

ASS. REC. BY:

REF: EG/

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s Trans Cob

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: 2 1/2 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: S17D 58435 Yr Regn: 11, 18

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

Truck / Trailer or

Make: Toy Pirus c.c. 1798Colour MP White / Red A/C: Insured / Std / NI / NASp. Reading 411461 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JTDKB3FU 50.3076679Gen. Cond: Good Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modl: NII / S/Rim / STD / Rim or

Tyre Size: F: Wanli 195/65R15R: Pailun

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

TOYO / YOKO or

Front

R/Bal. 9 mmL/Bal. 9 mmD.O.A. 14/5/22

Survey held at

Rear

R/Bal. 8 mmL/Bal. 8 mmD.O.I. 22/8/2022

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

N/S Fr

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

Date / Time

Action / Instruction

11/8/2022

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee:

☐

: Site Insp (\$

) \$ + RS. \$

☐

: Interview (\$

) Fuel \$

☐

: Tech Invs (\$

) Others

☐

: Weekend (\$

)

Report Format :

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

TOTAL

Not Withheld  
11 Sep 8 14506

**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

**SHD5243S**

**AAD2205-083**

Vehicle No.:

Chassis No.:

Co UEN:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration :

**22 AUG 2022**

**SHD5243S**

JTDKB3FU503076679

200303878K

TOYOTA

PRIUS

14/05/2022

**SMT8190Y/ 50**

15/11/2018

PART	LIST
1 PANEL SUB-ASSY, FRONT DOOR, LH	\$ 1,300.70
1 FRAME SUB-ASSY, FRONT DOOR OUTSIDE HANDLE, LH	\$ 193.50
1 COVER, FRONT DOOR OUTSIDE HANDLE, LH	\$ 17.90
1 WEATHERSTRIP, FRONT DOOR, LH	\$ 231.30
1 HINGE ASSY, FRONT DOOR, LOWER LH	\$ 110.60
1 HINGE ASSY, FRONT DOOR, UPPER LH	\$ 97.50
1 TAPE, BLACK OUT, NO.1 FRT LH	\$ 13.30
1 TAPE, BLACK OUT, NO.2 FRT LH	\$ 43.50
1 TAPE, BLACK OUT, NO.3 FRT LH	\$ 26.30
1 <del>MOTOR ASSY, POWER WINDOW REGULATOR, FRT LH</del>	\$ <del>926.00</del>
1 <del>REGULATOR SUB-ASSY, FRONT DOOR WINDOW, LH</del>	\$ <del>238.30</del>
1 MIRROR ASSY, OUTER REAR VIEW, LH	\$ 1,339.30
1 <del>MOULDING ASSY, BODY ROCKER PANEL, LH</del>	\$ <del>594.80</del>
1 <del>COVER, FRONT BUMPER</del>	\$ <del>516.00</del>
1 <del>UNIT ASSY, HEADLAMP, LH</del>	\$ <del>2,637.60</del>
1 FENDER SUB-ASSY, FRONT LH	\$ 977.80
1 LINER, FRONT FENDER, LH	\$ 210.30 X
1 RIM	\$ 1,900.10 X
<b>TOTAL</b>	<b>\$ 11,374.80</b>
<b>25%</b>	<b>\$ 2,843.70</b>
	<b>\$ 8,531.10</b>

**Special Nett**

1 FENDER CLIP	\$ 65.00X
1 FENDER LINER CLIP	\$ 65.00X

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**SHD5243S**

1 TYRE	\$	350.00	X
1SET DOOR WEATHERSTRIP CLIP	\$	65.00	X
1 FRT DOOR STICKER TRANSCAB	\$	100.00	60% X
1 FRT BUMPER CLIP	\$	65.00	X
<b>TOTAL</b>	<b>\$</b>	<b>710.00</b>	

**TOTAL PARTS \$ 9,241.10****LABOUR**

To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.

\$ 380.00 X

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same

\$ 1,400.00 300% 60%

Putty And Spray Painting Of The Affected Portion.

\$ 1,400.00 60% 90%

To Rust-Proofing and apply undercoat Of The Affected Areas.

\$ 240.00 30% 100%

To Check Electrical Lighting Concerned.

\$ 170.00 15%

**TOTAL \$ 3,590.00****Over All Total \$ 12,831.10**

**(PART-BY-PART) Repair Days**  
**LKK Auto Consultants**  
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:

20 days  
2 1/2 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	17/05/2022 11:08 (SGT)
Date of Accident	14/05/2022 14:30 (SGT)
Exact Location of Accident	Near 3 Redhill Cl, Block 3, Singapore 151003
Additional Location Information	JUNCTION OF JLN BUKIT MERAH AND BUKIT MERAH CENTRAL
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD5243S
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	NA

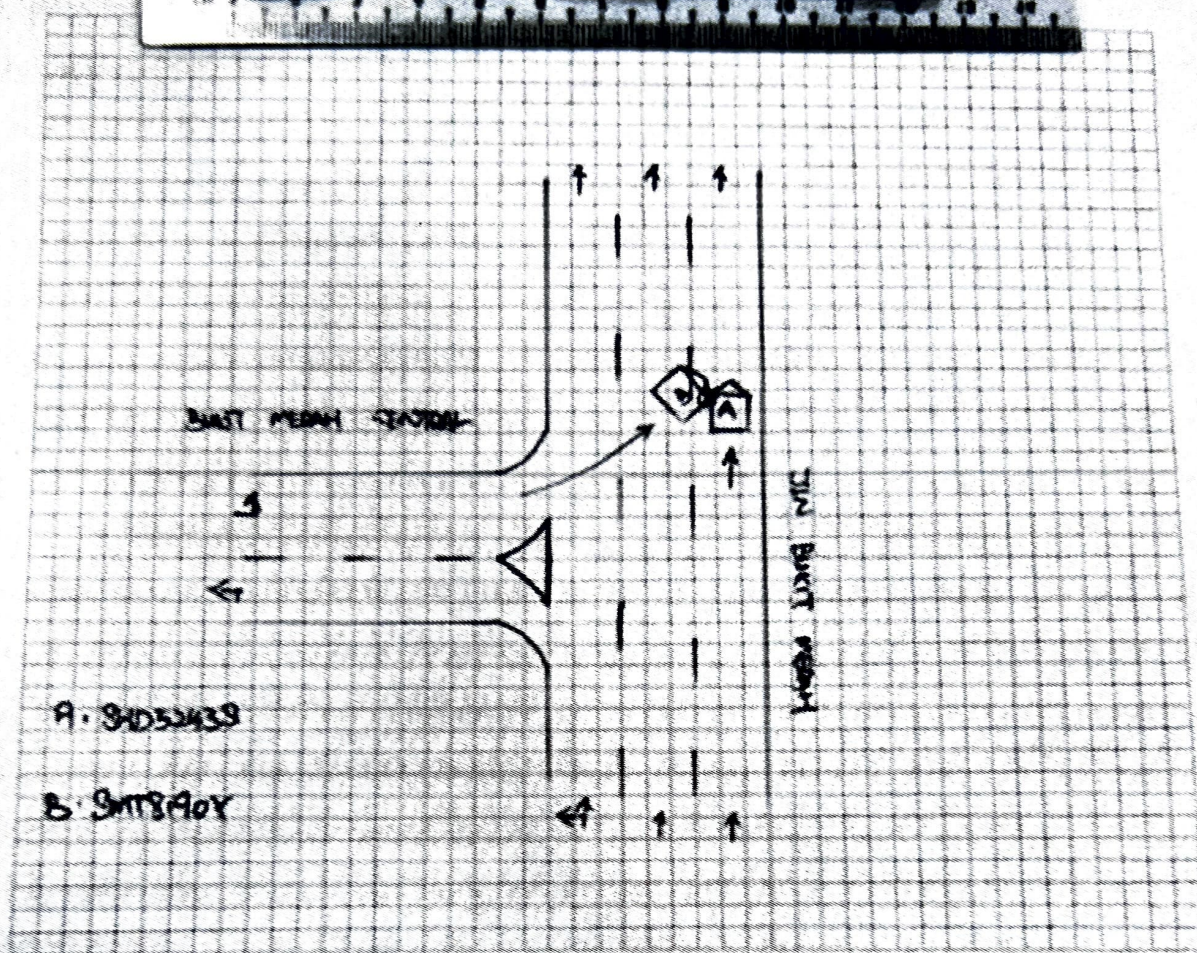
### DRIVER

Name of Driver	WONG WENG WAH
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ACCIDENT

021



*[Signature]*

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

Policyholder's Signature  
Date & Time:

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

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