TOTAL

SS1E213B0002 / SMRT AUTOMOTIVE SERVICES PTE LTD ENTRY DATE & TIME: 11/03/2021 10:14 (SGT) SUBMITTED BY: SHANTI B THAIYAL NAYAGI (SMRT05)

VERSION: 1 (11/03/2021 10:14 (SGT))

© 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 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.

ACCIDENT STATEMENT

11/03/2021 10:14 (SGT) Date of Submission 09/03/2021 17:20 (SGT) Date of Accident Yio Chu Kang Rd, Singapore **Exact Location of Accident**

SLIP RD TURNING TO YIO CHU KANG ROAD NEAR YIO CHU Additional Location Information

KANG FLYOVER

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHC4827U

INSURED/POLICYHOLDER

Is company? Yes

Name Of Registered Owner SMRT TAXIS PTE LTD 1XXXXX369K Company Reg No

Email Address TAARC@SMRT.COM.SG

Mobile Phone No (Phone) +65-68662671 Alternative Phone No (Office) +65-68662672

VEHICLE PARTICULARS

Manufacturer Toyota Model Prius

Variant

Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Taxi

INSURANCE COMPANY

Name of Insurance Company First Capital Type of Coverage **ThirdParty**

Fleet Policy Yes **Policy Number** D-20095484MFSH

Cover Note Number

DRIVER

PATRICK CHER TECK CHYE Name of Driver SXXXX140B NRIC No

Date Of Birth 12/02/1967

Outdoor Of Driving Pass 09/03/1985 ing experience 36 YEARS Male hder (Phone) +65-68662672 hile Number Phone Number TARC@SMRT.COM.SG mail Address 11 ddress ddress complement ostcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Collision - Head to Rear Type of Accident Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 09/03/21 AT ABOUT 1720PM.I STOPPED MY VEHICLE AT THE SLIP RD TO LOOK OUT FOR THE ONCOMING TRAFFIC

ON 09/03/21 AT ABOUT 1720PM.I STOPPED MY VEHICLE AT THE SLIP RD TO LOOK OUT FOR THE ONCOMING TRAFFIC ALONG YIO CHU KANG ROAD. WHEN I WAS ABOUT TO MOVE SUDDENLY A VEHICLE (GBF7312Z) HIT ONTO REAR PORTION OF MY VEHICLE. AT THE POINT OF THE ACCIDENT NO ONE WAS INJURED.

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

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Vehicle Category

Commercial vehicle

Name of Driver

Contact Number

Address

ess complement tcode urance Company Name ture Of Damage etails of property damaged in accident No. Of Passenger (Including Driver) -

A - SHC4827-U	. 1.
B-GBF 7312Z	
Hongary	
Yio Chu Kang Road	
A B	Tio Chu Kan Flyover
10 Mar 2021	
10 Mar 2021	,

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

Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy flability on the part of the insurance
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Funderstand, 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) admnistering 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes



Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre

Sketch Plan



Case Details

Case Reference Number :

TAX/03/21/2029

Type of Repair : Accident Repair Vehicle Registration Number :

SHC4827U

Company Type: SMRT Taxis Pte Ltd

Estimation ID: EST-14184-ID
Assigned By: Taxi Claims Manager

Toor

Insurance Company Name: NTUC Income Insurance Co-operative

Ltd

Accident Date and Time: 09/03/2021 09:20 AM

Vehicle Age(In Months): 58

Documents / Photographs

View Documents / Photographs

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

	SMRT Recommendation							Surveyor Approval						
BOM Type	Costing Type	Portion	Ma terial Number	Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace	e Remarks
One Time Key In	M ain			BUMPER REAR	1	458.60	458.60	25.00	343.95	Replace	1	343.9	Replace ∨	/CRY
One Time Key In	Main			BUMPER CLIPS	10	2.10	21.00	25.00	15.75	Replace	10	15.75	Replace y	Nec
One Time Key In	Main			PIXEL STICKER	2	60,00	120.00	0.00	120.00	Replace	2	120.0	Replace ∨	/Na
One Time Key In	Main			BUMPER REINFORCEMENT REAR	1	205.70	205.70	25.00	154.27	Replace	0	0	Check ∨	X su
One Time Key In	Main			ARM SUB-ASSY. RR BUMPER RH	1	139.60	139.60	25.00	104.70	Replace	0	0	Check ~	X SV
One Time Key In	Main			ARM SUB-ASSY. RR BUMPER LH	1	139.60	139.60	25.00	104.70	Replace	0	0	Check y	X54
One Time Key In	Main			ANTENNA,ELECTRICAL LOWER REAR	1	157.40	157.40	10.00	141.66	Replace	0	0	Check ~	Xsy
One Time Key In	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	0	0	Not Giv€ ➤	Xsv
One Time Key	Main			BUMPER SIDE RETAINER RR/LH	1	94.80	94.80	25.00	71.10	Replace	0	0	Not Give	Xsva

Total Spare Part Cost 3,909.45

Surveyor Total 479.70

Lump Sum Discount (%) 20.00

Lump Sum Dis (%)

Final Spare Part Cost 3,127.56

Final Sur Total 383.76

				SMRT Recomm	rendati	UN						Survey	or 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/Replac	e Remarks
One Time Key n	Main			BUMPER SIDE RETAINER RR/RH	1	94.80	94.80	25.00	71.10	Replace	0	0	Not Give	X SV
One Time Key	Main			BUMPER SEAL, RR LH	1	88.90	88.90	25.00	66.68	Replace	0	0	Not Give ~	Suc
One Time Key n	Main			BUMPER SEAL, RR RH	1	65.70	65.70	25.00	49.28	Replace	0	. O.	Not Giv∈ ∨	(Su
One Fime Key n	Main			BUMPER LIP COVER RR/LH	1	72.20	72.20	25.00	54.15	Replace	0	0	Not Give ✓	X SV(
One Time Key	Main			BUMPER LIP COVER RR/RH	1	118.10	118.10	25.00	88.57	Replace	0	0	Not Give	Xsu
One Time Key	Main			BUMPER LIP REAR	1	228.90	228.90	25.00	171.68	Replace	0	0.	Check	Xsn
one ime iey	Main			UNDER COVER SUB- ASSY, RR FLOOR	1	514.50	514.50	25.00	385.88	Replace	0	0	Not Give	Xsu
ne ime ey	Main			UNDER COVER RR SHIELD	1	63.90	63.90	25.00	47.92	Replace	0	0	Not Give	X Su
ne ime ey	Main			TAILGATE ASY	1	1,007.90	1,007.90	25.00	755.92	Replace	0	0	Not Give	Xsvc
one ime key	Main			TAIL LAMP LH	1	548.40	548.40	10.00	493.56	Replace	1	0	Old Darr	Xsvc
ne ime ley	Main			END PANEL	1	602.10	602.10	25.00	451.58	Replace	0	0	Not Give	X2vc
ne ime ey	Main			SEALANT SIKAFLEX	1	37.00	37.00	0.00	37.00	Replace	0	0	Not Give	X vo
•						То	tal Spare P	art Cost	3,909.45		Sur	veyor Total	479.70	
							Sum Disc		20.00			ium Dis (%)	20	
							nal Spare P					al Sur Total	383.76	

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR REAR PORTION	507.00	200	
Total:			507.00	200.00	

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Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY REAR BUMPER	378.00	200	
2	Main	TO RESPRAY BUMPER BEAM	180.00	0	
3	Main	TO RESPRAY TAIL GATE	378.00	0	
4	Main	TO RESPRAY REAR PANEL	180.00	0	
Total:			1,116.00	200.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Remarks Adjustment(\$)
1	Main .	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	20
2	Main	TO REPLACE SUNDRY PARTS	100.00	0
3	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20
4	Main	TO WASH AND VACUUM	60.00	0
5	Main	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	296.88
Total:			656.88	336.88

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	3,127.56	383.76
Total Labour Cost	507.00	200.00
Total Spray Painting	1,116.00	200.00
Other	656.88	336.88
Overall Total	5,407.44	1,120.64
Lump Sum Repair Option	El	Ø
Lump Sum Total	5,400.00	1,100.00
Surveyor Approved Amount		1,100.00
No of Repair Days*	5	2

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Survey Date

	Estimator Assesment(\$)	Surveyor Assesment(
Remarks		L/S, after paint photo.
Surveyor Name		Sun Pin (LKK)
Signature		
		Save

11/03/2021

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	•
Owner ID Type:	Company
Owner ID: Vehicle Details	369K
Vehicle No.:	SHC4827U
Vehicle to be Exported:	No
Intended Deregistration Date:	12 Mar 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2015
Engine No.:	2ZR6593629
Chassis No.:	JTDKN36U405767939
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$29,508.00
Original Registration Date:	13 May 2016
First Registration Date:	13 May 2016
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	12 May 2024
PARF Rebate Amount: Intended COE Rebate Details	\$3,750.00
COE Expiry Date:	12 May 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$36,463.00
COE Rebate Amount:	\$14,433.00
Total Rebate Amount: Message	\$18,183.00
•	not be further renewed. The vehicle must be de-registered upon COE expiry or when the whichever is earlier.

The information contained herein is correct as at 12 Mar 2021

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