

NAME: Hwee Jie

REF: NTUC NS/INC19004719/85d3ST

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s _____

of _____

Insured: _____

Policy No: _____

Claims No: MT/1035664-002

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHB63M Yr Regn: 4 Sep 2014

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

Truck / Trailer or

Make: Toyota Prius c.c. 1798

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

Sp. Reading: 784251 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKN36U705748088

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or Chilles

Front

Rear

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

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

D.O.A. 13/3/19 D.O.I. 14/3/19

Survey held at Sumit

Des. of Damages Fr / Rear / O/S / N/S / U/C / Roflop or

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

Date / Time Action / Instruction

SHB63M-CC3/FAI16021304/Klyn242 DUA: 7/11/16 03/19/2017
SKW1461U-X

15/8/19 Finalize Confim 82650, 4 days
(\$ 8,450.66 Red - 76%)

SKW1461U

RECEIVED 19 AUG 2019

Date/Time File Pass to?

19/08/19

1) Type

Date/Time File Return to?

☐ : Preli. Report
☒ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

) S + PS. SI

) Photos

) Others

TOTAL

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

Report Format :

Lump Sum / I.B.I: (\$ 2,650/- 45)

TP Claims against NTUC Income: Follow-Through Survey

Date : 16/08/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident	Estimate	Tentative repair cost
1	MT/1035664-002	SMRT TAXIS PTE LTD	SHB 63M	SKW 1461U	13/03/2019	\$ 11,100.66	\$ 2,650.00
2	MT/1054579-002	SMRT TAXIS PTE LTD	SHC 4233H	SJP 3607C	22/07/2019	\$ 8,968.18	\$ 3,000.00
3	MT/1057600-002	COMFORT TRANSPORTATION PTE LTD	SHC 3085A	GBH 1832T	08/08/2019	\$ 8,727.84	\$ 4,450.00
4	MT/1056745-002	CITYCAB PTE LTD	SHB 3063T	PC 6827L	04/08/2019	\$ 1,863.68	\$ 1,157.68

Claim received from LKK Auto

Shirley Hiew (LKK Auto)

From: Yeo Poh Suan (Auto Svcs/ARC/AR & SC/Taxis) <YeoPohsuan@smrt.com.sg>
Sent: Friday, 16 August 2019 8:55 AM
To: Steve Chen (LKK Auto)
Cc: Shirley Hiew (LKK Auto)
Subject: RE: SHB63M Finalize

Hi,

Amount confirmed as per your recommendation, thanks.

Regards
Poh Suan

From: Steve Chen (LKK Auto) [mailto:SteveChen@lkkauto.com]
Sent: Thursday, 15 August 2019 7:20 PM
To: Yeo Poh Suan (Auto Svcs/ARC/AR & SC/Taxis)
Cc: Shirley Hiew (LKK Auto)
Subject: SHB63M Finalize

Dear Poh Suan,

We confirm the finalize \$2650 (L/S, before GST). 4 repair days.

Thanks

Best Regards,
Steve Chen | Assistant Automotive Assessor
LKK Auto Consultants
Phone: 6256 3561 | Email: SteveChen@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Veron Chen (LKKAUTO)

From: Yeo Poh Suan (Auto Svcs/ARC/AR & SC/Taxis) <YeoPohsuan@smrt.com.sg>
Sent: Tuesday, 6 August 2019 4:21 PM
To: SUR; CS A Team
Subject: SHB63M
Attachments: img-806161538-0001.pdf; IMG_0500.jpg; IMG_0494.jpg; IMG_0495.jpg; IMG_0496.jpg; IMG_0497.jpg; IMG_0498.jpg; IMG_0499.jpg

Hi All,

Attached herewith the repair estimate of SHB 63M having Case No: TAX/03/19/2057.

There is no change to the approved amount of \$2,650 @ 4 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/ARC/AR & SC/Taxis)
Sent: Tuesday, 6 August 2019 4:16 PM
To: Yeo Poh Suan (Auto Svcs/ARC/AR & SC/Taxis)
Subject: Scan Data from FX-D421D6

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy 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	13/03/2019 13:16
Date Of Accident	13/03/2019 08:35
Exact Location Of Accident	BLK 8 ANGKLONG LANE FABER GARDEN CONDO CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB63M
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	CHIA TUCK LEONG
NRIC No	S1210058B
Date Of Birth	01/12/1956
Occupation	OUTDOOR
Date Of Driving Pass	07/06/1977
Driving Experience	41 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	429
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 - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
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 STATIONARY ALONG THE CAR PARK DRIVE WAY WAITING FOR MY PASSENGER WHEN THE VEHICLE SKW1461U REVERSED OUT OF THE PARKING LOT AND COLLIDED ONTO THE LEFT FRONT PORTION OF MY TAXI.

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKW1461U
Vehicle Make/Model/Colour	MAZDA 3 WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	EVELY TANG
NRIC/Passport Number	
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.:



Case Details

Case Reference Number :

TAX/03/19/2057

Company Type : SMRT Taxis Pte Ltd

Insurance Company Name : NTUC Income Insurance Co-operative Ltd

Type of Repair : Accident Repair

Estimation ID : EST-6088-ID

Accident Date and Time : 13/03/2019 12:35 AM

Vehicle Registration Number : SHB63M

Assigned By : Taxi Claims Manager Team

Vehicle Age(In Months) : 54

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	Remarks
One Time Key In	Main			BUMPER FRT	1	482.00	482.00	25.00	361.50	Replace	1	361.50	Replace	✓ 011
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	10	12.08	Replace	✓ 111
One Time Key In	Main			BUMPER ENERGY ABSORBER FRT	1	78.80	78.80	25.00	59.10	Replace	0	0	Check	✓ 111
One Time Key In	Main			BUMPER REINFORCEMENT FRT	1	498.40	498.40	25.00	373.80	Replace	0	0	Check	✓ 111
One Time Key In	Main			ARM SUB-ASSY, FR BUMPER LH	1	250.40	250.40	25.00	187.80	Replace	0	0	Check	✓ 111
One Time Key In	Main			BUMPER SUPPORT F/LH	1	76.40	76.40	25.00	57.30	Replace	0	0	Check	✓ 111
One Time Key In	Main			BRACKET, FR TURN CENTER LH	1	58.20	58.20	25.00	43.65	Replace	0	0	Check	✓ 111
One Time Key In	Main			BRACKET, FR TURN LOWER LH	1	26.00	26.00	25.00	19.50	Replace	0	0	Check	✓ 111
One Time Key In	Main			BRACKET, FR TURN UPPER LH	1	24.40	24.40	25.00	18.30	Replace	0	0	Check	✓ 111

Total Spare Part Cost 6,760.36

Surveyor Total 1,250.17

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 5,408.29

Final Sur Total 1,000.14

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	Remarks
One Time Key In	Main			LENS & BODY, FR TURN LH	1	511.80	511.80	10.00	460.62	Replace	0	0	Check	X NAI
One Time Key In	Main			BUMPER FRT ABSORBER LOWER	1	127.70	127.70	25.00	95.78	Replace	0	0	Not Give	X NAI
One Time Key In	Main			WIRE, ENGINE ROOM, NO.3	1	242.00	242.00	10.00	217.80	Replace	0	0	Not Give	X NAI
One Time Key In	Main			SUPPORT SUB-ASSY	1	1,460.40	1,460.40	25.00	1,095.30	Replace	0	0	Not Give	X NAI
One Time Key In	Main			HEAD LAMP LH	1	945.20	945.20	25.00	708.90	Replace	1	708.90	Replace	/ CUT
One Time Key In	Main			FENDER FRT/LH	1	723.40	723.40	25.00	542.55	Replace	1	0	Repair	X R
One Time Key In	Main			NAME PLATE (HYBRID)	1	51.90	51.90	25.00	38.92	Replace	1	38.92	Replace	/ ACC
One Time Key In	Main			FENDER LINER FRT/LH	1	171.70	171.70	25.00	128.77	Replace	1	128.77	Replace	/ TAI
One Time Key In	Main			FENDER LINER PAD, FR WHEEL, LH	1	49.30	49.30	25.00	36.97	Replace	0	0	Check	X NAI
One Time Key In	Main			WHEEL DISC. FRONT	1	1,484.20	1,484.20	25.00	1,113.15	Replace	0	0	Not Give	X NAI
One Time Key In	Main			CAP SUB-ASSY, WHEEL	1	174.10	174.10	25.00	130.57	Replace	0	0	Not Give	X NAI
One Time Key In	Main			MIRROR ASSY, LH	1	1,224.90	1,224.90	25.00	918.68	Replace	0	0	Not Give	X NAI
One Time Key In	Main			MIRROR LAMP LH	1	65.30	65.30	10.00	58.77	Replace	0	0	Not Give	X NAI
One Time Key In	Main			COVER, OUTER MIRROR, LH	1	107.40	107.40	25.00	80.55	Replace	0	0	Not Give	X NAI
Total Spare Part Cost									6,760.36	Surveyor Total 1,250.17				
Lump Sum Discount (%)									20.00	Lump Sum Dis (%) 20				
Final Spare Part Cost									5,408.29	Final Sur Total 1,000.14				

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT LH PORTION	845.00	400 /	
Total:			845.00	400.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPSRAY FRONT BUMPER	378.00	200 /	
2	Main	TO RESPRAY FRONT SUPPORT PANEL	180.00	0	
3	Main	TO RESPRAY FRONT FENDER LH	378.00	200 /	
4	Main	TO RESPRAY VIEW MIRROR	180.00	0	
5	Main	RESPRAY WHEEL CAP	180.00	0	
6	Main	TO RESPRAY RIM	180.00	0	
Total:			1,476.00	400.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20 APC	
2	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0	
3	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	0	
4	Main	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	0	
5	Main	TO REMOVE AND REFIT WIRE HARDESS	200.00	20 APC	
6	Main	TO REPLACE SUNDRY PARTS	100.00	0	
7	Main	TO WASH AND VACUUM	60.00	0	
Total:			780.00	40.00	

Summary

11951

13603.40

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	5,408.29	1,000.14

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Labour Cost	845.00	400.00
Total Spray Painting	1,476.00	400.00
Other	780.00	40.00
Overall Total	8,509.29	1,840.14
Lump Sum Repair Option	☒	☒
Lump Sum Total	8,500.00	1,850.00
Surveyor Approved Amount		1,850.00
No of Repair Days*	6	4
Remarks		L/S REPAIR , PHOTO AFTER PAINT
Surveyor Name		Hwee Jie
Signature		
Survey Date	14/03/2019	

REQUEST FOR SUPPLEMENT PARTS

Contractor:			
Accident Case Number	TAX 03/19/2057	Date of Collection	1/1
Vehicle No	SHB 63 M	Date of Request	15/03/2019
Vehicle Model	TOYOTA PRIUS	Number of Days to Stand (if any)	1 X

S/N	Part Number	Part Description	Quantity	Unit Price
		MIRROR ASSY, LH	1pc	/ short
		FENDER LINER PAD, FRONT LH	1pc	/ CRA
		Bumper Support, FRONT LH	1pc	/ CRA
		FRONT Bumper Under Cover	1pc	/ CUT
		CAP, SUB ASSY WHEEL	1pc	/ DEF

\$918.68
 \$36.98
 \$57.30
 \$95.78
 \$130.58

<<Please submit photographs for damaged parts>>

18/3/19

I, (Name) _____

(Position) _____

do solemnly and sincerely declare that:- Supplementary Parts are raised for replacement for the aforesaid vehicle.

Signature of person making this declaration
 (also signed in front of an authorized witness)

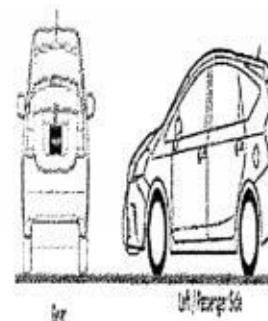
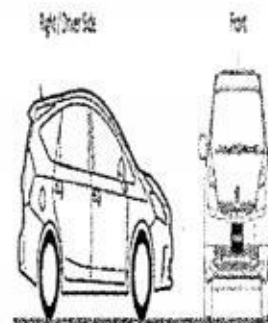
I declare that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the damages of perjury.

For SMRT Staff

Acknowledge By	ARCE Executive / Supervisor / SA	
Approval By	Surveyor / In-house Staff	
Parts Ordering	SMRT Store / Contractor Supply / Form 22 / WOC	Form 22 / PO / WOC / Reservation / Number
Photo Submitted	YES / NO	Date of submission

Section A - Accident Details

Registration Number	SHB63M
Case Reference Number	TAX/03/19/2057
Registration Date	4/9/2014
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS
Name of Driver	CHIA TUCK LEONG
Type of Accident	Others
Accident Date and Time	13/3/2019 8:35 AM
Accident Reported Date and Time	13/3/2019 1:16 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	24100575
Special Instruction to ARC, if any	TP
Prepared Date and Time	14/3/2019 8:31 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	\$845.00	\$400.00
Total Spray Cost	\$1,476.00	\$400.00
Total Spare Part Cost	\$7,999.66	\$2,489.51
Total Other Cost	\$780.00	(\$639.51)
TOTAL COST	\$11,100.66	\$2,650.00 (L/S)
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	6.0	4.0
Prepared / Adjusted By	Tuck Foo Kok	Hwee Jie (LKK) / NTUC
ARC / Surveyor Sign Off Date	14/03/2019 3:45 PM	14/03/2019 3:06 PM
Signature		
Remarks		L/S REPAIR, PHOTO AFTER PAINT

Section C - Quotation and Accident Invoice Details

Quotation Number	QN-1908-0053	Invoice Number	
Quotation Date	06.08.2019	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 FRONT LH PORTION	\$845.00	\$400.00
Total Labour	\$845.00	\$400.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO REPSRAY FRONT BUMPER	\$378.00	\$200.00
TO RESPRAY FRONT SUPPORT PANEL	\$180.00	\$0.00
TO RESPRAY FRONT FENDER LH	\$378.00	\$200.00
TO RESPRAY VIEW MIRROR	\$180.00	\$0.00
RESPRAY WHEEL CAP	\$180.00	\$0.00
TO RESPRAY RIM	\$180.00	\$0.00
Total Spray Painting & Panel Beating	\$1,476.00	\$400.00

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	\$20.00
TO APPLY RUST-PROOFING ON AFFECTED AREA	\$100.00	\$0.00
TO DO WHEEL ALIGNMENT / TYRE BALANCING	\$120.00	\$0.00
TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	\$120.00	\$0.00
TO REMOVE AND REFIT WIRE HARDESS	\$200.00	\$20.00
TO REPLACE SUNDRY PARTS	\$100.00	\$0.00
TO WASH AND VACUUM	\$60.00	\$0.00
Lump Sum Adjustment by Surveyor	\$0.00	(\$679.51)
Total Other Costs	\$780.00	(\$639.51)

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		52119-47930	BUMPER FRT	1.00	\$482.00	25.00	\$361.50	Replace	Replace
		52161-16010	BUMPER CLIPS	10.00	\$1.61	25.00	\$12.08	Replace	Replace
		52611-47080	BUMPER ENERGY ABSORBER FRT	0.00	\$78.80	0.00	\$0.00	Replace	Check X
		52021-47023	BUMPER REINFORCEMENT FRT	0.00	\$498.40	0.00	\$0.00	Replace	Check X
		57014-47030	ARM SUB-ASSY, FR BUMPER LH	0.00	\$250.40	0.00	\$0.00	Replace	Check X
		52116-47040	BUMPER SUPPORT F/LH	0.00	\$76.40	0.00	\$0.00	Replace	Check X
		81529-47060	BRACKET, FR TURN CENTER LH	0.00	\$58.20	0.00	\$0.00	Replace	Check X
		81529-47050	BRACKET, FR TURN LOWER LH	0.00	\$26.00	0.00	\$0.00	Replace	Check X

SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
80 Woodlands Industrial Park E4, Singapore 757765
FAX Number: 63685692
Estimator Telephone Number: 68992023
Accident Reporting Number: 48992872

Date Generated: 06/08/2019

User ID: PehSuan

81529-47040	BRACKET, FR TURN UPPER LH	0.00	\$24.40	0.00	\$0.00	Replace	Check	✓
81521-47050	LENS & BODY, FR TURN LH	0.00	\$511.80	0.00	\$0.00	Replace	Check	✓
52618-47050	BUMPER FRT ABSORBER LOWER	0.00	\$127.70	0.00	\$0.00	Replace	Not Given	✓
82113-47180	WIRE, ENGINE ROOM, NO 3	0.00	\$242.00	0.00	\$0.00	Replace	Not Given	✓
53201-47902	SUPPORT SUB-ASSY	0.00	\$1,460.40	0.00	\$0.00	Replace	Not Given	✓
81170-47500	HEAD LAMP LH	1.00	\$945.20	25.00	\$708.90	Replace	Replace	✓
53802-47050	FENDER FRT/LH	1.00	\$723.40	100.00	\$0.00	Replace	Repair	✓
75374-47051	NAME PLATE (HYBRID)	1.00	\$51.90	25.00	\$38.93	Replace	Replace	✓
53876-47030	FENDER LINER FRT/LH	1.00	\$171.70	25.00	\$128.78	Replace	Replace	✓
53852-47020	FENDER LINER PAD, FR WHEEL, LH	0.00	\$49.30	0.00	\$0.00	Replace	Check	✓
42611-47140 (Frt)	WHEEL DISC, FRONT	0.00	\$1,484.20	0.00	\$0.00	Replace	Not Given	✓
	CAP SUB-ASSY, WHEEL	0.00	\$174.10	0.00	\$0.00	Replace	Not Given	✓
87940-47310	MIRROR ASSY, LH	0.00	\$1,224.90	0.00	\$0.00	Replace	Not Given	✓
81740-52040	MIRROR LAMP LH	0.00	\$65.30	0.00	\$0.00	Replace	Not Given	✓
87945-74010	COVER, OUTER MIRROR, LH	0.00	\$107.40	0.00	\$0.00	Replace	Not Given	✓
Total			\$8,835.51		\$1,250.19			

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
		87940-47310	MIRROR ASSY, LH	1.00	\$1,224.90	25.00	\$918.68	Replace	Replace
		53852-47020	FENDER LINER PAD, FR WHEEL, LH	1.00	\$49.30	25.00	\$36.98	Replace	Replace
		52116-47040	BUMPER SUPPORT FLH	1.00	\$76.40	25.00	\$57.30	Replace	Replace
			CAP SUB-ASSY, WHEEL	1.00	\$174.10	25.00	\$130.58	Replace	Replace
		52618-47050	BUMPER FRT ABSORBER LOWER	1.00	\$127.70	25.00	\$95.78	Replace	Replace
Total					1,652.40		1,239.32		

A Shorted
A Ga
A Cra
A Def
A Cut

$$\begin{array}{r}
 2489.51 \\
 + 400.00 \\
 + 440.00 \\
 \hline
 3329.51 \\
 - 209 \\
 \hline
 2663.61
 \end{array}$$

45 \$2650/-



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/INC19004719/Esd3s2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 22-08-2019
189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKW 1461U	Veh. Inspected	SHB 63M
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1035664-002	Excess (\$)	0.00
Assign From		Assign Date	14/03/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	JTDKN36U705748088	Colour	MAROON
Odometer	784251	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	CHILLES	6 mm
L/H Front Tyre	195/65 R15	CHILLES	6 mm
R/H Rear Tyre	195/65 R15	CHILLES	6 mm
L/H Rear Tyre	195/65 R15	CHILLES	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	13/03/2019	Inspection Date	14/03/2019
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:	4 Working Days
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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 63M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BUMPER FRT (DISC 25%)	DENTED	482.00	361.50
10	BUMPER CIPS @ \$1.61 (DISC 25%)	NECESSARY	16.10	12.08
1	HEAD LAMP LH (DISC 25%)	CUT	945.20	708.90
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	51.90	38.93
1	FENDER LINER FRT/LH (DISC 25%)	TORN	171.70	128.78
1	BUMPER ENERGY ABSORBER FRT	NOT NECESSARY	78.80	-
1	BUMPER REINFORCEMENT FRT	NOT NECESSARY	498.40	-
1	ARM SUB-ASSY, FR BUMPER LH	NOT NECESSARY	250.40	-
1	BUMPER SUPPORT F/LH	NOT NECESSARY	76.40	-
1	BRACKET, FR TURN CENTER LH	NOT NECESSARY	58.20	-
1	BRACKET, FR TURN LOWER LH	NOT NECESSARY	26.00	-
1	BRACKET, FR TURN UPPER LH	NOT NECESSARY	24.40	-
1	LENS & BODY, FR TURN LH	NOT NECESSARY	511.80	-
1	BUMPER FRT ABSORBER LOWER	NOT NECESSARY	127.70	-
1	WIRE, ENGINE ROOM, NO.3	NOT NECESSARY	242.00	-
1	SUPPORT SUB-ASSY	NOT NECESSARY	1,460.40	-
1	FENDER LINER PAD, FR WHEEL. LH	NOT NECESSARY	49.30	-
1	WHEEL DISC. FRONT	NOT NECESSARY	1,484.20	-
1	CAP SUB-ASSY, WHEEL	NOT NECESSARY	174.10	-
1	MIRROR ASSY, LH	NOT NECESSARY	1,224.90	-
1	MIRROR LAMP LH	NOT NECESSARY	65.30	-
1	COVER, OUTER MIRROR, LH	NOT NECESSARY	107.40	-
1	FENDER FRT/LH	TO REPAIR SEE LABOUR	723.40	-
1	MIRROR ASSY, LH (DISC 25%)	SHORTED	1,224.90	918.68
1	FENDER LINER PAD, FR WHEEL, LH (DISC 25%)	CRACKED	49.30	36.98
1	BUMPER SUPPORT F/LH (DISC 25%)	CRACKED	76.40	57.30
1	CAP SUB-ASSY, WHEEL (DISC 25%)	DEFORMED	174.10	130.58
1	BUMPER FRT ABSORBER LOWER (DISC 25%)	CUT	127.70	95.78
			10,502.40	2,489.51

Report Ref No. NS/INC19004719/Esd3s2



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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	PANEL BEATING & BODYWORK. INCLUSIVE OF THE REPAIR OF FENDER FRT/LH.		845.00	400.00
	SPRAY PAINT.		1,476.00	400.00
	TO CHECK WIRING AND SYSTEM FUNCTION.		80.00	20.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.	NOT NECESSARY	100.00	-
	TO DO WHEEL ALIGNMENT / TYRE BALANCING.	NOT NECESSARY	120.00	-
	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	NOT NECESSARY	120.00	-
	TO REMOVE AND REFIT WIRE HARDESS.		200.00	20.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			3,101.00	840.00
	GRAND TOTAL		13,603.40	3,329.51
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			2,650.00

Report Ref No. NS/INC19004719/Esd3s2

CHEN TSUE YEE

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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