

(08/11/13) wef

ASS. REC. BY: Paul

REF:

369K

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:

NTUC

Policy No.

Claims No.

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 Rpt:

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:

SHF 2103

Yr Regn: 2019 106L

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

Truck / Trailer or

Make:

TOYOTA PRIUS 5DR H-B AUTO c.c 1798

Colour:

MAROON

A/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTDKB3FU703089285

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195/65R15

R:

22

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

TOYO / YOKO or

SAILUN

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

26/07/21

D.O.I.

28/07/21

Survey held at

SMRT

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

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐

Prel. Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

1)

☐

Final Report

Date/Time, File Return to?

Transportation:

2)

Add Fee: ☐ : Site Insp (\$

) S + RS, SI

☐ : Interview (\$

) Photos

☐ : Tech. Invs (\$

) Others

☐ : Weekend (\$

)

Report Format :

Lump Sum / I.B.I: (\$

TOTAL



Case Details

Case Reference Number : TAX/07/21/2055
 Type of Repair : Accident Repair
 Vehicle Registration Number : SHF210J

Company Type : SMRT Taxis Pte Ltd
 Estimation ID : EST-15511-ID
 Assigned By : Wei Siong #

Insurance Company Name : NTUC Income Insurance Co-operative Ltd
 Accident Date and Time : 26/07/2021 03:40 AM
 Vehicle Age(In Months) : 19

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	1	521.00	521.00	25.00	390.75	Replace	1	390.75	Replace ▾	de
One Time Key In	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.50	45.00	25.00	33.75	Replace	10	33.75	Replace ▾	ne
One Time Key In	Main			COVER, FR BUMPER RH	1	30.20	30.20	25.00	22.65	Replace	0	0	Not Give ▾	Xsu
One Time Key In	Main			COVER, FR BUMPER LH	1	30.20	30.20	25.00	22.65	Replace	1	0	Old Dam ▾	OLD DAMAG
One Time Key In	Main			BRACKET, FR BUMPER	1	110.50	110.50	25.00	82.88	Replace	0	0	Not Give ▾	Xsu
One Time Key In	Main			NUMBER PLATE	1	35.00	35.00	0.00	35.00	Replace	0	0	Not Give ▾	Xnn
One Time Key In	Main			NUMBER PLATE FRAME	1	25.00	25.00	0.00	25.00	Replace	0	0	Not Give ▾	Xnn
One Time Key In	Main			GRILLE, RADIATOR	1	178.60	178.60	25.00	133.95	Replace	0	0	Not Give ▾	Xnn
One Time Key In	Main			LAMP ASSY, FOG, RH	1	237.10	237.10	10.00	213.39	Replace	0	0	Not Give ▾	Xnn
One Time Key In	Main			LAMP ASSY, FOG, LH	1	237.10	237.10	10.00	213.39	Replace	0	0	Not Give ▾	Xsu

Total Spare Part Cost 9,105.11

Lump Sum Discount (%) 0.00

Final Spare Part Cost 9,105.11

Surveyor Total 3,535.67

Lump Sum Dis (%) 0

Final Sur Total 3,535.67

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			SEAL, HOOD TO FR END	1	85.50	85.50	25.00	64.13	Replace	0	0	Check	?
One Time Key In	Main			MOULDING, FRONT BUMPER SIDE, RH	1	95.60	95.60	25.00	71.70	Replace	1	0	Old Dam	Xan
One Time Key In	Main			MOULDING, FRONT BUMPER SIDE, LH	1	95.60	95.60	25.00	71.70	Replace	0	0	Not Give	Xan
One Time Key In	Main			SUPPORT, FR BUMPER RH	1	80.10	80.10	25.00	60.07	Replace	0	0	Not Give	Xan
One Time Key In	Main			SUPPORT, FR BUMPER LH	1	82.30	82.30	25.00	61.72	Replace	0	0	Not Give	Xan
One Time Key In	Main			ABSORBER, FR BUMPER	1	80.20	80.20	25.00	60.15	Replace	0	0	Check	?
One Time Key In	Main			REINFORCEMENT FRONT UPPER	1	716.60	716.60	25.00	537.45	Replace	0	0	Check	?
One Time Key In	Main			ABSORBER, FR BUMPER LOWER	1	132.70	132.70	25.00	99.52	Replace	0	0	Not Give	Xan
One Time Key In	Main			REINFORCEMENT FRONT LOWER	1	246.10	246.10	25.00	184.57	Replace	0	0	Not Give	Xan
One Time Key In	Main			EXTENSION SUB-ASSY, RH	1	120.10	120.10	25.00	90.07	Replace	0	0	Not Give	Xan
One Time Key In	Main			EXTENSION SUB-ASSY, LH	1	120.10	120.10	25.00	90.07	Replace	0	0	Not Give	Xan
One Time Key In	Main			GRILLE SUB-ASSY	1	422.50	422.50	25.00	316.88	Replace	0	0	Not Give	Xan
One Time Key In	Main			EMBLEM ASSY FRONT	1	105.80	105.80	25.00	79.35	Replace	0	0	Not Give	Xan
One Time Key In	Main			GRILLE, SUB - ASSY, 2	1	160.50	160.50	25.00	120.38	Replace	0	0	Not Give	Xan
One Time Key In	Main			HOOD SUB-ASSY	1	983.10	983.10	25.00	737.33	Replace	1	737.33	Replace	bf ✓

Total Spare Part Cost 9,105.11

Surveyor Total 3,535.67

Lump Sum Discount (%) 0.00

Lump Sum Dis (%) 0

Final Spare Part Cost 9,105.11

Final Sur Total 3,535.67

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			INSULATOR, HOOD	1	410.90	410.90	25.00	308.17	Replace	0	0	Not Give	X11
One Time Key In	Main			HINGE ASSY, HOOD, RH	1	58.90	58.90	25.00	44.17	Replace	0	0	Not Give	X11
One Time Key In	Main			HINGE ASSY, HOOD, LH	1	58.90	58.90	25.00	44.17	Replace	0	0	Not Give	X11
One Time Key In	Main			CABLE ASSY, HOOD	1	54.90	54.90	25.00	41.17	Replace	0	0	Not Give	X11
One Time Key In	Main			LOCK ASSY, HOOD	1	135.00	135.00	25.00	101.25	Replace	0	0	Not Give	X11
One Time Key In	Main			UNIT, HEADLAMP, LH	1	2,637.60	2,637.60	10.00	2,373.84	Replace	1	2,373.8	Replace	SC1
One Time Key In	Main			UNIT, HEADLAMP, RH	1	2,637.60	2,637.60	10.00	2,373.84	Replace	0	0	Not Give	X11
Total Spare Part Cost									9,105.11	Surveyor Total		3,535.67		
Lump Sum Discount (%)									0.00	Lump Sum Dis (%)		0		
Final Spare Part Cost									9,105.11	Final Sur Total		3,535.67		

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT PORTION	676.00	400	
Total:			676.00	400.00	

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 REPSRAY FRONT HOOD	378.00	200	
Total:			756.00	400.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
Total:			440.00	40.00	

No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0	Xm
2	Main	TO REMOVE AND REFIT WIRE HARDESS	200.00	40	
3	Main	TO REPLACE SUNDRY PARTS	100.00	0	Xm
4	Main	TO WASH AND VACUUM	60.00	0	Xm
Total:			440.00	40.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	9,105.11	3,535.67
Total Labour Cost	676.00	400.00
Total Spray Painting	756.00	400.00
Other	440.00	40.00
Overall Total	10,977.11	4,375.67
Lump Sum Repair Option	<input type="checkbox"/>	<input type="checkbox"/>
Lump Sum Total	0.00	4,375.67
Surveyor Approved Amount		4,375.67
No of Repair Days*	5	4
Remarks	-	PART BY PART REPAIR /BEFORE PAINT PHOTO.
Surveyor Name		Rasul
Signature		
Survey Date	28/07/2021	<div>Save Clear</div>

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:

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 27/07/2021 10:40 (SGT)
Date of Accident 26/07/2021 11:40 (SGT)
Exact Location of Accident Dunearn Rd, Singapore
Additional Location Information DUNEARN ROAD TOWARDS CHERRY AVENUE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHF210J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SMRT TAXIS PTE LTD
Company Reg No 1XXXXX369K
Email Address AUOT-SVC-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 ER CHIN WEE
NRIC No SXXXX492J

Date Of Birth	07/10/1958
Occupation	Outdoor
Date Of Driving Pass	16/08/1979
Driving experience	41 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	AUTO-SVC-TARC@SMRT.COM.SG
Address	11
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RELIEF
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) 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

I WAS STATIONARY ALONG DUNEARN ROAD TURNING LEFT TOWARDS CHERRY AVENUE AND WAS WAITING FOR THE FRONT LORRY YP8735E TO TURN FIRST. THE LORRY TURNED LEFT AND THEN STARTED TO REVERSE. I SOUNDED MY HORN TO ALERT THE THIRD PARTY BUT THE THIRD PARTY CONTINUED TO REVERSE AND HIT ONTO THE FRONT PORTION OF MY TAXI. AFTER WHICH HE DROVE AWAY. I WENT AFTER THE THIRD PARTY AND MANAGED TO STOP HIM A DISTANCE AWAY

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	YP8735E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

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.
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.

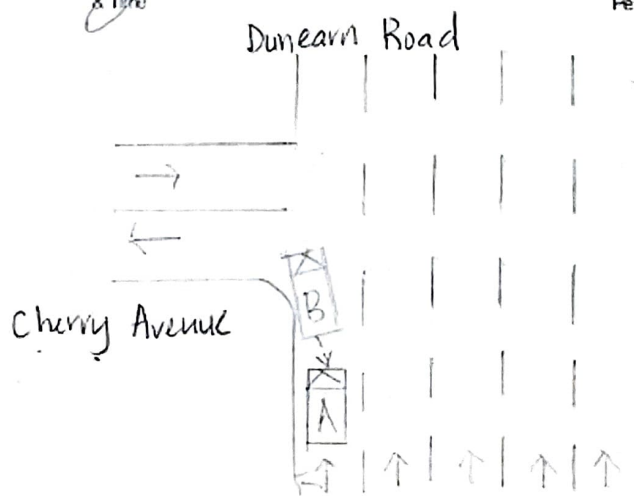


Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel



A - SHF210J
B - YP8735E

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHF210J
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Jul 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Maroon
Manufacturing Year:	2019
Engine No.:	2ZR2F34751
Chassis No.:	JTDKB3FU703089255
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,807.00
Original Registration Date:	20 Dec 2019
First Registration Date:	20 Dec 2019
Transfer Count:	0
Actual ARF Paid:	\$14,530.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Dec 2027
PARF Rebate Amount:	\$10,897.00
COE Expiry Date:	19 Dec 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$25,581.00
COE Rebate Amount:	\$20,423.00
Total Rebate Amount:	\$31,320.00

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 29 Jul 2021

OK