

ASS. REG. BY:

REF:

21004977/KV

Hendrick

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

POLIP/INS/UPRES/CORES/EVA/ANY/ANY

To inspect Vehicle No: \_\_\_\_\_

at Workshop no: Toy truck

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.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Est. or Market Value: \$150k

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

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

Est. Repair: 02 days Res.: Yes or NoLump Sum: 1.81 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Veh No: SLP 7899B Yr Regn: 06, 17

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

Truck / Trailer or (A) : WagonMake: M. GLE 250 c.o. 1991Colour: A. Black AG: Insured / Std / NI / NASp. Reading: 121724 T/Radio: Insured / Std / NI / NA

Eng No: \_\_\_\_\_

G.No: WDC 25394621-226286

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In good / Jammed / Leaked / Burnt or

Brake: In good / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD / RIM or

Tyre Size: F: micR: PR 235/60R18

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

TOYO / YOKO or

Front

R/Bal: S mmL/Bal: S mmD.O.A. 28/3/21

Survey held at

Rear

R/Bal: 7 mmL/Bal: 7 mmD.O.I. 7/4/2021

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

N/S

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

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: \_\_\_\_\_

Survey Fee:

Transportation:

S - RS. SI

Papers

Others

TOTAL

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

Report Format :

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





# 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 : 28/03/2021

## ESTIMATE

NO : QUOT202103-000069(00)

DATE : 31/03/2021

POLICY NO : 999995580

VEH REG NO : SLP7899B

MAKE/MODEL : MERCEDES BENZ GLC250  
4MATIC (R18 LED)

CHASSIS NO : WDC2539462F226286

ENGINE NO : 27492030970746

REG. DATE : 2017

*NOT Notified  
Accumy B4 paint  
2 days*

## Estimate Repair Cost to Vehicle No : SLP7899B

Description	Quantity	Unit Price	Amount
		S\$	S\$
<b>PARTS</b>			
1 Headlamp assy - LH	1	1,850.00	1,850.00
2 Front bumper	1	980.00	980.00
3 Front bumper lower lid	1	260.00	260.00
4 Front bumper side retainer - LH	1	48.00	48.00
5 Front bumper sensor	2	138.00	276.00
6 Front bumper sensor seals	6	8.00	48.00
7 Front bumper clips	15	6.50	97.50
8 Front wheel arch garnish - LH	1	195.00	195.00
9 Front wheel arch garnish clips	8	6.50	52.00
			3,806.50
		Add 10%	380.65
			4,187.15
<b>LABOUR</b>			
10 To remove and refit front bumper sensor	1	100.00	100.00
11 To check and rectify wiring system	1	80.00	80.00
12 To panel beat & straighten LH front fender, LH 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 putty & spray on affected areas	1	800.00	800.00
			1,980.00

TOTAL S\$ 6,167.15

ADD GST @ 7% 431.70

GRAND TOTAL S\$ 6,598.85

SINGAPORE DOLLAR SIX THOUSAND FIVE HUNDRED NINETY EIGHT AND CENTS EIGHTY-FIVE ONLY

LKK Auto Consultants hence notify the Repairer of the following:

- 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:

FOR TONG LUCK AUTO PTE LTD

AUTHORISED SIGNATURE

# 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	29/03/2021 23:01 (SGT)
Date of Accident	28/03/2021 16:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TOMLINSON ROAD TURNING RIGHT INTO TANGLIN ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP7899B
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD
Company Reg No	1XXXXX778Z
Email Address	eugene.koh@daimler.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	(Office) +65-68498118

## VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Glc250
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1991

## INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	-

## DRIVER

Name of Driver	TAN TIAN KUEI
NRIC No	SXXXX087H



Date Of Birth  
Occupation  
Date Of Driving Permit  
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

29/08/1972  
Indoor  
15/08/1994  
26 YEARS AND 7 MONTHS  
Male  
(Phone) +65-96861616  
-  
eugene.koh@daimler.com  
Seletaris, 503 Sembawang Road  
#01-27  
757707  
No  
Hirer  
No  
-  
-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident  
Weather Conditions  
Road Surface

Side Swipe  
Clear  
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) 2  
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

#### PASSENGER 1

Name  
Gender

PASSENGER 1- CHINESE  
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

ON THE DATE AND TIME MENTIONED, I WAS DRIVING ALONG THE SAID MENTIONED ROAD ON THE EXTREME RIGHT LANE AND MADE A STOP AT THE TRAFFIC LIGHT JUNCTION, AS THE LIGHT WAS RED. WHEN THE LIGHT CHANGED TO GREEN, I PROCEEDED VERY SLOWLY AND AS I WAS NEGOTIATING A RIGHT BEND, SUDDENLY VEHICLE B, COMING FROM MY LEFT, ALSO MAKING A RIGHT TURN AND TURN TOO SHARP IN FRONT OF MY VEHICLE, AND PROTRUDED INTO MY LANE AND THE RIGHT REAR OF VEHICLE B GRAZED ONTO THE LEFT FRONT OF MY VEHICLE. NO ONE WAS INJURED. STATEMENT WAS READ TO ME AND I ACKNOWLEDGED IT.MA

#### ATTACHMENT(S)

Are accident photos available for attachment? Yes  
Was there any video captured by Car Camera? No  
Was there any audio recorded? No

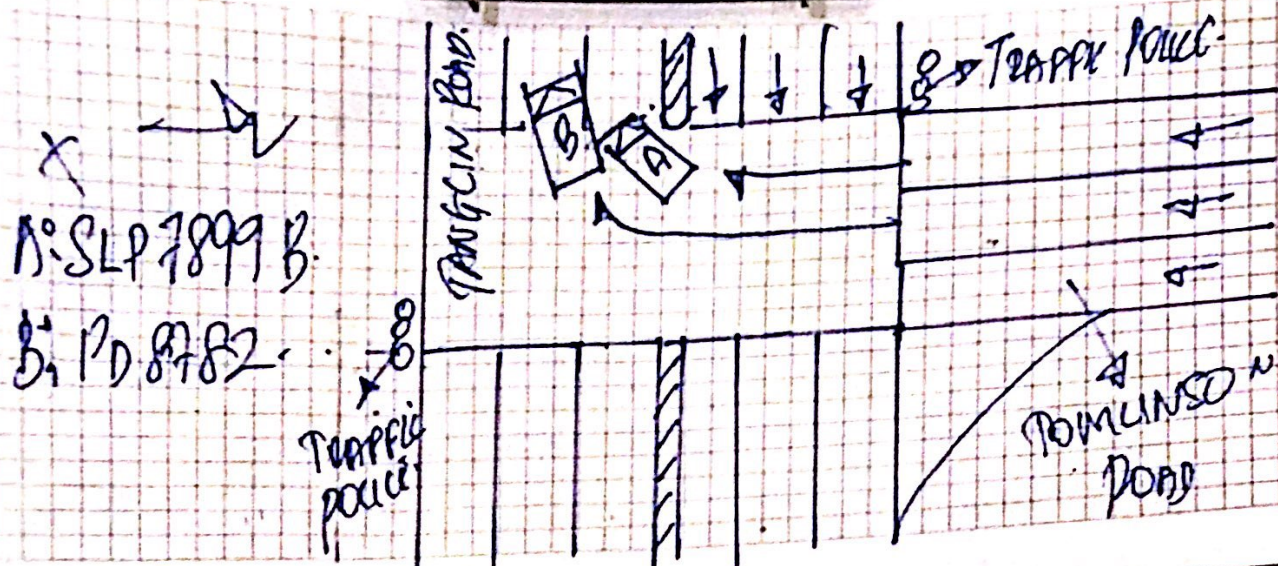
#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number  
Vehicle Manufacturer

PD878Z  
Mercedes



### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

REFER TO ATTACHED STATEMENT.

### DECLARATION

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

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
HASHIM BIN KAMARI

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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