

A.S.S. REC. BY: Sun Pin.

REF:

EG

CC3/EQI20012647/Qqf3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: SG 5752Tat Workshop m/s SMRT

of _____

Insured: SKA 8908T

Policy No. _____

Claims No. DM20HO01657/SG

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

XXXX	
N/S	O/S

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 6 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 5752T Yr Regn: 2-7/04/2016Type: M.Car / M.Cycle ☒ Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: MAN A95 c.c. 10518Colour: Multicolour A/C: Insured / Std / NI / NASp. Reading: 354018 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WMH445226G7003188Gen. Cond: Good / ☒ Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD ☒ A/Rim orTyre Size: F: 275/70 R22.5R: 275/70 R22.6

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

TOYO / YOKO or Fireenza

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 01/11/2020D.O.I. 11/11/2020Survey held at SMRTDes. of Damages ☒ Frt / ☐ Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

17/11/20@5.18pm Email GIA, police report & estimate and revised to EQI.

19/4/21@3.49pm Sun Pin finalised L/S \$11,200; 6 repair days.

(RED \$6742.88; 38%)

Date/Time, File Pass to?

☐

: Preli. Report

1) 19/4 TYPIST

☐

: Final Report

Date/Time, File Return to?

2)

Rep. Format: TPLump Sum / \$11,200.00Days Of Repair: 6Resurvey No. of Trip: 1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	292D
Vehicle Details	
Vehicle No.:	SG5752T
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Nov 2020
Vehicle Make:	MAN
Vehicle Model:	A95
Primary Colour:	Multicolor
Manufacturing Year:	2015
Engine No.:	50343152214320
Chassis No.:	WMAA95ZZ6G7003188
Maximum Power Output:	-
Open Market Value:	\$596,095.00
Original Registration Date:	27 Apr 2016
First Registration Date:	27 Apr 2016
Transfer Count:	1
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 13 Nov 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	10/11/2020 11:51
Date Of Accident	07/11/2020 11:30
Exact Location Of Accident	ALONG TPE (AFTER BS:55289-LENTOR AVENUE-LP94)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SG5752T
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-20095488MFBP
Cover Note Number	

Driver

Name of Driver	CHONG ONG NGE
NRIC No	SXXXX066I
Date Of Birth	21/07/1954
Occupation	OUTDOOR
Date Of Driving Pass	11/05/1979
Driving Experience	41 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
E-Mail 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 SIDE SWIPE

Weather Conditions RAINING

Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle) involved in the accident 3

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) 70

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-8522999 - FAX NO: 68522239

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Police Report No, T/20201107/2100 On the 07/11/2020 at about 11:30am, I was the bus captain for bus service 969, I was driving bus registration number SG5752T on the extreme left lane along TPE going towards Changi. It was raining and the road was wet. When the bus I was driving went past the Jalan Kayu flyover, a Car(SKA8908T, BMW blue in colour) suddenly spins out of control from somewhere at the right lane and hit straight into the front of my bus and skidded to the road shoulder. I actually tried to brake hard to prevent collision with the car but was unable to stop my bus from the impact. I was carrying about 70 passenger in the bus, 3 female passengers on my bus got hurt from the impact. Two of the three passenger that was hurt was convey to hospital via the ambulance. I was not injured. The bus front portion was badly damaged and the front door dropped. The police and ambulance came. I gave my statement to the traffic police and was advised to make a traffic accident report. The car ended up crashing at the road shoulder barrier while a lorry(YN4838D) which had collided with the car was seen at the centre divider.

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 SKA8908T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name EQ INSURANCE COMPANY LTD
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number YN4838D
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name UNKNOWN CHINESE
Approximate Age 30
Injuries Sustain
Injured person in which vehicle? SG5752T
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

DETAILS OF INJURED PERSON 2

Name UNKNOWN CHINESE
Approximate Age 50
Injuries Sustain
Injured person in which vehicle? SG5752T
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

DETAILS OF INJURED PERSON 3

Name UNKNOWN CHINESE
Approximate Age 60
Injuries Sustain
Injured person in which vehicle? SG5752T
Were seat belts worn? NO
Was this injured conveyed to hospital by ambulance? NO
Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN

SG 5752 T
pax = 70
Bus/11/20/1006

IMPORTANT NOTICE

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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
 - (i) to all insurers and/or any other third parties that assist regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders.



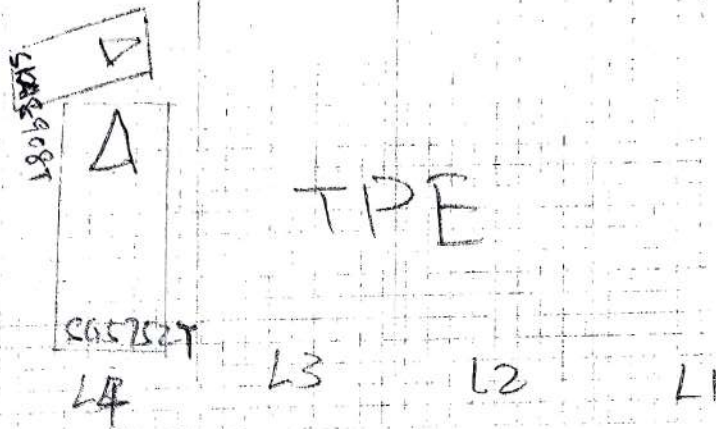
Policyholder's Signature
Date & Time:

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



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

SKETCH PLAN





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Along TPE (after BS:55289 - Lenter Avenue - LP94)

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 Pg. 3



**SINGAPORE
POLICE FORCE**



T/20201107/2100

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

1 of 3
Report No. T/20201107/2100

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/11/2020 19:37		Vide Report No.: F/20201107/0141		Station Diary No.: 81
Informant's Particulars				
Name of Informant: CHONG ONG NGE		Address: 760872		
ID Type / ID No.: NRIC NO /		Contact No.: Home/Office: Mobile:		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 66	Date of Birth:	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: BUS CAPTAIN		Driving Licence Information: Class: 3,4		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/11/2020 11:35	Type of Location: Straight Road
Location: TAMPINES EXPRESSWAY				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SG5752T	Bus/Coach/Minibus				Seriously Damaged	70
SKA8908T	Car	BMW		Blue	Seriously Damaged	0
YN4838D	Lorry				Slightly Damaged	2



**SINGAPORE
POLICE FORCE**



T/20201107/2100

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

2 of 3
Report No. T/20201107/2100

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHONG ONG NGE	ID No.	
Related Vehicle	SG5752T (Bus/Coach/Minibus)	Contact No.	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 07/11/2020 at about 11:30am, I was the bus captain for bus service 969, I was driving bus registration number SG5752T on the extreme left lane along TPE going towards Changi. It was raining and the road was wet. When the bus I was driving went past the Jalan Kayu flyover, a Car(SKA8908T, BMW blue in colour) suddenly spins out of control from somewhere at the right lane and hit straight into the front of my bus and skidded to the road shoulder. I actually tried to brake hard to prevent collision with the car but was unable to stop my bus from the impact. I was carrying about 70 passenger in the bus, 3 female passengers on my bus got hurt from the impact. Two of the three passenger that was hurt was convey to hospital via the ambulance.

I was not injured. The bus front portion was badly damaged and the front door dropped. The police and ambulance came. I gave my statement to the traffic police and was advised to make a traffic accident report. The car ended up crashing at the road shoulder barrier while a lorry(YN4838D) which had collided with the car was seen at the centre divider.



**SINGAPORE
POLICE FORCE**



T/20201107/2100

Police Station Of Origin:
Yishun South N.P.C
32 Yishun Street 81 SINGAPORE 768456
Tel No: 1800-8522999

3 of 3
Report No. T/20201107/2100

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: L / SI MOHAMAD FAIZAL BIN SIKEN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/11/2020 19:37
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SYED MUHAMMAD BIN SYED FARID ALBAR Contact No.: 65476200	Classification Of Case:
Authentication Stamp NP168	SN 130



Singapore Police Force

Sketch Plan Pg. 6



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 : 11/11/2020

User ID : BoonChewTay

Section A - Accident Details

Registration Number	SG5752T
Case Reference Number	BUS/11/20/1006
Registration Date	17/8/2016
Company Type	SMRT Buses Ltd
Make	MAN
Model	A95
Name of Driver	Chong Ong Nge
Type of Accident	Side Swipe
Accident Date and Time	7/11/2020 11:33 AM
Accident Reported Date and Time	7/11/2020 2:15 PM
Is Surveyor Required?	No
Survey by	
Vehicle Is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	
Special Instruction to ARC, if any	SG5752T-FRONT PORTION AND FRONT DOOR DROPPED SKA8906T (TP) INSURED WITH EQ
Prepared Date and Time	10/11/2020 4:52 PM
Chassis Number	WMAA95ZZ6G7003188
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	\$3,180.00	\$0.00
total Spray Cost	\$1,048.00	\$0.00
total Spare Part Cost	\$9,934.57	\$0.00
total Other Cost	\$0.00	\$0.00
TOTAL COST	\$14,162.57	\$0.00
Lump Sum Total	\$14,150.00	\$0.00
Number of Repair Days	7.0	
Prepared / Adjusted By	Boon Chew Tay	
ARC / Surveyor Sign Off Date	10/11/2020 6:14 PM	
Signature		<input checked="" type="checkbox"/>
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 : 11/11/2020

User ID : BoonChewTay

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	\$3,180.00	2650
Total Labour	\$3,180.00	

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	\$1,048.00	878
Total Spray Painting & Panel Beating	\$1,048.00	

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
010304			FRONT HEADLAMP LH	1.00	\$1,603.60	10.00	\$1,443.24	Replace	/CRU
010306			FRONT AUX HEADLAMP FLASHER LH	1.00	\$904.40	10.00	\$813.96	Replace	/CRU
010154			FRONT FLAP	1.00	\$1,868.80	10.00	\$1,681.92	Replace	/CRU
010151			BUMPER FRONT	1.00	\$1,868.80	10.00	\$1,681.92	Replace	/CRU
010153			FRONT HEADLAMP PANEL LH	1.00	\$974.70	10.00	\$877.23	Replace	/CRU
010073	Body	F01001-CW262	DOVE:FRONT, FOR MAN A22 BUS	1.00	\$2,817.50	10.00	\$2,535.75	Replace	X R
011623	VM		TANK, WASHER: 2.1L/24V, FOR MAN A22 BUS	1.00	\$360.00	10.00	\$324.00	Replace	/CRU
010416	BODY RH	5047	HINGE RH	1.00	\$327.80	10.00	\$295.02	Replace	/BT
010415	BODY LH	5046	HINGE LH	1.00	\$327.80	10.00	\$295.02	Replace	/BT
009375	VM		RETAINER: MALE & FEMALE, REAR LID, MAN BUS	2.00	\$74.80	10.00	\$134.64	Replace	/CRU
		36-73202-5011	FRONT CHROME	1.00	\$715.60	10.00	\$644.04	Replace	/CRA
			STICKER SMRT FRONT	1.00	\$75.00	0.00	\$75.00	Replace	/NCC
		61014-47020	PILLAR, FRONT BODY, LH	1.00	\$350.00	10.00	\$315.00	Replace	X R
011089	VE	7610001N100	LIGHT: DRL 5 LED AND MODULE, ADL E500 DD	1.00	\$1,446.08	10.00	\$1,301.47	Replace	/CRU
Total					\$13,714.88		\$12,418.21		

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									

Repair days 6 days

4/5

After repair photo

Sur Pm (LH)

11/11/2020

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: