

Signature:

REF:

NS/INC18002648 / Sgbez

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:

GSD 56650

Policy No.

5075711264-02 11-12-17 - 10/12/18

Claims No.

MT/0979197-002

Sum Insured:

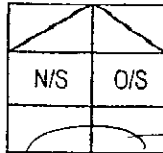
Excess:

(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:

3

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:

TIB 116B

Yr Regn:

30/12/2000

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

Truck / Trailer or

Make:

Mazda B647 0405G Auto cc 11967

Colour

Multi Colour

A/C:

Insured / Std / NI / NA

Sp.Reading

357302

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

NE135721121096702

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod:

NI / S/Rim / STD A/Rim or

Tyre Size:

F:

175/70R225

R:

11

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

TOYO / YOKO or

Pirella

Front

Rear

R/Bal.

6

mm

R/Bal.

6/6

mm

L/Bal.

6

mm

L/Bal.

6/6

mm

D.O.A.

23/1/18

D.O.I.

3/2/18

Survey held at

SMART

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

TIB 116B - 10/12/18 - 11/12/18

GSD 56650 - r

DP: 30/12/18

US \$3000, 3 days (Red \$ 5323.54, 64%)

201

Date/Time, File Pass to?

☐

Preli. Report

1) 06/3

Insured

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip:

Survey Fee:

160

Transportation:

Add Fee:

☐

Site Insp (\$

) \$ + RS. SI

☐

Interview (\$

) Photos

☐

Tech. Invs (\$

) Others

☐

Weekend (\$

)

TOTAL

Report Format:

TP

Lump Sum / L.B.I: (\$

3000




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/INC18002648/Sqb | | | | |
| 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. | GBD 5665D | Veh. Inspected | TIB 1116B | |
| Policy No. | 5075711264-02 | Coverage (\$) | 0.00 | |
| Claim No. | | Excess (\$) | 0.00 | |
| Assign From | | Assign Date | 08/02/2018 | |
| 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 | 23/01/2018 | Inspection Date | 08/02/2018 | |
| 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. | | | | |

Survey Department Check List (Case Handler)

Reference No.: *NG/INC/8007648/Seb*
 Policy Type: OD / TP / TP RES / TL / EVA

71B 1116B

Case Handler

Typist

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

(1) Office Assign Form

- C Reference No.
- C Customer Code
- N Assign From
- C Assign Date
- C Veh No (Inspected)
- C Veh No (Insured)
- C D.O.A
- C Policy No
- C Claim No
- C Insurance Authorisation (CA /REV/REP)
- C Report Type
- C Weekend Charges
- N Survey held at/Repairer
- C Excess

| Y-Date | N-Date | Y-Date | N-Date |
|-------------------------------------|--------|--------|--------|
| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |
| | | | |
| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |
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| <input checked="" type="checkbox"/> | | | |
| | | | |
| <input checked="" type="checkbox"/> | | | |
| | | | |

Surveyor (*Sebastian*): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

- C Vehicle No
- C Regn Month/Year
- N Vehicle Type
- N Make & Model
- C Engine Capacity. (C.C)
- N Colour
- C Odometer. (Sp.Reading)
- C Chassis No
- N General Condition
- N Steering
- N Brake
- N Modification (Modi)
- C Tyre Size
- N Tyre Make
- C Tyre Balance
- C Date of Inspection
- N Survey held
- N Des.of Damages

| | | | |
|-------------------------------------|--|--|--|
| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |
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| <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | |

(2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

| | | | |
|-------------------------------------|--|--|--|
| <input checked="" type="checkbox"/> | | | |
|-------------------------------------|--|--|--|

(3) Workshop Estimate/Assignment Form

- N ALL Parts condition
- C Market Value for OD cases
- C Estimate Repair Cost for PRI (RSI, TMI, MSIG)
- C Days of repair
- C Finalised Amount
- C Re-inspection Cases to Finalize within 5 Days

| | | | |
|-------------------------------------|--|--|--|
| <input checked="" type="checkbox"/> | | | |
| | | | |
| <input checked="" type="checkbox"/> | | | |
| | | | |
| | | | |
| | | | |

(4) System - (Views/Merimen)

- C Resurvey photo Uploaded

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Check By:

Chris *05/3/18*
 Case Handler Date

*C: Critical *N: Non-Critical

21/05/2014

TP Claims against NTUC Income: Follow-Through Survey

Date : 5/3/2018

| S/No | Income Reference | Claimant (Owner / Taxi Company) | Claimant Vehicle No. | Income Vehicle No. | Date of Accident | Time of Accident | Estimate | Tentative repair cost |
|------|------------------|---------------------------------|----------------------|--------------------|------------------|------------------|-------------|-----------------------|
| 1 | - | SMRT BUSES LTD | SMB 3529H | FV 3043U | 11/12/2018 | 16:15 | \$ 3,858.03 | \$ 2,550.00 |
| 2 | MT/0983770-002 | COMFORT TRANSPORTATION PTE LTD | SHC 8339K | FY 5545J | 25/2/2018 | 2:25 | \$ 6,898.96 | \$ 4,100.00 |
| 3 | MT/0984758-001 | COMFORT TRANSPORTATION PTE LTD | SHC 3155G | GBG 1237S | 22/2/2018 | 14:40 | \$ 2,549.36 | \$ 1,400.00 |
| 4 | MT/0980882-004 | COMFORT TRANSPORTATION PTE LTD | SHD 3132S | GBC 3328X | 3/2/2018 | 7:55 | \$ 3,503.26 | \$ 1,348.21 |
| 5 | MT/0984276-002 | COMFORT TRANSPORTATION PTE LTD | SHC 746X | SLR 7216L | 28/2/2018 | 2:00 | TOTAL LOSS | TOTAL LOSS |
| 6 | MT/0984762-001 | SMRT BUSES LTD | SG 5452J | SKQ 3494T | 5/1/2018 | 13:22 | \$ 8,131.29 | \$ 7,161.29 |
| 7 | MT/0984765-001 | SMRT BUSES LTD | SMB 336S | SHD 1237L | 27/1/2018 | 18:30 | \$ 2,990.00 | \$ 700.00 |
| 8 | MT/0979197-002 | SMRT BUSES LTD | TIB 1116B | GBD 5665D | 23/1/2018 | 10:05 | \$ 3,964.77 | \$ 3,000.00 |
| 9 | MT/0983952-002 | COMFORT TRANSPORTATION PTE LTD | SHB 6713G | SLA 46X | 26/2/2018 | 6:05 | \$ 6,740.80 | \$ 4,950.00 |
| 10 | NOT INSURED | COMFORT TRANSPORTATION PTE LTD | SHA 6973C | FBB 4102D | 23/2/2018 | 17:15 | \$ 1,250.48 | \$ 600.00 |
| 11 | MT/0983501-002 | CITY CAB PTE LTD | SHA 9243G | PC 4246B | 23/2/2018 | 18:05 | \$ 2,681.58 | \$ 2,400.00 |
| 12 | MT/0984783-001 | CITY CAB PTE LTD | SHB 4736D | FBL 7388Z | 22/2/2018 | 12:30 | \$ 2,487.18 | \$ 950.48 |
| 13 | MT/0982510-002 | COMFORT TRANSPORTATION PTE LTD | SH 6763A | SJP 3496E | 13/2/2018 | 22:00 | \$ 2,324.08 | \$ 1,295.76 |
| 14 | MT/0984221-001 | CITY CAB PTE LTD | SHC 926T | SDX 6942T | 18/2/2018 | 16:50 | \$ 3,181.90 | \$ 1,400.00 |
| 15 | MT/0984099-001 | COMFORT TRANSPORTATION PTE LTD | SHA 4722Z | SJR 294E | 16/2/2018 | 16:40 | \$ 5,637.20 | \$ 2,237.52 |
| 16 | MT/0984101-001 | COMFORT TRANSPORTATION PTE LTD | SHC 3372X | SLU 1543R | 18/2/2018 | 5:35 | \$ 4,132.08 | \$ 560.00 |
| 17 | MT/0984790-001 | CITY CAB PTE LTD | SHC 7866L | SLP 4518X | 18/2/2018 | 17:50 | \$ 1,375.12 | \$ 660.00 |
| 18 | MT/0983617-002 | COMFORT TRANSPORTATION PTE LTD | SH9111L | SHC 6770K | 24/2/2018 | 22:50 | \$ 2,605.10 | \$ 975.48 |
| 19 | MT/0983513-002 | COMFORT TRANSPORTATION PTE LTD | SH A 3341X | SIL 7579U | 24/2/2018 | 14:05 | \$ 6,414.38 | \$ 1,200.00 |
| 20 | MT/0972860-002 | COMFORT TRANSPORTATION PTE LTD | SMB 3141S | GBE 9185R | 4/12/2017 | 14:25 | \$ 6,153.67 | \$ 6,090.67 |
| 21 | MT/0983749-002 | COMFORT TRANSPORTATION PTE LTD | SHA 7760T | SJD 3446M | 25/2/2018 | 22:15 | \$ 6,759.82 | \$ 1,850.00 |

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="23/01/2018 11:35"/> |
| Vehicle No.(For Motor) | <input type="text" value="GBD5665D"/> | | |

| Select | Policy No. | Policyholder Name | Policyholder NRIC | Product | Cover Type | Vehicle No. | Insured Object | Commence Date | Expiry Date |
|----------------------------------|---------------|-----------------------------|-------------------|---------|---------------|-------------|----------------|---------------|-------------|
| <input checked="" type="radio"/> | S075711264-02 | PAMPERED PET TAXI PTE. LTD. | 201536465D | GCV | Comprehensive | GBD5665D | GBD5665D | 11/12/2017 | 10/12/2018 |

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

| | |
|----------------|---------|
| Owner ID Type: | Company |
| Owner ID: | 2292D |

Vehicle Details

| | |
|--------------------------------|-------------------|
| Vehicle No.: | TIB1116B |
| Vehicle to be Exported: | No |
| Intended De-registration Date: | 09 Feb 2018 |
| Vehicle Make: | MERCEDES BENZ |
| Vehicle Model: | O4O5G AUTO |
| Primary Colour: | Multi-Colour |
| Manufacturing Year: | 2000 |
| Engine No.: | 44798020079477 |
| Chassis No.: | WEB35721121096902 |
| Maximum Power Output: | - |
| Open Market Value: | \$324,629.00 |
| Original Registration Date: | 30 Dec 2000 |
| First Registration Date: | 30 Dec 2000 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$16,232.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Rebate Amount: \$0.00

Total Rebate Amount: \$0.00

The information contained herein is correct as at 09 Feb 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the 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 | 25/01/2018 09:32 |
| Date Of Accident | 23/01/2018 10:05 |
| Exact Location Of Accident | ALONG PIE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------|
| Vehicle Registration Number | TIB1116B |
| Insured/Policyholder | |
| Name Of Registered Owner | SMRT BUSES LTD |
| Co Reg No | 198202292D |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-64823888 |

Vehicle Particulars

| | |
|--|---------------|
| Manufacturer | MERCEDES-BENZ |
| 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 BUS

Insurance Company

| | |
|---------------------------|--------------------------------|
| Name of Insurance Company | MS FIRST CAPITAL INSURANCE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | YES |
| Policy Number | D-17087563MFBP |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | ABU BAKAR BIN ROSNARI |
| NRIC No | S1100755D |
| Date Of Birth | 25/04/1955 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 20/03/1979 |
| Driving Experience | 38 YEARS AND 10 MONTHS |
| Gender | MALE |
| Mobile Number | |
| Fax Number | |
| Contact Number | |
| EMail Address | NOEMAIL |

SKETCH PLAN

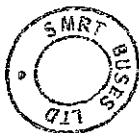
Bus 01/18/5031

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. This report will be forwarded to the Insurers' Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application to interested parties.
7. By the lodging of this report to the Insurers' Association of Singapore, the policyholder/insured hereby agrees to the following:
 - (a) to provide the Insurers' Association of Singapore (GIA) with a copy of this report for archiving and that copies of this report will for a fee be made available upon application to interested parties.
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:

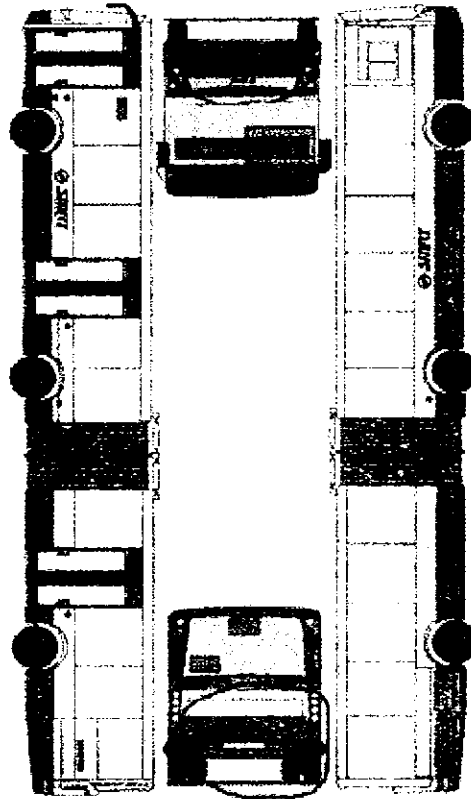
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SMRT Accident Vehicle Repair Estimates

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

Reg. No : TIB1116B
 Ref. No : BUS/01/18/5031
 Reg. Date : 26/01/2018
 Vehicle Type : BUS -17M
 Make : MB0405G 17M (MERCEDES)
 Model : MERCEDES 0405G
 Name of Driver : Abu Bakar Bin Rosnari
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 23/01/2018 10:05:00 AM
 Accident Reported Date / Time : 24/01/2018 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 :
 tib1116b - rear right dented and scratches
 gbd5655d (tp) insured with ntuc
 Prepared Date : 26/01/2018 01:55:53 PM



Sebastian
8/2/18

- Liny Sun Repair
- Photo After Paint

[Signature]
(3/2/18)

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 4 - Spare Parts / Material Usage

| Part Number | Portion | Stock No | Part Name | Qty | List Price (\$) | Discount (%) | Final Price (\$) | ARC Recommendation | Surveyor Approved | Photos Attached |
|-----------------------------|---------|----------|---------------------------|-----|-----------------|--------------|------------------|--------------------|-------------------|-----------------|
| 00985102 | REAR | 6008174 | REAR BUMPER RH | 1 | 591.56 | 10.00 | 532.40 | Replace | Replace ✓ | No BT |
| 00985100 | REAR | 6008173 | REAR BUMPER CENTER | 1 | 1,041.83 | 10.00 | 937.65 | Replace | Replace ✓ | No BT |
| | REAR | 6008940 | REAR BUMPER REINFORCEMENT | 1 | 750.00 | 10.00 | 675.00 | Replace | Replace ✓ | No BT |
| 01575103SB | REAR | 6008168 | REAR ENGINE DOOR | 1 | 3,640.80 | 10.00 | 3,276.72 | Replace | Replace R | No |
| | VE | 6008150 | LAMP REVERSE | 1 | 109.35 | 10.00 | 98.41 | Replace | Replace | No ✓ Ck |
| TOTAL MATERIALS | | | | | | | 5,520.19 | 5,520.18 | | |
| TOTAL MATERIALS(Discounted) | | | | | | | 4,327.82 | 4,416.14 | | |

Added Spare Parts / Material Usage After Surveyor Signed off

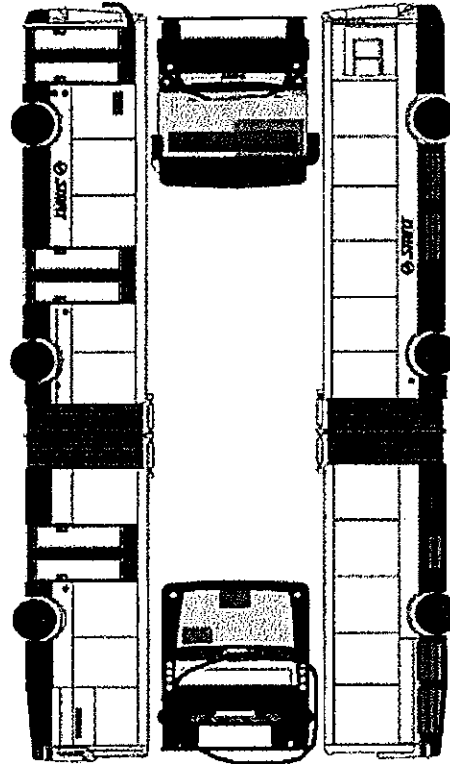
| Part Number | Portion | Part Name | Qty | List Price (\$) | Discount (%) | Final Price (\$) | ARC Check | Surveyor Check | LT Check |
|-------------------------------|---------|-----------|-----|-----------------|--------------|------------------|-----------|----------------|----------|
| TOTAL SUPPLEMENTARY MATERIALS | | | | | | | | | |

9

SMRT Accident Vehicle Repair Estimates

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

Reg. No : TIB1116B
Ref. No : BUS/01/18/5031
Reg. Date : 30/12/2000
Vehicle Type : BUS -17M
Make : MB0405G 17M (MERCEDES)
BENDY
Model : MERCEDES 0405G
Name of Driver : Abu Bakar Bin Rosnari
Type of Accident : HEAD TO REAR
Date / Time of Accident : 23/01/2018 10:05:00 AM
Accident Reported Date / Time : 24/01/2018 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 : 000024094548
Special Instruction to ARC,if any :
tib1116b - rear right dented and scratches
gbd5655d (tp) insured with ntuc
Prepared Date : 26/01/2018 01:55:53 PM



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 : | 1,590.00 | 1,060.00 |
| Total Spray Painting Charges : | 580.00 | 420.00 |
| Total Material Charges : | 1,794.77 | 1,794.77 |
| Other Charges : | 0.00 | -250.00 |
| TOTAL : | 3,964.77 | 3,024.77 |
| Lum Sum Total : | 3,950.00 | 3,000.00 |
| No. of Repair Days : | 5.00 | 3.00 / |
| Prepared / Adjusted By : | | Sebastian - LKK |
| Arc / Surveyor Sign Off Date : | 10/02/2018 03:01:51 PM | 10/02/2018 03:04:07 PM |



Prepared / Adjusted Date :

Remarks :

Prepared Date : 01/02/2018 06:41:42 PM

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

| | |
|------------------|-----------------|
| Quotation No : | Invoice No : |
| Quotation Date : | Invoice Date : |
| Invoice Amount : | Prepared Date : |

Part 1 - Labour Works

| Job Scope | Quotation from ARC | Adjusted by Surveyor, if applicable |
|------------------------|--------------------|-------------------------------------|
| TO REPAIR REAR PORTION | 1,590.00 | 1,060.00 / |
| Total Labour | 1,590.00 | 1,060.00 |

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 | 580.00 | 420.00 / |
| NIL | 0.00 | 0.00 |
| Total Spray Painting & Panel Beating | 580.00 | 420.00 |

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

| Job Scope | Quotation from ARC | Adjusted by Surveyor, if applicable |
|--------------------------|--------------------|-------------------------------------|
| | 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 |
|------------------------------------|---------|----------|---------------------------|-----|-----------------|--------------|------------------|--------------------|-------------------|-----------------|
| 4009851012 | REAR | 6008174 | REAR BUMPER RH | 1 | 591.56 | 10.00 | 532.40 | Replace | Replace | No / |
| 4009851010 | REAR | 6008173 | REAR BUMPER CENTER | 1 | 1,041.83 | 10.00 | 937.65 | Replace | Replace | No / |
| | REAR | 6008940 | REAR BUMPER REINFORCEMENT | 1 | 750.00 | 10.00 | 675.00 | Replace | Replace | No / |
| 4015751013SB | REAR | 6008168 | REAR ENGINE DOOR | 1 | 3,640.80 | 100.00 | 0.00 | Replace | Repair | No R |
| | VE | 6008150 | LAMP REVERSE | 1 | 109.35 | 10.00 | 98.41 | Replace | Replace | No / |
| TOTAL MATERIALS | | | | | | | 2,243.47 | 2,243.46 | | |
| TOTAL MATERIALS(Discounted) | | | | | | | 1,794.77 | 1,794.77 | | |

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 | | | | | | | | | |

2243.46
 1060.00
 420.00
 3723.46
 -20%
 2978.76

L/S - \$3000

Sebastian
 2/2/18

8303.54




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/INC18002648/Sqbe2 | | | |
| 73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556 | | Date: 09-03-2018 |  |
| Code: INC4 | | | |
| 1. Policy Particulars | | | |
| Insured Veh. | GBD 5665D | Veh. Inspected | TIB 1116B |
| Policy No. | 5075711264-02 | Coverage (\$) | 0.00 |
| Claim No. | MT/0979197-002 | Excess (\$) | 0.00 |
| Assign From | | Assign Date | 08/02/2018 |
| 2. Vehicle Particulars & Condition | | | |
| Make & Model | MERCEDES BENZ O405G AUTO | c.c | 11967 |
| Engine No. | HIDDEN | Year of Reg. | 2000 |
| Chassis No. | WEB35721121096902 | Colour | MULTI COLOUR |
| Odometer | 357302 | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | NIL |
| General | FAIR | | |
| 3. Condition of Tyres | | | |
| | Size | Make | Balance |
| R/H Front Tyre | 275/70 R22.5 | FIRENZA | 6 mm |
| L/H Front Tyre | 275/70 R22.5 | FIRENZA | 6 mm |
| R/H Rear Tyre | 275/70 R22.5 (D) | FIRENZA | 6/6 mm |
| L/H Rear Tyre | 275/70 R22.5 (D) | FIRENZA | 6/6 mm |
| 4. Description of Damages | | | |
| THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS. | | | |
| 5. General Information | | | |
| Accident Date | 23/01/2018 | Inspection Date | 08/02/2018 |
| 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: | | 3 Working Days | |



National Assessment Centre Services

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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. TIB 1116B

| Qty | Description of Parts | Condition | Estimated Cost (\$) | Adjusted Cost (\$) |
|-----------------------------|--|-----------|---------------------|--------------------|
| REPLACEMENT OF PARTS | | | | |
| 1 | REAR BUMPER RH | BENT | 591.56 | 591.56 |
| 1 | REAR BUMPER CENTER | BENT | 1,041.83 | 1,041.83 |
| 1 | REAR BUMPER REINFORCEMENT | BENT | 750.00 | 750.00 |
| 1 | LAMP REVERSE | CRACKED | 109.35 | 109.35 |
| 1 | REAR ENGINE DOOR | TO REPAIR | 3,640.80 | - |
| | LESS 10% DISCOUNT | | - | -249.27 |
| | | | 6,133.54 | 2,243.47 |
| LABOUR | | | | |
| | TO REPAIR REAR PORTION. | | 1,590.00 | 1,060.00 |
| | PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS. | | 580.00 | 420.00 |
| | | | 2,170.00 | 1,480.00 |
| GRAND TOTAL | | | 8,303.54 | 3,723.47 |

| | |
|---|-----------------|
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) CONFIRMED | 3,000.00 |
|---|-----------------|

Report Ref No. NS/INC18002648/Sqbe2

YEANG WAI KEEN

Automotive Assessor

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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