ASS. REC. BY: Kenneth

REF: A161

ASSIGNMENT

From: ______ Date: ______

Estimated Cost: ______

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

To Inspect Vehicle No: ______

at Workshop m/s Cheng Hoe

of ______

Insured: ______

Policy No. ______

Claims No. ______

Sum Insured: ______ Excess: ______

(Client's Record)

Make of Veh: ______

(Policy Condition)

N/S	O/S

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

Bal. or Market Value: 36k

IDAC Accident Rport: ______ Consistent? : Yes or No

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

Est. Repairs: 05 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: ______ Person Contacted: ______

Veh No: SLQ 531C Yr Regn: 06, 17

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

Make: Toy Axio (A) c.c 1496

Colour: M.P. White A/C: Insured / Std / NI / NA

Sp.Reading 251938 T/Radio: Insured / Std / NI / NA

Eng/No: ______

C/No: NRE161 - 0023604

Gen. Cond: 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: 195/60R15

R: ______

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	4 mm
L/Bal.	8 mm	L/Bal.	4 mm
D.O.A.	8/11/24	D.O.I.	14/11/2024

Survey held at ______

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

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: ______

__S - RS.__SI

Photos ______

Others ______

TOTAL ______

Report Format :

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

SLQ531C
TP/AIG

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg
GST:201001158E RCB NO:201001158E

M/S : AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16 AIG BUILDING
SINGAPORE 079120
TEL: 64193000 FAX: 64153727
ATTN: Motor Claim Department

Not Authorised
L/Sup 8
Resurvey After Paint
5 days

Estimate No:	**ES2400948/YISHUN**
Date:	14 Nov 2024
Policy No:	5091922454-07
Veh Reg No:	**SLQ531C**
Make/Model:	TOYOTA TOYOTA COROLLA AXIO 1.5G CVT
Chassis No:	NRE1610023604
Engine No:	2NR8701194
Reg. Date:	27/06/2017

WS Ref:	TP/AIG
Claim Type:	Third Party
Accident Date:	08/11/2024
TP Veh Reg No:	GBK4873P

Estimate Repair Cost to Vehicle No :SLQ531C

	Description	U/Price	Quantity	List Price S$	Amount S$
	List Price				
1	REAR BUMPER	774.30	1 PC	774.30	
2	REAR BUMPER LH SIDE RETAINER	153.50	1 PC	153.50	
3	REAR BUMPER LH BRACKET	92.10	1 PC	92.10	
4	REAR BUMPER CLIPS	3.90	6 PCS	23.40	
5	TAILLAMP LH	876.60	1 PC	876.60	
6	TAILLAMP LOWER BRACKET LH	99.80	1 PC	99.80	
7	REAR BOOT	1,299.10	1 PC	1,299.10	
8	REAR BOOT LOGO	68.80	1 PC	68.80	
9	REAR BOOT EMBLEM (AXIO)	63.20	1 PC	63.20	
10	REAR BOOT INNER LOCK	183.40	1 PC	183.40	
11	REAR BOOT INNER RUBBER	269.40	1 PC	269.40	
12	REAR BOOT EMBLEM (G)	59.10	1 PC	59.10	
13	REAR BOOT OUTER MOULDING	301.30	1 PC	301.30	
14	REAR PANEL	902.30	1 PC	902.30	
15	REAR PANEL INNER TOP GARNISH	374.50	1 PC	374.50	
				5,540.80	
			Less 25%	1,385.20	4,155.60
	Special Net				
16	REVERSE SENSOR	200.00	1 SET	200.00	
				200.00	200.00
	Labour				
17	REMOVE & REFIX REAR BUMPER ASSY,BOOT & ATTACHMENT,TO CUT,WELD & RENEW REAR PANEL,KNOCK & REPAIR REAR LH FENDER AND REALIGN THE SAME	800.00	1 LA	800.00	600
18	PUTTY & RESPRAY ON REAR BUMPER,BOOT,REAR LH FENDER,REAR PANEL AND REAR AFFECTED AREAS	800.00	1 LA	800.00	700
19	RUSTPROOFING	30.00	1 LA	30.00	
20	REMOVE & REFIX REAR REVERSE CAMERA,REAR REVERSE SENSOR	30.00	1 LA	30.00	
				1,660.00	1,660.00
				Total	S$ 6,015.60
				Add GST @ 9%	541.40
				Total Amount Payable	S$ 6,557.00

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:

For Cheng Hoe Motor Pte Ltd

AUTHORISED SIGNATURE

SC1I24B80008 / CHENG HOE MOTOR PTE LTD[768761]
ENTRY DATE & TIME: 08/11/2024 17:09 (SGT)
SUBMITTED BY: CHIONG BENG CHOON
VERSION: 1 (08/11/2024 17:09 (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	08/11/2024 17:09 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/11/2024 14:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WOODLANDS IND PK E9 SLIP RD TO WOODLANDS IND PK E4
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ531C

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ANG LIAN SENG
NRIC No	SXXXX555E
Email Address	ang.lianseng1105@gmail.com
Mobile Phone No	(Phone) +65-97566373
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	COROLLA AXIO 1.5G CVT
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	1496
Vehicle Fuel	-
First Regisration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5091922454-07

DRIVER

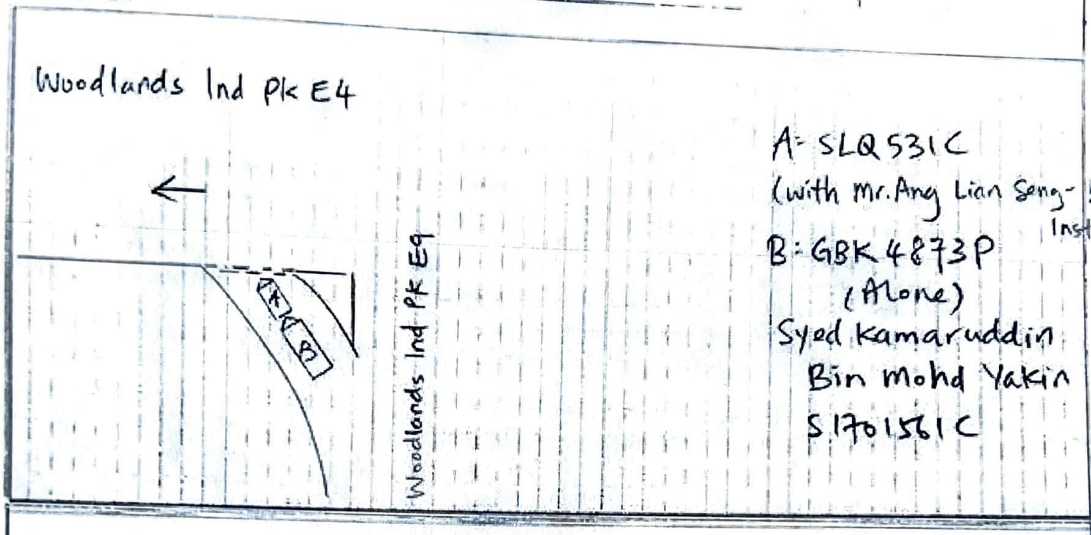
Describe Circumstance of the Accident

** NOTE: PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

( ) Claim Own Policy (✓) Claim Third party ( ) Reporting Only

( ) Claim OD/ TP at other workshop (_____)

Sketch Plan



I came to a stop at the give way line to check for main road traffic when suddenly vehicle B hit onto the rear of my car. My driving instructor Mr. Ang Lian Seng, NRIC: SXXXX55SE was with me at the passenger seat when accident happened. Nv one was injured.

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

8/11/24

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