Weekend (\$

TOTAL

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



Case Details

Case Reference Number :

TAX/09/21/2055

Type of Repair : Accident Repair

Vehicle Registration Number: SHF283Z

Company Type : Strides Taxi Pte

Ltd

Estimation ID : EST-16193-ID Assigned By : Wei Siong # Insurance Company Name: NTUC Income Insurance Co-operative

Ltd

Accident Date and Time: 25/09/2021 08:00 PM

Vehicle Age(In Months) : -

Documents / Photographs

View Documents / Photographs

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

				SMRT Reco	mmen	dation						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 n	Main			HUB & BEARING ASSY, RH & LH	1	668.90	668.90	25.00	501.67	Replace	0	0 1 1	Check ✓	?
one ime (ey	Main			DISC, BRAKE FRONT	1	502.70	502.70	25.00	377.02	Replace	0	0	Check ✓	7
ne ime ey	Main			KNUCKLE, STEERING, LH	1	663.40	663.40	25.00	497.55	Replace	0	0	Check ✓	?
ne ime ey	Main			GEAR ASSY, STEERING	1	1,955.40	1,955.40	25.00	1,466.55	Replace	0	0	Check V	7
ne me ey	Main			END SET, TIE ROD, LH	1	186.70	186.70	25.00	140.02	Replace	0	0	Check ~	?
ne me ey	Main			END SET, TIE ROD, RH	1	186.70	186.70	25.00	140.02	Replace	0	0	Not Giv€ ✓	XAI
ne me ey	Main			SHAFT ASSY, FRONT DRIVE , LH	1	1,251.70	1,251.70	25.00	938.78	Replace	0	0	Check 🗸	7
ne ime ley	Main			TUBE, FRONT BRAKE, NO.5	1	22.60	22.60	25.00	16.95	Replace	0	.0	Check ~	7
One Time Key In	Main			BRAKE HOSE, FLEXIBLE(FOR FRONT LH)	1	110.00	110.00	25.00	82.50	Replace	0	0	Check 🗸	7

Total Spare Part Cost 18,018.30

Lump Sum Discount (%) 0.00

Surveyor Total 2,861.91

Lump Sum Dis (%)

bra-

Final Sur Total 2,861.91

Final Spare Part Cost 18,018.30

J	,			SMRT Reco	mmen	dation						Surve	eyor Approval	
þe	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 n	Main			BRAKE FLUID	1	20.00	20.00	0.00	20.00	Replace	1	20.00	Replace ✓	nec/
One Time Key	Main			SENSOR, SPEED, FRONT LH	1	543.90	543.90	10.00	489.51	Replace	0	0	Check ✓	7
One Time Cey	Main			COVER, FR BUMPER	1	521.00	521.00	25.00	390.75	Replace	1	390.75	Replace ¥	de r
One Fime Key n	Main			SUPPORT, FR BUMPER LH	1	82.30	82.30	25.00	61.72	Replace	0	0	Check ✓	7.
One Time Key	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.50	45.00	25.00	33.75	Replace	10	33.75	Replace V	per/
one ime iey	Main			PAD, FRONT BUMPER (NO.1)	1	40.70	40.70	25.00	30.53	Replace	0	0	Not Giv€ ∨	Ken
ne ime ey	Main			PAD, FRONT BUMPER (NO.2)	2	36.00	72.00	25.00	54.00	Replace	0	0	Not Giv€ ∨	Ksm
ne ime ey	Main			FENDER SUB- ASSY, FR , LH	1	977.80	977.80	25.00	733.35	Replace	1	733.35	Replace >	ben /
ne me ey	Main			LINER, FR FENDER, LH	1	210.30	210.30	25.00	157.73	Replace	1	157.73	Replace 🗸	de/
ne me	Main			PROTECTOR, FR FENDER LH	1	93.90	93.90	25.00	70.43	Replace	0	0	Check ✓	?.
	Main			RETAINER, FR FENDER NO. 2	1	16.10	16.10	25.00	12.08	Replace	1	12.08	Replace 💙	m
ne ne ey	Main			RETAINER, FR FENDER NO. 1	1	5.00	5.00	25.00	3.75	Replace	1	3.75	Replace 🗸	ne/
ne me ey	Main			PAD, FR WHEEL LH	1	59.60	59.60	25.00	44.70	Replace	0	0	Check ✓	?
ne ime ey	Main			EMBLEM, SIDE PANEL (HYBRID)	1	54.60	54.60	25.00	40.95	Replace	1	40.95	Replace 🗸	me/
One Fime Key	Main			APRON SUB- ASSY, FRONT FENDER , LH	1	979.40	979.40	25.00	734.55	Replace	0	0	Not Giv€ ∨	XIV

Total Spare Part Cost 18,018.30

Lump Sum Discount (%) 0.00

Surveyor Total 2,861.91

Lump Sum Dis (%)

0

Final Spare Part Cost 18,018.30

Final Sur Total 2,861.91

				SMRT Rec	ommei	ndation						Surv	eyor Approval	
M pe	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, ENGINE UNDER SIDE LH	1	80.10	80.10	25.00	60.07	Replace	0	0	Not Giv€ ∨	×11
One Time Key In	Main			UNIT , HEADLAMP , LH	1	2,637.60	2,637.60	10.00	2,373.84	Replace	0	0	Not Giv€ ✔	Xnn
One Time Key In	Main			HOOD SUB- ASSY	1	983.10	983.10	25.00	737.33	Replace	1	0	Repair ✓	R
One Time Key In	Main			HINGE ASSY, HOOD, LH	1	58.90	58.90	25.00	44.17	Replace	0	0	Check ✓	?
One Time Key In	Main			MOULDING LH	1	85.50	85.50	25.00	64.13	Replace	0	0	Not Giv€ ✓	Xnn
One Time Key In	Main			COVER SUB- ASSY, FRONT PILLAR , UPR LH	1	100.40	100.40	25.00	75.30	Replace	0	0	Not Giv€ ➤	Xnn
One Time Key In	Main			PILLAR, FRONT BODY, LH	1	350.00	350.00	25.00	262.50	Replace	1	0	Repair 🗸	R
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Check ~	7.
One Time Key In	Main			CAP SUB-ASSY, WHEEL	1	211.50	211.50	25.00	158.63	Replace	0	0	Not Give ❖	Kan
One Fime Key n	Main			WHEEL, DISC FRONT	1	1,879.40	1,879.40	25.00	1,409.55	Replace	1	1,409.!	Replace ✓	cut 1
One Time Cey	Main			NUT , HUB , WHEEL, DISC	5	7.20	36.00	25.00	27.00	Replace	0	0	Not Giv€ ✓	Xn1
	Main			LOWER ARM SUB-ASSY, FRONT LH	1	760.10	760.10	25.00	570.08	Replace	0	0	Check ✓	9.
	Main			JOINT ASSY, LWR BALL , RH & LH	1	238.40	238.40	25.00	178.80	Replace	0	0	Check 🕶	7.
One Fime Key	Main			ABSORBER SET, SHOCK, FRONT LH	1	472.30	472.30	25.00	354.23	Replace	0	0	Check ~	?
One Time Key In	Main			SUPPORT SUB- ASSY, FRONT SUSPENSION, RH & LH	1	236.40	236.40	25.00	177.30	Replace	0	0	Check ✓	Ç

Total Spare Part Cost 18,018.30

Surveyor Total 2,861.91

Lump Sum Discount (%) 0.00

Lump Sum Dis (%)

Final Spare Part Cost 18,018.30

Final Sur Total 2,861.91

				SMRT Rec	omei	IUALION						Surv	eyor Approval	
pe	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, FRONT SHOCK ABSORBER DUST, RH & LH NO.1	1	49.90	49.90	25.00	37.42	Replace	0	0	Check ~	7.
One Time Key In	Main			BUMPER, FRONT SPRING, RH & LH	1	18.20	18.20	25.00	13.65	Replace	0	0	Not Giv€ ∨	X17
One Time Key In	Main			SPRING, FRONT COIL, RH & LH	1	158.30	158.30	25.00	118.73	Replace	0	0	Not Giv€ ✓	Kny
One Time Key In	Main			INSULATOR, FRONT COIL SPRING, LOWER RH & LH	1	33.50	33.50	25.00	25.13	Replace	0	0	Not Giv€ ∨	Lan
One Time Key In	Main			LINK ASSY, FRONT STABILIZER , RH & LH	1	237.10	237.10	25.00	177.82	Replace	0	0	Check ~	?
One Time Key In	Main			BEARING, STRUT MOUNTING, LH	1	112.00	112.00	25.00	84.00	Replace	0	0	Check ~	7.
One Time Key In	Main			INSULATOR, FRONT COIL SPRING, UPPER RH & LH	1	19.80	19.80	25.00	14.85	Replace	0	0	Not Giv€ ∨	K11
One Time Key In	Main			FRONT CROSSMEMBER	1	2,585.50	2,585.50	25.00	1,939.13	Replace	0	0	Not Giv€ ❖	211
One Time Key n	Main			MOULDING ASSY, BODY ROCKER PANEL , LH	1	594.80	594.80	25.00	446.10	Replace	0	0	Not Giv€ ✓	Lng
One ime iey	Main			PANEL SUB- ASSY, FRONT DOOR LH	1	1,300.70	1,300.70	25.00	975.53	Replace	1	0	Repair ~	R
ne ime ey	Main			CHECK ASSY, FRONT DOOR	1	183.80	183.80	25.00	137.85	Replace	0	0	Not Giv∈ ∨	4M
ne ime ey	Main			WEATHERSTRIP, FRONT DOOR LH	1	231.30	231.30	25.00	173.48	Replace	0	0	Not Giv€ ✓	fnn
ine ime iey	Main			HINGE ASSY, FRONT DOOR , UPPER LH	1	97.50	97.50	25.00	73.13	Replace	0	0	Not Giv€ ✔	KN
ne Ime Key n	Main			HINGE ASSY, FRONT DOOR , LOWER LH	1	110.60	110.60	25.00	82.95	Replace	0	0	Not Giv∈ ✓	Knn
One Time Key	Main			STICKER DECAL SMRT (DOOR)	1	60.00	60.00	0.00	60.00	Replace	1	60.00	Replace V	Nu/

Total Spare Part Cost 18,018.30

Lump Sum Discount (%) 0.00

Surveyor Total 2,861.91

Lump Sum Dis (%)

Final Sur Total 2,861.91

Final Spare Part Cost 18,018.30

ur's Cost Detail

,No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
/	Main	TO REPAIR LH PORTION	1,352.00	500.00	
Total:			1,352.00	500.00	

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 RESPRAY FRONT FENDER LH	378.00	200	
3	Main	TO RESPRAY APRON PANEL LH	180.00	o Kan	
4	Main	TO RESPRAY FRONT PILLAR LH	180.00	100	
5	Main	TO RESPRAY FRONT DOOR LH	378.00	200	
6	Main	TO RESPRAY ROCKER PANEL MOULDING	180.00	° ×an	
7	Main	RESPRAY WHEEL CAP	180.00	· KM	
8	Main	TO RESPRAY RIM	180.00	o XVV	
9	Main	TO REPSRAY FRONT HOOD	378.00	200	
tal:			2,412.00	900.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TOWING CHARGE	56.00	0 \$?	receipt show cost
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	· ×17	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	40	
4	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60	
5	Main	TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE)	120.00	30	
		(OF INTING FOR OSE)			
6	Main	TO CHECK & RESET SYSTEM FUNCTION	350.00	· YAA	

Total:

	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
	Main	TO REMOVE AND REFIX UNDERCARRIAGE	350.00	150	
8	Main	TO REMOVE AND REFIX FRT CROSS MEMBER	250.00	· ×17	
9	Main	TO TRANSFER DOOR MECHANISM	120.00	· ×17	
10	Main	TO REPLACE SUNDRY PARTS	100.00	· Xny	
11	Main	TO WASH AND VACUUM	60.00	• X11	
Total			1,706.00	280.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	18,018.30	2,861.91
Total Labour Cost	1,352.00	500.00
Total Spray Painting	2,412.00	900.00
Other	1,706.00	280.00
Overall Total	23,488.30	4,541.91
ump Sum Repair Option		
ump Sum Total	0.00	4,541.91
rveyor Approved Amount		4,541.91
of Repair Days*	12	7
marks		RESURVEY BEFORE PAINT
veyor Name		Rasul
nature	M	

Survey Date

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:

50001 / Strides Automotive Services Pte Ltd ATE & TIME: 28/09/2021 09:22 (SGT) ED BY: SHANTI B THAIYAL NAYAGI (SMRT05) 1 (28/09/2021 09:22 (SGT))

SINGAPORE ACCIDENT STATEMENT

MPORTANT NOTICE

please report correctly the details of the accident to speed up the claims process.

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 28/09/2021 09:22 (SGT) Date of Accident 26/09/2021 04:00 (SGT) **Exact Location of Accident** SLE, Singapore Additional Location Information CTE TOWARDS SLE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHF2837

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Strides Taxi Pte Ltd Company Reg No 1XXXXX369K Email Address AUTO-SVCS-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 Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Taxi Transmission Auto 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

WONG KAI WAH SXXXX236D

Birth	16/03/1963
tion	Outdoor
Driving Pass	08/09/1985
experience	36 YEARS
Her	Male
hile Number	(Phone) +65-68662672
Phone Number	(Filone) +03-08002072
mail Address	AUTO OVOC TARGORIMET COM SC
	AUTO-SVCS-TARC@SMRT.COM.SG
Address complement	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	
GENERAL IN ONWATION OF THE AGGIDENT	
Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry
Tion outland	Diy
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?	
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
PASSENGER 1	
PASSENGER I	
Name	UNKNOWN
Gender	Male
PASSENGER 2	
	LINICALONAINI
Name	UNKNOWN
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	
Alt. Police Station Phone No	
Police Station Address	
Was notice of intended Prosecution given?	
If yes, against whom?	<u>-</u> n
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT T/20210926/2019	
NEI EN TOT OLIOE NEI ONT 17202-10020-20-10	
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

to the Miner Month and	
e Registration Number	SKD9148Y
cle Manufacturer	
icle Model	■
ICE Moss.	-
hicle Variant	_
Pehicle Colour	
Vehicle Category	1. J <mark>a</mark> n 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Vehicle Category	Private car
Name of Driver	DON MARK RICTO FERNANG
Contact Number	DOIN WARK RICTO FERNANG
	o ≡ t vi ^t ,
Address	
Address complement	
Postcode	1 5 pr 1. 15
Insurance Company Name	_ a 1 ₁
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)

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, invaices, 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 &

23 9 2021 12.35 pm

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

Witnessed by Reporting Centre Personnel

Sketch Plan

escribe Circumstances of t	he Accident	
	The state of the s	
A CAN DEPTH OF THE PARTY OF THE		
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		distribution of the Market of the Cold and Ma
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Declaration

We declare the foregoing particulars are true in every respect.

OES MAN

Policyholder's Signature / Date & Time

24 d 21 17.32 bw

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

A. 27/9/21

Witnessed by Reporting Centre Personnel





Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

l of 3 Report No. T/20210926/2019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/09/2021 11:41		lade:	Vide Report No.: L/20210926/0053	Station Diary No.: 31	
Informar	nt's Particu	ulars		PATE TO SEE THE SECOND	
Name of WONG K	Informant: (AI WAH	. 1	Address: APT BLK 334A YISHUN STR 761334	REET 31 #03-93 SINGAPORE	
ID Type / ID No.: NRIC NO / S1600236D		36D	Contact No.: Home/Office:	Mobile: 86605329	
Nationali SINGAP	ty: ORE CITIZ	'EN	Email:		
Sex: Male	Age: 58	Date of Birth: 16/03/1963	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3	Date of Expiry:	

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/09/2021 04:00	Type of Location Bend	
Location: SELETAR EX Weather: Clear	PRESSWAY	Road Surface: Dry		Road Speed Limit: 60 Km/h	
Traffic Flow: Traffic Control:			Company of the Compan	Traffic Volume: No Traffic	
Traffic Flow: One Way				No Traffic	

Details of V	enicie invo	ivea .		All the state of t		
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHF283Z	Taxi	TOYOTA	PRIUS	Maroon	Seriously Damaged	
SKD9148Y	Car				Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



2 of 3

Report No. T/20210926/2019

Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827

Tel No: 1800-8529999 **CONTINUATION OF REPORT**

Name	WONG KAI WAH		ID No.		S1600236D	
Related Vehicle	SHF283Z (Taxi)			Conta	ct No.	86605329
Hospital/Clinic	KHOO TECK PUAT	HOSPITAL		Class Drivin Licend Expiry	g ce &	Class: 2B,3 Date of Expiry: NIL
Date Treatment	26/09/2021		Date Disc	harge	26/09	/2021
No. of Days granted Medical Leave 04			Degree of	f Injury	Sligh	and the second s

Brief Details.

Reference to incident L/20210929/0053, traffic police has been attended.

On 26/09/2021 at about 0400hrs, I was driving my SMRT Taxi bearing plate SHF283Z (Maroon Toyota Prius) with two passengers seated on the rear. Whilst travelling along CTE towards SLE just before the exit to Seletar West Link at the slip road, my vehicle was on the most right lane and suddenly a car bearing SKD9143Y on his left side hit on to the left side portion of my front tyre. Due to the impact, I lost control of my steering wheel and swerved to the lane 1 of 4 on CTE towards SLE direction. Later that morning, I proceed to Khoo Teck Puat Hospital to check on my injuries. I was given 4 days of Medical Leave.

085

Single on a Police Force





Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

3 of 3 Report No. T/20210926/2019

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the <u>report number</u> as reference.

Signature of Officer Recording The Report L / Staff Sgt MOHAMED FARHAN BIN HUSIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 26/09/2021 11:41
Officer In Charge Of Case: TP / GIT / Staff Sgt ROIZMAN BIN MOHAMED POSARI Contact No.: 65476131	Classification Of Case:
Authentication Stamp NP168 Signature:	

> Back to One Motoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle Na.:	
	SHF283Z
Vehicle to be Exported:	A STREET OF STREET STREET STREET
Intended Deregistration Date:	30 Sep 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5OR HATCHBACK (AUTO)
Primary Colour:	Maroon
Manufacturing Year:	2019
Engine No.:	- 2ZR2F47611
Chassis No.:	JTDKB3FU303089477
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,807.00
Original Registration Date:	26 Dec 2019
First Registration Date:	26 Dec 2019
Transfer Count:	0
Actual ARF Paid:	\$14,530,00
PARF Eligibility:	The state of the s
PARF Eligibility Expiry Date:	25 Dec 2027
PARF Rebate Amount:	\$10,897.00
COE Expiry Date:	25 Dec 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$25,581.00
COE Rebate Amount:	\$19,933.00
Total Repate Amount:	\$30,830.00

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 30 Sep 2021