

(08/11/13) wef

ASS. REC. BY: Pana

REF:

CC4/ASM 22009905/Rpa3

366K

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SHD 60705at Workshop m/s STRIDESof 60, Woodlands Ind Pk B4

Insured:

ASM

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 Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time Action / Instruction

Veh No:

SHD 60705Yr Regn: 2017 / DKL

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

Truck / Trailer or

Make:

TOYOTA PRIUS Hybrid 1.8 CVT c.c 1798

Colour:

Imprun

A/C: Insured / Std / NI / NA

Sp. Reading

571025

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTDK B3FU003576801

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195/60R15

R:

2

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

TOYO / YOKO or

SAILUN

Front

Rear

R/Bal.

6 mm

R/Bal.

6 mm

L/Bal.

6 mm

L/Bal.

6 mm

D.O.A.

05/10/22

D.O.I.

06/10/22

Survey held at

STRIDES

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

REAR N/S

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

Date/Time, File Pass to?

☐

: Preli. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Report Format :

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

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

) S + RS SI

) Photos

) Others

Case Details

Case Reference Number : TAX/10/22/2015
Type of Repair : Accident Repair
Vehicle Registration Number : SHD6070S

Company Type : Strides Taxi Pte Ltd
Estimation ID : EST-19542-ID
Assigned By : Taxi Claims Manager Team

Insurance Company Name : AXA Insurance Singapore Pte Ltd
Accident Date and Time : 05/10/2022 03:45 AM
Vehicle Age(In Months) : -

Documents / Photographs

View Documents / Photographs

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation						Repair/ Replace	Surveyor Approval			Remarks
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)		Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace	
Standard	Main			COVER, RR BUMPER ASSY	1	478.90	478.90	30.00	335.23	Replace	1	0	Repair	R
Standard	Main			REAR BUMPER REINFORCEMENT	1	360.10	360.10	30.00	252.07	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, RH & LH , 1	2	4.30	8.60	30.00	6.02	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, RH & LH , 2	2	4.30	8.60	30.00	6.02	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, RH & LH , 3	2	4.30	8.60	30.00	6.02	Replace	0	0	Not Give	Xan
Standard	Main			PAD, RR BUMPER, CTR	3	2.50	7.50	30.00	5.25	Replace	0	0	Not Give	Xan
Standard	Main			SEAL, RR BUMPER ARM, RH & LH	1	12.30	12.30	30.00	8.61	Replace	0	0	Not Give	Xan
Standard	Main			STOPPER, RR BUMPER, RH & LH	1	4.80	4.80	30.00	3.36	Replace	0	0	Not Give	Xan
Standard	Main			RETAINER, RR BUMPER, LH	1	127.40	127.40	30.00	89.18	Replace	0	0	Not Give	Xan
Standard	Main			RETAINER, RR BUMPER, RH	1	127.40	127.40	30.00	89.18	Replace	0	0	Not Give	Xan
Standard	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.80	48.00	30.00	33.60	Replace	0	0	Not Give	Xan
Standard	Main			GUARD, RR BUMPER, LOWER	1	623.50	623.50	30.00	436.45	Replace	1	436.45	Replace	7500
Standard	Main			FILLER, RR BUMPER , LH	1	168.60	168.60	30.00	118.02	Replace	0	0	Not Give	Xan
Standard	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	0	0	Not Give	Xm
Standard	Main			ANTENNA, ELECTRICAL KEY	1	78.00	78.00	10.00	70.20	Replace	0	0	Not Give	Xan

Total Spare Part Cost 4,709.44

Surveyor Total 602.77

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 3,767.55

Final Sur Total 482.22

SMRT Recommendation											Surveyor Approval			Remarks
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	
Standard	Main			LENS & BODY ASSY, RR BUMPER, LH	1	544.40	544.40	10.00	489.96	Replace	0	0	Not Give	Xm
Standard	Main			COVER, REAR FLOOR UNDER, LH	1	261.60	261.60	30.00	183.12	Replace	0	0	Not Give	Xm
Standard	Main			COVER, REAR FLOOR UNDER CENTER	1	249.10	249.10	30.00	174.37	Replace	0	0	Not Give	Xm
Standard	Main			TAIL GATE PANEL SUB-ASSY, BACK DOOR	1	1,238.40	1,238.40	30.00	866.88	Replace	0	0	Not Give	Xm
Standard	Main			TAIL GATE BACK DOOR OUTSIDE GARNISH SUB-ASSY	1	992.30	992.30	30.00	694.61	Replace	1	0	Repair	R
Standard	Main			NAME PLATE (HYBRID), LUGGAGE COMPARTMENT DOOR	1	59.10	59.10	30.00	41.37	Replace	1	41.37	Replace	nee
Standard	Main			NAME PLATE (PRIUS), LUGGAGE COMPARTMENT DOOR	1	59.10	59.10	30.00	41.37	Replace	1	41.37	Replace	nee
Standard	Main			STRIDES LOGO	1	7.80	7.80	0.00	7.80	Replace	1	7.80	Replace	nee
Standard	Main			STICKER DECAL 6555 8888	1	21.60	21.60	0.00	21.60	Replace	1	21.60	Replace	nee
Standard	Main			END PANEL SUB-ASSY, BODY LOWER BACK	1	707.10	707.10	30.00	494.97	Replace	0	0	Not Give	Xm
Standard	Main			EMBLEM SUB-ASSY REAR	1	77.40	77.40	30.00	54.18	Replace	1	54.18	Replace	nee
Total Spare Part Cost									4,709.44					
Lump Sum Discount (%)									20.00					
Final Spare Part Cost									3,767.55					
											Surveyor Total		602.77	
											Lump Sum Dis (%)		20	
											Final Sur Total		482.22	

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR REAR PORTION	676.00	300	
Total:			676.00	300.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY REAR BUMPER	378.00	200	
2	Main	TO RESPRAY REAR PANEL	180.00	0	X

Total:

1,296.00

300.00

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
3	Main	TO RESPRAY BUMPER BEAM	180.00	0 X11	
4	Main	TO RESPRAY TAIL GATE	378.00	0 X11	
5	Main	TO RESPRAY TAILGATE OUTSIDE GARNISH	180.00	100	
Total:			1,296.00	300.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0 X11	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	0 X11	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0 X11	
4	Main	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0 X11	
5	Main	TO REPLACE SUNDRY PARTS	100.00	0 X11	
Total:			500.00	0.00	



Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	3,767.55	482.22
Total Labour Cost	676.00	300.00
Total Spray Painting	1,296.00	300.00
Other	500.00	0.00
Overall Total	6,239.55	1,082.22
Lump Sum Repair Option	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	6,250.00	1,100.00
Surveyor Approved Amount		1,100.00
No of Repair Days*	4	3
Remarks		

lump sum repair / resurvey after repair

Surveyor Name

Rasul

	Estimator Assessment(\$)	Surveyor Assessment(\$)
Signature		
Survey Date	<input type="text" value="06/10/2022"/>	
	<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	06/10/2022 14:08 (SGT)
Reported by	Driver
Date of Accident	05/10/2022 11:45 (SGT)
Exact Location of Accident	Kampong Bahru Rd, Singapore
Additional Location Information	KAMPONG BAHRU TOWARDS LOWER DELTA
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6070S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	D-22099115MFSH
Company Reg No	1XXXXX369K
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Mobile Phone No	(Phone) +65-68662672
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	CHIA YEW HOCK
NRIC No	SXXXX573B
Date Of Birth	18/04/1965
Occupation	Outdoor

Date Of Driving Pass	16/09/1983
Driving experience	39 YEARS AND 1 MONTH
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)	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 TRAVELLING ALONG KAMPONG BAHRU ROAD AND SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SHC5597B(TRANSCAB) 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	SHC5597B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi

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) -

11.45 am 5/10/2022

Kampung Bahru Rd →

SHO CWO

CHC 5541E

A

B

←

Lower Delta

West Coast Hwy

Empty lined area for notes or sketch.

Declaration

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



Policyholder's Signature / Date & Time

[Signature] 5/10/2022

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

[Signature] 5.10.2022

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

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)

Sketch Plan

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

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.:	SHD60705
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Oct 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZR8261821
Chassis No.:	JTDKB3FU003576801
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	19 Dec 2017
First Registration Date:	19 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Dec 2025
PARF Rebate Amount:	\$3,750.00
COE Expiry Date:	18 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$34,159.00
COE Rebate Amount:	\$13,647.00
Total Rebate Amount:	\$17,397.00
Message	

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 07 Oct 2022

OK