gmentor.	A	SSIGNMENT			
From:	Date:	Veh No:	SHC 44049	Yr Regn: كولا	4 James
Estimated Cost			/ M.Cycle / Bus / Van / Lo		
	TP RES / OD RES / EVA / INV / MV		/ Trailer or		
To Inspect Veh	NEV XXV	Make:	TOYOTA PRINS	C.C	1798
at Workshop m		Colour	MARDON		Std / NI / NA
	(3)	Sp.Reading	476723	T/Radio: Insured /	Std / NI / NA
of	THECE DIE	Eng/No:	(1012)		
	5107 859899 290618 - 040519	C/No:	370KN 364	K 115721063	
	mt/1002769-603		Good / Fail / Poor / Burn		
			rde / Jammed / Leaked		
Sum Insured:	Excess:		order / Jammed / Leaked		
(Client's Reco	ord)		TS/Rjm / STD A/Rim o		
Make of Veh		-   ( ,	/ ·		
	. [	Tyre Size:	F: [5	SUSRIS	
(Policy Condi			R:	7-	
			XNOVA / GY / FS / LIZA		SUMI/
гера	ir at the time of inspection.	TOYO / YO	KO or FX	LKEN	
Bal. or Market		Front	F	Rear	
IDAC Accident	Rport: Consistent?: Yes or No	R/Bal.	) mm	R/Bal.	mm
GIA / PR See	en: Consistent? : Yes or No	L/Bal.	S mm	L/Bal.	mm
Est. Repairs:	days Res.: Yes or No	D.O.A. LL	67 (8	D.O.I. (3/67	18
Lum Sum:	% 3 Val.: Yes or No	Survey held	at sm	RI '	
CA / REV	/ REP. / 24 HRS	Des. of Dam	ages: Frt / Rear / O/S	/	op or
5	Vehicle: IN / 0			- Ms	William Control
Date:	Person Contacted:	The U/C	/ Chassis frame / Bod	y Structure affected of	due to collision
Date / Time	SH( 4404 G - CC3/CT[17019208/	Plum302	DIA: 3009 FT	07/1	8 (2046
	X - TUCE SIZE	Vililiais			
	-50 -5 (5)			1	MUC
	Rain confirm L/s \$3250 @	7 days			
	Rain confirm L/s \$3250 @ Red: \$10,212.50, 76%	'		122	0 3276
			2 9 OCT 2018		
Date/Time, File Pa	: Preli. Report	Days Of Re	pair: 7		
typic		Resurvey N		Survey Fee	160
Date/Time, File R		mananting, t	emissions (2000€48 15	Transportation.	100
2)	Add	Fee: Site	Insp (\$	)S+RSSI	
		: Inter	view (\$	) Photos	
Report For	mat: TP	Tech	n Invs (\$	) Others	
-	/ I.B.I: (\$ 3250.50)	: Wee	kend (\$	)	

TP Claims against NTUC Income: Follow-Through Survey

Date: 29/10/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
-	MT/1017192-002	COMFORT TRANSPORTATION PTE LTD	SHD 4424T	SJC 7100P	24/10/2018	16:40	\$ 5,411.84	\$ 3,600.00
2	MT/1002769-003	SMRT TAXIS PTE LTD	SHC 4404G	SJQ 3276T	11/07/2018	20:05	\$ 13,462.50	\$ 3,250.00

Claim received from LKK Auto



# **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



NTI	JC INCOME INSU	RANCE CO-OPERATIVE LTD	Ref:	NS/INC180128	26/R1rb
#05	BRAS BASAH ROA -01 NTUC TRADE 556	AD UNION HOUSESINGAPORE	Date:	16-07-2018	
			Code:	INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	SJQ 3276T	Veh. Ir	nspected	SHC 4404G
	Policy No.	5101859899	Cover	age (\$)	0.00
	Claim No.		Exces	s (\$)	0.00
	Assign From		Assign	n Date	13/07/2018
2.		Vehicle Parti	culars 8	Condition	
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year o	f Reg.	
	Chassis No.		Colou		
	Odometer		Steerin	ng	
	Brakes		Modifi	cation	
	General				
		Conditi	ons 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
		Description	on of Da	mages	
		General	Inform	ntless	
	Accident Date	11/07/2018	1		12/07/2012
	Survey held at	GUNGERING PROPERTY.		tion Date	13/07/2018
	our roy neid at	60 WOODLANDS INDUSTRIAL			705
a.			marks		Mark Mark Comments
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, WI	HOUT PE	REJUDICE" BASIS.	REPAIRS

<b>eBao</b> Tech									Gen	eralClaim
Hello, NAC_PAYA_UBI_80	0601					,	Change La	nguage	Change Passwo	ord + Log O
My Desktop	Poli	cy Query								
Notice of Loss	Policy N	lo.				Date of Acc	ident	11/07	/2018 12:10	
	Vehicle	No.(For Motor)	SJQ3276T							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5101859899	ECO AUTOMOBILE LEASING	53354814D	GPC	drivo CLASSIC	SJQ3276T	SJQ3276T	29/06/2018	04/05/2019

#### 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.

- 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,	and to copies of the report being made available
<b>建筑是是是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>	ACCIDENT STATEMENT
Date Of Report	12/07/2018 15:57
Date Of Accident	11/07/2018 20:05
Exact Location Of Accident	WOODLANDS AVE 6 TOWARDS WOODLANDS AVE 7
Country/State of Loss	SINGAPORE
对特征 拉耳到维加特 南连 [2] 三十二	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC4404G
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369К
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	CONTRACTOR (MILL)
Driver	

Name of Driver YEOH LYE SAN(YANG LAISHAN)

NRIC No S7110574A Date Of Birth 28/03/1971 Occupation OUTDOOR Date Of Driving Pass 21/05/2013

**Driving Experience** 5 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-80000000

Fax Number Contact Number

EMail 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

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

YES

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

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?

YES

If Yes, Please state which Police Station

Police Station Name

HOGANG N.P.C

Police Station Address

ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 , **COUNTRY: SINGAPORE** 

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20180712/2084

Attachment(s)

Are accident photos available for attachment?

YES

NO

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 Vehicle Make/Model/Colour

SJQ3276T

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

MARDUFI BINQORAN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **DETAILS OF INJURED PERSON 1**

Name

YEOH LYE SAN(YANG LAISHAN)

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHC4404G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

### Sketch Plan Pg. 1

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CLARATION e declare the foregoing p	articulars are tr	ue in every	respect									~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	00/68		
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e declare the foregoing p	Driv	<i>X</i> :	124	18			R	eporti	ng Cer	ttre P	erson	net's	o (d	ıre	

#### 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>.
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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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  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.

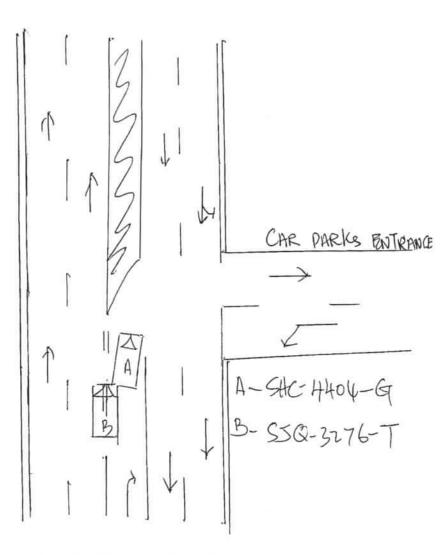
SO TE LANG.

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 .:



WIODLANDS AUR 6

A. 12/7/18







Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

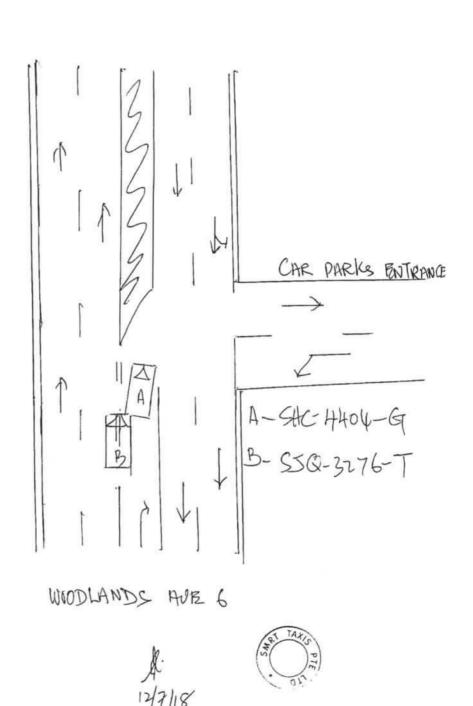
1 of 3 Report No. T/20180712/2084

	ne Report M 118 14:46	fade:	Vide Report No.:	Station Diary No. 61
Informa	nt's Particu	ilars		
YEOH L			Address: APT BLK 326 WOODLANDS SINGAPORE 730326	STREET 32 #09-105
	/ ID No.: D / S711057	74A	Contact No.: Home/Office:	Mobile: 98627237
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age: 47	Date of Birth: 28/03/1971	Type of Informant: Driver	-
Race: Chinese			Language: English	Institution / School Name:
Occupat Taxi driv			Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/07/2018 20:05	Type of Location Straight Road
	S AVENUE 6	ARDS WOODLANDDS A Road Surface: Dry		pad Speed Limit:
Clear				
Traffic Flow: Two Way		Traffic Control:	133/08	affic Volume:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHC4404G	Car					0
SJQ3276T	Car					0

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







Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999 2 of 3 Report No. T/20180712/2084

CONTINUATION OF REPORT

Name	YEOH LYE SAN			ID No		S7110574A
Related Vehicle	SHC4404G (Car)			Contact No.		98627237
Hospital/Clinic	CARE MEDICAL CI	LINIC		Class Drivin Licent Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	12/07/2018		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	04	Degree of		Slight	

#### **Brief Details**

On 11/07/2018 at about 2009hrs, I was travelling along Woodlands Avenue 6 towards Woodlands Avenue 7. Traffic was light at that time. I approached the u-turn lane and was stationary as there were oncoming vehicles in the opposite direction. While waiting to turn, a sudden impact came crashing from the rear side of my vehicle.

I alighted from my vehicle to make a check. I approached the other vehicle's driver and I was informed by him that he was looking on his left side while driving and was not paying attention forward thus the accident happened. My vehicle rear bumper was totally damaged by the incident.

There was no passenger on board my vehicle. I suffer pain to the back, neck and numbness to the right hand area as such I visited the clinic for medical attention and was given 4 days of medical leave. There is a video recorder installed in my vehicle.



T/20180712/2084

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

2 of 3 Report No. T/20180712/2084

Tel No: 1800-4890999

CONTINUATION OF REPORT

Name	YEOH LYE SAN			ID No	).	S7110574A
Related Vehicle	SHC4404G (Car)			Contact No.		98627237
Hospital/Clinic	CARE MEDICAL CI	LINIC		Class Drivin Licend Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	12/07/2018		Date Disc		NIL	
No. of Days grant	ed Medical Leave	04	Degree of		Slight	

### Brief Details.

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Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

3 of 3 Report No. T/20180712/2084

CONTINUATION OF REPORT

S	ke	tcl	h	PI	an	

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 <u>report number</u> as reference.

Signature Of Officer Recording The Report: F / Sgt 3 WARIS AHMAD BIN SALBIR AHMAD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/07/2018 14:46
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact, No.: 65476404	Classification Of Case:
Authentication Stamp NP168 Singapore Folice Force	



60 Woodlands Industrial Park E4, Singapore 757705

FAX Number : 63685592

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

# **SMRT Accident Vehicle Repair Estimates**

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

Reg. No

SHC4404G

Ref. No

TAX/07/18/2046

Reg. Date

06/01/2014

Vehicle Type

TAXI

Make

Model

TOYOTA PRIUS

Name of Driver

**PRIUS** 

YEOH LYE SAN(YANG

LAISHAN)

Type of Accident

HEAD TO REAR

Date / Time of Accident

11/07/2018 08:05:00 PM

Accident Reported Date / Time :

12/07/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

Vehicle is Towed Back?

Yes

Towed Back Date/Time

11/07/2018

Replacement Vehicle issued? :

No

Accident Repair Job Card No :

000024096963

Special Instruction to ARC, if any :

TOWED \$40/ SJQ3276T / Resm

Prepared Date

12/07/2018 04:09:25 PM



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 llam(s) must be resurveyed and is subject to final approval from Insurance Company

Admowledged by Repairer

------- -, ------ navisoi, Accident Nepan Centre

Chassis No:

JTDKN36UX0-5721063

Mileage

0

0.00

0.00

0.00

0.00

0.00

5,124.37

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

1,183.00

Total Spray Painting Charges

2,394.00

Total Material Charges

5,124.37

Other Charges

1,611.00

TOTAL

10,312.37 15462 .50

Lum Sum Total No. of Repair Days

10,300.00 7.00

Prepared / Adjusted By

Arc / Surveyor Sing Off Date

: 12/07/2018 05:05:55 PM

01/01/1900 12:00:00 AM

0.00 7 days - Lunghy

Prepared / Adjusted Date

Remarks

Prepared Date : 12/07/2018 05:05:42 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 RÉPAIR REAR PORTION	1,183.00	0.00 700		
Total Labour	1,183.00	0.00		

# Part 2 - Spray Painting & Panel Beating Related Works

- - ----- o. ..opan Loumateo

TO RESPRAY REAR LH WHEEL HOUSE	180.00	0.00
TO RESPRAY REAR MEMBER, LH	180.00	0.00 × nn
TO RESPRAY REAR FLOOR SIDE PANEL LH	180.00	0.00
TO RESPRAY REAR SPARE TYRE PANEL	180.00	0.00 × 11
TO RESPRAY REAR PANEL	180.00	0.00
TO RESPRAY TAIL GATE	378.00	0.00 × nn
TO RESPRAY BUMPER BEAM	180.00	0.00 MX NY
TO REPSRAY REAR BUMPER	378.00	0.00
Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable

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

otal Other Costs	1,611.00	0.00
O ALIGN CHASSIS	350.00	0.00
O WASH AND VACUUM	60.00	0.00 //12
O REPLACE SUNDRY PARTS	100.00	0.00
O INSPECT RR LIGHTING, MECHANISMS & NATER TEST RR LIGHTING FOR LEAKAGE	120.00	0.00 30 /
TO REMOVE AND INSTALL LUGGAGE COMPARTMENT TRIM TO FACILITATE REPAIR.	120.00	0.00 60
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00
TO REMOVE AND REFIT WIRE HARDESS	120.00	0.00 <b>4 %</b> ×
TO REMOVE & REFIT REAR QUARTER GLASS LH	120.00	0.00 🗸
TO PROVIDE LABOUR & MATERIAL FOR SOLAR FILM (NET)	125.00	0.00
TO REMOVE & REFIT FUEL TANK	120.00	0.00 × / un
TO REMOVE / REFIT SEAT	120.00	0.00
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00 30
TOWING CHARGE	56.00	0.00 × 11
Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable



# Part 4 - Spare Parts / Material Usage

Number 52159-	.'Portio	n Stock No	Part Name				mat I i i i i i i i i i i i i i i i i i i			
	<u> </u>		50.000 EMP (1880.00 EM)	Qty	(\$)	Discou (%)	int Final Pric	Recomm	Surveyor Approved	Photos Attached
47905		6505548	BUMPER REAR		1 458.60	25.00	343.95	Replace	Replace	- No
52161- 16010		~~~	BUMPER CLIPS	1	0 1.61 (y <sub>6</sub> 1)	25.00	12.07	Replace	Replace	No
76088- 47020		6505617	BUMPER LIP COVER RR/LH		1 72.20	25.00	54.15	3 Replace	Replace	No
76087- 47020		6505618	BUMPER LIP COVER RR/RH		1 118.10	25.00	88.57	Replace	Replace	No.
76891- 47020		6505619	BUMPER LIP REAR		1 228.90	25.00	171.67	Replace	Replace	No
			SENSOR REVERSE		1 180.00	0.00	180.00 6	Replace	Replace	No
			PIXEL STICKER	2	2 60.00 (120	0.00	120.00 5	Replace	Replace	
52592- 47021			BUMPER SEAL, RR LH		1 88.90	25.00	66.67 X	Replace	Replace ?	No CX
52591- 47021			BUMPER SEAL, RR RH	1	1 65.70	25.00	49.27 📈	Replace	Replace 7	
52023- 12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.27 5	Replace	Replace PA	No
52016- 47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70 6	Replace	Replace R4	No
52015- 47050			ARM SUB-ASSY, RR BUMPER RH	1	139.60	25.00	104.70	Replace	Replace	No.
52576- 47020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10 7	Replace	Replace	No
52575- 47020		6505549	BUMPER SIDE RETAINER RR/RH	1	94.80	25.00	71.10 🖟	Replace	Replace	No
58308- 47011			UNDER COVER SUB- ASSY, RR FLOOR	1	514.50	25.00	385.87	Replace	Replace X.	No
67005- 47241			TAILGATE ASY	1	1,007.90	25.00	755.92	Replace	Replace X	None
75374- 47051			NAME PLATE (HYBRID)	1	51.90	25.00	38.92 🗶	Replace	Replace	No
58307- 47060		6505522	END PANEL	1	602.10	25.00	451.57	Replace	Replace	No
58336- 12090			REINFORCEMENT, RR	1	34.60	25.00	25.95	Replace	Replace X	No
	COMMO N	4006314	SEALANT SIKAFLEX	1	37.00	0.00	37.00 53	Replace	Replace	No
58311- 47071		6505523	SPARE TYRE PANEL	1	667.70	25.00	500.77	Replace	Replace	No
57604- 17030			MEMBER SUB-ASSY, RR LH	1	174.10	25.00	130.57	Replace	Replace	Nosia
58303- 17301			FLOOR PANEL RR/LH	1	102.00	25.00	76.50	Replace	Replace	Vo
31608- 17061			PANEL SUB-ASSY, QTR WHEEL HOUSE	1	588.40	25.00	441.30 🗶	Replace	Replace	ملا
7070B0			BOX, DECK FLOOR, COVER LH	1	230.10	25.00	172.57	Replace	Replace 7. 4	Vo.
4997- 7020			BOX, DECK FLOOR, LH	1	196.80	25.00	147.60	Replace	Replace	No
5637- 7021		6505480	FENDER LINER RR/RH	1	141.30	25.00	105.97 🗶	Replace	Replace X \$	er
2563- 7010			TAIL LAMP BRACKET, LH	1 :	30.70	25.00	23.02 ×	Replace	Replace 7 K	lo
1561-		6505461	TAIL LAMP LH	1 5	548.40	10.00	493.56	Replace	Replace	lo

No ng	Replace		126.07 37.00	25.00	37.00		RR/LH SEALANT W/SCREEN		СОММО	47031
NI-	Poplace >/	Renlace	126 07	25 00	100.10					47004
No	Replace		21.60 55	0.00	168.10		8888 QUARTER GLASS			62720-
No	Replace		7.80 54	0.00	7.80 21.60		SMRT LOGO STICKER DECAL 6555		COMMO N	
No	Replace		575.10	25.00	766.80	1	FENDER RR/LH	6505476		61602-* 47091
No.	Replace		99.81	10.00	110.90	1	TROUGH, BACK DOOR LH		-33	61622- 47030
	z Nunctuberszesse	Recommen d	(\$)	(%)	(\$)	uty 1	TROUGH BACK		.".	Number 61622-

Part Number	Portion	Part Name	Qty	List Price	Discount (%)	Final Price	ARC Check	Surveyor	LT Check
	TO	TAL SUPPLEMENTARY I	/ATERIA	ALS	(1.5)	(0)		CHECK	Check

1323.90

14462-40

### Janice Lee (LKKAuto)

From:

Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC) <YeoPohsuan@smrt.com.sg>

Sent:

Wednesday, July 25, 2018 4:22 PM

To:

Rasul (LKKAuto)

Cc:

SUR; CS A Team; 'Leong Chee kwong'

Subject:

SHC4404G

Attachments:

img-725160525-0001.pdf

Hi Rasul,

Attached herewith the repair estimate of SHC 4404G having Case No: TAX/07/18/2046.

There is no change to the approved amount of \$3,250 @ 7 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: Wednesday, 25 July 2018 4:05 PM

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

Subject: Scan Data from FX-D421D6

Estimator Telephone Number : 68662623

Accident Reporting Number : 68662672

, SMRT ACCIDE	nt venicie Repair Estimates	13.7.18/12
Section A - To be completed	by claims Advisor/Duty officer at Accident Reporting Centre	
Reg. No	: \$HC4404G	/
Ref. No	TAX/07/18/2046	
Reg. Date	: 06/01/2014	<b>a</b>
Vehicle Type	: TAXI	•
Make V	: TOYOTA PRIUS	
Model	: PRIUS	100
Name of Driver	YEOH LYE SAN(YANG LAISHAN)	
Type of Accident	: HEAD TO REAR	_
Date / Time of Accident	: 11/07/2018 08:05:00 PM	
Accident Reported Date / Time	e: 12/07/2018 12:00:00 AM	
Surveyor is Required?	: Yes	
Survey by	: Rasul	
Vehicle is Towed Back?	: Yes /	
Towed Back Date/Time	: 11/07/2018	
Replacement Vehicle issued?	: No	
Accident Repair Job Card No	: 000024096963	
Special Instruction to ARC, if a		
RESURVEY AFTER REPAIR	NTNC リタ , lump sum repair , After repair photo , FOR CHECK ITEM and REI RASUL / HP : 9001 0068. email: rasul@lkkauto.com	PLACE ITEM
Prepared Date	: 12/07/2018 04:09:25 PM	
Recording Camera		
Radio Antenna		1
1 <sup>st</sup> witness	Date 13.7.18 Wohiges to Waga Dato In: 180	Towing: fug.
2 <sup>nd</sup> witness	Contests to avega pare in 1910	
	Time In: 1625	Driver:
	Waga Jeb No: 07 0415	
E 0	i shiele sent to SMIRT Date In 2011	Y Towing:
F KM H	1/2 Tima In: 110 3	Drivor: Chia
KIVI A	11012	

OC 20/7/18 14. 20 parss

vvork Snop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

1,183.00

700.00

Total Spray Painting Charges

2,394.00

680.00

Total Material Charges

1,796.15

Other Charges

2,494.94

1,555.00

-624.94

TOTAL

6,928.15

3,250.00

Lump Sum Total

:

:

:

No. of Repair Days

0.00

0.00

7.00

7.00

Prepared / Adjusted By

RASUL

Arc / Surveyor Sing Off Date

12/07/2018 05:05:55 PM

13/07/2018 12:00:30 PM

Prepared / Adjusted Date

Remarks

Prepared Date : 12/07/2018 05:05:42 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:

7/13/2018 12:01:09 PM

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable		
TO REPAIR REAR PORTION	1,183.00	700.00		
Fotal Labour	1,183.00	700.00		

### <sup>3</sup>art 2 - Spray Painting & Panel Beating Related Works

lob 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
TO RESPRAY TAIL GATE	378.00	0.00
TO RESPRAY REAR PANEL	180.00	100.00
TO RESPRAY REAR SPARE TYRE PANEL	180.00	0.00
TO RESPRAY REAR FLOOR SIDE PANEL LH	180.00	80.00
O RESPRAY REAR MEMBER,LH	180.00	0.00
O RESPRAY REAR LH WHEEL HOUSE	180.00	100.00
O RESPRAY TROUGH BACK DOOR LH	180.00	0.00
O RESPRAY REAR FENDER LH	378.00	200.00
Total Spray Painting & Panel Beating	2,394.00	680.00

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

lob Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
O CHECK WIRING AND SYSTEM FUNCTION	80.00	30.00
O REMOVE / REFIT SEAT	120.00	0.00
O REMOVE & REFIT FUEL TANK	120.00	0.00
O PROVIDE LABOUR & MATERIAL FOR SOLAR FILM (NET)	125.00	0.00
O REMOVE & REFIT REAR QUARTER GLASS LH	120.00	0.00
O REMOVE AND REFIT WIRE HARDESS	120.00	0.00
O TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	60.00
O REMOVE AND INSTALL LUGGAGE COMPARTMENT TRIM TO FACILITATE REPAIR.	120.00	60.00
O INSPECT RR LIGHTING, MECHANISMS & VATER TEST RR LIGHTING FOR LEAKAGE	120.00	30.00
O REPLACE SUNDRY PARTS	100.00	0.00
O WASH AND VACUUM	60.00	0.00
O ALIGN CHASSIS	350.00	0.00
.ump Sum Adjustment by Surveyor	0.00	-804.94
otal Other Costs	1,555.00	-624.94

1560

AX/07/18/2046 Page: 3

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
52159- 17905	74	6505548	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace	No
52161- ` 16010			BUMPER CLIPS	10	1.61	25.00	12.07	Replace	Replace	No
76088- 17020		6505617	BUMPER LIP COVER RR/LH	1	72.20	25.00	54.15	Replace	Replace	No
76087- 17020		6505618	BUMPER LIP COVER RR/RH	0	118.10	25.00	0.00	Replace	Not given	No
76891- 17020		6505619	BUMPER LIP REAR	1	228.90	25.00	171.67	Replace	Replace	No
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace	No
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace	No
52592- 17021		*	BUMPER SEAL, RR LH	1	88.90	25.00	66.68 ×	Replace	Check	No
52591- 17021			BUMPER SEAL, RR RH	1	65.70	25.00	49.28 🗡	Replace	Check	No
52023- 12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.27	Replace	Replace	No
52016- 17030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Replace	No
52015- 17050			ARM SUB-ASSY, RR BUMPER RH	0	139.60	25.00	0.00 🗸	Replace	Not given	No
52576- 17020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10	Replace	Replace	No
52575- 17020	11115-2-5	6505549	BUMPER SIDE RETAINER RR/RH	1	94.80	25.00	71.10	Replace	Replace	No
58308- 17011			UNDER COVER SUB- ASSY, RR FLOOR	0	514.50	25.00	0.00 🗶	Replace	Not given	No
37005- 47241			TAILGATE ASY	0	1,007.90	25.00	0.00 ×	Replace	Not given	No
75374- 47051			NAME PLATE (HYBRID)	0	51.90	25.00	0.00 ×	Replace	Not given	No
58307- 17060		6505522	END PANEL	1	602.10	25.00	451.57	Replace	Replace	No
58336- 12090			REINFORCEMENT, RR	0	34.60	25.00	0.00	Replace	Not given	No
N	COMMO N	4006314	SEALANT SIKAFLEX	1	37.00	0.00	37.00	Replace	Replace	No
58311- 47071		6505523	SPARE TYRE PANEL	0	667.70	25.00	0.00 🗸	Replace	Not given	No
57604- 47030			MEMBER SUB-ASSY, RR LH	0	174.10	25.00	0.00	Replace	Not given	No
58303- 47301			FLOOR PANEL RR/LH	1	102.00	100.00	0.00	Replace	Repair	No
31608- 47061			PANEL SUB-ASSY, QTR WHEEL HOUSE	1	588.40	100.00	0.00 🗸	Replace	Repair	No
58418- 47070B0			BOX, DECK FLOOR, COVER LH	1	230.10	25.00	172.58 ×	Replace	Check	No
34997- 47020			BOX, DECK FLOOR, LH	1	196.80	25.00	147.60	Replace	Replace	No
35637- 47021		6505480	FENDER LINER RR/RH	0	141.30	25.00	0.00 ×	Replace	Not given	No
52563- 47010			TAIL LAMP BRACKET, LH	1	30.70	25.00	23.03	Replace	Check	No
31561- 47170		6505461	TAIL LAMP LH	1	548.40	10.00	493.56	Replace	Replace	No
31622- 47030			TROUGH, BACK DOOR LH	0	110.90	10.00	0.00 🗸	Replace	Not given	No

47091	1	0000470	I ENDER KIVELL	- 1	700.00	100.00	0.00	Replace	Перан	INO
	COMMO N		SMRT LOGO	1	7.80	0.00	7.80	Replace	Replace	No
o,*			STICKER DECAL 6555 8888	1	21.60	0.00	21.60	Replace	Replace	No
32720- 47031			QUARTER GLASS RR/LH	0	168.10	25.00	0.00	Replace	Not given	No
	COMMO		SEALANT W/SCREEN	0	37.00	0.00	0.00	Replace	Not given	No
52940- 16060			DUCT ASSY, QUARTER	1	70.40	25.00	52.80	Replace	Replace	No
35638- 47021		6505477	FENDER LINER RR/LH	0	141.30	25.00	0.00	Replace	Not given	No
		•	TOTAL MATERIALS					2,806.51	2,494.94	
TOTAL MATERIALS(Discounted)								1,796.15	2,494.94	

# 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									

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NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref.

### **National Assessment Centre Services**

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



NS/INC18012826/R1rbe2





		D UNION HOUSESINGAPORE	Date: 07-11-2018	
			Code: INC4	
1.		Policy Particulars	:- THIRD PARTY CLAIM	
	Insured Veh.	SJQ 3276T	Veh. Inspected	SHC 4404G
	Policy No.	5101859899	Coverage (\$)	0.00
	Claim No.	MT/1002769-003	Excess (\$)	0.00
	Assign From		Assign Date	13/07/2018
2.		Vehicle Parti	culars & Condition	
	Make & Model	TOYOTA PRIUS	c.c	1798
	Engine No.	HIDDEN	Year of Reg.	2014
	Chassis No.	JTDKN36UX05721063	Colour	MAROON
	Odometer	476723	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	FAIR		
3.	Tay No.	Condit	ions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	195/65 R15	FALKEN	5 mm
	L/H Front Tyre	195/65 R15	FALKEN	5 mm
	R/H Rear Tyre	195/65 R15	FALKEN	5 mm
	L/H Rear Tyre	195/65 R15	FALKEN	5 mm
١.		Descripti	on of Damages	
	THE ANNUAL OF THE PROPERTY OF	STAINED DAMAGES AT THE RE	AR N/S PORTION.	
61 S	DAMAGES SEE D		I Information	
5.	Accident Date	11/07/2018	Inspection Date	13/07/2018
	Survey held at	SMRT AUTOMOTIVE SERVICE		10/01/2010
	Survey neid at	60 WOODLANDS INDUSTRIAL		05
ā.			emarks	
Ja.		ON WAS CONDUCTED ON A"WI" CE TO YOUR INSTRUCTIONS, V	THOUT PREJUDICE" BASIS.	REPAIRS.
5b.			Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	7 Working Days	



# **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. SHC 4404G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BUMPER REAR (DISC 25%)	DEFORMED	458.60	343.95
10	BUMPER CLIPS @\$1.61 (DISC 25%)	NECESSARY	16.10	12.07
1	BUMPER LIP COVER RR/LH (DISC 25%)	SCRATCHED	72.20	54.15
1	BUMPER LIP REAR (DISC 25%)	SCRATCHED	228.90	171.67
1	BUMPER REINFORCEMENT REAR (DISC 25%)	BENT	205.70	154.27
1	ARM SUB-ASSY, RR BUMPER LH (DISC 25%)	BENT	139.60	104.70
1	BUMPER SIDE RETAINER RR/LH (DISC 25%)	CRACKED	94.80	71.10
1	BUMPER SIDE RETAINER RR/RH (DISC 25%)	CUT	94.80	71.10
1	END PANEL (DISC 25%)	BENT	602.10	451.57
1	BOX, DECK FLOOR, LH (DISC 25%)	BENT	196.80	147.60
1	DUCT ASSY, QUARTER (DISC 25%)	CRACKED	70.40	52.80
1	TAIL LAMP LH (DISC 10%)	SCRATCHED	548.40	493.56
1	SENSOR REVERSE (SN)	NOT WORKING	180.00	180.00
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	SEALANT SIKAFLEX (SN)	NECESSARY	37.00	37.00
1	SMRT LOGO (SN)	NECESSARY	7.80	7.80
1	STICKER DECAL 6555 8888 (SN)	NECESSARY	21.60	21.60
1	BUMPER LIP COVER RR/RH	SERVICEABLE	118.10	19
1	BUMPER SEAL, RR LH	SERVICEABLE	88.90	14
1	BUMPER SEAL, RR RH	SERVICEABLE	65.70	10-
1	ARM SUB-ASSY, RR BUMPER RH	SERVICEABLE	139.60	2-
1	UNDER COVER SUB-ASSY, RR FLOOR	SERVICEABLE	514.50	
1	TAILGATE ASY	SERVICEABLE	1,007.90	
1	NAME PLATE (HYBRID)	SERVICEABLE	51.90	24
1	REINFORCEMENT, RR	SERVICEABLE	34.60	2
1	SPARE TYRE PANEL	SERVICEABLE	667.70	
1	MEMBER SUB-ASSY, RR LH	SERVICEABLE	174.10	
1	FLOOR PANEL RR/LH	SERVICEABLE	102.00	S
1	BOX, DECK FLOOR, COVER LH	SERVICEABLE	230.10	03
1	FENDER LINER RR/RH	SERVICEABLE	141.30	

Report Ref No. NS/INC18012826/R1rbe2



# **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





Page No.:2 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	TAIL LAMP BRACKET, LH	SERVICEABLE	30.70	-
1	TROUGH, BACK DOOR LH	SERVICEABLE	110.90	-
1	FENDER LINER RR/LH	SERVICEABLE	141.30	-
1	QUARTER GLASS RR/LH	NOT NECESSARY	168.10	-
1	SEALANT W/SCREEN	NOT NECESSARY	37.00	-
1	PANEL SUB-ASSY, QTR WHEEL HOUSE	TO REPAIR SEE LABOUR	588.40	-
1	FENDER RR/LH	TO REPAIR SEE LABOUR	766.80	
			8,274.40	2,494.94
	LABOUR			
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF PANEL SUB-ASSY, QTR WHEEL HOUSE AND FENDER RR/LH.		1,183.00	700.00
	SPRAY PAINT.		2,394.00	680.00
	TOWING CHARGE.		56.00	( <del>-</del>
	TO CHECK WIRING AND SYSTEM FUNCTION.		80.00	30.00
	TO REMOVE / REFIT SEAT.	NOT NECESSARY	120.00	92
	TO REMOVE & REFIT FUEL TANK.	NOT NECESSARY	120.00	χ.
	TO PROVIDE LABOUR & MATERIAL FOR SOLAR FILM.	NOT NECESSARY	125.00	
	TO REMOVE & REFIT REAR QUARTER GLASS LH.	NOT NECESSARY	120.00	
	TO REMOVE AND REFIT WIRE HARDESS.	NOT NECESSARY	120.00	1-
	TO TEST AND REFIT REVERSE SENSOR SYSTEM.		120.00	60.00
	TO REMOVE AND INSTALL LUGGAGE COMPARTMENT TRIM TO FACILITATE REPAIR.		120.00	60.00
	TO INSPECT RR LIGHTING, MECHANISMS & WATER TEST RR LIGHTING FOR LEAKAGE.		120.00	30.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	89
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	13
	TO ALIGN CHASSIS.	NOT NECESSARY	350.00	2-
			5,188.00	1,560.00
	GRAND TOTAL		13,462.40	4,054.94

RECOMMENDED COST OF LUMP SUM REPAIRS		3,250.00
(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)		

Report Ref No. NS/INC18012826/R1rbe2





Report Ref No. NS/INC18012826/R1rbe2

MOHAMMED RASUL BIN MOHD YUNUS

**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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