

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	30/09/2022 14:14 (SGT)
Reported by	Driver
Date of Accident	28/09/2022 15:55 (SGT)
Exact Location of Accident	70 Airport Blvd., Changi Airport, Singapore 819661
Additional Location Information	CHANGI AIRPORT T2 ARRIVAL HALL PICK UP
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6117S
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 YEW LING
NRIC No	SXXXX118B
Date Of Birth	02/04/1959
Occupation	Outdoor

Date Of Driving Pass	20/04/1982
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)	1
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

I WAS DRIVING ALONG AIRPORT TERMINAL 2 AT THE ARRIVAL HALL, AND SUDDENLY THIRD-PARTY VEHICLE SMN840P MOVED OFF FROM HIS PARKED POSITION AND COLLIDED ONTO MY TAXI.
NO PASSENGER ON BOARD

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	SMN840P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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

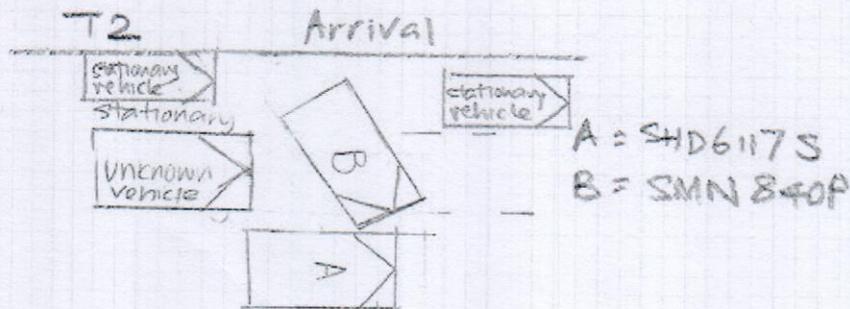
[Handwritten Signature]

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

[Handwritten Signature]

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

Sketch Plan





*NOT Notified
LI By @ 3350h
Murray After Pain*

Case Details

Case Reference Number : TAX/09/22/2083
 Type of Repair : Accident Repair
 Vehicle Registration Number : SHD6117S

Company Type : Strides Taxi Pte Ltd
 Estimation ID : EST-19464-ID
 Assigned By : Taxi Claims Manager Team

Insurance Company Name : income insurance limited
 Accident Date and Time : 28/09/2022 07:55 AM
 Vehicle Age(In Months) : -

Documents / Photographs

View Documents / Photographs

Total Documents: 0

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:

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	SMRT Recommendation				Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Surveyor Approval	Repair/Replace	Remarks
						List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)						
Standard	Main			COVER, FR BUMPER	1	565.60	565.60	25.00	424.20	Replace	1	424.2	Replace	✓	<i>Buc</i>
Standard	Main			SUPPORT, FR BUMPER LH	1	86.20	86.20	25.00	64.65	Replace	1	64.65	Replace	✓	<i>Di</i>
Standard	Main			COVER, FR BUMPER LH	1	32.70	32.70	25.00	24.53	Replace	1	24.53	Replace	✓	<i>Mil</i>
Standard	Main			SEAL, HOOD TO FR END	1	92.40	92.40	25.00	69.30	Replace	0	0	Not Give	✓	
Standard	Main			GRILLE, RADIATOR	1	192.80	192.80	25.00	144.60	Replace	0	0	Not Give	✓	
Standard	Main			GRILLE SUB-ASSY	1	457.10	457.10	25.00	342.83	Replace	0	0	Not Give	✓	
Standard	Main			GRILLE, SUB - ASSY , 2	1	170.20	170.20	25.00	127.65	Replace	0	0	Not Give	✓	
Standard	Main			COVER ASSY, ENGINE	1	261.60	261.60	25.00	196.20	Replace	0	0	Not Give	✓	
Standard	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.80	48.00	25.00	36.00	Replace	10	36.00	Replace	✓	<i>Me</i>
Standard	Main			RETAINER, FR BUMPER, LH & RH	1	9.50	9.50	25.00	7.13	Replace	0	0	Not Give	✓	
Standard	Main			PAD, FRONT BUMPER (NO.1)	1	44.10	44.10	25.00	33.08	Replace	0	0	Check	✓	<i>X</i>
Standard	Main			PAD, FRONT BUMPER (NO.2)	1	38.90	38.90	25.00	29.17	Replace	0	0	Check	✓	<i>X</i>
Standard	Main			MOULDING, FRONT BUMPER SIDE, LH	1	103.70	103.70	25.00	77.78	Replace	1	77.78	Replace	✓	<i>CRAL</i>
Standard	Main			ABSORBER, FR BUMPER LOWER	1	143.60	143.60	25.00	107.70	Replace	0	0	Check	✓	<i>X</i>

Total Spare Part Cost	11,002.26	Surveyor Total	3,412.13
Lump Sum Discount (%)	20.00	Lump Sum Dis (%)	20.00
Final Spare Part Cost	8,801.81	Final Sur Total	2,729.70

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			ABSORBER, FR BUMPER	1	86.60	86.60	25.00	64.95	Replace	0	0	Check	X
Standard	Main			REINFORCEMENT FRONT LOWER	1	265.90	265.90	25.00	199.42	Replace	0	0	Not Give	
Standard	Main			REINFORCEMENT FRONT UPPER	1	773.90	773.90	25.00	580.43	Replace	0	0	Not Give	
Standard	Main			UNIT HEADLAMP, LH	1	2,852.40	2,852.40	10.00	2,567.16	Replace	1	2,567	Replace	W
Standard	Main			COMPUTER SUB-ASSY, HEADLAMP, LH NO.1	1	4,079.80	4,079.80	10.00	3,671.82	Replace	0	0	Not Give	
Standard	Main			LAMP ASSY, FOG, LH	1	256.50	256.50	10.00	230.85	Replace	0	0	Check	X
Standard	Main			COVER, ENGINE UNDER SIDE LH	1	86.20	86.20	25.00	64.65	Replace	0	0	Not Give	
Standard	Main			HOOD SUB-ASSY	1	1,066.30	1,066.30	25.00	799.72	Replace	0	0	Not Give	
Standard	Main			FENDER SUB-ASSY, FR, LH	1	1,060.70	1,060.70	25.00	795.53	Replace	1	0	Repair	
Standard	Main			EMBLEM, SIDE PANEL (HYBRID)	1	59.10	59.10	25.00	44.33	Replace	1	44.33	Replace	M
Standard	Main			LINER, FR FENDER, LH	1	227.80	227.80	25.00	170.85	Replace	1	170.8	Replace	CM
Standard	Main			RETAINER, FR WHEEL RH	1	3.50	3.50	25.00	2.63	Replace	1	2.63	Replace	M
Standard	Main			PROTECTOR, FR FENDER LH	1	101.80	101.80	25.00	76.35	Replace	0	0	Not Give	
Standard	Main			PAD, FR WHEEL LH	1	65.00	65.00	25.00	48.75	Replace	0	0	Not Give	
Total Spare Part Cost									11,002.26	Surveyor Total		3,412.13		
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)		20.00		
Final Spare Part Cost									8,801.81	Final Sur Total		2,729.70		

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT LH PORTION	845.00	300.00	
Total:			845.00	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	
Total:			1,314.00	400.00	

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
2	Main	TO RESPRAY FRONT HOOD	378.00	0	
3	Main	TO RESPRAY FRONT SUPPORT PANEL	180.00	0	
4	Main	TO RESPRAY FRONT FENDER LH	378.00	200.00	
Total:			1,314.00	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	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	20.00	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0	
4	Main	TO REPLACE SUNDRY PARTS	100.00	0	
Total:			380.00	20.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	8,801.81	2,729.70
Total Labour Cost	845.00	300.00
Total Spray Painting	1,314.00	400.00
Other	380.00	20.00
Overall Total	11,340.81	3,449.70
Lump Sum Repair Option	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	11,350.00	3,450.00
Surveyor Approved Amount		3,450.00
No of Repair Days*	6	3
Remarks	-	Lump sum repair / resurvey after paint / after paint photos / FOR CHECK ITEM and REPLACE ITEM PLEASE CALL SUPERVISOR Kenneth Kong (LKK) HP : 9691 8552 /
Surveyor Name		Kenneth Kong (LKK)

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Signature		 <input type="button" value="Save"/> <input type="button" value="Clear"/>
Survey Date	<input type="text" value="30/09/2022"/>	