

ASS. REC. BY:

REF: LPL

ASSIGNMENT

From: _____

Date: _____

Estimated Cost: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s CLM/K FHHof 1984

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: 83871

IDAC Accident Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: 04 days

Res.: Yes or No

Lum Sum: 1.3.1%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SKW 89TYr Regn: 07.20Type: ☒ M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /Truck / Trailer or AMake: Porsche Panamerac.c. 2995Colour: M. Blue

A/C: Insured / Std / NI / NA

Sp. Reading: 91734

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WPO88897ZLL102360Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD ARM orTyre Size: F: 255/43R19R: 295/40R19BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 8 mmR/Bal. 7 mmL/Bal. 8 mmL/Bal. 7 mmD.O.A. 6/8/24D.O.I. 16/9/2024

Survey held at _____

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

The U/C / 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 (\$ _____)

Transportation: _____

S + RS. \$ _____

: Fuel \$ _____

: Others \$ _____

Report Format :

ump Sum / I.B.I. (\$ _____)

TOTAL

来發 (明記) 摩哆有限公司

LAI HUAT (MENG KEE) MOTOR PTE LTD

160 Sin Ming Drive #04-01, #04-02 & #07-03 Singapore 575722 Tel: 6453 8110 Fax: 6459 6267
GST No: M2-0128609-3
UEN: 199407592C

ESTIMATE

EST. No EST0035447
Lee Kar Wai (Li Jiawei)

Page 1 of 1
Your ref. TP-GBH 1311E Lonpac
Job No. 74638
Our ref. 24.08.10
Payment
Date 8/8/2024

Attn

Vehicle No SKW 89T
Vehicle Model : Porsche Panamera
Accident on ... 6/8/2024

Not Notation
Resurvey B4 paint
4 days

Quantity	Unit	Description	Unit price	Disc. pct.	Amount
Supply of Parts-Nett item:					
1.00	Pc	Tailgate	6,155.52	10.00	5,539.97 <i>✓</i>
1.00	Pc	Rear bumper	<i>cm</i> 4,127.56	10.00	3,714.80 <i>✓</i>
1.00	Pc	Rear bumper lower spoiler	<i>nd/bm</i> 1,783.52	10.00	1,605.17 <i>✓</i>
1.00	Pc	Rear bumper reflector LH	151.56	10.00	<i>cm</i> 136.40 <i>✓</i>
1.00	Pc	Rear Panamera emblem	413.84	10.00	<i>cm</i> 372.46 <i>✓</i>
1.00	Pc	Rear windscreen moulding	480.00	10.00	432.00 <i>✓</i>
Labour & Misc:					
1.00		To remove+refix rear windscreen	350.00		350.00 <i>250 ✓</i>
1.00		To supply sealant	40.00		<i>cm</i> 40.00 <i>✓</i>
1.00		To remove+renew parts	650.00		650.00 <i>500 ✓</i>
1.00		To spray paint	800.00		800.00 <i>600 ✓</i>

Sub-Total 13,640.80
GST 9.00% 1,227.67
Total *SS* 14,868.47

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

Date:

司拥有最先进的 CAROLINER MARK IV 机械，可提供给多种款式的身及给于快速与准确的测量方式和大铁修理。
，还有先进的 SAICO Deluxe 喷漆烘炉。
r services include the latest and reliable CAROLINER MARK IV repair bench, draw-aligner and the support
y system to provide accurate re-alignment and speedy repairs. We also provide the new and advanced SAICO
uxe oven heater for re-spraying all motor vehicles."

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	06/08/2024 18:02 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	06/08/2024 16:25 (SGT)
Exact Location of Accident	Lentor Ave, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW89T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Lee Kar Wai (Li Jiawei)
NRIC No	SXXXX194H
Email Address	benleewai@gmail.com.sg
Mobile Phone No	(Phone) +65-88698989
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Panamera
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	2995
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	-

DRIVER

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 willful misrepresentation or withholding of material facts may affect 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.

6. 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

-6 AUG 2024

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

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

Jenny Lim

Sketch Plan

