

REF:

NS/INC18021100/N11602

TAX/11/18/2079

Surveyor:

NA 2

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: YN 32612

Policy No. 5086660063-01 09122017

Claims No. MT/1020372-004

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: 2 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN/OUT

Date: Person Contacted:

Veh No: SAC 40775 Yr Regn: 12 DEC 2017

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

Truck / Trailer or

Make: TOYOTA PRIUS HYBRID C.G. 1,798

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

Sp. Reading: 80,561 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JTDKB3FU303576176

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: 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 FALKEN (F) YOKO (R)

Front Rear

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

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

D.O.A. 18/11/18 D.O.I. 20/11/18

Survey held at SMRT WOODLAND

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

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

Date / Time Action / Instruction

reverse smors working

SAC 40775 - NS/INC1615135 / K11602

YN 32612 - X

Part by part \$958.73 (Red: 2274.10, 10%)

RECEIVED 21 JAN 2019

Date/Time, File Pass to?

☐ : Prelim Report
☒ : Final Report

1) 211 Typist

Date/Time, File Return to?

2)

Report Format:

Lump Sum / I.B.: (\$ 958.73)

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$) S + RS SI

☐ : Interview (\$) Photos

☐ : Tech. Invs (\$) Others

☐ : Weekend (\$)

TOTAL

160

160

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="18/11/2018 18:42"/>
Vehicle No.(For Motor)	<input type="text" value="YN3261Z"/>	Certificate Number	<input type="text"/>

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5086660063-01		RADHA EXPORTS PTE LTD	199500018C	GFT	Comprehensive	YN3261Z	YN3261Z	09/12/2017	

Denise Tay (LKKAuto)

From: mtreg <mtreg@income.com.sg>
Sent: Monday, 21 January 2019 11:15 AM
To: Denise Tay (LKKAuto)
Subject: FW: REQUEST CLAIM NUMBER

Hi,

All claims created.

FYA

With Regards

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



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify. Find out more at Income.com.sg/careers

in with you

From: Denise Tay (LKKAuto) [mailto:denisetay@lkkauto.com]
Sent: Friday, January 18, 2019 4:44 PM
To: mtreg <mtreg@income.com.sg>
Subject: REQUEST CLAIM NUMBER

TP Claims against NTUC Income: Follow-Through Survey

Date : 16/1/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate	Tentative
1	MT/1025184-003	COMFORT TRANSPORTATION	SHA 4161S	GBC 9928A	20/12/2018	12:10	\$ 1,909.70	\$
2	MT/1020378-004	SMART TAXIS	SHC 4077S	YN 3261Z	18/11/2018	10:30	\$ 3232.83	\$

Claim received from LKK Auto

Best Regards,

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	19/11/2018 11:21
Date Of Accident	18/11/2018 10:30
Exact Location Of Accident	CTE TOWARDS CITY BEFORE PIE/BRADDELL EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4077S
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	SHIANIAN BIN SAFIAN
NRIC No	S1594509E
Date Of Birth	30/12/1963
Occupation	OUTDOOR
Date Of Driving Pass	29/12/2006
Driving Experience	11 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	107
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 - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

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)	3
Passenger 1	
	NAME: : UNKNOWN
	GENDER: : FEMALE
Passenger 2	
	NAME: : UNKNOWN
	GENDER: : FEMALE

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 ALONG CTE AT THE 4TH LANE WITH TWO PASSENGERS ON BOARD WHEN THE FRONT VEHICLE CAME TO STOP, I FOLLOW AS WELL. HOWEVER, THE LORRY YN3261Z FROM BEHIND FAILED TO STOP AND COLLIDED ONTO THE 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 LARGE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN3261Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHEN DONGYUAN
NRIC/Passport Number	G2747492L
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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.

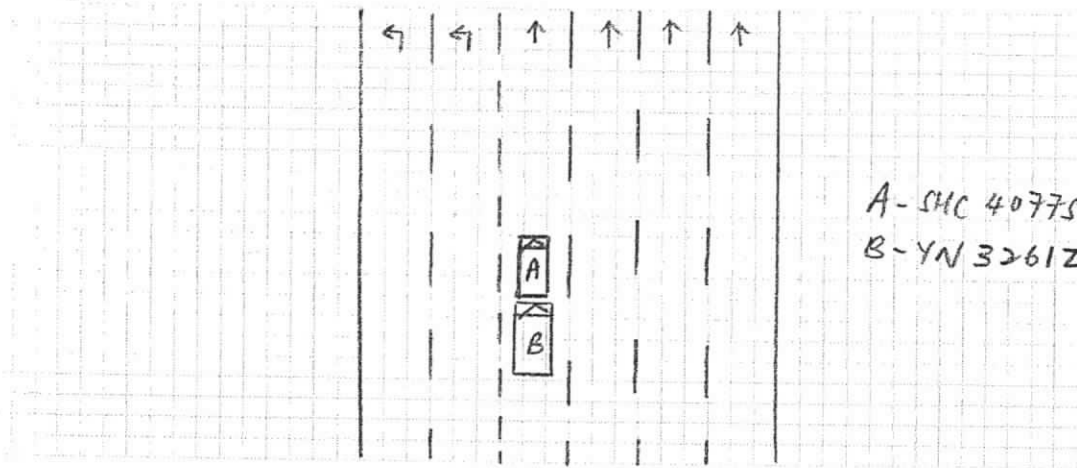


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



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 that the foregoing particulars are true in every respect.



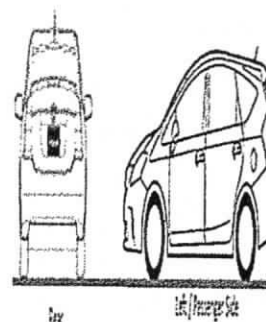
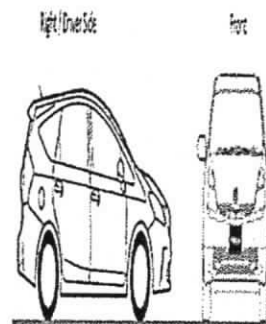
Policyholder's Signature _____
Date & Time: _____

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

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



Section A - Accident Details

Registration Number	SHC4077S
Case Reference Number	TAX/11/18/2077
Registration Date	12/12/17
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS4
Name of Driver	SHIANIAN BIN SAFIAN
Type of Accident	Head to Rear
Accident Date and Time	18/11/18 10:28 AM
Accident Reported Date and Time	19/11/18 11:30 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24098822
Special Instruction to ARC, if any	TOS
Prepared Date and Time	20/11/18 7:04 AM
Chassis Number	
Mileage	
Work Shop	
Repair Completion Date and Time	



Diagram

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	\$558.00	\$200.00
Total Spare Part Cost	\$1,976.83	\$538.73
Total Other Cost	\$360.00	\$20.00
TOTAL COST	\$3,232.83	\$958.73 (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	20/11/2018 7:21 AM	20/11/2018 5:19 PM
Signature		
Remarks	PART BY PART REPAIR. 2 DAYS. AFTER REPAIR PHOTOS	

Section C - Quotation and Accident Invoice Details

Quotation Number	QN-1811-0442	Invoice Number	
Quotation Date	24.11.2018	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 REAR PORTION	\$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
TO RESPRAY TAILGATE OUTSIDE GARNISH	\$180.00	\$0.00
Total Spray Painting & Panel Beating	\$558.00	\$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	
		52159479 13	COVER, RR BUMPER ASSY	1.00	\$423.90	100.00	\$0.00	Replace	Repair	X
		52462470 30	PAD, RR BUMPER, RH & LH, 1	0.00	\$3.80	0.00	\$0.00	Replace	Not Given	X NN
		52462470 20	PAD, RR BUMPER, RH & LH, 2	0.00	\$3.80	0.00	\$0.00	Replace	Not Given	X NN
		52462470 10	PAD, RR BUMPER, RH & LH, 3	0.00	\$3.80	0.00	\$0.00	Replace	Not Given	X NN
		52191470 30	SEAL, RR BUMPER ARM, RH & LH	0.00	\$11.00	0.00	\$0.00	Replace	Not Given	X NN
		52575470 40	RETAINER, RR BUMPER, RH	0.00	\$112.70	0.00	\$0.00	Replace	Not Given	X Svc
		52453470 10	GUARD, RR BUMPER, LOWER	1.00	\$558.30	25.00	\$418.73	Replace	Replace	X SCR
		52169470 20	COVER, GUARD RR BUMPER LOWER	0.00	\$14.80	0.00	\$0.00	Replace	Not Given	X Svc
			PIXEL STICKER	2.00	\$60.00	0.00	\$120.00	Replace	Replace	X NEC
			SENSOR REVERSE	0.00	\$180.00	0.00	\$0.00	Replace	Not Given	X Svc
		76801471 10A1	TAIL GATE BACK DOOR OUTSIDE GARNISH SUB-ASSY	0.00	\$891.20	0.00	\$0.00	Replace	Not Given	X Svc
			STICKER SMRT LOGO	0.00	\$7.80	0.00	\$0.00	Replace	Not Given	X NN
			STICKER DECAL 6555 8888	0.00	\$21.60	0.00	\$0.00	Replace	Not Given	X NN
		75441470 90	NAME PLATE (HYBRID), LUGGAGE COMPARTMENT DOOR	0.00	\$52.30	0.00	\$0.00	Replace	Not Given	X NN

SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63655592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

Date Generated : 24/11/2018

User ID : PehBuan

	75442471 30	NAME PLATE (PRIUS), LUGGAGE COMPARTMENT DOOR	0.00	\$52.30	0.00	\$0.00	Replace	Not Given	X
	75403480 10	EMBLEM SUB-ASSY REAR	0.00	\$46.30	0.00	\$0.00	Replace	Not Given	X
Total				\$2,443.60		\$538.73			

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									

3759 60

$$\begin{array}{r}
 538.73 \\
 + 200.00 \\
 + 220.00 \\
 \hline
 958.73
 \end{array}$$

CONFIRMED PART BY PART REPAIR \$958.73 / 2 DAYS.

NAZ LKK
M



Case Details

Case Reference Number : TAX/11/18/2077

Type of Repair : Accident Repair

Vehicle Registration Number : SHC4077S

Company Type : SMRT Taxis Pte Ltd

Estimation ID : EST-4595-ID

Assigned By : Kok Wah Wong

Insurance Company Name : NTUC Income Insurance Co-operative Ltd

Accident Date and Time : 18/11/2018 02:28 AM

Vehicle Age(In Months) : 11

Documents / Photographs

View Documents / Photographs

Total Documents: 1

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation					List Price(\$)	Dis(%)	Final Price(\$)	Repair/Replace	Surveyor Approval		Repair/Replace
				Part Name	Qty	List Price Per Unit(\$)							Surveyor Final Price(\$)	Surveyor Quantity	
One Time Key In	Main			COVER, RR BUMPER ASSY	1	423.90			423.90	25.00	317.92	Replace	1	0	Repair ✓ XE
One Time Key In	Main			PAD, RR BUMPER, RH & LH, 1	2	3.80			7.60	25.00	5.70	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			PAD, RR BUMPER, RH & LH, 2	2	3.80			7.60	25.00	5.70	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			PAD, RR BUMPER, RH & LH, 3	2	3.80			7.60	25.00	5.70	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			SEAL, RR BUMPER ARM, RH & LH	2	11.00			22.00	25.00	16.50	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			RETAINER, RR BUMPER, RH	1	112.70			112.70	25.00	84.53	Replace	0	0	Not Give ✓ XSVC
One Time Key In	Main			GUARD, RR BUMPER, LOWER	1	558.30			558.30	25.00	418.72	Replace	1	418.72	Replace ✓ /SCR
One Time Key In	Main			COVER, GUARD RR BUMPER LOWER	1	14.80			14.80	25.00	11.10	Replace	0	0	Not Give ✓ XSVC
One Time Key In	Main			PIXEL STICKER	2	60.00			120.00	0.00	120.00	Replace	2	120.00	Replace ✓ /NEC
One Time Key In	Main			SENSOR REVERSE	1	180.00			180.00	0.00	180.00	Replace	0	0	Not Give ✓ XSVC
One Time Key In	Main			TAIL GATE BACK DOOR OUTSIDE GARNISH SUB-ASSY	1	891.20			891.20	25.00	668.40	Replace	0	0	Not Give ✓ XSVC
One Time Key In	Main			STICKER SMRT LOGO	1	7.80			7.80	0.00	7.80	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			STICKER DECAL 6555 8888	1	21.60			21.60	0.00	21.60	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			NAME PLATE (HYBRID), LUGGAGE COMPARTMENT DOOR	1	52.30			52.30	25.00	39.22	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			NAME PLATE (PRIUS), LUGGAGE COMPARTMENT DOOR	1	52.30			52.30	25.00	39.22	Replace	0	0	Not Give ✓ XNN
One Time Key In	Main			EMBLEM SUB-ASSY REAR	1	46.30			46.30	25.00	34.72	Replace	0	0	Not Give ✓ XNN
Total Spare Part Cost											1,976.83	Surveyor Total		538.72	
Lump Sum Discount (%)											0.00	Lump Sum Dis (%)		0	
Final Spare Part Cost											1,976.83	Final Sur Total		538.72	

Labour's Cost Detail

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
Total:		338.00	200.00	

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO REPAIR REAR PORTION	338.00	200	
Total:		338.00	200.00	



Spray Cost Detail

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO REPSRAY REAR BUMPER	378.00	200	
2	TO RESPRAY TAILGATE OUTSIDE GARNISH	180.00	0	NN
Total:		558.00	200.00	

Other Cost Detail

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0	NN
2	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	20	
3	TO WASH AND VACUUM	60.00	0	NN
4	TO REPLACE SUNDRY PARTS	100.00	0	NN
Total:		360.00	20.00	

Summary

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Total Spare Part Detail	1,976.83	538.72
Total Labour Cost	338.00	200.00
Total Spray Painting	558.00	200.00
Other	360.00	20.00
Overall Total	3,232.83	958.72
Lump Sum Repair Option		
Lump Sum Total	0.00	958.72
Surveyor Approved Amount		958.72
No of Repair Days*	3	1
Remarks		PART BY PART REPAIR 1 DAY AFTER REPAIR PHOTOS
Surveyor Name		Naz
Signature		
Survey Date	20/11/2018	

NAZ LKK 20/11/18

P.I.P.

2 DAY

AFTER REPAIR PHOTOS

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:



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/INC18021100/Ntbe2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 22-01-2019

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YN 3261Z	Veh. Inspected	SHC 4077S
Policy No.	5086660063-01	Coverage (\$)	0.00
Claim No.	MT/1020378-004	Excess (\$)	0.00
Assign From		Assign Date	20/11/2018

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JTDKB3FU303576176	Colour	MAROON
Odometer	80561	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	5 mm
L/H Front Tyre	195/65 R15	FALKEN	5 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 PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	18/11/2018	Inspection Date	20/11/2018
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

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4077S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	GUARD, RR BUMPER, LOWER (DISC 25%)	SCRATCHED	558.30	418.73
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	RETAINER, RR BUMPER, RH	SERVICEABLE	112.70	-
1	COVER, GUARD RR BUMPER LOWER	SERVICEABLE	14.80	-
1	SENSOR REVERSE	SERVICEABLE	180.00	-
1	TAIL GATE BACK DOOR OUTSIDE GARNISH SUB-ASSY	SERVICEABLE	891.20	-
1	PAD, RR BUMPER, RH & LH, 1	NOT NECESSARY	3.80	-
1	PAD, RR BUMPER, RH & LH, 2	NOT NECESSARY	3.80	-
1	PAD, RR BUMPER, RH & LH, 3	NOT NECESSARY	3.80	-
1	SEAL, RR BUMPER ARM, RH & LH	NOT NECESSARY	11.00	-
1	STICKER SMRT LOGO	NOT NECESSARY	7.80	-
1	STICKER DECAL 6555 8888	NOT NECESSARY	21.60	-
1	NAME PLATE (HYBRID), LUGGAGE COMPARTMENT DOOR	NOT NECESSARY	52.30	-
1	NAME PLATE (PRIUS), LUGGAGE COMPARTMENT DOOR	NOT NECESSARY	52.30	-
1	EMBLEM SUB-ASSY REAR	NOT NECESSARY	46.30	-
1	COVER, RR BUMPER ASSY	TO REPAIR SEE LABOUR	423.90	-
			2,503.60	538.73
	<u>LABOUR</u>			
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF COVER, RR BUMPER ASSY.		338.00	200.00
	SPRAY PAINT.		558.00	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	-
			1,256.00	420.00
	GRAND TOTAL		3,759.60	958.73
RECOMMENDED COST OF REPAIRS (CONFIRMED)				958.73

Report Ref No. NS/INC18021100/Ntbe2

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MUHAMMAD NAZRIL BIN ABDULLAH

Automotive Assessor

A handwritten signature in black ink, appearing to be 'K.K.LAU'.

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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