



[> Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	369K
<b>Vehicle Details</b>	
Vehicle No.:	SHC4412H
Vehicle to be Exported:	No
Intended Deregistration Date:	04 May 2020
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2013
Engine No.:	2ZR1326168
Chassis No.:	JTDKN36U305721454
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$33,120.00
Original Registration Date:	13 Jan 2014
First Registration Date:	13 Jan 2014
Transfer Count:	0
Actual ARF Paid:	\$8,368.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	12 Jan 2022
PARF Rebate Amount:	\$5,439.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	12 Jan 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$60,888.00
COE Rebate Amount:	\$12,848.00
<b>Total Rebate Amount:</b>	<b>\$18,287.00</b>
<b>Message</b>	
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 04 May 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	15/04/2020 13:14
Date Of Accident	14/04/2020 08:10
Exact Location Of Accident	SENG KANG EAST DRIVE TOWARDS PUNGGOL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4412H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	1XXXXX369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-800000000

### 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	NO
Policy Number	D-20095484MFSH
Cover Note Number	

### Driver

Name of Driver	MOY KIM HOONG
NRIC No	SXXXX606Z
Date Of Birth	06/10/1972
Occupation	OUTDOOR
Date Of Driving Pass	02/04/1993
Driving Experience	27 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 102C  
 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 COLLISION - CROSS JUNCTION  
 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) 2  
 Passenger 1  
 NAME: : NEO GHUI PHENG  
 GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name TRAFFIC POLICE DIVISION HQ  
 Police Station Address ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 65470000 - FAX NO:  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

REFER TO POLICE REPORT T/20200415/7002 ON 14/04/2020 AT AROUND 0808HRS. I WAS DRIVING SMRT MAROON TAXI BEARING REGISTRATION PLATE NUMBER SHC4412H ALONG SENG KANG EAST DRIVE MIDDLE LANE TOWARDS PUNGGOL. AT THE CROSS JUNCTION OF SENG KANG EAST DRIVE AND SENG KANG EAST AVE, THE TRAFFIC LIGHT WAS GREEN, I CONTINUE DRIVING TOWARDS PINGGOL. SUDDENLY I FELT AN IMPACT COMING FROM THE FRONT RIGHT SIDE OF MY TAXI. LATER, AFTER ALIGHTING, I REALISED THAT ONE SILVER COLOURED MAZDA CAR BEARING SLL3761L HAS COLLIDED ONTO MY TAXI FRONT RIGHT PORTION WITH HIS CAR FRONT PORTION AS HE WAS MAKING A RIGHT TURN INTO SENG KANG EAST AVENUE. THE CAR MOST LIKELY DID NOT SEE THE ON COMING TRAFFIC AS HE WAS MAKING A RIGHT TURN. MY WIFE WAS MY PASSENGER AT THE POINT OF TIME. DUE TO THE ACCIDENT, TRAFFIC POLICE AND AMBULANCE ALSO CAME AND MYSELF AND THE OTHER DRIVER WAS CONVEYED TO SENG KANG HOSPITAL. I WAS HOSPITALIZED AND DISCHARGED ON THE SAME DAY AND GIVEN 3 DAYS HL/MC. MY WIFE WAS DISCHARGED YESTERDAY. DUE TO THE ACCIDENT, MY FRONT RIGHT PORTION OF MY TAXI WAS HEAVILY DENTED AND FRONT RIGHT HEAD LIGHT WAS SMASHED. DUE TO THE ACCIDENT, I FELT STRAIN AT MY NECK AND SHOULDERS AREA. I HAVE AN IN CAR CAMERA INSTALLED IN THE TAXI. THE TRAFFIC POLICE HAVE TAKEN THE SD CARD FROM ME FOR INVESTIGATION 1 FEMALE PASSENGER - WIFE. VEHICLE TOWED TO TP COMPOUND

#### Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SLL3761L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN KIA PENG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF INJURED PERSON 1**

Name	MOY KIM HOONG
Approximate Age	48
Injuries Sustain	
Injured person in which vehicle?	SHC4412H
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	102C
Postcode	823102

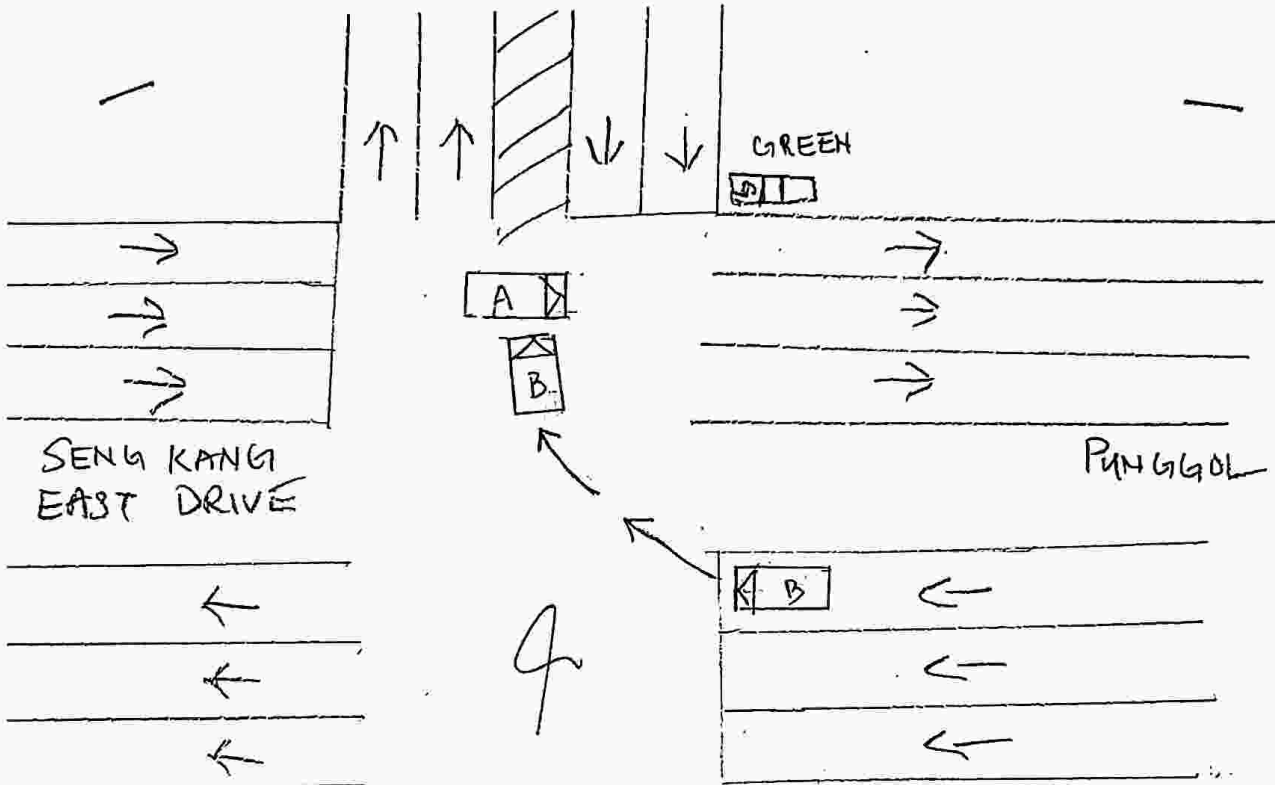
**DETAILS OF INJURED PERSON 2**

Name	NEO CHUI PHENG
Approximate Age	47
Injuries Sustain	
Injured person in which vehicle?	SHC4412H
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	102C
Postcode	823102

**DETAILS OF INJURED PERSON 3**

Name	TAN KIA PENG
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SLL3761L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

Sketch Plan Pg. 1



A - SAC4412H - 1 Female PAX - WIFE

B - SLL3761L

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 arrangements for the recovery of my vehicle;

(ii) handling my claims and/or dealing with my insurer;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) settling my claims (including the making of compromise offers, settlement of claims, payment of claims to me, which could involve disclosure of certain personal data about me to bring about delivery of the claim as well as on the internal costs of processing/mail package); and/or

(v) any other purpose which may be required by the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority.

(b) I agree to provide my personal data/personal information to the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority for the purpose(s) stated in (a) above.

(c) I agree to provide my personal data/personal information to the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority for the purpose(s) stated in (a) above.

(d) I agree to provide my personal data/personal information to the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority for the purpose(s) stated in (a) above.

(e) I agree to provide my personal data/personal information to the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority for the purpose(s) stated in (a) above.

(f) I agree to provide my personal data/personal information to the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority for the purpose(s) stated in (a) above.

(g) I agree to provide my personal data/personal information to the Insurers, the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority for the purpose(s) stated in (a) above.



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 #3 Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20200415/7002

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 4

Report No. T/20200415/7002

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/04/2020 10:38		Vide Report No.: F/20200414/0074		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: MOY KIM HOONG			Address: 102C PUNGGOL FIELD #07-414 SINGAPORE 823102		
ID Type / ID No.: NRIC NO / S7238606Z			Contact No.: Home/Office: Mobile: 98950206		
Nationality: SINGAPORE CITIZEN			Email: shenrb@singnet.com.sg		
Sex: Male	Age: 47	Date of Birth: 06/10/1972	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3		Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/04/2020 08:08	Type of Location: X-Junction
Location:  Seng Kang East Drive				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		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
SHC4412H	TAXI	TOYOTA	PRIUS	Red	Seriously Damaged	1
SLL3761L	Car	MAZDA	3	Silver	Seriously Damaged	0

## Details of Person Involved

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



Sketch Plan #3 Pg. 2



**SINGAPORE  
POLICE FORCE**



T/20200415/7002

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 4  
Report No. T/20200415/7002

CONTINUATION OF REPORT

<b>Driver</b>			
Name	MOY KIM HOONG	ID No.	S7238606Z
Related Vehicle	SHC4412H (TAXI)	Contact No.	98950206
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	14/04/2020	Date Discharge	14/04/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Driver</b>			
Name	TAN KIA PENG	ID No.	S1689043Z
Related Vehicle	SHC4412H (TAXI) SLL3761L	Contact No.	97616863
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Passenger</b>			
Name	NEO CHUI PHENG	ID No.	S7318917I
Related Vehicle	SHC4412H (TAXI)	Contact No.	98397339
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/04/2020	Date Discharge	14/04/2020
No. of Days granted Medical Leave	03	Degree of Injury	NIL

Brief Details.

On 14/04/2020 at around 0808hrs, I was driving SMRT Maroon taxi bearing registration plate number SHC4412H along Seng Kang East Drive middle lane towards punggol. At the cross junction of Seng Kang East Drive and Seng Kang East Ave, the traffic light was green, I continue driving towards punggol.

Suddenly, I felt an Impact coming from the front right side of my taxi. Later, after alighting, I realised that one Silver colored Mazda car bearing SLL3761L had collided onto my taxi front right portion with his car front portion as he was making a right turn into Seng Kang East Avenue. The car most likely did not see the oncoming traffic as he was making a right turn. My wife was my passenger at that point of time.

Due to the accident, traffic police and ambulance also came and myself, my wife and the other driver was conveyed to Seng Kang Hospital. I was hospitalized and discharged on the same day and



**SINGAPORE  
POLICE FORCE**



T/20200415/7002

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 4

Report No. T/20200415/7002

**CONTINUATION OF REPORT**

given 3 days HL/MC. My wife was discharged yesterday also.

Due to the accident, my front right portion of my taxi was heavily dented and front right head light was smashed.

Due to the accident, I felt strain at my neck and shoulders area.

I have an in car camera installed in the taxi. The traffic police have taken the SD card from me for investigation.



**SINGAPORE  
POLICE FORCE**



T/20200415/7002

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20200415/7002

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
RASHIDAH BINTE AZMAN  
Contact No.: 65476216

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
15/04/2020 10:38

Classification Of Case:

## POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20200416/2012

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

1 of 4

Report No. T/20200416/2012

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/04/2020 10:17		Vide Report No.: T/20200415/7002		Station Diary No.: 17
<b>Informant's Particulars</b>				
Name of Informant: MOY KIM HOONG		Address: APT BLK 102C PUNGGOL FIELD #07-414 SINGAPORE 823102		
ID Type / ID No.: NRIC NO / S7238606Z		Contact No.: Home/Office: Mobile: 98950206		
Nationality: SINGAPORE CITIZEN		Email: shencp@singnet.com.sg		
Sex: Male	Age: 47	Date of Birth: 06/10/1972	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Taxi Driver		Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/04/2020 08:10	Type of Location: X-Junction
Location: Along Road 1 SENGKANG EAST DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHC4412H	Taxi	TOYOTA	PRIUS	Maroon	Seriously Damaged	1
SLL3761L	Car	MAZDA	3	Silver	Seriously Damaged	0

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

**POLICE REPORT Pg. 2**



**SINGAPORE  
POLICE FORCE**



T/20200416/2012

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

2 of 4  
Report No. T/20200416/2012

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	MOY KIM HOONG	ID No.	S7238606Z
Related Vehicle	SHC4412H (Taxi)	Contact No.	98950206
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	14/04/2020	Date Discharge	14/04/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Driver</b>			
Name	TAN KIA PENG	ID No.	S1689043Z
Related Vehicle	SLL3761L (Car)	Contact No.	97616863
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 14/04/2020 @ at around 0806hrs, I was driving SMRT Maroon taxi bearing registration plate number SHC4412H along Sengkang East Drive middle lane towards pungol. At the cross junction of Sengkang East Drive and Sengkang East Ave, the traffic light was green, I continue driving towards punggol.

Suddenly, I felt an impact coming from the front right side of my taxi. Later, after alighting, I realized that one Silver colored Mazda car bearing SLL3761L had collided onto my taxi front right portion with his car front portion as he was making a right turn into Sengkang East Avenue. The car most likely did not see the oncoming traffic as he was making a right turn. My wife was my passenger at that point of time.

Due to the accident, traffic police and ambulance also came and myself, my wife and the other driver was conveyed to Sengkang Hospital. I was hospitalized and discharged on the same day and given 3 days HL/MC. My wife was discharged yesterday also.

Due to the accident, my front right portion of my taxi was heavily dented and front right head light was smashed

Due to the accident, I felt strain at my neck and shoulders area.

I have an in car camera installed in the taxi. The traffic police have taken the SD card from me for investigation.

POLICE REPORT Pg. 3



**SINGAPORE  
POLICE FORCE**



T/20200416/2012

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

3 of 4

Report No. T/20200416/2012

CONTINUATION OF REPORT

POLICE REPORT Pg. 4



**SINGAPORE  
POLICE FORCE**



T/20200416/2012

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

4 of 4

Report No. T/20200416/2012

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:

G /  
Sgt 2 MUHAMMAD SAIFUL BAKHRI BIN  
RAZALI

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

TP / GIT /  
Sgt 3 RASHIDAH BINTE AZMAN  
Contact No.: 65476216

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

16/04/2020 10:17

Classification Of Case:



## Case Details

Case Reference Number : TAX/04/20/2019  
 Type of Repair : Accident Repair  
 Vehicle Registration Number : SHC4412H

Company Type : SMRT Taxis Pte Ltd  
 Estimation ID : EST-11325-ID  
 Assigned By : Taxi Claims Manager Team

Insurance Company Name : MSIG Insurance (S) Pte Ltd  
 Accident Date and Time : 14/04/2020 12:08 AM  
 Vehicle Age(In Months) : 75

## Documents / Photographs

[View Documents / Photographs](#)

Total Documents: 0

## Estimation Details

### Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation					Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Approval		Remarks
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)					Surveyor Quantity	Surveyor Final Price(\$)	
One Time Key In	Main			STICKER DECAL SMRT (DOOR)	1	60.00	60.00	0.00	60.00	Replace	1	60.00	Replace	✓ Nec
One Time Key In	Main			PILLAR, FR BODY	1	363.10	363.10	30.00	254.17	Replace	1	0	Repair	✓ XR
One Time Key In	Main			FENDER PROTECTOR FRT/RH UPPER	1	46.10	46.10	30.00	32.27	Replace	0	0	Check	✓ XMC
One Time Key In	Main			FENDER LINER PAD, FR WHEEL RH	1	49.30	49.30	30.00	34.51	Replace	0	0	Check	✓ XMC
One Time Key In	Main			FENDER APRON SUB FRT/RH	1	637.80	637.80	30.00	446.46	Replace	1	446.46	Replace	✓ BT
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Not Giv	✓ X SMC
One Time Key In	Main			SENSOR, SPEED, FR RH	1	446.50	446.50	10.00	401.85	Replace	0	0	Check	✓ X SMC
One Time Key In	Main			SEALANT W/SCREEN	1	37.00	37.00	0.00	37.00	Replace	0	0	Check	✓ X SMC
One Time Key In	Main			WHEEL HUB FRT	1	549.70	549.70	30.00	384.79	Replace	0	0	Check	✓ X SMC
One Time Key In	Main			WIPER GARNISH COVER, RH	1	23.80	23.80	30.00	16.66	Replace	0	0	Check	✓ X SMC
One Time Key In	Main			SUPPORT SUB-ASSY	1	1,460.40	1,460.40	30.00	1,022.28	Replace	1	1,022.28	Replace	✓ BY
One Time Key In	Main			WIPER WASHER INLET	1	36.90	36.90	30.00	25.83	Replace	0	0	Check	✓ X SMC
One Time Key In	Main			MOTOR NO:1, WIPER WASHER JAR	1	239.00	239.00	10.00	215.10	Replace	0	0	Check	✓ X SMC

Total Spare Part Cost 18,143.88

Surveyor Total 4,878.79

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 15,315.10

Final Sur Total 3,903.03



BOM Type	Coating Type	Portion	Material Number	SMRT Recommendation							Surveyor Approval			
				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			MOTOR NO:2, WIPER WASHER JAR	1	240.00	240.00	10.00	216.00	Replace	0	0	Check	X SUC
One Time Key In	Main			COOLANT	1	12.32	12.32	0.00	12.32	Replace	1	12.32	Replace	Nec
One Time Key In	Main			INLET ASSY, AIR	1	232.50	232.50	30.00	162.75	Replace	0	0	Check	X SUC
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	30.00	11.27	Replace	10	11.27	Replace	Nec
One Time Key In	Main			COVER, FR BUMPER HOLE RH	1	18.50	18.50	30.00	12.95	Replace	1	12.95	Replace	SCH
One Time Key In	Main			WIRE, ENGINE ROOM, NO.3	1	242.00	242.00	10.00	217.80	Replace	0	0	Not Give	X SUC
One Time Key In	Main			BRACKET, FR TURN UPPER RH	1	58.20	58.20	30.00	40.74	Replace	0	0	Check	X SUC
One Time Key In	Main			BRACKET, FR TURN	1	58.20	58.20	30.00	40.74	Replace	0	0	Check	X SUC
One Time Key In	Main			BRACKET, FR TURN LOWER RH	1	26.00	26.00	30.00	18.20	Replace	0	0	Check	X SUC
One Time Key In	Main			COVER, RADIATOR	1	122.80	122.80	30.00	85.96	Replace	0	0	Check	X SUC
One Time Key In	Main			STICKER DECAL SMRT (DOOR)	1	60.00	60.00	0.00	60.00	Replace	0	0	Not Give	X SUC
Standard	Main		6505528	DOOR FRT/RH	1	894.40	894.40	30.00	626.08	Replace	1	0	Repair	X R
Standard	Main		6505484	HINGE LOWER RH, DOOR	1	90.10	90.10	30.00	63.07	Replace	0	0	Check	X SUC
Standard	Main		6505482	DOOR HINGE UPPER FRT/RH	1	80.50	80.50	30.00	56.35	Replace	0	0	Check	X SUC
Standard	Main		6506195	CHECK ASSY, FR DOOR,	1	150.30	150.30	30.00	105.21	Replace	0	0	Check	X SUC
Standard	Main		6505466	MIRROR LAMP RH	1	65.30	65.30	10.00	58.77	Replace	0	0	Not Give	X SUC
Standard	Main		6505598	COVER, OUTER MIRROR, RH	1	107.40	107.40	30.00	75.18	Replace	0	0	Not Give	X SUC
Standard	Main		6505557	FENDER FRT/RH	1	723.40	723.40	30.00	506.38	Replace	1	506.38	Replace	CHY
Standard	Main		6505640	NAME PLATE (HYBRID)	1	51.90	51.90	30.00	36.33	Replace	1	36.33	Replace	Nec
Standard	Main		6505552	FENDER SEAL TO COWL SIDE RH	1	15.20	15.20	30.00	10.64	Replace	0	0	Check	X SUC
Standard	Main		6505560	FENDER PROTECTOR FRT/RH SIDE	1	113.90	113.90	30.00	79.73	Replace	0	0	Check	X SUC
Standard	Main		6505553	FENDER LINER FRT/RH	1	171.70	171.70	30.00	120.19	Replace	1	120.19	Replace	CHY

Total Spare Part Cost 19,143.88

Surveyor Total 4,878.79

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 15,315.10

Final Sur Total 3,903.03

SMRT Recommendation											Surveyor Approval		
BOM Type	Coating 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		6505563	FENDER APRON FRT/RH	1	168.10	168.10	30.00	117.67	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505658	WHEEL DISC. FRONT	1	1,484.20	1,484.20	30.00	1,038.94	Replace	1	0	Repair <input checked="" type="checkbox"/> R
Standard	Main		6505524	QUARTER GLASS FRT/RH	1	234.90	234.90	30.00	164.43	Replace	0	0	Not Giv <input checked="" type="checkbox"/> SUC
Standard	Main		6505606	MOULDING BODY, RH	1	673.60	673.60	30.00	471.52	Replace	1	0	Repair <input checked="" type="checkbox"/> R
Standard	Main		6505337	SHOCK ABSORBER FRT/RH	1	394.20	394.20	30.00	275.94	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505339	SHOCK ABSORBER MOUNTNG FRT, RH/LH	1	193.80	193.80	30.00	135.66	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6506611	SHOCK ABSORBER BEARING, FRT LH/RH	1	34.00	34.00	30.00	23.80	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505731	LOWER ARM FRT/RH	1	625.90	625.90	30.00	438.13	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505335	JOINT ASSY,LWR BALL	1	195.60	195.60	30.00	136.92	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505354	TIE ROD END RH	1	159.30	159.30	30.00	111.51	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505555	HOOD PANEL	1	748.10	748.10	30.00	523.67	Replace	1	523.67	Replace <input checked="" type="checkbox"/> BT
Standard	Main		6505570	HOOD HINGE LH	1	55.90	55.90	30.00	39.13	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505569	HOOD HINGE RH	1	55.90	55.90	30.00	39.13	Replace	1	39.13	Replace <input checked="" type="checkbox"/> BT
Standard	Main		6505571	HOOD LOCK	1	128.90	128.90	30.00	90.23	Replace	0	0	Not Giv <input checked="" type="checkbox"/> SUC
Standard	Main		6505437	HEAD LAMP RH	1	945.20	945.20	10.00	850.68	Replace	1	850.68	Replace <input checked="" type="checkbox"/> SUC
Standard	Main		6505596	WIPER WASHER JAR	1	180.10	180.10	30.00	126.07	Replace	1	126.07	Replace <input checked="" type="checkbox"/> SUC
Standard	Main		6506201	RADIATOR HOSE, BYPASS NO.1	1	37.20	37.20	30.00	26.04	Replace	0	0	Not Giv <input checked="" type="checkbox"/> SUC
Standard	Main		6505310	COOLANT RESERVE TANK	1	395.30	395.30	30.00	276.71	Replace	1	276.71	Replace <input checked="" type="checkbox"/> CRU
Standard	Main		6505759	WIRE, ENGINE ROOM	1	5,567.10	5,567.10	10.00	5,010.39	Replace	0	0	Not Giv <input checked="" type="checkbox"/> SUC
Standard	Main		6505517	BUMPER FRT	1	482.00	482.00	30.00	337.40	Replace	1	337.40	Replace <input checked="" type="checkbox"/> CRU
Standard	Main		6505515	BUMPER SUPPORT F/RH	1	76.40	76.40	30.00	53.48	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505518	BUMPER ENERGY ABSORBER FRT	1	78.80	78.80	30.00	55.16	Replace	0	0	Check <input checked="" type="checkbox"/> SUC
Standard	Main		6505539	BUMPER REINFORCEMENT FRT	1	498.40	498.40	30.00	348.88	Replace	0	0	Check <input checked="" type="checkbox"/> SUC

Total Spare Part Cost 19,143.88

Surveyor Total 4,878.79

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 15,315.10

Final Sur Total 3,903.03

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		6505543	ARM SUB-ASSY,FR BUMPER RH	1	250.40	250.40	30.00	175.28	Replace	0	0	Check	X Svc
Standard	Main		6505541	BUMPER GRILLE SUB-ASSY,LOWER	1	311.10	311.10	30.00	217.77	Replace	0	0	Check	X Svc
Standard	Main		6505439	FOG LAMP RH	1	295.20	295.20	10.00	265.68	Replace	0	0	Check	X Svc
Standard	Main		6505459	LENS & BODY, FR TURN RH	1	511.80	511.80	10.00	460.62	Replace	1	460.62	Replace	CRU
Standard	Main		6505638	EMBLEM FRONT	1	66.50	66.50	30.00	60.55	Replace	0	0	Not Giv	X Svc
Standard	Main		6505519	HOOD END PANEL SEAL	1	35.50	35.50	30.00	24.85	Replace	0	0	Not Giv	X Svc
Standard	Main		6505573	GRILLE, RADIATOR	1	310.60	310.60	30.00	217.42	Replace	0	0	Check	X Svc
Standard	Main		6505616	BUMPER LIP FRT	1	139.60	139.60	30.00	97.72	Replace	0	0	Check	X Svc
Standard	Main		6505540	BUMPER FRT ABSORBER LOWER	1	127.70	127.70	30.00	89.39	Replace	0	0	Check	X Svc
Standard	Main		6505558	FENDER FRT/LH	1	723.40	723.40	30.00	506.38	Replace	1	0	Repair	X R.
Standard	Main		6505640	NAME PLATE (HYBRID)	1	51.90	51.90	30.00	36.33	Replace	1	36.33	Replace	NEC
Standard	Main		6505529	DOOR FRT/LH	1	894.40	894.40	30.00	626.08	Replace	0	0	Not Giv	X Svc
Total Spare Part Cost									19,143.88	Surveyor Total 4,878.79				
Lump Sum Discount (%)									20.00	Lump Sum Dis (%) 20				
Final Spare Part Cost									15,315.10	Final Sur Total 3,903.03				

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT RH PORTION	1,014.00	900	
Total:			1,014.00	900.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY FRONT DOOR RH	378.00	200	
2	Main	TO RESPRAY ROCKER PANEL MOULDING	180.00	100	
3	Main	TO RESPRAY FRONT FENDER RH	378.00	200	
4	Main	TO REPSRAY FRONT BUMPER	378.00	200	
Total:			2,628.00	1,200.00	

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
5	Main	TO REPSRAY FRONT HOOD	378.00	200	
6	Main	TO RESPRAY FRONT FENDER LH	378.00	200	
7	Main	TO RESPRAY FRONT SUPPORT PANEL	180.00	100	
8	Main	TO RESPRAY FRONT DOOR LH	378.00	0	
<b>Total:</b>			<b>2,628.00</b>	<b>1,200.00</b>	

**Other Cost Detail**

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TOWING CHARGE	56.00	0	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20	
3	Main	TO PROVIDE LABOUR & MATERIAL FOR SOLAR FILM (NET)	125.00	0	
4	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60	
5	Main	TO REMOVE AND REFIT FRF UNDER CARRIAGE	120.00	60	
6	Main	TO REMOVE AND REFIX ENGINE WIRE HARDNESS	200.00	20	
7	Main	TO TRANSFER DOOR MECHANISM	120.00	0	
8	Main	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	20	
9	Main	TO REMOVE AND REFIT TYRE	120.00	0	
10	Main	TO REPLACE SUNDRY PARTS	100.00	0	
11	Main	TO WASH AND VACUUM	60.00	0	
12	Main	TO REMOVE & REFIX FAN ENGINE & RADIATOR ASSY & INNER COOLER & AIR CON CONDENSER	120.00	120.00	
<b>Total:</b>			<b>1,341.00</b>	<b>300.00</b>	

**Summary**

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Total Spare Part Detail	15,315.10	3,903.03
Total Labour Cost	1,014.00	900.00
Total Spray Painting	2,628.00	1,200.00

4/30/2020

https://vacswb.smrt.com.sg/Estimation.aspx

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Other	1,341.00	300.00
Overall Total	20,298.10	6,303.03
Lump Sum Repair Option	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	20,300.00	6,300.00
Surveyor Approved Amount		6,300.00
No of Repair Days*	7	5 <i>5 days</i>
Remarks	-	L/S, after paint photo.
Surveyor Name		Sun Pin (LKK)
Signature		
Survey Date	30/04/2020	

**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: