

(08/11/13) wef

ASS. REC. BY: Ramal

REF:

NS/INC21011759/R1qc

**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:

Policy No.

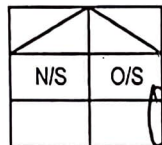
Claims No. MT/1150866-002

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 Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Date / Time Action / Instruction

Veh No: SHR 5336TYr Regn: 2019 / MK

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

Truck / Trailer or

Make: TOYOTA PRIMS FOR AB 1798Colour MARON

A/C: Insured / Std / NI / NA

Sp. Reading 97184

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JDOKB3F4403090766

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 orTyre Size: F: 195/65R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 10/11/21D.O.I. 17/11/21Survey held at SMRT

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

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

03/12/21@5.02pm Rasul finalised with PoH Suan final fig \$3063.44, 5 days. (Red \$7549.30, 71%)

Date/Time, File Pass to?

☐ : Prel. Report

1) 20/01 Typist

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$ ) S + RS SI☐ : Interview (\$ ) Photos☐ : Tech. Invs (\$ ) Others☐ : Weekend (\$ )Report Format : TPLump Sum / I.B.I: (\$) 3063.44 )

TOTAL

Date/Time, File Pass to?

☐ : Prel. Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:



## Case Details

Case Reference Number :

TAX/11/21/2015

Type of Repair : Accident Repair

Vehicle Registration Number :

SHB5336T

Company Type : Strides Taxi Pte Ltd

Estimation ID : EST-16674-ID

Assigned By : Taxi Claims Manager  
TeamInsurance Company Name : NTUC Income Insurance Co-operative  
Ltd

Accident Date and Time : 10/11/2021 02:20 PM

Vehicle Age(In Months) : -

## Documents / Photographs

View Documents / Photographs

Total Documents: 0

## Estimation Details

### Spare Part's Cost Detail

| SMRT Recommendation |              |         |                 |  |     |                         |                |        |                 | Surveyor Approval |                   |                          |                | Remarks |
|---------------------|--------------|---------|-----------------|--|-----|-------------------------|----------------|--------|-----------------|-------------------|-------------------|--------------------------|----------------|---------|
| 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 |         |
| One Time Key In     | Main         |         |                 | COVER, RR BUMPER ASSY                            | 1   | 332.70                  | 332.70         | 25.00  | 249.52          | Replace           | 0                 | 0                        | Not Give       | X17     |
| One Time Key In     | Main         |         |                 | PIXEL STICKER                                    | 1   | 60.00                   | 60.00          | 0.00   | 60.00           | Replace           | 1                 | 60.00                    | Replace        | re /    |
| One Time Key In     | Main         |         |                 | PIXEL STICKER                                    | 1   | 60.00                   | 60.00          | 0.00   | 60.00           | Replace           | 0                 | 0                        | Not Give       | X17     |
| One Time Key In     | Main         |         |                 | PANEL SUB-ASSY, REAR DOOR, RH                    | 1   | 1,294.90                | 1,294.90       | 25.00  | 971.18          | Replace           | 1                 | 971.18                   | Replace        | bf /    |
| One Time Key In     | Main         |         |                 | CHECK ASSY, REAR DOOR                            | 1   | 183.80                  | 183.80         | 25.00  | 137.85          | Replace           | 0                 | 0                        | Not Give       | X17     |
| One Time Key In     | Main         |         |                 | HINGE ASSY, REAR DOOR, UPPER RH                  | 1   | 98.90                   | 98.90          | 25.00  | 74.18           | Replace           | 0                 | 0                        | Not Give       | X17     |
| One Time Key In     | Main         |         |                 | HINGE ASSY, REAR DOOR, LOWER RH                  | 1   | 87.10                   | 87.10          | 25.00  | 65.32           | Replace           | 0                 | 0                        | Not Give       | X17     |
| One Time Key In     | Main         |         |                 | DOOR REAR MOTOR ASSY, POWER WINDOW REGULATOR, RH | 1   | 926.00                  | 926.00         | 10.00  | 833.40          | Replace           | 0                 | 0                        | Not Give       | X17     |

Total Spare Part Cost 6,007.64

Surveyor Total 1,843.44

Lump Sum Discount (%) 0.00

Lump Sum Dis (%) 0

Final Spare Part Cost 6,007.64

Final Sur Total 1,843.44

| SMRT Recommendation   |              |         |                 |   |     |                         |                |        |                 |                 | Surveyor Approval |                          |                |         |
|-----------------------|--------------|---------|-----------------|---|-----|-------------------------|----------------|--------|-----------------|-----------------|-------------------|--------------------------|----------------|---------|
| #                     | 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         |         |                 | DOOR REAR WINDOW REGULATOR SUB-ASSY, RH | 1   | 206.70                  | 206.70         | 25.00  | 155.02          | Replace         | 0                 | 0                        | Not Give       | X11     |
| One Time Key In       | Main         |         |                 | PANEL SUB-ASSY, FENDER REAR RH          | 1   | 871.50                  | 871.50         | 25.00  | 653.63          | Replace         | 1                 | 653.63                   | Replace        | 6f      |
| One Time Key In       | Main         |         |                 | LINER, REAR FENDER, RH                  | 1   | 139.80                  | 139.80         | 25.00  | 104.85          | Replace         | 0                 | 0                        | Not Give       | X11     |
| One Time Key In       | Main         |         |                 | WHEEL, DISC                             | 1   | 1,879.40                | 1,879.40       | 25.00  | 1,409.55        | Replace         | 0                 | 0                        | Not Give       | X11     |
| One Time Key In       | Main         |         |                 | TYRE                                    | 1   | 126.74                  | 126.74         | 0.00   | 126.74          | Replace         | 0                 | 0                        | Not Give       | X11     |
| One Time Key In       | Main         |         |                 | CAP SUB-ASSY, WHEEL                     | 1   | 211.50                  | 211.50         | 25.00  | 158.63          | Replace         | 1                 | 158.63                   | Replace        | scu     |
| One Time Key In       | Main         |         |                 | HUB & BEARING ASSY, RH & LH             | 1   | 668.90                  | 668.90         | 25.00  | 501.67          | Replace         | 0                 | 0                        | Not Give       | X11     |
| One Time Key In       | Main         |         |                 | MOULDING ASSY, BODY ROCKER PANEL, RH    | 1   | 594.80                  | 594.80         | 25.00  | 446.10          | Replace         | 1                 | 0                        | Repair         | R       |
| Total Spare Part Cost |              |         |                 |   |     |                         |                |        | 6,007.64        |                 |                   |                          |                |         |
| Lump Sum Discount (%) |              |         |                 |   |     |                         |                |        | 0.00            |                 |                   |                          |                |         |
| Final Spare Part Cost |              |         |                 |   |     |                         |                |        | 6,007.64        |                 |                   |                          |                |         |
|                       |              |         |                 |   |     |                         |                |        |                 |                 | Surveyor Total    |                          | 1,843.44       |         |
|                       |              |         |                 |   |     |                         |                |        |                 |                 | Lump Sum Dis (%)  |                          | 0              |         |
|                       |              |         |                 |   |     |                         |                |        |                 |                 | Final Sur Total   |                          | 1,843.44       |         |

**Labour's Cost Detail**

| S.No.  | Costing Type | Job Scope                 | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|--------|--------------|---------------------------|-------------------------|-------------------------|---------|
| 1      | Main         | TO REPAIR REAR PORTION RH | 676.00                  | 600                     |         |
| Total: |              |                           | 676.00                  | 600.00                  |         |

**Spray Cost Detail**

| S.No.  | Costing Type | Job Scope                 | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|--------|--------------|---------------------------|-------------------------|-------------------------|---------|
| 1      | Main         | TO RESPRAY REAR BUMPER    | 378.00                  | 0 X11                   |         |
| 2      | Main         | TO RESPRAY REAR FENDER RH | 378.00                  | 200                     |         |
| 3      | Main         | TO RESPRAY REAR DOOR RH   | 378.00                  | 200                     |         |
| Total: |              |                           | 1,494.00                | 500.00                  |         |

| Costing Type | Job Scope                        | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|--------------|----------------------------------|-------------------------|-------------------------|---------|
| 4 Main       | TO RESPRAY RIM                   | 180.00                  | 0 <i>X11</i>            |         |
| 5 Main       | TO RESPRAY ROCKER PANEL MOULDING | 180.00                  | 100                     |         |
| Total:       |                                  | 1,494.00                | 500.00                  |         |

**Other Cost Detail**

| S.No.  | Costing Type | Job Scope                                       | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|--------|--------------|---|-------------------------|-------------------------|---------|
| 1      | Main         | TO DO WHEEL ALIGNMENT / TYRE BALANCING          | 120.00                  | 0 <i>X11</i>            |         |
| 2      | Main         | TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE) | 120.00                  | 0 <i>X11</i>            |         |
| 3      | Main         | TO TRANSFER DOOR MECHANISM                      | 120.00                  | 60                      |         |
| 4      | Main         | TO REPLACE SUNDRY PARTS                         | 100.00                  | 0 <i>X11</i>            |         |
| 5      | Main         | TO APPLY RUST-PROOFING ON AFFECTED AREA         | 100.00                  | 60                      |         |
| 6      | Main         | TO CHECK WIRING AND SYSTEM FUNCTION             | 80.00                   | 0 <i>X11</i>            |         |
| 7      | Main         | TO WASH AND VACUUM                              | 60.00                   | 0 <i>X11</i>            |         |
| Total: |              |   | 700.00                  | 120.00                  |         |

**Summary**

|                          | Estimator Assesment(\$) | Surveyor Assesment(\$)                      |
|--------------------------|-------------------------|---|
| Total Spare Part Detail  | 6,007.64                | 1,843.44                                    |
| Total Labour Cost        | 676.00                  | 600.00                                      |
| Total Spray Painting     | 1,494.00                | 500.00                                      |
| Other                    | 700.00                  | 120.00                                      |
| Overall Total            | 8,877.64                | 3,063.44                                    |
| Lump Sum Repair Option   |                         | <input type="checkbox"/>                    |
| Lump Sum Total           | 0.00                    | 3,063.44                                    |
| Surveyor Approved Amount |                         | 3,063.44                                    |
| No of Repair Days*       | 6                       | 5   |
| Remarks                  | -                       | PART BY PART REPAIR / RESUVEY BEFORE PAINT. |
| Surveyor Name            |                         | Rasul                                       |

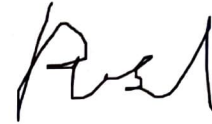
21, 14:51

<https://vacswb.smrt.com.sg/Estimation.aspx>

Estimator Assessment(\$)

Surveyor Assessment(\$)

Signature



Save

Clear

Survey Date

17/11/2021

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              | 13/11/2021 09:55 (SGT)          |
| Date of Accident                | 10/11/2021 22:20 (SGT)          |
| Exact Location of Accident      | PIE, Singapore                  |
| Additional Location Information | PIE STEVENS ROAD TOWARDS JURONG |
| Country/State of Loss           | Singapore                       |

### DETAILS OF OWN VEHICLE

|                             |                            |
|-----------------------------|----------------------------|
| Vehicle Registration Number | SHB5336T                   |
| 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   | 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 | FOO HEE YONG(FU QIXIONG) |
| NRIC No        | SXXXX475B                |

|  |                            |
|--|----------------------------|
| Birth  | 30/09/1977                 |
| Location   | Outdoor                    |
| Of Driving Pass  | 11/01/1999                 |
| ing experience   | 22 YEARS AND 10 MONTHS     |
| ender  | Male                       |
| Mobile Number  | (Phone) +65-68662672       |
| Alt. Phone Number  | -                          |
| Email Address  | AUTO-SVCS-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   | Side Swipe |
| Weather Conditions | Raining    |
| Road Surface       | Wet        |

#### 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)   | 3   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No  |

#### PASSENGER 1

|        |         |
|--------|---------|
| Name   | UNKNOWN |
| Gender | Male    |

#### PASSENGER 2

|        |         |
|--------|---------|
| Name   | UNKNOWN |
| Gender | Female  |

#### 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 PIE STEVENS ROAD TOWARDS JURONG WITH 2 PASSENGERS (AN INDIAN COUPLE) ON BOARD. SUDDENLY A VEHICLE SLG7176B WHICH WAS TRAVELLING ON MY RIGHT ENCROACHED INTO MY LANE AND COLLIDED INTO THE RIGHT REAR PORTION OF MY TAXI.

#### 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 | FILE TOO BIG |
| Was there any audio recorded?                     | No           |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|   |              |
|---|--------------|
| Registration Number                     | SLG7176B     |
| Manufacturer                            | -            |
| Model                                   | -            |
| Variant                                 | -            |
| Colour                                  | -            |
| Category                                | Private hire |
| Name of Driver                          | -            |
| Contact Number                          | -            |
| Address                                 | -            |
| Address complement                      | -            |
| Postcode                                | -            |
| Insurance Company Name                  | -            |
| Nature Of Damage                        | -            |
| Details of property damaged in accident | SHAHID       |
| 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 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 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.

### 6. 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

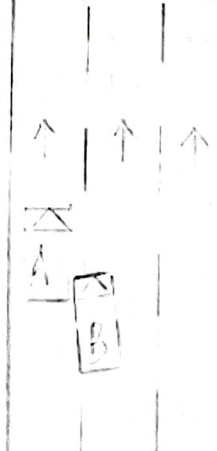
*[Signature]*

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

*[Signature]* 11/11/2021

Witnessed by Reporting Centre Personnel

PIE Stevens Road Exit



A - 5HB5336T

B - SLG 7176B

Describe Circumstances of the Accident

Declaration

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



Policyholder's Signature / Date & Time

*[Handwritten Signature]*

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

*[Handwritten Signature]* 11/11/2021

Witnessed by Reporting Centre Personnel

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

|                               |                                      |
|-------------------------------|--------------------------------------|
| Owner ID Type:                | Company                              |
| Owner ID:                     | 369K                                 |
| Vehicle No.:                  | SHB5336T                             |
| Vehicle to be Exported:       | No                                   |
| Intended Deregistration Date: | 18 Nov 2021                          |
| Vehicle Make:                 | TOYOTA                               |
| Vehicle Model:                | PRIUS 5DR HATCHBACK (AUTO)           |
| Primary Colour:               | Maroon                               |
| Manufacturing Year:           | 2019                                 |
| Engine No.:                   | 2ZR2G36905                           |
| Chassis No.:                  | JTDKB3FU403090766                    |
| 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:             | Yes                                  |
| 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:            | \$19,512.00                          |
| Total Rebate Amount:          | \$30,409.00                          |
| Message                       |                                      |

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 18 Nov 2021

OK