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Kenneth

## TOTAL

## 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	28/03/2023 19:44 (SGT)
Reported by	Actual Driver
Date of Accident	28/03/2023 12:05 (SGT)
Exact Location of Accident	Boon Keng Rd, Singapore
Additional Location Information	JUNCTION OF KALLANG JUNCTION & BOON KENG ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF299D
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#### 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	TIEN AH TEE
NRIC No	SXXXX629J
Date Of Birth	19/04/1956
Occupation	Outdoor



Date Of Driving Pass	20/04/1976
Driving experience	46 YEARS AND 11 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	REILEF
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

ON 28/3/23 AT ABOUT 1205HRS. I WAS DRIVING ALONG KALLANG JUNCTION. WHEN I COMPLETED TURN INTO BOON KENG RD TRAVELLING WITHIN OWN LANE, SUDDENLY I FELT AN IMPACT FROM MY LEFT REAR PORTION AND SAW A VEHICLE (SMG6726J) ENCROACHED INTO MY LANE AND HIT ONTO THE LEFT REAR PORTION OF MY VEHICLE.

#### 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 LARGE

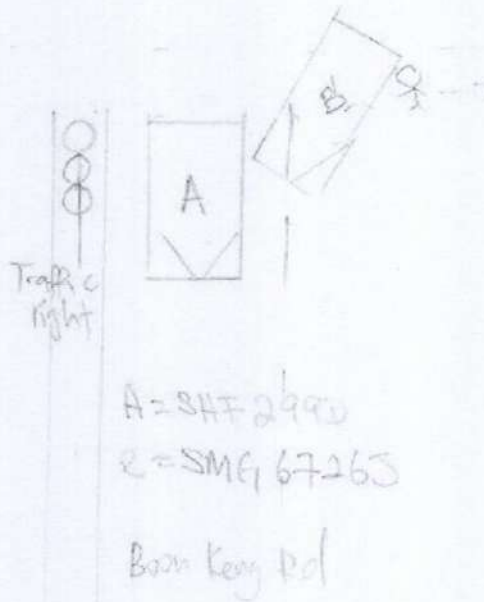
#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMG6726J
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)	-

Describe Circumstance of the Accident

Kallang Junction



Declaration

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



Policyholder's Signature / Date & Time

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

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

*Boon Keng Pol* 28/3/23

*A. 28/3/23*



## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

### 6. 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 purposes(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

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

Witnessed by Reporting Centre Personnel  
(Name as in NRICID card)

Sketch Plan

vJun2022

# 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 : 28/03/2023

User ID : munsan

## Section A - Accident Details

Registration Number	SHF299D
Case Reference Number	TAX/03/23/2065
Registration Date	14/12/17
Company Type	Strides Taxi Pte Ltd
Make	TOYOTA
Model	PRIUS4
Name of Driver	TIEN AH TEE
Type of Accident	Side Swipe
Accident Date and Time	28/3/23 12:05 PM
Accident Reported Date and Time	28/3/23 2:03 PM
Surveyor Required?	No
Survey by	
Vehicle Towed Back?	No
Towed Back Date and Time	
Replacement Vehicle issued?	No
Job Card Number	24118037
Special Instruction to ARC, if any	REAR LEFT
Prepared Date and Time	28/3/23 3:23 PM
Chassis Number	
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	\$1,352.00	\$0.00
Total Spray Cost	\$1,674.00	\$0.00
Total Spare Part Cost	\$5,665.81	\$0.00
Total Other Cost	\$1,060.00	\$0.00
<b>TOTAL COST</b>	<b>\$9,751.81</b>	<b>\$0.00</b>
Jump Sum Total	\$9,750.00	\$0.00
Number of Repair Days	10.0	
Prepared / Adjusted By	Boon Chew Tay	
ARC / Surveyor Sign Off Date	28/03/2023 3:45 PM	
Signature		
Remarks		

## Section C - Quotation and Accident Invoice Details

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

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:

NOT AUTHORIZED  
11/11/23



# SMRT Accident Vehicle Repair Estimates

SMRT Automotive Services Pte Ltd  
60 Woodlands Industrial Park E4, Singapore 757705  
FAX Number : 63885592  
Estimator Telephone Number : 68662623  
Accident Reporting Number : 68662672

Date Generated : 28/03/2023  
User ID : munsan

## Section D - Details of Repair Estimates

### Part 1 - Labour Works

Job Scope	Quotation from AR	Adjusted by Surveyor, if applicable
O REPAIR REAR PORTION LH	\$1,352.00 <i>700l</i>	
<b>total Labour</b>	<b>\$1,352.00</b>	

### Part 2 - Spray Painting & Panel Beating Related Works

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
O RESPRAY DOOR HANDLE	\$180.00 <i>X</i>	
O RESPRAY REAR BUMPER	\$378.00 <i>200l</i>	
O RESPRAY RIM	\$180.00 <i>X</i>	
O RESPRAY REAR FENDER LH	\$378.00 <i>200l</i>	
O RESPRAY ROCKER PANEL MOULDING	\$180.00 <i>X</i>	
O RESPRAY FRONT DOOR LH	\$378.00 <i>200l</i>	
<b>total Spray Painting &amp; Panel Beating</b>	<b>\$1,674.00</b>	

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

Job Scope	Quotation from ARC	Adjusted by Surveyor, if applicable
O WASH AND VACUUM	\$80.00 <i>na X</i>	
O CHECK WIRING AND SYSTEM FUNCTION	\$120.00 <i>20l</i>	
O APPLY RUST-PROOFING ON AFFECTED AREA	\$100.00 <i>60l</i>	
O DO WHEEL ALIGNMENT / TYRE BALANCING	\$120.00 <i>60l</i>	
O REMOVE AND REFIT TYRE	\$120.00 <i>20l</i>	
O TRANSFER DOOR MECHANISM	\$120.00 <i>60l</i>	
O TEST AND REFIX REVERSE SENSOR SYSTEM	\$120.00 <i>50l</i>	
O REMOVE AND REFIX UNDERCARRIAGE	\$200.00 <i>na X</i>	
O REPLACE SUNDRY PARTS	\$100.00 <i>na X</i>	
<b>total Other Costs</b>	<b>\$1,060.00</b>	

### Part 4 - Spare Parts / Material Usage

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		5215947913	COVER, RR BUMPER ASSY	1.00	\$478.90	25.00	\$359.17	Replace	<i>Repl cm ✓</i>
		5246247020	PAD, RR BUMPER, RH & LH, 2	2.00	\$4.30	25.00	\$6.45	Replace	<i>na ✓</i>
		5246247030	PAD, RR BUMPER, RH & LH, 1	2.00	\$4.30	25.00	\$6.45	Replace	<i>na ✓</i>
		5246247010	PAD, RR BUMPER, RH & LH, 3	2.00	\$4.30	25.00	\$6.45	Replace	<i>na ✓</i>
		5257647040	RETAINER, RR BUMPER, LH	1.00	\$127.40	25.00	\$95.55	Replace	<i>na X</i>
		5259247040	SEAL, RR BUMPER, LH	1.00	\$95.50	25.00	\$71.63	Replace	<i>na X</i>
		5216116010	CLIPS PIECE, FRT & RR BUMPER	10.00	\$4.80	25.00	\$36.00	Replace	<i>na ✓</i>
		5245347010	GUARD, RR BUMPER, LOWER	1.00	\$623.50	25.00	\$467.63	Replace	<i>na X</i>
		5256647900	FILLER, RR BUMPER, LH	1.00	\$168.60	25.00	\$126.45	Replace	<i>na X</i>
			SENSOR REVERSE	1.00	\$180.00	0.00	\$180.00	Replace	<i>na X</i>
		8156147151	LENS & BODY, REAR COMBINATION LAMP, LH	1.00	\$489.00	10.00	\$440.10	Replace	<i>na X</i>
		8159147010	LENS & BODY ASSY, RR BUMPER, LH	1.00	\$544.40	10.00	\$489.96	Replace	<i>na X</i>
		5839947030	COVER, REAR FLOOR UNDER, LH	1.00	\$261.60	25.00	\$196.20	Replace	<i>na X</i>
		6700447210	PANEL SUB-ASSY, REAR DOOR, LH	1.00	\$1,401.70	25.00	\$1,051.28	Replace	<i>na ✓</i>

**LKK Auto Consultants hence notify the Repairer of the following:**

- To reserve damaged parts during survey
- To display damaged parts during survey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary details must be reserved and is subject to final approval from Insurance Company

Authorised by Repairer  
Signature  
Date



**SMRT Accident Vehicle Repair Estimates**

<b>SMRT Automotive Services Pte Ltd</b>
60 Woodlands Industrial Park E4, Singapore 757705
FAX Number : 63685592
Estimator Telephone Number : 68662523
Accident Reporting Number : 88662672

Date Generated : 25/03/2023

User ID : munsan

**Part 4 - Spare Parts / Material Usage**

Part Number	Portion	Stock Number	Part Name	Quantity	List Price (\$)	Discount (%)	Final Price (\$)	Estimator Approved	Surveyor Approved
		7586047900	MOULDING ASSY, BODY ROCKER PANEL, LH	1.00	\$649.10	25.00	\$486.83	Replace	pn x
		8180247180	PANEL SUB-ASSY, FENDER REAR LH	1.00	\$943.10	25.00	\$707.33	Replace	Bj ~
		6563847060	LINER, REAR FENDER, LH	1.00	\$151.10	25.00	\$113.32	Replace	pn x
		4261147450	WHEEL, DISC	1.00	\$2,036.30	25.00	\$1,527.23	Replace	nd ✓
			TYRE	1.00	\$126.74	0.00	\$126.74	Replace	pn x
		4245075020	HUB & BEARING ASSY WITH SPEED SENSOR, REAR AXLE, RH & LH	1.00	\$644.10	10.00	\$579.69	Replace	pn x
			STICKER PETROL ONLY	1.00	\$7.80	0.00	\$7.80	Replace	pn x
total					\$8,946.54		\$7,082.26		

**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									