

Kenneth

ASSIGNMENT

18

From: _____ Date: _____

Estimated Cost: _____

OD/TP/LWS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: _____

at Workshop m/s Complete

Insured: SKA 3103G

Policy No. _____

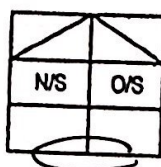
Claims No. C10009828/CH

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: 3-6 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SBL 9899C Yr Regn: 10, 18Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Toy Harrier c.c. 1998Colour: Ch. Silver AC: Insured / Std / NI / NASp. Reading: 4802P T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTEKB3GH80J002942Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: NI / S/Rim / STD / A/Rim orTyre Size: F: 235/55R18

R: _____

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

TOYO / YOKO or _____

Front: _____ Rear: _____

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 13/4/21 D.O.I. 18/4/2021

Survey held at _____

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

29/4/21 Submit preli report-revised fig \$5534.45, check items \$5829.83

Date/Time, File Pass to?

☒ : Preli. Report☐ : Final Report

1)

Date/Time, File Return to?

Days Of Repair: 6

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS. SI

Fees

Others

TOTAL

2) 29/4/21-Typist

Report Format: TP

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

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

TAN KWANG PHENG
BLK 563 ANG MO KIO AVENUE, 3 #08-3449
SINGAPORE 560563

Attention : THE OWNER

Contact : 92393338

Estimate : ES007170

Date : 13/04/2021

Vehicle Num. : SBL9899C

Make/Model : TOYOTA HARRIER G GRADE-2018

Chassis/Eng# : JTEKB3GH80J002942/8ARZ136990

Accident Date : 13/04/2021

Claim No. :

Reference :

Policy No. :

Not Notified
1/10/21
Resurvey After Paint
5-6 days

S/N	Quantity	Particular	Unit Price	Amount S\$
LIST ITEMS :				
1.	1	REAR BUMPER	1,495.00	✓
2.	1	REAR BUMPER LOWER GARNISH	625.00	✓
3.	2	REAR BUMPER BRACKET	123.50	✓
4.	6	REAR BUMPER CLIP	6.50	✓
5.	2	REAR BUMPER SIDE RETAINER	102.70	✓
6.	2	REAR BUMPER REFLECTOR	83.20	✓
7.	2	REAR BUMPER REFLECTOR CHROME GARNISH	85.00	✓
8.	1	REAR BUMPER SPONGE		✓
9.	1	REAR BUMPER REINFORCEMENT		✓
10.	1	REAR END PANEL TOP GARNISH		✓
11.	2	REAR END PANEL TOP GARNISH CHROME PLATE	55.00	✓
12.	1	REAR END PANEL		✓
13.	1	SPARE TIRE PANEL		✓
14.	1	TAIL GATE WEATHER STRIP		✓
15.	1	REAR EXHAUST SILENCER BOX		✓
16.	1	TAIL GATE		✓
17.	2	TAIL GATE SHOCK ABSORBER	1,330.00	✓
18.	1	TAIL GATE LOCK		✓
19.	1	TOYOTA LOGO		✓
20.	1	HARRIER EMBLEM		✓
21.	1	TURBO EMBLEM		✓
22.	2	REAR W/SCREEN MOULDING	91.60	✓
23.	4	REVERSE SENSOR HOLDER	35.00	✓
List TotalS\$:				15,113.23
25.00% Discount S\$:				3,778.31
				11,334.92
SPECIAL NETT ITEMS :				
1.	1	REAR W/SCREEN SEALANT	65.00	✓

CONTINUE / ...

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:



TAN KWANG PHENG
SUNGGANG MO KIO AVENUE, 3 #08-3449
SINGAPORE 560563

Attention : THE OWNER
Contact : 92393338

Estimate : ES007170

Date : 13/04/2021
Vehicle Num. : SBL9899C
Make/Model : TOYOTA HARRIER G GRADE-2018
Chassis/Eng# : JTEKB3GH80J002942/8ARZ136990
Accident Date : 13/04/2021
Claim No. :
Reference :
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
2.	12	REVERSE SENSOR	Net 305.00	1,220.00 44
		Special Nett Total S\$:		1,285.00
		LABOUR :		
		RUST PROOFING TREATMENT		100.00 60
		TRANSFER TAILGATE COMPONENT TO NEW GATE		150.00 681
		SPRAY PAINT DAMAGED AREA AFFECTED		1,100.00 800
		REMOVE & REINSTALL REAR W/SCREEN GLASS		180.00 1201
		TO CUT & CHANGE REAR END PANEL, SPARE TIRE PANEL, KNOCK AND STRAIGHTEN REAR END CHASSIS FRAME AND CHANGE ALL NECESSARY PARTS		1,500.00 ?
		Labour Total S\$:		3,030.00

SingDollars : Fifteen Thousand Six Hundred Forty-Nine & Cents Ninety-Two Only

Total S\$: 15,649.92
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COMPLETE VMS PTE LTD

This is only an estimate bases on our preliminary inspection and does not cover additional parts and labour time which may be required after the work has begun

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 or deny 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 dispute regarding 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 14/04/2021 20:01 (SGT)
Date of Accident 13/04/2021 17:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information BRADDELL ROAD SLIP ROAD JUNCTION TO TOA PAYOH
LORONG 6
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SBL9899C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN KWANG PHENG
NRIC No SXXXX768F
Email Address LOUIS1768@YAHOO.COM.SG
Mobile Phone No (Phone) +65-92393338
Alternative Phone No (Home) +65-92393338

VEHICLE PARTICULARS

Manufacturer Toyota
Model Harrier
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 1998

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA549432
Cover Note Number -

DRIVER

Name of Driver TAN KWANG PHENG

NRIC No	SXXXX768F
Date Of Birth	02/07/1970
Occupation	Indoor
Date Of Driving Pass	05/01/1993
Driving experience	28 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92393338
Alt. Phone Number	(Home) +65-92393338
Email Address	LOUIS1768@YAHOO.COM.SG
Address	BLK 563 ANG MO KIO AVENUE 3 #08-3449
Address complement	-
Postcode	560563
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	Wet

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

PLEASE REFER TO SKETCH PLAN

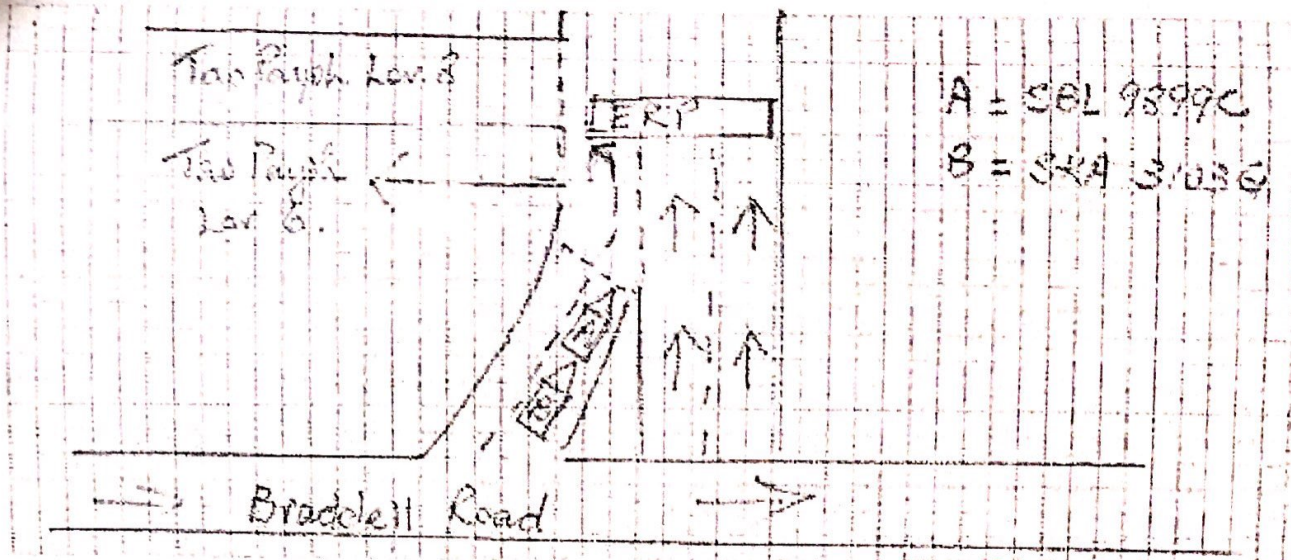
ATTACHMENT(S)

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	SKA3103G
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-91691741
Address	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Braddell Road entered into the slip road and stopped at the junction waiting for the front on moving traffic on Tao Payah Lane 6 to clear before I could drive forward. Suddenly I heard a loud bang and came out of my vehicle and realise vehicle B has collided into the rear of my vehicle.

TP Claim other workshop.

**Please forward a copy of my efile report to my workshop Complete VMS Pte Ltd

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.:

GRAPHIC SERVICES Pte Ltd