

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 20 TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s Tang Luck  
 of \_\_\_\_\_  
 Insured: 7788  
 Policy No. \_\_\_\_\_  
 Claims No. 9018775079SG  
 Sum Insured: \_\_\_\_\_ Excess: 1400  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: \$58k  
 IDAC Accident Report: \_\_\_\_\_ Consistent?: Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No  
 Est. Repairs: X-5 days Res.: Yes or No  
 Lum Sum: 1.3.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

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

Veh No: GBJ 8766U Yr Regn: 09.19  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Volkswagen Transporter 1988  
 Colour: Red A/C: Insured / Std / NI / NA  
 Sp. Reading: 49829 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: WV1 888 FH 2K14 031227  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or  
 Brake: In order / Jammed / Leaked / Burnt or  
 Modl: Nil / S/Rim / STD A/Rim or  
 Tyre Size: F: G7 215/65R16  
Greenex  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_  
 Front: \_\_\_\_\_ Rear: \_\_\_\_\_  
 R/Bal. 8 mm R/Bal. 9 mm  
 L/Bal. 8 mm L/Bal. 9 mm  
 D.O.A. 12/12/20 D.O.I. 6/1/2021  
 Survey held at \_\_\_\_\_  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
015 151  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

07/01/21@9.30am revert to AIG via Merimen

07/01/21@10.28am Kok Chong informed C/A via Merimen

07/01/21@10.33am Informed Candy C/A &amp; ex: \$1400 by email.

Kenneth confirmed final fig \$5567.80, 5 days (Red \$2056, 27%)

Date/Time, File Pass to?

☐ : Prel. Report

1) 08/02 Typist

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S - RS. \$1

Fees

Others

TOTAL

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

Report Format:

MER-OD

Comp Sum / I.B.I: (\$ 5567.80)



# TONG LUCK AUTO PTE LTD

160 SIN MING DRIVE #07-01/06 SIN MING AUTOCITY, SINGAPORE 575722

Tel: 6250 0088 Fax: 6250 5545

Email: operation@tlauto.com.sg

GST No: 201700521W UEN No: 201700521W

PAGE: 1

M/S : AIG ASIA PACIFIC INSURANCE PTE. LTD.

78 SHENTON WAY #07-16  
AIG BUILDING  
SINGAPORE 079120

ATTN : MOTOR CLAIM DEPT

TEL : 6419 3000

FAX : 6415 3723

YOUR REF NO :

CLAIM TYPE : OWN DAMAGE

ACCIDENT DATE : 12/12/2020

## ESTIMATE

NO : QUOT202012-000093(00)

DATE : 05/01/2021

POLICY NO : 999995730

VEH REG NO : GBJ8766U

MAKE/MODEL : VOLKSWAGEN T6 VAN TDI  
NWB DSG

CHASSIS NO : WV1ZZZ7HZKH031227

ENGINE NO : CXH179424

REG. DATE : 2018

*Not Authorized  
Returning B4 paint*

*4-5 days  
6/1/2021*

## Estimate Repair Cost to Vehicle No : GBJ8766U

Description	Quantity	Unit Price	Amount
		S\$	S\$
<b>PARTS</b>			
1 Bonnet	1	1,180.00	1,180.00 ✓
2 Support panel	1	780.00	780.00 ?
3 Headlamp assy - RH	1	485.00	485.00 ?
4 Front bumper	1	880.00	880.00 ✓
5 Front bumper reinforcement	1	520.00	520.00 X
6 Front bumper side retainer - RH	1	28.00	28.00 ✓
7 Front bumper inside part - RH	1	65.00	65.00 ?
8 Front bumper clips	15	5.00	75.00 ✓
9 Front fender - RH	1	485.00	485.00 ✓
10 Front fender inner shield - RH	1	160.00	160.00 ✓
11 Front fender inner shield clips	20	5.00	100.00 ✓
			4,758.00
		Add 10%	475.80
			5,233.80
<b>LABOUR</b>			
12 To panel beat and straighten RH front fender inner panel, RH front chassis frame, including replacement of parts and align where necessary, to refit and adjust the same	1	1,000.00	1,000.00 ?
13 To check and rectify wiring system	1	80.00	80.00 2el
14 To putty and spray same on affected areas	1	1,000.00	1,000.00 4001
15 To supply artwork and paste logo on bonnet	1	220.00	220.00 ?
			2,300.00
		TOTAL	S\$ 7,533.80
		ADD GST @ 7%	527.37
		GRAND TOTAL	S\$ 8,061.17

SINGAPORE DOLLAR EIGHT THOUSAND SIXTY-ONE AND CENTS SEVENTEEN ONLY

FOR TONG LUCK AUTO PTE LTD



# 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	14/12/2020 08:30 (SGT)
Date of Accident	12/12/2020 11:00 (SGT)
Exact Location of Accident	Bedok North Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ8766U
-----------------------------	----------

### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD
Company Reg No	1XXXXX778Z
Email Address	faizal.mohamed@daimler.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	+65-68498118

### VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	T6 VAN TDI NWB DSG
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Commercial vehicle

### INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995730
Cover Note Number	-

### DRIVER

Name of Driver	CHEAH NGAK HOE
NRIC No	SXXXX078Z
Date Of Birth	02/08/1967
Occupation	Outdoor

SE REFER TO POLICE REPORT NO, T/20201212/2056 LODGE AT BEDOK NORTH NPC  
 THE 12 DECEMBER 2020 AT ABOUT 11HRS, I WAS EXITING BLK 111 BEDOK NORTH ROAD AND WANTING TO MAKE A  
 RIGHT TURN INTO BEDOK NORTH ROAD TOWARDS NEW UPPER CHANGI ROAD. I THEN CHECKED CLEAR FOR ONCOMING  
 TRAFFIC. AS I WAS CLEAR TO PROCEED, I NEGOTIATED THE RIGHT TURN. ALL OF A SUDDEN, A MOTORCYCLE APPEARED  
 ON MY RIGHT AND COLLIDED INTO MY FRONT RIGHT BUMPER. AS A RESULT OF THE ACCIDENT, THE MOTORCYCLIST  
 FELL ONTO THE ROAD. I QUICKLY EXITED FROM MY VEHICLE TO RENDER ASSISTANCE TO THE MOTORCYCLIST RIDER. I  
 NOTICED THAT THE MOTORCYCLIST DID NOT TIGHTEN THE HELMET PROPERLY. ANOTHER MOTORCYCLIST, THEN  
 CALLED FOR AMBULANCE ASSISTANCE. THE MOTORCYCLIST WHO WAS CONSCIOUS WAS ABLE TO LIFT HIMSELF UP  
 ONTO THE STRETCHER AND HE WAS SUBSEQUENTLY CONVEYED TO CHANGI GENERAL HOSPITAL. SHORTLY AFTER,  
 POLICE RESOURCE ARRIVED AT THE ACCIDENT SCENE. TRAFFIC POLICE AFTER WHICH CAME AND ADVISED ME TO  
 LODGE A TRAFFIC ACCIDENT REPORT. I WANT T STATE, DUE TO THE ACCIDENT, MY VEHICLE SUFFERED DAMAGES TO  
 THE RIGHT SIDE OF THE VEHICLE (I.E. FRONT RIGHT BUMPER-SCRATCHES AND DENTS) THIS IS THE FIRST TIME SUCH AN  
 ACCIDENT HAPPENED TO ME. MY VEHICLE HAD A IN CAR CCTV. HOWEVER THERE IS NO SD CARD FOR RECORDING.  
 THAT'S ALL

#### 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	JRN5114
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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)	-

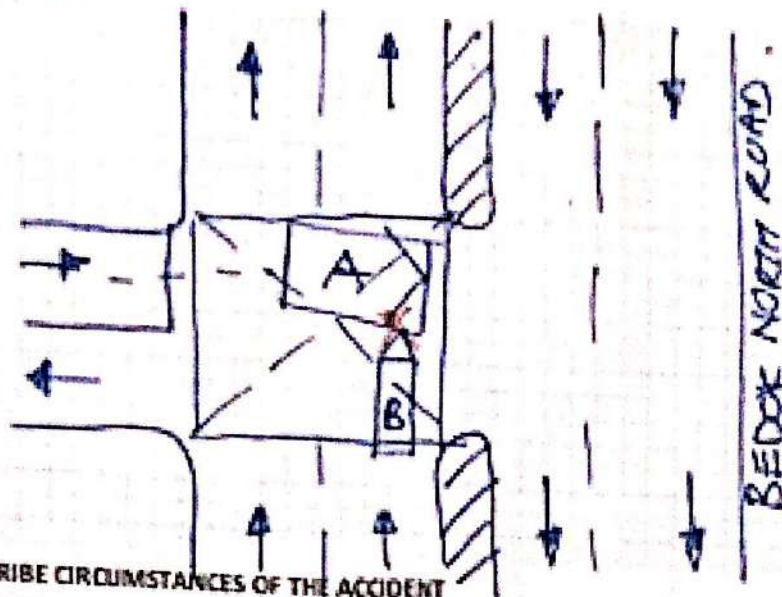
#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	NA
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	JRN5114
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes



SKETCH PLAN



A-GBJ8766U

B-JRNS114

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

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

Policyholder's Signature  
Date & Time:

247  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 13/12/2020.

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
MOHAMMAD AZALY BIN ABDULLAH  
Reporting Centre Personnel's Signature  
Name:  
NIC/TIN No.: