

ASS. REC. BY:

Steve

REF

NT4C

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle Not

at Workshop m/s

of

Insured:

Policy No.

Claims No. MT/1131436-002

Sum Insured:

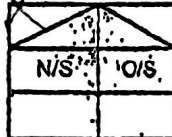
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Report: _____ Consistent? : Yes or No

SIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Cum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No:

SMB1334R

Yr Regn:

25/3/13

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

Truck / Trailer or

Make:

MAH NL378F

c.c.

10518

Colour:

MAH - Colours

A/C: Insured / Std / NI / N

Sp. Reading

85862

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

WMAA2222807001778

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

275/70R225

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

10/5/21

D.O.A.

12/5/21

Survey held at

SMRT

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

F L H

The U/C / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	confirm the finalize \$5850.00 (L/S, before GST). 4 repair days.
	red: 9539.9;61%
	15389.9

Date/Time, File, Pass 1st

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return 1st

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Inve (%)

☐

: Weekend (%)

Survey Fee:

Transportation:

\$ + RS. \$

Photo

Others

TOTAL

Date/Time, File, Pass 1st

Date/Time, File Return 1st



SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
90 Woodlands Industrial Park E4, Singapore 757795
FAX Number 63685592
Estimator Telephone Number 68662623
Accident Reporting Number 68662612

Date Generated : 12/05/2021

User ID : BoonChewTay

Section A - Accident Details

Registration Number	SM81334R
Case Reference Number	BUS/0521/1010
Registration Date	25/3/2013
Company Type	SMRT Buses Ltd
Make	MAN
Model	A22
Name of Driver	Khoo Kay Huat
Type of Accident	Side Swipe
Accident Date and Time	10/5/2021 7:07 PM
Accident Reported Date and Time	10/5/2021 8:15 PM
Surveyor Required?	No
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	
Special Instruction to ARC, if any	SM81334R-LEFT FRONT WINDSCREEN CRACKED AND BODY SCRATCHED SLK9010L (TP) INSURED WITH
Prepared Date and Time	12/5/2021 10:38 AM
Chassis Number	WMAA222Z8D7001778
Mileage	
Work Shop	
Repair Completion Date and Time	

Section B - Summary of Repair Estimates

Summary of Repair Estimates

	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$2,120.00	\$0.00
Total Spray Cost	\$786.00	\$0.00
Total Spare Part Cost	\$9,273.51	\$0.00
Total Other Cost	\$0.00	\$0.00
TOTAL COST	\$12,179.51	\$0.00
Jump Sum Total	\$12,200.00	\$0.00
Number of Repair Days	5.0	
Prepared / Adjusted By	Boon Chew Tay	
ARC / Surveyor Sign Off Date	12/05/2021 10:47 AM	
Signature		☒
Remarks		

12/5/21, 4:11pm
Steve (LKK)
w/ AL
4 dys
LIS
My AL sy

Section C - Quotation and Accident Invoice Details

Quotation Number		Invoice Number	
Quotation Date		Invoice Date	
Invoice Amount		Prepared Date	

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To only pay 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:



SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
80 Woodlands Industrial Park E4, Singapore 757705
FAX Number 63685592
Estimator Telephone Number 68662623
Accident Reporting Number 68662672

Date Generated : 12/05/2021

User ID : BoonChewTay

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS	\$2,120.00	1590
total Labour	\$2,120.00	

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	\$786.00	616
total Spray Painting & Panel Beating	\$786.00	

Part 3 - Other Costs - Accident and Accident Repair Related Expense

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
total Other Costs		

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
010148	GLASS	4001X01-GLASS5171	WINDSCREEN, FRONT: FOR MAN A22 BUS	1.00	\$5,031.80	10.00	\$4,528.62	Replace	✓ BR
006313	CONSUMABLE	SIKA® Primer-206 G+P	PRIMER (SIKA 206 G+P)	1.00	\$80.00	0.00	\$80.00	Replace	✓ NPC
006314	CONSUMABLE		ADHESIVE: DIRECT GLAZING	10.00	\$37.00	0.00	\$370.00	Replace	✓ NPC
006315	CONSUMABLE		ACTIVATOR	1.00	\$80.00	0.00	\$80.00	Replace	✓ NPC
010154	Body	F01001-CW263	FLAP, FRONT: FOR MAN A22 BUS	1.00	\$1,868.80	10.00	\$1,681.92	Replace	X
010153	Body	F01001-CW264	COVER, HEADLAMP: FRT, LH, FOR MAN A22 BUS	1.00	\$974.70	10.00	\$877.23	Replace	X R
010151	Body	F01001-CE265	BUMPER, FRONT: CENTRE, FOR MAN A22 BUS	1.00	\$1,868.80	10.00	\$1,681.92	Replace	X R
010304	VE	8-25101-6539	HEADLAMP, LH (MAN BUS)	1.00	\$1,603.60	10.00	\$1,443.24	Replace	?
010306	VE	81-25320-6111	FLASHER, AUX HEADLAMP, LH (MAN BUS)	1.00	\$904.40	10.00	\$813.96	Replace	?
000917			IU BRACKET	1.00	\$35.00	0.00	\$35.00	Replace	✓ NPC
total					\$12,484.10		\$11,591.89		

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Stock Number	Part Name	Quantity	List Price \$	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
total									

ATUC

SS1E215C0007 / SMRT AUTOMOTIVE SERVICES PTE LTD
ENTRY DATE & TIME: 12/05/2021 14:24 (SGT)
SUBMITTED BY: LIM SING BEE (SMRT10)
VERSION: 1 (12/05/2021 14:24 (SGT))

Your NCD will be affected due to late reporting

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	12/05/2021 14:24 (SGT)
Date of Accident	10/05/2021 19:07 (SGT)
Exact Location of Accident	Opp Lian Aik Siong Machinery, Singapore
Additional Location Information	SENOKO ROAD (TOWARDS BS:47121-OPP LIAK AIK SIONG MACHINERY)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB1334R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SMRT BUSES LTD
Company Reg No	1XXXXX292D
Email Address	BARC@SMRT.COM.SG
Mobile Phone No	(Phone) +65-68662672
Alternative Phone No	(Office) +65-68662672

VEHICLE PARTICULARS

Manufacturer	Man
Model	MAN NL320F(A22)
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus
Transmission	Auto
CC	10518

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	D-21097498MFBP
Cover Note Number	-

DRIVER

Name of Driver	KHOO KAY HUAT
----------------	---------------

NRIC No	SXXXXX032B
Date Of Birth	04/02/1961
Occupation	Outdoor
Date Of Driving Pass	28/06/1985
Driving experience	35 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	BARC@SMRT.COM SG
Address	6 ANG MO KIO STREET 62
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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)	1
Has the driver been approached by unknown person(s)	No
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 10/05/2021 at around 1907hrs, I was on OSB from Sembawang Bus Interchange to Bus Stop 47121 to start my revenue service. While bus was travelling on the right lane of 02 lanes along Senoko Road heading towards the direction of Sembawang Bus Interchange on service 981, SMB1334R. My bus speed was around 35-40km/hrs. While bus was travelling straight along the road, I noticed that there was a pte car stopped (unusual stopping position) along the road side (left lane) on my left ahead so I slow down my bus while overtaking. When my bus front portion was about to pass the stationary pte car, it began to inch forwards and made an illegal U-turn in front of my bus and collided onto my bus front left portion. Upon seeing this, I immediately stepped on my bus brakes and stopped (bus was at slow speed). When had completely stopped, I immediately alighted to conduct checks on the third party driver. When third party drive was fine, I conduct checks on my bus for damage. While checking, I noticed that my bus left front windscreen cracked and body scratched while the pte car had its right front body dented and RHS mirror cover cracked.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY: 1

Vehicle Registration Number	SLK9010L
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Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

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)

-
-
-
-
Private car

MUHAMMAD RIDZWAN

-
-
-
NTUC Income Insurance Co-operative Ltd

SMB1334R
Bus/05/21/1010

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 **willful 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 lodgment 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 purposes 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time

Gay

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

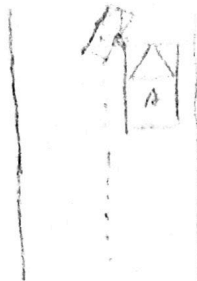


Reporting Centre Personnel's Signature
Name
NIC/FIN No.

SKETCH PLAN #2

SKETCH PLAN

A: SM1334R
B: SLK 94101



Senko Hov

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DECLARATION

1/We declare the



ars are true in every respect.

Policyholder's Signature _____
Date & Time _____

Driver's signature
(if driver is not the policyholder)
Date & Time.



Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No. _____