

Signature

Steve

REF:

NTUC

NS/INC20000631/Eq32

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:

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 Report:

Consistent? : Yes or No

GIA / PP. Seen:

Consistent? : Yes or No

Est. Repairs:

7 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:

SG17524

Yr Regn:

13/6/18

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

Truck / Trailer or

Make:

MAN A22

c.c

10518

Colour

MAN - total green

AVC:

Insured / Std / NI / NA

Sp. Reading

098537

T/Radio: Insured / Std / NI / NA

Eng/No:

CiNo:

WMAA22226JF006852

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:

275/70 R22.5

R:

16

(D)

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

TOYO / YOKO or

FIRENZA

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

21/12/19

D.O.I.

21/12/19

Survey held at

SMRT

Dos. of Damages: Frt / Rear / O/S / NIS / UIC / Rooftop or

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

Date / Time

Action / Instruction

SG17524 - NBA/INC19022464/h4

SG1902M - NBA/INC19022464/h4

Firth \$1,080.60, 2 days (Catharine) Cred \$1443.18, 57%

DOA: 21/12/2019

DOA: 21/12/2019

RECEIVED 05 FEB 2020

Date/Time, File Pass to?

☐

: Proll. Report

11/05/2019

☐

: Final Report

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Insp (\$

☐

: Weekend (\$

Report Format:

TP

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

1080.60

Days Of Repair:

2

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

\$ + RS. - SI

Pickup:

Others:

TOTAL

Shiau Chan (LKKAUTO)

From: MTCL@income.com.sg
Sent: Wednesday, 5 February 2020 11:12 AM
To: Shiau Chan (LKKAUTO)
Subject: RE: REQUEST CLAIMS NUMBER

Dear Sir/Mdm,

We have registered the claim.

Please refer below

Best regards

Diana Tay
Senior Admin Assistant
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: Shiau Chan (LKKAUTO) [mailto:siewsc@lkkauto.com]
Sent: Wednesday, 5 February 2020 9:49 AM
To: MTCL@income.com.sg
Subject: REQUEST CLAIMS NUMBER

Dear Sir/Madam,

Please refer to the below:

TP Claims against NTUC Income: Follow-Through Survey

Date : 5/2/2020

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D:
1	MT/1079756-002	SMRT TAXIS PTE LTD	SHB 5406A	SLQ 4604A	
2	MT/1076926-002	SMRT BUSES LTD	SG 1752U	SJP 1902M	

"Wishing you a Happy and Prosperous Lunar New Year"

[My Desktop](#)[Notice of Loss](#)**Policy Query**

Policy No. Date of Accident
Vehicle No.(For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5107303770		CARCHOPE	53358915X	GPC	Third Party	SJP1902M	SJP1902M	30/01/2019	12/03/2020

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	27/12/2019 10:34
Date Of Accident	21/12/2019 10:05
Exact Location Of Accident	BUKIT BATOK WEST AVENUE 5-BEF BS:43571 (OPP BUKIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SG1752U
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	1XXXXX292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

Vehicle Particulars

Manufacturer	MAN
Model	MAN NL320F (A22)

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-19093203MFBR
Cover Note Number	

Driver

Name of Driver	LEONG CHING PENG (LIANG QINGPENG)
NRIC No	SXXXX944H
Date Of Birth	17/05/1971
Occupation	OUTDOOR
Date Of Driving Pass	01/12/2000
Driving Experience	19 YEARS AND 0 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 - OPENING DOOR OF VEHICLE

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) 30

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

While my bus SG1752U was travelling along Bukit Batok West Avenue 5 - bef BS: 43571 (Opp Bt Gombak Stn), the left center portion of the bus was hit by the opening right rear door of a private car (SJP1902M). No injury reported. Bus rear door emergency cover cracked, body scratched and dented. After exchange particular, I continue revenue service from the scene. Private car SJP1902M-damage: right rear door damage. That's all.

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 SJP1902M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver QUAH LYE SENG

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

No. Of Passenger (Including Driver) *

SG 17524
 PA7-30
 CUS/12/19/5036

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:



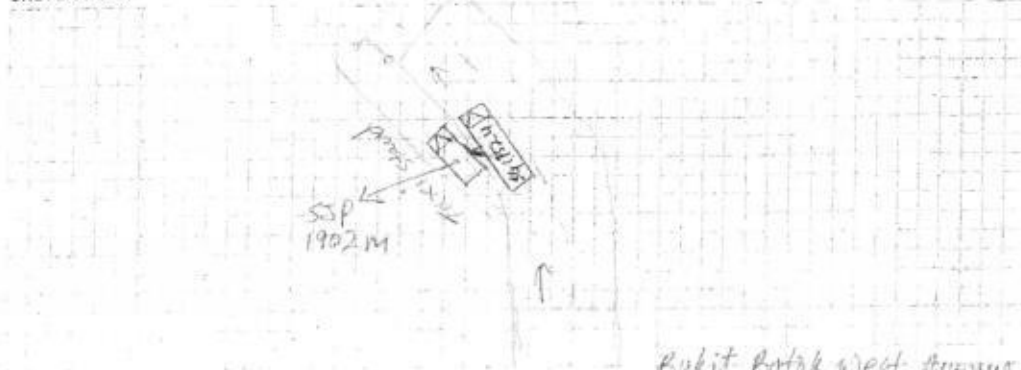
Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

Handwritten signature

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



SKETCH PLAN



Bukit Batok West Avenue 5-
tel 86:43571 Copp Bukit Gombak
(Sn)

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:	292D

Vehicle Details

Vehicle No.:	SG1752U
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Jan 2020
Vehicle Make:	MAN
Vehicle Model:	A22
Primary Colour:	Multicolor
Manufacturing Year:	2018
Engine No.:	50350160805017
Chassis No.:	WMAA22ZZ6JF006852
Maximum Power Output:	-
Open Market Value:	\$285,390.00
Original Registration Date:	13 Jun 2018
First Registration Date:	13 Jun 2018
Transfer Count:	1
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 10 Jan 2020

OK



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 : 09/01/2020

User ID : KimBock

Section A - Accident Details


Registration Number	SG1752U
Case Reference Number	BUS/12/19/5036
Registration Date	6/28/2018
Company Type	SMRT Buses Ltd
Make	MAN
Model	A22 MAN E6
Name of Driver	Leong Ching Peng
Type of Accident	Open Door Case
Accident Date and Time	12/21/2019 10:05 AM
Accident Reported Date and Time	12/21/2019 11:15 AM
Is Surveyor Required?	No
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	SG1752U-LEFT CENTER PORTION SJP1902M (TP) INSURED WITH NTUC
Prepared Date and Time	1/9/2020 11:58 AM
Chassis Number	WMAA22Z26JF006852
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	\$1,590.00	\$0.00
Total Spray Cost	\$602.00	\$0.00
Total Spare Part Cost	\$131.78	\$0.00
Total Other Cost	\$200.00	\$0.00
TOTAL COST	\$2,523.78	\$0.00
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	
Prepared / Adjusted By	Kim Bock Sim	
ARC / Surveyor Sign Off Date		
Signature		
Remarks		

Section C - Quotation and Accident Invoice Details

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


13/1/2020

Steve (LKK)

W/L PL

9/1/20, 2:00pm

2 dy

P/P

OK SJ



SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63685582
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672



Date Generated : 04/02/2020

User ID : CatherineLee

Section A - Accident Details

Registration Number	SG1752U
Case Reference Number	BUS/12/19/5036
Registration Date	28/6/2018
Company Type	SMRT Buses Ltd
Make	MAN
Model	A22 MAN E6
Name of Driver	Leong Ching Peng
Type of Accident	Open Door Case
Accident Date and Time	21/12/2019 10:05 AM
Accident Reported Date and Time	21/12/2019 11:15 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24105248
Special Instruction to ARC, if any	SG1752U-LEFT CENTER PORTION SJP1902M (TP) INSURED WITH NTUC
Prepared Date and Time	9/1/2020 11:58 AM
Chassis Number	WMAA22ZZ6JF006852
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	\$1,590.00	\$530.00
Total Spray Cost	\$602.00	\$432.00
Total Spare Part Cost	\$118.60	\$118.60
Total Other Cost	\$200.00	\$0.00
TOTAL COST	\$2,510.60	\$1,080.60
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	3.0	2.0
Prepared / Adjusted By	Jeong Choon Hwee	STEVE CHEN
ARC / Surveyor Sign Off Date	10/01/2020 11:28 AM	10/01/2020 3:39 PM
Signature		
Remarks		P/P

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 : 04/02/2020

User ID : CatherineLee

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REPAIR LH PORTION CENTER	\$1,590.00	\$530.00 /
Total Labour	\$1,590.00	\$530.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO PUTTY & RESPRAY	\$602.00	\$432.00 /
Total Spray Painting & Panel Beating	\$602.00	\$432.00

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
STICKER	\$200.00	\$0.00
Total Other Costs	\$200.00	\$0.00

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
			COVER WAY VALVE DOOR	1.00	\$131.78	10.00	\$118.60 /	Replace	Replace
Total					\$131.78		\$118.60		

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									




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/INC20000631/Eqd3s2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 06-02-2020	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SJP 1902M	Veh. Inspected	SG 1752U	
Policy No.	5107303770	Coverage (\$)	0.00	
Claim No.	MT/1076926-002	Excess (\$)	0.00	
Assign From		Assign Date	09/01/2020	
2. Vehicle Particulars & Condition				
Make & Model	MAN A22	c.c	10518	
Engine No.	HIDDEN	Year of Reg.	2018	
Chassis No.	WMAA22ZZ6JF006852	Colour	GREEN	
Odometer	098537	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	275/70 R22.5	FIRENZA	5 mm	
L/H Front Tyre	275/70 R22.5	FIRENZA	5 mm	
R/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	5/5 mm	
L/H Rear Tyre	275/70 R22.5 (D)	FIRENZA	5/5 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	21/12/2019	Inspection Date	09/01/2020	
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. SG 1752U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REPLACEMENT OF PARTS	BROKEN		
	COVER WAY VALVE DOOR		131.78	118.60
			131.78	118.60
	LABOUR			
	TO REPAIR LH PORTION CENTER.		1,590.00	530.00
	TO PUTTY & RESPRAY.		602.00	432.00
			2,192.00	962.00
GRAND TOTAL			2,323.78	1,080.60
RECOMMENDED COST OF REPAIRS (CONFIRMED)				1,080.60

Report Ref No. NS/INC20000631/Eqd3s2

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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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.