

(03/11/13) wef  
ASS. REC. BY: *Jane*

REF:

369K

### ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: *SHF 1029K*  
at Workshop m/s *SMRT*  
of *60, WINDWARDS (nd PK CT)*  
Insured: *CTI*

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.

N/S	O/S

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

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: *SHF 1029K* Yr Regn: *2014 / DCL*  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: *TOYOTA PRIUS TAXI* C.C. *1798*

Colour: *MARON* A/C: *Insured / Std / NI / NA*

Sp. Reading: *732051* T/Radio: *Insured / Std / NI / NA*

Eng/No: \_\_\_\_\_

C/No: *JTDKN36U505754665*

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: *~*

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

TOYO / YOKO or *SAILUN*

Front

R/Bal. *6* mm R/Bal. *6* mm

L/Bal. *6* mm L/Bal. *6* mm

D.O.A. *2/11/21* D.O.I. *15/11/21*

Survey held at *SMRT*

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

*N/S FRT*  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

*REPAIR LIMIT - 3K*

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)

☐ : Interview (\$ \_\_\_\_\_)

☐ : Tech. Invs (\$ \_\_\_\_\_)

☐ : Weekend (\$ \_\_\_\_\_)

)     S + RS     SI

) Photos

) Others

Report Format : \_\_\_\_\_

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

TOTAL



## Case Details

Case Reference Number :  
TAX/11/21/2017  
Type of Repair : Accident Repair  
Vehicle Registration Number :  
SHF1029K

Company Type : Strides Taxi Pte Ltd  
Estimation ID : EST-16662-ID  
Assigned By : Taxi Claims Manager  
Team

Insurance Company Name : China Taiping Insurance (Singapore) Pte Ltd  
Accident Date and Time : 12/11/2021 04:30 AM  
Vehicle Age(In Months) : 83

## 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	de-
One Time Key In	Main			BUMPER CLIPS	10	1.61	16.10	25.00	12.08	Replace	10	12.08	Replace	na /
One Time Key In	Main			BUMPER SUPPORT F/RH	1	76.40	76.40	25.00	57.30	Replace	0	0	Not Give	Xm
One Time Key In	Main			BUMPER SUPPORT F/LH	1	76.40	76.40	25.00	57.30	Replace	1	57.30	Replace	cm /
One Time Key In	Main			BUMPER REINFORCEMENT FRT	1	498.40	498.40	25.00	373.80	Replace	0	0	Not Give	Xm
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	Xm
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	Xm
One Time Key In	Main			BUMPER GRILLE SUB-ASSY,LOWER	1	311.10	311.10	25.00	233.33	Replace	0	0	Not Give	Xm
One Time Key In	Main			WIRE, ENGINE ROOM, NO.3	1	242.00	242.00	10.00	217.80	Replace	0	0	Not Give	Xm

Total Spare Part Cost 10,109.14

Lump Sum Discount (%) 20.00

Final Spare Part Cost 8,087.31

Surveyor Total 2,088.77

Lump Sum Dis (%) 20

Final Sur Total 1,671.02

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			FOG LAMP LH	1	280.10	280.10	10.00	252.09	Replace	0	0	Check	?
One Time Key In	Main			LENS & BODY,FR TURN LH	1	511.80	511.80	10.00	460.62	Replace	0	0	Check	?
One Time Key In	Main			COVER, RADIATOR	1	122.80	122.80	25.00	92.10	Replace	0	0	Not Give	Xan
One Time Key In	Main			GRILLE, RADIATOR	1	310.60	310.60	25.00	232.95	Replace	0	0	Not Give	Xan
One Time Key In	Main			GRILLE, RADIATOR LOWER NO.2	1	94.60	94.60	25.00	70.95	Replace	0	0	Not Give	Xan
One Time Key In	Main			BUMPER LIP FRT	1	139.60	139.60	25.00	104.70	Replace	0	0	Not Give	Xan
One Time Key In	Main			BUMPER FRT ABSORBER LOWER	1	127.70	127.70	25.00	95.78	Replace	1	0	Old Dam	Xan
One Time Key In	Main			UNDER COVER CENTER	1	448.30	448.30	25.00	336.23	Replace	0	0	Not Give	Xan
One Time Key In	Main			UNDER COVER SIDE/RH	1	46.10	46.10	25.00	34.58	Replace	0	0	Not Give	Xan
One Time Key In	Main			DOOR FRT/LH	1	894.40	894.40	25.00	670.80	Replace	1	0	Repair	R
One Time Key In	Main			STICKER DECAL SMRT (DOOR)	1	60.00	60.00	0.00	60.00	Replace	1	60.00	Replace	near
One Time Key In	Main			HINGE LOWER LHF, DOOR	1	90.10	90.10	25.00	67.57	Replace	0	0	Not Give	Xan
One Time Key In	Main			HINGE UPPER LHF, DOOR	1	80.50	80.50	25.00	60.38	Replace	0	0	Not Give	Xan
One Time Key In	Main			CHECK ASSY, FR DOOR,	1	150.30	150.30	25.00	112.73	Replace	0	0	Not Give	Xan
One Time Key In	Main			MIRROR ASSY,LH	1	1,224.90	1,224.90	25.00	918.68	Replace	0	0	Not Give	Xan

Total Spare Part Cost 10,109.14

Surveyor Total 2,088.77

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 8,087.31

Final Sur Total 1,671.02



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			MIRROR LAMP LH	1	65.30	65.30	10.00	58.77	Replace	0	0	Not Give v	Xan
One Time Key In	Main			COVER, OUTER MIRROR, LH	1	107.40	107.40	25.00	80.55	Replace	0	0	Not Give v	Xan
One Time Key In	Main			HEAD LAMP LH	1	945.20	945.20	10.00	850.68	Replace	1	850.68	Replace v	can
One Time Key In	Main			HEAD LAMP RH	1	945.20	945.20	10.00	850.68	Replace	0	0	Not Give v	Xan
One Time Key In	Main			FENDER FRT/LH	1	723.40	723.40	25.00	542.55	Replace	1	542.55	Replace v	ht
One Time Key In	Main			NAME PLATE (HYBRID)	1	51.90	51.90	25.00	38.92	Replace	1	38.92	Replace v	ner
One Time Key In	Main			FENDER PROTECTOR FRT/LH UPPER	1	46.10	46.10	25.00	34.58	Replace	0	0	Not Give v	Xan
One Time Key In	Main			PROTECTOR, FRONT FENDER SIDE PANEL LH	1	114.50	114.50	25.00	85.88	Replace	0	0	Not Give v	Xan
One Time Key In	Main			SEAL, FRONT FENDER TO COWL SIDE LH	1	15.20	15.20	25.00	11.40	Replace	0	0	Check v	?
One Time Key In	Main			FENDER LINER FRT/LH	1	171.70	171.70	25.00	128.77	Replace	1	128.77	Replace v	cut
One Time Key In	Main			FENDER LINER PAD, FR WHEEL LH	1	49.30	49.30	25.00	36.97	Replace	1	36.97	Replace v	ner
One Time Key In	Main			FENDER APRON SUB FRT/LH	1	637.80	637.80	25.00	478.35	Replace	0	0	Not Give v	Xan
One Time Key In	Main			WHEEL DISC. FRONT	1	1,484.20	1,484.20	25.00	1,113.15	Replace	1	0	Repair v	R
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Not Give v	Xan
One Time Key In	Main			WHEEL HUB FRT	1	549.70	549.70	25.00	412.28	Replace	0	0	Not Give v	Xan

Total Spare Part Cost 10,109.14

Surveyor Total 2,088.77

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 8,087.31

Final Sur Total 1,671.02

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR LH 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 RESPRAY APRON PANEL LH	180.00	0 <i>Xm</i>	
2	Main	TO REPSRAY FRONT BUMPER	378.00	200	
3	Main	TO RESPRAY FRONT BUMPER LOWER GRILLE	180.00	0 <i>Xm</i>	
4	Main	TO RESPRAY FRONT FENDER LH	378.00	200	
5	Main	TO RESPRAY RIM	180.00	50	
6	Main	RESPRAY MIRROR COVER LH	180.00	0 <i>Xm</i>	
7	Main	TO RESPRAY FRONT DOOR LH	378.00	200	
Total:			1,854.00	650.00	

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 REMOVE AND REFIX WING MIRROR	120.00	0 <i>Xm</i>	
4	Main	TO TRANSFER DOOR MECHANISM	120.00	0 <i>Xm</i>	
5	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	40	
6	Main	TO REPLACE SUNDRY PARTS	100.00	0 <i>Xm</i>	
7	Main	TO CHECK WIRING AND SYSTEM FUNCTION	80.00	0 <i>Xm</i>	
8	Main	TO WASH AND VACUUM	60.00	0 <i>Xm</i>	
9	Main	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	296.88	
Total:			1,116.88	426.88	

## Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	8,087.31	1,671.02
Total Labour Cost	676.00	400.00
Total Spray Painting	1,854.00	650.00
Other	1,116.88	426.88
Overall Total	11,734.19	3,147.90
Lump Sum Repair Option		<input checked="" type="checkbox"/>
Lump Sum Total	11,750.00	3,150.00
Surveyor Approved Amount		3,150.00
No of Repair Days*	6	5
Remarks	-	lump sum repair / after paint photo / request NBV .
Surveyor Name		Rasul
Signature		
Survey Date	15/11/2021	

Save

Clear

**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	15/11/2021 08:20 (SGT)
Date of Accident	12/11/2021 12:30 (SGT)
Exact Location of Accident	Near 638 Ang Mo Kio Ave 6, Block 638, Singapore 560638
Additional Location Information	ANG MO KIO AVE 6 JUNCTION ANG MO KIO AVE 8
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF1029K
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 accident	
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	GOH AH LENG
NRIC No	SXXXX182A

Date Of Birth 22/02/1970  
 Occupation Outdoor  
 Date Of Driving Pass 23/07/1990  
 Driving experience 31 YEARS AND 4 MONTHS  
 Gender Male  
 Mobile Number  
 Alt. Phone Number  
 Email Address  
 Address Auto-Svcs-TARC@smrt.com.sg  
 Address complement 1  
 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 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 TRAVELLING ALONG ANG MO KIO AVE 6 AT THE CENTRE LANE WHICH CAN BE GOING STRAIGHT AND TURN LEFT. WHILE I WAS TURNING LEFT INTO ANG MO KIO AVE 8, SUDDENLY THE VEHICLE SMX6558M TRAVELLING ON THE LEFT LANE (WHICH MEANT FOR TURNING LEFT ONLY) INSTEAD OF TURNING LEFT, HE WENT STRAIGHT AND RESULTED HIS RIGHT PORTION BRUSHED AGAINST THE LEFT FRONT PORTION OF MY TAXI. SUBSEQUENTLY THE VEHICLE SMX6558M CONTINUED GOING STRAIGHT AND STOPPED AFTER THE JUNCTION. WHEN WE ALIGHTED AND EXCHANGED PARTICULARS, THE DRIVER OF THE VEHICLE ADMITTED HIS MISTAKE AND ASKED ME TO CLAIM AGAINST HIS INSURANCE.

#### 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 SMX6558M  
 Vehicle Manufacturer Mercedes  
 Vehicle Model  
 Vehicle Variant  
 Vehicle Colour



Vehicle Category  
Name of Driver  
NRIC No  
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  
LEE PENG PENG @BERNARD  
SXXXX5201

-  
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**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.

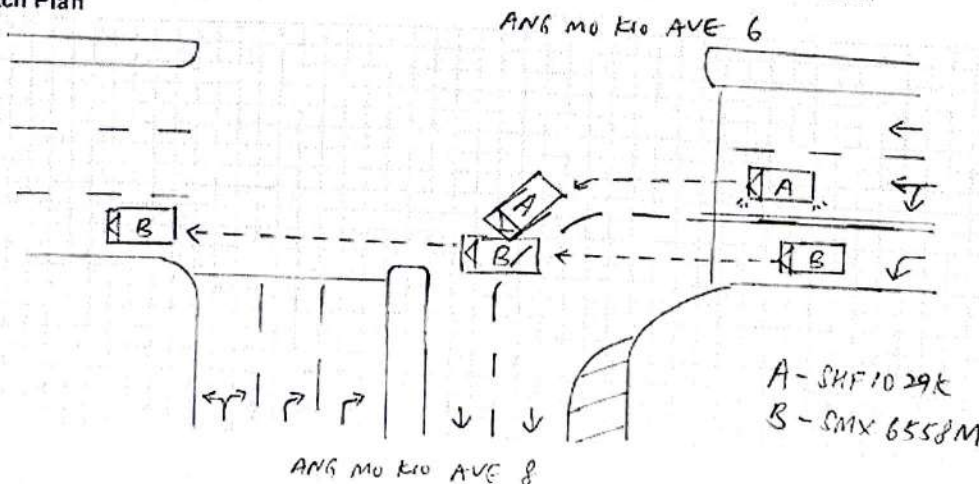


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

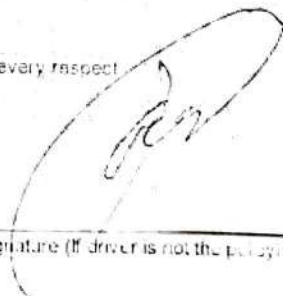
**Sketch Plan**





Describe Circumstances of the Accident

I/We declare the foregoing particulars are true in every respect



Ch 1871/27

Witnessed by Reporting Centre  
Personnel



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHF1029K
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Nov 2021
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR1472900
Chassis No.:	JTDKN36U505754665
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	17 Dec 2014
First Registration Date:	17 Dec 2014
Transfer Count:	0
Actual ARF Paid:	\$8,088.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Dec 2022
PARF Rebate Amount:	\$5,257.00
COE Expiry Date:	16 Dec 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$51,668.00
COE Rebate Amount:	\$6,969.00
Total Rebate Amount:	\$12,226.00

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 17 Nov 2021

OK