

ASS. REC. BY:

REF:

C721

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: _____

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: 829k

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 06 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SE 5154 Mr Regn: 07, 16Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: NIS Qashgai c.c. 1987Colour: N. Gray A/C: Insured / Std / NI / NASp. Reading: 183886 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: STNI=BAJ1141724194Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: NI / S/Rlm / STD / Rlm orTyre Size: F: 225/45R19

R: _____

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

TOYO / YOKO or

Front

R/Bal. 8 mmL/Bal. 8 mmD.O.A. 9/11/24

Survey held at

Rear

R/Bal. 8 mmL/Bal. 8 mmD.O.I. 15/11/2024

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

O/S body

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Prel. Report

Days Of Repair: _____

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. (\$) _____

源摩哆廠 GUAN MOTOR WORKS

Business Regn. No: 08102600F

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 I/P: 9742 6003

REPAIR ESTIMATE SLE5154H

Not Authorized

L1 Rep &

Painting After Paint

6 days

No.	Qty	Nett Items	
1	1	Front RH fender	\$ 948.10 ✓
2	1	Front RH fender lower black wheel arch garnish	\$ 654.00 ✓
3	1	Front RH fender lower black wheel arch garnish clips	\$ 40.00 ✓
4	1	Front RH fender under shield	\$ 175.00 ?
5	1 set	Front fender under shield clips	\$ 40.00 ✓
6	1	Front RH lower arm	\$ 269.00 ?
7	1	Front RH door	\$ 1,384.10 ✓
8	1 set	Front RH door black sticker	\$ 36.00 ✓
9	1	Front RH door lower black protector	\$ 370.20 ✓
10	2	Front RH door top hinge (Top & bottom)	\$ 139.80 X
11	1	Front RH door checker	\$ 58.60 X
12	1	Front RH door weatherstrip	\$ 165.30 ?
13	1	Front RH door inner trim board	\$ 1,576.70 ?
14	1 set	Front RH door inner trim board clips	\$ 60.00 ?
15	1	Front RH door inner lock	\$ 397.10 X
16	1	Front RH door glass channel	\$ 208.00 ?
17	1	Front RH door glass regulator & motor	\$ 1,273.10 ?
18	1	Rear RH door lower black protector	\$ 238.20 ✓
			\$ 8,033.20
Less 10%			\$ 803.32
Total :			\$ 7,229.88

Special Nett Items

19	1	Front RH tyre	LKK Auto Consultants hence notify	\$ 240.00 ?
20	1	Front RH sports rim	the Repairer of the following:	\$ 1,819.00 ✓
21	1	Front RH shock absorber	• To resurvey before/after spray painting	\$ 606.10 ?
22	1	Front RH knuckle arm	• To display damaged part(s) during resurvey	\$ 657.60 ?
23	1	Front RH wheel hub & bearing	• Parts prices are subject to confirmation	\$ 376.10 ?
			• Third party survey is on a "Without Prejudice" basis	\$ 3,698.80
			• No illegal modification(s) is allowed	
			• Supplementary item(s) must be surveyed and is subject to final approval from Insurance Company	
			Total :	\$ 3,698.80

Labour

1	Labour Charges for remove/refit, panel beating, cutting welding and replacement of damages.	\$ 800.00 500
2	To putty and spray Spray Paintings charges.	\$ 800.00 700
3	To remove, refit front RH door fittings.	\$ 80.00 60
4	To check wirings.	\$ 40.00 20
5	To remove, refit front RH under carriage damage parts.	\$ 220.00 ?
6	To conduct computerise wheel alignment test.	\$ 100.00 60
7	To supply and apply anti rust treatment.	\$ 80.00 60
Total :		\$ 2,120.00

Total Parts and Labour : \$ 13,048.68

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	11/11/2024 14:30 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	09/11/2024 16:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	YISHUN AVE 2 / YISHUN AVE 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLE5154M

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOHAMMED NURIZAM BIN AZMAN
NRIC No	S8726901I
Email Address	ZAMVANDAM@HOTMAIL.COM
Mobile Phone No	(Phone) +65-98782948
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
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	2000
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5141556420

DRIVER

DRIVING STRAIGHT TOWARDS THE CROSS JUNCTION FROM YISHUN CENTRAL TO YISHUN AVE 3. THERE WAS A
ON THE ONCOMING DIRECTION POSITIONING TO MAKE U-TURN. WHEN IM ABOUT TO ENTER YISHUN AVE 3, THE
ME VEHICLE MOVED INTO MY DIRECTION, I HORN AND SWERVE OUT BUT AT NO AVAIL AS THE OTHER VEHICLE STILL
MOVED OUT AND HIT ONTO MY VEHICLE

ATTACHMENT(S) [REDACTED]

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	SJQ5249J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
NRIC No	XU JIAN
Contact Number	S2621444J
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

IMPORTANT NOTICE

SKETCH PLAN

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 insurers who have insured vehicle(s) involved in this accident (all insurers 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 making 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.

11/11/2024
1417HRS

NUR ASYRAF BIN ZAINAL
S997042

Policyholder's Signature / Date & Time

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

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

Sketch Plan

A: SLE5154M
B: SJQ5249J

YISHUN AVE 2 / YISHUN AVE 3