

[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"/>	5099165522-02		NG JUN WEI	S9702159G	GMC	Third Party	FBG4996P	FBG4996P	21/03/2020	20/03/2021

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	369K
Vehicle Details	
Vehicle No.:	SHF489Y
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Mar 2020
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR1428717
Chassis No.:	JTDKN36U105751892
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	30 Sep 2014
First Registration Date:	30 Sep 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Sep 2022
PARF Rebate Amount:	\$5,661.00
Intended COE Rebate Details	
COE Expiry Date:	29 Sep 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,704.00
COE Rebate Amount:	\$15,827.00
Total Rebate Amount:	\$21,488.00
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 31 Mar 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	30/03/2020 10:47
Date Of Accident	29/03/2020 10:10
Exact Location Of Accident	KJE/BKE /SLE TOWARDS WOODLANDS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF489Y
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	1XXXXX369K
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	MOHAMED ZAHRI BIN ONAN
NRIC No	SXXXX481D
Date Of Birth	23/05/1954
Occupation	OUTDOOR
Date Of Driving Pass	10/10/1983
Driving Experience	36 YEARS AND 5 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)	2
Passenger 1	NAME: : UNKNOWN CHINESE GENDER: : MALE

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 BKE /SLE TOWARDS WOODLANDS WITH ONE PASSENGER (MALE CHINESE) ON BOARD. A VEHICLE INFRONT OF MY TAXI STOPPED AND I FOLLOWED AS WELL. AFTER WHICH I FELT AN IMPACT AT THE REAR RIGHT PORTION OF MY TAXI. A MOTORCYCLE HAD COLLIDED ONTO THE REAR LEFT 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	FBG4996P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Hand-drawn sketch of a road layout. The sketch shows a road with multiple lanes. Labels include:

- PIE
- BKE
- KSE
- SHF 4897
- FBG 4996 P

The sketch also includes a small diagram of a road intersection or junction.

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.

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

Driver's Signature _____ 20.3.20
(If driver is not the policyholder)
Date & Time: _____

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Sketch Plan Pg. 2

SKETCH PLAN

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**


I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

30.3.20 
Driver's Signature
(If driver is not the policyholder)
Date & Time:


30/3/2020
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



Case Details

Case Reference Number :

TAX/03/20/2089

Type of Repair : Accident Repair

Vehicle Registration Number : SHF489Y

Company Type : SMRT Taxis Pte Ltd

Estimation ID : EST-11019-ID

Assigned By : Taxi Claims Manager Team

Insurance Company Name : NTUC Income Insurance Co-operative Ltd

Accident Date and Time : 29/03/2020 02:10 AM

Vehicle Age(In Months) : 66

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			MOULDING BODY, LH	1	673.60	673.60	25.00	505.20	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Giv	X N/A
One Time Key In	Main			DOOR RR/LH	1	954.50	954.50	25.00	715.88	Replace	<input type="text" value="1"/>	<input type="text" value="0.00"/>	Repair	X R
One Time Key In	Main			PIXEL STICKER	1	60.00	60.00	0.00	60.00	Replace	<input type="text" value="1"/>	<input type="text" value="60.00"/>	Replace	/ MC
One Time Key In	Main			FENDER RR/LH	1	766.80	766.80	25.00	575.10	Replace	<input type="text" value="1"/>	<input type="text" value="0.00"/>	Repair	X R
One Time Key In	Main			SMRT LOGO	1	7.80	7.80	0.00	7.80	Replace	<input type="text" value="1"/>	<input type="text" value="7.80"/>	Replace	/ MC
One Time Key In	Main			STICKER DECAL 6555 8888	1	21.60	21.60	0.00	21.60	Replace	<input type="text" value="1"/>	<input type="text" value="21.60"/>	Replace	/ MC
One Time Key In	Main			FENDER LINER RR/LH	1	141.30	141.30	25.00	105.98	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Giv	X N/A
One Time Key In	Main			QUARTER GLASS RR/LH	1	168.10	168.10	25.00	126.07	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Giv	X N/A
One Time Key In	Main			LID ASSY, FUEL	1	102.00	102.00	25.00	76.50	Replace	<input type="text" value="1"/>	<input type="text" value="0.00"/>	Repair	X R
One Time Key In	Main			STICKER PETROL ONLY	1	7.80	7.80	0.00	7.80	Replace	<input type="text" value="1"/>	<input type="text" value="7.80"/>	Replace	/ MC

Total Spare Part Cost 4,584.84

Surveyor Total 650.76

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20.00

Final Spare Part Cost 3,667.87

Final Sur Total 520.61

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			SEALANT W/SCREEN	1	37.00	37.00	0.00	37.00	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
One Time Key In	Main			TAIL LAMP LH	1	548.40	548.40	10.00	493.56	Replace	<input type="text" value="1"/>	<input type="text" value="493.56"/>	Replace <input type="text" value="v"/>	/ BR
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
One Time Key In	Main			WHEEL DISC	1	1,490.20	1,490.20	25.00	1,117.65	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
One Time Key In	Main			BUMPER REAR	1	458.60	458.60	25.00	343.95	Replace	<input type="text" value="1"/>	<input type="text" value="0.00"/>	Repair <input type="text" value="v"/>	X R
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
One Time Key In	Main			PIXEL STICKER	1	60.00	60.00	0.00	60.00	Replace	<input type="text" value="1"/>	<input type="text" value="60.00"/>	Replace <input type="text" value="v"/>	/ N/A
One Time Key In	Main			BUMPER LIP COVER RR/LH	1	72.20	72.20	25.00	54.15	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
One Time Key In	Main			BUMPER SEAL, RR LH	1	88.90	88.90	25.00	66.68	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
One Time Key In	Main			BUMPER SIDE RETAINER RR/LH	1	94.80	94.80	25.00	71.10	Replace	<input type="text" value="0"/>	<input type="text" value="0.00"/>	Not Givn <input type="text" value="v"/>	X N/A
Total Spare Part Cost									4,584.84	Surveyor Total		650.76		
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)		<input type="text" value="20.00"/>		
Final Spare Part Cost									3,667.87	Final Sur Total		520.61		

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR LH REAR PORTION	845.00	400.00	
Total:			845.00	400.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESRAY REAR DOOR LH	378.00	200.00	
Total:			1,674.00	650.00	


S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
2	Main	TO RESPRAY ROCKER PANEL MOULDING	180.00	0.00	
3	Main	TO RESPRAY REAR FENDER LH	378.00	200.00	
4	Main	TO RESPRAY RIM	180.00	0.00	
5	Main	TO RESPRAY REAR BUMPER	378.00	200.00	
6	Main	TO RESPRAY FUEL LID COVER	180.00	50.00	
Total:			1,674.00	650.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20.00	✓ / N/C
2	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0.00	
3	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	0.00	
4	Main	TO REMOVE / REFIT SEAT	120.00	0.00	
5	Main	TO REMOVE & REFIT FUEL TANK	120.00	0.00	
6	Main	TO PROVIDE LABOUR & MATERIAL FOR SOLAR FILM (NET)	125.00	0.00	
7	Main	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	0.00	
8	Main	TO REMOVE & REFIT REAR QUARTER GLASS LH	120.00	0.00	
9	Main	TO REPLACE SUNDRY PARTS	100.00	0.00	
10	Main	TO WASH AND VACUUM	60.00	0.00	
Total:			1,065.00	20.00	

Summary

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Total Spare Part Detail	3,667.87	520.61
Total Labour Cost	845.00	400.00
Total Spray Painting	1,674.00	650.00
Other	1,065.00	20.00

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Overall Total	7,251.87	1,590.61
Lump Sum Repair Option	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	7,250.00	1,600.00
Surveyor Approved Amount		1,600.00
No of Repair Days*	6	3
Remarks	-	L/S repair, take after spray
Surveyor Name		STEVE CHEN
Signature		
Survey Date	31/03/2020	

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: