

ASS. REC. BY:

REF: AIG/20010886/KPKenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s MBM

Insured: _____

Policy No. _____

Claims No. _____

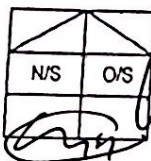
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: 3.39pm

(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: 07 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. 24 HRS

Date: 10/12 Person Contacted: _____ Vehicle: IN / OUTVeh No: STA 189R Yr Regn: 10, 07Type: M.Car / M.Cycle / Bus / Truck / Lorry / Taxi / Prime Mover /

Truck / Traller or

Make: Fiat 1500 1984Colour: Blue Green A/C: Insured / Std / Nil / NASp. Reading: 1402P5 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: TR 4778 JT 871038195Gen. 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: _____

R: 245/352R19

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

TOYO / YOKO or

Front

Rear

R/Bal. 7 mmR/Bal. 7 mmL/Bal. 7 mmL/Bal. 7 mmD.O.A. 8/10/20D.O.I. 12/10/2020

Survey held at _____

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

o/s-body

The UIC / 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)

Days Of Repair: _____

Resurvey No. of Trlp: _____

Survey Fee:

Transportation

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

S + RS. SI

F. + S

Others

TOTAL

Report Format :

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

MBM WHEELPOWER PTE. LTD.

YOUR REF.: SKP8868X

OUR REF.: SJA189R

TO: AIG INSURANCE

CC: MOTOR CLAIMS DEPARTMENT

FAX:

*Not Authorized
11 Pump &
Penny Atk Paim
Fclass*



DATE: 9/10/2020
FROM: Lee Shirley
FAX: 6452 5333
CONTACT: 8686 5188
MAKE & MODEL: AUDI TTC 2.0 TFSI S-TRONIC
CHASSIS NO.: TRUZZZ8J871038195
ENGINE NO.: BWA145538
YEAR MADE: 2007
ACCIDENT DATE: 8 October 2020

ESTIMATE FOR VEHICLE NO.: SJA189R

NO.	DESCRIPTION	PART NO.	QTY.	LIST PRICE
1	DOOR GLASS RH		1	\$ <i>SL</i> X 360.00
2	DOOR GLASS MOULDING RH		1	\$ <i>SL</i> X 80.00
3	DOOR RH		1	\$ <i>RH</i> ✓ 2,700.00
4	DOOR SEAL RH		1	\$? 300.00
5	DOOR RH HINGE UPPER		1	\$ <i>R</i> X 70.00
6	DOOR RH HINGE LOWER		1	\$ <i>R</i> X 200.00
7	REAR FENDER RH		1	\$ <i>RH</i> ✓ 760.00
8	REAR FENDER INNER SHIELD RH		1	\$ <i>SL</i> X 160.00
9	REAR FENDER INNER SHIELD CLIP		10	\$ <i>SL</i> X 80.00
10	SIDE PANEL RH	<i>Roller</i>	1	\$ <i>R</i> X 2,000.00
11	ROCKER PANEL GARNISH RH		1	\$ <i>Warp</i> ✓ 600.00
12	REAR RH TIE ROD		1	\$? 200.00
13	REAR KNUCKLE ARM RH		1	\$? 850.00
14	REAR KNUCKLE ARM BEARING RH		1	\$? 300.00
15	REAR RH CONNECTING LINK		1	\$ <i>m</i> X 100.00
16	STABILIZER LINK RH		1	\$? 250.00
17	REAR RH SHOCK ABSORBER		1	\$? 300.00
18	REAR BUMPER		1	\$ <i>CRA</i> ✓ 1,500.00
19	REAR BUMPER RETAINER RH		1	\$ <i>DIT</i> ✓ 75.00
20	REAR BUMPER SPONGE		1	\$ <i>SL</i> X 100.00
21	REAR BUMPER SENSOR		4	\$ <i>SL</i> X 1,000.00
22	REAR BUMPER CLIP		10	\$ <i>SL</i> ✓ 80.00
TOTAL:				\$ 12,065.00
LESS 5%:				\$ (603.25)
PARTS TOTAL:				\$ 11,461.75

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:

MBM WHEELPOWER PTE. LTD.
160 SIN MING DRIVE, #06-02
SIN MING AUTOCITY
t 6262 8888 f 6452 5333
COMPANY REG. NO.: 200204110W

SPECIAL NETT

WINDSCREEN SEALANT

BODY SEALANT

TYRE SPORT RIM

CONTINENTAL SPORTCONTACT 6 TYRE (RH REAR)

1	\$	405m	50.00
1	\$	30h	50.00
1	\$	Ad ✓	1,800.00
1	\$	Pm x	500.00

LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS

TO REMOVE, REFIT & UPHOLSTERY TO FACILITATE REPAIRS

TO REMOVE & REPLACE RH DOOR GLASS

TO REMOVE, RENEW & REFIT REAR RH TYRE

TO REMOVE AND REPLACE FUEL TANK FIXTURE AND TO UPHOLSTERY TO FACILITATE REPAIRS

TO CHECK & RECONNECT ALL NECESSARY WIRING

TO REMOVE & REFIT ALL SENSOR

TO RESET ENGINE WARNING LIGHT (ABS, SRS, ECU MEMORY & ETC)

TO REMOVE & REFIT REAR RH UNDERCARRIAGE

TO CONDUCT ALL WHEEL COMPUTERISED ALIGNMENT

TO APPLY ANTI RUST COATING

TO SPRAY PAINT ON THE AFFECTED AREAS

\$	90d	1,600.00
\$	10d	150.00
\$	6d	100.00
\$	2d	150.00
\$	✓	50.00
\$	3d	150.00
\$	5d	100.00
\$	7	200.00
\$	7	150.00
\$	6d	120.00
\$	6d	80.00
\$	90d	1,600.00

TOTAL: \$ 18,311.75

7% GST: \$ 1,281.82

GRAND TOTAL: \$ 19,593.57

MBM WHEELPOWER PTE. LTD.

160 SIN MING DRIVE, #06-02

SIN MING AUTOCITY

I 6262 8888 I 6452 5333

COMPANY REG. NO. 203204110W

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	08/10/2020 16:28
Date Of Accident	08/10/2020 10:40
Exact Location Of Accident	GREENMEAD AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA189R
Insured/Policyholder	
Name Of Registered Owner	SOH WEE CHEE @SOH WEI CHI (SU WEIQI)
NRIC No	SXXXX882I
Email Address	WEICHI@KENNETH.TAN.COM
Mobile Phone No	(LOCAL) +65-98374117
Alternative Phone No	OFFICE-98374117

Vehicle Particulars

Manufacturer	AUDI
Model	TTC-2.0 TFSI S-TRONIC (A)
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI19V11278/VPA/R01
Cover Note Number	

Driver

Name of Driver	SOH WEE CHEE @SOH WEI CHI (SU WEIQI)
NRIC No	SXXXX882I
Date Of Birth	05/09/1975
Occupation	INDOOR
Date Of Driving Pass	22/09/1997
Driving Experience	23 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98374117
Fax Number	
Contact Number	OFFICE-98374117
Email Address	WEICHI@KENNETH.TAN.COM

Address	228 GREENWOOD TERRACE
Postcode	286927
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	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?	
Was any other material or property damaged?	NO
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

AS PER ATTACHED

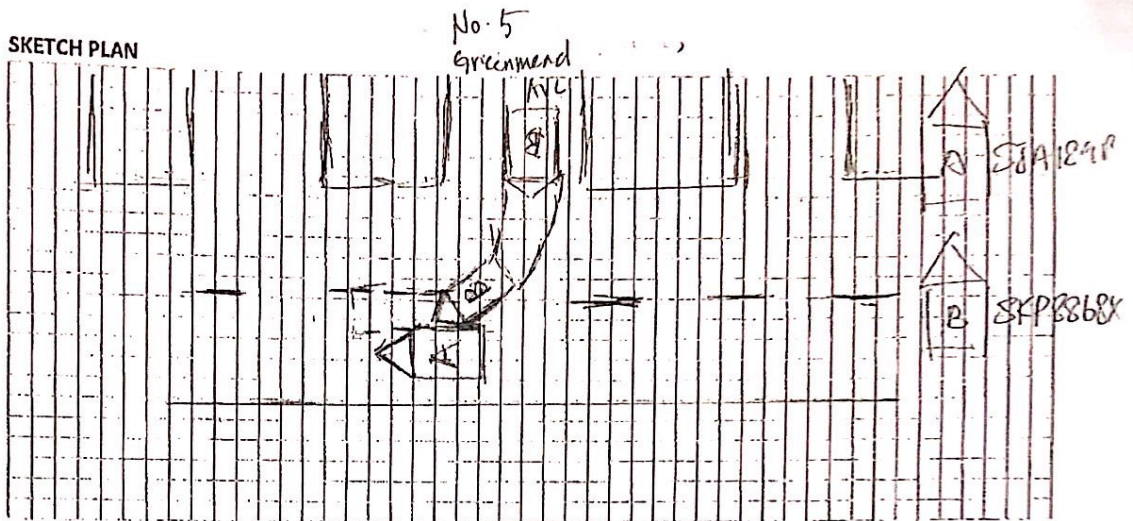
Attachment(s)

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	SKP8868X
Vehicle Make/Model/Colour	VOLVO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOH KONG AI
NRIC/Passport Number	SXXXX733Z
Contact Number	97319880
Address	5 GREENMEAD AVENUE
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Around 1040am on 8 October (Thursday) 2020, I was driving along Greenmead Avenue, I was about 2 car lengths behind another car, as I was passing one of the houses (later I saw it was No. 5 Greenmead Avenue) suddenly there was impact against the side of my car to my right slightly behind my seat. I stopped and realised another car coming out of the gate of a house had suddenly driven into my car. I could not see the car coming out as I approached No. 5 house as there were large cars parked on the right, along the road, blocking my view. I got out and the other lady also got out, she asked me to move my car to the side of road so as not to block traffic. I saw her Volvo had hit my Audi, damaged the right side of my car, and her car plate came off and slid into my bumper and was stuck there. I asked her whether she forgot to look to her left when she came out of her house. She said "So sorry" a few times. Her husband (I think her husband) came out from No. 5 Greenmead Ave. She confirmed she lives at No. 5 Greenmead Ave and was driving out of her gate when she hit my car. When she hit me, my car was already behind my field of vision. I believe she didn't look to her left and just drove straight and quickly out of her gate, there were two large vehicles, one each parked on each side of her gate so she probably did not see or check for cars before she drove out. Her car plate is SKP 8868X. We exchanged.

DECLARATION

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

Policyholder's Signature

Date & Time: 4:10pm 8/10/2020

GARMC Sketch Plan Form V1

Driver's Signature

(If driver is not the policyholder)

Date & Time: 4:10pm 8/10/2020

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

→ particulars - her name is Toh Rong Ai. NRIC No. 500297332.