

ASS. REQ. BY:

REF:

AG/ 210054581Kr

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

10.300m

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4-5

days

Res: Yes or No

Lum Sum:

20

%

3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SKU 8698T

Yr Regn:

08, 15

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

Truck / Trailer or

Make:

Toy Altis

c.c

1598

Colour:

M. Grey

A/C: Insured / Std / NI / NA

Sp. Reading

88237

T/Radio: Insured / Std / NI / NA

Eng No:

C/No

NRH 053REH104536209

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:

225/45R17

R:

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

TOYO / YOKO or

Continental

Front

Rear

R/Bal.

8 mm

R/Bal.

8 mm

L/Bal.

8 mm

L/Bal.

8 mm

D.O.A.

2/5/21

D.O.I.

3/5/2021

Survey held at

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

O/S body

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trlp:

Survey Fee:

Transportation:

S + RS SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

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

AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047
TEL: 6483 1244 (4 lines) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg
GST:M9-0009639-E RCB NO:06470300B

SURVEYOR COPY

M/S: LIM CHIN PONG
15 DA SILVA LANE
SINGAPORE 549806

Estimate No: MC1901915
Date: 03 May 2021
Policy No: P10225813R01
Veh Reg No: SKU8698T
Make/Model: TOYOTA COROLLA
ALTIS CLASSIC 1.6 CVT

ATTN:

Your Ref No: -
Claim Type: Third Party
Accident Date: 02/05/2021
TP Veh Reg No: SKG7890J

Not Attached
11 Day @
Recovery After Paym
4-5 days

Estimate Repair Cost to Vehicle No :SKU8698T

Description	Quantity	List Price	Amount
		S\$	S\$
SPARE PARTS			
1 FRONT BUMPER	1 PC	531.10	X
2 FRONT BUMPER SIDE RETAINER RH	1 PC	85.50	X
3 FRONT BUMPER CLIPS	10 PC	45.00	1
4 FRONT FENDER RH	1 PC	908.70	✓
5 FRONT FENDER COWLING RH	1 PC	209.10	X
6 FRONT FENDER COWLING CLIPS	8 PC	17.68	X
7 FRONT FENDER DUAL VVTI LOGO	1 PC	45.19	—
8 FRONT DOOR RH	1 PC	1,260.00	X
9 SIDE MIRROR ARM WITH SIGNAL LAMP RH	1 PC	1,257.00	X
10 SIDE MIRROR COVER RH	1 PC	109.20	✓
11 FRONT WHEEL BEARING RH	1 PC	167.30	?
12 FRONT WHEEL HUB RH	1 PC	261.30	?
13 FRONT LOWER ARM RH	1 PC	732.50	?
14 FRONT KNUCKLE ARM RH	1 PC	628.40	?
15 FRONT SHOCK ABSORBER RH	1 PC	438.30	?
16 FRONT SHOCK ABSORBER TOP MOUNTING RH	1 PC	219.10	✓
		6,915.37	
	Less 25%	1,728.84	5,186.53
Special Nett			
17 SPORT RIM RHF	1 PC	2,010.70	✓
		2,010.70	
	Less 25%	502.68	1,508.03
18 TYRE RHF - CHECK PRICE	1 PC	0.0000	
		0.00	0.00
LABOUR			
19 TO DISCONNECT AND CHECK ELECTRICAL WIRING, WIRE SOCKETS AND ETC. TO REMOVE AND REINSTALL DAMAGED ELECTRICAL UNITS, TEST AND RECTIFY FOR PROPER FUNCTIONING.	1 PC	40.00	15/
20 TO CHECK AND RE-ADJUST WHEEL ALIGNMENT.	1 PC	80.00	60/
21 TO DISMANTLE AND TRANSFER DOOR FITTINGS AND MECHANISM SUCH AS POWER WINDOW MOTOR AND REGULATOR TO NEW DOOR/FACILITATE REPAIR.	1 PC	80.00	X
22 TO DISMANTLE, REPLACE AND REINSTALL UNDERCARRIAGE.	1 PC	250.00	?
23 TO SPRAY ANTI-RUST COATING ON AFFECTED AREAS.	1 PC	60.00	30/

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GST:M9-0009639-E RCB NO:06470300B

M/S : LIM CHIN PONG
15 DA SILVA LANE

SINGAPORE 549806

ATTN:

Your Ref No: -
Claim Type: Third Party
Accident Date: 02/05/2021
TP Veh Reg No: SKG7890J

Estimate No: MC1901915
Date: 03 May 2021
Policy No: P10225813R01
Veh Reg No: SKU8698T
Make/Model: TOYOTA COROLLA
ALTIS CLASSIC 1.6 CVT

Estimate Repair Cost to Vehicle No :SKU8698T

Description	Quantity	List Price	Amount
		S\$	S\$
24 TO DISMANTLE ALL DAMAGED PARTS.TO KNOCK & REPAIR INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME.	1 PC	600.00	450.00
25 TO SPRAY FRONT BUMPER,FRONT FENDER RH, FRONT DOOR RH, SIDE MIRROR RH	1 PC	800.00	650.00
		1,910.00	1,910.00
	Total		S\$ 8,604.55
	Add GST @ 7%		602.32
	Total Amount Payable		S\$ 9,206.87

TOTAL: SINGAPORE DOLLAR NINE THOUSAND TWO HUNDRED AND SIX AND CENTS EIGHTY SEVEN ONLY

Please arrange this vehicle to be surveyed soonest possible.
Thank You

For AH LIM MOTOR COMPANY



AUTHORISED SIGNATURE

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 03/05/2021 15:29 (SGT)
Date of Accident 02/05/2021 11:20 (SGT)
Exact Location of Accident Da Silva Ln, Singapore
Additional Location Information DA SILVA LANE, OPPOSITE HOUSE NO. 8B
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKU8698T
INSURED/POLICYHOLDER
Is company? No
Name Of Registered Owner LIM CHIN PONG
NRIC No SXXXX015E
Email Address LIMCP6217@GMAIL.COM
Mobile Phone No (Phone) +65-97326838
Alternative Phone No +65-97326838

VEHICLE PARTICULARS

Manufacturer Toyota
Model COROLLA ALTIS CLASSIC 1.6 CVT
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
Transmission Auto
CC 1598

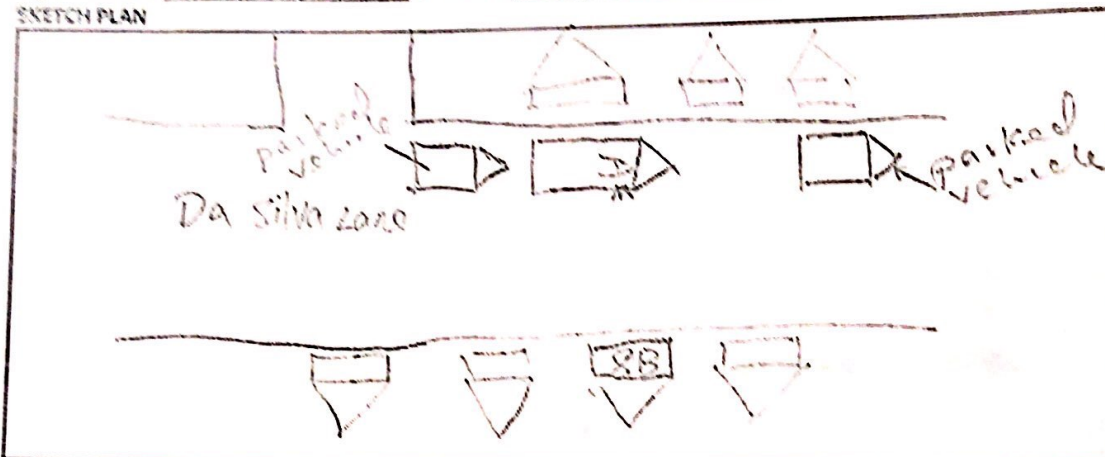
INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number P10225813R01
Cover Note Number 20/08/2020 - 19/08/2021

DRIVER

Name of Driver LIM CHIN PONG
NRIC No SXXXX015E

Date of accident: 2/5/21 Time: 11:20am Location: Da Silva Lane, opposite House no 8B
 My Vehicle A: SKU 8698T Vehicle B: SKG 7890J Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I parked my vehicle at Da Silva Lane opposite House No. 8B.

On the accident date 2/5/21 @ 11:20 am my neighbour came and inform me that vehicle B had collected info. my parked vehicle and drove off. And he manage to stop the vehicle and request vehicle B driver to come back at the accident location. And exchange particular to claim his insurance.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :

Email address :

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time:

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

[Signature]
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 AH LIM MOTOR COMPANY