ASS. REC. BY: Sun Pin REF: NTUC NS/INC21003928/Qvf3

ASSIGNMENT

From: Date:

Estimated Cost:

OD (TP) WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured: SGK 3887Y

Policy No.

Claims No. MT/1129686-001

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SHB 340 M. Yr Regn: 19/09/2014

Type: M.Car / M.Cycle / Bus / Van / Lorry / (Taxi) / Prime Mover /

Truck / Trailer or

Make: Toyota Prius c.c 1795 1798

Colour Maroon A/C: Insured / Std / NI / NA

Sp.Reading 625480 T/Radio: Insured / Std / NI / NA

Eng/No: —

C/No: JTDKN3B440575O591

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/65 R15

R: 195/65 R15

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

TOYO / YOKO or

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	23/03/2021	D.O.I.	24/03/2021

Survey held at SNIRT.

Des. 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
27/4/21	LS $1750 confirmed by email (Red 12,283.43,87%) TP TAX/03/21/2072 SGK 3887Y

Date/Time, File Pass to? 1)

Date/Time, File Return to?

2) 27/4/21-Typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Survey Fee:

Transportation:

S + R.S. SI

Photos

Others

TOTAL

Report Format : TP

Lump Sum / I.B.I: (LS $1750)

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

Date of Submission	24/03/2021 13:19 (SGT)
Date of Accident	23/03/2021 12:00 (SGT)
Exact Location of Accident	Koon Seng Rd, Singapore
Additional Location Information	KOON SENG ROAD /TEMBELING ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB340M

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SMRT TAXIS PTE LTD
Company Reg No	1XXXXX369K
Email Address	TARC@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 your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	D-20095484MFSH
Cover Note Number	-

DRIVER

Name of Driver	CHENG WAI YIP
NRIC No	SXXXX941A

Date Of Birth	21/10/1952
Occupation	Outdoor
Date Of Driving Pass	18/05/1977
Driving experience	43 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	TARC@SMRT.COM.SG
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

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Female

PASSENGER 2

Name	UNKNOWN
Gender	Male

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 TRAVELLING STRAIGHT ALONG KOON SENG ROAD TOWARDS STILL ROAD WITH 2 PASSENGERS (MALAY COUPLE) ON BOARD. SUDDENLY A VEHICLE SGK3887Y CAME OUT FROM TEMBELING ROAD ON MY RIGHT AND COLLIDED ONTO THE RIGHT PORTION OF MY TAXI.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE TOO BIG
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGK3887Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 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)**

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.

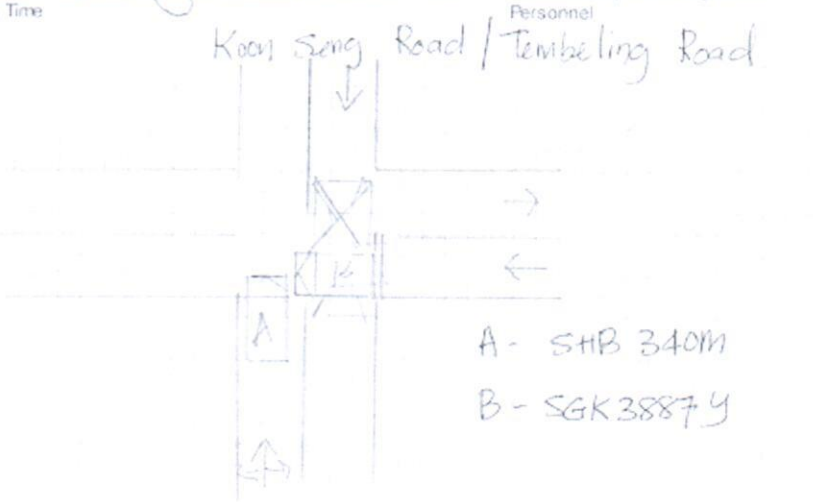
(collectively the "**Purposes**")

(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.

Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
23/3/2021	Chong	Lim 24/3/2021

Sketch Plan



Describe Circumstances of the Accident

Declaration

I/We declare the foregoing particulars are true in every respect

23/3/2021 Chang — Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

24/3/2021 — Witnessed by Reporting Centre Personnel

SMRT AUTOMOTIVE

Case Details

Case Reference Number : TAX/03/21/2072
Type of Repair : Accident Repair
Vehicle Registration Number : SHB340M

Company Type : SMRT Taxis Pte Ltd
Estimation ID : EST-14329-ID
Assigned By : Taxi Claims Manager Team

Insurance Company Name : NTUC Income Insurance Co-operative Ltd
Accident Date and Time : 23/03/2021 04:00 AM
Vehicle Age(In Months) : 78

Documents / Photographs

View Documents / Photographs Total Documents: 0

Estimation Details

Spare Part's Cost Detail

						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
One Time Key In	Main			COVER, FR BUMPER HOLE RH	1	18.50	18.50	25.00	13.88	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER GRILLE SUB-ASSY,LOWER	1	311.10	311.10	25.00	233.33	Replace	0	0	Not Give	
One Time Key In	Main			LENS & BODY, FR TURN RH	1	511.80	511.80	10.00	460.62	Replace	0	0	Not Give	
One Time Key In	Main			GRILLE, RADIATOR	1	310.60	310.60	25.00	232.95	Replace	0	0	Not Give	
One Time Key In	Main			GRILLE, RADIATOR LOWER NO.2	1	94.60	94.60	25.00	70.95	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER LIP FRT	1	139.60	139.60	25.00	104.70	Replace	0	0	Not Give	
One Time Key In	Main			FOG LAMP RH	1	295.20	295.20	10.00	265.68	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER FRT ABSORBER LOWER	1	127.70	127.70	25.00	95.78	Replace	0	0	Not Give	
One Time Key In	Main			FENDER FRT/RH	1	723.40	723.40	25.00	542.55	Replace	1	0	Repair	R

Total Spare Part Cost	7,927.95	Surveyor Total	98.92
Lump Sum Discount (%)	20.00	Lump Sum Dis (%)	20
Final Spare Part Cost	6,342.36	Final Sur Total	79.14

				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
One Time Key In	Main			NAME PLATE (HYBRID)	1	51.90	51.90	25.00	38.92	Replace	1	38.92	Replace	Nec
One Time Key In	Main			FENDER LINER FRT/RH	1	171.70	171.70	25.00	128.77	Replace	0	0	Check	X
One Time Key In	Main			FENDER LINER PAD, FR WHEEL. RH	1	49.30	49.30	25.00	36.97	Replace	0	0	Not Give	X
One Time Key In	Main			WHEEL DISC. FRONT	1	1,484.20	1,484.20	25.00	1,113.15	Replace	1	0	Repair	X R
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Not Give	X
One Time Key In	Main			WHEEL HUB FRT	1	549.70	549.70	25.00	412.28	Replace	0	0	Check	X
One Time Key In	Main			DOOR FRT/RH	1	894.40	894.40	25.00	670.80	Replace	1	0	Repair	X R
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			HINGE LOWER RHF, DOOR	1	90.10	90.10	25.00	67.57	Replace	0	0	Not Give	X
One Time Key In	Main			HINGE UPPER RHF, DOOR	1	80.50	80.50	25.00	60.38	Replace	0	0	Not Give	X
One Time Key In	Main			CHECK ASSY, FR DOOR,	1	150.30	150.30	25.00	112.73	Replace	0	0	Not Give	X
One Time Key In	Main			MIRROR ASSY,RH	1	1,307.10	1,307.10	25.00	980.32	Replace	0	0	Not Give	X
One Time Key In	Main			MIRROR LAMP RH	1	65.30	65.30	10.00	58.77	Replace	0	0	Not Give	X
One Time Key In	Main			COVER, OUTER MIRROR, RH	1	107.40	107.40	25.00	80.55	Replace	0	0	Not Give	X
One Time Key In	Main			HEAD LAMP RH	1	945.20	945.20	10.00	850.68	Replace	0	0	Check	X

Total Spare Part Cost	7,927.95	Surveyor Total	98.92
Lump Sum Discount (%)	20.00	Lump Sum Dis (%)	20
Final Spare Part Cost	6,342.36	Final Sur Total	79.14

					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
One Time Key In	Main			BUMPER FRT	1	482.00	482.00	25.00	361.50	Replace	1	0	Repair	
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER SUPPORT F/RH	1	76.40	76.40	25.00	57.30	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER SUPPORT F/LH	1	76.40	76.40	25.00	57.30	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER ENERGY ABSORBER FRT	1	78.80	78.80	25.00	59.10	Replace	0	0	Not Give	
One Time Key In	Main			BUMPER REINFORCEMENT FRT	1	498.40	498.40	25.00	373.80	Replace	0	0	Not Give	
One Time Key In	Main			ARM SUB-ASSY,FR BUMPER RH	1	250.40	250.40	25.00	187.80	Replace	0	0	Not Give	

Total Spare Part Cost	7,927.95	Surveyor Total	98.92
Lump Sum Discount (%)	20.00	Lump Sum Dis (%)	20
Final Spare Part Cost	6,342.36	Final Sur Total	79.14

Labour's Cost Detail

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

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation($)	Surveyor Adjustment($)	Remarks
1	Main	TO REPSRAY FRONT BUMPER	378.00	200	
2	Main	TO RESPRAY FRONT BUMPER LOWER GRILLE	180.00	0	
3	Main	TO RESPRAY FRONT FENDER RH	378.00	200	
4	Main	TO RESPRAY RIM	180.00	50	
Total:			1,674.00	650.00	

S.No.	Costing Type	Job Scope	SMRT Recommendation($)	Surveyor Adjustment($)	Remarks
5	Main	TO RESPRAY FRONT DOOR RH	378.00	200	
6	Main	RESPRAY MIRROR COVER LH	180.00	0	
Total:			**1,674.00**	**650.00**	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation($)	Surveyor Adjustment($)	Remarks
1	Main	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	30	
2	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60	
3	Main	TO REPLACE SUNDRY PARTS	100.00	0	
4	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20	
5	Main	TO WASH AND VACUUM	60.00	0	
6	Main	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	296.88	
Total:			**776.88**	**406.88**	

Summary

	Estimator Assesment($)	Surveyor Assesment($)
Total Spare Part Detail	6,342.36	79.14
Total Labour Cost	507.00	200.00
Total Spray Painting	1,674.00	650.00
Other	776.88	406.88
Overall Total	9,300.24	1,336.02
Lump Sum Repair Option	☐	☑
Lump Sum Total	9,300.00	1,350.00
Surveyor Approved Amount		1,350.00
No of Repair Days*	5	2 2days
Remarks	-	L/S, After paint photo.
Surveyor Name		Sun Pin (LKK)

	Estimator Assesment($)	Surveyor Assesment($)
Signature		

Save Clear

Survey Date 24/03/2021

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:

Date:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	369K
Vehicle Details	
Vehicle No.:	SHB340M
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Mar 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR6165703
Chassis No.:	JTDKN36U405750591
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	$32,920.00
Original Registration Date:	19 Sep 2014
First Registration Date:	19 Sep 2014
Transfer Count:	0
Actual ARF Paid:	$8,088.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Sep 2022
PARF Rebate Amount:	$5,257.00
Intended COE Rebate Details	
COE Expiry Date:	18 Sep 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	$50,704.00
COE Rebate Amount:	$9,380.00
Total Rebate Amount:	**$14,637.00**
Message	
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 26 Mar 2021

OK