

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD5964U**AAD2210-086**

Vehicle No.:

Chassis No.:

Co UEN:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration:

SHD5964U

JTDKB3FU003078551

200303878K

TOYOTA

PRIUS

20/10/2022

SLZ5973E/CHINA

19/12/2018

PART**LIST**

1	COVER, REAR BUMPER <i>distort</i>	\$	442.60	✓
1	REINFORCEMENT SUB-ASSY, REAR BUMPER <i>distort</i>	\$	332.70	✓
1	COVER, REAR BUMPER, LOWER <i>distort HH</i>	\$	15.40	X
1	GUARD, REAR BUMPER, CENTER <i>distort</i>	\$	576.30	✓
1	RETAINER, REAR BUMPER SIDE, RH <i>SH</i>	\$	117.70	X
1	RETAINER, REAR BUMPER SIDE, LH <i>SH</i>	\$	116.50	X
1	COVER, FLOOR UNDER, NO.1 LH <i>HH</i>	\$	175.10	X
1	COVER, FLOOR UNDER, NO.2 RH <i>HH</i>	\$	241.90	X
1	COVER, REAR FLOOR CTR <i>mondy broken</i>	\$	229.90	✓
1	COVER, DECK TRIM, REAR <i>HH</i>	\$	126.70	X
1	PANEL SUB-ASSY, BODY LOWER BACK <i>HH</i>	\$	650.30	X

TOTAL	\$	3,025.10
25%	\$	756.28
	\$	2,268.83

Special Nett

1SET	PARKING AID <i>HH</i>	\$	700.00	X
1SET	REAR BUMPER CLIP <i>HH</i>	\$	95.00	30/-
1	REAR BUMPER PROTECTOR <i>HH HH</i>	\$	180.00	X
1SET	REAR BUMPER RETAINER CLIP <i>HH</i>	\$	85.00	X
1	END PANEL TRIM CLIP <i>HH</i>	\$	65.00	X

TOTAL	\$	1,125.00
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TOTAL PARTS	\$	3,393.83
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LABOUR

Trans-cab Auto Services Pte Ltd**AAD2210-086**

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SHD5964U

To Remove And Refit Rear Big and Small W/Screen Glass To Facilitate Bodywork Repair.	\$	300.00	HH
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	380.00	HH
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	2,200.00 300/-	
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	380.00 HH	
To transfer of Tailgate fittings, attachments and perform water seepage test.	\$	180.00	HH
To remove and refit electrical wiring, battery and other necessary items to facilitate bodywork repair.	\$	480.00	HH
To transfer of Fender fittings, attachments and perform water seepage test.	\$	480.00	HH
To check steering geometry and computer wheel alignment	\$	220.00	HH
To Rust-Proofing and apply undercoat Of The Affected Areas.	\$	250.00 HH	
Putty And Spray Painting Of The Affected Portion.	\$	2,200.00 200/-	
To reinstall rear bumper parking sensor.	\$	170.00 40/-	
To Check Electrical Lighting Concerned.	\$	170.00	HH
To transfer of luggage floor panel fittings, attachment and perform water seepage test.	\$	380.00	HH

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AAD2210-086**SHD5964U**

To transfer of tire, rim and on wheel balancing. \$ 220.00 HH

To conduct and perform a comprehensive vehicle diagnostic check
and reset vehicle warning indicators.

\$ 380.00

TOTAL \$ 8,390.00**Over All Total \$ 11,783.83****(PART-BY-PART) Repair Days****25 DAYS**

26/10/2022 @ 1030w

HA Andri

2/Sum

2 dgs.

2KK Andri



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	21/10/2022 12:58 (SGT)
Reported by	Driver
Date of Accident	20/10/2022 13:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TOWARDS TUAS EXIT SLIP ROAD TO TOH TUCK AVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD5964U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Company Reg No	2XXXXX878K
Email Address	Claims@transcab.com.sg
Mobile Phone No	(Phone) +65-62876666
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	5DR HATCHBACK (AUTO)
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Taxi
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	VFX/P2413997

DRIVER

Name of Driver	ANDREW CHENG MAN WAI
NRIC No	SXXXX370H
Date Of Birth	04/10/1960
Occupation	Outdoor

Date Of Driving Pass	22/01/1992
Driving experience	30 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94894899
Alt. Phone Number	-
Email Address	Claims@transcab.com.sg
Address	HDB Jurong East, 287C Jurong East Street 21 #13-326
Address complement	-
Postcode	603287
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?	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	P1
Gender	Female

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 AT THE MENTIONED LOCATION JUST EXIT THE EXPRESSWAY AND WANTED TO FILTER TO TOH TUCK AVE. MY VEHICLE WAS STATIONARY TO GIVE WAY TO THE TRAFFIC ON MY RIGHT. SUDDENLY THIRD PARTY COLLIDED ONTO THE REAR OF MY VEHICLE. ONLY TWO VEHICLES WERE INVOLVED AND IM FEELING UNWELL WILL CONSULT DOCTOR.

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	WITH TRANSCAB

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLZ5973E
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** Vehicle Manufacturer	Fiat
Vehicle Model	Bravo
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Private car
Name of Driver	RAIHAN HAKIM BIN ABDUL KAHAR
NRIC No	SXXXX914G
Contact Number	(Phone) +65-96738791
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ANDREW CHENG MAN WAI
Gender	Male
Phone No	(Phone) +65-94894899
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHD5964U
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 Authorised 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. The 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.
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.



Witnessed By Reporting Officer
Ang Qi Hao, Victor
Witnessed by Reporting Centre
Personnel

Policyholder's Signature / Date &
Time

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

Sketch Plan

REFER TO ATTACHED ACCIDENT DIAGRAM

Describe Circumstances of the Accident

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Declaration

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

Policyholder's Signature / Date & Time

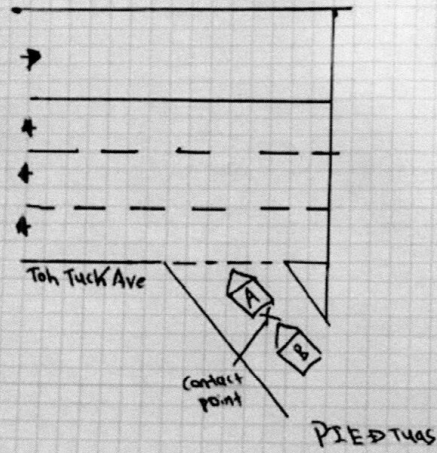
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed By Reporting Officer
Ang Qi Hao, Victor

Witnessed by Reporting Centre
Personnel

ACCIDENT DIAGRAM

Ver. 30042021



veh A: SHD 59644

veh B: SLZ 5973E

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
ANG QI HAO, VICTOR

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	878K
Vehicle Details	
Vehicle No.:	SHD5964U
Vehicle to be Exported:	Yes
Intended Deregistration Date:	21 Oct 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	2ZR2B92706
Chassis No.:	JTDKB3FU003078551
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,605.00
Original Registration Date:	19 Dec 2018
First Registration Date:	19 Dec 2018
Transfer Count:	0
Actual ARF Paid:	\$14,247.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Dec 2026
PARF Rebate Amount:	\$10,685.00
Intended COE Rebate Details	
COE Expiry Date:	18 Dec 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$22,057.00
COE Rebate Amount:	\$11,460.00
Total Rebate Amount:	\$22,145.00
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 21 Oct 2022

OK