ASS. REC. BY: Kenneth

REF: AIG/2100831611Ke

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Chong Hoe

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 05 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: SMS 2698U Yr Regn: 09, 16

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (4) MPV

Make: Toy Wish c.c 1798

Colour M. Silver A/C: Insured / Std / NI / NA

Sp.Reading 56590 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDGG 20W 40 J005299

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 195/65R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	2 mm	R/Bal.	3 mm
L/Bal.	2 mm	L/Bal.	3 mm
D.O.A.	6/8/21	D.O.I.	10/8/2021

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
/	

Date/Time, File Pass to?

1) _____ ☐ : Prell. Report ☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee: _____

Transportation: _____ S + RS _____ St

Parking _____

Others _____

TOTAL _____

Report Format :

Lump Sum / I.B.I: ($ _____)

SMS 2698U
TP/AIG

Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761
TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg
GST:201001158E RCB NO:201001158E

M/S : AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16 AIG BUILDING
SINGAPORE 079120
TEL: 64193000 FAX: 64153727
ATTN: Motor Claim Department
WS Ref: TP/AIG
Claim Type: Third Party
Accident Date: 06/08/2021
TP Veh Reg No: GBH4637X

Not authorised LH lamp & Bumper After Party

Estimate No: **ES2190749/YISHUN**
Date: 10 Aug 2021
Policy No: 5117590338
Veh Reg No: **SMS2698U**
Make/Model: TOYOTA WISH 1.8 CVT
Chassis No: JTDGG20W40J005299
Engine No: 2ZR1836654
Reg. Date: 22/09/2016

Estimate Repair Cost to Vehicle No :SMS2698U

	Description	U/Price	Quantity	List Price S$	Amount S$
	List Price				
1	FRONT BUMPER	601.90	1 PC	601.90	
2	FRONT BUMPER LH SIDE RETAINER	69.40	1 PC	69.40	
3	FRONT BUMPER REINFORCEMENT	365.20	1 PC	365.20	
4	FRONT BUMPER CLIPS	3.50	6 PCS	21.00	
5	FRONT BUMPER SPONGE	101.90	1 PC	101.90	
6	BONNET	977.80	1 PC	977.80	
7	BONNET LOGO	72.20	1 PC	72.20	
8	BONNET LH HINGE	68.90	1 PC	68.90	
9	FRONT LH FENDER	896.90	1 PC	896.90	
10	FRONT GRILLE	446.30	1 PC	446.30	
11	HEADLAMP ~~LH~~ X2	1,265.70 X2	1 PC	1,265.70	
12	FRONT WIPER GARNISH LH EXTENSION	36.80	1 PC	36.80	
	Front door outer mldg $180			4,924.00	
			Less 25%	1,231.00	3,693.00
	Labour				
13	REMOVE & REFIX FRT BUMPER ASSY,FOG LAMPS,GRILLE,BONNET & ATTACHMENT,FRT LH FENDER,RADIATOR & FAN MOTOR,TO STRAIGHTEN,KNOCK & REPAIR FRT SUPPORT PANEL & REALIGN THE SAME	700.00	1 LA	700.00	550
14	REMOVE AND REFIX AIRCON,CHECK,VACUUM & REFILL GAS	100.00	1 LA	100.00	X
15	PUTTY & RESPRAY ON FRT LH FENDER,FRT LH DOOR,FRT BUMPER,REINFORCEMENT,FRT SUPPORT PANEL,BONNET	1,000.00	1 LA	1,000.00	900
				1,800.00	1,800.00

Total	S$ 5,493.00
Add GST @ 7%	384.51
Total Amount Payable	S$ 5,877.51

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:

For Cheng Hoe Motor Pte Ltd

AUTHORISED SIGNATURE

SC1G2186XXX6 / CHENG HOE MOTOR PTE LTD[768761]
ENTRY DATE & TIME: 06/08/2021 18:04 (SGT)
SUBMITTED BY: CHIONG BENG CHOON
VERSION: 1 (06/08/2021 18:04 (SGT))

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	06/08/2021 18:04 (SGT)
Date of Accident	06/08/2021 15:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BISAN ST 13
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS2698U

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG KWOK WENG(WU GUORONG)
NRIC No	SXXXX334I
Email Address	au63xxx@gmail.com
Mobile Phone No	(Phone) +65-92333304
Alternative Phone No	+65-92333304

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	WISH 1.8 CVT
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	1798

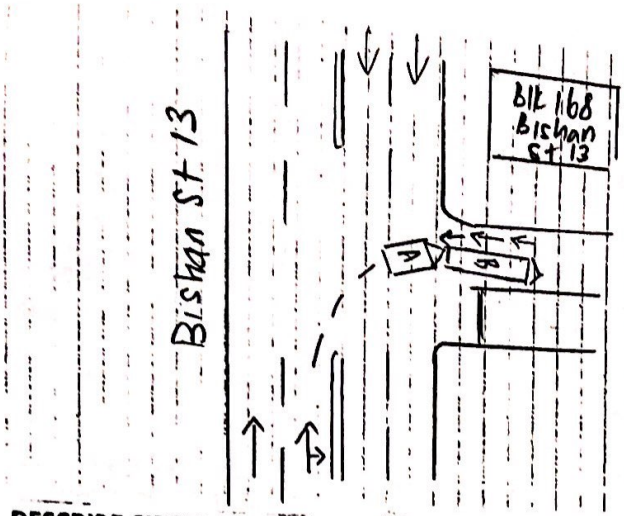
INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5117590338
Cover Note Number	30/05/2020 -21/09/2021

DRIVER

Name of Driver	JANNIFER LAU KIAN FANG(LIU JIANFANG)
NRIC No	SXXXX371E

Sketch Plan



A- SMS 2698U

B: GBH 4637X
Goh EE Mui
S1261758E
hp: 87112066/90047888

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DOA : 6/8/21 Time : 3pm. Location : Bishan st - 13

Accident occured along Bishan Street 13.
I was behind m/Lorry (B) when the said driver suddenly reversed. Despite my horns to him, he continued to reverse and eventually collided onto my vehicle.

No passeyers on both vehicles and no one injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

6/8/21

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: Ezleen (45)
NRIC/FIN No.:

( ) Claim Own Policy (✓) Claim Third Party ( ) Reporting Only
( ) Claim OD/TP at other workshop (_____)

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