

REF:

NS/INC18012585/<sup>V</sup>Atbez

## 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 **SJV 7613B**  
 Policy No. **5084531630-01 080218-070219**  
 Claims No. **MT/1002343-002**  
 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: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: **SHF 617** Yr Regn: **Oct 2017**  
 Type: M.Car / M.Cycle / Bus / Van / Lorry /  Taxi / Prime Mover /  
 Truck / Trailer or

Make: **Toyota Prius 4** c.c. **1798**  
 Colour: **Maroon** A/C Insured / Std / NI / NA  
 Sp. Reading: **93002** T/Radio: Insured / Std / NI / NA

Eng/No: **2ZRS097857**  
 C/No: **JTDKB3FU903572875**

Gen. Cond:  Good / Fair / Poor / BurntSteering:  In order / Jammed / Leaked / Burnt orBrake:  In order / Jammed / Leaked / Burnt orModi:  Nil / S/Rim / STD A/Rim orTyre Size: F: **195/65 R15**R: **195/65 R15**

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

TOYO / YOKO or **Yoko (Rear), Falken (Front)**

Front

Rear

R/Bal. **6** mm R/Bal. **6** mmL/Bal. **6** mm L/Bal. **6** mmD.O.A. **7/7/2018** D.O.I. **10/7/2018**Survey held at **SMRT**Des. of Damages:  Front /  Rear /  O/S / N/S / UIC / Rooftop or**Front o/s**

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	SHF 617 - 014 / III / 16008328 / Klyb3c7 DIA: 010516 TAX/07/18/2029
	SJV 7613B - NA / INC18008232 / R3 L DIA: 010518

NTUC

Part by part \$1992.65 RECEIVED 25 JUL 2018 - SJV 7613B  
 (led: 6997.19, 77%)

Date/Time File Pass to?  : Preli. Report11 25th Typist  : Final Report

Date/Time File Return to?

Days Of Repair: **2**

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee.

Transportation:

) S - PS - SI

) Photos

) Other:

TOTAL:

Report Format: **TP**Lump Sum / I.B.I: (\$) **1992.65**Add Fee:  : Site Insp (\$) : Interview (\$) : Tech Invs (\$) : Weekend (\$)**160**



# 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/INC18012585/Vtb			
73 BRAS BASAH ROAD		Date: 11-07-2018	
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
Code: INC4			
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SJV 7613B	Veh. Inspected	SHF 61Y
Policy No.	5084531630-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	10/07/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	07/07/2018	Inspection Date	10/07/2018
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

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"/>	5084531630-01	FTAN SERVICES	53334253L	GPC	drive CLASSIC	SJV7613B	SJV7613B	08/02/2018	07/02/2019

## Denise Tay (LKKAuto)

---

**From:** mtreg <mtreg@income.com.sg>  
**Sent:** Tuesday, 24 July 2018 5:19 PM  
**To:** Denise Tay (LKKAuto)  
**Subject:** REQUEST CLAIM NUMBER

Hi,

Claim created.

With Regards

**Samsia**  
Senior Admin Assistant, Motor Insurance  
[www.income.com.sg](http://www.income.com.sg)



---

**From:** Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]  
**Sent:** Tuesday, July 24, 2018 2:06 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.	Dz
1	MT/1002343-002	SMRT TAXIS PTE LTD	SHF 61Y	SJV 7613B	

Best Regards,

**Denise Tay** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | 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 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	09/07/2018 14:41
Date Of Accident	07/07/2018 22:00
Exact Location Of Accident	PIE TOWARDS TUAS (BEFORE KALLANG EXIT)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF61Y
<b>Insured/Policyholder</b>	
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	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	SEE WEI CHONG
NRIC No	S1698887A
Date Of Birth	08/02/1965
Occupation	OUTDOOR
Date Of Driving Pass	23/03/1984
Driving Experience	34 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address 11  
 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 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? YES  
 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) 3  
 Passenger 1  
 NAME: : SOO ANN QI  
 GENDER: : FEMALE  
 Passenger 2  
 NAME: : MICHELLE LAI  
 GENDER: : FEMALE

**Details of Police Action**

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name BISHAN NEIGHBOURHOOD POLICE CENTRE  
 Police Station Address ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 1800-5529999 - FAX NO: 65561905  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

REFER TO POLICE REPORT - T/20180708/2054 On 07/07/2018 at about 2202hrs, while I was driving my taxi (SHF61Y) along PIE towards Tuas after Paya Lebar road on the third lane of four lanes road. While my vehicle was moving towards Kallang exit, suddenly there was another vehicle (SJV7613B) encroached into my lane and his vehicle side swipe onto my vehicle's front right portion area. At the point of accident, I made a check with both my passenger and the other driver and no one report injury. However, on 08/07/2018 in the morning, I felt discomfort on my back area and my passengers also informed me that they felt discomfort at their neck and back area. Thus, all of us went to Intemedical 24 hr clinic to consult medical attention and was issued 5 days medical leave. There was in-built camera installed in my taxi which capture the accident.

**Attachment(s)**

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

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SJV7613B

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

**DETAILS OF INJURED PERSON 1**

Name SEE WEI CHONG  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? SHF61Y  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

**DETAILS OF INJURED PERSON 2**

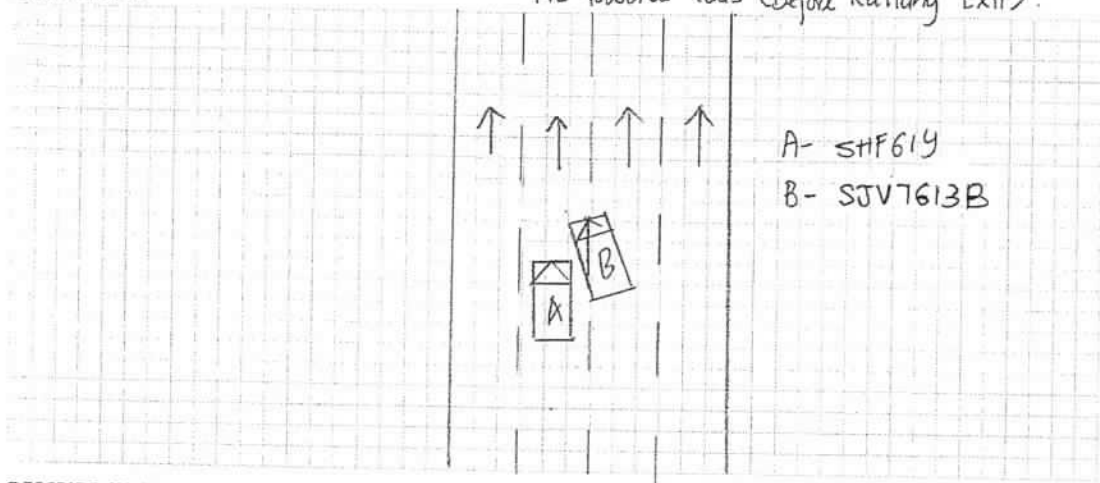
Name MICHELLE LAI  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? SHF61Y  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

**DETAILS OF INJURED PERSON 3**

Name SOO ANN QI  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? SHF61Y  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

SKETCH PLAN

PIE towards Tuas (Before Kallang Exit).



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

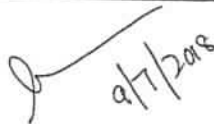
A large rectangular area containing 15 horizontal lines for describing the accident circumstances.

DECLARATION

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

  
 Policyholder's Signature  
 Date & Time: WS

Keny Bee  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 09/07/2018

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

CHARTERED POLICE FORM 108



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.
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:

*Samuel Lee*

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

*09/07/2018*

*[Signature]*  
*07/12/2018*

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



**SINGAPORE  
POLICE FORCE**



T/20180708/2054

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

1 of 4

Report No. T/20180708/2054

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/07/2018 16:42	Vide Report No.:	Station Diary No.: 141
--	------------------	---------------------------

Informant's Particulars			
Name of Informant: SEE WEI CHONG		Address: APT BLK 818A CHOA CHU KANG AVENUE 1 #09-104 SINGAPORE 681818	
ID Type / ID No.: NRIC NO / S1698887A		Contact No.: Home/Office: Mobile: 98895272	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 53	Date of Birth: 08/02/1965	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 2B,3,4	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/07/2018 22:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 PAN-ISLAND EXPRESSWAY PIE towards Tuas before the exit of Kallang				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHF61Y	Car	TOYOTA	PRIUS	Maroon	Slightly Damaged	2
SJV7613B	Car	HONDA		Silver	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999



T/20180708/2054

2 of 4

Report No. T/20180708/2054

## CONTINUATION OF REPORT

Passenger			
Name	MICHELLE LAI	ID No.	A39392130
Related Vehicle	SHF61Y (Car)	Contact No.	94287074
Hospital/Clinic	INTEMEDICAL 24 HR CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/07/2018	Date Discharge	08/07/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	SEE WEI CHONG	ID No.	S1698887A
Related Vehicle	SHF61Y (Car)	Contact No.	98895272
Hospital/Clinic	INTEMEDICAL 24 HR CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	08/07/2018	Date Discharge	08/07/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Passenger			
Name	SOO ANN QI	ID No.	A40117812
Related Vehicle	SHF61Y (Car)	Contact No.	83759541
Hospital/Clinic	INTEMEDICAL 24 HR CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/07/2018	Date Discharge	08/07/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	TAN WEE CHIOW	ID No.	S0037674Z
Related Vehicle	SJV7613B (Car)	Contact No.	90052861
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL



**SINGAPORE  
POLICE FORCE**



T/20180708/2054

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

3 of 4

Report No. T/20180708/2054

CONTINUATION OF REPORT

**Brief Details.**

On 07/07/2018 at about 2202hrs, while I was driving my Taxi (SHF61Y) along PIE towards Tuas after Paya Lebar road on the third lane of four lanes road.

While, my vehicle was moving towards Kallang exit, suddenly, there was another vehicle (SJV7613B) enclosed into my lane and his vehicle side swipe onto my vehicle's front right portion area.

At the point of accident, I made a check with both my passenger and the other driver and no one report injury.

However, on 08/07/2018 in the morning, I felt discomforted on my back area and my passengers also informed me that they felt discomforted at their neck and back area. Thus, all of us went to Intemedical 24 hr clinic to consult medical attention and was issued 5 day(s) medical leave.

There was in-built car camera installed in my taxi which capture the accident.



**SINGAPORE  
POLICE FORCE**



T/20180708/2054

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

4 of 4

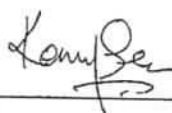

Report No. T/20180708/2054

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: E / Sgt 2 SIM JUN XIONG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 08/07/2018 16:42
Officer In Charge Of Case: TP / AET / Sr SGT LONG YONG HOCK Contact No.: 65476436 SN 061	Classification Of Case:
Authentication Stamp NP168  SIGNATURE	

> [Back to OneMotoring](#)

## Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	SHF61Y		
Vehicle Type :	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1 :	Air-Con (Taxi)		
Vehicle Scheme :	Taxi (Company)		
Vehicle Make :	TOYOTA		
Vehicle Model :	PRIUS HYBRID 1.8 CVT		
Chassis No. :	JTDKB3FU903572875		
Propellant :	Petrol-Electric		
Engine No. :	2ZRS097857		
Motor No. :	1NMS097857		
Engine Capacity :	1798 cc		
Power Rating :	53.0 kW		
Maximum Power Output :	90.0 kW ( 120 bhp)		
Maximum Laden Weight :	1790 kg		
Unladen Weight :	1375 kg		
Year Of Manufacture :	2017		
Original Registration Date :	12 Oct 2017		
Lifespan Expiry Date :	11 Oct 2025		
COE Category :	A - Car up to 1600cc & 97kW (130bhp)		
PQP Paid :	\$34,052.00		
COE Expiry Date :	11 Oct 2025		
Road Tax Expiry Date :	11 Oct 2018		
PARF Eligibility Expiry Date :	11 Oct 2025		
Inspection Due Date :	11 Oct 2018		
Intended Transfer Date :	11 Jul 2018		
CO2 Emission :	87.00 (g/km)		
CEV/VES Rebate Utilised Amount :	\$27,610.00		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
The current road tax expiry is 11 Oct 2018. You may renew the road tax from 12 Jul 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 11 Oct 2018, late renewal fee(s) will be imposed. Please use <a href="#">Enquire Road Tax Payable</a> to check on the late 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.			
<b>Amount Payable (From 12 Oct 2018 to 11 Apr 2019)</b>			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
<b>Sub Total :</b>			<b>25.00</b>
Nett Road Tax Amount (After Offsetting Over Payment) :	510.00	-	510.00
<b>Total Amount Payable :</b>			<b>535.00</b>
<b>Message</b>			
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.			

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 : SHF61Y  
 Ref. No : TAX/07/18/2029  
 Reg. Date : 12/10/2017  
 Vehicle Type : TAXI  
 Make : TOYOTA PRIUS  
 Model : PRIUS4  
 Name of Driver : SEE WEI CHONG  
 Type of Accident : SIDE SWIPE  
 Date / Time of Accident : 07/07/2018 10:00:00 PM  
 Accident Reported Date / Time : 09/07/2018 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 : 000024096917  
 Special Instruction to ARC,if any :  
 SJV7613B  
 Prepared Date : 09/07/2018 02:36:03 PM



Sathya Sai  
 10/7/2018

2 days

- Part by Part repair
- Question mark item photo
- Photo before 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:

Chassis No : JTDKB3FU903572875

Mileage : 0

Work Shop :

Repair Completed Date / Time :

**Summary of Repair Estimates**

	<b>Quotation from ARC</b>	<b>Adjusted by Surveyor, if applicable</b>
Total Labour Charges :	507.00	0.00
Total Spray Painting Charges :	1,116.00	0.00
Total Material Charges :	5,589.14	5,589.14
Other Charges :	608.44	0.00
<b>TOTAL :</b>	<b>7,820.58</b>	<b>0.00</b>
<b>Lum Sum Total :</b>	<b>0.00</b>	<b>0.00</b>
No. of Repair Days :	4.00	<del>0.00</del> 2 days
Prepared / Adjusted By :		
Arc / Surveyor Sing Off Date :	09/07/2018 07:50:20 PM	01/01/1900 12:00:00 AM

Prepared / Adjusted Date :

Remarks :

Prepared Date : 09/07/2018 07:50:20 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 :



**Part 1 - Labour Works**

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	507.00	<del>0.00</del> 200
<b>Total Labour</b>	<b>507.00</b>	<b>0.00</b>

**Part 2 - Spray Painting & Panel Beating Related Works**

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER	378.00	<del>0.00</del> 200
TO RESPRAY FRONT FENDER RH	378.00	0.00 X
TO RESPRAY RIM	180.00	0.00 X
RESPRAY WHEEL CAP	180.00	<del>0.00</del> 100
<b>Total Spray Painting &amp; Panel Beating</b>	<b>1,116.00</b>	<b>0.00</b>

**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	<del>0.00</del> 40
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	<del>0.00</del> 50
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	<del>0.00</del> 60
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	148.44	0.00 X
TO REPLACE SUNDRY PARTS	100.00	<del>0.00</del> 20
TO WASH AND VACUUM	60.00	0.00 X
<b>Total Other Costs</b>	<b>608.44</b>	<b>0.00</b>

**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
52119479 62			COVER, FR BUMPER ✓ <i>CRK</i>	1	495.50	25.00	371.62	Replace	Replace	No
52115470 50			SUPPORT, FR BUMPER RH ?	1	76.90	25.00	57.67	Replace	Replace	No
81210470 20			LAMP ASSY, FOG, RH ✓ <i>SCR</i>	1	910.20	10.00	819.18	Replace	Replace	No
81145476 91			UNIT, HEADLAMP, RH ?	1	2,558.90	10.00	2,303.01	Replace	Replace	No
53801470 80			FENDER SUB-ASSY, FR, RH X	1	933.10	25.00	699.82	Replace	Replace	No
75374471 40			EMBLEM, SIDE PANEL (HYBRID) X	1	52.90	25.00	39.67	Replace	Replace	No
42602471 80			CAP SUB-ASSY, WHEEL ✓ <i>CUT</i>	1	175.80	25.00	131.85	Replace	Replace	No
42611- 47450			WHEEL, DISC FRONT X	1	1,555.10	25.00	1,166.32	Replace	Replace	No
<b>TOTAL MATERIALS</b>								<b>5,589.17</b>	<b>5,589.14</b>	
<b>TOTAL MATERIALS(Discounted)</b>							<b>5,589.14</b>	<b>5,589.14</b>		

**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
<b>TOTAL SUPPLEMENTARY MATERIALS</b>									



Vtb

60 Woodlands Industrial Park E4, Singapore 757705

12-7-18/11:28

FAX Number : 63685592

12-7-18/15:28

Estimator Telephone Number : 68662623

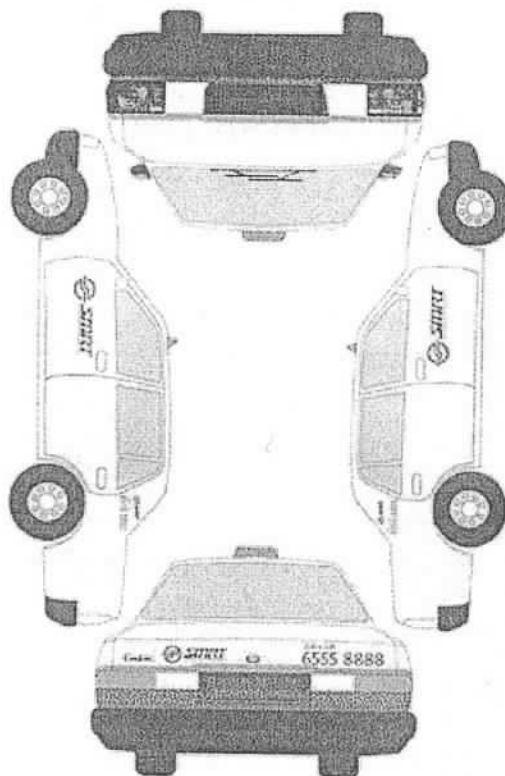
Accident Reporting Number : 68662672

# SMRT Accident Vehicle Repair Estimates

10-7-18/15:28

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

Reg. No : SHF61Y  
 Ref. No : TAX/07/18/2029  
 Reg. Date : 12/10/2017  
 Vehicle Type : TAXI  
 Make : TOYOTA PRIUS  
 Model : PRIUS4  
 Name of Driver : SEE WEI CHONG  
 Type of Accident : SIDE SWIPE  
 Date / Time of Accident : 07/07/2018 10:00:00 PM  
 Accident Reported Date / Time : 09/07/2018 12:00:00 AM  
 Surveyor is Required? : Yes  
 Survey by : Sathya  
 Vehicle is Towed Back? : No  
 Towed Back Date/Time :  
 Replacement Vehicle issued? : No  
 Accident Repair Job Card No : 000024096917  
 Special Instruction to ARC, if any :



SJV7613B NTAC P/P  
 BEFORE PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR Sathya Sai (LKK)  
 & Email : sathyasai@lkkauto.com HP: 98072012

Prepared Date : 09/07/2018 02:36:03 PM

98895272 See 1344 X

Recording Camera

Radio Antenna

1<sup>st</sup> witness

*[Signature]*

Date 10-7-18

2<sup>nd</sup> witness

Date

93062

QC 12/7/18 11.25 Reject

12th Hood & Frt Windseteen & ROOF Top Polish

13.39 Pass

LEE SHENG AUTO PTE LTD

Vehicle Return Date: 12/7/18

Vehicle Return Time: 10:50

SMRT staff sign: *[Signature]*

Chassis No : JTDKB3FU903572875

Mileage : 0

Work Shop :

Repair Completed Date / Time :

**Summary of Repair Estimates**

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 507.00	200.00
Total Spray Painting Charges	: 1,116.00	300.00
Total Material Charges	: 3,683.33	1,322.65
Other Charges	: 608.44	170.00
<b>TOTAL</b>	<b>: 5,914.77</b> <i>8939.84</i>	<b>1,992.65</b>
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 4.00	2.00 ✓
Prepared / Adjusted By	:	SATHYA (LKK)
Arc / Surveyor Sing Off Date	: 09/07/2018 07:50:20 PM	10/07/2018 03:28:12 PM

*M*

*LKK*

Prepared / Adjusted Date :

Remarks :

Prepared Date : 09/07/2018 07:50:20 PM

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

Quotation No : *Q N-1807-0401*

Invoice No :

Quotation Date : *18/7*

Invoice Date :

Invoice Amount :

Prepared Date :

**Part 1 - Labour Works**

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR RH FRONT PORTION	507.00	200.00 ✓
<b>Total Labour</b>	<b>507.00</b>	<b>200.00 ✓</b>

**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	0.00
TO RESPRAY RIM	180.00	0.00
RESPRAY WHEEL CAP	180.00	100.00 ✓
<b>Total Spray Painting &amp; Panel Beating</b>	<b>1,116.00</b>	<b>300.00 ✓</b>

**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	40.00 ✓
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	50.00 ✓
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60.00 ✓
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	148.44	0.00
TO REPLACE SUNDRY PARTS	100.00	20.00 ✓
TO WASH AND VACUUM	60.00	0.00
<b>Total Other Costs</b>	<b>608.44</b>	<b>170.00 ✓</b>

8989.84

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached	
52119479 62			COVER, FR BUMPER	1	495.50	25.00	371.62	Replace	Replace	No ✓	
52115470 50			SUPPORT, FR BUMPER RH	1	76.90	25.00	57.68	Replace	Check	No X	
81210470 20			LAMP ASSY, FOG, RH	1	910.20	10.00	819.18	Replace	Replace	No ✓	
81145476 91			UNIT, HEADLAMP, RH	1	2,558.90	10.00	2,303.01	Replace	Check	No X	
53801470 80			FENDER SUB-ASSY, FR, RH	0	933.10	25.00	0.00	Replace	Not given	No X	
75374471 40			EMBLEM, SIDE PANEL (HYBRID)	0	52.90	25.00	0.00	Replace	Not given	No X	
42602471 80			CAP SUB-ASSY, WHEEL	1	175.80	25.00	131.85	Replace	Replace	No ✓	
42611-47450			WHEEL, DISC FRONT	0	1,555.10	25.00	0.00	Replace	Not given	No X	
<b>TOTAL MATERIALS</b>							<b>3,683.34</b>	<b>1,322.65</b>			
<b>TOTAL MATERIALS(Discounted)</b>							<b>3,683.33</b>	<b>1,322.65</b>			

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
<b>TOTAL SUPPLEMENTARY MATERIALS</b>									

1322.65 ✓  
 + 200.00 ✓  
 + 470.00 ✓  


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 1992.65 @ 2 days  
 confirmed



# 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/INC18012585/Dtbe2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 03-08-2018	
		Code: INC4	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SJV 7613B	Veh. Inspected	SHF 61Y
Policy No.	5084531630-01	Coverage (\$)	0.00
Claim No.	MT/1002343-002	Excess (\$)	0.00
Assign From		Assign Date	10/07/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU903572875	Colour	MAROON
Odometer	93002	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
<b>3. Conditions of Tyres</b>			
	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	YOKOHAMA	6 mm
L/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	07/07/2018	Inspection Date	10/07/2018
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>2 Working Days</b>	

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHF 61Y**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	COVER, FR BUMPER (DISC 25%)	CRACKED	495.50	371.62
1	CAP SUB-ASSY, WHEEL (DISC 25%)	CUT	175.80	131.85
1	LAMP ASSY, FOG, RH (DISC 10%)	SCRATCHED	910.20	819.18
1	SUPPORT, FR BUMPER RH	NOT NECESSARY	76.90	-
1	UNIT, HEADLAMP, RH	NOT NECESSARY	2,558.90	-
1	FENDER SUB-ASSY, FR, RH	NOT NECESSARY	933.10	-
1	EMBLEM, SIDE PANEL (HYBRID)	NOT NECESSARY	52.90	-
1	WHEEL, DISC FRONT	NOT NECESSARY	1,555.10	-
			<b>6,758.40</b>	<b>1,322.65</b>
<b>LABOUR</b>				
	PANEL BEATING & BODY WORK.		507.00	200.00
	SPRAY PAINT.		1,116.00	300.00
	TO CHECK WIRING AND SYSTEM FUNCTION.		80.00	40.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.		100.00	50.00
	TO DO WHEEL ALIGNMENT / TYRE BALANCING.		120.00	60.00
	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER.	NOT NECESSARY	148.44	-
	TO REPLACE SUNDRY PARTS.		100.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			<b>2,231.44</b>	<b>670.00</b>
<b>GRAND TOTAL</b>			<b>8,989.84</b>	<b>1,992.65</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>1,992.65</b>

Report Ref No. NS/INC18012585/Dtbe2

**ANG BRYAN TANI**

Automotive Assessor / Investigator


**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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