

REF: NS/WCI18005515/Sgbez

Surveyor

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: SK 1772Y

Policy No. 5084652447-02 2810-17

Claims No. MT/0988982-001

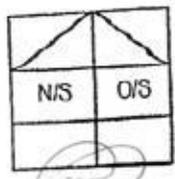
Sum Insured: _____ Excess: _____

(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: 2 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: SHC 47265 Yr Regn: 1/11/2017

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

Truck / Trailer or _____

Make: Toyota Prius 4 C.C. 1798

Colour: Maroon A/C: Insured / Std / NI / NA

Sp. Reading: 75727 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDB3F4903573315

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: NI / S/Rim / STD A/Rim or

Tyre Size: F: P15/65 R15

R: _____

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

TOYO / YOKO or _____

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm
D.O.A. <u>17/3/18</u>	D.O.I. <u>20/3/18</u>

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
<u>SHC 47265</u>	<u>CC3 / AXA 31022910 / R10303</u>
<u>SK 1772Y</u>	<u>SK 1772Y</u>
	<u>Final PA \$550 (PAK @ 270, 81%)</u>

DA: 22/11/18 TAX/03/18/2100

LRK

MTUC

SK1772Y

RECEIVED

Date/Time, File Pass to? Prel. Report

1) 06/10/18 Final Report

Date/Time, File Return to?

2) _____

Report Format: TP

Lump Sum / I.B.I. (\$) 550

Days Of Repair: 2

Resurvey No. of Trip: _____

Survey Fee: 160

Transportation: _____

Add Fee: Site Insp (\$)

Interview (\$)

Tech. Invs (\$)

Weekend (\$)

Phone: 35

Other: _____

TOTAL 195



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18005515/Sqb

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 24-03-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJK 1772Y	Veh. Inspected	SHC 4926S
Policy No.	5084652447-02	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	20/03/2018

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

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5. General Information

Accident Date	19/03/2018	Inspection Date	20/03/2018
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.

TP Claims against NTUC Income: Follow-Through Survey

Date : 04/04/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	Tentative repair cost
1	MT/0984098-002	SMRT TAXIS PTE LTD	SHB 5366G	SKA 7181D	28/02/2018	\$ 7,797.23	\$ 2,550.00
2	MT/0988982-001	SMRT TAXIS PTE LTD	SHC 4926S	SJK 1772Y	19/03/2018	\$ 2,842.70	\$ 550.00
3	MT/0988428-002	COMFORTDELGRO	SHA 4969D	SCE 4477J	02/04/2018	\$ 1,303.30	\$ 480.00
4	MT/0988889-002	COMFORTDELGRO	SH 6484E	SIG 4840K	31/03/2018	\$ 2,381.58	\$ 1,050.00
5	MT/0984196-002	SMRT TAXIS PTE LTD	SHC 4004C	GU 9556K	01/03/2018	\$ 10,777.84	\$ 3,750.00
6	MT/0987457-002	SMRT TAXIS PTE LTD	SHB 5197C	SLK 4501U	16/03/2018	\$ 5,230.50	\$ 920.00
7	MT/0981513-002	SMRT BUS	SMB 5057P	SLU 2644B	06/02/2018	\$ 1,540.00	\$ 700.00
8	MT/0981716-002	SMRT BUS	SG 5494M	SIG 6853K	08/02/2018	\$ 1,927.00	\$ 1,590.00
9	MT/0985967-002	SMRT TAXIS PTE LTD	SHF 7E	SJM 542R	13/03/2018	\$ 12,384.10	\$ 4,284.50

Claim received from LKK Auto

Hello, NAC_PAYA_UBI_800601

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No. Date of Accident
Vehicle No. (For Motor)

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5084652447-02	SJ MOTOR ENTERPRISE	52838801X	GFT	Third Party	SJK1772Y	SJK1772Y	28/10/2017	

Continue

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHC4926S
Vehicle to be Exported:	No
Intended De-registration Date:	21 Mar 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZRS100053
Chassis No.:	JTDKB3FU903573315
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	01 Nov 2017
First Registration Date:	01 Nov 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Oct 2025
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	31 Oct 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$33,596.00
COE Rebate Amount:	\$31,959.00
Total Rebate Amount:	\$35,709.00
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 21 Mar 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	19/03/2018 16:05
Date Of Accident	19/03/2018 15:10
Exact Location Of Accident	SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4926S
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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	CHENG TOW MIN
NRIC No	S1434718F
Date Of Birth	29/04/1960
Occupation	OUTDOOR
Date Of Driving Pass	24/10/1978
Driving Experience	39 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	544
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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG SERANGOON ROAD AND HAD STOPPED DUE TO THE FRONT VEHICLE STOPPING AS TRAFFIC LIGHT WAS RED AHEAD. A MOMENT LATER, SUDDENLY THE VEHICLE SJK1772Y FROM BEHIND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJK1772Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	RHAJWINDER SINGH S/O CHARANPAL SINGH
NRIC/Passport Number	S8831180I
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 repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Handwritten signature of the driver

Handwritten date: 19/13/2018

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 : SHC4926S
 Ref. No : TAX/03/18/2100
 Reg. Date : 01/11/2017
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS4
 Name of Driver : CHENG TOW MIN
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 19/03/2018 03:09:00 PM
 Accident Reported Date / Time : 19/03/2018 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 : 000024095114
 Special Instruction to ARC,if any :
 SJK1772Y
 Prepared Date : 19/03/2018 04:25:13 PM



Sebastian
 20/3/18

- Part by part repair
- Question Make 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 : JTDKB3FU903573315

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 :	1,325.39	1,325.39
Other Charges :	280.00	0.00
TOTAL :	2,501.39	0.00
Lum Sum Total :	0.00	0.00
No. of Repair Days :	3.00	0:00
Prepared / Adjusted By :		2 days
Arc / Surveyor Sing Off Date :	20/03/2018 09:06:58 AM	01/01/1900 12:00:00 AM

Prepared / Adjusted Date :

Remarks :

Prepared Date : 20/03/2018 09:06:58 AM

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

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

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR REAR PORTION	338.00	0.00 338
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	0.00 378
TO RESPRAY BUMPER BEAM	180.00	0.00
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 TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00 120
TO REPLACE SUNDRY PARTS	100.00	0.00 100
TO WASH AND VACUUM	60.00	0.00 60
Total Other Costs	280.00	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
52159479 13			COVER, RR BUMPER ASSY	1	423.90	25.00	317.92	Replace	Replace	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace	No
52462470 30			PAD, RR BUMPER, RH & LH , 1	2	3.80	25.00	5.70	Replace	Replace	No
52462470 20			PAD, RR BUMPER, RH & LH , 2	2	3.80	25.00	5.70	Replace	Replace	No
52462470 10			PAD, RR BUMPER, RH & LH , 3	2	3.80	25.00	5.70	Replace	Replace	No
52191470 30			SEAL, RR BUMPER ARM, RH & LH	2	11.00	25.00	16.50	Replace	Replace	No
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace	No
52023470 30			REAR BUMPER REINFORCEMENT	1	318.80	25.00	239.10	Replace	Replace	No
52453470 10			GUARD, RR BUMPER, LOWER	1	558.30	25.00	418.72	Replace	Replace	No
52169470 20			COVER, GUARD RR BUMPER LOWER	1	14.80	25.00	11.10	Replace	Replace	No
52461470 10			PAD, RR BUMPER, CTR	3	2.20	25.00	4.95	Replace	Replace	No
TOTAL MATERIALS								1,325.40	1,325.39	
TOTAL MATERIALS(Discounted)							1,325.39	1,325.39		

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									

22-3-18 / 12:05
22-3-18 / 16:05

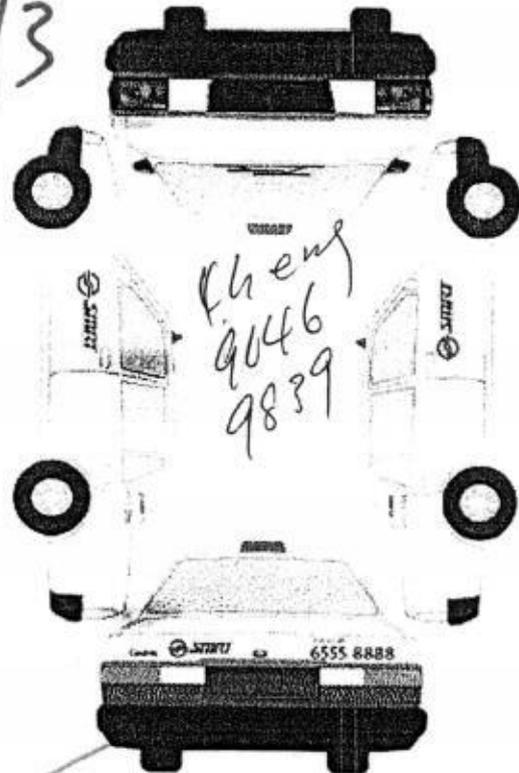
20-3-18 / 16:05

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHC4926S
 Ref. No : TAX/03/18/2100
 Reg. Date : 01/11/2017
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS4
 Name of Driver : CHENG TOW MIN
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 19/03/2018 03:09:00 PM
 Accident Reported Date / Time : 19/03/2018 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 : 000024095114
 Special Instruction to ARC, if any :
 SJK1772Y *Ntuc P/P*
 BEFORE PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR SEBASTIAN (LKK)
 & Email : *sebastianyeang @lkkauto.com* HP:90036121
 Prepared Date : 19/03/2018 04:25:13 PM

22/3



Recording Camera
 Radio Antenna
 1st witness *M* Date *20-3-18*
 2nd witness _____ Date _____

Vehicle to View Date In: *21/3*
 Time In: *1650*
 Mega Job No: *02/0205*
 Vehicle sent to SMRT Date In: *22-3-2018*
 Time In: *10-20*
 Inspected by (SMRT): *[Signature]*

Qc 22/3/18 11:26 pass

Chassis No : JTDKB3FU903573315

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	200.00
Total Spray Painting Charges	: 558.00	200.00
Total Material Charges	: 588.75	120.00
Other Charges	: 280.00	30.00
TOTAL	: 1,764.75	550.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 3.00	2.00
Prepared / Adjusted By	:	SEBASTIAN (LKK)
Arc / Surveyor Sing Off Date	: 20/03/2018 09:06:58 AM	20/03/2018 04:05:23 PM

M

LKK

Prepared / Adjusted Date :

Remarks :

Prepared Date : 20/03/2018 09:06:58 AM

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

Quotation No : QN-1803-0595

Invoice No :

Quotation Date : 26/3

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 X	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 TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	30.00 /
TO REPLACE SUNDRY PARTS	100.00	0.00
TO WASH AND VACUUM	60.00	0.00
Total Other Costs	280.00	30.00

2843.20

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
52159479 13			COVER, RR BUMPER ASSY	X 1	423.90	100.00	0.00	Replace	Repair	No R
			PIXEL STICKER	✓ 2	60.00 (120)	0.00	120.00	Replace	Replace	No ✓
52462470 30			PAD, RR BUMPER, RH & LH, 1	X 2	3.80 (7.60)	25.00	5.70	Replace	Check	No Y
52462470 20			PAD, RR BUMPER, RH & LH, 2	X 2	3.80 (7.60)	25.00	5.70	Replace	Check	No X
52462470 10			PAD, RR BUMPER, RH & LH, 3	X 2	3.80 (7.60)	25.00	5.70	Replace	Check	No X
52191470 30			SEAL, RR BUMPER ARM, RH & LH	X 2	11.00 (22)	25.00	16.50	Replace	Check	No X
			SENSOR REVERSE	X 1	180.00	0.00	180.00	Replace	Check	No X
52023470 30			REAR BUMPER REINFORCEMENT	X 1	318.80	25.00	239.10	Replace	Check	No X
52453470 10			GUARD, RR BUMPER, LOWER	R 1	558.30	100.00	0.00	Replace	Repair	No R
52169470 20			COVER, GUARD RR BUMPER LOWER	X 1	14.80	25.00	11.10	Replace	Check	No X
52461470 10			PAD, RR BUMPER, CTR	X 3	2.20 (6.60)	25.00	4.95	Replace	Check	No Y
TOTAL MATERIALS								588.75	120.00	
TOTAL MATERIALS(Discounted)								588.75	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 /
 + 230.00 /

 550.00 /

Sebastian
27/13/18

2842.70



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



Thattham escribe

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18005515/Sqbe2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 11-04-2018	
Code: INC4			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SJK 1772Y	Veh. Inspected	SHC 4926S
Policy No.	5084652447-02	Coverage (\$)	0.00
Claim No.	MT/0988982-001	Excess (\$)	0.00
Assign From		Assign Date	20/03/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU903573315	Colour	MAROON
Odometer	75727	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	YOKOHAMA	6 mm
L/H Front Tyre	195/65 R15	YOKOHAMA	6 mm
R/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm
L/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	19/03/2018	Inspection Date	20/03/2018
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:		2 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4926S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
2	PAD, RR BUMPER, RH & LH, 1 @\$3.80	NOT NECESSARY	7.60	-
2	PAD, RR BUMPER, RH & LH, 2 @\$3.80	NOT NECESSARY	7.60	-
2	PAD, RR BUMPER, RH & LH, 3 @\$3.80	NOT NECESSARY	7.60	-
2	SEAL, RR BUMPER ARM, RH & LH @\$11.00	NOT NECESSARY	22.00	-
1	SENSOR REVERSE	NOT NECESSARY	180.00	-
1	REAR BUMPER REINFORCEMENT	NOT NECESSARY	318.80	-
1	COVER, GUARD RR BUMPER LOWER	NOT NECESSARY	14.80	-
3	PAD, RR BUMPER, CTR @\$2.20	NOT NECESSARY	6.60	-
1	COVER, RR BUMPER ASSY	TO REPAIR	423.90	-
1	GUARD, RR BUMPER, LOWER	TO REPAIR	558.30	-
			1,667.20	120.00
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		458.00	230.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		558.00	200.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			1,176.00	430.00
GRAND TOTAL			2,843.20	550.00
RECOMMENDED COST OF REPAIRS (CONFIRMED)				550.00

Report Ref No. NS/INC18005515/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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