

ASS. REC. BY:

REF:

C11 / CS/CTI24110176/Kvh3

C

Kenneth

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: SLD 3761D

Policy No. _____

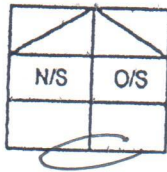
Claims No. SNM24D205928

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: \$195K

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SNM 8548A Yr Regn: 10, 23

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

Truck / Trailer or _____

Make: M. CLA 180 c.c. 1332

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 3282 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WIK118 3842 N 441234

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/45 R18

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. 19/10/24 D.O.I. 8/11/2024

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

21/11 7131.50 Cash

21/11/24 Re-confirmed final fig \$7111.50 with Steven (Red 5041.70, 41%)

Date/Time, File Pass to?

☐ : Prell. Report

Days Of Repair: 4

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S - RS. \$

Fees

Others

TOTAL

Report Format :

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

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	21/10/2024 10:35 (SGT)
Reported by	Actual Driver
Date of Accident	19/10/2024 12:50 (SGT)
Exact Location of Accident	Punggol Wy, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNM8548A
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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) +65-91997950
Alternative Phone No	(Office) +65-82821711

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	ClA180
Variant	COUPE PROGRESSIVE LN
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	1332
Vehicle Fuel	Petrol-Electric
First Registration Date	-
Chassis no	W1K1183842N441234
Effective Date/Time of Ownership	-

INSURANCE COMPANY

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

DRIVER

Name of Driver	VINCENT LEE TIONG WOON (VINCENT LI ZHONG'EN)
NRIC No	SXXXX700D
Date Of Birth	15/12/1973
Occupation	Indoor
Driving Pass Date	02/08/1994
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	30 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91997950
Alt. Phone Number	-
Email Address	too_tong.tan@mercedes-benz.com
Address	104 PUNGGOL WALK #04-11
Address complement	-
Postcode	828792
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Collision - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	-

PASSENGER 1

Name	UNKNOWN
Gender	Female

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

ON 19 OCT 2024 AT ABOUT 1250HRS I WAS DRIVING WITH VEHICLE A BEARING REGISTRATION NUMBER SNM8548A ENROUTE FROM TPE TOWARDS TO MY HOMELOT AT PUNGGOL WALK, WHILE DRIVING ALONG PUNGGOL WALK SUDDENLY MY FRONT UNKNOWN VEHICLE JAMMED BRAKED AND VEHICLE A MANAGED TO STOP ON TIME BUT VEHICLE B UNABLE TO BREAK ON TIME AND COLLIDED ONTO REAR OF VEHICLE A. DAX AND HIS WIFE INJURED AT NECK AND LATER WILL GO CLINIC FOR CHECK UP.

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	SLD3761D
Vehicle Manufacturer	Honda
Vehicle Model	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	-
Contact Number	(Phone) +65-98522060
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	VINCENT LEE TIONG WOON
Gender	Male
Phone No	(Phone) +65-91997950
Address	104 PUNGGOL WALK #04-11
Address Complement	-
Post Code	828792
Approximate Age Years Old	-
Injuries Sustained	INJURED NECK
Injured person in which vehicle?	SNM8548A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	WIFE
Gender	Female
Phone No	-
Address	104 PUNGGOL WALK #04-11
Address Complement	-
Post Code	828792
Approximate Age Years Old	-
Injuries Sustained	INJURED NECK
Injured person in which vehicle?	SNM8548A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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.
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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.

[Handwritten Signature]



ARAVINTAN

Policyholder's Signature / Date & Time

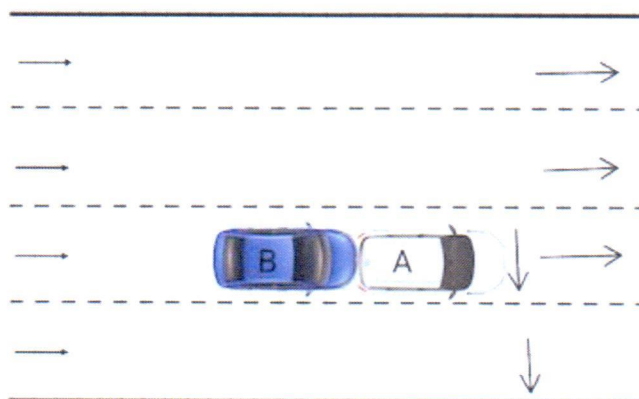
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

19 OCT 2024
1440HRS

PUNGGOL WAY
A-SNM8548A
B-SLD3761D



Describe Circumstances of the Accident

ON 19 OCT 2024 AT ABOUT 1250HRS I WAS DRIVING WITH VEHICLE A BEARING REGISTRATION NUMBER SNM8548A ENROUTE FROM TPE TOWARDS TO MY HOMELOT AT PUNGGOL WALK, WHILE DRIVING ALONG PUNGGOL WALK SUDDENLY MY FRONT UNKNOWN VEHICLE JAMMED BRAKED AND VEHICLE A MANAGED TO STOP ON TIME BUT VEHICLE B UNABLE TO BREAK ON TIME AND COLLIDED ONTO REAR OF VEHICLE A. DAX AND HIS WIFE INJURED AT NECK AND LATER WILL GO CLINIC FOR CHECK UP.

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

[Signature]

[Signature]

19 OCT 2024
1440HRS



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

PAGE: 1

M/S : MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE P1

1 GATEWAY DRIVE #15-08
WESTGATE TOWER
SINGAPORE 608531

TEL :

FAX :

ATTN : ACCOUNTS DEPT

YOUR REF NO : SLD3761D

CLAIM TYPE : THIRD PARTY

TP INS. CO. : CHINA TAIPING INSURANCE (SINGAPORE) PTE

ACCIDENT DATE : 19/10/2024

TP VEH REG NO : SLD3761D

ESTIMATE

NO : QUOT202411-000016(00)

DATE : 07/11/2024

POLICY NO : SP2003907937

VEH REG NO : SNM8548A

MAKE/MODEL : MERCEDES BENZ CLA 180
COUPE PROGRESSIVE LN

CHASSIS NO : W1K1183842N441234

ENGINE NO : 28281480066117

REG. DATE : 2023

Not Authorised

Refund B4 pain

4 days

@ 7131.50

Estimate Repair Cost to Vehicle No : SNM8548A

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Bootlid	1	2,516.00	2,516.00
2 Bootlid 'CLA180' emblem	1	241.00	241.00
3 Bootlid centre logo	1	202.00	202.00
4 Bootlid weatherstrip	1	225.00	225.00
5 Bootlid reflector - LH	1	647.00	647.00
6 Rear end panel	1	1,532.00	1,532.00
7 Rear end panel top garnish	1	102.00	102.00
8 Rear bumper	1	1,564.00	1,564.00
9 Rear bumper reinforcement	1	560.00	560.00
10 Rear bumper centre inner frame	1	120.00	120.00
11 Rear bumper reflector - RH / LH	2	55.00	110.00
12 Rear bumper sensor	2	353.00	706.00
13 Rear bumper sensor seals	6	12.00	72.00
14 Rear bumper clips	15	10.00	150.00
15 Rear bumper lower garnish	1	555.00	555.00
16 Rear bumper lower centre chrome	1	130.00	130.00
17 Rear bumper lower chrome - RH / LH	2	158.00	316.00
			9,748.00
		Less 10%	974.80
			8,773.20
SPECIAL NET			
18 Bootlid 'C&C' emblem	1	40.00	40.00
19 Rear number plate	1	40.00	40.00
			80.00
LABOUR			
20 To transfer damaged bootlid interior mechanism to new bootlid	1	120.00	120.00
21 To check & rectify wiring system	1	80.00	80.00
22 To remove & refit rear bumper sensor	1	100.00	100.00
23 To remove & fix rear interior garnishes & trimboard to facilitate the repairs	1	180.00	180.00
24 To panel beat and straighten rear chassis frame, rear floorboard panel, to cut & weld rear end panel, including replacement of parts and align where necessary, to refit & adjust the same	1	1,500.00	1,500.00
25 To putty & spray on affected areas	1	1,200.00	1,200.00

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:

600

200

600

600

500

600



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

PAGE: 2

M/S : MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE P1

1 GATEWAY DRIVE #15-08
WESTGATE TOWER
SINGAPORE 608531

TEL : FAX :

ATTN : ACCOUNTS DEPT

YOUR REF NO : SLD3761D

CLAIM TYPE : THIRD PARTY

TP INS. CO. : CHINA TAIPING INSURANCE (SINGAPORE) PTE REG. DATE : 2023

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TP VEH REG NO : SLD3761D

ESTIMATE

NO : QUOT202411-000016(00)

DATE : 07/11/2024

POLICY NO : SP2003907937

VEH REG NO : SNM8548A

MAKE/MODEL : MERCEDES BENZ CLA 180
COUPE PROGRESSIVE LN

CHASSIS NO : W1K1183842N441234

ENGINE NO : 28281480066117

Estimate Repair Cost to Vehicle No : SNM8548A

Description	Quantity	Unit Price	Amount
		S\$	S\$
26 To apply rust proofing on repaired and replaced panels	1	120.00	120.00
			3,300.00
		TOTAL	S\$ 12,153.20
		ADD GST @ 9.00%	1,093.80
		GRAND TOTAL	S\$ 13,247.00

SINGAPORE DOLLAR THIRTEEN THOUSAND TWO HUNDRED FORTY-SEVEN ONLY

FOR TONG LUCK AUTO PTE LTD

AUTHORISED SIGNATURE