

ACC. REC. BY: R. Paul

REF: CS/AWA 20009031/R15f3

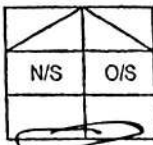
529A

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SLU 64537
 at Workshop m/s ET402
 of BUKIT BAROK CRESCENT
 Insured: AWAC
 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: S9K
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Veh No: SLU 64537 Yr Regn: 2017 / PK
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: HYUNDAI ELANTRA 1.6 GLS c.c. 1591
 Colour: Grey A/C: Insured / Std / NI / NA
 Sp. Reading: 41935 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KM4D841CMJU591182
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Order / Jammed / Leaked / Burnt or
 Brake: Order / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 225/45ZR17
 R: 225/45ZR17
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or: FOKSEN
 Front: _____ Rear: _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 22/08/2020 D.O.I. 26/08/2020
 Survey held at ET402
 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
	<u>Repr limit - 15K</u>
	<u>02/09/2020 @ 17:15 PM CHECKED WITH JACKSON, PENDING LIABLITY FROM INSURANCE, VEHICLE NOT YET REPAIR.</u>

Date/Time, File Pass to? 02/09/2020
 1) TYPIST
 Date/Time, File Return to? _____
 2) _____

☒ : Preli. Report
☐ : Final Report

Days Of Repair: 12
 Resurvey No. of Trip: _____

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

Survey Fee: _____
 Transportation: _____
 S + RS. SI _____
 Photos _____
 Others _____
 TOTAL _____

Rep. Format: PRELI
 Lump Sum / L.S. (\$) _____

PLEASE ARRANGE TO SURVEY
VEHICLE AT 30 BUKIT BATOK
CRESCENT (S 658075)

Selamatshahh
CLAIM DEPARTMENT
DID : 66547519
FAX :

Date : 26 08 2020

To : ALLIED WORLD ASSURANCE COMPANY, LTD

ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : LIM FUI FONG

: AXA INSURANCE PTE LTD

Certificate No : P2044701

Accident Date : 22/08/2020

Vehicle No : SLU-6453-J

Make & Model : HYUNDAI ELANTRA AD 1.6 GLS AT

ESTIMATED REPAIR COST DETAILS

Excess : 0.00

Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
-----	-------------	-------------------	---------------

List Item

1	REAR BUMPER <i>for</i> ✓	498.10
1	REAR BUMPER REINFORCEMENT <i>bt</i> ✓	394.80
2	REAR BUMPER REFLECTOR <i>scd</i> ✓	135.80
2	REAR BUMPER RETAINER <i>neu</i> ✓	124.20
10	REAR BUMPER CLIPS <i>neu</i> ✓	50.00
1	END PANEL <i>bt</i> ✓	579.60
1	END PANEL TOP GARNISH <i>de</i> ✓	141.60
1	SPARE TYRE BOARD <i>X</i>	296.40
2	TAILLAMP RH LH <i>ca</i> ✓	785.20

Date : 26 08 2020

To : ALLIED WORLD ASSURANCE COMPANY, LTD

ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : LIM FUI FONG

: AXA INSURANCE PTE LTD

Certificate No : P2044701

Accident Date : 22/08/2020

Vehicle No : SLU-6453-J

Make & Model : HYUNDAI ELANTRA AD 1.6 GLS AT

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
2	TAILLAMP PANEL RH/LH <i>bt ✓</i>	386.20	
1	BOOT LID <i>bt ✓</i>	1,782.40	
1	BOOT LID LOGO <i>ner ✓</i>	59.10	
1	EMBLEM - ELANTRA <i>ner ✓</i>	61.20	
1	EMBLEM - S <i>ner ✓</i>	38.20	
1	BOOT LID WEATHERSTRIP <i>ner ✓</i>	162.50	
2	BOOT LID HINGE ?	288.60	
1	BOOT LID LOCK <i>bt ✓</i>	161.20	
1	BOOT LID LOCK STRIKER <i>bt ✓</i>	55.30	
2	BOOT LID LAMP RH/LH <i>bt ✓</i>	779.80	

Date : 26/08/2020

To : ALLIED WORLD ASSURANCE COMPANY, LTD

ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : LIM FUI FONG
: AXA INSURANCE PTE LTD

Certificate No : P2044701

Accident Date : 22/08/2020

Vehicle No : SLU-6453-J

Make & Model : HYUNDAI ELANTRA AD 1.6 GLS AT

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
2	REAR NUMBER PLATE LAMP ?	128.40	
1	REAR VIEW CAMERA ?	525.50	
1	REAR FENDER RH <i>buc</i>	1,768.30	
1	REAR FENDER LH <i>buc</i>	1,768.30	
1	REAR WINDSCREEN GLASS ? <i>photo</i>	817.20	
1	REAR WINDSCREEN MOULDING <i>re</i>	98.20	
1	REAR FENDER INNER TRIM RH <i>de</i>	247.90	
1	REAR FENDER INNER TRIM LH <i>de</i>	247.90	
1	SPARE TYRE PANEL		
	RESTORE		

Date : 26/08/2020

To : **ALLIED WORLD ASSURANCE COMPANY, LTD**
ESTIMATION

Attn : **Motor Claim Department**

FAX :

Owner : LIM FUI FONG

: AXA INSURANCE PTE LTD

Certificate No : P2044701

Accident Date : 22/08/2020

Vehicle No : SLU-6453-J

Make & Model : HYUNDAI ELANTRA AD 1.6 GLS AT

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	Sub Total	12381.90	
	Discount 20% On Parts	(2476.38)	
	Special Nett Item		
1	REVERSE SENSOR <i>re</i> ✓	220.00 ✓	
1	REAR NUMBER PLATE <i>bl</i> ✓	35.00 ✓	
1	REAR WINDSCREEN SEALANT <i>re</i> ✓	50.00 ✓	
1	END PANEL SEALANT <i>re</i> ✓	50.00 ✓	
	Sub Total	355.00	
	Labour & Misc		
	LABOUR TO FACILITATE REPAIR	1,980.00	1,980.00 1600

Date : 26/08/2020

To : **ALLIED WORLD ASSURANCE COMPANY, LTD**
ESTIMATION

Attn : **Motor Claim Department**

FAX :

Owner : LIM FUI FONG

: AXA INSURANCE PTE LTD

Certificate No : P2044701

Accident Date : 22/08/2020

Vehicle No : SLU-6453-J

Make & Model : HYUNDAI ELANTRA AD 1.6 GLS AT

ESTIMATED REPAIR COST DETAILS

Excess : 0.00

Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
	TO RESPRAY AFFECTED AREAS	1,500.00	1200
	TO PULL AND STRAIGHTEN REAR CHASSIS PANEL	400.00	200
	TO REMOVE AND TRASFER BOOT LID COMPONENTS	200.00	80
	TO REMOVE AND REFIT REAR WINDCSREEN GLASS	120.00	
	TO REMOVE AND REFIT REAR SEATS AND FITTINGS TO ASSIST REPAIR	200.00	80
	RUST PROOFING	100.00	7
	TOWING CHARGES	50.00	
	TO CHECK AND RECONNECT ALL NECESSARY WIRINGS	50.00	

Date : 26/08/2020

To : ALLIED WORLD ASSURANCE COMPANY, LTD
ESTIMATION

Attn : Motor Claim Department

FAX :

Owner : LIM FUI FONG

: AXA INSURANCE PTE LTD

Certificate No : P2044701

Accident Date : 22/08/2020

Vehicle No : SLU-6453-J

Make & Model : HYUNDAI ELANTRA AD 1.6 GLS AT

ESTIMATED REPAIR COST DETAILS

Excess : 0.00 Add Excess : 0.00

QTY	DESCRIPTION	REPAIRER AMT (\$)	SURVEYOR APP.
-----	-------------	-------------------	---------------

Sub Total

4600.00

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:

14,860.52

Remarks:

(12 days / p/p) Resurvey before paint

SUB TOTAL

GST 7.0 %

1,040.24

TOTAL

15,900.76

Surveyor's name: Rasul - Hp 90010068

Principal's name: LIM FUI FONG

Survey Date & Time: 26/08/2020 @ 1635



Victory Recovery (Business Reg No.: 53096358B)
65 Teban Gardens Rd #23-617, Singapore 600065.
Mobile: 9618 0311 Fax: 6267 8996

CASH /
W.O. No. 107246

TOW JOB WORKS ORDER

M ETHOSZ PROTECT Svc Date 24/08/20
Car Make/Model Hy / ELANTRA Vehicle No. 3LU 6453
M'ship/NRIC No./Card No. _____ Contact No. 9070 081
Time - Rec'd 13:31 Arrived _____ Completed _____
Amount Charge S\$ 50 Tow Truck No YG 6835
Destination (from) KOMODO (to) ETHOSZ (BB)
Remark (if any) _____

Tow Driver's Signature TAN Member's Signature LEE CHOW SIN

<input type="checkbox"/> Change Tyres & Towing	<input type="checkbox"/> Using King Dolley	<input type="checkbox"/> Use Car Carrier
<input type="checkbox"/> Basement / Multi Carpark	<input type="checkbox"/> Low Spoiler / Low Oil Sump	<input type="checkbox"/> Release Brake / Shaft
<input type="checkbox"/> Causeway / 2nd Link	<input checked="" type="checkbox"/> Accident / Over-turn	<input type="checkbox"/> Loaded

Note : The owner or his representative is required to follow along to the towing destination, failing which the tow operator shall not be liable for any alleged damages to the car nor missing items from the same. Vehicle is towed at owner's risk. The tow operator accepts no responsibility for any damages to the owner's vehicle whilst being towed.

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 22/08/2020 15:19
Date Of Accident 22/08/2020 10:10
Exact Location Of Accident T-JUNCTION OF SEMBAWANG ROAD & YISHUN AVE 5
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLU6453J
Insured/Policyholder
Name Of Registered Owner LIM FUI FONG
NRIC No SXXXX529A
Email Address ERICALIM26@YAHOO.COM.SG
Mobile Phone No (LOCAL) +65-91706918
Alternative Phone No OTHERS-91706918

Vehicle Particulars

Manufacturer HYUNDAI
Model ELANTRA AD 1.6 GLS AT
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 CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number P2044701
Cover Note Number

Driver

Name of Driver CHONG YIH PIN
NRIC No SXXXX191D
Date Of Birth 23/09/1994
Occupation INDOOR
Date Of Driving Pass 15/07/2013
Driving Experience 7 YEARS AND 1 MONTH
Gender MALE
Mobile Number (LOCAL) +65-92366642
Fax Number
Contact Number
Email Address YIHPIN@HOTMAIL.SG

Address	BLK 204 JURONG EAST ST 21 #05-247
Postcode	600204
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	CLEAR
Road Surface	DRY

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)	1

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

KINDLY REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD4883L
Vehicle Make/Model/Colour	ISUZU
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ZHAO PANPAN
NRIC/Passport Number	GXXXX536L
Contact Number	97563835
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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. 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 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/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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

22/8/2020
1512 hr

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

22/8/2020
1512 hr

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

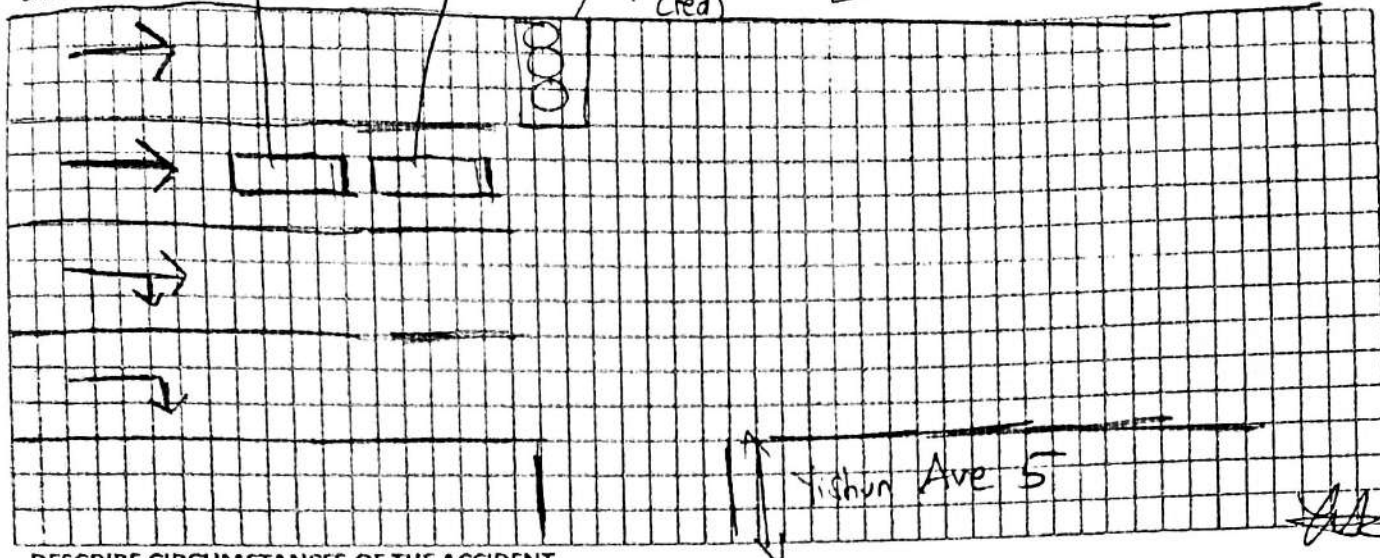
XD4883L

SLU6453J

Sembawang Road

SKETCH PLAN

traffic light (red)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was moving along Sembawang Road towards Sembawang I stopped for a red light. The lorry behind me knocked into the rear of my vehicle.

AA

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- | | |
|---|---------------------------------|
| | - Reporting Only |
| | - Claim OD |
| ✓ | - Claim TP |
| | - Claim OD/TP at other workshop |

DECLARATION

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

Policyholder's signature

Date & Time

Driver's Signature

(If driver not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name:

Nric/Fin No.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	529A

Vehicle No.:	SLU6453J
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Aug 2020
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	G4FGHU830751
Chassis No.:	KMHD841CMJU591182
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$11,981.00
Original Registration Date:	09 Dec 2017
First Registration Date:	09 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$11,981.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	08 Dec 2027
PARF Rebate Amount:	\$8,985.00

COE Expiry Date:	08 Dec 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$47,112.00
COE Rebate Amount:	\$34,309.00
Total Rebate Amount:	\$43,294.00

The information contained herein is correct as at 26 Aug 2020

OK

Silver



Merimen e-Claims



Used 2017 Hyundai Elantra 1.6A



PARF/COE

mart.com/used_cars/info.php?ID=921457&DL=2690

Hyundai Elantra 1.6A GLS

Overview

Financial

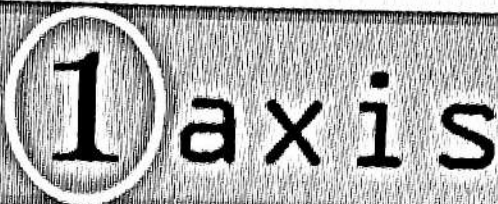
Accessories

Similar

Research

Photos

Map



Price \$56,800

Depreciation ⓘ
\$7,410 /yr
View models with similar depreReg Date 22-Jul-2017
(6yrs 10mths 25days COE left)

Mileage 27,000 km (8.7k /yr)

Manufactured ⓘ 2017

Road Tax ⓘ \$738 /yr

Transmission Auto

Dereg Value ⓘ \$37,988 as of today (change)

OMV ⓘ \$11,250

COE ⓘ \$42,801

ARF ⓘ \$11,250

Engine Cap 1,591 cc

Power 93.8 kW (125 bhp)

Curb Weight ⓘ 1,345 kg

No. of Owners ⓘ 1

Type of Vehicle Mid-Sized Sedan

Features

1.6L DOHC 16V Dual CVVT Engine With 125 BHP, 6 Speed CVT Auto, ABS, SRS Airbags, Multi Function Steering.
View specs of the Hyundai Elantra (2016-2018)