

ASSIGNMENT

ASS. REC. BY: Kenneth

REF: AGZ/

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: R 68k

IDAC Accident Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: 4-5 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: SMG 9854C

Yr Regn: 01 / 19

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: 158336

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNAF 1416MK 5024522

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inoper / Jammed / Leaked / Burnt or

Brake: Inoper / Jammed / Leaked / Burnt or

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

Tyre Size: 175/45R17

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

TOYO / YOKO or

Front

Rear

R/Bal. 8 mm

R/Bal. 8 mm

L/Bal. 8 mm

L/Bal. 8 mm

D.O.A. 10/7/24

D.O.I. 15/7/2024

Survey held at _____

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

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: _____

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech Invs (\$ _____)

☐

: Weekend (\$ _____)

Transport: _____

\$ - RS. SI

Findings

Others

Report Format :

mp Sum / I.B.I: (\$ _____)

TOTAL

E M Solution Pte Ltd

160 Sin Ming Drive #03-19, Sin Ming Autocity

Singapore 575722

Tel: 64560226

GST/Reg. No: 201016308K

ESTIMATE

Date : 13th July 2024

M/s E Rental

160 Sin Ming Drive,
#03-19 Sin Ming AutoCity
Singapore 575722

Veh No : SMG 9854C

Make/Model : Kia Cerato

Chassis No : KNAF1416MK5024522

Date of Acc : 10.07.24

TP Veh No : SMR 5265X

Not Withheld
1/1 by @
Henry Afa Rain
4-5 days

S/No	Qty	Description	Unit Price	Amount
Materials				
1	1 pc	Rear Boot Lid		\$ 1,582.00 ✓
2	1 pc	Rear Boot Lid KIA Logo		\$ 68.00 ✓
3	1 pc	Rear Boot Lid Cerato Emblem		\$ 62.00 ✓
4	1 pc	Rear Lamp RH		\$ 695.00 ?
5	1 pc	Rear Bumper		\$ 688.00 ✓
6	1 pc	Rear Bumper Diffuser		\$ 395.00 ✓
7	1 pc	Rear Bumper Lamp RH		\$ 285.00 ?
8	1 pc	Rear Bumper Side Retainer RH		\$ 110.00 ✓
9	1 pc	Rear Bumper Reinforcement		\$ 445.00 ?
10	1 pc	Rear Bumper Reinforcement Stay RH		\$ 230.00 ?
11	1 pc	Rear Bumper Top Bracket RH		\$ 28.00 X
12	1 pc	Rear Bumper Lower Bracket RH		\$ 84.00 ?
13	1 pc	Rear End Panel		\$ 535.00 ?
14	1 pc	Rear End Panel Top Garnish		\$ 182.00 X
15	1 pc	Rear Boot Weatherstrip		\$ 166.00 X

\$ 5,555.00

Less 10%

Parts Total : \$ 4,999.50

Special Nett		
1	1 set	Rear Bumper Clips
2	1 set	End Panel Top Garnish Clips
3	1 set	Reverse Sensor

\$ 45.00 ✓
\$ 35.00 X
\$ 280.00 200W

Special Nett : \$ 360.00

Labour	
1	To remove & rearrange electrical wirings, check lightings
2	To remove & replace upholstery, trim garnishes to facilitate repairs.
3	To remove, transfer boot lid components
4	To remove, repair & replace damaged bodyparts, realign bodywork and where consistent to the accident.
5	Putty and respray painting on affected portions.
6	To remove & renew reverse sensor
7	Rust proofing on affected portions.

\$ 80.00 20l
\$ 120.00 ?
\$ 100.00 50l
\$ 1,000.00 ?
\$ 800.00 600l
\$ 100.00 50l
\$ 100.00 ?

Labour Total : \$ 2,300.00

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 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

Total Parts & Labour : \$ 7,659.50


for E M Solution Pte Ltd

Acknowledged by Repairer

Note: Parts quoted were based on visual inspection. Should additional parts be found damaged upon dismantling, we will seek your approval before proceeding.

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	11/07/2024 15:02 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/07/2024 12:15 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	towards city after Moulmein
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG9854C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	E-Rental
Company Reg No	5329868W
Email Address	emrental2024@gmail.com
Mobile Phone No	(Phone) +65-84960913
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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 hire
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD23V00036/VPZ/R05

DRIVER

Name of Driver	Phan Kien Hong
NRIC No	S6928717D
Date Of Birth	23/08/1969
Occupation	Outdoor

SKETCH PLAN

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1. Please report correctly the details of the accident to speed up the claims process.
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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.

Describe Circumstance of the Accident

X RCE

[Signature]

11 JUL 2024

Policyholder Signature / Date

Sketch Plan

[Signature]

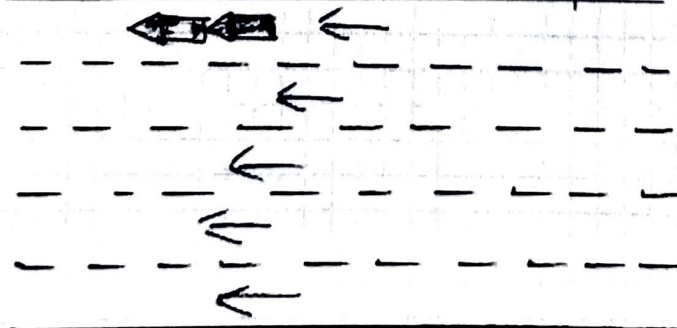
Driver's Signature (if driver is not the policyholder) / Date

11 JUL 2024

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

Jenny Lim

C/E towards to city



(A) SM6 9854 C

(B) SMR 5265 X