

ASS. REC. BY:

REF:

AIG/

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.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

03 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:

SKS 26866

Yr Regn:

04, 15

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

Truck / Trailer or

Make:

Toyota

C.C.

1598

Colour

M. Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

315670

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MR053REH104527326

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/55R16

R:

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

TOYO / YOKO or

Front

R/Bal.

P

mm

Rear

R/Bal.

P

mm

L/Bal.

P

mm

L/Bal.

P

mm

D.O.A.

29/7/24

D.O.I.

3/8/2024

Survey held at

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

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

Prell. Report

1)

Date/Time, File Return to?

☐

Final Report

2)

Days Of Repair:

Resurvey No. of Trlp:

Survey Fee:

Transportation

S + RS. SI

Fees

Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format:

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

TOTAL

# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761  
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg  
GST:201001158E RCB NO:201001158E

SKS 2686C  
TP/AIG

M/S : AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY  
#07-16 AIG BUILDING  
SINGAPORE 079120

TEL: 64193000

FAX: 64153727

ATTN: Motor Claim Department

WS Ref: TP/AIG  
Claim Type: Third Party  
Accident Date: 29/07/2024  
TP Veh Reg No: GBD5288J

Estimate No: ES2400649/YISHUN  
Date: 05 Aug 2024  
Policy No: 5098461865-06  
Veh Reg No: SKS2686C  
Make/Model: TOYOTA COROLLA  
ALTIS 1.6L CVT  
Chassis No: MR053REH104527325  
Engine No: 1ZR492055  
Reg. Date: 02/04/2015

## Estimate Repair Cost to Vehicle No :SKS2686C

Description	U/Price	Quantity	List Price	Amount
			<u>S\$</u>	<u>S\$</u>
<b>List Price</b>				
1 FRONT GRILLE	870.30	1 PC	CM 870.30	✓
2 FRONT GRILLE LOGO	68.40	1 PC	na 68.40	✓
3 FRONT GRILLE CLIPS	5.00	4 PCS	na 20.00	✓
4 FRONT BUMPER	878.30	1 PC	na/na 878.30	✓
5 FRONT BUMPER CLIPS	4.00	6 PCS	na 24.00	✓
			1,861.00	
		Less 25%	465.25	1,395.75
<b>Labour</b>				
6 REMOVE & REFIX FRT BUMPER,GRILLE,KNOCK & REPAIR FRT BUMPER REINFORCEMENT,FRT SUPPORT PANEL AND REALIGN THE SAME	400.00	1 LA	400.00	300
7 PUTTY & RESPRAY ON FRT BUMPER,FRT BONNET,SUPPORT PANEL	600.00	1 LA	600.00	540
			1,000.00	
		Less 25%	250.00	750.00
			Total	S\$ 2,145.75
			Add GST @ 9%	193.12
			Total Amount Payable	S\$ 2,338.87

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 Cheng Hoe Motor 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	29/07/2024 19:06 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	29/07/2024 09:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NICOLL DR
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number SKS2686C

### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG JUN HAO
NRIC No	SXXXX900B
Email Address	winsonwongjunhao@gmail.com
Mobile Phone No	(Phone) +65-90223062
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	TOYOTA COROLLA ALTIS 1.6L CVT
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	1598

### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5098461865-06

### DRIVER

Name of Driver	WONG JUN HAO
NRIC No	SXXXX900B
Date Of Birth	06/03/1986
Occupation	Indoor

Pass Date  
Driving experience  
Gender  
Mobile Number  
Alt. Phone Number  
Email Address  
Address  
Address complement  
Postcode

Is the driver the policyholder?  
If No, Relationship of the Driver with the Insured  
Does Driver Own Other Vehicles?  
Vehicle Registration Number of Other Vehicle Owned by Driver  
Insurance Company of Other Vehicle Owned by Driver

27/04/2009  
15 YEARS AND 3 MONTHS  
Male  
(Phone) +65-90223062

winsonwongjunhao@gmail.com  
BLK 694C WOODLANDS DR 62 #03-58

733694  
Yes  
No

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident  
Weather Conditions  
Road Surface

Hit and run / Vandalism / Damaged whilst parked  
Clear  
Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? No  
Number of vehicles involved in the accident 2  
Was anybody injured in the Accident? No  
Was any injured conveyed to hospital by ambulance? -  
Was any other vehicle or property damaged? Yes  
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 SKETCH ATTACHED

#### ATTACHMENT(S)

Are accident photos available for attachment? Yes  
Was there any video captured by Car Camera? Yes  
Reasons for not uploading a video of the accident WILL SUBMIT TO INCOME

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBD5288J  
Vehicle Manufacturer -  
Vehicle Model -  
Vehicle Variant -  
Vehicle Colour -  
Vehicle Category Commercial vehicle  
Name of Driver LIM AH GUAN



Describe Circumstance of the Accident

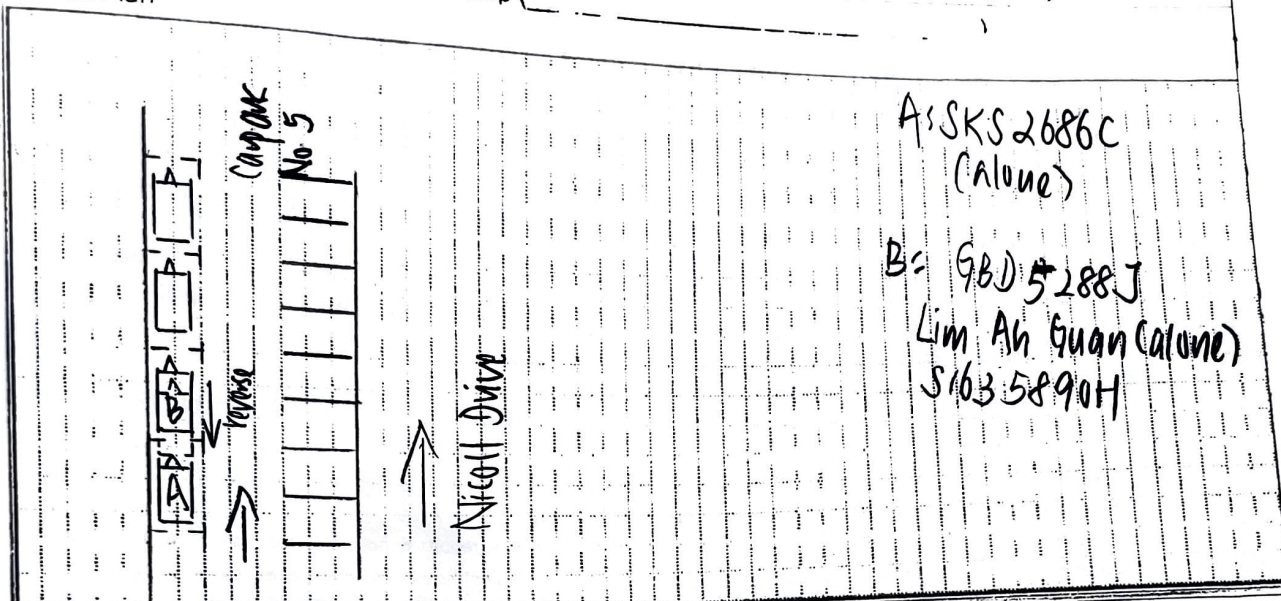
NOTE: PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14 DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

( ) Claim Own Policy

( ☒ ) Claim Third party

( ) Reporting Only

Sketch Plan




Vehicle No: SKS 2686C (Alone)

Date & Time: 29/07/24 @ 0938 (Clear day)

I was scrolling through my phone and when i realised motor lorry GBD 5288J seems to reverse nearer to my parked vehicle, tried to tap my horn to alert but in vain. Motor lorry GBD 5288J have reversed and hit onto my parked car front portion. Upon alighting, driver of GBD 5288J offered to compensate the damage at \$600 which i declined and advised to proceed with insurance claim. That's all. No injuries involved.


Declaration

I/We declare the foregoing particulars are true in every respect.

 - 29/7/24

Policyholder's Signature / Date & Time

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

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