

ASS. REC. BY:

REF: AGZ/ 210077761Kqf3

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____ B14

of _____

Insured: _____

Policy No. _____

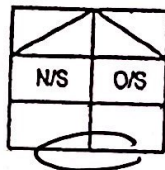
Claims No. C10010806/CD

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 7-4 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLR 87454 Yr Regn: 08, 17

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

Truck / Trailer or _____

Make: Subaru Forester 1998Colour: M. D. Grey A/C: Insured / Std / NI / NASp. Reading: 59445 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JF1STGK 855G097810Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD / R/Rim orTyre Size: F: 225/55R18

R: _____

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

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 8 mm R/Bal. 8 mmL/Bal. 8 mm L/Bal. 8 mmD.O.A. 7/7/21 D.O.I. 22/7/2021

Survey held at _____

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Kenneth confirmed LS \$2050, 4 days. (Red \$6719.36, 77%)

Date/Time, File Pass to?

1) 17/12 Typist

Date/Time, File Return to?

2)

☐: Prell. Report☐: Final ReportDays Of Repair: 4Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S + RS \$

Fees

Others

TOTAL

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

Report Format: TP

Lump Sum 11.8.11 \$ 2050

BH AUTO SERVICES PTE LTD

Blk 1, Sector C, Sin Ming Industrial Estate #01-111 / 113 / 115 / 117 Singapore 575636
Tel: 6559 8944 / Fax: 6269 2404

Auto & General Southeast Asia (SEA)
190 Clemenceau Ave, #03-01
Singapore Shopping Centre
Singapore (239924)
ATTN: MOTOR CLAIM DEPARTMENT

Not Notified
6/1 Sep 8
Resurvey After Rain
3-4 days

DEAR SIR / MADAM :

ACCIDENT REPAIR ON: SLR8745U

Date: 13/07/2021

MODEL : SUBARU FORESTER

Page : 1 of 2

POLICY NO :

CHASSIS NO : JF1SJGK85JG097810

YEAR OF MANUFACTURE : 2017

DATE / TIME OF ACCIDENT: 07/07/2021 Time: 1705Hrs at TESSENSOHN ROAD TOWARDS BALESTIE

THIRD PARTY VEHICLE NO: SBA73K

Appended below are the estimated cost of repair and parts to be replaced for the above vehicle: -

Replacement Of Parts

S/N	Quantity	Unit Price	Condition	Amount
		S\$		S\$
1 REAR BUMPER	1	600.00	<i>As</i>	600.00 ✓
2 TAIL GATE	1	1,192.00	<i>n</i>	1,192.00 X
3 REAR BUMPER CLIPS	4	5.10	<i>n</i>	20.40 ✓
4 RH REAR FENDER	1	1,172.00	<i>n</i>	1,172.00 X
5 LH REAR FENDER	1	1,172.00	<i>n</i>	1,172.00 X
6 REAR BUMPER BEAM	1	300.00		300.00 ?
7 REAR TOW COVER	1	16.00	<i>n</i>	16.00 X
8 REAR EXHAUST	1	601.80		601.80 ?

Sub-Total: 5,074.20

Less: 25% discount - 1,014.84

Total Parts after 25% discount: 4,059.36

Special Nett Items

1 Anti-rust coating

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:

80.00

n 160.00 X

Total SN: 160.00

Total Parts: 4,219.36

Labour Charges For Rear Portion

1	Provide skill labour to remove all damaged parts, panel beat , cut & weld if necessary and align all panel and reinstall all damaged parts.	2,000.00	400d
2	Provide skill labour & material to putty all damaged parts & panel & to respray with 2K paint with oven spray booth facilities	2,000.00	440d
3	Provide skill labour to disconnect and check electrical wiring	150.00	20d
4	Remove and replacement of exhaust pipe to facilitate repair	250.00	} ?
5	Realign of exhaust	150.00	

Total Labour:

4,550.00

Total Parts & Labour: 8,769.36

GST 7% 613.86

Grand Total: 9,383.22

Estimate Repair Duration

15 days

ACCIDENT VEHICLE OF : SLR8745U

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3-4 days

Remark: Supplementary estimate will be raised in the event additional damaged parts are found in the course of repair.

Yours sincerely,

ESTIMATOR: NINJA LO

Survey attended by:

Name : Kennerth
Company : CLK
Date : 22/7/21
Time : 11.25am
Contact No : _____
Email : _____

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 08/07/2021 14:39 (SGT)
Date of Accident 07/07/2021 17:05 (SGT)
Exact Location of Accident 60 Tessensohn Rd, Singapore 217664
Additional Location Information TESSENSOHN ROAD TOWARDS BALESTIER ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLR8745U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHEW YOON CHONG WINSTON
NRIC No SXXXX274D
Email Address winstonchew@gmail.com
Mobile Phone No (Phone) +65-90111467
Alternative Phone No (Home) +65-90111467

VEHICLE PARTICULARS

Manufacturer Subaru
Model Forester
Variant -
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 1999

INSURANCE COMPANY

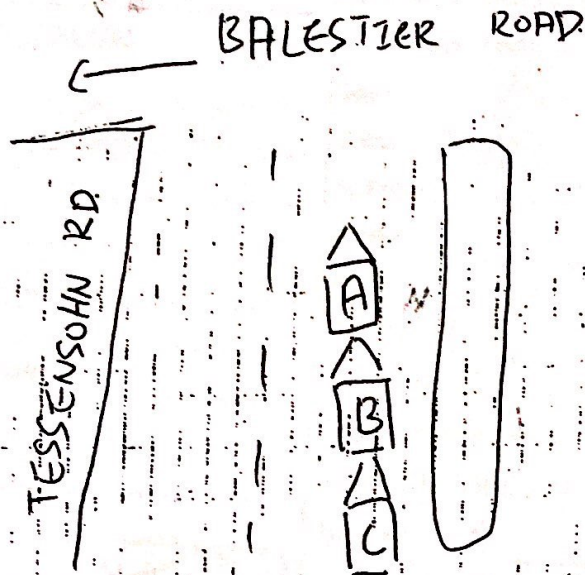
Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number -
Cover Note Number -

DRIVER

Name of Driver CHEW YOON CHONG WINSTON
NRIC No SXXXX274D

SKETCH PLAN

A=) SLR 874SU
B=) SBA 73K
C=) SMZ 9761L



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling ~~at~~ Tessensohn road going towards
Balestier. Suddenly, I felt an impact on ~~the~~ the
back of my vehicle. ~~then~~ for from vehicle B. when
I got down ~~the~~ ~~an~~ my vehicle, I ~~was~~ saw the
back of my vehicle is damaged.

DECLARATION

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

[Signature]