

REF:

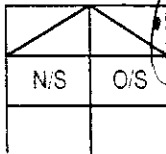
N9/TNC18002315 / SHBZ

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: SHB 4394T
 Policy No. 50544546552 - 05 191217 - 181218
 Claims No. MT/09 80343-002
 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 1220U Fr Reg: 20/12/2013
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi Prime Mover /
 Truck / Trailer or
 Make: TOYOTA Prins cc 1798
 Colour: Maroon A.O. Insured / Std / NI / NA
 Sp. Reading: 366715 T. Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JTDKN364605718015
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modi: ND / S/Rim / STD A/Rim or
 Tyre Size: F: 195/65R15
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Falken
 Front _____ Rear _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 30/01/18 D.O.I. 1/2/16
 Survey held at SARS
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Frt O/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

SHB 1220U - 3/7/11/10 4309/TN
SHB 4394T - CF/ALB07003700/30

DP: 3/12/10
DP: 3/12/10

01/18/2183

Nme

lump sum \$1800/- (Red: 4433.9 : 71%)

SHB 4394T

RECEIVED 26 FEB 2018

Date/Time, File Pass to?



Preli. Report

Days Of Repair: 4

1912 Typist



Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

Survey Fee:

Transponder

3 - PS 1.5

Photos

Others

Add Fee:



Site Insp. \$



Interview \$



Tech. Insp. \$



Weekend \$

Report Format :

TP

Lump Sum / I.B.I. \$

1800

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/INC18002315/Stb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 06-02-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SGB 4394T	Veh. Inspected	SHB 1220U
Policy No.	5054546552-05	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	01/02/2018

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	30/01/2018	Inspection Date	01/02/2018
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

General Claim

Hello, NAC_PAYA_UB1_800601

[Change Language](#)[Change Password](#)[Log Out](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="30/01/2018 11:42"/>						
Vehicle No.(For Motor)	<input type="text" value="SGB4394T"/>	<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="checkbox"/>	5054546552-05	LOH KUM MUN	S0128765F	GPC	Third Party, Fire & Theft	SGB4394T	SGB4394T	19/12/2017	18/12/2018

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/0980348-002	SMRT TAXIS	SHB 1220U	SGB 4394T	30/1/2018
2	MT/0971146-002	SMRT BUS	SG 5580Y	SJS 5536U	25/11/2017
3	MT/0982534-001	COMFORT TRANSPORTATION PTE LTD	SHC 3146H	SLL 8920L	10/2/2018
4	MT/0982203-002	CITYCAB	SHA 9342D	SDD 8298L	12/2/2018
5	MT/0978056-002	SMRT TAXIS	SHB 1892E	SFY 6726Y	12/1/2018
6	MT/0982536-001	COMFORT TRANSPORTATION PTE LTD	SHC 2230D	PC 7662M	13/2/2018
7	MT/0980412-002	SMRT TAXIS	SHF 248B	SKD 6621S	31/1/2018
8	MT/0980980-002	SMRT TAXIS	SHD 6289D	SJH 7534U	3/2/2018
9	MT/0980928-002	SMRT TAXIS	SHB 1319U	FBC 5857Y	4/2/2018
10	MT/0982537-001	SMRT TAXIS	SHB 628J	FBH 2102K	4/2/2018
11	MT/0981878-002	COMFORT TRANSPORTATION PTE LTD	SHC 7245D	SJF 9837T	11/2/2018
12	MT/0982037-002	COMFORT TRANSPORTATION PTE LTD	SHC 8089G	GBG 9309R	10/2/2018

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 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	31/01/2018 13:43
Date Of Accident	30/01/2018 17:30
Exact Location Of Accident	ALEXANDRA ROAD PSA BUILDING TAXI STAND
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB1220U
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	MS 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 YEOW HUI ALGENE
NRIC No	S7523797I
Date Of Birth	27/07/1975
Occupation	OUTDOOR
Date Of Driving Pass	08/04/2009
Driving Experience	8 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	51 COMMONWEALTH DRIVE 03-526
Postcode	141051
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	COLLISION - OPENING DOOR OF VEHICLE
Weather Conditions	RAINING
Road Surface	WET

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)	1

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

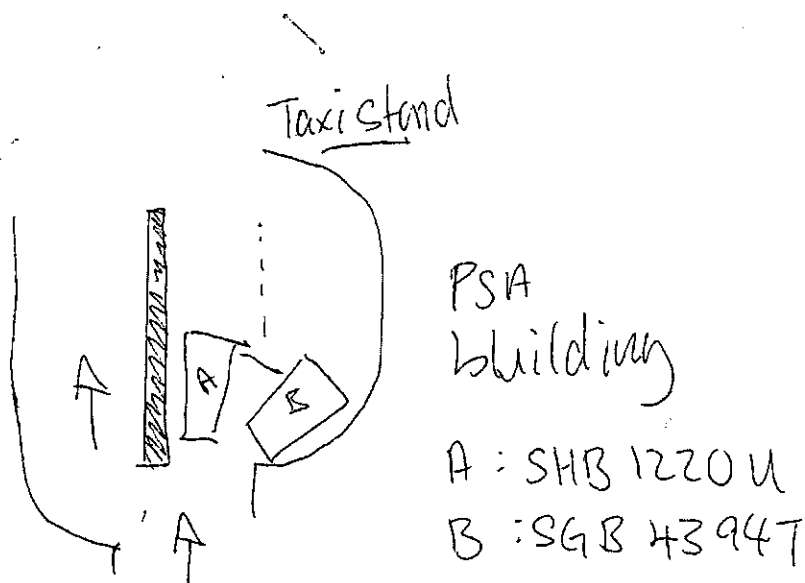
REFER TO STATEMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGB4394T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEONG RONG SHANG
NRIC/Passport Number	S8800191E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

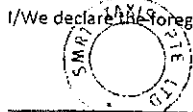


[Signature]
31 Jan 18

I entered PSA building behind vehicle SGB4394T.
The vehicle SGB4394T moved to the right and stopped.
I moved carefully slowly to the taxi stand.
Immediately upon stopping, the passenger of the vehicle SGB4394T suddenly swing opened the front left door without checking his blind spot.
I step on the brake but the taxi SHB1220U couldn't stop in time due to the suddenness of the situation and hit onto the open door.

DECLARATION

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



Policyholder's Signature
Date & Time:

[Signature]
Driver's Signature
(If driver is not the policyholder)
Date & Time: 31 Jan 18

[Signature] 31/1/2018
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:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 31 Jan 18

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

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 5369K

Vehicle Details

Vehicle No.: SHB1220U

Vehicle to be Exported: No

Intended De-registration Date: 06 Feb 2018

Vehicle Make: TOYOTA

Vehicle Model: PRIUS TAXI (SMRT)

Primary Colour: Maroon

Manufacturing Year: 2013

Engine No.: 2ZR1322996

Chassis No.: JTDKN36U605718015

Maximum Power Output: 100.0 kW (134 bhp)

Open Market Value: \$33,120.00

Original Registration Date: 20 Dec 2013

First Registration Date: 20 Dec 2013

Transfer Count: 0

Actual ARF Paid: \$8,368.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 19 Dec 2021

PARF Rebate Amount: \$6,276.00

Intended COE Rebate Details

COE Expiry Date: 19 Dec 2021

COE Category: A - Car (1600cc & below)

COE Period(Years): 8

PQP Paid: \$62,740.00

COE Rebate Amount: \$30,336.00

Total Rebate Amount: \$36,612.00

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.

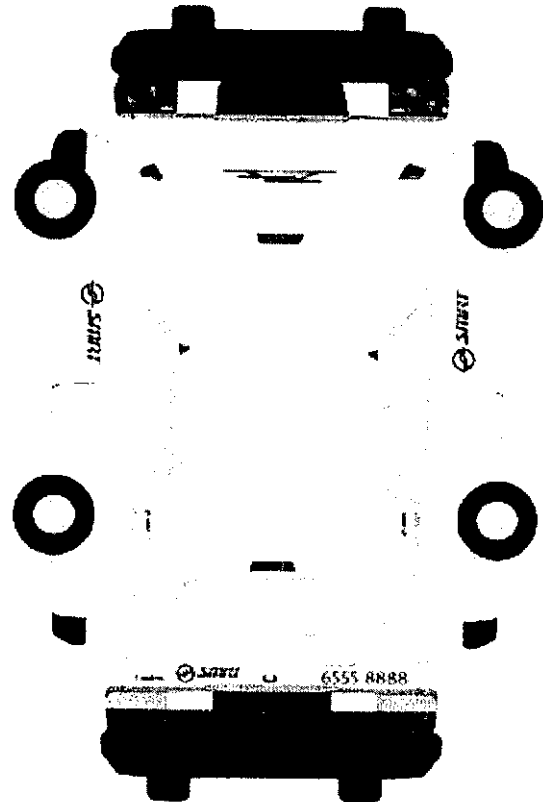
The information contained herein is correct as at 06 Feb 2018

OK

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHB1220U
 Ref. No : TAX/01/18/2183
 Reg. Date : 20/12/2013
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : TOH YEOW HUI ALGENE
 Type of Accident : OTHERS
 Date / Time of Accident : 30/01/2018 05:30:00 PM
 Accident Reported Date / Time : 31/01/2018 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by :
 Vehicle is Towed Back? : Yes
 Towed Back Date/Time : 30/01/2018
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024094393
 Special Instruction to ARC, if any :
 TOWED \$60 / SGB4394T
 Prepared Date : 31/01/2018 02:13:27 PM



Sebastian
 1/2/2018
 - Lump Sum Repair
 - Question Mark Item
 Photo
 Photo After Repair

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 : JTDKN36U60-5718015

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 845.00	0.00
Total Spray Painting Charges	: 1,116.00	0.00
Total Material Charges	: 3,567.10	3,567.10
Other Charges	: 664.00	0.00
TOTAL	: 6,192.10	0.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 5.00	0.00
Prepared / Adjusted By	:	Cr days
Arc / Surveyor Sing Off Date	: 01/02/2018 08:40:43 AM	01/01/1900 12:00:00 AM

6233 19



Prepared / Adjusted Date :

Remarks :

Prepared Date : 01/02/2018 08:40:43 AM

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

Quotation No :

Invoice No :

Quotation Date :

Invoice Date :

Invoice Amount :

Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	845.00	0.00 600
Total Labour	845.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO RESPRAY FRONT FENDER RH	378.00	0.00 200
TO RESPRAY APRON PANEL RH	180.00	0.00 ?
TO RESPRAY RIM	180.00	0.00 50
TO REPSRAY FRONT BUMPER	378.00	0.00 200
Total Spray Painting & Panel Beating	1,116.00	0.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TOWING CHARGE	84.00	0.00 X
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00 30
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0.00 30
TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	0.00 30
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	0.00 60
TO REPLACE SUNDRY PARTS	100.00	0.00 X
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	664.00	0.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommended	Surveyor Approved	Photos Attached
53801-47050		6505557	FENDER FRT/RH	1	723.40	25.00	542.55	Replace	Replace	No <i>✓ DT</i>
75374-47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No <i>✓ REC</i>
53701-47050			FENDER APRON SUB FRT/RH	1	637.80	25.00	478.35	Replace	Replace	No <i>?</i>
53875-47030		6505553	FENDER LINER FRT/RH	1	171.70	25.00	128.77	Replace	Replace	No <i>✓ before</i>
53851-47040			FENDER LINER PAD, FR WHEEL. RH	1	49.30	25.00	36.97	Replace	Replace	No <i>?</i>
42611--47140 (Frt)		6505658	WHEEL DISC. FRONT	1	1,484.20	25.00	1,113.15	Replace	Replace	No <i>R</i>
52119-47930		6505517	BUMPER FRT	1	482.00	25.00	361.50	Replace	Replace	No <i>✓ TN</i>
52115-47040		6505515	BUMPER SUPPORT F/RH	1	76.40	25.00	57.30	Replace	Replace	No <i>?</i>
81130-47500		6505437	HEAD LAMP RH	1	945.20	10.00	850.68	Replace	Replace	No <i>?</i>
TOTAL MATERIALS							3,608.21	3,608.19		
TOTAL MATERIALS(Discounted)							3,567.10	3,567.10		

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									



Tow

Chin

6-2-18 / 10:15

6-2-18 / 14:15

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

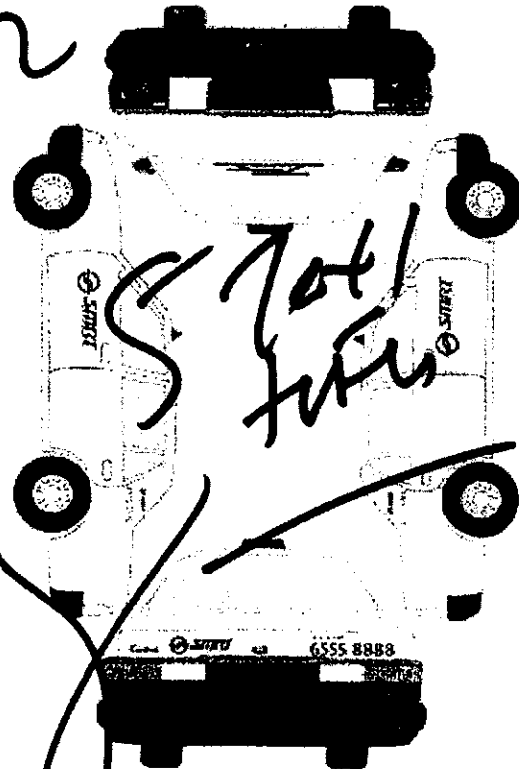
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Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

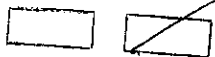
Reg. No : SHB1220U
 Ref. No : TAX/01/18/2183
 Reg. Date : 20/12/2013
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : TOH YEOW HUI ALGENE
 Type of Accident : OTHERS
 Date / Time of Accident : 30/01/2018 05:30:00 PM
 Accident Reported Date / Time : 31/01/2018 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : Sebastian
 Vehicle is Towed Back? : Yes
 Towed Back Date/Time : 30/01/2018
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024094393
 Special Instruction to ARC, if any :

TOWED \$60 / SGB4394T NTUC 45
 BEFORE PAINT PHOTO AND AFTER PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL
 SURVEYOR SEBASTIAN (LKK) & Email : sebastianyeang @lkkauto.com HP: 90036121
 LUMPSUM REPAIR

Prepared Date : 31/01/2018 02:13:27 PM



Recording Camera



Radio Antenna



1st witness

N

Date

1-2-18

2nd witness

Date

E 012 F
 KM 366915

Vehicle to Wega Date In: 01/02 Towing: Janky

Time In: 1600 Driver: J

Wega Job No: 02/0088

Vehicle sent to SMRT Date In: 05.02.18 Towing:

Time In: 14:16 Driver: J

Received by (SMRT):

QCG/2/18 8.48 PASS

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

Chassis No : JTDKN36U60-5718015

Mileage

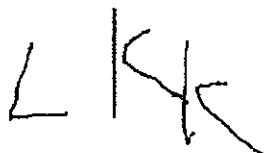
: 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 845.00	600.00
Total Spray Painting Charges	: 1,116.00	450.00
Total Material Charges	: 1,596.82	1,071.74
Other Charges	: 580.00	-321.74
TOTAL	: 4,137.82	1,800.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 5.00	4.00
Prepared / Adjusted By	:	SEBASTIAN (LKK)
Arc / Surveyor Sing Off Date	: 01/02/2018 08:40:43 AM	01/02/2018 02:15:32 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 01/02/2018 08:40:43 AM

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

Quotation No : QN-1802-0261

Invoice No :

Quotation Date : 8/2

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	845.00	600.00 /
Total Labour	845.00	600.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO RESPRAY FRONT FENDER RH	378.00	200.00 /
TO RESPRAY APRON PANEL RH	180.00	0.00
TO RESPRAY RIM	180.00	50.00 /
TO REPSRAY FRONT BUMPER	378.00	200.00 /
Total Spray Painting & Panel Beating	1,116.00	450.00

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	30.00 /
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	30.00 /
TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	30.00 /
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60.00 /
TO REPLACE SUNDRY PARTS	100.00	0.00
TO WASH AND VACUUM	60.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-471.74
Total Other Costs	580.00	-321.74

7162.90

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommended	Surveyor Approved	Photos Attached
53801-47050		6505557	FENDER FRT/RH	1	723.40	25.00	542.55	Replace	Replace	No <i>/</i>
75374-47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No <i>/</i>
53701-47050			FENDER APRON SUB FRT/RH	1	637.80	25.00	478.35	Replace	Check	No <i>X</i>
53875-47030		6505553	FENDER LINER FRT/RH	1	171.70	25.00	128.77	Replace	Replace	No <i>/</i>
53851-47040			FENDER LINER PAD, FR WHEEL. RH	1	49.30	25.00	36.98	Replace	Check	No <i>X</i>
42611--47140 (Frt)		6505658	WHEEL DISC. FRONT	1	1,484.20	100.00	0.00	Replace	Repair	No <i>R</i>
52119-47930		6505517	BUMPER FRT	1	482.00	25.00	361.50	Replace	Replace	No <i>/</i>
52115-47040		6505515	BUMPER SUPPORT F/RH	1	76.40	25.00	57.30	Replace	Check	No <i>X</i>
81130-47500		6505437	HEAD LAMP RH	1	945.20	10.00	850.68	Replace	Check	No <i>X</i>
TOTAL MATERIALS							2,495.06	1,071.74		
TOTAL MATERIALS(Discounted)							1,596.82	1,071.74		

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									

$$\begin{array}{r}
 1071.74 \\
 + 600.00 \\
 + 600.00 \\
 \hline
 2271.74 \\
 - 20\% \\
 \hline
 1817.39 \\
 \hline
 45 \$1800/-
 \end{array}$$

Substien
14/2/18

**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/INC18002315/Stbe2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 22-02-2018	
		Code: INC4	
1. Policy Particulars - THIRD PARTY CLAIM			
Insured Veh.	SGB 4394T	Veh. Inspected	SHB 1220U
Policy No.	5054546552-05	Coverage (\$)	0.00
Claim No.	MT/0980348-002	Excess (\$)	0.00
Assign From		Assign Date	01/02/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	JTDKN36U605718015	Colour	MAROON
Odometer	366915	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	6 mm
L/H Front Tyre	195/65 R15	FALKEN	6 mm
R/H Rear Tyre	195/65 R15	FALKEN	6 mm
L/H Rear Tyre	195/65 R15	FALKEN	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	30/01/2018	Inspection Date	01/02/2018
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:		4 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 1220U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FENDER FRT / RH (DISC 25%)	DENTED	723.40	542.55
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	51.90	38.92
1	FENDER LINER FRT / RH (DISC 25%)	DEFORMED	171.70	128.77
1	BUMPER FRT (DISC 25%)	TORN	482.00	361.50
1	FENDER APRON SUB FRT / RH	NOT NECESSARY	637.80	-
1	FENDER LINER PAD, FR WHEEL RH	NOT NECESSARY	49.30	-
1	BUMPER SUPPORT F/RH	NOT NECESSARY	76.40	-
1	HEAD LAMP RH	NOT NECESSARY	945.20	-
1	WHEEL DISC. FRONT	TO REPAIR	1,484.20	-
			4,621.90	1,071.74
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		1,165.00	720.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		1,216.00	480.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			2,541.00	1,200.00
GRAND TOTAL			7,162.90	2,271.74
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,800.00

Report Ref No. NS/INC18002315/Stbe2

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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