VERSION: 1 (24/03/2021 13:19 (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**

Date of Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

24/03/2021 13:19 (SGT) 23/03/2021 12:00 (SGT) Koon Seng Rd, Singapore KOON SENG ROAD /TEMBELING ROAD Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SHB340M

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No

Alternative Phone No

Yes

SMRT TAXIS PTE LTD 1XXXXXX369K 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

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Toyota Prius

No - Claiming third party

Taxi Auto 1800

**INSURANCE COMPANY** 

Name of Insurance Company Type of Coverage Fleet Policy Policy Number

Cover Note Number

MS First Capital Insurance Ltd

ThirdParty Yes

D-20095484MFSH

DRIVER

Name of Driver NRIC No

CHENG WAI YIP SXXXX941A



Date Of Birth 21/10/1952 Occupation Outdoor Date Of Driving Pass 18/05/1977

Driving experience 43 YEARS AND 10 MONTHS

No

Gender Male

Mobile Number (Phone) +65-68662672

Alt. Phone Number

**Email Address** TARC@SMRT.COM.SG

Address Address complement Postcode

Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles?

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? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Was there any audio recorded?

Yes

FILE TOO BIG

Yes

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

	Vehicle Registration Number	SGK3887Y
Vehicle Variant  Vehicle Colour  Vehicle Category  Name of Driver  Contact Number  Address  Address  Address complement  Postcode  Insurance Company Name  Nature Of Damage  Details of property damaged in accident	Vehicle Manufacturer	-
Vehicle Colour  Vehicle Category  Name of Driver  Contact Number  Address  Address  Address complement  Postcode  Insurance Company Name  Nature Of Damage  Details of property damaged in accident  Private of UNKNO'  UNKNO'  -  Details of property damaged in accident	Vehicle Model	-
Vehicle Category Name of Driver UNKNO Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident  Private of UNKNO UNKNO  - UNKNO - UN	Vehicle Variant	-
Name of Driver  Contact Number  Address  Address -  Address complement  Postcode  Insurance Company Name  Nature Of Damage  Details of property damaged in accident  UNKNO  -  O  UNKNO  -  UNKNO  -  O  UNKNO  -   UNKNO  -  O	Vehicle Colour	-
Contact Number - Address - Address - Address complement - Postcode - Insurance Company Name Nature Of Damage - Details of property damaged in accident	Vehicle Category	Private car
Address - Address complement - Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident -	Name of Driver	UNKNOWN
Address complement - Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident -	Contact Number	-
Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident -	Address	-
Insurance Company Name  Nature Of Damage  Details of property damaged in accident  -	Address complement	-
Nature Of Damage  Details of property damaged in accident  -	Postcode	-
Details of property damaged in accident	Insurance Company Name	-
The second secon	Nature Of Damage	_
No. Of Passenger (Including Driver)	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.
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- 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.
- 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 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 law yers/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' 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 & Time

Sketch Plan

Change | Chan

Describe Circumstances of the Accident

### Declaration

We declare the foregoing particulars are true in every respect

3 202 Oran 4
Policyholder's Signature / Date &

Projection of the State of the

Time

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

Witnessed by Reporting Centre Personnel



### 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

Toom

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 Recor	nmend	lation						Surve	yor 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/Repl	ace Remarks
One Time Key In	Main			COVER, FR BUMPER HOLE RH	1	18.50	18.50	25.00	13.88	Replace	0	0	Not Giv€	<b>*</b> ×
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	X
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 Giv€	×
One Time Key In	Main			BUMPER LIP FRT	1	139.60	139.60	25.00	104.70	Replace	0	0	Not Giv€	$\times$
One Time Key In	Main			FOG LAMP RH	1	295.20	295.20	10.00	265.68	Replace	0	0	Not Give	<b>*</b> ×
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	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 (%)

Final Spare Part Cost 6,342.36

Final Sur Total 79.14

In

				SMRT Recon	nmend	ation						Surve	eyor 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 V Nec
One Time Key In	Main			FENDER LINER FRT/RH	1	171.70	171.70	25.00	128.77	Replace	0	0	Check •
One Time Key In	Main			FENDER LINER PAD, FR WHEEL. RH	1	49.30	49.30	25.00	36.97	Replace	0	0	Not Giv€ → 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
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Not Give 🗸
One Time Key In	Main			WHEEL HUB FRT	1	549.70	549.70	25.00	412.28	Replace	0	0	Check
One Time Key In	Main			DOOR FRT/RH	1	894.40	894.40	25.00	670.80	Replace	1	0	Repair Y
One Time Key In	Main			STICKER DECAL SMRT (DOOR)	1	60.00	60.00	0.00	60.00	Replace	1	60.00	Replace // //
One Time Key In	Main			HINGE LOWER RHF, DOOR	1	90.10	90.10	25.00	67.57	Replace	0	0	Not Give 💙
One Time Key In	Main			HINGE UPPER RHF, DOOR	1	80.50	80.50	25.00	60.38	Replace	0	0	Not Give 🕶 💉
One Time Key In	Main			CHECK ASSY, FR DOOR,	1	150.30	150.30	25.00	112.73	Replace	0	0	Not Give 📈
One Time Key In	Main			MIRROR ASSY,RH	1	1,307.10	1,307.10	25.00	980.32	Replace	0	0	Not Give
One Time Key In	Main			MIRROR LAMP RH	1	65.30	65.30	10.00	58.77	Replace	0	0	Not Giv€ ✓
One Time Key In	Main			COVER, OUTER MIRROR, RH	1	107.40	107.40	25.00	80.55	Replace	0	0	Not Giv€ ↓ ✓
One Time Key In	Main			HEAD LAMP RH	1	945.20	945.20	10.00	850.68	Replace	0	0	Check •

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 Recon	nmend	ation						Surve	yor 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	ace Remarks
One Time Key In	Main			BUMPER FRT	1	482.00	482.00	25.00	361.50	Replace	1	0	Repair	·×K
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 Giv€	~X
One Time Key In	Main			BUMPER SUPPORT F/LH	1	76.40	76.40	25.00	57.30	Replace	0	0	Not Giv€	•×
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 Giv€	<b>*</b> ×
One Time Key In	Main			ARM SUB- ASSY,FR BUMPER RH	1	250.40	250.40	25.00	187.80	Replace	0	0	Not Giv€	· ×
						То	tal Spare P	art Cost	7,927.95		S	urveyor Total	98.92	
						Lump	Sum Disc	ount (%)	20.00		Lump	Sum Dis (%)	20	

### 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 Remarks Adjustment(\$)
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

Final Spare Part Cost 6,342.36

Final Sur Total 79.14

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Ren Adjustment(\$)	narks
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 Remarks Adjustment(\$)
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 <u>and</u> 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
ntended 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	

The information contained herein is correct as at 26 Mar 2021