

ASSIGNED BY

Steve

REF

NIT4C

NS/INC19011653/E+d302

ASSIGNMENT

From

Date:

Estimated Cost

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

To Inspect Vehicle No:

at Workshop this

of

Insured

SHC 6057L

Policy No

MT/1052656-001

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.

N/S	O/S
	XX

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

Lump Sum

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHC 46292

Yr Regn:

4/11/14

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

Truck / Trailer or

Make:

Toyota Prius

C.C. 1798

Colour

M/cream

A/C: Insured / Std / NI / NA

Sp Reading

453499

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTOKN 364505752564

Gen Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: 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

Falken

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

28/6/19

D.O.I.

1/7/19

Survey held at

SMRT

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date Time Action / Instruction

no policy found

SHC 46292 NS/INC16022753/stbm2

D.O.A. 26/11/2016

SHC 6057L CS/DAI15002715/HIVBU2

D.O.A. 22/11/2014

Finalize conf \$750, 2 days (Red: 2750.70, 78%)

06/19/2194

SHC 6057L

RECEIVED 10 JUL 2019

Date/Time File Pass 107

☐ : Prel. Report

1) 10/7 Typist

☒ : Final Report

Date/Time File Return 107

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Photos

Others

TOTAL

160

160

Report Format

Lump Sum I.B.I. (\$) 750/-

Add Fee:

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

TP Claims against NTUC Income: Follow-Through Survey

Date 9/7/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	Date of Accident
1	MT/1052656-001	SMRT TAXIS	SHC 4620Z	SHC 6057L	28/6/2019
2	MT/1050908-003	COMFORT TRANSPORTATON PTE LTD	SHC 8187G	SLR 3922H	25/6/2019
3	MT/1051069-002	SMRT TAXIS	SHB 601K	GY 544H	28/6/2019
4	MT/1052657-001	SMRT TAXIS	SHC 4628C	SKF 328Y	19/5/2019

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	28/06/2019 14:14
Date Of Accident	28/06/2019 03:55
Exact Location Of Accident	ORCHARD TOWER TAXI STAND (QUEUE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4620Z
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-19093197MFSH
Cover Note Number	

Driver

Name of Driver	LEE KUM THONG
NRIC No	S6942256Z
Date Of Birth	05/12/1969
Occupation	OUTDOOR
Date Of Driving Pass	15/01/1997
Driving Experience	22 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	372
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	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

AS I WAS QUEUING FOR PASSENGER AT ORCHARD TOWER TAXI STAND SUDDENLY I FELT AN IMPACT ON MY REAR OF MY TAXI. I ALIGHTED AND DISCOVERED THAT A SILVER CAB SHC6057L HAD HIT ONTO THE REAR PORTION OF MY TAXI. AS A RESULT MY REAR RIGHT BUMPER WAS MISS ALIGNED WITH THE REAR RIGHT FENDER.

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC6057L
Vehicle Make/Model/Colour	SILVER CAB
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ISMAIL BIN AHMAD
NRIC/Passport Number	S1127351C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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:

[Signature]

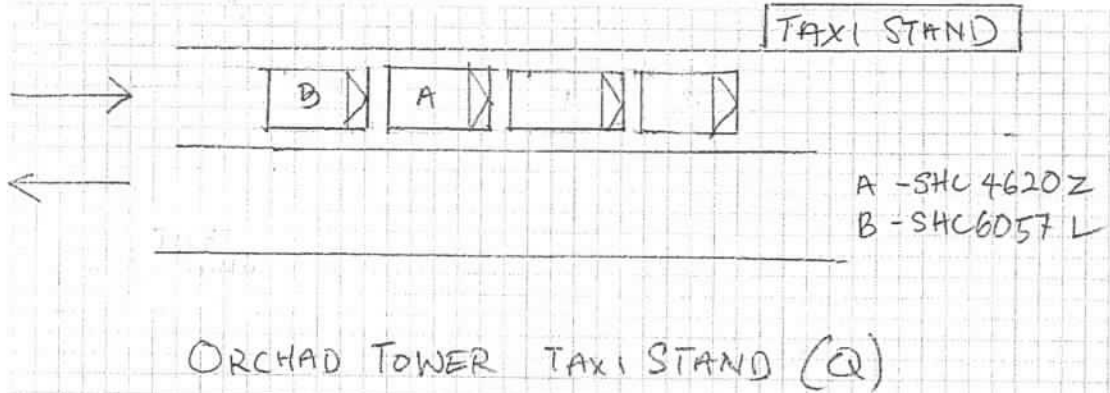
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

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.

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHC4620Z
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Jul 2019
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR1450422
Chassis No.:	JTDKN36U505752561
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	04 Nov 2014
First Registration Date:	04 Nov 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	03 Nov 2022
PARF Rebate Amount:	\$6,066.00
Intended COE Rebate Details	
COE Expiry Date:	03 Nov 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$51,337.00
COE Rebate Amount:	\$21,426.00
Total Rebate Amount:	\$27,492.00
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 01 Jul 2019

OK

Case Details

Case Reference Number : TAX/06/19/2104

Company Type : SMRT Taxis Pte Ltd

Insurance Company Name : NTUC Income
Insurance Co-operative Ltd

Type of Repair : Accident Repair

Estimation ID : EST-7510-ID

Accident Date and Time : 27/06/2019 07:55 PM

Vehicle Registration Number : SHC4620Z

Assigned By : Taxi Claims Manager Team

Vehicle Age(In Months) : 55

Documents / Photographs

View Documents / Photographs

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	SMRT Recommendation				Repair/ Replace	Surveyor Quantity	Surveyor Approval		Remarks
						List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)			Surveyor Final Price(\$)	Repair/Replace	
One Time Key In	Main			BUMPER REAR	1	458.60	458.60	25.00	343.95	Replace	1	343.9	Replace	/ 00
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	10	12.08	Replace	/ MC
One Time Key In	Main			PIXEL STICKER	2	60.00	120.00	0.00	120.00	Replace	2	120.0	Replace	/ MC
One Time Key In	Main			BUMPER REINFORCEMENT REAR	1	205.70	205.70	25.00	154.27	Replace	0	0	Check	X MI
One Time Key In	Main			ARM SUB-ASSY, RR BUMPER RH	1	139.60	139.60	25.00	104.70	Replace	0	0	Check	X MI
One Time Key In	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	0	0	Check	X MI
One Time Key In	Main			BUMPER SIDE RETAINER RR/RH	1	94.80	94.80	25.00	71.10	Replace	1	71.10	Replace	/ GR
One Time Key In	Main			BUMPER LIP COVER RR/RH	1	118.10	118.10	25.00	88.57	Replace	0	0	Not Give	X MI
One Time Key In	Main			BUMPER LIP REAR	1	228.90	228.90	25.00	171.68	Replace	0	0	Not Give	X MI
One Time Key In	Main			TAIL LAMP BRACKET, RH	1	30.70	30.70	25.00	23.02	Replace	0	0	Not Give	X MI
One Time Key In	Main			TAIL LAMP RH	1	557.80	557.80	10.00	502.02	Replace	0	0	Check	X MI
Total Spare Part Cost									1,771.39	Surveyor Total				547.13
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)				20
Final Spare Part Cost									1,417.11	Final Sur Total				437.70

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

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY REAR BUMPER	378.00	200.00	
2	Main	TO RESPRAY BUMPER BEAM	180.00	0	
Total:			558.00	200.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	180.00	20	/ n/c
3	Main	TO WASH AND VACUUM	60.00	0	
4	Main	TO REPLACE SUNDRY PARTS	100.00	0	
Total:			460.00	20.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	1,417.11	437.70
Total Labour Cost	338.00	200.00
Total Spray Painting	558.00	200.00
Other	460.00	20.00
Overall Total	2,773.11	857.70
Lump Sum Repair Option		✓
Lump Sum Total	2,750.00	850.00
Surveyor Approved Amount		850.00
No of Repair Days*	3	2
Remarks	-	L/S repair, take after spray. Finalize sent to stevechen@lkkauto.com
Surveyor Name		STEVE CHEN

3505.70

3506.30

Signature



Survey Date

01/07/2019

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	SHC4620Z
Case Reference Number	TAX/06/19/2104
Registration Date	4/11/2014
Company Type	SMRT Taxis Pte Ltd
Make	TOYOTA
Model	PRIUS
Name of Driver	LEE KUM THONG
Type of Accident	Head to Rear
Accident Date and Time	28/6/2019 3:55 AM
Accident Reported Date and Time	28/6/2019 1:23 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24102221
Special Instruction to ARC, if any	REAR PORTION
Prepared Date and Time	1/7/2019 11:57 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	\$338.00	\$200.00
Total Spray Cost	\$558.00	\$200.00
Total Spare Part Cost	\$1,771.39	\$547.13
Total Other Cost	\$460.00	(\$197.13)
TOTAL COST	\$3,127.39	\$750.00 (L/S)
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Kim Ming Chin	STEVE CHEN (LKK) / NTUC
ARC / Surveyor Sign Off Date	01/07/2019 5:00 PM	01/07/2019 3:57 PM
Signature		
Remarks	L/S repair, take after spray. Finalize sent to stevechen@lkkauto.com	

Section C - Quotation and Accident Invoice Details

Quotation Number	QN-1907-0119	Invoice Number	
Quotation Date	08.07.2019	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 REAR PORTION	\$338.00	\$200.00
Total Labour	\$338.00	\$200.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO RESPRAY REAR BUMPER	\$378.00	\$200.00
TO RESPRAY BUMPER BEAM	\$180.00	\$0.00
Total Spray Painting & Panel Beating	\$558.00	\$200.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO TEST AND REFIX REVERSE SENSOR SYSTEM	\$120.00	\$0.00
TO CHECK WIRING AND SYSTEM FUNCTION	\$180.00	\$20.00
TO WASH AND VACUUM	\$60.00	\$0.00
TO REPLACE SUNDRY PARTS	\$100.00	\$0.00
Lump Sum Adjustment by Surveyor	\$0.00	(\$217.13)
Total Other Costs	\$460.00	(\$197.13)

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
		52161-16010	BUMPER CLIPS	10.00	\$1.61	25.00	\$12.08	Replace	Replace
			PIXEL STICKER	2.00	\$60.00	0.00	\$120.00	Replace	Replace
		52023-12240	BUMPER REINFORCEMENT REAR	0.00	\$205.70	0.00	\$0.00	Replace	Check
		52015-47050	ARM SUB-ASSY, RR BUMPER RH	0.00	\$139.60	0.00	\$0.00	Replace	Check
			SENSOR REVERSE	0.00	\$180.00	0.00	\$0.00	Replace	Check
		52575-47020	BUMPER SIDE RETAINER RR/RH	1.00	\$94.80	25.00	\$71.10	Replace	Replace
		76087-47020	BUMPER LIP COVER RR/RH	0.00	\$118.10	0.00	\$0.00	Replace	Not Given
		76891-47020	BUMPER LIP REAR	0.00	\$228.90	0.00	\$0.00	Replace	Not Given
		52562-47010	TAIL LAMP BRACKET, RH	0.00	\$30.70	0.00	\$0.00	Replace	Not Given
		81551-47180	TAIL LAMP RH	0.00	\$557.80	0.00	\$0.00	Replace	Check
Total					\$2,075.81		\$547.13		

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									

547.13
 +200.00
 +220.00
 967.13
 -20%
 773.70
 45 \$750/-



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/INC19011653/Etd3e2			
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556		Date: 15-07-2019	
Code: INC4			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SHC 6057L	Veh. Inspected	SHC 4620Z
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1052656-001	Excess (\$)	0.00
Assign From		Assign Date	01/07/2019
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	JTDKN36U505752561	Colour	MAROON
Odometer	453499	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	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
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	28/06/2019	Inspection Date	01/07/2019
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	

**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.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 4620Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BUMPER REAR (DISC 25%)	DENTED	458.60	343.95
10	BUMPER CLIPS @\$1.61 (DISC 25%)	NECESSARY	16.10	12.08
1	BUMPER SIDE RETAINER RR/RH (DISC 25%)	BROKEN	94.80	71.10
2	PIXEL STICKER @\$60.00 (SN)	NECESSARY	120.00	120.00
1	BUMPER REINFORCEMENT REAR	NOT NECESSARY	205.70	-
1	ARM SUB-ASSY, RR BUMPER RH	NOT NECESSARY	139.60	-
1	SENSOR REVERSE	NOT NECESSARY	180.00	-
1	BUMPER LIP COVER RR/RH	NOT NECESSARY	118.10	-
1	BUMPER LIP REAR	NOT NECESSARY	228.90	-
1	TAIL LAMP BRACKET, RH	NOT NECESSARY	30.70	-
1	TAIL LAMP RH	NOT NECESSARY	557.80	-
			2,150.30	547.13
<u>LABOUR</u>				
	PANEL BEATING & BODY WORK.		338.00	200.00
	SPRAY PAINT.		558.00	200.00
	TO TEST AND REFIX REVERSE SENSOR SYSTEM.	NOT NECESSARY	120.00	-
	TO CHECK WIRING AND SYSTEM FUNCTION.		180.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
			1,356.00	420.00
GRAND TOTAL			3,506.30	967.13
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				750.00

Report Ref No. NS/INC19011653/Etd3e2

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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