



## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

### TAX INVOICE

EQ INSURANCE COMPANY LTD

5 MAXWELL ROAD  
#17-00 TOWER BLOCK  
MND COMPLEX  
SINGAPORE 069110

INV No. AC2201039

INV Date 25/02/2022

Reference CS/EQI22000605/Rvf3e2

Code EQI

### PROFESSIONAL SERVICE FEE

Vehicle No. SHD 6140Z

Insured Veh. GBD 6563H

Claim No. DM22HO00084/MT

Policy No.

Accident Date 14/01/2022

Inspection Date 18/01/2022

Description	Total
Survey Inspection	160.00
Resurvey Inspection	
Digital Photographs	
Transportation	
<b>Subtotal</b>	<b>160.00</b>
<b>GST (7%)</b>	<b>11.20</b>
<b>Grand Total</b>	<b>171.20</b>

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to **'LKK Auto Consultants Pte Ltd'**

LKK Auto Consultants Pte Ltd

**KHM**



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110			Ref: CS/EQI22000605/Rvf3e2 Date: 25/02/2022 Code: EQI	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	GBD 6563H	Veh. Inspected	SHD 6140Z	
Policy No.		Coverage (\$)	0.00	
Claim No.	DM22HO00084/MT	Excess (\$)	0.00	
Assign From	MELODY TEOH	Assign Date	17/01/2022	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	TOYOTA PRIUS TAXI (SMRT)	c.c	1798	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	JTDKN36U105768112	Colour	MAROON	
Odometer	-	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	SAILUN	6 mm	
L/H Front Tyre	195/65 R15	SAILUN	6 mm	
R/H Rear Tyre	195/65 R15	SAILUN	6 mm	
L/H Rear Tyre	195/65 R15	SAILUN	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	14/01/2022	Inspection Date	18/01/2022	
Survey held at	SMRT AUTOMOTIVE SERVICES PTE LTD 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:			<b>3 Working Days</b>	



# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 6140Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	STRIDES LOGO (SN)	NECESSARY	7.80	7.80
1	STICKER DECAL 65558888 (SN)	NECESSARY	21.60	21.60
1	BUMPER REAR	NOT NECESSARY	458.60	-
10	BUMPER CLIPS @\$2.10	NOT NECESSARY	21.00	-
1	FENDER LINE RR/RH	NOT NECESSARY	141.30	-
1	WHEEL DISC	NOT NECESSARY	1,484.20	-
1	TYRE	NOT NECESSARY	126.74	-
1	WHEEL HUB REAR	NOT NECESSARY	489.40	-
1	DOOR HINGE LOWER RR/RH	NOT NECESSARY	90.10	-
1	DOOR HINGE UPPER RR/RH	NOT NECESSARY	90.10	-
1	CHECK ASSY, RR DOOR	NOT NECESSARY	150.30	-
1	DOOR RR/RH	TO REPAIR SEE LABOUR	954.50	-
1	MOULDING BODY, RH	TO REPAIR SEE LABOUR	673.60	-
1	FENDER RR/RH	TO REPAIR SEE LABOUR	766.80	-
			5,476.04	29.40
	<b><u>LABOUR</u></b>			
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF DOOR RR/RH, MOULDING BODY, RH AND FENDER RR/RH.		676.00	300.00
	SPRAY PAINT.		1,494.00	500.00
	TOTEST AND REFIX REVERSE SENSOR SYSTEM.	NOT NECESSARY	120.00	-
	TO DO WHEEL ALIGNMENT / TYRE BALANCING.	NOT NECESSARY	120.00	-
	TO TRANSFER DOOR MECHANISM.	NOT NECESSARY	120.00	-
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO CHECK WIRING AND SYSTEM FUNCTION.	NOT NECESSARY	80.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
			2,770.00	800.00
	<b>GRAND TOTAL</b>		<b>8,246.04</b>	<b>829.40</b>

Report Ref No. CS/EQI22000605/Rvf3e2



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			800.00
---	--	--	--------

Report Ref No. CS/EQI22000605/Rvf3e2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

**DISCLAIMER OF LIABILITY TO THIRD PARTIES:-** This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

# 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 ..... 17/01/2022 14:45 (SGT)  
Date of Accident ..... 14/01/2022 18:40 (SGT)  
Exact Location of Accident ..... Clemenceau Ave N, Singapore  
Additional Location Information ..... CALEMENCEAU AVE N TOWARDS CAIRNHILL CIRCLE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SHD6140Z

### 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) +65-68622671  
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 ..... CHANG TUCK SENG  
NRIC No ..... SXXXX952I

Date Of Birth .....	25/11/1956
Occupation .....	Outdoor
Date Of Driving Pass .....	14/11/1974
Driving experience .....	47 YEARS AND 2 MONTHS
Gender .....	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 .....	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) .....	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 CLEMENCEAU AVENUE N TOWARDS CAIRNHILL CIRCLE WITH 2 PASSENGERS ON BOARD. SUDDENLY A VEHICLE GBD6563H CUT TOWARDS MY LANE FROM THE RIGHT AND HIT ONTO THE RIGHT REAR PORTION OF MY TAXI. AFTER WHICH THIRD PARTY DROVE AWAY WITHOUT STOPPING. I WENT AFTER THIRD PARTY AND STOPPED HIM. THIRD-PARTY DID NOT ALIGHT FROM HIS VEHICLE AND I MANAGED TO TAKE A PHOTO THE THE PLATE NUMBER.

#### 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 .....	GBD6563H
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' 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), which may be sited outside of Singapore, for one or more of the above Purposes.



*Handwritten signature*

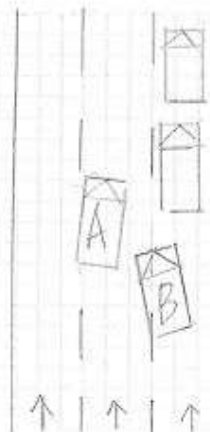
*Handwritten signature and date 15/1/2022*

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



A - SHD6140Z  
B - GBD6563H

## Describe Circumstances of the Accident

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

### Declaration

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

15/1/2022

Witnessed by Reporting Centre  
Personnel



## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

### PHOTOGRAPHS FOR VEHICLE NO. SHD 6140Z

### INSPECTION





## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R





## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R





## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R





## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

**PHOTOGRAPHS FOR VEHICLE NO. SHD 6140Z**

**RE-INSPECTION**

