ASS. REC. BY: Kenneth | REF: MSG1

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Accord

of 2410

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.

N/S	O/S

Bal. or Market Value: @ 41K

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 01 days Res.: Yes or No

Lum Sum: 1-B.I % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLB 7984U Yr Regn: 04 16

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Toy Harrier (4) c.c 1986

Colour M. Maroon A/C: Insured / Std / NI / NA

Sp.Reading 184060 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZSU60 - 007089

Gen. Cohd: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi: 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.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm

D.O.A. 19/5/24 D.O.I. 30/9/2024

Survey held at _____

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: _____

$ - RS. _____ SI

Parking _____

Others _____

TOTAL _____

Report Format :

Lump Sum / I.B.I: ($ _____)

ACCORD AUTO SERVICES PTE LTD

Not Authorised Running After Repairs 1day

10 Ang Mo Kio Industrial Park 2A
#03-11 AMK Autopoint Singapore 568047
Tel: 6481 9518 / 6481 9517 Fax: 6481 9516 email: claims@mycarworkshop.com.sg

ESTIMATE 3RD PARTY

MSIG INSURANCE (SINGAPORE) PTE LTD
ATTN: ACCIDENT CLAIMS DEPARTMENT

FIRST REGISTRATION: 22.04.2016

DATE :	18.06.2024
VEHICLE NO :	SLB7964U
VEH MAKE/MODEL :	TOYOTA HARRIER
YOM :	2015
CHASSIS NO :	ZSU600070891
DATE OF ACCIDENT :	19.05.2024

NO	QTY	DESCRIPTION	AMOUNT $	
		LIST PRICE:-		
1	1	FRONT GRILLE ASSY	$ 911.00	X
2	1	FRONT BUMPER	$ 934.00	X
3	1	FRONT BUMPER SIDE RETAINER LH	$ 143.20	X
4	1	FRONT BUMPER SIDE RETAINER RH	$ 143.20	X
5	1	FRONT BUMPER LOWER GRILLE	$ 369.20	X
6	1	FRONT BUMPER LOWER LIP	$ 402.70	X
7	2	TOWING COVER	$ 68.60	X
8	1	FRONT LH HEADLAMP	$ 2,196.50	X
9	1	FRONT LH HEADLAMP LOWER BRACKET	$ 87.10	X
10	1	FRONT RH HEADLAMP	$ 2,196.50	X
11	1	FRONT RH HEADLAMP LOWER BRACKET	$ 87.10	X
12	1	FRONT REINFORCEMENT BAR	$ 644.20	X
13	1	FRONT LOCK BRACE PANEL/BRACKET	$ 311.80	X
14	1	FRONT RADIATOR TOP GARNISH	$ 448.50	X
15	1	FRONT SUPPORT PANEL	$ 1,243.90	X
16	1	AIRCON CONDENSOR	$ 2,368.10	X
17	1	RADIATOR	$ 3,394.10	X
18	1	NUMBER PLATE GARNISH	$ NIL	X
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				

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:

TOTAL - LIST ITEM	**$**	**16,179.70**
25%	**$**	**4,044.93**
TOTAL	**$**	**12,134.78**

LIST PRICE:-

ACCORD AUTO SERVICES PTE LTD

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#03-11 AMK Autopoint Singapore 568047
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VEH MAKE/MODEL :	TOYOTA HARRIER
YOM :	2015
CHASSIS NO :	ZSU600070891
DATE OF ACCIDENT :	19.05.2024

		SPECIAL NETT ITEMs:-			
1	SET	FRONT BUMPER CLIPS	$	50.00	X
2	2 SET	FRONT FENDER INNER SHIELD CLIPS	$	50.00	X
3	SET	FRONT NUMBER PLATE WITH HOLDER	$	50.00	455
4	SET	FRONT RADIATOR TOP GARNISH CLIPS	$	20.00	X
5					
6					
		Total - SN Item	**$**	**170.00**	
		Labour Charges:-			
1		SPRAY PAINT ON ALL AFFECTED AREA	$	1,000.00	220
2		LABOUR REMOVE/REFIX ACCIDENT DAMAGE PARTS TO KNOCK, JACK, CUT WELD AND REALIGN ACCIDENT AFFECTED AREA	$	1,000.00	50
3		TO CHECK WIRING SYSTEM	$	100.00	X
		TO APPLY ANTI RUST TREATMENT	$	120.00	X
4		TO REMOVE/REFIX/REPLACE RADIATOR COWLING ASSY, AIRCON CONDENSOR (PIPING, HOSE, TOP UP AIRCON GAS, REFILL COOLANT & ETC	$	350.00	X
5					
6					
7					
		Total - L/C	**$**	**2,570.00**	
		Sub-Total	**$**	**14,874.78**	
		9% GST	**$**	**1,338.73**	
		Total	**$**	**16,213.50**	

SA19245K0004-01 / ACCORD AUTO SERVICES PTE LTD[568047]
ENTRY DATE & TIME: 20/05/2024 18:45 (SGT)
SUBMITTED BY: Admin
VERSION: 2 (18/06/2024 16:18 (SGT))

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 witholding 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	20/05/2024 18:45 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	19/05/2024 18:11 (SGT)
Exact Location of Accident	60 Airport Blvd., Singapore Changi Airport (SIN), Singapore 819643
Additional Location Information	CHNAGI AIRPORT CARPARK B2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB7964U

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM KUONG HIN
NRIC No	SXXXX241D
Email Address	KHBLUE7@YAHOO.COM
Mobile Phone No	(Phone) +65-97316521
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
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	Private car
Transmission	Auto
CC	2000

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2001511538-01

DRIVER

Name of Driver	LIM KUONG HIN
NRIC No	SXXXX241D
Date Of Birth	14/04/1965
Occupation	Outdoor