

ASS. REQ. BY:

REF: SMR / 21010898 / Ku

Kenneth

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
QD / TP / WS / TP RES / QD RES / EVA / INV / MV
 To Inspect Vehicle No: SLM 524U
 at Workshop n/s World Auto
 of 5 Min Chuan Lane
 Insured: SHC 4788Z
 Policy No. _____
 Claims No. TAX/10/21/2047
 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 Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 02 days Res.: Yes or No
 Lum Sum: 1-1/2 % 3 Val.: Yes or No
 CA / REV / REP / 24 HRS 09/178
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLM 524U Yr Regn: 09, 08
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Audi TT c.c. 1984
 Colour: M. Black A/C: Insured / Std / NI / NA
 Sp. Reading: 244613 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: TR U 888 8 J X 9 100 2432
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brakes: Inorder / Jammed / Leaked / Burnt or _____
 Mod: NII / S/Rlm / STD A/Rlm or _____
 Tyre Size: F: 245/40R18
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front R/Bal: 7 mm Rear R/Bal: 4 mm
 L/Bal: 7 mm L/Bal: 4 mm
 D.O.A. 20/10/21 D.O.I. 26/10/2021
 Survey held at _____
 Des. of Damages: Fr / Rear / O/S / N/S / UIC / Rooftop or _____
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Confirmed P/P \$3479.90, 2 repair days (RED \$9337.90; 73%)

Date/Time, File Pass to? : Prell. Report
 1) 9/11 TYPIST : Final Report
 Date/Time, File Return to?

Days Of Repair: 2
 Resurvey No. of Trip: 1

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

Survey Fee: _____
 Transportation: _____
 S - RS. \$ _____
 Fuel/Oil _____
 Others _____
 TOTAL _____

Report Format: TP
 Lump Sum / I.B.I: (\$ 3479.90)

WORLD AUTO PTE LTD

NO. 5, KIM CHUAN LANE

S'pore 537070

Tel No. : 6451 3933 Fax No. : 6455 7576

E-Mail : worldaut@singnet.com.sg

Website : www.worldauto.com.sg

Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

SMRT TAXIS PTE LTD

Attention : Motor Claim Department

Not Notified
Repair 3 days
2 days

Estimate : ES190186

Date : 25/10/2021
Vehicle Num. : SLM 524U
Make/Model : AUDI TT COUPE
Chassis/Eng# :
Accident Date : 20/10/2021
Claim No. :
Reference :
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
LIST ITEMS :				
1.	1	FRONT BONNET		2,774.00
2.	1	FRONT BONNET LOCK		188.00
3.	1	FRONT BONNET LOCK CABLE		62.00
4.	1	FRONT BONNET LOCK COVER		67.00
5.	1	FRONT BONNET LOCK CATCH		166.00
6.	1	FRONT BONNET SEAL		59.00
7.	1	FRONT BUMPER		1,882.00
8.	1	FRONT BUMPER REINFORCEMENT		924.00
9.	1	FRONT BUMPER INNER FOAM		122.00
10.	2	FRONT BUMPER SIDE RETAINER	66.00	132.00
11.	1	FRONT BUMPER LOWER LIP		391.00
12.	2	FRONT FOG LAMP COVER	99.00	198.00
13.	2	FRONT FOG LAMP INNER COVER	92.00	184.00
14.	1	FRONT GRILLE		813.00
15.	1	FRONT GRILLE SIDE COVER		74.00
16.	2	HEADLAMP ASSY	1,670.00	3,340.00
17.	1	FRONT FOG LAMP - LH		266.00
List TotalS\$:				11,642.00
10.00% Discount S\$:				1,164.20
				10,477.80

SPECIAL NETT ITEMS :	
1.	1SET FRONT BONNET INSULATOR CLIP
2.	1SET FRONT BUMPER CLIP
3.	1SET FRONT NUMBER PLATE WITH CASING

Special Nett Total S\$:

LABOUR :
WIRINGS CHECK AND RECTIFY WHERE NECESSARY

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:

50.00
50.00
60.00
160.00
201
180.00

CONTINUE / ...

WORLD AUTO PTE LTD

111 CHUAN LANE

537070

No. : 6451 3933 Fax No. : 6455 7576

Email : worldaut@singnet.com.sg

Website : www.worldauto.com.sg

Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

SMRT TAXIS PTE LTD

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Chassis/Eng# :

Accident Date : 20/10/2021

Claim No. :

Reference :

Policy No. :

Attention : Motor Claim Department

S/N	Quantity	Particular	Unit Price	Amount S\$
				2001
		REMOVE ACCIDENT DAMAGED PARTS IN ORDER TO FACILITATE REPAIRS INCLUDING PANEL BEAT, STRAIGHTEN FRONT CHASSIS AND FRONT SUPPORT PANEL WHERE NECESSARY, AND REPLACE ABOVE PARTS		1,000.00
		PUTTY AND SPRAY PAINT ACCIDENT AFFECTED AREAS		2502 1,000.00
		Labour Total S\$:		2,180.00

E. & O.E.

Total S\$:

12,817.80

for WORLD 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 Authorized 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 completion 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 21/10/2021 12:21 (SGT)
Date of Accident 20/10/2021 13:20 (SGT)
Exact Location of Accident 50 Gambas Cres, Singapore 757022
Additional Location Information PROXIMA @ 50 GAMBAS CRES (CAR PARK)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLM524U
INSURED POLICYHOLDER
Is company? No
Name Of Registered Owner ELTON LIM SEOW LONG
NRIC No SXXXX402B
Email Address eltonlim73@gmail.com
Mobile Phone No (Phone) +65-90026432
Alternative Phone No (Home) +65-90026432

VEHICLE PARTICULARS

Manufacturer Audi
Model Tt
Variant AUDI / TT COUPE 2.0A
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 1984

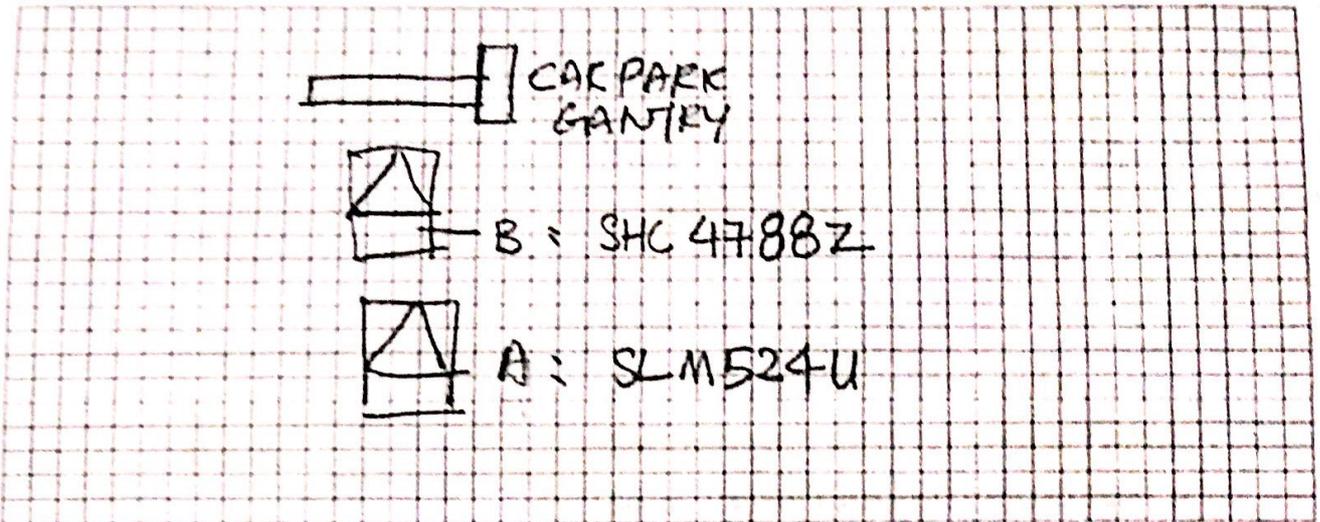
INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA394272
Cover Note Number GA394272 / 1

DRIVER

Name of Driver ELTON LIM SEOW LONG
NRIC No SXXXX402B

SKETCH PLAN

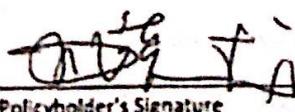


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

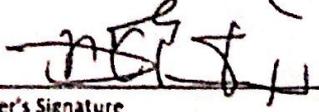
On 20 October, at Proxima @ Gombas 50
Gombas Crescent S 757022 about 1.20pm
I'm driving, waiting in line to drive out
of car park gantry, a taxi SHC 4788Z
reverse his car and head hit on my car
SLM524U.

DECLARATION

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


Policyholder's Signature

Date & Time:


Driver's Signature
(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: