# ASSIGNMENT

From: Date:	Veh No. SMB 1647 M Yr Regn. Feb 12015
Estimated Cost:	Type: M.Car / M.Cycle / Pup / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: MAN c.c 10518
at Workshop m/s	Colour Musticolour A/C: Insured/Std/NI/NA
of -	Sp.Reading 2160.   T/Radio: Insured / Std / NI / NA
Insured: YN 533 2P	Eng/No: 50339722313972
Policy No. 5085457870-D1 14-11-2017	C/NO: WMAA122279F7002649
Claims No. mt/100 3062 -022	Gen. Cond: Good / Faith Poor / Burnt
Sum Insured: Excess:	Steering: In order / Jammed / Leaked / Burnt or
(Client's Record)	Brake: (notier / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil)/ S/Rim / STD A/Rim or
	Tyre Size: F: 2 75 76 822.5
(Policy Condition)	R: 275/70 R22,5
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or (=) firenza, Conti(R)
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6/6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6/6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 16/7/2018 D.O.I. 18/7/2012
Lum Sum: % 3 Val.: Yes or No	Survey held at SMRT
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN/OUT	Rear N/S
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction  SMB (644 M - x	•
SM 5332P ×	
11/9 Consirmed Le & Stoop and 3 days	Difty Cottenine. (Red 3879, 30 40%)
0	
RECEIVED 1 2 S	EP 2018
KLOLITZ	
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 3
: Final Report	Resurvey No. of Trip:   Survey Fee: 160
Date/Time, File Return to?	. Transportation.
Add Fee	promote and the second
	: Interview (\$ ) Photos
Report Format:	Tech Invs (\$ ) Others
Lum@Sum / I.B.I: (\$ 5700)	Weakend (\$
	TOTAL 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
н	MT/1003231-002	SMRT TAXIS PTE LTD	SHC 4304L	SLP 5483E	16/07/2018	7:40	\$ 2,615.80	0 \$ 1,150.00
2	MT/1003062-002	SMRT TAXIS PTE LTD	SMB 1647M	YN 5332P	16/07/2018	7:05	\$ 10,579.30	0 \$ 5,700.00
e	MT/1011180-001	SMRT TAXIS PTE LTD	SHB 1807C	SJG 1130X	18/07/2018	9:15	\$ 3,130.38	8 \$ 1,150.00
4	MT/1004097-003	SMRT TAXIS PTE LTD	SHD 6234L	GBA 177U	22/07/2018	22:05	\$ 12,277.40	\$
S	MT/1003320-002	SMRT TAXIS PTE LTD	SHC 4544K	SDT 3015K	16/07/2018	0:20	\$ 8,587.11	1 \$ 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





NTI	JC INCOME INSU	RANCE CO-OPERATIVE LTD	Ref:	NS/INC1801347	71/Vrb
#05	BRAS BASAH ROA -01 NTUC TRADE 556	AD UNION HOUSESINGAPORE	Date:	24-07-2018	
				INC4	
1.		Policy Particulars	:- THIRI	D PARTY CLAIM	
	Insured Veh.	YN 5332P	Veh. Ir	nspected	SMB 1647M
	Policy No.	5085452870-01	Cover	age (\$)	0.00
	Claim No.		Exces	s (\$)	0.00
	Assign From		Assign	n Date	18/07/2018
2.		Vehicle Partic	culars 8	Condition	
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year o	f Reg.	
	Chassis No.		Colour		
	Odometer	(H)	Steerin	ng	
	Brakes		Modifie	cation	
	General				
3.		Condition	ons of T	yres	
		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	on of Da	mages	
5.		General	Informa	ation	
	Accident Date	16/07/2018	Inspec	tion Date	18/07/2018
	Survey held at	SMRT AUTOMOTIVE SERVICES	S PTE LT	D	
		60 WOODLANDS INDUSTRIAL I	PARK E4	SINGAPORE 7577	05
5a.		Re	marks		
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, WI	HOUT PE E HAVE I	REJUDICE" BASIS. NOT AUTHORISED	REPAIRS.

				,	Change La	nguage	Change Password	ralClaim
olicy Query						V. 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		- Log Ou
cy No.				Date of Acc	ident	16/07	/2018 18:05	
icle No.(For Motor)	YN5332P							
				Search				
ect Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence	Expiry Date
5085452870-01	ALLBEST MARINE SUPPLIES PTE. LTD.	200501577K	GFT	Comprehensive	YN5332P	YN5332P	14/11/2017	
1	icy No. hicle No.(For Motor) ect Policy No.	ect Policy No.  Policyholder Name ALLBEST MARINE SUPPLIES PTE.	ect Policy No.  Policyholder Name Policyholder NRIC ALLBEST MARINE SUPPLIES PTE. 200501577K	ect Policy No.  Policyholder Name NRIC  ALLBEST MARINE SUPPLIES PTE.  POSSOSOSOSOSOSOSOSOSOSOSOSOSOSOSOSOSOS	ect Policy No.  Policyholder Name Policyholder NRIC Product Cover Type  ALLBEST MARINE SUPPLIES PTE. 200501577K GFT Comprehensive	ect Policy No.  Policyholder Name NRIC Product Cover Type Vehicle No.  ALLBEST MARINE SUPPLIES PTE. 200501577K GFT Comprehensive YNS332P	ect Policy No.  Policyholder Name NRIC Product Cover Type Vehicle No. Object  ALLBEST MARINE SUPPLIES PTE. 200501577K GFT Comprehensive YN5332P YN5332P	icy No.  Date of Accident  16/07/2018 18:05  Search  Search  Policy No. Policyholder Name NRIC Product Cover Type Vehicle Insured Object Date  ALLBEST MARINE SUPPLIES PTE. 200501577K GFT Comprehensive YN5332P YN5332P 14/11/2017

## > Back to OneMotoring

Enquire Transfer Fee

Vehicle Details			
Vehicle No.:	SMB1647M		
Vehicle Type :	H20 - Public Transport Bus/Coach/Minibus		
Vehicle Attachment 1:	Air-Conditioned		
Vehicle Scheme:	OmniBus (SMRT - ARF-exempted)		
Vehicle Make :	MAN		
Vehicle Model :	NL 320F (A22) 11L AUTO ABS TURBO		
Chassis No. :	WMAA22ZZ9F7002649		
Propellant:	Diesel		
Engine No.:	50339722313972		
Engine Capacity :	10518 cc		
Maximum Power Output:			
Maximum Laden Weight:	18000 kg		
Unladen Weight:	11280 kg		
Year Of Manufacture :	2014		
Original Registration Date:	27 Feb 2015		
Lifespan Expiry Date :	26 Feb 2032		
Road Tax Expiry Date:	26 Aug 2018		
Inspection Due Date :	26 Feb 2019		
Intended Transfer Date:	23 Jul 2018		
CO2 Emission :	•		
CO Emission :			
HC Emission :			
NOx Emission :			
PM Emission :			
renewed after 26 Aug 2018, late	Aug 2018. You may renew the road tax from 27 N renewal fee(s) will be imposed. Please use Enquire	e Road Tax Payable to check on the	late fee(s) payable.
Road tax, including Over Paymen Amount Payable (From 27 Au	t (if any), of a vehicle will follow the vehicle to the	new registered owner when its ow	nership is being transferred.
	Amount Before GST	GST Amount	Amount After GST
	(S\$)	(5\$)	(S\$)
Transfer Fee :	25.00	12	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	850.00	*	850.00
Total Amount Payable : Amount Payable (From 27 Au	ug 2018 to 26 Aug 2019)		875.00
	Amount Before GST	GST Amount	Amount After GST

Amount Payable (From 27 Aug 20	18 to 26 Aug 2019)		873.00
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00		25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	1,700.00	•	1,700.00
Total Amount Payable :			1,725.00

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: Vehicle Details	2292D
Vehicle No.:	SMB1647M
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Sep 2018
Vehicle Make:	MAN
Vehicle Model:	NL 320F (A22) 11L AUTO ABS TURBO
Primary Colour:	Multi-Colour
Manufacturing Year:	2014
Engine No.:	50339722313972
Chassis No.:	WMAA22ZZ9F7002649
Maximum Power Output:	
Open Market Value:	\$249,464.00
Original Registration Date:	27 Feb 2015
First Registration Date:	27 Feb 2015
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$0.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	·
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 11 Sep 2018

ОК

1/1

# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 18/07/2018 09:27

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number Contact Number

**EMail Address** 

- 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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	18/07/2018 09:20
Date Of Accident	16/07/2018 07:05
Exact Location Of Accident	PIE SLIP ROAD WITH BUKIT BATOK ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMB1647M
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	MAN
Model	BUS
Exact Purpose for which vehicle was being used at time of accident	
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	BUS
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	DII027592MFBP
Cover Note Number	
Driver	
Name of Driver	GU SHUANGYIN
Passport No/FIN	G2988661Q
Date Of Birth	27/03/1988
Occupation	OUTDOOR
Date Of Driving Pass	07/08/2017
Driving Experience	0 YEAR AND 11 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-80000000

NOEMAIL

Address

6 ANG MO KIO ST 62

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

1

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

NO

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

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

10

**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

MY BUS WAS STATIONARY AT THE PIE SLIP ROAD WITH BUKIT BATOK ROAD. OUT A SUDDEN I FELT AN IMPACT AT THE REAR OF MY BUS. I REALISED A LORRY (YN5332P) HAD COLLIDED ONTO THE REAR LEFT PORTION OF MY BUS. NO INJURY REPORTED. THAT'S ALL.

#### Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

YN5332P

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

SINGARAM ILAYARAJA

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

& SM & 1647M	ner's Symmure
@ ❷	Reporting Centre Personnel's Signature Name: BALQISH NAME: SB34Q3252
THE ACCIDENT	Diver's Sgrature (If driver is not the policyholder)  Date & Time:
SKETCH PLAN  BANCAT PORTO  CESCRIBE CIRCUMSTANCES OF THE ACCIDENT  REFER TO REPORT	DECLARATION (/We declare the foregoing particulars are true in every respect.    Compared to the foregoing particulars are true in every respect.

Sketch Plan Pg. 2

# Sketch Plan Pg. 1

# SKETCH PLAN

# IMPORTANT NOTICE

- 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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability
- The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance
- Any false reporting may be referred to the Police for investigation.
- Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance

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.
- Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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 day other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and caracter such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurers(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(suchority (such as the police), for the purpose(s) E
- (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;
- which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me; 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
- 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 9
- 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 tawyers/law firms!, which may be sited outside of Singapore, for one or more of the above Purposes. Ü
  - 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. (P)
- the information so collected under (d) above may be shared / disclosed: (e)
- (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.



Reporting Centre Personnel's Signature Name: BALQISH NRIC/FIN No.: S8340325Z

Policyholder's Signature Date & Time:

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

SACRECIA CHINE HAS RECORDED



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

SMB1647M

Ref. No

BUS/07/18/5028

Reg. Date

01/01/1900

Vehicle Type

BUS-12M

Make Model

MAN

Name of Driver

Gu Shuangyin

Type of Accident

HEAD TO REAR

Date / Time of Accident

16/07/2018 07:08:00 AM

Accident Reported Date / Time :

17/07/2018 12:00:00 AM

Surveyor is Required?

Yes

Survey by

LKK

Vehicle is Towed Back?

No

Towed Back Date/Time

Replacement Vehicle issued? : No

Accident Repair Job Card No :

Special Instruction to ARC, if any :

Rear left portion damaged

TP: YN5332P (NTUC) - LKK

Prepared Date

18/07/2018 09:45:20 AM

- Lump Sum Repair - Photo after paint.

Slathya Sai 18/7/2012

LKK Auto Consultants hence notify

the Repairer of the ' wing:

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

Acknowledged by Repairer

Signature:

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

Chassis No:

Mileage

Work Shop :

Repair Completed Date / Time :

Summary of Repair Estimates

Quotation from ARC

Adjusted by Surveyor, if applicable

Total Labout Charges

**Total Spray Painting Charges** 

Total Material Charges

Other Charges

Other Charges

TOTAL :

Lum Sum Total

No. of Repair Days

Prepared / Adjusted By

Arc / Surveyor Sing Off Date

Prepared / Adjusted Date

Remarks

repared Date :

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

Quotation No

No :

Invoice No

**Quotation Date** 

Invoice Date :

Invoice Amount :

Prepared Date:

LKK Auto Consult of Transactify

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Pans rever the server of transaction of the server of the s

#### section u - Details of Repair Estimates

#### Part 1 - Labour Works

lob Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
O REPAIR LH REAR PORTION	2,120.00	0.00 1590
otal Labour	2,120.00	0.00

#### 'art 2 - Spray Painting & Panel Beating Related Works

lob Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	1,062.00	0.00 1062
otal Spray Painting & Panel Beating	1,062.00	0.00

#### 'art 3 - Other Costs - Accident and Accident Repair Related Expenses

otal Other Costs	75.00	0.00
STICKER	75.00	0.00 / nec
ob Scope	Quotation from ARC	Adjusted by Surveyor, if applicable

10579 30

3

'art 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
01001- 0W274		6010064	REAR BUMPER X M	1	1,868.80	10.00	1,681.92	Replace	Replace	No
301001- 2W002		6010464	ATTACHMENT X ∿N BRACKET	1	569.30	10.00	512.37	Replace	Replace	No
01001- 0W271		6010060	REAR TAIL LAMP COVER LH BR	1	974.70	10.00	877.23 /	Replace	Replace	No
8-25320 6008		6010299	SIGNAL LAMP LED	1	1,274.10	10.00	1,146.69/	Replace	Replace	No
8-25225 6039		6010298	STOP LAMP LED	2	1,141.70	10.00	2,055.06	Replace	Replace	No
001F09- CCE502	REAR	6010372	REAR REFLECTOR PANEL LH		107.00	10.00	96.30	Replace	Replace	No
8-25215 0001		6010371	TRIM REFLECTOR	1	77.60	10.00	69.84	Replace	Replace	No
6-25103 6000		6010300	REVERSE LAMP	1	77.60	10.00	69.84	Replace	Replace	No
		6009375	RETAINER (MALE & FEMALE)	1	74.80	10.00	67.32 /	Replace	Replace	No
		4	60KM/H STICKER NE	e 1	15.00	0.00	15:00 5.0	Replace	Replace	No
TOTAL MATERIALS								6,591.57	6,591.57	
		TOTAL	MATERIALS(Discoun	ted)						

### Added Spare Parts / Material Usage After Surveyor Signed off

9579.30

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

IUS/07/18/5028





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 : SMB1647M

Ref. No : BUS/07/18/5028

 Reg. Date
 : 27/02/2015

 Vehicle Type
 : BUS -12M

 Make
 : A22MAN

Make : A22MA Model : MAN

Name of Driver : Gu Shuangyin

Type of Accident : HEAD TO REAR

Date / Time of Accident : 16/07/2018 07:08:00 AM

Accident Reported Date / Time: 17/07/2018 12:00:00 AM

Surveyor is Required? : Yes
Survey by : IDAC
Vehicle is Towed Back? : No

Towed Back Date/Time : 01/01/2000

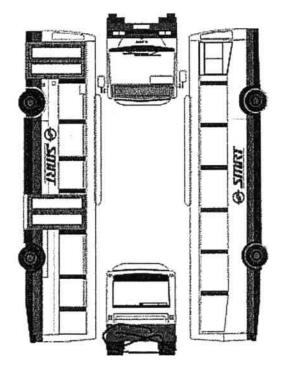
Replacement Vehicle issued? : No

Accident Repair Job Card No : 000024097090

Special Instruction to ARC, if any :

Rear left portion damaged TP: YN5332P (NTUC) - LKK

Prepared Date : 18/07/2018 09:45:20 AM



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

Chassis No:

Mileage

0

Work Shop :

Repair Completed Date / Time :

01/01/2000

**Summary of Repair Estimates** 

Quotation from ARC

Adjusted by Surveyor, if applicable

**Total Labout Charges** 

2,120.00

1,590.00

Total Spray Painting Charges

1,062.00

1,062.00

**Total Material Charges** 

3,569.82

3,569.82

Other Charges

0.00

-500.00

TOTAL

6,751.82 10579.30

5,721.82

**Lump Sum Total** 

6,750.00

5,700.00

No. of Repair Days

4.00

3.00

Prepared / Adjusted By

Sathya Sai

Arc / Surveyor Sing Off Date

: 18/07/2018 03:26:24 PM

19/07/2018 09:22:15 AM

Prepared / Adjusted Date

Remarks

Prepared Date : 18/07/2018 03:22:28 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:

#### Section D - Details of Repair Estimates

#### Part 1 - Labour Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	2,120.00	1,590.00
Total Labour	2,120.00	1,590.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	1,062.00	1,062.00
Total Spray Painting & Panel Beating	1,062.00	1,062.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Lump Sum Adjustment by Surveyor	0.00	-500.00
Total Other Costs	0.00	-500.00

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Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock No	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Recommen d	Surveyor Approved	Photos Attached
F01001- CW274		6010064	REAR BUMPER CENTER	1	1,868.80	100.00	0.00	Replace	Not given	No
S01001- CW002		6010464	ATTACHMENT BRACKET	1	569.30	100.00	0.00	Replace	Not given	No
F01001- CW271		6010060	REAR TAIL LAMP COVER LH	1	974.70	10.00	877.23	Replace	Replace	No
88-25320 -6008		6010299	SIGNAL LAMP LED	1	1,274.10	10.00	1,146.69	Replace	Replace	No
88-25225 -6039		6010298	STOP LAMP LED	2	1,141.70	10.00	2,055.06	Replace	Replace	No
4001F09- ACCE502 1	REAR	6010372	REAR REFLECTOR PANEL LH	1	107.00	10.00	96.30	Replace	Replace	No
88-25215 -0001		6010371	TRIM REFLECTOR	1	77.60	10.00	69.84	Replace	Replace	No
36-25103 -6000		6010300	REVERSE LAMP	1	77.60	10.00	69.84	Replace	Replace	No
		6009375	RETAINER (MALE & FEMALE)	1	74.80	10.00	67.32	Replace	Replace	No
		4	60KM/H STICKER	1	5.00	0.00	5.00	Replace	Replace	No
	COMMO N	4005301	SMRT STICKER (S)	1	75.00	0.00	75.00	Replace	Replace	No
		7	OTAL MATERIALS					4,462.28	4,462.28	
	TOTAL MATERIALS(Discounted)							3,569.82	3,569.82	

### Added Spare Parts / Material Usage After Surveyor Signed off

TOTAL SUPPLEMENTARY MATERIALS						75.00			
	COMMO N	SMRT STICKER (S)	1	75.00	0.00	75.00	Replace	Replace	No
Part Number	Portion	Part Name	Qty	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check	LT Check

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## **National Assessment Centre Services**

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

TEL: 6841 0055 FAX: 6841 6315





NTUC INCOME INSURANCE CO-OPERATIVE LTD			Ref:	NS/INC1801347	1/Nrbe2
		ND UNION HOUSESINGAPORE	Date:	03-10-2018 INC4	
1.		Policy Particulars	:- THIR	D PARTY CLAIM	
	Insured Veh.	YN 5332P	Veh. I	nspected	SMB 1647M
	Policy No.	5085452870-01	Cover	age (\$)	0.00
	Claim No.	MT/1003062-002	Exces	s (\$)	0.00
	Assign From		Assig	n Date	18/07/2018
2.		Vehicle Parti	culars &	& Condition	
	Make & Model	MAN NL 320F	c.c		10518
	Engine No.	HIDDEN	Year o	of Reg.	2015
	Chassis No.	WMAA22ZZ9F7002649	Colou	r	MULTI COLOUR
	Odometer	2160	Steeri	ng	IN ORDER
	Brakes	IN ORDER	Modifi	ication	NIL
	General	FAIR			
3.		Conditi	ons of	Tyres	
		Size	Make		Balance
	R/H Front Tyre	275/70 R22.5	FIREN	ZA	6 mm
	L/H Front Tyre	275/70 R22.5	FIREN	ZA	6 mm
	R/H Rear Tyre	275/70 R22.5 (D)	CONTI	NENTAL	6/6 mm
	L/H Rear Tyre	275/70 R22.5 (D)	CONTI	NENTAL	6/6 mm
4.		Description		District Control of the Control of t	
	THE VEHICLE SU	STAINED DAMAGES AT THE RE	AR N/S	PORTION.	
	DAMAGES SEE D	ETAILS.			
5.		Genera	Inform	ation	
	Accident Date	16/07/2018	Inspec	ction Date	18/07/2018
	Survey held at	SMRT AUTOMOTIVE SERVICE	S PTE L	TD	
		60 WOODLANDS INDUSTRIAL	PARK E	4 SINGAPORE 7577	05
5a.		R	emarks	S TEXT TO BE	
	A)THE INSPECTION B)IN ACCORDANG	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT P	REJUDICE" BASIS. NOT AUTHORISED	REPAIRS.
5b.		Estimate	Days of	Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:		3 Working Days	



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#### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMB 1647M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR TAIL LAMP COVER LH	BROKEN	974.70	974.70
1	SIGNAL LAMP LED	CRACKED	1,274.10	1,274.10
2	STOP LAMP LED @\$1141.70	BROKEN	2,283.40	2,283.40
1	REAR REFLECTOR PANEL LH	CRACKED	107.00	107.00
1	TRIM REFLECTOR	CRACKED	77.60	77.60
1	REVERSE LAMP	CRACKED	77.60	77.60
1	RETAINER (MALE & FEMALE)	DENTED	74.80	74.80
1	REAR BUMPER CENTER	NOT NECESSARY	1,868.80	
1	ATTACHMENT BRACKET	NOT NECESSARY	569.30	2
	LESS 10% DISCOUNT			-486.92
			7,307.30	4,382.28
	SPECIAL NETT ITEMS			
1	60KM/H STICKER (SN)	NECESSARY	15.00	5.00
1	STICKER (SN)	NECESSARY	75.00	75.00
			90.00	80.00
	LABOUR			
	TO REPAIR LH REAR PORTION.		2,120.00	1,590.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		1,062.00	1,062.00
			3,182.00	2,652.00
	GRAND TOTAL		10,579.30	7,114.28

RECOMMENDED COST OF LUMP SUM REPAIRS	5,700.00
(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)	

Report Ref No. NS/INC18013471/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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