

ASS. REC. BY: steve.

REF:

NTUC NS/INC 19012005/ Evf307

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SLS 851TPolicy No. 5108124166 (11/03/2019-10/03/2020)Claims No. MT/106415-002

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 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 429X Yr Regn: 28/Jun/2013

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

Truck / Trailer or

Make: London Taxi TX4 c.c. 2499Colour: White A/C: Insured / Std / NI / NASp. Reading: 565318 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LJ497C1B8D5000221

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: NII / S/Rim / STD A/Rim or

Tyre Size: F: 175 R16CR: 175 R16C

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

TOYO / YOKO or Austone.

Front: _____ Rear: _____

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 25/09/2019 D.O.I. 26/09/2019Survey held at SMRT.

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

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

Date / Time Action / Instruction

SHE 429X - NA/ECI 19006973/24D.O.A - 15/04/2013TPSLS 851T-X09/19/20199/19/19 Finalize (mfr) \$2600, 4 days (Phh Juan) (Reel 3380-36, 5670) SLS 851T

RECEIVED 10 OCT 2019

Date/Time, File Pass to? ☐ : Prel. Report1) ☐ : Final Report

Date/Time, File Return to?

2) 10/10 - typistRep. Format: TPLump Sum / L.B. / 2600/2Days Of Repair: 4Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)Survey Fee: 160

Transportation:

S + RS, SI

Photos

Others

TOTAL

160

Veron Chen (LKKAuto)

From: MTCL@income.com.sg
Sent: Wednesday, 2 October 2019 10:46 AM
To: Veron Chen (LKKAuto)
Subject: FW: REQUEST FOR CLAIM NUMBER

Hi,

Claims created

With Regards

Samsia
Senior Admin Assistant,
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

in with you

From: Veron Chen (LKKAuto) [mailto:veronchen@lkkauto.com]
Sent: Wednesday, 2 October 2019 9:47 AM
To: MTCL@income.com.sg
Subject: RE: REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Kindly provides us claim number

Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.
MT/1064115-002	SMRT TAXIS PTE LTD	SHF 429X	SLS 851T
MT/1062963-002	SMRT TAXIS PTE LTD	SHB 928T	SJM 1114L

D.O.A	Time of Accident	Estimate	Tentative repair cost
25/9/2019	12:40	\$6,088.97	\$2,750.00
18/9/2019	10:20	\$11,889.74	\$2,350.00

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="25/09/2019 08:52"/>
Vehicle No. (For Motor)	<input type="text" value="SLS851T"/>	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 checked="" type="radio"/>	5108124166		TAN CHUAN CHENG	S1392688C	GPC	drivo PREMIUM	SLS851T	SLS851T	11/03/2019	10/03/2020

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	369K
Vehicle Details	
Vehicle No.:	SHF429X
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Sep 2019
Vehicle Make:	THE LONDON TAXI CO
Vehicle Model:	LONDON TX4 2.5 DIESEL AUTO
Primary Colour:	White
Manufacturing Year:	2013
Engine No.:	VM62C55990
Chassis No.:	LJU97C7B8DS000221
Maximum Power Output:	75.0 kW (100 bhp)
Open Market Value:	\$37,948.00
Original Registration Date:	28 Jun 2013
First Registration Date:	28 Jun 2013
Transfer Count:	0
Actual ARF Paid:	\$45,128.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Jun 2021
PARF Rebate Amount:	\$29,333.00
Intended COE Rebate Details	
COE Expiry Date:	27 Jun 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$52,036.00
COE Rebate Amount:	\$11,400.00
Total Rebate Amount:	\$40,733.00
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 26 Sep 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	26/09/2019 10:04
Date Of Accident	25/09/2019 12:40
Exact Location Of Accident	CROSS STREET TOWARDS ROBINSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF429X
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	AHMAD LUKMAN BIN AMIN
NRIC No	S1794932B
Date Of Birth	08/11/1967
Occupation	OUTDOOR
Date Of Driving Pass	09/07/1990
Driving Experience	29 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	11
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	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?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

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

Circumstances of Accident

I WAS TRAVELLING ALONG CROSS STREET TURNING RIGHT TOWARDS ROBINSON ROAD. THE LANE THAT I WAS ON IS STRAIGHT GOING AND TURNING RIGHT. WHILST I WAS TURNING RIGHT A VEHICLE SLS851T WHICH WAS TRAVELLING ON MY RIGHT ON THE TURNING RIGHT ONLY LANE CAME STRAIGHT AND COLLIDED ONTO THE RIGHT PORTION OF MY TAXI.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

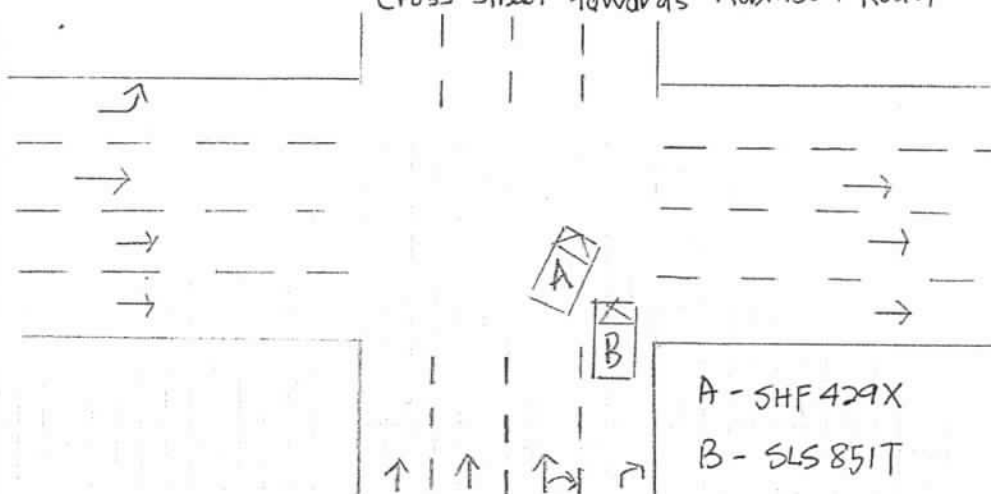
Vehicle Registration Number	SLS851T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	FOO KHOON LIN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

Cross street towards Robinson Road



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.:

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/09/19/2095
Type of Repair : Accident Repair
Vehicle Registration Number : SHF429X

Company Type : SMRT Taxis Pte Ltd
Estimation ID : EST-8646-ID
Assigned By : Taxi Claims Manager
Team

Insurance Company Name : NTUC Income Insurance Co-operative
Ltd
Accident Date and Time : 25/09/2019 04:40 AM
Vehicle Age(In Months) : 75

Documents / Photographs

View Documents / Photographs

Total Documents: 1

Estimation Details

Spare Part's Cost Detail

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			FENDER ASSEMBLY-FRON RH	1	591.36	591.36	10.00	532.22	Replace	1	0	Repair	X R
One Time Key In	Main			DOOR ASSY FRONT RH	1	2,536.93	2,536.93	10.00	2,283.24	Replace	1	2,283.24	Replace	/ PD
One Time Key In	Main			HINGE ASSY-FRT DOOR RH	2	108.61	217.22	10.00	195.50	Replace	0	0	Not Give	X R SK
One Time Key In	Main			SILL OUTER RH	1	382.46	382.46	10.00	344.21	Replace	1	0	Repair	X R
Total Spare Part Cost									3,355.17	Surveyor Total				2,283.24
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)				20
Final Spare Part Cost									2,684.14	Final Sur Total				1,826.59

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR RH PORTION	845.00	300	
Total:			845.00	300.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY FRONT FENDER RH	378.00	200	
Total:			936.00	550.00	

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
2	Main	TO RESPRAY FRONT DOOR RH	378.00	200	
3	Main	TO RESPRAY ROCKER PANEL MOULDING	180.00	150	
Total:			936.00	550.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	20	/ Nec
2	Main	TO TRANSFER DOOR MECHANISM	120.00	30	/ Nec
3	Main	TO REMOVE AND REFIT WIRE HARDESS	200.00	20	/ Nec
4	Main	TO REPLACE SUNDRY PARTS	100.00	20	/ Nec.
5	Main	TO WASH AND VACUUM	60.00	0	
Total:			580.00	90.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	2,684.14	1,826.59
Total Labour Cost	845.00	300.00
Total Spray Painting	936.00	550.00
Other	580.00	90.00
Overall Total	5,045.14	2,766.59
Lump Sum Repair Option	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	5,050.00	2,750.00
Surveyor Approved Amount		2,750.00
No of Repair Days*	6	4
Remarks	-	Lump sum Repair, Take after spray.
Surveyor Name		STEVE CHEN

Estimator Assessment(\$)

Surveyor Assessment(\$)

Signature


27/9/19

Save

Clear

Survey Date

26/09/2019

Steve.

26/09/2019.

Lump Sum Repair.

After spray

TP without Prejudice.

Repair Days - 4 days.

- 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	SHF429X
Case Reference Number	TAX/09/19/2095
Registration Date	28/6/2013
Company Type	SMRT Taxis Pte Ltd
Make	LONDON TAXI
Model	TX4
Name of Driver	AHMAD LUKMAN BIN AMIN
Type of Accident	Head To Side
Accident Date and Time	25/9/2019 12:40 PM
Accident Reported Date and Time	25/9/2019 2:47 PM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24103528
Special Instruction to ARC, if any	TPRIGHT PORTION
Prepared Date and Time	26/9/2019 2:39 PM
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	\$300.00
Total Spray Cost	\$936.00	\$550.00
Total Spare Part Cost	\$3,355.17	\$2,283.24
Total Other Cost	\$580.00	(\$533.24)
TOTAL COST	\$5,716.17 5980.36	\$2,600.00 (L/S)
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	6.0	4.0
Prepared / Adjusted By	Tuck Foo Kok	STEVE CHEN (LKK) / NTUC
ARC / Surveyor Sign Off Date	26/09/2019 4:24 PM	26/09/2019 3:29 PM
Signature		
Remarks	Lump sum Repair, Take after spray.	

Section C - Quotation and Accident Invoice Details

Quotation Number	QN-1910-0053	Invoice Number	
Quotation Date	04.10.2019	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 RH PORTION	\$845.00	\$300.00
Total Labour	\$845.00	\$300.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO RESPRAY FRONT FENDER RH	\$378.00	\$200.00
TO RESPRAY FRONT DOOR RH	\$378.00	\$200.00
TO RESPRAY ROCKER PANEL MOULDING	\$180.00	\$150.00
Total Spray Painting & Panel Beating	\$936.00	\$550.00

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	(\$623.24)
TO APPLY RUST-PROOFING ON AFFECTED AREA	\$100.00	\$20.00
TO TRANSFER DOOR MECHANISM	\$120.00	\$30.00
TO REMOVE AND REFIT WIRE HARDESS	\$200.00	\$20.00
TO REPLACE SUNDRY PARTS	\$100.00	\$20.00
TO WASH AND VACUUM	\$60.00	\$0.00
Total Other Costs	\$580.00	(\$533.24)

2283.24
+ 300.00
+ 640.00

3223.24
- 208

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		1182000150	FENDER ASSEMBLY-FRONT RH	1.00	\$591.36	100.00	\$0.00	Replace	Repair R
		1182001001	DOOR ASSY FRONT RH	1.00	\$2,536.93	10.00	\$2,283.24	Replace	Replace
		1182001003	HINGE ASSY-FRONT DOOR RH	0.00	\$108.61	0.00	\$0.00	Replace	Not Given X
		1182000726	SILL OUTER RH	1.00	\$382.46	100.00	\$0.00	Replace	Repair R
Total					\$3,619.36		\$2,283.24		

2578.59
DD
4/5 \$2600.
SVC

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									

4980.36

Veron Chen (LKKAuto)

From: Yeo Poh Suan (Auto Svcs/ARC/ARC/Taxis) <YeoPohsuan@smrt.com.sg>
Sent: Thursday, 10 October 2019 8:27 AM
To: SUR; CS A Team
Subject: FW: SHF429X

Hi All,

FYI.

Regards
Poh Suan

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

From: Yeo Poh Suan (Auto Svcs/ARC/ARC/Taxis)
Sent: Thursday, 10 October 2019 8:26 AM
To: 'Steve Chen (LKK Auto)'
Subject: RE: SHF429X

Hi,

Amount confirmed as per your recommendation, thanks.

Regards
Poh Suan

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

From: Steve Chen (LKK Auto) [mailto:SteveChen@lkkauto.com]
Sent: Wednesday, 9 October 2019 6:52 PM
To: Yeo Poh Suan (Auto Svcs/ARC/ARC/Taxis)
Subject: SHF429X

Dear Poh Suan,

We confirm the finalize \$2600 (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)

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

From: Yeo Poh Suan (Auto Svcs/ARC/ARC/Taxis) [mailto:YeoPohsuan@smrt.com.sg]

Sent: Wednesday, October 09, 2019 1:12 PM

To: Steve Chen (LKK Auto)

Cc: SUR; CS A Team

Subject: SHF429X

Hi Steve,

Attached herewith the repair estimate of SHF 429X having Case No: TAX/09/19/2095.

There is no change to the approved amount of \$2,600 @ 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/ARC/Taxis)

Sent: Wednesday, 9 October 2019 1:12 PM

To: Yeo Poh Suan (Auto Svcs/ARC/ARC/Taxis)

Subject: Scan Data from FX-D421D6



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/INC19017005/Evf3e2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 14-10-2019	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLS 851T	Veh. Inspected	SHF 429X	
Policy No.	5108124166	Coverage (\$)	0.00	
Claim No.	MT/1064115-002	Excess (\$)	0.00	
Assign From		Assign Date	26/09/2019	
2. Vehicle Particulars & Condition				
Make & Model	LONDON TAXI TX4	c.c	2499	
Engine No.	HIDDEN	Year of Reg.	2013	
Chassis No.	LJU97C7B8DS000221	Colour	WHITE	
Odometer	565378	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	175 R16C	AUSTONE	5 mm	
L/H Front Tyre	175 R16C	AUSTONE	5 mm	
R/H Rear Tyre	175 R16C	AUSTONE	5 mm	
L/H Rear Tyre	175 R16C	AUSTONE	5 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	25/09/2019	Inspection Date	26/09/2019	
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:		4 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. SHF 429X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	DOOR ASSY FRONT RH (DISC 10%)	DENTED	2,536.93	2,283.24
1	HINGE ASSY-FRT DOOR RH	SERVICEABLE	108.61	-
1	FENDER ASSEMBLY-FRON RH	TO REPAIR SEE LABOUR	591.36	-
1	SILL OUTER RH	TO REPAIR SEE LABOUR	382.46	-
			3,619.36	2,283.24
LABOUR				
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF FENDER ASSEMBLY-FRON RH AND SILL OUTER RH.		845.00	300.00
	SPRAY PAINT.		936.00	550.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.		100.00	20.00
	TO TRANSFER DOOR MECHANISM.		120.00	30.00
	TO REMOVE AND REFIT WIRE HARDESS.		200.00	20.00
	TO REPLACE SUNDRY PARTS.		100.00	20.00
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			2,361.00	940.00
GRAND TOTAL			5,980.36	3,223.24
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				2,600.00

Report Ref No. NS/INC19017005/Evf3e2

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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