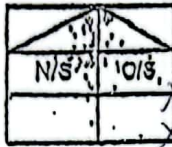


Steve 1 2 CS/CT/2129473/EUC
ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 ON / TS / WS / Y / RES / OP / RES / EVA / INV / MV
 To Inspect Vehicle No: SFY 9655Z
 at Workshop m/s _____
 insured: SJP 9088K
 Policy No. DMPCSNW00150792001
 Claims No. SNM21D205059/C2
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)
 Remarks: The veh had commenced its
 repair at the time of inspection.



Est. or Market Value: _____
 IDAC Accident Report Consistent? : Yes or No
 DIA / PR Seen Consistent? : Yes or No
 Est. Repair: _____ days Res.: Yes or No
 Cum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SFY 9655Z Yr Regn: 2/6/17
 Types: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Mazda 6 CB: 2488
 Colour: Red A/O: Insured / Std / NI / N
 Sp. Reading: 51576 T/Radio: Insured / Std / NI / N
 Eng/No: _____
 C/No: TM 661103177 109979
 Gen. Cond: Good / Fair / Poor / Bupl
 Steering: In order / Jammed / Locked / Burnt or
 Brakes: In order / Jammed / Locked / Burnt or
 Mod: Nil / S/Rim / STD A/Rim or 225/45R19
 Tyre Size: F: _____ R: _____
 ES / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front R/Bal: 4 mm R/Bal: 4 mm
 L/Bal: 4 mm L/Bal: 4 mm
 D.O.A. 6/9/21 O.O.L. 9/9/21
 Survey held at Trans Europe
 Des. of Damages: Frt / Rear / O/S / N/S / W/C / Roof/Top or
 Rec R/L
 The U/S / O/S / N/S / W/C / Body Structure affected due to collision

Date / Time	Action / Instruction
	MV-81K

Time/Date, File Retention: ☐ Prel. Report
☐ Final Report

Days Of Repair: _____
 Resurvey No. of Trips: _____

Add Fee: ☐ Site Insp (\$ _____)
☐ Interview (\$ _____)
☐ Tech. Inve (\$ _____)
☐ Weekend (\$ _____)
 Survey Fee: _____
 Transport: _____
 S + R: \$ _____
 Private: _____
 Others: _____
 TOTAL: _____

Signature: _____
 Date: _____



TRANS EUROKARS PTE LTD
27A TANJONG PENJURU, SINGAPORE 609042
ESTIMATE COST OF REPAIRS

EUROKARS SERVICES

CHINA TAIPING INSURANCE P/L		NAME :		WIP : 41578	
3 ANSON ROAD		ADDRESS :		EXCESS :	
#16-00 SPRINGLEAF TOWER				DATE: 7-Sep-21	
SINGAPORE 079909		TEL :			
ATTN. : MOTOR CLAIMS					
FAX :					
VEH NO :	SFY9655Z	DATE IN :		CONTACT PERSON :	JESS
CHASSIS NO :	JM6GL103100109929	MILEAGE :		TYPE OF CLAIM :	THIRD PARTY CLAIM
MODEL :	MAZDA 6	DATE REG.:	2-Jun-17	POLICY NO. :	

NATURE OF WORKS							
Parts Description							
NO	DESCRIPTION	QTY	1st	Supp	PARTS NO	REVISED	PRICES
1	ROCKER PANEL RH / <i>MC</i>	1			MGHY6-70-271		\$ 1,071.00
2	COVER,HOLE / <i>MC</i>	2			MBBM4-56-061		\$ 22.80
3	GUARD STONE RH / <i>MC</i>	1			MGHP9-50-4P2A		\$ 17.40
4	REAR DOOR RH / <i>MC</i>	1			MGHY0-72-02XD		\$ 1,111.60
5	STRIPE NO.4(R),BODY SIDE / <i>MC</i>	1			MGRN1-50-8V4A		\$ 23.10
6	STRIPE NO.2(R),BODY SIDE / <i>MC</i>	1			MGRV1-50-8V2A		\$ 15.50
7	MOULD BELTLINE REAR DOOR RH / <i>MC</i>	1			MGHP9-50-660D		\$ 72.20
8	WEATHERSTRIP REAR DOOR RH / <i>MC</i>	1			MGHP9-72-760C		\$ 143.70
9	FASTENER(R),WEATHERS / <i>MC</i>	1			MGHP9-72-762		\$ 12.30
10	FASTENER / <i>MC</i>	10			MBC1D-58-762		\$ 34.00
11	CHECKER,DOOR RR RH / <i>MC</i>	1			MGHP9-72-270A		\$ 65.70
12	GROMMET / <i>MC</i>	1			MBF67-51-261		\$ 2.40
13	CLIP / <i>MC</i>	1			MG51D-58-315A		\$ 2.40
14	FASTENER / <i>MC</i>	1			MGD7A-50-EA1		\$ 3.20
15	GROMMET,SCREW / <i>MC</i>	10			MGJ6A-58-975		\$ 30.00
16	GROMMET,SCREW / <i>MC</i>	1			M9991-00-503		\$ 3.80
17	FASTENER / <i>MC</i>	9			MGJ6A-68-AB1		\$ 64.80
18	GARNISH REAR DOOR RH / <i>MC</i> (Black)	1			MGJN8-50-M50A		\$ 95.00
19	GARNISH(R),REAR DOOR / <i>MC</i> (Black)	1			MGJR9-50-M30B		\$ 102.90
20	CLIP,GARNISH / <i>MC</i>	6			MKD53-50-M38		\$ 73.80
21	BRACKET SIDE STEP RH / <i>MC</i>	1			MGHP9-50-480		\$ 177.60
22	CLIP / <i>MC</i>	10			MBP4L-51-SJ3		\$ 100.00
23	CLIP / <i>MC</i>	2			MG18K-51-SJ3		\$ 13.00
24	REAR BUMPER / <i>MC</i>	1			MGHR2-50-221ABB		\$ 1,230.30
25	TAPE,PROTECTOR / <i>MC</i>	2			MG51D-50-EM1A		\$ 17.20
26	SPLASH SHIELD RH REAR / <i>MC</i>	1			MGHP9-50-340D		\$ 53.90
27	FASTENER / <i>MC</i>	6			MB45A-56-146A		\$ 18.00
28	GASKET TAIL LAMP RH / <i>MC</i>	1			MGJE8-51-153		\$ 27.70
29	GASKET TAIL LAMP LH / <i>MC</i>	1			MGJE8-51-163		\$ 27.70
30	REAR DAMPER RH / <i>MC</i>	1			MGML8-28-910E		\$ 322.00

31	ARM UPPER REAR RH	1		MGBFN-28-C10	\$ 241.10
32	TARAILING ARM REAR RH	1		MG46E-28-200D	\$ 258.50
33	LATERAL ARM REAR RH	1		MGHP9-28-500	\$ 138.00
34	KNUCKLE REAR RH	1		MGHR1-26-11XB	\$ 631.10
35	HUB WHEEL BEARING REAR RH	1		MKD31-26-15XB	\$ 480.40
36	WHEEL,DISC 19X7.5	1		M9965-20-7590	\$ 1,497.80
37	VALVE,AIR TYRE	1		M9963-60-4140	\$ 6.70

TOTAL PARTS	\$ 8,208.60
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TOTAL PARTS COST	\$ 8,208.60
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SUPPLEMENTARY

NO	DESCRIPTION	QTY	1st	Supp	PARTS NO	REVISED	PRICES
1							
2							
3							
					TOTAL PARTS		\$ -
					TOTAL PARTS COST		\$ -

Labour Description

		REVISED	PRICES
1	TO REPLACE REAR BUMPER, REAR DOOR RH AND ROCKER PANEL RH. 660 x 4	2640	\$ 3,960.00
2	TO RESPRAY REAR BUMPER, REAR DOOR RH AND ROCKER PANEL RH. 630 x 34		\$ 2,520.00
3	MZ-BR-SEALER TO SUPPLY SPRAY TEROSTAT SEALANT ON THE CUTTING	NETT	\$ 180.00
4	MZ-BR-DOORM TO TRANSFER THE DOOR MECHANISM.		\$ 330.00
5	MZ-BR-AXNSUR TO REPLACE AXLE AND SUSPENSION MECHANISM.	?	\$ 630.00
6	MZ-BR-WHEAL TO CHECK STEERING GEOMETRY & CONDUCT FULL WHEEL ALIGNMENT.	NETT	\$ 560.00
7	MZ-BR-WHEBA TO MOUNT SPORT RIM AND CONDUCT WHEEL BALANCING. 80	NETT	\$ 120.00
8	MZ-BR-REVSER TO TRANSFER REVERSE SENSORS.	330	\$ 660.00
9	MZ-BR-ELECTR TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	150	\$ 250.00
10	MZ-BR-REPROG TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	150	\$ 300.00

11	MZ-BR-CAVITY	TO CARRY-OUT BODY CAVITY PRESERVATION (INCLUDING NEW PARTS AND CAOUTCHOU)	160	\$ 150.00
12	MZ-BR-SUNDR	SUNDRIES.	20	\$ 50.00
REMARKS: THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400 WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.			TOTAL LABOUR	\$ - \$ 9,710.00
			TOTAL PARTS	\$ - \$ 8,208.60
			TOTAL	\$ - #####
			LESS EXCESS	\$ - \$ -
			TOTAL AFTER EXCESS	\$ - \$ 17,918.60
			GST 7%	\$ - \$ 1,254.30
			GRAND TOTAL	\$ - #####
SUPPLEMENTARY LABOUR DESCRIPTION				
			REVISED	PRICES
1		#N/A		
2		#N/A		
REMARKS: THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400 WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.			TOTAL LABOUR	\$ - \$ -
			TOTAL PARTS	\$ - \$ -
			TOTAL	\$ - \$ -
			LESS EXCESS	\$ - \$ -
			TOTAL AFTER EXCESS	\$ - \$ -
			GST 7%	\$ - \$ -
			GRAND TOTAL	\$ - \$ -

Steve (LKK) m n
 9/9/21, 3pm P/P
 My B/L by
 7-8 days

TRANS EUROKARS PTE LTD

 Authorised Signature

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 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	06/09/2021 17:22 (SGT)
Date of Accident	06/09/2021 10:16 (SGT)
Exact Location of Accident	199 Bukit Merah Central, Singapore
Additional Location Information	Bukit Merah Carpark of Blk 199
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFY9655Z

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Tan Siak Jiang
NRIC No	SXXXX590B
Email Address	anselltan@yahoo.com.sg
Mobile Phone No	(Phone) +65-96620026
Alternative Phone No	(Home) +65-96620026

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	6
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	1998

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

DRIVER

Name of Driver	Tan Siak Jiang
NRIC No	SXXXX590B

Date Of Birth	26/01/1944
Occupation	Indoor
Date Of Driving Pass	10/10/1967
Driving experience	53 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96620026
Alt. Phone Number	(Home) +65-96620026
Email Address	anselltan@yahoo.com.sg
Address	7 Kim Tian Place #20-59 Singapore 160007
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to sketch plan
Collision Type: Car impacted by others on the side

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP9088K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Shi Jian Hua
NRIC No	SXXXX662D
Contact Number	-

Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

Z

IMPORTANT NOTICE

SKETCH PLAN

1. Please report correctly the details of the accident to start of the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation will voiding of making it to the insurance companies to expedite 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 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 release of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

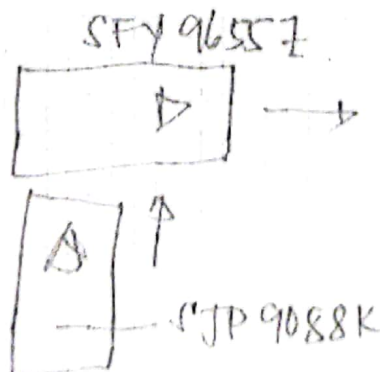
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurers 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 Ministry of the Government of Singapore and any relevant government agency/authority (such as the police), for the purposes 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 and 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 be 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



from BASMENT CM PARK

Describe Circumstances of the Accident

ON SEPT 6, 2021 AT AROUND 10:10 AM AT BURK
MART CARPARK BLK 199 DRIVING STRAIGHT THEN
CAR NUMBER SJT 9088K HIT MY CAR FROM THE
RIGHT SIDE. THE CAR IS COMING OUT OF THE BASEMENT
DNR. DIRECTLY HIT MY CAR ON THE RIGHT SIDE.

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature / Date & Time

[Signature] 6/9/2021
JESSIE FRANCIS CARLOS

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