



Case Details

Case Reference Number : TAX/08/22/2007
 Type of Repair : Accident Repair
 Vehicle Registration Number : SHB1237Y

Company Type : Strides Taxi Pte Ltd
 Estimation ID : EST-19002-ID
 Assigned By : Tan Lee Ge #

Insurance Company Name : AXA Insurance Singapore Pte Ltd
 Accident Date and Time : 05/08/2022 04:15 AM
 Vehicle Age(In Months) : -

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
Standard	Main			TAIL GATE ASM-LIFT	1	1,928.26	1,928.26	30.00	1,349.78	Replace	0	0	Not Give	Xan
Standard	Main			HINGE ASM-L/GATE - LH	1	30.88	30.88	30.00	21.62	Replace	0	0	Not Give	Xan
Standard	Main			HINGE ASM-L/GATE - RH	1	30.88	30.88	30.00	21.62	Replace	0	0	Not Give	Xan
Standard	Main			FASCIA-RR BPR	1	758.48	758.48	30.00	530.94	Replace	1	530.94	Replace	de-
Standard	Main			FASCIA-RR BPR LWR	1	230.68	230.68	30.00	161.48	Replace	1	161.48	Replace	ent
Standard	Main			FINISHER-RR BPR - LH	1	47.42	47.42	30.00	33.19	Replace	1	33.19	Replace	sc
Standard	Main			BRACKET ASM-RR BPR FASCIA SI-L	1	29.85	29.85	30.00	20.90	Replace	0	0	Check	?
Standard	Main			BRACKET-RR BPR FASCIA LWR MTG - LH	1	12.80	12.80	30.00	8.96	Replace	0	0	Check	?
Standard	Main			BRACKET-RR BPR FASCIA SI MTG - LH	1	46.08	46.08	30.00	32.26	Replace	0	0	Check	?
Standard	Main			BRACKET-PARK DIST CONT SEN(BRACKET-PARK DIST CONT SEN) - LH	1	13.20	13.20	30.00	9.24	Replace	0	0	Not Give	Xan
Standard	Main			BRACKET-PARK DIST CONT SEN(BRACKET-PARK DIST CONT SEN) - CTE	1	12.90	12.90	30.00	9.03	Replace	0	0	Not Give	Xan

Total Spare Part Cost	5,091.76	Surveyor Total	1,835.88
Lump Sum Discount (%)	0.00	Lump Sum Dis (%)	0
Final Spare Part Cost	5,091.76	Final Sur Total	1,835.88

Surveyor Approval

SMRT Recommendation

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			CLIP-RR BPR FASCIA	10	1.24	12.40	30.00	8.68	Replace	10	8.68	Replace	✓ <i>me</i>	
Standard	Main			BAR ASM-RR BPR IMP	1	339.76	339.76	30.00	237.83	Replace	0	0	Check	✓ ?	
Standard	Main			COVER-RR TOW HOOK OPG	1	6.76	6.76	30.00	4.73	Replace	0	0	Not Give	✓ <i>Xan</i>	
Standard	Main			LAMP ASM-TAIL(BODY SI) - LH	1	764.08	764.08	10.00	687.67	Replace	1	687.67	Replace	✓ <i>cow</i>	
Standard	Main			LAMP ASM-TAIL(LID SI) - LH	1	407.68	407.68	10.00	366.91	Replace	1	366.91	Replace	✓ <i>cow</i>	
Standard	Main			LAMP ASM-RR FOG - LH	1	36.30	36.30	30.00	25.41	Replace	1	25.41	Replace	✓ <i>cow</i>	
Standard	Main			PANEL-BODY SI OTR-L	1	1,747.82	1,747.82	30.00	1,223.47	Replace	1	0	Repair	✓ <i>R</i>	
Standard	Main			STICKER ELECTRIC (LOGO	1	21.60	21.60	0.00	21.60	Replace	1	21.60	Replace	✓ <i>me</i>	
Standard	Main			STRIDES LOGO	1	7.80	7.80	0.00	7.80	Replace	0	0	Not Give	✓ <i>Xan</i>	
Standard	Main			STICKER DECAL 65558888	1	21.60	21.60	0.00	21.60	Replace	0	0	Not Give	✓ <i>Xan</i>	
Standard	Main			SENSOR-RR PARK DIST CONT	3	65.00	195.00	30.00	136.50	Replace	0	0	Check	✓ <i>Xan</i>	
Standard	Main			EMBLEM ASM-L/GATE (MG5 SW)	1	21.84	21.84	30.00	15.29	Replace	0	0	Not Give	✓ <i>Xan</i>	
Standard	Main			EMBLEM ASM-L/GATE (SW EV)	1	33.90	33.90	30.00	23.73	Replace	0	0	Not Give	✓ <i>Xan</i>	
Standard	Main			EMBLEM ASM-RR LIC PLT (MG)	1	62.92	62.92	30.00	44.04	Replace	0	0	Not Give	✓ <i>Xan</i>	
Standard	Main			PLATE ASM-RR LIC PLT	1	96.40	96.40	30.00	67.48	Replace	0	0	Not Give	✓ <i>Xan</i>	
Total Spare Part Cost									5,091.76	Surveyor Total		1,835.88			
Lump Sum Discount (%)									0.00	Lump Sum Dis (%)		0			
Final Spare Part Cost									5,091.76	Final Sur Total		1,835.88			

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR REAR PORTION LH	1,200.00	500	
Total:			1,200.00	500.00	

Spray Cost Detail

No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY REAR BUMPER	428.00	220	
2	Main	TO RESPRAY REAR PANEL	230.00	0 X ₇₇	
3	Main	TO RESPRAY REAR FLOOR SIDE PANEL LH	230.00	0 X ₇₇	
4	Main	TO RESPRAY TAIL GATE	428.00	0 X ₇₇	
5	Main	TO RESPRAY REAR FENDER LH	428.00	220	
6	Main	TO RESPRAY BUMPER BEAM	230.00	0 X ₇₇	
Total:			1,974.00	440.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0 X ₇₇	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	40	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0 X ₇₇	
4	Main	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	40	
5	Main	TO REPLACE SUNDRY PARTS	100.00	0 X ₇₇	
6	Main	TO CHECK & RESET SYSTEM FUNCTION	350.00	150	
7	Main	ISOLATED OF (EV) (NET)	150.00	150	
Total:			1,000.00	380.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	5,091.76	1,835.88
Total Labour Cost	1,200.00	500.00
Total Spray Painting	1,974.00	440.00
Other	1,000.00	380.00
Overall Total	9,265.76	3,155.88
Lump Sum Repair Option		<input type="checkbox"/>

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Lump Sum Total	0.00	3,155.88
Surveyor Approved Amount		3,155.88
No of Repair Days*	5	3
Remarks	-	resurvey before paint / part by part repair
Surveyor Name		Rasul
Signature		
Survey Date	08/08/2022	

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 Actual 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	05/08/2022 15:20 (SGT)
Reported by	Driver
Date of Accident	05/08/2022 12:15 (SGT)
Exact Location of Accident	160 Robinson Rd, Singapore 068914
Additional Location Information	164 ROBINSON ROAD, SBA CENTRE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB1237Y
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	-

VEHICLE PARTICULARS

Manufacturer	MG
Model	MG 5
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	1

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099115MFSH

DRIVER

Name of Driver	SUNDARAMOORTHY S/O SIVASAMY
NRIC No	SXXXX068B
Date Of Birth	27/10/1973
Occupation	Outdoor

Date Of Driving Pass	16/12/2002
Driving experience	19 YEARS AND 8 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	Collision - Head to Rear
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

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

REFER TO STATEMENT

AT ABOUT 12.15PM, DROPPED OFF PAT AT SBF CENTRE, 164 ROBINSON ROAD. BEHIND ME WAS A COMFORT TAXI. AFTER DROPPING OFF, I GOT ANOTHER BOOKING FROM GRAB. ONCE THE PAX BOARDED BEFORE I MOVE OFF, I HEARD A LOUD BANG AND REALISED THAT COMFORT TAXI BEHIND ME ACCELERATED AND HIT THE REAR OF MY TAXI.
ONE PAX (CHINESE FEMALE)

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE TOO BIG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Manufacturer	
Vehicle Model	SHA3398H
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	-
Contact Number	Taxi
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

IMPORTANT NOTICE

SKETCH PLAN

- 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 Actual 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 Traffic Police Department for investigation.**
- 6 This report will be forwarded by the insurers to 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.



[Signature] / 05082022

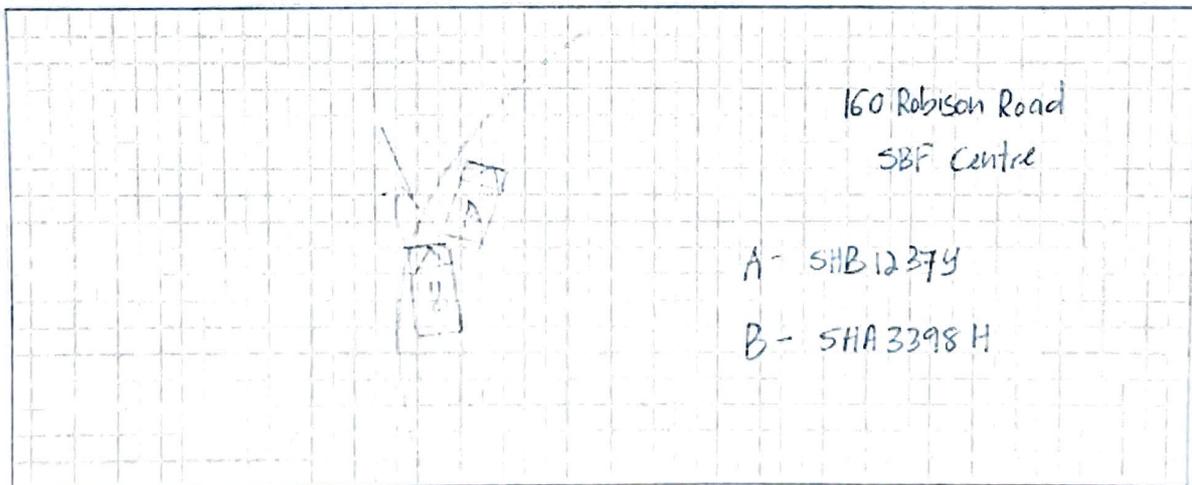
[Signature] 5.8.2022

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

Lined area for describing the accident circumstances.

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature (Date & Time)

 05/08/2022
Driver's Signature (if driver is not the policyholder) (Date & Time)

 5.8.2022
Witnessed by Reporting Centre Personnel (Name as in NRIQ ID card)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHB1237Y
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Aug 2022
Vehicle Make:	M.G.
Vehicle Model:	MG5 EV EXCITE T
Primary Colour:	Green
Manufacturing Year:	2021
Engine No.:	-
Chassis No.:	LSJE24039MG051333
Maximum Power Output:	120.0 kW (160 bhp)
Open Market Value:	\$29,058.00
Original Registration Date:	23 Sep 2021
First Registration Date:	23 Sep 2021
Transfer Count: -	0
Actual ARF Paid:	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Sep 2029
PARF Rebate Amount:	\$3,750.00
COE Expiry Date:	22 Sep 2029
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$37,364.00
COE Rebate Amount:	\$33,238.00
Total Rebate Amount:	\$36,988.00

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 10 Aug 2022

OK