

(08/11/13) wef

ASS. REC. BY: Pam

REF:

CC4/ABM22010071/RpA3

369K

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No: SHB 5329Pat Workshop m/s STRIDES (SMRT)of 60, WOODLANDS DEPOT

Insured:

ABM

Policy No.

Claims No.

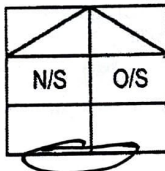
Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Report: 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

Veh No:

SHB 5329PYr Regn: 2017 / NOV

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

Truck / Trailer or

Make:

TOYOTA PRIUS HYBRID 1.8CVT c.c 1798

Colour:

MAROON

A/C: Insured / Std / NI / NA

Sp. Reading

417504

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTDKBFU603573255

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size:

F:

195/65R15

R:

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

TOYO / YOKO or

GITI

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.

12/10/22

Survey held at

STRIDES

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

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

Date / Time

Action / Instruction

Date/Time, File Pass to?



: Prell. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:



: Site Insp (\$

) S + RS SI



: Interview (\$

) Photos



: Tech. Invs (\$

) Others

Report Format :



Case Details

Case Reference Number : TAX/10/22/2019

Type of Repair : Accident Repair

Vehicle Registration Number : SHB5329P

Company Type : Strides Taxi Pte Ltd

Estimation ID : EST-19587-ID

Assigned By : Tan Lee Ge #

Insurance Company Name : AXA Insurance Singapore Pte Ltd

Accident Date and Time : 05/10/2022 01:21 PM

Vehicle Age(In Months) : 59

Documents / Photographs

View Documents / Photographs

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation					Final Price(\$)	Repair/ Replace	Surveyor Approval			Remarks
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)			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	Check	?
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	3	5.25	Replace	new
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, RH	1	127.40	127.40	30.00	89.18	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			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	de
Standard	Main			COVER, GUARD RR BUMPER LOWER	1	16.70	16.70	30.00	11.69	Replace	0	0	Not Give	Xan
Standard	Main			SENSOR REVERSE	1	180.00	180.00	0.00	180.00	Replace	0	0	Check	?

Total Spare Part Cost 2,556.32

Surveyor Total 441.70

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 20

Final Spare Part Cost 2,015.46

Final Sur Total 353.36

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https://vacswb.smrt.com.sg/Estimation.aspx

TO APPLY
AFFECT

Job

Costing Type

3 Main

4 Main

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			ANTENNA, ELECTRICAL KEY	1	78.00	78.00	10.00	70.20	Replace	0	0	Not Give	X _{an}
Standard	Main			REAR BUMPER GROMMET SCREW	1	2.20	2.20	30.00	1.54	Replace	0	0	Not Give	X _{an}
Standard	Main			COVER, REAR FLOOR UNDER CENTER	1	249.10	249.10	30.00	174.37	Replace	0	0	Not Give	X _{an}
Standard	Main			COVER, REAR FLOOR UNDER, RH	1	189.20	189.20	30.00	132.44	Replace	0	0	Not Give	X _{an}
Standard	Main			COVER, REAR FLOOR UNDER, LH	1	261.60	261.60	30.00	183.12	Replace	0	0	Not Give	X _{an}
Standard	Main			END PANEL SUB-ASSY, BODY LOWER BACK	1	707.10	707.10	30.00	494.97	Replace	0	0	Not Give	X _{an}
Standard	Main			SEALANT SIKAFLEX	1	37.00	37.00	0.00	37.00	Replace	0	0	Not Give	X _{an}
Total Spare Part Cost									2,556.32	Surveyor Total				441.70
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)				20
Final Spare Part Cost									2,015.46	Final Sur Total				353.36

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR REAR PORTION	676.00	200	
Total:			676.00	200.00	

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 _{an}
3	Main	TO RESPRAY BUMPER BEAM	180.00	0	X _{an}
Total:			738.00	200.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0	X _{an}
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	0	X _{an}

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https://vacsweb.smrt.com.sg/Estimation.aspx

Remarks

No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0 <i>xan</i>	
4	Main	TO TEST AND REFIX REVERSE SENSOR SYSTEM	120.00	0 <i>xan</i>	
5	Main	TO REPLACE SUNDRY PARTS	100.00	0 <i>xan</i>	
6	Main	TO PROVIDE LABOUR & MATERIAL FOR ADVERTISEMENT STICKER(NET)	296.88	296.88	
Total:			796.88	296.88	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	2,015.46	353.36
Total Labour Cost	676.00	200.00
Total Spray Painting	738.00	200.00
Other	796.88	296.88
Overall Total	4,226.34	1,050.24
Lump Sum Repair Option	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lump Sum Total	4,250.00	1,050.00
Surveyor Approved Amount		1,050.00
No of Repair Days*	5	3
Remarks	-	lump sum repair / resurvey after repair

Surveyor Name

Rasul

Signature

Save

Clear

Survey Date

12/10/2022

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	07/10/2022 10:32 (SGT)
Reported by	Driver
Date of Accident	05/10/2022 21:21 (SGT)
Exact Location of Accident	Airport Blvd., Changi airport, Singapore
Additional Location Information	CHANGI AIRPORT T3 TAIXI QUEUE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5329P
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	CHRISTOPHER FOO SZE WOON
NRIC No	SXXXX824H
Date Of Birth	13/08/1971
Occupation	Outdoor

Date Of Driving Pass	11/05/1993
Driving experience	29 YEARS AND 5 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	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 STATIONARY ALONG CHANGI AIRPORT T3 TAXI QUEUE. SUDDENLY I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE SHC3426A (COMFORT) 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?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC3426A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Taxi
Vehicle Category	-
Name of Driver	-

Vehicle
Name

Accident

Number

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;

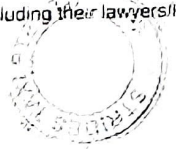
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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

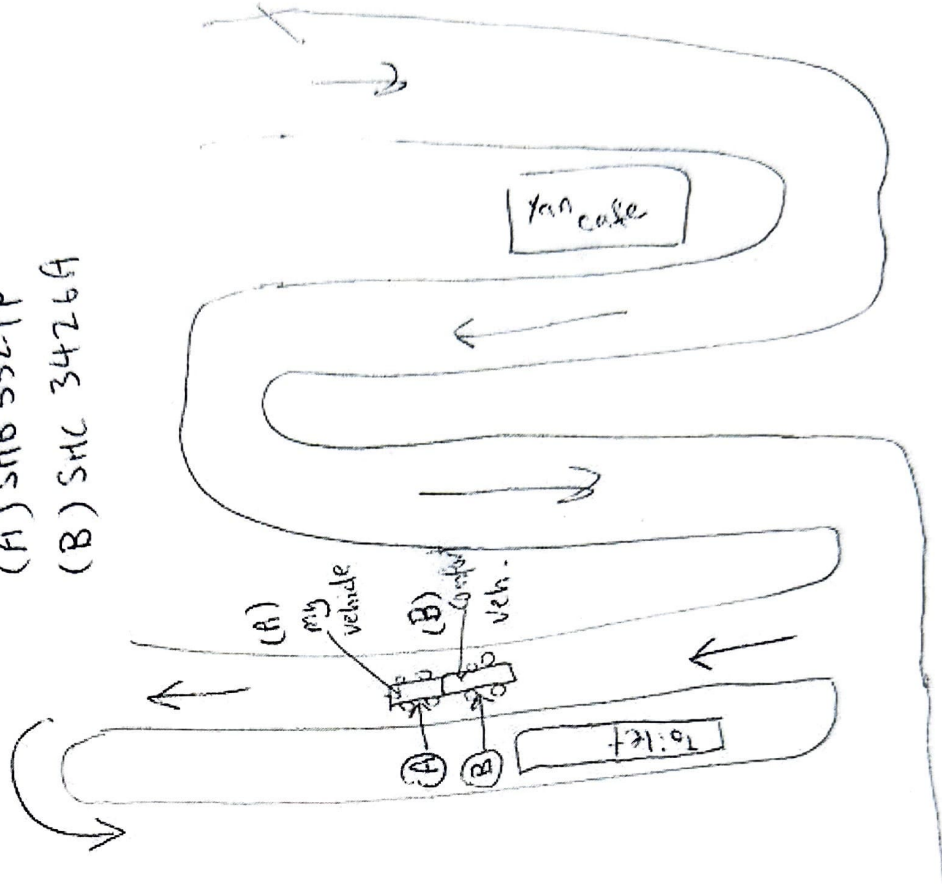
leg. 6th Oct 2022
Driver's Signature (if driver is not the policyholder) / Date & Time

lun 6.10.2022
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan

T3 Shelter
 Taxi pathway leading to
 T3 Taxi Stand.

(A) SHB 5329P
 (B) SHC 3426A



Empty lined area for additional notes or details.

Declaration

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

[Signature]
 Policyholder's Signature / Date & Time

[Signature] 6th Oct 2022
 Driver's Signature (if driver is not the policyholder) / Date & Time

[Signature] 6.10.2022
 Witnessed by Reporting Centre Personnel
 (Name as in NRICID card)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHB5329P
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Oct 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZR5099852
Chassis No.:	JTDKB3FU603573255
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	01 Nov 2017
First Registration Date:	01 Nov 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Oct 2025
PARF Rebate Amount:	\$3,750.00

COE Expiry Date:	31 Oct 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$33,596.00
COE Rebate Amount:	\$12,801.00
Total Rebate Amount:	\$16,551.00

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 13 Oct 2022

OK