

ASS. REC. BY: Taught REF: CS/CT124070283/Tapp³

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

☒ 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: 91000

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S
N/S	O/S

Bal. or Market Value: 944K

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / ☒ REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SCZ 37Y Yr Regn: 2016 / 06

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

Truck / Trailer or _____

Make: Audi A4 c.c. 1395

Colour: Black A/C: Insured / Std / NI / NA

Sp. Reading: 174688 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WVAZZZF46GA100553

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt or

Brake: ☒ In order / Jammed / Leaked / Burnt or

Mod: NI / STD / RIM or

Tyre Size: F: 225 / 45 R18

R: 225 / 45 R18

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

TOYO / YOKO or Falken

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.I. 17/7/24

Survey held at Ding Auto Carwash

Des. of Damages: ☒ Front / Rear / O/S / N/S / U/G / Rooftop or

The U/G / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Repair limit <u>918K</u>

Date/Time, File Pass to? ☐ : Prel. Report

i) ☐ : Final Report

Date/Time, File Return to?

2) _____

Rep. Format: _____
Lump Sum / L.B.E. ()

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : Weekend (\$)

Survey Fee:	
Transportation:	
\$ + RS. SI	
Photos	
Others	
TOTAL	



Full Report
Registration: SCZ37Y
Printed: 17/07/2024 8:48 AM

Claim

Vehicle Details

Vehicle

Model Specs

Tamphi 97495447
w.p. + waterborne Ex: 160
tamphi c 1 khant. m -
17/7/24 c \$300m
7-8 days.
c/s rising after repair

Vehicle Condition

Vehicle Status

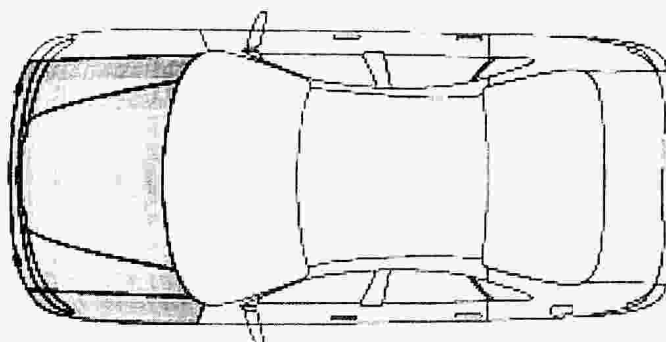
Pre-Accident Damage:

Date of Inspection:

Damage Areas

All ☐

Underbody ☐



Tyres Condition

Tyre Brand	Tread (Left Middle), mm	Tread (Left Outer), mm	Tread (Left Inner), mm	Tread (Right Inner), mm	Tread (Right Outer), mm	Tread (Right Middle), mm	Condition
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Spare Tyre Brand	Tread (Spare), mm
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Labour

Code	Description	Time Base 10 WU/h	Price = 42.00 SGD/h	
			WU	Price SGD
63 29 19 00	R + R FRONT BUMPER COVER INCLUDES: DETACH + REFIT WHEELHOUSE SHELLS		7.0	29.40
63 29 55 52	RENEW FRONT BUMPER COVER (BUMPER COVER REMOVED) INCLUDES: R + R VENT GRILLE, RADIATOR GRILLE, NUMBER PLATE AND WASHER NOZZLES		7.0	29.40
63 33 20 50)	R + R FRONT BUMPER CARRIER (BUMPER COVER AND IMPACT CARRIER REMOVED)		6.0	25.20
63 10 19 50	R + R FRONT BUMPER (IMPACT CARRIER) (BUMPER COVER REMOVED)		3.0	12.60
63 10 55 50	RENEW FRONT BUMPER (IMPACT CARRIER) (REMOVED)		2.0	8.40
94 15 20 50	R + R BOTH HEADLAMPS (FRONT BUMPER COVER REMOVED) DOES NOT INCLUDE: ADJUST HEADLAMPS		9.0	37.80
94 15 55 51	RENEW L/HEADLAMP (REMOVED)		2.0	8.40

Code	Description	WU	Price SGD
94 15 55 51	RENEW R/HEADLAMP (REMOVED)	2.0	8.40
50 22 19 50	R + R LEFT WING BRACKET	1.0	4.20
50 22 19 50	R + R RIGHT WING BRACKET	1.0	4.20
55 22 19 00	REMOVE/REFIT BONNET PANEL	6.0	25.20
55 22 55 50	RENEW BONNET (BONNET REMOVED) INCLUDES: R + R ALL PARTS, ADJUST BONNET	4.0	16.80
01 50 00 ZAX	GFS / GUIDED FUNCTION (READ OUT FAULT MEMORY)	3.0	12.60
55 25 19 50	R + R L/BONNET HINGE	2.0	8.40
55 25 19 50	R + R R/BONNET HINGE	2.0	8.40
94 15 16 50	ADJUST HEADLAMPS	1.0	4.20
Labour Cost		Hrs	WU
Panel / Mechanical Labour		5.80	58.0
Total of Labour			243.60

Paint

Paint Work		Time Basis 10 WU/h	
Code	Description - TWO COAT METALLIC	WU	Price SGD
63 29 61 50	FRONT BUMPER COVER NEW PART PAINTING S1	8.0	33.60
92 72 61 50	L/HEADLAMP WASH TRIM PAINTING	1.0	4.20
92 72 61 50	R/HEADLAMP WASH TRIM PAINTING	1.0	4.20
55 22 61 00	BONNET NEW PART PAINTING S1	22.0	92.40
LE 0475	LEFT BONNET HINGE NEW PART PAINTING S1	2.0	8.40
LE 0476	RIGHT BONNET HINGE NEW PART PAINTING S1	2.0	8.40
51 01 71 13	PAINTING PREPARATION WORK NEW PART S1 METAL (PART/S FITTED)	19.0	79.80
51 01 71 93	PREPARATION FOR PAINT (PLASTIC PARTS) (ASSEMBLY OPERATION)	2.0	8.40
Total Paint		Hrs 5.70	WU 57.0
			Price SGD 239.40

Spare Parts

				prices as at 2015-09-02/23
Code	Description	Part Number	Part Source	Price SGD
1008	AIRCOND CONDENSER	-	Original	bt 500.00
1003	AIRCOND DISCHARGE	-	Original	? 600.00
1002	AIRCOND SUCTION	-	Original	? 600.00
0471	BONNET	8W0 823 029 A	Original	bt 1,800.00
1018	BUMPER CTR BRACE	-	Original	bt 100.00
1024	BUMPER LWR COVER	-	Original	mis 140.00
1025	BUMPER LWR GRILLE	-	Original	mis 130.00
1019	BUMPER SPONGE	-	Original	mis 85.00
1016	BUMPER SUPPOT BKT LH	-	Original	mis 140.00
1017	BUMPER SUPPOT BKT RH	-	Original	mis 140.00
1022	COVER NOZZLE LH	-	Original	mis 60.00
1023	COVER NOZZLE RH	-	Original	mis 60.00
1013	ENGINE LOWER COVER	-	Original	dl 350.00

Code	Description	Part Number	Part Source	Price SGD
1004	FAN MOTOR	-	Original	jm? 1,400.00
0281	FRONT BUMPER COVER	8W0 807 065 C	Original	miz 1,300.00
		GRU		
0257	FRONT NUMBER PLATE	KNPL3	Original	miz 80.00
1030	FRONT SENSOR	-	Original	miz 180.00
1000	FRT BUMPER ABSORBER	-	Original	miz 80.00
0340	FRT BUMPER SUPPORT	8W0 807 113	Original	as 450.00
1020	HEADLAMP NOZZLE LH	-	Original	as 150.00
1021	HEADLAMP NOZZLE RH	-	Original	as 150.00
1005	INTERCOOLER	-	Original	as 650.00
0297	L/F AIR GUIDE GRILLE	8W0 807 681 BA	Original	de 40.00
		SQF		
0321	L/F BUMPER BRACKET	8W0 807 133	Original	de 30.00
0761	L/F WING BRACKET	8W0 821 135 C	Original	bt 30.00
0475	LEFT BONNET HINGE	8W0 823 301 D	Original	as 180.00
0561	LEFT HEADLAMP ASSY	8W0 941 773 A	Original	can? 4,200.00
1028	MOUNT WORKBENCH	-	Original	as 300.00
1001	OIL COOLER	-	Original	as 350.00
1014	PANEL TOP COVER	-	Original	as 85.00
1032	POWER STG FLUID	-	Original	de 60.00
0298	R/F AIR GUIDE GRILLE	8W0 807 682 BA	Original	de 40.00
		SQF		
0322	R/F BUMPER BRACKET	8W0 807 134	Original	as 30.00
0762	R/F WING BRACKET	8W0 821 136 C	Original	as 30.00
1009	RADIATOR	-	Original	as 300.00
1007	RADIATOR FAN	-	Original	jm? 1,400.00
1006	RADIATOR FAN	-	Original	de 250.00
	COWLING	-		
1010	RADITOR LOWER	-	Original	as 280.00
1029	REALIGN CHASSIS FRT	-	Original	as 300.00
0476	RIGHT BONNET HINGE	8W0 823 302 D	Original	as 180.00
0562	RIGHT HEADLAMP ASSY	8W0 941 774 A	Original	can 4,200.00
1031	RUST PROOFING	-	Original	as 40.00
1015	SUPPORT PANEL	-	Original	as 800.00
f: OEM Parts				0.00
n: Non-OEM Parts				22,270.00
u: Used parts				2,227.00
Savings				
Subtotal				
Addition(+10.00%)				
Total				24,497.00

Extras

Code	Description	Price SGD
1026	REFILL AIRCOND GAS -	80.00*
1027	REFILL COOLANT -	80.00*
1033	NUMBER PLATE -	miz 80.00*
1034	BUMPER CLIPS -	as 50.00*
Total Extras		290.00

Final Calculation

	SGD	SGD
Parts	22,270.00	
Addition(+10.00%)	2,227.00	
Total Parts		24,497.00
Labour Time Base 10 WU/h		
Total 58.0 WU X 42.00 SGD/h	243.60	
Total of Labour		243.60
Total Of Extras		290.00
Paint Work Time Base 10 WU/h		
Labour Cost 57.0 WU X 42.00 SGD/h	239.40	
Total Paint Including Material		239.40
Repair Cost Excludes GST		25,270.00
GST (+9.00%)		2,274.30
Repair Cost Included GST		27,544.30

Comments

* - USER SUPPLIED DATA
NN - NO MANUFACTURERS CODE EXISTS
) - WU PARTIAL INCL IN OTHER POSITIONS

Assessment Note

No assessment notes entered.



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	15/07/2024 09:54 (SGT)
Reported by	Actual Driver
Date of Accident	10/07/2024 01:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LITTLE INDIA / FARRER PARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCZ37Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEO CHEE KANG
NRIC No	SXXXX023C
Email Address	teocheekang37@gmail.com
Mobile Phone No	(Phone) +65-83445549
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1400

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00004032401

DRIVER

Name of Driver	BRANDON TEO YONG JIAN
NRIC No	SXXXX277D
Date Of Birth	08/02/1996
Occupation	Outdoor



Driving Pass Date	24/09/2018
Driving experience	5 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89260995
Alt. Phone Number	-
Email Address	BRANDONTEO37@GMAIL.COM
Address	HOUGANG AVE 8 BLK 647
Address complement	#01-205
Postcode	5306471
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Hit by fallen tree / Other objects
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

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 willful 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.

[Signature]
14/7/24
Policyholder's Signature / Date & Time

[Signature] 11/7/24
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature]
Witnessed by Reporting Centre Personnel

Sketch Plan

