

ASS. REC. BY:

REF:

MSG/

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

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: 8153k

IDAC Accident Report: _____ Consistent?: Yes or No

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

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 1-B1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SNW 57734 Yr Regn: 11, 20

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

Truck / Trailer or _____

Make: Mer GLA 200C.G. 1332Colour: M. Gray

A/C: Insured / Std / NI / NA

Sp. Reading: 47487

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WIN247-7872-J 13 4779

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rlm / STD / Rlm or

Tyre Size: F: _____

R: 235/55R18

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 6 mmR/Bal. 7 mmL/Bal. 4 mmL/Bal. 7 mmD.O.A. 13/7/24D.O.I. 25/7/2024

Survey held at _____

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

N/S Rear body

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

Prel. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

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

Transportation:

S - RS - SI

F. P. A. S.

Others

TOTAL

Report Format:

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



TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 1

M/S : MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE P1
1 GATEWAY DRIVE #15-08
WESTGATE TOWER
SINGAPORE 608531

TEL :
ATTN : ACCOUNTS DEPT

FAX : *Not Authorised*
Resumy B4 pain

YOUR REF NO : GBM1331X
CLAIM TYPE : THIRD PARTY
TP INS. CO. : MSIG INSURANCE (SINGAPORE) PTE LTD
ACCIDENT DATE : 13/07/2024
TP VEH REG NO : GBM1331X

ESTIMATE

NO : QUOT202407-000057(00)
DATE : 24/07/2024
POLICY NO : SP2003907937
VEH REG NO : SMW5773U
MAKE/MODEL : MERCEDES BENZ GLA200
SUV PROGRESSIVE
CHASSIS NO : W1N2477872J134779
ENGINE NO : 28291480389869
REG. DATE : 2020

Estimate Repair Cost to Vehicle No : SMW5773U

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Rear door - LH	1	2,565.00	2,565.00
2 Rear door trimboard rivet - LH	20	12.00	240.00
3 Rear door weatherstrip - LH	1	386.00	386.00
4 Rear door protector - LH	1	256.00	256.00
5 Rear door arch garnish - LH	1	256.00	256.00
			3,703.00
		Less 10%	370.30
			3,332.70
LABOUR			
6 To remove & refit LH rear damaged door interior mechanism & glass to new door	1	150.00	150.00
7 To check and rectify wiring system	1	80.00	80.00
8 To panel beat & straighten LH rear door hinges, LH rear fender, including replacement of parts & align where necessary, to refit and adjust the same	1	800.00	800.00
9 To putty & spray paint on affected areas	1	800.00	800.00
10 To apply rust-proofing on replaced and repaired panels	1	80.00	80.00
			1,910.00
		TOTAL	S\$ 5,242.70
		ADD GST @ 9.00%	471.84
		GRAND TOTAL	S\$ 5,714.54

SINGAPORE DOLLAR FIVE THOUSAND SEVEN HUNDRED FOURTEEN AND CENTS FIFTY-FOUR ONLY

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:

FOR TONG LUCK AUTO PTE LTD

AUTHORISED SIGNATURE

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 11:25 (SGT)
Reported by	Actual Driver
Date of Accident	13/07/2024 14:05 (SGT)
Exact Location of Accident	Jln Toa Payoh, Singapore
Additional Location Information	TOWARDS KIM KEAT AVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW5773U

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PTE LTD
Company Reg No	1XXXXX778Z
Email Address	too_tong.tan@mercedes-benz.com
Mobile Phone No	(Phone) +65-98281256
Alternative Phone No	(Office) +65-82821711

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	GLA200 SUV PROGRESSIVE
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	1332

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2003907937

DRIVER

Name of Driver	TANG CHIH HUA
NRIC No	SXXXX344G
Date Of Birth	02/06/1992

SKETCH PLAN

IMPORTANT NOTICE

- 1 Please correctly report the details of the accident to speed up the claims process
- 2 This Form must be **completed by the Policyholder and/or the Authorized 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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

13/06/24 - 15:50 HRS

Witnessed by Reporting Centre Personnel



Sketch Plan

A - SMW5773U
B - GBM1331X

