

Singapore

REF: NS/ZNC17023328/Srbcz

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: SGTZ 54008

Policy No. 50 771 49499-01 02.11.17 - 01.11.18

Claims No. MT/0985155-001

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMB 14147 Yr Regn: 6/1/2014

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

Truck / Trailer or

Make: Man NL32012 cc 10578

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

Sp. Reading 3578 / 2 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WMHA 22 EXD 700/975

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 275/20 R22.5

R: 4

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

TOYO / YOKO or

Firestone

Front

Rear

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

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

D.O.A. 6/11/2017 D.O.I. 7/12/2017

Survey held at SMRT

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

O/S Frt

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

Date / Time | Action / Instruction

2018 10147 - X

SGTZ 54008 - 02/10/16 021002 / Vehicle 2

REF: 00116

Contract L15 \$700, 1 days

Red: \$1058, 60%

RECEIVED

Date/Time, File Pass to?

☐

: Preli. Report

☒

: Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 1

Resurvey No. of Trip: 1

Survey Fee: 160

Transportation: _____

Report Format: 7p

Lump Sum / I.B.I: (\$) 700

Add Fee:

☐

: Site Insp (\$

) \$ + RS. \$

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

☐

: Weekend (\$

)

TOTAL

160

TP Claims against NTUC Income: Follow-Through Survey

Date : 07/03/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/0982884-002	SMRT AUTOMOTIVE	SHB 1554G	GBF 8697G	17/02/2018	9:40	\$ 2,962.68	\$ 1,050.00
2	MT/0982845-002	SMRT AUTOMOTIVE	SHF 74K	SIG 8978X	15/02/2018	23:40	\$ 6,339.74	\$ 1,221.85
3	MT/0985155-001	SMRT AUTOMOTIVE	SMB 1414T	SGZ 5400B	06/11/2017	23:52	\$ 1,758.00	\$ 700.00
4	MT/0901189-001	SMRT AUTOMOTIVE	SMB 237U	SGZ 2829T	15/05/2017	19:00	\$ 976.00	\$ 589.00
5	MT/0982495-002	SMRT AUTOMOTIVE	SHD 6304T	SGJ 8622S	08/02/2018	16:40	\$ 2,121.00	\$ 350.00
6	MT/0981868-002	SMRT AUTOMOTIVE	SHD 6454T	SKG 4629T	09/02/2018	14:30	\$ 2,968.00	\$ 1,700.00
7	MT/0985159-001	COMFORT	SH 8764J	FH9765D	24/02/2018	7:30	\$ 6,563.72	\$ 2,800.00



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/INC17023328/Srb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 08-12-2017	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SGZ 5400B	Veh. Inspected	SMB 1414T	
Policy No.	5077149499-01	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	07/12/2017	
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	06/12/2017	Inspection Date	07/12/2017	
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.				

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

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Policy Query

Policy No.

Date of Accident

06/12/2017 11:18

Vehicle No.(For Motor)

SGZ5400B

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5077149499-01	HARMONY NETWORK	53326675X	GPC	Third Party	SGZ5400B	SGZ5400B	02/11/2017	01/11/2018

[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 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	07/11/2017 14:40
Date Of Accident	06/11/2017 23:55
Exact Location Of Accident	MARYMOUNT RD BEFORE BUS STOP(BS:53121)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB1414T
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64823888

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	BUS

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category BUS

Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-17087563MFBP
Cover Note Number	

Driver

Name of Driver	NG HOON KHAI
NRIC No	G2642977W
Date Of Birth	07/09/1984
Occupation	OUTDOOR
Date Of Driving Pass	08/06/2015
Driving Experience	2 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident 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? 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) 20

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

Bus was traveling along Marymount Road - before BS: 53121 (Marymount Stn) when one private car SGZ5400B that on the right had encroached into my lane and collided into the right front corner bumper of the bus. For the alleged accident nobody was injured.

Attachment(s)

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

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGZ5400B

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver WONG CHEE JIN

NRIC/Passport Number

Contact Number 97667289

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

SKETCH PLAN

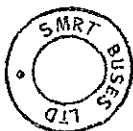
Bus 11/17/2008

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.



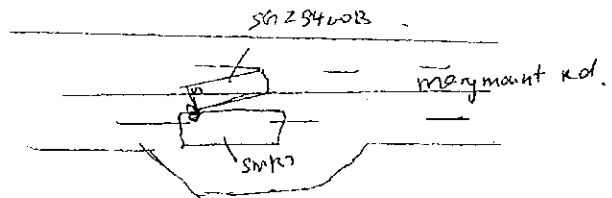
Policyholder's Signature
Date & Time:

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

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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ple refer to GHA report

DECLARATION

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



Policyholder's Signature
Date & Time:

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

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

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type	Company
Owner ID	2292D

Vehicle Details

Vehicle No.	SMB1414T
Vehicle to be Exported	No
Intended De-registration Date	08 Dec 2017
Vehicle Make	MAN
Vehicle Model	NL320F (A22)
Primary Colour	Multi-Colour
Manufacturing Year	2013
Engine No.	50334840633476
Chassis No.	WMAA22ZZXD7001975
Maximum Power Output	-
Open Market Value	\$253,818.00
Original Registration Date	06 Jan 2014
First Registration Date	06 Jan 2014
Transfer Count	0
Actual ARF Paid	\$0.00

Intended PARF Rebate Details

PARF Eligibility	No
PARF Eligibility Expiry Date	-
PARF Rebate Amount	\$0.00

Intended COE Rebate Details

COE Rebate Amount	\$0.00
Total Rebate Amount	\$0.00

The information contained herein is correct as at 08 Dec 2017

OK



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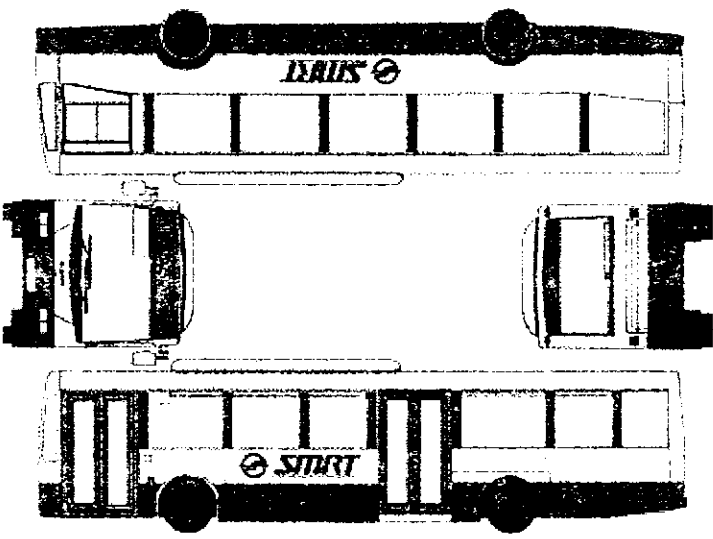
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Last updated on 19 Nov 2017 at 12:12 AM

SMRT Accident Vehicle Repair Estimates

Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre	
Reg. No	: SMB1414T
Ref. No	: BUS/11/17/7008
Reg. Date	: 08/11/2017
Vehicle Type	: BUS -12M
Make	: MAN
Model	: MAN
Name of Driver	: Ng Hoon Khai
Type of Accident	: SIDE SWIPE
Date / Time of Accident	: 06/11/2017 11:52:00 PM
Accident Reported Date / Time	: 07/11/2017 12:00:00 AM
Surveyor is Required?	: Yes
Survey by	: IDAC
Vehicle is Towed Back?	: No
Towed Back Date/Time	:
Replacement Vehicle issued?	: No
Accident Repair Job Card No	:
Special Instruction to ARC,if any :	
SMB1414T - RIGHT FRONT PORTION	
SGZ5400B (TP) - INSURED WITH NTUC	
Prepared Date	: 08/11/2017 03:45:33 PM



Chassis No : Mileage : 0

Work Shop : Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 530.00	0.00
Total Spray Painting Charges	: 538.00	0.00
Total Material Charges	: 0.00	0.00
Other Charges	: 690.00	0.00
TOTAL	: 1,758.00	0.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 2.00	0.00 1 day
Prepared / Adjusted By		
Arc / Surveyor Sing Off Date	: 07/12/2017 01:03:26 PM	01/01/1900 12:00:00 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 07/12/2017 09:00:52 AM

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

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

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	530.00	0.00 265
Total Labour	530.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

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

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


Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
ADVERTISEMENT STICKER	480.00	0.00 } Nec.
PIXEL STENCIL RHS FRT	210.00	0.00 }
Total Other Costs	690.00	0.00

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 Prejudices" 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:

Sebastian
7/12/2017.
- Photo After Paint.


P12/17.

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

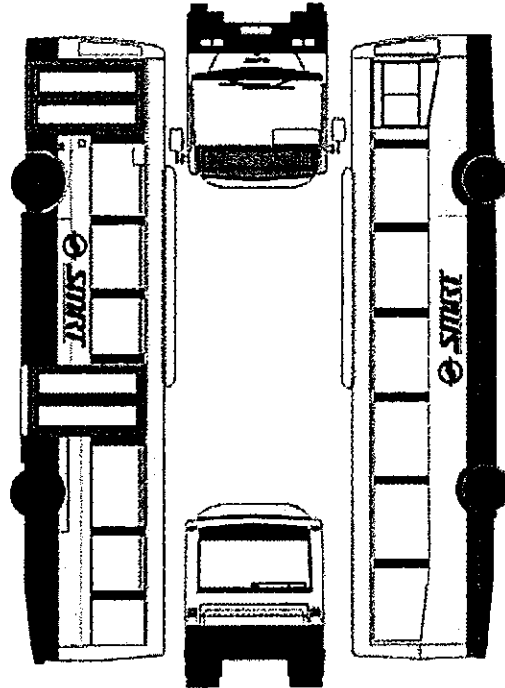
Added Spare Parts / Material Usage After Surveyor Signed off

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

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SMB1414T
 Ref. No : BUS/11/17/7008
 Reg. Date : 06/01/2014
 Vehicle Type : BUS -12M
 Make : MAN
 Model : MAN
 Name of Driver : Ng Hoon Khai
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 06/11/2017 11:52:00 PM
 Accident Reported Date / Time : 07/11/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : IDAC
 Vehicle is Towed Back? : No
 Towed Back Date/Time : 01/01/2000
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024093506
 Special Instruction to ARC,if any :
 SMB1414T - RIGHT FRONT PORTION
 SGZ5400B (TP) - INSURED WITH NTUC
 Prepared Date : 08/11/2017 03:45:33 PM



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

Chassis No : WMAA22ZZXD7001975

Mileage

0

Work Shop :

Repair Completed Date / Time :

01/01/2000

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 530.00	265.00
Total Spray Painting Charges	: 538.00	400.00
Total Material Charges	: 0.00	0.00
Other Charges	: 690.00	10.00
TOTAL	: 1,758.00	675.00
Lum Sum Total	: 1,750.00	700.00
No. of Repair Days	: 2.00	1.00 ✓
Prepared / Adjusted By	:	SEBASTIAN -LKK
Arc / Surveyor Sign Off Date	: 07/12/2017 01:03:26 PM	10/02/2018 04:57:48 PM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 07/12/2017 09:00:52 AM

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

Quotation No :

Invoice No :

Quotation Date :

Invoice Date :

Invoice Amount :

Prepared Date :

Part 1- Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	530.00	265.00 /
Total Labour	530.00	265.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	538.00	400.00 /
Total Spray Painting & Panel Beating	538.00	400.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
ADVERTISEMENT STICKER	480.00	0.00 /
PIXEL STENCIL RHS FRT	210.00	210.00 /
Lump Sum Adjustment by Surveyor	210.00	-200.00
Total Other Costs	900.00	10.00

1798

$$\begin{array}{r}
 265 \\
 400 \\
 + 210 \\
 \hline
 875 \\
 - 10\% \\
 \hline
 787.5 \\
 \hline
 787.5
 \end{array}$$

4/5 = \$ 700

Sebastian
28/1/17

Part 4 - Spare Parts / Material Usage

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

Added Spare Parts / Material Usage After Surveyor Signed off

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




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/INC17023328/Srbe2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 12-03-2018	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SGZ 5400B	Veh. Inspected	SMB 1414T	
Policy No.	5077149499-01	Coverage (\$)	0.00	
Claim No.	MT/0985155-001	Excess (\$)	0.00	
Assign From		Assign Date	07/12/2017	
2. Vehicle Particulars & Condition				
Make & Model	MAN NL320F	c.c	10518	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	WMAA22ZZXD7001975	Colour	MULTI COLOUR	
Odometer	357812	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	275/70 R22.5	FIRENZA	6 mm	
L/H Front Tyre	275/70 R22.5	FIRENZA	6 mm	
R/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	6/6 mm	
L/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	6/6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	06/11/2017	Inspection Date	07/12/2017	
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:		1 Working Days		



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

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



Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMB 1414T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	ADVERTISEMENT STICKER (SN)	NOT NECESSARY	480.00	-
1	PIXEL STENCIL RHS FRT (SN)	NECESSARY	210.00	210.00
			690.00	210.00
LABOUR				
	TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.		530.00	265.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		538.00	400.00
			1,068.00	665.00
GRAND TOTAL			1,758.00	875.00

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			700.00
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Report Ref No. NS/INC17023328/Srbe2

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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