

ASS. REC. BY:

REF: CS/

C72/ 21005447/K9f3

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD/TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: SML 9777R

at Workshop m/s Tony Luck

of _____

Insured: SMK 2100U

Policy No. DMPCSNW00053302100

Claims No. SNM21D202541/C02

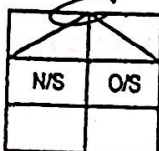
Sum Insured: _____ Excess: _____

(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: 02 days Res.: Yes or No

Lum Sum: 1.01% 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SML 9777R Yr Regn: 04, 19

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

Truck / Trailer or (A):

Make: M C180 C.C. 1595

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 25499 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WDD 2050402R 474318

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: _____ R: 225/50R17

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

TOYO / YOKO or Continued

Front

R/Bal. 7 mm

L/Bal. 7 mm

D.O.A. 22/4/21

Survey held at

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

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

Date / Time Action / Instruction

6/5/2021 @ 3.49pm Revised to Pauline Tham via Merimen.

Kenneth confirmed final fig \$639.00 (Red \$3775.79, 86%)

Date/Time, File Pass to?

☐ : Prell. Report

1) 25/05 Typist

☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format: MER-TP

Lump Sum / I.B.I: (\$ 639)

Days Of Repair: 2

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

S - RS. \$

Pump

Others

TOTAL



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 : DAIMLER FLEET MANAGEMENT S'PORE PTE LTD
1 GATEWAY DRIVE
#15-08 WESTGATE TOWER
SINGAPORE 608531

TEL : 6849 8118

FAX :

ATTN : ACCOUNTS DEPT

YOUR REF NO : SMK2100U

CLAIM TYPE : THIRD PARTY

TP INS. CO. : CHINA TAIPING INSURANCE (SINGAPORE) PTE

ACCIDENT DATE : 22/04/2021

TP VEH REG NO : SMK2100U

ESTIMATE

NO : QUOT202104-000058(00)

DATE : 30/04/2021

POLICY NO : 999995580

VEH REG NO : SML9777R

MAKE/MODEL : MERCEDES BENZ C180 AVG
(R17 LED)

CHASSIS NO : WDD2050402R474318

ENGINE NO : 27491031671189

REG. DATE : 2019

*Not Withheld
Penny Ate Pain
2 day,*

Estimate Repair Cost to Vehicle No : SML9777R

Description	Quantity	Unit Price	Amount
		S\$	S\$
NET PRICE			
1 Front bumper	1	1,651.08	1,651.08 X
2 Front bumper reinforcement	1	538.60	538.60 X
3 Front bumper side retainer - LH	1	68.20	68.20 X
4 Front bumper clips	15	9.00	135.00 X
5 Front bumper sensor	2	198.00	396.00 ?
6 Front bumper sensor seals	6	12.00	72.00 X
			2,860.88
		Less 10%	286.09
			2,574.79
LABOUR			
7 To remove and refit front bumper sensor	1	100.00	100.00 501
8 To check and rectify wiring system	1	80.00	80.00 X
9 To panel beat and straighten LH front fender, LH front chassis frame, including replacement of parts and align where necessary, to refit and adjust the same	1	800.00	800.00 1501
10 To putty and spray painting on affected areas	1	800.00	800.00 2501
11 To apply rust-proofing on replaced and repaired panels	1	60.00	60.00 X
			1,840.00
		TOTAL	S\$ 4,414.79
		ADD GST @ 7%	309.04
		GRAND TOTAL	S\$ 4,723.83

SINGAPORE DOLLAR FOUR THOUSAND SEVEN HUNDRED TWENTY-THREE AND CENTS EIGHTY-THREE ONLY

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:

FOR TONG LUCK AUTO 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	23/04/2021 00:38 (SGT)
Date of Accident	22/04/2021 12:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Mc nair ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML9777R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD
Company Reg No	1XXXXX778Z
Email Address	benny.chong@daimler.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	(Office) +65-68498118

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1595

INSURANCE COMPANY

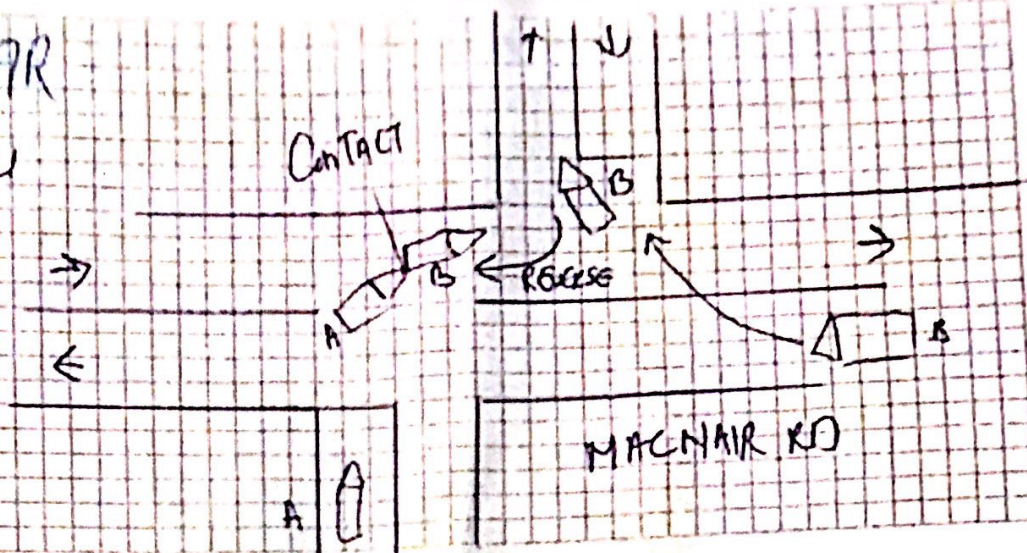
Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	-

DRIVER

Name of Driver	NOUROUL HASSANE MOHAMED ABDOULLA
NRIC No	SXXXX599F

SKETCH PLAN

RS-SMK21004



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

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:

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR

Reporting Centre Personnel's Signature
Date: _____
Page No.: _____