ennerh	ASSIGNMENT
From: Date:	Veh No: \$67 77400 Yr Regn: 11, 1
Estimated Cost:	Type: McCar M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	1
at Workshop m/s lian 14c	
of	Sp.Reading 377 & Pf T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	CNO: 27X10 · 20716
Claims No.	Gen. Cond: Good' Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder/Jammed/Leaked/Burnt or
Make of Veh:	1
	Modi: NII / S/Rim / STD A/Rim or
(Policy Condition)	Tyre Stee: Gentinula 215/60R17
	R:
repair at the time of inspection.	TI SOLDON STANDANT OF THE TELEST MICTORISO THIS ISUMIT
	TOYOTYOKO or Acxen
al. or Market Value:	Eront Rear
AC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 9 mm
IA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 9 mm
st. Repairs: days Res.: Yes or No	D.O.A. 13/7/21 D.O.I. 22/7/20
m Sum: 20 % 3 Val.: Yes or No	Survey held at
A / REV / REP. / 24 HRS	E.
Vehicle: IN / OUT	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
101	
te:Person Contacted:	The U/C / Chassis frame / Body Structure offered due to air.
ate / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
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ate / Time Action / Instruction Instruction	Days Of Repair: Resurvey No. of Trip: Survey Fee: Transports57: Site Insp (\$)S - RSSI
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ate / Time Action / Instruction Ima, File Pass to? : Prell. Report	Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation: Site insp (\$) _ S + RS _ SI Interview (\$) Fartos
ate / Time Action / Instruction Ima, File Pass to? : Prell. Report	Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation: Site Insp (\$) S - RS SI Interview (\$) Fairos Tech Invs (\$) Others

Lian Her Motors

Blk 5038 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541

Tel: 64817221

H L Car Rental Pte Ltd Blk 5038 #01-405 Ang Mo Kio Industrial Pk 2 Singapore 569541

Vehicle No

: SLT 7740 D

Make

: Toyota C-HR

Year

: 2017

Nos Norhorn Uly 8 Merony After Painy 3clay,

Fax: 64815131

Qty	Description	Unit Price	Amount
Estimate Cos	t Of Repair		
1 pc 1 pc 1 pc	Front o/s door outer protector Rear o/s door protector Rear o/s fender arch garnish	not by	\$405.10 \$385.70 \$187.50
, po	rear ore remaining arms.	Less 25 %	\$978.30 \$244.58 \$733.72
S Nett			100

1 set	O/S rocker panel step garnish	PM
30 pcs	Fender arch and rocker panel garmis	sh clip

	CM	\$2,600.00	-
M	\$2.00	\$60.00	_
	_	\$2,660.00	- 14

Labour Charges

Remove/renew the above parts including knocking, welding & cutting.

\$500.00 250

To putty & spray paint on accident affected portion.

\$1,000.00 6001

To spray anti rust on accident affected portion.

\$120.00

Remove/renew o/s rocker panel step garnish.

1501 \$200.00 \$5,213.72 Total

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 <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 willul misrepresentation or willnowing of material lacts may allow insurance companies to report a companies.

 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 falsa 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	
Date of Accident	14/07/2021 12:45 (SGT)
Exact Location of Accident	13/07/2021 18:15 (SGT)
	Near PIE, Singapore
Additional Location Information	-
Country/State of Loss	
	Singapore

DETAILS OF OWN VEHICLE

SLT7740D

(Office) +65-64817221

INSURED/POLICYHOLDER		
Is company?		
Name Of Registered Owner	Yes	
Name Of Registered Owner	H L Car Rental Pte Ltd	
Company Reg No	2XXXXX543E	
Email Address	carrental.lh@gmail.com	
Mobile Phone No	(Dhana) . OF OFFICE	
Alternative Phone No.	(Phone) +65-97687073	

VEHICLE PARTICULARS

Vehicle Registration Number

Manufacturer	Toyota
Variant	C-hr
	The second secon
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 hire
Transmission	Auto
CC	1797

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	DMHCSNA00004252100
Cover Note Number	

DRIVER

Name of Driver		Winson Rogers
NRIC No	· ····································	SXXXX437H



SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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 above 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 GA 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 law yereflaw 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 law yers/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 Porsonal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

HI	CAR	RENTAL	DTC	ITO
11.1	CHI	KENIAL	PIL	

Policyholder's Signature / Date &

Wing

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

Witnessed by Reporting Centre Resonnel

Sketch Plan

Tanc

