

ASS. REC. BY:

Tanjah

REF:

C8/171621007443/7143

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: **GBK 3711E**at Workshop m/s **KIM SENG TECK**

of _____

Insured: _____

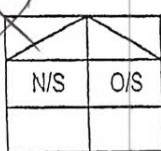
Policy No. **999993604**Claims No. **7136195281SG**Sum Insured: _____ Excess: **\$1000**

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: **\$80K**

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: **6** days Res.: Yes or No

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

CA / **REV** / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **GBK3711E** Yr Regn: **2020 July**

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

Truck / Trailer or

Make: **Toyota Aygo** c.c. **2982**Colour **White** A/C: Insured / Std / NI / NASp. Reading **31869** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **STFAT35960K215163**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: **Nil** / S/Rim / STD A/Rim orTyre Size: F: **195/75R15**R: **155/112 (17)**

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

TOYO / YOKO or

Front

R/Bal. **6** mmL/Bal. **6** mm

D.O.A. _____

Survey held at **Kim Seng Teck Motor**

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt + N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

9/7/2021 @ 3.06pm Revert to AIG via Merimen.

16/7/2021 @ 4.25pm Kok Chong informed C/A via Merimen.

16/7/2021 @ 5.41pm Informed Wendy C/A & ex: \$1000/- by email.

Confirmed final fig P/P \$5218, 6 repair days.

(RED \$2518; 33%)

Date/Time, File Pass to?

☐

: Preli. Report

1) 6/9 TYPIST

☐

: Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: **6**Resurvey No. of Trip: **2**

Survey Fee:

Transportation:

Photos

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Rep. Format: **MER-OD**Lump Sum / L.B. C: **\$5218**

KIM SENG TECK MOTOR WORKS

Blk 3021 A Ubi Road 1 #01-42

Singapore 408715

Tel No. : 6741 5520 / 6741 1339 Fax No. : 6741 5808

E-Mail : kimsengteck_motorworks@yahoo.com.sg

Website : kstteam@singnet.com.sg

Tax Reg. No. : M9-0002075-E Buss. Reg. No. : 27157400/C

AIG ASIA PACIFIC INSURANCE PTE LTD

78 Shenton Way #07 - 16

079120

Attention : Motor Claim Department

Tax Invoice : CI200781

Date : 07/07/2021

Vehicle Num. : GBK 3711E

Make/Model : Toyota Dyna JTFAT35Y-01/ 07/ 2020

Chassis/Eng# : JTFA35Y60K215163/1KDB037678

Accident Date : 05/07/2021

Claim No. :

Reference : 9738 5227

Policy No. : 999993604

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

- | | | | | |
|-----|------|----------------------------|--|----------|
| 1. | 1pc | Front door | | 720.00 |
| 2. | 2pcs | Door hinge | | 120.00 |
| 3. | 1pc | Front stepboard | | 130.00 |
| 4. | 1pc | Front corner panel | | 130.00 |
| 5. | 1pc | Front corner panel garnish | | 65.00 |
| 6. | 1pc | Front grille | | 245.00 |
| 7. | 1pc | Front headlamp | | 398.00 |
| 8. | 1pc | Front bumper | | 320.00 |
| 9. | 1pc | Front bumper reinforcement | | 168.00 |
| 10. | 1pc | Air Con Coil | | 2,200.00 |
| 11. | 1pc | Air con fan motor | | 320.00 |
| 12. | 1 | Compressor oil | | 35.00 |
| 13. | 1 | Refill gas | | 45.00 |
| 14. | 1 | Towing fee | | 80.00 |

List TotalS\$:

4,976.00

LABOUR :

- | | | | |
|---|--|----------|----------|
| 1 | To check wiring & lighting | 80.00 | 80.00 |
| 1 | To transfer door parts to new door | 180.00 | 180.00 |
| 1 | To dismantle & refix cabin with floor fitting & trimming | 120.00 | 120.00 |
| 1 | To remove & refix air con system | 180.00 | 180.00 |
| 1 | To spray paint accident portions | 1,200.00 | 1,200.00 |
| 1 | To dismantle & repair & replace accident area & parts | 1,000.00 | 1,000.00 |

Labour Total S\$:

2,760.00

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:

E. & O.E.

Total S\$: 7,736.00

GST @ 7% S\$: 541.52

Amount Due S\$: 8,277.52



for KIM SENG TECK MOTOR WORKS

Wendy
96355542

Tanphn 97495749 / 62563561

Not Authorise / Revert

Resurvey before paint Etc! to be advise.

Tanphn@khauda.com 8/7/21 @ 3:15pm.

o Gdeye

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	05/07/2021 12:37 (SGT)
Date of Accident	05/07/2021 08:02 (SGT)
Exact Location of Accident	Bedok Reservoir Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK3711E
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	KST AUTO RENTAL PTE LTD
Company Reg No	2XXXXX860W
Email Address	UNGKUBLACKSTAR@GMAIL.COM
Mobile Phone No	(Phone) +65-97385227
Alternative Phone No	+65-97385227

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	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	999993604
Cover Note Number	-

DRIVER

Name of Driver	UNGKU AHMAD NIZAM BIN U KADIR
NRIC No	SXXXX150J

Date Of Birth	10/01/1983
Occupation	Indoor
Date Of Driving Pass	22/09/2009
Driving experience	11 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97385227
Alt. Phone Number	-
Email Address	UNGKUBLACKSTAR@GMAIL.COM
Address	BLK 108 BEDOK RESERVOIR ROAD #09-306
Address complement	-
Postcode	470108
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACH
STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC6362E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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.
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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

