



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

TAX INVOICE

EQ INSURANCE COMPANY LTD

INV No. AC2300311

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEX
SINGAPORE 069110

INV Date 16/01/2023
Reference CS/EQI22009052/Rvy3e2
Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SHB 99K

Insured Veh. YP 8559Y

Claim No. DM22HO01580

Policy No.

Accident Date 13/09/2022

Inspection Date 14/09/2022

Description	Total
Survey Inspection	230.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	230.00
GST (8%)	18.40
Grand Total	248.40

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to **'LKK Auto Consultants Pte Ltd'**

LKK Auto Consultants Pte Ltd

KHM



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Affiliated to Federation Internationale Des Experts En Automobile

EQ INSURANCE COMPANY LTD
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Ref: CS/EQI22009052/Rvy3e2

Date: 16/01/2023

Code: EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 8559Y	Veh. Inspected	SHB 99K
Policy No.		Coverage (\$)	0.00
Claim No.	DM22HO01580	Excess (\$)	0.00
Assign From	LEE PEY SHY	Assign Date	14/09/2022

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS TAXI (SMRT)	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	JTDKN36U505766296	Colour	MAROON
Odometer	674409 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	FALKEN	6 mm
L/H Front Tyre	195/65 R15	FALKEN	6 mm
R/H Rear Tyre	195/65 R15	FALKEN	6 mm
L/H Rear Tyre	195/65 R15	FALKEN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	13/09/2022	Inspection Date	14/09/2022
Survey held at	STRIDES AUTOMOTIVE SERVICES PL. 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: **6 Working Days**



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 99K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BUMPER REAR (DISC 25%)	CRACKED	458.60	343.95
10	BUMPER CLIPS @\$2.40 (DISC 25%)	NECESSARY	24.00	18.00
1	END PANEL (DISC 25%)	BENT	755.10	566.33
1	EMBLEM REAR (DISC 25%)	NECESSARY	68.70	51.53
1	NAME PLATE (HYBRID) (DISC 25%)	NECESSARY	59.20	44.40
1	NAME PLATE (PRIUS) (DISC 25%)	NECESSARY	69.40	52.05
1	NAME PLATE (TOYOTA) (DISC 25%)	NECESSARY	59.20	44.40
1	SPOILER REAR (DISC 25%)	CRACKED	1,263.70	947.78
1	BUMPER REINFORCEMENT REAR (DISC 25%) (ADDITIONAL)	BENT	234.70	176.03
1	ARM SUB-ASSY, RR BUMPER RH (DISC 25%) (ADDITIONAL)	BENT	157.90	118.43
1	BUMPER SIDE RETAINER RR/LH (DISC 25%) (ADDITIONAL)	CRACKED	108.70	81.53
1	3RD BRAKE LAMP (DISC 10%)	CRACKED	263.40	237.06
1	ANTENNA, ELECTRICAL LOWER REAR (DISC 10%) (ADDITIONAL)	CRACKED	208.10	187.29
1	SENSOR REVERSE (SN)	NOT WORKING	180.00	180.00
1	STRIDES LOGO (SN)	NECESSARY	7.80	7.80
1	STICKER DECAL 65558888 (SN)	NECESSARY	21.60	21.60
1	BUMPER REINFORCEMENT REAR	NOT NECESSARY	234.70	-
1	ARM SUB-ASSY, RR BUMPER RH	NOT NECESSARY	157.90	-
1	ARM SUB-ASSY, RR BUMPER LH	NOT NECESSARY	157.90	-
1	ANTENNA, ELECTRICAL LOWER REAR	NOT NECESSARY	208.10	-
1	BUMPER SIDE RETAINER RR/LH	NOT NECESSARY	108.70	-
1	BUMPER SIDE RETAINER RR/RH	NOT NECESSARY	108.70	-
1	BUMPER SEAL, RR LH	NOT NECESSARY	101.80	-
1	BUMPER SEAL, RR RH	NOT NECESSARY	74.40	-
1	BUMPER LIP COVER RR/LH	NOT NECESSARY	93.90	-
1	BUMPER LIP COVER RR/RH	NOT NECESSARY	155.40	-
1	BUMPER LIP REAR	NOT NECESSARY	301.90	-
1	UNDER COVER SUB-ASSY, RR FLOOR	NOT NECESSARY	586.10	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	UNDER COVER RR SHIELD	NOT NECESSARY	66.10	-
1	SPARE TYRE PANEL	NOT NECESSARY	755.10	-
2	TAILGATE DOOR HINGE LH / RH @\$61.20	NOT NECESSARY	122.40	-
1	TAILGATE DOOR LOCK	NOT NECESSARY	631.90	-
1	TAILGATE LOCK COVER	NOT NECESSARY	20.70	-
1	TAILGATE DOOR WEATHER STRIP	NO SUCH PARTS	402.50	-
2	LICENSE PLATE LAMP @\$40.80	NOT NECESSARY	81.60	-
1	CAMERA SSSY, TELEVISION, RR	NOT NECESSARY	1,429.80	-
1	TAIL LAMP BRACKET, RH	NOT NECESSARY	35.20	-
1	TAIL LAMP RH	NOT NECESSARY	618.60	-
1	TAIL LAMP BRACKET, LH	NOT NECESSARY	35.20	-
1	TAIL LAMP LH	NOT NECESSARY	618.60	-
1	TAILGATE ASY	TO REPAIR SEE LABOUR	1,260.70	-
1	TAILGATE OUTSIDE GARNISH	TO REPAIR SEE LABOUR	574.80	-
			12,882.80	3,078.18
	LABOUR			
	PANEL BEATING & BODY WORK. INCLUSIVE OF THE REPAIR OF TAILGATE ASY AND TAILGATE OUTSIDE GARNISH.		1,014.00	600.00
	SPRAY PAINT.		1,856.00	800.00
	TOWING CHARGE.	NOT NECESSARY	56.00	-
	TO WASH AND VACUUM.	NOT NECESSARY	60.00	-
	TO CHECK WIRING AND SYSTEM FUNCTION.		120.00	40.00
	TO APPLY RUST-PROOFING ON AFFECTED AREA.		100.00	40.00
	TO REPLACE SUNDRY PARTS.	NOT NECESSARY	100.00	-
	TO TEST AND REFIX REVERSE SENSOR SYSTEM.		120.00	40.00
			3,426.00	1,520.00
	GRAND TOTAL		16,308.80	4,598.18

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RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			3,500.00
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MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

REQUEST FOR SUPPLYMENT PARTS

Contractor:			
Accident Case Number	TAX/08/22/2030	Date of Collection	
Vehicle No	SHB 99 K	Date of Request	20/09/2022
Vehicle Model	TOYOTA PRIUS	Number of Days to Extend (If any)	2 1 day

S/N	Part Number	Part Description	Quantity	Unit Price
1		BUMPER REINFORCEMENT REAR 1pc	bt	176.03
2		ARM SUB ASSY, REAR BUMPER RH 1pc	bt	118.43
3		ANTENNA ELECTRICAL REAR 1pc	cra	187.29
4		BUMPER SIDE RETAINER REAR LH 1pc	cra	81.53
5		LABOUR TO SPRAY REAR BUMPER BEAM		\$200 100

<<<Please submit photographs for damaged parts>>>

I, (Name) _____

(Position) _____

do solemnly and sincerely declare that:- Supplementary Parts are raised for replacement for the aforesaid vehicle.

Signature of person making this declaration
[to be signed in front of an authorised witness]

I acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the damages of perjury.

For SMRT Staff

Acknowledge By	ARC Executive / Supervisor / SA	
Approval By	Surveyor / In-house Staff	
Parts Ordering	SMRT Store / Contractor Supply / Form 22 / WOC	Form22 / PO / WOC/ Reservation / Number
Photo Submitted	YES / NO	Date of submission

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 16:06 (SGT)
Reported by	Driver
Date of Accident	13/09/2022 12:26 (SGT)
Exact Location of Accident	Chin Swee Rd, Singapore
Additional Location Information	SLIP ROAD FROM CHIN SWEE ROAD TOWARDS HAVELOCK ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB99K
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	CHANDRAKASAN
NRIC No	SXXXX366F
Date Of Birth	12/08/1956

Occupation	Outdoor
Date Of Driving Pass	04/10/1979
Driving experience	42 YEARS AND 11 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	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 THE SLIP ROAD FROM CHIN SWEE ROAD TURNING LEFT TOWARDS HAVELOCK ROAD WITH ONE PASSENGER (MALE CHINESE) ON BOARD. I STOPPED TO LOOK OUT FOR THE ONCOMING TRAFFIC AND SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE YP8559Y HAD COLLIDED ONTO THE REAR OF MY TAXI.

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	YP8559Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Commercial vehicle
Contact Number	LIM GAY WAH
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

$$A_1 = SAB \text{ } 39K$$

E: YP 8559Y

↑ CHIN score is 0

Declaration
I/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

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

Jun 2022

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

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

vJun2022

1



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PHOTOGRAPHS FOR VEHICLE NO. SHB 99K

INSPECTION





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RE-INSPECTION

