

ASS. REC. BY:

Tang JH

REF:

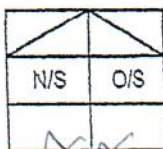
CS/SMO21003139/T.4vd3

## 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. \_\_\_\_\_  
 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: 436K  
 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

Date: \_\_\_\_\_ Person Contacted: John Vehicle: IN / OUT

Veh No: SKJ749R Yr Regn: 2013 Feb  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Volkswagen Beetle c.c. 1197  
 Colour: white A/C: Insured / Std / NI / NA  
 Sp. Reading: \_\_\_\_\_ T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: WVWZZZ16ZCM655161  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi: Nil / S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 215/60R16  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_  
 Front \_\_\_\_\_ Rear \_\_\_\_\_  
 R/Bal. 6 mm R/Bal. 6 mm  
 L/Bal. 6 mm L/Bal. 6 mm  
 D.O.A. \_\_\_\_\_ D.O.I. 11/3/21  
 Survey held at WP Auto  
 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

Battery neck

Date/Time, File Pass to?

☐ : Preli. Report  
☐ : Final Report

1) \_\_\_\_\_  
 Date/Time, File Return to?

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

Rep. Format: \_\_\_\_\_

Lump Sum / I.B.P. (\$) \_\_\_\_\_

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

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

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS \$ \_\_\_\_\_

Photos \_\_\_\_\_

Others \_\_\_\_\_

TOTAL



## Estimation

Date  
Vehicle SKJ 749 R  
Make/Model VOLKSWAGEN BEETLE  
Chassis No.

No.	Description	Unit	Unit Price	Amount
	Parts Replacment			
1	TAILGATE <i>pr bt</i>	1	\$	-
2	TAILGATE WINDSCREEN MOULDING <i>rel</i>	1	\$	-
3	TAILGATE CENTER LAMP <i>x</i>	1	\$	-
4	TAILGATE LOGO OPENER <i>x</i>	1	\$	-
5	TAILGATE EMBLEM - BEETLE <i>rel</i>	1	\$	-
6	TAILGATE LOCK <i>x</i>	1	\$	-
7	TAILGATE LOCK CATCH <i>x</i>	1	\$	-
8	TAILGATE TRIM <i>x</i>	1	\$	-
9	TAILGATE HINGE SET <i>x</i>	2	\$	-
10	TAILGATE DAMPER SET <i>x</i>	2	\$	-
11	TAILGATE WEATHERSTRIP <i>int</i>	1	\$	-
12	TAIL LAMP L+R <i>LH x - RH - con</i>	2	\$	-
13	TAIL LAMP LOWER BRACKET L+R <i>con x</i>	2	\$	-
14	REAR BUMPER <i>de</i>	1	\$	-
15	REAR BUMPER NUMBER PLATE LAMP L+R <i>con</i>	2	\$	-
16	REAR BUMPER TOW COVER <i>x</i>	1	\$	-
17	REAR BUMPER REVERSE SENSOR SET <i>mm</i>	4	\$	-
18	REAR BUMPER REFLECTOR L+R <i>x</i>	2	\$	-
19	REAR BUMPER LOWER <i>de</i>	1	\$	-
20	REAR BUMPER RETAINER L+R <i>con</i>	2	\$	-
21	REAR BUMPER CENTER BRACKET <i>de</i>	1	\$	-
22	REAR BUMPER REINFORCEMENT BAR <i>bt</i>	1	\$	-
23	REAR BUMPER LOWER BRACKET L+R <i>x LH, RH - con</i>	2	\$	-
24	REAR BUMPER SPONGE <i>x</i>	1	\$	-
25	REAR FENDER L+R <i>x</i>	2	\$	-
26	REAR FENDER AIR VENT L+R <i>x</i>	2	\$	-
27	REAR FENDER INNER TRIM L+R <i>x LH, RH - tn</i>	2	\$	-
28	REAR FENDER COWLING L+R <i>x LH, RH - tn</i>	2	\$	-
29	END PANEL <i>bt</i>	1	\$	-
30	END PANEL AIR VENT <i>x</i>	1	\$	-
31	END PANEL TOP GARNISH <i>de</i>	1	\$	-
32	REAR SMART LOCK ANTENNA <i>x</i>	1	\$	-
33	REAR INNER SMART LOCK ANTENNA <i>x</i>	1	\$	-
34	SPAREWHEEL PANEL <i>x</i>	1	\$	-
35	SPAREWHEEL PANEL TOP BOARD <i>de</i>	1	\$	-
36	EXHAUST PIPE <i>x</i>	1	\$	-
37	EXHAUST MOUNTING SET <i>x</i>	2	\$	-

38	EXHAUST HEAT SHIELD <i>X</i>	1		\$	-
			Total	\$	-
			Less 10%	\$	-
			<b>Total</b>	\$	-

	S/Nett Items				
1	TAILGATE WINDSCREEN SEALANT	1	120	\$ <i>60 net</i>	120.00
2	TAILGATE INNER TRIM CLIPS SET	1	100	\$ <i>X</i>	100.00
3	TAIL LAMP CLIPS SET	1	40	\$ <i>20</i>	40.00
4	REAR BUMPER CLIPS SET	1	100	\$ <i>30 net</i>	100.00
5	REAR NUMBER PLATE	1	100	\$ <i>67 45</i>	100.00
6	REAR FENDER INNER TRIM CLIPS SET	1	100	\$ <i>X</i>	100.00
7	REAR FENDER COWLING CLIPS SET	1	100	\$ <i>X</i>	100.00
8	END PANEL SEALANT	1	250	\$ <i>40 net</i>	250.00
9	END PANEL TOP GARNISH CLIPS SET	1	100	\$ <i>10 net</i>	100.00
10	SPAREWHEEL PANEL SEALANT	1	300	\$ <i>X</i>	300.00
			<b>Total</b>	\$	<b>1,310.00</b>

	LABOUR				
1	PANEL BEATING ON AFFECTED AREAS	1	2200	\$ <i>700</i>	2,200.00
2	SPRAY PAINT ON AFFECTED AREAS	1	1400	\$ <i>700</i>	1,400.00
3	TO RNR REAR EXHAUST	1	250	\$ <i>X</i>	250.00
4	TO CHECK WIRING AND TAIL LAMP FUNCTION	1	150	\$ <i>730</i>	150.00
5	TO CHECK WIRING AND TAILGATE LAMP FUNCTION	1	150	\$ <i>30</i>	150.00
6	TO UNLOAD AND UPHOISTERY REAR BOOT	1	400	\$ <i>60</i>	400.00
7	TO CHECK WATER LEAK	1	150	\$ <i>X</i>	150.00
8	TO RNR FUEL TANK	1	250	\$ <i>X</i>	250.00
9	TO PERFORM DIAGNOSTIC AND CLEAR FAULTS	1	800	\$ <i>X</i>	800.00
10	TO RNR REAR TAILGATE MECHANISM	1	350	\$ <i>60</i>	350.00
11	TO RNR REAR REVERSE SENSOR AND CHECK FUNCTION	1	150	\$ <i>30</i>	150.00
12	TO PERFORM RUST PROOFING	1	400	\$ <i>30</i>	400.00
			<b>Total</b>		

<b>Parts Replacement Amount</b>	\$	<b>1,310.00</b>
<b>Total Amount For Labour</b>	\$	<b>6,650.00</b>
<b>Total Amount</b>	\$	<b>7,960.00</b>

*Tanpin 97495749*  
*'WP' 11/3/21 @ 5pm*  
*1/5 Resurvey after repair*  
*Tanpin @ lkhauto.com*  
*6 days*

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:



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 770F

### Vehicle Details

Vehicle No.: SKJ749R  
Vehicle to be Exported: No  
Intended Deregistration Date: 31 Mar 2021  
Vehicle Make: VOLKSWAGEN  
Vehicle Model: BEETLE 1.2 TSI AT 5C13D5 SR  
Primary Colour: White  
Manufacturing Year: 2012  
Engine No.: CBZ691077  
Chassis No.: WVVZZZ16ZCM655161  
Maximum Power Output: 77.0 kW (103 bhp)  
Open Market Value: \$20,214.00  
Original Registration Date: 08 Feb 2013  
First Registration Date: 08 Feb 2013  
Transfer Count: 1  
Actual ARF Paid: \$10,214.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 07 Feb 2023  
PARF Rebate Amount: \$5,617.00

### Intended COE Rebate Details

COE Expiry Date: 07 Feb 2023  
COE Category: A - Car (1600cc & below)  
COE Period(Years): 10  
QP Paid: \$87,109.00  
COE Rebate Amount: \$16,151.00  
**Total Rebate Amount: \$21,768.00**

The information contained herein is correct as at 09 Mar 2021

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 Submission	09/03/2021 13:25 (SGT)
Date of Accident	08/03/2021 18:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TOA PAYOH LOR 2 SLIP ROAD TOWARDS PIE CHANGI
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKJ749R
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	FOO FANG KIM
NRIC No	SXXXX770F
Email Address	fangkim@yahoo.com
Mobile Phone No	(Phone) +65-91143933
Alternative Phone No	+65-91143933

#### VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Beetle
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	-
Cover Note Number	-

#### DRIVER

Name of Driver	FOO FANG KIM
NRIC No	SXXXX770F
Date Of Birth	13/03/1981
Occupation	Indoor



Date Of Driving Pass .....	12/08/2005
Driving experience .....	15 YEARS AND 7 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-91143933
Alt. Phone Number .....	+65-91143933
Email Address .....	fangkim@yahoo.com
Address .....	23 PALM GROVE AVENUE #01-28 SPORE 547325
Address complement .....	-
Postcode .....	-
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 .....	Collision - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	RINA
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

#### 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 .....	CB7118C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Goods vehicle
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

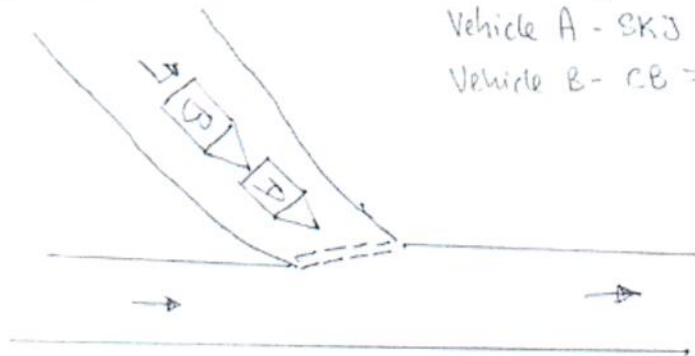
IMPORTANT NOTICE

- 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 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
- 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

 Policyholder's Signature / Date & Time	 Driver's Signature (if driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
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Sketch Plan Teq Payah Lor 2 Slip Road Towards Pte Changi

Vehicle A - SKJ 749R  
Vehicle B - CB 7118C





**Describe Circumstances of the Accident**

On the stated date and time, I vehicle A was stationary on the stated venue. Suddenly vehicle B came from behind and hit onto my vehicle's rear portion.

**Declaration**

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]*

Witnessed by Reporting Centre Personnel