

Karnu

NS/ZNC17023805/R/vbr2

SHD 63180

2016 July

Estimated Cost

12 TP WS TR RES CD RES EVA

Thru Road Vehicle

Year of Manufacture

Color

Insured FBC 2047M

Policy No 5085645204-01 02.11.17

Damage No MT/0973641-002

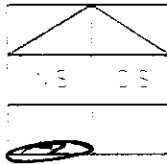
Sum Insured Excess

Claims Record

Make of Car

Policy Condition

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



Body of Vehicle Value

DAG Accident Report Consistent? Yes or No

GA - PP - Seen Consistent? Yes or No

Est. Repairs 5 days Rep Yes or No

Est. Sum 3 days Yes or No

CA REP. REP. 24 HRS

Date Person Contacted

Vehicle IN/OUT

Year

TOYOTA PRIUS
MAROON

1798

St. Peering 109155

Engine

ID No JTDKN364905768469

Gen. Cond. Good (S) Poor (B) Bad (X)

Breeding (S) Lammed (B) Leaked (X) Burnt (X)

Brake (S) Lammed (B) Leaked (X) Burnt (X)

Mod. (S) STD (B) ALT (X)

Tyre Size

195/65R15

BS DUN EXNOVA 31 FS L2A M/C OHTSL PP SUM

TOYOTA YOKO

Falken

Front

Rear

R.Ba

S

R.Ba

S

L.Ba

S

L.Ba

S

D.O.A

11/12/17

D.O

13/12/17

Survey Report

SMRT

Des. of Damages Fr. Rear OS NS LC Position

REAR N/S

The C.O. Chassis/frame Body Structure affected due to accident

Date/Time

Action/Instructions

SHD 63180 - 03/EGC17013806 / Tvbr2

DLF: 290917

12/17/2017

FBC 2047M - NBR/ENC17023647 / 24

DLF: 11/12/17

15/1 11:46am Continued final fig \$2,857.60 and 5 days with Peh Swan.
(Recd 2838.30, 4912)

1042/mme

FBC 2047M

RECEIVED 16 JAN 2018

One-Time Fee Paid

☐

Pre-Report

Days Of Repair

5

Resurvey No. of Times

1

One-Time Fee

160

One-Time Fee Paid

☐

Final Report

Add Fee

☐

One-Time Fee

35

Report Fee Paid

One-Time Fee Paid

35

One-Time Fee Paid

195

Survey Department Check List (Case Handler)

Reference No.: **NS/INCF/03805/RW**
 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** **15/1/18**
 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/INC17023805/R1vb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 15-12-2017	
Code: INC4				
1. Policy Particulars : THIRD PARTY CLAIM				
Insured Veh.	FBC 2047M	Veh. Inspected	SHD 6318D	
Policy No.	5085645204-01	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	13/12/2017	
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	11/12/2017	Inspection Date	13/12/2017	
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

Date : 12/01/2018

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/0974964-003	CITYCAB PTE LTD	SHC 926T	SKN 4852C	24/12/2017	16:10	\$ 3,231.90	\$ 1,400.00
2	MT/0965594-002	SMRT BUSES LTD	SG 1046A	SJK 9733H	10/10/2017	11:20	\$ 12,108.35	\$ 9,303.66
3	MT/0974611-002	SMRT TAXI PTE LTD	SHB 1023Y	GW 2992U	18/12/2017	7:40	\$ 7,209.04	\$ 1,100.00
4	MT/0974888-002	SMRT TAXI PTE LTD	SHF 466M	PA 8025G	21/12/2017	8:10	\$ 7,656.80	\$ 1,250.00
5	MT/0973641-002	SMRT TAXI PTE LTD	SHD 6318D	FBC 2047M	11/12/2017	6:27	\$ 4,497.17	\$ 2,857.60
6	MT/0976356-002	SMRT TAXI PTE LTD	SHF 301E	SFT 68D	1/1/2018	6:11	\$ 8,472.24	\$ 1,100.00
7	MT/0977899-001	SMRT TAXI PTE LTD	SHB 5827T	SDS 6588J	4/1/2018	10:20	\$ 1,978.61	\$ 924.77
8	MT/0975474-002	SMRT TAXI PTE LTD	SHB 152P	GBE 7429B	28/12/2017	11:00	\$ 6,344.44	\$ 3,500.00
9	MT/0973932-002	SMRT TAXI PTE LTD	SHF 441J	SJL 7917C	15/12/2017	18:10	\$ 9,147.71	\$ 1,850.00
10	MT/0970425-002	SMRT BUSES LTD	SMB 21A	SKH 2771Y	17/11/2017	17:05	\$ 2,929.36	\$ 1,900.00
11	MT/0976470-002	SMRT TAXI PTE LTD	SHC 4700B	SLT 752R	4/1/2018	8:35	\$ 2,057.39	\$ 1,050.00
12	NOT INCOME	SMRT TAXI PTE LTD	SHB 5040X	SDG 1662Z	31/12/2017	21:35	\$ 2,759.80	\$ 1,467.80
13	MT/0974170-002	SMRT TAXI PTE LTD	SHC 4021C	SID 3664A	17/12/2017	18:20	\$ 2,551.82	\$ 550.00

eBaoTech

GeneralClaim

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)

Stop

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5085645204-01	ALORIDE PTE. LTD.	201629994W	GFT	Third Party	FBC2047M	FBC2047M	02/11/2017	

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	12/12/2017 11:26
Date Of Accident	11/12/2017 18:25
Exact Location Of Accident	PIE TOWARDS TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6318D
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-800000000
Vehicle Particulars	
Manufacturer	TOYOTA
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	THOMAS LAW SWEE CHOON
NRIC No	S2021008G
Date Of Birth	12/01/1952
Occupation	OUTDOOR
Date Of Driving Pass	14/11/1977
Driving Experience	40 YEARS AND 0 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 -
Vehicle -
Insurance Company of Driver's Own Vehicle -
-

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
Weather Conditions RAINING
Road Surface WET

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 AT THE RIGHT MOST LANE AT A SLOW SPEED WITH A PASSENGER ON BOARD DUE TO HEAVY TRAFFIC. SUDDENLY I FELT AN IMPACT FROM THE REAR OF MY TAXI. THE MOTORCYCLE FBC2047M FROM BEHIND HAD COLLIDED ONTO THE REAR PORTION 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 FBC2047M
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver ISSAT BIN ABU BAKAR
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 1

Details of Witness

Name
Phone Number
Email Address

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:

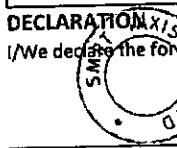
Driver's Signature
(If driver is not the policyholder)
Date & Time: 12/12/2017

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

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Blank lined area for describing the circumstances of the accident.



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: 12/12/2017

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

TOYOTA MOTOR CORPORATION

JTDKN36U905768469

1805 kg

1805 kg

1-1020kg

2- 980kg

C/TR

3R9

/FA20

A/TM

T01A

/P410

PLANT

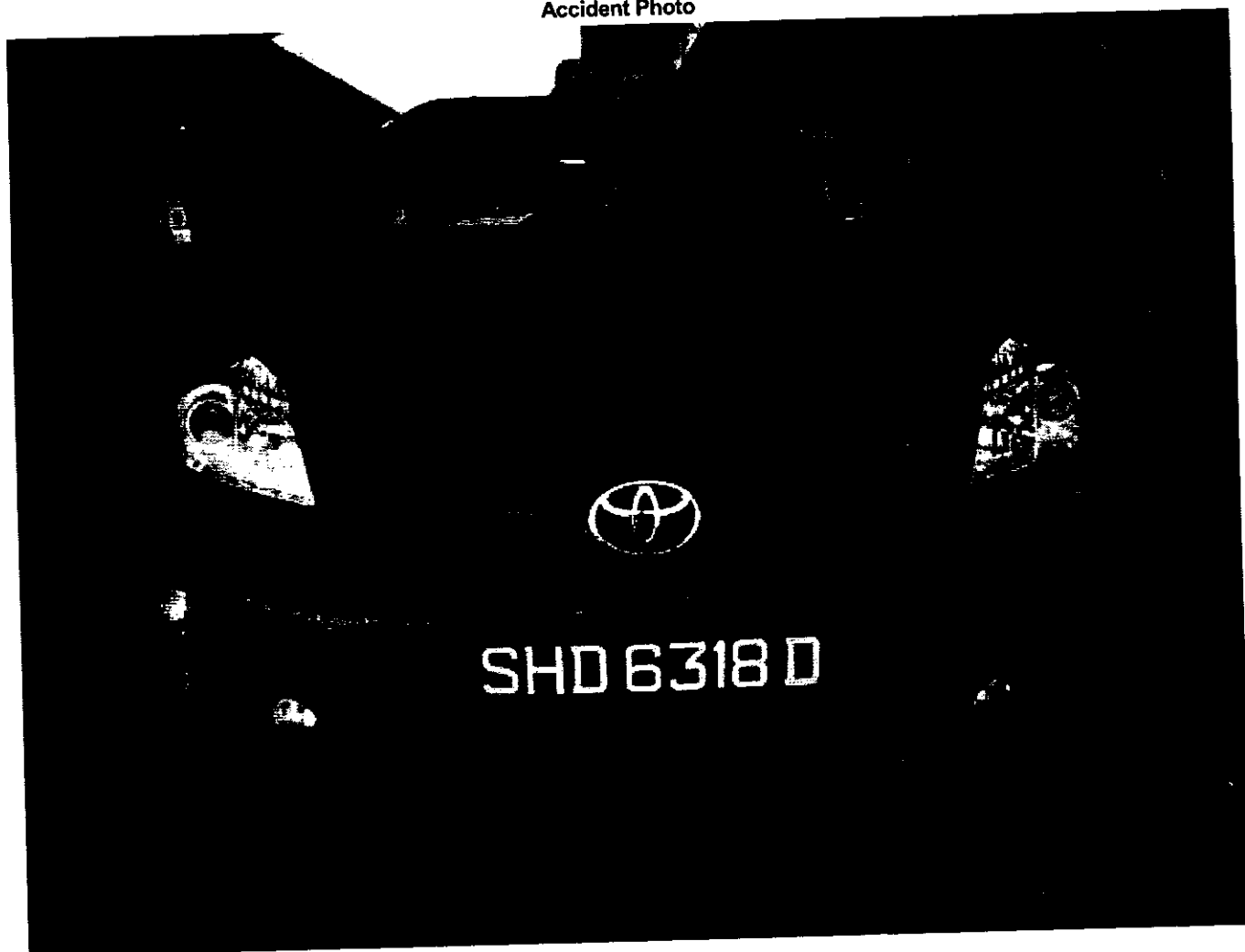
025

MODEL ZVW30R-AHXEBW

523

7

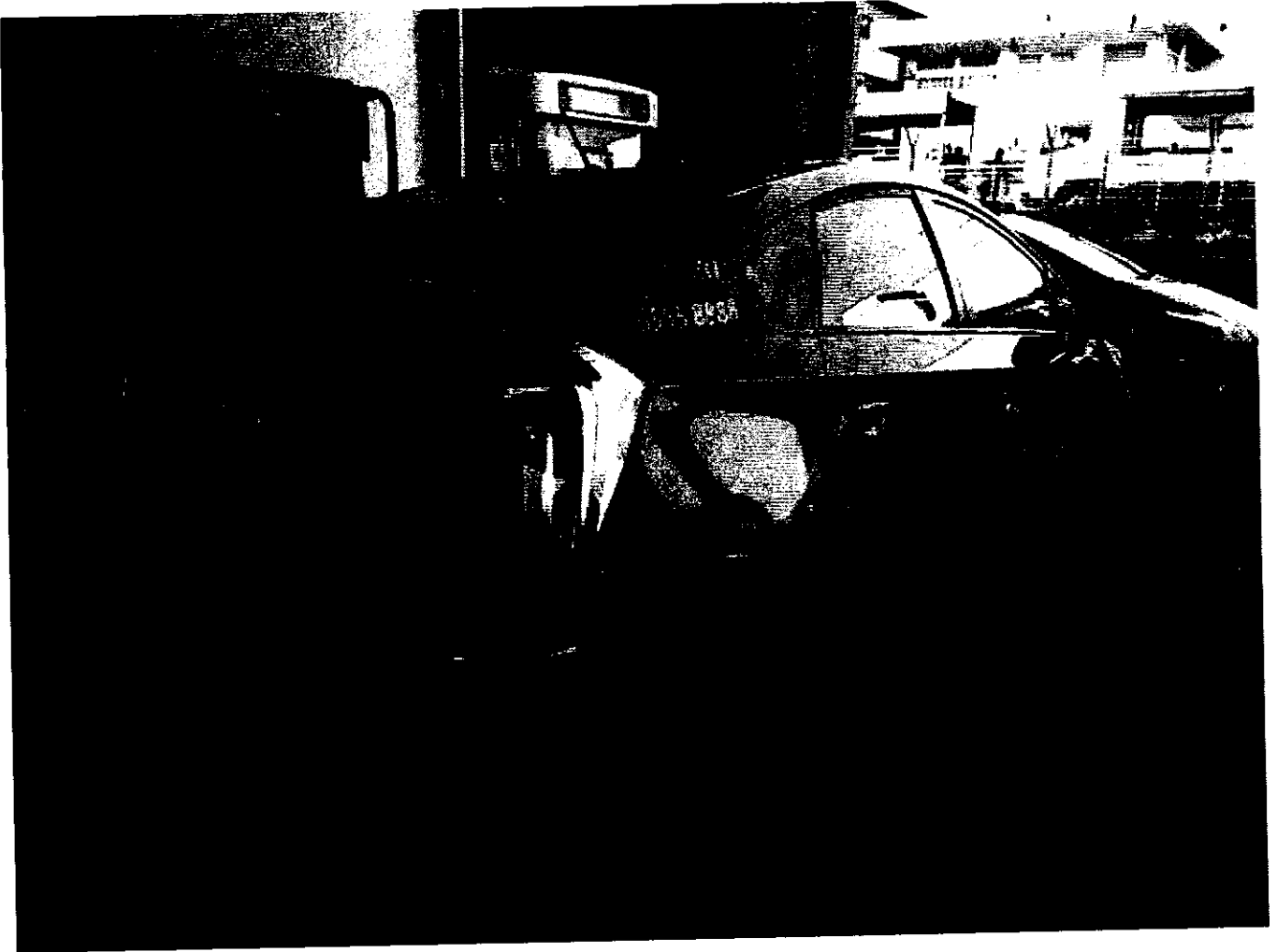
Accident Photo



Accident Photo



Accident Photo



Accident Photo



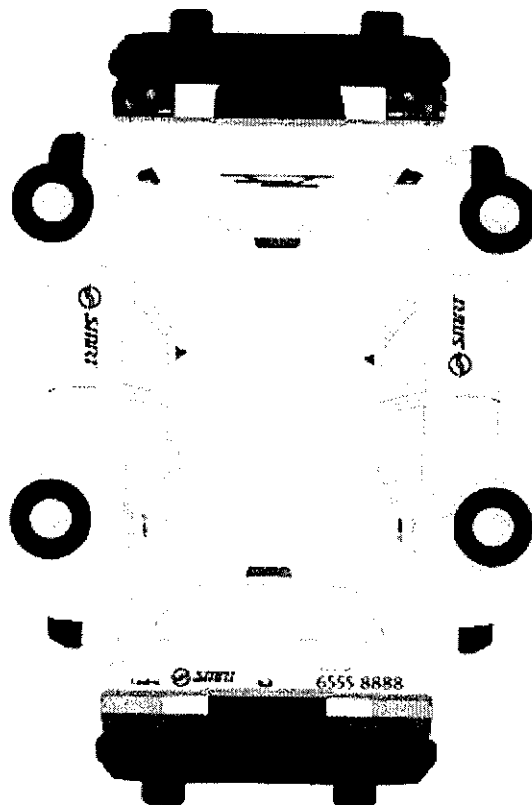
Accident Photo



SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHD6318D
Ref. No : TAX/12/17/2067
Reg. Date : 27/07/2016
Vehicle Type : TAXI
Make : TOYOTA PRIUS
Model : PRIUS
Name of Driver : THOMAS LAW SWEE CHOON
Type of Accident : HEAD TO REAR
Date / Time of Accident : 11/12/2017 06:27:00 PM
Accident Reported Date / Time : 12/12/2017 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 : 000024093568
Special Instruction to ARC, if any :
DROVE IN / FBC2047M / *Repair by paint*
Prepared Date : 12/12/2017 11:43:13 AM



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 : JTDKN36U905768469

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 676.00	0.00
Total Spray Painting Charges	: 1,134.00	0.00
Total Material Charges	: 2,287.17	2,862.27
Other Charges	: 400.00	0.00
TOTAL	: 4,497.17	0.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 5.00	0.00 5 days - p/p
Prepared / Adjusted By	:	
Arc / Surveyor Sign Off Date	: 12/12/2017 01:41:12 PM	01/01/1900 12:00:00 AM

M

Paul
13/12/17 @ 1715

15/12/17

Prepared / Adjusted Date :

Remarks :

Prepared Date : 12/12/2017 01:41:12 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 : 0.00

Prepared Date : 12/12/2017 1:41:31 PM

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	676.00	0.00 400
Total Labour	676.00	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	0.00 200
TO RESPRAY TAIL GATE	378.00	0.00 200
TO RESPRAY REAR FENDER LH	378.00	0.00 X
Total Spray Painting & Panel Beating	1,134.00	0.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO TRANSFER REAR TAILGATE MECHANISM	120.00	0.00 60
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00 60
TO REPLACE SUNDRY PARTS	100.00	0.00 20
TO WASH AND VACUUM	60.00	0.00 40
Total Other Costs	400.00	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
52159-47905		6505548	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace <i>DE</i>	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace <i>rec</i>	No
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace <i>DE</i>	No
76088-47020		6505617	BUMPER LIP COVER RR/LH	1	72.20	25.00	54.15	Replace	Replace <i>DE</i>	No
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10	Replace	Replace <i>rec</i>	No
67005-47241			TAILGATE ASY	1	1,007.90	25.00	755.92	Replace	Replace <i>FT</i>	No
75574-47020			TAIL GATE DOOR GLASS MOULDING, LH	1	29.40	25.00	22.05	Replace	Replace <i>X</i>	No
75573-47080			TAIL GATE DOOR GLASS MOULDING, RH	1	29.40	25.00	22.05	Replace	Replace <i>rec</i>	No
75575-47030			MOULDING BACK WINDOW, LOWER NO.1	1	29.40	25.00	22.05	Replace	Replace <i>X</i>	No
	COMMO N		SEALANT W/SCREEN	3	37.00	0.00	111.00	Replace	Replace <i>rec</i>	No
75374-47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace <i>rec</i>	No
31561-47170		6505461	TAIL LAMP LH	1	548.40	10.00	493.56	Replace	Replace <i>chr</i>	No
32563-47010			TAIL LAMP BRACKET, LH	1	30.70	25.00	23.02	Replace	Replace <i>?</i>	No
31602-47091		6505476	FENDER RR/LH	1	766.80	25.00	575.10	Repair	Replace <i>X</i>	No
			STICKER DECAL SMRT	1	7.80	0.00	7.80	Replace	Replace <i>X</i>	No
			STICKER DECAL 6555 8888	1	21.60	0.00	21.60	Replace	Replace <i>X</i>	No
TOTAL MATERIALS								2,287.19	2,862.27	
TOTAL MATERIALS(Discounted)								2,287.17	2,862.27	

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
TOTAL SUPPLEMENTARY MATERIALS									



TAT

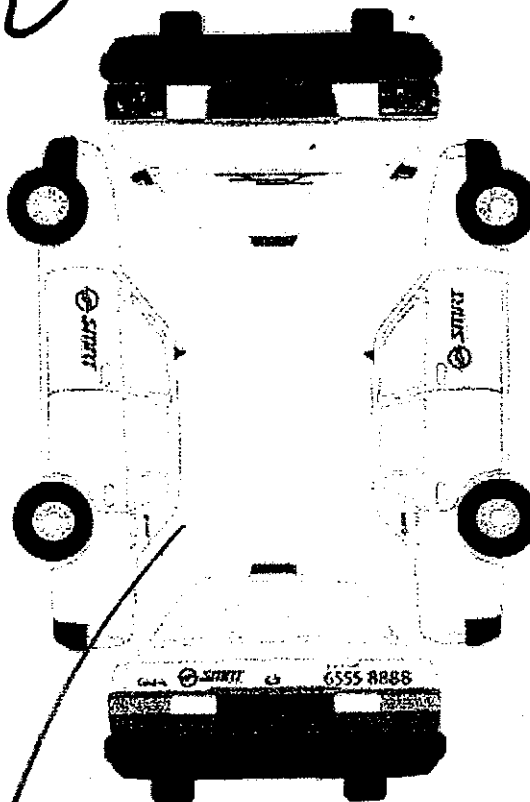
19-12-17 / 12:39

19-12-17 / 16:39

13-12-17 / 16:39

SMRT Accident Vehicle Repair Estimates**Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre**

Reg. No : SHD6318D
Ref. No : TAXI/12/17/2067
Reg. Date : 27/07/2016
Vehicle Type : TAXI
Make : TOYOTA PRIUS
Model : PRIUS
Name of Driver : THOMAS LAW SWEE CHOON
Type of Accident : HEAD TO REAR
Date / Time of Accident : 11/12/2017 06:27:00 PM
Accident Reported Date / Time : 12/12/2017 12:00:00 AM
Surveyor is Required? : Yes
Survey by : Rasul
Vehicle is Towed Back? : No
Towed Back Date/Time :
Replacement Vehicle issued? : No
Accident Repair Job Card No : 000024093568
Special Instruction to ARC, if any :
DROVE IN / FBC2047M - NTUC IDAC
Before paint photo, After repair photo FOR CHECK ITEM and REPLACE ITEM PLEASE CALL SURVEYOR RASUL
/ HP : 9001 0068. email: rasul@lkkauto.com
lumpsum repair
Prepared Date : 12/12/2017 11:43:13 AM

Recording Camera ☐Radio Antenna ☐

1st witness

Date

2nd witness

Date

E 1/2 @ F
KM 109152

Vehicle to Wega Date In: 14/12	Towing:
Time In: 1305	Driver: TAT
Wega Job No: 14620/12	
Vehicle sent to SMRT Date In: 19-12-2017	Towing:
Time In: 1-30	Driver:
Received by (SMRT) :	

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

Chassis No : JTDKN36U905768469

Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 676.00	400.00
Total Spray Painting Charges	: 1,134.00	400.00
Total Material Charges	: 1,900.62	1,877.60
Other Charges	: 400.00	180.00
TOTAL	: 4,110.62 5695.90	2,857.60
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 5.00	5.00
Prepared / Adjusted By	:	RASUL (LKK)
Arc / Surveyor Sign Off Date	: 12/12/2017 01:41:12 PM	13/12/2017 04:39:16 PM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 12/12/2017 01:41:12 PM

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

Quotation No : QN-1712-0561
Quotation Date : 20/12
Invoice Amount : 0.00

Invoice No :
Invoice Date :
Prepared Date : 12/12/2017 1:41:31 PM

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	676.00 ✓	400.00
Total Labour	676.00	400.00

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 TAIL GATE	378.00 ✓	200.00
TO RESPRAY REAR FENDER LH	378.00 ✓	0.00
Total Spray Painting & Panel Beating	1,134.00	400.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO TRANSFER REAR TAILGATE MECHANISM	120.00	60.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	60.00
TO REPLACE SUNDRY PARTS	100.00	20.00
TO WASH AND VACUUM	60.00	40.00
Total Other Costs	400.00	180.00

5695.90

4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
39-05		6505548	BUMPER REAR	✓ 1	458.60	25.00	343.95	Replace	Replace	No ✓ BT
			PIXEL STICKER	✓ 2	60.00	0.00	120.00	Replace	Replace	No ✓ REC
			SENSOR REVERSE	X 0	180.00	0.00	0.00	Replace	Not given	No X NN
38-00		6505617	BUMPER LIP COVER RR/LH	✓ 1	72.20	25.00	54.15	Replace	Replace	No ✓ DE
6-00		6505550	BUMPER SIDE RETAINER RR/LH	✓ 1	94.80	25.00	71.10	Replace	Replace	No ✓ REC
15-01			TAILGATE ASY	✓ 1	1,007.90	25.00	755.92	Replace	Replace	No ✓ BT
4-00			TAIL GATE DOOR GLASS MOULDING, LH	X 0	29.40	25.00	0.00	Replace	Not given	No X NN
3-00			TAIL GATE DOOR GLASS MOULDING, RH	X 0	29.40	25.00	0.00	Replace	Not given	No X NN
5-00			MOULDING BACK WINDOW, LOWER NO.1	X 0	29.40	25.00	0.00	Replace	Not given	No X NN
	COMMON		SEALANT W/SCREEN	X 0	37.00	0.00	0.00	Replace	Not given	No X NN
4-01			NAME PLATE (HYBRID)	✓ 1	51.90	25.00	38.92	Replace	Replace	No ✓ REC
1-00		6505461	TAIL LAMP LH	✓ 1	548.40	10.00	493.56	Replace	Replace	No ✓ CFA
3-00			TAIL LAMP BRACKET, LH	X 1	30.70	25.00	23.03	Replace	Check	No X NN
2-01		6505476	FENDER RR/LH	✓ 0	766.80	25.00	0.00	Repair	Not given	No X R
			STICKER DECAL SMRT	✓ 0	7.80	0.00	0.00	Replace	Not given	No X NN
			STICKER DECAL 6555 8888	✓ 0	21.60	0.00	0.00	Replace	Not given	No X NN
TOTAL MATERIALS							1,900.64	1,877.60		
TOTAL MATERIALS(Discounted)							1,900.62	1,877.60		

4 - 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									

1877.60
+ 400.00
+ 580.00

2857.60

Celine Fong (LKKAuto)

From: Celine Fong (LKKAuto)
Sent: Monday, 15 January, 2018 11:44 AM
To: 'Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)'; Rasul (LKKAuto)
Subject: RE: SHD6318D

Dear Poh Suan,

Confirmed part by part \$2,857.60, 5 days.

Best Regards,
Celine Fong
LKK Auto Consultants Pte Ltd
phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1,
#02-25 | S(408933)

-----Original Message-----

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC) [mailto:YeoPohsuan@smrt.com.sg]
Sent: Thursday, 21 December, 2017 11:41 AM
To: Rasul (LKKAuto) <Rasul@lkkauto.com>
Cc: Celine Fong (LKKAuto) <celinefong@lkkauto.com>; 'Leong Chee kwong' <cheekwongwega@gmail.com>
Subject: SHD6318D

Hi Rasul,

Attached herewith the repair estimate of SHD 6318D having Case No: TAX/12/17/2067.

There is no change to the approved amount of \$2,857.60 @ 5 working days under part by part repair.

Cost of Repair invoice will be generated as approved.

Please finalize with me within 7 working day, thanks.

Aside Kwong,

Please provide the before / after paint photos as per surveyor's request.

Thanks & Regards
Poh Suan

-----Original Message-----

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)
Sent: 21 December 2017 11:24
To: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)
Subject: Scan Data from FX-D421D6

**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/INC17023805/R1vbe2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 19-01-2018	
		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	FBC 2047M	Veh. Inspected	SHD 6318D
Policy No.	5085645204-01	Coverage (\$)	0.00
Claim No.	MT/0973641-002	Excess (\$)	0.00
Assign From		Assign Date	13/12/2017
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	JTDKN36U905768469	Colour	MAROON
Odometer	109155	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	5 mm
L/H Front Tyre	195/65 R15	FALKEN	5 mm
R/H Rear Tyre	195/65 R15	FALKEN	5 mm
L/H Rear Tyre	195/65 R15	FALKEN	5 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	11/12/2017	Inspection Date	13/12/2017
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:		5 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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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 6318D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BUMPER REAR (DISC 25%)	BENT	458.60	343.95
1	BUMPER LIP COVER RR/LH (DISC 25%)	DEFORMED	72.20	54.15
1	BUMPER SIDE RETAINER RR/LH (DISC 25%)	NECESSARY	94.80	71.10
1	TAILGATE ASY (DISC 25%)	BENT	1,007.90	755.92
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	51.90	38.92
1	TAIL LAMP LH (DISC 10%)	CRACKED	548.40	493.56
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	SENSOR REVERSE	NOT NECESSARY	180.00	-
1	TAIL GATE DOOR GLASS MOULDING, LH	NOT NECESSARY	29.40	-
1	TAIL GATE DOOR GLASS MOULDING, RH	NOT NECESSARY	29.40	-
1	MOULDING BACK WINDOW, LOWER NO. 1	NOT NECESSARY	29.40	-
1	SEALANT W/SCREEN	NOT NECESSARY	37.00	-
1	TAIL LAMP BRACKET, LH	NOT NECESSARY	30.70	-
1	STICKER DECAL SMRT	NOT NECESSARY	7.80	-
1	STICKER DECAL 6555 8888	NOT NECESSARY	21.60	-
1	FENDER RR/LH	TO REPAIR	766.80	-
			3,485.90	1,877.60
<u>LABOUR</u>				
THATCHAM STANDARD REPAIR TIME ON BODY WORKS.			916.00	520.00
THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.			1,134.00	400.00
TO REPLACE SUNDRY PARTS.			100.00	20.00
TO WASH AND VACUUM.			60.00	40.00
			2,210.00	980.00
GRAND TOTAL			5,695.90	2,857.60

RECOMMENDED COST OF REPAIRS (CONFIRMED)			2,857.60
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Report Ref No. NS/INC17023805/R1vbe2

MOHAMMED RASUL BIN MOHD YUNUS

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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