

ASS. REC. BY:

REF:

SMO1

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

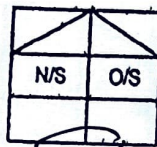
Excess:

(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 Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No:

SLZ12866

Yr Regn:

07, 17

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

Truck / Trailer or

Make:

NIS Pulsar

C.C.

1199

Colour

Red

A/C:

Insured / Std / NI / NA

Sp. Reading

103117

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

VSKDDAC 1340098582

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/50R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

R/Bal.

9

mm

Rear

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

18/9/24

D.O.I.

18/9/2024

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, File Pass to?



: Prel. Report

1)

Date/Time, File Return to?



: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

) S - RS. SI

), F. Invs

), Others

Report Format :

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

TOTAL



Ventures Auto Pte Ltd
1 Sin Ming Industrial Sector C
#01-117, Singapore 575 636
Reg: 202143430K
HP: 8323 6336

Vehicle Number : SLZ1286G
Vehicle Model : NISSAN PULSAR
Accident Date : 14.09.2024
Original Reg Date : 07.07.2017

Not Authorised
1/1 day &
Running After Repair
4-5 day

Date : 16.09.2024
Chassis : VSKDDAC13U0098582
TP Ins. : SOMPO

ESTIMATE

S/n	Parts Description	QTY	Unit price	List Price	
1	REAR BUMPER <i>Buc 1 cm</i>	1	\$ 1,657.20	\$ 1,657.20	N ✓
2	REAR BUMPER INNER SIDE GARNISH	2	\$ 108.00	\$ 216.00	N 7
3	REAR BUMPER SIDE RETAINER <i>SL</i>	2	\$ 95.20	\$ 190.40	N X
4	REAR BUMPER REINFORCEMENT	1	\$ 574.00	\$ 574.00	N 7
5	REAR BUMPER SPONGE	1	\$ 268.00	\$ 268.00	N 7
6	REAR FENDER INNER TRIMS <i>SL</i>	2	\$ 685.00	\$ 1,370.00	N X
7	REAR FENDER INNER COWLING <i>SL</i>	2	\$ 489.00	\$ 978.00	N X
8	TAIL LAMPS <i>SL</i>	2	\$ 680.00	\$ 1,360.00	N X
9	TAILGATE	1	\$ <i>R</i> 4,487.30	\$ 4,487.30	N X
10	TAILGATE LOGO	1	\$ <i>SL</i> 95.00	\$ 95.00	N ✓
12	TAILGATE LOCK DETECTOR	1	\$ <i>SL</i> 198.00	\$ 198.00	N X
13	TAILGATE INNER LOCK	1	\$ <i>R</i> 235.00	\$ 235.00	N X
14	TAILGATE WEATHER STRIP	1	\$ 186.00	\$ 186.00	N 7
15	TAILGATE INNER TRIM BOARD	1	\$ <i>SL</i> 602.00	\$ 602.00	N X
16	TAILGATE LOCK CATCHER	1	\$ <i>R</i> 163.00	\$ 163.00	N X
17	TAILGATE WINDSCREEN C/W MOULDING	1	\$ <i>SL</i> 1,098.00	\$ 1,098.00	N X
18	REVERSE CAMERA	1	\$ <i>SL</i> 750.00	\$ 750.00	N X
19	REAR END PANEL	1	\$ 843.30	\$ 843.30	N 7
20	REAR END PANEL TOP GARNISH	1	\$ 275.00	\$ 275.00	N 7
21	REAR EXHAUST PIPE	1	\$ <i>R</i> 1,107.90	\$ 1,107.90	N X
22	REAR EXHAUST INSULATOR	1	\$ <i>SL</i> 230.00	\$ 230.00	N X
23	REAR EXHAUST MOUNTING	2	\$ <i>SL</i> 25.00	\$ 50.00	N X
				\$ 16,934.10	
Less 10%				\$ 1,693.41	
				\$ 15,240.69	

C/F \$ 15,240.69



Vehicle No : SLZ1286G

B/F

\$ 15,240.69

SPECIAL NETTS ITEM

S/n	Parts Description	QTY	Unit price	List Price		
24	Rear Number Plate W/Holder	1	\$ 120.00	\$ <i>Per</i> 120.00	SN	X
25	Rear Bumper Clips	1	\$ 60.00	\$ <i>nn</i> 60.00	SN	✓
26	Tailgate Windscreen Sealant	1	\$ 150.00	\$ <i>nn</i> 150.00	SN	X
27	TAILGATE WINDSCREEN INNER SEAL	1	\$ 120.00	\$ <i>nn</i> 120.00	SN	X
28	TAILGATE INNER TRIM BOARD CLIPS	1	\$ 60.00	\$ <i>nn</i> 60.00	SN	✓
29	REAR BUMPER CARBON FIBRE STICKER (SPECIAL)	1	\$ 280.00	\$ <i>CM</i> 280.00	SN	✓
30	TAILLAMPS CLIPS (SET)	2	\$ <i>nn</i> 50.00	\$ <i>Per</i> 100.00	SN	X
31	REAR FENDER INNER TRIM CLIPS (SET)	2	\$ 60.00	\$ <i>nn</i> 120.00	SN	X
32	REVERSE SENSOR	1	\$ 300.00	\$ <i>Per</i> 300.00	SN	200sn
33	REAR END PANEL TOP GARNISH CLIPS (SET)	1	\$ 60.00	\$ <i>nn</i> 60.00	SN	X
34	REAR END PANEL INSULATION SEAL	1	\$ 150.00	\$ <i>nn</i> 150.00	SN	X

\$ 1,520.00

LABOUR CHARGE

PANEL BEATING, REMOVAL AND REPLACING PARTS	\$ 1,500.00	7
TO SPRAY PAINT AFFECTED AREA	\$ 1,500.00	400d
TO PERFORM LIGHTING & WIRING CHECK	\$ 150.00	20d
TO APPLY ANTI-RUST & TUFF KOTE	\$ 150.00	7
REMOVE AND INSTALL REAR WINDSCREEN	\$ <i>nn</i> 150.00	X
REMOVE, INSTALL AND CHECK REVERSE SENSOR FUCTION	\$ 150.00	50d
TO CONDUCT WATER LEAKAGE TEST	\$ <i>nn</i> 150.00	X
TO TRANSFER TAILGATE PARTS	\$ <i>nn</i> 120.00	X
TO REMOVE AND INSTALL REAR EXHAUST.	\$ <i>nn</i> 150.00	X

Total : \$ 20,780.69

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 16/09/2024 12:25 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 14/09/2024 12:00 (SGT)
Exact Location of Accident Punggol, Aft Punggol Rd, TPE, Singapore
Additional Location Information TPE (CHANGI) BEFORE KPE EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ1286G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIM PEI YING
NRIC No SXXXX139E
Email Address limpeiyngnvtps@gmail.com
Mobile Phone No (Phone) +65-91395355
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Pulsar
Variant SALOON
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 Private car
Transmission Auto
CC 1199
Vehicle Fuel -
First Registration Date -
Chassis no -
Effective Date/Time of Ownership -

INSURANCE COMPANY

Name of Insurance Company Etiqa Insurance Pte Ltd
Policy Number / Cover Note Number MA034975

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 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 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.

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.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

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

Sketch Plan

Changi

TPE (Changi)

KPE exit

A-55LE1286G
B-SNA8073R