

ASS. REC. BY:

REF:

SPF / CS | SPF 240 70169 / Knp3

C

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

01

days

Res.: Yes or No

Lum Sum: _____

148.1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: _____

WD 5033 D Yr Regn: 12, 21

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

Truck / Trailer or _____

m. Concrete mixer

Make: _____

UD Truck

C.C.

10836

Colour

White / Blue

AC:

Insured / Std / NI / NA

Sp. Reading

P1975

T/Radio:

Insured / Std / NI / NA

Eng/No: _____

C/No: _____

JNCMBPOG 9KU 044182

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: M / S / Rim / STD A / Rim or

Tyre Size: _____

F: _____

295/80 R22.5

R: _____

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

TOYO / YOKO or _____

F10180

Front

Rear

R/Bal.

9

3

mm

R/Bal.

66

88

mm

L/Bal.

9

3

mm

L/Bal.

66

88

mm

D.O.A.

4/7/24

D.O.I.

10/7/2024

Survey held at _____

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

1st RH wing mirror

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

Date / Time

Action / Instruction

12/7

8821.50

Calw

(Red. \$ 812.50, 497.)

range: \$ 831.50 - \$ 1000

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 - SI

Fees

Others

TOTAL

Report Format:

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

Autoexcel Engineering

From: JenniferGuay <jenniferguay@visionlawllc.com>
Sent: Monday, July 8, 2024 3:45 PM
To: Hafizul_Farhan_RAHMAT@spf.gov.sg; KANG_Swee_Kok@spf.gov.sg;
Jennifer_TAY@spf.gov.sg
Cc: aeexcel@singnet.com.sg; 'Jacqui Wong'
Subject: OUR REF: AW-INS-A5-WD5033D-2024-jgv & YR REF : YQ 3164 E

Importance: High

SINGAPORE POLICE FORCE
Attn : Police Logistic Department

Singapore

PRE-REPAIR SURVEY

CLAIMANT: THIAM MENG TRANSPORTATION PTE LTD

ACCIDENT INVOLVING WD 5033 D & YQ 3164 E ON 4 JULY 2024 ALONG MOUNTBATTEN ROAD

Dear Sirs

We are instructed by **THIAM MENG TRANSPORTATION PTE LTD** to notify you of a road accident on **4 JULY 2024 ALONG MOUNTBATTEN ROAD AT ABOUT 1055 HOURS** involving our client's **WD 5033 D & YQ 3164 E** driven by your driver at the material time.

As a result of the accident, our client's vehicle has been damage. Before our client proceed to repair the damage vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Thank you.

Regards

Jennifer Guay
(Secretary)

VISION LAW LLC

133 New Bridge Road #25-03/04/05
Chinatown Point
Singapore 059413

For Surveyor

Please initial here after completion of pre-repair survey.
Thank you.

Appointed Surveyor: Kenneth

Name & Signature

Contact : _____

Date & Time : _____

Surveyor during repair : _____

Date & Time : _____

Surveyor after repair : _____

Date & Time : _____

VISION LAW LLC

Advocates & Solicitors

(Incorporated with limited liability)

Unique Entity No. 200721148H

Address : 133 New Bridge Road #25-03/04/05 Chinatown Point, Singapore 059413

AUTOEXCEL ENGINEERING PTE LTD

HANDPHONE 90030857

Date : 10 Jul 2024

QUOTATION - THIRD PARTY CLAIM

SINGAPORE POLICE FORCE

CLAIM : THIRD PARTY CLAIM

DATE ACCIDENT : 4 Jul 2024

VEH. No : WD 5033 D / UD TRUCK

ATTN : MOTOR CLAIM DEPARTMENT

INSURE : INCOME INSURANCE

QTY	ITEM	AMOUNT	CONDITION
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Third party vehicle : YQ 3164 E

1	RH SIDE MIRROR <i>785</i>	\$ <i>not item</i> 980.00	✓
1	RH SIDE MIRROR STAND	\$ <i>1100</i> 480.00	X
TOTAL PARTS :		\$ 1,460.00	
LESS 10%		\$ 146.00	
TOTAL LIST PARTS :		\$ 1,314.00	
TOTAL PARTS PRICE :		\$ 1,314.00	

AMOUNT BRING FORWARD :

\$ 1,314.00

Labour charges

\$ 200.00

100

check wiring system

\$ 120.00

15

TOTAL LABOUR :

\$ 320.00

GRAND TOTAL PARTS & LABOUR :

\$ 1,634.00

*Not within
Hourly After pain*

*1 day**8821-50*

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: