ASS. REC. BY: | REF: OTZ/ 21008426/Kqc

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Accord

of _____

Insured: _____

Policy No. _____

Claims No. SNM21D203164/C02

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

10am

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 1 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLK 5155D Yr Regn: 01,17

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (A)

Make: Bmw 116D c.c 1496

Colour White A/C: Insured / Std / NI / NA

Sp.Reading 42668 T/Radio: Insured / Std / NI / NA

Eng No: _____

C/No: WBAIV720X0V725438

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 225/40R18

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm
D.O.A.	28/5/21	D.O.I.	10/6/2021

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
/	

11/06/21@12.12pm revised to Alfred Toh via Merimen.

Kenneth confirmed final fig $676.65, ~~1 day (Rod $3131.15, 82%)~~

(No Lump Sum)

Date/Time, File Pass to? 29/09 Typist

☐ : Prell. Report

☐ : Final Report

Date/Time, File Return to?

Days Of Repair: 1

Resurvey No. of Trip: 1

Survey Fee:

Transportation: ___ S + RS ___ SI

Parking

Others

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ Tech Invs ($)

☐ Weekend ($)

eport Format : MER-TP

ump Sum / I.B.I: ($ 676.65)

ACCORD AUTO SERVICES PTE LTD
10 Ang Mo Kio Industrial Park 2A
#03-11 AMK Autopoint Singapore 568047
Tel: 6481 9518 / 6481 9517 Fax: 6481 9516 email: claims@mycarworkshop.com.sg

ESTIMATE

MS China Taiping Insurance (Singapore) Pte Ltd
3 Anson Road #15-00
Springleaf Tower
Singapore 079909

Date : 03.06.2021
Vehicle No : SLK5155D
Veh Make/Model : BMW 116D
YOM : 2016
Chassis No : WBA1V720X0V725438
Date of Accident : 28.05.2021

No	Qty	Description	Amount $
		Cost Items:-	
1	1	Front Bumper	$ 1,080.00
2	2	Front Bumper Side Retainer	$ 40.00
3	1	Front LH Centre Grille	$ 100.00
4	1	Front LH Air Grille	$ 117.00
5	1	Front LH Fog Lamp Garnish	$ 117.00
6	Set	Front Reinforcement Bar	$ 432.00
7	Set	Front Bumper Sensor	$ 198.00
8	1	Front Bumper Sensor Seal	$ 7.00
9		Front Number Plate Garnish	$ 100.00
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			

Total - List Item	**$ 2,191.00**
Less 5%	**$ 438.20**
Total	**$ 1,752.80**

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:

ACCORD AUTO SERVICES PTE LTD

10 Ang Mo Kio Industrial Park 2A
#03-11 AMK Autopoint Singapore 568047
Tel: 6481 9518 / 6481 9517 Fax: 6481 9516 email: claims@mycarworkshop.com.sg

ESTIMATE

MS China Taiping Insurance (Singapore) Pte Ltd
3 Anson Road #15-00
Springleaf Tower
Singapore 079909

Date :	03.06.2021
Vehicle No :	SLK5155D
Veh Make/Model :	BMW 116D
YOM :	2016
Chassis No :	WBA1V720X0V725438
Date of Accident :	28.05.2021

No	Qty	Description	Amount $	
		Special Nett Items:-		
1	1 Set	Car Plate Number with Frame	$ Nil 50.00	45SA
2	1 Set	Front Bumper Clips	$ 35.00	7
3				
4				
5				
6				
7				
8				
9				
10				
		Total - SN Item	$ 85.00	

		Labour Charges:-		
1		Spray painting on all affected area.	$ 600.00	220
2		Labour remove/refix accident damages parts to knock, jack, cut weld and realign accident affected area.	$ 800.00	200
3		To check wiring system & light.	$ 100.00	15L
4		Anti Rust Treatment	$ NN 120.00	X
5		Computer Diagnostic	$ 350.00	7
		Total - L/C	$ 1,970.00	
		Sub-Total	#REF!	
		7% GST	#REF!	
		Total	#REF!	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE
1. Please report promptly 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 as to them is to 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	31/05/2021 17:57 (SGT)
Date of Accident	28/05/2021 23:40 (SGT)
Exact Location of Accident	Near 187 Bishan Street 13, Singapore 570187
Additional Location Information	Blk 187 Bishan Street 13 (Open Carpark, Lot No.56)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK5155D

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Chua Zi Keng
NRIC No	SXXXX961C
Email Address	Zackchua@live.com.sg
Mobile Phone No	(Phone) +65-88206867
Alternative Phone No	(Home) +65-62573259

VEHICLE PARTICULARS

Manufacturer	BMW
Model	116d
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 car
Transmission	Auto
CC	1600

INSURANCE COMPANY

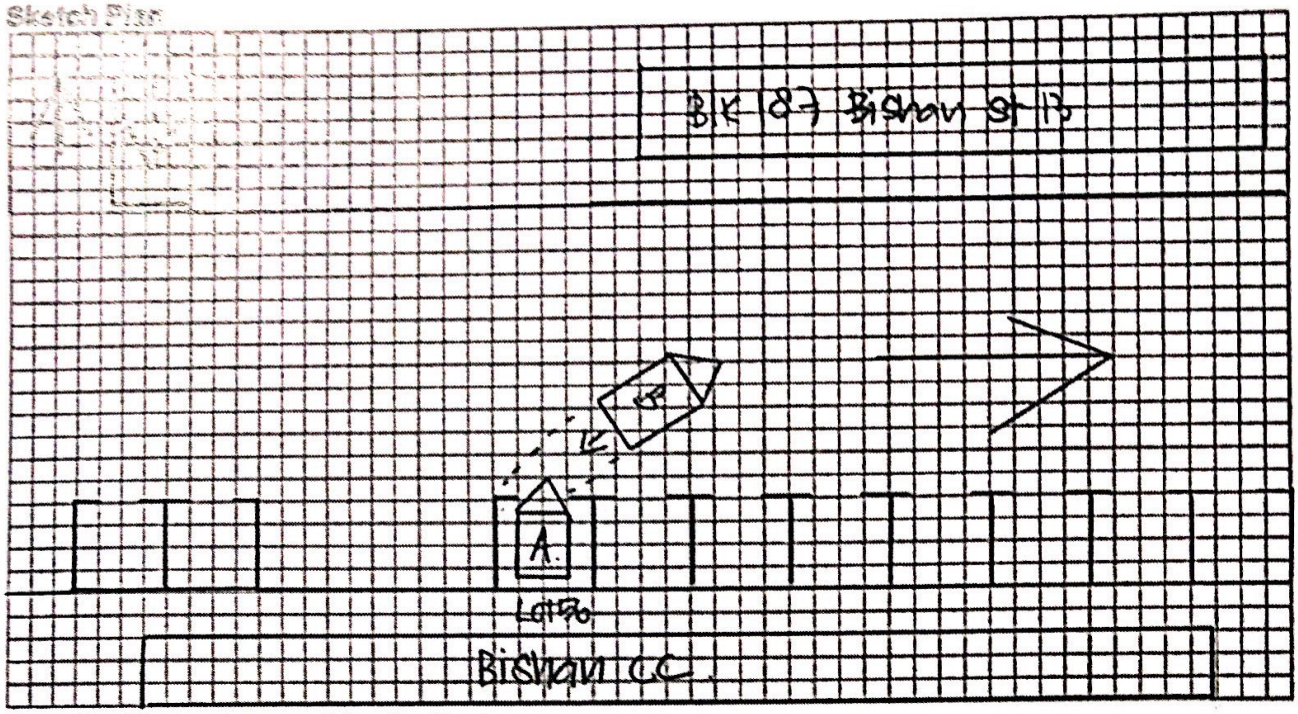
Name of Insurance Company	HL Assurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MP308883
Cover Note Number	03/01/2021 to 02/01/2022

DRIVER

Name of Driver	Chua Zi Keng
NRIC No	SXXXX961C

SKETCH PLAN #2

Sketch Plan



Describe Circumstances of the Accident

Location: BK 187 Bishan St 13 carpark Lot 56.		
Date of Accident: 11.40pm	Time of Accident: 28.05.2021	
Vehicle A: SLK 5155D	Vehicle B: SLV 928L	Vehicle C: -

I parked my car on Lot 56 at around 10pm on 28th May 2021.

The next morning I came down to see my car damaged at front bumper license plate and grille.

A witness saw the accident and left his contact details.

He told me to check back my dashcam at 11.40pm.

At 11.40pm, a black toyota estima (vehicle B) reversed into my car and drove off. Witness stated the car license plate is SLV 928L

Refer to police report attached.

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

31/05/2021 4:00pm

Witnessed by Reporting Centre Personnel WONG WAI PING.

21.05.2021