

ASS. REC. BY:

REF:

AUG / 21004383/K

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

Veh No:

SMV 59272 Yr Regn: 10, 20

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

Truck / Trailer or

Make:

Honda 150 c.c. 1317

Colour:

M. Gray A/C: Insured / Std / NI / NA

Sp. Reading:

8152 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

GK3 3424900

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: M/T S/Rim / STD A/Rim or

Tyre Size:

F: 175/70R14

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

9 mm

R/Bal.

9 mm

L/Bal.

9 mm

L/Bal.

9 mm

D.O.A.

5/4/21

D.O.I.

7/4/2021

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear O/S

The U/C / Chassis frame / Body Structure affected due to collision.

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

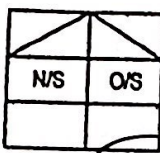
Excess:

(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 Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

2-3 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ - RS. \$

Fees

Others

TOTAL

Report Format:

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

輝陽汽車有限公司 HUI YANG MOTOR PTE. LTD.

Contact Add: SIN MING AUTOCARE Bldg 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) , Fax: 64514658
GST Reg No. 201629438M

OK
LKK
07/04/21
Wednesday
after 11am

05/04/2021

Owner: LEE JING GOANG GODFREY

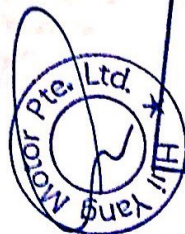
Not Notarise

11/04/21
Returning After Repair
2-3 days

ESTIMATE TO REPAIR HONDA FIT - SMV5927Z

1pc	rear RH taillamp	\$	357.40	?
1pc	rear RH taillamp lower bracket	\$	75.50	?
1pc	rear bumper	Bar \$	896.50	✓
1pc	rear bumper RH side retainer	Bar \$	39.10	✓
1pc	rear bumper RH side garnish	Bar \$	125.50	X
1pc	rear bumper centre garnish	Bar \$	189.50	X
1pc	rear bumper RH inner shield	\$	85.50	?
10pcs	rear bumper clip @\$5.00	Bar \$	50.00	✓
		\$	1,819.00	
less 20%		\$	363.80	
		\$	1,455.20	

1set	rear parking sensor	Bar s.nett \$	280.00	X
	spray painting	\$	800.00	?
	labour charges	\$	800.00	?
	Total	\$	3,335.20	



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:

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 05/04/2021 16:50 (SGT)
 Date of Accident 05/04/2021 08:45 (SGT)
 Exact Location of Accident Singapore
 Additional Location Information ALONG WOODLANDS 11 BUILDING OPEN SPACE CARPARK
 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMV5927Z

INSURED/POLICYHOLDER

Is company? No
 Name Of Registered Owner LEE JING GOANG GODFREY
 NRIC No SXXXX515I
 Email Address godfreylee168@hotmail.com
 Mobile Phone No (Phone) +65-92237853
 Alternative Phone No +65-92237853

VEHICLE PARTICULARS

Manufacturer Honda
 Model Fit
 Variant -
 Exact purpose for which vehicle was being used at time of accident -
 Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
 Vehicle Category Private car
 Transmission Auto
 CC 1317

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
 Type of Coverage Comprehensive
 Fleet Policy No
 Policy Number 5119336038
 Cover Note Number -

DRIVER

Name of Driver LEE JING GOANG GODFREY
 NRIC No SXXXX515I

Date Of Birth	16/07/1991
Occupation	Outdoor
Date Of Driving Pass	17/04/2010
Driving experience	11 YEARS
Gender	Male
Mobile Number	(Phone) +65-92237853
Alt. Phone Number	+65-92237853
Email Address	godfreylee168@hotmail.com
Address	BLK 472 #15-258 SEGAR ROAD SINGAPORE
Address complement	-
Postcode	670472
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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

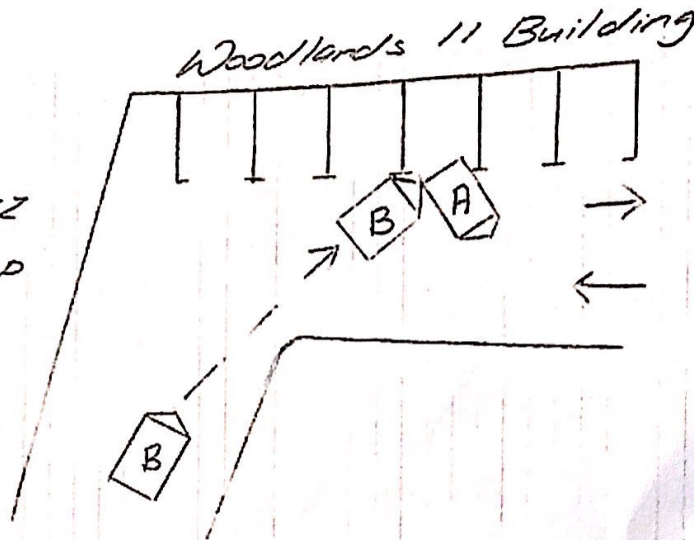
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMX3368P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN SER KEE
NRIC No	SXXXX088H
Contact Number	(Phone) +65-97658254
Address	-

SKETCH PLAN

Yeh A-SMV 59272

Yeh B-SMX 3368P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 05/04/21 @ 8:45am, my vehicle A (SMV 59272)

was at Woodlands 11 Building. While making a reverse

into the parking lot, suddenly I felt an impact. I

notice vehicle B (SMX 3368P) making a right turn

had collided onto the rear right portion of my

vehicle A.

DECLARATION

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

lyb

Policyholder's Signature
Date & Time:

lyb

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



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