

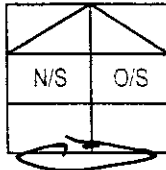
Pagan

REF:

NS/INC18001056 / R1thbe2

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: SLF 700P
 Policy No. 5093453550 080917 - 070918
 Claims No. MT/09 77781-002
 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
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHB 5681X Yr Regn: 2013 Jan
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: CHRYSLER EPICA C/O: 1991
 Colour: MAROON A/C: Insured / Std / NI / NA
 Sp. Reading: 48 4888 T Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KL1L46923B6138314
 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: 205/65 R15
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Funkew

Front		Rear
R/Bal. <u>5</u> mm		R/Bal. <u>5</u> mm
L/Bal. <u>5</u> mm		L/Bal. <u>5</u> mm
D.O.A. <u>14/01/18</u>		D.O.I. <u>16/01/18</u>
Survey held at <u>SMART</u>		

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

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

Date / Time	Action / Instruction
	SHB 5681X - NS/INC170000628 / K1th354
	SLF 700P - X
	QA: 000117
	01/18/2082
	Nine
	Lump Sum \$1300
	(Red: 542.64, 29%)
	SLF 700P
	2010

Date/Time, File Pass to? ☐ : Preli. Report

612 Typist ☒ : Final Report

Date/Time, File Return to?

to _____

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee.

Transportation.

Photos

Others

Add Fee: ☐ : Site Insp. \$

☐ : Interview \$

☐ : Tech. Insp. \$

☐ : Weekend \$

Report Format : TP
 Lump Sum / I.B.I. \$ 1300

TOTAL

160
35
195





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/INC18001056/R1tb			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 17-01-2018	
Code: INC4			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLF 700P	Veh. Inspected	SHB 5681X
Policy No.	5093453550	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	16/01/2018
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	14/01/2018	Inspection Date	16/01/2018
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.			

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="14/01/2018 16:23"/>						
Vehicle No.(For Motor)	<input type="text" value="SLF700P"/>	<input type="button" value="Search"/>							
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5093453550	BUILD COOL ENGINEERING SERVICES PTE LTD	199505501G	GPC	drive PREMIUM	SLF700P	SLF700P	08/09/2017	07/09/2018
<input type="button" value="Continue"/>									

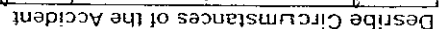
TP Claims against NTUC Income: Follow-Through Survey

Date : 05/02/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/0981147-001	COMFORT TRANSPORTATION PTE LTD	SHC 8522Y	SGH 2751C	01/02/2018	6:50	\$ 2,711.58
2	MT/0977787-002	SMRT TAXIS PTE LTD	SHB 5681X	SLF 700P	14/1/2018	10:40	\$ 1,842.64
3	MT/0981149-001	SMRT TAXIS PTE LTD	SHD 6404M	SKE 2795U	12/1/2018	16:30	\$ 2,653.66

Claim received from LKK

- Sketch Plan



Declaration

COMFORT "BOMB" MOUNTAIN CLOTHES, INCORPORATED

TEL: 6558 1111 FAX: 6453 3183
COL REG NO: 190303521F

 Policyholders Signature Date: _____

Driver's Signature: If driver is not the policyowner, Date: 5

Witnessed by Reporting Centre

Witnessed by Reporting Personnel:

Celine Fong (LKKAuto)

From: Celine Fong (LKKAuto)
Sent: Monday, 5 February 2018 2:35 PM
To: 'Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)'
Cc: Rasul (LKKAuto)
Subject: RE: SHB5681X

Dear Poh Suan,

Confirmed lump sum \$1,300.00, 2 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: Friday, 19 January 2018 4:05 PM

To: Rasul (LKKAuto) <Rasul@lkkauto.com>

Cc: Celine Fong (LKKAuto) <celinefong@lkkauto.com>

Subject: SHB5681X

Hi Rasul,

Attached herewith the repair estimate of SHB 5681X having Case No: TAX/01/18/2082.

There is no change to the approved amount of \$1,300 @ 2 working days under lump sum repair.

Cost of Repair invoice will be generated as approved.

Please finalize with me within 7 working day, thanks.

Thanks & Regards

Poh Suan

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

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)

Sent: 19 January 2018 03:42

To: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)

Subject: Scan Data from FX-D421D6



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

TAX INVOICE

TRAFFIC POLICE DEPARTMENT

INV No. AC1801456

INV Date 05/02/2018

Reference CI/TPD18001967/Zn

Code TPD

PROFESSIONAL SERVICE FEE



Vehicle No. SJR 4331E

Insured Veh.

Claim No. TP/IP/65603/2017

Policy No. HOMSPFEPO18301149

Accident Date

Inspection Date

Description	Total
Subtotal	0.00
GST (7%)	0.00
Grand Total	0.00

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

NRH

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	15/01/2018 11:14
Date Of Accident	14/01/2018 10:40
Exact Location Of Accident	BUKIT PANJANG ROAD TOWARDS BKE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5681X
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	TOH CHUN KIONG
NRIC No	S7408502D
Date Of Birth	15/03/1974
Occupation	OUTDOOR
Date Of Driving Pass	07/09/1993
Driving Experience	24 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	183 JELEBU ROAD 08-48
Postcode	670183
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	CHAIN COLLISION
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: : UNKNOWN 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 TRAVELLING ALONG BUKIT PANJANG ROAD TOWARDS BKE WITH ONE PASSENGER (FEMALE FILIPINO) ON BOARD. A VEHICLE IN FRONT OF MY TAXI CAME TO A HALT AND I FOLLOWED SUIT. AFTER WHICH I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SLF700P HAD COLLIDED ONTO THE REAR OF MY TAXI. WHEN I ALIGHTED I REALISED THAT IT WAS A CHAIN COLLISION INVOLVING THREE VEHICLES INCLUDING MINE.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FIEL TOO BIG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF700P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MA ENG SIANG
NRIC/Passport Number	S7476503C
Contact Number	
Address	
Postcode	

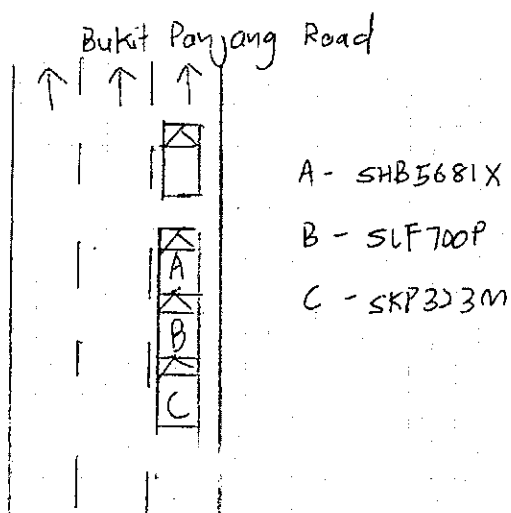
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKP3232M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHIA KAH LAM
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

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:

Driver's Signature
(if driver is not the policyholder)
Date & Time: 15/1/18

Date & Time: 15/1/18 10.58am

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

15/1/2018

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.:

15/1/18 1050am

15/1/2018

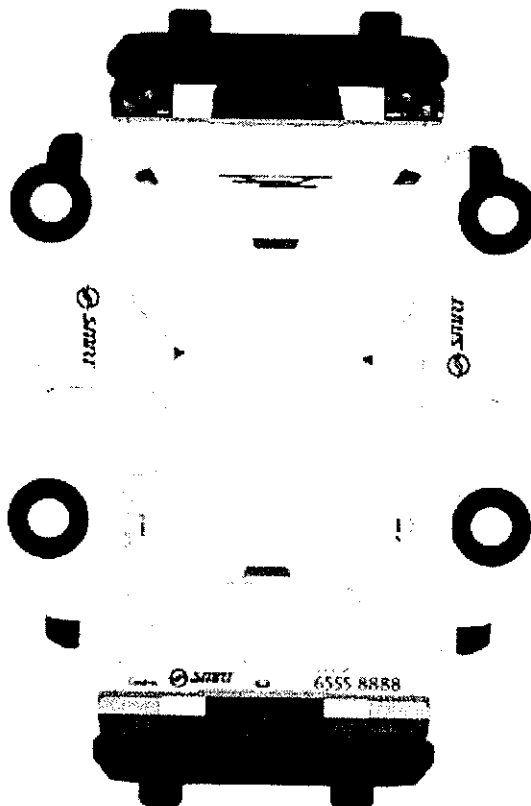
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SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHB5681X
Ref. No : TAX/01/18/2082
Reg. Date : 28/01/2013
Vehicle Type : TAXI
Make : CHEVROLET EPICA 2.0 VCDI
Model : EPICA-2.0
Name of Driver : TOH CHUN KIONG
Type of Accident : CHAIN COLLISION
Date / Time of Accident : 14/01/2018 10:40:00 AM
Accident Reported Date / Time : 15/01/2018 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 : 000024094083
Special Instruction to ARC, if any :
DROVE IN /SLF700P /Reserve for after repair / NTUC
Prepared Date : 15/01/2018 11:11:40 AM



Chassis No : KL1LA69RJBB138314

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	926.64	926.64
Other Charges	200.00	0.00
TOTAL	1,842.64	0.00
Lum Sum Total	1,850.00	0.00
No. of Repair Days	3.00	0.00
Prepared / Adjusted By		
Arc / Surveyor Sign Off Date	15/01/2018 02:08:27 PM	01/01/1900 12:00:00 AM

[Signature]

[Signature]
16/01/18 @ 1450

Prepared / Adjusted Date :

Remarks :

Prepared Date : 15/01/2018 02:08:27 PM

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

Quotation No :
Quotation Date :
Invoice Amount :

Invoice No :
Invoice Date :
Prepared Date :

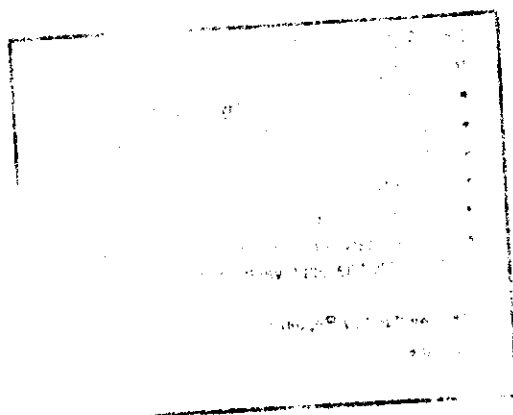
LKK Auto Consultants hence notify the Repairer of the following:

- 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:



Part 1.- Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	338.00	0.00 200 200
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
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	120.00	0.00 60
Total Other Costs	200.00	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
93745100	REAR	6504569	BUMPER RR	1	1,238.00	10.00	1,114.20	Replace	Replace <i>DE</i>	No
96633534	REAR		BRACKET RR BUMPER SIDE RH	1	49.00	10.00	44.10	Replace	Replace <i>nan</i>	No
TOTAL MATERIALS							1,158.30	1,158.30		
TOTAL MATERIALS(Discounted)							926.64	926.64		

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 Automotive Service Pte Ltd

60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

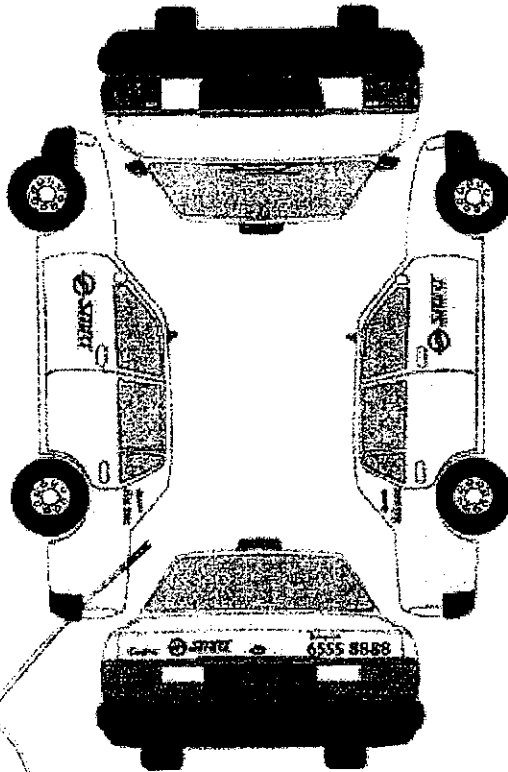
Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHB5681X
Ref. No : TAX/01/18/2082
Reg. Date : 28/01/2013
Vehicle Type : TAXI
Make : CHEVROLET EPICA 2.0 VCDI
Model : EPICA-2.0
Name of Driver : TOH CHUN KIONG
Type of Accident : CHAIN COLLISION
Date / Time of Accident : 14/04/2018 10:40:00 AM
Accident Reported Date / Time : 15/01/2018 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 : 000024094083
Special Instruction to ARC, if any :
DROVE IN /SLF700P - 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 : 15/01/2018 11:11:40 AM



Recording Camera

☐ ☒

Radio Antenna

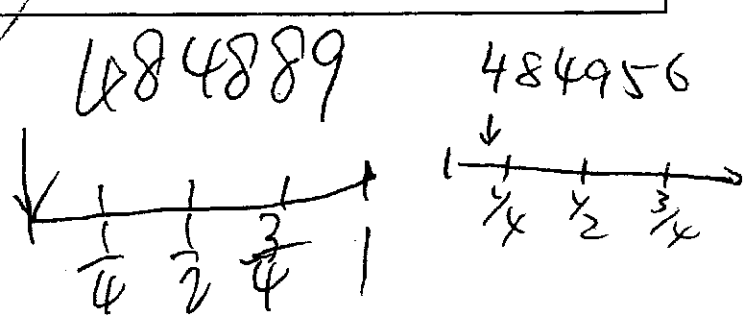
☐ ☒

1st witness

Date

2nd witness

Date



QC 17/1/18 18.06 Pass

LEE SHENG AUTO PTE LTD

Vehicle Return Date: 17/01/18

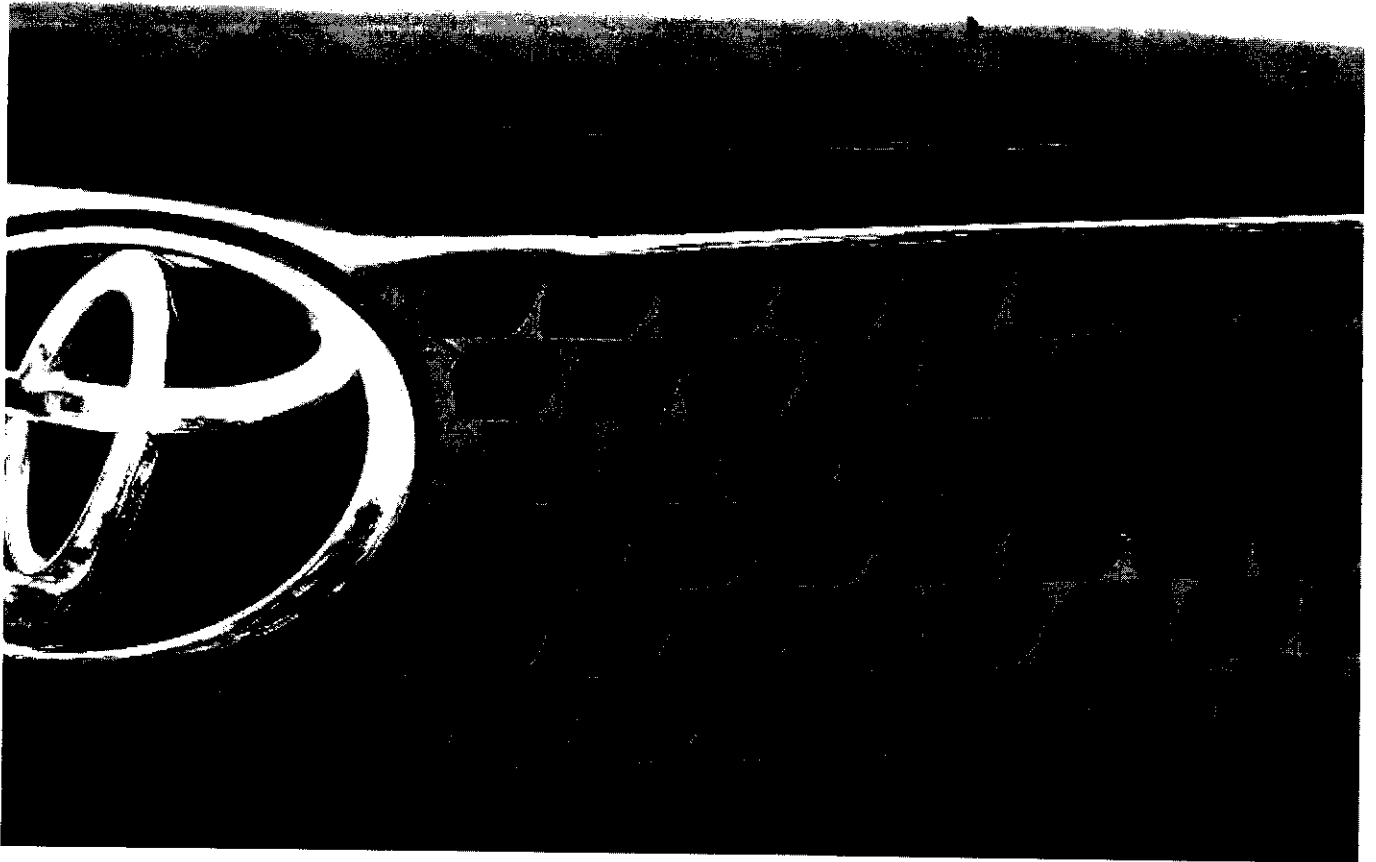
Vehicle Return Time: 17/01/18 15:46

SMRT staff sign: _____

X/01/18/2082

Page: 1

Accident Photo



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

Chassis No : KL1LA69RJBB138314

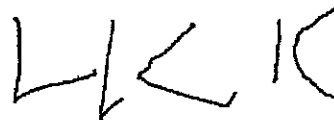
Mileage : 0

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	: 378.00	200.00
Total Material Charges	: 741.31	1,158.30
Other Charges	: 200.00	-258.30
TOTAL	: 1,657.31	1,300.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 3.00	2.00
Prepared / Adjusted By	:	RASUL (LKK)
Arc / Surveyor Sign Off Date	: 15/01/2018 02:08:27 AM	16/01/2018 03:53:10 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 15/01/2018 02:08:27 AM

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

Quotation No : QN-1801-0481

Invoice No :

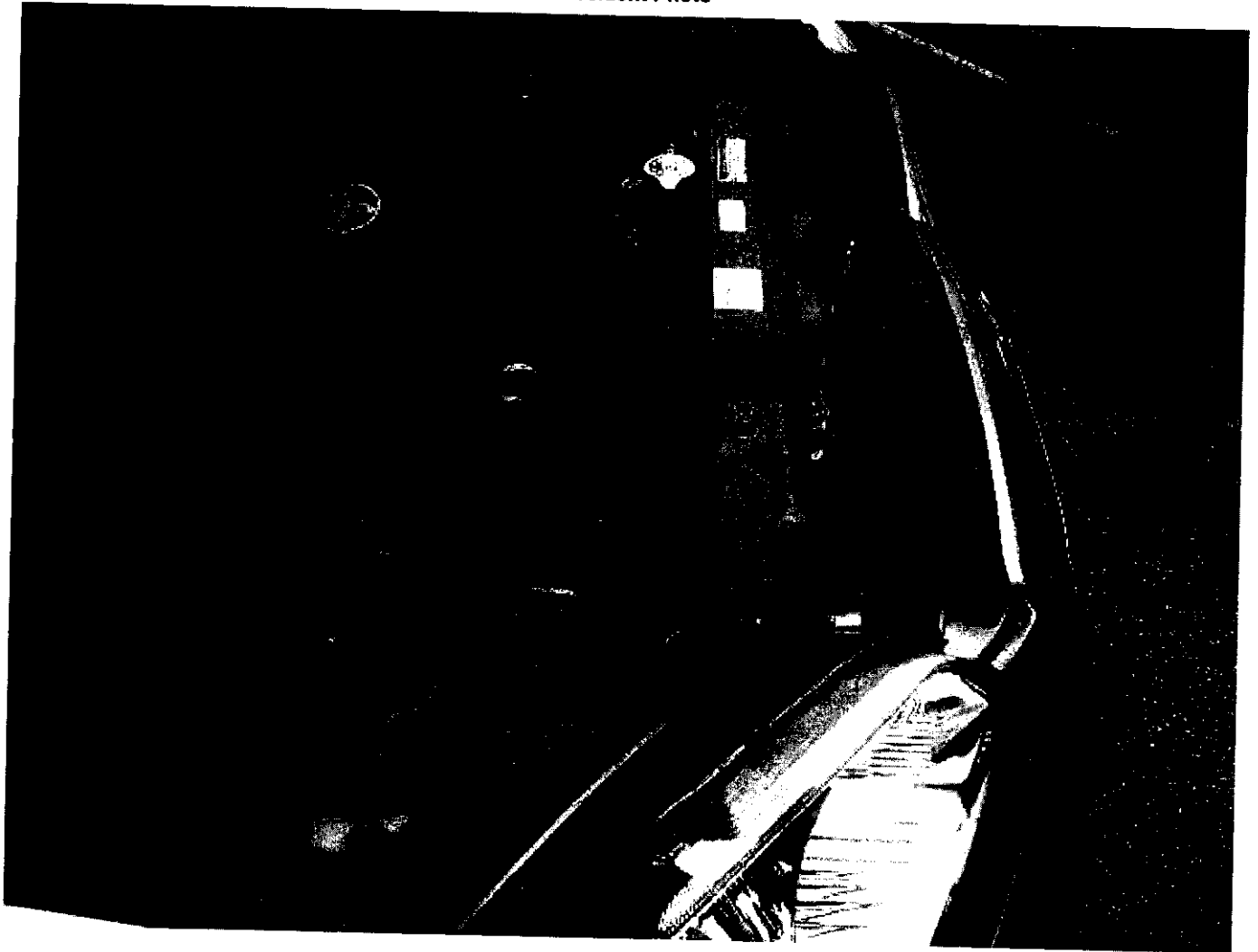
Quotation Date : 18/1

Invoice Date :

Invoice Amount :

Prepared Date :

Accident Photo



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
Total Spray Painting & Panel Beating	378.00	200.00

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	120.00	60.00
Lump Sum Adjustment by Surveyor	0.00	-318.30
Total Other Costs	200.00	-258.30

2003

Accident Photo



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	No DE
96633534	REAR		BRACKET RR BUMPER SIDE RH	1	49.00	10.00	44.10	Replace	Replace	No NEC
TOTAL MATERIALS							1,158.30	1,158.30		
TOTAL MATERIALS(Discounted)							741.31	1,158.30		

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									

$$\begin{array}{r}
 1158.30 \\
 + 200.00 \\
 + 260.00 \\
 \hline
 \end{array}$$

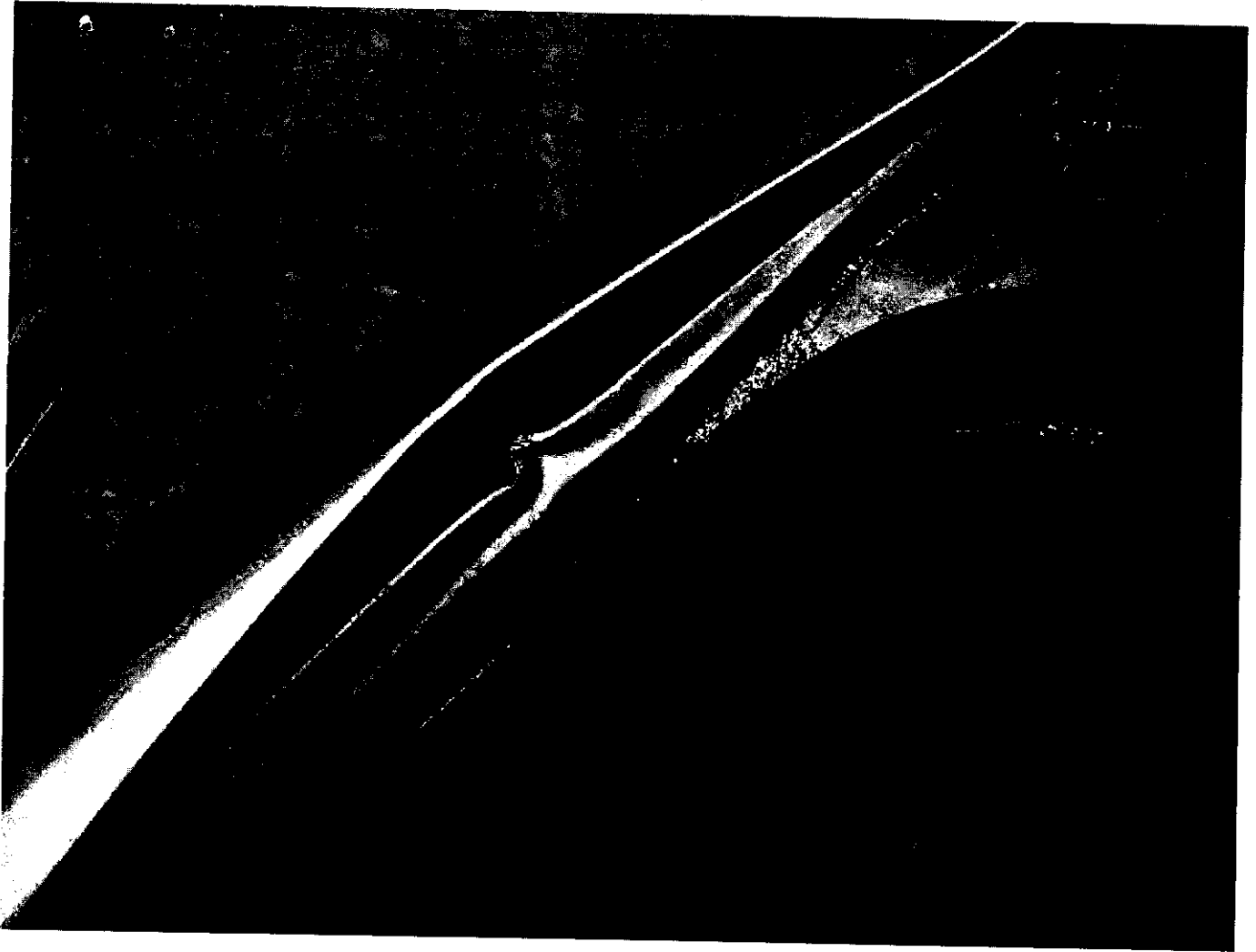
$$\begin{array}{r}
 1618.30 \\
 \hline
 \end{array}$$

$$\begin{array}{r}
 - 200 \\
 \hline
 \end{array}$$

$$\begin{array}{r}
 1294.64 \\
 \hline
 \end{array}$$

US \$1300/-

Accident Photo





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/INC18001056/R1tbe2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 09-02-2018



Code: INC4

1. Policy Particulars - THIRD PARTY CLAIM

Insured Veh.	SLF 700P	Veh. Inspected	SHB 5681X
Policy No.	5093453550	Coverage (\$)	0.00
Claim No.	MT/0977787-002	Excess (\$)	0.00
Assign From		Assign Date	16/01/2018

2. Vehicle Particulars & Condition

Make & Model	CHEVROLET EPICA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	KL1LA69RJBB138314	Colour	MAROON
Odometer	484888	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/65 R15	FALKEN	5 mm
L/H Front Tyre	205/65 R15	FALKEN	5 mm
R/H Rear Tyre	205/65 R15	FALKEN	5 mm
L/H Rear Tyre	205/65 R15	FALKEN	5 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	14/01/2018	Inspection Date	16/01/2018
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.
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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 5681X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BUMPER RR (DISC 10%)	DEFORMED	1,238.00	1,114.20
1	BRACKET RR BUMPER SIDE RH (DISC 10%)	NECESSARY	49.00	44.10
			1,287.00	1,158.30
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		538.00	260.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		378.00	200.00
			916.00	460.00
GRAND TOTAL			2,203.00	1,618.30

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			1,300.00
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Report Ref No. NS/INC18001056/R1tbe2

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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