

ASS. REC. BY

Steve

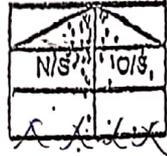
CS/165210/0805/EVF3

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 To Inspect Vehicle Not at Workshop m/s _____
 Insured: SJP 4036T
 Policy No. _____
 Claims No. DMPC2100374H
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Vehl: _____

Veh No: SKX 9490C Yr Reg: 15/11/09
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Private Motor / Truck / Trailer or
 Make: Toyota AT15 C.B. 1598
 Colour: White A/O: Insured / Std / NI / N
 Sp. Reading: 427279 TIR: Insured / Std / NI / N
 Eng/No: _____
 O/Nr: MR 9532EE-17/126771
 Gen. Condi: Good / Fair / Poor / Bught
 Steering: Insured / Jammed / Locked / Burnt or
 Brake: Insured / Jammed / Locked / Burnt or
 Mod: All / SRM / STD / SRM or
 Tyre Size: Ft 185/60R15
 RI _____

(Policy Condition)
 Remarks: The vehicle should be repaired at the time of inspection.
 Val. or Market Value: _____
 IDAC Accident Report Consistent? : Yes or No
 BIA / PR Sent Consistent? : Yes or No
 Est. Repair: _____ days Res.: Yes or No
 Cum Sum: _____ % 3 Vol.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN/OUT



BS / OUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or
 Front R/Bal. 5 mm mm R/Bal. 5 mm
 L/Bal. 5 mm mm U/Bal. 5 mm
 D.O.A. 19/11/21
 Survey held at Efficiency Motors
 Des. of Damages: FR (Rear) / O/S / H/S / UIC / Rooftop or
 The U/O / CHASSIS frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	MV-15K
23/11/21	Steve confirmed LS \$5400 (Red 4972.08, 47%)

Time/Date, File, Report
 Prel. Report
 Final Report

Days Of Repair: 10
 Resurvey No. of Trips: 1

24/11/21-typist
 Merimen
 LS \$5400

Add Fees:
 Site Insp (\$ _____)
 Interview (\$ _____)
 Tech. Invo (\$ _____)
 Vehicle (\$ _____)

Survey Fee
Transportation

EFFICIENT MOTOR & ENGINEERING WORKS PTE LTD

56 LOYANG WAY # 06-07 ENTERPRISE BUILDING SINGAPORE 508775

VEHICLE NO : SKX9490C
 MAKE & MODEL : TOYOTA COROLLA ALTIS 1.6 AUTO
 CHASSIS NO : MR053ZEE106126771

DATE : 20/10/2021
 CLAIM TYPE : TP CLAIM
 D.O.A : 19/10/2021

TO : AXA INSURANCE PTE LTD

ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

S/No.	QTY	DESCRIPTION	CONDITION / REMARKS	UNIT LIST PRICE	TOTAL LIST PRICE
1	1	REAR BUMPER / RR		\$ 612.00	\$ 612.00
2	2	REAR BUMPER REFLECTOR LH / RH X		\$ 50.60	\$ 101.20
3	2	REAR BUMPER SIDE RETAINER LH/RH / RR		\$ 61.70	\$ 123.40
4	2	REAR BUMPER SIDE RETAINER NO. 2 LH/RH / RR		\$ 38.60	\$ 77.20
5	2	REAR BUMPER UPPER RETAINER LH / RH / RR		\$ 60.30	\$ 120.60
6	1	REAR BUMPER SPONGE / RR		\$ 142.60	\$ 142.60
7	2	REAR REINFORCEMENT BRACKET LH / RH / DD		\$ 92.00	\$ 184.00
8	1	BOOTLID / DD		\$ 873.60	\$ 873.60
9	2	BOOTLID HINGE LH / RH X		\$ 78.60	\$ 157.20
10	1	BOOTLID LOCK ASSY / RT		\$ 111.80	\$ 111.80
11	2	BOOTLID REFLECTOR LH / RH / CRA		\$ 225.80	\$ 451.60
12	1	BOOTLID CHROME MOULDING X		\$ 269.30	\$ 269.30
13	1	BOOTLID EMBLEM 1.6 / ncc		\$ 45.80	\$ 45.80
14	1	BOOTLID EMBLEM ALTIS / n		\$ 49.10	\$ 49.10
15	1	BOOTLID EMBLEM COROLLA / ncc		\$ 48.20	\$ 48.20
16	1	BOOTLID EMBLEM LOGO / ncc		\$ 60.50	\$ 60.50
17	1	BOOTLID WEATHERSTRIP / TN		\$ 194.20	\$ 194.20
18	2	TAILLAMP LH / RH / CH		\$ 250.10	\$ 500.20
19	1	TAILLAMP PANEL LH X R		\$ 87.30	\$ 87.30
20	1	TAILLAMP PANEL RH X R		\$ 87.30	\$ 87.30
21	1	REAR END PANEL / DD		\$ 670.00	\$ 670.00
22	1	REAR END PANEL GARNISH / CRA		\$ 213.80	\$ 213.80
23	1	SPARE WHEEL PANEL / DD		\$ 818.10	\$ 818.10
24	1	SPARE WHEEL TOP BOARD / TN		\$ 291.50	\$ 291.50
25	1	REAR FENDER LH X R		\$ 1,082.80	\$ 1,082.80
26	1	REAR FENDER RH X R		\$ 1,082.80	\$ 1,082.80
				\$ 7,598.40	\$ 8,456.10

TOTAL PRICE	\$ 8,456.10
LESS 25%	\$ 2,114.03
SUB TOTAL PRICE	\$ 6,342.08

S/No.	QTY	DESCRIPTION	CONDITION / REMARKS	UNIT S/NETT	TOTALS/NETT
1	1	REAR BUMPER CLIP SET / ncc		\$ 50.00	\$ 50.00
2	1	REVERSE SENSOR / RR		\$ 200.00	\$ 200.00
3	1	REAR NO. PLATE / CH		\$ 50.00	\$ 50.00
TOTAL S/NETT				\$ 300.00	\$ 300.00

Labour Charges

1	To cut/weld, panel beat & align Rear portion, to remove & replace damaged parts.	\$ 1,500.00	1200
2	To apply anti rust coat and Tuff Kote repaired areas.	\$ 100.00	30
3	To check and rectify lighting & wiring.	\$ 80.00	30
4	To remove & replace reverse sensor.	\$ 100.00	30
5	To remove & refit spare tyre, interior trims to facilitate the repair.	\$ 100.00	50
6	To putty, spray painting rear bumper, rear end panel, bootlid, spare wheel panel, rear fender lh/rh & other affected areas.	\$ 1,600.00	1090
7	To transfer bootlid components to new bootlid.	\$ 150.00	50
8	To remove & refit exhaust system to assist workload.	\$ 100.00	30

TOTAL LABOUR

\$ 3,730.00

Total Cost of Repairs

\$ 10,372.08

(Total parts + Total S/Nett + Total Labour Cost)

Steve (LKK)
26/10/21, 12.00m

W AL
L/S
M AL sy
10 days

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Part prices are subject to confirmation
- This early survey is on a "Without Prejudice" basis
- No lateral 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 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. 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 19/10/2021 22:22 (SGT)
Date of Accident 19/10/2021 08:50 (SGT)
Exact Location of Accident Braddell Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKX9490C

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ALTANTIS CAR & TRUCK RENTAL PTE LTD
Company Reg No 2XXXXX709R
Email Address ppemclaims@gmail.com
Mobile Phone No (Phone) +65-86933949
Alternative Phone No (Office) +65-62840827

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla
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 car
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Type of Coverage ThirdParty
Fleet Policy Yes
Policy Number D20MFL0002095_01
Cover Note Number -

DRIVER

Name of Driver TAY JIN HUI, FRANCIS (ZHENG JINHUI)
NRIC No SXXXX596C

Date Of Birth	21/01/1987
Occupation	Outdoor
Date Of Driving Pass	30/08/2006
Driving experience	15 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86933949
Alt. Phone Number	-
Email Address	ppemclaims@gmail.com
Address	BLK 220 LORONG 8 TOA PAYOH #14-669
Address complement	-
Postcode	310220
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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

ON THE 19/10/2021 AT ABOUT 0850 HOURS, I WAS DRIVING VEHICLE A (SKX9490C) ALONG BRADDELL ROAD TOWARDS CTE WHEN VEHICLE B (SJP4036T) REAR ENDED MY VEHICLE. VEHICLE C (GBF7917D) HAD ALSO REAR ENDED VEHICLE B. I SUFFERED PAIN IN MY BACK AND WILL BE SEEKING MEDICAL ATTENTION.

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	SJP4036T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-96953400

Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBF7917D
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour Commercial vehicle
 Vehicle Category -
 Name of Driver (Phone) +65-98174388
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

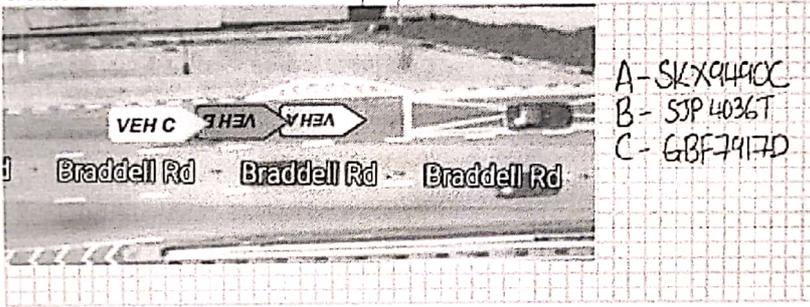
Name of injured person DRIVER
 Gender Male
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained PAIN IN BACK
 Injured person in which vehicle? SKX9490C
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? No

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 insurers who have insured vehicle(s) involved in this accident (all insurers who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' law firms/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 insurers who have insured vehicle(s) involved in this accident and the insurers' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 Policyholder's Signature / Date & Time Sketch Plan	 Driver's Signature (if driver is not the policyholder) / Date & Time 19/10/21 1030	Witnessed by Reporting Centre Person(s) 
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Describe Circumstances of the Accident

ON THE 19/10/2021 AT ABOUT 0850 HOURS, I WAS DRIVING VEHICLE A (SKX9490C) ALONG BRADDELL ROAD TOWARDS CTE WHEN VEHICLE B (SJP4036T) REAR ENDED MY VEHICLE. VEHICLE C (GBF7917D) HAD ALSO REAR ENDED VEHICLE B. I SUFFERED PAIN IN MY BACK AND WILL BE SEEKING MEDICAL ATTENTION.

Declaration

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

Policyholders Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

19/10/21 1030

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	709R
Vehicle Details	
Vehicle No.:	SKX9490C
Vehicle to be Exported:	No
Intended Deregistration Date:	20 Oct 2021
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	3ZZ4822133
Chassis No.:	MR053ZEE106126771
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,084.00
Original Registration Date:	15 Jan 2009
First Registration Date:	15 Jan 2009
Transfer Count:	3
Actual ARF Paid:	\$16,084.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	14 Jan 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,024.00
COE Rebate Amount:	\$5,818.00
Total Rebate Amount:	\$5,818.00

Message
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 20 Oct 2021

OK