

ASS. REC. BY:

REF: C12 / 21009254/Ke

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____ City

of _____

Insured: _____

Policy No. _____

Claims No. _____

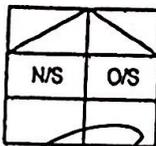
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 5-6 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: SLH 62158 Yr Regn: 11, 16

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

Truck / Trailer or Ambylana

Make: NIS Urban c.c. 2488

Colour: White AC: Insured / Std / NI / NA

Sp. Reading: 233178 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JN1UC 4 E 28 Z 000 2672

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: M / S/Rlm / STD A/Rlm or

Tyre Size: F: 1 P 5 R 15 X 8

R: _____

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

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 3 mm

L/Bal. 5 mm L/Bal. 3 mm

D.O.A. 27/8/21 D.O.I. 2/9/2021

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?

: Prell. Report

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

\$ - RS. SI

Fuel

Others

TOTAL

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech Invs (\$ _____)

: Weekend (\$ _____)

Report Format :

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



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel 9823 9898
Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Estimate : QUOT202109-000073(00)

CHINA TAIFING INSURANCE (S) PTE LTD

NO. 3
ANSON RD
SPRINGLEAF TOWER
SINGAPORE 079909

Contact : 62502300

*Not Authorised
Using &
Reserving After Claim
5-6 days*

Fax No. : 62247175

Date : 02/09/2021
Vehicle No. : SLH6215Z
Make/Model : NISSAN NV350 HR MICROBUS 2.5
4DR 5AT ABS D/AB
Mileage (km) : 233178
Chassis No. : JN1UC4E26Z0002672
Accident Date : 27/08/2021 00:00:00
Claim No. : YM7652H
Reference : JO202109-0077
Policy No. : DMCVSNW00048542103

S/No	Particular	Quantity	Unit Price	Amount S\$
NET ITEMS :				
1	Tailgate	1.0	1,742.00	1,742.00 ✓
2	Tailgate lock	1.0	354.80	354.80 ?
3	Tailgate weatherstrip	1.0	127.80	127.80 ?
4	Tailgate lamp assy	1.0	98.20	98.20 X
5	Tailgate absorber	1.0	198.00	198.00 X
6	Tail gate glass	1.0	953.60	953.60 ✓
7	Tailgate hinge	2.0	112.30	224.60 X
8	Tail lamp	2.0	289.80	579.60 ✓
9	Rear bumper	1.0	600.50	600.50 ✓
10	Rear bumper chrome	1.0	225.00	225.00 ✓
11	Rear bumper reinforcement	1.0	482.30	482.30 ?
12	Rear bumper retainer	2.0	68.00	136.00 ✓
13	End panel garnish	1.0	212.50	212.50 ?
14	End panel	1.0	338.50	338.50 ?
15	Rear view mirror	1.0	198.00	198.00 X
16	Brake light - 3rd brake	1.0	220.00	220.00 X
17	Wiper arm	1.0	128.00	128.00 X
18	Wiper motor	1.0	412.50	412.50 ?
19	Wiper blade	1.0	45.00	45.00 ?
List Total :				7,276.90
10% Discount S\$				727.69
				6,549.21
SPECIAL NET :				
1	Tailgate number plate	1.0	25.00	25.00 X
2	Tailgate number plate garnish	1.0	20.00	20.00 ✓
3	Tailgate sticker	1.0	92.30	92.30 ✓
4	Tailgate glass sealant	1.0	40.00	40.00 ✓
5	Rear bumper step bar	1.0	250.00	250.00 ?
6	Reverse sensor	1.0	250.00	250.00 ?
7	Body sticker	1.0	480.00	480.00 2000
SPECIAL NET Total S\$:				1,157.30

LABOUR :



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CHINA TAIPING INSURANCE (S) PTE LTD

NO. 3

AMSON RD

SPRINGLEAF TOWER

SINGAPORE 079909

Contact : 62502300

Fax No. : 62247175

Estimate : QUOT202109-000073(00)

Date : 02/09/2021

Vehicle No. : SLH6215Z

Make/Model : NISSAN NV350 HR MICROBUS 2.5
4DR 5AT ABS D/AB

Mileage (km) : 233178

Chassis No. : JN1UC4E26Z0002672

Accident Date : 27/08/2021 00:00:00

Claim No. : YM7652H

Reference : JO202109-0077

Policy No. : DMCVSNW00048542103

S/No	Particular	Quantity	Unit Price	Amount S\$
	* To remove and refit rear windscreen glass	1.0	120.00	120.00 ✓
	- To check and re-wiring	1.0	60.00	60.00 200
	-To knock jackout damaged parts, panel beating,welding, align, refix and to renew accident parts	1.0	850.00	850.00 ?
	- Spray painting on affected & replace parts	1.0	800.00	800.00 600
				<u>1,830.00</u>

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\$: 9,536.51

GST 7% S\$: 667.56

Amount Due S\$: 10,204.07

for CITY AUTO PTE LTD

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 Motorist starting 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 30/08/2021 14:09 (SGT)
Date of Accident 27/08/2021 12:50 (SGT)
Exact Location of Accident Woodlands Drive 50, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLH6215Z
INSURED/POLICYHOLDER
Is company? Yes
Name Of Registered Owner Lentor Ambulance Pte Ltd
Company Reg No 2XXXXX954H
Email Address ronnie.tang@lentorambulance.com
Mobile Phone No (Phone) +65-98357746
Alternative Phone No +65-98357746

VEHICLE PARTICULARS

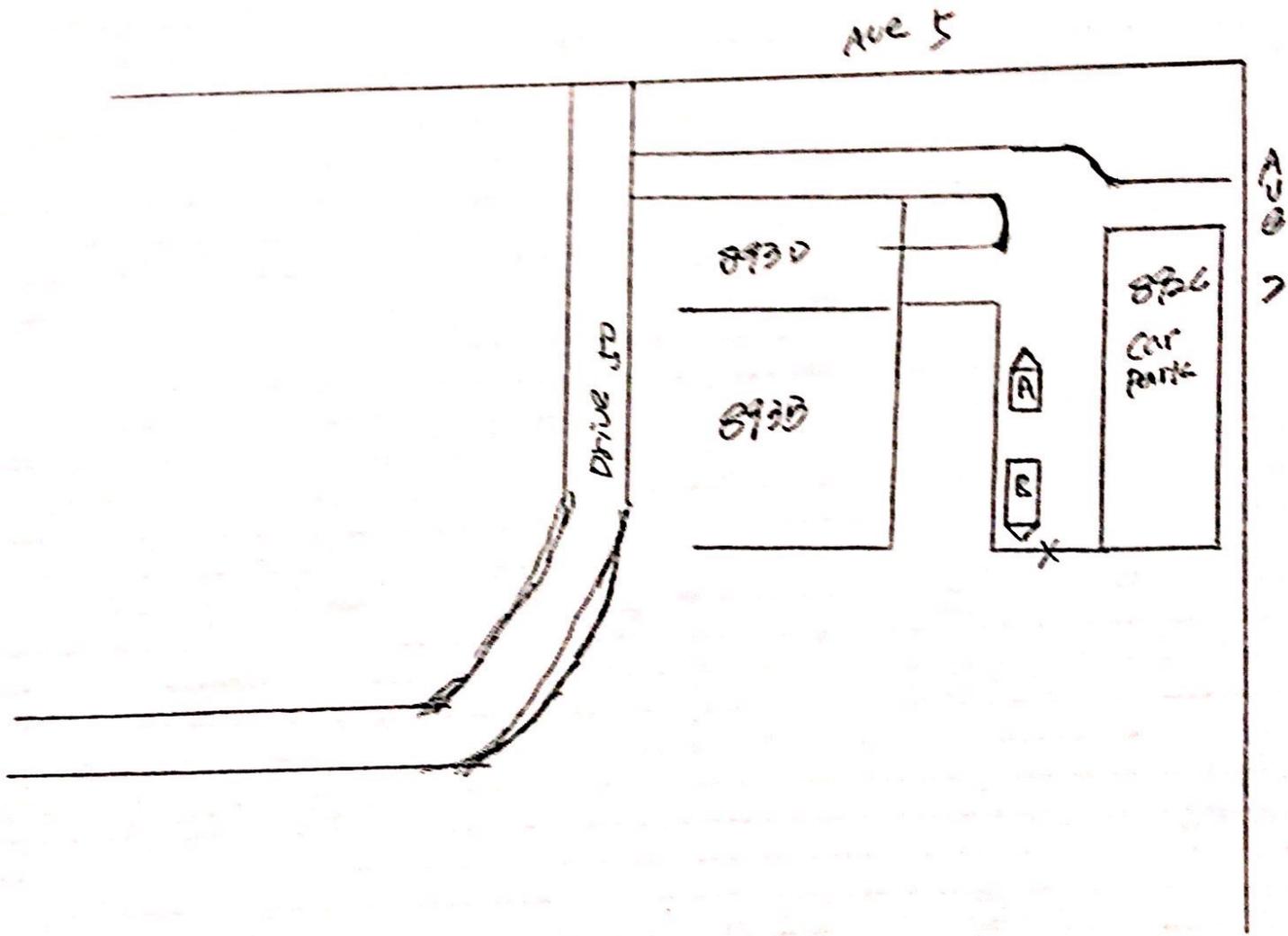
Manufacturer Nissan
Model Urvan
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Auto
CC 2500

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00048542103
Cover Note Number -

DRIVER

Name of Driver Zhu Liming
Passport No/FIN GXXXX900T



Address: 892C Woodlands Drive
S(732892)

- (A) : DLH 6215Z
- (B) : YM7652H

