

ASSIGNMENT

Eugene C. Smith / February

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	369K

Vehicle Details

Vehicle No.:	SHB738A
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Apr 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2015
Engine No.:	2ZR6587407
Chassis No.:	JTDKN36U205767714
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$29,508.00
Original Registration Date:	01 Apr 2016
First Registration Date:	01 Apr 2016
Transfer Count:	0
Actual ARF Paid:	\$5,000.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Mar 2024
PARF Rebate Amount:	\$3,500.00

Intended COE Rebate Details

COE Expiry Date:	31 Mar 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$36,862.00
COE Rebate Amount:	\$13,625.00
Total Rebate Amount:	\$17,125.00

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 16 Apr 2021

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 Submission	15/04/2021 11:01 (SGT)
Date of Accident	14/04/2021 07:26 (SGT)
Exact Location of Accident	21 Serangoon North Ave 1, Singapore 555889
Additional Location Information	SERANGOON NORTH AVE 1 / SERANGOON GARDEN SECONDARY SCHOOL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB738A
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-21097466MFSH
Cover Note Number	-

DRIVER

Name of Driver	SEBASTIAN TUANG
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NRIC No	SXXXX746E
Date Of Birth	06/02/1961
Occupation	Outdoor
Date Of Driving Pass	13/04/1994
Driving experience	27 YEARS
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

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 ALONG SERANGOON NORTH AVE 1 WITH ONE PASSENGER (MALE INDIAN) ONBOARD AND WAS GOING TO TURN LEFT INTO THE SCHOOL AS REQUESTED BY MY PASSENGER. SUDDENLY A VEHICLE SFB8998L ON MY RIGHT, TRAVELLING ON THE TURN RIGHT ONLY LANE, CUT TOWARDS MY LANE ABRUPTLY, AS THIRD PARTY WANTED TO TURN INTO THE SCHOOL. AS A RESULT, COLLIDED ONTO THE FRONT 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	SFB8998L
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
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.
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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:

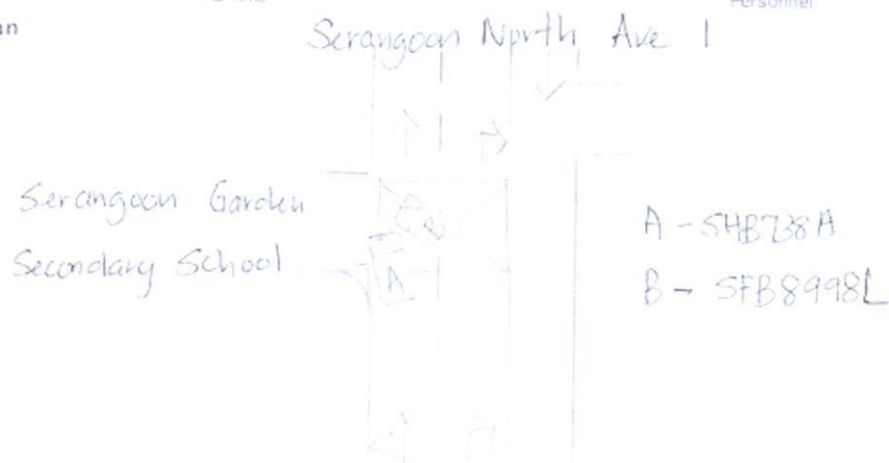
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

Sketch Plan



Describe Circumstances of the Accident

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

Witnessed by Reporting Centre
Personnel



Case Details

Case Reference Number :

TAX/04/21/2039

Type of Repair : Accident Repair

Vehicle Registration Number : SHB738A

Company Type : SMRT Taxis Pte Ltd

Estimation ID : EST-14590-ID

Assigned By : Taxi Claims Manager Team

Insurance Company Name : China Taiping Insurance (Singapore) Pte Ltd

Accident Date and Time : 13/04/2021 11:26 PM

Vehicle Age(In Months) : 60

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			BUMPER FRT	1	482.00	482.00	25.00	361.50	Replace	1	361.50	Replace	✓ def
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	10	12.08	Replace	✓ Nec
One Time Key In	Main			BUMPER SUPPORT F/RH	1	76.40	76.40	25.00	57.30	Replace	1	57.30	Replace	✓ BR
One Time Key In	Main			BUMPER SUPPORT F/LH	1	76.40	76.40	25.00	57.30	Replace	0	0	Not Give	✓ X
One Time Key In	Main			BUMPER ENERGY ABSORBER FRT	1	78.80	78.80	25.00	59.10	Replace	0	0	Not Give	✓ X
One Time Key In	Main			BUMPER REINFORCEMENT FRT	1	498.40	498.40	25.00	373.80	Replace	0	0	Not Give	✓ X
One Time Key In	Main			ARM SUB-ASSY,FR BUMPER LH	1	250.40	250.40	25.00	187.80	Replace	0	0	Not Give	✓ X
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	✓ X
One Time Key In	Main			COVER, FR BUMPER HOLE RH	1	18.50	18.50	25.00	13.88	Replace	0	0	Not Give	✓ X

Total Spare Part Cost 10,978.38

Surveyor Total 1,447.22

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 8,414.21

Final Sur Total 1,157.78

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 GRILLE SUB-ASSY, LOWER	1	311.10	311.10	25.00	233.33	Replace	0	0	Not Give	X
One Time Key In	Main			FOG LAMP RH	1	295.20	295.20	10.00	265.68	Replace	0	0	Not Give	X
One Time Key In	Main			LENS & BODY, FR TURN RH	1	511.80	511.80	10.00	460.62	Replace	0	0	Check	X
One Time Key In	Main			COVER, RADIATOR	1	122.80	122.80	25.00	92.10	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	X
One Time Key In	Main			GRILLE, RADIATOR LOWER NO.2	1	94.60	94.60	25.00	70.95	Replace	0	0	Not Give	X
One Time Key In	Main			BUMPER LIP FRT	1	139.60	139.60	25.00	104.70	Replace	0	0	Not Give	X
One Time Key In	Main			BUMPER FRT ABSORBER LOWER	1	127.70	127.70	25.00	95.78	Replace	0	0	Not Give	X
One Time Key In	Main			UNDER COVER CENTER	1	448.30	448.30	25.00	336.23	Replace	0	0	Not Give	X
One Time Key In	Main			SUPPORT RADIATOR, RH	1	54.50	54.50	25.00	40.88	Replace	0	0	Not Give	X
One Time Key In	Main			FENDER FRT/RH	1	723.40	723.40	25.00	542.55	Replace	1	0	Repair	X
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.

Total Spare Part Cost 10,978.38

Surveyor Total 1,447.22

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 8,414.21

Final Sur Total 1,157.78




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			TYRE	1	126.74	126.74	0.00	126.74	Replace	1	126.74	Replace	✓ BR
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			LOWER ARM FRT/RH	1	625.90	625.90	25.00	469.42	Replace	0	0	Check	✓ X
One Time Key In	Main			TIE ROD END RH	1	159.30	159.30	25.00	119.48	Replace	0	0	Not Give	✓ X
One Time Key In	Main			DRIVE SHAFT RH	1	1,764.40	1,764.40	25.00	1,323.30	Replace	0	0	Not Give	✓ X
One Time Key In	Main			FENDER LINER FRT/LH	1	171.70	171.70	25.00	128.77	Replace	0	0	Not Give	✓ X
One Time Key In	Main			FENDER LINER PAD, FR WHEEL. LH	1	49.30	49.30	25.00	36.97	Replace	0	0	Not Give	✓ X
One Time Key In	Main			SUPPORT SUB-ASSY	1	1,460.40	1,460.40	25.00	1,095.30	Replace	0	0	Not Give	✓ X
One Time Key In	Main			HEAD LAMP RH	1	945.20	945.20	10.00	850.68	Replace	1	850.68	Replace	✓ Sch
One Time Key In	Main			HEAD LAMP LH	1	945.20	945.20	10.00	850.68	Replace	0	0	Not Give	✓ X
One Time Key In	Main			LENS & BODY,FR TURN LH	1	511.80	511.80	10.00	460.62	Replace	0	0	Not Give	✓ X
Total Spare Part Cost									10,978.38	Surveyor Total 1,447.22				
Lump Sum Discount (%)									20.00	Lump Sum Dis (%) 20				
Final Spare Part Cost									8,414.21	Final Sur Total 1,157.78				

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT PORTION	676.00	300	✓
Total:			676.00	300.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
Total:			1,296.00	450.00	✓

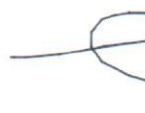
S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPSRAY FRONT BUMPER	378.00	200	
2	Main	TO RESPRAY FRONT BUMPER LOWER GRILLE	180.00	0	
3	Main	TO RESPRAY FRONT FENDER RH	378.00	200	
4	Main	TO RESPRAY RIM	180.00	50	
5	Main	TO RESPRAY FRONT SUPPORT PANEL	180.00	0	
Total:			1,296.00	450.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60	
2	Main	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	30	
3	Main	TO REPLACE SUNDRY PARTS	100.00	0	
4	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	30	
5	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	20	
6	Main	TO WASH AND VACUUM	60.00	0	
7	Main	TOWING CHARGE	56.00	0	
Total:			636.00	140.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	8,414.21	1,157.78
Total Labour Cost	676.00	300.00
Total Spray Painting	1,296.00	450.00
Other	636.00	140.00
Overall Total	11,022.21	2,047.78
Lump Sum Repair Option	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	11,000.00	2,050.00
Surveyor Approved Amount		2,050.00

	Estimator Assessment(\$)	Surveyor Assessment(\$)
No of Repair Days*	6	3 <i>3 days</i>
Remarks	-	L/S, after paint photo.
Surveyor Name		Sun Pin (LKK)
Signature		
		<input type="button" value="Save"/> <input type="button" value="Clear"/>
Survey Date	15/04/2021	

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: