

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s Hui Yang

Insured: _____

Policy No. _____

Claims No. _____

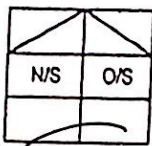
Sum Insured: _____ Excess: _____

(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 Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 06 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: SMS 59476 Yr Regn: 1 20

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

Truck / Trailer or _____

Make: Honda Verel c.c. 1498

Colour: M. Brown A/C: Insured / Std / NI / NA

Sp. Reading: 4038 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: RU3 1324338

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60R16

R: _____

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

TOYO / YOKO or _____

Front Rear

R/Bal. 9 mm R/Bal. 9 mm

L/Bal. 9 mm L/Bal. 9 mm

D.O.A. 10/6/20 D.O.I. 12/6/2020

Survey held at _____

Des. of Damages: Frit / 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? : Prel. Report

1) : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

S - RS. \$ _____

Fuel \$ _____

Others \$ _____

TOTAL

Report Format :

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

輝陽汽車有限公司
HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) . Fax: 64514658
GST Reg No. 201629438M

Chuan Teapin.
Vik In
Kenneth
12/06/20

11/06/2020

Owner: SKYWAY MOTOR PTE LTD

Not Authorized
6/1 Sup & ?
Gday, Purvey After Paint

ESTIMATE TO REPAIR HONDA VEZEL HYBRID - SMS5947G

1pc	rear tailgate	M	\$ 1,150.90	✓
10pcs	rear tailgate spoiler clip @\$8.00	M	\$ 80.00	✓
2pcs	rear tailgate hinge @\$53.60	R	\$ 107.20	✓
1pc	rear tailgate "HONDA" logo	M	\$ 27.00	✓
1pc	rear tailgate "VEZEL" emble	M	\$ 55.10	✓
1pc	rear tailgatr "HYBRID" emblem	M	\$ 68.50	✓
1set	rear tailgate windscreen moulding	M	\$ 120.00	✓
1pc	rear tailgate outer garnish	M/DI	\$ 350.30	✓
1pc	rear tailgate outer handle sensor		\$ 285.50	?
2pcs	rear tailgate reflector @\$420.80	CM	\$ 841.60	✓
1pc	rear tailgate inner lock	R	\$ 198.40	✓
1pc	rear tailgate inner rubber	D/I/R	\$ 135.20	✓
1pc	rear tailgate inner garnish	B	\$ 252.70	✓
1pc	rear tailgate inner handle garnish	M	\$ 20.70	✓
2pcs	rear tailgate absorber @\$180.90	S	\$ 361.60	X
2pcs	rear taillamp @\$560.60	all CM	\$ 1,121.20	✓
2pcs	rear taillamp panel @\$156.20	N/S	\$ 312.40	?
1pc	rear bumper	B	\$ 986.30	✓
2pcs	rear bumper side bumper @\$195.20		\$ 390.40	?
2pcs	rear bumper side retainer @\$24.80	S	\$ 49.60	X
2pcs	rear bumper reflector @\$151.50	S	\$ 303.00	X
1pc	rear end panel	B	\$ 530.90	✓
1pc	rear end panel inner garnish	B	\$ 109.90	✓
1pc	rear end panel inner sensor		\$ 195.50	?
1pc	rear end panel outer sensor		\$ 180.25	?
2pcs	rear fender inner garnish @\$521.90		\$ 1,043.80	?
2pcs	rear fender protector @\$195.00	B	\$ 390.00	✓
1pc	rear spare trye cardboard	S	\$ 350.40	X
1pc	rear spare trye inner garnish box	M/DI	\$ 420.80	✓
1pc	rear spare trye lower garnish		\$ 181.90	?
			\$ 10,621.05	
	less 20%		\$ 2,124.21	
	balance c/f		\$ 8,496.84	



輝陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) . Fax: 64514658
GST Reg No. 201629438M

11/06/2020

Owner: SKYWAY MOTOR PTE LTD

ESTIMATE TO REPAIR HONDA VEZEL HYBRID - SMS5947G

	balance b/f	\$ 8,496.84
	1set rear reverse sensor	200SN Net s.nett \$ 280.00
	1set rear number plate & casing	Net s.nett \$ 50.00 45SN
	1pc rear parking camera	s.nett \$ 320.00 7
	remove & refix rear windscreen glass	\$ 120.00 ✓
	wiring	\$ 250.00 2ol
	tuffkote	\$ 280.00 6ol
	sealant	\$ 120.00 40SN
	spray painting	\$ 1,600.00 100ol
	labour charges	\$ 1,600.00 80ol
	Total	<u>\$ 13,116.84</u>



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 Authorised 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 Report	11/06/2020 13:11
Date Of Accident	10/06/2020 18:00
Exact Location Of Accident	TPE PUNGGOL EXIT TOWARDS SLE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS5947G
Insured/Policyholder	
Name Of Registered Owner	SKYWAY MOTOR PTE LTD
Co Reg No	1XXXXX194N
Email Address	JENNIFER@SKYWAY.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63336333

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL HYBRID 1.5X AUTO
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A28795104MCX
Cover Note Number	

Driver

Name of Driver	NG PUI FAH @JOHNSON NG
NRIC No	SXXXX291C
Date Of Birth	09/12/1967
Occupation	INDOOR
Date Of Driving Pass	22/03/1988
Driving Experience	32 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96360818
Fax Number	
Contact Number	
EEmail Address	BMW01SG@YAHOO.COM.SG

Address 16 SIMEI RISE #02-37
 Postcode 528807
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - HIRER
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
 Weather Conditions RAINING
 Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles (including own vehicle) involved in the accident 2
 Was any body injured in the Accident? NO
 Was any injured conveyed to hospital by ambulance? NO
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 2
 Passenger 1 NAME: : MR
 GENDER: : MALE

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED.

Attachment(s)

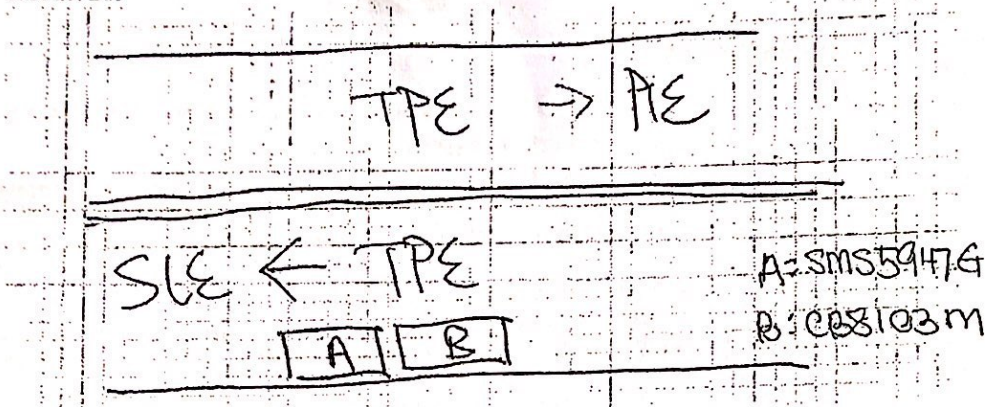
Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number CB8103M
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver LEE AH BAH
 NRIC/Passport Number SXXXX078B
 Contact Number 97830724
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident occurred at about 6pm, 10/06/2020 along TPE towards SLE, abt 300m before Punggol Road exit.

It was raining at time of events. Slight traffic at Punggol Road exit. I stopped when car in front queuing to exit Punggol Road.

Vehicle A is SMS 59476 & Vehicle B is CB 8103M

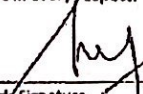
Vehicle B knock into the back of Vehicle A when vehicle A stopped.


Camera footage recorded. Vehicle A damaged at back of car. Vehicle B slight damaged at front.

DECLARATION

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


 Policyholder's Signature
 Date & Time:


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:


 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

11/06/2020
 12:45pm