

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



## Case Details

Case Reference Number : TAX/09/22/2025  
 Type of Repair : Accident Repair  
 Vehicle Registration Number : SHD6174B

Company Type : Strides Taxi Pte Ltd  
 Estimation ID : EST-19333-ID  
 Assigned By : Tan Lee Ge #

Insurance Company Name : AXA Insurance Singapore Pte Ltd  
 Accident Date and Time : 10/09/2022 04:30 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
One Time Key In	Main			MIRROR ASSY,LH	1	1,399.60	1,399.60	10.00	1,259.64	Replace	<input type="text" value="0"/>	<input type="text" value="0"/>	Not Give ▾	X11
One Time Key In	Main			MIRROR GLASS LH	1	161.70	161.70	30.00	113.19	Replace	<input type="text" value="1"/>	<input type="text" value="113.19"/>	Replace ▾	cm ✓
One Time Key In	Main			MIRROR LAMP LH	1	73.80	73.80	10.00	66.42	Replace	<input type="text" value="0"/>	<input type="text" value="0"/>	Not Give ▾	X11
One Time Key In	Main			COVER, OUTER MIRROR, LH	1	142.30	142.30	30.00	99.61	Replace	<input type="text" value="1"/>	<input type="text" value="0"/>	Repair ▾	R
Total Spare Part Cost									1,538.86	Surveyor Total		113.19		
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)		<input type="text" value="20.00"/>		
Final Spare Part Cost									1,231.09	Final Sur Total		90.55		

### Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REMOVE AND REFIX WING MIRROR	338.00	50.00	
Total:			338.00	50.00	


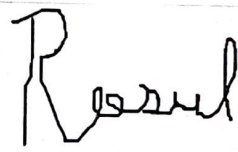
### Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY VIEW MIRROR	180.00	50.00	
Total:			180.00	50.00	

### Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0 <i>X11</i>	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	40.00	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0 <i>X11</i>	
4	Main	TO REPLACE SUNDRY PARTS	100.00	0 <i>X11</i>	
<b>Total:</b>			<b>380.00</b>	<b>40.00</b>	

## Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	1,231.09	90.55
Total Labour Cost	338.00	50.00
Total Spray Painting	180.00	50.00
Other	380.00	40.00
Overall Total	2,129.09	230.55
Lump Sum Repair Option	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	2,150.00	250.00
Surveyor Approved Amount		250.00
No of Repair Days*	3	1
Remarks	-	Lump sum repair / After repair photo FOR CHECK ITEM and REPLACE ITEM PLEASE CALL SURVEYOR RASUL / HP : 0001 0000 email: rasul@lkkauto.com
Surveyor Name		Rasul
Signature		
Survey Date	13/09/2022	<input type="button" value="Save"/> <input type="button" value="Clear"/>

**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	12/09/2022 13:06 (SGT)
Reported by	Driver
Date of Accident	10/09/2022 12:30 (SGT)
Exact Location of Accident	42 Lor 32 Geylang, Singapore 398302
Additional Location Information	42 LOR 32 GEYLANG
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6174B
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	198905369K
Company Reg No	DXXXXXXXXXMFSH
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Mobile Phone No	(Phone) +65-68662671
Alternative Phone No	-

## 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
Policy Number / Cover Note Number	-

## DRIVER

Name of Driver	CHONG CHEE WAI
NRIC No	SXXXX331A
Date Of Birth	21/05/1968
Occupation	Outdoor

Date Of Driving Pass	09/12/1997
Driving experience	24 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662671
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)	0
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	-

#### 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

MY TAXI WAS PARKED AT THE ROAD SIDE PARKING NEAR HOUSE 42 AT LOR 32 GEYLANG. WHEN I RETURNED AT 1230HRS TO RETREIVE MY TAXI, I SAW A TRAFFIC POLICE WAS AT THE SCENE. I WAS NOTIFIED BY THE POLICE THAT THIRD PARTY VEHICLE SJT6553H HAD COLLIDED ONTO MY TAXI. LIKELY SHE HAD LOST CONTROL OF HER VEHICLE AND COLLIDED ONTO MY LEFT SIDE MIRROR.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJT6553H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Private car
Vehicle Category	

Name of Driver	CHENG MUI KIEW
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Describe Circumstance of the Accident

SJT 6553  
 1st 32 Gey  
 Car Park  
 1st 32 Geyling near house no. 42

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Actual Driver's Signature (if driver is not the policyholder) / Date & Time  
 12/9/22

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



**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.



Policyholder's Signature / Date & Time

12/9/22

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

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

**Sketch Plan**

v3 Jun 2022



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHD6174B
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Sep 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2015
Engine No.:	2ZR6596173
Chassis No.:	JTDKN36U705768017
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$29,508.00
Original Registration Date:	06 May 2016
First Registration Date:	06 May 2016
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	05 May 2024
PARF Rebate Amount:	\$3,250.00
COE Expiry Date:	05 May 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$36,463.00
COE Rebate Amount:	\$7,480.00
Total Rebate Amount:	\$10,730.00

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 14 Sep 2022

OK