

21007832/k qf3

ASSIGNMENT

Date: _____

Inspector: _____

CC: C10010756/HA

To: Personnel File No.

Re: Murder

File No.: _____

Case No.: _____

Sum Insured: _____ Excess: _____

(Check Boxes)

Rate of Val: _____

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input type="checkbox"/>
NS	QS
<input type="checkbox"/>	<input type="checkbox"/>

Ins or Marine Value: _____

CC: Accident Report Consistent? Yes or No

CC: In Case Consistent? Yes or No

CC: Report 07 3 days Ret: Yes or No

Est Cost: 20 \$ 3 Val: Yes or No

CA / NY / NY / 24 HRS

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

Van No: Imp 38076 Yr Reg: 12, 19
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or Truck
 Make: Peugeot Renault cc 1800
 Colour: Black AC: Insured / Std / NI / NA
 Sp. Reading: 9970 T/Radio: Insured / Std / NI / NA
 Eng No:
 Chassis No: VF1RFA 000 6321 2012
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Good / Jammed / Leaked / Burnt or
 Brake: Good / Jammed / Leaked / Burnt or
 Mod: NI / SRM / STD / SRM or
 Tyre Size: F: GY 195 155 R 20
Truck
 BS / DUN / EXNOVA / GY / FS / LIZA / MIG / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front: 9 mm
 Rear: 8 mm
 L/Sal: 9 mm
 L/Sal: 8 mm
 D.O.A: 2/7/21
 D.O.I: 26/7/2021
 Survey held at NS FM
 Des. of Damages: Frt / Rear / Q/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction	The OIC / Chassis frame / Body Structure affected due to collision.
	Kenneth confirmed final fig \$600 (Red \$11016.84, 95%)	

29/07 Typist ☐: Prel. Report
☐: Final Report

Days Of Repair: 3
Resurvey No. of Trip:

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

Survey Fee:	
Transportation:	
_____ S + RS _____ \$	
Fuel:	
Others:	
TOTAL	

Report Format : TP
Lump Sum / L&E (\$) 600

Munich Autocare Pte Ltd

60 Jalan Lam Huat #02-02/03 Carros Centre Singapore 737869
Tel: +65 6255 2288 | Fax: +65 6265 5388
Company Reg. No.: 201832250M | GST Reg. No.: 201832250M

ESTIMATION REPORT

Vehicle No : SMP3807G
Make & Model : RENAULT , GRAND SCENIC IV 1.5 DCI AT
Year of Manufacture : 2019

Estimation No. : E21070017
Date : 21/07/2021

3 days

No.	Code	Description	Qty	U/P	Amt
Section: Remark					
1		BUDGET DIRECT INSURANCE DOA: 02/07/2021 TP CLAIMS	1.00	0.00	0.00

Amt S\$ 0.00
Discount (0.00%) S\$ 0.00
Subtotal S\$ 0.00

Section: Parts					
2		850221774R REAR BUMPER (N.C) Bnc	1.00	1,482.96	1,482.96 X
3		850189314R REAR BUMPER LOWER	1.00	689.72	689.72 X
4		850429618R REAR BUMPER CENTER SUPPORT BRACKET	1.00	477.84	477.84 X
5		284389618R BLIND SPOT SENSOR	1.00	457.92	457.92 X
6		REAR REFLECTOR LH	1.00	449.80	449.80 X
7		850448823R REAR BUMPER RETAINER LH	1.00	288.96	288.96 X
8		REAR FENDER LH	1.00	799.24	799.24 X
9		REAR FENDER BRACKET LH	1.00	152.60	152.60 X
10		620223972R FRONT BUMPER	1.00	1,295.50	1,295.50 X
11		850457145R REAR BUMPER BRACKET	1.00	268.70	268.70 X
12		631009902R FRONT FENDER LH	1.00	614.80	614.80 X
13		620436651R FRONT FENDER BRACKET LH	1.00	112.60	112.60 X
14		638443889R FRONT WHEEL ARCH LH	1.00	248.60	248.60 X
15		7703077435 FRONT WHEEL ARCH CLIPS	3.00	4.20	12.60 X
16		FRONT BUMPER SENSOR LH	1.00	273.50	273.50 X
17		HEADLAMP BRACKET LH	1.00	127.50	127.50 X

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:

Continue on next page...

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ESTIMATION REPORT

Vehicle No : SMP3807G
Make & Model : RENAULT , GRAND SCENIC IV 1.5 DCI AT
EU6,VF1RFA00063212012
Year of Manufacture : 2019

Estimation No. : E21070017
Date : 21/07/2021

No.	Code	Description	Qty	U/P	Amt
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Amt S\$ 7,752.84
Discount (0.00%) S\$ 0.00
Subtotal S\$ 7,752.84

Section: Special nett

18		REAR BUMPER CLIPS	6.00	7.00	42.00	X
19		FRONT BUMPER CLIPS	6.00	7.00	42.00	X

Amt S\$ 84.00
Discount (0.00%) S\$ 0.00
Subtotal S\$ 84.00

Section: Labour

20		TO PANEL BEATING, DAMAGED AND REALIGN THE FRONT BUMPER, FRONT FENDER LH, REAR BUMPER, REAR FENDER LH AND ALL NECESSARY ETC.	1.00	1,600.00	1,600.00	200
21		TO CHECK WIRING AND SYSTEMS FOR PROPER FUNCTION	1.00	200.00	200.00	X
22		TO DISMANTLE & REFIX FRONT AND REAR SENSOR.	1.00	250.00	250.00	X
23		TO DO WHEEL ALIGNMENT	1.00	180.00	180.00	X
24		TO APPLY RUST PROOFING	1.00	150.00	150.00	X
25		TO PUTTY & SPRAY PAINTING ON REAR BUMPER, REAR FENDER LH, FRONT BUMPER, FRONT FENDER LH AND ALL NECESSARY ETC.	1.00	1,400.00	1,400.00	400

Amt S\$ 3,780.00
Discount (0.00%) S\$ 0.00
Subtotal S\$ 3,780.00

Remarks:

DOA: 02/07/2021
BUDGET DIRECT INSURANCE
TP CLAIMS

Total S\$ 11,616.84

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	12/07/2021 18:18 (SGT)
Date of Accident	02/07/2021 20:50 (SGT)
Exact Location of Accident	604 Sembawang Rd, Singapore 758459
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP3807G
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	BIS MOTORING PTE LTD
Company Reg No	2XXXXX055D
Email Address	KEIFTAN@BISMOTORING.COM.SG
Mobile Phone No	(Phone) +65-86881311
Alternative Phone No	(Office) +65-68963633

VEHICLE PARTICULARS

Manufacturer	Renault
Model	Scenic
Variant	-
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	1461

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	COI-SPMF1000000413-SMP3807G
Cover Note Number	-

DRIVER

Name of Driver	ABU BAKAR BIN SAINI
NRIC No	SXXXX906E

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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:

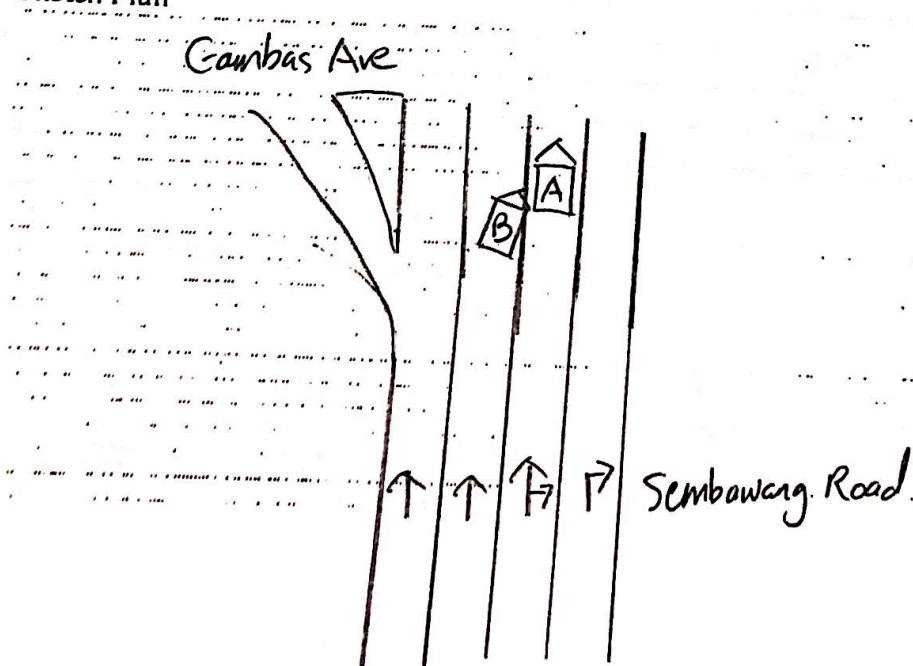
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



A = SMP3807G
B = SLK9771Z