

ASS. REC. BY:

REF:

C72 / CS/CTI20011766/Kqf3

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. DMCVSNA00059342001

Claims No. SNM20D204075C02

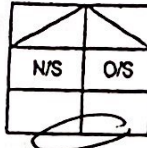
Sum Insured: Excess:

(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: 4-8 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:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading:

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

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

TOYO / OKO or

Front

R/Bal.

L/Bal.

D.O.A.

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

29/10/20@2.37pm revised to Pauline Tham via Merimen.

Kenneth confirmed final fig \$4178.72, 4 days (Red \$4438.64, 52%)

(No Lump Sum)

Date/Time, File Pass to?

11/02/03 Typist

Date/Time, File Return to?

☐ : Prell. Report☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S - RS. SI

Fees

Others

TOTAL

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

Report Format: MER-TP

Lump Sum / I.B.I.: (\$ 4178.72

金興(龔)汽車私人有限公司

160 Sin Ming Drive, #02-20,
Sin Ming AutoCity, Singapore 575722
Tel: 6452 7018 Fax: 6458 3895
Email: service@kkimhin.com.sg

No. : 31494

Date : 28-Oct-2020

Vehicle Insured : YN 8896 J
Accident Date : 26-Oct-2020

Our Ref : 020513 (CHINA) / QUEK

PAGE : 1

MR AW KAI KIAT
Singapore

Not Authorized
U/Ping @
Murphy After Paint
4-5 days

ESTIMATED COST OF REPAIR FOR HONDA VEZEL 1.5X CVT (2015) SKX2642C
=====

1 pc rear bumper		<i>Adlkt</i> 459.80	<i>✓</i>
2 pcs rear bumper side retainer (LH/RH)	@ S\$ 17.50	<i>Sm</i> 35.00	<i>X</i>
2 pcs rear bumper side cover (LH/RH)	@ S\$195.00	<i>Sm</i> 390.00	<i>X</i>
10 pcs rear bumper clips	@ S\$ 3.50	<i>Sm</i> 35.00	<i>✓</i>
2 pcs rear wheel arch garnish (LH/RH)	@ S\$150.00	<i>Sm</i> 300.00	<i>X</i>
1 pc rear end panel		411.90	<i>?</i>
1 pc rear end panel top garnish		92.30	<i>?</i>
1 pc tailgate		<i>Adl</i> 1,050.00	<i>✓</i>
2 pcs tailgate hinges (LH/RH)	@ S\$ 50.00	<i>R</i> 100.00	<i>X</i>
2 pcs tailgate damper (LH/RH)	@ S\$180.00	<i>Sm</i> 360.00	<i>X</i>
1 pc tailgate outer garnish		<i>Sm</i> 189.90	<i>X</i>
1 pc tailgate outer handle		<i>Sm</i> 175.50	<i>X</i>
1 pc tailgate logo		<i>Sm</i> 15.40	<i>X</i>
1 pc tailgate "VEZEL" emblem		<i>Sm</i> 43.00	<i>✓</i>
1 pc tailgate lock		<i>Sm</i> 157.10	<i>✓</i>
1 pc tailgate lock catch		<i>R</i> 27.50	<i>X</i>
1 pc tailgate weatherstrip		<i>Sm</i> 96.80	<i>X</i>
2 pcs tailgate lamp (LH/RH)	@ S\$276.90	<i>Sm</i> 553.80	<i>✓</i>
1 pc tailgate inner trimboard - bottom		<i>Sm</i> 153.40	<i>X</i>
1 pc tailgate inner handle pocket		<i>Sm</i> 25.00	<i>X</i>
1 pc tailgate windscreen glass moulding		<i>Sm</i> 120.00	<i>✓</i>
1 pc rear exhaust muffler		528.00	<i>?</i>
2 pcs taillamp assy (LH/RH)	@ S\$482.40	<i>Sm</i> 964.80	<i>✓</i>
		6,284.20	
Less 20% :		-1,256.84	
		5,027.36	

Con't Page 2 ...

金興(龔)汽車私人有限公司

160 Sin Ming Drive, #02-20,
Sin Ming AutoCity, Singapore 575722
Tel: 6452 7018 Fax: 6458 3895
Email: service@kkimhin.com.sg

Vehicle Insured : YN 8896 J
Our Ref : 020513

Page : 2
No. : 31494

- 1 pc rear bumper "TOTAL" logo sticker
- 1 pc rear end panel top garnish chrome
- 1 pc tailgate windscreen glass sealant
- 1 pc tailgate windscreen glass damping seal
- 1 pc reverse sensor
- 1 pc reverse camera
- 1 pc rear number plate

201a
200.00 sn
250.00 sn X
40.00 sn ✓
20.00 sn ✓
220.00 sn ?
380.00 sn X
40.00 sn X

To remove, cut out damaged parts, panel beating, welding, align, refix and to renew affected parts.

750.00 ?

To focus taillamps. To check rear wiring and lighting operation.

50.00 201

To remove and refit rear windscreen glass and conduct water leak test

120.00 ✓

To remove and refit rear upholstery trimming, roof lining, seats, speaker board in order to facilitate repairing works

120.00 ?

To apply undersealing

120.00 ?

To transfer tailgate's fittings

80.00 601

To remove and renew exhaust silencer box

120.00 601

To remove and refit reverse sensor assy.

80.00 501

Con't Page 3 ...

金興(龔)汽車私人有限公司

160 Sin Ming Drive, #02-20,
Sin Ming AutoCity, Singapore 575722
Tel: 6452 7018 Fax: 6458 3895
Email: service@kkimhin.com.sg

Vehicle Insured : YN 8896 J
Our Ref : 020513

Page : 3
No. : 31494

To putty and respray on affected portions.

4001

1,000.00

Total : S\$ 8,617.36

Singapore Dollars Eight Thousand Six Hundred and Seventeen and Cents Thirty Six Only

Note: Amount quoted above is subject to prevailing GST at time of tax invoice.

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	27/10/2020 14:35
Date Of Accident	26/10/2020 18:15
Exact Location Of Accident	TUAS WEST ROAD (TOWARDS AYE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX2642C
Insured/Policyholder	
Name Of Registered Owner	AW KAI KIAT
NRIC No	SXXXX929J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81259665
Alternative Phone No	OFFICE-81259665

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 1.5X CVT (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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA409448
Cover Note Number	

Driver

Name of Driver	AW KAI KIAT
NRIC No	SXXXX929J
Date Of Birth	17/06/1986
Occupation	INDOOR
Date Of Driving Pass	10/04/2007
Driving Experience	13 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81259665
Fax Number	
Contact Number	OFFICE-81259665
Email Address	NOEMAIL

Address BLK 310C PUNGGOL WALK #03-586
Postcode 823310
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? 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: : COLLEAGUE
GENDER: : FEMALE

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 SKETCH PLAN.

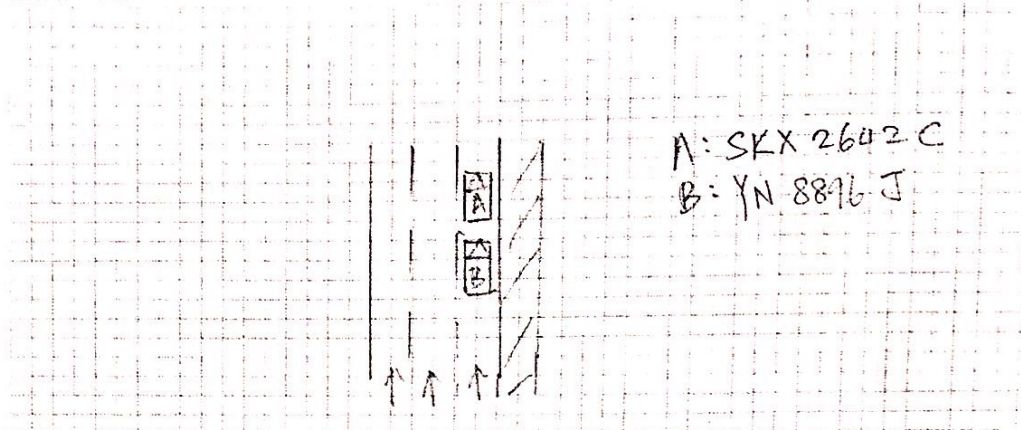
Attachment(s)

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 YN8896J
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver CHELLADURAI SENTHAMIZHAN
NRIC/Passport Number GXXXX600M
Contact Number 96626300 (COMPANY REP : SIMON)
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

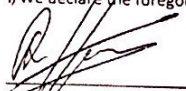
X ON 26/10/2020 AROUND 6:15 PM, I AM TRAVELING ALONG THAS WEST ROAD TOWARD AYE, ON THE EXTREME RIGHT LANE,

UPON SEEING THE CAR IN FRONT APPLYING BRAKE, I ALSO APPLIED BRAKE TO MY CAR TO GRADUALLY ALLOW THE CAR TO COMPLETE STOP AS THE CAR IN FRONT STOPPED AS WELL.

AFTER STOPPING I FELT & HEARD A BANG ON THE BACK OF MY CAR.

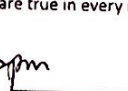
DECLARATION

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

 27/10 @ 5pm
Policyholder's Signature

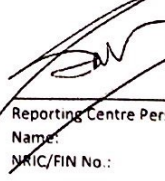
Date & Time:

Company Chop (if applicable)


Driver's Signature

(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

