

NS/INC18021538/1190302

Gunnery

Taym

REF:

INC

## ASSIGNMENT

From: Date: 27/11/2018

Estimated Cost:

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

To Inspect Vehicle No: SHB 502M

at Workshop m/s

of

SMRT  
WOODLONDS

Insured: FBJ 4737E

Policy No. 5072152281-03 (14/6/18-13/6/19)

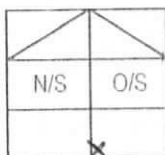
Claims No.

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: 2 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (up)

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SHB502M Yr Regn: 2014 / Sep

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

Truck / Trailer or

Make: Toyota Prius C.C. 1798

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

Sp. Reading: 382212 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: STDICN314305748329

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F:

145/65 R15

R:

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

TOYO / YOKO or

Fallen

Front

Rear

R/Bal. 6 mm

R/Bal. 6 mm

L/Bal. 6 mm

L/Bal. 6 mm

D.O.A.

D.O.I. 27/11/18

Survey held at

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

SHB 502M - NS/INC13022184/R1C6K3

FBJ 4737E - X

01/12/18 @ 2.22pm confirmed with Poh Suan LS to 1050, 2 days.  
CRD @ 2087.30, 67%

TAX 11/18/2115

DUA 22/11/13

FBJ 4737E

RECEIVED 13 DEC 2018

Date/Time, File Pass to?



: Preli. Report

11/12/18 by [signature]



: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Invs (\$)☐ Weekend (\$)

Survey Fee:

Transportation:

) \$ + RS, \$ SI

) Photos

) Others

TOTAL

Report Format: TP

Lump Sum / I.B.A. (\$) 1050

160

160

TP Claims against NTUC Income: Follow-Through Survey

Date : 12/12/2018

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Time of Accident	Estimate
1	MT/1021411-002	SMRT TAXI PTE LTD	SHB 502M	FBJ 4737E	25/11/2018	16:50	\$ 3,137.30
2	MT/1022979-002	CITYCAB PTE LTD	SHB 2316X	SDH 9999U	07/12/2018	12:00	\$ 830.00

My Desktop

Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="25/11/2018 14:26"/>
Vehicle No.(For Motor)	<input type="text" value="FBJ4737E"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5072152281-03		NAJIMUDEEN MOHAMED RISWAN	S8365189Z	GMC	Third Party, Fire & Theft	FBJ4737E	FBJ4737E	14/06/2018	13/06/2019

Continue

## **Shiau Chan (LKKAUTO)**

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**From:** Shiau Chan (LKKAUTO)  
**Sent:** Friday, 7 December 2018 2:22 PM  
**To:** 'Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))'; Taufikh (LKKAUTO)  
**Cc:** SUR; CS A Team  
**Subject:** RE: SHB502M

Dear Poh Suan,

WITHOUT PREJUDICE

Confirm Lump Sum \$1,050.00 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 | 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, 6 December 2018 6:26 PM  
To: Taufikh (LKKAUTO) <Taufikh@lkkauto.com>  
Cc: SUR <sur@lkkauto.com>; CS A Team <cs-a@lkkauto.com>  
Subject: SHB502M

Hi Taufikh,

Attached herewith the repair estimate of SHB 502M having Case No: TAX/11/18/2115.

There is no change to the approved amount of \$1,050 @ 2 working days under lump sum repair.

Cost of Repair invoice will be generated as approved.

Please finalize with me within 7 working day, thanks.

Thanks & Regards

Poh Suan

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

From: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))  
Sent: Thursday, 6 December 2018 6:27 PM  
To: Yeo Poh Suan (Auto Svcs/Ext Biz Svcs/AR & SC/ARC (Tx&Ex)/ARC (Tx&Ex))  
Subject: Scan Data from FX-D421D6

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHB502M
Vehicle to be Exported:	No
Intended Deregistration Date:	12 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR6122368
Chassis No.:	JTDKN36U305748329
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	12 Sep 2014
First Registration Date:	12 Sep 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Sep 2022
PARF Rebate Amount:	\$6,066.00
Intended COE Rebate Details	
COE Expiry Date:	11 Sep 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,704.00
COE Rebate Amount:	\$23,756.00
<b>Total Rebate Amount:</b>	<b>\$29,822.00</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 12 Dec 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	26/11/2018 09:38
Date Of Accident	25/11/2018 16:50
Exact Location Of Accident	KALLANG
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB502M
<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	LEE KWAN SENG
NRIC No	S1464203Z
Date Of Birth	07/12/1961
Occupation	OUTDOOR
Date Of Driving Pass	15/09/1979
Driving Experience	39 YEARS AND 2 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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
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)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

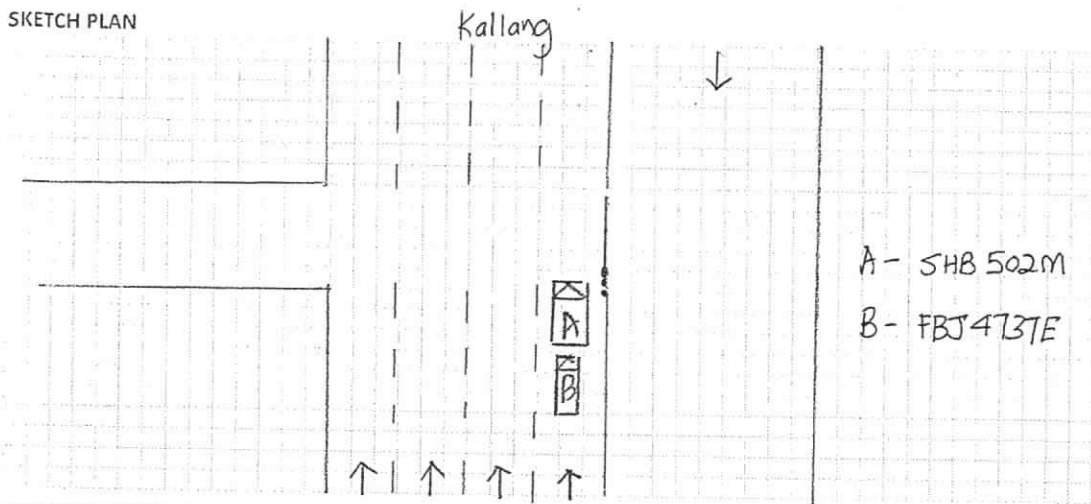
#### Circumstances of Accident

I WAS TRAVELLING ALONG KALLANG AND I WAS APPROACHING THE TRAFFIC JUNCTION. THE TRAFFIC LIGHT TURNED AMBER AND I STOPPED. AFTER WHICH I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE FBJ4737E HAD COLLIDED ONTO THE REAR OF MY TAXI.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO BIG
Was there any audio recorded?	NO

### SKETCH PLAN



A- 5HB 502M

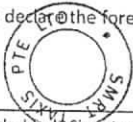
B- FBJ4737E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

## DECLARATION

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



Policyholder's Signature

Date &amp; Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26/11/19 . 08 25 am

Reporting Centre Personnel's Signature

Name: \_\_\_\_\_

NRIC/FIN No.:



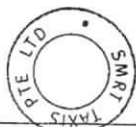
SKETCH PLAN

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:

*[Signature]*

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 26/11/18 0825am

*[Signature]* 26/11/2018

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



## Case Details

**Case Reference Number :**

TAX/11/18/2115

**Company Type :** SMRT Taxis Pte Ltd**Insurance Company Name :** NTUC Income Insurance Co-operative Ltd**Type of Repair :** Accident Repair**Estimation ID :** EST-4707-ID**Accident Date and Time :** 25/11/2018 08:50 AM**Vehicle Registration Number :** SHB502M**Assigned By :** Taxi Claims Manager Team**Vehicle Age(In Months) :** 50

## 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 REAR	1	458.60	458.60	25.00	343.95	Replace	1	343.95 <i>de</i>	Replace ▾
One Time Key In	Main			BUMPER SIDE RETAINER RR/LH	1	94.80	94.80	25.00	71.10	Replace	0	0 <i>nn x</i>	Check ▾
One Time Key In	Main			BUMPER SIDE RETAINER RR/RH	1	94.80	94.80	25.00	71.10	Replace	0	0 <i>nn x</i>	Check ▾
One Time Key In	Main			BUMPER REINFORCEMENT REAR	1	205.70	205.70	25.00	154.27	Replace	0	0 <i>nn x</i>	Check ▾
One Time Key In	Main			ARM SUB-ASSY, RR BUMPER LH	1	139.60	139.60	25.00	104.70	Replace	0	0 <i>nn x</i>	Check ▾
One Time Key In	Main			ARM SUB-ASSY, RR BUMPER RH	1	139.60	139.60	25.00	104.70	Replace	0	0 <i>nn x</i>	Check ▾
One Time Key In	Main			BUMPER LIP REAR	1	228.90	228.90	25.00	171.68	Replace	1	171.68 <i>de</i>	Replace ▾
One Time Key In	Main			BUMPER LIP COVER RR/LH	1	72.20	72.20	25.00	54.15	Replace	0	0 <i>nn x</i>	Not Give ▾
Total Spare Part Cost											Surveyor Total	815.63	
Lump Sum Discount (%)											Lump Sum Dis (%)	20	
Final Spare Part Cost											Final Sur Total	652.50	

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			BUMPER LIP COVER RR/RH	1	118.10	118.10	25.00	88.57	Replace	0	0 <i>NY X</i>	Not Give ▾
One Time Key In	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	1	180.00 <i>NY</i>	Replace ▾
One Time Key In	Main			PIXEL STICKER	2	60.00	120.00	0.00	120.00	Replace	2	120.00 <i>all</i>	Replace ▾
Total Spare Part Cost									1,464.22		Surveyor Total	815.63	
Lump Sum Discount (%)									20.00		Lump Sum Dis (%)	20	
Final Spare Part Cost									1,171.38		Final Sur Total	652.50	

Labour's Cost Detail

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO REPAIR REAR PORTION	507.00	200 <i>/</i>	
Total:		507.00	200.00	

Spray Cost Detail


S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO REPSRAY REAR BUMPER	378.00	200 <i>/</i>	
Total:		378.00	200.00	

Other Cost Detail

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20 <i>/</i>	
2	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0	
3	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	30 <i>/</i>	
4	TO WASH AND VACUUM	60.00	0	
Total:		460.00	70.00	

S.No.	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
5	TO REPLACE SUNDRY PARTS	100.00	20	
Total:		460.00	70.00	

## Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	1,171.38	652.50
Total Labour Cost	507.00	200.00
Total Spray Painting	378.00	200.00
Other	460.00	70.00
Overall Total	2,516.38	1,122.50
Lump Sum Repair Option	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	2,500.00	1,100.00
Surveyor Approved Amount		1,100.00
No of Repair Days*	3	2
Remarks	-	Resurvey after repair
Surveyor Name		Taufikh
Signature		 29/11/18
Survey Date	27/11/2018	

Save

Clear

**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

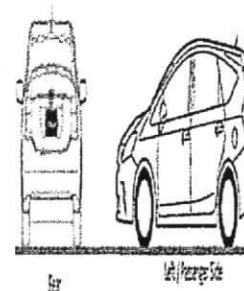
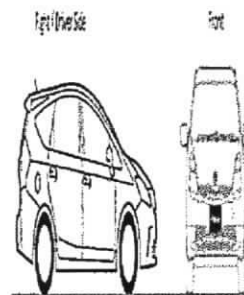
**Acknowledged by Repairer**

Signature:



Date:

## Section A - Accident Details

Registration Number	SHB502M
Case Reference Number	TAX/11/18/2115
Registration Date	12/09/14
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS
Name of Driver	LEE KWAN SENG
Type of Accident	Head to Rear
Accident Date and Time	25/11/18 4:50 PM
Accident Reported Date and Time	26/11/18 8:25 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24098924
Special Instruction to ARC, if any	NTUC - LKK
Prepared Date and Time	27/11/18 11:06 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	\$507.00	\$200.00
Total Spray Cost	\$378.00	\$200.00
Total Spare Part Cost	\$1,464.22	\$815.63
Total Other Cost	\$460.00	(\$165.63)
<b>TOTAL COST</b>	<b>\$2,809.22</b>	<b>\$1,050.00 (L/S)</b>
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Zhi Yang Phua	Taufik (LKK) / NTUC
ARC / Surveyor Sign Off Date	28/11/2018 10:25 AM	27/11/2018 5:44 PM
Signature		
Remarks		Resurvey after repair

## Section C - Quotation and Accident Invoice Details

Quotation Number	QN-1812-0057	Invoice Number	
Quotation Date	05.12.2018	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	\$507.00	\$200.00
<b>Total Labour</b>	<b>\$507.00</b>	<b>\$200.00</b>

## Part 2 - Spray Painting &amp; Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY REAR BUMPER	\$378.00	\$200.00
<b>Total Spray Painting &amp; Panel Beating</b>	<b>\$378.00</b>	<b>\$200.00</b>

## 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	\$20.00
TO APPLY RUST-PROOFING ON AFFECTED AREA	\$100.00	\$0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	\$120.00	\$30.00
TO WASH AND VACUUM	\$60.00	\$0.00
TO REPLACE SUNDRY PARTS	\$100.00	\$20.00
Lump Sum Adjustment by Surveyor	\$0.00	(\$235.63)
<b>Total Other Costs</b>	<b>\$460.00</b>	<b>(\$165.63)</b>

## Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		52159-47905	BUMPER REAR	1.00	\$458.60	25.00	\$343.95	Replace	Replace
		52576-47020	BUMPER SIDE RETAINER RR/LH	0.00	\$94.80	0.00	\$0.00	Replace	Check X
		52576-47020	BUMPER SIDE RETAINER RR/RH	0.00	\$94.80	0.00	\$0.00	Replace	Check X
		52023-12240	BUMPER REINFORCEMENT REAR	0.00	\$205.70	0.00	\$0.00	Replace	Check X
		52016-47030	ARM SUB-ASSY, RR BUMPER LH	0.00	\$139.60	0.00	\$0.00	Replace	Check X
		52015-47050	ARM SUB-ASSY, RR BUMPER RH	0.00	\$139.60	0.00	\$0.00	Replace	Check X
		76891-47020	BUMPER LIP REAR	1.00	\$228.90	25.00	\$171.68	Replace	Replace
		76088-47020	BUMPER LIP COVER RR/LH	0.00	\$72.20	0.00	\$0.00	Replace	Not Given X
		76087-47020	BUMPER LIP COVER RR/RH	0.00	\$118.10	0.00	\$0.00	Replace	Not Given X
			SENSOR REVERSE	1.00	\$180.00	0.00	\$180.00	Replace	Replace
			PIXEL STICKER	2.00	\$60.00	0.00	\$120.00	Replace	Replace
<b>Total</b>					<b>\$1,792.30</b>		<b>\$815.63</b>		

815.63  
 + 200.00  
 + 270.00  
 -----  
 1285.63  
 - 20%  
 -----  
 1028.50  
 48 \$1050/-



## 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/INC18021538/T1qd3e2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 19-12-2018	
Code: INC4			
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	FBJ 4737E	Veh. Inspected	SHB 502M
Policy No.	5072152281-03	Coverage (\$)	0.00
Claim No.	MT/1021411-002	Excess (\$)	0.00
Assign From		Assign Date	27/11/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	JTDKN36U305748329	Colour	MAROON
Odometer	382212	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	6 mm
L/H Front Tyre	195/65 R15	FALKEN	6 mm
R/H Rear Tyre	195/65 R15	FALKEN	6 mm
L/H Rear Tyre	195/65 R15	FALKEN	6 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	25/11/2018	Inspection Date	27/11/2018
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	

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**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 502M**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	BUMPER REAR (DISC 25%)	DEFORMED	458.60	343.95
1	BUMPER LIP REAR (DISC 25%)	DEFORMED	228.90	171.68
1	SENSOR REVERSE (SN)	NOT WORKING	180.00	180.00
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	BUMPER SIDE RETAINER RR/LH	NOT NECESSARY	94.80	-
1	BUMPER SIDE RETAINER RR/RH	NOT NECESSARY	94.80	-
1	BUMPER REINFORCEMENT REAR	NOT NECESSARY	205.70	-
1	ARM SUB-ASSY, RR BUMPER LH	NOT NECESSARY	139.60	-
1	ARM SUB-ASSY, RR BUMPER RH	NOT NECESSARY	139.60	-
1	BUMPER LIP COVER RR/LH	NOT NECESSARY	72.20	-
1	BUMPER LIP COVER RR/RH	NOT NECESSARY	118.10	-
			1,852.30	815.63
	<b><u>LABOUR</u></b>			
	PANEL BEATING & BODY WORK.		507.00	200.00
	SPRAY PAINT.		378.00	200.00
	TO CHECK WIRING AND SYSTEM FUNCTION.		80.00	20.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.	NOT NECESSARY	100.00	-
	TO TEST AND REFIX REVERSE SENSOR SYSTEM.		120.00	30.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
	TO REPLACE SUNDRY PARTS.		100.00	20.00
			1,345.00	470.00
<b>GRAND TOTAL</b>			<b>3,197.30</b>	<b>1,285.63</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>				<b>1,050.00</b>

Report Ref No. NS/INC18021538/T1qd3e2

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

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