

ASS. REC. BY:

REF:

C721

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

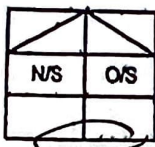
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Soon:

Consistent? : Yes or No

Est. Repairs:

10 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SCT 7108P

Yr Regn:

11, 17

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

Truck / Trailer or

Make:

Toy / Harrier

C.C.

1998

Colour

M.D. Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

145710

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTEKB3GH 20J000975

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

235/55R18

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

7

mm

R/Bal.

9

mm

L/Bal.

7

mm

L/Bal.

9

mm

D.O.A.

12/6/24

D.O.I.

14/6/2024

Survey held at

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

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. SI

Fees

Others

Report Format :

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

TOTAL

Cheng Hoe Motor Pte Ltd

Bik 1019, Yishun Industrial Park A #01-374/382, Singapore 768761
 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg
 GST:201001158E RCB NO:201001158E

SCJ7108P
 TP/China

M/S : CHINA TAIPING INSURANCE (S) PTE LTD
 3 ANSON ROAD
 16-00 SPRINGLEAF TOWER
 SINGAPORE 079909

TEL: 63896111 FAX: 62221033

ATTN: Motor Claim Department

WS Ref: TP/CHINA

Claim Type: Third Party

Accident Date: 12/06/2024

TP Veh Reg No: SJW3340J

Claim No: ES2400499

Estimate No: ES2400499/YISHUN

Date: 14 Jun 2024

Policy No: 23-MP005572-R01

Veh Reg No: SCJ7108P

Make/Model: TOYOTA TOYOTA
 HARRIER G GRADE

Chassis No: JTEKB3GH20J000975

Engine No: 8ARZ099968

Reg. Date: 30/11/2017

Not Authorised

1/10/24

Money After Paim

today

Estimate Repair Cost to Vehicle No : SCJ7108P

Description	U/Price	Quantity	Cost	Amount
			SS	SS
Cost Plus				
1 REAR BUMPER	280.00	1 PC	280.00	✓
2 REAR BUMPER SPONGE	65.00	1 PC	65.00	✓
3 REAR BUMPER LOWER SKIRT	180.00	1 PC	180.00	✓
4 REAR BUMPER REFLECTOR	35.00	2 PC	70.00	?
5 REAR BUMPER SIDE RETAINER	50.00	2 PC	100.00	✓
6 REAR BUMPER CLIP	2.00	6 PC	12.00	✓
7 REVERSE SENSOR	180.00	2 PC	360.00	✓
8 REAR TAILGATE	620.00	1 PC	620.00	✓
9 TAILGATE INNER LOCK	320.00	1 PC	320.00	✓
10 TAILGATE INNER RUBBER	150.00	1 PC	150.00	✓
11 TAILGATE EMBLEM 'HARRIER'	50.00	1 PC	50.00	✓
12 TAILGATE EMBLEM 'TURBO'	55.00	1 PC	55.00	✓
13 REAR PANEL	380.00	1 PC	380.00	✓
14 REAR PANEL INNER GARNISH	165.00	1 PC	165.00	✓
15 REAR SPARE TYRE COMPARTMENT	490.00	1 PC	490.00	✓
16 REAR SPARE TYRE COMPARTMENT TOP SPONGE	130.00	1 PC	130.00	✓
17 REAR SPARE TYRE HOLDER LOCK	45.00	1 PC	45.00	✓
18 REAR SPARE TYRE COMPARTMENT LH TOOL BOX	280.00	1 PC	280.00	✓
19 REAR SPARE TYRE COMPARTMENT RH TOOL BOX	230.00	1 PC	230.00	✓
20 REAR BALANCING	450.00	1 PC	450.00	✓
21 REAR EXHAUST PIPE	380.00	1 PC	380.00	✓
22 REAR EXHAUST PIPE HOLDER	40.00	1 PC	40.00	?
23 REAR SMART KEY SENSOR	75.00	1 PC	75.00	?
			5,107.00	
	Add 10%		510.70	5,617.70

Special Net				
24 REAR SPARE TYRE PANEL TOP COAT	120.00	1 PC	120.00	90% ✓
25 REAR WINDSCREEN GLASS MOULDING	120.00	1 PC	120.00	✓
26 REAR WINDSCREEN GLASS SEALANT	40.00	1 PC	40.00	✓
				280.00

Labour				
27 REMOVE AND REFIX REAR WINDSCREEN GLASS	100.00	1 LA	100.00	✓

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ATTN: Motor Claim Department

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Claim Type: Third Party

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TP Veh Reg No: SJW3340J

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HARRIER G GRADE

Chassis No: JTEKB3GH20J000975

Engine No: 8ARZ099968

Reg. Date: 30/11/2017

Estimate Repair Cost to Vehicle No : SCJ7108P

Description	U/Price	Quantity	Cost	Amount
			<u>S\$</u>	<u>S\$</u>
28 REMOVE & REFIX REAR BUMPER ASSY, TAILLAMPS, TAILGATE, REAR SPOILER, REAR WIPER ASSY; TO CUTTING, WELDING & RENEW REAR SPARE TYRE COMPARTMENT; KNOCKING & REPAIR REAR FENDERS & REAR SPARE TYRE COMPARTMENT, REINFORCEMENT & REAR CENTRE FLOORBOARD PANEL & REALIGN	1,600.00	1 LA	1,600.00	13001
29 REMOVE & REFIX REAR SEAT, CARPET, GARNISH ETC	120.00	1 LA	120.00	1001
30 REMOVE & REFIX REAR EXHAUST & CHECK SYSTEM	80.00	1 LA	80.00	601
31 REMOVE & REFIX REAR UNDERCARRIAGE	250.00	1 LA	250.00	2001
32 PUTTY & RESPRAY ON REAR CENTRE FLOORBOARD, REAR END PANEL, REAR SPARE TYRE COMPARTMENT, TAILGATE, REAR BUMPER, REAR BOTH FENDERS	1,300.00	1 LA	1,300.00	12001
33 REMOVE & REFIX REAR CAMERA, IN CAR CCTV RECORDER, SMART KEY SENSOR, REVERSE SENSOR & RESET SYSTEM	80.00	1 LA	80.00	601
34 RUSTPROOFING	90.00	1 LA	90.00	✓
				3,620.00

Total S\$ 9,517.70

Add GST @ 9% 856.59

Total Amount payable S\$ 10,374.29

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary items must be resurveyed and
is subject to approval from Insurance Company

Acknowledged by: [Signature]

Signature:

Date:

For Cheng Hoe Motor Pte Ltd

AUTHORISED SIGNATURE

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 First Submission	13/06/2024 11:43 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	12/06/2024 13:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TRAFFIC JUNCTION OF YISHUN AVE 1 & SEMBAWANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCJ7108P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	OOI SWEE MING
NRIC No	SXXXX734I
Email Address	albert.seeho@gmail.com
Mobile Phone No	(Phone) +65-96660628
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	23-MP005572-R01

DRIVER

Name of Driver	OOI SWEE MING
NRIC No	SXXXX734I
Date Of Birth	29/08/1947
Occupation	Indoor

Describe Circumstances of the Accident

** NOTE PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14 DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. PLS check your policy for more information.

() Claim Own Policy (☒) Claim Third party () Reporting Only

() Claim OD/ TP at other workshop ()

Sketch Plan

A: SCJ 7108P
(alone)

B: SJW 3340J

Vehicle No: SCJ 7108P (TOKIO)

Date & Time: 12/06/24 @ 1330 (clear day)

Traffic turn amber; i slow down to stop before the junction.
Next moment, felt a great impact from the back and caused my car to surge forward. Upon alighting, i then realised motor car SJW 3340J have come from behind and collided onto the rear portion of my car.

PLS: I felt discomfort in my back on this morning, will seek for medical treatment later on.

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 in NRIC/ID card) (YS)