

REF: N3/2NC18008071 / Subn2

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: SJL 9197A

Policy No: 5090844737 26042018

Claims No: MT/0992660-002

Sum Insured: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Est. or Market Value: _____

IDAC Accident Report: _____

GIA / PR Seen: _____

Est. Repairs: _____

Turn Sum: _____

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHC 45685 Yr Regn: 3/9/14

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

Truck / Trailer or _____

Make: Toyota Prius

Colour: maroon

Sp. Reading: 31377

Eng/No: _____

C/No: JTDKN 324 605748005

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: 195/65R15

R: _____

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

TOYO / YOKO or

Falken

Front

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 115/18

Rear

R/Bal. 6 mm

L/Bal. 6 mm

D.O.I. 215/18

Survey held at

SMRT

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

O/S Frt

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

Date / Time Action / Instruction

SHC 45685 - NG/MCH/5018954/King2

DA: 03/11/15

DA: 10/5/11

TAX/05/18/2004

Lik

WUC

16/5/18 Sebastian confirmed LS \$1800 (Red 3985.80, 69%)

RECEIVED 18 MAY 2018

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

Date/Time, File Return to?

18/5-typst

Report Format :

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

TP
1800/p

Days Of Repair: 3

Resurvey No. of Trip: 2

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

Survey Fee: 160
Transportation: 35

S + RS \$

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/INC18008071/Svb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 03-05-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJL 9197A	Veh. Inspected	SHC 4568S
Policy No.	5090844737	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	02/05/2018

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	01/05/2018	Inspection Date	02/05/2018
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	SJQ 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	SJL 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

GeneralClaim

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"/>	5090844737	GRABUBER	53338474E	GFT	drivo CLASSIC	SJL9197A	SJL9197A	26/04/2018	

Veron Chen (LKKAuto)

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC) <YeoPohsuan@smrt.com.sg>
Sent: Thursday, 17 May 2018 11:02 AM
To: Sebastian Yeang (LKK Auto)
Cc: SUR; CS A Team; 'Leong Chee kwong'
Subject: RE: SHC4568S

Hi

Amount confirmed as per your recommendation, thanks.

Regards
Poh Suan

-----Original Message-----

From: Sebastian Yeang (LKK Auto) [mailto:SebastianYeang@lkkauto.com]
Sent: Wednesday, 16 May 2018 10:19 AM
To: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)
Cc: SUR; CS A Team; 'Leong Chee kwong'
Subject: RE: SHC4568S

Dear Poh Suan

Please refer to attachment for the finalization.

Thank You

Best Regards,
Sebastian | Automotive Assessor
LKK Auto Consultants
phone: 6256-3561 email: sebastianyeang@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi
Avenue 1, #02-25 | S(408933)

-----Original Message-----

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC) [mailto:YeoPohsuan@smrt.com.sg]
Sent: Monday, 14 May 2018 6:15 PM
To: Sebastian Yeang (LKK Auto)
Cc: SUR; CS A Team; 'Leong Chee kwong'
Subject: SHC4568S

Hi Sebastian,

Attached herewith the repair estimate of SHC 4568S having Case No: TAX/05/18/2001.

There is no change to the approved amount of \$1,800 @ 3 working days under lump sum repair.

Cost of Repair invoice will be generated as approved.

Please finalize with me within 7 working day, thanks.

Aside Kwong,

Please provide the before / after paint photos as per surveyor's request.

Thanks & Regards
Poh Suan

-----Original Message-----

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)

Sent: Monday, 14 May 2018 2:11 PM

To: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC)

Subject: Scan Data from FX-D421D6

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 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	02/05/2018 09:32
Date Of Accident	01/05/2018 21:55
Exact Location Of Accident	WOODLANDS CHECKPOINT TOWARDS TAXI STAND
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4568S
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	RAMESH S/O BATUMALAI
NRIC No	S6979763F
Date Of Birth	23/09/1969
Occupation	OUTDOOR
Date Of Driving Pass	13/02/1996
Driving Experience	22 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	01/
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF
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?	
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 WOODLANDS CHECKPOINT TOWARDS THE TAXI STAND, SUDDENLY A VEHICLE SJL9197A CUT ACROSS THE CHEVRON MARKING FROM MY RIGHT AND COLLIDED ONTO THE RIGHT FRONT PORTION OF MY TAXI.

Attachment(s)

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

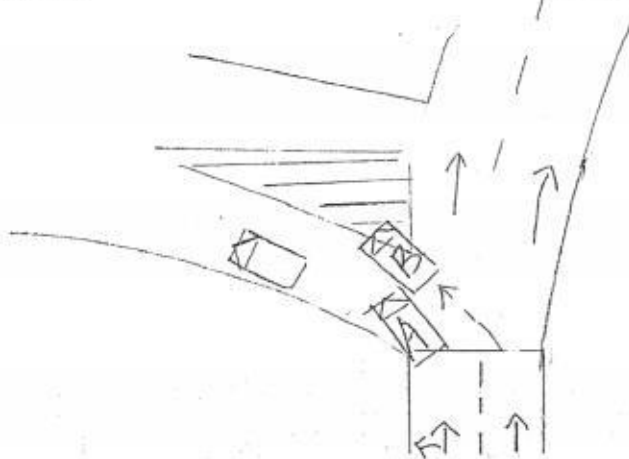
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJL9197A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Woodlands Checkpoint

A- 5HC45685

B - SJL 9197B

[illegible]

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

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

Page 3 of 9

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:

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.:	SHC4568S
Vehicle to be Exported:	No
Intended De-registration Date:	03 May 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR5908858
Chassis No.:	JTDKN36U605748003
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	03 Sep 2014
First Registration Date:	03 Sep 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 Sep 2022
PARF Rebate Amount:	\$6,066.00

Intended COE Rebate Details

COE Expiry Date:	02 Sep 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,704.00
COE Rebate Amount:	\$27,448.00
Total Rebate Amount:	\$33,514.00

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 03 May 2018

OK

SMRT Accident Vehicle Repair Estimates

NTUC

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

Reg. No : SHC4568S
 Ref. No : TAX/05/18/2001
 Reg. Date : 03/09/2014
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : RAMESH S/O BATUMALAI
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 01/05/2018 09:55:00 PM
 Accident Reported Date / Time : 02/05/2018 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by :
 Vehicle is Towed Back? : Yes
 Towed Back Date/Time : 01/05/2018
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024095835
 Special Instruction to ARC, if any :
 SJL9197A
 Prepared Date : 02/05/2018 09:39:42 AM



Sebastian
 2/5/18
 - Imp Sur Repair
 - Question Mark Item
 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 : JTDKN36U605748003

Mileage :

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates**Quotation from ARC****Adjusted by Surveyor, if applicable**

Total Labour Charges	:	676.00	0.00
Total Spray Painting Charges	:	756.00	0.00
Total Material Charges	:	2,443.50	2,443.50
Other Charges	:	585.00	0.00
TOTAL	:	4,460.50	0.00
Lum Sum Total	:	4,450.00	0.00
No. of Repair Days	:	5.00	0.00
Prepared / Adjusted By	:		3 days
Arc / Surveyor Sign Off Date	:	02/05/2018 01:05:39 PM	01/01/1900 12:00:00 AM

Prepared / Adjusted Date :

Remarks :

Prepared Date : 02/05/2018 01:05:39 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	676.00	0.00 400
Total Labour	676.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER	378.00	0.00 200
TO RESPRAY FRONT FENDER RH	378.00	0.00 200
Total Spray Painting & Panel Beating	756.00	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 30
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0.00 X
TO REPLACE SUNDRY PARTS	100.00	0.00 X
TO WASH AND VACUUM	60.00	0.00 X
TO PROVIDE LABOUR & MATERIAL FOR SOLAR FILM (NET)	125.00	0.00 X
TO REMOVE & REFIX FRONT LHS/RHS QUATER GLASS	120.00	0.00 X
Total Other Costs	585.00	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
52119-47930		6505517	BUMPER FRT	1	482.00	25.00	361.50	Replace	Replace	No <i>✓ Defr</i>
52115-47040		6505515	BUMPER SUPPORT F/RH	1	76.40	25.00	57.30	Replace	Replace	No <i>✓</i>
81511-47050			LENS & BODY, FR TURN RH	1	511.80	10.00	460.62	Replace	Replace	No <i>✓</i>
53102-47020		6505541	BUMPER GRILLE SUB-ASSY, LOWER	1	311.10	25.00	233.32	Replace	Replace	No <i>✓</i>
81130-47500		6505437	HEAD LAMP RH	1	945.20	10.00	850.68	Replace	Replace	No <i>✓ SCR</i>
53801-47050		6505557	FENDER FRT/RH	1	723.40	25.00	542.55	Replace	Replace	No <i>R</i>
75374-47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No <i>✓ NEX</i>
53875-47030		6505553	FENDER LINER FRT/RH	1	171.70	25.00	128.77	Replace	Replace	No <i>✓</i>
53851-47040			FENDER LINER PAD, FR WHEEL, RH	1	49.30	25.00	36.97	Replace	Replace	No <i>✓</i>
42602-47060		6505676	CAP SUB-ASSY, WHEEL	1	174.10	25.00	130.57	Replace	Replace	No <i>X</i>
62110-47021			QUARTER GLASS FRT/RH	1	234.90	25.00	176.17	Replace	Replace	No <i>X</i>
	COMMO N		SEALANT W/SCREEN	1	37.00	0.00	37.00	Replace	Replace	No <i>X</i>
TOTAL MATERIALS								3,054.40	3,054.37	
TOTAL MATERIALS(Discounted)								2,443.50	2,443.50	

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									



Attached
Supplementary

Green

5-5-18 / 09:58

5-5-18 / 13:58

SMRT Automotive Service Pte Ltd

60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

5-5-18 / 13:58

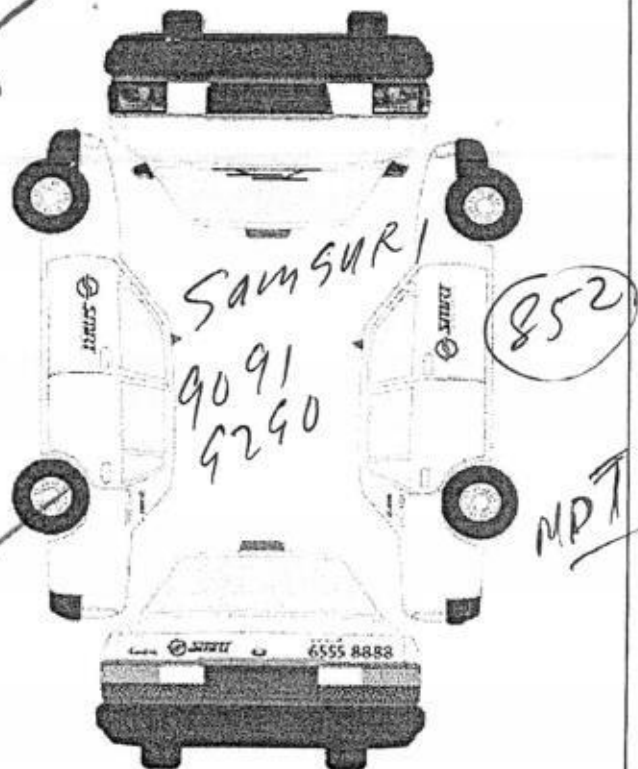
Section A - To be completed by claims Advisor/Duty officer at Accident Reporting Centre

Reg. No : SHC4568S
Ref. No : TAX/05/18/2001
Reg. Date : 03/09/2014
Vehicle Type : TAXI
Make : TOYOTA PRIUS
Model : PRIUS
Name of Driver : RAMESH S/O BATUMALAI
Type of Accident : SIDE SWIPE
Date / Time of Accident : 01/05/2018 09:55:00 PM
Accident Reported Date / Time : 02/05/2018 12:00:00 AM
Surveyor is Required? : Yes
Survey by : Sebastian
Vehicle is Towed Back? : Yes
Towed Back Date/Time : 01/05/2018
Replacement Vehicle issued? : No
Accident Repair Job Card No : 000024095835
Special Instruction to ARC, if any :

SJL9197A NTUC HS

BEFORE PAINT PHOTO AND AFTER PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR SEBASTIAN (LKK) & Email : sebastianyeang@lkkauto.com HP: 90036121
LUMP SUM REPAIR

Prepared Date : 02/05/2018 09:39:42 AM



QC 5/5/18 8.45 PMSS

Recording Camera

☒ ☐

Radio Antenna

☒ ☐

1st witness

Date 2-5-18

2nd witness

Date

E 1/2 F
KM 551796

Vehicle to Wega Date In: 2/5	Towing: _____
Time In: 16/4	Driver: _____
Wega Job No: 05/0272	
Vehicle sent to SMRT Date In: 4/04/18	Towing: _____
Time In: 15:57	Driver: 97
Received by (SMRT): _____	

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

Chassis No : JTDKN36U605748003

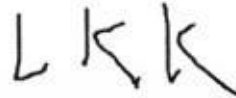
Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges :	676.00	400.00
Total Spray Painting Charges :	756.00	400.00
Total Material Charges :	1,387.58	1,416.85
Other Charges :	585.00	-416.85
TOTAL :	3,404.58 <i>5785.80</i>	1,800.00
Lum Sum Total :	0.00	0.00
No. of Repair Days :	5.00	3.00
Prepared / Adjusted By :		SEBASTIAN (LKK)
Arc / Surveyor Sign Off Date :	02/05/2018 01:05:39 PM	02/05/2018 01:58:32 PM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 02/05/2018 01:05:39 PM

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

Quotation No :	<i>QN-1805-0142</i>	Invoice No :	
Quotation Date :	<i>9/5</i>	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	676.00	400.00 /
Total Labour	676.00	400.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER	378.00	200.00 /
TO RESPRAY FRONT FENDER RH	378.00	200.00 /
Total Spray Painting & Panel Beating	756.00	400.00

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	30.00 /
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0.00
TO REPLACE SUNDRY PARTS	100.00	0.00
TO WASH AND VACUUM	60.00	0.00
TO PROVIDE LABOUR & MATERIAL FOR SOLAR FILM (NET)	125.00	0.00 NH
TO REMOVE & REFIX FRONT LHS/RHS QUATER GLASS	120.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-446.85
Total Other Costs	585.00	-416.85

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
52119-47930		6505517	BUMPER FRT	1	482.00	25.00	361.50	Replace	Replace	No <input checked="" type="checkbox"/>
52115-47040		6505515	BUMPER SUPPORT F/RH	1	76.40	25.00	57.30	Replace	Check	No <input checked="" type="checkbox"/>
81511-47050			LENS & BODY, FR TURN RH	1	511.80	10.00	460.62	Replace	Check	No <input checked="" type="checkbox"/>
53102-47020		6505541	BUMPER GRILLE SUB-ASSY, LOWER	1	311.10	25.00	233.33	Replace	Check	No <input checked="" type="checkbox"/>
81130-47500		6505437	HEAD LAMP RH	1	945.20	10.00	850.68	Replace	Replace	No <input checked="" type="checkbox"/>
53801-47050		6505557	FENDER FRT/RH	1	723.40	100.00	0.00	Replace	Repair	No <input checked="" type="checkbox"/>
75374-47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92	Replace	Replace	No <input checked="" type="checkbox"/>
53875-47030		6505553	FENDER LINER FRT/RH	1	171.70	25.00	128.78	Replace	Replace S	No <input checked="" type="checkbox"/>
53851-47040			FENDER LINER PAD, FR WHEEL, RH	1	49.30	25.00	36.98	Replace	Replace S	No <input checked="" type="checkbox"/>
42602-47060		6505676	CAP SUB-ASSY, WHEEL	0	174.10	25.00	0.00	Replace	Not given	No <input checked="" type="checkbox"/>
62110-47021			QUARTER GLASS FRT/RH	0	234.90	25.00	0.00	Replace	Not given	No <input checked="" type="checkbox"/>
	COMMON		SEALANT W/SCREEN	0	37.00	0.00	0.00	Replace	Not given	No <input checked="" type="checkbox"/>
TOTAL MATERIALS							3768.80	2,168.10	1,416.85	
TOTAL MATERIALS(Discounted)								1,387.58	1,416.85	

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									

1416.84 /
 + 400.00 /
 + 430.00 /

 2246.84 /
 - 20%

 1797.47 /
 US \$1800/- /

Sebastian
 16/5/18

**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



Thatcham escribe

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC18008071/Svbn2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 23-05-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJL 9197A	Veh. Inspected	SHC 4568S
Policy No.	5090844737	Coverage (\$)	0.00
Claim No.	MT/0992660-002	Excess (\$)	0.00
Assign From		Assign Date	02/05/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	JTDKN36U605748003	Colour	MAROON
Odometer	531797	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 O/S FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	01/05/2018	Inspection Date	02/05/2018
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.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4568S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BUMPER FRT (DISC 25%)	DEFORMED	482.00	361.50
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	51.90	38.92
1	FENDER LINER FRT/RH (DISC 25%)	MISSING	171.70	128.78
1	FENDER LINER PAD,FR WHEEL RH (DISC 25%)	MISSING	49.30	36.98
1	HEAD LAMP RH (DISC 10%)	SCRATCHED	945.20	850.68
1	BUMPER SUPPORT F/RH	NOT NECESSARY	76.40	-
1	LENS & BODY,FR TURN RH	NOT NECESSARY	511.80	-
1	BUMPER GRILLE SUB-ASSY,LOWER	NOT NECESSARY	311.10	-
1	CAP SUB-ASSY,WHEEL	NOT NECESSARY	174.10	-
1	QUARTER GLASS FRT/RH	NOT NECESSARY	234.90	-
1	SEALANT W/SCREEN	NOT NECESSARY	37.00	-
1	SOLAR FILM	NOT NECESSARY	125.00	-
1	FENDER FRT/RH	TO REPAIR	723.40	-
			3,893.80	1,416.86
LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		876.00	430.00
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		856.00	400.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			1,892.00	830.00
GRAND TOTAL			5,785.80	2,246.86
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,800.00

Report Ref No. NS/INC18008071/Svbn2

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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