



Case Details

Case Reference Number : TAX/09/22/2027

Type of Repair : Accident Repair

Vehicle Registration Number : SHF33D

Company Type : Strides Taxi Pte Ltd

Estimation ID : EST-19350-ID

Assigned By : Taxi Claims Manager Team

Insurance Company Name : AIG Asia Pacific Insurance Pte Ltd

Accident Date and Time : 12/09/2022 08:34 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			COVER, FR BUMPER	1	565.60	565.60	25.00	424.20	Replace	1	424.20	Replace ▾	sol ✓
One Time Key In	Main			SUPPORT, FR BUMPER LH	1	86.20	86.20	25.00	64.65	Replace	0	0	Check ▾	?
One Time Key In	Main			COVER, FR BUMPER LH	1	32.70	32.70	25.00	24.53	Replace	0	0	Not Give ▾	Xm
One Time Key In	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.80	48.00	25.00	36.00	Replace	10	36.00	Replace ▾	new ✓
One Time Key In	Main			MOULDING, FRONT BUMPER SIDE, LH	1	103.70	103.70	25.00	77.78	Replace	1	77.78	Replace ▾	sol ✓
One Time Key In	Main			UNIT, HEADLAMP, LH	1	2,852.40	2,852.40	10.00	2,567.16	Replace	0	0	Check ▾	?
One Time Key In	Main			FENDER SUB-ASSY, FR, LH	1	1,060.70	1,060.70	25.00	795.53	Replace	1	0	Repair ▾	R
One Time Key In	Main			EMBLEM, SIDE PANEL (HYBRID)	1	59.10	59.10	25.00	44.33	Replace	1	44.33	Replace ▾	new ✓
One Time Key In	Main			LINER, FR FENDER, LH	1	227.80	227.80	25.00	170.85	Replace	0	0	Not Give ▾	Xm
One Time Key In	Main			RETAINER, FR WHEEL LH	1	3.50	3.50	25.00	2.63	Replace	1	2.63	Replace ▾	new ✓

Total Spare Part Cost 5,955.38

Lump Sum Discount (%) 0.00

Final Spare Part Cost 5,955.38

Surveyor Total 756.69

Lump Sum Dis (%) 0

Final Sur Total 756.69

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			PAD, FR WHEEL LH	1	65.00	65.00	25.00	48.75	Replace	0	0	Not Give	Xm
One Time Key In	Main			WHEEL, DISC FRONT	1	2,036.30	2,036.30	25.00	1,527.22	Replace	0	0	Not Give	Xm
One Time Key In	Main			CAP SUB-ASSY, WHEEL	1	229.00	229.00	25.00	171.75	Replace	1	171.75	Replace	sur /
Total Spare Part Cost									5,955.38		Surveyor Total		766.69	
Lump Sum Discount (%)									0.00		Lump Sum Dis (%)		0	
Final Spare Part Cost									5,955.38		Final Sur Total		766.69	

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT LH PORTION	676.00	300.00	
Total:			676.00	300.00	

Spray Cost Detail


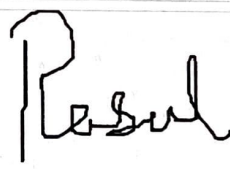
S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY FRONT BUMPER	378.00	200.00	
2	Main	TO RESPRAY FRONT FENDER RH	378.00	200.00	
3	Main	RESPRAY WHEEL CAP	180.00	0 Xm	
4	Main	TO RESPRAY RIM	180.00	0 Xm	
Total:			1,116.00	400.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0 Xm	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	0 Xm	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0 Xm	
4	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60.00	
Total:			600.00	60.00	

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
5	Main	TO REPLACE SUNDRY PARTS	100.00	0 <i>Xm</i>	
Total:			500.00	60.00	

Summary

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Total Spare Part Detail	5,955.38	756.69
Total Labour Cost	676.00	300.00
Total Spray Painting	1,116.00	400.00
Other	500.00	60.00
Overall Total	8,247.38	1,516.69
Lump Sum Repair Option	<input type="checkbox"/>	<input type="checkbox"/>
Lump Sum Total	0.00	1,516.69
Surveyor Approved Amount		1,516.69
No of Repair Days*	5	3
Remarks	-	parts by parts / Before paint photo , After repair photo FOR CHECK ITEM and REPLACE ITEM PLEASE CALL SURVEYOR RASUL / HP : 9994 0068 email:
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	13/09/2022 12:58 (SGT)
Reported by	Driver
Date of Accident	12/09/2022 16:34 (SGT)
Exact Location of Accident	Lor 23 Geylang, Singapore
Additional Location Information	LOR 23 GEYLANG
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF33D
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	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	D-22099115MFSH

DRIVER

Name of Driver	TAN WEE MENG
NRIC No	SXXXXX096C
Date Of Birth	19/12/1964
Occupation	Outdoor

Date Of Driving Pass	06/04/1982
Driving experience	40 YEARS AND 5 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	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)	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	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 ALONG LOR 23 GEYLANG WITH ONE PASSENGER (MALE CHINESE) ON BOARD. SUDDENLY A VEHICLE SLJ4023M CAME OUT FROM THE PARKING LOT ON MY LEFT AND MY TAXI COLLIDED ONTO THE RIGHT FRONT PORTION OF THE VEHICLE.

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	SLJ4023M
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
Contact Number	NG JOO LING
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 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.

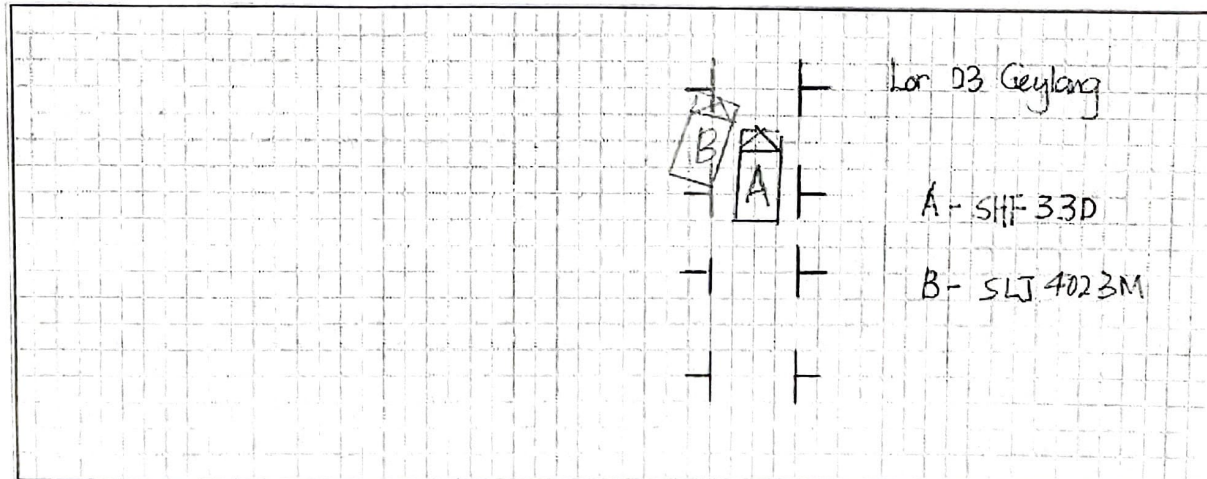


Policyholder's Signature / Date & Time

[Signature] 13/9
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

[Signature] 13.9.2022
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



vJun2022

1

Describe Circumstance of the Accident

Lined area for describing the accident circumstances.

Declaration

I/we declare the foregoing particulars are true in every respect.

[Signature]

Reporting Officer's Signature (Type & Print)

[Signature] 11/09

Reporting Officer's Signature (Type & Print) Date & Time

[Signature] 13.9.2022

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHF33D
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Sep 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Maroon
Manufacturing Year:	2020
Engine No.:	2ZR2G94525
Chassis No.:	JTDKB3FU503091991
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,807.00
Original Registration Date:	01 Dec 2020
First Registration Date:	01 Dec 2020
Transfer Count:	0
Actual ARF Paid:	\$14,530.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Nov 2028
PARF Rebate Amount:	\$10,897.00
COE Expiry Date:	30 Nov 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$29,843.00
COE Rebate Amount:	\$23,169.00
Total Rebate Amount:	\$34,066.00

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