

JOSEPH GAY & COMPANY

ADVOCATES & SOLICITORS

UEN 53131273M

GST Reg No. : M90367664A

GAY THUAN EWE JOSEPH MICHAEL
SEO YONG CHERN

151 CHIN SWEE ROAD
#02-16 MANHATTAN HOUSE
SINGAPORE 169876
TEL: 65355878 (3 LINES)
FAX: 65338286
EMAIL : mail@joegayco.com
OFFICE HOURS:
9 AM TO 6 PM (MON – FRI)

YOUR REF:

DATE: 13th April 2023

OUR REF: 46/2023/ap

WITHOUT PREJUDICE

Accident Claims Section
Police Logistics Department
Police Headquarters
28 Irrawaddy Road
New Phoenix Park
Singapore 329560

BY CERTIFICATE OF POSTING

Dear Sirs

TRANS-CAB SERVICES PTE LTD
2 ANG MO KIO STREET 63 SINGAPORE 569111

1) We are instructed by the above named to claim damages against you in connection with a road traffic accident on 20th December 2022 along Queensway, involving our clients' vehicle registration number SHB 7567E and vehicle registration number YQ 3055L driven by your insured driver/your driver/you at the material time.

2) We are instructed that the accident was caused by the negligence of your insured driver/your driver/you in the driving and/or management of your vehicle YQ 3055L. As a result of the accident, our clients' vehicle was damaged and our client have been put to loss and expense, particulars of which are as follows: -

I.	Cost of repairs inclusive of GST (if any)	\$1,296.00
II.	Loss of hire for 2 days @ \$96.30 a day	\$ 192.60
III.	Costs contribution inclusive of GST	\$ 756.00
IV.	Disbursements inclusive of GST, if any: -	
	a) Survey fee	\$374.00
	b) Coloured photocopying charges (10 x \$1.00)	\$ 10.80

e) Xerox charges, postage and other incidentals	\$ 54.00	\$ 438.80
Total		<u>\$2,683.40</u>

3) A copy of each of the supporting documents is enclosed.

<u>S/No</u>	<u>Date</u>	<u>Description of document</u>
a)	20-12-22	Singapore Accident Statement of SHB 7567E
b)	20-12-22	Enquire PARF/Coe Rebate for Registered Vehicle
c)	22-03-23	Letter from Trans-Cab Services Pte Ltd
d)	20-12-22	Letter from Trans-Cab Services Pte Ltd reflecting the period of repair
e)	27-01-23	Repair bill
f)	01-02-23	Survey invoice and report together with 24 coloured photographs of our clients' motor taxi

4) For the single joint expert, we propose Mr Victor Png of Appraisal VP Pte Ltd.

5) Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

6) Please note that you should send to us an acknowledgment of receipt within 14 days of your receipt of this letter, failing which our clients will have no alternative but to commence proceedings against your insured driver/your driver/you without any further notice to you.

7) Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all the relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully



encs

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	20/12/2022 23:41 (SGT)
Reported by	Driver
Date of Accident	20/12/2022 09:05 (SGT)
Exact Location of Accident	Near 501 Stirling Rd, Singapore 148951
Additional Location Information	QUEENSWAY ROAD NEAR TO SPF
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB7567E
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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	(Office) +65-62876666

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	PRIUS 5 DR HATCHBACK (AUTO)
Variant	-
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 - Claiming third party
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	LAW GHEE HIONG
NRIC No	SXXXX157I
Date Of Birth	05/08/1971
Occupation	Outdoor

Date Of Driving Pass	10/01/1997
Driving experience	25 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93381117
Alt. Phone Number	-
Email Address	claims@transcab.com.sg
Address	751 Choa Chu Kang north 5
Address complement	#09-185
Postcode	680751
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	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)	3
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	Male

PASSENGER 2

Name	P2
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ3055L
Vehicle Manufacturer	Mercedes
Vehicle Model	ATEGO 1624A 4X4 3260 (AUTO,ABS)
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government
Name of Driver	MARVIN LIM JUN JIE
NRIC No	SXXXX741E
Contact Number	(Phone) +65-98524917
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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 be permitted to collect, use, disclose and/or process my personal data/personal information set out in the [] 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 insurers who have insured vehicle(s) involved in the accident (all insurers who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law firm/law firms, the Ministry of Transport of Singapore and any relevant government agency/authority (such as the police) for the purposes of:
(i) processing, handling and/or dealing with my claim, including the settlement of the claim and any necessary investigations relating to the claim;
(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/envelop 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 the accident and the Insurers' law firm/law firms, may be 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/ may not be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law firm/law firms) which may be sited outside of Singapore, for one or more of the above Purposes.

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Witnessed By Reporting Officer
Wong Jun Keat

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time 20/12/2022

Witnessed By Reporting Centre
Personal

Sketch Plan

REFER TO ATTACHED ACCIDENT DIAGRAM

SKETCH PLAN #2

ACCIDENT DIAGRAM

A - DRIVER

B - WITNESS

Continuing

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Police Officer's Signature / Date & Time

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

Witnessed By Reporting Officer
Witness / Date & Time
Witnessed by Reporting Officer
Personnel

Describe Circumstances of the Accident

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true to the best of our knowledge.

Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer
Wong Jun Keat
Witnessed by Reporting Centre
Personnel





IMAGES #9



IMAGES #10



IMAGES #11



IMAGES #12







**SINGAPORE
POLICE FORCE**



1505271226 9228

Police Station Of Origin
Ang Mo Kio North N.P.C.
51 Ang Mo Kio Avenue 8 SINGAPORE
568784
Tel No. 1000 4949888

Report No. 700210200028

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/02/2022 13:12	File Report No. 020210200092	Station Diary No. 28
Information of Person/s		
Name of Informant LAW GHIE HONG	Address 499 BLK 241 CHUA CHU KANG NORTH B 920-125 SINGAPORE 680711	
ID Type / ID No. NRIC NO: 871271571	Contact No. Home/Office Mobile: 93381117	
Nationality SINGAPORE CITIZEN		
Sex: Male	Age: 31	Date of Birth 05/04/1991
Race: Chinese	Type of Informant Party	
Occupation: Taxi driver	Language: English	Institution / School Name
	Driving Licence Information: Class	Date of Expiry

General Information of the Accident

Type of Accident	Non-Injury Government Vehicle	Drink Driver No	Date/Time of Accident 09/02/2022 09:05	Type of Location Straight Road
Location QUEENSWAY				
Weather Clear	Point of Impact City	Road Speed Limit		
Traffic Flow One Way	Traffic Control Traffic Light - Working	Traffic Volume Heavy		
Type of Collision Between Moving Vehicles - Side Swipe - Same Direction				Anyone Conveyed by ambulance No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition / No of Passenger
SHE7917E	Car	TOYOTA	PRIUS 5DR HATCHBACK 1.8 (AUTO)	Red	Slightly Damaged 2
YQ365SL	SPF 50C Vehicle	MERCEDES BENZ	ATEGO 1624A 4X4 3200 (AUTO ABS)	White	No Damage 0



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 3 SINGAPORE
569784
Tel No: 1800-4949009



Report No: T/A021202504

CONTINUATION OF REPORT


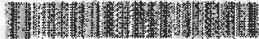

Defendant Person involved			
Any Bloodstain Involved: Nil			
No. of Photographs Taken: Nil		Date of Photograph Taken: Nil	
Name	LAY CHIE HONG	ID No.	S2727151
Related Vehicle	Nil	Contact No.	93381117
Height/Weight	Nil	Class of Driving License & Expiry Date	Class: Nil Date of Expiry: Nil
Date of Birth	Nil	Date of Discharge	Nil
No. of Days granted Medical Leave	Nil	Degree of Injury	Nil
Witness			
Name	Marvin Lim Jun Jie	ID No.	S0838741E
Related Vehicle	Nil	Contact No.	98024917
Height/Weight	Nil	Class of Driving License & Expiry Date	Class: Nil Date of Expiry: Nil
Date of Birth	Nil	Date of Discharge	Nil
No. of Days granted Medical Leave	Nil	Degree of Injury	Nil

Witness Details

On the 21/02/2025 at 08:00 hrs, I was performing law enforcement duties during vehicle testing and car park number SPP 500 along Chuan Joo Road, near the SPP Special Operations Compound building. The SPP 500 vehicle bearing with car plate number YL 2551 was driving next to me.

While driving, I was locked at the side mirror and the 500 vehicle was very near to me subsequently, I heard a bang sound. I stopped at the entrance near SPP 500 building and made a check and discovered my vehicle was damaged.

Traffic police was at scene and advised me to lodge a police report.

 SINGAPORE POLICE FORCE		 1 2022 2222 2222
Point Station Of Origin: Ang Mo Kio North N P C 41 Ang Mo Kio Avenue 8 SINGAPORE 568704 Tel No: 1800-4540999		Report No: 100221222222
CONTINUATION OF REPORT		
Sketch Plan Informant is not able to provide sketch plan		
<p>IMPORTANT: Please attach a copy of your vehicle's insurance certificate to this report. If you don't have the certificate with you, please attach a copy of the insurance policy to this report. Please attach the report number to the documents.</p>		
Signature of Officer Recording This Report SGT J KENNEDY YANGLI	Signature of Informant 	
Signature of Interpreter Not applicable	Date Time 25/12/2022 13:12	
Officer in Charge Of Case TP103A SH STAFF SGT MUHAMMAD NOOR BIN ABULL RAHMAN Contact No: 69670219	Classification Of Case	



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SA1D22CK0004 Vehicle Registration No: 5H87567E
 Name (as shown in NRIC): LAW GHEE HIONG NRIC/FIN/Passport No: SXXXX1571
 (* Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 93381117
 Email Address: _____
 Date of Accident: 20/12/2022 Time of Accident: 09:05 (SGT)
 Place of Accident: QUEENSWAY ROAD NEAR TO SPF
 Insurance Company: AXA Insurance Pte Ltd

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

AMEND: ATTACHED ACCIDENT PHOTOS

Policyholder / Driver's Signature
 Date:

Reporting Centre Personnel's Signature
 Name: P. S. Nee
 NRIC/FIN No.:
 Date: 21/12/2022

AXA Insurance Pte Ltd

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	878K

Vehicle Details

Vehicle No.:	SHB7567E
Vehicle to be Exported:	Yes
Intended Deregistration Date:	20 Dec 2022
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS SDR HATCHBACK (AUTO)
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	2ZR2C38641
Chassis No.:	JTDKB3FU103082303
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,605.00
Original Registration Date:	18 Jul 2019
First Registration Date:	18 Jul 2019
Transfer Count:	0
Actual ARF Paid:	\$14,247.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jul 2027
PARF Rebate Amount:	\$10,685.00

Intended COE Rebate Details

COE Expiry Date:	17 Jul 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$24,410.00
COE Rebate Amount:	\$13,954.00
Total Rebate Amount:	\$24,639.00

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 20 Dec 2022

OK

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6287 7764

Co./GST Reg. No. 200303878K

22 March, 2023

To Whom It May Concern

Dear Sir / Madam,

Accident on 20/12/22 09:05 AM at QUEENSWAY ROAD

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHB7567E. The taxi was hired to LAW GHEE HIONG a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$96.3 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan
General Manager

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6287 7764

Co./GST Reg. No. 200303878K

20-12-2022

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
Accident No.	AAD2212-100	Accident Date 20-12-2022
1/10/2023 10:10	1/11/2023 17:00	SHB7567E

Yours Faithfully,

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666**Fax:** 6287 7764**Co. Reg. No.:** 201019626G**GST Reg. No.:** 201019626G**Tax Invoice / Debit Note**

TO: Trans-cab Services Pte Ltd (Claims) NO. 2 ANG MO KIO STREET 63 569111 Singapore ATTENTION:	INVOICE NO. : INV2301-094 DATE : 27. January 2023 REFERENCE NO : AAD2212-100 TERMS : DUE DATE : 27. January 2023 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	Repair - SHB7567E;201222 -LS23	1	1,296.00	1,296.00

Total SGD Excl. GST : 1,200.00
8% GST : 96.00
Total SGD Incl. GST : 1,296.00

**** ONE THOUSAND TWO HUNDRED NINETY SIX SGD ONLY ****

1) Please make payment through internet banking with our bank details below:

- **DBS Bank Limited** Current A/C : **003-912894-0**

- PayNow UEN No. : **201019626G**

(Please indicate invoice number and notify funds transfer details to acc.pay@transcab.com.sg)

2) We reserve the right to charge interest @ 1.5% per month on overdue invoice.

3) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.

THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE



APPRAISAL VP PTE LTD

Company Reg No: 201403586G

50 PlayFair Road Noel Building #04-01 Singapore 367995 | Tel: +65 98511914 | Email: mail@vpappraisal.com

TAX INVOICE

Tax Invoice No	VP 2023-00049
Tax Invoice Date	1-Feb-23
Terms	30 Days
Due Date	28-Feb-23

Trans-Cab Auto Services Pte Ltd
No. 2 Ang Mo Kio St 63
Singapore 569111

Claim Type : **THIRD PARTY**
Your Reference No. : **PLS ADVSIED**
Survey Vehicle No : **SHB7567E**

Date of Accident : **20/12/2022**
Report Date : **01/02/2023**
Submit Date : **01/02/2023**
Our Reference No : **VPA-2023-00019**

Description	Amount (S\$)
Survey Fee	\$374.00
	SGD \$374.00

Cheque payment is preferred and should be made to

Name : **Appraisal VP Pte Ltd**
Mailing Address : **50 PlayFair Road Noel Building #04-01 Singapore 367995**

Alternatively, Giro or EFT payment should be made to:

Beneficiary Name : **Appraisal VP Pte Ltd**
Beneficiary Account No : **288 901151 0**
Beneficiary Company Address : **50 PlayFair Road Noel Building #04-01 Singapore 367995**

Bank : **DBS**
Bank Code : **7171**
Bank Address : **12 Marina Boulevard, DBS Asia Central, Marina Bay Financial Center Tower 3, Singapore 018982**
Branch Name : **DBS, MBFC**
Branch Code : **288**
Swift Code : **DBSSSGSG**

**** Fees are due upon receipt of invoices as per our Terms and Conditions.**



APPRAISAL VP PTE LTD

Company Reg No: 201403586G

50 playFair Road #04-01 Noel Building Singapore 367995 | Tel: +65 98511914 | Email: mail@vpappraisal.com

VEHICLE DAMAGE ASSESSMENT REPORT

To: Trans cab Auto Service Pte Ltd
No.2 Ang Mo Kio Street 63
Singapore 569111

REFERENCES

Appraisal VP Ref No	: VPA-2023-00019	Date of Report	: 01/02/2023
Claim Type	: THIRD PARTY CLAIM	Date of Request	: 10/01/2023
Third party vehicle	: SHB7567E	Date of Accident	: 20/12/2022
		Date of Inspection	: 10/01/2023

DAMAGED VEHICAL PARTICULARS

Registration Plate No	: SHB7567E	Engine Modification	: NIL
Model / Make	: TOYOTA PRIUS	Pre-accident damage	: NIL
Colour	: RED	General Condition	: Good
Manufacturing Year	: 18/07/2019	General Paint Work	: Good
Engine No	: 2ZR2C38641	Steering	: Serviceable
Engine Capacity	: 1798 CC	Handbrake	: Serviceable
Chassis No	: JTDKB3FU103082303	Footbrake	: Serviceable
Odometer No	: 309493		
Transmission	: AUTO		

TYRES CONDITION

Front Right	: 5 MM	Rear Left	: 5 MM
Make	: TOURING	Make	: TOURING
Size	: 195/65 R15	Size	: 195/65 R15
Front Left	: 5 MM	Rear Right	: 5 MM
Make	: TOURING	Make	: TOURING
Size	: 195/65 R15	Size	: 195/65 R15

VEHICAL REPAIR COST

<u>Descriptions</u>	<u>Repairer (S\$)</u>	<u>Difference (S\$)</u>	<u>Adjuster (S\$)</u>
Parts	6,462.70	6,164.08	298.63
Labour	3,590.00	2,310.00	1,280.00
Calculated Cost (S\$) :	10,052.70	8,474.08	1,578.63

Recommended Lump sum Repair Cost (S\$)	: 1,200.00
Estimate Repair Duration	: 3 Days
Survey Inspection At	: Trans-cab Auto Services Pte Ltd
Survey Inspection Address	: No.2 Ang Mo Kio Street 63 Singapore 569111

Disclaimer:

This survey was conducted by Appraisal VP Pte Ltd without prejudice basis and we do not authorized repair. Report by Appraisal VP Pte Ltd is deemed as confidential and provided for the use of clients and appointed agent. We have inspected thoroughly each and every item on the repairer's estimate against the actual damages found on the vehical. All findings and recommendations are listed accordingly and final decision of settlement to your goodselves. Any disclosure or publications of it or parts thereof shall be the responsibility of such person. No liability shall be attached to Appraisal VP Pte Ltd therefore.



APPRAISAL VP PTE LTD

Company Reg No: 201403586G

50 playFair Road #04-01 Noel Bulding Singapore 367995 | Tel: +65 98511914 | Email: mail@vpappraisal.com

ANNEX A

VEHICLE DAMAGE ASSESSMENT REPORT

Reference No : VPA-2023-00019

Vehicle No : SHB7567E

Workshop : Trans-cab Auto Services Pte Ltd

List of Damaged Parts

S/No	Qty	Description	Condition	Repairer's Amount (\$\$)	Adjuster's Amount (\$\$)
1	1	Panel sub-assy, rear door, lh	Repair	1294.90	0.00
2	1	Frame sub-assy, rear door outside handle, lh	Not necessary	193.50	0.00
3	1	Cover, rear door outside handle, lh	Not necessary	17.90	0.00
4	1	Hinge assy, rear door, lower lh	Not necessary	87.10	0.00
5	1	Hinge assy, rear door, upper lh	Not necessary	98.90	0.00
6	1	Tape, black out, no.1 rear lh	Not necessary	21.90	0.00
7	1	Tape, black out, no.2 rear lh	Not necessary	34.90	0.00
8	1	Tape, black out, no.3 rear lh	Not necessary	15.40	0.00
9	1	Motor assy, power window regulator, rear lh	Not necessary	926.00	0.00
10	1	Regulator sub-assy, rear door window, lh	Not necessary	206.70	0.00
11	1	Rim	Not necessary	1900.10	0.00
12	1	Hubcap	Crack	211.50	211.50
13	1	Panel sub-assy, quarter, lh	Repair	871.50	0.00
14	1	Liner, rear wheel house, lh	Not necessary	139.80	0.00
15	1	Cover, rear bumper	Repair	442.60	0.00
Sub Total				6,462.70	211.50
Less 25%					52.88
Total				6,462.70	158.63

Special Item

S/No	Qty	Description	Condition	Repairer's Amount (\$\$)	Adjuster's Amount (\$\$)
1	1	Fender clip	Not necessary	65.00	0.00
2	1	Fender liner clip	Not necessary	65.00	0.00
3	1	Tyre	Not necessary	350.00	0.00
4	1	Door weatherstrip clip	Not necessary	65.00	0.00
5	1	Rear door sticker tel. No	Necessary	100.00	60.00
6	1	Rear door advertisement	Necessary	200.00	80.00
Sub Total				845.00	140.00
Total				845.00	140.00

FINAL TOTAL	6,462.70	298.63
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APPRAISAL VP PTE LTD

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ANNEX B

VEHICLE DAMAGE ASSESSMENT REPORT

Reference No : **VPA-2023-00019**

Vehicle No : **SHB7567E**

Workshop : **Trans-cab Auto Services Pte Ltd**

Labour Details

S/No	Description	Repairer's Amount (\$\$)	Adjuster's Amount (\$\$)
1	To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	380.00	0.00
2	Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	1,400.00	600.00
3	Putty and spray painting of the affected portion.	1,400.00	600.00
4	To rust-proofing and apply undercoat of the affected areas.	240.00	80.00
5	To check electrical lighting concerned.	170.00	0.00
Total Labour		3,590.00	1,280.00

ANNEX C

Repair Cost

S/No	Description	Repairer's Amount (\$\$)	Adjuster's Amount (\$\$)
1	Total Part Cost	6,462.70	298.63
2	Total Repair and Labour Cost	3,590.00	1,280.00
Total Repair Cost		10,052.70	1,578.63

Adjusted Repair Cost

\$1,200.00



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VEHICLE DAMAGE ASSESSMENT REPORT

Reference No : **VPA-2023-00019**
Vehicle No : **SHB7567E**

ACCIDENT BRIEF

From documents sighted, the Insured's vehicle and Third Party's vehicle were involved in side swipe collision
On site survey inspection revealed that the damage noted are consistent with the accident as reported.
Damage at rear fender lh, rear door lh, rear tyre/cap lh and etc

ADVICE

Trans-cab Auto Services Pte Ltd submitted the estimate report cost of \$10,052.70, we have adjusted the repair cost to \$1,578.63. We recommend the repair cost on a Lump sum Basis of \$1,200.00

The repairs would require a period of 03 working days.

We are pleased to submit our inspection survey report and photographs for your kind attention.
All survey and inspection work was carried out to the best of our ability, knowledge and experience.

Victor Png
Appraiser
Appraisal VP Pte Ltd

Disclaimer:

This survey was conducted by Appraisal VP Pte Ltd without prejudice basis and we do not authorized repair. Report by Appraisal VP Pte Ltd is deemed as confidential and provided for the use of clients and appointed agent. We have inspected thoroughly each and every item on the repairer's estimate against the actual damages found on the vehicle. All findings and recommendations are listed accordingly and final decision of settlement to your good selves. Any disclosure or publications of it or parts thereof shall be the responsibility of such person. No liability shall be attached to Appraisal VP Pte Ltd therefore.





