

ASS. REC. BY:

REF:

AUG/

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. _____

Sum Insured: _____

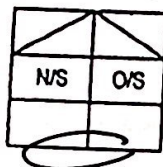
Excess: _____

(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 Report: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: _____

06 days

Res.: Yes or No

Lum Sum: _____

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Alvin

Veh No: _____

SDJ 1899S

Yr Regn: 12, 15

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

Truck / Trailer or _____

Make: _____

Mer (A) 200

c.c

1991

Colour _____

M. Silver

AC: Insured / Std / NI / NA

Sp. Reading _____

100502

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

WDD 2050422R 088129

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: NII / S/Rim / STD A/Rim or _____

Tyre Size: F: _____

R: _____

225/45R18

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

TOYO / YOKO or _____

Front

R/Bal. _____

8

mm

L/Bal. _____

8

mm

D.O.A. _____

9/1/21

Rear

R/Bal. _____

8

mm

L/Bal. _____

8

mm

D.O.I. _____

12/1/2021

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or _____

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Report Format :

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: _____

: Site Insp (\$ _____)

: Interview (\$ _____)

Tech Invs (\$ _____)

Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S - RS. SI _____

Fees _____

Others _____

TOTAL

MBM WHEELPOWER PTE. LTD.

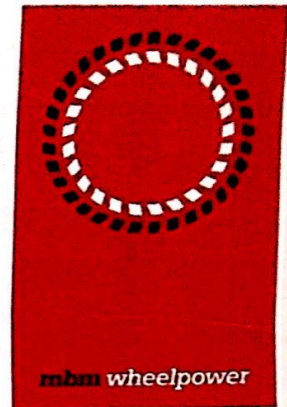
YOUR REF.: SML4797R
OUR REF.: SDJ1899S

TO: AIG
CC: MOTOR CLAIMS DEPARTMENT

FAX:

Not Authorized
6 days
Presumy After Pain

kenethkay@kkawo.com



DATE: 11/1/2021
FROM: Alvin Koh
FAX: 64525333
CONTACT: 81387188
MAKE & MODEL: MERCEDES BENZ C200 A
CHASSIS NO.: WDD2050422R088129
ENGINE NO.: 27492030417805
YEAR MADE: 2015
ACCIDENT DATE: 9 January 2021

ESTIMATE FOR VEHICLE NO.: SDJ1899S

NO.	DESCRIPTION	PART NO.	QTY.	LIST PRICE
1	BOOTLID		1	\$ <i>B1</i> 2,200.00 ✓
2	BOOTLID HINGE - LH		1	\$ <i>R</i> X 320.00
3	BOOTLID HINGE - RH		1	\$ <i>R</i> X 320.00
4	BOOTLID WEATHERSTRIP		1	\$ <i>INTIMA 500</i> 220.00
5	BOOTLID CHROMESTRIP		1	\$? 200.00
6	BOOTLID (C200) EMBLEM		1	\$ <i>na</i> - 125.00
7	BOOTLID MERCEDES LOGO		1	\$ <i>na</i> - 95.00
8	BOOTLID LOCK		1	\$ <i>na</i> ✓ 350.00
9	REAR FENDER TOP GARNISH - LH		1	\$ <i>CM</i> ✓ 120.00
10	REAR FENDER TOP GARNISH - RH		1	\$ <i>DR</i> ✓ 120.00
11	REAR TAIL LAMP - LH		1	\$? 1,050.00
12	REAR TAIL LAMP - RH		1	\$ <i>CM</i> ✓ 1,050.00
13	REAR TAIL LAMP BRACKET - LH		1	\$? 105.00
14	REAR TAIL LAMP BRACKET - RH		1	\$? 105.00
15	REAR BUMPER RETAINER - LH		1	\$ <i>na</i> X 95.00
16	REAR BUMPER RETAINER - RH		1	\$ <i>DR</i> ✓ 95.00
17	REAR BUMPER RETAINER - CENTRE		1	\$ <i>B1</i> ✓ 155.00
18	REAR BUMPER		1	\$ <i>B1</i> ✓ 1,850.00
19	REAR BUMPER TOWING COVER		1	\$ <i>mi</i> ✓ 65.00
20	REAR BUMPER CLIPS		10	\$ <i>na</i> <i>both</i> 150.00
21	REAR BUMPER CHROME STRIP - LH		1	\$ <i>na</i> ✓ 120.00
22	REAR BUMPER CHROME STRIP - RH		1	\$ <i>na</i> ✓ 120.00
23	REAR BUMPER LOWER SPOILER		1	\$ <i>na</i> ✓ 380.00
24	REAR BUMPER LOWER COVER - CHROME		1	\$ <i>CM</i> ✓ 280.00
25	REAR BUMPER REINFORCEMENT		1	\$? 750.00
26	REAR BUMPER RIVET		15	\$? 150.00

MBM WHEELPOWER PTE. LTD.

160 SIN MING DRIVE, #06-02

SIN MING AUTOCITY

27	REAR BUMPER UNDER COVER - RH	1	\$	CM <i>1</i> <i>X</i>	190.00
28	REAR END PANEL	1	\$	<i>R</i> <i>✓</i>	1,300.00
29	REAR END PANEL TOP GARNISH	1	\$	<i>DIO</i> <i>✓</i>	135.00

TOTAL:	\$	12,215.00
LESS 10%:	\$	(1,221.50)
PARTS TOTAL:	\$	10,993.50

SPECIAL NETT

REVERSE SENSOR	4	\$	<i>7</i>	1,000.00
BODY SEALANT	1	\$	<i>301n</i>	150.00
CERAMIC COATING	1	\$	<i>?</i>	750.00
REAR NUMBER PLATE HOLDER	1	\$	<i>1n X</i>	60.00

LABOUR

TO REMOVE, REFIT & REPAIR AFFECTED DAMAGED PARTS	\$	<i>700l</i>	1,600.00
TO REMOVE & REPLACE BUMPER SENSORS	\$	<i>60l</i>	120.00
TO REMOVE & INSTALL BOOTLID INNER COMPONENT TO FACILIATE REPAIR	\$	<i>60l</i>	100.00
TO REMOVE & REFIT REAR END PANEL LINING & GARNISH TO FACILIATE REPAIR	\$	<i>60l</i>	120.00
TO REMOVE & INSTALL UPHOLSTERY TO FACILIATE REPAIRS	\$	<i>12 X</i>	150.00
TO APPLY ANTI RUST COATING	\$	<i>30l</i>	100.00
TO RESET ENGINE WARNING LIGHT (ABS, SRS, ECU MEMORY & ETC)	\$	<i>?</i>	300.00
TO CHECK & RECONNECT ALL WIRING	\$	<i>20l</i>	50.00
TO SPRAY PAINT ON THE AFFECTED AREA	\$	<i>900l</i>	1,400.00
TOTAL:	\$		16,893.50
7% GST:	\$		1,182.55
GRAND TOTAL:	\$		18,076.05

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:

MBM WHEELPOWER PTE. LTD.

160 SIN MING DRIVE, #06-02

SIN MING AUTOCITY

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 11/01/2021 14:20 (SGT)
Date of Accident 09/01/2021 13:30 (SGT)
Exact Location of Accident Bangkit Rd, Singapore
Additional Location Information Bangkit Rd turning into Bukit Panjang Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDJ1899S

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Chiam Boon Hui
NRIC No SXXXX279H
Email Address chiamoohui@yahoo.com
Mobile Phone No (Phone) +65-91516169
Alternative Phone No (Home) +65-91516169

VEHICLE PARTICULARS

Manufacturer Mercedes
Model C200
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 China Taiping Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00174652005
Cover Note Number -

DRIVER

Name of Driver Chiam Boon Hui
NRIC No SXXXX279H
Date Of Birth 01/09/1973
Occupation Indoor

Date Of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

14/10/1992
 28 YEARS AND 3 MONTHS
 Male
 (Phone) +65-91516169
 (Home) +65-91516169
 chiamoohui@yahoo.com
 BLK 605 #13-37 Senja Road

670605

Yes

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Collision - Head to Rear

Raining

Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
 Number of vehicles involved in the accident
 Was anybody injured in the Accident?
 Was any injured conveyed to hospital by ambulance?
 Was any other material or property damaged?
 Number of Passengers (Including Driver)
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No

2

No

-

Yes

1

No

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 If yes, against whom?

No

No

-

CIRCUMSTANCES OF ACCIDENT

refer attached report.

ATTACHMENT(S)

Are accident photos available for attachment?
 Was there any video captured by Car Camera?
 Was there any audio recorded?

Yes

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category
 Name of Driver
 Contact Number
 Address
 Address complement
 Postcode
 Insurance Company Name

SML4797R

Subaru

XV20

-

-

Private car

Chua Guo Shui Bryan

(Phone) +65-83882494

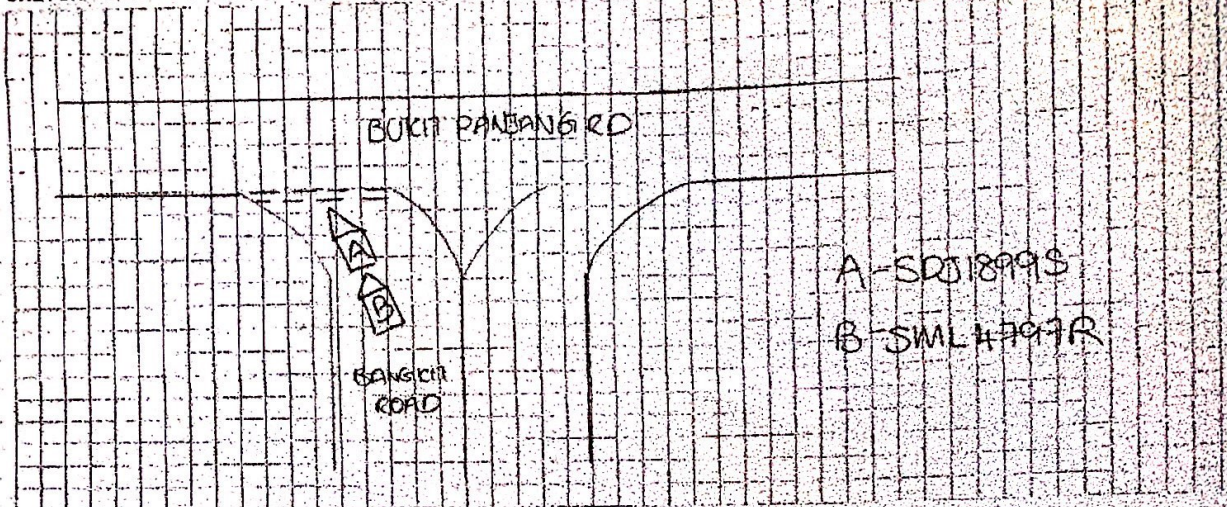
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AIG

SKETCH PLAN

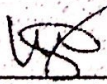
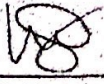



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stopping and waiting to turn into Bukit Panjang Road from Bangkit Road when driver of vehicle SML 4797R hit my car from the back.

DECLARATION

I/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/FIN No.:
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