

ASS. REC. BY:

REF:

FC21

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:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4-5 days

Res.: Yes or No

Lum Sum:

1.81 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SCT 83R

Yr Regn:

05, 23

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

Truck / Trailer or

Make:

Tes/a

Model 4

c.c.

Colour

M.P. White

AC:

Insured / Std / NI / NA

Sp. Reading

36893

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

LR WYH EF 32PC 892733

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

255/35R21

R:

275/35R21

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

TOYO / YOKO or

Front

R/Bal.

7

mm

Rear

R/Bal.

5

mm

L/Bal.

7

mm

L/Bal.

5

mm

D.O.A.

29/5/24

D.O.I.

12/6/2024

Survey held at

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

N/S body

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

: Prell. Report

: Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

: Site Insp (\$

: Interview (\$

Tech Invs (\$

Weekend (\$

TOTAL

Report Format:

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

Date: 10-6-2024
Vehicle No: SLJ83R
Model: Tesla Model Y
Chassis: LRWYHCFS2PC892733
Reg.Year: 9.5.2023

*Not with hold
Pehway B4paw
4-5 days*

Third Party Insurer: FCIL
Third Party Veh No: SHC1483Y
Date of Accident: 29/5/2024
Estimator: Loong
Surveyor:

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	REAR LH DOOR PANEL	1		<i>PL</i> \$1,869.16
2	REAR LH DOOR SEAL	1		<i>PL</i> \$107.47
3	REAR LH FENDER OUTER GARNISH	1		<i>PL/LH</i> \$65.42
4	REAR LH WHEEL RIM	1		<i>PL</i> \$1,130.84
5	REAR LH KNUCKLE ARM	1		\$672.89
6	REAR LH KNUCKLE HUB + BEARING	1		\$149.53
7	REAR LH UPPER AFTER LINK	1		<i>PL</i> \$18.69
8	REAR LH LOWER AFTER LINK	1		<i>PL</i> \$224.29
9	REAR LH UPPER FORE LINK	1		<i>PL</i> \$18.69
10	REAR LH TOE LINK	1		<i>PL</i> \$17.75
11	REAR LH LOWER FORE LINK	1		<i>PL</i> \$224.29
12	SIDE SKIRT RH	1		<i>PL</i> \$364.48
13	REAR RH WHEEL RIM	1		<i>PL</i> \$1,130.84
14	FRONT RH WHEEL RIM	1		<i>PL</i> \$1,130.84
15	REAR LH FENDER PANEL	1		REPAIR
16	FRONT BUMPER	1		REPAIR
SUB TOTAL				\$7,125.18
LESS 10%				-\$712.52
PARTS TOTAL				\$6,412.66

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	REAR DOOR INNER TRIM BOARD CLIPS	1		<i>PL</i> \$50.00
2	REAR FENDER GARNISH CLIPS	1		<i>PL</i> \$50.00
3	SIDE SKIRT CLIPS	1		<i>PL</i> \$50.00
S/N TOTAL				\$150.00

LABOUR CHARGES:

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

\$800.00 *3001*

LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT REAR LH DOOR, REAR LH FENDER, FRONT BUMPER, FRONT & REAR RH WHEEL RIM, ETC

\$1,300.00 *4401*

LABOUR CHARGES TO REMOVE & REINSTALLED REAR DOOR INNER MECHANISM & ETC. BACK TO ORIGINAL OPERATIONS.

\$150.00 *601*

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: 10-6-2024
Vehicle No: SLJ83R
Model: Tesla Model Y
Chassis: LRWYHCFS2PC892733
Reg.Year: 9.5.2023

Third Party Insurer: FCIL
Third Party Veh No: SHC1483Y
Date of Accident: 29/5/2024
Estimator: Loong
Surveyor:

TO CONDUCT TYRE BALANCING AND WHEEL ALIGNMENT	\$120.00	De
TO REMOVE AND REFIT REAR UNDERCARRIAGE PARTS TO ENABLE REPAIR	\$300.00	7
TO TUFF KOTE & UNDERSEAL MATERIALS.	\$100.00	301
TO CHECK WIRING & ELECTRICAL SYSTEM.	\$80.00	21

LABOUR TOTAL	\$2,850.00
--------------	------------

TOTAL	\$9,412.66
-------	------------

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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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	29/05/2024 16:22 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	29/05/2024 10:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	STEVEN ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ83R
-----------------------------	--------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YEO CHIAH YONG
NRIC No	S7905529H
Email Address	desmondyeocy@gmail.com
Mobile Phone No	(Phone) +65-82287766
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Tesla
Model	Y RWD
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	0

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5144724671

DRIVER

Name of Driver	YEO CHIAH YONG
NRIC No	S7905529H
Date Of Birth	18/02/1979
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 Authorised 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. The 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.
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

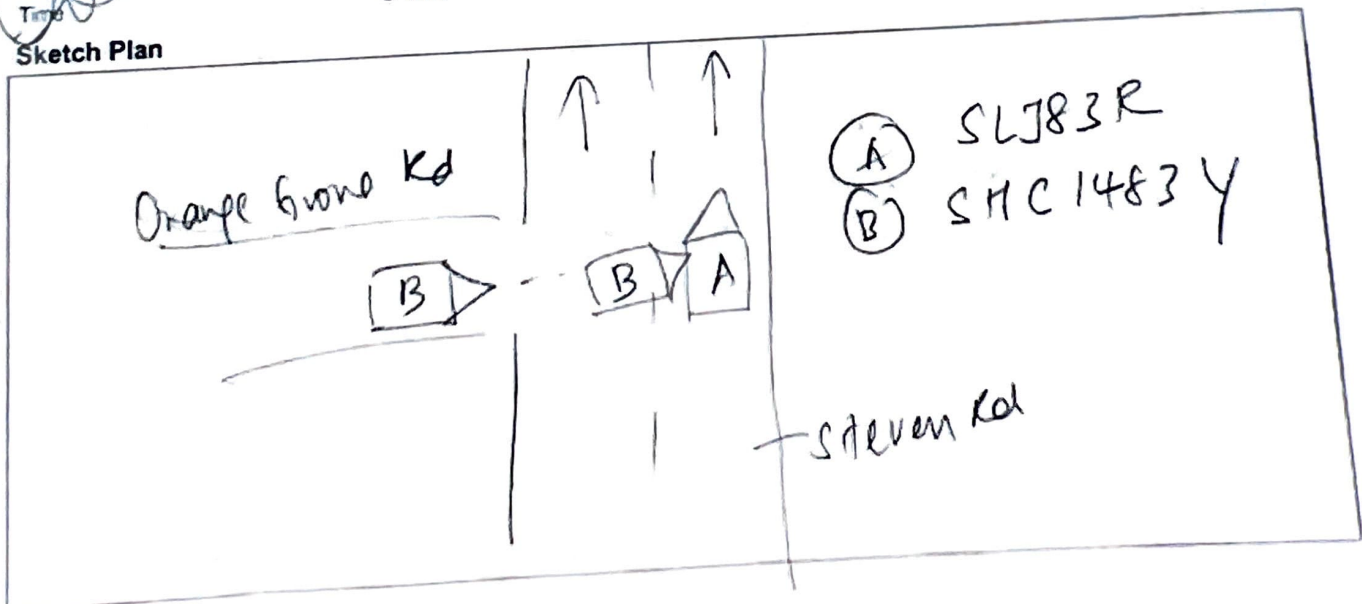
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

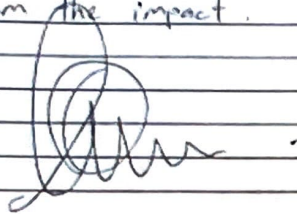
Sketch Plan



Describe Circumstances of the Accident

On 29th MAY 2024 at 10:25 am, along Stevens Road I was travelling on the right lane, slowing down before the overhead bridge, the traffic light was green in my favour. A taxi bearing SHC 1483Y decided to encroach into my lane from Orange Grove Road. Tesla activated lane collision warning to e-brake. My Tesla had damages to its rear passenger door and rear wheel. Taxi has 3 passengers + taxi driver who has no injury.

* Right front & rear wheels was damaged as a result of mounting kerb from the impact.



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

