



Case Details

Case Reference Number : TAX/10/22/2042
 Type of Repair : Accident Repair
 Vehicle Registration Number : SHC4958A

Company Type : Strides Taxi Pte Ltd
 Estimation ID : EST-19591-ID
 Assigned By : Taxi Claims Manager Team

Insurance Company Name : AIG Asia Pacific Insurance Pte Ltd
 Accident Date and Time : 11/10/2022 07:40 AM
 Vehicle Age(In Months) : 84

Documents / Photographs

[View Documents / Photographs](#)

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	SMRT Recommendation				Repair/ Replace	Surveyor Approval		Remarks	
						List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)		Surveyor Quantity	Surveyor Final Price(\$)		Repair/Replace
Standard	Main			BUMPER FRT	1	602.60	602.60	25.00	451.95	Replace	1	451.95	Replace	✓
Standard	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.80	48.00	25.00	36.00	Replace	10	36.00	Replace	✓
Standard	Main			BUMPER SUPPORT F/RH	1	86.20	86.20	25.00	64.65	Replace	0	0.00	Not Give	Xan
Standard	Main			BUMPER SUPPORT F/LH	1	86.20	86.20	25.00	64.65	Replace	0	0.00	Not Give	Xan
Standard	Main			BUMPER ENERGY ABSORBER FRT	1	97.60	97.60	25.00	73.20	Replace	0	0.00	Check	?
Standard	Main			BUMPER REINFORCEMENT FRT	1	567.90	567.90	25.00	425.92	Replace	0	0.00	Check	?
Standard	Main			ARM SUB-ASSY,FR BUMPER LH	1	284.00	284.00	25.00	213.00	Replace	0	0.00	Not Give	Xan
Standard	Main			ARM SUB-ASSY,FR BUMPER RH	1	284.00	284.00	25.00	213.00	Replace	0	0.00	Not Give	Xan
Standard	Main			DEFLECTOR, RADIATOR RH	1	94.30	94.30	25.00	70.73	Replace	0	0.00	Not Give	Xan
Standard	Main			DEFLECTOR, RADIATOR LH	1	86.90	86.90	25.00	65.18	Replace	0	0.00	Not Give	Xan
Standard	Main			BRACKET, FR BUMPER	1	126.10	126.10	25.00	94.57	Replace	0	0.00	Not Give	Xan
Standard	Main			NUMBER PLATE FRAME	1	25.00	25.00	0.00	25.00	Replace	1	25.00	Replace	✓
Standard	Main			NUMBER PLATE	1	35.00	35.00	0.00	35.00	Replace	1	35.00	Replace	✓
Standard	Main			COVER, FR BUMPER HOLE LH	1	21.40	21.40	25.00	16.05	Replace	0	0.00	Not Give	Xan

Total Spare Part Cost	6,683.45	Surveyor Total	1,898.31
Lump Sum Discount (%)	20.00	Lump Sum Dis (%)	20.00
Final Spare Part Cost	5,346.76	Final Sur Total	1,518.65

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			COVER, FR BUMPER HOLE RH	1	21.40	21.40	25.00	16.05	Replace	1	16.05	Replace	Sub
Standard	Main			BUMPER GRILLE SUB-ASSY,LOWER	1	389.90	389.90	25.00	292.42	Replace	1	292.42	Replace	Car
Standard	Main			FOG LAMP RH	1	335.60	335.60	10.00	302.04	Replace	0	0.00	Not Give	X11
Standard	Main			FOG LAMP LH	1	319.30	319.30	10.00	287.37	Replace	0	0.00	Not Give	X11
Standard	Main			EMBLEM FRONT	1	98.70	98.70	25.00	74.03	Replace	1	74.03	Replace	M13
Standard	Main			HOOD END PANEL SEAL	1	80.60	80.60	25.00	60.45	Replace	0	0.00	Not Give	X11
Standard	Main			COVER, RADIATOR	1	139.30	139.30	25.00	104.48	Replace	0	0.00	Not Give	X11
Standard	Main			GRILLE, RADIATOR	1	389.30	389.30	25.00	291.98	Replace	0	0.00	Check	?
Standard	Main			GRILLE, RADIATOR LOWER NO.2	1	118.30	118.30	25.00	88.73	Replace	0	0.00	Check	?
Standard	Main			BUMPER LIP FRT	1	182.70	182.70	25.00	137.02	Replace	0	0.00	Not Give	X11
Standard	Main			BUMPER FRT ABSORBER LOWER	1	159.30	159.30	25.00	119.48	Replace	0	0.00	Not Give	X11
Standard	Main			UNDER COVER CENTER	1	511.20	511.20	25.00	383.40	Replace	0	0.00	Not Give	X11
Standard	Main			HOOD PANEL	1	988.50	988.50	25.00	741.38	Replace	1	0.00	Repair	R
Standard	Main			HEAD LAMP LH	1	1,075.40	1,075.40	10.00	967.86	Replace	0	0.00	Not Give	X11
Standard	Main			HEAD LAMP RH	1	1,075.40	1,075.40	10.00	967.86	Replace	1	967.86	Replace	Out
Total Spare Part Cost									6,683.45			Surveyor Total	1,898.31	
Lump Sum Discount (%)									20.00			Lump Sum Dis (%)	20.00	
Final Spare Part Cost									5,346.76			Final Sur Total	1,518.65	

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT PORTION	676.00	400.00	
Total:			676.00	400.00	

Spray Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main				

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
2	Main	TO RESPRAY FRONT HOOD	378.00	200.00	
Total:			756.00	400.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO WASH AND VACUUM	60.00	0.00 <i>Xan</i>	
2	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	0.00 <i>Xan</i>	
3	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	0.00 <i>Xan</i>	
4	Main	TO REPLACE SUNDRY PARTS	100.00	0.00 <i>Xan</i>	
Total:			380.00	0.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	5,346.76	1,518.65
Total Labour Cost	676.00	400.00
Total Spray Painling	756.00	400.00
Other	380.00	0.00
Overall Total	7,158.76	2,318.65
Lump Sum Repair Option		<input checked="" type="checkbox"/>
Lump Sum Total	7,150.00	2,300.00
Surveyor Approved Amount		2,300.00
No of Repair Days*	5	4
Remarks	-	lump sum repair / resurvey after repair request for NBV
Surveyor Name		Rasul

Rasul

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

12/10/2022

Acknowledged by Repairer
Signature:
Date:

Survey 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	12/10/2022 14:08 (SGT)
Reported by	Driver
Date of Accident	11/10/2022 15:40 (SGT)
Exact Location of Accident	Near 523B Tampines Central 7, 523B, Singapore 528597
Additional Location Information	JUNCTION OF TAMPINES AVE 9 AND AVE 6
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC4958A
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	1798

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099115MFSH

DRIVER

Name of Driver	TAN YEW LEE
NRIC No	SXXXX992E
Date Of Birth	16/11/1970
Occupation	Outdoor

Date Of Driving Pass	08/02/1996
Driving experience	26 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	Auto-Svcs-TARC@smrt.com.sg
Address	1
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 - Cross Junction
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tampines North Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18007818999
Alt. Police Station Phone No	(Fax) +65-67838603
Police Station Address	Blk 461 Tampines Street 44 #01-56 Singapore 520461
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO.T/20221011/2085

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	SMP1898G
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN YEW LEE
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHC4958A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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.

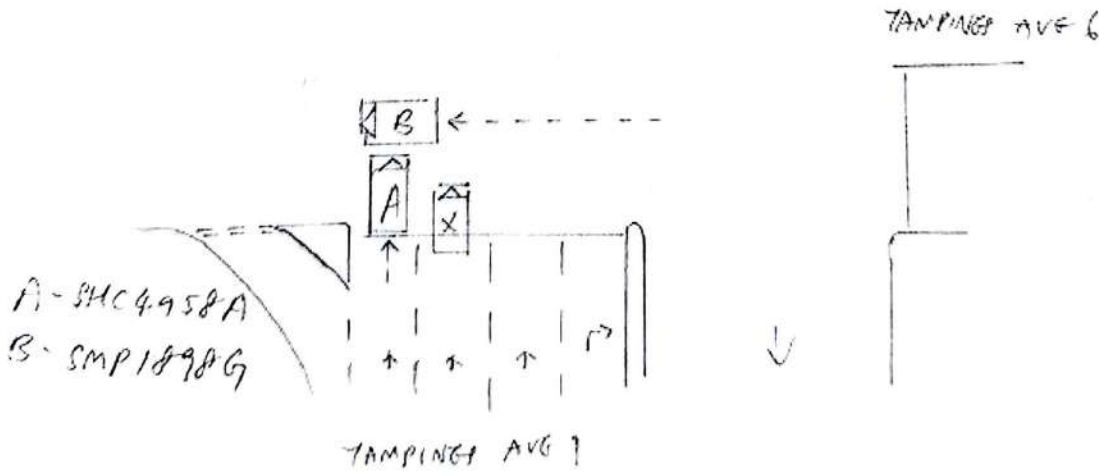


Policyholder's Signature / Date & Time

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

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

Sketch Plan



Describe Circumstances of the Accident

REFER TO POLICE REPORT

Declaration

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



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as on ICBC card)

Adh 12/10/2022

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	369K
Vehicle No.:	SHC4958A
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Oct 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2015
Engine No.:	2ZR6540632
Chassis No.:	JTDKN36U405766421
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$29,508.00
Original Registration Date:	16 Oct 2015
First Registration Date:	16 Oct 2015
Transfer Count:	0
Actual ARF Paid:	\$5,000.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Oct 2023
PARF Rebate Amount:	\$3,250.00

COE Expiry Date:	15 Oct 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$45,439.00
COE Rebate Amount:	\$5,710.00
Total Rebate Amount:	\$8,960.00

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