

ASS. REC. BY: Sun Pin

REF:

CS/CTI 20014166/Qvfb

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

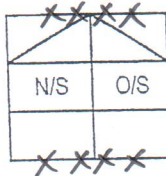
To Inspect Vehicle No: _____

at Workshop m/s _____ 3157 2626of _____ 3157 2631Insured: SME 951A SiewPolicy No. DMPG SNW00121372001Claims No. SNM20D204833/02/SME951ASum Insured: 1 TAYHP 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: _____ days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SDZ 8118H Yr Regn: 12/08/2015Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Toyota/Lexus ES250 C.C. 2494Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 37675 T/Radio: Insured / Std / NI / NAEng/No: -C/No: JTHBJ144002083110Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt or _____Brake: In order / Jammed / Leaked / Burnt or _____Modi: Nil / S/Rim / STD A/Rim or _____Tyre Size: F: 215 / 55 / R17R: 215 / 55 / R17

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

TOYO (YOKO) or _____

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 11/12/2020 D.O.I. 21/12/2020Survey held at Auto Insure.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

MV: 87,000

PV: 56,712

NV: 30,288

45

23/4/21 Finalize \$4,100 @ 7days. (Red 1867-44 319)

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 7

1)

☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

2) 23/4 - typistAdd Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Report Format: MerimenLump Sum / L.B. / C 4100/-

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 Submission	11/12/2020 17:26 (SGT)
Date of Accident	11/12/2020 12:00 (SGT)
Exact Location of Accident	Dairy Farm Rd, Singapore
Additional Location Information	AT JUNCTION OF DAIRY FARM ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDZ8118H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JASHANDEEP SINGH
NRIC No	SXXXX784D
Email Address	Singhjashan07@gmail.com
Mobile Phone No	(Phone) +65-91052752
Alternative Phone No	+65-91052752

VEHICLE PARTICULARS

Manufacturer	Lexus
Model	Es250
Variant	-
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Direct Asia
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00803100
Cover Note Number	-

DRIVER

Name of Driver	JASHANDEEP SINGH
NRIC No	SXXXX784D
Date Of Birth	08/11/1986
Occupation	Indoor

Date Of Driving Pass	12/12/2005
Driving experience	15 YEARS
Gender	Male
Mobile Number	(Phone) +65-91052752
Alt. Phone Number	+65-91052752
Email Address	Singhjashan07@gmail.com
Address	BLK 803C KEAT HONG CLOSE #10-12
Address complement	-
Postcode	683803
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes

PASSENGER 1

Name	PASSENGER
Gender	Female

PASSENGER 2

Name	PASSENGER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 11/12/2020 AT 1200 HRS, I WAS AT THE JUNCTION OF DAIRY FARM RD WAITING FOR THE LIGHTS TO TURN GREEN. I WAS IN THE 2ND LANE WHEN I FELT A HARD IMPACT FROM MY REAR AND REALISED VEHICLE B HAD COLLIDED ONTO MY VEHICLE. I WISH TO STATE THAT IT WAS A 3 CAR CHAIN COLLISION, VEHICLE B HAD COLLIDED ONTO MY VEHICLE AND AS THE IMPACT WAS VERY HARD IT CAUSED MY CAR TO SURGED FORWARD AND HIT ONTO VEHICLE C. IN MY CAR WAS MY WIFE, WHO IS PREGNANT, MY 16 MONTH OLD DAUGHTER AT THE BACK & MYSELF IN THE DRIVER SEAT.

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	SME951A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SME7443D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

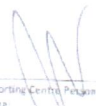
SKETCH PLAN

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. The report will be forwarded by the insurers of the GIA Record 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 lodgment 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.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that:
 - (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes");
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes;
 - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims;
 - (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time


Driver's Signature
(If driver is not the policyholder)
Date & Time


Reporting Centre Personnel's Signature
Name
NRIC/IN No.

1/16/2017 10:00:00 AM



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/12/2020 at 12:00 HRS, I was at the junction of Dairy Farm Rd waiting for the lights to turn green. I was in the 2nd lane when I felt a hard impact from my rear and realised vehicle B had collided onto my vehicle. I wish to state that it was a 3 car chain collision, vehicle B had collided onto my vehicle and at the impact was very hard it caused my car to surge forward and hit onto vehicle C.

In my car was my wife who is pregnant, my 16month old daughter at the back & myself in driver seat.

DECLARATION

(We declare the foregoing particulars are true in every respect.)

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/PPN No.:

Auto Insure Pte. Ltd
6 Marsiling Lane
739145



Insurer Reference: M1237
Repairer Reference: SDZ8118H
Date calculated: 16/12/2020 9:42 AM

Full Report
Registration: SDZ8118H
Printed: 16/12/2020 9:42 AM

Summary Information

Claim

Location:	Singapore (SG)	Work Provider:	China Taiping Insurance (Singapore) Pte Ltd
Printed by:	Sam Goh	Currency:	SGD
Claim Reference:	M1237	Date of Incident:	11/12/20
Estimated Repair Time:		Hire Car Start:	
Actual Repair Days:		Hire Car End:	

Vehicle Details

Vehicle

Manufacturer:	LEXUS
Model:	ES (V6)
Sub Model:	250
Model Sheet Number:	24 23 30
Registration:	SDZ8118H
VIN number:	
Odometer:	

Model Specs

TWO COAT METALLIC

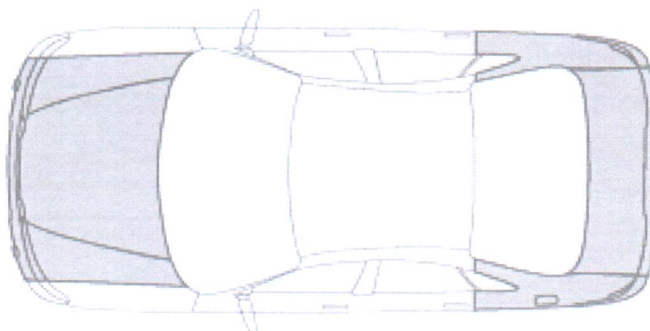
Vehicle Condition

Vehicle Status

Pre-Accident Damage:
Date of Inspection:

Damage Areas

All ☐
Underbody ☐



Labour

Time Base 10 WU/h

Price = 42.00 SGD/h

Code	Description	WU	Price SGD
B020	RENEW FRONT BUMPER INCLUDES: R + R FRONT BUMPER, RADIATOR GRILLE AND NECESSARY ATTACHED PARTS	23.0	96.60
NO NUMBER	R + R FRONT BUMPER DAMPER	1.0	4.20
B070	RENEW BONNET INCLUDES: ASS ATTACHED PARTS AND IF NECE RENEW	6.0	25.20
B290	RENEW END PANEL (BUMPER REMOVED) INCLUDES: R + R BOOT FLOOR CARPET AND ALL TRIMS IN THE REPAIR SECTION	38.0	159.60
B360	RENEW BOOT LID INCLUDES: R + R BOOT LID, CONVERT ATTACHED PARTS	12.0	50.40
811201)	R + R L/NUMBER PLATE LAMP	2.0	8.40
811201)	R + R R/NUMBER PLATE LAMP	2.0	8.40
NO NUMBER	R + R L/R BUMPER BRACKET	2.0	8.40
NO NUMBER	R + R R/R BUMPER BRACKET	2.0	8.40
B410	R + R REAR BUMPER CARRIER	1.0	4.20
B420	RENEW REAR BUMPER INCLUDES: BUMPER AND ALL REQUIRED ATTACHED PARTS R + R	11.0	46.20
B407	R + R L/OUTER REAR LAMP	2.0	8.40
B407	R + R R/OUTER REAR LAMP	2.0	8.40
3901	REAR FLOOR PANEL REPAIR ?X	X 30.0*	126.00
Labour Cost *Tail lamp part 20.0 wu ✓		Hrs	WU
Panel / Mechanical Labour		13.40	134.0
Total of Labour			562.80

Paint

Code	Description - TWO COAT METALLIC	WU	Price SGD
	BONNET NEW PART PAINTING	26.0	
	END PANEL NEW PART PAINTING	22.0	
	BOOTLID NEW PART PAINTING	19.0	
	FRONT BUMPER NEW PART PAINT K1R	13.0	
	REAR COVER BUMPER NEW PART PAINT K1R	14.0	
	REAR FLOOR PANEL SURFACE PAINT	12.0	

Paint Material Per Part

Code	Description	Price SGD
0471	BONNET NEW PART PAINTING	86.17
2711	END PANEL NEW PART PAINTING	28.05
2931	BOOTLID NEW PART PAINTING	55.73
0283	FRONT BUMPER NEW PART PAINT K1R	61.50
2583	REAR COVER BUMPER NEW PART PAINT K1R	70.85
3901	REAR FLOOR PANEL SURFACE PAINT	40.84

Labour Cost - Paint

Factor	42.00 SGD/h	Hrs	WU	Price SGD
Time Paint			106.0	
Preparation Main Work Metal		2.10	21.0	88.20
Preparation Comp. Work Plastic		0.50	5.0	21.00
Total	10 WU/h	13.20	132.0	554.40

Material Cost - Paint

New Part Painting	Price SGD
New Part Painting - Plastic K1R	169.95
Surface-/Blend Paint	132.35
Material-constant Metal	40.84
Material-constant Plastic	18.10
Total	9.00
	370.24

Spare Parts

				prices as at 2015-06-01	
Code	Description	Part Number	Part Source	Price SGD	
0471	BONNET PP / PD	53301 33160	Original	850.00	
2931	BOOTLID / PP	64401 33650	Original	420.00	
2979	BOOTLID TRIM X SVC	76801 33450	Original	165.00	
2711	END PANEL / PP	58307 33171	Original	275.00	
4985	END PANEL TRIM / CRU	58387 33150C0	Original	165.00	
0283	FRONT BUMPER / KRU	52119 3T918	Original	375.00	
0344	FRONT BUMPER 2X SVC	52611 33220	Original	80.00	
	DAMPING				
0410	GRILLE / CRU	53111 33440	Original	385.00	
0431	GRILLE BADGE / SCR	90975 02125	Original	155.00	
0420	GRILLE MOULDING / CRA	53121 33060	Original	145.00	
2619	L/R INN BUMPER BRKT SVC X 2	52156 33010	Original	75.00	
2609	L/R UPP BUMPER BRKT SVC X 2	52563 33040	Original	50.00	
3015	MANUFACTURER BADGE NPC	75447 33180		50 0.00	
2620	R/R INN BUMPER BRKT SVC X 2	52155 33010	Original	85.00	
2610	R/R UPP BUMPER BRKT SVC X 2	52562 33050	Original	70.00	
3013	REAR BADGE NPC	90975 02142	Original	50.00	
2625	REAR BUMPER DAMPER / CRU	52615 33140	Original	70.00	
2640	REAR BUMPER SUPPORT / BT	52171 33160	Original	210.00	
2583	REAR COVER BUMPER / CRU	52159 33953	Original	475.00	
2621	REAR DECAL STRIPE SVC X 2	PT747 33130		0.00	
1015	UPPER AIR GUIDE SVC X 2	53295 33080	Original	135.00	
3017	VERSION BADGE / NPC	75442 33400		50 0.00	
f: OEM Parts	Savings			0.00	
n: Non-OEM Parts	Subtotal			4,235.00	
u: Used parts	Total			4,235.00	

Extras

Code	Description	Price SGD
1000	FRONT CAR PLATE / CRU	60.00*
1001	REAR CAR PLATE / SCR	60.00*
Total Extras		120.00

Code	Description	Price SGD
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Final Calculation

	SGD	SGD
Parts	4,235.00	
Total Parts		4,235.00
Labour Time Base 10 WU/h		
Total 134.0 WU X 42.00 SGD/h	562.80	
Total of Labour		562.80
Total Of Extras		120.00
Paint Work Time Base 10 WU/h		
Labour Cost 132.0 WU X 42.00 SGD/h	554.40	
Material Cost	370.24	
Total Paint Including Material		924.64
Repair Cost Excludes GST	5,967.44	5,842.44
GST (+7.00%)		408.97
Repair Cost Included GST		6,251.41

Comments

* - USER SUPPLIED DATA
 NN - NO MANUFACTURERS CODE EXISTS
) - WU PARTIAL INCL IN OTHER POSITIONS

Assessment Note

No assessment notes entered.

Repair dy - 7 dys

LIS

After paint photo

Sun Pin (46)

21/12/2020

TP without prejudice

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: