

ASS. REC. BY:

REF:

SMO/ CS/SMO20012829/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.

Claims No. CMTD2003395/MYE

Sum Insured:

Excess:

3000

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value:

848K

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

06

days

Res.: Yes or No

Lum Sum:

1B.1 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

23/11/20 @ 4.22pm revert to Melvin by email.

24/11/20 @ 9.12am Melvin informed C/A & ex: \$3000 by email.

24/11/20 @ 9.39am Informed Mei Li C/A & ex: \$3000 by email.

Kenneth confirmed final fig \$5523.50 (Red \$474, 8%)

(No Lump Sum)

Date/Time, File Pass to?

01/04 Typist

Date/Time, File Return to?

2)

Prell. Report

Final Report

Days Of Repair: 6

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + R.S. \$

Fees

Others

TOTAL

Add Fee:

Site Insp (\$

Interview (\$

Tech Invs (\$

Weekend (\$

Report Format:

OD

Lump Sum / I.B.I: (\$ 5523.50

AH LIM MOTOR COMPANY

176 Sin Ming Drive #05-12 Sin Ming Autocare Singapore 575721
TEL: 6456 3637 FAX: 6456 3686 Email: admin@almsm.com.sg
GST:M9-0009639-E RCB NO:06470300B

SURVEYOR COPY

M/S : SOMPO INSURANCE SINGAPORE PTE LTD
50 RAFFLES PLACE
#05-01/06 SINGAPORE LAND TOWER
SINGAPORE 048623
TEL: 64616555
ATTN: Motor Claim Department
Your Ref No: SLA142B
Claim Type: Own Damage
Accident Date: 18/11/2020

Estimate No: MCS1900355
Date: 19 Nov 2020
Policy No: D20MTPV01009731
Veh Reg No: SLA142B
Make/Model: KIA FORTE K3



NOT Authorized
Returning B4 paint

6 days

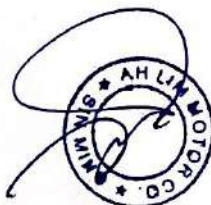
Ex: TBA

Estimate Repair Cost to Vehicle No : SLA142B

Description	U/Price	Quantity	Cost	Amount
			SS	SS
SPARE PARTS				
1 FRONT BONNET		1 PC	340.00	✓
2 FRONT BONNET INSULATOR		1 PC	65.00	✓
3 FRONT BONNET INSULATOR CLIP		8 PC	8.00	✓
4 FRONT BONNET HINGE L/R		2 PC	30.00	✓
5 FRONT BONNET LOCK		1 PC	28.00	✓
6 FRONT FENDER L/R		2 PC	300.00	✓
7 FRONT FENDER COWLING CLIP		14 PC	14.00	✓
8 FRONT BUMPER		1 PC	220.00	✓
9 FRONT BUMPER SIDE RETAINER L/R		2 PC	10.00	✓
10 FRONT BUMPER CENTRE TOP BRACKET		1 PC	20.00	✓
11 FRONT BUMPER INNER SPONGE		1 PC	48.00	✓
12 FRONT BUMPER CLIP		20 PC	20.00	✓
13 HEADLAMP L/R		2 PC	1,480.00	✓
14 RADIATOR GRILLE		1 PC	85.00	✓
15 GRILLE BADGE		1 PC	20.00	✓
16 RADIATOR SUPPORT PANEL		1 PC	220.00	✓
17 RADIATOR AIR GUIDE L/R		2 PC	16.00	✓
18 AIR CON CONDENSER		1 PC	280.00	✓
19 RADIATOR FAN ASSY		1 PC	260.00	✓
20 WIPER WASHER TANK		1 PC	40.00	✓
21 AIR INTAKE DUCT		1 PC	8.00	✓
22 AIR INTAKE DUCT HOSE		1 PC	55.00	✓
23 NO PLATE GARNISH		1 PC	8.00	✓
			3,575.00	
	Add 10%		357.50	3,932.50

Special Nett

- 24 NO PLATE
- 25 RADIATOR COOLANT



1 PC CM 30.00 ✓
1 PC M 35.00 ✓

65.00

LABOUR

- 26 TO CHECK WIRING AND REFOCUS HEADLAMP
- 27 TO DISMANTLE AND REFIT AIRCON CONDENSER AND REFILL WITH AIRCON GAS
- 28 TO REMOVE AND REFIT WIPER MOTOR, WIPER ARM BLADE

1 PC 30.00 200 ✓
1 PC 120.00 100 ✓
1 PC 50.00 ✓

AH LIM MOTOR COMPANY

176 Sin Ming Drive #05-12 Sin Ming Autocare Singapore 575721
TEL: 6456 3637 FAX: 6456 3686 Email: admin@almsm.com.sg
GST:M9-0009639-E RCB NO:06470300B

M/S : SOMPO INSURANCE SINGAPORE PTE LTD
50 RAFFLES PLACE
#05-01/06 SINGAPORE LAND TOWER
SINGAPORE 048623
TEL: 64616555
ATTN: Motor Claim Department
Your Ref No: SLA142B
Claim Type: Own Damage
Accident Date: 18/11/2020

Estimate No: MCS1900355
Date: 19 Nov 2020
Policy No: D20MTPV01009731
Veh Reg No: SLA142B
Make/Model: KIA FORTE K3

Estimate Repair Cost to Vehicle No : SLA142B

Description	U/Price	Quantity	Cost	Amount
			<u>S\$</u>	<u>S\$</u>
29 TO DISMANTLE AND INSTALL DAMAGE PARTS, TO REMOVE, REFIT AND ALIGN FRONT SUPPORT PANEL. TO KNOCK AND REPAIR FRONT AFFECTED AREA AND TO REFIT LISTED PARTS BACK SAME.		1 PC	800.00	800.00
30 TO SPRAY BONNET, BONNET HINGE L/R, FRONT FENDER LH, FRONT FENDER RH, FRONT BUMPER AND TOUCH UP FRONT BOTH SIDE DOOR.		1 PC	1,000.00	800.00
				2,000.00

Lump Sum Repair S\$ 5,997.50

Add GST @ 7% 419.83

Total Amount payable S\$ 6,417.33

TOTAL: SINGAPORE DOLLAR SIX THOUSAND FOUR HUNDRED SEVENTEEN AND CENTS THIRTY THREE ONLY

For AH LIM MOTOR COMPANY


AUTHORIZED SIGNATURE

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	907B
Vehicle Details	
Vehicle No.:	SLA142B
Vehicle to be Exported:	Yes
Intended Deregistration Date:	25 Nov 2020
Vehicle Make:	KIA
Vehicle Model:	FORTE K3 1.6A SX
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	G4FGFH608151
Chassis No.:	KNAFZ411MG5570169
Maximum Power Output:	95.3 kW (127 bhp)
Open Market Value:	\$17,278.00
Original Registration Date:	19 Feb 2016
First Registration Date:	19 Feb 2016
Transfer Count:	1
Actual ARF Paid:	\$17,278.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Feb 2026
PARF Rebate Amount:	\$12,958.00
Intended COE Rebate Details	
COE Expiry Date:	18 Feb 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$46,651.00
COE Rebate Amount:	\$24,428.00
Total Rebate Amount:	\$37,386.00

The information contained herein is correct as at 18 Nov 2020

OK

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	19/11/2020 14:18
Date Of Accident	18/11/2020 16:30
Exact Location Of Accident	TAMPINES AVE 7 (SLIP ROAD TO TPE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA142B
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Insured/Policyholder

Name Of Registered Owner	LEE AI MOI
NRIC No	SXXXX907B
Email Address	AMYLEE4466@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98231286
Alternative Phone No	OFFICE-98231286

Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3 1.6
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USED
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

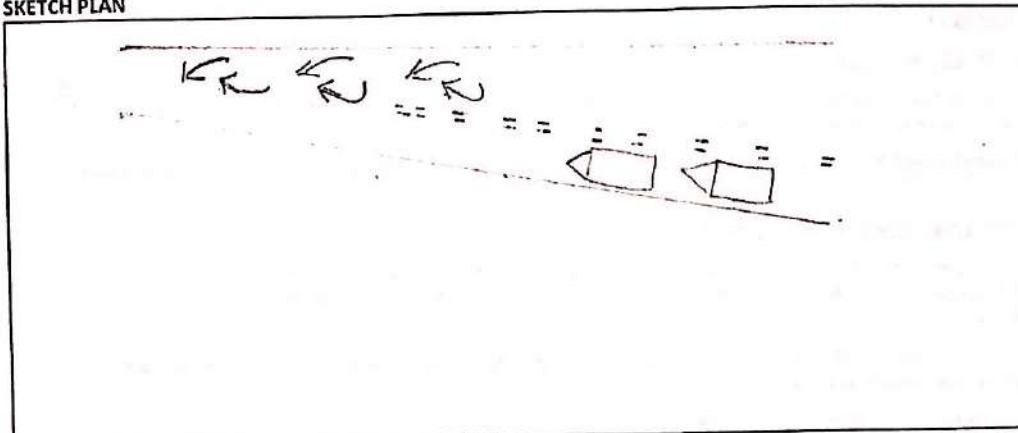
Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D20MTPV01009731
Cover Note Number	19/08/2020 TO 18/08/2021

Driver

Name of Driver	MAH SHAN JIE DOMINIQUE
NRIC No	SXXXX470J
Date Of Birth	30/04/1995
Occupation	INDOOR
Date Of Driving Pass	19/08/2015
Driving Experience	5 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97119429
Fax Number	
Contact Number	
E Mail Address	AMYLEE4466@GMAIL.COM

Sketch Plan Pg. 2

Date of accident: 18/11/2020 Time: 16:30 HR Location: TAMPINES AVE 7 (SLIP ROAD TO TPE)
 My Vehicle A: SLA 142 B Vehicle B: CB 7509 H Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While entering the slip road from Tampines Avenue 7 towards TPE, the vehicle in front of me stopped suddenly for oncoming traffic and I misjudged the stopping distance, resulting in me hitting the rear end of the front vehicle.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :

Email address :

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time:

[Signature]
 Driver's Signature
 (if driver is not the policyholder)
 Date & Time:

[Signature]
 Reporting Centre Personnel's Signature
 Name: 19/11/2020
 NRIC/FIN No.: _____

AH LIM MOTOR COMPANY