

REF: AXA

K/18/Sw

ASSIGNMENT

From: Date: 19/3/18

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SHC 4752B

at Workshop m/s

of 60 woodlands Ind-Prk E4

Insured:

Policy No:

Claims No:

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 / FR Seen Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 2.82 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 'wp'

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SHC 4752B Yr Regn: 1/4/16

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

Truck / Trailer or

Make: Toyota Prius

c.c 1798

Colour: Maroon

A/C: Insured / Std / NI / NA

Sp. Reading: 214133

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JTDKAW3CU 50576735

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: N/A / S/Rim / STD A/Rim or

Tyre Size: F: 195/65 R15

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. 16/3/18

D.O.I. 19/3/18

Survey held at SMRT

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

TA x / 63/18 / 2081

LKK

AXA

4/4/19 Confirm 2.8.2 \$846.88 with 2 working days

SHC 5139R

(Red- \$1401.87
63/1)

Date/Time: File Pass to?

☐ : Preli. Report

Days Of Repair:

1)

☐ : Final Report

Resurvey No. of Trip:

Date/Time: File Return to?

Survey Fee:

Transportation:

1 \$ + PC \$

Photos

Others

TOTAL

Report Format :

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

Add Fee:

☐ Site Insp \$☐ Interview \$☐ Tech Insp \$☐ Weekend \$

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	16/03/2018 10:09
Date Of Accident	16/03/2018 03:55
Exact Location Of Accident	T4 TAXI QUEUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4752B
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	ABDULLAH BIN MOHAMED NOR
NRIC No	S1201596H
Date Of Birth	27/09/1956
Occupation	OUTDOOR
Date Of Driving Pass	28/11/1983
Driving Experience	34 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	351
Postcode	
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 - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

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

MY TAXI WAS STATIONARY AT THE TAXI QUEUE AND I WAS AWAY TO ANSWER THE CALL OF NATURE. WHEN I CAME BACK, I SAW THAT THE TRANSCAB SHC5139R WHICH BEHIND MY TAXI HAD COLLIDED ONTO THE REAR PORTION OF MY TAXI.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5139R
Vehicle Make/Model/Colour	TRANSCAB
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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 reudiate 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:

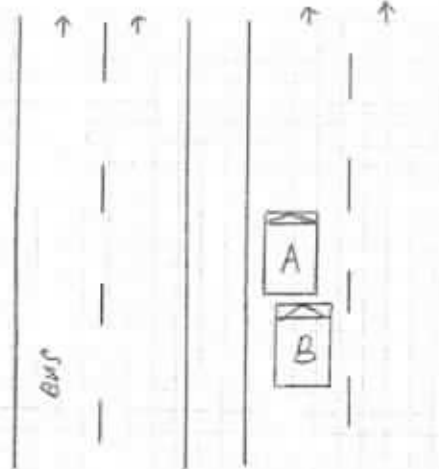
[Signature]

Driver's Signature
(If driver is not the policyholder)
Date & Time: 16 MAR 18

at 12/3/2018

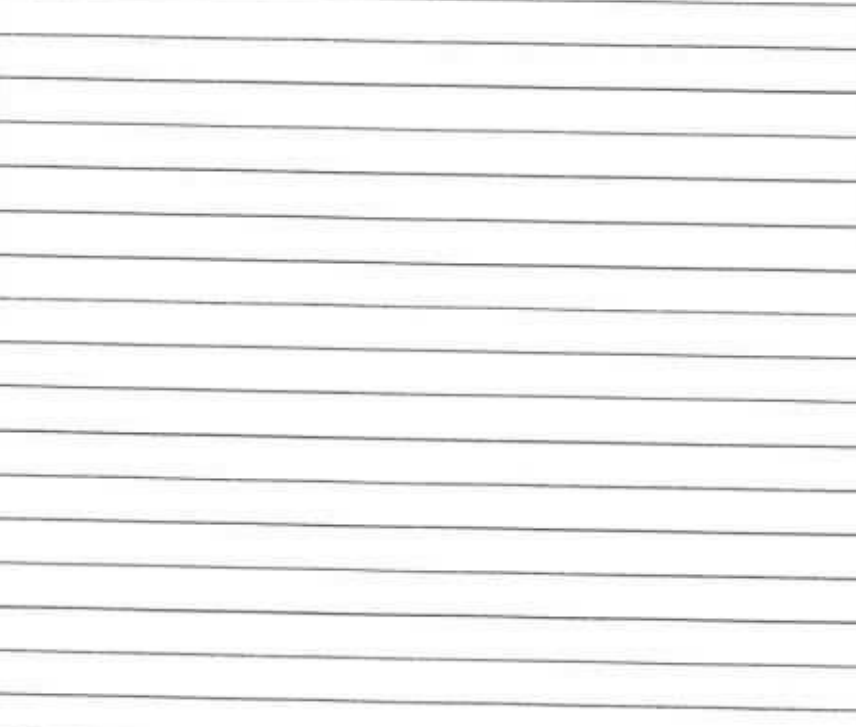
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



A - SHC 4752B
B - SHC 5139R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT



DECLARATION

DECLARATION

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



Policyholder's Signature
Date & Time:

Driver's Signature _____
(If driver is not the policyholder)

Date & Time: 16 MAR 18

Reporting Centre Personnel's Signature

Mammals:

NRIC/FIN No.:

APV: 21-3-18 / 10:40

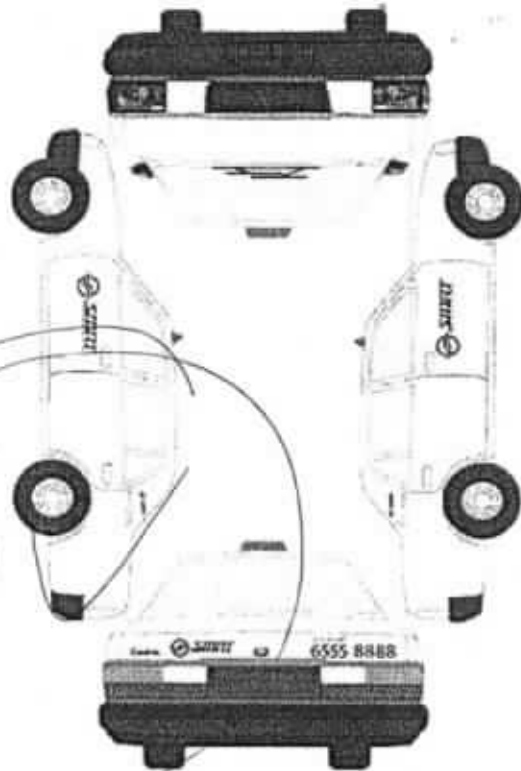
21-3-18 / 14:40

SMRT Accident Vehicle Repair Estimates

14-3-18 / 14:40

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

Reg. No : SHC4752B
 Ref. No : TAX/03/18/2081
 Reg. Date : 01/04/2016
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : ABDULLAH BIN MOHAMED NOR
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 16/03/2018 03:55:00 AM
 Accident Reported Date / Time : 16/03/2018 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 : 000024095077
 Special Instruction to ARC, if any :
 SHC5139R (TRANSCAB) - AXA P/P
 BEFORE PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR SEBASTIAN (LKK)
 & Email : sebastianyeang @lkkauto.com HP: 90036121
 Prepared Date : 16/03/2018 10:28:43 AM



Recording Camera

☐ ☒

Radio Antenna

☐ ☒

1st witness

Date

14-3-18

2nd witness

Date

E 1/2 F
KM 214/31

QC 21/3 10.45 Pass

Vehicle to Waga Date In: 20/3	Towing:
Time In: 1050	Driver: TAT
Waga Job No: 03/0200	2018
Vehicle sent to SMRT Date In: 21-3	Towing:
Time In: 10-20	Driver:
Received by (SMRT):	g

Chassis No : JTDKN36U505767755

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labour Charges : 338.00
Total Spray Painting Charges : 558.00
Total Material Charges : 805.87
Other Charges : 556.88
TOTAL : 2,258.75
Lum Sum Total : 0.00
No. of Repair Days : 3.00
Prepared / Adjusted By :
Arc / Surveyor Sing Off Date : 16/03/2018 01:30:35 PM

200.00

200.00

120.00

326.88

846.88

0.00

2.00

SEBASTIAN (LKK)

19/03/2018 02:40:22 PM





Prepared / Adjusted Date :

Remarks :

Prepared Date : 16/03/2018 01:30:14 PM

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

Quotation No : QN-1803-0555

Invoice No :

Quotation Date : 23/3

Invoice Date :

Invoice Amount :

Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	338.00 ✓	200.00 ✓
Total Labour	338.00	200.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY REAR BUMPER	378.00 ✓	200.00 ✓
TO RESPRAY BUMPER BEAM	180.00 ✓	0.00
Total Spray Painting & Panel Beating	558.00	200.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET) <i>Net</i>	296.88	296.88 ✓
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	30.00 ✓
TO WASH AND VACUUM	60.00	0.00
Total Other Costs	556.88	326.88

Lkh 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
52159-47905		6505548	BUMPER REAR	R 1	458.60	100.00	0.00	Replace	Repair	No R
76891-47020		6505519	BUMPER LIP REAR	X 0	228.90	25.00	0.00	Replace	Not given	No X
52023-12240		6505547	BUMPER REINFORCEMENT REAR	X 1	205.70	25.00	154.28	Replace	Check	No X
52016-47030			ARM SUB-ASSY, RR BUMPER LH	X 1	139.60	25.00	104.70	Replace	Check	No X
52015-47050			ARM SUB-ASSY, RR BUMPER RH	X 1	139.60	25.00	104.70	Replace	Check	No X
			SENSOR REVERSE	X 1	180.00	0.00	180.00	Replace	Check	No X
			PIXEL STICKER	✓ 2	60.00	0.00	120.00	Replace	Replace	No ✓
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH	X 1	94.80	25.00	71.10	Replace	Check	No X
52575-47020		6505549	BUMPER SIDE RETAINER RR/RH	X 1	94.80	25.00	71.10	Replace	Check	No X
TOTAL MATERIALS							805.88	120.00		
TOTAL MATERIALS(Discounted)							805.87	120.00		

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									

120.00 /
+ 200.00 /
+ 526.88 /

846.88 /

Sebastian
27/8/18

SMRT Accident Vehicle Repair Estimates

Cy117

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

Reg. No : SHC4752B
 Ref. No : TAX/03/18/2081
 Reg. Date : 01/04/2016
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : ABDULLAH BIN MOHAMED NOR
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 16/03/2018 03:55:00 AM
 Accident Reported Date / Time : 16/03/2018 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by :
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024095077
 Special Instruction to ARC, if any :
 SHC5139R (TRANSCAB) - AXA
 Prepared Date : 16/03/2018 10:28:43 AM


*Sebastian
17/3/18.*

- Part by part repair
- Question Mark Item
Photo
- Photo Before Paint

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 : JTDKN36U505767755

Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges :	338.00	0.00
Total Spray Painting Charges :	558.00	0.00
Total Material Charges :	1,321.49	1,321.49
Other Charges :	556.88	0.00
TOTAL :	2,774.37	0.00
Lum Sum Total :	0.00	0.00
No. of Repair Days :	3.00	0.00
Prepared / Adjusted By :		2 days
Arc / Surveyor Sign Off Date :	16/03/2018 01:30:35 PM	01/01/1900 12:00:00 AM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 16/03/2018 01:30:14 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	338.00	0.00 200
Total Labour	338.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY REAR BUMPER	378.00	0.00 200
TO RESPRAY BUMPER BEAM	180.00	0.00 2
Total Spray Painting & Panel Beating	558.00	0.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00 X
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	0.00 ✓
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00 50
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	556.88	0.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
52159-47905		6505548	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace <i>R</i>	No
76891-47020		6505619	BUMPER LIP REAR	1	228.90	25.00	171.67	Replace	Replace <i>X</i>	No
52023-12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.27	Replace	Replace <i>?</i>	No
52016-47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Replace <i>?</i>	No
52015-47050			ARM SUB-ASSY, RR BUMPER RH	1	139.60	25.00	104.70	Replace	Replace <i>?</i>	No
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace <i>?</i>	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace <i>✓</i>	No
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10	Replace	Replace <i>?</i>	No
52575-47020		6505549	BUMPER SIDE RETAINER RR/RH	1	94.80	25.00	71.10	Replace	Replace <i>?</i>	No
TOTAL MATERIALS								1,321.50	1,321.49	
TOTAL MATERIALS(Discounted)								1,321.49	1,321.49	

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									

...CLAIM SUBFOLDER...(New Assignment)

Non-Reporting

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	16 Mar 2018		16 Mar 2018 17:17 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	TRANS-CAB SERVICES PTE LTD		
Main Claimant:	SMRT TAXIS PTE LTD, Co. Reg. No.: 198905369K		
Vehicle Reg. No.:	SHC4752B	Date of Loss:	16/03/2018 03:00 - :59
Claim Type:	TP / C0472504	Policy/Cover Note No.:	P1680520 (Third Party Only)
Vehicle Reg. No. (Insured):	SHC5139R	Policy No. (Claimant):	
		Excess:	S\$5,000.00
Repairer:	SMRT Automotive Services Pte Ltd (Woodlands) 60 Woodlands Industrial Park E4, 757705 Woodlands - Tel: 68662628		
Handling Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288 ... [Handled by Khor Saw Theng - 6880 4754]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 27/03/2018]		

ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

- AXA_SG (16/03/2018): WP / New TP Assignment - C0472504/P1680520

ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date Priority Type Task Group Subject Handler Assigned By Completed On Created On Done?

No results.

5:22pm @ 16/3/18
vehicle in
person @ shenti
arrange on 19/3/18

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHC4752B
Vehicle to be Exported:	No
Intended De-registration Date:	20 Mar 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2015
Engine No.:	2ZR6588468
Chassis No.:	JTDKN36U505767755
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$29,508.00
Original Registration Date:	01 Apr 2016
First Registration Date:	01 Apr 2016
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Mar 2024
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	31 Mar 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$36,862.00
COE Rebate Amount:	\$27,782.00
Total Rebate Amount:	\$31,532.00
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 20 Mar 2018

OK

View Sent Message

This mail is associated with :

***SHC4752B (C0472504)**
(SHCS139R)

TP
SMRT TAXIS PTE LTD
Mar 16 2018 3:00AM
[TRANS-CAB SERVICES PTE LTD]
SMRT Automotive Services Pte Ltd

Resend	View Recipients	Print Message	Delete Message	Forward
--------	-----------------	---------------	----------------	---------

From LKK Auto Consultants Pte Ltd (LKK_HQ), sent on 03/04/2019 18:10 PM
To AXA_SG; lynn.khong@axa.com.sg
CC cs-a@lkkauto.com; admin-a@lkkauto.com
Subject Re: FILE REVIEW, PLS ADVISE STATUS TO CH-VO

Dear Lynn,

We refer to the below email and the contents were duly noted.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108
 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

<-- Original Message -->

From: AXA_SG

To: LKK_HQ

CC: AXA_SG; cs-a@lkkauto.com; admin-a@lkkauto.com

Sent On: 03/04/2019 04:19 PM

Subject: Re: FILE REVIEW, PLS ADVISE STATUS TO CH-VO



Hi Mei Kwan,

Insured, Transcab, has mutually settled with SMRT Taxis.

Kindly close file and submit fees.

Thanks

Regards

Lynn

<-- Original Message -->

From: LKK_HQ

To: AXA_SG; Vale.Oh@axa.com.sg

CC: cs-a@lkkauto.com; admin-a@lkkauto.com

Sent On: 26/11/2018 11:20 AM

Subject: Re: FILE REVIEW, PLS ADVISE STATUS TO CH-VO

Dear Sir / Madam,

We refer to the above matter.

Kindly advise whether insured has reported. If so, kindly let us have a copy of insured's accident report for our necessary action.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108
 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

<-- Original Message -->

From: AXA_SG

To: LKK_HQ

CC: AXA_SG

Sent On: 02/11/2018 04:03 PM

Subject: FILE REVIEW, PLS ADVISE STATUS TO CH-VO

...CLAIM SUBFOLDER...(Pending for Survey Report)

Non-Reporting

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	16 Mar 2018		16 Mar 2018 17:17 Edit Adj Rpt	S\$846.88 Edit Estimates	S\$846.88 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	TRANS-CAB SERVICES PTE LTD , Co. Reg. No.: 200303878K								
Main Claimant:	SMRT TAXIS PTE LTD , Co. Reg. No.: 198905369K								
Vehicle Reg. No.:	SHC4752B	Date of Loss:	16/03/2018 03:00 - :59 [23 Months and 15 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / C0472504	Policy/Cover Note No.:	P1680520 (Third Party Only)						
Vehicle Reg. No. (Insured):	SHC5139R	Policy No. (Claimant):	D-17087562MFSH						
		Excess:	S\$5,000.00						
Repairer:	SMRT Automotive Services Pte Ltd (Woodlands) 60 Woodlands Industrial Park E4, 757705 Woodlands - Tel: 68662628								
Handling Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288 ... [Handled by Lynn Khong - 6880 4892]								
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Sebastian Yeang Wai Keen] ... [Final Rpt due 27/03/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> AXA_SG (03/04/2019): Re: FILE REVIEW, PLS ADVISE STATUS TO CH-VO AXA_SG (02/11/2018): FILE REVIEW, PLS ADVISE STATUS TO CH-VO AXA_SG (16/03/2018): WP / New TP Assignment - C0472504/P1680520 									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SHC4752B (C0472504)
[SHC5139R]
TP
SMRT TAXIS PTE LTD
Mar 16 2018 3:00AM
[TRANS-CAB SERVICES PTE LTD]
SMRT Automotive Services Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			Upload Video			Upload Audio			View View in Browser	
Assessment Reports														1 per page		<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)										Thumbnail		Print		
1	21/03/18 10:51	Adjuster Immediate Advice										1	Load HTM			
Photos/Images														3 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)										Thumbnail		Print		
1	16/04/18 16:26	TP accident photo										1	Load PDF			
2	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
3	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
4	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
5	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
6	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
7	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
8	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
9	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
10	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
11	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
12	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
13	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
14	04/04/19 09:46	General View										1	Load JPG	<input checked="" type="checkbox"/>		
15	04/04/19 09:46	Reinspection Photo										1	Load JPG	<input checked="" type="checkbox"/>		
16	04/04/19 09:46	Reinspection Photo										1	Load JPG	<input checked="" type="checkbox"/>		
Documentation														1 per page		<input checked="" type="checkbox"/>
No	Finalized On	AXA Insurance Pte Ltd (HQ)										Thumbnail		Print		
1	16/03/18 15:41	EMAIL_ABS										1	Load PDF			
2	16/03/18 15:41	ESTIMATE_ABS										1	Load PDF			
3	16/03/18 15:41	SHC4752B TP GIA_ABS										1	Load PDF			
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)										Thumbnail		Print		
1	21/03/18 12:14	TP ESTIMATE - MARKED										1	Load PDF			

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd

(Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC4/AXA18005115/SWA3Q2

Date: 05/04/2019

REFERENCE

Handling Insurer: AXA Insurance Pte Ltd

Policy No:

P1680520

Claimant Vehicle No : SHC4752B

Insured Vehicle No :

SHC5139R

Date of Loss: 16/03/2018

Nature of Claim:

TP

Claim No: C0472504

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC4752B

Make & Model: TOYOTA PRIUS, 1.8 (A)

Engine No: 2ZR6588468

Reg. Date: 01/04/2016 (Man. Year: 2015)

Chassis No: JTDKN36U505767755

Colour: Maroon

Odometer: 214133 km

Engine Capacity: 1798 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 195/65 R15

Rear Tyre Size: 195/65 R15

Front Left Side: Falken 6 mm

Rear Left Side: Falken 6 mm

Front Right Side: Falken 6 mm

Rear Right Side: Falken 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,958.88	416.88	1,542.00	78.72
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,156.00	430.00	726.00	62.80
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	3,114.88	846.88	2,268.00	72.81
Global Sum Settlement (S\$)		0.00		

INSPECTION

Date of Assignment: 16/03/2018

Date Inspected: 19/03/2018 Inspected At:

SMRT Automotive Services Pte Ltd
(Woodlands)
60 Woodlands Industrial Park E4
Singapore 757705

Estimated Period of Repair: 2.0 days

Adjuster: Sebastian Yeang Wai Keen

Manager: VIVIAN LAU PEI FENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference		
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 05 Apr 2019)
Parts:	144	TOYOTA PRIUS 1.8 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC4752B)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	2		*PIXEL STICKER (SN) (CONSISTENT)	Necessary	120.00 F	*120.00 F
2	1		*ADVERTISEMENT STICKER (SN) (CONSISTENT)	Necessary	296.88 F	*296.88 F
3	1		*BUMPER REAR (CONSISTENT)	Repair	458.60 F	*- F
4	1		*BUMPER LIP REAR (CONSISTENT)	Not Necessary	228.90 F	*- F
5	1		*BUMPER REINFORCEMENT REAR (CONSISTENT)	Not Necessary	205.70 F	*- F
6	1		*ARM SUB-ASSY ,RR BUMPER LH (CONSISTENT)	Not Necessary	139.60 F	*- F
7	1		*ARM SUB-ASSY ,RR BUMPER RH (CONSISTENT)	Not Necessary	139.60 F	*- F
8	1		*SENSOR REVERSE (CONSISTENT)	Not Necessary	180.00 F	*- F
9	1		*BUMPER SIDE RETAINER RR/LH (CONSISTENT)	Not Necessary	94.80 F	*- F
10	1		*BUMPER SIDE RETAINER RR/RH (CONSISTENT)	Not Necessary	94.80 F	*- F
F=Franchise part.						
Total Parts (S\$)					1,958.88	416.88

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING & BODY WORK	New	338.00	200.00
2	SPRAY PAINT	New	558.00	200.00
3	TO CHECK WIRING AND SYSTEM FUNCTION	New	80.00	0.00
4	TO TEST AND REFIX REVERSE SENSOR SYSTEM	New	120.00	30.00
5	TO WASH AND VACUUM	New	60.00	0.00
Gross Labour Cost (\$\$)			1,156.00	430.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >