



SMRT Taxis Pte Ltd

MEMORANDUM

To: Claims Dept

Our Ref: TAX/08/18/2107

From: SMRT Taxis Pte Ltd

Date: 24/9/2018

**ACCIDENT ON 29/08/2018 INVOLVING SHD 6225M & SJC 318A
ALONG DUNEARN ROAD (INFRONT OF ACS SCHOOL)**

This is to confirm that the daily rental rate for SHD 6225M is \$133.75 per day.

Please proceed to recover any rental loss from the third party as a result of the above accident.

Thank you.

Yours sincerely
SMRT TAXIS PTE LTD

A handwritten signature in black ink, consisting of a large loop and a small flourish at the end.

for Manager



SMRT Automotive Services Pte Ltd
251 North Bridge Road Singapore 179102
Tel: 65 63311000 Fax: 65 63340247

Tax Invoice

GST Reg No. : MR-8500001-7
CRN : 199004280Z
Invoice No. : IV181100455
Date : 23.11.2018
Vehicle No. : SHD6225M
Your Ref No. : TAX/08/18/2107
Our Ref No. : 24097734
Terms : 30 Days

Customer Code: 3000063

SMRT TAXIS PTE LTD

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4
SINGAPORE 757705



Description	Qty	Unit Cost	Add %	(Discount) Amount	Amount
Parts					
DOOR:F/RH, FOR TOYOTA PRIUS TAXI	1.00	\$ 894.40	(25.00)	\$ 223.60	\$ 670.80
STICKER DECAL SMRT (DOOR)	1.00	\$ 60.00	0.00	\$ 0.00	\$ 60.00
MOULDING BODY, RH	1.00	\$ 673.60	(100.00)	\$ 673.60	\$ 0.00
DOOR:R/RH, FOR TOYOTA PRIUS	1.00	\$ 954.50	(100.00)	\$ 954.50	\$ 0.00
PIXEL STICKER	1.00	\$ 60.00	0.00	\$ 0.00	\$ 60.00
FENDER, FRONT:RH, FOR TOYOTA PRIUS TAXI	1.00	\$ 723.40	(100.00)	\$ 723.40	\$ 0.00
NAME PLATE (HYBRID)	1.00	\$ 51.90	(25.00)	\$ 12.97	\$ 38.93
LINER, FENDER:F/RH, FOR TOYOTA PRIUS TAXI	0.00	\$ 171.70	0.00	\$ 0.00	\$ 0.00
FENDER LINER PAD, FR WHEEL. RH	0.00	\$ 49.30	0.00	\$ 0.00	\$ 0.00
RIM, TYRE:FOR TOYOTA PRIUS G3 TAXI	1.00	\$1484.20	(100.00)	\$1484.20	\$ 0.00
BUMPER, FRONT:FOR TOYOTA PRIUS TAXI	1.00	\$ 482.00	(100.00)	\$ 482.00	\$ 0.00
DOOR OUTER HANDLE FRT/RH	1.00	\$ 370.80	(25.00)	\$ 92.70	\$ 278.10
Sub-Total					\$ 1107.83
Labour					
TO REPAIR RH PORTION	1.00	\$ 800.00	0.00	\$ 0.00	\$ 800.00
Others					
TO RESPRAY FRONT DOOR RH	1.00	\$ 200.00	0.00	\$ 0.00	\$ 200.00
TO RESPRAY REAR DOOR RH	1.00	\$ 200.00	0.00	\$ 0.00	\$ 200.00
TO RESPRAY FRONT FENDER RH	1.00	\$ 200.00	0.00	\$ 0.00	\$ 200.00
TO REPSRAY FRONT BUMPER	1.00	\$ 200.00	0.00	\$ 0.00	\$ 200.00
TO RESPRAY ROCKER PANEL MOULDING	1.00	\$ 80.00	0.00	\$ 0.00	\$ 80.00
TO RESPRAY RIM	1.00	\$ 80.00	0.00	\$ 0.00	\$ 80.00
TO RESPRAY DOOR HANDLE	1.00	\$ 20.00	0.00	\$ 0.00	\$ 20.00

Authorised Signature
for SMRT Automotive Services Pte Ltd



SMRT Automotive Services Pte Ltd
251 North Bridge Road Singapore 179102
Tel: 65 63311000 Fax: 65 63340247

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SMRT TAXIS PTE LTD

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4
SINGAPORE 757705

Description	Qty	Unit Cost	Add %	/ (Discount) Amount	Amount
TO CHECK WIRING AND SYSTEM FUNCTION	1.00	\$ 20.00	0.00	\$ 0.00	\$ 20.00
TO APPLY RUST-PROOFING ON AFFECTED AREA	1.00	\$ 40.00	0.00	\$ 0.00	\$ 40.00
TO TRANSFER DOOR MECHANISM	0.00	\$ 240.00	0.00	\$ 0.00	\$ 0.00
TO REPLACE SUNDRY PARTS	0.00	\$ 100.00	0.00	\$ 0.00	\$ 0.00
TO WASH AND VACUUM	0.00	\$ 60.00	0.00	\$ 0.00	\$ 0.00
TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	1.00	\$ 593.76	0.00	\$ 0.00	\$ 593.76
TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	1.00	\$ 20.00	0.00	\$ 0.00	\$ 20.00
TO DO WHEEL ALIGNMENT / TYRE BALANCING	0.00	\$ 20.00	0.00	\$ 0.00	\$ 0.00

GRAND TOTAL \$ 3,561.59

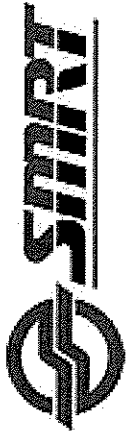
Remark :

Make/Model : TOYOTA PRIUS

Accident Date : 29.08.2018

N.B. Payment by cheque should be crossed and
made payable to 'SMRT Automotive Services Pte Ltd'.
No receipt will be issued unless requested.

Authorised Signature
for SMRT Automotive Services Pte Ltd



Accident Vehicle Laid-Up Report

Registration No. : SHD6225M

Accident Case No. : TAX/08/18/2107

Make / Model : TOYOTA PRIUS

Ref. No. : 24097734

Date and Time Vehicle off-road for Accident Repair : 29.08.2018 13:27:00

Date and Time Repair Completed : 13.09.2018 08:32:21

Remarks :

Generated by : NGSIUCHING

Printed on : 24.09.2018

A hand-drawn sketch map on grid paper. A vertical line is labeled "DUNFARN RD". To the left of this line, two rectangular buildings are drawn, labeled "A" and "B". To the right of the road, there are four vertical lines with arrows pointing upwards, and a diagonal line crossing them.

[illegible]

DECLARATION
I declare the foregoing to be true and correct.

700.

den 29/8/2018

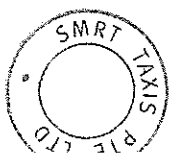
SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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



Policyholder's Signature
Date & Time:

(Signature)

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

(Signature) 29/8/2018

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

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.
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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	29/08/2018 13:28
Date Of Accident	29/08/2018 12:20
Exact Location Of Accident	DUNEARN ROAD (INFRONT OF ACS SCHOOL)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6225M
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	FOO CHENG HUAT JACK
NRIC No	S0158808G
Date Of Birth	16/08/1953
Occupation	OUTDOOR
Date Of Driving Pass	04/09/1975
Driving Experience	42 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 10
 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) 1

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 DUNEARN ROAD AT THE LEFT MOST LANE WHEN THE VEHICLE SJC318A FROM MY RIGHT LANE SUDDENLY CUT INTO MY LANE AND COLLIDED ONTO THE RIGHT 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 SJC318A
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver JUNE CHIN
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

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Enquire Transaction History

Transaction History Details

Log Date/Time:	29 Aug 2018 / 14:08:57		
Asset Type:	Vehicle	Transaction Amount:	\$7.49
Asset ID:	SJC318A		
Transaction Type:	18.32 Insurance Enquiry (GIRO Payment)	Channel:	External Agency
User ID:	ESASBAH0 - BALQISH BINTE ABDUL HALIL	Business Transaction Reference No.:	20180829140857259017

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Search Date / Time: 29 Aug 2018 12:20:00

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Insurance Company: AXA INSURANCE PTE LTD

Information displayed is correct as at the log date and time.

[Enquire Related Logs](#)[Back to List](#)

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