

ASS. REC. BY:

REF:

SMR

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

7-8 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLN 69212 Yr Regn: 05.17

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

Truck / Trailer or

Make:

Toy A909 C.G. 1496

Colour:

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

Sp. Reading

118648 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

NHP106 585450

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

Continental 185/80R15

R: Real

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

TOYO / YOKO or

Front

Rear

R/Bal.

7 mm

R/Bal.

2 mm

L/Bal.

7 mm

L/Bal.

2 mm

D.O.A.

19/11/24

D.O.I.

20/11/2024

Survey held at

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

2 FR

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

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.R. RS

), Others

TOTAL

Report Format :

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

Date: 19/11/2024

Vehicle No: SLN6921L

Model: TOYOTA AQUA HYBRID 1.5S CVT

Chassis: NHP106585450-2017

Reg. Year: 2017

Third Party Insurer: MS FIRST CAP

Third Party Veh No: SHB1023Y

Date of Accident: 19/11/2024

Estimator: TING AN

Surveyor:

*Not with the  
1/11/24  
Hurry After Rain*

*7-8 days*

## ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$	
1	REAR TAILGATE	1		<i>RM</i> \$980.00	✓
2	REAR TAILGATE "AQUA" EMBLEM	1		<i>RM</i> \$80.00	✓
3	REAR TAILGATE "HYBRID" EMBLEM	1		<i>RM</i> \$80.00	✓
4	REAR TAILGATE TOYOTA EMBLEM	1		<i>RM</i> \$80.00	✓
5	REAR TAILGATE LOCK	1		<i>RM</i> \$220.00	✓
6	REAR TAILGATE WEATHERSTRIP	1		<i>RM</i> \$285.00	X
7	REAR TAILGATE GARNISH COVER	1		<i>CM</i> \$130.00	✓
8	REAR TAILGATE NUMER PLATE LAMP	2	\$60.00	<i>CM</i> \$120.00	✓
9	REAR TAILGATE CAMERA	1		\$200.00	✓
10	REAR TAILGATE INNER TRIM	1		<i>RM</i> \$170.00	X
11	REAR WIPER ARM ASSEMBLY	1		\$150.00	✓
12	REAR WIPER MOTOR	1		\$580.00	✓
13	REAR TAIL LAMP LH	1		<i>RM</i> \$530.00	X
14	REAR TAIL LAMP RH	1		<i>RM</i> \$530.00	X
15	REAR TAIL LAMP BRACKET LH	1		\$75.00	✓
16	REAR TAIL LAMP BRACKET RH	1		\$75.00	✓
17	REAR BUMPER	1		<i>RM</i> \$848.00	✓
18	REAR BUMPER REINFORCEMENT	1		\$590.00	✓
19	REAR BUMPER SMART BUZZER	1		\$80.00	✓
20	REAR BUMPER SIDE BRACKET LH	1		\$86.00	✓
21	REAR BUMPER SIDE BRACKET RH	1		\$86.00	✓
22	REAR BUMPER UNDER COVER	1		<i>CM</i> \$221.00	✓
23	REAR EXHAUST	1		<i>RM</i> \$718.00	X
24	REAR END PANEL	1		\$556.00	✓
25	REAR END PANEL UPPER COVER	1		\$118.00	✓
26	REAR FLOOR PANEL TOP BOARD	1		<i>RM</i> \$250.00	X
27	FRONT BONNET	1		<i>RM</i> \$1,084.00	✓
28	FRONT BUMPER	1		<i>RM</i> \$924.00	✓
29	FRONT BUMPER TOYOTA EMBLEM	1		<i>RM</i> \$88.50	✓
30	FRONT BUMPER REINFORCEMENT	1		\$450.00	✓
31	FRONT BUMPER ABSORBER FOAM	1		\$105.00	✓
32	FRONT GRILLE ASSEMBLY	1		<i>CM</i> \$390.40	✓
33	FRONT SUPPORT PANEL	1		\$805.00	✓

### Head office

6 Kung Chong Road Singapore 159143  
Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

### Branch

9A Serangoon North Ave 5 Singapore 554500  
Tel: (+65) 6484 9919 | Fax: (+65) 6481 1993

### Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047  
Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011



Date: 19/11/2024  
Vehicle No: SLN6921L  
Model: TOYOTA AQUA HYBRID 1.5S CVT  
Chassis: NHP106585450-2017  
Reg.Year: 2017

Third Party Insurer: MS FIRST CAP  
Third Party Veh No: SHB1023Y  
Date of Accident: 19/11/2024  
Estimator: TING AN  
Surveyor:

SUB TOTAL	\$11,684.90
LESS 25%	-\$2,921.23
PARTS TOTAL	\$8,763.68

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	REAR WINDSCREEN SEALANT	1		Na \$100.00
2	REAR TAILGATE INNER TRIM CLIPS	1		Na \$50.00
3	REAR BUMPER REVERSE SENSOR	1		Mrj \$300.00
4	REAR BUMPER CLIPS	1		Na \$50.00
5	REAR NUMBER PLATE & HOLDER	1		Na \$50.00
6	REAR END PANEL JOINT SEALANT	1		\$120.00
7	REAR END PANEL UPPER COVER CLIPS	1		Na \$40.00
8	FRONT NUMBER PLATE & HOLDER	1		Na \$50.00
9	FRONT BUMPER CLIPS	1		Na \$50.00
S/N TOTAL				\$810.00

## LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST FRONT ACCIDENT AREAS & ETC.

400d  
\$500.00

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST REAR ACCIDENT AREAS & ETC.

\$1,000.00 7

LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT REAR TAILGATE, REAR BUMPER, REAR END PANEL, FRONT BONNET, FRONT BUMPER & ETC.

1000d  
\$1,200.00

LABOUR CHARGES TO REMOVE & REINSTALL REAR TAILGATE INNER MECHANISM & ETC. BACK TO ORIGINAL OPERATIONS.

60d  
\$120.00

LABOUR CHARGES TO REMOVE & REPLACE REAR BUMPER REVERSE SENSOR & ETC.

\$120.00 50d

LABOUR CHARGES TO REMOVE & REPLACE REAR EXHAUST & ETC.

\$300.00 7

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Estimator: TING AN  
Surveyor:

TO CHECK WIRING & ELECTRICAL SYSTEM.

401  
\$120.00

LABOUR TOTAL \$3,360.00

TING AN TOTAL \$12,933.68

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	19/11/2024 13:24 (SGT)
Reported by	Actual Driver
Date of Accident	19/11/2024 08:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BKE TOWARDS PIE BEFORE EXIT 3
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SLN6921L

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	OPTIMA WERKZ PTE.LTD.
Company Reg No	2XXXXX455W
Email Address	JANET.ONG@OCLEASING.SG
Mobile Phone No	(Phone) +65-91719288
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Aqua
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
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 Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

#### INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D23MFL0007412_01

#### DRIVER

## SKETCH PLAN

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### 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.



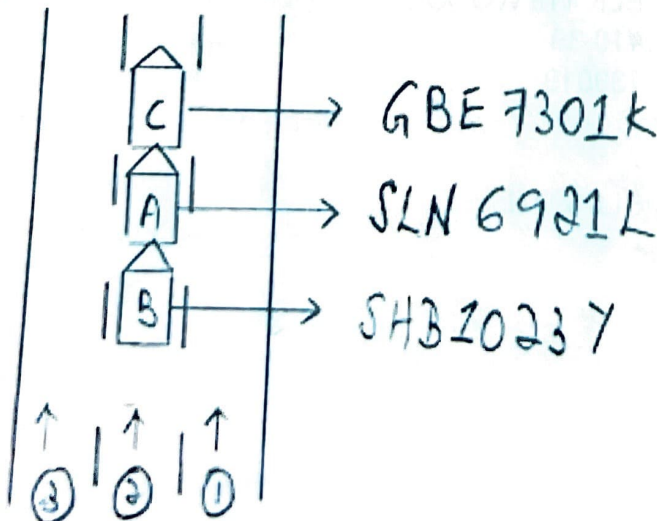
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

### Sketch Plan



BKE towards  
PIE before Exit 3