

(08/11/03) wef

REF:

CCB/CT122010382/Rpa3

2920

ASS. REC. BY:

ASSIGNMENT

From :

Date:

Estimated Cost:

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

To Inspect Vehicle No: SMB 1497D

at Workshop m/s SMRT

of 60, WOODLANDS DEPOT

Insured:

CT1

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 Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time Action / Instruction

Veh No:

SMB 1497D

Yr Regn:

2014 / OCT

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

Truck / Trailer or

Make:

MAN NL 320 F (A22)

c.c 10518

Colour

MULTI

A/C:

Insured / Std / NI / NA

Sp. Reading

502470

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WMAA22220E70U2232

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

275/70R22.5

R:

4 1

D/O

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

TOYO / YOKO or

Front

Rear

R/Bal.

8

mm

R/Bal.

8/8

mm

L/Bal.

8

mm

L/Bal.

8/8

mm

D.O.A.

14/10/22

D.O.I.

19/10/22

Survey held at

SMRT

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

N/S REAR

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

Date/Time, File Pass to?



: Prel. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

) S + RS \$

) Photos

) Others

TOTAL

Report Format :

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

SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757706
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672


Date Generated : 19/10/2022

User ID : GohKK2

Section A - Accident Details

Registration Number	SMB1497D
Case Reference Number	BUS/10/22/7016
Registration Date	13/10/2014
Company Type	SMRT Buses Ltd
Make	MAN
Model	MAN NL320F(A22)
Name of Driver	Khairul Fitri Bin Ariffin
Type of Accident	Side Swipe
Accident Date and Time	14/10/2022 4:35 PM
Accident Reported Date and Time	18/10/2022 11:48 AM
Is Surveyor Required?	Yes
Survey by	
Vehicle is Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle Issued?	No
Job Card Number	
Special Instruction to ARC, if any	SMB1497D - LEFT REAR PORTION SKX6480B (TP) - INSURED WITH
Prepared Date and Time	18/10/2022 3:54 PM
Chassis Number	WMAA22ZZ0E7002232
Mileage	
Work Shop	
Repair Completion Date and Time	

Section B - Summary of Repair Estimates

Summary of Repair Estimates		
	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Labour Cost	\$2,120.00	\$0.00
Total Spray Cost	\$1,048.00	\$0.00
Total Spare Part Cost	\$7,571.16	\$0.00
Total Other Cost	\$0.00	\$0.00
TOTAL COST	\$10,739.16	\$0.00
Lump Sum Total	\$10,750.00	\$0.00
Number of Repair Days	5.0	<i>2 days 3 days</i>
Prepared / Adjusted By	Kok Khoo Goh	
ARC / Surveyor Sign Off Date	18/10/2022 4:12 PM	
Signature		x
Remarks		

Section C - Quotation and Accident Invoice Details

Quotation Number		Invoice Number	
Quotation Date		Invoice Date	
Invoice Amount		Prepared Date	

SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63685592
Estimator Telephone Number : 68662623
Accident Reporting Number : 68662672

Date Generated : 19/10/2022

User ID : GohKK2

Section D - Details of Repair Estimates

Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
TO REMOVE & INSTALL ALL ABOVE ITEMS AND REPAIR OTHERS DAMAGED AFFECTED AREAS.	\$2,120.00	1060
Total Labour	\$2,120.00	

Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
PROVIDE LABOUR AND MATERIAL TO PUTTY AND RESPRAY ABOVE REPAIR ITEMS	\$1,048.00	878
Total Spray Painting & Panel Beating	\$1,048.00	

Part 3 - Other Costs - Accident and Accident Repair Related Expense

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
Total Other Costs		

Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
6010004	BODY LH	A01001-CW560	PANEL, SIDE: L10, W FRAME, FOR MAN A22 BUS	1.00	\$980.40	10.00	\$882.36	Replace	repair
6010005	BODY LH	A01001-CW561	PANEL, SIDE: L11, FOR MAN A22 BUS	1.00	\$1,092.50	10.00	\$983.25	Replace	bt ✓
6010315	BODY LH	S06006-CW576	PANEL, FRAME SIDE: L11, FOR MAN A22 BUS	1.00	\$1,610.00	10.00	\$1,449.00	Replace	bt ✓
6010317	Body	4000F06-HING732	HINGE: LH, SIDE FLAP, FOR MAN A22 BUS	2.00	\$181.20	10.00	\$326.16	Replace	bt ✓
6010318	Body	4000F06-HING733	HINGE: RH, SIDE FLAP, FOR MAN A22 BUS	2.00	\$181.20	10.00	\$326.16	Replace	bt ✓
6010316	Body	4001A06-LOCK2555	LOCK, CAM: SQUARE, 35 MM, FOR MAN A22 BUS	2.00	\$47.50	10.00	\$85.50	Replace	bt ✓
6010321	Body	S06006-CW558	BRACKET, GAS SPRING: FOR MAN A22 BUS	2.00	\$80.50	0.00	\$161.00	Replace	? X
6010296	Body	4000E04-RBB599	STOPPER, DOOR: C/W SCREW, FOR MAN A22 BUS	2.00	\$12.10	10.00	\$21.78	Replace	X
			SIDE PILLAR	1.00	\$1,462.50	10.00	\$1,316.25	Replace	repair
4006315	CONSUMABLE	Aktivator - 100	ACTIVATOR	1.00	\$80.00	0.00	\$80.00	Replace	na ✓
6010060	Body	F01001-CW271	COVER: REAR TAIL LAMP, LH, FOR MAN A22 BUS	1.00	\$974.70	10.00	\$877.23	Replace	repair
		51-08101-5204	Exhaust Elbow insulated	1.00	\$2,511.60	10.00	\$2,260.44	Replace	X
6010411			GAS SPRING 22N	2.00	\$94.90	10.00	\$170.82	Replace	? X
4006314			SEALANT SIKAFLEX	1.00	\$37.00	0.00	\$44.00	Replace	na ✓
4006313			PRIMER (SIKA 206 G+P)	1.00	\$80.00	0.00	\$80.00	Replace	na ✓
Total					\$9,426.10		\$9,463.95		

Added Spare Parts / Material Usage After Surveyor Signed off

Part Number	Portion	Stock Number	Part Name	Quantity	List Price \$	Discount (%)	Final Price (\$)	ARC Check	Surveyor Check
Total									

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:

RAH
HP 9000068

3 days

4/5

19/10/22 @ 1620

Res after repair

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	18/10/2022 14:44 (SGT)
Reported by	Both
Date of Accident	14/10/2022 14:35 (SGT)
Exact Location of Accident	Tan Kah Kee Stn, Singapore
Additional Location Information	Bt Timah Rd - bef BS: 41051 (Tan Kah Kee Stn)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMB1497D
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SMRT BUSES LTD
Company Reg No	1XXXXX292D
Email Address	Auto-Svcs-BARC@smrt.com.sg
Mobile Phone No	(Phone) +65-68662672
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Man
Model	Ng363f
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus
Transmission	Auto
CC	10518

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D22099124MFBP

DRIVER

Name of Driver	KHAIRUL FITRI BIN ARIFFIN
NRIC No	GXXXX881N
Date Of Birth	13/06/1981
Occupation	Outdoor

Date Of Driving Pass	05/09/2016
Driving experience	6 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	Auto-Svcs-BARC@smrt.com.sg
Address	60 WOODLANDS INDUSTRIAL PARK E4
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 MAKING A RIGHT TURN TOWARDS BUKIT TIMAH ROAD BUS STOP NO 41051 AND FILTERED FROM THE CENTRE LANE TO LEFT MOST LANE TO ENTER THE BUS STOP AHEAD WHEN SUDDENDLY I FELT AND IMPACT AT THE REAR OF MY BUS. I STOPPED MY VEHICLE BY ROADSIDE AND GOT DOWN TO CHECK ON MY BUS. MY BUS HAD SUSTAINED DAMAGES ON THE LEFT REAR PORTION. I SAW A PTE CAR STOPPED BEHIND MY BUS. THE PTE CAR (SKX6480B) HAD SUSTAINED DAMAGES ON THE FRONT RIGHT PORTION. THE PTE CAR HAD COLLIDED ONTO MY BUS WHILE I WAS TURNING RIGHT AT THE JUNCTION TOWARDS BUKIT TIMAH ROAD. THERE WERE NO INJURIES REPORTED.

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX6480B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour
Vehicle Category
Name of Driver
NRIC No
Contact Number
Address

Address complement
Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

-
Private car

LIN LIXUN

SXXXX992D

(Phone) +65-90040853

-

-

-

China Taiping Insurance (Singapore) Pte. Ltd.

-

-

-

: Pr
: Fin

SKETCH PLAN

SMB1497D

Bug/10/22/7016

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.



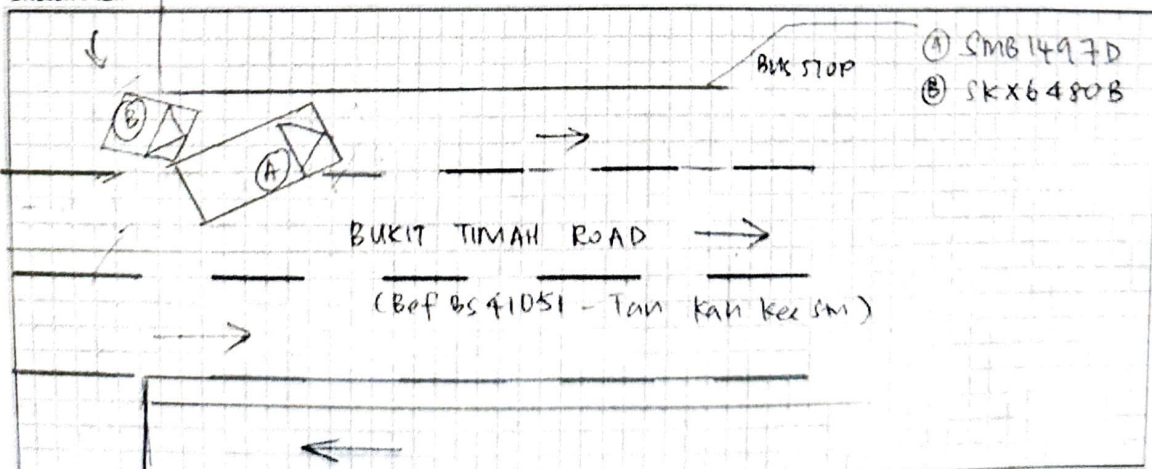
Policyholder's Signature / Date & Time

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

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



Sketch Plan



Describe Circumstance of the Accident

Lined area for describing the accident circumstances.

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

Handwritten signature of the driver.



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