

ASS. REC. BY:

REF:

CS/INCI1016441/R1td3

Special Instructions:

Surveyor: Rasul

## ASSIGNMENT (Office)

From (Person): Annie Koh

of

INC

Date/Time: 9:48am @ 17/9/19

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHC 7550 Y

Insured:

FBK 5883D

at Workshop m/s

Ding Auto

Tel:

96891857

of

SI Corporation Road

Policy No:

Claim No:

MT/106 2704-001

Sum Insured:

Excess:

Make of Veh:

D.O.A.

16/9/19

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

10:00am @ 17/9/19

Person Contacted:

velan

Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction	Initials
	SHC 7550 Y - (03 / LCR18V13164 / K1w0342	DUA: 30/9/18
	FBK 5883D *	
	Part veg Part \$6432.03 (Red: 2841.07; 30%)	

ASS. REC. BY:

REF:

8396

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SHE 75504at Workshop m/s DING AUTOof 31, CORPORATION RDInsured: INC

Policy No.:

Claims No.:

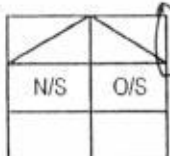
Sum Insured:

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: 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:

SHE 75504

Yr Regn:

2019 / MARType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

TOYOTA PRIUS 5DR H.B c.c. 1798

Colour:

YELLOW

A/C: Insured / Std / NI / NA

Sp Reading:

85330

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

STDKB3FH503079243Gen. Cond: Good / Fair / Poor / BurntSteering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/85R15

R:

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

TOYO / YOKO or

TRIANGLE

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

16/09/19

D.O.I.

17/09/191.54pm

Survey held at

DING AUTO

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

O/S FR

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

Date / Time

Action / Instruction

RECEIVED 25 SEP 2019

Date/Time, File Pass to?



Prel. Report

1) 2419 Typist

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

5

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Week end (\$

Survey Fee:

Transportation:

S + RS, \$

Photos

Others

TOTAL

Report Format:

TP

Lump Sum / L&amp;C:

6432.08

## **Nivitha (LKK Auto)**

**From:** Annie Koh <annie.koh@income.com.sg>  
**Sent:** Tuesday, 17 September 2019 11:43 AM  
**To:** 'assignments@lkkauto.com'; Admin-D (LKKAuto)  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 17/09/2019

Re-send

Warmest Regards

**Annie Koh**  
Senior Admin,  
Motor Insurance  
T +65 64307899  
[www.income.com.sg](http://www.income.com.sg)



**From:** Annie Koh  
**Sent:** Tuesday, 17 September 2019 9:48 AM  
**To:** 'assignments@lkkauto.com' <assignments@lkkauto.com>; 'Admin-D (LKKAuto)' <admin-d@lkkauto.com>  
**Cc:** Thio Tse Kiat <tsekiat.thio@income.com.sg>; Teng Ken Leong <kenleong.teng@income.com.sg>  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 17/09/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
----	-----	-----------	---------	---------------	------------------	------------------	-------------	--------	-----	--------------------

1	Quek Swee Keng	MT/1062704-001	SHC7550Y	DING AUTOMOTIVE PTE LTD	31 CORPORATION ROAD SINGAPORE 649825	vadivelan mohan / 96891857		FBK5883D	16/9/19	
2	Cyndie Yong	MT/1062707-001	SHB4588P	DING AUTOMOTIVE PTE LTD	31 CORPORATION ROAD SINGAPORE 649825	vadivelan mohan / 96891857		GZ4035D	16/9/19	avoid lunch time 12-1pm OWNER WANT VEH TO BE SURVEYED AT 10AM.
3	Jared Liu	MT/1053631-001	SLK9697E	EUROKARS SERVICES PTE LTD	27A TANJONG PENJURU SINGAPORE 609042	samuel / 63310697	10:00-12:00	SMD1685S	6/7/19	
4	David Phua	MT/1062351-002	GBB31668	MILLION AUTO SERVICE	4 PENJURU PLACE #01-12 2.8 PENJURU TECH HUB	Ms Chong / 62649091	10:00-12:00	SGU2459D	12/9/19	82285020
5	Alice Low	MT/1062478-001	SLL7112J	PEGASUS ENGINEERING & TRADING PTE LTD	74 KIAN TECK ROAD SINGAPORE 628800	KALA / 65137748	10:00-12:00	GBJ4486D	14/9/19	

6	Jared Liu	MT/1062601- 001	SLJ2693S	PEGASUS ENGINEERING & TRADING PTE LTD	74 KIAN TECK ROAD SINGAPORE 628800	chern /	SGT4453L	14/9/19	
7	Serene Lim	MT/1062510- 001	SKC878M	TRIDENTE AUTOMOBILI PTE LTD	30 LENG KEE ROAD, UNIT 01-02	JOSEPH TEE / 64752168	FBG1984T	9/9/19	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Annie Koh

Senior Admin Assistant, Motor Insurance

T +65 6430 7899

[www.income.com.sg](http://www.income.com.sg)

**income**  
made efficient



## 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	16/09/2019 11:02
Date Of Accident	16/09/2019 04:25
Exact Location Of Accident	ALONG TANJONG PAGAR NEAR AMARA HOTEL
Country/State Of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7550Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS TAXI-1.8 (A)

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 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-18088937MFSH
Cover Note Number	

### Driver

Name of Driver	SOH AH EE
NRIC No	S0171982C
Date Of Birth	29/10/1952
Occupation	OUTDOOR
Date Of Driving Pass	18/05/1971
Driving Experience	48 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91376719
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	APT BLK 662D JURONG WEST STREET 64 #15-288 SINGAPORE
Postcode	644662
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER POLICE REPORT T/20190916/2018

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH IO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBK5883D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name

UNKNOWN MOTORCYCLIST

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FBK5883D

Were seat belts worn?

NO

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode



## Accident Sketch Plan Pg. 1

### 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: Verd.  
NRIC/FIN No.:

Accident Sketch Plan Pg. 2

### SKETCH PLAN

A hand-drawn sketch map on grid paper showing a street intersection. A horizontal road is labeled 'TANJONG PAGAR ROAD' and a vertical road is labeled 'GOPENG ST'. On the left side of the map, there is a building labeled 'AMARA HOTEL'. A car is depicted on 'TANJONG PAGAR ROAD' with a driver labeled 'A' and a passenger labeled 'B'. Arrows indicate traffic flow: one-way traffic on 'TANJONG PAGAR ROAD' (left to right) and two-way traffic on 'GOPENG ST'.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER POLICE REPORT (T/20190916/2018)

## 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: V. D. O. I.  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20190916/2018

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

1 of 3

Report No. T/20190916/2018

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/09/2019 10:07		Vide Report No.:	Station Diary No.: 118
<b>Informant's Particulars</b>			
Name of Informant: SOH AH EE		Address: APT BLK 662D JURONG WEST STREET 64 #15-288 SINGAPORE 644662	
ID Type / ID No.: NRIC NO / S0171982C		Contact No.: Home/Office: Mobile: 91376719	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 66	Date of Birth: 29/10/1952	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 16/09/2019 04:25	Type of Location: Straight Road
Location:  TANJONG PAGAR ROAD  Near Amara Hotel				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK5883D	Motorcycle				Seriously Damaged	0
SHC7550Y	TAXI				Slightly Damaged	0

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



**SINGAPORE  
POLICE FORCE**



T/20190916/2018

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

2 of 3

Report No. T/20190916/2018

CONTINUATION OF REPORT

Driver			
Name	SOH AH EE	ID No.	S0171982C
Related Vehicle	SHC7550Y (TAXI)	Contact No.	91376719
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 16/09/2019 at around 0425hrs, I was travelling on a 2 lane road at Tanjong Pagar Rd near Amara Hotel. I was driving Taxi, SHC7550Y. I was driving on the right most lane. As I was driving, I saw through my rear view mirror that two motorbikes are speeding. Subsequently, I saw one of the motorbike overtaking me on my right hand side.

Suddenly, I felt an impact on the front right hand side of my taxi. I immediately came to a stop and came down my vehicle to make a check. I saw that the motorbike, FBK5883D, had hit onto my vehicle while trying to overtake me. I saw the motorcyclist skid when it had hit onto my taxi. The motorcyclist was lying on the road and screamed in pain saying that his left hand and his left leg are in pain. The second motorcyclist who was with the injured rider called for the ambulance. After both traffic police & ambulance arrive at the scene, I observed that the right side of my taxi, from the front tyre to my right front bumper was slightly damaged.

I did not have time to take the particulars of the motorcyclist as he was injured and being checked by the paramedics. The paramedics then conveyed the motorcyclist to a unknown hospital. I was instructed by traffic police officer to lodge a police report thus I have come to do so.



**SINGAPORE  
POLICE FORCE**



T/20190916/2018

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

3 of 3

Report No. T/20190916/2018

## CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /  
Sgt 2 AMRITPAL SINGH SANDHU

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

16/09/2019 10:07

Officer In Charge Of Case:

TP / GIT /  
Sgt 3 MARIAH BINTE ZAKARIA  
Contact No.: 65476433

Classification Of Case:

Authentication Stamp  
NP168



Signature:

Singapore Police Force



**SINGAPORE POLICE FORCE**  
ACKNOWLEDGEMENT SLIP

1.0 Zickle  
65476356  
65476356

Ref: Report No: E/20190916/0020

I, SP Iskandar  
(Recipient's Name, NRIC or Passport No. / Rank and No.)  
of Traffic Police  
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One 64GB Samsung microsd card
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

from Sh Ah Ee, S0171982C  
(Name, NRIC or Passport No. / Rank and No.)  
of SPIC 7550Y  
(Address / Police Station / NPC / NPP)  
on 16/9/19 at 0530 hrs.  
(Date) (Time)

Witnessed by / \* Handled over by:  
(\* Delete if applicable)


Received by:

[Signature]  
(Signature)  
Sh Ah Ee, S0171982C  
(Name, NRIC or Passport No. / Rank and No.)

[Signature]  
(Signature)  
SP Iskandar  
(Name, NRIC or Passport No. / Rank and No.)

Other Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DENISE

TO :    
**ESTIMATE REPORT** 1ST Quotation

FAX NO:

17/09/2019 9:44

JOB-NO: 50112020

Page 1 of 2

**OWNER'S PARTICULARS**

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

**VEHICLE DETAILS**

LICENSE NO: SHC7550Y

TRANS: AUTO

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

CHASSIS: JTDKB3FU503079243

OWNER'S INSURER: MS First Capital Insurance Limited

ENGINE: 2ZR2B99912

JOB-CODE: TP

SA: Ding Auto User 2

**CLAIM DETAILS**

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
<b>LABOUR</b>							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	800.00	0.00	<del>800.00</del>		Y	600
2 RUST PROOFING	1.00	80.00	0.00	<del>80.00</del> 40		Y	40
3 SUNDRIES <i>neu</i>	1.00	50.00	0.00	<del>50.00</del> 20		Y	20
4 ADJUST HEADLAMP AIM	1.00	120.00	0.00	<del>120.00</del>		Y	30
5 TO CALIBRATE HEAD LAMP SYSTEM	1.00	200.00	0.00	<del>200.00</del>		Y	100
6 R&R FRONT RIM & TYRE RH	1.00	60.00	0.00	<del>60.00</del>		Y	30
7 R&R FRONT UNDERCARRIAGE	1.00	200.00	0.00	200.00		Y	X 1.1
8 CONDUCT WHEEL ALIGNMENT & BALANCING	1.00	120.00	0.00	120.00		Y	60
9 DIAGNOSTIC (CLEAR FAULT CODE)	1.00	180.00	0.00	<del>180.00</del>		Y	80
10 RESPRAY FRONT BUMPER	1.00	250.00	0.00	<del>250.00</del>		Y	200
11 RESPRAY BONNET	1.00	250.00	0.00	250.00		Y	X 1.1
12 RESPRAY FRONT FENDER RH	1.00	250.00	0.00	250.00		Y	200
13 RESPRAY HEAD LAMP PANEL	1.00	150.00	0.00	150.00		Y	50
TOTAL:		2,710.00	0.00	2,710.00			
<b>MATERIALS</b>							
1 FRONT BUMPER <i>de-</i>	1.00	490.50	122.63	367.87	L	Y	
2 FRONT BUMPER RETAINER LH <i>X su</i>	1.00	92.30	23.08	69.22	L	Y	
3 FRONT BUMPER RETAINER RH <i>cut</i>	1.00	92.30	23.08	69.22	L	Y	
4 FRONT BUMPER UPPER GRILLE <i>X su</i>	1.00	389.20	97.30	291.90	L	Y	
5 FRONT BUMPER LOWER GRILLE <i>cut</i>	1.00	189.60	47.40	142.20	L	Y	
6 FRONT BUMPER LOGO <i>neu</i>	1.00	114.80	28.70	86.10	L	Y	
7 FRONT BUMPER NUMBER PLATE GARNISH <i>X su</i>	1.00	129.30	32.33	96.97	L	Y	
8 FOG LAMP RH <i>cm</i>	1.00	950.70	237.68	713.02	L	Y	
9 FRONT FENDER RH <i>bt</i>	1.00	933.10	233.28	699.82	L	Y	
10 FRONT FENDER EMBLEM-HYBRID RH <i>neu</i>	1.00	51.60	12.90	38.70	L	Y	
11 FRONT FENDER INNERSHIELD RH <i>MIS</i>	1.00	201.67	50.42	151.25	L	Y	
12 FRONT FENDER QTR GARNISH RH <i>X su</i>	1.00	93.90	23.48	70.42	L	Y	
13 FRONT FENDER BRACKET RH <i>reput</i>	1.00	95.80	23.95	71.85	L	Y	
14 HEADLAMP PANEL RH <i>bt</i>	1.00	253.60	63.40	190.20	L	Y	
15 HEAD LAMP RH <i>cm</i>	1.00	2,751.60	687.90	2,063.70	L	Y	
16 BONNET HINGE RH <i>X su</i>	1.00	46.80	11.70	35.10	L	Y	
17 FRONT WHEEL RIM RH <i>cut</i> / s/n-350	1.00	588.95	147.24	441.71	L	Y	350 s/n
18 FRONT TIE ROD END RH <i>X</i>	1.00	122.60	30.65	91.95	L	Y	
19 FRONT LOWER ARM RH <i>X su</i>	1.00	482.60	120.65	361.95	L	Y	
20 FRONT NUMBER PLATE <i>X</i>	1.00	40.00	0.00	40.00	S	Y	



# CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
21 FRONT BUMPER CLIP SET <i>ne</i>	1.00	35.00	0.00	35.00	S	Y	
22 FRONT FENDER ADS STICKER RH <i>ne</i>	1.00	150.00	0.00	150.00	S	Y	
23 FRONT FENDER INNERSHIELD CLIP SET RH <i>ne</i>	1.00	35.00	0.00	35.00	S	Y	
24 REPAIR BONNET <i>X n</i>	1.00	0.00	0.00	0.00	S	Y	
25 FRONT WHEEL TYRE RH <i>X sur</i>	1.00	250.00	0.00	250.00	S	Y	
TOTAL:		8,580.92	0.00	8,580.92			
TOTAL PARTS & LABOUR:		11,290.92	2,017.77	9,273.15			

EXCESS/LOADING:\$ 0.00

No. Of Day: 5 days

RE-SURVEY: BEFORE AFTER PAINTING

PART-BY-PART OR LUMP SUM: \$

DATE OF SURVEY: 17 / 09 / 17 @ 1400 hrs

SURVEYED BY: RASHU

CONTACT NO: 900 60088 FAX NO: \_\_\_\_\_

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:

Part By Part

Labour = \$ 1440

S/N = \$ 500

Parts = \$ 4522.08

Lfs+p = \$ 6432.08

Final Amount = \$ 6432.08

5 days / PIR



TO :

FAX NO:

**ESTIMATE REPORT** 1ST Quotation

17/09/2019 9:44

**OWNER'S PARTICULARS**

JOB-NO: 50112020

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

**VEHICLE DETAILS**

LICENSE NO: SHC7550Y

TRANS: AUTO

CHASSIS: JTDKB3FU503079243

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

ENGINE: 2ZR2B99912

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 2

**CLAIM DETAILS**

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
<b>LABOUR</b>							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	800.00	0.00	<del>800.00</del>		Y	<u>600</u>
2 RUST PROOFING	1.00	80.00	0.00	<del>80.00</del> 40		Y	<u>40</u>
3 SUNDRIES	1.00	50.00	0.00	<del>50.00</del> 20		Y	<u>20</u>
4 ADJUST HEADLAMP AIM	1.00	120.00	0.00	<del>120.00</del>		Y	<u>30</u>
5 TO CALIBRATE HEAD LAMP SYSTEM	1.00	200.00	0.00	<del>200.00</del>		Y	<u>100</u>
6 R&R FRONT RIM & TYRE RH	1.00	60.00	0.00	<del>60.00</del>		Y	<u>30</u>
7 R&R FRONT UNDERCARRIAGE	1.00	200.00	0.00	<del>200.00</del>		Y	<u>X</u>
8 CONDUCT WHEEL ALIGNMENT & BALANCING	1.00	120.00	0.00	<del>120.00</del>		Y	<u>60</u>
9 DIAGNOSTIC (CLEAR FAULT CODE)	1.00	180.00	0.00	<del>180.00</del>		Y	<u>80</u>
10 RESPRAY FRONT BUMPER	1.00	250.00	0.00	<del>250.00</del>		Y	<u>200</u>
11 RESPRAY BONNET	1.00	250.00	0.00	<del>250.00</del>		Y	<u>X</u>
12 RESPRAY FRONT FENDER RH	1.00	250.00	0.00	<del>250.00</del>		Y	<u>200</u>
13 RESPRAY HEAD LAMP PANEL	1.00	150.00	0.00	<del>150.00</del>		Y	<u>50</u>
TOTAL:		2,710.00	0.00	2,710.00			

**MATERIALS**

1 FRONT BUMPER <i>de-</i>	1.00	490.50	122.63	367.87	L	Y	
2 FRONT BUMPER RETAINER LH <i>X</i>	1.00	92.30	23.08	69.22	L	Y	
3 FRONT BUMPER RETAINER RH <i>cut</i>	1.00	92.30	23.08	69.22	L	Y	
4 FRONT BUMPER UPPER GRILLE <i>?</i>	1.00	389.20	97.30	291.90	L	Y	
5 FRONT BUMPER LOWER GRILLE <i>cut</i>	1.00	189.60	47.40	142.20	L	Y	
6 FRONT BUMPER LOGO <i>new</i>	1.00	114.80	28.70	86.10	L	Y	
7 FRONT BUMPER NUMBER PLATE GARNISH <i>X</i>	1.00	129.30	32.33	96.97	L	Y	
8 FOG LAMP RH <i>cm</i>	1.00	950.70	237.68	713.02	L	Y	
9 FRONT FENDER RH <i>hi</i>	1.00	933.10	233.28	699.82	L	Y	
10 FRONT FENDER EMBLEM-HYBRID RH <i>new</i>	1.00	51.60	12.90	38.70	L	Y	
11 FRONT FENDER INNERSHIELD RH <i>MIS</i>	1.00	201.67	50.42	151.25	L	Y	
12 FRONT FENDER QTR GARNISH RH <i>X</i>	1.00	93.90	23.48	70.42	L	Y	
13 FRONT FENDER BRACKET RH <i>repair</i>	1.00	95.80	23.95	71.85	L	Y	
14 HEADLAMP PANEL RH <i>bt</i>	1.00	253.60	63.40	190.20	L	Y	
15 HEAD LAMP RH <i>cm</i>	1.00	2,751.60	687.90	2,063.70	L	Y	
16 BONNET HINGE RH <i>X</i>	1.00	46.80	11.70	35.10	L	Y	
17 FRONT WHEEL RIM RH <i>cut / s/n-350</i>	1.00	588.95	147.24	441.71 <i>s/n</i>	L	Y	
18 FRONT TIE ROD END RH <i>X</i>	1.00	122.60	30.65	91.95	L	Y	
19 FRONT LOWER ARM RH <i>X</i>	1.00	482.60	120.65	361.95	L	Y	
20 FRONT NUMBER PLATE <i>X</i>	1.00	40.00	0.00	40.00	S	Y	

# CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
21 FRONT BUMPER CLIP SET <i>re</i>	1.00	35.00	0.00	35.00	S	Y	
22 FRONT FENDER ADS STICKER RH <i>re</i>	1.00	150.00	0.00	<del>150.00</del> 80	S	Y	
23 FRONT FENDER INNERSHIELD CLIP SET RH <i>re</i>	1.00	35.00	0.00	35.00	S	Y	
24 REPAIR BONNET X	1.00	0.00	0.00	0.00	S	Y	
25 FRONT WHEEL TYRE RH X	1.00	250.00	0.00	250.00	S	Y	
TOTAL:		8,580.92	017.77	6,563.15			

TOTAL PARTS & LABOUR : 11,290.92 2,017.77 9,273.15

EXCESS/LOADING:\$ 0.00

No. Of Day: 5 days

RE-SURVEY: BEFORE AFTER PAINTING

PART-BY-PART OR LUMP SUM: \$

DATE OF SURVEY: 17 / 09 / 17 @ 1400hrs

SURVEYED BY: RASHU

CONTACT NO: 90010088 FAX NO: \_\_\_\_\_

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:

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:



## LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

### DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19016441/R1td3s2

73 BRAS BASAH ROAD  
#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 01-10-2019



ATTN: QUEK SWEE KENG

Code: INC

#### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBK 5883D	Veh. Inspected	SHC 7550Y
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1062704-001	Excess (\$)	0.00
Assign From	ANNIE KOH	Assign Date	17/09/2019

#### 2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS 5DR HATCHBACK	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	JTDKB3FU503079243	Colour	YELLOW
Odometer	85330 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

#### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/85 R15	TRIANGLE	6 mm
L/H Front Tyre	195/85 R15	TRIANGLE	6 mm
R/H Rear Tyre	195/85 R15	TRIANGLE	6 mm
L/H Rear Tyre	195/85 R15	TRIANGLE	6 mm

#### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.
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#### 5. General Information

Accident Date	16/09/2019	Inspect Date / Time	17/09/2019 ( 01:54 PM )
Survey held at	31 CORPORATION ROAD		
Repairer	DING AUTO PTE LTD		

#### 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:	5 Working Days
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### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 7550Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	FRONT BUMPER	DEFORMED	490.50	490.50
1	FRONT BUMPER RETAINER LH	SERVICEABLE	92.30	-
1	FRONT BUMPER RETAINER RH	CUT	92.30	92.30
1	FRONT BUMPER UPPER GRILLE	SERVICEABLE	389.20	-
1	FRONT BUMPER LOWER GRILLE	CUT	189.60	189.60
1	FRONT BUMPER LOGO	NECESSARY	114.80	114.80
1	FRONT BUMPER NUMBER PLATE GARNISH	SERVICEABLE	129.30	-
1	FOG LAMP RH	CRACKED	950.70	950.70
1	FRONT FENDER RH	BENT	933.10	933.10
1	FRONT FENDER EMBLEM-HYBRID RH	NECESSARY	51.60	51.60
1	FRONT FENDER INNERSHIELD RH	MISSING	201.65	201.65
1	FRONT FENDER QTR GARNISH RH	SERVICEABLE	93.90	-
1	FRONT FENDER BRACKET RH	TO REPAIR SEE LABOUR	95.80	-
1	HEADLAMP PANEL RH	BENT	253.60	253.60
1	HEAD LAMP RH	CRACKED	2,751.60	2,751.60
1	BONNET HINGE RH	SERVICEABLE	46.80	-
1	FRONT TIE ROD END RH	SERVICEABLE	122.60	-
1	FRONT LOWER ARM RH	SERVICEABLE	482.60	-
	LESS 25% DISCOUNT		-1,870.50	-1,507.37
			5,611.45	4,522.08
1	FRONT WHEEL RIM RH (SN)	CUT	588.95	350.00
	LESS 25% DISCOUNT		-147.25	-
			441.70	350.00
<b>SPECIAL NETT ITEMS</b>				
1	FRONT NUMBER PLATE (SN)	SERVICEABLE	40.00	-
1	SET FRONT BUMPER CLIP (SN)	NECESSARY	35.00	35.00
1	FRONT FENDER ADS STICKER RH (SN)	NECESSARY	150.00	80.00
1	FRONT FENDER INNERSHIELD CLIP SET RH (SN)	NECESSARY	35.00	35.00

Report Ref No. CS/INC19016441/R1td3s2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REPAIR BONNET (NPA)(SN)	NOT NECESSARY	-	-
1	FRONT WHEEL TYRE RH (SN)	SERVICEABLE	250.00	-
1	SUNDRIES (SN)	NECESSARY	50.00	20.00
			560.00	170.00
	<b>LABOUR</b>			
	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS.INCLUSIVE OF THE REPAIR OF FRONT FENDER BRACKET RH.		800.00	600.00
	RUST PROOFING.		80.00	40.00
	ADJUST HEADLAMP AIM.		120.00	30.00
	TO CALIBRATE HEAD LAMP SYSTEM.		200.00	100.00
	R&R FRONT RIM & TYRE RH.		60.00	30.00
	R&R FRONT UNDERCARRIAGE.	NOT NECESSARY	200.00	-
	CONDUCT WHEEL ALIGNMENT & BALANCING.		120.00	60.00
	DIAGNOSTIC (CLEAR FAULT CODE).		180.00	80.00
	RESPRAY FRONT BUMPER.		250.00	200.00
	RESPRAY BONNET.	NOT NECESSARY	250.00	-
	RESPRAY FRONT FENDER RH.		250.00	200.00
	RESPRAY HEAD LAMP PANEL.		150.00	50.00
			2,660.00	1,390.00
<b>GRAND TOTAL</b>			<b>9,273.15</b>	<b>6,432.08</b>
<b>RECOMMENDED COST OF REPAIRS (CONFIRMED)</b>				<b>6,432.08</b>

Report Ref No. CS/INC19016441/R1td3s2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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