

REF:

NS/INC18000179 / Sgbez

ASSIGNMENT

From:

Date:

Veh No:

S14 B 5086P.

Yr Regn:

3/11/2017.

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

Make:

Toyota Prius 4.

c.c 1798

at Workshop m/s

Colour

Maroon.

A/C:

Insured / Std / NI / NA

of

Sp.Reading

25084

T/Radio: Insured / Std / NI / NA

Insured:

FBK 46677

Eng/No:

Policy No.

5073.68 2635-02

030917 - 020918

C/No:

JTDKB3FH703573619

Claims No.

MT/0975403-002

Sum Insured:

Excess:

Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: NI / S/Rim / STD A/Rim or

Tyre Size:

F: 195/65 R15

R:

11

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

TOYO / YOKO or

(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:

7

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Front

Rear

R/Bal.

8

mm

R/Bal.

8

mm

L/Bal.

8

mm

L/Bal.

8

mm

D.O.A.

24/24 mit.

D.O.I.

8/1/R.

Survey held at

SMRT.

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

Rear N/S

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

Date / Time | Action / Instruction

S14 B 5086P NS/INC16005030/K1660

DA: 150516 TAX/12/17/2146

FBK 46677 - X

Lkk.

NTUC

Final Eng \$ 370, 2 days (Red \$ 127.80, 68%)

RECEIVED 26 JAN 2018

Date/Time, File Pass to?

☐

Preli. Report

Days Of Repair:

2

Date/Time, File Return to?

☐

Final Report

Resurvey No. of Trip:

Survey Fee:

160

Date/Time, File Return to?

Transportation:

2)

Add Fee:

☐

Site Insp (\$

S + RS. SI

☐

Interview (\$

Photos

☐

Tech. Insp (\$

Others

☐

Weekend (\$

TOTAL

195

Report Format:

Lump Sum / I.B.I. (\$) 570



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/INC18000479/Sqb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 09-01-2018	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	FBK 4667T	Veh. Inspected	SHB 5086P	
Policy No.	5073682635-02	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	08/01/2018	
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	27/12/2017	Inspection Date	08/01/2018	
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.				

Survey Department Check List (Case Handler)

Reference No.: *NS/INC18000479/Syb*
 Policy Type: OD *(TP)* TP RES / TL / EVA

SHB 50B6P

Case Handler

Typist

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

(1) Office Assign Form

- 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

Y-Date	N-Date	Y-Date	N-Date
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			

Surveyor (*Sebastian*): 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

<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
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<i>✓</i>			
<i>✓</i>			
<i>✓</i>			
<i>✓</i>			

(2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

<i>✓</i>			
----------	--	--	--

(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

<i>✓</i>			
<i>✓</i>			

(4) System - (Views/Merimen)

- C Resurvey photo Uploaded

--	--	--	--

Check By:

Ch *26/11/18*

Case Handler

Date

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
1	MT/0975403-002	SMRT TAXI PTE LTD	SHB 5086P	FBK 4667T	27/12/2017
2	MT/0977299-002	SMRT TAXI PTE LTD	SHB 192Z	SHC 6576E	11/01/2018
3	MT/0972718-002	COMFORT TRANSPORTATION	SHA 4630E	FBE 1449H	6/12/2017
4	MT/0976746-002	SMRT TAXI PTE LTD	SHF 200M	SHB 8676S	5/1/2018
5	MT/0977011-002	SMRT TAXI PTE LTD	SHC 4740K	GT 4929G	8/1/2018

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

27/12/2017 11:26

Vehicle No.(For Motor)

FBK4667T

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5073662635-02	MOHD RIZAL BIN JANTAN	S7926189J	GMC	Third Party, Fire & Theft	FBK4667T	FBK4667T	03/09/2017	02/09/2018

[Continue](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

5369K

Vehicle Details

Vehicle No.:

SHB5086P

Vehicle to be Exported:

No

Intended De-registration Date:

09 Jan 2018

Vehicle Make:

TOYOTA

Vehicle Model:

PRIUS HYBRID 1.8 CVT

Primary Colour:

Maroon

Manufacturing Year:

2017

Engine No.:

2ZRS101743

Chassis No.:

JTDKB3FU703573619

Maximum Power Output:

90.0 kW (120 bhp)

Open Market Value:

\$29,007.00

Original Registration Date:

03 Nov 2017

First Registration Date:

03 Nov 2017

Transfer Count:

0

Actual ARF Paid:

\$5,000.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

02 Nov 2025

PARF Rebate Amount: \$3,750.00

Intended COE Rebate Details

COE Expiry Date: 02 Nov 2025

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 8

PQP Paid: \$33,596.00

COE Rebate Amount: \$32,817.00

Total Rebate Amount: \$36,567.00

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 09 Jan 2018

OK

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	28/12/2017 09:54
Date Of Accident	27/12/2017 21:40
Exact Location Of Accident	SLIP ROAD TOWARDS PUNGGOL CENTRAL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5086P
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

Vehicle Particulars

Manufacturer	TOYOTA
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	TENG MING LUNG
NRIC No	S1600358A
Date Of Birth	14/12/1963
Occupation	OUTDOOR
Date Of Driving Pass	07/06/1999
Driving Experience	18 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 52 KENT ROAD
09-18
Postcode 210052
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - RELIEF
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
Number of vehicles involved in the accident
Was any body injured in the Accident? NO
Was any injured conveyed to hospital by ambulance? 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
Passenger 1
NAME: : JAYANTHI
GENDER: : FEMALE

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 STATIONARY ALONG THE SLIP ROAD TOWARDS PUNGGOL CENTRAL WITH ONE PASSENGER (MALE MALAY) ON BOARD AS I WAS LOOKING OUT FOR THE ONCOMING TRAFFIC. SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A MOTORCYCLE FBK4667T HAD COLLIDED ONTO THE REAR LEFT 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 Witness 1

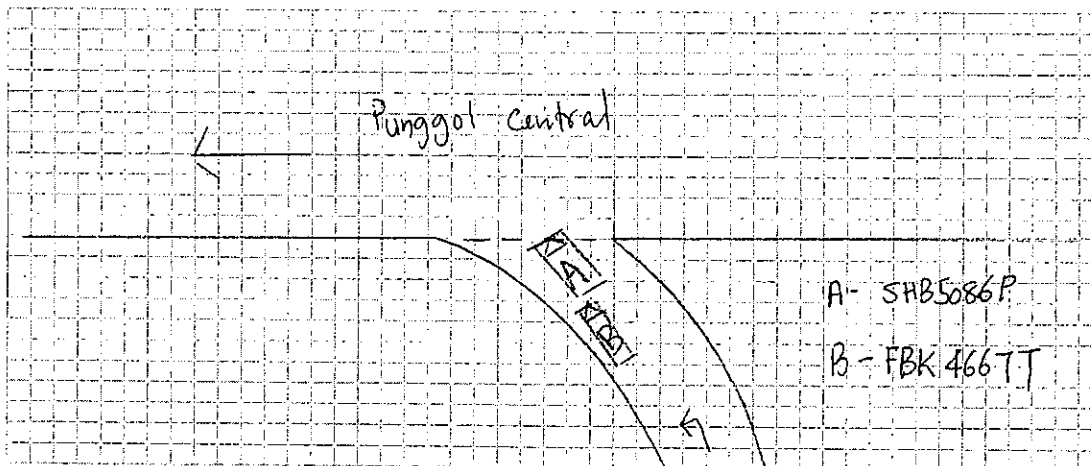
Name JAYANTHI
Phone Number
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBK4667T
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver MOHAMMAD RIZN BIN JANTAN
NRIC/Passport Number

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

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

Policyholder's Signature

Date & Time:

$$\text{let } f \in \mathbb{C}[x, y, z] \text{ and } \text{ans} :=$$

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

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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:

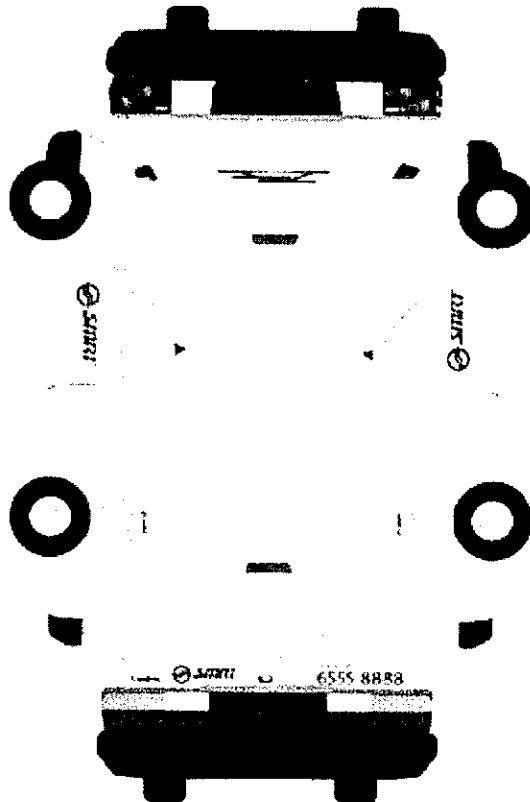
 28/12/2017
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

 28/12/2017
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHB5086P
 Ref. No : TAX/12/17/2146
 Reg. Date : 03/11/2017
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS4
 Name of Driver : TENG MING LUNG
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 27/12/2017 09:40:00 PM
 Accident Reported Date / Time : 28/12/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : IN HOUSE
 Vehicle is Towed Back? : Yes
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024093975
 Special Instruction to ARC, if any :
 FBK4667T
 Prepared Date : 08/01/2018 01:08:39 PM



Sebastian.
 8/1/18.
 - Part by part repair.
 - Photo Before & After
 Paint.
 90036121

sebastianyeang@lkkauto.com

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:


 9/1/18

Chassis No : JTDKB3FU703573619

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 :	558.00	0.00
Total Material Charges :	527.84	527.84
Other Charges :	240.00	0.00
TOTAL :	1,663.84	0.00
Lum Sum Total :	0.00	0.00
No. of Repair Days :	3.00	0.00
Prepared / Adjusted By :		2 days
Arc / Surveyor Sign Off Date :	08/01/2018 01:32:17 PM	01/01/1900 12:00:00 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 08/01/2018 01:32:17 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 :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH 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	0.00 200
TO RESPRAY FILLER RR BUMPER LH	180.00	0.00 50
Total Spray Painting & Panel Beating	558.00	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 REPLACE SUNDRY PARTS	100.00	0.00 X
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	240.00	0.00

799.80

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
21594793			COVER, RR BUMPER ASSY	1	423.90	25.00	317.92	Replace	Replace <i>R</i>	No
25664790			FILLER, RR BUMPER, LH	1	119.90	25.00	89.92	Replace	Replace <i>R</i>	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace <i>ME</i>	No
TOTAL MATERIALS							527.85	527.84		
TOTAL MATERIALS(Discounted)							527.84	527.84		

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									



10-1-18/10:41

10-1-18/14:41

SMRT Accident Vehicle Repair Estimates

8-1-18/14:41

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

Reg. No : SHB5086P
 Ref. No : TAX/12/17/2146
 Reg. Date : 03/11/2017
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS4
 Name of Driver : TENG MING LUNG
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 27/12/2017 09:40:00 PM
 Accident Reported Date / Time : 28/12/2017 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : IN HOUSE Sebastian
 Vehicle is Towed Back? : YES
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024093975
 Special Instruction to ARC, if any :

FBK4667T NTUC P/P

BEFORE PAINT PHOTO AND AFTER PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR SEBASTIAN (LKK) & Email : sebastianyeang@lkkauto.com HP: 90036121

Prepared Date : 08/01/2018 01:08:39 PM



Recording Camera

☐☒

Radio Antenna

☐☒1st witness

Date

8-1-18

2nd witness

Date

Vehicle to Wega Date In: 5/11	Towing:
Time In: 1600	Driver: TAT.
Wega Job No: 01/0016	
Vehicle sent to SMRT Date In: 10-1-2018	Towing:
Time In: 10:30	Driver:
Received by (SMRT):	

QC 10/01/18 11:30 pass

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

Chassis No : JTDKB3FU703573619

Mileage

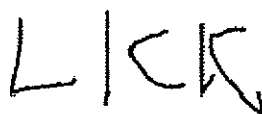
: 0

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	250.00
Total Material Charges	: 120.00	120.00
Other Charges	: 240.00	0.00
TOTAL	: 1,256.00	570.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 3.00	2.00 /
Prepared / Adjusted By	:	SEBASTIAN (LKK)
Arc / Surveyor Sign Off Date	: 08/01/2018 01:32:17 PM	08/01/2018 02:41:51 PM



repaired / Adjusted Date :

emarks :

repaired Date : 08/01/2018 01:32:17 PM

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

Quotation No	: QN-1801-0289	Invoice No	:
Quotation Date	: 11/1	Invoice Date	:
Invoice Amount	:	Prepared Date	:

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH 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 FILLER RR BUMPER LH	180.00 ✓	50.00 /
Total Spray Painting & Panel Beating	558.00	250.00

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	0.00
TO WASH AND VACUUM	60.00	0.00
Total Other Costs	240.00	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
21594793			COVER, RR BUMPER ASSY	1	423.90	100.00	0.00	Replace	Repair	No <i>R</i>
25664790			FILLER, RR BUMPER, LH	1	119.90	100.00	0.00	Replace	Repair	No <i>R</i>
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace	No <i>✓</i>
TOTAL MATERIALS							120.00	120.00		
TOTAL MATERIALS(Discounted)							120.00	120.00		

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									

120.00 /
 + 200.00 /
 + 250.00 /

 570.00 /

Sebastian
 22/1/18

1799.80

**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/INC18000479/Sqbe2	
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 01-02-2018	
		Code: INC4	
1. Policy Particulars : THIRD PARTY CLAIM			
Insured Veh.	FBK 4667T	Veh. Inspected	SHB 5086P
Policy No.	5073682635-02	Coverage (\$)	0.00
Claim No.	MT/0975403-002	Excess (\$)	0.00
Assign From		Assign Date	08/01/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU703573619	Colour	MAROON
Odometer	25084	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	YOKOHAMA	8 mm
L/H Front Tyre	195/65 R15	YOKOHAMA	8 mm
R/H Rear Tyre	195/65 R15	YOKOHAMA	8 mm
L/H Rear Tyre	195/65 R15	YOKOHAMA	8 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	27/12/2017	Inspection Date	08/01/2018
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:		2 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 5086P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	COVER, RR BUMPER ASSY	TO REPAIR	423.90	-
1	FILLER, RR BUMPER, LH	TO REPAIR	119.90	-
			663.80	120.00
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		418.00	200.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		558.00	250.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			1,136.00	450.00
GRAND TOTAL			1,799.80	570.00

RECOMMENDED COST OF REPAIRS (CONFIRMED)			570.00
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Report Ref No. NS/INC18000479/Sqbe2

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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