

Summary

REF:

NS/INC18005561/Srbsv

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: GX 3332M

Policy No. 5013023487 - 11 010417 - 310318

Claims No. MY10967302 - 001

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

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

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

CA / REV / REP. / 24 HRS

Date: _____ Vehicle: IN / OUT

Person Contacted: _____

Date / Time | Action / Instruction

: SMB 15477 - X

: GX 3332M - GS/INC18005561/001

Confirm 8854.00, 2 days

Red: \$ 774, 62%

RECEIVED 08 JUN 2010

Veh No: SMB15477 Yr Regn: 17/12/2014

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

Truck / Trailer or

Make: Man NL320F C.C. 1057

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

Sp. Reading: 248179 T/Radio: Insured / Std / NI / NU

Eng/No: _____

C/No: WMAA22E6F702679

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 775/70R225

R: _____

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

TOYO / YOKO or Fire 29

Front R/Bal. 6 mm Rear R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 10/13/8/17 D.O.I. 31/8/17

Survey held at SMR

Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

Frnt O/S

The U/C / Chassis frame / Body Structure affected due to collision

Date/Time. File Pass to? : Preli. Report

: Final Report

1) topak Date/Time. File Return to?

2) _____

Report Format: 7P

Lump Sum / I.B.I.: (\$ 884)

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee: _____

Transportation: _____

S + RS: \$ _____

Phone: _____

Gears: _____

TOTAL

- Add Foo: : Site Insp (\$ _____)
- : Interview (\$ _____)
- : Tech. Invs (\$ _____)
- : Weekend (\$ _____)



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/INC18005561/Srb			
73 BRAS BASAH ROAD		Date: 26-03-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE			
189556			
Code: INC4			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	GX 3332M	Veh. Inspected	SMB 1547T
Policy No.	5013023487-11	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	31/08/2017
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	13/08/2017	Inspection Date	31/08/2017
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 : 08/06/2018

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	MT/0967302-001	SMRT	SMB 1547T	GX 3332M	13.08.2017	16:00	\$ 1,241.00	\$ 854.00

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)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5013023487-11	BUKIT TIMAH AUTO AIR- COND P/L	198001543K	GCV	Third Party	GX3332M	GX3332M	01/04/2017	31/03/2018

Janice Lee (LKKAuto)

From: Mei Kwan (LKKAuto)
Sent: Tuesday, March 20, 2018 2:56 PM
To: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses); Kenneth Ho
Cc: SUR; assignments; Admin A; Celine Fong (LKKAuto); Sebastian Yeang (LKK Auto); Olivia Lau (LKKAuto)
Subject: RE: Bus Photos : SMRT BUS/08/17/7028/AW , SMB1547T - NTUC
MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD

Dear Audrey / Kenneth,

21/8/17

We will expedite the report.

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)

~~AKC 4850~~

From: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses) [mailto:audrey@smrt.com.sg]
Sent: Tuesday, 20 March, 2018 2:54 PM
To: Kenneth Ho <kenneth.ho@income.com.sg>
Cc: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Subject: Bus Photos : SMRT BUS/08/17/7028/AW , SMB1547T - NTUC MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD
Importance: High

Dear Kenneth,

Our records show survey was indeed done and finalized by LKK Sebastian.

Dear Mei Kwan,

Please refer to my email to you dated Tue 20/3/2018 2:46 pm and follow up with Sebastian for the survey report.

Please email Kenneth the survey report once available.

Audrey Woo
Claims Department
DID : 6866 2651
FAX : 6368 7421
Email : audrey@smrt.com.sg

SMRT Buses Ltd

6 Ang Mo Kio Street 62 Singapore 569140



From: Kenneth Ho [<mailto:kenneth.ho@income.com.sg>]
Sent: Tuesday, 20 March, 2018 2:10 PM
To: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses)
Subject: RE: Bus Photos : SMRT BUS/08/17/7028/AW , SMB1547T - NTUC MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD

Hi Audrey,

Please advise if survey was conducted by LKK? Thanks.

Thanks and best regards,



Kenneth Ho
Senior Executive, Motor Insurance
t: (65) 6430 7929
www.income.com.sg



This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

From: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses) [<mailto:audrey@smrt.com.sg>]
Sent: Tuesday, March 20, 2018 11:37 AM
To: Kenneth Ho <kenneth.ho@income.com.sg>
Subject: Bus Photos : SMRT BUS/08/17/7028/AW , SMB1547T - NTUC MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD

[BUS/08/17/7028/AW](#)
[NTUC MT/CA/TP/003/0967302-001/KH/VU](#)

Dear Kenneth,

Above attached are the damaged bus photos as requested. As for survey report, kindly retrieve it directly from from NTUC's appointed surveyor LKK.

Audrey Woo
Claims Department
DID : 6866 2651

FAX : 6368 7421

Email : audrey@smrt.com.sg

SMRT Buses Ltd

6 Ang Mo Kio Street 62 Singapore 569140



From: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses)

Sent: Tuesday, 20 March, 2018 9:54 AM

To: Admin A (admin-a@lkkauto.com); LKK Jas Khine; 'vivianlau@lkkauto.com'; zayyer@lkkauto.com

Cc: 'Kenneth Ho'

Subject: SMRT BUS/08/17/7028/AW , SMB1547T - NTUC MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD

[BUS/08/17/7028/AW](#)

[NTUC MT/CA/TP/003/0967302-001/KH/VU](#)

Dear LKK Officers,

Please email Kenneth and Audrey the survey report with damaged bus photos for bus SMB1547T. Thank you.

Audrey Woo

Claims Department

DID : 6866 2651

FAX : 6368 7421

Email : audrey@smrt.com.sg

SMRT Buses Ltd

6 Ang Mo Kio Street 62 Singapore 569140



From: Kenneth Ho [<mailto:kenneth.ho@income.com.sg>]

Sent: Monday, 19 March, 2018 11:20 PM

To: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses)

Subject: RE: SMRT BUS/08/17/7028/AW , SMB1547T - NTUC MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD

'WITHOUT PREJUDICE'

Hi,

Please assist to revert with the damaged pictures of your bus, SMB1547T. Thanks.

Thanks and best regards,



Kenneth Ho
Senior Executive, Motor Insurance
t: (65) 6430 7929
www.income.com.sg



This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

From: Audrey Woo (Auto Svcs/Ext Biz Svcs/Claims & IA/Buses) [<mailto:audrey@smrt.com.sg>]
Sent: Tuesday, March 13, 2018 9:15 AM
To: Kenneth Ho <kenneth.ho@income.com.sg>; NTUC Income Motor Dept <motor@income.com.sg>
Subject: SMRT BUS/08/17/7028/AW , SMB1547T - NTUC MT/CA/TP/003/0967302-001/KH/VU , GX3332M - DOA 13 AUG 2017 - CCK ROAD

BUS/08/17/7028/AW
MT/CA/TP/003/0967302-001/KH/VU

Good Morning Kenneth,

Above attached LOD and accident scene photos refer. Kindly let us have your offer to settle soon. Thank you.

Audrey Woo
Claims Department
DID : 6866 2651
FAX : 6368 7421
Email : audrey@smrt.com.sg

SMRT Buses Ltd

6 Ang Mo Kio Street 62 Singapore 569140



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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 willful 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 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	15/08/2017 09:28
Date Of Accident	13/08/2017 16:00
Exact Location Of Accident	CHOA CHU KANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB1547T
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-88888888

Vehicle Particulars

Manufacturer	MAN
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	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-17087563MFBP
Cover Note Number	

Driver

Name of Driver	TANG JUN
Passport No/FIN	G2897103L
Date Of Birth	28/01/1986
Occupation	OUTDOOR
Date Of Driving Pass	27/12/2016
Driving Experience	0 YEAR AND 7 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address
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
Was any body injured in the Accident? 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) 25

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

REFER TO GIA

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera? YES
Remarks/ Reasons: PENDING FOR UPLOADING
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GX3332M
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

SKETCH PLAN

18/08/17 102P

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 Authorized Dealer.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to rescind the policy/void 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 information may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GAA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and first 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 if needed.
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 be 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 insurers who have insured vehicle(s) involved in this accident (all insurers) who have issued vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"; the Insurers' law yers/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 making 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 environmental packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



14/08/17

1651 WS

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

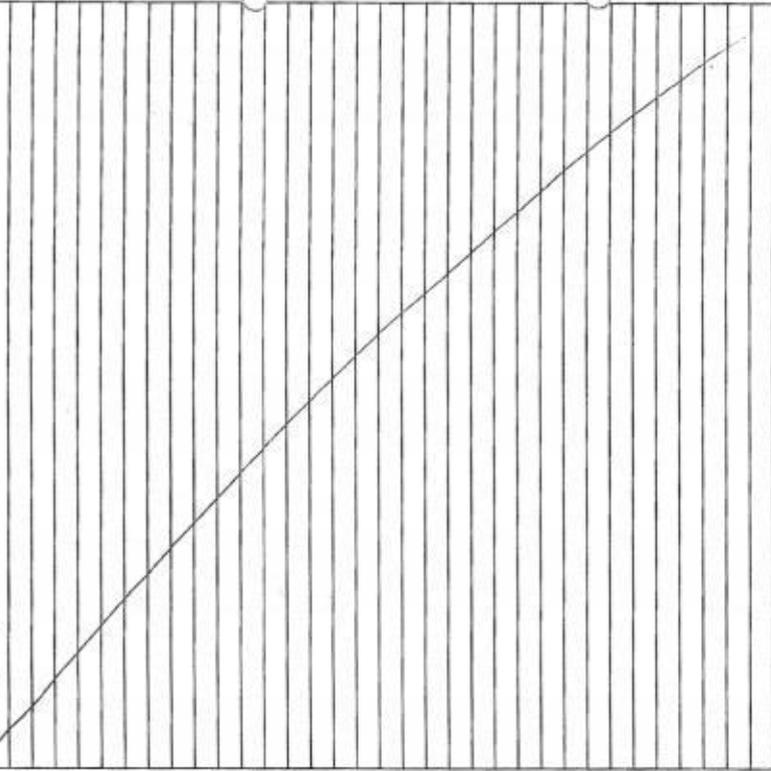
Chia On Keng (Lead)

Signature and stamp of Chio On Keng with ID number SM615477 and 33324.

Sketch Plan Pg. 2

Describe Circumstances of the Accident

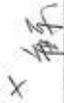
I was travelling along Choa Chu Kang Road on the extreme left lane, a Van at 3:32 PM from my right lane turned into the front of my bus and grazed adjacent my bus right front portion. No injury. That's all.



Declaration

We declare the foregoing particulars are true in every respect.



X 

Policyholder's Signature / Date & Time

14/8/17 16:51 hrs

Driver's Signature / Date & Time



Witnessed by Reporting Centre Personnel

[> Back to OneMotoring](#)**Enquire Transfer Fee**

Vehicle Details			
Vehicle No.:	SMB1547T		
Vehicle Type:	H20 - Public Transport Bus/Coach/Minibus		
Vehicle Attachment 1:	Air-Conditioned		
Vehicle Scheme:	OmniBus (SMRT - ARF-exempted)		
Vehicle Make:	MAN		
Vehicle Model:	NL 320F (A22) 11L AUTO ABS TURBO		
Chassis No.:	WMAA22ZZ6F7002494		
Propellant:	Diesel		
Engine No.:	50338932903902		
Engine Capacity:	10518 cc		
Maximum Power Output:	-		
Maximum Laden Weight:	18000 kg		
Unladen Weight:	11280 kg		
Year Of Manufacture:	2014		
Original Registration Date:	17 Dec 2014		
Lifespan Expiry Date:	16 Dec 2031		
Road Tax Expiry Date:	16 Dec 2018		
Inspection Due Date:	16 Dec 2018		
Intended Transfer Date:	08 Jun 2018		
CO2 Emission:	-		
CO Emission:	-		
HC Emission:	-		
NOx Emission:	-		
PM Emission:	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

You may print this page for reference.

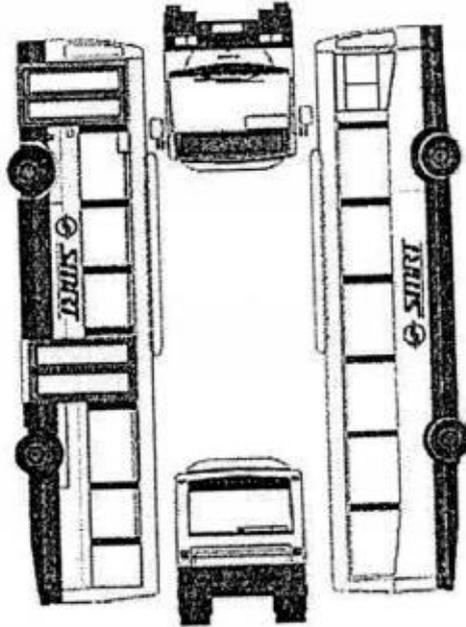
OK

Print

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SMB1547T
Ref. No : BUS/08/17/7028
Reg. Date : 17/12/2014
Vehicle Type : BUS -12M
Make : MAN
Model : MAN
Name of Driver : Tang Jun
Type of Accident : SIDE SWIPE
Date / Time of Accident : 13/08/2017 04:00:00 PM
Accident Reported Date / Time : 14/08/2017 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 : 000024092073
Special Instruction to ARC,if any :
RIGHT FRONT PORTION.
TP: GX3332M
Prepared Date : 15/08/2017 10:31:08 AM



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

Chassis No : WMAA22ZZ6F7002494

Mileage :

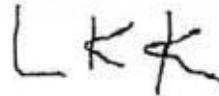
0

Work Shop :

Repair Completed Date / Time : 01/01/2000

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 795.00	530.00
Total Spray Painting Charges	: 446.00	324.00
Total Material Charges	: 0.00	0.00
Other Charges	: 0.00	0.00
TOTAL	: 1,241.00	854.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 3.00	2.00
Prepared / Adjusted By	: Goh Kok Khoon	Sebastian Yeang
Arc / Surveyor Sing Off Date	: 31/08/2017 02:05:22 PM	31/08/2017 02:05:44 PM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 31/08/2017 02:05:22 PM

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

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

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	795.00	530.00
Total Labour	795.00	530.00

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	446.00	324.00
Total Spray Painting & Panel Beating	446.00	324.00

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

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

530
+ 324

854

Sebastian
2/10/2017

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommended	Surveyor Approved	Photos Attached	
TOTAL MATERIALS											
TOTAL MATERIALS(Discounted)								0.00	0.00		

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										



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/INC18005561/Srbs2			
73 BRAS BASAH ROAD		Date: 08-06-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	GX 3332M	Veh. Inspected	SMB 1547T
Policy No.	5013023487-11	Coverage (\$)	0.00
Claim No.	MT/0967302-001	Excess (\$)	0.00
Assign From		Assign Date	31/08/2017
2. Vehicle Particulars & Condition			
Make & Model	MAN NL 320F	c.c	10518
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	WMAA22ZZ6F7002494	Colour	MULTI-COLOUR
Odometer	248174	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions 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	FIRENZA	6 mm
L/H Rear Tyre	275/70 R22.5	FIRENZA	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	13/08/2017	Inspection Date	31/08/2017
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	



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



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMB 1547T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	TO REPAIR RH FRONT PORTION.		795.00	530.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		446.00	324.00
			1,241.00	854.00
	GRAND TOTAL		1,241.00	854.00
	RECOMMENDED COST OF REPAIRS (CONFIRMED)			854.00

Report Ref No. NS/INC18005561/Srbs2

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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