

ASS. REC. BY:

REF:

CTU/210107781KV_{y3}

Kenneth

ASSIGNMENT

From:

Date:

Estimated Cost:

DO/UP/RES/CO/RES/EVA/INV/INV

To Inspect Vehicle No:

at Workshop no:

of

Insured: GBH 7733G

Policy No. DMCVSNW00106432101

Claims No. SNM21D205712/C02/TOHHS

Sum Insured:

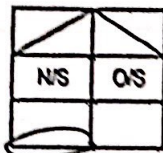
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Est. or Market Value:

IDAC Accident Report:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

03 days

Res.: Yes or No

Lump Sum:

1.51 %

3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLR 34004 Yr Regn: 08.17

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

Truck / Trailer or

Make:

Hyundai Elantra cc 1591

Colour:

White

A/C: Insured / Std / NI / NA

Sp. Reading:

52191

T/Radio: Insured / Std / NI / NA

Eng No:

C/No:

RMHD841CMJU 527274

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

225/45R17

R:

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

TOYO / YOKO or

Falken

Front

Rear

R/Bal.

8

mm

R/Bal.

8

mm

L/Bal.

8

mm

L/Bal.

8

mm

D.O.A.

8/10/21

D.O.I.

20/10/2021

Survey held at

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

Rear N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

18/11/21

Kenneth confirmed LS \$1100 (Red 754.23, 40%)

Date/Time, File Pass to?

☐

: Prell. Report

Days Of Repair:

3

1)

☐

: Final Report

Resurvey No. of Trip:

2

Date/Time, File Return to?

2) 18/11/21-typist

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ - RS \$

Fees:

Others

TOTAL

Report Format: Merimen

Lump Sum / I.B.f: (\$ 1100

S&H Motor Pte Ltd
160 Sin Ming Drive #07-02
Sin Ming Autocity
Singapore 575722

Insurer Reference:
 Repairer Reference: 044015
 Date calculated: 18/10/2021 5:41 PM

Full Report
 Registration: SLR3400Y
 Printed: 18/10/2021 5:41 PM

Summary Information

Claim		Work Provider:	China Taiping Insurance
Location:	Singapore (SG)		(Singapore) Pte Ltd
Printed by:	SH Motor	Currency:	SGD
Claim Reference:		Date of Incident:	06/10/21
Estimated Repair Time:		Hire Car Start:	
Actual Repair Days:		Hire Car End:	

Vehicle Details

Vehicle
 Manufacturer: HYUNDAI
 Model: ELANTRA (AD)
 Sub Model: BASE MODEL
 Model Sheet Number: 30 92 01
 Registration: SLR3400Y
 VIN number:
 Odometer:
Model Specs
 TWO COAT METALLIC PREPARE OFF VEHICLE

Not available
Repairing 3 days

Labour

Code	Description	Time Base 10 WU/h	Price = 42.00 SGD/h	
			WU	Price SGD
86520R00	RENEW REAR BUMPER INCLUDES: R + R OUTER TAIL LAMPS AND NECESSARY ATTACHED PARTS		9.0	37.80
87200R00	RENEW BADGE "HYUNDAI"		2.0	8.40
87400R00 ZAX	RENEW TYPE BADGE BOOTLID		3.0	12.60
86630R00)	R + R REAR BUMPER CARRIER		3.0	12.60
2711	REAR PANEL REPAIR		20.0*	84.00
2931	BOOTLID REPAIR		5 20.0*	42.00
Labour Cost		Hrs	WU	
Panel / Mechanical Labour		4.70	47.0	197.40
Total of Labour				197.40

Paint

Code	Description - TWO COAT METALLIC	SYSTEM AZT	Time Basis 10 WU/h	
			WU	Price SGD
	REAR PANEL NEW PART PAINTING		23.0	

Code	Description - TWO COAT METALLIC	WU	Price SGD
	BOOTLID NEW PART PAINTING	12.0	
	REAR BUMPER NEW PART PAINT K1G/P	18.0	

Paint Material Per Part

Code	Description	Price SGD
2711	REAR PANEL NEW PART PAINTING	28.60
2931	BOOTLID NEW PART PAINTING	29.93
2583	REAR BUMPER NEW PART PAINT K1G/P	64.80

Labour Cost - Paint

	Hrs	WU	Price SGD
Factor	42.00 SGD/h		
Time Paint		53.0	
Preparation Main Work Metal	2.50	25.0	105.00
Preparation Comp. Work Plastic	0.80	8.0	33.60
Total	10 WU/h	86.0	361.20

Material Cost - Paint

	Price SGD
New Part Painting	58.53
New Part Painting - Plastic K1G/PUR	64.80
Material-constant Metal Preparation	28.60
Material-constant Plastic	12.70
Total	164.63

Spare Parts

Code	Description	Part Number	Part Source	prices as at 2015-06-01	Price SGD
2583	REAR BUMPER	86611F2000	Original	CMA	350.00 ✓
2593	REAR BUMPER SPOILER	86612F2000	Original	PL	130.00 X
2619	L/R BUMPER BRACKET	86613F2000	Original		25.00 ✓
2640	REAR BUMPER SUPPORT	86631F2020	Original		160.00 ✓
3014	BADGE MODEL	86315F2000	Original	PL	20.00 ✓
3015	BADGE "HYUNDAI"	86321F2000	Original	PL	25.00 ✓
3023	BADGE SPORT	86316F2000	Original	PL	16.00 ✓
3295	L/R REFLECTOR	92405F2000	Original	PL	30.00 X

f: OEM Parts
n: Non-OEM Parts
u: Used parts

Savings
Subtotal
Fixed Sundry Parts Price
Total

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:

0.00
756.00
100.00
856.00

Price SGD
15.00* ✓
260.00* ✓
275.00

Extras

Code	Description	Price SGD
1000	Electrical work Electrical work	15.00* ✓
1001	REAR PARKING SENSORS REAR BUMPER	260.00* ✓
	Total Extras	275.00

Code	Description	Price SGD
------	-------------	-----------

Final Calculation

	SGD	SGD
Parts		
Fixed Sundry Parts Price	756.00	
Total Parts	100.00	856.00
Labour Time Base 10 WU/h		
Total 47.0 WU X 42.00 SGD/h	197.40	
Total of Labour		197.40
Total Of Extras		275.00
Paint Work Time Base 10 WU/h		
Labour Cost 86.0 WU X 42.00 SGD/h	361.20	
Material Cost	164.63	
Total Paint Including Material		525.83
Repair Cost Excludes GST		1,854.23
GST (+7.0%)		129.80
Repair Cost Included GST		1,984.03

Comments

* - USER SUPPLIED DATA
 NN - NO MANUFACTURERS CODE EXISTS
) - WU PARTIAL INCL IN OTHER POSITIONS

Assessment Note

No assessment notes entered.

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 06/10/2021 15:46 (SGT)
Date of Accident 06/10/2021 10:50 (SGT)
Exact Location of Accident Gerald Dr, Singapore
Additional Location Information before the traffic light junction of Gerald Drive to Yio Chu Kang Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLR3400Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Lee Eng Hua
NRIC No SXXXX292J
Email Address enghua.lee@hotmail.com
Mobile Phone No (Phone) +65-92360673
Alternative Phone No (Home) +65-92360673

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Elantra
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 1600

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number VPA/P1971800
Cover Note Number -

DRIVER

Name of Driver Tan Bee Bee
NRIC No SXXXX265F

SKETCH PLAN

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 willful 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. 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 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 - SLR3400Y

B - GAH 7733G