

Surveyor: NA2

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: PC 2617C

Policy No. 5087589969-01 26012018-2502018

Claims No. MT/1013435-002

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

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: SHB 5745X Yr Regn: 1

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: TOYOTA PRIN c.c. 1,798

Colour: MAROON A/C: Insured / Std / NI / NA

Sp.Reading: 79,602 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKB3FY103575818

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195 / 65 R15

R: 11

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

TOYO / YOKO or YOKO (R), FALKEN (F)

Front Rear

R/Bal. 6 mm R/Bal. 5 mm

L/Bal. 6 mm L/Bal. 5 mm

D.O.A. 26/9/18 D.O.I. 27/9/18

Survey held at 3 MAT WOODLANDS

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

REAR O/S

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

Date / Time Action / Instruction

SHB 5745X - CS/CN180011069 / SW32. DA: 2502018 INC PIP

PC 2617C - X

22/10/18 Confirmed PIP \$ 857.92 @ 2 days with Naz

C \$ 1,178.65 Red - 58%

RECEIVED 22 OCT 2018

22/10/2018

Date/Time, File Pass to? ☐ : Preli. Report

1) 22/10/18 ☒ : Final Report

Date/Time, File Return to? _____

2) _____

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee: 160

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____) S + RS. SI

☐ : Interview (\$ _____) Photos

☐ : Tech. Invs (\$ _____) Others

☐ : Weekend (\$ _____)

Report Format: _____

Lump Sum / I.B.I: (\$ 857.92 PIP)

TOTAL 160



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/INC18017923/Nsb

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 03-10-2018

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	PC 2617C	Veh. Inspected	SHB 5745X
Policy No.	5087589969-01	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	27/09/2018

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	26/09/2018	Inspection Date	27/09/2018
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

Hello, NAC_PAYA_UBI_800601

General Claim

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="26/09/2018 15:56"/>
Vehicle No. (For Motor)	<input type="text" value="PC2617C"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5087589969-01		PRECISE DEVELOPMENT PTE LTD	198302845D	GBS	Comprehensive	PC2617C	PC2617C	26/01/2018	25/01/2019

TP Claims against NTUC Income: Follow-Through Survey

Date : 22/10/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative repair cost
1	MT/1009707-002	SMRT TAXIS PTE LTD	SHB 5015U	SLP 4398A	31/8/2018	19:20	\$ 7,072.62	\$ 3,240.23
2	MT/1013435-002	SMRT TAXIS PTE LTD	SHB 5745X	PC 2617C	26/9/2018	11:45	\$ 2,036.57	\$ 857.92
3	MT/1015544-002	COMFORT TRANSPORTATION PTE LTD	SHC 8693L	SMC 3338L	13/10/2018	22:30	\$ 740.00	\$ 500.00

Claim received from LKK Auto

Shirley Hiew (LKK Auto)

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))
<YeoPohsuan@smrt.com.sg>
Sent: Saturday, 20 October 2018 12:04 PM
To: Naz (LKKAuto)
Cc: SUR
Subject: RE: SHB5745X

Hi,

Amount confirmed as per your recommendation, thanks.

Regards
Poh Suan

From: Naz (LKKAuto) [mailto:Naz@lkkauto.com]
Sent: Saturday, 20 October 2018 11:10 AM
To: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))
Cc: SUR
Subject: Re: SHB5745X

Dear Ms Yeo,

Finalized Part by Part Repair \$857.92 / 2 Days.

Thank you.

Best Regards,
Naz | Technical Investigator
LKK Auto Consultants
Phone: 6841-2157 | Email: Naz@lkkauto.com | Fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex)) <YeoPohsuan@smrt.com.sg>
Sent: Saturday, 20 October 2018 10:35 AM
To: Naz (LKKAuto)
Cc: SUR; CS A Team
Subject: SHB5745X

Hi Naz,

Attached herewith the repair estimate of SHB 5745X having Case No: TAX/09/18/2125.

There is no change to the approved amount of \$857.92 @ 2 working days under part by part repair.

Cost of Repair invoice will be generated as approved.

Please finalize with me within 7 working day, thanks.

Thanks & Regards

Poh Suan

-----Original Message-----

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))

Sent: Saturday, 20 October 2018 10:38 AM

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

Subject: Scan Data from FX-D421D6

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	26/09/2018 16:21
Date Of Accident	26/09/2018 11:45
Exact Location Of Accident	JALAN BUKIT MERAH BLK 28 CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5745X
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	CHANG HOON SAM
NRIC No	S0107778C
Date Of Birth	10/12/1951
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1970
Driving Experience	47 YEARS AND 11 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	SIDE SWIPE
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

MY TAXI WAS PARKED IN THE CAR PARK OF BLK 28 JALAN BUKIT MERAH AND I WAS IN THE TAXI. SUDDENLY I FELT AN IMPACT AT THE RIGHT REAR PORTION OF MY TAXI. A VAN PC2617C HAD REVERSED FROM THE LOT AND COLLIDED ONTO THE RIGHT REAR 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 BIG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC2617C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HONG CHEONG KEONG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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: 28 26/9/18

Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.: 26/9/2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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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	CHANG HOON SAM
NRIC No	S0107778C
Date Of Birth	10/12/1951
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1970
Driving Experience	47 YEARS AND 11 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	SIDE SWIPE
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

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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

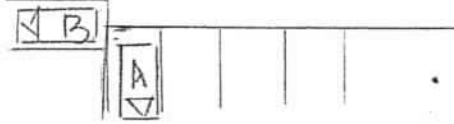
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC2617C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HONG CHEONG KEONG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN

Jalan Bukit Merah BIK28B



A - SHB5745X

B- PC 2617C

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.

DECLARATION

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



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.:

SKETCH PLAN

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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.:

SMRT Accident Vehicle Repair Estimates

SMRT Automotive Service Pte Ltd
60 Woodlands Industrial Park E4, Singapore 71
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672



Date Generated : 11/10/2018

User ID : TuckFoo

Section A - Accident Details

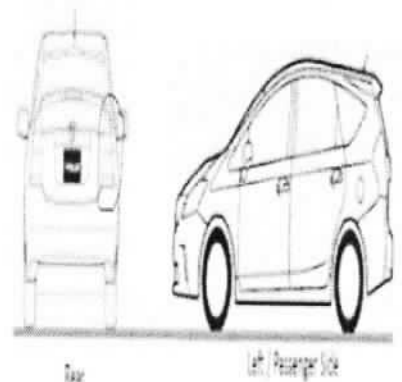
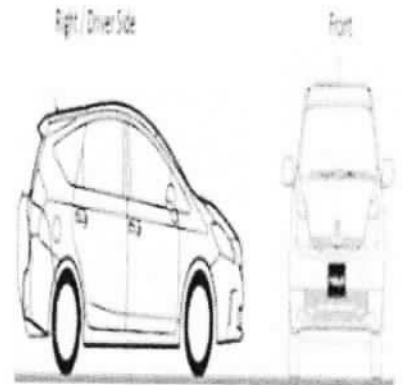
Registration Number	SHB5745X
Case Reference Number	TAX/09/18/2125
Registration Date	11/30/2017
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS4
Name of Driver	CHANG HOON SAM
Type of Accident	Others
Accident Date and Time	9/26/2018 11:43 AM
Accident Reported Date and Time	9/26/2018 3:39 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle Is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	24098086
Special Instruction to ARC, if any	NTUC - LKK
Prepared Date and Time	9/28/2018 6:50 AM
Chassis Number	
Mileage	
Work Shop	
Repair Completion Date and Time	

Section B - Summary of Repair Estimates

Summary of Repair Estimates		
	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$338.00	\$200.00
Total Spray Cost	\$378.00	\$200.00
Total Spare Part Cost	\$960.57	\$120.00
Total Other Cost	\$360.00	\$20.00
TOTAL COST	\$2,036.57	\$540.00
ump Sum Total	\$0.00	\$0.00
umber of Repair Days	3.0	2.0
repared / Adjusted By	Kim Ming Chin	Naz
RC / Surveyor Sign Off Date	28/09/2018 8:39 AM	01/10/2018 4:12 PM
Signature		
Remarks		PART BY PART 2 DAYS AFTER PAINT PHOTO

Section C - Quotation and Accident Invoice Details

Quotation Number		Invoice Number	
Quotation Date		Invoice Date	
Quotation Amount		Prepared Date	



Notes:

SMRT Accident Vehicle Repair Estimates

SMRT Automotive Service Pte Ltd
60 Woodlands Industrial Park E4, Singapore 7
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

Date Generated : 11/10/2018

User ID : TuckFoo

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REPAIR RH PORTION REAR	\$338.00	\$200.00
Total Labour	\$338.00	\$200.00

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
Total Spray Painting & Panel Beating	\$378.00	\$200.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	\$80.00	\$0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	\$120.00	\$20.00
TO WASH AND VACUUM	\$60.00	\$0.00
TO REPLACE SUNDRY PARTS	\$100.00	\$0.00
Total Other Costs	\$360.00	\$20.00

Part 4 - Spare Parts / Material Usage

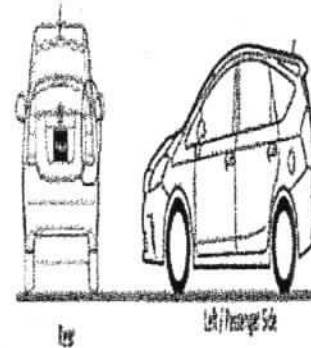
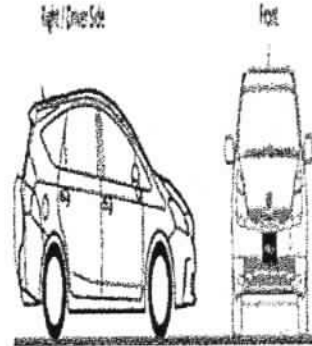
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		5215947913	COVER, RR BUMPER ASSY	1.00	\$423.90	100.00	\$0.00	Replace	Repair
			PIXEL STICKER	2.00	\$60.00	0.00	\$120.00	Replace	Replace
		8158147010	LENS & BODY ASSY , RR BUMPER , RH	0.00	\$486.80	0.00	\$0.00	Replace	Check
		5257547040	RETAINER, RR BUMPER, RH	0.00	\$112.70	0.00	\$0.00	Replace	Check
Total					\$1,083.40		\$120.00		

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Stock Number	Part Name	Quantity	List Price \$	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
Total									

Section A - Accident Details



Registration Number	SHB5745X
Case Reference Number	TAX/09/18/2125
Registration Date	30/11/17
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS4
Name of Driver	CHANG HOON SAM
Type of Accident	Others
Accident Date and Time	26/09/18 11:43 AM
Accident Reported Date and Time	26/09/18 3:39 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	24098086
Special Instruction to ARC, if any	NTUC - LKK
Prepared Date and Time	28/09/18 6:50 AM
Chassis Number	
Mileage	
Work Shop	
Repair Completion Date and Time	



Toyota Prius

Section B - Summary of Repair Estimates

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$338.00	\$200.00
Total Spray Cost	\$378.00	\$200.00
Total Spare Part Cost	\$960.57	\$437.92
Total Other Cost	\$360.00	\$20.00
TOTAL COST	\$2,036.57	\$857.92 (p/p)
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Kim Ming Chin	Naz (LKK) / NTUC
ARC / Surveyor Sign Off Date	28/09/2018 8:39 AM	01/10/2018 4:12 PM
Signature		
Remarks		PART BY PART 2 DAYS AFTER PAINT PHOTO

Section C - Quotation and Accident Invoice Details

Quotation Number	QN-1810-0387	Invoice Number	
Quotation Date	20.10.2018	Invoice Date	
Invoice Amount		Prepared Date	

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REPAIR RH PORTION REAR	\$338.00	\$200.00
Total Labour	\$338.00	\$200.00

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
Total Spray Painting & Panel Beating	\$378.00	\$200.00

Part 3 - Other Costs - Accident and Accident Repair Related Expense		
Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	\$80.00	\$0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	\$120.00	\$20.00
TO WASH AND VACUUM	\$60.00	\$0.00
TO REPLACE SUNDRY PARTS	\$100.00	\$0.00
Total Other Costs	\$360.00	\$20.00

Part 4 - Spare Parts / Material Usage									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		5215947913	COVER, RR BUMPER ASSY	1.00	\$423.90	25.00	\$317.92	Replace	Replace ✓
			PIXEL STICKER	2.00	\$60.00	0.00	\$120.00	Replace	Replace ✓
		8158147010	LENS & BODY ASSY, RR BUMPER, RH	0.00	\$486.80	0.00	\$0.00	Replace	Check X
		5257547040	RETAINER, RR BUMPER, RH	0.00	\$112.70	0.00	\$0.00	Replace	Check X
Total					\$1,083.40		\$437.92		

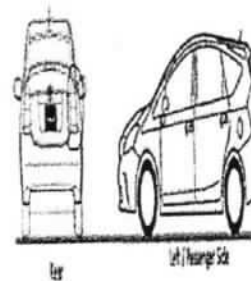
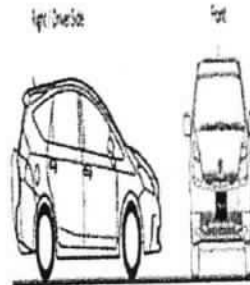
Added Spare Parts / Material Usage After Surveyor Signed off									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
Total									

437.92
+ 200.00
+ 220.00



857.92

Shilly

Section A - Accident Details	
Registration Number	SHB5745X
Case Reference Number	TAX/09/18/2125
Registration Date	30/11/17
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS4
Name of Driver	CHANG HOON SAM
Type of Accident	Others
Accident Date and Time	26/09/18 11:43 AM
Accident Reported Date and Time	26/09/18 3:39 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	24098086
Special Instruction to ARC, if any	NTUC - LKK
Prepared Date and Time	28/09/18 6:50 AM
Chassis Number	
Mileage	
Work Shop	
Repair Completion Date and Time	



back

Section B - Summary of Repair Estimates		
Summary of Repair Estimates		
	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$338.00	\$200.00
Total Spray Cost	\$378.00	\$200.00
Total Spare Part Cost	\$960.57	\$437.92
Total Other Cost	\$360.00	\$20.00
TOTAL COST	\$2,036.57	\$857.92 (p/p)
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Kim Ming Chin	Naz (LKK) / NTUC
ARC / Surveyor Sign Off Date	28/09/2018 8:39 AM	01/10/2018 4:12 PM
Signature		
Remarks	PART BY PART 2 DAYS AFTER PAINT PHOTO	

Section C - Quotation and Accident Invoice Details			
Quotation Number	QN-1810-0387	Invoice Number	
Quotation Date	20.10.2018	Invoice Date	
Invoice Amount		Prepared Date	

Section D - Details of Repair Estimates		
Part 1 - Labour Works		
Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REPAIR RH PORTION REAR	\$338.00	\$200.00
Total Labour	\$338.00	\$200.00
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
Total Spray Painting & Panel Beating	\$378.00	\$200.00

Part 3 - Other Costs - Accident and Accident Repair Related Expense		
Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO CHECK WIRING AND SYSTEM FUNCTION	\$80.00	\$0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	\$120.00	\$20.00
TO WASH AND VACUUM	\$60.00	\$0.00
TO REPLACE SUNDRY PARTS	\$100.00	\$0.00
Total Other Costs	\$360.00	\$20.00

Part 4 - Spare Parts / Material Usage									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		5215947913	COVER, RR BUMPER ASSY	1.00	\$423.90	25.00	\$317.92	Replace	Replace
			PIXEL STICKER	2.00	\$60.00	0.00	\$120.00	Replace	Replace
		8158147010	LENS & BODY ASSY, RR BUMPER, RH	0.00	\$486.80	0.00	\$0.00	Replace	Check X
		5257547040	RETAINER, RR BUMPER, RH	0.00	\$112.70	0.00	\$0.00	Replace	Check X
Total					\$1,083.40		\$437.92		

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JUL

Added Spare Parts / Material Usage After Surveyor Signed off									
Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
Total									

437.92
+ 200.00
+ 220.00

857.92

CONFIRMED PART BY PART REPAIR \$857.92 / 2 DAYS

20/10/18

219.00



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/INC18017923/Nsbe2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 08-11-2018



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	PC 2617C	Veh. Inspected	SHB 5745X
Policy No.	5087589969-01	Coverage (\$)	0.00
Claim No.	MT/1013435-002	Excess (\$)	0.00
Assign From		Assign Date	27/09/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU103575818	Colour	MAROON
Odometer	79602	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
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	5 mm
L/H Rear Tyre	195/65 R15	YOKOHAMA	5 mm

4. Description of Damages

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

Accident Date	26/09/2018	Inspection Date	27/09/2018
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:	2 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. SHB 5745X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	COVER, RR BUMPER ASSY (DISC 25%)	CRACKED	423.90	317.92
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	LENS & BODY ASSY, RR BUMPER, RH	SERVICEABLE	486.80	-
1	RETAINER, RR BUMPER, RH	SERVICEABLE	112.70	-
			1,143.40	437.92
	<u>LABOUR</u>			
	PANEL BEATING & BODY WORK.		338.00	200.00
	SPRAY PAINT.		378.00	200.00
	TO CHECK WIRING AND SYSTEM FUNCTION.	NOT NECESSARY	80.00	-
	TO TEST AND REFIX REVERSE SENSOR SYSTEM.		120.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
			1,076.00	420.00
	GRAND TOTAL		2,219.40	857.92
RECOMMENDED COST OF REPAIRS (CONFIRMED)				857.92

Report Ref No. NS/INC18017923/Nsbe2

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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