

Surveys

Tupke

REF: NTAC

NS/INC 18020203/Tupke

ASSIGNMENT

From: Date: 05-11-2018

Estimated Cost:

OD/TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: SMB 1332X

at Workshop m/s SMRT

of Woodlands.

Insured: FBB 4565B

Policy No: 5086128908-01 110418-100419

Claims No: MT/1018536-02

Sum Insured: Excess:

(Client's Record)

Make of Veh: Sunny

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Report: Consistent?: Yes or No

GIA / PR Seen: Consistent?: Yes or No

Est. Repairs: 2 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: SMB 1332X Yr Regn: 2013

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

Truck / Trailer or

Make: MAN NL 320F C.C. 10518

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

Sp. Reading: 642089 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WMAA 222250.7001768

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: 275/20K27.5

R:

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

TOYO / YOKO or

Front

Rear

R/Bal. 8 mm R/Bal. 8 mm

L/Bal. 8 mm L/Bal. 8 mm

D.O.A. D.O.I. 5/11/18 @ 2:50pm

Survey held at

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

SMB 1332 X - NS/INC16013060/Kgh3dl

QA: 130716

FBB 4565B - NBA/INC17022665/Y

QA: 271117

16/1/19 @ 11.56am confirmed with Catherine LS \$3000, 2 days.

(Red \$1379.40, 31%)

RECEIVED 16 JAN 2019

Date/Time, File Pass to?

☐ : Preli. Report

1) 16/1/19

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\$ + R.S. \$

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Report Format: TP

Lump Sum / I.B. (\$ 3000)

160

160

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/0951046-002	COMFORT TRANSPORTATION	SHC 1920C	SKB 3613X	24/06/2017	03:45	\$ 8,074.54	\$ SCAPPED
2	MT/1018536-002	SMRT BUS	SMB 1322X	FBF 4565B	1/11/2018	13:20	\$ 4,379.40	\$ 3,000.00
3	MT/1011644-002	COMFORT TRANSPORTATION	SG 1746M	SJR 8667K	16/09/2018	09:15	\$ 2,624.10	\$ 1,938.69

#### Claim received from LKK Auto

Best Regards,

**Denise Tay** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

#### Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

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

## Policy Query

Policy No.  Date of Accident   
Vehicle No.(For Motor)  Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5086128908-01		AZRI BIN ANWAR	S9407258A	GMC	Third Party	FBB4565B	FBB4565B	11/04/2018	10/04/2019

## Shiau Chan (LKKAUTO)

---

**From:** Shiau Chan (LKKAUTO)  
**Sent:** Wednesday, 16 January 2019 11:56 AM  
**To:** 'Catherine Lee Sau Chan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Buses)/AR(Buses))'; Taufikh (LKKAUTO); SUR; Admin A  
**Cc:** Koo Yew Chung (Auto Svcs/Ext Biz Svcs/AR & SC); AutoSvs-ARC (Bus)  
**Subject:** RE: Finalisation - SMB1332X (BUS/11/18/1001) - NUTC

Dear Catherine,

WITHOUT PREJUDICE

Confirm Lump Sum \$3,000.00 before GST and 2 repair days.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Catherine Lee Sau Chan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Buses)/AR(Buses))  
<catherineleesc@smrt.com.sg>

**Sent:** Tuesday, 8 January 2019 5:09 PM

**To:** Taufikh (LKKAUTO) <Taufikh@lkkauto.com>; SUR <sur@lkkauto.com>; Admin A <admin-a@lkkauto.com>

**Cc:** Koo Yew Chung (Auto Svcs/Ext Biz Svcs/AR & SC) <YewChung@smrt.com.sg>; AutoSvs-ARC (Bus) <AutoSvs-ARCBUS@smrt.com.sg>

**Subject:** Finalisation - SMB1332X (BUS/11/18/1001) - NUTC

Hi Taufikh,

Attached herewith our copy and your marked copy of the bus repair estimate for the case.

Our finalised amount is \$3,000/- @ 2 working days under lump sum repair. Attached after repair photos for your perusal.

Please confirm the COR by return email ASAP.

Thank you

Best Regards

Catherine Lee

SMRT Automotive Services Pte Ltd

(Accident Repair Centre)

DID: 6866 2669 Fax: 6368 5592

[catherineleesc@smrt.com.sg](mailto:catherineleesc@smrt.com.sg)



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	2292D
Vehicle Details	
Vehicle No.:	SMB1332X
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Jan 2019
Vehicle Make:	MAN
Vehicle Model:	NL320F (A22)
Primary Colour:	Multi-Colour
Manufacturing Year:	2012
Engine No.:	50333611973356
Chassis No.:	WMAA22ZZ5D7001768
Maximum Power Output:	-
Open Market Value:	\$252,433.00
Original Registration Date:	25 Mar 2013
First Registration Date:	25 Mar 2013
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
<b>Total Rebate Amount:</b>	<b>\$0.00</b>

The information contained herein is correct as at 16 Jan 2019

OK

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy 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. 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	02/11/2018 10:53
Date Of Accident	01/11/2018 13:20
Exact Location Of Accident	PETIR ROAD - BS: 44219 - BET BLKS 139/140
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMB1332X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE
<b>Vehicle Particulars</b>	
Manufacturer	MAN
Model	MAN A22
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
<b>Insurance Company</b>	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-18090224MFBP
Cover Note Number	
<b>Driver</b>	
Name of Driver	ZHAO GUOYANG
NRIC No	S7987059E
Date Of Birth	14/03/1979
Occupation	OUTDOOR
Date Of Driving Pass	08/10/2014
Driving Experience	4 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address NOADDRESS

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 -

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 2

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by ambulance? YES

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) 10

#### Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name WOODLANDS EAST N.P.C

Police Station Address ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

REFER TO POLICE REPORT T20181101/2130 ON 01/11/2018 AT ABOUT 1320HRS, I WAS DRIVING THE SMRT BUS (SMB1332X) BUS SERVICE NO. 963 ALONG PETIR ROAD ALONG A 2 LANE ROAD AT THE LEFT LANE. THE BUS WAS APPROACHING THE BUS STOP NO. 44219 BESIDE BLK 139 PETIR ROAD, AS THERE WAS A PERSON AT THE BUS STOP GIVING A HAND SIGNAL STATING WANTED TO BOARD THE BUS. I THEN APPROACHED THE BUS STOP AND PREPARING TO STOP THERE WAS A HUMP WHICH THE BUS NEEDS TO SLOW DOWN TO DRIVE PASS. AFTER I STOPPED THE BUS, THERE WAS A LOUD BANG SOUND FROM THE REAR OF THE BUS. I AM UNSURE OF WHAT HAPPEN AND INITIALLY SUSPECT THERE WAS A PASSENGER IN THE BUS FELL DOWN. HOWEVER, AFTER I CHECKED THERE WAS NO PASSENGER INJURED. I THEN CHECKED BOTH THE SIDE MIRRORS, AND SAW ONE PERSON LYING DOWN ON THE ROAD AT THE RIGHT SIDE MIRROR. I THEN QUICKLY ALIGHT THE BUS AND PROCEED TO MAKE A CHECK A THE PERSON LYING DOWN ON THE ROAD. THERE WERE PERSON TRYING TO WAKE THE PERSON LYING ON THE ROAD, THERE WAS NO RESPOND FROM THE PERSON. I INFORMED THE PASSER-BY NOT TO TOUCH THE INJURED PERSON, AS THERE MAYBE BONE FRACTURE. I THEN PROCEEDED TO MY BUS TO INFORM MY CONTROL ROOM ABOUT THIS SITUATION AND AMBULANCE WAS BEING ACTIVATED. SUBSEQUENTLY, THERE WAS A POLICE VEHICLE ARRIVE AT SCENE AND ASSISTED. THE AMBULANCE ALSO ARRIVED SHORTLY, THE INJURED PERSON WAS THEN BEING CONVEYED TO HOSPITAL BY THE AMBULANCE. I WAS ONE BLACK MOTORBIKE (FBB4565B) AT THE REAR OF THE BUS, I BELIEVED THE MOTORBIKE BELONGS TO THE INJURED PERSON. THE MOTORBIKE FRONT PORTION WAS DAMAGED AND THE BUS REAR RIGHT BUMPER AREA HAD A DEEP DENT SIMILAR TO A HOLE ON IT. I WISH TO INFORM THERE WERE NO BLOOD SCENE AND I DO NOT SEE ANY BLOOD VISIBLE INJURIES ON THE INJURED PERSON. THE INJURED PERSON WAS ONLY ABLE TO MAKE SOFT VOICES, BUT UNSURE WHETHER HE WAS CONSCIOUS OR UNCONCIOUS. I DID NOT HAVE THE MOTORBIKE OWNER DETAILS. I AM LODGING THIS REPORT FOR OWN RECORD PURPOSE AND WITH REFERENCE TO THE TRAFFIC POLICE DEPT REPORT VIDE J/20181101/0139, IN

#### Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? YES

Remarks/ Reasons: PENDING DOWNLOAD

Was there any audio recorded? NO

**Details of Witness 1**

Name UNKNOWN CHINESE FEMALE

Phone Number 81261023

Email Address

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number FBB4565B

Vehicle Make/Model/Colour BLACK

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

No. Of Passenger (Including Driver) 1

**DETAILS OF INJURED PERSON 1**

Name UNKNOWN MALE CHINESE

Approximate Age 25

Injuries Sustain

Injured person in which vehicle? FBB4565B

Were seat belts worn? NO

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode



## 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 willful misrepresentation or withholding of material facts may allow insurance companies to **rescind 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 processed 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 used 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, regulator, 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.

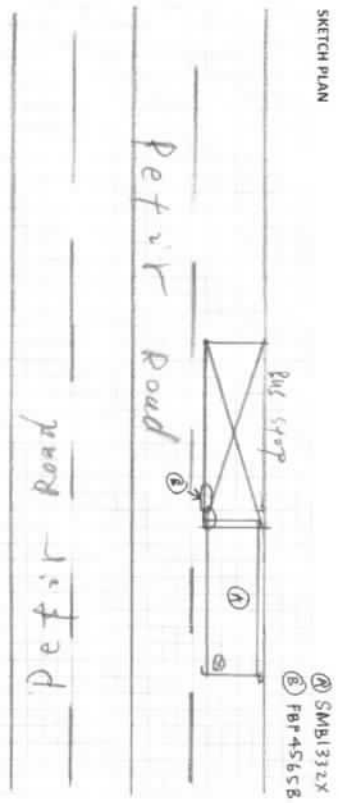


Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: BALQISH  
NIC/FIN No. SB3403252

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

REFER TO REPORT

[illegible]

## DECLARATION

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

Policy/Procedures & Segments  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: BALQISH  
NIC/FIN No.: SB3403252





**SINGAPORE  
POLICE FORCE**



T201811012130

Police Station Of Origin:

Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No. 1800-7679999

1 of 3

Report No. T201811012130

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 01/11/2018 21:07	Vide Report No.: J/20181101/0139	Station Diary No.: 217
--	-------------------------------------	---------------------------

**Informant's Particulars**

Name of Informant: ZHAO GUOYANG	Address: APT BLK 786F WOODLANDS DRIVE 60 #10-05 SINGAPORE 738786	
ID Type / ID No.: NRIC NO / S7987059E	Contact No.: Home/Office: Mobile: 83761398	
Nationality: SINGAPORE CITIZEN	Email:	
Sex: Male	Date of Birth: 14/03/1979	Type of Informant: Driver
Race: Chinese	Language: English	Institution / School Name:
Occupation: SMRT Bus Driver	Driving Licence Information: Class: 3,4	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/11/2018 13:20	Type of Location: Straight Road
Location: Along Road 1 PETIR ROAD				
Along Petir Road, beside bus stop no 44219 beside Blk 139 Petir Road				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic		
Type of Collision: Moving Vehicle Against - Parked Vehicle	Anyone conveyed by ambulance: Yes			

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBB4565B	Motorcycle				Slightly Damaged	0
SMB1332X	Bus/Coach/MI mbus				Slightly Damaged	10

**Details of Person Involved**

Any Pedestrian Involved:	No
No. of Pedestrians Injured:	NIL
Use of Pedestrian Crossing:	NA



**SINGAPORE  
POLICE FORCE**



T201811012130

2 of 3

Police Station Of Origin:  
Woodlands East N.P.C.

Report No. T201811012130

3 Woodlands Drive 63 SINGAPORE 737890

Tel No. 1800-7679999

CONTINUATION OF REPORT

<b>Driver</b>			
Name	ZHAO GUOYANG	ID No.	S7987059E
Related Vehicle	SMB1332X (Bus/Coach/Minibus)	Contact No.	83761398
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3, 4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 01/11/2018 at about 1320hrs, I was driving the SMART bus (SMB1332X) Bus service no. 963 along Petir Road along a 2 lane road at the left lane. The bus was approaching the bus stop no.44219 beside Blk 139 Petir Road, as there was a person at the bus stop giving a hand signal stating wanted to board the bus. I then approached the bus stop and preparing to stop, the bus was travelling at a slow speed of about 20km/hour and before the bus stop there was a hump which the bus needs to slow down to drive pass.

After I stopped the bus, there was a loud bang sound from the rear of the bus. I am unsure of what happen and initially suspect there was a passenger in the bus fell down. However, after I checked there was no passenger injured. I then checked both the side mirrors, and saw one person lying down on the road at the right side mirror. I then quickly alight the bus and proceed to make a check at the person lying down on the road.

There were person trying to wake the person lying on the road, there was no respond from the person. I informed the passer-by not to touch the injured person, as there maybe bone fracture. I then proceeded to my bus to inform my control room about this situation and ambulance was being activated.

Subsequently, there was a police vehicle arrived at scene and assisted. The ambulance also arrived shortly, the injured person was then being conveyed to hospital by the ambulance. I saw one black motorbike (FBB4565B) at the rear of the bus. I believed the motorbike belongs to the injured person. The motorbike front portion was damaged and the bus rear right bumper area had a deep dent similar to a hole on it.

I wish to inform there were no blood scene and I do not see any blood or visible injuries on the injured person. The injured person was only able to make soft voices, but unsure whether he was conscious or unconscious. I did not have the motorbike owner details. I am lodging this report for own record purpose and with reference to the Traffic Police Department report vide J20181101/0139, In-charge: IO Dillon, Tel: 65476251.



Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No. 1800-7679999



3 of 3  
Report No. TZ0181012130

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Sketch Plan Pg. 5

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report  
J /  
Sr Staff Sgt POH JIANYU

Signature Of Interpreter  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Staff Sgt MOHAMED SUFIAN BIN MOHAMED  
JUNID  
Contact No. 95-476247  
Authentication Stamp  
Arrested Signature :

Singapore Police Force

Signature Of Informant:

Date/Time:  
01/11/2018 21:07

Classification Of Case:

**Sketch Plan Pg. 6**

# SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte
60 Woodlands Industrial Park E4
FAX Number : 63685592
Estimator Telephone Number : 61
Accident Reporting Number : 6E

Date Generated : 05/11/2018

User ID : TanAhLeo

## Section D - Details of Repair Estimates

### Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	\$1,060.00	795 ✓
<b>Total Labour</b>	<b>\$1,060.00</b>	

### 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	\$616.00	500 ✓
<b>Total Spray Painting &amp; Panel Beating</b>	<b>\$616.00</b>	

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
ADVERTISEMENT STICKER	\$480.00	480 ✓
<b>Total Other Costs</b>	<b>\$480.00</b>	

### Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
6010062	Body	F01001-CW273	COVER:REAR TAIL LAMP,RH,FOR MAN A22 BUS	1.00	\$974.70	10.00	\$877.23	Replace	✓
6010298	VE	88-25225-6039	LAMP,STOP-LED (MAN BUS)	1.00	\$1,141.70	10.00	\$1,027.53	Replace	✓
6010373	Body	4001F09-ACCE5020	PANEL,REFLECTOR:RE AR,RH,FOR MAN BUS	1.00	\$107.00	10.00	\$96.30	Replace	✓
<b>Total</b>					<b>\$2,223.40</b>		<b>\$2,001.06</b>		

### 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
<b>Total</b>									

**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 resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

*8/11/18*  
*Tan Ah Leo 97495749*  
*5/11/18 @ 240 pm.*  
*0 2 days*  
*Resurvey after repair*  
*sur@lkkauto.com.*

4379.40

## Section A - Accident Details

Registration Number	SMB1332X
Case Reference Number	BUS/11/18/1001
Registration Date	25/3/2013
Company Type	SMRT Buses Ltd
Make	MAN
Model	A22
Name of Driver	Zhao Guoyang
Type of Accident	Head to Rear
Accident Date and Time	1/11/2018 1:20 PM
Accident Reported Date and Time	2/11/2018 10:40 AM
Is Surveyor Required?	No
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	
Special Instruction to ARC,if any	SMB1332X - REAR RIGHT PORTION FBB4565B (TP) - INSURED WITH NTUC
Prepared Date and Time	5/11/2018 10:40 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	\$1,060.00	\$0.00
Total Spray Cost	\$616.00	\$0.00
Total Spare Part Cost	\$2,001.06	\$0.00
Total Other Cost	\$480.00	\$0.00
<b>TOTAL COST</b>	<b>\$4,157.06</b>	<b>\$0.00</b>
<b>Lump Sum Total</b>	<b>\$0.00</b>	<b>\$0.00</b>

Number of Repair Days	3.0	
Prepared / Adjusted By	Tan Ah Leong	
ARC / Surveyor Sign Off Date	05/11/2018 10:48 AM	

Signature		
-----------	---	---

Remarks	NA
---------	----

## Section C - Quotation and Accident Invoice Details

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







## SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

Date Generated : 08/01/2019

User ID : CatherineLee

### Section A - Accident Details

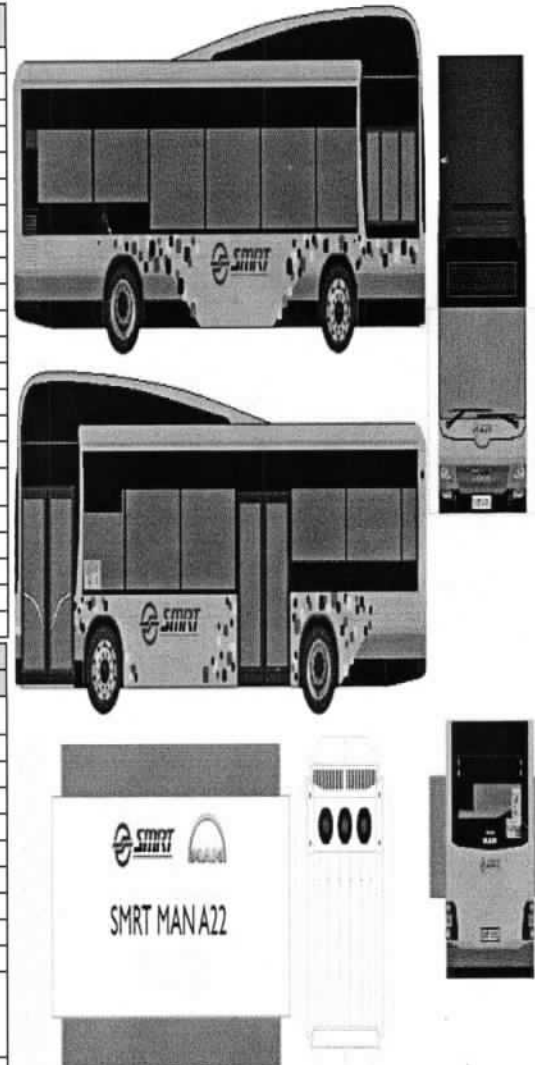
Registration Number	SMB1332X
Case Reference Number	BUS/11/18/1001
Registration Date	25/03/2013
Company Type	SMRT Buses Ltd
Make	MAN
Model	A22
Name of Driver	Zhao Guoyang
Type of Accident	Head to Rear
Accident Date and Time	01/11/2018 1:20 PM
Accident Reported Date and Time	02/11/2018 10:40 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24098696
Special Instruction to ARC, if any	SMB1332X - REAR RIGHT PORTION FBB4565B (TP) - INSURED WITH NTUC
Prepared Date and Time	05/11/2018 10:40 AM
Chassis Number	WMAA22ZZ5D7001768
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	\$1,060.00	\$795.00
Total Spray Cost	\$616.00	\$500.00
Total Spare Part Cost	\$1,600.85	\$1,600.85
Total Other Cost	\$480.00	\$80.00
<b>TOTAL COST</b>	<b>\$3,756.85</b>	<b>\$2,975.85</b>
Lump Sum Total	\$3,750.00	\$3,000.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Tan Ah Leong	Tauflikh
ARC / Surveyor Sign Off Date	05/11/2018 10:48 AM	08/01/2019 4:31 PM
Signature	<input checked="" type="checkbox"/>	Ltk
Remarks	NA	

### Section C - Quotation and Accident Invoice Details

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





## SMRT Accident Vehicle Repair Estimates

<b>SMRT Automotive Services Pte Ltd</b>
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

Date Generated : 08/01/2019

User ID : CatherineLee

### Section D - Details of Repair Estimates

#### Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS	\$1,060.00	\$795.00
<b>Total Labour</b>	<b>\$1,060.00</b>	<b>\$795.00</b>

#### 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	\$616.00	\$500.00
<b>Total Spray Painting &amp; Panel Beating</b>	<b>\$616.00</b>	<b>\$500.00</b>

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
ADVERTISEMENT STICKER	\$480.00	\$480.00
Lump Sum Adjustment by Surveyor	\$0.00	(\$400.00)
<b>Total Other Costs</b>	<b>\$480.00</b>	<b>\$80.00</b>

#### Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
6010062	Body	F01001-CW273	COVER,REAR TAIL LAMP,RH,FOR MAN A22 BUS	1.00	\$974.70	10.00	\$877.23	Replace	Replace
6010298	VE	88-25225-6039	LAMP,STOP:LED (MAN BUS)	1.00	\$1,141.70	10.00	\$1,027.53	Replace	Replace
6010373	Body	4001F09-ACCE5020	PANEL,REFLECTOR:RE AR,RH,FOR MAN BUS	1.00	\$107.00	10.00	\$96.30	Replace	Replace
<b>Total</b>					<b>\$2,223.40</b>		<b>\$2,001.06</b>		

#### 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
<b>Total</b>									

**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/INC18020203/T1qbe2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 18-01-2019	
			Code: INC4	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	FBB 4565B	Veh. Inspected	SMB 1332X	
Policy No.	5086128908-01	Coverage (\$)	0.00	
Claim No.	MT/1018536-002	Excess (\$)	0.00	
Assign From		Assign Date	05/11/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	MAN NL320F	c.c	10518	
Engine No.	HIDDEN	Year of Reg.	2013	
Chassis No.	WMAA22ZZ5D7001768	Colour	MULTI COLOUR	
Odometer	642089	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	275/70 R22.5	FIRENZA	8 mm	
L/H Front Tyre	275/70 R22.5	FIRENZA	8 mm	
R/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	8/8 mm	
L/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	8/8 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	01/11/2018	Inspection Date	05/11/2018	
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		



# 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



Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMB 1332X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	COVER:REAR TAIL LAMP, RH, FOR MAN A22 BUS	CRACKED	974.70	974.70
1	LAMP, STOP:LED (MAN BUS)	CRACKED	1,141.70	1,141.70
1	PANEL, REFLECTOR:REAR, RH, FOR MAN BUS	CRACKED	107.00	107.00
	LESS 10% DISCOUNT		-	-222.34
			2,223.40	2,001.06
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	ADVERTISEMENT STICKER (SN)	CUT	480.00	480.00
			480.00	480.00
	<b><u>LABOUR</u></b>			
	TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.		1,060.00	795.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		616.00	500.00
			1,676.00	1,295.00
	<b>GRAND TOTAL</b>		<b>4,379.40</b>	<b>3,776.06</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>3,000.00</b>

Report Ref No. NS/INC18020203/T1qbe2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.