

Customer Code: 3000063

SMRT TAXIS PTE LTD

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4

SINGAPORE 757705

RECEIVED

8 4 JUN 2021

SMRT AUTOMOTIVE SERVICES PTE LTD Claims & Insurance Agency SMRT Automotive Services Pte Ltd 2 Tanjong Katong Road, Tower 3, Paya Lebar Quarter, #08-01, Singapore 437161 Tel: 65 69083530 Fax: 65 69083592

Tax Invoice

GST Reg No. : MR-8500001-7 CRN : 199004280Z Invoice No. : IV210600034 Date : 03.06.2021

Vehicle No. : SHF39M

Your Ref No. : TAX/05/21/2023

Our Ref No. : 24110886 Terms : 30 Days

			rerms		: 30 D	ays	
Description	Qty	Unit	Add	/ (D	iscount)		Amount
7-1		Cost	8		Amount		
Parts							
COVER, RR BUMPER ASSY	1.00	\$ 485.60	(25.00)) 5	121.40	\$	364.20
PAD, RR BUMPER, RH & LH , 1	2.00	\$ 4.00	(25.00)	, ,	2.00	\$	6.00
PAD, RR BUMPER, RH & LH , 2	2.00	\$ 4.00	(25.00)	, ,	2.00	\$	6.00
PAD, RR BUMPER, RH & LH , 3	2.00	\$ 11.00	(25.00)	Ş	5.50	\$	16.50
SEAL, RR BUMPER ARM, RH & LH	2.00	\$ 11.30	(25.00)	Ş	5.65	\$	16.95
CLIPS PIECE, FRT & RR BUMPER	10.00	\$ 4.50	(25.00)	Ş		\$	33.75
RETAINER, RR BUMPER, LH	0.00	\$ 132.60	0.00	\$		\$	0.00
RETAINER, RR BUMPER, RH	0.00	\$ 132.60	0.00	\$		\$	0.00
GUARD, RR BUMPER, LOWER	1.00	\$ 374.50	(25.00)			\$	280,88
COVER, GUARD RR BUMPER LOWER	0.00	\$	0.00	\$		\$	0.00
PAD, RR BUMPER, CTR	3.00	\$ 11.00	(25.00)	•		\$	24.75
REAR BUMPER REFLECTOR ASSY, REFLEX,	0.00	\$ 39.00	0.00	\$		\$	0.00
RH				·		*	0.00
REAR BUMPER REFLECTOR ASSY, REFLEX, LH	0.00	\$ 39.00	0.00	\$	0.00	\$	0.00
REAR BUMPER REINFORCEMENT	0.00	\$ 332.70	0.00	\$	0.00	\$	0.00
COVER, REAR FLOOR UNDER , RH	0.00	\$ 175.10	0.00	\$	0.00	\$	0.00
COVER, REAR FLOOR UNDER CENTER	0.00	\$ 229.90	0.00	\$	0.00	\$	0.00
COVER, REAR FLOOR UNDER , LH	0.00	\$ 241.90	0.00	\$	0.00	\$	0.00
PIXEL STICKER	2.00	\$ 60.00	0.00	\$	0.00	\$	120.00
ANTENNA, ELECTRICAL KEY	0.00	\$ 72.00	0.00	\$	0.00	\$	0.00
REVERSE SENSOR, REAR BUMPER	0.00	\$ 180.00	0.00	\$	0.00	\$	0.00
TAIL GATE BACK DOOR OUTSIDE GARNISH	0.00	913.60	0.00	\$	0.00	\$	0.00
SUB-ASSY			0.00	Y	0.00	Ÿ	0.00
EMBLEM SUB-ASSY REAR	0.00	\$ 47.90	0.00	\$	0.00	\$	0.00

Payment Instructions

By Cheque: Crossed and made payable to "SMRT Automotive Services Pte Ltd" with invoice no. indicated on the reverse side. No receipt will be issued unless requested.

By Bank Transfer:

Account Name : SMRT Automotive Services Pte Ltd

Rank Name : DDS Dank Ltd - SCD

Bank Account No.: 018-008617-4

Swift Code : DBSSSGSG

Koo Yew Chung Koo Yew Chung (Jun 3, 2021 18:03 GMT+8)

Authorised Signature for SMRT Automotive Services Pte Ltd



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						, 30 D	ays	
Description	Qty	8	Unit	Add	/ (Dis	scount)		Amount
			Cost	8	Aı	nount		
NAME PLATE (HYBRID) , LUGGAGE COMPARTMENT DOOR	0.00	\$	54.60	0.00	\$	0.00	\$	0.00
NAME PLATE (PRIUS) , LUGGAGE COMPARTMENT DOOR	0.00	\$	54.60	0.00	\$	0.00	\$	0.00
SMRT LOGO	0.00	\$	7.80	0.00	\$	0.00	\$	0.00
STICKER DECAL 6555 8888	0.00	\$	21.60	0.00	\$	0.00	\$	0.00
TAIL GATE PANEL SUB-ASSY, BACK DOOR	0.00	\$1	147.80	0.00	s	0.00	\$	0.00
TAIL GATE BACK DOOR HINGE ASSY, LH	0.00	\$	61.00	0.00	\$	0.00	\$	0.00
TAIL GATE BACK DOOR HINGE ASSY, RH	0.00	\$	61.00	0.00	\$	0.00	\$	0.00
FAIL GATE LOCK ASSY, BACK DOOR	0.00	\$	467.00	0.00	\$	0.00	\$	0.00
TAIL GATE LOCK COVER , BACK DOOR	0.00	\$	30.20	0.00	Ş	0.00	\$	0.00
AUTO TAILGATE SYSTEM	0.00	\$2	520.00	0.00	\$	0.00	\$	0.00
SPOILER SUB-ASSY, REAR	0.00	\$1!	575.40	0.00	\$	0.00	\$	0.00
LAMP SET, STOP CENTER	0.00	\$	192.30	0.00	\$	0.00	S	0.00
END PANEL SUB-ASSY, BODY LOWER BACK	0.00	\$ 1	651.00	0.00	\$	0.00	\$	0.00
SEALANT SIKAFLEX	0.00	\$	37.00	0.00	s	0.00	\$	0.00
				-	ub-Tot		\$	869.03
Labour								
TO REPAIR REAR PORTION	1.00	\$ 2	200.00	0.00	\$	0.00	\$	200.00
Others								
O RESPRAY REAR BUMPER	1.00	\$ 2	200.00	0.00	\$	0.00	\$	200.00
O RESPRAY BUMPER BEAM	0.00		.80.00	0.00	\$	0.00	\$	0.00
O RESPRAY TAIL GATE	0.00	\$ 3	378.00	0.00	\$	0.00	\$	0.00
O RESPRAY TAILGATE OUTSIDE GARNISH	0.00		80.00	0.00	\$	0.00	\$	
O RESPRAY REAR SPOILER			80.00	0.00	\$	0.00	۶ \$	0.00
	. ,	, _		0.00	Y	0.00	ş	0.00

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By Bank Transfer:

Account Name : SMRT Automotive Services Pte Ltd

Bunk Name : DB9 Bank Ltd - 5GD

Bank Account No.: 018-008617-4
Swift Code : DBSSSGSG

Authorised Signature

for SMRT Automotive Services Pte Ltd



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Description	Qty		Unit	Add	/ (Dis	count)	Amount
			Cost	ક	Am	ount	
TO RESPRAY REAR PANEL	0.00	\$	180.00	0.00	\$	0.00	\$ 0.00
TO CHECK WIRING AND SYSTEM FUNCTION	0.00	\$	80.00	0.00	\$	0.00	\$ 0.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	1.00	\$	30.00	0.00	\$	0.00	\$ 30.00
TO REMOVE AND INSTALL LUGGAGE COMPARTMENT TRIM TO FACILITATE REPAIR.	0.00	\$:	120.00	0.00	\$	0.00	\$ 0.00
TO REMOVE AND REFIT WIRE HARDESS	0.00	\$ 2	200.00	0.00	\$	0.00	\$ 0.00
TO REPLACE SUNDRY PARTS	0.00	\$:	100.00	0.00	\$	0.00	\$ 0.00
TO WASH AND VACUUM	0.00	\$	60.00	0.00	\$	0.00	\$ 0.00
				GRANI	TOTA	L	\$ 1,299.0

Remark :

Make/Model

Accident Date : 08.05.2021

Payment Instructions

By Cheque: Crossed and made payable to "SMRT Automotive Services Pte Ltd" with invoice no. indicated on the reverse side. No receipt will be issued unless requested.

By Bank Transfer:

Account Name : SMRT Automotive Services Pte Ltd

Bunk Name : DBS Bank Ltd - SGD

Bank Account No.: 018-008617-4 Swift Code

: DBSSSGSG

Authorised Signature for SMRT Automotive Services Pte Ltd



SMRT Taxis Pte Ltd

MEMORANDUM

To:

Claims Dept

Our Ref:

TAX/05/21/2023

From:

SMRT Taxis Pte Ltd

Date:

25/5/2021

ACCIDENT ON 8/5/2021 INVOLVING SHF 39M & SMA 77U ALONG UPPER SERANGOON RD TOWARDS SENGKANG

This is to confirm that the daily rental rate for SHF 39M is \$112.35 per day.

Please proceed to recover any rental loss from the third party as a result of the above accident.

Thank you.

Yours sincerely SMRT TAXIS PTE LTD





Laid Up Report

Accident Start Date : 01/05/2021

Date Generated: 24/05/2021

Accident End Date : 24/05/2021

User Name : LeeGek

Case Reference Number	Vehicle Registration Number	Company Type	Vehicle Make	Vehicle Model	Job Card Number	Date and Time (Accident Repair)	Date and Time (Repair Completed)
TAX/05/21/2023	SHF39M	SMRT Taxis Pte Ltd	TOYOTA	PRIUS4FL	24110886	10/05/2021 11:06 AM	14/05/2021 1:01 PM

SS1E215A0009 / SMRT AUTOMOTIVE SERVICES PTE LTD ENTRY DATE & TIME: 11/05/2021 09:38 (SGT) SUBMITTED BY: LIM WEI SIONG (SMRT 01) VERSION: 1 (11/05/2021 09:38 (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 11/05/2021 09:38 (SGT) Date of Accident 08/05/2021 12:25 (SGT) **Exact Location of Accident** Upper Serangoon Rd, Singapore Additional Location Information UPPER SERANGOON TOWARDS SENGKANG Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SHF39M

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

Model Prius 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? No - Claiming third party Vehicle Category Taxi Transmission Auto CC 1798

INSURANCE COMPANY

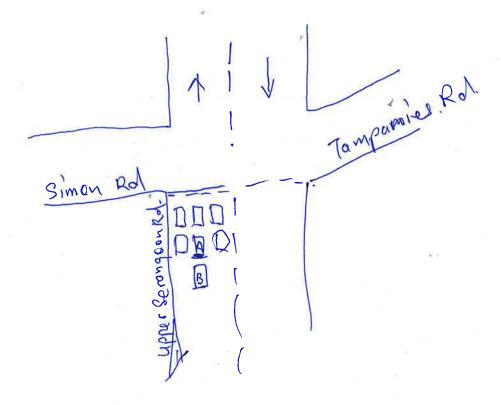
Name of Insurance Company MS First Capital Insurance Ltd Type of Coverage ThirdParty Fleet Policy Yes Policy Number D-21097466MFSH Cover Note Number

DRIVER

Name of Driver LEE YONG GUAN NRIC No SXXXX638B



Date Of Birth 06/02/1963 Occupation Outdoor **Date Of Driving Pass** 22/01/1982 Driving experience 39 YEARS AND 4 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 Collision - Head to Rear 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 Female DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? Nα If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS STATIONARY ALONG UPPER SERANGOON ROAD TOWARDS SENGKANG WITH ONE PASSENGER (FEMALE CHINESE) ON BOARD AS IT WAS THE RED TRAFFIC LIGHT. SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SMA77U 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** Vehicle Registration Number SMA77U Vehicle Manufacturer Vehicle Model Vehicle Variant



	Α
a	

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

lm 10/5/2021

Witnessed by Reporting Centre Personnel

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' 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), w hich 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



Date: 10 5 2021

Our Ref. No.:

l atter of	Authorisation
Letter of	Authorisation
1, keel	me Yong Guan (NRIC No.:
	hirer / relief driver / taxi share driver of SMRT taxi registration number
SHF39	M hereby authorise SMRT Automotive Services Pte Ltd
	') to deal with all matters arising out of the accident between my taxi
and Salve	happened on 8 5 & Limit 2.25 p.W
along	presse Serangoon Rd.
(the "Accide	ent") on my behalf, including but not limited to instituting and any claims or
proceedings	against such party or parties (as AutoSvs deems fit in its absolute
discretion) in	n respect of any claim, demand, loss, cost, expense, liability, damages or
action made	against us or incurred or suffered by us.
Without pre	udice to the foregoing, I further authorise AutoSvs to negotiate, resolve
and settle ar	ny proceeding or claim arising out of the accidents, including but not limited
to doing any	act or executing any document or signing the Discharge Voucher on my
behalf as ma	ay be required.
Name	Lee Yong Guan Signature:
NRIC No.	
Tel No.	
	2
Address	Approximation of the contract

A Singapore Government Agency Website

Enquire Vehicle-Related Transaction History

Transaction History Details

Log Date/Time:

11 May 2021 / 09:39:40

Asset Type: Asset ID: Transaction Type:

User ID:

Vehicle SMA77U

18.32 Insurance Enquiry (GIRO Payment) ESASBAHO - BALQISH BINTE ABDUL HALIL Transaction Amount:

\$7,49

Business Transaction Reference No.:

External Agency

20210511093940748186

Search Date / Time:

08 May 2021 12:25:00

Insurance Company:

AIG ASIA PACIFIC INSURANCE PTE, LTD.

Information displayed is correct as at the log date and time.

Enquire Related Logs

ОК