

ASS. REG BY:

REF: EQ /

CC3/EQ121006031/Ktf3

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Trans Cab

of _____

Insured: _____

Policy No: _____

Claims No: _____

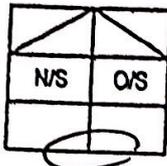
Sum Insured: _____ Excess: _____

(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 Rport: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: 1.81 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SMT 2423R Yr Regn: 04, 20

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

Truck / Trailer or

Make: Toy Prius c.c. 1798

Colour: M. Silver A/C: Insured / Std / NI / NA

Sp. Reading: 93399 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKB31F-U703091085

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / Rim or 15

Tyre Size: F: 195 REX 165R15

R: _____

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

TOYO / YOKO or Skilm

Front _____ Rear _____

R/Bal. 9 mm R/Bal. 9 mm

L/Bal. 9 mm L/Bal. 9 mm

D.O.A. 19/5/21 D.O.I. 20/5/2021

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

1006.90

finalise at 757.38
red: 12205.87;94%

Date/Time, File Pass to?

: Prell. Report

: Final Report

Days Of Repair: 2

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S - RS, SI

Flares

Others

TOTAL

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

Report Format :

Lump Sum / I.B.I: (\$ 757.38)

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111
 Tel No. : 6287 6666 Fax No. : 6257 1330
 CO./GST Reg. No. 201019626G
SMT2423R

LAD2105-013

NOT Authorized
Repair B4pair
R1006.90

Vehicle No.:
 Chassis No.:
 Vehicle Make: **20 MAY 2021**
 Vehicle Model:
 Date of Accident :
 Third Party Insurer :
 Date of Registration:

SMT2423R
 JTDKB3FU703091085
 TOYOTA
 PRIUS GEN 4
 19/05/2021
EQ
 01/04/2020

PART	LIST	PRICE	STATUS
1 COVER, REAR BUMPER	R	485.60	X
1 REINFORCEMENT SUB-ASSY, REAR BUMPER	Ry	332.70	2X
1 COVER, REAR BUMPER, LOWER	nd	22.00	✓
1 GUARD, REAR BUMPER, CENTER	nd/lwr	374.50	✓
1 RETAINER, REAR BUMPER SIDE, LH	sn	132.60	X
1 RETAINER, REAR BUMPER SIDE, RH	sn	132.60	X
1 PANEL SUB-ASSY, BODY LOWER BACK	R	651.00	X
TOTAL		\$ 2,131.00	
25%		\$ 532.75	
		\$ 1,598.25	

Special Nett

1SET PARKING AID	sn	700.00	X
1SET REAR BUMPER CLIP	nn	95.00	X
1 REAR BUMPER PROTECTOR	nn	180.00	405a
2 SEAM SEALANT	nn	250.00	X
1SET REAR BUMPER RETAINER CLIP	nn	85.00	X
1 END PANEL TRIM CLIP	nn	65.00	X
TOTAL		\$ 1,375.00	

TOTAL PARTS \$ 2,973.25

LABOUR

To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair. \$ nn 380.00 X

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SMT2423R

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	2,200.00	200/
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	380.00	X
To transfer of Tailgate fittings, attachments and perform water seepage test.	\$	180.00	X
To remove and refit electrical wiring, battery and other necessary items to facilitate bodywork repair.	\$	480.00	X
To transfer of Fender fittings, attachments and perform water seepage test.	\$	480.00	X
To dismantle and refit aircon assy and attachment, vacuum and charge-in-gas.	\$	380.00	X
Labour charge to mount and dismount vehicle on jig bench, to facilitate repair.	\$	380.00	X
To check steering geometry and computer wheel alignment	\$	220.00	X
To Rust-Proofing and apply undercoat Of The Affected Areas.	\$	250.00	X
Towing Fees	\$	150.00	X
Putty And Spray Painting Of The Affected Portion.	\$	2,200.00	220/
To reinstall rear bumper parking sensor.	\$	170.00	X
To Check Electrical Lighting Concerned.	\$	170.00	X
To transfer of luggage floor panel fittings, attachment and perform water seepage test.	\$	380.00	X

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SMT2423R

To transfer of tire, rim and on wheel balancing.	\$	<i>220.00</i>	X
To replace, refix and top up coolant for radiator	\$	<i>170.00</i>	X
To lift-up / out engine with gear box and refit.	\$	<i>440.00</i>	X
To remove and refit radiator support cross-member and other necessary items to enable bodywork repair.	\$	<i>380.00</i>	X
To conduct and perform a comprehensive vehicle diagnostic check and reset vehicle warning indicators.	\$	<i>380.00</i>	X

TOTAL \$ 9,990.00

Over All Total \$ 12,963.25

(PART-BY-PART) Repair Days

25 DAYS

2 days

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 with 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 recording 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 19/05/2021 13:22 (SGT)
Date of Accident 19/05/2021 10:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information Lornie Road towards MacRitchie
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT2423R

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Trans Leasing Pte Ltd
Company Reg No 2XXXXX575K
Email Address claims@transcab.com.sg
Mobile Phone No (Phone) +65-62876666
Alternative Phone No (Office) +65-62876666

VEHICLE PARTICULARS

Manufacturer Toyota
Model Prius
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 hire
Transmission Auto
CC 1800

INSURANCE COMPANY

Name of Insurance Company Etiqa Insurance Pte Ltd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number M0015914
Cover Note Number -

DRIVER

Name of Driver LIM PENG CHUAN
NRIC No SXXXX052H

SKETCH PLAN

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, either the Authorized Driver
3. Information provided must be as truthful and accurate as possible. Any willful 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. The report will be forwarded by the insurers to 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.

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

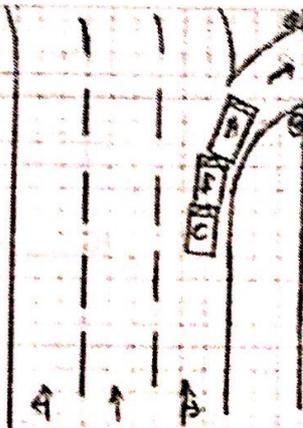
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A: SMT 2423R

B: SFA 395H

C: GBF 663G

Lorie Road towards Mac Retic