

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

CS/ SM 021005841/49f3

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

CMTD2101533/AGC

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Rep 10500

Veh No:

Yr Regn:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading:

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

R/Bal.

L/Bal.

L/Bal.

D.O.A.

D.O.I.

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

paint coating \$40464

1/6/21

1/5 \$7000 confirmed v.l. Alan. (Red \$21887.50, 76%)

15/06/21@10.49am revised to Agnes Chan by email.

Date/Time, File Pass to?

☐

: Preli. Report

1) 15/06 Typist

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

) \$ + RS. SI

) Photos

) Others

TOTAL

Report Format: TP

Lump Sum: \$7000

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

FASTECH AUTO PTE LTD
1 KAKI BUKIT AVE 6 #01-48
SINGAPORE 417883

Submit to insurance

Not Approved

2/17/21

17/5/21

2/s \$7000/ 5 days.

VEHICLE No :SMD 3696Y

1PC	REAR WINDSCREEN	11		\$1,488.10	X
1SET	REAR WINDSCREEN MOULDING	neu	118.20	\$188.20	/
1PC	TAILGATE	Body	1366.20	\$2,066.10	/
1PC	TAILGATE OUTER GARNISH	Cne	481.20	\$981.00	/
1PC	TAILGATE REAR LOGO	M.S	68.10	\$85.00	/
1PC	TAILGATE 'PRIUS' EMBLEM	neu	80.50	\$105.10	/
1PC	TAILGATE 'HYBRID' EMBLEM	neu	75.00	\$108.00	/
1PC	TAILGATE INNER LOCK	DO/shold	355.10	\$499.20	/
1PC	TAILGATE INNER TRIM	De/cne	681.10	\$899.10	/
1SET	TAILGATE INNER TRIM CLIPS	neu		\$50.00	/
1PC	TAILGATE WEATHERSTRIP	twi	288.20	\$399.50	/
1PC	TAILGATE REAR WIPER MOTOR	SUL		\$910.00	X
1PC	TAILGATE REAR WIPER ARM	11		\$199.10	X
1PC	REAR BUMPER	DO/22	612.30	\$1,245.10	/
2PCS	REAR BUMPER SIDE RETAINERS @ \$125.00	11		\$250.00	X
1SET	REAR BUMPER CLIPS	neu		\$50.00	/
2PCS	REAR BUMPER REFLECTORS @\$145.00	11		\$290.00	X
2PCS	REAR BUMPER PDC SENSORS @313.00	11		\$626.00	X
1PC	REAR BUMPER BEAM	Body	355.10	\$688.10	/
1PC	REAR END PANEL	DO/body	645.10	\$831.00	/
1PC	REAR END PANEL TOP GARNISH	twi	292.30	\$540.50	/
1PC	REAR END PANEL ANTENNA SENSOR	Cne/shold	285.30	\$355.10	/
1PC	REAR FLOOR PANEL	R		\$1,166.00	X
1PC	REAR FLOOR PANEL TOP BOARD	SUL		\$988.10	X
1PC	REAR FLOOR PANEL TOOLS SPONGE	TOIN	481.20	\$566.20	/
2PCS	REAR FENDERS @\$1245.00	R		\$2,490.00	X
2PCS	REAR FENDER INNER TRIM BOARDS @\$799.10	M/S TOIN	685.10	\$1,598.20	1PC
1PC	REAR AIR VENT N/S	11		\$88.90	X
2PCS	TAILLAMPS @\$1045.00	Cne	588.20 x 2 =	(257 1176.40	\$2,090.00
1PC	REAR EXHAUST	11		\$995.90	X
				\$22,837.50	

S.NETT ITEM

1PC	REAR WINDSCREEN SEALANT	neu		\$50.00	40
1PC	REAR END PANEL SEALANT	neu		\$50.00	/
1SET	REAR CERAMIC COATING	11		\$800.00	X
1SET	REAR REVERSE CAMERA	shold		\$450.00	300
1SET	REAR FLOOR PANEL INSULATOR	11		\$200.00	X
1PC	REAR LICENCE PLATE W/HOLDER	SUL		\$50.00	X
				\$50.00	30
TO CHECK WIRING				\$80.00	50
TO DISMANTLE & REPLACING REAR PDC SENSOR				\$150.00	120
TO DISMANTLE & REFIX REAR WINDSCREEN					

TO DISMANTLE & REFIX CUSHION UPHOLSTERY	\$120.00	80
TO DISMANTLE & REFIX REAR EXHAUST	11 \$100.00	X
TO TRANSFER TAILGATE COMPONENTS	\$120.00	60
TO SPRAY RUST PROOFING	\$150.00	60
TO MOUNT VEHICLE ON CAR O-LINER	11 \$380.00	X
LABOUR FOR PANEL BEATING & REPLACING PARTS	\$1,800.00	800
TO PUTTY & SPRAY PAINTING	\$1,500.00	1080
TOTAL	\$28,887.50	

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:

7-8146.4
252
P-6109.80
S-N-390
L-2280

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	14/05/2021 18:42 (SGT)
Date of Accident	14/05/2021 12:31 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UPPER EAST COAST ROD (OPPOSITE THE SUMMIT)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD3696Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SOPHIANNE MOHAMAD ARAIB
NRIC No	SXXXX164C
Email Address	SOPHIE_A22@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-97948174
Alternative Phone No	+65-97948174

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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	1800

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA547329
Cover Note Number	16082020-15082021

DRIVER

Name of Driver	LEE WAI KIN
NRIC No	SXXXX390Z

Date Of Birth	12/04/1975
Occupation	Indoor
Date Of Driving Pass	31/12/2007
Driving experience	13 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98718816
Alt. Phone Number	-
Email Address	WAIKIN@ALUM.MIT.EDU
Address	141 HAIG ROAD #04-02
Address complement	-
Postcode	438769
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LEE WAN KAE, KAYLA
Gender	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

REFER TO ATTACHMENT

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	XD1151K
Vehicle Manufacturer	Mitsubishi
Vehicle Model	Fuso
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	ZHONG YONGGANG
Passport No/FIN	GXXXX119L
Contact Number	(Phone) +65-82372100
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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7. By the lodgment 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.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

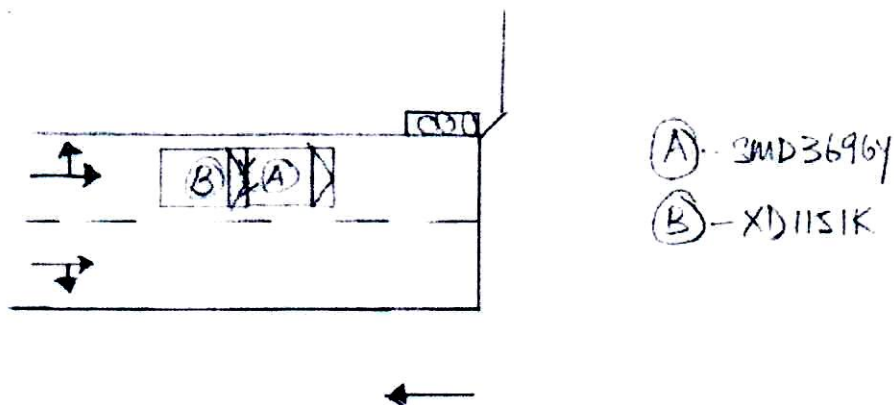
- (a) My insurer, my workshop and the General Insurance Association of Singapore (GIA) may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders

Policyholder's Signature
Date & Time

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

Reporting Centre Personnel's Signature
Name
NRIC/IN No.

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS driving on 14 May 2021. At around 12.21pm along Upper East Coast (Off The Summit), my car (Toyota Prius + SMD3696Y) was stationary waiting for the red light to turn green. Suddenly, there was a loud bang & my car was pushed forward. ~~Impact~~ The impact was quite strong & my daughter in the car was in shock & started crying. I got out of the car to check and saw that a truck (XD1151K) has crashed into the rear of my car & the back of my car was dented. The car logo fell off. ~~The~~ Both rear lights were also damaged. ~~damaged~~

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only
Claim OD
Claim TP
<input checked="" type="checkbox"/> Claim OD / TP at other workshop

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: 14 May 2021 6:10pm

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

14 MAY 2021

AXA Insurance

To whom it may concern

I, Suphane Moud Heng (ID # 83164C) hereby
 authorize Lee Ann Kim (ID # 875093902) to
 act on my behalf to do the necessary work
 to a car accident involving my car SMD36967 on
 14 May 2021. Thank you.

Suphane Moud Heng

Suphane Moud Heng
 S7728164C

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