

ASS. REC. BY:

REF:

CS/GRB22004594/RV3

369k

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SHC 4018Mat Workshop m/s STRINGS CSMRTof 60, NORMAN'S IND PK 64Insured: III

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: SHC 4018M Yr Regn: 2017 / DKType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: TOYOTA PRIMS HYBRID 1.8CV c.c. 1798Colour: MARON A/C: Insured / Std / NI / NASp. Reading: 50844 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKB3FU703576147Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / SRim / STD A/Rim orTyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or

SALUN

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 16/05/22 D.O.I. 18/05/22Survey held at STRINGS

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

REAR M/S

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Report Format: _____

Lump Sum / I.B.E. (\$) _____

Case Details

Case Reference Number : TAX/05/22/2040
Type of Repair : Accident Repair
Vehicle Registration Number : SHC4018M

Company Type : Strides Taxi Pte Ltd
Estimation ID : EST-18278-ID
Assigned By : Taxi Claims Manager Team

Insurance Company Name : India International Insurance Pte Ltd
Accident Date and Time : 16/05/2022 02:00 AM
Vehicle Age(In Months) : -

Documents / Photographs

[View Documents / Photographs](#)

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation					Final Price(\$)	Repair/ Replace	Surveyor Approval			Remarks
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)			Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace	
Standard	Main			COVER, RR BUMPER ASSY	1	423.90	423.90	25.00	317.92	Replace	1	0	Repair	R
Standard	Main			REAR BUMPER REINFORCEMENT	1	318.80	318.80	25.00	239.10	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, RH & LH , 1	2	3.80	7.60	25.00	5.70	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, RH & LH , 2	2	3.80	7.60	25.00	5.70	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, RH & LH , 3	2	3.80	7.60	25.00	5.70	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, CTR	3	2.20	6.60	25.00	4.95	Replace	0	0	Not Give	Xan
Standard	Main			SEAL, RR BUMPER ARM, RH & LH	2	11.00	22.00	25.00	16.50	Replace	0	0	Not Give	Xan
Standard	Main			STOPPER, RR BUMPER, RH & LH	2	4.30	8.60	25.00	6.45	Replace	0	0	Not Give	Xan
Standard	Main			RETAINER, RR BUMPER, LH	1	111.50	111.50	25.00	83.63	Replace	0	0	Not Give	Xan
Standard	Main			SEAL, RR BUMPER , LH	1	85.20	85.20	25.00	63.90	Replace	0	0	Not Give	Xan
Standard	Main			CLIPS PIECE, FRT & RR BUMPER	10	1.50	15.00	25.00	11.25	Replace	0	0	Not Give	Xan
Standard	Main			GUARD, RR BUMPER, LOWER	1	558.30	558.30	25.00	418.72	Replace	0	0	Not Give	Xan
Standard	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	0	0	Not Give	Xan
Standard	Main			ANTENNA, ELECTRICAL KEY	1	60.30	60.30	10.00	54.27	Replace	0	0	Not Give	Xan

Total Spare Part Cost 9,823.73

Surveyor Total 1,551.53

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 7,852.74

Final Sur Total 1,241.22

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
Standard	Main			REAR BUMPER GROMMET SCREW	2	2.20	4.40	25.00	3.30	Replace	0	0	Not Give	Xan
Standard	Main			LENS & BODY, REAR COMBINATION LAMP, LH	1	438.10	438.10	10.00	394.29	Replace	1	0	Old Dam	Xan
Standard	Main			LENS & BODY ASSY, RR BUMPER, LH	1	486.80	486.80	10.00	438.12	Replace	0	0	Not Give	Xan
Standard	Main			COVER, REAR FLOOR UNDER, LH	1	234.30	234.30	25.00	175.73	Replace	0	0	Not Give	Xan
Standard	Main			PANEL SUB-ASSY, REAR DOOR, LH	1	1,243.90	1,243.90	25.00	932.93	Replace	1	932.93	Replace	bf
Standard	Main			HINGE ASSY, REAR DOOR, UPPER LH	1	83.30	83.30	25.00	62.47	Replace	0	0	Not Give	Xan
Standard	Main			HINGE ASSY, REAR DOOR, LOWER LH	1	73.30	73.30	25.00	54.97	Replace	0	0	Not Give	Xan
Standard	Main			DOOR REAR MOTOR ASSY, POWER WINDOW REGULATOR, LH	1	768.60	768.60	10.00	691.74	Replace	0	0	Not Give	Xan
Standard	Main			DOOR REAR WINDOW REGULATOR SUB-ASSY, LH	1	200.70	200.70	25.00	150.52	Replace	0	0	Not Give	Xan
Standard	Main			CHANNEL SUB-ASSY, REAR DOOR GLASS, LH	1	27.20	27.20	25.00	20.40	Replace	0	0	Not Give	Xan
Standard	Main			MEMBER SUB-ASSY, RAIL ROOT SIDE REAR LH	1	279.20	279.20	25.00	209.40	Replace	0	0	Not Give	Xan
Standard	Main			CHECK ASSY, REAR DOOR	1	153.50	153.50	25.00	115.13	Replace	0	0	Not Give	Xan
Standard	Main			WEATHERSTRIP, REAR DOOR LH	1	174.40	174.40	25.00	130.80	Replace	0	0	Check	?
Standard	Main			DOOR LOCK REAR, LH	1	544.70	544.70	10.00	490.23	Replace	0	0	Not Give	Xan
Standard	Main			DOOR REAR LOCK COVER	1	8.90	8.90	25.00	6.68	Replace	0	0	Not Give	Xan
Standard	Main			MOULDING ASSY, REAR DOOR BELT, LH	1	109.80	109.80	25.00	82.35	Replace	1	0	Repair	R
Standard	Main			WIRE, REAR DOOR, LH	1	206.70	206.70	10.00	186.03	Replace	0	0	Not Give	Xan
Standard	Main			REAR DOOR SPEAKER ASSY, RADIO RH & LH	1	985.70	985.70	10.00	887.13	Replace	0	0	Not Give	Xan
Standard	Main			PANEL SUB-ASSY, FENDER REAR LH	1	824.80	824.80	25.00	618.60	Replace	1	618.60	Replace	bf

Total Spare Part Cost 9,823.73

Surveyor Total 1,551.53

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 7,852.74

Final Sur Total 1,241.22

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
Standard	Main			PATCH, SIDE PANEL REAR END, RH & LH	1	33.70	33.70	25.00	25.28	Replace	0	0	Not Give	X11
Standard	Main			LINER, REAR FENDER, LH	1	135.80	135.80	25.00	101.85	Replace	0	0	Not Give	X11
Standard	Main			WHEEL, DISC	1	1,879.40	1,879.40	25.00	1,409.55	Replace	1	0	Repair	R
Standard	Main			HUB & BEARING ASSY, RH & LH	1	554.20	554.20	25.00	415.65	Replace	0	0	Not Give	X11
Standard	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Not Give	X11
Standard	Main			HUB & BEARING ASSY WITH SPEED SENSOR, REAR AXLE, RH & LH	1	610.20	610.20	10.00	549.18	Replace	0	0	Not Give	X11
Standard	Main			LID ASSY, FUEL FILLER OPENING	1	164.10	164.10	25.00	123.07	Replace	0	0	Not Give	X11
Standard	Main			STICKER PETROL ONLY	1	7.80	7.80	0.00	7.80	Replace	0	0	Not Give	X11
Total Spare Part Cost									9,823.73	Surveyor Total 1,551.53				
Lump Sum Discount (%)									20.00	Lump Sum Dis (%) 20				
Final Spare Part Cost									7,852.74	Final Sur Total 1,241.22				

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR LH PORTION	1,014.00	600	
Total:			1,014.00	600.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY REAR BUMPER	378.00	200	
2	Main	TO RESPRAY REAR FENDER LH	378.00	200	
3	Main	TO RESRAY REAR DOOR LH	378.00	200	
4	Main	TO RESPRAY ROCKER PANEL MOULDING	180.00	100	
5	Main	TO RESPRAY RIM	180.00	50	
6	Main	TO RESPRAY FUEL LID COVER	180.00	0	X11
Total:			1,674.00	750.00	

No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0 X77	
2	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	40	
3	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60	
4	Main	TO TRANSFER DOOR MECHANISM	120.00	60	
5	Main	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0 X77	
6	Main	TO REPLACE SUNDRY PARTS	100.00	0 X77	
7	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	0 X77	
Total:			740.00	160.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	7,852.74	1,241.22
Total Labour Cost	1,014.00	600.00
Total Spray Painting	1,674.00	750.00
Other	740.00	160.00
Overall Total	11,280.74	2,751.22
Lump Sum Repair Option	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	11,300.00	2,750.00
Surveyor Approved Amount		2,750.00
No of Repair Days*	7	5
Remarks	-	LUMP SUM REPAIR / RESURVEY AFTER PAINT PHOTO.

Surveyor Name

Rasul

Signature

KKK 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

Survey Date

Acknowledged by Repairer

18/05/2022

Signature:

Date:

Save

Clear

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	17/05/2022 12:27 (SGT)
Date of Accident	16/05/2022 10:00 (SGT)
Exact Location of Accident	Ewe Boon Rd, Singapore
Additional Location Information	EWE BOON ROAD (NEAR PALM SPRING CONDO)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4018M
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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-22099115MFSH
Cover Note Number	-

DRIVER

Name of Driver	NG WAN CHEONG
NRIC No	SXXXX625J

Date Of Birth	28/11/1959
Occupation	Outdoor
Date Of Driving Pass	07/03/1992
Driving experience	30 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	Auto-Svcs-TARC@smrt.com.sg
Address	1
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	Collision - Major/Minor Rd
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

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 STRAIGHT ALONG EWE BOON ROAD (NEAR PALM SPRING CONDO) WITH ONE PASSENGER (MALE CHINESE) ON BOARD. SUDDENLY A VEHICLE SNC8738X CAME OUT FROM MY LEFT WITHOUT STOPPING AT THE STOP LINE AND COLLIDED ONTO THE LEFT REAR PORTION OF MY TAXI.

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	SNC8738X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
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)	-



Palm Spring condo

A : SHC 4018 M

③ : SNC 8738 X

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.

We declare the foregoing particulars are true in every respect.



0848 hrs 17-5-2022

17.5 2022

Witnessed by Reporting Centre
Personnel

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.

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 enquires 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.



Policyholder's Signature / Date & Time

Sketch Plan

Doyles

17-5-2022 0848hrs

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

lun 17-5-2022

Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHC4018M
Vehicle to be Exported:	No
Intended Deregistration Date:	19 May 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZR8255387
Chassis No.:	JTDKB3FU703576147
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	12 Dec 2017
First Registration Date:	12 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Dec 2025
PARF Rebate Amount:	\$3,750.00
COE Expiry Date:	11 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$34,159.00
COE Rebate Amount:	\$15,201.00
Total Rebate Amount:	\$18,951.00

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 19 May 2022

OK