23-21	ALADARE SI	1/2
	Type: M.Car/M.Cycle/Bus/Van/Lor	ry / (3) / Prime Mover /
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck/ Traffer or	
To inspect Vehicle No:	Make Toyota Prius 4.	00 1798
	Colour Maroan.	A/G Insured / Std / NI / NA
ar Workshop mis	Sp Reading 77394	TiRadio Insured / Std / NI / NA
Insured SLH 6218R	Eng/No:	
	21 14 24 /	571451
Policy No. 5086747382-01 3(1)17-2517 MT/0999341-003	Gen Cond Good / Par / Poor / Burnt	
ALCOHOLOGICAL CONTRACTOR SERVICE AND ARREST	Steering: Inoffer / Jammed / Leaked /	Burnt or
Sum insured Excess	Brake In@der / Jammed / Leaked /	
(Client's Record)	Modi Mil S/Rim / STD A/Rim or	
Make of Veh.	Tyre Size F: 195/65\$15	
	R: "I	
(Policy Condition) Remark The yeb had commenced its N/S O/S	71	MIC / OHTSU / PIR / SUMI /
Remark. The veh had commenced its N/S OR repair at the time of inspection.	TOYO/YØRO OF	mor on contract
()		Rear
Bat or Market Value IDAC Accident Roort Consistent? Yes or No	Front R/Bal. 6 mm	R/Bal. / mm
ILEAN, PRESIDENT CONTRACTOR	L/Bal 6 mm	L/Bal & mm
Similar In Joseph	D.O.A. 23/5/15.	001 30/5/18.
Est Repairs: days Res. Yes or No		20/10/18
Lum Sum: % 3 Val.: Yes or No.	0	I NUC I UIC I Peoffor of
CA / REV / REP. / 24 HRS	Des of Damages : Frt / Real / O/S	Mig Land Literators
Vehicle: IN / O Date Person Contacted.	The U/C / Chassis frame / Bod	Structure affected due to collision
Date / Time Action / Instruction		
		TA X/05/18/2119
Partby Part \$561.05		[le]e
(Red. 2447.15; 81%)		NTWC.
RECEIVED 6 JUL 201	3	SLH 621812
	8	
CasaTime File Fats to 1 : Preli. Report	Days Of Repair: 2	
67 TUDIST Final Report	Resurvey No. of Trip.	Survey Fee 160
Cate/Time File Fature 917	present of	Transportation 35
Add	the state of	1 J+Ri 5t
	Intervent 18	To the second se
Tb	The state of the second	V DALLE N

195

Lump Sum (7/13 561.25



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





NTUC INCOME INSURANCE CO-OPERATIVE LTD			Ref: NS/INC18010368/Stb				
		D UNION HOUSESINGAPORE	Date: 07-06-2018 Code: INC4				
1.		Policy Particulars	:- THIRD PARTY CLAIM				
	Insured Veh.	SLH 6218R	Veh. Inspected	SHF 130G			
	Policy No.	5086742382-01	Coverage (\$)	0.00			
	Claim No.		Excess (\$)	0.00			
	Assign From		Assign Date	30/05/2018			
2.		Vehicle Parti	culars & Condition				
	Make & Model		c.c 0				
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour				
	Odometer		Steering				
	Brakes		Modification				
	General						
3.		Condit	ions 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.		Descripti	ion of Damages	And the second			
5.		Genera	al Information				
-	Accident Date	27/05/2018	Inspection Date	30/05/2018			
	Survey held at	AND					
	(a)	60 WOODLANDS INDUSTRIAL	PARK E4 SINGAPORE 757	705			
5a.			Remarks				
DOM:	A)THE INSPECTION	ON WAS CONDUCTED ON A"WI	THOUT PREJUDICE" BASIS	D REPAIRS.			

eBaoTech									Gener	ralClaim
Hello, NAC_PAYA_UBI_80	0601						Change La	nguage	· Change Passwore	d • Log Out
My Desktop	Poli	cy Query								
Notice of Loss	Policy !	No.				Date of Acc	ident	27/05	/2018 13:45	
	Vehicle	No.(For Motor)	SLH6218R							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5086742382-01	KHOO CHUAN CHUEN	S8919137H	GPC	drivo PREMIUM	SUH6218R	SLH6218R	26/12/2017	25/12/2018
					I	Continue				

Denise Tay (LKKAuto)

From:

mtreg <mtreg@income.com.sg>

Sent:

Friday, 6 July 2018 3:42 PM

To:

Denise Tay (LKKAuto)

Subject:

FW: REQUEST CLAIM NUMBER

Hi,

Claim created

With Regards

Samsia

Senior Admin Assistant, Motor Insurance www.income.com.sg











From: Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]

Sent: Friday, July 06, 2018 2:16 PM
To: mtreg <mtreg@income.com.sg>
Subject: REQUEST CLAIM NUMBER

Dear Sir,

TP Claims against NTUC Income: Follow-Through Survey

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Da
5/110	MT/0999341-003	SMRT TAXIS PTE LTD	SHF 130G	SLH 6218R	

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>denisetay@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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 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,

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

28/05/2018 12:26

Date Of Accident

27/05/2018 11:25

Exact Location Of Accident

RIVER VALLEY ROAD TOWARDS ALEXANDRA ROAD

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHF130G

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

Type Of Coverage

MS FIRST CAPITAL INSURANCE LTD THIRD PARTY FIRE AND/OR THEFT

YES

Fleet Policy Policy Number

D-18090213MFSH

Cover Note Number

Driver

Name of Driver

LEAN CHEONG SOON

NRIC No

S1560961C

Date Of Birth

26/01/1962

Occupation

OUTDOOR

Date Of Driving Pass

30/05/1994

Driving Experience

23 YEARS AND 11 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-80000000

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

12-56

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

NO

Was any body injured in the Accident? 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:

: MALE

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 STATIONARY ALONG RIVER VALLEY ROAD TOWARDS ALEXANDRA ROAD WITH ONE PASSENGER (MALE CHINESE) ON BOARD AS IT WAS THE RED TRAFFIC LIGHT. SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SLH6218H HAD COLLIDED ONTO THE REAR 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

SLH6218R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

KHOO CHUAN CHEN

NRIC/Passport Number

S8919137H

PRIVATE CAR

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage No. Of Passenger (Including Driver)

	Sketch Plan Pg. 1	
SKETCH PLAN	River Valley Rd towords	Alexanola Rd. A-SHF130G % B-SLH6218R
DESCRIBE CIRCUMSTANCES	T T T T T T	
ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	

DECLARATION - 14.1

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

Policyholder's Signature Date & Time:

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

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No...

Sketch Plan Pg. 2

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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.:

1,

> Back to OneMotoring

ehicle Owner Particulars wner ID Type:	Company
wner ID:	5369K
ehicle Details	
ehicle No.:	SHF130G
chicle to be Exported:	No
tended De-registration Date:	07 Jun 2018
phicle Make:	TOYOTA
chicle Model:	PRIUS HYBRID 1.8 CVT
imary Colour:	Maroon
anufacturing Year:	2017
ngine No.:	2ZRS100824
nassis No.:	JTDKB3FU603573451
aximum Power Output:	90.0 kW (120 bhp)
pen Market Value:	\$29,007.00
riginal Registration Date:	01 Nov 2017
rst Registration Date:	01 Nov 2017
ransfer Count:	0
ctual ARF Paid:	\$5,000.00
tended PARF Rebate Details	
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	31 Oct 2025
ARF Rebate Amount	\$3,750.00
ntended COE Rebate Details	
OE Expiry Date:	31 Oct 2025
OE Category:	A - Car up to 1600cc & 97kW (130bhp)
OE Period(Years):	8
QP Paid:	\$33,596.00
OE Rebate Amount:	\$31,067.00
otal Rebate Amount:	\$34,817.00

The information contained herein is correct as at 07 Jun 2018

reaches its statutory lifespan (if applicable), whichever is earlier.

OK



60 Woodlands Industrial Park E4. Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

NTYC

ColP

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

Reg. No

SHF130G

Ref. No.

TAX/05/18/2119

Reg. Date

01/11/2017

Vehicle Type

TAXI

Make

TOYOTA PRIUS

Model

PRIUS4

Name of Driver

LEAN CHEONG SOON

Type of Accident

HEAD TO REAR

Date / Time of Accident

27/05/2018 11:26:00 AM

Accident Reported Date / Time :

28/05/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Vehicle is Towed Back?

No

Towed Back Date/Time

0.20

Replacement Vehicle issued?

No

Accident Repair Job Card No :

000024096310

Special Instruction to ARC, if any :

SLH6218H

Prepared Date

28/05/2018 12:36:21 PM

Sebastian. 30/5/18.

- Part by part regain.

- Question Mark I year

Photo

- Photo Refore Paint



K 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: JTDKB3FU603573451

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

338.00

0.00

Total Spray Painting Charges

558.00

0.00

Total Material Charges

1,504.78

1.504.78

Other Charges

260.00

0.00

TOTAL

2.660.78

0.00

Lum Sum Total

0.00

No. of Repair Days

0.00

0.00

Prepared / Adjusted By

3.00

5 gans

Arc / Surveyor Sing Off Date

28/05/2018 02:20:25 PM

01/01/1900 12:00:00 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 28/05/2018 02:20:21 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 : 0.00

Prepared Date:

5/28/2018 2:21:58 PM

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	0.06. 200		
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	0.00 200	
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 CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00 ×		
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00, 30		
TO WASH AND VACUUM	60.00	0.00 ×		
Total Other Costs	260.00	0.00		

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
52159479 13			COVER, RR BUMPER ASSY	1	423.90	25.00	317.92	Replace	Replace R	No X
52161160 10			CLIPS PIECE, FRT & RR BUMPER	10	1.50	25.00	11.25	Replace	Replace N	No /
52462470 30			PAD, RR BUMPER, RH & LH , 1	2	3.80	25.00	5.70	Replace	Replace 5	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 🤈	Nox
52191470 30			SEAL, RR BUMPER ARM, RH & LH	2	11.00	25.00	16.50	Replace	Replace 1	No X
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace 7.	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace √ _N	€No ✓
52576470 40			RETAINER, RR BUMPER, LH	1	111.50	25.00	83.62	Replace	Replace	No×
52575470 40			RETAINER, RR BUMPER, RH	1	112.70	25.00	84.52	Replace	Replace	No×
52023470 30			REAR BUMPER REINFORCEMENT	1	318.80	25.00	239.10	Replace	Replace 7	No
52453470 10			GUARD, RR BUMPER, LOWER	1	558.30	25.00	418.72	Replace	Replace R	No
52169470 20			COVER, GUARD RR BUMPER LOWER	1	14.80	25.00	11.10	Replace	Replace X	NoX
52461470 10			PAD, RR BUMPER, CTR	3	2.20	25.00	4.95	Replace	Replace >	No X
		-	TOTAL MATERIALS					1,504.80	1,504.78	
		TOTAL	MATERIALS(Discour	nted)				1,504.78	1,504.78	

Added Spare Parts / Material Usage After Surveyor Signed off

Hamber	TOTA	L SUPPLEMENTARY	MATERIA	ALS	(70)	(\$)		CHECK	CHECK
Part Number	Portion	Part Name	Qty	List Price	Discount (%)	/C)	ARC Check	Surveyor Check	LT Check

TAX/05/18/2119



1-6-18/14:14

60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

SMRT Accident Vehicle Repair Estimates

30-5-18/14:14

	- 1	^	30-3-18/14-14
Section A - To be comple	eted by claims Advisor/Duty of	icer at Accident Reporting	Centre
Reg. No	: SHF130G	16	
Ref. No	TAX/05/18/2119		
Reg. Date	01/11/2017		
Vehicle Type	TAXI		TA .
Make	TOYOTA PRIUS	0.	
Model	: PRIUS4	W	
Name of Driver	: LEAN CHEONG SOON	dD	Æ b
Type of Accident	: HEAD TO REAR	Suns.	nmux (
Date / Time of Accident	: 27/05/2018 11:26:00 AM		4
Accident Reported Date / T	ime: 28/05/2018 12:00:00 AM		
Surveyor is Required?	: Yes		
Survey by	: Schastian		! (O)
Vehicle is Towed Back?	: No	1000	
Towed Back Date/Time		1	
Replacement Vehicle issue	d?: No	Samu o	6355 8888
Accident Repair Job Card N	lo : 000024096310	No contract to the contract to	
Special Instruction to ARC,i	fany :		
SLH6218H HTML PIP BEFORE PAINT PHOTO, F & Email :sebastianyeang @	OR CHECK ITEM AND REPLACE	DE ITEM PLEASE CALL SUR	EVEYOR SEBASTIAN (LKK)
Prepared Date	: 28/05/2018 12:36:21 PN	0.0	Sauty.
1:05	1-6-18	pass.	ज्यवानु -
Recording Camera		V	
Radio Antenna			9-40-0
1 ⁵¹ witness	Date 30-1-18	shicle to Wega Date In: 30 3	Tsutep:(
2 nd witness	Date	Time In: 16	82 Delet 119.
1200		1 Job Ho: 65 0338	
		ju 000 1701.	2018 2 Towing:
		in the sent to SMRT Date In: \	2 Towing:
Ë	1/2 PF	Time In: 1	30 Drivar:
KM	75395	S	
Janua 12:01	20001	ed by (SMAT):	***************************************
01/06/18 17.060	LE reget		0
SENSOIT RAVACAGE	P1114 V		

Section B - 10 be Completed by Service Advisor, Accident Repair Centre

Chassis No: JTDKB3FU603573451

Mileage

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

338.00

200.00

Total Spray Painting Charges

558.00

200.00

Total Material Charges

588.90

131.25

Other Charges

260.00

30.00

TOTAL

Lum Sum Total

1,744.90

561.25

No. of Repair Days

0.00

0.00

3.00

2.00

Prepared / Adjusted By

SEBASTIAN (LKK)

Arc / Surveyor Sing Off Date

28/05/2018 02:20:25 PM

30/05/2018 02:14:23 PM

Prepared / Adjusted Date

Remarks

Prepared Date : 28/05/2018 02:20:21 PM

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

Quotation No

: QN-1806-01=1

Invoice No

Quotation Date

Invoice Date :

Invoice Amount : 0.00

Prepared Date:

5/28/2018 2:21:58 PM

Section D - Details of Repair Estimates

Part 12 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	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 CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	30.00
TO WASH AND VACUUM	60.00	0.00
Total Other Costs	260.00	30.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen	Surveyor Approved	Photos Attached
52159479 13			COVER, RR BUMPER ASSY	R 1	423.90	100.00	0.00	Replace	Repair 12	No p
52161160 10			CLIPS PIECE, FRT & RR BUMPER	10	1.50	25.00	11.25	Replace	Replace	No nec
52462470 30		-112	PAD, RR BUMPER, RH & LH , 1	X 2	3.80	25.00	5.70	Replace	Check W	No X
52462470 20			PAD, RR BUMPER, RH & LH , 2	X 2	3.80	25.00	5.70	Replace	Check NV	No V
52462470 10			PAD, RR BUMPER, RH & LH , 3	X 2	3.80 7.6	25.00	5.70	Replace	Check N	No X
52191470 30			SEAL, RR BUMPER ARM, RH & LH	X2	11.00	25.00	16.50	Replace	Check (N)	No V
			SENSOR REVERSE	X 1	180.00	0.00	180.00	Replace	Check ~	No C
			PIXEL STICKER	1/2	60.00	0.00	120.00	Replace	Replace	No 1
52576470 40			RETAINER, RR BUMPER, LH	X 0	111.50	25.00	0.00	Replace	Not given	No X
52575470 40			RETAINER, RR BUMPER, RH	(0	112.70	25.00	0.00	Replace	Not given	No V
52023470 30			REAR BUMPER REINFORCEMENT	X 1	318.80	25.00	239.10	Replace	Check	No Y
52453470 10			GUARD, RR BUMPER, LOWER	R1	558.30	100.00	0.00	Replace	Repair R	No ()
52169470 20	2117.22		COVER, GUARD RR BUMPER LOWER	X º	14.80	25.00	0.00	Replace	Not given	No X
52461470 10			PAD, RR BUMPER, CTR	X 3	2,20 6.6	25.00	4.95	Replace	Check	No Y
		Т	OTAL MATERIALS	-				588,90	131.25	
	TOTAL MATERIALS(Discounted)							588.90		

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
	TO	OTAL SUPPLEMENTARY I	(4)		Crieda	CHECK			

131.25 +200100 +230.00 -561-25

3062,40.



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6841 0055 FAX: 6841 6315





NS/INC18010368/Stbn2 NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: 73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 09-07-2018 189556 Code: INC4 Policy Particulars :- THIRD PARTY CLAIM 1. **SHF 130G** Insured Veh. **SLH 6218R** Veh. Inspected 0.00 Coverage (\$) 5086742382-01 Policy No. 0.00 MT/0999341-003 Excess (\$) Claim No. 30/05/2018 **Assign Date** Assign From Vehicle Particulars & Condition 2. TOYOTA PRIUS 4 1798 c.c Make & Model 2017 Year of Reg. HIDDEN Engine No. MAROON JTDKB3FU603573451 Colour Chassis No. IN ORDER Steering Odometer 75394 NIL IN ORDER Modification Brakes FAIR General **Conditions of Tyres** 3. Size Make Balance 6 mm YOKOHAMA R/H Front Tyre 195/65 R15 6 mm YOKOHAMA L/H Front Tyre 195/65 R15 6 mm YOKOHAMA R/H Rear Tyre 195/65 R15 6 mm YOKOHAMA 195/65 R15 L/H Rear Tyre **Description of Damages** 4. THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS. General Information 5. 30/05/2018 Inspection Date 27/05/2018 Accident Date Survey held at SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705 Remarks 5a. A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. **Estimate Days of Repair** 5b.

2 Working Days

ESTIMATED NORMAL PERIOD FOR REPAIR:



National Assessment Centre Services

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

TEL: 6841 0055 FAX: 6841 6315





ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHF 130G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)	
	REPLACEMENT OF PARTS				
10	CLIPS PIECE,FRT & RR BUMPER @\$1.50 (DISC 25%)	NECESSARY	15.00	11.25	
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00	
2	PAD,RR BUMPER,RH & LH,1 @\$3.80	NOT NECESSARY	7.60	15	
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	100	
1	SENSOR REVERSE	NOT NECESSARY	180.00	-	
1	RETAINER,RR BUMPER,LH	NOT NECESSARY	111.50	-	
1	RETAINER,RR BUMPER,RH	NOT NECESSARY	112.70		
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		
			1,906.40	131.25	
	LABOUR				
	THATCHAM STANDARD REPAIR TIME ON BODY WORKS.		538.00	230.00	
	THATCHAM TTS STANDARD SPRAY PAINTING COST AND LABOUR.		558.00	200.00	
	TO WASH AND VACUUM.	NOT NECESSARY	60.00		
			1,156.00	430.00	
	GRAND TOTAL		3,062.40	561.25	

RECOMMENDED COST OF REPAIRS (CONFIRMED) 561.25

Report Ref No. NS/INC18010368/Stbn2

100

YEANG WAI KEEN

Automotive Assessor

L

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES: This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.