

SS. REC. BY:

Steve

REF:

CS/CTI 21003343/TIVd3

## 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. \_\_\_\_\_

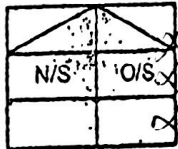
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

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

(Policy Condition)

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



Bal. or Market Value: \_\_\_\_\_

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

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

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Cum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Veh No:

SMS 7429Y

Yr Regn:

12/3/20

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

Truck / Trailer or

Make:

Mazda 6

c.c. 2488

Colour:

White

A/C: Insured / Std / NI / N

Sp. Reading

13587

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

JM 6 GL 12/2K 03/5396

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:

205/50 R16

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

9/3/21

D.O.I.

15/3/21

Survey held at

Trans Eurokars

Des. of Damages: Frt / Rear (O/S) / NIS / UIC / Rooftop or

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

Date / Time

Action / Instruction

MV- 112K

Date/Time, File, Pass to?

☐ : Prel. Report☐ : Final Report

Date/Time, File Return to?

Approved:

Signature / Date

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

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

Add Fee:



Site Insp (\$



Interview (\$



Tech. Inve (%)



Work and (\$

Survey Fee:

Transportation:

\$ + RS, \$

Photos

Others

TOTAL

## TRANS EUROKARS PTE LTD



## ESTIMATE COST OF REPAIRS

CHINA TAIPING (SINGAPORE) PTE LTD 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909		NAME : ADDRESS : TEL :		WIP : <b>30483</b> EXCESS : DATE : 4-Dec-20		
ATTN : FAX :		CONTACT PERSON : Jess 8128 9802				
VEH NO :	SMS7429Y	DATE IN :		TYPE OF CLAIM :	3RD PARTY CLAIM	
CHASSIS NO :	JM6GL1072K0315396	MILEAGE :		POLICY NO. :		
MODEL :	MAZDA 6	DATE REG :	12-Mar-20			
<b>NATURE OF WORKS</b>						
Parts Description						
NO	PART NO.	QTY	1st	2nd	REVISED	PRICE
1	BUMPER,FRONT / <i>OK</i>	1			-	1,211.90
2	PLATE RH,SEAL-F.BUMPER / <i>MIS</i>	1			-	78.90
3	COVER RH,BUMPER / <i>MIS</i>	1			-	30.20
4	RETAINER RH,BUMPER / <i>OR</i>	1			-	17.10
5	GROMMET @ 2.90 / <i>MC</i>	2			-	5.80
6	RIVET @ 4.00 / <i>MC</i>	8			-	32.00
7	MESH,GRILLE / <i>OR</i>	1			-	180.40
8	BRACKET RH,BUMPER / <i>?</i>	1			-	37.10
9	MOULD RH,FRONT / <i>OR</i>	1			-	251.40
10	MOULD LH,FRONT / <i>X</i>	1			-	251.40
11	BRACKET,GRILLE-RADIATOR / <i>?</i>	1			-	95.00
12	RIVET @ 9.20 / <i>MC</i>	6			-	55.20
13	BRACKET RH,FRT.BUMPER / <i>OR</i>	1			-	14.50
14	RIVET @ 4.00 / <i>MC</i>	8			-	32.00
15	PANEL RH,FENDER-FRT / <i>OR</i>	1			-	383.70
16	GUARD RH,MUD / <i>TN</i>	1			-	114.30
17	STAY RH,FENDER / <i>?</i>	1			-	48.30
18	BODY RH,FRONT DOOR / <i>X R</i>	1			-	975.20
19	HINGE RH,DOOR-UPPER / <i>X</i>	1			-	37.40
20	HINGE RH,DOOR-LOWER / <i>X</i>	1			-	37.80
21	FASTENER RH-NECESSARY / <i>MC</i>	1			-	9.20
22	FASTENER @ 3.70 - WEATHERSTRIP / <i>X</i>	54			-	183.60
23	STRIPE NO.1 RH,BODY SIDE / <i>X</i>	1			-	11.00
24	STRIPE NO.3 RH,BODY SIDE / <i>X</i>	1			-	12.90
25	MOULD RH,FRT.BELT / <i>X</i>	1			-	96.00
26	SEAT RH,HANDLE-OUT / <i>X</i>	1			-	5.70
27	GROMMET @ 2.40 / <i>X</i>	2			-	4.80
28	CHECKER,DOOR / <i>X</i>	1			-	47.20
29	GROMMET @ 3.80 / <i>X</i>	1			-	3.80
30	TAPE SEAL @ 2.40 / <i>X</i>	2			-	4.80

31	FASTENER @ 3.20	X	MGD7A 50 FA1	2				6.40
32	GROMMET @ 3.00	X	MGJ6A 58 975	9				27.00
33	CLIP @ 2.40	X	MGS1D 58 315A	2				4.80
34	COVER,HOLE DOOR @ 5.20	X	MGHP9 58 972	2				10.40
35	FASTENER @ 7.20	X	MGJ6A 68 AB1	18				129.60
36	FASTENER @ 2.40	X	MGE4T 68 B65A	2				4.80
37	BODY RH,DOOR MIRROR	OR	MGS89 69-121A	1				475.90
38	HOUSING RH,DR MIRROR	MS	MB63B 69-1N1 64	1				128.40
39	GLASS & HOLDER RH,MIRROR	X	MB63C 69-1G1	1				282.50
40	COVER(R),HOLE DR MIRROR	MC	MGHP9 69-115	1				13.30
41	GARNISH RH,SAIL-OUT	X	MGJR9 69-15YB	1				116.30
42	WHEEL,DISC	CUT	M9965-16-7570	1				1,196.80
43	CAP,CENTER RIM	X	MKD51-37-190	1				21.60
44	VALVE,AIR	MC	M9963-60-4140	1				6.70
45	HUB,WHEEL FRT	?	MKD35-33-04XF	1				566.70
46	COVER RH,DUST-BRAKE	X	MKD45-33-261B	1				31.90
47	KNUCKLE RH,STEERING	?	MGBFN-33-021	1				378.10
48	ARM RH,LOWER	?	MG46C-34-300J	1				503.90
49	DAMPER RH,FRONT	?	MGBJD-34-700A	1				392.40
50	BEARING,FRONT STRUT-DAMPER	?	MB45A-34-38XA	1				55.80
51	DUST COVER-DAMPER	X	MB45A-34-015C	1				36.30
52	STOPPER-DAMPER	X	MGBFN-34-111	2				58.20
53	RUBBER,SPRING	X	MKA0G-34-0A3	1				23.40
54	UNIT RH,HEADLAMP	CUT	MGSK4-51-031A	1				4,759.30
55	PROTECTOR RH,HEAD,LAMP	MC	MGRF5-51-065A	1				102.00
56	TANK,WASHER	X	MGHR1-67-481	1				109.80

TOTAL PARTS - 13,710.90

TOTAL PARTS COST - 13,710.90

#### SUPPLEMENTARY

NO	PARTS NO	QTY	1st	Supp	REVISED	PRICES
1						
2						
TOTAL PARTS						-
TOTAL PARTS COST						-
Labour Description						
1	SUB	REPLACE FRT BUMPER (1), RH FENDER (0.5), RH F DOOR (1), REPAIR RHR DOOR (0.5), RHR FENDER (0.5) AND AREAS AFFECTED BY THE ACCIDENT.				1980 2,640.00
2	SUB	SPRAY FRT BUMPER (1), BONNET (1), RH FENDER (1), RH F DOOR (1), RHR DOOR (1), RHR FENDER (1), RH SIDE MIRROR COVER (0.25)				3750 4,095.00

3	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION (INCLUDING NEW PARTS AND CAOUTCHOU)	-	200.00	X
4	MZ-BR-DOORME	TRANSFER DOOR MECHANISM (0.5).	-	630.00	X
5	MZ-BR-AXNSUP	REPLACE THE DAMAGE SUSPENSION ITEMS ON THE RHF SECTION (1).	-	945.00	?
6	SUB	SUPPLY 1 PC TIRE (NETT). 80% 14 450	-	450.00	.
7	MZ-BR-WHEBAL	REPLACE THE RHF SPORT RIM & TIRE. PERFORM WHEEL BALANCING (MIN 80.00).	-	120.00	80
8	MZ-BR-WHEALI	CONDUCT 4 WHEEL ALIGNMENT (1).	NETT	560.00	/
9	MZ-BR-ELECTR	ELECTRICAL CHECK FOR PROPER FUNCTION.	-	250.00	150
10	MZ-BR-REPROG	REPROGRAM AFTER THE REPAIR WORKS.	-	350.00	180
11	MZ-BR-TOW-IN	TO TOW THE VEHICLE FROM THE ACCIDENT SITE TO THE WORKSHOP.	NETT	100.00	/
12	MZ-BR-SUNDRI	SUNDRIES.	-	100.00	20

Steve (LKK) w/L RL  
8327 8813 15/3/21, 17.01pm  
P/P  
7 days My BL SL

TOTAL LABOUR	10,440.00
TOTAL PARTS	13,710.90
TOTAL	24,150.90
LESS EXCESS	-
TOTAL AFTER EXCESS	24,150.90
GST 7%	1,690.56
GRAND TOTAL	25,841.46

#### SUPPLEMENTARY LABOUR DESCRIPTION

1	#N/A	-
2	#N/A	-

SUPPLEMENT LABOUR	-	-
SUPPLEMENT PARTS	-	-
TOTAL SUPPLEMENT	-	-
	-	-
	-	-
GST 7%	-	-
GRAND TOTAL	-	-

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 is subject to final

#### REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400 WILL BE APPLIED

Acknowledged by  
Signature:  
Date:

TRANS EUROKARS 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	10/03/2021 15:00 (SGT)
Date of Accident	09/03/2021 21:25 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TPE NEAR SENGKANG EAST ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS7429Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ZHAO BINGFENG
NRIC No	SXXXX388A
Email Address	bill.zhao@kenyon.com.sg
Mobile Phone No	(Phone) +65-93833521
Alternative Phone No	+65-93833521

### VEHICLE PARTICULARS

Manufacturer	Mazda
Model	6
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	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

### DRIVER

Name of Driver	ZHAO BINGFENG
NRIC No	SXXXX388A
Date Of Birth	12/12/1964
Occupation	Indoor

Date Of Driving Pass	19/03/2001
Driving experience	20 YEARS
Gender	Male
Mobile Number	(Phone) +65-93833521
Alt. Phone Number	+65-93833521
Email Address	bill.zhao@kenyon.com.sg
Address	BLK 290A COMPASSVALE CRESCENT
Address complement	-
Postcode	541290
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 - Change/cross lane
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes

#### PASSENGER 1

Name	REN FENGQI
Gender	Female

#### PASSENGER 2

Name	ZHAO QIAN
Gender	Female

#### PASSENGER 3

Name	RYAN
Gender	Male

#### 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?	Yes
Was there any audio recorded?	No

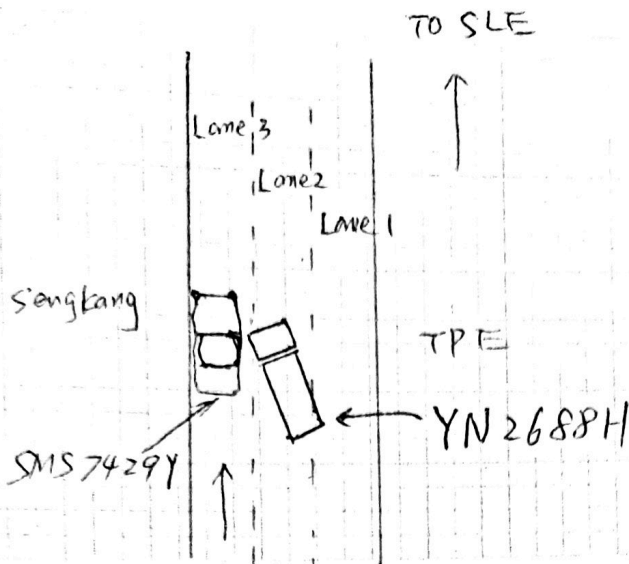
#### DETAILS OF OTHER VEHICLE PROPERTY:1



Vehicle Registration Number	YN2688H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial 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

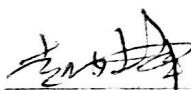


## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

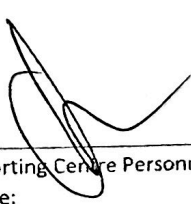
I drove my car SMS 7429Y along <sup>straightly</sup> Lane 3 of TPE Sengkang East Road with normal speed. Suddenly the lorry YN 2688H entered lane 3 from Lane 2 speedily and ~~bump~~ crash my car (SMS 7429Y).

## 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.:



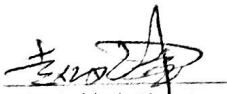
## SKETCH PLAN

### 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 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/FIN No.: