

ASS. REC. BY: Kenneth

REF: TJ /

ASSIGNMENT

From: _____

Estimated Cost: _____

Date: _____

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: _____

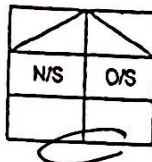
Excess: _____

(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: _____

07 days

Res.: Yes or No

Lum Sum: _____

1.B.1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No: SUR 5324

Yr Regn: 07, 17

Type: Motor Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Honda

c.c

1496

Colour: M.P. White

A/C: Insured / Std / NI / NA

Sp. Reading: 188099

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

RU 3

1248864

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD A/Rim or

Tyre Size: F: _____

R: _____

235/50R18

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

Rear

R/Bal. 8 mm

R/Bal. 8 mm

L/Bal. 8 mm

L/Bal. 8 mm

D.O.A. 30/10/20

D.O.I. 30/10/2020

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, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S - RS. SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech Invs (\$ _____)

☐

: Weekend (\$ _____)

Report Format:

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

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg
GST: 201001158E RCB NO: 201001158E

M/S : INDIA INT'L INSURANCE PTE LTD
64 CECIL STREET
#04/#05 IOB BUILDING
SINGAPORE 049711

TEL: 63476100

FAX: 62247743

ATTN: Motor Claim Department

Estimate No: ES2090872/AMK

Date: 30 Oct 2020

Policy No: 5092790250-03

Veh Reg No: SLR532U

Make/Model: HONDA VEZEL 1.5X
AUTO

Chassis No: RU31248864

Engine No: LEB5948881

Reg. Date: 28/07/2017

WS Ref: TP/III/AMK

Claim Type: Third Party

Accident Date: 30/10/2020

TP Veh Reg No: SHA4023H

Not Authorized

Running B4 paint

7 days

Estimate Repair Cost to Vehicle No :SLR532U

Description	U/Price	Quantity	List Price	Amount
			<u>SS</u>	<u>SS</u>
List Price				
1 REAR BUMPER	798.10	1 PC	<i>Ry</i> 798.10	<i>✓</i>
2 REAR BUMPER CLIP	3.80	5 PC	<i>na</i> 19.00	<i>✓</i>
3 REAR TAILGATE	997.70	1 PC	<i>Ry</i> 997.70	<i>✓</i>
4 TAILGATE INNER LOCK	96.70	1 PC	<i>na</i> 96.70	<i>✓</i>
5 TAILGATE INNER RUBBER	101.40	1 PC	<i>na</i> 101.40	<i>✓</i>
6 TAILGATE EMBLEM 'HYBRID'	66.30	1 PC	<i>na</i> 66.30	<i>✓</i>
7 TAILGATE EMBLEM 'VEZEL'	43.00	1 PC	<i>na</i> 43.00	<i>✓</i>
8 TAILGATE WINDSCREEN GLASS MOULDING	109.30	1 PC	<i>na</i> 109.30	<i>✓</i>
9 REAR END PANEL	411.90	1 PC	<i>Ry</i> 411.90	<i>✓</i>
10 REAR END PANEL INNER TOP GARNISH	80.60	1 PC	<i>my Dri</i> 80.60	<i>✓</i>
11 REAR END PANEL BUZZER SENSOR	85.00	1 PC	85.00	<i>?</i>
12 REAR END PANEL ANTENNA	58.10	1 PC	58.10	<i>?</i>
13 REAR LUGGAGE COMPARTMENT PANEL	787.50	1 PC	<i>na</i> 787.50	<i>x</i>
14 REAR LUGGAGE COMPARTMENT TOP BOARD	430.30	1 PC	<i>na</i> 430.30	<i>✓</i>
15 REAR LUGGAGE TOOL BOX	137.30	1 PC	<i>na</i> 137.30	<i>✓</i>
16 REAR LUGGAGE COMPARTMENT PANEL LOWER UNDER COVER	190.00	1 PC	<i>na</i> 190.00	<i>✓</i>
17 REAR EXHAUST MUFFLER	552.50	1 PC	552.50	<i>?</i>
			4,964.70	
	Less 20%		992.94	3,971.76
Special Net				
18 REAR WINDSCREEN GLASS SEALANT	40.00	1 PC	<i>na</i> 40.00	<i>✓</i>
19 REVERSE SENSOR	200.00	1 SET	<i>shen</i> 200.00	<i>✓</i>
20 REAR END PANEL SEALANT	40.00	1 PC	<i>na</i> 40.00	<i>✓</i>
21 REAR LUGGAGE COMPARTMENT PANEL TOP COAT	100.00	1 PC	<i>na</i> 100.00	<i>6000</i>
			380.00	380.00
Labour				
22 REMOVE AND REFIX REAR WINDSCREEN GLASS	120.00	1 LA	120.00	<i>✓</i>
23 REMOVE & REFIX REAR BUMPER & ATTACHMENTS, TAILGATE, SPOILER & ATTACHMENTS, TAIL LAMPS, TO CUT, WELD & RENEW REAR END PANEL, REAR LUGGAGE PANEL, KNOCKING & REPAIR REAR CHASSIS FRAME & REALIGN THE SAME	1,100.00	1 LA	1,100.00	<i>9000</i>
24 PUTTY & RESPRAY REAR BUMPER, TAILGATE, REAR END PANEL, REAR LUGGAGE PANEL, REAR CHASSIS FRAME & ALL AFFECTED AREAS	1,000.00	1 LA	1,000.00	<i>8600</i>

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#04/#05 IOB BUILDING
SINGAPORE 049711

TEL: 63476100

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ATTN: Motor Claim Department

WS Ref: TP/III/AMK

Claim Type: Third Party

Accident Date: 30/10/2020

TP Veh Reg No: SHA4023H

Estimate No: ES2090872/AMK

Date: 30 Oct 2020

Policy No: 5092790250-03

Veh Reg No: SLR532U

Make/Model: HONDA VEZEL 1.5X
AUTO

Chassis No: RU31248864

Engine No: LEB5948881

Reg. Date: 28/07/2017

Estimate Repair Cost to Vehicle No :SLR532U

Description	U/Price	Quantity	List Price	Amount
			<u>SS</u>	<u>SS</u>
25 REMOVE & REFIX REAR FENDER GARNISHS,SEAT TO FACILITATE REPAIR	150.00	1 LA	150.00	100/-
26 REMOVE & REFIX REAR MUFFLER & REALIGN THE SAME	80.00	1 LA	80.00	60/-
27 RUSTPROOFING	90.00	1 LA	90.00	60/-
28 REMOVE & REFIX REVERSE CAMERA,RESET & REPOSITION	60.00	1 PC	60.00	✓
			2,600.00	2,600.00
			Total	SS 6,951.76
			Add GST @ 7%	486.62
			Total Amount Payable	SS 7,438.38

* SURVEY VEHICLE AT ANG MO KIO WORKSHOP

For Cheng Hoe Motor Pte Ltd

Dorlyn LA

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	30/10/2020 11:27
Date Of Accident	30/10/2020 08:20
Exact Location Of Accident	PIE TOWARDS KPE (ECP)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLR532U
Insured/Policyholder	
Name Of Registered Owner	TCH LIMO
Co Reg No	5XXXX810K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96705761
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID X (A)
Exact Purpose for which vehicle was being used at time of accident	IN TRANSIT
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5092790250-03 DC
Cover Note Number	28/07/2020 - 27/07/2021
Driver	
Name of Driver	TOH CHOON HOCK
NRIC No	SXXXX386B
Date Of Birth	20/08/1964
Occupation	OUTDOOR
Date Of Driving Pass	31/07/1984
Driving Experience	36 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96705761
Fax Number	
Contact Number	
EMail Address	TOHCHOONHOCK@HOTMAIL.COM

Address
 Postcode BLK 248 BUSHAN ST 22 #06-362
 570248
 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 CHAIN COLLISION
 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 3
 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. YES
 Number of Passengers (Including Driver) 2
 Passenger 1
 NAME: : GRAB PASSENGER
 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

UNKNOWN VEHICLE STOPPED INFRONT, I FOLLOW TOO. A MOMENT LATER, FELT AN IMPACT AND REALISED MOTOR TAXI SHA4023H HAD CAME FROM THE BACK AND HIT ONTO THE REAR PORTION OF MY STOPPED CAR. UPON ALIGHTING, I THEN REALISED I WAS INVOLVED IN A 3 CAR CHAIN COLLISION. (MOTOR CAR SKJ2833S WAS BEHIND OF SHA4023H.) * MY PASSENGER (ON BOARD)'S SPECTACLES WAS BROKEN AS A RESULT OF THE IMPACT. (P/S : I FELT DISCOMFORT DUE TO THE ACCIDENT IMPACT AND WILL SEEK FOR MEDICAL TREATMENT LATER ON.)

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Remarks/ Reasons: EMAIL TO INSURANCE COMPANY
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHA4023H
 Vehicle Make/Model/Colour HYUNDAI I40
 Details Of Properties
 Vehicle Category TAXI
 Name of Driver SOH KOK WAH
 NRIC/Passport Number SXXXX377G
 Contact Number 96776365
 Address