

REF:

NS/INC18013468 / #402

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: SHD 1881B

Policy No. 5095103893 2010-17

Claims No. MT/1003146-002

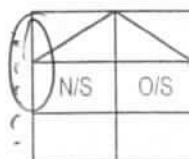
Sum Insured: _____ Excess: _____

(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 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: SHC 4101 E Yr Regn: Dec 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: 78436 T/Radio: Insured / Std / NI / NA

Eng/No: 2ZRS111868

C/No: JTDKB3FU803576190

Gen. Cond: Good / ☒ Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt orModi: ☒ Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/65 R15

R: 195/65 R15

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

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

Front Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 16/7/2018 D.O.I. 18/7/2018

Survey held at SMRT

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

N/S Front

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

Date / Time	Action / Instruction
	SHC 4101E - NS/INC17001888/KHbm2
	SHD 1881B - CB/CTL17001157/KHb392
	DA: 15012017 TAX/07/18/2071
	DA: 15012017
	Part by Part \$4076.58 (Red: 7897.72; 65%)
	NTUC
	SHD 1881B
	RECEIVED 31 JUL 2018

Date/Time, File Pass to? ☐ : Preli. Report1) 31/7 Typist ☒ : Final Report

Date/Time, File Return to?

2)

Report Format: TP

Lump Sum / I.B.I: (\$ 4076.58)

Days Of Repair:

Resurvey No. of Trip:

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

Survey Fee:

Transportation:

) S + RS SI

) Photos

) Others

TOTAL

https://fcbi



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/INC18013468/Vtb				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 24-07-2018	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHD 1881B	Veh. Inspected	SHC 4101E	
Policy No.	5095103893	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="SHD1881B"/>								
<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"/>	5095103893	PREMIER TAXIS PTE. LTD.	200304975H	GFT	Third Party	SHD1881B	SHD1881B	20/10/2017	
<input type="button" value="Continue"/>									

Denise Tay (LKKAUTO)

From: mtreg <mtreg@income.com.sg>
Sent: Friday, 27 July 2018 3:11 PM
To: Denise Tay (LKKAUTO)
Subject: REQUEST CLAIM NUMBER

Hi,

All claims created

With Regards

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



From: Denise Tay (LKKAUTO) [mailto:denisetay@lkkauto.com]
Sent: Friday, July 27, 2018 2:55 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/1004863-001	SMRT TAXIS PTE LTD	SHC 4141P	SLR 6148G	
2	MT/1003146-002	SMRT TAXIS PTE LTD	SHC 4101E	SHD 1881B	

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: 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	16/07/2018 15:55
Date Of Accident	16/07/2018 14:10
Exact Location Of Accident	ECP TOWARDS MCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4101E
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS TAXI-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

Insurance Company

Name of Insurance Company	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	CHUA HUI LENG
NRIC No	S1826979A
Date Of Birth	14/03/1967
Occupation	OUTDOOR
Date Of Driving Pass	18/03/1985
Driving Experience	33 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	7
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 - CHANGE/CROSS LANE
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)	2
Passenger 1	
	NAME: : UNKNOWN
	GENDER: : MALE

Details of Police Action

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

Circumstances of Accident

I WAS TRAVELLING STRAIGHT ALONG ECP AT THE RIGHT MOST LANE WITH A PSENGER ON BOARD WHEN THE PREMIER CAB SHD1881B FROM MY LEFT LANE CUT INTO MY LANE AND COLLIDED ONTO THE LEFT PORTION OF MY TAXI.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD1881B
Vehicle Make/Model/Colour	PREMIER
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

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.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

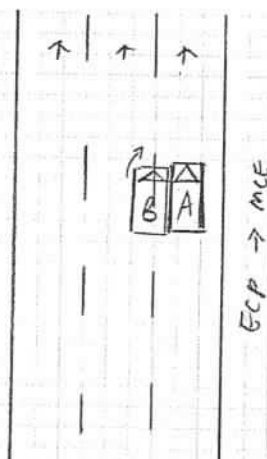


Policyholder's Signature
Date & Time:

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

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

A-SHC4101E
B-SH01881B



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

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



Date & Time:

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

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

du 16/7/2010

[> Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	SHC4101E		
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. :	JTDKB3FU803576190		
Propellant :	Petrol-Electric		
Engine No. :	2ZRS111868		
Motor No. :	1NMS111868		
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 Dec 2017		
Lifespan Expiry Date :	11 Dec 2025		
COE Category :	A - Car up to 1600cc & 97kW (130bhp)		
PQP Paid :	\$34,159.00		
COE Expiry Date :	11 Dec 2025		
Road Tax Expiry Date :	11 Dec 2018		
PARF Eligibility Expiry Date :	11 Dec 2025		
Inspection Due Date :	11 Dec 2018		
Intended Transfer Date :	23 Jul 2018		
CO2 Emission :	87.00 (g/km)		
CEV/VES Rebate Utilised Amount :	\$27,610.00		
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.			

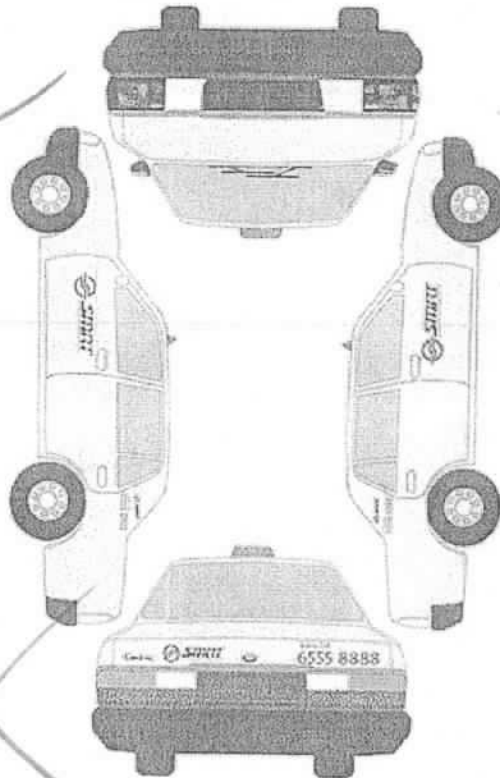
You may print this page for reference.

OK [Print](#)

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHC4101E
 Ref. No : TAX/07/18/2071
 Reg. Date : 12/12/2017
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS4
 Name of Driver : CHUA HUI LENG
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 16/07/2018 02:10:00 PM
 Accident Reported Date / Time : 16/07/2018 12:00:00 AM
 Surveyor is Required? : Yes
 Survey by : Sathya Sai
 Vehicle is Towed Back? : No
 Towed Back Date/Time :
 Replacement Vehicle issued? : No
 Accident Repair Job Card No : 000024097057
 Special Instruction to ARC, if any :
 SHD1881B (PREMIER) - NTUC - LKK
 BEFORE PAINT PHOTO, FOR CHECK ITEM AND REPLACE ITEM PLEASE CALL SURVEYOR Sathya Sai (LKK)
 & Email : sathyasai@lkkauto.com HP: 98072012
 Prepared Date : 16/07/2018 04:12:08 PM



15:30

23.7.18

reject FRT LH door surface of the door, paint in
 no good!
 Pals

11:30

24.7.18

Recording Camera

☐ ☒

Radio Antenna

☐ ☒

1st witness

Date 18-7-18

2nd witness

Date 23.7.18

78436 km



78504 km

LEE SHENG AUTO PTE LTD

23.7.18

Vehicle Return Date:

Vehicle Return Time:

AM 12:50

Vehicle Return:

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

Chassis No : JTDKB3FU803576190

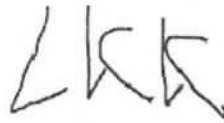
Mileage : 0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 1,014.00	600.00
Total Spray Painting Charges	: 2,052.00	960.00
Total Material Charges	: 2,534.08	2,226.58
Other Charges	: 700.00	290.00
TOTAL	: 6,300.08 11974.30	4,076.58
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 7.00	4.00 ✓
Prepared / Adjusted By	:	SATHYA (LKK)
Arc / Surveyor Sign Off Date	: 17/07/2018 06:44:46 AM	18/07/2018 04:29:15 PM



Prepared / Adjusted Date :

Remarks :

Prepared Date : 16/07/2018 11:03:06 PM

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

Quotation No : QN-1807-0602

Invoice No :

Quotation Date : 25/7

Invoice Date :

Invoice Amount :

Prepared Date :

Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPAIR LH PORTION ✓	1,014.00	600.00 ✓
Total Labour	1,014.00	600.00 ✓

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER ✓	378.00	200.00 ✓
TO RESPRAY FRONT FENDER LH ✓	378.00	200.00 ✓
TO RESPRAY RIM ✓	180.00	80.00 ✓
TO RESPRAY FRONT DOOR LH ✓	378.00	200.00 ✓
TO RESPRAY VIEW MIRROR	180.00	0.00
TO RESPRAY DOOR HANDLE ✓	180.00	80.00 ✓
TO RESPRAY REAR DOOR LH ✓	378.00	200.00 ✓
Total Spray Painting & Panel Beating	2,052.00	960.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	40.00 ✓
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	50.00 ✓
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60.00 ✓
TO TRANSFER DOOR MECHANISM	240.00	120.00 ✓
TO REPLACE SUNDRY PARTS	100.00	20.00 ✓
TO WASH AND VACUUM	60.00	0.00
Total Other Costs	700.00	290.00 ✓

11974.30

art 4- Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
21194792			COVER, FR BUMPER	R 1	495.50	100.00	0.00	Replace	Repair	No R
21164700			SUPPORT, FR BUMPER LH	X 1	82.30	25.00	61.73	Replace	Check	No X
38024710			FENDER SUB-ASSY, FR, LH	✓ 1	933.10	25.00	699.82	Replace	Replace	No ✓
53744710			EMBLEM, SIDE PANEL (HYBRID)	✓ 1	52.90	25.00	39.67	Replace	Replace	No ✓
38764710			LINER, FR FENDER, LH	✓ 1	194.30	25.00	145.72	Replace	Replace	No ✓
2611-7450			WHEEL, DISC FRONT	R 1	1,555.10	100.00	0.00	Replace	Repair	No R
70024712			PANEL SUB-ASSY, FRONT DOOR LH	✓ 1	1,249.60	25.00	937.20	Replace	Replace	No ✓
			STICKER DECAL SMRT (DOOR)	✓ 1	60.00	0.00	60.00	Replace	Replace	No ✓
179404740			MIRROR ASSY, OUTER REAR VIEW, LH	X 0	1,283.90	10.00	0.00	Replace	Not given	No X
1794547030A1			COVER, OUTER MIRROR, LH	X 0	89.50	25.00	0.00	Replace	Not given	No X
1794B47250			COVER, OUTER MIRROR, LH NO.2	X 0	39.40	25.00	0.00	Replace	Not given	No X
1794047010			LAMP ASSY, SIDE MIRROR TURN SIGNAL, LH	X 0	162.20	10.00	0.00	Replace	Not given	No X
3872012151			HINGE ASSY, FRONT DOOR, UPPER LH	X 1	82.10	25.00	61.58	Replace	Check	No X
3874012120			HINGE ASSY, FRONT DOOR, LOWER LH	X 1	92.10	25.00	69.08	Replace	Check	No X
3861047040			CHECK ASSY, FRONT DOOR	X 1	153.50	25.00	115.13	Replace	Check	No X
3921047051A1			DOOR OUTER HANDLE FRONT, LH	✓ 1	378.90	25.00	284.17	Replace	Replace	No ✓
5700447210			PANEL SUB-ASSY, REAR DOOR, LH	R 1	1,243.90	100.00	0.00	Replace	Repair	No R
			PIXEL STICKER	✓ 1	60.00	0.00	60.00	Replace	Replace	No ✓
TOTAL MATERIALS							2,534.10	2,226.58		
TOTAL MATERIALS(Discounted)							2,534.08	2,226.58		

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									

2226.58 ✓
 + 600.00 ✓
 + 1250.00 ✓
4076.58 @ 4 days
 confirmed

SMRT Accident Vehicle Repair Estimates

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

Reg. No : SHC4101E
 Ref. No : TAX/07/18/2071
 Reg. Date : 12/12/2017
 Vehicle Type : TAXI
 Make : TOYOTA PRIUS
 Model : PRIUS4
 Name of Driver : CHUA HUI LENG
 Type of Accident : SIDE SWIPE
 Date / Time of Accident : 16/07/2018 02:10:00 PM
 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 : 000024097057
 Special Instruction to ARC, if any :
 SHD1881B (PREMIER) - NTUC
 Prepared Date : 16/07/2018 04:12:08 PM



Sathya Sai
 18/7/2018

4 days

- Part by Part
- Question mark then 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 approved by LKK Auto Consultants and is subject to final approval from the insurance company

Acknowledged by Repairer

Signature: _____

Date: _____

Chassis No : JTDKB3FU803576190

Mileage

0

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Charges	: 1,014.00	0.00
Total Spray Painting Charges	: 2,052.00	0.00
Total Material Charges	: 6,403.08	6,403.08
Other Charges	: 700.00	0.00
TOTAL	: 10,169.08	0.00
Lum Sum Total	: 0.00	0.00
No. of Repair Days	: 7.00	0.00
Prepared / Adjusted By	:	
Arc / Surveyor Sing Off Date	: 17/07/2018 06:44:46 AM	01/01/1900 12:00:00 AM

M

Prepared / Adjusted Date :

Remarks :

Prepared Date : 16/07/2018 11:03:06 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 LH PORTION	1,014.00	0.00 600
Total Labour	1,014.00	0.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER	378.00	0.00 200
TO RESPRAY FRONT FENDER LH	378.00	0.00 200
TO RESPRAY RIM	180.00	0.00 80
TO RESPRAY FRONT DOOR LH	378.00	0.00 200
TO RESPRAY VIEW MIRROR	180.00	0.00 X
TO RESPRAY DOOR HANDLE	180.00	0.00 80
TO RESPRAY REAR DOOR LH	378.00	0.00 200
Total Spray Painting & Panel Beating	2,052.00	0.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0.00 40
TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0.00 50
TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	0.00 60
TO TRANSFER DOOR MECHANISM	240.00	0.00 120
TO REPLACE SUNDRY PARTS	100.00	0.00 20
TO WASH AND VACUUM	60.00	0.00 X
Total Other Costs	700.00	0.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommendation	Surveyor Approved	Photos Attached
5211947962			COVER, FR BUMPER	1	495.50	25.00	371.62	Replace	Replace <i>R</i>	No
5211647050			SUPPORT, FR BUMPER LH	1	82.30	25.00	61.72	Replace	Replace?	No
5380247100			FENDER SUB-ASSY, FR, LH	1	933.10	25.00	699.82	Replace	Replace <i>✓ DT</i>	No
7537447140			EMBLEM, SIDE PANEL (HYBRID)	1	52.90	25.00	39.67	Replace	Replace <i>✓ NEC</i>	No
5387647110			LINER, FR FENDER LH <i>✓ deform</i>	1	194.30	25.00	145.72	Replace	Replace	No
42611-47450			WHEEL, DISC FRONT <i>R</i>	1	1,555.10	25.00	1,166.32	Replace	Replace	No
6700247162			PANEL SUB-ASSY, FRONT DOOR LH <i>✓ cut</i>	1	1,249.60	25.00	937.20	Replace	Replace	No
			STICKER DECAL SMRT (DOOR) <i>✓ NEC</i>	1	60.00	0.00	60.00	Replace	Replace	No
8794047440			MIRROR ASSY, OUTER REAR VIEW, LH <i>X</i>	1	1,283.90	10.00	1,155.51	Replace	Replace	No
8794547060A1			COVER, OUTER MIRROR, LH <i>X</i>	1	89.50	25.00	67.12	Replace	Replace	No
8794B47250			COVER, OUTER MIRROR, LH NO.2 <i>X</i>	1	39.40	25.00	29.55	Replace	Replace	No
8174047010			LAMP ASSY, SIDE MIRROR TURN SIGNAL, LH <i>X</i>	1	162.20	10.00	145.98	Replace	Replace	No
6872012151			HINGE ASSY, FRONT DOOR, UPPER LH <i>?</i>	1	82.10	25.00	61.57	Replace	Replace	No
6874012120			HINGE ASSY, FRONT DOOR, LOWER LH <i>?</i>	1	92.10	25.00	69.07	Replace	Replace	No
6861047040			CHECK ASSY, FRONT DOOR <i>?</i>	1	153.50	25.00	115.12	Replace	Replace	No
3921047051A1			DOOR OUTER HANDLE FRONT, LH <i>✓ cut</i>	1	378.90	25.00	284.17	Replace	Replace	No
3700447210			PANEL SUB-ASSY, REAR DOOR, LH <i>R</i>	1	1,243.90	25.00	932.92	Replace	Replace	No
			PIXEL STICKER <i>✓ NEC</i>	1	60.00	0.00	60.00	Replace	Replace	No
TOTAL MATERIALS								6,403.14	6,403.08	
TOTAL MATERIALS(Discounted)								6,403.08	6,403.08	

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									




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/INC18013468/Dtbe2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 14-08-2018	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHD 1881B	Veh. Inspected	SHC 4101E	
Policy No.	5095103893	Coverage (\$)	0.00	
Claim No.	MT/1003146-002	Excess (\$)	0.00	
Assign From		Assign Date	18/07/2018	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA PRIUS 4	c.c	1798	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	JTDKB3FU803576190	Colour	MAROON	
Odometer	78436	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	FALKEN	6 mm	
L/H Front Tyre	195/65 R15	FALKEN	6 mm	
R/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm	
L/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS				
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.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4101E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FENDER SUB-ASSY,FR, LH (DISC 25%)	DENTED	933.10	699.82
1	EMBLEM, SIDE PANEL (HYBRID) (DISC 25%)	NECESSARY	52.90	39.67
1	LINER, FR FENDER, LH (DISC 25%)	DEFORMED	194.30	145.72
1	PANEL SUB-ASSY, FRONT DOOR LH (DISC 25%)	CUT	1,249.60	937.20
1	DOOR OUTER HANDLE FRONT, LH (DISC 25%)	CUT	378.90	284.17
1	STICKER DECAL SMRT (DOOR) (SN)	NECESSARY	60.00	60.00
1	PIXEL STICKER (SN)	NECESSARY	60.00	60.00
1	SUPPORT, FR BUMPER LH	NOT NECESSARY	82.30	-
1	MIRROR ASSY, OUTER REAR VIEW, LH	NOT NECESSARY	1,283.90	-
1	COVER, OUTER MIRROR, LH	NOT NECESSARY	89.50	-
1	COVER, OUTER MIRROR, LH NO.2	NOT NECESSARY	39.40	-
1	LAMP ASSY, SIDE MIRROR TURN SIGNAL, LH	NOT NECESSARY	162.20	-
1	HINGE ASSY, FRONT DOOR, UPPER LH	NOT NECESSARY	82.10	-
1	HINGE ASSY, FRONT DOOR, LOWER LH	NOT NECESSARY	92.10	-
1	CHECK ASSY, FRONT DOOR	NOT NECESSARY	153.50	-
1	COVER, FR BUMPER	TO REPAIR SEE LABOUR	495.50	-
1	WHEEL, DISC FRONT	TO REPAIR SEE LABOUR	1,555.10	-
1	PANEL SUB-ASSY, REAR DOOR, LH	TO REPAIR SEE LABOUR	1,243.90	-
			8,208.30	2,226.58
<u>LABOUR</u>				
PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF COVER, FR BUMPER, WHEEL, DISC FRONT AND PANEL SUB-ASSY, REAR DOOR, LH.			1,014.00	600.00
SPRAY PAINT.			2,052.00	960.00
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 TRANSFER DOOR MECHANISM.			240.00	120.00
TO REPLACE SUNDRY PARTS.			100.00	20.00

Report Ref No. NS/INC18013468/Dtbe2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			3,766.00	1,850.00
GRAND TOTAL			11,974.30	4,076.58
RECOMMENDED COST OF REPAIRS				4,076.58

Report Ref No. NS/INC18013468/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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