

ASS. REC. BY:

REF: C121

Kenneth

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s Toy Luck

of 7788

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

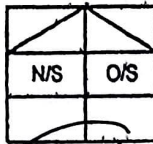
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: B 147K

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Est. Repairs: 4-5 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: SNM 8715J Yr Regn: 10, 23

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

Truck / Trailer or \_\_\_\_\_

Make: Toy Yaris c.c. 1490

Colour: Blue AC: Insured / Std / NI / NA

Sp. Reading: 21407 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JTDKB AB3X01007788

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/65R16

R: \_\_\_\_\_

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

TOYO / YOKO or \_\_\_\_\_

Front R/Bal: 8 mm

L/Bal: 8 mm

D.O.A. 25/9/24

D.O.I. 2/10/2024

Survey held at \_\_\_\_\_

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

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

: Prell. Report

: Final Report

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee:

Transport/Tr

Add Fee:  : Site Insp (\$ \_\_\_\_\_)

: Interview (\$ \_\_\_\_\_)

: Tech Invs (\$ \_\_\_\_\_)

: Weekend (\$ \_\_\_\_\_)

S - RS. \$ \_\_\_\_\_

Fl. 105

Others

Report Format :

Imp Sum / I.B.I: (\$ \_\_\_\_\_)

TOTAL



# TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

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M/S : MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PT  
 1 GATEWAY DRIVE #15-08  
 WESTGATE TOWER  
 SINGAPORE 608531

TEL :  
 ATTN : ACCOUNTS DEPT

FAX : *Not Available*  
*Repair 4-5 days*

## ESTIMATE

NO : QUOT202409-000086(00)  
 DATE : 01/10/2024  
 POLICY NO : SP2003907937  
 VEH REG NO : **SNM8715J**  
 MAKE/MODEL : TOYOTA YARIS CROSS HYBRID  
 ACTIVE (AT) (2WD)  
 CHASSIS NO : JTDKBAB3X01007788  
 ENGINE NO : M15AY803212  
 REG. DATE : 2023

YOUR REF NO : GBJ417E  
 CLAIM TYPE : THIRD PARTY  
 TP INS. CO. : CHINA TAIPING INSURANCE (SINGAPORE) PTE  
 ACCIDENT DATE : 25/09/2024  
 TP VEH REG NO : GBJ417E

### Estimate Repair Cost to Vehicle No : SNM8715J

Description	Quantity	Unit Price	Amount
		S\$	S\$
<b>LIST PRICE</b>			
1 Tailgate	1	1,938.90	1,938.90 ✓
2 Tailgate 'YARIS CROSS' emblem	1	64.10	64.10 ✓
3 Tailgate 'HYBRID' emblem	1	75.00	75.00 ✓
4 Tailgate lock	1	599.65	599.65 X
5 Tailgate weatherstrip	1	456.00	456.00 ?
6 Rear end panel	1	949.60	949.60 ?
7 Rear end panel top garnish	1	267.50	267.50 ?
8 Rear bumper	1	627.30	627.30 ✓
9 Rear bumper lower garnish	1	678.20	678.20 ✓
10 Rear bumper sensor	2	591.80	1,183.60 X
11 Rear bumper sensor seal	4	55.60	222.40 ?
12 Rear bumper clips	6.20	14.84	93.00 ✓
			7,155.25
		Less 25%	1,788.79
			5,366.46
<b>SPECIAL NET</b>			
13 Rear windscreen sealant	1	60.00	60.00 ✓
			60.00
<b>LABOUR</b>			
14 To remove & refix rear windscreen	1	150.00	150.00 120l
15 To transfer damaged tailgate interior parts to new tailgate	1	120.00	120.00 60l
16 To remove & refit rear bumper sensor	1	100.00	100.00 50l
17 To check & rectify wiring system	1	80.00	80.00 20l
18 To remove & refix rear interior garnishes & trimboard to facilitate the repairs	1	180.00	180.00 60l
19 To panel beat and straighten rear chasis frame, rear floorboard panel, to cut & weld rear end panel, including replacement of parts and align where necessary, to refit & adjust the same	1	1,200.00	1,200.00 ?
20 To putty & spray paint on affected areas	1	1,200.00	1,200.00 600l
21 To apply rust-proofing on replaced & repaired panels	1	160.00	160.00 ?
			<u>3,190.00</u>

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 ..... 26/09/2024 16:55 (SGT)  
Reported by ..... Actual Driver  
Date of Accident ..... 25/09/2024 18:20 (SGT)  
Exact Location of Accident ..... Serangoon Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNM8715J  
  
INSURED/POLICYHOLDER  
  
Is company? ..... Yes  
Name Of Registered Owner ..... MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PTE LTD  
Company Reg No ..... 1XXXXX778Z  
Email Address ..... too\_tong.tan@mercedes-benz.com  
Mobile Phone No ..... (Phone) +65-86885544  
Alternative Phone No ..... (Office) +65-82821711

## VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... YARIS CROSS HYBRID ACTIVE (AT) (2WD)  
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 ..... 1490  
Vehicle Fuel ..... Petrol-Electric  
First Registration Date ..... -  
Chassis no ..... JTDKBAB3X01007788  
Effective Date/Time of Ownership ..... -

## INSURANCE COMPANY

Name of Insurance Company ..... Allianz Insurance Singapore Pte. Ltd.  
Policy Number / Cover Note Number ..... SP2003907937

**SKETCH PLAN**

**IMPORTANT NOTICE**

1. Please correctly report the details of the accident to speed up the claims process
2. This Form must be **completed by the Policyholder and/or the Authorized 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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  
26/09/2024 - 11:30 HRS

Witnessed by Reporting Centre Personnel

**Sketch Plan**

