

ASS. REC. BY:

REF:

C72/210061001K_{qc}

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

DMCVSNW00081912000

Claims No.

SNM21D202781/C02

Sum Insured:

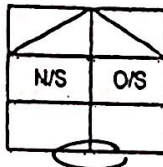
Excess:

(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 Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

03

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:

PLU 7005M

Yr Regn:

12, 17

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

Truck / Trailer or

Make:

Hyundai Tucson

c.c.

1591

Colour:

White

A/C:

Insured / Std / NI / NA

Sp. Reading

89125

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KMHT3812VJU828931

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 A/Rim or

Tyre Size:

F:

225/80R17

R:

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

TOYO / YOKO or

Hankook

Front

Rear

R/Bal.

8

mm

R/Bal.

8

mm

L/Bal.

8

mm

L/Bal.

8

mm

D.O.A.

8/5/21

D.O.I.

2/6/2021

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

04/06/21 @ 4.52pm revised to Pauline Tham via Merimen.

Kenneth confirmed final fig \$1322 (Red \$655, 33%)

(No Lump Sum)

Date/Time, File Pass to?



: Prell. Report

1) 15/06 Typist



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

3

Resurvey No. of Trlp:

1

Survey Fee:

Transportation

Add Fee:



: Site Insp (\$



: Interview (\$



Tech Invs (\$



Weekend (\$

) S + RS. SI

), Fines

) Others

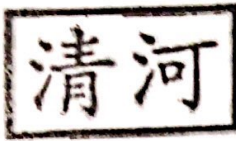
Report Format:

MER-TP

Lump Sum

/ I.B.I. (\$

1322



CHENG HOE MOTOR PTE LTD

Blk 1019, Yishun Industrial Park A, #01-374/382, Singapore 768761

Tel : 67556142 Fax : 67557719

Email: chmotor@singnet.com.sg

TP INSURER: China Taiping Insurance (Singapore) Pte. Ltd. (HQ)
SKY CITY PTE. LTD.

Singapore

Claimant Insurer: Direct Asia Insurance (Singapore) Pte Ltd

PARTICULARS OF CLAIM

Claim Type:	THIRD PARTY	Ref. No:	TP/CHINA (GBD3797U)
Policy No:	DMCVSNW00081912000	Date of Loss:	08/05/2021
Vehicle Reg. No.:	SLU7005M	Driveable?	
Party At Fault:	UNKNOWN	Driver (Insured):	CHONG CHEE SENG
Driver (TP):	TAY CHEE YONG DANIEL	Vehicle Reg. Date:	12/12/2017
Make/Model:	HYUNDAI TUCSON, 2.0 (A)	Chassis No:	KMHJ3812VJU628931
Vehicle Colour:	WHITE		
Engine No:	G4FJHU337739		
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	0		
Description of Accident/Loss	REFER TO GIA REPORT ATTACHED.		
Remarks:	VEHICLE CURRENTLY LYING YISHUN WORKSHOP.		
Present Location:	CHENG HOE MOTOR PTE LTD (YISHUN)		

*Not Authorised
Repair By pain
3 days*

COST OF CLAIMS		Amount
Parts		927.00
Miscellaneous Items		250.00
Labour		800.00
Paintwork Labour		0.00
Towing		0.00
Gross Total (S\$)		1,977.00
+ GST 7.00% (S\$)		138.39
Nett Amount (S\$)		2,115.39

This claim is handled by: SHARON CHIONG BENG CHOON

Generated using Merlmen e-Claims Internet Estimation & Adjusting System

SLU7005 M

TP/CHINA

REPAIR DETAILS**Reference**

Part Source: MRM-SG **Version:** 1.0 (Last Synchronised: 02 Jun 2021)

Parts: M1-SUV **HYUNDAI TUCSON 2.0 (A)** (Catalogue:Merlimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SLU7005M)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the **END OF ESTIMATES** marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount	
1	1		*1 PC REAR BUMPER	0.00	0.00	*220.00 F	✓
2	1		*1 PC REAR BUMPER LOWER SKIRT	0.00	0.00	*270.00 F	✓
3	1		*1 PC REAR BUMPER REINFORCEMENT	0.00	0.00	*145.00 F	?
4	1		*6 PCS REAR BUMPER CLIPS @2/PC	0.00	0.00	*12.00 F	✓
5	1		*1 PC TAILGATE LOWER PROTECTOR	0.00	0.00	*210.00 F	?
6	1		*1 PC TAILGATE LOWER PROTECTOR EMBLEM (TUCSON)	0.00	0.00	*35.00 F	?
7	1		*1 PC TAILGATE LOWER PROTECTOR EMBLEM (TURBO)	0.00	0.00	*35.00 F	?
Total Parts (S\$)						927.00	

F=Franchise part.

Report was unsubmitted during this print-out.
Generated using **Merlimen e-Claims IEAS**

Estimates on Miscellaneous Items

No	Qty	Particulars	Amount	
1	1	1 SET REVERSE SENSOR	250.00	?
Sub Total (S\$)			250.00	

Estimates on Labour

No	Particulars	Lab.Type	Amount	
1	REMOVE & REFIX REAR BUMPER ASSY, LOWER SKIRT, TAILGATE LOWER PROTECTOR & REALIGN THE SAME	New	400.00	300
2	PUTTY & RESPRAY ON REAR BUMPER, TAILGATE LOWER PROTECTOR	New	400.00	360
Gross Labour Cost (S\$)			800.00	

Report was unsubmitted during this print-out.
Generated using **Merlimen e-Claims IEAS**

< END OF ESTIMATES >

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 19/05/2021 11:32 (SGT)
Date of Accident 08/05/2021 10:55 (SGT)
Exact Location of Accident Joo Chiat Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLU7005M

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAY BEE GEOK
NRIC No SXXXX670C
Email Address DANIELTAYCY@GMAIL.COM
Mobile Phone No (Phone) +65-96875920
Alternative Phone No +65-96875920

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Tucson
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 1591

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MT/00717564/01
Cover Note Number -

DRIVER

Name of Driver TAY CHEE YONG DANIEL
NRIC No SXXXX114F

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 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. The 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.
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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

JDO Chait Rd

A

B

A

B

A

B

A = SLN 70051M

B = GBD 37971A

Chong Kwee Seng

G7946701X

hp: 93531441