

REF: NS/TNC17023239 / Sub 2

Signature

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: S/S 4228B

Policy No. 5071238447 - 02 230417 - 220418

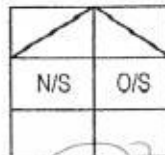
Claims No. MT/092092-002

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

Lump Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHF 179S.

Yr Regn: 13/7/2012

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

Truck / Trailer or

Make: Chevrolet Epica

c.c. 1991

Colour: Maroon.

A/C: Insured / Std / NI / NA

Sp. Reading 648832

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KL14692JB8138645

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 205/55R15

R: 1

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

TOYO / YOKO or Falken

Front

Rear

R/Bal. 6 mm

R/Bal. 6 mm

L/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 3/12/2012

D.O.I. 5/12/2012

Survey held at SMRT

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

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

Date / Time | Action / Instruction

SHF 179S - x

S/S 4228B - x

TAX/12/17/2012

UIC

NTUC

11/12/12 Sebastian Confirmed LS \$1700 (Real >639.88, 609)

RECEIVED 1-2 DEC 2012

RECEIVED 2-3 DEC 2012

Date/Time, File Pass to?

☐ : Preli. Report☐ : Final Report

1)

Date/Time, File Return to?

2) 12/12 - typist

Report Format:

Lump Sum / I.B.I. (\$) 1700

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

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

) S + RS \$

) Photos

) Others

TOTAL

160
35
195

Survey Department Check List (Case Handler)

Reference No.: NS/INC PFO 23 239/Svb
 Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

Admin (): Case handler to make sure all information created by the assignment team are **ACCURATE**.

(1) Office Assign Form

		Y-Date	N-Date	Y-Date	N-Date
C	Reference No.	✓			
C	Customer Code				
N	Assign From				
C	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	Report Type	✓			
C	Weekend Charges				
N	Survey held at/Repairer	✓			
C	Excess				

Surveyor (): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

C	Vehicle No	✓			
C	Regn Month/Year	✓			
N	Vehicle Type	✓			
N	Make & Model	✓			
C	Engine Capacity. (C.C)	✓			
N	Colour	✓			
C	Odometer. (Sp.Reading)	✓			
C	Chassis No	✓			
N	General Condition	✓			
N	Steering	✓			
N	Brake	✓			
N	Modification (Modi)	✓			
C	Tyre Size	✓			
N	Tyre Make	✓			
C	Tyre Balance	✓			
C	Date of Inspection	✓			
N	Survey held	✓			
N	Des.of Damages	✓			

(2) System - (Views/Merimen)

C	Damaged Vehicle Photographs Uploaded	✓			
---	--------------------------------------	---	--	--	--

(3) Workshop Estimate/Assignment Form

N	ALL Parts condition	✓			
C	Market Value for OD cases				
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
C	Days of repair	✓			
C	Finalised Amount	✓			
C	Re-inspection Cases to Finalize within 5 Days				

(4) System - (Views/Merimen)

C	Resurvey photo Uploaded	✓			
---	-------------------------	---	--	--	--

Check By: VERON 12/12/14
 Case Handler Date

*C: Critical *N: Non-Critical

21/05/2014




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/INC17023239/Svb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 07-12-2017	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SGS 4228B	Veh. Inspected	SHF 179S	
Policy No.	5071238442-02	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	05/12/2017	
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	03/12/2017	Inspection Date	05/12/2017	
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.				

TP Claims against NTUC Income: Follow-Through Survey

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Time of Accident	Estimate	Tentative repair cost
1	MT/0971003-002	SMRT TAXIS PTE LTD	SHB 5289X	SLL 2472C	20/11/2017	14:40	\$24,786.78	\$10,550.00
2	MT/0973267-001	SMRT TAXIS PTE LTD	SHB 268P	FT 9299U	1/12/2017	9:05	\$4,341.40	\$1,100.00
3	MT/0972092-002	SMRT TAXIS PTE LTD	SHF 179S	SGS 4228B	3/12/2017	3:10	\$4,339.88	\$1,700.00
4	MT/0973271-001	SMRT TAXIS PTE LTD	SHB 5239R	FE 1205Y	5/12/2017	9:50	\$389.50	\$80.00
5	MT/0971608-002	SMRT TAXIS PTE LTD	SHB 5288Z	PC 5447G	28/11/2017	13:15	\$10,285.60	\$1,600.00
6	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

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 type="radio"/>	5071238442-02	ONG HONG GHEE, GILBERT (WANG HONGYU)	588211211	GPC	drive CLASSIC	SGS4228B	SGS4228B	23/04/2017	22/04/2018

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type	Company
Owner ID	5369K
Vehicle Details	
Vehicle No.	SHF179S
Vehicle to be Exported	No
Intended De-registration Date	06 Dec 2017
Vehicle Make	CHEVROLET
Vehicle Model	EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO
Primary Colour	Maroon
Manufacturing Year	2012
Engine No.	Z20S1464482K
Chassis No.	KL1LA69RJB136645
Maximum Power Output	110.0 kW (147 bhp)
Open Market Value	\$14,578.00
Original Registration Date	13 Jul 2012
First Registration Date	13 Jul 2012
Transfer Count	0
Actual ARF Paid	\$14,578.00
Intended PARF Rebate Details	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	12 Jul 2020
PARF Rebate Amount	\$10,204.00
Intended COE Rebate Details	
COE Expiry Date	12 Jul 2020
COE Category	A - Car (1600cc & below)
COE Period(Years)	8
QP Paid	\$46,801.00
COE Rebate Amount	\$15,207.00
Total Rebate Amount	\$25,411.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 06 Dec 2017




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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	04/12/2017 11:29
Date Of Accident	03/12/2017 03:10
Exact Location Of Accident	PIE (CHANGI) TOWARDS PAYA LEBAR EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF179S
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	CHEVROLET
Model	EPICA-2.0 (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	LOH YORK HAN
NRIC No	S7013500J
Date Of Birth	25/04/1970
Occupation	OUTDOOR
Date Of Driving Pass	04/02/1994
Driving Experience	23 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	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 -
 -
 -
 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) 2

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 TRAVELLING ALONG PIE (CHANGI) TOWARDS PAYA LEBAR EXIT WITH ONE PASSENGER (MALE CHINESE) ON BOARD. I SAW IN MY WING MIRROR THAT A VEHICLE WHICH WAS BEHIND MY TAXI WAS COMING IN A GREAT SPEED. AFTER WHICH THE VEHICLE SGS4228B HAD COLLDED ONTO THE REAR OF MY TAXI.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGS4228B
 Vehicle Make/Model/Colour
 Details Of Properties
 Name of Driver ONG HONG GHEE GILBE
 NRIC/Passport Number S8821121I
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

Details of Witness

Name
 Phone Number
 Email Address

→



SHIP 1793

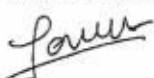
→

→

Source

[illegible]

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



04/12/2017

4/12/2017

Reporting Centre Personnel's Signature
Name:

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

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

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

four

04/12/2017

[Signature]
4/12/2017

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo




SMRT Accident Vehicle Repair Estimates

NTUC

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

Reg. No : SHF179S
 Ref. No : TAX/12/17/2014
 Reg. Date : 13/07/2012
 Vehicle Type : TAXI
 Make : CHEVROLET EPICA 2.0 VCDI
 Model : EPICA-2.0
 Name of Driver : LOH YORK HAN
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 03/12/2017 03:10:00 AM
 Accident Reported Date / Time : 04/12/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by :
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024093417
 Special Instruction to ARC, if any :
 SGS4228B
 Prepared Date : 04/12/2017 01:06:24 PM



Sebastian.
 5/12/2017.
 - Lump Sum Repair.
 - Question Mark Item
 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 : KL1LA69RJBB136645

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 338.00	0.00
Total Spray Painting Charges	: 378.00	0.00
Total Material Charges	: 2,179.44	2,179.44
Other Charges	: 636.88	0.00
TOTAL	: 3,532.32	0.00
Lum Sum Total	: 3,550.00	0.00
No. of Repair Days	: 3.00	0.00
Prepared / Adjusted By	:	2 days
Arc / Surveyor Sign Off Date	: 05/12/2017 08:26:46 AM	01/01/1900 12:00:00 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 05/12/2017 08:26:46 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 :

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	338.00	0.00 200
Total Labour	338.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY REAR BUMPER	378.00	0.00 300
Total Spray Painting & Panel Beating	378.00	0.00

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 X
TO TEST AND REFIX REVERSE SENSOR SYSTEM	100.00	0.00 30
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	0.00 ✓
TO REPLACE SUNDRY PARTS	100.00	0.00 20
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	636.88	0.00

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
93745100	REAR	6504569	BUMPER RR	1	1,238.00	10.00	1,114.20	Replace	Replace <i>R</i>	No
96941154	REAR	6504571	BEAM RR BUMPER IMPACT	1	1,221.00	10.00	1,098.90	Replace	Replace <i>?</i>	No
96873838	REAR		ABSORBER ENGY RR BUMPER	1	70.00	10.00	63.00	Replace	Replace <i>?</i>	No
	REAR		BRACKET RR BUMPER SIDE LH	1	49.00	10.00	44.10	Replace	Replace <i>?</i>	No
96633534	REAR		BRACKET RR BUMPER SIDE RH	1	49.00	10.00	44.10	Replace	Replace <i>?</i>	No
	REAR		SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace <i>?</i>	No
TOTAL MATERIALS							2,544.30	2,544.30		
TOTAL MATERIALS(Discounted)							2,179.44	2,179.44		

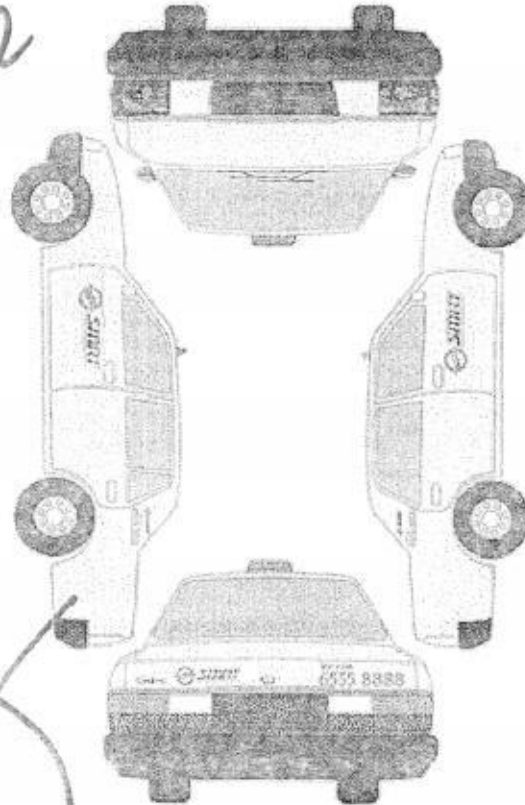
Added Spare Parts / Material Usage After Surveyor Signed off

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

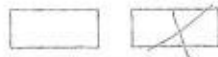
Reg. No : SHF179S
Ref. No : TAX/12/17/2014
Reg. Date : 13/07/2012
Vehicle Type : TAXI
Make : CHEVROLET EPICA 2.0 VCDI
Model : EPICA-2.0
Name of Driver : LOH YORK HAN
Type of Accident : HEAD TO REAR
DI / Time of Accident : 03/12/2017 03:10:00 AM
Accident Reported Date / Time : 04/12/2017 12:00:00 AM
Surveyor is Required? : Yes
Survey by : Sebastian
Vehicle is Towed Back? : No
Towed Back Date/Time :
Replacement Vehicle issued? : No
Accident Repair Job Card No : 000024093417
Special Instruction to ARC, if any :
SGS4228B NTWC 43
BEFORE PAINT PHOTO AND AFTER PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL
SURVEYOR SEBASTIAN (LKK) & Email : sebastianyeang@lkkauto.com HP: 90036121
LUMP SUM REPAIR
Prepared Date : 04/12/2017 01:06:24 PM



Recording Camera



Radio Antenna



1st witness

Date

5/12/17

2nd witness

Date

7/12/17

07/12/2017

13-21

648832

E 1 1/4 1/2 3/4 F 3230

Supplementary

Refer to the Supplementary part 11st

648898 km

1 1/4 1/2 3/4 F

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

Chassis No : KL1LA69RJBB136645

Mileage

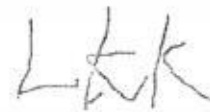
0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 338.00	200.00
Total Spray Painting Charges	: 558.00	300.00
Total Material Charges	: 915.26	1,278.90
Other Charges	: 636.88	-78.90
TOTAL	: 2,448.14 4339.88	1,700.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 3.00	3.00 /
Prepared / Adjusted By	:	SEBASTIAN (LKK)
Arc / Surveyor Sign Off Date	: 05/12/2017 08:28:46 AM	05/12/2017 01:36:28 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 05/12/2017 08:28:46 AM

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

Quotation No : QN-1712-0217

Invoice No :

Quotation Date : 8/12

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 REAR PORTION	338.00	200.00 /
Total Labour	338.00	200.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY REAR BUMPER	378.00	200.00 /
TO RESPRAY BUMPER BEAM	180.00	100.00 /
Total Spray Painting & Panel Beating	558.00	300.00

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 TEST AND REFIX REVERSE SENSOR SYSTEM	100.00	30.00 /
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	296.88 /
TO REPLACE SUNDRY PARTS	100.00	20.00 /
TO WASH AND VACUUM	60.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-425.78
Total Other Costs	636.88	-78.90

539.88

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
13745100	REAR	6504569	BUMPER RR	1	1,238.00	100.00	0.00	Replace	Repair	No <i>✓</i>
16941154	REAR	6504571	BEAM RR BUMPER IMPACT	1	1,221.00	10.00	1,098.90	Replace	Replace <i>S</i>	No <i>✓</i> <i>DT</i>
16873838	REAR		ABSORBER ENGY RR BUMPER	1	70.00	10.00	63.00	Replace	Check	No <i>X</i>
	REAR		BRACKET RR BUMPER SIDE LH	1	49.00	10.00	44.10	Replace	Check	No <i>X</i> <i>mm</i>
16633534	REAR		BRACKET RR BUMPER SIDE RH	1	49.00	10.00	44.10	Replace	Check	No <i>X</i>
	REAR		SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace <i>S</i>	No <i>✓</i> <i>DMS</i>
TOTAL MATERIALS							1,430.10	1,278.90		
TOTAL MATERIALS(Discounted)							915.26	1,278.90		

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									

$$\begin{array}{r}
 1278.90 / \\
 + 200.00 / \\
 + 646.88 / \\
 \hline
 \end{array}$$

$$\begin{array}{r}
 2125.78 / \\
 - 20\% \\
 \hline
 1700.62 /
 \end{array}$$

$$\begin{array}{r}
 4 / S \$1700 /
 \end{array}$$

Sebastian
 11/12/2014

**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



Thatcham escribe

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC17023239/Svbe2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 26-12-2017	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SGS 4228B	Veh. Inspected	SHF 179S	
Policy No.	5071238442-02	Coverage (\$)	0.00	
Claim No.	MT/0972092-002	Excess (\$)	0.00	
Assign From		Assign Date	05/12/2017	
2. Vehicle Particulars & Condition				
Make & Model	CHEVROLET EPICA	c.c	1991	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	KL1LA69RJBB136645	Colour	MAROON	
Odometer	648832	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	205/55 R15	FALKEN	6 mm	
L/H Front Tyre	205/55 R15	FALKEN	6 mm	
R/H Rear Tyre	205/55 R15	FALKEN	6 mm	
L/H Rear Tyre	205/55 R15	FALKEN	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	03/12/2017	Inspection Date	05/12/2017	
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.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		

**National Assessment Centre Services**

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHF 179S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BEAM RR BUMPER IMPACT (DISC 10%)	DENTED	1,221.00	1,098.90
1	SENSOR REVERSE (SN)	DAMAGED	180.00	180.00
1	ABSORBER ENGY RR BUMPER	NOT NECESSARY	70.00	-
1	BRACKET RR BUMPER SIDE LH	NOT NECESSARY	49.00	-
1	BRACKET RR BUMPER SIDE RH	NOT NECESSARY	49.00	-
1	BUMPER RR	TO REPAIR	1,238.00	-
			2,807.00	1,278.90
	<u>LABOUR</u>			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		814.88	526.88
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		558.00	300.00
	TO REPLACE SUNDRY PARTS.		100.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			1,532.88	846.88
	GRAND TOTAL		4,339.88	2,125.78
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,700.00

Report Ref No. NS/INC17023239/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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