| | // | 01111 |
|-----------------------------|--|--|
| ASS. REG. BY: | REF: ////G-/ | 21606(70/Kt |
| enneth | | ASSIGNMENT |
| From: | Date: | Veh No: 506 54K Yr Regn: 12, 15 |
| Estimated Cost: | Date. | |
| OD TP WS ITP F | RES / OD RES / EVA / INV / MY | Type: M.Car/ M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover / |
| To Inspect Vehicle N | lo. | Truck / Trailer or |
| at Workshop m/s | | Make: Toy Harrie c.c 1886 |
| of | Chen Itoc | Colour A.Black AC: Insured / Std / NI / NA |
| Insured: | | Sp.Reading 42994 T/Radio: Insured / Std / NI / NA |
| Policy No. | | Eng/No: |
| Claims No. | | C/No: 75480 · 0033857 |
| Sum Insured: | Excess: | Gen. Cond: 800d Fair / Poor / Burnt |
| (Client's Record) | | Steering: Inorder / Jammed / Leaked / Burnt or |
| Make of Veh: | | Brake: Inorder / Jammed / Leaked / Burnt or |
| - | | Modi: Nii / S/Rim / STD A/Rim or |
| (Policy Condition) | | Tyre Size: F: 235/60R18 |
| Pemark: The veh had | commenced its N/S 0/ | R: |
| | e time of inspection. | BOT DON'T EXHOURT GT TPS T LIZAT MICTOHTSUTPIR SUMIT |
| Bal. or Market Value: | | TOYO/YOKO or |
| IDAC Accident Rport: | Consistent?: Yes or No | Front Rear |
| GIA / PR Seen: | Consistent?: Yes or No | mm Noa:mm |
| Est. Repairs: | 3 days Res.: Yes or No | mm boa. 5 mm |
| Lum Sum: | 20 % 3 Val.: Yes or No | D.O.A. 12/6/21 D.O.I. 15/6/202 |
| C4 D51 D52 | and the same of th | Survey held at |
| CA / REV / REP. | / 24 HRS Vehicle: IN / OI | Des. of Damages : Frt Rear I OIS I N/S I U/C I Rooftop or |
| Date: | Person Contacted: | |
| Date / Time Actio | on / Instruction | The U/C / Chassis frame / Body Structure affected due to collision. |
| | | The state of the s |
| | , , , , , , , , , , , , , , , , , , , | A STATE OF THE STA |
| | <u>LUMP SUM \$3050, 4DAYS</u> RED: 1598.43;34% | |
| | e contractor of the | |
| | | |
| | EV SALVEN | |
| 1 | | |
| Date/Time, File Pass to? | | |
| | : Prell. Report | Days Of Repair: |
| Dute/Firme, File Return to? | : Final Report | Resurvey No. of Trip: Survey Fee: |
| | | Transporative: |
| | Add Fe | 9: |
| | | : Interview (\$), Forest |
| eport Format : | A REPORT OF THE PARTY OF THE PA | Tech Invs (\$) Others |
| ump Sum / I.B.I: (S | 1 | :Weekend (\$ |
| | and the second of the second | |
| | | TOTAL |

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg GST:201001158E RCB NO:201001158E

M/S: MSIG INSURANCE (S) PTE LTD (SGX)

16 RAFFLES QUAY

#24-01 HONG LEONG BUILDING Date: 14 Jun 2021

SINGAPORE 048581

TEL: 68277660 FAX: 62257402 Veh Reg No:

ATTN: Motor Claim Department

SDG54K.1 Make/Model: **TOYOTA HARRIER 2.0**

ES2190537/AMK

D20MTPV01013471

AT PREMIUM

Estimate No:

Policy No:

Not North on he I Kny & Resony After Pains TP/MSIG/AMK Chassis No:

Claim Type: Third Party Accident Date: 12/06/2021

WS Ref:

TP Veh Reg No: SKU648R

ZSU600033957 Engine No: 3ZRB492158

Reg. Date: 27/10/2015 Sday,

Estimate Repair Cost to Vehicle No :SDG54K.1

| | Description | U/Price | Quantity | List Price | Amount |
|----|--|----------|--------------|----------------------|--------------|
| | List Price | - 5 h | | <u>S\$</u> | <u>S\$</u> |
| 1 | REAR BUMPER | 1,495.70 | 1 PC | Bu 1,495.70 | |
| 2 | REAR BUMPER LOWER SPOILER | 421.70 | | Mally 421.70 | |
| 3 | REAR BUMPER SPOILER Proje | 123.40 | 1 PC | 123.40 | |
| 4 | REAR BUMPER SIDE RETAINER | 82.70 | 2 PC | Dit 165.40 | * |
| 5 | REAR BUMPER CLIP | 4.50 | 5 PC | M 22.50 | |
| 6 | REAR BUMPER LH INNER PDC SENSOR | 490.80 | 1 PC | shar 490.80 | _ |
| 7 | TAILGATE EMBLEM 'HARRIER' | 73.70 | 1 PC | Me 73.70 | <u> </u> |
| 8 | REAR END PANEL | 1,006.40 | 1 PC | Br 1,006.40 | 2 |
| 9 | REAR END PANEL INNER TOP GARNISH | 438.30 | 1 PC | 438.30 | , |
| | ALC: A CONTRACT OF THE CONTRAC | | Less 25% | 4,237.90 1,059.48 | 3,178.43 |
| | Special Net | | | | |
| 10 | REAR END PANEL SEALANT | 40.00 | 1 PC | M 40.00 | 3012 |
| | Labour | | . Reliant to | 40.00 | 40.00 |
| 11 | TANDERS OF THE STATE OF THE STA | 700.00 | 1 LA | 700.00 | fool |
| 12 | PUTTY & RESPRAY REAR BUMPER & PARKING SENSORS,TAILGATE,REAR END PANEL & ALL AFFECTED AREAS | 700.00 | 1 LA | 700.00 | 6001 |
| 13 | RUSTPROOFING | 20.00 | 190 | | |
| 13 | KOSTIKOOTIKO | 30.00 | 1 LA | 1,430.00 | 1,430.00 |
| | | | | Total | S\$ 4,648.43 |
| | | | Add | GST @ 7% | 325.39 |

LKK Auto Consultants hence notify

* SUR VETPEPAIRE OF THE TANKING KIO WORKSHOP

• 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:

S\$ 4,973.82

Total Amount Payable

For Cheng Hoe Motor Pte Ltd

Dorlyn bet

AUTHORISED SIGNATURE



SINGAPORE ACCIDENT STATEMENT

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate 3. Information provided must be as truthful and accurate as possible. Any fallowing 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

| 21 11:15 (SGT) |
|----------------|
| 21 13:39 (SGT) |
| re |
| FORE EXIT 10) |
| re |
| |

DETAILS OF OWN VEHICLE

| Vehicle Registration Number | SDG54K |
|-----------------------------|------------|
| | |

INSURED/POLICYHOLDER

| Is company? | No |
|--------------------------|-----------------------|
| Name Of Registered Owner | AU TSIN YIN CONSTANCE |
| NRIC No | SXXXX381Z |
| Email Address | auconstance@gmail.com |
| Mobile Phone No | (Phone) +65-96830118 |
| Alternative Phone No | +65-96830118 |

VEHICLE PARTICULARS

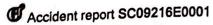
| Manufacturer | Toyota |
|--|---------------------------|
| Model | Harrier |
| Variant | _transfer and reference |
| Exact purpose for which vehicle was being used at time of | |
| accident | Private use |
| Are you claiming under your own insurance policy for repair to | |
| your vehicle? | No - Claiming third party |
| Vehicle Category | Private car |
| Transmission | Auto |
| CC | 2000 |
| | |

INSURANCE COMPANY

| Name of Insurance Company | Sompo Insurance Singapore Pte. Ltd. |
|---------------------------|-------------------------------------|
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | D20MTPV01013471 |
| Cover Note Number | 27/10/2020 - 26/10/2021 |

DRIVER

| Name of Driver | *************************************** | AU TSIN YIN CONSTANCE |
|---|---|-----------------------|
| • | | SXXXX381Z |



Page 1 of 17

| Braddell Br | A | | | . • |
|---|---|--|--|---------------|
| Sketch Plan Australian Wtil CUN | Jaccident Jaccident Jaccident Jaccident Jaccident | | A- 50654) B- 5ky 648k Calones C: XE 954 (alone) | |
| DESCRIBE CIRCUMSTANCES OF | THE ACCIDENT 1/4 | Ains CAG | 54K (Sumpo) | |
| Fapplied ence brake in of | rsery bal | ille No: Jog. en due to car. A Se | the car ene w sewals la | geny er, I |
| Selt an imp a truck CXE hit onto my | act from 1 954L) his | the buck the car 54k). No | 1 Han abju 1 Hant SKU 648 | R that |
| VAT WATER | Tar CVO | | | <i>(</i>) |
| | | a the reputation of | and an experience of the second secon | |
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| | 1 - 1 MT 23 - 4 - 3 - 3 - 1 - 1 - 2 | | | |
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| January Marian Beth | er in the street of | The state of the s | | |
| | | | | |
| | | | | |
| Note : Please note that your int | curer may have 14day | s Time Frame for vo | ou to submit an Own Dam | age Claim |
| under your own compret | | | | -9 |
| DECLARATION I/We declare the foregoing particulars | | | | |
| I/We declare the foregoing particulars | are tree it every respect | | The state of the s | _ |
| MILLION ST | | | | 2 |
| Policyholder's Signature Date & Time: | Driver's Signature (If driver is not the policy | holder) | Reporting Centre Personnel's Name: NRIC/FIN No. | Signature |
| IHJUNG 1: 30 Claim O | Date & Time: wn Policy (/) Clain | | eporting Only | 2 |