AR REGISTERED

SMRT AUTOMOTIVE SERVICES PTE LTD

6 Ang Mo Kio Street 62 Singapore 569140 Tel: 65 6866 2652 Fax: 65 6368 7421 www.smrt.com.sg



NTUC INCOME INSURANCE CO-OP LTD 75 BRAS BASAH ROAD NTUC INCOME CENTRE SINGAPORE 189557

Attn: Motor Claims Dept

Date: 6 APRIL 2018

SMRT: BUS/03/18/5006/AW

NTUC: SJZ4006U

Dear Sirs,

ACCIDENT INVOLVING SMB345R AND SJZ4060U ON 3 MARCH 2018 ALONG PIE SLIP ROAD EXIT TO WHITLEY ROAD.

We claim on behalf of <u>SMRT BUSES LTD</u>, owner/hirer of the vehicle Reg. No.: <u>SMB345R</u>. Your driver's negligent driving has caused the above accident. As a result, my client has suffered the following losses:-

1.	Cost of Repair		:	\$ 2400.00		
2.	Loss of Use		:	\$ 875.00		
3.	Loss of Rental for days @ S\$ /day					
4.	Loss of Income for days @ S\$ /day					
5.	Police Report/ SAS Report/ LTA Search Fee			\$ 7.00		
6.	Survey Fee					
7.	Others		1			
		Total Claims	:	\$ 3282.00		
				=========		
We	enclose the following documents:					
/	Repair Invoice	Letter of Auth	orisa	ation		
	Survey Report /	LTA Search result				
	Photographspcs	Others:		T. Control of the Con		
	Investigation results 1.	Survey Done By NTUC's own appointed				
	Proof of Loss of Use/Rental/Income 2.	Survey Done By NTUC's own appointed Surveyor LKK. As retrieve Survey Reported Bus Photos Directly from LKK.				
/	Police / SAS report of 3.	Bus Photos	. 0	ireatly from LKK.		
We look forward to your confirmation to settle our claims within 15 days from the date of this letter. Payment by cheque shall be crossed and made payable to SMRT BUSES LTD						
Yours sincerely, SMRT AUTOMOTIVE SERVICES PTE LTD						

AUDREY WOO For Manager, Claims

Claims Department





Customer Code: 3000066

SMRT BUSES LTD

Block Unit STREET 62 6 ANG MO KIO SINGAPORE 569140



SMRT Automotive Services Pte Ltd 251 North Bridge Road Singapore 179102 Tel: 65 63311000 Fax: 65 63340247

Tax Invoice

GST Reg No. : MR-8500001-7 CRN : 199004280Z Invoice No. : IV180300730 Date : 28.03.2018

Vehicle No. : SMB345R Your Ref No. : BUS/03/18/5006

Our Ref No. : 24095094 Terms : 30 Days

Description	Qty	Unit	Add	/ (Discount)	Amount
		Cost	8	Amount	
LUMP SUM AMOUNT FOR REPAIR AS PER SURVEYOR'S RECOMMENDATION	1.00				\$ 2,400.00
			TO	TAL :	\$ 2,850.00
			LUMP SUM ADJUSTMENT BY		ENT BY
			CIT	RVEYOR -\$	4 E O O O
			50.	T(VIII)	450.00

Remark :

Make/Model : MAN A22 Accident Date : 03.03.2018

N.B. Payment by cheque should be crossed and made payable to 'SMRT Automotive Services Pte Ltd'. No receipt will be issued unless requested.

Authorised Signature

for SMRT Automotive Services Pte Ltd

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 <u>truthful and accurate</u> 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.
- 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.

aforesaid.		
	ACCIDENT STATEMENT	
Date Of Report	07/03/2018 09:16	
Date Of Accident	03/03/2018 20:20	
Exact Location Of Accident	PIE SLIP RD EXIT TO WHITLEY RD	
Country/State of Loss	SINGAPORE	
		W.X.
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	DETAILS OF OWN VEHICLE SMB345R	
Vehicle Registration Number		
Vehicle Registration Number Insured/Policyholder	SMB345R	

Alternative Phone No Vehicle Particulars

Mobile Phone No

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

OFFICE-64823888

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 SRI NAVEEN SUBRAMANIAN

 NRIC No
 G2773507Q

 Date Of Birth
 27/03/1989

 Occupation
 OUTDOOR

 Date Of Driving Pass
 12/02/2006

Driving Experience 12 YEARS AND 0 MONTHS

Gender MALE

Mobile Number
Fax Number

Contact Number

EMail Address NOEMAIL

Address NOADDRESS

Postcode

Was driver an employee of the Insured's Company YES

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

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

NO

Number of Passengers (Including Driver) 2

Details of Police Action

Was the accident reported to the police?

If Yes,Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Bus was traveling along PIE exit to Whiltley Rd heading to the bus stop (BS: 40239) Before Tanglin CC. while driving, I felt bus jerking and from the right view mirror, found that a vehicle SJZ4060U had collided onto the rear right side of the bus. For the alleged accident nobody was injured.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? NO Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJZ4006U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver RAMESH S/O RETNAN

NRIC/Passport Number

Contact Number 92333604

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

\searrow	<u> </u>			
SKETCH PLAN				Busslep
SKETCHT EAN		Whitley	kd	85:40239)
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	1			
DESCRIBE CIRCUMSTANCE	S) Z 40604 - PITA ES OF THE ACCIDENT			
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	Δ(2	1312 15	dilla soliti	
		,		
Addition to the state of the st				
				,
DECLADATION				
DECLARATION I/We declare the foregoing par	ticulars are true in every respect			
SUSSES LIO		P		
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policy	yholder)	Reporting Cent	re Personnel's Signature

Date & Time:

NRIC/FIN No.:

Enquire Transaction History

Transaction History Details

Log Date/Time:

12 Mar 2018 / 14:47:29

Asset Type:

Vehicle

Transaction Amount:

\$7.49

Asset ID:

SJZ4060U

HALIL

Transaction Type:

18.32 Insurance Enquiry (GIRO Payment) Channel:

External Agency

User ID:

ESASBAHO - BALQISH BINTE ABDUL

Business Transaction Reference No.:

20180312144729056709

Search Date / Time:

03 Mar 2018 20:19:00

Insurance Company:

NTUC INCOME INS CO-OP LTD

Information displayed is correct as at the log date and time.

Enquire Related Logs Back to List