

ASS. REC. BY:

REF:

EQ / 22 005345/K4

Kenneth

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. _____

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 Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

05 days

Res.: Yes or No

Lum Sum: _____

1-B.1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: _____

SHD 9872A

Yr Regn: _____

11, 20

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

Truck / Trailer or

Make: _____

Toy Prius

c.c

1798

Colour _____

M.P. White / Red

A/C: Insured / Std / NI / NA

Sp. Reading _____

113300

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

JTDK B3FU 803092715

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / Rim or

Tyre Size: _____

F: 17x189

195/65R15

R: Sailun

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

TOYO / YOKO or

Front

Rear

R/Bal. _____

mm

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

6/6/22

D.O.I. _____

7/6/2022

Survey held at _____

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

015 Rear

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S - RS - SI

Frt / Rs

Others

Add Fee: _____

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech Invs (\$)

☐

: Weekend (\$)

Report Format :

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

TOTAL

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD9872A*Not Authorized
Preremy Bypain***AAD2206-**

Vehicle No.:

Chassis No.:

Co UEN:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration:

07 JUN 2022**SHD9872A**

JTDKB3FU803092715

200303878K

TOYOTA

PRIUS GEN 4

06/06/2022

YN1470A/ EQ

13/11/2020

PART

- 1 COVER, REAR BUMPER
- 1 REINFORCEMENT SUB-ASSY, REAR BUMPER
- 1 COVER, REAR BUMPER, LOWER
- 1 GUARD, REAR BUMPER, CENTER
- 1 RETAINER, REAR BUMPER SIDE, LH
- 1 RETAINER, REAR BUMPER SIDE, RH
- 1 REFLECTOR ASSY, REFLEX, RH
- 1 PANEL SUB-ASSY, QUARTER, RH
- 1 LINER, REAR WHEEL HOUSE, RH
- 1 LENS & BODY, REAR COMBINATION LAMP, RH
- 1 LENS & BODY, REAR COMBINATION LAMP, NO.2 RH
- 1 LAMP ASSY, REAR, RH
- 1 SPOILER SUB-ASSY, REAR
- 1 PANEL SUB-ASSY, BACK DOOR
- 1 PLATE, LUGGAGE COMPARTMENT DOOR NAME, NO.2
- 1 PLATE, BACK DOOR NAME, NO.1
- 1 ORNAMENT SUB-ASSY, BACK DOOR
- 1 GARNISH SUB-ASSY, BACK DOOR, OUTSIDE
- 1 BOARD ASSY, BACK DOOR TRIM
- 1 WEATHERSTRIP, BACK DOOR
- 1 COVER, DECK TRIM, REAR
- 1 PANEL SUB-ASSY, BODY LOWER BACK
- 1 STAY ASSY, BACK DOOR, LH
- 1 STAY ASSY, BACK DOOR, RH
- 1 HINGE ASSY, BACK DOOR, LH
- 1 HINGE ASSY, BACK DOOR, RH

LIST		
<i>Br/Re</i>	485.60	✓
<i>R</i>	332.70	X
<i>Re</i>	22.00	✓
<i>Re</i>	374.50	X
<i>Re</i>	132.60	X
<i>Dis</i>	132.60	✓
<i>Re</i>	39.00	X
<i>Re</i>	871.50	✓
<i>Re</i>	139.80	X
<i>CM</i>	339.60	✓
<i>CM</i>	261.00	✓
<i>CM</i>	293.60	✓
<i>Re</i>	1,575.40	X
<i>Re</i>	1,147.80	X
<i>na</i>	54.60	} X
<i>na</i>	54.60	
<i>na</i>	47.90	
<i>Re</i>	913.60	
<i>Re</i>	259.20	
<i>Re</i>	372.30	
<i>Re</i>	126.70	
<i>Re</i>	651.00	
<i>Re</i>	242.50	
<i>Re</i>	242.50	
<i>Re</i>	61.00	
<i>Re</i>	61.00	
TOTAL	\$ 9,234.60	

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SHD9872A**AAD2206-**

25%	\$	2,308.65
	\$	<u>6,925.95</u>

Special Nett

1SET PARKING AID	\$	700.00	X
1SET REAR BUMPER CLIP	\$	95.00	base
1 REAR SPOILER CLIP	\$	65.00	} X
1 FENDER LINER CLIP	\$	65.00	
2 WINDSCREEN SEALANT	\$	150.00	
1 WINDSCREEN MOULDING	\$	200.00	
1 WINDSCREEN INNER SPONGE SEAL	\$	130.00	
1 REAR TAILGATE STICKER "Trans-Cab"	\$	80.00	
1 REAR TAILGATE STICKER "6555-3333"	\$	80.00	}
1 REAR BUMPER PROTECTOR	\$	180.00	
1SET REAR BUMPER RETAINER CLIP	\$	85.00	
1 END PANEL TRIM CLIP	\$	65.00	
TOTAL	\$	1,895.00	
TOTAL PARTS	\$	8,820.95	

LABOUR

To Remove And Refit Rear Big and Small W/Screen Glass To Facilitate Bodywork Repair.	\$	300.00	X
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	380.00	Per
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	2,200.00	Good
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	380.00	X
To transfer of Tailgate fittings, attachments and perform water seepage test.	\$	180.00	X

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To remove and refit electrical wiring, battery and other necessary items to facilitate bodywork repair.	\$	480.00	X
To transfer of Fender fittings, attachments and perform water seepage test.	\$	480.00	X
Labour charge to mount and dismount vehicle on jig bench, to facilitate repair.	\$	380.00	X
To check steering geometry and computer wheel alignment	\$	220.00	X
To Rust-Proofing and apply undercoat Of The Affected Areas.	\$	250.00	301
Towing Fees	\$	150.00	X
Putty And Spray Painting Of The Affected Portion.	\$	2,200.00	4401
To reinstall rear bumper parking sensor.	\$	170.00	501
To Check Electrical Lighting Concerned.	\$	170.00	201
To transfer of luggage floor panel fittings, attachment and perform water seepage test.	\$	380.00	X
To transfer of tire, rim and on wheel balancing.	\$	220.00	X
To remove and refit radiator support cross-member and other necessary items to enable bodywork repair.	\$	380.00	X
To conduct and perform a comprehensive vehicle diagnostic check and reset vehicle warning indicators.	\$	380.00	X

TOTAL \$ **9,300.00****Over All Total** \$ **18,120.95****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:

(PART-BY-PART) Repair Days**25 DAYS****5 days**

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	06/06/2022 18:51 (SGT)
Date of Accident	06/06/2022 12:05 (SGT)
Exact Location of Accident	631 Bedok Reservoir Rd, Singapore 470631
Additional Location Information	631 BEDOK RESERVOIR ROAD CAR PARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD9872A
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Company Reg No	2XXXXX878K
Email Address	claims@transcab.com.sg
Mobile Phone No	(Phone) +65-62876666
Alternative Phone No	(Office) +65-62876666

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1767

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	VFX/P2413997
Cover Note Number	/

DRIVER

Name of Driver	KWONG SOH HAR @ KWONG YOKE LUN
NRIC No	SXXXX785C

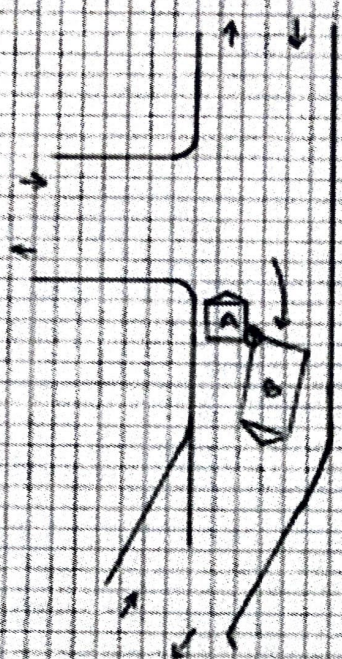
ACCE

042021

631 Bolek
Bolele Rnd

A. SHD832A

B. YN1430A



Policyholder's Signature
Date & Time:

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

VERIFIED BY ALAX MARS (ARC)
REPORTING OFFICER
WONG JUN KEAT

Reporting Centre Personnel's Signature
Name:
NIC/FIN No.: