

Tauhin

INC NS/INC18001565/T11b2

From Date

SMB 204P

2011 Dec.

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

To inspect Vehicle No

Name

MAN NL 320F

10518

at Workshop this

Colour

Multi

AC Insured Std IN/NA

at

St Reading

464880

TPatio Insured Std IN/NA

Insured

SKE 9858B

Eng No

Policy No

5078570630-01 200417-190418

Ch No

WMAA 22ZZXB 7001178

Claims No

mt/0984020-001

Gen Cond Good / Fair / Poor / Burnt

Sum Insured

Excess

Steering Inorder / Jammed / Leaked / Burnt or

Client's Record

Brake Inorder / Jammed / Leaked / Burnt or

Make of Veh

Mod: M / S/Rim / STD A/Rim or

Policy Condition

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

NS	OS

Ball or Market Value

Front

Rear

DAC Accident Report

Consistent? : Yes or No

R.Bal

8

mm

R.Bal

8/8

GIA / PP Seen

Consistent? : Yes or No

L.Bal

8

mm

L.Bal

8/8

Est. Repairs

days

Resp: Yes or No

D.O.A

D.O.A

24/1/18 @ 1pm.

Lim Sum

R

3 val: Yes or No

Survey held at

SMRT / Kranji

CA / REV / REP. / 24 HRS

Des. of Damages: Frnt / Rear / O/S / N.S / U/C / Roof/Top or

Rear o/s.

Date

Person Contacted

Vehicle IN / OUT

Mr Sim

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

Date Time Action Instruction

8499 0282

w/s will pass GUA later

SMB 204P - 703 / MT15015000 / K114312

SKE 9858B - X

CLM: 110115

28/2 4543200, 2 days, e-mail to Catherine SMRT.

Red: 3633, 56%

REC'D 2010

Date Time File Passed



Preli. Report

Days Of Repair

2

typist



Final Report

Resurvey No. of Tolo

1

Date Time File Returned

Survey Fee

Transport

Add Fee:



Site Fee

\$



Part

\$



Part

\$



Part

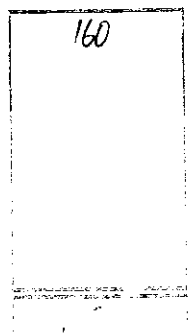
\$

Report Format

TP

Stamp Size

3200



TP Claims against NTUC Income: Follow-Through Survey

Date : 28/02/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/0983576-002	COMFORT TRANSPORTATION PTE LTD	SHD 4024P	SKN 8240S	15/2/2018	23:10	\$ 3,560.32
2	MT/0984020-001	SMRT BUSES LTD	SMB 204P	SKE 9858B	29/11/2017	19:45	\$ 5,738.98
3	Not OI	COMFORT TRANSPORTATION PTE LTD	SHA 2884C	SJA 1679L	14/2/2017	9:25	\$ 2,700.23
4	MT/0983120-002	CITY CAB PTE LTD	SHC 924Z	XD 7245J	15/2/2018	9:20	\$ 4,406.92
5	MT/0981887-002	COMFORT TRANSPORTATION PTE LTD	SHD 4934M	SKU 4830D	10/2/2018	15:05	\$ 1,642.00
6	MT/0983380-002	COMFORT TRANSPORTATION PTE LTD	SHB 4346X	SKR 659A	23/2/2018	11:00	\$ 2,317.40
7	MT/0983670-002	CITY CAB PTE LTD	SHC 890L	FV 8454J	22/2/2018	11:00	\$ 8,805.04
8	MT/0982907-002	CITY CAB PTE LTD	SHB 3991P	GBF7872Z	20/2/2018	12:55	\$ 6,426.40
9	MT/0981697-002	COMFORT TRANSPORTATION PTE LTD	SHA 4890X	FBA 7842L	5/2/2018	13:50	\$ 5,888.52
10	MT/0982522-002	CITY CAB PTE LTD	SHD 8540P	SJP 794P	14/2/2018	16:40	\$ 3,913.44
11	MT/0983112-002	COMFORT TRANSPORTATION PTE LTD	SHD 4270U	SKX 1997K	20/2/2018	17:00	\$ 2,256.96
12	MT/0983124-002	COMFORT TRANSPORTATION PTE LTD	SH 7441Y	SGV 7511Y	21/2/2018	0:15	\$ 1,896.56
13	MT/0984051-001	COMFORT TRANSPORTATION PTE LTD	SHC 8670C	FBH 3132S	21/2/2018	6:45	\$ 5,361.42
14	MT/0982643-002	COMFORT TRANSPORTATION PTE LTD	SHD 3491E	SJE 952H	16/2/2018	14:55	\$ 2,711.58
15	MT/0982261-002	COMFORT TRANSPORTATION PTE LTD	SHD 3001L	GBF 5312L	13/2/2018	14:25	\$ 3,200.56
16	MT/0982776-002	COMFORT TRANSPORTATION PTE LTD	SHA 6401L	SHD 1426H	15/2/2018	17:30	\$ 7,021.12
17	MT/0984057-001	CITYCAB PTE LTD	SHB 3600T	SFA 4774Y	15/2/2017	7:55	\$ 4,027.60




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/INC18001565/T1rb			
73 BRAS BASAH ROAD			
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Date: 25-01-2018	
Code: INC4			
1. Policy Particulars - THIRD PARTY CLAIM			
Insured Veh.	SKE 9858B	Veh. Inspected	SMB 204P
Policy No.	5078570630-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	24/01/2018
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	29/11/2017	Inspection Date	24/01/2018
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD KRANJI DEPOT		
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="29/11/2017 17:43"/>						
Vehicle No.(For Motor)	<input type="text" value="SKE9858B"/>								
<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"/>	5078570630-01	QUALITY AMENITIES SUPPLY PTE. LTD.	200401411K	GPC	driva CLASSIC	SKE9858B	SKE9858B	20/04/2017	19/04/2018

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	01/12/2017 08:37
Date Of Accident	29/11/2017 19:45
Exact Location Of Accident	JELEBU ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB204P
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

Vehicle Particulars

Manufacturer	MAN
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-II027592MFBP
Cover Note Number	

Driver

Name of Driver	LOGANATHAN DORAIAPPA
Passport No/FIN	G2688544U
Date Of Birth	23/02/1988
Occupation	OUTDOOR
Date Of Driving Pass	14/09/2015
Driving Experience	2 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email 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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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) 4

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

ON 29/11/17 AT ABOUT 19:45HRS, I WAS DRIVING ALONG JELEBU RD JUST OUTSIDE OF BUKIT PANJANG PLAZA. I STOPPED AS THE TRAFFIC LIGHT WAS RED. AS I WAITED, A BLACK COLOUR VEHICLE NO. SKE 9858B (TOYOTA VELLFIRE) HIT THE RIGHT REAR OF MY STATIONARY BUS AND DROVE OFF WITHOUT STOPPING AS THE TRAFFIC LIGHT HAS TURNED GREEN. I WAS NOT ABLE TO GET THE PARTICULARS OF THE DRIVER. NOBODY IS INJURED. NO POLICE AT THE SCENE. THERE IS CCTV ON BOARD SMRT BUS.

Attachment(s)

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

Was there any video captured by Car Camera? YES

Remarks/ Reasons: FILE SIZE TOO BIG

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKE9858B

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 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.
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.



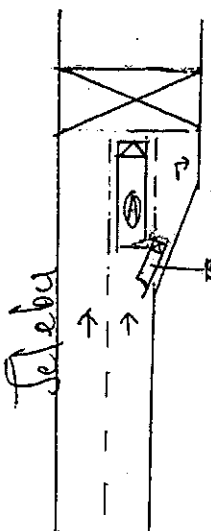
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan



① SMR 204P
② SKE 9858B

Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

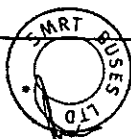
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : M8R117158384 Vehicle Registration No: 8MB 204P
Name (as shown in NRIC) : Loganathan Doraiappa NRIC/FIN/Passport No : G2688544U
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 29/11/17 Time of Accident : 19.45hrs
Place of Accident : Telebu Rd
Insurance Company: First Capital Insurance Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Attached the police report.



Policyholder / Driver's Signature

Date: 1/12/17



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date: 1/12/17



**SINGAPORE
POLICE FORCE**



T/20171130/2074

Police Station Of Origin:
Bukit Panjang South NPP
124 Pending Road #01-00 SINGAPORE
670124
Tel No: 1800-7609999

1 of 3

Report No. T/20171130/2074

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/11/2017 14:10	Vide Report No.:	Station Diary No.: 27
--	------------------	--------------------------

Informant's Particulars

Name of Informant: LOGANATHAN DORAIAPPA			Address: C/O A-14-9 Larkin Idaman Larkin Idaman Johor Bahru SINGAPORE		
ID Type / ID No.: NRIC NO / G2688544U			Contact No.: Home/Office: Mobile: 85026042		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 29	Date of Birth: 23/02/1988	Type of Informant: Driver		
Race: Indian			Language:	Institution / School Name:	
Occupation: BUS DRIVER			Driving Licence Information: Class: Date of Expiry:		

General Information on the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 29/11/2017 19:45	Type of Location: Straight Road
Location: Along Road 1 JELEBU ROAD just outside bukit panjang plaza				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passengers
SKE9858B	Car					0
SMB204P	SMRT BUS				Slightly Damaged	3

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20171130/2074

Police Station Of Origin:
Bukit Panjang South NPP
124 Pending Road #01-00 SINGAPORE
670124
Tel No: 1800-7609999

2 of 3

Report No. T/20171130/2074

CONTINUATION OF REPORT

Driver:			
Name	LOGANATHAN DORAIAPPA		ID No. G2688544U
Related Vehicle	SMB204P (SMRT BUS)		Contact No. 85026042
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

V1) SMB204P

V2) SKE9858B

On the 29th November 1945hrs, I was driving V1 along Jelebu Road just outside of Bukit Panjang Plaza. I then stop V1 as it was red on the traffic light. As I waited, V2 which was just behind me, overtook me from my right. During the process of over taking me, V2 had hit the right rear of V1 and drove off. I wasn't able to get the drivers particulars. No one is injured. No police at scene. There is CCTV on board the SMRT BUS.



**SINGAPORE
POLICE FORCE**



T/20171130/2074

Police Station Of Origin:
Bukit Panjang South NPP
124 Pending Road #01-00 SINGAPORE
670124
Tel No: 1800-7609999

3 of 3

Report No. T/20171130/2074

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

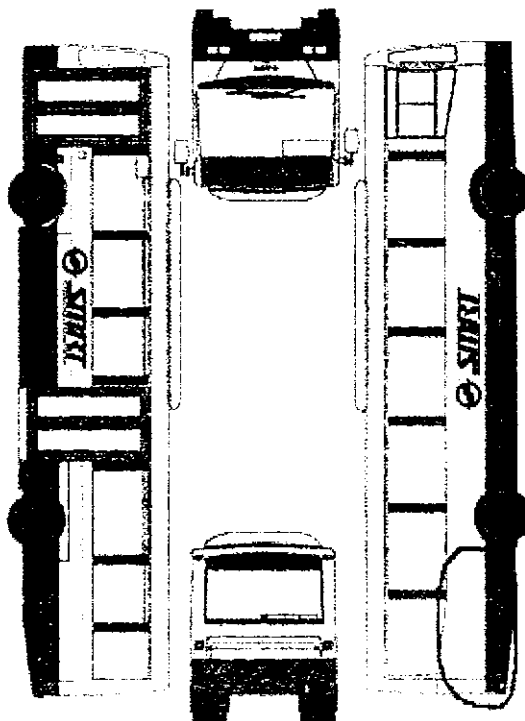
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J/ Sgt 2 AUSTIN TAN RI QUAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/11/2017 14:10
Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE Contact No: 65476079	Classification Of Case:
Authentication Stamp NP168 Signature: Singapore Police Force	

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SMB204P
 Ref. No : BUS/11/17/5045
 Reg. Date : 01/01/1900
 Vehicle Type : BUS -12M
 Make : MAN
 Model : MAN
 Name of Driver : Loganathan Doraiappa
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 29/11/2017 07:45:00 PM
 Accident Reported Date / Time : 01/12/2017 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 :



RIGHT REAR BODY PANEL & BUMPER SCRATCHED. TP - SKE9858B (INSURED WITH NTUC).

Prepared Date : 01/12/2017 10:26:24 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:

Tanjiluh 97495749.
 24/1/18 @ 1pm.
 2 days - wp -
 lumpsum
 Resurvey after repair
 sur @ lkkauto.com

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	1,060.00	0.00
Total Labour 530	1,060.00	0.00 530

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	600.00	0.00
Total Spray Painting & Panel Beating	600.00	0.00 560.

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Other Costs		

1970.70

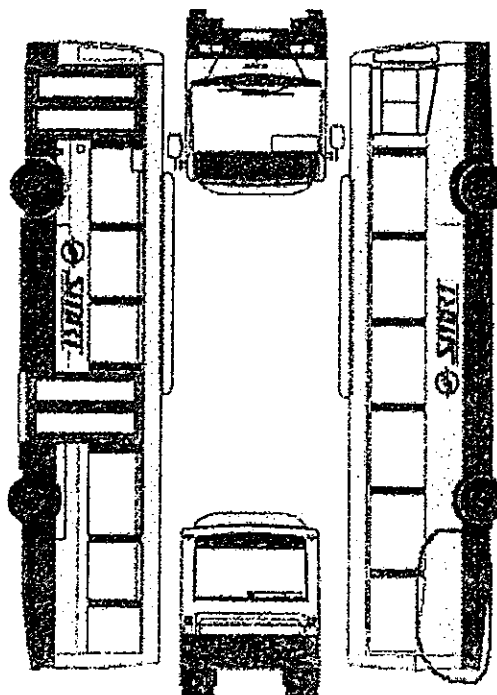
SMRT Accident Vehicle Repair Estimates

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

Reg. No : SMB204P
Ref. No : BUS/11/17/5045
Reg. Date : 08/12/2011
Vehicle Type : BUS -12M
Make : MAN
Model : MAN
Name of Driver : Loganathan Doraiappa
Type of Accident : SIDE SWIPE
Date / Time of Accident : 29/11/2017 07:45:00 PM
Accident Reported Date / Time : 01/12/2017 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 : 000024094274
Special Instruction to ARC,if any :

RIGHT REAR BODY PANEL & BUMPER SCRATCHED. TP - SKE9858B (INSURED WITH NTUC).

Prepared Date : 01/12/2017 10:26:24 AM

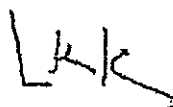


Section B - To be Completed by Service Advisor, Accident Repair Centre

Chassis No : 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 :	1,060.00	530.00
Total Spray Painting Charges :	600.00	560.00
Total Material Charges :	2,345.83	2,345.83
Other Charges :	0.00	-250.00
TOTAL :	4,005.83	3,185.83
Lum Sum Total :	4,000.00	3,200.00
No. of Repair Days :	3.00	2.00
Prepared / Adjusted By :	Sim Kim Bock	Taufikh LKK
Arc / Surveyor Sign Off Date :	24/01/2018 09:54:36 AM	30/01/2018 11:11:17 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 24/01/2018 09:54:30 AM

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

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

Section D - Details of Repair Estimates**Part 1 - Labour Works**

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	1,060.00	530.00
Total Labour	1,060.00	530.00

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	600.00	560.00
Total Spray Painting & Panel Beating	600.00	560.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Lump Sum Adjustment by Surveyor	0.00	-250.00
Total Other Costs	0.00	-250.00

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
88-25320-6008		6010299	SIGNAL LAMP LED	0	1,274.10	10.00	0.00	Replace	Not given	No
88-25225-6039		6010298	STOP LAMP LED	2	1,141.70	10.00	2,055.06	Replace	Replace	No
F01001-CW273		6010062	REAR TAIL LAMP COVER RH	1	974.70	10.00	877.23	Replace	Replace	No
A01001-CW564		6009992	RH SIDE PANEL R11	1	1,782.50	100.00	0.00	Repair	Repair	No
TOTAL MATERIALS							2,932.29	2,932.29		
TOTAL MATERIALS(Discounted)							2,345.83	2,345.83		

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									

2932.29
530
560

4022.29
4/s\$ 3200 * 2 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



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18001565/T1rbe2			
73 BRAS BASAH ROAD			
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Date: 05-03-2018	
		Code: INC4	
1. Policy Particulars : THIRD PARTY CLAIM			
Insured Veh.	SKE 9858B	Veh. Inspected	SMB 204P
Policy No.	5078570630-01	Coverage (\$)	0.00
Claim No.	MT/0984020-001	Excess (\$)	0.00
Assign From		Assign Date	24/01/2018
2. Vehicle Particulars & Condition			
Make & Model	MAN NL320F	c.c	10518
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	WMAA22ZZXB7001178	Colour	MULTI COLOUR
Odometer	464880	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	275/70 R22.5	FIRENZA	8 mm
L/H Front Tyre	275/70 R22.5	FIRENZA	8 mm
R/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	8/8 mm
L/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	8/8 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	29/11/2017	Inspection Date	24/01/2018
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD KRANJI DEPOT		
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. SMB 204P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	STOP LAMP LED (DISC 10%)	CRACKED	2,283.40	2,055.06
1	REAR TAIL LAMP COVER RH (DISC 10%)	CRACKED	974.70	877.23
1	SIGNAL LAMP LED	NOT NECESSARY	1,274.10	-
1	RH SIDE PANEL R11	TO REPAIR	1,782.50	-
			6,314.70	2,932.29
LABOUR				
	TO REPAIR RH FRONT PORTION.		1,060.00	530.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		600.00	560.00
			1,660.00	1,090.00
GRAND TOTAL			7,974.70	4,022.29
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				3,200.00

Report Ref No. NS/INC18001565/T1rbe2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

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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