	21003607/Qqd3
ASS. REC. BY: Jun Pin NTUC	
	GNMENT
From: Date:	Veh No: SH D 6 4 4 7 P. Yr Regn: 03/11/2017
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry (Taxi) Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Toyota Prius 4. c.c 1795
at Workshop m/s	Colour Maroon. A/C: Insured / Std / NI / NA
of	Sp.Reading 356 63. T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: JTDKB3FU463573660
Claims No. MT/1124740-002	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder/ Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil (S/Rim / STD A/Rim or
	Tyre Size: F: 195/65 R15
(Policy Condition)	R: 195/65 R15
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or West lake.
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm / R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: 3 days Res.: Yes or No	D.O.A. 16/03/2021 D.O.I. 17/03/2021
Lum Sum: % 3 Val.: <b>Yes</b> or <b>No</b>	Survey held at SMRT.
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT  Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	
23/04/21@11.32am Sun Pin finalised with Pol	n Suan LS \$1200, 3 days.
(Red \$7748.70, 87%)	1 AX/03/21/2054
	GBC 1063 1
	_
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 3
1) 27/04 Typist : Final Report	Resurvey No. of Trip: 1 Survey Fee:
Date/Time, File Return to?	Transportation:
Add Fe	
. ————	: Interview (\$) Photos
RepetiFormal: TP	:Tech. Invs (\$) others
1200	:Weellend (\$

SS 1213G000E / SMRT AUTOMOTIVE SERVICES PTE LTD ENTRY DATE & TIME: 17/03/2021 09:25 (SGT) SUBMITTED BY: SHANTI B THAIYAL NAYAGI (SMRT05) VERSION: 1 (17/03/2021 09:25 (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
- 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 Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

17/03/2021 09:25 (SGT) 16/03/2021 12:47 (SGT) Bedok Rd, Singapore BEDOK ROAD TOWARDS UPPER CHANGI ROAD Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SHD6447P

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address Mobile Phone No

Alternative Phone No

Yes

SMRT TAXIS PTE LTD

1XXXXX369K

TARC@SMRT.COM.SG (Phone) +65-68662671 (Office) +65-68662672

VEHICLE PARTICULARS

Manufacturer

Model

Variant

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?

Vehicle Category

Toyota

**Prius** 

No - Claiming third party

Taxi

**INSURANCE COMPANY** 

Name of Insurance Company

Type of Coverage Fleet Policy **Policy Number** 

Cover Note Number

First Capital ThirdParty

Yes

D-20095484MFSH

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

**AZIMI BIN ATTAN** SXXXX726G 20/01/1964 Outdoor



Driving Pass 25/03/1985 experience 36 YEARS Male

bile Number (Phone) +65-68662672 . Phone Number

TARC@SMRT.COM.SG Email Address

Address 11 Address complement Postcode 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

Clear Weather Conditions Dry Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 2 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) 2

Has the driver been approached by unknown person(s)

No soliciting/offering accident claims assistance?

PASSENGER 1

**UNKNOWN** Name Male Gender

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

I WAS STATIONARY ALONG BEDOK ROAD TOWARDS UPPER CHANGI ROAD WITH ONE PASSENGER (MALE CHINESE) ON BOARD AS I WAS WAITING FOR THE FRONT VEHICLES TO MOVE. SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE GBC1063Y HAD COLLIDED ONTO THE REAR OF MY TAXI.

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? No

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

**GBC1063Y** Vehicle Registration Number Vehicle Manufacturer Vehicle Model

Vehicle Variant Vehicle Colour

Commercial vehicle Vehicle Category

Details of property damaged in accident No. Of Passenger (Including Driver)

Upper	changi Road		
Ilu Kathi A -SHD 644P7	Sedok X		
A-SHD 644P7 3-GBC 106371	1063 V		

### Declaration

I'We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Drive's Signature (If driver is not the policyholder) / Date & Time

A 16/03/200 "

Witnessed by Reporting Centre

Personnei

#### 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
- 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)

Lunderstand, acknowledge, agree and consent that

- (a) My insurer , my w orkshop 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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
- (ii) 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 disclasure 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
- ic. 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

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

Ay 16/03/2021

Witnessed by Reporting Centre Personnel

Sketch Plan



## Case Details

Case Reference Number: TAX/03/21/2054

Type of Repair : Accident Repair

Vehicle Registration Number : SHD6447P

Company Type: SMRT Taxis Pte Ltd

Estimation ID : EST-14258-ID

Assigned By: Kwai Leng Gan

Insurance Company Name: NTUC Income Insurance Co-operative Ltd

Surveyor Approval

Accident Date and Time: 16/03/2021 04:47 AM

Vehicle Age(In Months): 40

# Documents / Photographs

View Documents / Photographs

Total Documents: 0

SMRT Recommendation

# **Estimation Details**

#### Spare Part's Cost Detail

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			COVER, RR BUMPER ASSY	1	423.90	423.90	25.00	317.92	Replace	1	317.92	Replace 🗸	/ pef
One Time Key In	Main			REAR BUMPER REINFORCEMENT	1	318.80	318.80	25.00	239.10	Replace	0	0	Check 🗸	X
One Time Key In	Main			PAD, RR BUMPER, RH & LH , 1	2	3.80	7.60	25.00	5.70	Replace	2	5.70	Replace ✔ /	Nex
One Time Key In	Main			PAD, RR BUMPER, RH & LH , 2	2	3.80	7.60	25.00	5.70	Replace	2	5.70	Replace 🗸	Nec
One Time Key In	Main			PAD, RR BUMPER, RH & LH , 3	2	3.80	7.60	25.00	5.70	Replace	2	5.70	Replace 🗸	/ Ne(
One Time Key In	Main			PAD, RR BUMPER, CTR	3	2.20	6.60	25.00	4.95	Replace	3	4.95	Replace ✓ ,	
One Time Key In	Main			SEAL, RR BUMPER ARM, RH & LH	2	11.00	22.00	25.00	16.50	Replace	0	0	Not Give ✓	,
One Time Key In	Main			RETAINER, RR BUMPER, RH	1	112.70	112.70	25.00	84.53	Replace	0	0	Not Giv€ ✓	,
One Time Key In	Main			RETAINER, RR BUMPER, LH	1	111.50	111.50	25.00	83.63	Replace	0	0	Not Give 💙	
One Time Key In	Main			SEAL, RR BUMPER , RH	1	85.20	85.20	25.00	63.90	Replace	0	0	Not Give 💉	Х

Total Spare Part Cost 4,777.60

Surveyor Total 651.22

Lump Sum Discount (%) 20.00

Lump Sum Dis (%)

Final Spare Part Cost 3,822.08

Final Sur Total 520.98

				SMRT Recom	menda	tion						Surve	eyor Approval
BOM Type	Costing Type	Portion	Material Number	Part Name	Qty		List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace Remarks
One Time Key In	Main			SEAL, RR BUMPER, LH	1	85.20	85.20	25.00	63.90	Replace	0	0	Not Give 🗸
One Time Key In	Main			CLIPS PIECE, FRT & RR BUMPER	10	1.50	15.00	25.00	11.25	Replace	10	11.25	Replace Y/NCC
One Time Key In	Main			GUARD, RR BUMPER, LOWER	1	558.30	558.30	25.00	418.72	Replace	0	0	Not Give 🗸
One Time Key In	Main			FILLER, RR BUMPER , RH	1	119.90	119.90	25.00	89.93	Replace	0	0	Not Give 🕶 📈
One Time Key In	Main			FILLER, RR BUMPER , LH	1	119.90	119.90	25.00	89.93	Replace	0	0	Not Give
One Time Key In	Main			COVER, GUARD RR BUMPER LOWER	1	14.80	14.80	25.00	11.10	Replace	0	0	Not Give 👻
One Time Key In	Main			PIXEL STICKER	2	60.00	120.00	0.00	120.00	Replace	2	120.00	Replace V/(l(
One Time Key	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	1	180.00	Replace - Short
In One Time Key In	Main			ANTENNA, ELECTRICAL KEY	1	60.30	60.30	10.00	54.27	Replace	0	0	Not Give •
One Time Key In	Main			LENS & BODY, REAR COMBINATION LAMP , RH	1	438.10	438.10	10.00	394.29	Replace	0	0	Not Give 🕶 🔀
One Time Key In	Main			LENS & BODY, REAR COMBINATION LAMP, LH	1	438.10	438.10	10.00	394.29	Replace	0	0	Not Give 🕶 🗴
One Time Key In	Main			LENS & BODY ASSY , RR BUMPER , RH	1	486.80	486.80	10.00	438.12	Replace	0	0	Not Give 🕶 🗶
One Time Key In	Main			LENS & BODY ASSY, RR BUMPER, LH	1	486.80	486.80	10.00	438.12	Replace	1	0	Old Dam 🔻 🔀
One Time Key In	Main			COVER, REAR FLOOR UNDER , RH	1	169.50	169.50	25.00	127.13	Replace	0	0	Not Give 🕶 🗶
One Time Key In	Main			COVER, REAR FLOOR UNDER , LH	1	234.30	234.30	25.00	175.73	Replace	0	0	Not Give 🕶 🌿

Total Spare Part Cost 4,777.60 Surveyor Total 651.22

Lump Sum Discount (%) 20.00 Lump Sum Dis (%) 20

Final Spare Part Cost 3,822.08 Final Sur Total 520.98

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				SMRT Recom	menda	ition						Sun	veyor 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/Repla	ce Remarks
One Time Key In	Main			COVER, REAR FLOOR UNDER CENTER	1	222.60	222.60	25.00	166.95	Replace	0	0	Not Giv€	~ ×
One Time Key In	Main			TAIL GATE BACK DOOR OUTSIDE GARNISH SUB- ASSY	1	891.20	891.20	25.00	668.40	Replace	0	0	Not Give	~ X′
One Time Key In	Main			NAME PLATE (HYBRID), LUGGAGE COMPARTMENT DOOR	1	52.30	52.30	25.00	39.22	Replace	0	0	Not Give	<b>*</b>
One Time Key In	Main			NAME PLATE (PRIUS). LUGGAGE COMPARTMENT DOOR	1	52.30	52.30	25.00	39.22	Replace	0	0	Not Give	×
One Time Key In	Main			SMRT LOGO	1	7.80	7.80	0.00	7.80	Replace	0	0	Not Give	×
One Time Key In	Main			STICKER DECAL 6555 8888	1	21.60	21.60	0.00	21.60	Replace	0	0	Not Give	X
						Tot	al Spare P	art Cost	4,777.60		S	urveyor Total	651.22	
						Lump	Sum Disco	ount (%)	20.00		Lump	Sum Dis (%)	20	
						Fin	al Spare P	art Cost	3,822.08		Fi	nal Sur Total	520.98	

### 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	

### Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Remarks Adjustment(\$)
1	Main	TO RESPRAY REAR BUMPER	378.00	200
2	Main	TO RESPRAY BUMPER BEAM	180.00	0
3	Main	TO RESPRAY FILLER RR BUMPER LH	180.00	0
4	Main	TO RESPRAY FILLER RR BUMPER RH	180.00	0
5	Main	TO RESPRAY TAILGATE OUTSIDE GARNISH	180.00	0
Total:			1,098.00	200.00

### Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO TRANSFER REAR TAILGATE MECHANISM	120.00	0	
2	Main	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	30	LKK Auto Consultants hence notify the Repairer of the following:  To resurvey before/after spray painting
3	Main	TO REPLACE SUNDRY PARTS	100.00	0	To display damaged part(s) during resurvey     Parts prices are subject to confirmation
4	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20	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
5	Main	TO WASH AND VACUUM	60.00	0	Acknowledged by Repairer
Total:			480.00	50.00	Signature; Date:

# Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	3,822.08	520.98
Total Labour Cost	507.00	200.00
Total Spray Painting	1,098.00	200.00
Other	480.00	50.00
Overall Total	5,907.08	970.98
Lump Sum Repair Option		•
Lump Sum Total	5,900.00	950.00
Surveyor Approved Amount		950.00
No of Repair Days*	5	2 2 days
Remarks		<i>U</i> S, after paint photo.
Surveyor Name		Sun Pin (LKK)
Signature		
		Save Clear
Survey Date	17/03/2021	

...

# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	369K
Vehicle Details	OUD (44TD
Vehicle No.:	SHD6447P
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Mar 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZRS101861
Chassis No.:	JTDKB3FU403573660
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	03 Nov 2017
First Registration Date:	03 Nov 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 Nov 2025
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	02 Nov 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$33,596.00
COE Rebate Amount:	\$19,406.00
Total Rebate Amount:	\$23,156.00
Message	
Please note that the 8-year COE for this vehicle cannovehicle reaches its statutory lifespan (if applicable), which is the statutory lifespan (if applicable), which is the statutory lifespan (if applicable), which is the statutory lifespan (if applicable).	ot be further renewed. The vehicle must be de-registered upon COE expiry or when the hichever is earlier.

The information contained herein is correct as at 19 Mar 2021