

Hwee Jie

REF: NTUC NS/INC19008595/Jrd30r

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s _____

of _____

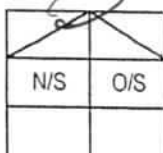
Insured: FBN2573CPolicy No. 5107344655 (31/01/2019-30/01/2020)Claims No. MT 1044319-002

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 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. SMB2385 Yr Regn: 27 Dec 2011Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Man A22 c.c. 10518Colour: Multi Colour A/C: Insured / Std / NI / NASp. Reading: 687604 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WMAA22Z-ZIC 7001247Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 275/70 R22.5

R: _____

BS / DUN / EXNOVA / GS / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

Rear

R/Bal. 7 mm R/Bal. 7/7 mmL/Bal. 7 mm L/Bal. 7/7 mmD.O.A. 11/5/19 D.O.I. 14/5/19Survey held at SuntDes. of Damages: FR / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
	SMB 2385 - NBA / INC190084461Y D.O.A - 11/05/2019
	FBN 2573C - NBA / INC190084461Y D.O.A - 11/05/2019
27/5/19	Confirmed L/S \$4950/- 2 days at repair. (Recd 2094.80, 30/5)
RECEIVED 28 MAY 2019	

Date/Time. File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time. File Return to?

Days Of Repair: 2Resurvey No. of Trip: 1

Survey Fee:

Transportation:

2) 28/5 - typist

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

Report Format :

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

TP
4950/-

) S + PS. SI

) Photos

) Others

TOTAL

160

160

Veron Chen (LKKAuto)

From: MTCL@income.com.sg
Sent: Monday, 27 May 2019 2:53 PM
To: Veron Chen (LKKAuto)
Subject: FW: REQUEST FOR CLAIM NUMBER

Dear Veron

We have registered the claim.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Time of Accident	Estimate
1	MT/1044035-002	SMRT TAXIS PTE LTD	SHB 1898P	SJA 4021P	11/5/2019	1:30	\$15,399.00
2	MT/1044319-002	SMRT BUSES LTD	SMB 238S	FBN 2573C	11/5/2019	10:15	\$7,044.80

Josephine Cheah
Snr Administrator, 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



From: Veron Chen (LKKAuto) [mailto:veronchen@lkkauto.com]
Sent: Monday, 27 May 2019 11:28 AM
To: MTCL@income.com.sg
Subject: REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Kindly provides us the claim number.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Time of Accident	Estimate
1		SMRT TAXIS PTE LTD	SHB 1898P	SJA 4021P	11/5/2019	1:30	\$15,399.00
2		SMRT BUSES LTD	SMB 238S	FBN 2573C	11/5/2019	10:15	\$7,044.80

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)

Disclaimer

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

eBaoTech

General Claim

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="11/05/2019 13:08"/>							
Vehicle No. (For Motor)	<input type="text" value="FBN2573C"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5107344655		ABDUL AZIZ BIN BIAT	S1286452C	GMC	Third Party	FBN2573C	FBN2573C	31/01/2019	30/01/2020
<input type="button" value="Continue"/>										

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

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	2292D
Vehicle Details	
Vehicle No.:	SMB2385
Vehicle to be Exported:	No
Intended Deregistration Date:	16 May 2019
Vehicle Make:	MAN
Vehicle Model:	NL320F (A22)
Primary Colour:	Multi-Colour
Manufacturing Year:	2011
Engine No.:	50329750702971
Chassis No.:	WMAA22ZZ1C7001247
Maximum Power Output:	-
Open Market Value:	\$264,713.00
Original Registration Date:	27 Dec 2011
First Registration Date:	27 Dec 2011
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 16 May 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT	
Date Of Report	13/05/2019 14:16
Date Of Accident	11/05/2019 10:15
Exact Location Of Accident	ALONG AYE SLIP ROAD BEFORE BS:20081 (CARRIER S'PO
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMB238S
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	198202292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	MAN
Model	NL320F (A22)-10.5 D (M)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	BUS
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-19093203MFBP
Cover Note Number	
Driver	
Name of Driver	LEE SAI MING
Passport No/FIN	F7690107N
Date Of Birth	26/12/1972
Occupation	OUTDOOR
Date Of Driving Pass	01/09/2016
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NO ADDRESS
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - 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?	YES
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

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON 11/05/2019 AT ABOUT 14:15HRS, I WAS TRAVELLING ALONG THE ROAD OF JURONG TOWN HALL. I WAS TRAVELLING ON THE STRAIGHT LANE AND OUT OF A SUDDEN, THERE IS A MOTORCYCLE WHO WAS MERGING IN FROM THE LEFT SWERVED AND FELL. THE RIDER LET GO OF HIS OWN MOTORCYCLE AND LET THE MOTORCYCLE GLIDED INTO MY LANE AND STOPPED IN FRONT OF MY BUS. I THEN STOPPED AND WENT TO MADE A CHECK ON THE RIDER. FROM MY OBSERVATION, THE RIDER SEEMS TO SUFFERED SOME ABRASIONS ON HIS ARMS. AMBULANCE AND TRAFFIC POLICE CAME DOWN TO SCENE AND MADE A CHECK ON THE RIDER. THE RIDER WAS NOT CONVEYED AND THE TRAFFIC POLICE ADVISED ME TO LODGE A POLICE REPORT WITHIN 24 HRS. I WISH TO INFORMED THAT MY BUS FRONT BONNET SUSTAINED SCRATCHES AND I HAD MADE A CHECK ON ALL MY 12 PASSENGER AND THEY WERE NOT INJURE. I HAVE A CAR CAMERA AND IF IS NEEDED I AM ABLE TO PROVIDE THE FOOTAGE.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	PENDING DOWNLOAD
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBN2573C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

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 envelope/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) complying with requirements under any regulations, laws or court orders.



[Signature]



Policyholder's Signature
Date & Time:

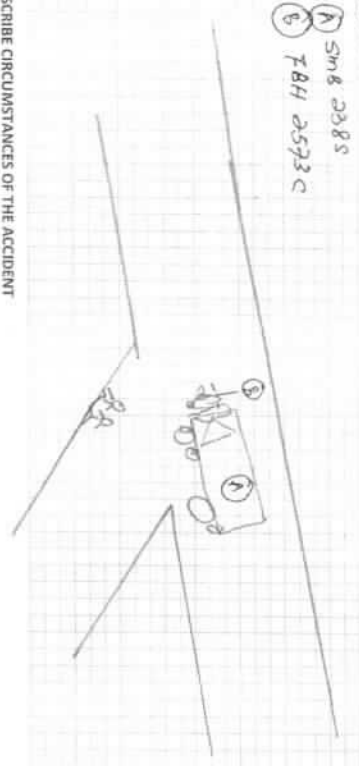
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan Pg. 2

SKETCH PLAN

(A) 5m8 2385
(B) FBH 2573C



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

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



Signature _____
Date & Time: _____

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature _____

Name:
NRIC/FTN No.:



SMRT Accident Vehicle Repair Estimates

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



Date Generated : 14/05/2019

User ID : GohKK2

Section A - Accident Details

Registration Number	SMB238S
Case Reference Number	BUS/05/19/7013
Registration Date	27/12/2011
Company Type	SMRT Buses Ltd
Make	MAN
Model	MAN NL320F(A22)
Name of Driver	Lee Sai Ming
Type of Accident	Head To Side
Accident Date and Time	11/5/2019 10:17 PM
Accident Reported Date and Time	11/5/2019 6:46 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	
Special Instruction to ARC, if any	SMB238S, FRONT CENTER BUMPER DENTED. NUMBER PLATE MISSING. FBN2573C (TP) - INSURE WITH NTUC
Prepared Date and Time	14/5/2019 10:14 AM
Chassis Number	WMAA22ZZ1C7001247
Mileage	
Work Shop	
Repair Completion Date and Time	

Section B - Summary of Repair Estimates

Summary of Repair Estimates		
	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$1,325.00	\$0.00
Total Spray Cost	\$528.00	\$0.00
Total Spare Part Cost	\$3,689.54	\$0.00
Total Other Cost	\$0.00	\$0.00
TOTAL COST	\$3,689.54	\$0.00
Lump Sum Total	\$3,700.00	\$0.00
Number of Repair Days	3.0	
Prepared / Adjusted By	Kok Khoon Goh	
ARC / Surveyor Sign Off Date	14/05/2019 10:22 AM	
Signature		
Remarks		

Section C - Quotation and Accident Invoice Details

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



SMRT Accident Vehicle Repair Estimates

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

Date Generated : 14/05/2019

User ID : GohKK2

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS	\$1,325.00 1060	
Total Labour	\$1,325.00	

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	\$528.00 446	
Total Spray Painting & Panel Beating	\$528.00	

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Other Costs		

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
	COMMON		NUMBER PLATE W/FRAME	1.00	\$68.00	0.00	\$68.00	Replace	MS
6010151			BUMPER FRONT	1.00	\$1,868.80	10.00	\$1,681.92	Replace	CRA
6010154	Body	F01001-CW263	FLAP, FRONT FOR MAN A22 BUS	1.00	\$1,868.80	10.00	\$1,681.92	Replace	CRA
6010415	BODY LH	5046	HINGE LH	2.00	\$327.80	10.00	\$590.04	Replace	BT
6010416	BODY RH	5047	HINGE RH	2.00	\$327.80	10.00	\$590.04	Replace	BT
4005301			SMRT LOGO	1.00	\$75.00	0.00	\$75.00	Replace	rec
Total					\$4,536.20		\$4,686.92		

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									

7046.80

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:

16/5/19
Hwa Jie-LKK

14/5/19

4/5 2days





SMRT Accident Vehicle Repair Estimates

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

Date Generated : 25/05/2019

User ID : CatherineLee

Section A - Accident Details	
Registration Number	SMB238S
Case Reference Number	BUS/05/19/7013
Registration Date	27/12/2011
Company Type	SMRT Buses Ltd
Make	MAN
Model	MAN NL320F(A22)
Name of Driver	Lee Sai Ming
Type of Accident	Head To Side
Accident Date and Time	11/5/2019 10:17 PM
Accident Reported Date and Time	11/5/2019 6:46 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24101500
Special Instruction to ARC, if any	SMB238S, FRONT CENTER BUMPER DENTED. NUMBER PLATE MISSING. FBN2573C (TP) - INSURE WITH NTUC
Prepared Date and Time	14/5/2019 10:14 AM
Chassis Number	WMAA22Z21C7001247
Mileage	
Work Shop	
Repair Completion Date and Time	

Section B - Summary of Repair Estimates		
Summary of Repair Estimates		
	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$1,325.00	\$1,060.00
Total Spray Cost	\$528.00	\$446.00
Total Spare Part Cost	\$3,749.54	\$3,749.54
Total Other Cost	\$0.00	(\$301.20)
TOTAL COST	\$5,602.54	\$4,954.34
Lump Sum Total	\$5,600.00	\$4,950.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Kok Khoo Goh	Hwee Jie
ARC / Surveyor Sign Off Date	14/05/2019 10:22 AM	15/05/2019 2:19 PM
Signature		
Remarks		

Section C - Quotation and Accident Invoice Details			
Quotation Number		Invoice Number	
Quotation Date		Invoice Date	
Invoice Amount		Prepared Date	



SMRT Accident Vehicle Repair Estimates

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

Date Generated : 25/05/2019

User ID : CatherineLee

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	\$1,325.00	\$1,060.00
Total Labour	\$1,325.00	\$1,060.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	\$528.00	\$446.00
Total Spray Painting & Panel Beating	\$528.00	\$446.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Lump Sum Adjustment by Surveyor	\$0.00	(\$301.20)
Total Other Costs	\$0.00	(\$301.20)

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
	COMMON		NUMBER PLATE W/FRAME	1.00	\$68.00	0.00	\$68.00	Replace	Replace
6010151			BUMPER FRONT	1.00	\$1,868.80	10.00	\$1,681.92	Replace	Replace
6010154	Body	F01001-CW263	FLAP, FRONT FOR MAN A22 BUS	1.00	\$1,868.80	10.00	\$1,681.92	Replace	Replace
6010415	BODY LH	5046	HINGE LH	2.00	\$327.80	10.00	\$590.04	Replace	Replace
6010416	BODY RH	5047	HINGE RH	2.00	\$327.80	10.00	\$590.04	Replace	Replace
4005301			SMRT LOGO	1.00	\$75.00	0.00	\$75.00	Replace	Replace
Total					\$4,536.20		\$4,686.92		

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									

[> Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	SLD9220J		
Vehicle Type :	R11 - Private Hire (Self-Drive) Station Wagon/Jeep/Land Rover		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	SSANGYONG		
Vehicle Model :	TIVOLI XLV 1.6G 6AT 2WD ESP E4		
Chassis No. :	KPT36B1VSGP077779		
Propellant :	Petrol		
Engine No. :	17391002044330		
Engine Capacity :	1597 cc		
Maximum Power Output :	94.1 kW (126 bhp)		
Maximum Laden Weight :	1870 kg		
Unladen Weight :	1420 kg		
Year Of Manufacture :	2016		
Original Registration Date :	30 Jun 2016		
Lifespan Expiry Date :	-		
COE Category :	A - Car up to 1600cc & 97kW (130bhp)		
Quota Premium :	\$54,301.00		
COE Expiry Date :	29 Jun 2026		
Road Tax Expiry Date :	29 Jun 2019		
PARF Eligibility Expiry Date :	29 Jun 2026		
Inspection Due Date :	29 Jun 2019		
Intended Transfer Date :	14 Mar 2019		
CO2 Emission :	176.00 (g/km)		
CEV/VES Rebate Utilised Amount :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

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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



NTUC INCOME INSURANCE CO-OPERATIVE LTD		Ref: NS/INC19008595/Jvd3e2	
73 BRAS BASAH ROAD			
#05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			
		Date: 03-06-2019	
		Code: INC4	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	FBN 2573C	Veh. Inspected	SMB 238S
Policy No.	5107344655	Coverage (\$)	0.00
Claim No.	MT/1044319-002	Excess (\$)	0.00
Assign From		Assign Date	14/05/2019
2. Vehicle Particulars & Condition			
Make & Model	MAN A22	c.c	10518
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	WMAA22ZZ1C7001247	Colour	MULTI COLOUR
Odometer	687604	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	275/70 R22.5	GOODYEAR	7 mm
L/H Front Tyre	275/70 R22.5	GOODYEAR	7 mm
R/H Rear Tyre	275/70 R22.5 (D)	GOODYEAR	7/7 mm
L/H Rear Tyre	275/70 R22.5 (D)	GOODYEAR	7/7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	11/05/2019	Inspection Date	14/05/2019
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.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days	

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Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SMB 238S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BUMPER FRONT	CRACKED	1,868.80	1,868.80
1	FLAP, FRONT: FOR MAN A22 BUS	CRACKED	1,868.80	1,868.80
2	HINGE LH @\$327.80	BENT	655.60	655.60
2	HINGE RH @\$327.80	BENT	655.60	655.60
	LESS 10% DISCOUNT		-	-504.88
			5,048.80	4,543.92
	<u>SPECIAL NETT ITEMS</u>			
1	NUMBER PLATE W/FRAME (SN)	MISSING	68.00	68.00
1	SMRT LOGO (SN)	NECESSARY	75.00	75.00
			143.00	143.00
	<u>LABOUR</u>			
	TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.		1,325.00	1,060.00
	PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS.		528.00	446.00
			1,853.00	1,506.00
	GRAND TOTAL		7,044.80	6,192.92
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				4,950.00

Report Ref No. NS/INC19008595/Jvd3e2

ONG HWEE JIE

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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