

ASS. REQ. BY:

REF:

AG/2000 8930/KK

C

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.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 1-131 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SKT 7939KYr Regn: 06, 15Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or \_\_\_\_\_

Make: Mercedes

3

c.c

1496

Colour: M. White

A/C: Insured / Std / NI / NA

Sp. Reading: 144614

T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JM6BM42A:8G0312157Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: \_\_\_\_\_

R: \_\_\_\_\_

205/60R16

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

TOYO / YOKO or \_\_\_\_\_

Front

Rear

R/Bal. 8 mmR/Bal. 8 mmL/Bal. 8 mmL/Bal. 8 mmD.O.A. 28/6/20D.O.I. 3/7/2020

Survey held at \_\_\_\_\_

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

O/S in

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

Date / Time Action / Instruction

13/7 @ 1923-20 Car found

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS. \$

Fees

Others

TOTAL

Add Fee: ☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

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



**ESTEEM  
PERFORMANCE**

## ESTEEM PERFORMANCE PTE LTD

Blk 5033 Ang Mo Kio Industrial Park 2, #01-259/01-251, Singapore 569536.

Tel : 6484 1221

Fax : 6484 7829

385 Sin Ming Drive (Inside Vicom) Singapore 575718.

Tel : 6753 2112

Fax : 6451 0394

Co. Reg No. : 200005485N

GST Reg No. : 20-0005485-N

### Repair Estimates

SKT 7939 K

*Not Authorized  
Respray B4 paint*

Parts	(a) Cost / List Price Items	\$	2,711.00
	Plus/Less 20%	\$	542.20
	<b>Total of Cost / List</b>	<b>\$</b>	<b>2,168.80</b>
	(b) Nett Price Items		
	Less		
	<b>Total of Nett Item</b>		
	(c) Special Nett Items		
<b>Total Parts Cost</b>			
Labour		\$	1,870.00
<b>Total</b>		<b>\$</b>	<b>4,038.80</b>

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:

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Kenneth

Company : LKK

Survey conducted on : 31/7/20 at \_\_\_\_\_

#### Remarks By Surveyor

(a) The repair of this vehicle is ~~authorized~~ / is not authorized until further notice.

(b) Recommended Days of Repair : 02 day(s)

(c) Resurvey : Required / ~~Not Required~~

(d) Excess : \$ \_\_\_\_\_

(e) Signature of surveyor : Pe Date: 31/7/20





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### Spare Parts

Vehicle No. : **SKT 7939 K**  
 Make & Model : **MAZDA 3**  
 Chassis No : **JM6BM42A8G0312157**

Submit By : **SHANICE**  
 Year Manufacture : **2015**  
 Engine No. :

### Cost / List

S/No.	Part Description	Qty	Unit Price	Price	Disposition by Surveyor
1	Headlamp RH <i>CRH</i>	1	\$812.00		✓
2	Front bumper <i>Buc / mgun</i>	1	\$972.00		✓
3	Front bumper clip <i>12</i>	10	<del>\$5.00</del> <i>50.00</i>		✓
4	Front bumper reinforcement <i>12</i>	1	\$594.00		X
5	Front bumper side retainer LH <i>12</i>	1	\$20.00		X
6	Front bumper side retainer RH <i>012</i>	1	\$20.00		✓
7	Front bumper bracket LH <i>12</i>	1	\$16.00		X
8	Front bumper bracket RH <i>12</i>	1	\$16.00		X
9	Front bumper sponge	1	-		
10	Fog lamp RH <i>12</i>	1	\$166.00		X
11	Fog lamp garnish RH <i>12</i>	1	\$45.00		X
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.





Co. Reg No. : 200005485N      GST Reg No. : 20-0005485-N

Vehicle No.	: <u><b>SKT 7939 K</b></u>	Submit By	: <u><b>Carmen Lim</b></u>
Make & Model	: <u>MAZDA 3</u>	Year of Manufacture	: <u>2015</u>

*Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.*

## 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	29/06/2020 17:18
Date Of Accident	26/06/2020 16:45
Exact Location Of Accident	BLK 328 HOUGANG AVE 5 LOT #7
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT7939K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXX651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93264977
Alternative Phone No	OFFICE-93264977

### Vehicle Particulars

Manufacturer	MAZDA
Model	SALOON
Exact Purpose for which vehicle was being used at time of accident	NEA SMOKEY CAMARA TEAM
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 CAR

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	20-ML000244-R00
Cover Note Number	

### Driver

Name of Driver	ABDULLAH BIN BORHAN
NRIC No	SXXXX918C
Date Of Birth	12/06/1968
Occupation	INDOOR
Date Of Driving Pass	14/02/1989
Driving Experience	31 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93264977
Fax Number	
Contact Number	
EMail Address	ABDULLAHBORHAN6881@GMAIL.COM



### SKETCH PLAN

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 referral 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.
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/authorities (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;


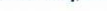


(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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      Witnessed by Reporting Centre Personnel  
 \_\_\_\_\_  
 Tricia Leong

### Sketch Plan 4

BLK 328  
HOVERING  
AVE 5

~~29 JUN 2021~~