

ASS. REC. BY:

REF:

AXA / 20013863 / Kgf3

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. S0M02RLC

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: 87k

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: 01/22

Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SGA 4387K Yr Regn: 01, 07

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

Truck / Trailer or

Make: Toyota Hilux c.c. 1598

Colour: M. Green A/C: Insured / Std / NI / NA

Sp. Reading: 221397 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: MR0538EC107139187

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: NII / S/Rlm / STD / Rlm or

Tyre Size: P. Firestone

R: 185/70R14

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

TOYO / YOKO or

Front

Rear

R/Bal. 7 mm

R/Bal. 6 mm

L/Bal. 7 mm

L/Bal. 6 mm

D.O.A. 2/8/20

D.O.I. 21/1/2021

Survey held at \_\_\_\_\_

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

N/S Rm

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

27/01/21 @ 5.02pm revised to Stacey Ng via Smart Claims.

Kenneth confirmed LS \$1600 (Red \$4387, 73%)

Date/Time, File Pass to?

☐ : Prel. Report

1) 01/04 Typist

☐ : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S - RS. \$

Fees

Others

TOTAL

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

Report Format : SMART CLAIMS -TP

Lump Sum H.B.I: (\$ 1600 )





# 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 : AXA Insurance Pte Ltd  
8 Shenton Way  
#24-01 AXA Tower  
Singapore 068811.

ATTN: Motor Claim Department

Your Ref No: -  
Claim Type: Third Party  
Accident Date: 02/08/2020  
TP Veh Reg No: SDM8889J

Estimate No: ES2100006  
Date: 20 Jan 2021  
Policy No:  
Veh Reg No: SGQ4387K  
Make/Model: TOYOTA COROLLA  
ALTIS 1.6 AUTO  
Chassis No: MR053ZEC107139187  
Engine No: 3ZZ4625054  
Reg. Date: 16/01/2007

*Not Authorized*

*11 Reg &*

*Resurvey After Paint*

*4 days*

## Estimate Repair Cost to Vehicle No :SGQ4387K

Description	U/Price	Quantity	List Price	Amount
			<u>S\$</u>	<u>S\$</u>
<b>Spare Parts</b>				
1 FRONT BUMPER	955.80	1 PC	955.80	✓
2 FRONT BUMPER CLIPS	40.00	1 SET	40.00	✓
3 FRONT BUMPER FOG LAMP - LH	328.10	1 PC	328.10	X
4 FRONT BUMPER REINFORCEMENT	365.50	1 PC	365.50	X
5 FRONT BUMPER SIDE RETAINER - LH	36.30	1 PC	36.30	✓
6 FRONT BUMPER SIDE RETAINER - RH	36.30	1 PC	36.30	X
7 FRONT FENDER - LH	544.00	1 PC	544.00	✓
8 FRONT FENDER SPLASH SHIELD - LH	245.30	1 PC	245.30	X
9 FRONT FENDER SPLASH SHIELD CLIP	40.00	1 SET	40.00	X
10 FRONT GRILLE	285.50	1 PC	285.50	X
11 FRONT HEADLAMP - LH	825.10	1 PC	825.10	✓
12 FRONT SUPPORT PANEL - LH	625.10	1 PC	625.10	X
			4,327.00	4,327.00
<b>Labour</b>				
13 TO DISMANTLE & REPLACE DAMAGED PARTS, PANEL BEAT WHERE NECESSARY.	800.00	1 JOB	800.00	400/
14 TO PUTTY, APPLY PRIMER & SPRAY-PAINT ON THE AFFECTED PORTION.	800.00	1 JOB	800.00	400/
15 TO CHECK WIRING FUNCTIONS.	60.00	1 JOB	60.00	20/
			1,660.00	1,660.00
			<b>Total</b>	<b>S\$ 5,987.00</b>
			<b>Add GST @ 7%</b>	<b>419.09</b>
			<b>Total Amount Payable</b>	<b>S\$ 6,406.09</b>

TOTAL: SINGAPORE DOLLAR SIX THOUSAND FOUR HUNDRED AND SIX AND CENTS NINE ONLY

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:

For Yee Auto Pte Ltd

AUTHORISED SIGNATURE



## 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	26/08/2020 14:27
Date Of Accident	02/08/2020 15:10
Exact Location Of Accident	BUKIT MERAH NEW BLK 116 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGQ4387K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YEE LEASING PTE LTD
Co Reg No	2XXXXX915H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88928018
Alternative Phone No	OFFICE-88928018

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	999993867
Cover Note Number	

### Driver

Name of Driver	OH BENG LYE
NRIC No	SXXXX579C
Date Of Birth	08/10/1963
Occupation	OUTDOOR
Date Of Driving Pass	26/02/2014
Driving Experience	6 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88928018
Fax Number	
Contact Number	
Email Address	ONBENGLYE99@GMAIL.COM



Address BLK 10 NORTH BRIDGE ROAD #10-5109  
 Postcode 190010  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OTHER - HIRER  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

#### General Information of the Accident

Type Of Accident SIDE SWIPE  
 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) 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

Please refer to Sketch Plan.

#### 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

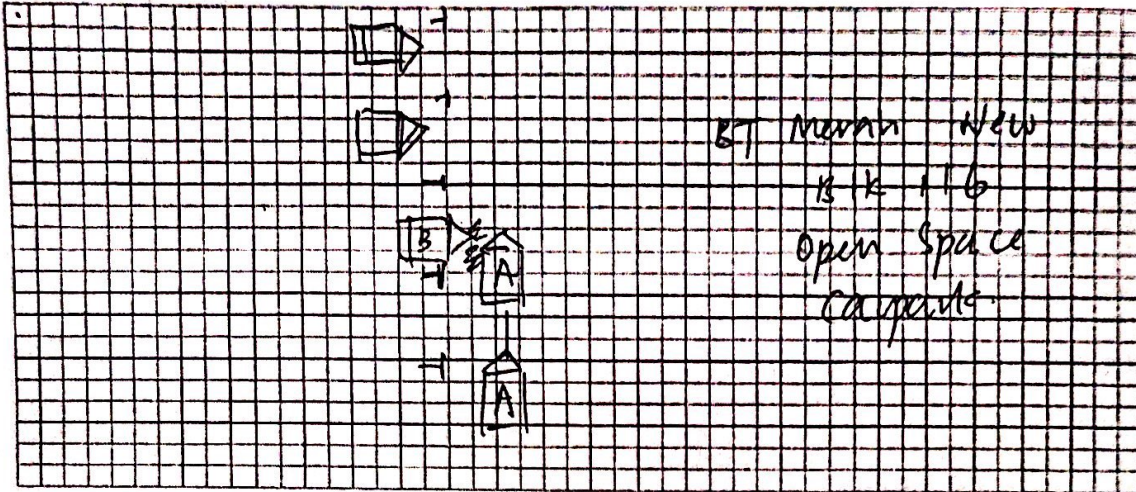
Vehicle Registration Number SDM8889J  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)



## SKETCH PLAN

(A) SGQ 4387K

(B) SDM 8889J




## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

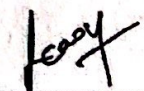
On 2/8/2020 at 15:10. I was driving my vehicle (A) SGQ 4387K along BT Murnah New Blk 116 open space carpark. As I go straight at main road. Suddenly, the vehicle (B) SDM 8889J come out from carpark lot left side and hit my vehicle front left portion. Because of the owner SDM 8889J told me he need to private settlement with us but now I received the letter from his claiming to us so that I have to make this report.

## DECLARATION

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


 Policyholder's Signature  
Date & Time:
26 AUG 2020  
GIARMC Sketch Plan Form V3
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

26 AUG 2020

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

26 AUG 2020