

ASS. REC. BY:

REF:

III / 21007064 / kgf3

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To inspect Vehicle No: _____

at Workshop m/s _____ CT

of S/m 02-

Insured: _____

Policy No. D21MCV0002275 3000

Claims No. MCV2021D0002754

Sum Insured: _____ Excess: 3100

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: 852/c

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 06 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: GBE 8096X Yr Regn: 04, 16

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

Truck / Trailer or _____

Make: Toy Dyna c.c. 2982

Colour: Silver AC: Insured / Std / NI / NA

Sp. Reading: 201772 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTFAT35490K206148

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NII / S/Rlm / STD A/Rlm or

Tyre Size: F: Mic 195R12x8

R: Yoko 155R12x8(10)

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

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 8 8 mm

L/Bal. 7 mm L/Bal. 8 8 mm

D.O.A. 24/6/21 D.O.I. 28/6/2021

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

28/06/21 @5pm revert to III via Merimen.

01/07/21 @2.25pm Gabriel Informed C/A via Merimen.

01/07/21 @2.36pm Informed Shawn C/A & ex:\$3100 by eMail.

Kenneth confirmed LS \$6300 (Red \$17745.65, 74%)

Date/Time, File Pass to?

☐: Prell. Report

08/09 Typist

☐: Final Report

Date/Time, File Return to?

Days Of Repair: 6

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S + R.S. \$

Fees

Others

TOTAL

Add Fee: ☐: Site Insp (\$)☐: Interview (\$)☐: Tech Invs (\$)☐: Weekend (\$)

Report Format: MER-OD

Lump Sum / T.B.T. (\$) 6300

CT AUTO PTE LTD

160 Sin Ming Drive, #02-14, Sin Ming AutoCity, Singapore 575722

Tel: 62666727 Fax: 62666358 Email: admin@ctauto.com.sg

Business Registration No. 201420132H

GST Registration No. 201420132H

ESTIMATE

Date: 26/6/2021

DOA: 24/6/2021

Vehicle No: GBE8096X

Make & Model: Toyota Dyna

*NOT Authorised
L/Rup &
Resurvey After Repair*

6 days

S/N	Qty	Item Description	Parts Price	Surveyor
1	1	Front Windscreen	\$ 1,165.70	X
2	1	Front Windscreen Moulding	\$ 224.90	50km
3	2	Front Wiper Arm	\$ 236.20	X
4	1	Front Wiper Motor	\$ 631.80	X
5	1	Front Wiper Panel	\$ 384.30	X
6	1	Front Panel	\$ 1,224.10	✓
7	1	Front Panel "DYNA" Emblem	\$ 79.20	✓
8	1	Front Panel Inner Panel	\$ 597.40	?
9	2	Front Panel Inner Panel Bracket	\$ 267.80	?
10	1	Front AirCon Blower	\$ 1,272.40	?
11	2	Front AirCon Blower Hose	\$ 579.00	?
12	1	Front AirCon Blower Air Duct	\$ 241.30	?
13	1	Front AirCon Cooling Coil	\$ 2,188.30	?
14	1	Front AirCon Cooling Coil Bracket	\$ 69.80	?
15	1	Front Dashboard	\$ 988.80	X
16	1	Front Dashboard Crossmember	\$ 743.80	X
17	1	Front Cabin Mounting	\$ 1,224.90	?
18	1	Front Steering Box	\$ 3,962.40	X
19	1	Front Grille	\$ 613.20	✓
20	1	Front Grille Centre Logo	\$ 80.20	✓
21	2	Front Corner Panel	\$ 276.20	X
22	2	Front Head Lamp	\$ 1,922.00	LT
23	2	Front Head Lamp Lower Rubber Seal	\$ 96.60	?
24	1	Front Bumper	\$ 713.80	✓
25	1	Front Bumper Reinforcement	\$ 486.70	✓
26	2	Front Bumper Fog Lamp Garnish	\$ 236.20	X
27	1	Front L/H Door	\$ 1,327.20	X
			\$ 21,834.20	
		Less 25%	\$ 5,458.55	
			\$ 16,375.65	
		<u>Special Nett Items</u>		
1		Sundries	\$ 50.00	?
2	1	Front Windscreen Solar Film	\$ 450.00	X
3	1	Front Windscreen SunShade	\$ 350.00	X
4	1	Front Windscreen ERP Sticker	\$ 50.00	X
5	1	Front Windscreen Moulding Sealant	\$ 120.00	X
6	1	Front Windscreen Moulding Damping Seal	\$ 120.00	X
7	1	Front Wiper Panel Sealant	\$ 120.00	X
8	1	Front Panel Sealant	\$ 150.00	30km
9	1	Front Panel Inner Panel Sealant	\$ 120.00	?
10	1 set	Front Dashboard Clips	\$ 80.00	X
11	1 set	Front Grille Clips	\$ 80.00	✓
12	2 set	Front Corner Panel Clips	\$ 50.00	X
13	1 set	Front No. Plate	\$ 80.00	20km
14	2 set	Front Head Lamp Clips	\$ 80.00	?
15	1	Front L/H Door Co. Sticker	\$ 150.00	25km
			\$ 2,050.00	
		Total Parts	\$ 18,425.65	

S/N	Labour Description	Amount	Amount
1	Labour for panel beating, cut, weld, straighten front and replace front damaged parts.	\$ 2,000.00	6001
2	To putty and spray painting front portion.	\$ 1,600.00	6001
3	To check wiring and focus front head lamp.	\$ 80.00	201
4	To remove and install air con system to facilitate the repair and refill gas.	\$ 120.00	1001
5	To apply anti rust proofing to front affected area. <i>nz</i>	\$ 250.00	X
6	To remove and install front windscreen.	\$ 120.00	601
7	To remove and install inner garnish and trim to facilitate the repair. <i>nn</i>	\$ 350.00	X
8	To remove and install front dashboard.	\$ 250.00	2201
9	To remove and install front air con blower.	\$ 250.00	?
10	To remove and install steering box. <i>nn</i>	\$ 450.00	X
11	To perform 4 wheel alignment and balancing. <i>nn</i>	\$ 150.00	X
	Total labour :	\$ 5,620.00	
	Total parts :	\$ 18,425.65	
	Total labour :	\$ 5,620.00	
	Total repair cost : (Before GST)	\$ 24,045.65	

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 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 25/06/2021 18:21 (SGT)
Date of Accident 24/06/2021 16:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information ANG MO KIO INDUSTRIAL PARK 2, BESIDE BLK 5023 EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBE8096X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ONG KIM SUN
Company Reg No 0XXXX000X
Email Address ONG.BYU@GMAIL.COM
Mobile Phone No (Phone) +65-96526110
Alternative Phone No (Office) +65-96526110

VEHICLE PARTICULARS

Manufacturer Toyota
Model Dyna
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? Yes
Vehicle Category Commercial vehicle
Transmission Manual
CC 2982

INSURANCE COMPANY

Name of Insurance Company A9990 India International Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D21MCV0002275
Cover Note Number -

DRIVER

Name of Driver CHAI XIAOJUN
Passport No/FIN GXXXX442R

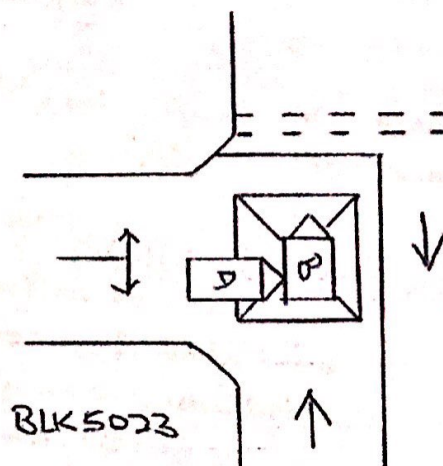
Accident report SK0J216P0002

SKETCH PLAN

A: GBE 8096X

B: SFK6999A

ANG MO KIO INDUSTRIAL
PARK 2, BESIDE BLK 5023
EXIT



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE STATED DATE AND TIME, I WAS TRAVELLING
TOWARDS THE EXIT BESIDE BLK 5023. AS I INCH OUT, I
LOOKED TO THE LEFT ROAD WAS CLEAR THAN I LOOK TOWARDS
THE RIGHT AND MOVED OUT. SUDDENLY I FELT AN IMPACT.
I HAD HIT ONTO VEHICLE B.
OD CLAIM @ LEONG AUTO. <i>CHAI</i>
GIA REPORT SENT TO WORKSHOP:
LEONG AUTO

DECLARATION

I/We declare the foregoing particulars are true in every respect.

ONG KIM SUN
BLK 3017 BEDOK NORTH AVE 4 STREET 5
#02-04 SINGAPORE 486121

Policyholder's Signature
Date & Time: *25/6*

GAARME Sketch Plan Form, V3

CHAI
Driver's Signature
(If driver is not the policyholder)
Date & Time: *25/6 @ 11:25 AM*

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

