

ASS. REC. BY:

REF:

CS/AIG21005902/Kqf3

Kenneth

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s Tong buck
 of _____
 Insured: _____
 Policy No. 0999993662
 Claims No. 4372873252SG
 Sum Insured: _____ Excess: 1700
 (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"/>

Bal. or Market Value: \$150k
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 04 days Res.: Yes or No
 Lum Sum: 1.B. % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMN 5695J Yr Regn: 08.1.9
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: MC C180 c.c. 1595
 Colour: D. Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 14111 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: WDD 2050 402 R 510526
 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: 225/50R17
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front: _____ Rear: _____
 R/Bal. 9 mm R/Bal. 9 mm
 L/Bal. 9 mm L/Bal. 9 mm
 D.O.A. 20/3/21 D.O.I. 18/5/2021
 Survey held at _____
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Frt O/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
19/05/21 @ 10.12am	revert to AIG via Merimen.
19/05/21 @ 11.51am	Kok Chong informed C/A via Merimen.
19/05/21 @ 3.24pm	informed Candy C/A & ex: \$1700. frt bumper-repair if not necessary to replace.
	Kenneth confirmed final fig \$4522.40, 4 days (Red \$1956.80, 30%)

Date/Time, File Pass to?

☐ : Prell. Report

1) 04/06 Typist

☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 4Resurvey No. of Trip: 1

Survey Fee:

Transport: _____
 \$ + P.S. \$

Parties

Others

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech Invs (\$ _____)☐ : Weekend (\$ _____)Report Format: MER-ODLump Sum / I.B.I: (\$) 4522.40



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

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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 : 26/03/2021

ESTIMATE

NO : QUOT202104-000009(00)

DATE : 18/05/2021

POLICY NO : 999995580

VEH REG NO : SMN5695J

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

CHASSIS NO : WDD2050402R510526

ENGINE NO : 27491031804489

REG. DATE : 2019

Not Authorised
Resurvey B4 pain
4 days

Estimate Repair Cost to Vehicle No : SMN5695J

Description	Quantity	Unit Price	Amount
		S\$	S\$
PARTS			
1 Headlamp assy - RH	1	1,850.00	1,850.00 ✓
2 Front bumper	1	1,080.00	1,080.00 7
3 Front bumper reinforcement	1	310.00	310.00 X
4 Front bumper side retainer - RH	1	38.00	38.00 X
5 Front bumper sensor	1	138.00	138.00 ✓
6 Front bumper sensor seals	6	8.00	48.00 7
7 Front bumper lower chrome	1	165.00	165.00 7
8 Front bumper clips	15	5.50	82.50 ✓
			3,711.50
		Add 10%	371.15
			4,082.65
LABOUR			
9 To remove and refit front bumper sensor	1	100.00	100.00 7
10 To check and rectify wiring system	1	80.00	80.00 201
11 To panel beat and straighten RH front fender, LH front chassis frame, including replacement of parts and align where necessary, to refit and adjust the same	1	1,000.00	1,000.00 300
12 To putty and spray paint on affected areas	1	800.00	800.00 400
13 To reset and reprogramme headlamp fault code	1	350.00	350.00 7
			2,330.00
TOTAL			S\$ 6,412.65
ADD GST @ 7%			448.89
GRAND TOTAL			S\$ 6,861.54

SINGAPORE DOLLAR SIX THOUSAND EIGHT HUNDRED SIXTY-ONE AND CENTS FIFTY-FOUR ONLY

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before the repair work
- 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	26/03/2021 16:19 (SGT)
Date of Accident	26/03/2021 10:21 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	RIVER VALLEY ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN5695J
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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) +65-91876216
Alternative Phone No	+65-91876216

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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1595

INSURANCE COMPANY

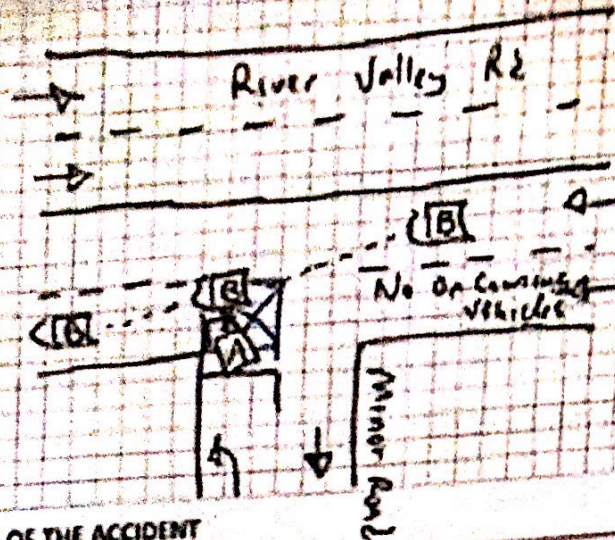
Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	999995580
Cover Note Number	NA

DRIVER

Name of Driver	SIMON GRAY
NRIC No	SXXXX808H

 Accident report SA0A213Q0007

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

A: SMN 5695 J
B: SJG 238 B

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
AJZAM BIN ATAN

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

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9185808H**



Name

SIMON GRAY

Race

CAUCASIAN

Date of birth

23-03-1991

Sex

M

Country/Place of birth

AUSTRIA

S9185808H



REPUBLIC OF SINGAPORE

DRIVING LICENCE

License Number: **S9185808H**

Name

SIMON GRAY

Birth Date: **23 Mar 1991**

Issue Date: **17 Mar 2021**

