

REF:

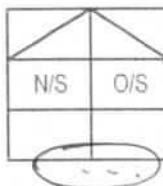
NS/INC18013464 / Nrbv

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: **SLP 5483E**
 Policy No. **5092620637 01** **010518-300419**
 Claims No. **MT 11003231-002**
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____
 IDAC Accident Report: _____ 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **SHC 4304L** Yr Regn: **Dec / 2013**
 Type: M.Car / M.Cycle / Bus / Van / Lorry / ☒ Prime Mover /

Truck / Trailer or

Make: **Toyota Prius** C.C. **1798**Colour: **Maroon** A/C: Insured / Std / NI / NASp. Reading: **514746** T/Radio: Insured / Std / NI / NAEng/No: **2ZR5936212**C/No: **5TAKN36U205712311**Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ Inorder / Jammed / Leaked / Burnt orBrake: ☒ Inorder / 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 **Falken**

Front

Rear

R/Bal. **6** mm R/Bal. **6** mmL/Bal. **6** mm L/Bal. **6** mmD.O.A. **16/7/2018** D.O.I. **18/7/2018**Survey held at **SMRT**Des. of Damages: Frt / ☒ Rear / O/S / N/S / U/C / Rooftop or**Rear**

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

Date / Time	Action / Instruction
	SHC 4304L - CG3 / ALG10004081 / ThinP22
	SLP 5483E - CG3 / FC118012925 / Kcd3
25/7	Confirmed final fig of \$1,150 with Poh Suan (Ref. 1500.10, 562) NTUC
	RECEIVED 12 SEP 2018
	- SLP 483E

Date/Time, File Pass to?

☐ : Preli. Report☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: **4**Resurvey No. of Trip: **2**

Survey Fee:

Transportation:

) \$ + RS \$

) Photos

) Others

TOTAL

Report Format : **TP**Lump Sum / I.B.I: (\$ **1150**)Add Fee: ☐ Site Insp (\$☐ Interview (\$☐ Tech. Invs (\$☐ Weekend (\$**160**

TP Claims against NTUC Income: Follow-Through Survey

Date : 12/09/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/1003231-002	SMRT TAXIS PTE LTD	SHC 4304L	SLP 5483E	16/07/2018	7:40	\$ 2,615.80	\$ 1,150.00
2	MT/1003062-002	SMRT TAXIS PTE LTD	SMB 1647M	YN 5332P	16/07/2018	7:05	\$ 10,579.30	\$ 5,700.00
3	MT/1011180-001	SMRT TAXIS PTE LTD	SHB 1807C	SIG 1130X	18/07/2018	9:15	\$ 3,130.38	\$ 1,150.00
4	MT/1004097-003	SMRT TAXIS PTE LTD	SHD 6234L	GBA 177U	22/07/2018	22:05	\$ 12,277.40	\$ 4,735.09
5	MT/1003320-002	SMRT TAXIS PTE LTD	SHC 4544K	SDT 3015K	16/07/2018	0:50	\$ 8,587.11	\$ 3,650.00

Claim received from LKK



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/INC18013464/Vrb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 24-07-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLP 5483E	Veh. Inspected	SHC 4304L
Policy No.	5092620637-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	18/07/2018

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--

5. General Information

Accident Date	16/07/2018	Inspection Date	18/07/2018
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="16/07/2018 18:05"/>						
Vehicle No.(For Motor)	<input type="text" value="SLP5483E"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5092620637-01	PROGRESSIVE LEASING SERVICES	53366429B	GPC	drive CLASSIC	SLP5483E	SLP5483E	01/05/2018	30/04/2019
<input type="button" value="Continue"/>									

> Back to OneMotoring

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	SHC4304L		
Vehicle Type :	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1 :	Air-Con (Taxi)		
Vehicle Scheme :	Taxi (Company)		
Vehicle Make :	TOYOTA		
Vehicle Model :	PRIUS TAXI (SMRT)		
Chassis No. :	JTDKN36U205712311		
Propellant :	Petrol-Electric		
Engine No. :	2ZR5936212		
Motor No. :	3JM5919003		
Engine Capacity :	1798 cc		
Power Rating :	60.0 kW		
Maximum Power Output :	100.0 kW (134 bhp)		
Maximum Laden Weight :	1805 kg		
Unladen Weight :	1370 kg		
Year Of Manufacture :	2013		
Original Registration Date :	06 Dec 2013		
Lifespan Expiry Date :	05 Dec 2021		
COE Category :	A - Car (1600cc & below)		
PQP Paid :	\$62,740.00		
COE Expiry Date :	05 Dec 2021		
Road Tax Expiry Date :	05 Dec 2018		
PARF Eligibility Expiry Date :	05 Dec 2021		
Inspection Due Date :	05 Dec 2018		
Intended Transfer Date :	23 Jul 2018		
CO2 Emission :	92.00 (g/km)		
CEV/VES Rebate Utilised Amount :	\$30,000.00		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for 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.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00
Message			
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.			

You may print this page for reference.

OK Print

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHC4304L
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Sep 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2013
Engine No.:	2ZR5936212
Chassis No.:	JTDKN36U205712311
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$33,120.00
Original Registration Date:	06 Dec 2013
First Registration Date:	06 Dec 2013
Transfer Count:	0
Actual ARF Paid:	\$8,368.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	05 Dec 2021
PARF Rebate Amount:	\$6,276.00
Intended COE Rebate Details	
COE Expiry Date:	05 Dec 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$62,740.00
COE Rebate Amount:	\$25,353.00
Total Rebate Amount:	\$31,629.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 11 Sep 2018

OK

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	16/07/2018 11:21
Date Of Accident	16/07/2018 07:40
Exact Location Of Accident	PIE TOWARDS CHANGI AIRPORT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4304L
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 REWARDS
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	LAW POH KHOON
NRIC No	S1825627D
Date Of Birth	17/12/1967
Occupation	OUTDOOR
Date Of Driving Pass	22/11/1990
Driving Experience	27 YEARS AND 7 MONTHS
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	
	NAME: : UNKNOWN
	GENDER: : FEMALE
Passenger 2	
	NAME: : UNKNOWN
	GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG PIE TOWARDS CHANGI AIRPORT WITH TWO PASSENGERS (FEMALE INDIAN) ON BOARD. TRAFFIC WAS SLOW MOVING AND SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SLP5483E HAD COLLIDED ONTO THE REAR OF MY TAXI. WHEN I ALIGHTED I REALISED THAT IT WAS A CHAIN COLLISION INVOLVING 3 VEHICLES INCLUDING MINE.

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	SLP5483E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JASON WEE
NRIC/Passport Number	S8525943A
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHC943T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

GOH ZONG DA

NRIC/Passport Number

S8234520E

Contact Number

Address

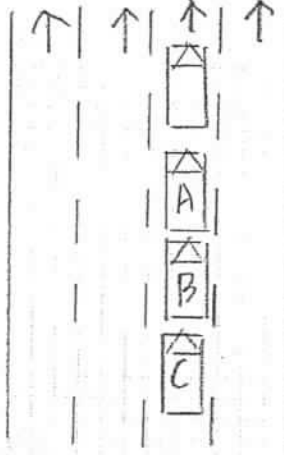
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PIE towards Changi Airport



C-SHC943T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

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



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

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

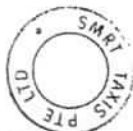
SKETCH PLAN

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.
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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:

July 16/07/2018

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

16/7/2018

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

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHC4304L
 Ref. No : TAX/07/18/2063
 Reg. Date : 06/12/2013
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS
 Name of Driver : LAW POH KHOON
 Type of Accident : CHAIN COLLISION
 Date / Time of Accident : 16/07/2018 07:41:00 AM
 Accident Reported Date / Time : 16/07/2018 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 : 000024097049
 Special Instruction to ARC, if any :
 SLP5483E
 Prepared Date : 16/07/2018 11:32:02 AM



Sathya Sai
 18/7/2018

[Signature]
 25/7/18

2 days

- Lump Sum Repair
- Photo of question mark item
- Photo after paint

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on "Without Prejudice" basis
- No illegal modifications is allowed
- Supplementary item(s) to be resurveyed **and** is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Chassis No : JTDKN36U20-5712311

Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges :	338.00	0.00
Total Spray Painting Charges :	558.00	0.00
Total Material Charges :	709.83	959.87
Other Charges :	280.00	0.00
TOTAL :	1,885.83 2615.80	0.00
Lum Sum Total :	1,900.00	0.00
No. of Repair Days :	3.00	0.00 2 days
Prepared / Adjusted By :		
Arc / Surveyor Sign Off Date :	17/07/2018 06:20:28 AM	01/01/1900 12:00:00 AM

M

Prepared / Adjusted Date :

Remarks :

Prepared Date : 17/07/2018 06:20:28 AM

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 LH REAR PORTION	338.00	0.00 200 400
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 ? X
Total Spray Painting & Panel Beating	558.00	0.00

To Respray Rear Panel

180

100

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0.00 60 /
TO REPLACE SUNDRY PARTS	100.00	0.00 20 /
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	280.00	0.00

2977.80

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
52159-47905		6505548	BUMPER REAR ✓ <i>CRK</i>	1	458.60	25.00	343.95 ✓	Replace	Replace	No
			PIXEL STICKER ✓ <i>NEC</i>	2	60.00	0.00	120.00 ✓	Replace	Replace	No
			SENSOR REVERSE ✓ <i>DMG</i>	1	180.00	0.00	180.00 ✓	Replace	Replace	No
52023-12240		6505547	BUMPER REINFORCEMENT REAR ?	1	205.70	25.00	154.27	Replace	Replace	No
52016-47030			ARM SUB-ASSY, RR ?	1	139.60	25.00	104.70	Replace	Replace	No
76088-47020		6505617	BUMPER LIP COVER RR/LH X	1	72.20	25.00	54.15 X	Replace	Replace	No
76891-47020		6505619	BUMPER LIP REAR X	1	228.90	25.00	171.67	Replace	Replace	No
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH ?	1	94.80	25.00	71.10	Replace	Replace	No
TOTAL MATERIALS								1,199.85	1,199.84	
TOTAL MATERIALS(Discounted)								709.83	959.87	

Added Spare Parts / Material Usage After Surveyor Signed off
2650.10

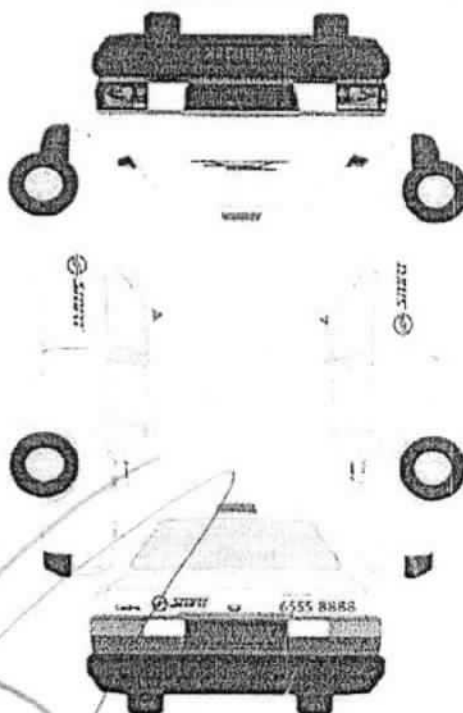
Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check
TOTAL SUPPLEMENTARY MATERIALS									

SMRT Accident Vehicle Repair Estimates

19-7-18/08:00

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

Reg. No : SHC4304L
Ref. No : TAX/07/18/2063
Reg. Date : 06/12/2013
Vehicle Type : TAXI
Make : TOYOTA PRIUS
Model : PRIUS
Name of Driver : LAW POH KHOON
Type of Accident : CHAIN COLLISION
Date / Time of Accident : 16/07/2018 07:41:00 AM
Accident Reported Date / Time : 16/07/2018 12:00:00 AM
Surveyor is Required? : Yes
Survey by : Sathya
Vehicle is Towed Back? : No Yes
Towed Back Date/Time :
Replacement Vehicle issued? : No
Accident Repair Job Card No : 000024097049
Special Instruction to ARC, if any :
SLP5483E (NTUC) - LKK
BEFORE PAINT PHOTO AND AFTER PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL
SURVEYOR Sathya Sai (LKK) & Email : sathyasai@lkkauto.com HP: 98072012
LUMPSUM REPAIR
Prepared Date : 16/07/2018 11:32:02 AM



Recording Camera

☐ ☒

Radio Antenna

☐ ☒

1st witness

Date 18-7-18

2nd witness

Date

E 1/2 F
KM 514700

Vehicle to Waga Date to: 19/7
Time to: 1100
Waga Job No: 07/0422
Vehicle sent to SMRT Date to: 20/7/18
Time to: 1444
Inspected by (SM RT):

CC 21/7/18 10:40 PMS

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

Chassis No : JTDKN36U20-5712311

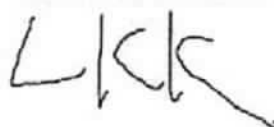
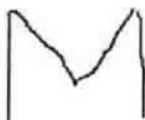
Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	338.00	400.00
Total Spray Painting Charges	738.00	300.00
Total Material Charges	623.38	643.95
Other Charges	280.00	-193.95
TOTAL	1,979.38	1,150.00
Lump Sum Total	0.00	0.00
No. of Repair Days	4.00	4.00 ✓
Prepared / Adjusted By		SATHYA (LKK)
Arc / Surveyor Sign Off Date	17/07/2018 06:20:28 AM	18/07/2018 04:35:16 PM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 17/07/2018 06:20:28 AM

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

Quotation No : QN-1807-0293

Invoice No :

Quotation Date : 24/7

Invoice Date :

Invoice Amount : 0.00

Prepared Date : 7/23/2018 7:17:05 PM

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH REAR PORTION	338.00	400.00 ✓
Total Labour	338.00	400.00

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
TO RESPRAY REAR PANEL	180.00	100.00 ✓
Total Spray Painting & Panel Beating	738.00	300.00

(A)

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	60.00 ✓
TO REPLACE SUNDRY PARTS	100.00	20.00 ✓
TO WASH AND VACUUM	60.00	0.00
Lump Sum Adjustment by Surveyor	0.00	-273.95
Total Other Costs	280.00	-193.95

} 80

1418

2917.80

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
52159-47905		6505548	BUMPER REAR	1	458.60	25.00	343.95	Replace	Replace	No <input checked="" type="checkbox"/>
			PIXEL STICKER	2	60.00	0.00	120.00	Replace	Replace	No <input checked="" type="checkbox"/>
			SENSOR REVERSE	1	180.00	0.00	180.00	Replace	Replace	No <input checked="" type="checkbox"/>
52023-12240		6505547	BUMPER REINFORCEMENT REAR	1	205.70	25.00	154.28	Replace	Check	No <input checked="" type="checkbox"/>
52016-47030			ARM SUB-ASSY, RR BUMPER LH	1	139.60	25.00	104.70	Replace	Check	No <input checked="" type="checkbox"/>
76088-47020		6505617	BUMPER LIP COVER RR/LH	0	72.20	25.00	0.00	Replace	Not given	No <input checked="" type="checkbox"/>
76891-47020		6505619	BUMPER LIP REAR	0	228.90	25.00	0.00	Replace	Not given	No <input checked="" type="checkbox"/>
52576-47020		6505550	BUMPER SIDE RETAINER RR/LH	1	94.80	25.00	71.10	Replace	Check	No <input checked="" type="checkbox"/>
TOTAL MATERIALS							974.03	643.95		
TOTAL MATERIALS(Discounted)							623.38	643.95		

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									

643.95 ✓
+ 400.00 ✓
+ 380.00 ✓

1423.95 ✓

- 202

1139.16 ✓

LIS \$1150/- @ 4 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/INC18013464/Nrbe2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 02-10-2018
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLP 5483E	Veh. Inspected	SHC 4304L
Policy No.	5092620637-01	Coverage (\$)	0.00
Claim No.	MT/1003231-002	Excess (\$)	0.00
Assign From		Assign Date	18/07/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2013
Chassis No.	JTDKN36U205712311	Colour	MAROON
Odometer	514746	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	6 mm
L/H Front Tyre	195/65 R15	FALKEN	6 mm
R/H Rear Tyre	195/65 R15	FALKEN	6 mm
L/H Rear Tyre	195/65 R15	FALKEN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	16/07/2018	Inspection Date	18/07/2018
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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**National Assessment Centre Services**

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

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Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4304L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BUMPER REAR (DISC 25%)	CRACKED	458.60	343.95
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	SENSOR REVERSE (SN)	DAMAGED	180.00	180.00
1	BUMPER REINFORCEMENT REA	NOT NECESSARY	205.70	-
1	ARM SUB-ASSY, RR BUMPER LH	NOT NECESSARY	139.60	-
1	BUMPER LIP COVER RR/LH	NOT NECESSARY	72.20	-
1	BUMPER LIP REAR	NOT NECESSARY	228.90	-
1	BUMPER SIDE RETAINER RR/LH	NOT NECESSARY	94.80	-
			1,499.80	643.95
	<u>LABOUR</u>			
	PANEL BEATING & BODY WORK.		400.00	400.00
	SPRAY PAINT.		738.00	300.00
	TO TEST AND REFIX REVERSE SENSOR SYSTEM.		120.00	60.00
	TO REPLACE SUNDRY PARTS.		100.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			1,418.00	780.00
	GRAND TOTAL		2,917.80	1,423.95
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,150.00

Report Ref No. NS/INC18013464/Nrbe2

MUHAMMAD NAZRIL BIN ABDULLAH

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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