

ASS. REC. BY: Sun Pin

REF:

NTUC NS/INC 20000745 / Qvf307

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: GBG 3444YPolicy No. 5108472265 (03/04/2019 - 24/07/2020)Claims No. MT 1079265-005

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SG 6008 C Yr Regn: 27/11/2018Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: MANA45 c.c 10518Colour: Multicolour A/C: Insured / Std / NI / NASp. Reading 64863 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WMAA45ZZ2JP008045

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: 275 / 70 R22.5R: 275 / 70 R22.5

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

TOYO / YOKO or Fireenza

Front Rear

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 08/01/2020 D.O.I. 10/01/2020Survey held at SMRTDes. of Damages: Frnt / Rear / O/S / NIS / UIC / Rooftop or

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

Date / Time Action / Instruction

GBG 3444Y XSG 6008 C X

RECEIVED 11 FEB 2020

10/2/20 Confirm with Catherine

Finalize \$ 527 @ 1 day, (P/P) (Red 1230, 2019)

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

Date/Time, File Return to?

2) 11/2 - typistDays Of Repair: 1Resurvey No. of Trip: 1Survey Fee: 160

Transportation:

\$ + RS \$

Phone

Others

TOTAL

160Report Format: TPLump Sum / L.E.I. 527Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

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="08/01/2020 10:24"/>
Vehicle No.(For Motor)	<input type="text" value="GBG3444Y"/>	Certificate Number	<input type="text"/>

[Search](#)

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5108472265		SOON HOCK SPRINKLER SYSTEM PTE LTD	201434665R	GCV	Comprehensive	GBG3444Y	GBG3444Y	03/04/2019	24/07/2020

[Continue](#)

Veron Chen (LKKAUTO)

From: MTCL@income.com.sg
Sent: Tuesday, 11 February 2020 3:58 PM
To: Veron Chen (LKKAUTO)
Subject: FW: REQUEST FOR CLAIM NUMBER

Hi,

All 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: Tuesday, 11 February 2020 9:53 AM
To: MTCL@income.com.sg
Subject: REQUEST FOR CLAIM NUMBER

Dear Sir/Madam,

Kindly provides us claim number.

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle
1	MT/1081676-002	SMRT BUSES LTD	SG 1039X	SGD 8928S
2	MT/1079265-005	SMRT BUSES LTD	SG 6008C	GBG 3444Y

D.O.A	Time of Accident	Estimate	Tentative repair cost
23/1/2020	21:20	\$25,370.98	\$8,000.00
8/1/2020	14:20	\$1,757.00	\$527.00

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.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 292D

Vehicle Details

Vehicle No.: SG6008C

Vehicle to be Exported: No

Intended Deregistration Date: 13 Jan 2020

Vehicle Make: MAN

Vehicle Model: A95

Primary Colour: Multicolor

Manufacturing Year: 2018

Engine No.: 50351281735129

Chassis No.: WMAA95ZZ2JF008045

Maximum Power Output: -

Open Market Value: \$418,244.00

Original Registration Date: 27 Nov 2018

First Registration Date: 27 Nov 2018

Transfer Count: 0

Actual ARF Paid: \$0.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Rebate Amount: \$0.00

Total Rebate Amount: \$0.00

The information contained herein is correct as at 13 Jan 2020

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	10/01/2020 08:51
Date Of Accident	08/01/2020 14:20
Exact Location Of Accident	BT BATOK WEST AVE 5 - AFT BS: 43521 (BT BATOK DRIV
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SG6008C
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 A95
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	BUS

Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-19093203MFBP
Cover Note Number	

Driver

Name of Driver	MOHD REDWAN BIN BUANG
Passport No/FIN	GXXXX323R
Date Of Birth	21/08/1981
Occupation	OUTDOOR
Date Of Driving Pass	28/09/2015
Driving Experience	4 YEARS AND 3 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 - 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? 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) 51

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name 20 CHAO CHU KANG STREET 52 #01-02 SINGAPORE 689286

Police Station Address ROAD: 20 CHAO CHU KANG STREET 52 #01-02 SINGAPORE 689286 , POSTCODE: 689286 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/2020010821334 On 08/01/2020 at about 1350hrs, I was travelling along Bukit Batok West Avenue 5 towards Brickland Rd LP7. When I parked my bus at the bus stop in front of Bukit Batok Driving Centre, I alighted my passengers and left the bus stop. There was a garbage truck in front of my bus stop as such I filter out to his right and went straight. Out of a sudden, a lorry (GBG3444Y) in front of the garbage truck did a U-turn and I could not brake in time as such collided onto the lorry's right rear side. In the midst of my braking, three of my passengers fell inside my bus as such I activated ambulance as one of the passenger was pregnant. I would like to state that the garbage truck was blocking my vision as such I did not see the lorry making a U-turn. Subsequently both me and the lorry driver stopped and exchanged our particulars and he left the scene prior to police arrival. RIMS REPORT NO. 249728 BC reported that while travelling along Bt Batok West Ave 5 - aft BS: 43521 (Bt Batok Driving Ctr), front right portion of the bus had hit into right rear body of a private lorry. A Malay female pax aged 32 had fell while standing onboard the bus. BC attended to the pax but pax declined ambulance assistance. BC informed BOCC of the accident and was instructed to exchange particulars. After exchanging particulars, BC reconfirmed with the pax if she needed ambulance assistance. Pax then informed BC that she was pregnant. Ambulance, Police and Field Team were activated. After paramedic's assessment, pax was conveyed conscious to NUH. At 1542h, after police investigation, bus was released from the scene. Bus was arranged to RTD to KJD.

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 GBG3444Y

Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver MASUM SHEKH
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name MUHAMAD DAYYAN RAFIQI BIN MUHD RIZAL
Approximate Age
Injuries Sustain
Injured person in which vehicle? SG6008C
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

DETAILS OF INJURED PERSON 2

Name NURDIANA BINTE DOL PATAH
Approximate Age
Injuries Sustain
Injured person in which vehicle? SG6008C
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

DETAILS OF INJURED PERSON 3

Name MUHAMAD DANI RAQIB BIN MUHD RIZAL
Approximate Age
Injuries Sustain
Injured person in which vehicle? SG6008C
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

SKETCH PLAN

NRIC/01/20/5013

SG60080

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:

[Signature]

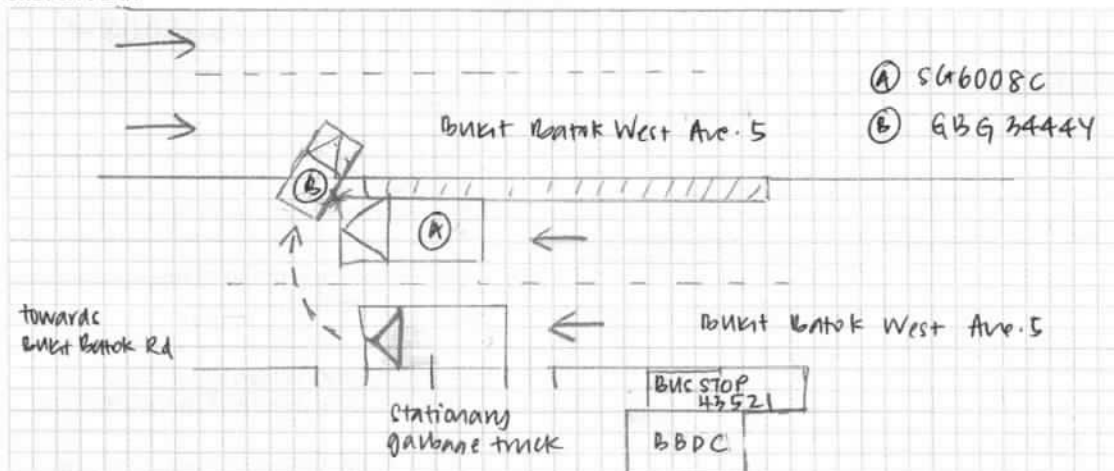
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

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 Channel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 3



**SINGAPORE
POLICE FORCE**



T/20200108/2134

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

1 of 4

Report No. T/20200108/2134

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2020 17:08		Vide Report No.: J/20200108/0084		Station Diary No.: 90	
Informant's Particulars					
Name of Informant: MOHD REDWAN BIN BUANG			Address:		
ID Type / ID No.: FIN NO / G2696323R			Contact No.: Home/Office: Mobile: 0197765635		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 38	Date of Birth: 21/08/1981	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: SMRT BUS DRIVER			Driving Licence Information: Class: 2B,3,4A Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 08/01/2020 14:20	Type of Location: Straight Road
Location: Along Road 1 BRICKLAND ROAD BUKIT BATOK WEST AVE 5 TOWARDS BRICKLAND ROAD LP7 Lamp Post Number: 7				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG3444Y	Lorry	TOYOTA	DYNA 150 5MT	Silver	Slightly Damaged	1
SG6008C	Bus/Coach/Minibus	MAN	A95	Multi-Colored	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Sketch Plan Pg. 4



**SINGAPORE
POLICE FORCE**



T/20200108/2134

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

2 of 4

Report No. T/20200108/2134

CONTINUATION OF REPORT

Passenger			
Name	MUHAMAD DAYYAN RAFIQI BIN MUHD RIZAL	ID No.	T1327838A
Related Vehicle	SG6008C (Bus/Coach/Minibus)	Contact No.	NIL
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	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	Slight
Driver			
Name	MOHD REDWAN BIN BUANG (BC)	ID No.	G2696323R
Related Vehicle	SG6008C (Bus/Coach/Minibus)	Contact No.	0197765635
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	NURDIANA BINTE DOL PATAH	ID No.	S8728415H
Related Vehicle	SG6008C (Bus/Coach/Minibus)	Contact No.	87553409
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	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	Slight
Passenger			
Name	MUHAMAD DANI RAQIB BIN MUHD RIZAL	ID No.	T1136850B
Related Vehicle	SG6008C (Bus/Coach/Minibus)	Contact No.	NIL
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	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	Slight



**SINGAPORE
POLICE FORCE**



T/20200108/2134

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

3 of 4

Report No. T/20200108/2134

CONTINUATION OF REPORT

Brief Details.

On 08/01/2020 at about 1350hrs, I was travelling along Bukit Batok West Avenue 5 towards Brickland Rd LP7. When I parked my bus at the bus stop in front of Bukit Batok Driving Centre, I alighted my passengers and left the bus stop. There was a garbage truck in front of my bus stop as such I filter out to his right and went straight. Out of a sudden, a lorry (GBG3444Y) in front of the garbage truck did a U-turn and I could not brake in time as such collided onto the lorry's right rear side. In the midst of my braking, three of my passengers fell inside my bus as such I activated ambulance as one of the passenger was pregnant. I would like to state that the garbage truck was blocking my vision as such I did not see the lorry making a U-turn. Subsequently both me and the lorry driver stopped and exchanged our particulars and he left the scene prior to police arrival.



**SINGAPORE
POLICE FORCE**



T/20200108/2134

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

4 of 4

Report No. T/20200108/2134

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 1



Signature Of Interpreter:
Not applicable

SIGNATURE

Signature Of Informant:

Date/Time:
08/01/2020 17:08

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD
YUSOF
Contact No.: 65476358

Authentication Stamp
NP168

Classification Of Case:



Case Details

Case Reference Number : BUS/01/20/5013

Type of Repair : Accident Repair

Vehicle Registration Number : SG6008C

Company Type : SMRT Buses Ltd

Estimation ID : EST-10088-ID

Assigned By : Bus Claims Manager Team

Insurance Company Name : NTUC Income Insurance Co-operative Ltd

Accident Date and Time : 08/01/2020 06:20 AM

Vehicle Age(In Months) : 14

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
Standard	Main			FRP HEADLAMP COVER O/S	1	795.00	795.00	100.00	0.00	Repair	1	0.00	Repair	
Total Spare Part Cost									0.00		Surveyor Total		0.00	
Lump Sum Discount (%)									0.00		Lump Sum Dis (%)		0	
Final Spare Part Cost									0.00		Final Sur Total		0.00	

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT PORTION RH	530.00	265	
Total:			530.00	265.00	

Spray Cost Detail



S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO PUTTY & RESPRAY	432.00	262	
Total:			432.00	262.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
Total:			0.00	0.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	0.00	0.00
Total Labour Cost	530.00	265.00

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Total Spray Painting	432.00	262.00
Other	0.00	0.00
Overall Total	962.00	527.00
Lump Sum Repair Option	<input type="checkbox"/>	<input type="checkbox"/>
Lump Sum Total	0.00	527.00
Surveyor Approved Amount		527.00
No of Repair Days*	2	1
Remarks	-	Surveyor Remarks
Surveyor Name		Sun Pin (LKK)
Signature		 13/1/2020
Survey Date	10/01/2020	<input type="button" value="Save"/> <input type="button" value="Clear"/>

Repair day 1 day

P/P Repair

before paint photo.

Sun Pin (LKK)

10/01/2020.

TP without prejudice.

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:





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 : 10/02/2020

User ID : CatherineLee

Section A - Accident Details	
Registration Number	SG6008C
Case Reference Number	BUS/01/20/5013
Registration Date	27/11/2018
Company Type	SMRT Buses Ltd
Make	MAN
Model	MAN A95 EU6
Name of Driver	Mohd Redwan Bin Buang
Type of Accident	Head to Rear
Accident Date and Time	8/1/2020 2:20 PM
Accident Reported Date and Time	9/1/2020 11:45 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24105261
Special Instruction to ARC, if any	SG6008C - FRONT PORTION GBG3444Y (TP) - INSURED WITH NTUC
Prepared Date and Time	10/1/2020 11:14 AM
Chassis Number	WMAA95ZZ2JF008045
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	\$530.00	\$265.00
Total Spray Cost	\$432.00	\$262.00
Total Spare Part Cost	\$0.00	\$0.00
Total Other Cost	\$0.00	\$0.00
TOTAL COST	\$962.00	\$527.00
Lump Sum Total	\$0.00	\$0.00
Number of Repair Days	2.0	1.0
Prepared / Adjusted By	Jeong Choon Hwee	Sun Pin (LKK)
ARC / Surveyor Sign Off Date	10/01/2020 11:25 AM	10/01/2020 2:45 PM
Signature		
Remarks		

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



SMRT Accident Vehicle Repair Estimates

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

Date Generated : 10/02/2020

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 FRONT PORTION RH	\$530.00	\$265.00
Total Labour	\$530.00	\$265.00

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
TO PUTTY & RESPRAY	\$432.00	\$262.00
Total Spray Painting & Panel Beating	\$432.00	\$262.00

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

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

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
			FRP HEADLAMP COVER O/S	1.00	\$795.00	100.00	\$0.00	Repair	Repair
Total					\$795.00		\$0.00		

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									

1757

Oi Sun Pin (LKK Auto)

From: Oi Sun Pin (LKK Auto)
Sent: Monday, 10 February, 2020 6:33 PM
To: 'Catherine Lee Sau Chan (Auto Svcs/ARC/ARC/Buses)'
Subject: RE: Finalisation - SG6008C (BUS/01/20/5013) - NTUC

Hi Catherine,

Confirm the finalize amount \$527. Repair day 1 day under part by part repair.

Thank you.

Best Regards,

Oi Sun Pin | Assistant Automotive Assessor

LKK Auto Consultants

Phone: 6256 3561 | Email: Sunpin@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Catherine Lee Sau Chan (Auto Svcs/ARC/ARC/Buses) [<mailto:catherineleesc@smrt.com.sg>]
Sent: Monday, 10 February, 2020 11:44 AM
To: Oi Sun Pin (LKK Auto); SUR; Admin A
Cc: Koo Yew Chung (Auto Svcs/ARC/ARC); AutoSvs-ARC (Bus)
Subject: Finalisation - SG6008C (BUS/01/20/5013) - NTUC

Hi Sun Pin,

Attached herewith our copy of the bus repair estimate for the case.
Our finalised amount is \$527.00 @ 1 working day under part by part repair. Attached after repair photos for your perusal.

Please confirm the COR by return email ASAP.

Thank you

Best Regards
Catherine Lee
SMRT Automotive Services Pte Ltd
(Accident Repair Centre)
DID: 6866 2669 Fax: 6368 5592
catherineleesc@smrt.com.sg






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/INC20000745/Qvf3e2				
73 BRAS BASAH ROAD #05-01 NTUC TRADE UNION HOUSESINGAPORE 189556			Date: 12-02-2020	
Code: INC4				
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBG 3444Y	Veh. Inspected	SG 6008C	
Policy No.	5108472265	Coverage (\$)	0.00	
Claim No.	MT/1079265-005	Excess (\$)	0.00	
Assign From		Assign Date	10/01/2020	
2. Vehicle Particulars & Condition				
Make & Model	MAN A95	c.c	10518	
Engine No.	HIDDEN	Year of Reg.	2018	
Chassis No.	WMAA95ZZ2JF008045	Colour	MULTI COLOUR	
Odometer	64863	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
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	FIRENZA	5 mm	
L/H Rear Tyre	275/70 R22.5	FIRENZA	5 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	08/01/2020	Inspection Date	10/01/2020	
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:		1 Working Days		



National Assessment Centre Services

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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SG 6008C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REPLACEMENT OF PARTS	TO REPAIR SEE LABOUR		
	FRP HEADLAMP COVER O/S		795.00	-
			795.00	-
	LABOUR			
	TO REPAIR FRONT PORTION RH.		530.00	265.00
	TO PUTTY & RESPRAY.		432.00	262.00
			962.00	527.00
GRAND TOTAL			1,757.00	527.00
RECOMMENDED COST OF REPAIRS (CONFIRMED)				527.00

Report Ref No. NS/INC20000745/Qvf3e2

OI SUN PIN

Asst. 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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