

ASS. REC. BY:

REF: A161

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Optima

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

100m

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \$198k

IDAC Accident Report: _____ Consistent?: Yes or No

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

Est. Repairs: 03 days Res.: Yes or No

Lum Sum: 1.8.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGW 61114 Yr Regn: 12, 23

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

Truck / Trailer or A)

Make: Testa Model 3 C.C. _____

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

Sp. Reading: 10207 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LRW3F7FS4RL022833

Gen. Cohd: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: 235/45R18

R: _____

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 9 mm R/Bal. 9 mm

L/Bal. 9 mm L/Bal. 9 mm

D.O.A. 8/19/24 D.O.I. 10/19/2024

Survey held at _____

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

O/S Frt

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

Date / Time

Action / Instruction

: Prell. Report

: Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

Transport by: _____

S - RS. SI _____

TOTAL

Date: 9-9-2024
Vehicle No: SGW6111U
Model: Tesla Model 3
Chassis: LRW3F7FS4RC022833
Reg. Year: 11.12.2023

Not Authored
Repairing Bumper
3 days

Third Party Insurer: AIG
Third Party Veh No: SNL3513M
Date of Accident: 8/9/2024
Estimator: Loong
Surveyor:

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$	
1	FRONT BUMPER	1		<i>CM</i> \$695.04	✓
2	FRONT RH BUMPER RETAINER	1		<i>DIT</i> \$7.09	✓
3	FRONT RH BUMPER SIDE SUPPORT BRACKET	1		\$11.28	?
4	FRONT BUMPER ENERGY ABSORBER	1		<i>PN</i> \$21.34	X
5	FRONT BUMPER REINFORCEMENT	1		<i>R</i> \$372.34	X
6	FRONT RH BUMPER REINFORCEMENT BRACKET	1		<i>R</i> \$49.64	X
7	FRONT BUMPER LOWER REINFORCEMENT	1		<i>R</i> \$49.64	X
8	FRONT RH BUMPER LOWER REINFORCEMENT BRACKET	1		\$29.90	?
9	FRONT BUMPER LOWER GRILLE COVER	1		\$91.01	?
10	FRONT RADIATOR SUPPORT PANEL	1		\$157.21	?
11	FRONT RH RADIATOR SUPPORT PANEL OUTER BRACKET	1		\$7.09	?
12	FRONT BUMPER LOWER COVER	1		<i>DIT</i> \$182.03	✓
13	FRONT RH HEADLAMP	1		<i>CM</i> \$1,580.39	✓
14	FRONT RH FENDER LINER	1		\$106.73	?
15	FRONT RH KNUCKLE ARM	1		<i>PN</i> \$463.36	X
16	FRONT RH KNUCKLE HUB + BEARING	1		<i>PN</i> \$233.64	X
17	FRONT RH LOWER ARM - STRAIGHT	1		<i>PN</i> \$212.65	X
18	FRONT RH LOWER ARM - CURVED	1		<i>PN</i> \$212.65	X
19	FRONT RH UPPER ARM	1		<i>PN</i> \$105.91	X
20	FRONT RH STEERING TIE ROD END	1		<i>PN</i> \$121.49	X
21	FRONT PEDESTRIAN PROTECTION SENSOR	1		<i>PN</i> \$46.04	X
22	RADIATOR	1		<i>PN</i> \$79.43	X
23	RADIATOR FAN COWLING COMPLETE	1		<i>PN</i> \$84.11	X
24	FRONT HOOD T LOGO	1		<i>NN</i> \$41.37	X
25	FRONT HOOD	1		REPAIR	
26	FRONT RH FENDER PANEL	1		REPAIR	
SUB TOTAL				\$4,961.38	
LESS 10%				-\$496.14	
PARTS TOTAL				\$4,465.24	

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$	
1	FRONT BUMPER CLIPS	1		<i>PN</i> \$55.00	✓
2	FRONT BUMPER RIVETS	1		<i>PN</i> \$50.00	✓
3	FRONT FENDER LINER CLIPS	1		<i>PN</i> \$50.00	✓
4	FRONT BUMPER UNDER COVER CLIPS	1		<i>PN</i> \$50.00	✓
5	RADIATOR COOLANT	1		<i>PN</i> \$250.00	X

Head office

6 Kung Chong Road Singapore 159143
Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

Branch

9A Serangoon North Ave 5 Singapore 654500
Tel: (+65) 6484 9919 | Fax: (+65) 6481 1993

Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind. Park 2A #01-06 Singapore 668047
Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011



Date:	9-9-2024	Third Party Insurer:	AIG
Vehicle No:	SGW6111U	Third Party Veh No:	SNL3513M
Model:	Tesla Model 3	Date of Accident:	8/9/2024
Chassis:	LRW3F7FS4RC022833	Estimator:	Loong
Reg.Year:	11.12.2023	Surveyor:	

		S/N TOTAL	\$455.00

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST FRONT ACCIDENT AREAS & ETC.	\$700.00	<i>250l</i>
LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT FRONT BUMPER, FRONT BONNET, FRONT RH FENDER, ETC	\$800.00	<i>400l</i>
TO READJUST AND REALIGN HEADLAMP AIM	\$100.00	<i>20l</i>
TO REMOVE AND REFIT RADIATOR AND OTHER NECESSARY ITEMS TO ENABLE REPAIR	\$200.00	<i>na X</i>
TO TUFF KOTE & UNDERSEAL MATERIALS.	\$150.00	<i>na X</i>
TO DIAGNOSIS FAULT CODE & RESET MEMORY.	\$250.00	<i>7</i>
TO CHECK WIRING & ELECTRICAL SYSTEM.	\$100.00	<i>20l</i>
TO CONDUCT TYRE BALANCING AND WHEEL ALIGNMENT	\$150.00	<i>na X</i>
TO REMOVE AND REFIT FRONT UNDERCARRIAGE PARTS TO ENABLE BODYWORK REPAIR	\$300.00	<i>na X</i>
LABOUR TOTAL	\$2,750.00	

TOTAL **\$7,670.24**

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 First Submission 09/09/2024 16:42 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 08/09/2024 16:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information 358 BEDOK NORTH ST 3 CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGW6111U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JEREMY TANAVIT FAN JINTAI
NRIC No SXXXX723A
Email Address JEREMYTANAVIT@HOTMAIL.COM
Mobile Phone No (Phone) +65-97399966
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Tesla
Model MODEL 3 RWD
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 1999
Vehicle Fuel -
First Registration Date -
Chassis no -
Effective Date/Time of Ownership -

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd
Policy Number / Cover Note Number SD23V15671/VPS/R00

DRIVER

Name of Driver	JEREMY TANAVIT FAN JINTAI
NRIC No	SXXXX723A
Date Of Birth	23/03/1989
Occupation	Indoor
Driving Pass Date	07/05/2010
Driving License Pass Class	3A
Driving License Validity	Valid
Driving experience	14 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97399966
Alt. Phone Number	-
Email Address	JEREMYTANAVIT@HOTMAIL.COM
Address	10 FLORA ROAD
Address complement	#03-07
Postcode	509729
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collided into Parked Vehicle
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)	0
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

REFER TO ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNL3513M
Vehicle Manufacturer	-

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 reputate 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.

Policyholder's Signature / Date & Time

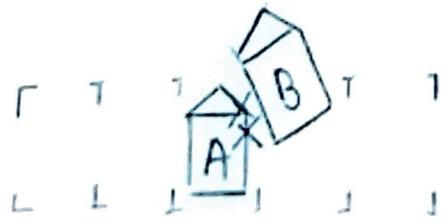
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan

A: SGW6111U
 B: SNL3513M
 358 Bedok North ST3
 Carpark.



Describe Circumstances of the Accident

DATE: 8/9/24

LOCATION: 358 BEDOK NORTH ST 3 CARPARK

TIME: 16:30 - 16:45

My Vehicle Tesla Model 3 was parked in the Carpark Lot number 31.
After buying my food and returning to my car, two bystanders approach me
to inform me my car was hit by the car which was park next to me.
The two witness name John Olivero (9666 0965) and Hakim (9675 6393)
The driver who hit my car was waiting for me, Low Yew Kiat
S(0069853A)

My Vehicle no. SGW 611U

Third Party Vehicle no. SNL 3513M

*KINDLY TAKE NOTE THAT YOU HAVE 14 DAYS FROM DATE OF ACCIDENT TO CONVERT TO OWN DAMAGE CLAIM

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

