ASS. REC. BY: Kenneth | REF: TL /

ASSIGNMENT

From: | Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s Nga'i

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.

N/S	O/S

Bal. or Market Value: $ 49k

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

Date: Person Contacted: Vehicle: IN / OUT

Veh No: SLP5146D Yr Regn: 06/17

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

Make: Kia Cerato c.c 1591

Colour M.D. Blue A/C: Insured / Std / NI / NA

Sp.Reading 161503 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KNAFT411MJ 5724998

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: 215/45R17

R:

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

Front		Rear	
R/Bal.	3 mm	R/Bal.	3 mm
L/Bal.	3 mm	L/Bal.	3 mm
D.O.A.	3/7/24	D.O.I.	5/7/2024

Survey held at

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

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:

Survey Fee:

Transportation

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ Tech Invs ($)

☐ Weekend ($)

Parking

Others

TOTAL

Report Format :

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

ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.
Tel: 6453 8686 (3 Lines) Fax: 6459 6550
Company Reg. No.: 201113667N
GST Reg. No.: 201113667N

No. : 07109

Vehicle Insured : SNB9122X
Accident Date : 03-Jul-2024

Date : 04-Jul-2024

Our Ref : 024130 (III) / CHAN

PAGE : 1

TEW SI KAI EDWARD
BLK 635A SENJA ROAD
#30-255
Singapore 671635

Not Working
L/Lamp &
Bumper After Paint
5 days

ESTIMATED COST OF REPAIR FOR KIA CERATO SLP5146D

1 pc	Front n/s fender	342.00
1 pc	Front n/s fender inner shield	86.00
1 pc	Front n/s fender side retainer	18.00
1 pc	Front bumper fascia	634.00
1 pc	N/s healamp	2,370.00
1 pc	Front n/s shock absorber	283.00
1 pc	Front n/s knuckle arm	316.00
1 pc	Front n/s knuckle bearing hub	135.00
1 pc	Front n/s wheel bearing	118.00
1 pc	Front n/s lower arm	343.00
		4,645.00
	Less 10% :	464.50
		4,180.50
1 pc	Front bumper lower spoiler	300.00 sn
1 pc	Front n/s sport rim	700.00 sn
	To rewire damaged parts and refocus headlamp beam.	20.00
	To dismantle and lower front undercarriage	200.00
	To check and adjust wheel alignment	65.00
	To putty and spray replaced parts	600.00

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 [illegible] "Without Prejudice" basis
- No illegible [illegible] part(s) is allowed
- Supplementary [illegible] must be resurveyed and is subject to approval from Insurance Company

Acknowledged by
Signature
Date

Con't Page 2 ...

ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.
Tel: 6453 8686 (3 Lines) Fax: 6459 6550
Company Reg. No.: 201113667N
GST Reg. No.: 201113667N

Vehicle Insured : SNB9122X

To remove, cut-out damaged parts, panel beating, welding, align, refix and to renew above parts	500.00
Total :	S$ 6,565.50

Singapore Dollars Six Thousand Five Hundred and Sixty Five and Cents Fifty Only

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	04/07/2024 12:32 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	03/07/2024 18:20 (SGT)
Exact Location of Accident	Collyer Quay, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	**SLP5146D**

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEW SI KAI EDWARD
NRIC No	SXXXX640Z
Email Address	ETOTHEED@GMAIL.COM
Mobile Phone No	(Phone) +65-93850380
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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	1591

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMPG24008065

DRIVER

Name of Driver	TEW SI KAI EDWARD
NRIC No	SXXXX640Z
Date Of Birth	03/08/1993
Occupation	Indoor

SKETCH PLAN

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 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 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.

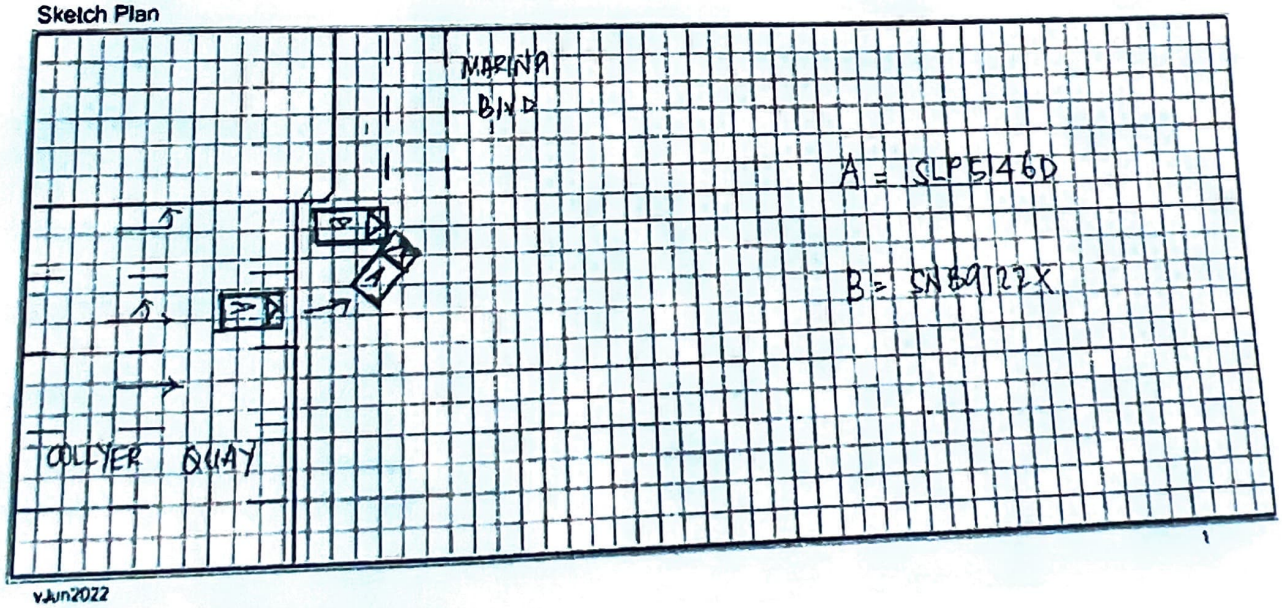
04.07.2024

Policyholder's Signature / Date & Time

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

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

Sketch Plan



vJun2022