

ASS. REC. BY:

REF:

Smo/200097791KV

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:

05

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:

GBH 31886 Yr Regn: 04, 18

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

Truck / Traller or

Make:

Toy Hiace c.c. 2882

Colour:

h. Blue A/C: Insured / Std / NI / NA

Sp. Reading

107873 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTFH T02P 5.01242293

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: Hankook 195 R15 X8

R:

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

TOYO / YOKO or

Ultima

Front

Rear

R/Bal.

2 mm

R/Bal.

9 mm

L/Bal.

8 mm

L/Bal.

9 mm

D.O.A.

10/9/20

D.O.I.

14/9/2020

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

1)

☐

: Final Report

Date/Time, File Return to?

2) 24/9/20-Typist

Days Of Repair: 5

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + R.S. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format: TP

Lump Sum H.B.H: (\$ 4950)



YEE AUTO PTE LTD

160 Sin Ming Drive #02-17/#07-12 Sin Ming AutoCity Singapore 575722

Tel: 6457 5768 Fax: 6252 8459 Mobile: 9687 4031

Email: yeeautopte ltd@gmail.com

Registration No.: 201719251W GST No: 201719251W

M/S : Somp Insurance Singapore Pte Ltd
50 Raffles Place
#03-03 Singapore Land Tower
Singapore 048623

Estimate No: ES2000085

Date: 12 Sep 2020

Policy No:

Veh Reg No: GBH3188G

Make/Model: TOYOTA HIACE VAN
TURBO 5DR MT

Chassis No: JTFHT02P500242293

Engine No: 1KD2796523

Reg. Date: 24/04/2018

ATTN: Motor Claim Department

Your Ref No: -

Claim Type: Third Party

Accident Date: 10/09/2020

TP Veh Reg No: SBQ2899Y

Not Authorized

6/1 Sep 8

Recovery After Paint

5 days

Estimate Repair Cost to Vehicle No :GBH3188G

Description	U/Price	Quantity	List Price	Amount
			SS	SS
Net Price				
1 REVERSE SENSORS	280.00	1 SET	280.00	200.00
2 REAR WINDSCREEN SEALANT	60.00	1 PC	60.00	40.00
3 REAR FLOOR WOODEN PLANK	450.00	1 PC	450.00	?
4 REVERSE CAMERA	350.00	1 PC	350.00	X
5 SPEED LIMIT STICKER '70KM/H'	20.00	1 PC	20.00	12.00
			1,160.00	1,160.00
Spare Parts				
6 REAR BUMPER	625.50	1 PC	625.50	✓
7 REAR BUMPER BRACKET - LH	32.20	1 PC	32.20	✓
8 REAR BUMPER BRACKET - RH	32.20	1 PC	32.20	X
9 REAR BUMPER SIDE RETAINER - LH	48.40	1 PC	48.40	✓
10 REAR BUMPER SIDE RETAINER - RH	48.40	1 PC	48.40	X
11 REAR BUMPER CLIPS	60.00	1 SET	60.00	✓
12 REAR END PANEL	585.00	1 PC	585.00	✓
13 REAR END INNER PANEL	543.50	1 PC	543.50	?
14 REAR END PANEL TOP PLATE	175.10	1 PC	175.10	✓
15 TAIL LAMP RH	295.20	1 PC	295.20	X
16 REAR TAILLAMP LOWER GARNISH - LH	95.60	1 PC	95.60	X
17 REAR TAILLAMP LOWER GARNISH - RH	95.60	1 PC	95.60	X
18 TAIL LAMP LH	295.20	1 PC	295.20	✓
19 REAR TAILLAMP PANEL - LH	242.00	1 PC	242.00	?
20 REAR FLOOR PANEL	1,455.30	1 PC	1,455.30	X
21 REAR TAILGATE	1,855.60	1 PC	1,855.60	✓
22 REAR TAILGATE ABSORBER - LH	287.40	1 PC	287.40	X
23 REAR TAILGATE ABSORBER - RH	287.40	1 PC	287.40	X
24 REAR TAILGATE WEATHERSTRIP	155.60	1 PC	155.60	50.00
25 REAR TAILGATE HINGE - LH	110.00	1 PC	110.00	X
26 REAR TAILGATE HINGE - RH	110.00	1 PC	110.00	X
27 REAR TAILGATE OUTER GARNISH	225.30	1 PC	225.30	X
28 REAR TAILGATE OUTER HANDLE	98.20	1 PC	98.20	X
29 REAR TAILGATE INNER TRIMBOARD	318.30	1 PC	318.30	✓
30 REAR TAILGATE EMBLEM 'LOGO'	71.40	1 PC	71.40	✓
31 REAR TAILGATE HINGE STICKER	56.50	1 PC	56.50	✓
32 REAR TAILGATE LOCK	362.30	1 PC	362.30	✓
33 REAR TAILGATE TOP LOCK	193.70	1 PC	193.70	X
34 REAR TAILGATE TOP LOCK COVER	25.00	1 PC	25.00	X



YEE AUTO PTE LTD

160 Sin Ming Drive #02-17/#07-12 Sin Ming AutoCity Singapore 575722

Tel: 6457 5768 Fax: 6252 8459 Mobile: 9687 4031

Email: yeeautopteltd@gmail.com

Registration No.: 201719251W GST No: 201719251W

M/S : Sompo Insurance Singapore Pte Ltd
50 Raffles Place
#03-03 Singapore Land Tower
Singapore 048623

ATTN: Motor Claim Department

Your Ref No: -
Claim Type: Third Party
Accident Date: 10/09/2020
TP Veh Reg No: SBQ2899Y

Estimate No: ES2000085
Date: 12 Sep 2020
Policy No:
Veh Reg No: GBH3188G
Make/Model: TOYOTA HIACE VAN
TURBO 5DR MT
Chassis No: JTFHT02P500242293
Engine No: 1KD2796523
Reg. Date: 24/04/2018

Estimate Repair Cost to Vehicle No :GBH3188G

Description	U/Price	Quantity	List Price	Amount
			<u>SS</u>	<u>SS</u>
35 REAR NUMBER PLATE LAMP - LH	113.20	1 PC	113.20	X
36 REAR NUMBER PLATE LAMP - RH	113.20	1 PC	113.20	X
37 THIRD BRAKE LAMP	198.50	1 PC	198.50	X
38 SPARE WHEEL CARRIER	328.50	1 PC	328.50	X
			9,539.30	9,539.30
Labour				
39 TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY.	1,800.00	1 JOB	1,800.00	700
40 TO PUTTY, APPLY PRIMER & SPRAY-PAINT ON THE AFFECTED PORTION.	1,800.00	1 JOB	1,800.00	800
41 TO APPLY RUST- PROOFING ON REPAIRED, REPLACED PANEL.	200.00	1 JOB	200.00	60
42 TO REMOVE/REFIT REAR WINDSCREEN TO FACILITATE REPAIRS.	250.00	1 JOB	250.00	120
43 TO REMOVE/TRANSFER TAILGATE MECHANISMS.	150.00	1 JOB	150.00	60
44 TO CHECK WIRING FUNCTIONS.	120.00	1 JOB	120.00	20
			4,320.00	4,320.00
			Total	SS 15,019.30
			Add GST @ 7%	1,051.35
			Total Amount Payable	SS 16,070.65

TOTAL: SINGAPORE DOLLAR SIXTEEN THOUSAND SEVENTY AND CENTS SIXTY FIVE ONLY

For Yee Auto Pte Ltd

AUTHORISED SIGNATURE

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:

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	11/09/2020 14:59
Date Of Accident	10/09/2020 20:00
Exact Location Of Accident	CORPORATION ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH3188G
Insured/Policyholder	
Name Of Registered Owner	HOE WIN PLUMBLING & CONSTRUCTION
Co Reg No	5XXXX587A
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-85696408

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100018232-02
Cover Note Number	

Driver

Name of Driver	KHOO MING CHIEN
NRIC No	SXXXX532A
Date Of Birth	07/03/1971
Occupation	OUTDOOR
Date Of Driving Pass	07/01/1998
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85696408
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLOCK 252 JURONG EAST STREET 24
#01-151 SINGAPORE
Postcode 600252
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER
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? YES
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? YES
If Yes, Please state which Police Station
Police Station Name THOMSON NEIGHBOURHOOD POLICE POST
Police Station Address ROAD: BLK 25 SIN MING ROAD , POSTCODE: 570025 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-4529999 - FAX NO: 6 5535740
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED AND POLICE REPORT ; REMARKS: TYPE OF ACCIDENT PLEASE REFER TO POLICE REPORT AND ATTACHED STATEMENT

Attachment(s)

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

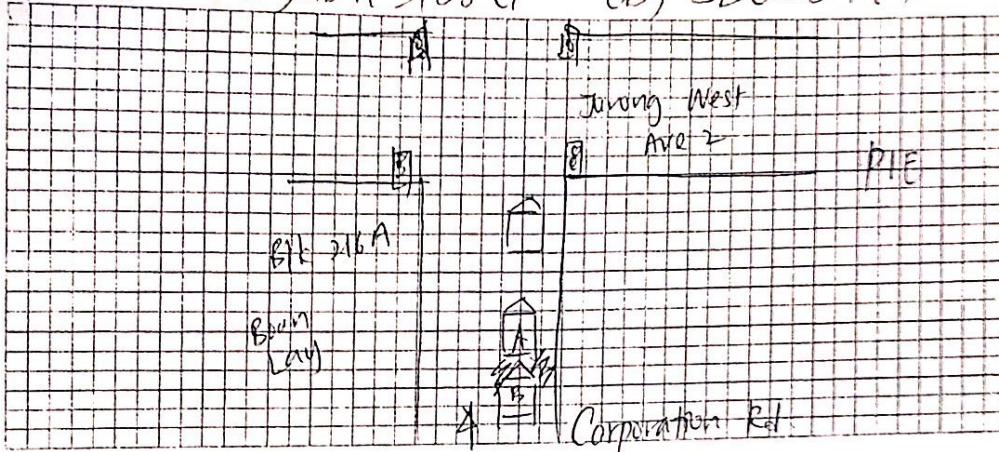
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SBQ2899Y
Vehicle Make/Model/Colour
Details Of Properties REFER TO ATTACHED AND POLICE REPORT
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode

Sketch Plan #2 Pg. 1

SKETCH PLAN

(A) GBH 3188 G (B) SBO 2899 Y



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

Police Report No: T/20200911/2036

DECLARATION

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



Policyholder's Signature
Date & Time:

Signature

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

Signature

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