEFORE PAINT PHOTO AND AFTER PAINT PHOTO , FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR SEBASTIAN (LKK) & Email :sebastianyeang @lkkauto.com HP:90036121

Recording Comera Radio Antenna 1st witness Date 2nd witness Date Supplementary Received by (SMRT) :_

28/11/2017 03:20:11 PM

LUMPSUM REPAIR Prepared Date

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

Chassis No :

JTDKN36U30-5721308

Mileage

Work Shop :

Repair Completed Date / Time :

10,285.60

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

845.00

400.00

Total Spray Painting Charges

1,872.00

700.00

Total Material Charges

1.805.64

Other Charges

860.38

440.00

-360.38

TOTAL

4,962.64

1,600.00

Lum Sum Total

0.00

0.00

No. of Repair Days

5.00

3.00

Prepared / Adjusted By

SEBASTIAN (LKK)

Arc / Surveyor Sing Off Date

28/11/2017 06:03:05 AM

29/11/2017 02:44:44 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 28/11/2017 06:01:55 AM

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

Quotation No

: QN-1712-0124

Invoice No

Quotation Date : 5/12

Invoice Date :

Invoice Amount :

Prepared Date:

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable		
TO REPAIR FRONT PORTION	845.00	400.00		
Total Labour	845.00	400.00		

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER	378.00	200.00 /
TO RESPRAY FRONT SUPPORT PANEL	180.00	100.00
TO REPSRAY FRONT HOOD	378.00	200.00
TO RESPRAY FRONT FENDER LH	378.00	200.00
TO RESPRAY FRONT FENDER RH	378.00	0.00
TO RESPRAY ARM , FR WIPER , RH	180.00	0.00
Total Spray Painting & Panel Beating	1,872.00	700.00

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 REPLACE SUNDRY PARTS	100.00	20.00
TO WASH AND VACUUM	60.00	0.00
TO APPLY RUST-PROOFING ON AFFECTED AREA	200.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-380.38
Total Other Costs	440.00	-360.38

10225 60

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
52119- 47930		6505517	BUMPER FRT	1	482.00	100.00	0.00	Replace	Repair	No /
75310- 47010		6505638	EMBLEM FRONT	1	86.50	25.00	64.87	Replace	Replace	No /
53111- 47040		6505573	GRILLE, RADIATOR	1	310.60	25.00	232.95	Replace	Check	No X
			NUMBER PLATE	1	15.00	0.00	15.00	Replace	Replace	No /
			NUMBER PLATE FRAME	0	12.00	0.00	0.00	Replace	Not given	No X
53301- 47060		6505555	HOOD PANEL	1	748.10	25.00	561.07	Replace	Replace	No /
53510- 47102			HOOD LOCK	1	128.90	25.00	96.67	Replace	Replace	No /
53420- 47070			HOOD HINGE LH	1	55.90	25.00	41.93	Replace	Replace S	No /
53410- 47070			HOOD HINGE RH	1	55.90	25.00	41.93	Replace	Replace S	No /
53395- 47020			HOOD END PANEL SEAL	1	35.50	25.00	26.63	Replace	Check	No X
53201- 47902			SUPPORT SUB-ASSY	1	1,460.40	100.00	0.00	Replace	Repair	No R
81170- 47500		6505436	HEAD LAMP LH	1	945.20	10.00	850.68	Replace	Check	No X
81130- 47500		6505437	HEAD LAMP RH	1	945.20	10.00	850.68	Replace	Check	No X
85211- 47100			ARM, FR WIPER, RH	0	296.80	25.00	0.00	Replace	Not given	No X
53802- 47050		6505558	FENDER FRT/LH	1	723.40	100.00	0.00	Repair	Repair	NoR
75374- 47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No.
53801- 47050		6505557	FENDER FRT/RH	0	723.40	25.00	0.00	Repair	Not given	No X
75374- 47051			NAME PLATE (HYBRID)	0	51.90	25.00	0.00	Replace	Not given	No X
			TOTAL MATERIALS		CSTRONN-SCHOOL			2,821.34	860.38	
		TOTAL	MATERIALS(Discou	nted)				1,805.64	860.38	

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
	TOT	AL SUPPLEMENTARY	MATERIA	ALS					

860:37 + 400:00 + 720:00 1980:37 -20?

45\$1600/-/



Thatcham escribe

ESTIMATED NORMAL PERIOD FOR REPAIR:

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/INC17022776/Svbe2 73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 08-01-2018 189556 Code: INC4 1. Policy Particulars :- THIRD PARTY CLAIM Insured Veh. PC 5447G Veh. Inspected SHB 5288Z Policy No. 5093184587 0.00 Coverage (\$) MT/0971608-002 Claim No. Excess (\$) 0.00 29/11/2017 Assign From Assign Date 2. Vehicle Particulars & Condition Make & Model TOYOTA PRIUS C.C 1798 Engine No. HIDDEN Year of Reg. 2014 Chassis No. JTDKN36U305721308 MAROON Colour 381667 Odometer Steering IN ORDER IN ORDER Modification **Brakes** NIL FAIR General 3. **Conditions of Tyres** Size Make Balance R/H Front Tyre 195/65 R15 FALKEN 6 mm 6 mm L/H Front Tyre 195/65 R15 FALKEN 195/65 R15 FALKEN 6 mm R/H Rear Tyre FALKEN L/H Rear Tyre 195/65 R15 6 mm 4. **Description of Damages** THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS. General Information 5. 28/11/2017 Inspection Date 29/11/2017 **Accident Date** SMRT AUTOMOTIVE SERVICES PTE LTD Survey held at 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. 5b. **Estimate Days of Repair**

3 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



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Estimate By Our Adjusted

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 5288Z

Qty	Description of Parts	Condition	Workshop (\$)	(\$)
	REPLACEMENT OF PARTS		1 10 10	2000
1	EMBLEM FRONT (DISC 25%)	NECESSARY	86.50	64.87
1	HOOD PANEL (DISC 25%)	DENTED	748.10	561.07
1	HOOD LOCK (DISC 25%)	JAMMED	128.90	96.67
1	HOOD HINGE LH (DISC 25%)	BENT	55.90	41.93
1	HOOD HINGE RH (DISC 25%)	BENT	55.90	41.93
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	51.90	38.92
1	NUMBER PLATE (SN)	BENT	15.00	15.00
1	GRILLE, RADIATOR	NOT NECESSARY	310.60	
1	NUMBER PLATE FRAME	NOT NECESSARY	12.00	
1	HOOD END PANEL SEAL	NOT NECESSARY	35.50	
1	HEAD LAMP LH	NOT NECESSARY	945.20	
1	HEAD LAMP RH	NOT NECESSARY	945.20	6
1	ARM, FR WIPER, RH	NOT NECESSARY	296.80	
1	FENDER FRT / RH	NOT NECESSARY	723.40	1
1	NAME PLATE (HYBRID)	NOT NECESSARY	51.90	
1	BUMPER FRT	TO REPAIR	482.00	
1	SUPPORT SUB-ASSY	TO REPAIR	1,460.40	
1	FENDER FRT/LH	TO REPAIR	723.40	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7,128.60	860.39
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		925.00	400.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		2,072.00	700.00
	TO REPLACE SUNDRY PARTS.		100.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	
			3,157.00	1,120.00
	GRAND TOTAL		10,285.60	1,980.39

RECOMMENDED COST OF LUMP SUM REPAIRS
(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)

1,600.00

Report Ref No. NS/INC17022776/Svbe2





Report Ref No. NS/INC17022776/Svbe2

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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