

Signature

REF: NS/INC18021514/R1vd302

53694

ASSIGNMENT

From: Date: 26/11/18  
Estimated Cost:  
OD/TP WS/TP RES/OD RES/EVA/INV/MV  
To Inspect Vehicle No: SHC 4497M  
at Workshop m/s SMRT  
of 1 Kaki Bkt Ave 6 #01-58  
Insured: FBE 5356R  
Policy No: 5043751252-08 (20/5/18 - 19/5/19)  
Claims No: MT/1021694-002  
Sum Insured: Excess:  
(Client's Record)  
Make of Veh:  
(Policy Condition)  
Remark: The veh had commenced its repair at the time of inspection.  
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

N/S	O/S

Veh No: SHC 4497M Yr Regn: 2014 / 1A4  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or  
Make: TOYOTA PRIUS 1-8 A C.C. 1798  
Colour: MAROON A/C: Insured / Std / NI / NA  
Sp. Reading: 569532 T/Radio: Insured / Std / NI / NA  
Eng/No:  
C/No: 3T0KN 36U005747641  
Gen. Cond: Good / Fair / Poor / Burnt  
Steering: In order / Jammed / Leaked / Burnt or  
Brake: In order / Jammed / Leaked / Burnt or  
Modi: Nil / S/Rim / STD A/Rim or  
Tyre Size: F: 195/65R15  
R: 1 -  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or Pirelli  
Front Rear  
R/Bal. 5 mm R/Bal. 5 mm  
L/Bal. 5 mm L/Bal. 5 mm  
D.O.A. 22/11/18 D.O.I. 26/11/18  
Survey held at SMRT  
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
O/S FR  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction  
SHC 4497M - NBA / INC18021448 / y DUA: 22/11/18  
FBE 5356R - NBA / INC18021448 / y DUA: 22/11/18  
25/1/19 LS \$ 200 confirmed by email (Ref 9619:14, 789)  
RECEIVED 28 JAN 2019  
NTUC  
FBE 5356R

Date/Time, File Pass to? ☐ : Preli. Report  
1) ☐ : Final Report  
Date/Time, File Return to?  
2) 25/1 - typist  
Report Format: TP  
Lump Sum / I.B.I. (\$) 2700/-  
Days Of Repair: 5  
Resurvey No. of Trip: 1  
Add Fee: ☐ Site Insp (\$)  
☐ Interview (\$)  
☐ Tech Invs (\$)  
☐ Weekend (\$)  
Survey Fee: 160  
Transportation: \$ + R5 \$  
Photos  
Others  
TOTAL 160

## Veron Chen (LKKAUTO)

**From:** mtreg <mtreg@income.com.sg>  
**Sent:** Friday, 25 January 2019 10:51 AM  
**To:** Veron Chen (LKKAUTO)  
**Subject:** FW: REQUEST FOR CLAIM NUMBER

Hi,

Claim created.

With Regards

Samsia  
Senior Admin Assistant,  
Motor Insurance  
[www.income.com.sg](http://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](http://Income.com.sg/careers)**



*'With effect from 1 Mar 2019, we will be discontinuing mailbox, [mtreg@income.com.sg](mailto:mtreg@income.com.sg). Please forward all motor claims related correspondences to [mtcl@income.com.sg](mailto:mtcl@income.com.sg) so that we can attend to it accordingly.'*

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**From:** Veron Chen (LKKAUTO) [mailto:[veronchen@lkkauto.com](mailto:veronchen@lkkauto.com)]  
**Sent:** Friday, January 25, 2019 10:38 AM  
**To:** mtreg <mtreg@income.com.sg>  
**Subject:** RE: REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Please provide us the claim number.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle
1	MT/1021694-002	SMRT TAXIS PTE LTD	SHC 4497M	FBE 5356

D.O.A	Time of Accident	Estimate	Tentative repair cost
22/11/2018	8:30	\$12,319.14	\$2,700.00

Best Regards,

Veron Chen | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

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**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.

Hello, NAC\_PAYA\_UBI\_800601

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

Policy No.

Date of Accident

22/11/2018 18:01

Vehicle No.(For Motor)

FBES356R

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"/>	5043751252-08		TAN SOON HEE	S0440797J	GMC	Third Party, Fire & Theft	FBE5356R	FBE5356R	20/05/2018	19/05/2019

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHC4497M
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Nov 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR5890790
Chassis No.:	JTDKN36U005747641
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	20 Aug 2014
First Registration Date:	20 Aug 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Aug 2022
PARF Rebate Amount:	\$6,066.00
Intended COE Rebate Details	
COE Expiry Date:	19 Aug 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,088.00
COE Rebate Amount:	\$23,310.00
<b>Total Rebate Amount:</b>	<b>\$29,376.00</b>
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 29 Nov 2018

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	22/11/2018 11:14
Date Of Accident	22/11/2018 08:30
Exact Location Of Accident	161 GUL CIRCLE (OUTSIDE HONEYWELL AEROSPACE)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4497M
<b>Insured/Policyholder</b>	
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	CHUA SOON HENG VINCENT
NRIC No	S1647814H
Date Of Birth	08/01/1964
Occupation	OUTDOOR
Date Of Driving Pass	19/11/1981
Driving Experience	37 YEARS AND 0 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?	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)	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

REFER TO POLICE REPORT

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### Details of Witness 1

Name	NICOLE SOH
Phone Number	
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

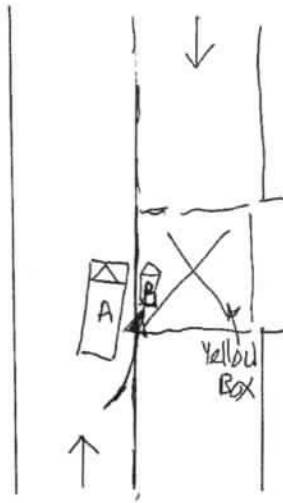
Vehicle Registration Number	FBE5356R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBE5356R
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	



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.

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

SKETCH PLAN


IMPORTANT NOTICE

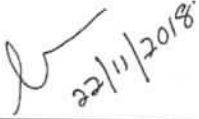
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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:

 22/11/18  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

 22/11/2018  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20181122/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20181122/7009

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 22/11/2018 15:00		Vide Report No.: J/20181122/0100		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHUA SOON HENG VINCENT			Address: APT BLK 422 SERANGOON CENTRAL #03-356 SINGAPORE 550422		
ID Type / ID No.: NRIC NO / S1647814H			Contact No.: Home/Office:		Mobile: 90699922
Nationality: SINGAPORE CITIZEN			Email: vcsh@yahoo.com		
Sex: Male	Age: 54	Date of Birth: 08/01/1964	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3		Date of Expiry: 24/10/2020

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/11/2018 08:30	Type of Location: Straight Road
Location:  GUL CIRCLE				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBE5356R	Motorcycle				Slightly Damaged	0
SHC4497M	Car	TOYOTA	Prius	Maroon	Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20181122/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20181122/7009

CONTINUATION OF REPORT

Driver			
Name	CHUA SOON HENG VINCENT	ID No.	S1647814H
Related Vehicle	SHC4497M (Car)	Contact No.	90699922
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 24/10/2020
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

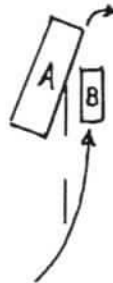
Brief Details.

I was going to turn right into 161 Gul Circle (Honeywell Aerospace) to pick up my GrabTaxi booking passenger in my taxi SHC4497M. I signalled right and started to turn right into the driveway of 161 Gul Circle when all of a sudden, a motorcycle (FBE5356R) came from behind on my right and hit my front right bumper and headlight. The accident took place at a yellow box in front of 161 Gul Circle. The motorcyclist fell onto the floor in front of my car. He had scratches on his feet and hands. It was not my fault, he was impatient and wanted to overtake my turning car. I did not see him on my side mirror because the motorcycle was too small. The motorcyclist could see me in full view and wanted to overtake my right turning car. My grabtaxi booking passenger is a witness, her name is Nicole Soh, tel 82181029

SMRT  
Taxi

A = SHC 4497M

B = FBE 5356R  
(Motorcycle)



161 601  
Circle  
(Honeywell  
Aerospace)

Date: 22/11/18 0830hrs

Author: Vincent Chung  
Chung





**SINGAPORE  
POLICE FORCE**



T/20181122/7009

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20181122/7009

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 22/11/2018 15:00
Officer In Charge Of Case: TP / TPHQ / YAN MINGSHENG DANIEL Contact No.: 65476252	Classification Of Case:
Authentication Stamp NP168	



## Case Details

Case Reference Number : TAX/11/18/2097  
 Type of Repair : Accident Repair  
 Vehicle Registration Number : SHC4497M

Company Type : SMRT Taxis Pte Ltd  
 Estimation ID : EST-4638-ID  
 Assigned By : Kok Wah Wong

Insurance Company Name : NTUC Income Insurance Co-operative Ltd  
 Accident Date and Time : 22/11/2018 12:30 AM  
 Vehicle Age(In Months) : 51

## Documents / Photographs

[View Documents / Photographs](#)

Total Documents: 1

## Estimation Details

### Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation							Surveyor Approval		
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace
One Time Key In	Main			BUMPER FRT	1	482.00	482.00	25.00	361.50	Replace	1	361.50	Replace ▾
				<i>DB</i>									
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	10	12.08	Replace ▾
				<i>new</i>									
One Time Key In	Main			BUMPER SUPPORT F/RH	1	76.40	76.40	25.00	57.30	Replace	1	57.30	Replace ▾
				<i>new</i>									
One Time Key In	Main			BUMPER ENERGY ABSORBER FRT	1	78.80	78.80	25.00	59.10	Replace	0	0	Check ▾
				<i>?</i>									
One Time Key In	Main			BUMPER REINFORCEMENT FRT	1	498.40	498.40	25.00	373.80	Replace	0	0	Check ▾
				<i>?</i>									
One Time Key In	Main			ARM SUB-ASSY, FR BUMPER RH	1	250.40	250.40	25.00	187.80	Replace	0	0	Check ▾
				<i>?</i>									
One Time Key In	Main			BUMPER GRILLE SUB-ASSY, LOWER	1	311.10	311.10	25.00	233.33	Replace	0	0	Check ▾
				<i>?</i>									
One Time Key In	Main			LENS & BODY, FR TURN RH	1	511.80	511.80	10.00	460.62	Replace	1	460.62	Replace ▾
				<i>sch</i>									
Total Spare Part Cost									7,008.30		Surveyor Total	1,909.87	
Lump Sum Discount (%)									0.00		Lump Sum Dis (%)	20.00	
Final Spare Part Cost									5,606.64		Final Sur Total	1,527.90	

SMRT Recommendation											Surveyor Approval			
BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace	
One Time Key In	Main			BRACKET, FR TURN ?	1	58.20	58.20	25.00	43.65	Replace	0	0	Check	▼
One Time Key In	Main			BRACKET, FR TURN UPPER RH ?	1	24.40	24.40	25.00	18.30	Replace	0	0	Check	▼
One Time Key In	Main			BRACKET, FR TURN LOWER RH ?	1	26.00	26.00	25.00	19.50	Replace	0	0	Check	▼
One Time Key In	Main			BUMPER LIP FRT ?	1	139.60	139.60	25.00	104.70	Replace	0	0	Check	▼
One Time Key In	Main			BUMPER FRT ABSORBER LOWER ?	1	127.70	127.70	25.00	95.78	Replace	0	0	Check	▼
One Time Key In	Main			HOOD PANEL R	1	748.10	748.10	25.00	561.08	Replace	1	0	Repair	▼
One Time Key In	Main			SUPPORT SUB-ASSY R	1	1,460.40	1,460.40	25.00	1,095.30	Replace	1	0.00	Repair	▼
One Time Key In	Main			HEAD LAMP RH BRO/	1	945.20	945.20	10.00	850.68	Replace	1	850.68	Replace	▼
One Time Key In	Main			WIPER WASHER JAR ?	1	180.10	180.10	25.00	135.07	Replace	0	0.00	Check	▼
One Time Key In	Main			FENDER FRT/RH R	1	723.40	723.40	25.00	542.55	Replace	1	0	Repair	▼
One Time Key In	Main			NAME PLATE (HYBRID) m/	1	51.90	51.90	25.00	38.92	Replace	1	38.92	Replace	▼
One Time Key In	Main			FENDER LINER FRT/RH DE/	1	171.70	171.70	25.00	128.77	Replace	1	128.77	Replace	▼
One Time Key In	Main			FENDER LINER PAD, FR WHEEL RH R	1	49.30	49.30	25.00	36.97	Replace	1	0.00	Repair	▼
One Time Key In	Main			FENDER APRON SUB FRT/RH Xsu	1	637.80	637.80	25.00	478.35	Replace	0	0.00	Not Give	▼
Total Spare Part Cost									7,008.30		Surveyor Total	1,909.87		
Lump Sum Discount (%)									0.00		Lump Sum Dis (%)	20.00		
Final Spare Part Cost									5,606.64		Final Sur Total	1,527.90		



SMRT Recommendation											Surveyor Approval		
BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace
One Time Key In	Main			WHEEL DISC. FRONT	1	1,484.20	1,484.20	25.00	1,113.15	Replace			
Total Spare Part Cost									7,008.30		Surveyor Total	1,909.87	
Lump Sum Discount (%)									0.00		Lump Sum Dis (%)	20.00	
Final Spare Part Cost									5,606.64		Final Sur Total	1,527.90	

**Labour's Cost Detail**

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO REPAIR FRONT RH PORTION	676.00	400	
Total:		676.00	400.00	

**Spray Cost Detail**

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO REPSRAY FRONT BUMPER	378.00	200.00	
2	TO RESPRAY FRONT BUMPER LOWER GRILLE	180.00	0	^^
3	TO REPSRAY FRONT HOOD	378.00	200	
4	TO RESPRAY FRONT SUPPORT PANEL	180.00	100	
5	TO RESPRAY FRONT FENDER RH	378.00	200.00	
6	TO RESPRAY FRONT WHEEL HOUSE RH	180.00	0	^^
7	TO RESPRAY RIM	180.00	0	^^
Total:		1,854.00	700.00	

**Other Cost Detail**

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60	
Total:		608.44	278.44	

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
2	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	30	
3	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	40	
4	TO WASH AND VACUUM	60.00	0	NA
5	TO REPLACE SUNDRY PARTS	100.00	0	NA
6	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	148.44	148.44	
<b>Total:</b>		<b>608.44</b>	<b>278.44</b>	

## Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	5,606.64	1,527.90
Total Labour Cost	676.00	400.00
Total Spray Painting	1,854.00	700.00
Other	608.44	278.44
Overall Total	8,745.08	2,906.34
Lump Sum Repair Option	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	8,750.00	2,900.00
Surveyor Approved Amount		2,900.00
No of Repair Days*	6	4
Remarks	-	lump sum repair resurvey after paint
Surveyor Name		Rasul
Signature		
Survey Date	26/11/2018	

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

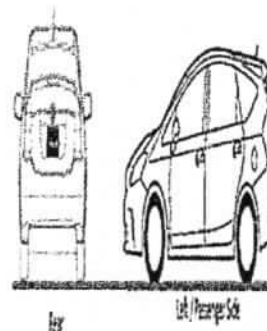
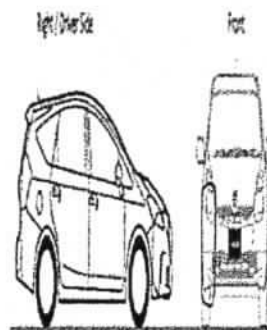
Acknowledged by Repairer

Signature:

Date:



**Section A - Accident Details**

Registration Number	SHC4497M
Case Reference Number	TAX/11/18/2097
Registration Date	20/8/2014
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS
Name of Driver	CHUA SOON HENG VINCENT
Type of Accident	Side Swipe
Accident Date and Time	22/11/2018 8:30 AM
Accident Reported Date and Time	22/11/2018 10:43 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24098879
Special Instruction to ARC, if any	TSS
Prepared Date and Time	23/11/2018 7:14 AM
Chassis Number	
Mileage	
Work Shop	
Repair Completion Date and Time	



Toyota

**Section B - Summary of Repair Estimates**
**Summary of Repair Estimates**

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$676.00	\$400.00
Total Spray Cost	\$1,854.00	\$700.00
Total Spare Part Cost	\$7,104.08	\$2,005.65
Total Other Cost	\$608.44	(\$405.65)
<b>TOTAL COST</b>	<b>\$10,242.52</b>	<b>\$2,700.00</b>
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	7.0	5.0
Prepared / Adjusted By	Kim Ming Chin	RASUL (LKK) / NTUC
ARC / Surveyor Sign Off Date	21/01/2019 11:10 AM	26/11/2018 4:23 PM
Signature		
Remarks	Initial estimate = 6 days Request number of days to extend 1 day	lump sum repair resurvey after paint

12,319.14



	81519-47060	BRACKET, FR TURN	0.00	\$58.20	0.00	\$0.00	Replace	Check	X	} su
	81519-47060	BRACKET, FR TURN UPPER	0.00	\$24.40	0.00	\$0.00	Replace	Check	X	
	81519-47050	BRACKET, FR TURN LOWER	0.00	\$26.00	0.00	\$0.00	Replace	Check	X	
	76851-47020	BUMPER LIP FRT	0.00	\$139.60	0.00	\$0.00	Replace	Check	X	
	52618-47050	BUMPER FRT ABSORBER	0.00	\$127.70	0.00	\$0.00	Replace	Check	X	
	53301-47060	HOOD PANEL	1.00	\$748.10	100.00	\$0.00	Replace	Repair	R	} su
	53201-47902	SUPPORT SUB-ASSY	1.00	\$1,460.40	100.00	\$0.00	Replace	Repair	R	
	81130-47500	HEAD LAMP RH	1.00	\$945.20	10.00	\$850.68	Replace	Replace		BRO
	85315-47140	WIPER WASHER JAR	0.00	\$180.10	0.00	\$0.00	Replace	Check	X	} su
	53801-47050	FENDER FRT/RH	1.00	\$723.40	100.00	\$0.00	Replace	Repair	R	
	75374-47051	NAME PLATE (HYBRID)	1.00	\$51.90	25.00	\$38.93	Replace	Replace		NEC
	53875-47030	FENDER LINER FRT/RH	1.00	\$171.70	25.00	\$128.78	Replace	Replace		DE
	53851-47040	FENDER LINER PAD, FR	1.00	\$49.30	100.00	\$0.00	Replace	Repair	R	} su
	53701-47050	FENDER APRON SUB FRT/RH	0.00	\$637.80	0.00	\$0.00	Replace	Not Given	X	
	42611-47140(Frt)	WHEEL DISC, FRONT	0.00	\$1,484.20	0.00	\$0.00	Replace	Not Given	X	
Total				\$9,038.51		\$1,909.89				

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
		52618-47050	BUMPER FRT ABSORBER	1.00	\$127.70	25.00	\$95.78	Replace	Replace
Total			(under cover)		127.70		95.78		

$$\begin{array}{r}
 2005.67 \\
 + 400.00 \\
 + 978.44 \\
 \hline
 3384.11 \\
 - 202 \\
 \hline
 2707.29 \\
 \hline
 \text{Us \$2700/-}
 \end{array}$$

12/19.14

**Veron Chen (LKKAUTO)**

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**From:** Veron Chen (LKKAUTO)  
**Sent:** Friday, 25 January 2019 10:27 AM  
**To:** Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))  
**Cc:** SUR  
**Subject:** RE: SUPPLEMENTARY SHC 4497 M TAX/11/18/2097

Dear Poh Suan,

WITHOUT PREJUDICE

Confirmed Lump Sum \$2700/- @ 5 working days.

Best Regards,  
Veron Chen | Case Handler  
LKK Auto Consultants Pte Ltd  
Phone: 6256-3561 | email: sur@lkkauto.com | fax: 6256-4315  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex)) <YeoPohsuan@smrt.com.sg>  
Sent: Thursday, 24 January 2019 4:42 PM  
To: Veron Chen (LKKAUTO) <veronchen@lkkauto.com>  
Subject: FW: SUPPLEMENTARY SHC 4497 M TAX/11/18/2097

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

From: Alex Kam [mailto:alex\_kam@leeshengauto.com.sg]  
Sent: Friday, 30 November 2018 4:59 PM  
To: Rasul (LKK Auto); Phua Zhi Yang (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex)); Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex)); Kok Tuck Foo (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))  
Cc: Lay Hoon; Jurviel; Shanti B Thaiyal Nayagi (Auto Svcs/Ext Biz Svcs/Claims & IA/Taxis/Claims)  
Subject: SUPPLEMENTARY SHC 4497 M TAX/11/18/2097

Hi Rasul ,

The above awaiting for your approval, please let us have your decision .

Thanks

Regards  
ALEX

Your message is ready to be sent with the following file or link attachments:

IMG\_5766  
IMG\_5758

IMG\_5759  
IMG\_5761  
IMG\_5762  
IMG\_5763  
IMG\_5764  
IMG\_5765

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.



## 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/INC18021514/R1vd3e2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 28-01-2019	
Code: INC4				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	FBE 5356R	Veh. Inspected	SHC 4497M	
Policy No.	5043751252-08	Coverage (\$)	0.00	
Claim No.	MT/1021694-002	Excess (\$)	0.00	
Assign From		Assign Date	26/11/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	TOYOTA PRIUS 1.8A	c.c	1798	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	JTDKN36U005747641	Colour	MAROON	
Odometer	569532	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	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	FALKEN	5 mm	
L/H Rear Tyre	195/65 R15	FALKEN	5 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	22/11/2018	Inspection Date	26/11/2018	
Survey held at	1 KAKI BKT AVE 6# 01-58			
Repairer	SMRT AUTOMOTIVE SERVICES PTE LTD			
<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:		5 Working Days		



**National Assessment Centre Services**

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

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Page No.:1 of 2

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4497M**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	BUMPER FRT (DISC 25%)	DEFORMED	482.00	361.50
10	BUMPER CLIPS @\$1.61 (DISC 25%)	NECESSARY	16.10	12.08
1	BUMPER SUPPORT F/RH (DISC 25%)	NECESSARY	76.40	57.30
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	51.90	38.93
1	FENDER LINER FRT / RH (DISC 25%)	DEFORMED	171.70	128.78
1	BUMPER FRT ABSORBER (UNDER COVER) (DISC 25%)	CRACKED	127.70	95.78
1	LENS & BODY, FR TURN RH (DISC 10%)	SCRATCHED	511.80	460.62
1	HEAD LAMP RH (DISC 10%)	BROKEN	945.20	850.68
1	BUMPER ENERGY	SERVICEABLE	78.80	-
1	BUMPER REINFORCEME	SERVICEABLE	498.40	-
1	ARM SUB-ASSY, FR BUMPER RH	SERVICEABLE	250.40	-
1	BUMPER GRILLE SUB-	SERVICEABLE	311.10	-
1	BRACKET, FR TURN	SERVICEABLE	58.20	-
1	BRACKET, FR TURN UPPER	SERVICEABLE	24.40	-
1	BRACKET, FR TURN LOWER	SERVICEABLE	26.00	-
1	BUMPER LIP FRT	SERVICEABLE	139.60	-
1	BUMPER FRT ABSORBER	SERVICEABLE	127.70	-
1	WIPER WASHER JAR	SERVICEABLE	180.10	-
1	FENDER APRON SUB FRT / RH	SERVICEABLE	637.80	-
1	WHEEL DISC, FRONT	SERVICEABLE	1,484.20	-
1	HOOD PANEL	TO REPAIR SEE LABOUR	748.10	-
1	SUPPORT SUB-ASSY	TO REPAIR SEE LABOUR	1,460.40	-
1	FENDER FRT / RH	TO REPAIR SEE LABOUR	723.40	-
1	FENDER LINER PAD, FR	TO REPAIR SEE LABOUR	49.30	-
			9,180.70	2,005.67

Report Ref No. NS/INC18021514/R1vd3e2



# 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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>LABOUR</b>			
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF HOOD PANEL, SUPPORT SUB-ASSY, FENDER FRT / RH AND FENDER LINER PAD, FR. SPRAY PAINT.		676.00	400.00
	TO DO WHEEL ALIGNMENT / TYRE BALANCING.		1,854.00	700.00
	TO CHECK WIRING AND SYSTEM FUNCTION.		120.00	60.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.		80.00	30.00
	TO WASH AND VACUUM.	NOT NECESSARY	100.00	40.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	60.00	-
	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER.		100.00	-
			148.44	148.44
			3,138.44	1,378.44
	<b>GRAND TOTAL</b>		<b>12,319.14</b>	<b>3,384.11</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>			<b>2,700.00</b>

Report Ref No. NS/INC18021514/R1vd3e2

MOHAMMED RASUL BIN MOHD YUNUS

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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