

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

TAX INVOICE

EQ INSURANCE COMPANY LTD

5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEX

SINGAPORE 069110

INV No. AC2100242

INV Date 13/01/2021

Reference CC3/EQI20012367/Qqf3e2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SHB 5306E

Insured Veh. SLT 147M

Claim No. DM20HO01652-JG

Policy No. DMPPHQ20-006961

Accident Date 06/11/2020

Inspection Date 09/11/2020

Description	Total
Survey Inspection	230.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	230.00
GST (7%)	16.10
Grand Total	246.10

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

KHM



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		Affiliated to Federation Internation	nale Des Experts En A	Automol	bile
	EQ INSURANCE C	COMPANY LTD	F	Ref:	CC3/EQI20012367/Qqf3e2
	5 MAXWELL ROAI #17-00 TOWER BL MND COMPLEXSI			Date:	13/01/2021
			(Code:	EQI
1.		Policy Particulars :	:- THIRD PARTY	CLAIM	
	Insured Veh.	SLT 147M	Veh. Inspected		SHB 5306E
	Policy No.	DMPPHQ20-006961	Coverage (\$)		0.00
	Claim No.	DM20HO01652-JG	Excess (\$)		0.00
	Assign From		Assign Date		09/11/2020
2.		Vehicle Partic	culars & Conditio	n	
	Make & Model	TOYOTA PRIUS	c.c		1798
	Engine No.	HIDDEN	Year of Reg.		2017
	Chassis No.	JTDKB3FU203573253	Colour		MAROON
	Odometer	-	Steering		IN ORDER
	Brakes	IN ORDER	Modification		SPORTS RIM
	General	FAIR			
3.		Condition	ons of Tyres		
		Size	Make		Balance
	R/H Front Tyre	195/65 R15	SAILUN		6 mm
	L/H Front Tyre	195/65 R15	SAILUN		6 mm
	R/H Rear Tyre	195/65 R15	SAILUN		6 mm
	L/H Rear Tyre	195/65 R15	SAILUN		6 mm
4.		Description	on of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE O/S	BODY.		
	DAMAGES SEE D	ETAILS.			
5.		General	Information		
	Accident Date	06/11/2020	Inspection Date	!	09/11/2020
	Survey held at	SMRT AUTOMOTIVE SERVICES	S PTE LTD		
		60 WOODLANDS INDUSTRIAL I	PARK E4 SINGAPO	RE 757	7705
5a.		Re	emarks		
		ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W			
5b.		Estimate I	Days of Repair		
	ESTIMATED NORI	MAL PERIOD FOR REPAIR:	4	4 Worki	ng Days
	•				



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 5306E

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	COVER, FR BUMPER (DISC 25%)	CRUMPLED	495.50	371.63
1	COVER, FR BUMPER RH (DISC 25%)	MISSING	28.10	21.08
10	CLIPS PIECE, FRT & RR BUMPER @\$1.50 (DISC 25%)	NECESSARY	15.00	11.25
1	EMBLEM ASSY FRONT (DISC 25%)	NECESSARY	87.10	65.33
1	SUPPORT, FR BUMPER RH (DISC 25%)	BROKEN	76.90	57.68
1	WIPER WASHER JAR (DISC 25%)	CRUMPLED	183.60	137.70
1	FENDER SUB-ASSY, FR, RH (DISC 25%)	DENTED	933.10	699.83
1	EMBLEM, SIDE PANEL (HYBRID) (DISC 25%)	NECESSARY	52.90	39.68
1	CAP SUB-ASSY, WHEEL (DISC 25%)	SCRATCHED	175.80	131.85
1	GRILLE SUB-ASSY (DISC 25%) (ADDITIONAL)	CUT	335.60	251.70
1	GRILLE, RADIATOR (DISC 25%) (ADDITIONAL)	CRUMPLED	165.00	123.75
1	REINFORCEMENT FRONT LOWER (DISC 25%) (ADDITIONAL)	CRUMPLED	238.50	178.88
1	EXTENSION SUBASSY, RH (DISC 25%) (ADDITIONAL)	BENT	116.30	87.23
1	SUPPORT, RADIATOR UPPER RH (DISC 25%) (ADDITIONAL)	BENT	76.70	57.53
1	LAMP ASSY, FOG, RH (DISC 10%)	CRUMPLED	910.20	819.18
1	UNIT, HEADLAMP, RH (DISC 10%)	CRUMPLED	2,558.90	2,303.01
1	GRILLE SUB-ASSY	SERVICEABLE	335.60	-
1	GRILLE, RADIATOR	SERVICEABLE	165.00	-
1	SEAL, HOOD TO FR END	SERVICEABLE	24.40	-
1	ABSORBER, FR BUMPER	SERVICEABLE	70.30	-
1	REINFORCEMENT FRONT UPPER	SERVICEABLE	691.10	-
1	ABSORBER, FR BUMPER LOWER	SERVICEABLE	117.00	-
1	REINFORCEMENT FRONT LOWER	SERVICEABLE	238.50	-
1	EXTENSION SUBASSY, LH	SERVICEABLE	116.30	-
1	EXTENSION SUBASSY, RH	SERVICEABLE	116.30	-
1	SUPPORT, FR BUMPER LH	SERVICEABLE	82.30	-
1	COVER ASSY, ENGINE	SERVICEABLE	180.10	-
1	HINGE ASSY, HOOD, LH	SERVICEABLE	57.00	-
1	HINGE ASSY, HOOD, RH	SERVICEABLE	57.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	LOCK ASSY, HOOD	SERVICEABLE	131.10	-
1	CABLE ASSY, HOOD	SERVICEABLE	53.20	-
1	COVER, RADIATOR	SERVICEABLE	227.80	-
1	SUPPORT S/A RH	SERVICEABLE	237.00	-
1	SUPPORT, RADIATOR UPPER RH	SERVICEABLE	76.70	-
1	COMPUTER SUB-ASSY, HEADLAMP, RH NO.1	SERVICEABLE	486.40	-
1	SEAL SUB-ASSY, RH	SERVICEABLE	50.20	-
1	WIPER WASHER INLET	SERVICEABLE	55.40	-
1	MOTOR AND PUMP ASSY, WINDSHIELD WASHER	SERVICEABLE	245.00	-
1	LINER, FR FENDER, RH	SERVICEABLE	198.40	-
1	TYRE	SERVICEABLE	126.74	-
1	WHEEL, DISC FRONT	SERVICEABLE	1,555.10	-
1	BRACE SUB-ASSY, FENDER APRON, RH	SERVICEABLE	282.70	-
1	HOOD SUB-ASSY	TO REPAIR SEE LABOUR	938.40	-
			13,364.24	5,357.31
	<u>LABOUR</u>			
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF HOOD SUB-ASSY.		845.00	400.00
	SPRAY PAINT.		1,854.00	600.00
	TO CHECK WIRING AND SYSTEM FUNCTION.		80.00	20.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.		120.00	30.00
	TO DO WHEEL ALIGNMENT / TYRE BALANCING.	NOT NECESSARY	120.00	-
	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE).	NOT NECESSARY	120.00	-
	TO REMOVE & REFIX FAN ENGINE & RADIATOR ASSY & INNER COOLER & AIR CON CONDENSER.	NOT NECESSARY	120.00	-
	TO REMOVE AND REFIT WIRE HARDESS.	NOT NECESSARY	200.00	-
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			3,619.00	1,050.00
	GRAND TOTAL		16,983.24	6,407.31

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RECOMMENDED COST OF LUMP SUM REPAIRS		5,350.00
(TO ITS PRE-ACCIDENT CONDITION)		

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Ja

OI SUN PIN

Asst. Automotive Assessor

X.S.

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

F. Q (14c)

MSR120098310 / SMRT Automotive Services Pte Ltd - Woodlands ENTRY DATE & TIME: 07/11/2020 09:37 SUBMITTED BY: B. Thaiyal Nayagi

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding 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.

AC	CCI	D	Ħ١	т	ST	ΑТ	ΕW	ΕN	ĮΤ
	-		-		,		_		

Date Of Report 07/11/2020 09:37

Date Of Accident 06/11/2020 21:40

Exact Location Of Accident ORCHARD TURN TOWARDS WISMA

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB5306E

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

Fleet Policy

YES

Policy Number

D-20095484MFSH

Cover Note Number

Driver

Name of Driver MUHAMMAD REDHA BIN JASNI

NRIC No SXXXX404G
Date Of Birth 16/05/1983
Occupation OUTDOOR
Date Of Driving Pass 15/01/2004

Driving Experience 16 YEARS AND 9 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 - RELIEF

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

I WAS TRAVELLING ALONG ORCHARD TURN TOWARDS WISMA AND THE TRAFFIC WAS IN MY FAVOUR. AS SUCH I WAS PROCEEDING STRAIGHT. SUDDENLY I FELT AN IMPACT AT THE RIGHT FRONT PORTION OF MY TAXI. A VEHICLE SLT147M WAS EXITING THE CAR PARK OF TAKASHIMAYA WITHOUT PROPER LOOKOUT AND COLLIDED ONTO THE RIGHT FRONT PORTION OF MY TAXI.

1

NO

NO

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLT147M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver NG CHONG SENG

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

	Sketch	Plan Pg. 1	The second secon
A S		/-	WISMA NAYA
CAKP	ARK.		A: SHB 5306E B: SLT 147 M
DECLARATION I/We declare the foregoing particul Policyholder's Signature Date & Time:	//	.2020	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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:

- 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)
 - (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
- (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
- 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.
- 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.
- 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:

.11.2020

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

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

Contractor.	WEGA ENGINEERII	NG PTE LTD	
Accident Case Number	1AX/11/20/2012.	Date of Collection	10/11/10
Vehicle No	SHB 5306E	Date of Request	1111120
Vehicle Model	20407A PRING 4	Number of Days to Extend	20A45

REQUEST FOR SUPPLYMENT PARTS

1 days

S/N	Number photos	Part Description	Quantity	Unit Price
1	4072,75,74,75	Grille Sul, Assy	·	# 335.60 / Cur
2	4090191,92193			
3	4081,82,83	Brille Radiator		\$165.00/CR
4	4084,85,86	Reinforcement Port Lower		\$ 23850 / CR
5	4087,88,89	Extension Sil Assy RH		H 116.30 / 13
6		Support Radiator upper RH		\$ 76.70 /B
7				
8				

		<< <please ph<="" submit="" th=""><th>otographs for damage</th><th>ed parts>>></th></please>	otographs for damage	ed parts>>>
(Name)	CHIA			N. 4.
Position)	ADVISOR	- 4	4	
o solemn	ly and sincerely	declare that:- Supplementary	Parts are raised for replac	ement for the aforesald vehicle.
		Coll	Signature of perso	n making this declaration

[To be signed in front of an authorised witness]

I acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the damages of perjury.

Acknowledge By	ARC Executive / Supervisor / SA	
Approval By	Surveyor / In-house Staff	
Parts Ordering	SMRT Store / Contractor Supply / Form 22 / WOC	Form22 / PO / WOC/ Reservation / Number
Photo Submitted SMRT Staff	7-	Date of submission



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PHOTOGRAPHS FOR VEHICLE NO. SHB 5306E

INSPECTION















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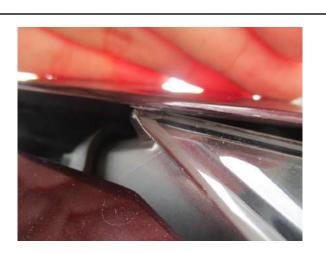














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RE-INSPECTION















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