

REF:

N3/WC18007403/3002

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop n/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

(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 Report:

GIA / PR Seen:

Est. Repairs:

Lump Sum:

Consistent? : Yes or No

Consistent? : Yes or No

Res.: Yes or No

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

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

Truck / Trailer or

Make:

Colour

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Yr Regn:

c.c. 1798

A/C: Insured / Std / NI / NA

T/Radio: Insured / Std / NI / NA

Date / Time

Action / Instruction

SHB 1772T

SLG 5592X

CR2/MXA/18001031/R/Wed

X

Def: 0-01-08

TAX/04/18/2017

LKK

NIMS

US \$ 800 (Red K 4672 39 852)

SLG 5592X

RECEIVED 10 MAY 2018

Date/Time. File Pass to?

18/5 2018

Date/Time. File Return to?

2:

Report Format:

Lump Sum / I.B.A. (S)

☐ : Preli. Report☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation

) \$ - RS - SI

: Photos

: Others

TOTAL

160
35

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/INC18007405/Sqb			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 23-04-2018	
Code: INC4			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLG 5592X	Veh. Inspected	SHB 1772T
Policy No.	5094734929	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	19/04/2018
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	19/04/2018	Inspection Date	19/04/2018
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

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
1	MT/0994868-001	SMRT TAXIS PTE LTD	SHB 522E	SIQ 2939X	17/04/2018
2	MT/0991087-002	SMRT TAXIS PTE LTD	SHB 1772T	SLG 5592X	19/04/2018
3	MT/0983942-002	SMRT TAXIS PTE LTD	SHB 687M	YN 5496A	26/2/2018
4	MT/0992660-002	SMRT TAXIS PTE LTD	SHC 4568S	SIL 9197A	1/5/2018
5	MT/0992640-002	SMRT TAXIS PTE LTD	SHB 1108L	PC 2403C	30/4/2018
6	MT/0993012-002	SMRT TAXIS PTE LTD	SHB 8Z	SKA 5770S	2/5/2018
7	MT/0992770-002	SMRT TAXIS PTE LTD	SHC 4741H	SHC 6357X	3/5/2018

eBaoTech

General Claim

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 checked="" type="radio"/>	5094734929	JASON TRANSPORT SERVICE	53322765L	GPC	drivo CLASSIC	SLG5592X	SLG5592X	05/10/2017	04/10/2018

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	19/04/2018 13:05
Date Of Accident	19/04/2018 09:30
Exact Location Of Accident	ROBINSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB1772T
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-800000000

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-18090213MFSH
Cover Note Number	

Driver

Name of Driver	TOH THIAM POH
NRIC No	S6807365J
Date Of Birth	29/02/1968
Occupation	OUTDOOR
Date Of Driving Pass	22/02/1989
Driving Experience	29 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	631
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)	2
Passenger 1	
	NAME: : UNKNOWN
	GENDER: : FEMALE

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 ROBINSON ROAD AT THE SECOND RIGHT LANE WITH A PASSENGER ON BOARD AND HAD STOPPED DUE TO TRAFFIC WAS CONGESTED AHEAD. AFTERWHICH, I FELT AN IMPACT FROM BEHIND, THE VEHICLE SLG5592X FROM BEHIND 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	SLG5592X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SNG XU LIANG
NRIC/Passport Number	S8301742B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLANIMPORTANT 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.



Policyholder's Signature
Date & Time:

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

Date & Time: 19/4/18 13:04pm

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

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHB1772T
Vehicle to be Exported:	No
Intended De-registration Date:	23 Apr 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR1429137
Chassis No.:	JTDKN36U805752635
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	10 Nov 2014
First Registration Date:	10 Nov 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Nov 2022
PARF Rebate Amount:	\$6,066.00
Intended COE Rebate Details	
COE Expiry Date:	09 Nov 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$51,337.00
COE Rebate Amount:	\$29,175.00
Total Rebate Amount:	\$35,241.00
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 23 Apr 2018

OK

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHB1772T
 Ref. No : TAX/04/18/2097
 Reg. Date : 10/11/2014
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : TOH THIAM POH
 Type of Accident : HEAD TO REAR
 Date / Time of Accident : 19/04/2018 09:30:00 AM
 Accident Reported Date / Time : 19/04/2018 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 : 000024095639
 Special Instruction to ARC, if any :
 SLG5592X
 Prepared Date : 19/04/2018 01:36:03 PM



Sebastian
 19/4/18 -
 - Lnp Sun Repair
 - Question mark Jtuy
 Photo
 - Photo After 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 : JTDKN36U805752635

Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 845.00	0.00
Total Spray Painting Charges	: 738.00	0.00
Total Material Charges	: 2,192.08	2,192.08
Other Charges	: 400.00	0.00
TOTAL	: 4,175.08	0.00
Lum Sum Total	: 4,200.00	0.00
No. of Repair Days	: 5.00	0.00
Prepared / Adjusted By	:	2 days
Arc / Surveyor Sign Off Date	: 19/04/2018 03:38:00 PM	01/01/1900 12:00:00 AM

Prepared / Adjusted Date :

Remarks :

Prepared Date : 19/04/2018 03:37:46 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 REAR PORTION	845.00	0.00 200
Total Labour	845.00	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 REAR PANEL	180.00	0.00 7
TO RESPRAY BUMPER BEAM	180.00	0.00 7
Total Spray Painting & Panel Beating	738.00	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 30
TO INSPECT RR LIGHTING, MECHANISMS & WATER TEST RR LIGHTING FOR LEAKAGE	120.00	0.00 X
TO REPLACE SUNDRY PARTS	100.00	0.00 X
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	400.00	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
52159-47905		6505548	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace <i>R</i>	No
52161-16010			BUMPER CLIPS	10	1.61	25.00	12.07	Replace	Replace <i>NEC</i>	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace <i>NX</i>	No
52023-12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.27	Replace	Replace <i>N</i>	No
52016-47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Replace <i>N</i>	No
52015-47050			ARM SUB-ASSY, RR BUMPER RH	1	139.60	25.00	104.70	Replace	Replace <i>N</i>	No
89997-30070			ANTENNA, ELECTRICAL LOWER REAR	1	157.40	10.00	141.66	Replace	Replace <i>N</i>	No
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace <i>N</i>	No
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10	Replace	Replace <i>N</i>	No
52575-47020		6505549	BUMPER SIDE RETAINER RR/RH	1	94.80	25.00	71.10	Replace	Replace <i>N</i>	No
76891-47020		6505619	BUMPER LIP REAR	1	228.90	25.00	171.67	Replace	Replace <i>N</i>	No
58308-47011			UNDER COVER SUB-ASSY, RR FLOOR	1	514.50	25.00	385.87	Replace	Replace <i>N</i>	No
58307-47060		6505522	END PANEL	1	602.10	25.00	451.57	Replace	Replace <i>N</i>	No
64718-47031B0			END PANEL COVER, DECK TRIM HOLE	1	46.10	25.00	34.57	Replace	Replace <i>N</i>	No
64716-47031B0			END PANEL COVER, DECK TRIM, RR	1	121.10	25.00	90.82	Replace	Replace <i>N</i>	No
67881-47022			TAILGATE DOOR WEATHER STRIP	1	353.40	25.00	265.05	Replace	Replace <i>N</i>	No
	COMMO N	4006314	SEALANT SIKAFLEX	1	37.00	0.00	37.00	Replace	Replace <i>N</i>	No
TOTAL MATERIALS								2,740.14	2,740.10	
TOTAL MATERIALS(Discounted)								2,192.08	2,192.08	

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									

TAT

21-4-18 / 12:30

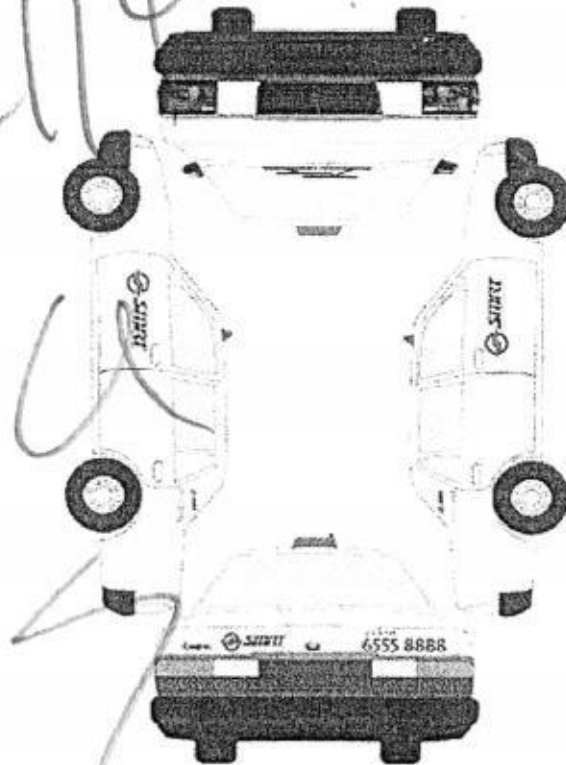
21-4-18 / 16:30

14-4-18 / 16:30

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHB1772T
Ref. No : TAX/04/18/2097
Reg. Date : 10/11/2014
Vehicle Type : TAXI
Make : TOYOTA PRIUS
Model : PRIUS
Name of Driver : TOH THIAM POH
Type of Accident : HEAD TO REAR
Date / Time of Accident : 19/04/2018 09:30:00 AM
Accident Reported Date / Time : 19/04/2018 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 : 000024095639
Special Instruction to ARC, if any :
SLG5592X NTUC 45
BEFORE PAINT PHOTO , AFTER REPAIR PHOTO ,FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL
SURVEYOR SEBASTIAN (LKK) & Email :sebastianyeang @lkkauto.com HP:90036121
LUMPSUM REPAIR
Prepared Date : 19/04/2018 01:36:03 PM



Recording Camera

☐ ☒

Radio Antenna

☐ ☒

1st witness

Date

14-4-18

2nd witness

Date

Vehicle to Wega Date In: 20/04	Towing:
Time In: 1200	Driver: TAT
Wega Job No: 04/0256	
Vehicle sent to SMART Date In: 21-4-2018	Towing:
Time In: 9:48	Driver:
Received by (SMART):	

QC 21/4/18 11.20 PMS

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

Chassis No : JTDKN36U805752635

Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges :	845.00	200.00
Total Spray Painting Charges :	738.00	200.00
Total Material Charges :	1,423.68	551.39
Other Charges :	400.00	-151.39
TOTAL :	3,406.68	800.00
Lum Sum Total :	0.00	0.00
No. of Repair Days :	5.00	2.00
Prepared / Adjusted By :		SEBASTIAN (LKK)
Arc / Surveyor Sign Off Date :	19/04/2018 03:38:00 PM	19/04/2018 04:30:39 PM

Prepared / Adjusted Date :

Remarks :

Prepared Date : 19/04/2018 03:37:46 PM

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

Quotation No : QN-1804-0654

Invoice No :

Quotation Date : 26/4

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	845.00	200.00 /
Total Labour	845.00	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 REAR PANEL	180.00	0.00
TO RESPRAY BUMPER BEAM	180.00	0.00
Total Spray Painting & Panel Beating	738.00	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 INSPECT RR LIGHTING, MECHANISMS & WATER TEST RR LIGHTING FOR LEAKAGE	120.00	0.00
TO REPLACE SUNDRY PARTS	100.00	0.00
TO WASH AND VACUUM	60.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-181.39
Total Other Costs	400.00	-151.39

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	100.00	0.00	Replace	Repair	No <i>R</i>
52161-16010			BUMPER CLIPS	10	1.61	25.00	12.07	Replace	Replace	No <i>NEC</i>
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace	No <i>NSC</i>
52023-12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.28	Replace	Replace	No <i>BT</i>
52016-47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Check	No <i>X</i>
52015-47050			ARM SUB-ASSY, RR BUMPER RH	1	139.60	25.00	104.70	Replace	Check	No <i>X</i>
89997-30070			ANTENNA, ELECTRICAL LOWER REAR	1	157.40	10.00	141.66	Replace	Check	No <i>X</i>
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Check	No <i>X</i>
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10	Replace	Check	No <i>X</i>
52575-47020		6505549	BUMPER SIDE RETAINER RR/RH	1	94.80	25.00	71.10	Replace	Check	No <i>X</i>
76891-47020		6505619	BUMPER LIP REAR	0	228.90	25.00	0.00	Replace	Not given	No <i>X</i>
58308-47011			UNDER COVER SUB-ASSY, RR FLOOR	1	514.50	25.00	385.88	Replace	Check	No <i>X</i>
58307-47080		6505522	END PANEL	1	602.10	25.00	451.58	Replace	Check	No <i>X</i>
64718-47031B0			END PANEL COVER, DECK TRIM HOLE	1	46.10	25.00	34.58	Replace	Check	No <i>X</i>
64716-47031B0			END PANEL COVER, DECK TRIM, RR	1	121.10	25.00	90.83	Replace	Check	No <i>X</i>
67881-47022			TAILGATE DOOR WEATHER STRIP	1	353.40	25.00	265.05	Replace	Replace	No <i>TR</i>
	COMMO N	4006314	SEALANT SIKAFLEX	1	37.00	0.00	37.00	Replace	Check	No <i>X</i>
TOTAL MATERIALS							2,224.51	551.40		
TOTAL MATERIALS(Discounted)							1,423.68	551.39		

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									

551.39
 + 200.00
 + 230.00

 981.39
 - 202

 785.11

45 \$800/-
 Sec 17.21(2)
 11/5/18
 5492.70



Thatcham escribe


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/INC18007405/Sqbn2	
73 BRAS BASAH ROAD		Date: 23-05-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE			
189556		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLG 5592X	Veh. Inspected	SHB 1772T
Policy No.	5094734929	Coverage (\$)	0.00
Claim No.	MT/0991087-002	Excess (\$)	0.00
Assign From		Assign Date	19/04/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	JTDKN36U805752635	Colour	MAROON
Odometer	396580	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	6 mm
L/H Front Tyre	195/65 R15	FALKEN	6 mm
R/H Rear Tyre	195/65 R15	FALKEN	6 mm
L/H Rear Tyre	195/65 R15	FALKEN	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	19/04/2018	Inspection Date	19/04/2018
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	

**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. SHB 1772T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
10	BUMPER CLIPS @\$1.61 (DISC 25%)	NECESSARY	16.10	12.07
1	BUMPER REINFORCEMENT REAR (DISC 25%)	BENT	205.70	154.28
1	TAILGATE DOOR WEATHER STRIP (DISC 25%)	TORN	353.40	265.05
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	ARM SUB-ASSY,RR BUMPER LH	NOT NECESSARY	139.60	-
1	ARM SUB-ASSY,RR BUMPER RH	NOT NECESSARY	139.60	-
1	ANTENNA ELECTRICAL LOWER REAR	NOT NECESSARY	157.40	-
1	SENSOR REVERSE	NOT NECESSARY	180.00	-
1	BUMPER SIDE RETAINER RR/LH	NOT NECESSARY	94.80	-
1	BUMPER SIDE RETAINER RR/RH	NOT NECESSARY	94.80	-
1	BUMPER LIP REAR	NOT NECESSARY	228.90	-
1	UNDER COVER SUB-ASSY,RR FLOOR	NOT NECESSARY	514.50	-
1	END PANEL	NOT NECESSARY	602.10	-
1	END PANEL COVER,DECK TRIM HOLE	NOT NECESSARY	46.10	-
1	END PANEL COVER,DECK TRIM,RR	NOT NECESSARY	121.10	-
1	SEALANT SIKAFLEX	NOT NECESSARY	37.00	-
1	BUMPER REAR	TO REPAIR	458.60	-
			3,509.70	551.40
LABOUR				
THATCHAM STANDARD REPAIR TIME ON BODY WORKS.			1,085.00	230.00
THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.			738.00	200.00
TO REPLACE SUNDRY PARTS.			100.00	-
TO WASH AND VACUUM.			60.00	-
			1,983.00	430.00
GRAND TOTAL			5,492.70	981.40
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				800.00

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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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