	SIGNMENT
From: Date:	Veh No: SHB 6283 Yr Regn: 28/10/2016
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
	Truck / Trailer or
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	1200
To Inspect Vehicle No:	
at Workshop m/s	- 1
Insured: FBH 2102K	Sp.Reading / 6 / 6 3 % T/Radio: Insured / Std / NI / Eng/No:
Policy No. 5093790754 280817 - 270818	
Claims No. MT 0982537-001	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:	Modi: Nil / S/Rim / STD A/Rim or
, ,	Tyre Size: F: /95/65/815
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
	TOYO / YOKO or
Bal, or Market Value:  IDAC Accident Rport: Consistent? : Yes or No	- Front Rear R/Bal. 6 mm R/Bal. 6
IDAC Accident Rport: Consistent? : Yes or No  GIA / PR Seen: Consistent? : Yes or No	Lind /
Est Repairs: days Res.: Yes or No	D.O.A. 4/2/18 D.O.I. 6/2/18
Lum Sum: % 3 Val.: Yes or No	Survey held at SMRT
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collis
Date/Time   Action/Instruction  : SHR 6287 - DCS /ATCHU005649 / RIA  : FBH 2102K - NBA /2NC17008440 / Y	12m/g 2 DOA: 26032011 TAX/02/18/20 DOA: 26042017 LKK
(4) 18 Final Ag \$ 1362.63 Confirm	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O
RECEIVED 2 0 FEB 200	The second secon
and the second s	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
i) : Final Report	Resurvey No. of Trip: \ Survey Fee:
	Transportation:
Date/Time, File Return to?	The state of the s
2) 15 2- typist Add Fee	:: Site Insp (\$)s+Rssi
	The state of the s

Survey Department Check List (Case Handler)

Reference No.: NS | NC | 800 > 547 | 8vb

Policy Type: OD / TP / TP RES / TL / EVA

	case Handler	Typist
<u>Admin</u> (	): Case handler to make sure all Information created by the assign	ment team are ACCURATE
1\ Office Assiss Farm		

1) Offic	ce Assign Form	Y-Date	N-Date	Y-Date	N-Date
С	Reference No.	~			11 0 010
С	Customer Code				*
N	Assign From				
С	Assign Date	~			
C	Veh No (Inspected)	_			
С	Veh No (Insured)	~			
С	D.O.A	~			
С	Policy No	~			
С	Claim No	_			
С	Insurance Authorisation (CA /REV/REP)				
С	Report Type	~			
С	Weekend Charges				
N	Survey held at/Repairer	/			
С	Excess				

		1 1	
N	Survey held at/Repairer	/	
С	Excess		$\neg$
Survey	or ( ): Case handler to make sure t	he surveryor com	pleted a
C	Vehicle No		
С	Regn Month/Year	\ \ \ \ \ \ \	
N	Vehicle Type		
N	Make & Model	~	
С	Engine Capacity. (C.C)	_	
N	Colour	-	
С	Odometer. (Sp.Reading)	V	
С	Chassis No	- L	
N	General Condition	~	
N	Steering	~	
N	Brake	_	
N	Modification (Modi)	~	
С	Tyre Size	~	
N	Tyre Make	~	
С	Tyre Balance	~	
С	Date of Inspection	~	
N	Survey held	-	
N	Des.of Damages	~	
(2) Syste	m - (Views/Merimen)	8	
c	Damaged Vehicle Photographs Uploaded		
(3) Work	shop Estimate/Assignment Form		
N	ALL Parts condition		
С	Market Value for OD cases	-	
С	Estimate Repair Cost for PRI (RSI, TMI, MSIG)		
С	Days of repair		
С	Finalised Amount		
· C	Re-inspection Cases to Finalize within 5 Days		
(4) Syste	m - (Views/Merimen)		- 1
C	Resurvey photo Uploaded	/	

Check By:	VERON	15/2	18	
	Case Handler	,	ate	



# **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18002547/Svb 73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 08-02-2018 189556 Code: INC4 1. Policy Particulars :- THIRD PARTY CLAIM Insured Veh. FBH 2102K Veh. Inspected SHB 628J Policy No. 5093790754 Coverage (\$) 0.00 Claim No. Excess (\$) 0.00 Assign From 06/02/2018 Assign Date 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 04/02/2018 Inspection Date 06/02/2018 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.

<b>eBao</b> Tech								Gene	eralClaim	
Hello, NAC_PAYA_UBI_80	0601				- Children		· Change La	nguage	· Change Passwo	ord • Log Out
My Desktop	Polic	cy Query								
Notice of Loss	Policy N	lo.				Date of Ac	cident	04/02	/2018 13:15	1
	Vehicle	No.(For Motor)	FBH2102K							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5093790754	ELIZABETH ZHANG SHUYI	59302639Z	GMC	Third Party	FBH2102K	FBH2102K		27/08/2018
						Continue				

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
-	MT/0980348-002		SHB 1220U	SGB 4394T	30/1/2018
1 6	MT/0971146-002	SMRTBUS	SG 5580Y	SJS 5536U	25/11/2017
3 6	MT/0982534-001	COMFORT TRANSPORTATION PTE LTD	SHC 3146H	SLL 8920L	10/2/2018
7	MT/0982203-002	CITYCAB	SHA 9342D	SDD 8298L	12/2/2018
- 4	MT/0978056-002	SMRT TAXIS	SHB 1892E	SFY 6726Y	12/1/2018
9	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
	MT/0980980-002	SMRT TAXIS	SHD 6289D	SJH 7534U	3/2/2018
0 0	MT/0980928-002	SMRT TAXIS	SHB 1319U	FBC 5857Y	4/2/2018
9	MT/0982537-001	SMRT TAXIS	SHB 628J	FBH 2102K	4/2/2018
= =	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

- Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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.

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

AC	CIDE	МΤ	стл	100	1330	п
AU	SIDE	IV.	31 <i>1</i> 4			Ц

Date Of Report

05/02/2018 18:51

Date Of Accident

04/02/2018 09:30

Exact Location Of Accident

FARRER ROAD TOWARDS LORNIE ROAD

Country/State of Loss

**DETAILS OF OWN VEHICLE** 

Vehicle Registration Number

SHB628J

SINGAPORE

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 THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage

YES

Fleet Policy Policy Number

D-17087562MFSH

Cover Note Number

Driver

Name of Driver

LIM MING KEAT (LIN MINGJI)

NRIC No

S7631780A

Date Of Birth Occupation

05/10/1976

Date Of Driving Pass

OUTDOOR

01/01/2000

Driving Experience

18 YEARS AND 1 MONTH

Gender

MALE

Mobile Number

Fax Number

Contact Number **EMail Address** 

NOEMAIL

Page 1 of 14

Address

89 COMMONWEALTH DRIVE

07-656

Postcode

140089

OTHER - HIRER

Was driver an employee of the Insured's Company NO

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

NO

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? 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?

YES

If Yes, Please state which Police Station

Police Station Name

ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE

ROAD: 81 ANG MO KIO AVE 3, POSTCODE: 569929, COUNTRY:

SINGAPORE

Police Station Address Police Station Contact

TEL NO: 1800-4519999 - FAX NO: 65535679

Was notice of intended Prosecution given?

NO

If Yes, against whom?

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180205/2033 On 04/02/2018 at about 0930hrs, I was stopping at lane 1 along Farrer Road towards Lornie Road because the traffic light was red to my favour. At that time, there were many vehicles and when the traffic light turned green, a blue scooter from my left side ride past me and hit onto my side mirror. I noticed the plastic cover of my left side mirror dropped and I gave chase to the said motorcycle. However the traffic was heavy and the motorcycle managed to ride away. I wish to state that I have in car CCTV and the CCTV captured that the motorcyclist rode past my left side. I am lodging this report for police investigation.

#### 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?

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBH2102K

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver NRIC/Passport Number MOTORCYCLE

Contact Number
Address
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

ETCH PLAN	A STATE OF THE PARTY OF THE PAR	The state of the s
	1 1	The second second second
	and an arranged to the first of the	
	Farrer	Read
	rarrer	Noact
	THE RESERVE OF THE PERSON OF T	
1 1 1 2 2	1 1 1	MIT A FURCAST
	ica se done ha breed is	A- 5HBG28J  B- FBH2102E
se - 181 to 18		F P FOUDING
		以AI B- FBH > TOY
	Charles and the second of the	IBILL I
		4
ESCRIBE CIRCUMSTANCES OF	THE ACCIDENT	
mested.		
		The second state of the se
DECLARATION &	1	2 1
DECLARATION SAN	ulars are true in every respect.	12018 1206
(e( )	// 1	1
	5/2	12018
18 3		12010
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(if driver is not the policyholder)	Name: NRIC/FIN No.:
	Date & Time:	MRIC/FIN ING.

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy flability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
  - 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.

S ( ) 318

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

Date & Time:

Reporting Centre Personnel's Signature

Name:





Report No. T/20180205/2033

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

REPORT O	F A TRAFFIC	ACCIDENT	×12	Stelley Dien; No :	
Date/Time Report Made: 05/02/2018 10:27			Vide Report No.:	Station Diary No.: 46	
	nt's Particu	lars		on the state of the state of the state of	
Name of Informant: LIM MING KEAT			Address: APT BLK 89 COMMONWEALTH DRIVE #07-656 SINGAPORE 140089		
ID Type / ID No.: NRIC N沙/ S7631780A			Contact No.: Home/Office: Mobile: 86883788		
Nationally: SINGAPORE CITIZEN			Email:		
Sex: Age: Date of Birth: Male 41 05/10/1976			Type of Informant: Driver		
Race: Chinese			Language: Mandarin	Institution / School Name:	
Occupation: Taxi driver			Driving Licence Information: Class: 3	Date of Expiry:	

ype of Hit and Run		Drink Drive: No	Date/Time of Accident: 04/02/2018 09:30	Type of Location Straight Road	
Location: Along Road 1 FARRER RO towards Lorn	AD	Road Surface:		Road Speed Limit:	
Weather: Clear		Dry			
Traffic Flow:		Traffic Control: Traffic Light - Wo	orking	Traffic Volume: Heavy	
Type of Collis Between Mo	sion: ving Vehicles - Side S		Red Milder	Anyone conveyed by ambulance:	

		A distant to the	Model 6 4 4	Colors	Condition	No of Passenge
Vehicle No	Туре	The second secon	The second secon		OURSE THOUSE	^
FBH2102K	Motorcycle		SCOOTER	Blue		U
		TOVOTA	DIDLIC	Maroon	Slightly	0
SHB628J	Car	TOYOTA	PIRUS	Maroon	Slightly Damaged	0





2 of 3

Report No. T/20180205/2033

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

CONTINUATION OF REPORT

#### Brief Details.

On 04/02/2018 at about 0930hrs, I was stopping at lane 1 along Farrer Road towards Lornie Road because the traffic light was red to my favour. At that time, there were many vehicles and when the traffic light turned green, a blue scooter from my left side ride past me and hit onto my side mirror. I noticed the plastic cover of my left side mirror dropped and I gave chase to the said motorcycle. However the traffic was heavy and the motorcycle managed to ride away.

I wish to state that I have in car CCTV and the CCTV captured that the motorcyclist rode past my left side. I am lodging this report for Police investigation.

13





Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel Na 1800-4519999

3 of 3 Report No. T/20180205/2033

CONTINUATION OF REPORT

Sketch Plan

1-17

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 Informant: Signature Of Officer Recording The Report Sr Staff Sgt TEO BOON HOCK Date/Time: Signature Of Interpreter: 05/02/2018 10:27 Not applicable Officer In Charge Of Case: Classification/Of Case: TP / HRT / SN 085 SI ABDUL KAREEM BIN ABDUL HAGUE Contact No.: 65476079 Signature: Authentication Stamp NP168 Singapore Police Force 2 1/2

# Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

5369K

Vehicle Details

Vehicle No.:

SHB628J

Vehicle to be Exported:

No

Intended De-registration Date:

08 Feb 2018

Vehicle Make:

**TOYOTA** 

Vehicle Model:

PRIUS HYBRID 1.8 CVT

Primary Colour:

Maroon

Manufacturing Year:

2016

Engine No.:

2ZRR837706

Chassis No.:

JTDKB3FU603511662

Maximum Power Output:

90.0 kW (120 bhp)

Open Market Value:

\$34,913.00

Original Registration Date:

28 Oct 2016

First Registration Date:

28 Oct 2016

Transfer Count:

0

Actual ARF Paid:

\$5,000.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

27 Oct 2024

PARF Rebate Amount:

\$3,750.00

Intended COE Rebate Details

COE Expiry Date:

27 Oct 2024

COE Category:

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

COE Period(Years):

8

PQP Paid:

\$41,687.00

COE Rebate Amount:

\$35,005.00

**Total Rebate Amount:** 

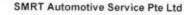
\$38,755.00

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be deregistered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 08 Feb 2018

ОК





60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

# **SMRT Accident Vehicle Repair Estimates**

NTUC

( 1/7-

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

Reg. No.

SHB628J

Ref. No

TAX/02/18/2027

Reg. Date

28/10/2016

Vehicle Type

TAXI

Make

TOYOTA PRIUS

Model

PRIUS4

Name of Driver

LIM MING KEAT (LIN MINGJI)

Type of Accident

SIDE SWIPE

Date / Time of Accident

04/02/2018 09:30:00 AM

Accident Reported Date / Time :

05/02/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Vehicle is Towed Back?

No

Towed Back Date/Time

Replacement Vehicle issued? :

Accident Repair Job Card No : 000024094483

Special Instruction to ARC, if any :

DROVE IN /FBH2102K

Prepared Date

05/02/2018 02:35:01 PM

Sugstian.

- Question More Item

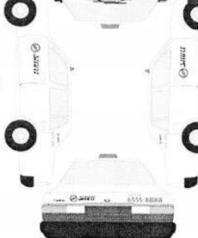
LKK Auto Consultants hence notify

- 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:



XX/02/18/2027

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

Chassis No: JTDKB3FU603511662

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

0.00

0.00

Total Spray Painting Charges **Total Material Charges** 

180.00

1,222.63

1,222.63

Other Charges

200.00

TOTAL

0.00

0.00

Lum Sum Total

1,602.63

0.00

0.00

0.00

No. of Repair Days

2.00

0.00

Prepared / Adjusted By

1 day

Arc / Surveyor Sing Off Date

: 05/02/2018 05:19:40 PM

01/01/1900 12:00:00 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 05/02/2018 05:17:56 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:

### Section D - Details of Repair Estimates

### Part 1 - Labour Works

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

## Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable		
TO RESPRAY VIEW MIRROR	180.00	0.00, 50		
Total Spray Painting & Panel Beating	180.00	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 30		
TO REMOVE AND REFIX WING MIRROR	120.00	0.00. 60		
Total Other Costs	200.00	0.00		

TAX/02/18/2027 Page:

3

## Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
87940474 40			MIRROR ASSY, OUTER REAR VIEW , LH	1	1,283.90	10.00	1,155.51	Replace	Replace	No pme
87945470 60A1			COVER, OUTER MIRROR, LH	1	89.50	25.00	67.12	Replace	Replace	No MS
		T	OTAL MATERIALS					1,222.64	1,222.63	
		TOTAL	MATERIALS(Discour	ited)				1,222.63	1,222.63	

# 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
	тот	AL SUPPLEMENTARY	MATERIA	LS					

TAX/02/18/2027

7,155,51+ 67,12+

1,222+63

0 = C

50 = +

30 . +

60 = +

0 - C

140=

1,222.63+

140\*+ 1,362\*63

6555 8888

15/24



7-2-18/14:

াদ P ল'দ E4, Singapore 757705

ber : 63685592

nber | 68662623

□ \* ○ mber : 68662672

# **SMRT Accident Vehicle Repair Estim**

 Reg. No
 SHB628J

 Ref. No
 TAX/02/18/2027

 Reg. Date
 28/10/2016

 Vehicle Type
 TAXI

Make : TOYOTA PRIUS

Model : PRIUS4

Name of Driver : LIM MING KEAT (LIN MINGJI)

Type of Accident : SIDE SWIPE

Date / Time of Accident : 04/02/2018 09:30:00 AM

Accident Reported Date / Time: 05/02/2018 12:00:00 AM

Surveyor is Required? Yes

Survey by : Sebastian

Vehicle is Towed Back? : No /

Towed Back Date/Time :

Replacement Vehicle issued? : No

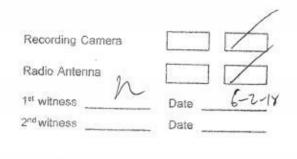
Accident Repair Job Card No : 000024094483

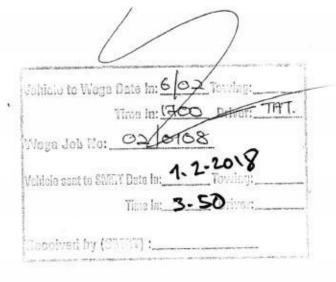
Special Instruction to ARC, if any :

DROVE IN /FBH2102K NTAC | | BEFORE PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR SEBASTIAN (LKK)

& Email :sebastianyeang @lkkauto.com HP:90036121

Prepared Date : 05/02/2018 02:35:01 PM





Chassis No :: JTDKB3FU603511662

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

0.00

occion o - to oc completes of certice haricon housement hopen come

0.00

Total Spray Painting Charges

180.00

50.00

Total Material Charges

1,222.63

1,222.63

Other Charges

200.00

90.00

TOTAL

1,602.63

1,362.63

Lum Sum Total

0.00

0.00

No. of Repair Days

2.00

1.00

Prepared / Adjusted By

Arc / Surveyor Sing Off Date

05/02/2018 05:19:40 PM

SEBASTIAN (LKK)

1753.40

06/02/2018 02:41:14 PM

Prepared / Adjusted Date

Remarks

Prepared Date : 05/02/2018 05:17:56 PM

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

Quotation No

: QN-1802-0338

Invoice No

Quotation Date

Invoice Date :

Invoice Amount

Prepared Date:

### Part 1 - Labour Works

ecation e econic et repair seminares

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

# Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable		
TO RESPRAY VIEW MIRROR	180.00	50.00		
Total Spray Painting & Panel Beating	180.00	50.00		

# 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 REMOVE AND REFIX WING MIRROR	120.00	60.00		
Total Other Costs	200.00	90.00		

# Part 4 - Spare Parts / Material Usage

Party Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
37940474 10			MIRROR ASSY, OUTER REAR VIEW , LH	V	1,283.90	10.00	1,155.51	Replace	Replace	No V
37945470 30A1			COVER, OUTER MIRROR, LH	V	89.50	25.00	67.12	Replace	Replace	No V
			TOTAL MATERIALS					1,222.64	1,222.63	
	i.	TOTAL	MATERIALS(Discour	nted)			,	1,222.63	1,222.63	

# 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
	TOTA	L SUPPLEMENTARY	MATERIA	ALS					

1753-KD

1222.63/

Sebrishien 14/2/18

Page:

4

# Veron Chen (LKKAuto)

From:

Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC) <YeoPohsuan@smrt.com.sg>

Sent:

Wednesday, 14 February 2018 2:57 PM

To:

Sebastian Yeang (LKK Auto)

Cc:

CS A Team; SUR; 'Leong Chee kwong'

Subject:

RE: SHB628J

Hi

Amount confirmed as per your recommendation, thanks.

Regards Poh Suan

----Original Message-----

From: Sebastian Yeang (LKK Auto) [mailto:SebastianYeang@lkkauto.com]

Sent: 14 February 2018 09:52

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

Cc: CS A Team; SUR; 'Leong Chee kwong'

Subject: RE: SHB628J

Dear Poh Suan

Please refer to attachment for the finalization.

Thank You

Best Regards,

Sebastian | Automotive Assessor

phone: 6256-3561 email: sebastianyeang@lkkauto.com| fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi

Avenue 1, #02-25 | S(408933)

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC) [mailto:YeoPohsuan@smrt.com.sg]

Sent: Saturday, 10 February 2018 11:29 AM

To: Sebastian Yeang (LKK Auto)

Cc: CS A Team; SUR; 'Leong Chee kwong'

Subject: SHB628J

Hi Sebastian,

Attached herewith the repair estimate of SHB 628J having Case No: TAX/02/18/2027.

There is no change to the approved amount of \$1,362.63 @ 1 working days under part by part repair.

Cost of Repair invoice will be generated as approved.

Please finalize with me within 7 working day, thanks.

Aside Kwong,

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

Thanks & Regards Poh Suan

----Original Message-----

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

Sent: 10 February 2018 11:22

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

Subject: Scan Data from FX-D421D6



## **National Assessment Centre Services**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





NTU	C INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref:	NS/INC1800254	17/Svbs2
		D UNION HOUSESINGAPORE	Date:	22-02-2018 INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	FBH 2102K	Veh. I	nspected	SHB 628J
	Policy No.	5093790754	Cover	age (\$)	0.00
	Claim No.	MT/0982537-001	Exces	s (\$)	0.00
	Assign From		Assig	n Date	06/02/2018
2.		Vehicle Parti	culars &	Condition	
	Make & Model	TOYOTA PRIUS	c.c		1798
	Engine No.	HIDDEN	Year o	of Reg.	2016
	Chassis No.	JTDKB3FU603511662	Colou	r	MAROON
	Odometer	101038	Steeri	ng	IN ORDER
	Brakes	IN ORDER	Modif	ication	NIL
	General	GOOD			
3.		Condit	ions of	Tyres	
		Size	Make		Balance
	R/H Front Tyre	195/65R15	YOKO	HAMA	6 mm
	L/H Front Tyre	195/65R15	YOKO	HAMA	6 mm
	R/H Rear Tyre	195/65R15	YOKO	HAMA	6 mm
	L/H Rear Tyre	195/65R15	YOKO	HAMA	6 mm
4.		Descript	diameter in particular	The state of the s	
	THE VEHICLE SU	STAINED DAMAGES AT THE N/	S BODY.		
	DAMAGES SEE D	ETAILS.			
5.		Genera	al Inform	nation	
	Accident Date	04/02/2018	Inspe	ction Date	06/02/2018
	Survey held at	SMRT AUTOMOTIVE SERVICE			
	85	60 WOODLANDS INDUSTRIAL	PARK E	4 SINGAPORE 75	7705
5a.			Remarks		
	A)THE INSPECTION	ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, V	THOUT I	PREJUDICE" BASIS NOT AUTHORISE	S. ED REPAIRS.
5b.		Estimate	and the second second second	CONTRACTOR OF THE PARTY OF THE	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:		1 Working Days	



### **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





Page No.:1 of 1

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 628J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	COVER,OUTER MIRROR,LH (DISC 25%)	MISSING	89.50	67.12
1	MIRROR ASSY, OUTER REAR VIEW, LH (DISC 10%)	DAMAGED	1,283.90	1,155.51
			1,373.40	1,222.63
	LABOUR			
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		200.00	90.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		89.50 1,283.90 1,373.40 200.00 180.00 380.00 1,753.40	50.00
	Lands and the second		380.00	140.00
	GRAND TOTAL		1,753.40	1,362.63

RECOMMENDED COST OF REPAIRS (C	ONFIRMED)	1,362.63

Report Ref No. NS/INC18002547/Svbs2

YEANG WAI KEEN

Automotive Assessor

M

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.