ASS. REC. BY:	21011289/Kuf3
	SSIGNMENT
From: Qate:	Veh No: Smn 3005P Yr Regn: 07, 19
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD VIP IWS I TP RES I OD RES I EVA / INV I MY	Truck / Trailer or
To Inspect Vehicle No: SMN 3005P	Make: Itunita Vezel co 1486
at Workshop m/s Optim 9	Colour M. P. White AC: Insured / Std / NI / NA
of	Sp.Reading 178273 T/Radio: Insured / Std / NI / NA
Insured: SHB 5675P	Eng/No:
Policy No.	C/No: RU3. 121768
Claims No. TAX/10/21/2065	Gen. Cond: Good' Fair / Poor / Burnt
Sum Insured: Excess:	Sleering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nii / \$/Rim / STD A/Rim or
	Tyre Size: F:
(Policy Condition)	
Remark: The veh had commenced its N/S 0/S	- COSTOCKIN
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or
Bal. or Market Value: 890k	Freel
IDAC Accident Rport: Consistent?: Yes or No	PRoj O
GIA / PR Seen: Consistent? : Yes or No	UBal. 9 mm R/Bal. 9 mm
Est. Repairs: O4 days Res.: Yes or No	DOA 30/1.12
Lum Sum: /·B ₁ / % 3 Val.: Yes or No	Survey held at 0.0.1. 5/11/2021
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	157 N/S N/S TUIC TRooftop or
T STOOT COTTOCKED.	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	anocted dod to contision.
Confirmed P/P \$5715.04, 4 repair of	lavs.
(RED \$2613; 31%)	
(NED 92010, 3170)	And the second s
Date/Timo, File Pass to?	
Da Da	ys Of Repair: 4
76/12 TYPIST : Final Report Re	survey No. of Trip: 1 Survey Fee:
kule/Time, File Return to?	Transportation:
Add Fee:	: Site Insp (\$)s-Rssi
ĺ	: Interview (\$), Fixed
port Format: TP	Tech love (\$
mp 8am / I.B.I: (\$ 5715.04	Weekend (\$
The second secon	and the second s
A State of the Sta	TOTAL &

OPT/MA///ERKZ SINGAPORE

OPTIMA WERKZ PTE LTD. Co. Reg. No. 201212455W

⑦ /OptimaWerkz



Not North Third Party Insurer: MS FIRST CAPITAL

Date:

Vehicle No: SMN3005P

30/10/2021
SMN3005P
Resurvey
Blanch
Date of Accident:

Third Party Veh No: SHB5675P

30/10/2021

Chassis:

RU31217689-2016

Estimator:

VICTOR

Reg. Year:

2019

Surveyor:

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	FRONT BONNET	1	and the second second	N \$854.10
2	FRONT BONNET HINGE LH	1		N \$53.50
3	FRONT BONNET HINGE RH	1		× \$53.50
4	FRONT GRILLE OUTER GARNISH(CHROME)	1	601/1	cn// \$437.60
5	FRONT GRILLE	1	· 建 克 克 克 克	\$374.70
6	FRONT GRILLE OUTER CHROME MOULDING LH	1		\$53.80
6	FRONT BUMPER	1		Ry \$751.40
7	FRONT BUMPER SIDE BRACKET LH	1		P17 \$23.90
8	FRONT BUMPER LOWER LIP	1	/	12 c 11 \$421.80
9	FRONT BUMPER LOWER GRILLE	1		\$84.20
10	FRONT BUMPER FOG LAMP LH	1		\$626.10
11	FRONT BUMPER FOG LAMP GARNISH COVER LH	1	P4111/4 1 1 - 975	nullar \$65.10
12	FRONT BUMPER REINFORCEMENT	1		\$294.70
13	FRONT HEADLAMP LH	1	Me	Br \$1,996.30
14	FRONT HEADLAMP LOWER BRACKET LH	1	1	CM \$34.20
15	FRONT FENDER LH	1		Ry \$421.10
16	FRONT FENDER "HYBRID" EMBLEM LH	1		Nex \$65.50
17	FRONT FENDER INNER SHIELD LH	1		by \$125.90
18 F	FRONT WHEEL ARCH GARNISH COVER LH	1	9 9.5mg	N 4470.00
19 F	RONT DOOR LH	1 1 1 1 1	tour	
			- W	REPAIR
		9.74	SUB TOTAL	\$6,916.30
			LESS 20%	-\$1,383.26
		n'a jesa	PARTS TOTAL	\$5,533.04

NO.	SPECIAL NETT	1	QTY	UNIT S\$	AMOUNT S\$	
1	FRONT BUMPER CLIPS	End on a	1	100 Per 100 St 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ne	\$50.00
2	FRONT FENDER INNER SHIELD CLIPS LH		1		M	\$40.00
3	FRONT WHEEL ARCH LH CLIPS		1		Ne	\$40.00
	22 - E				12 V 2	
				S/N TOTAL	Part 1	\$130.00

Branch Head office

Branch (Motor Insurance Claims)





OPTIMA WERKZ PTE LTD Co. Reg. No. 201212455W www.ow.sg

OptimaWerkz



Date:

30/10/2021

Vehicle No: SMN3005P Model:

Chassis:

HONDA VEZEL HYBRID RU31217689-2016

Reg. Year:

2019

Third Party Insurer: MS FIRST CAPITAL

Third Party Veh No: SHB5675P

Date of Accident:

30/10/2021

Estimator:

VICTOR

Surveyor:

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST FRONT ACCIDENT

\$1,000.00

AREAS & ETC.

LABOUR CHAREGS FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT FRONT BONNET, FRONT BUMPER, FRONT BUMPER LOWER LIP, FRONT FENDER LH,

\$1,000,00

FRONT WHEEL ARCH COVER LH & ETC.

TO DAIGNOSIS FAULT CODE & RESET MEMORY.

\$120.00

TO CHECK WIRING & ELECTRICAL SYSTEM & ETC.

\$80.00 20/

LABOUR TOTAL

\$2,200.00

VIC

TOTAL

\$7,863.04

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 witholding of material facts may allow insurance companies to repudiate

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.

4. The issue and acceptance of this Form by insurance companies is not all admission of policy leading of the part of the Police for investigation.

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 Date of Accident	03/11/2021 11:03 (SGT)
Exact Location of Accident	30/10/2021 07:40 (SGT)
Additional Location Information	Singapore
Country/State of Loss	T-JUNCTION OF HOUGANG AVE 3 & COR AH SOO
7	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN3005P			
INSURED/POLICYHOLDER	A Charles	Then the value	of all applies i	do we as
Is company?		Property I National	the second of the second	a light work in
Is company? Name Of Registered Owner		TO SECTION		1/4
Company Reg No	o ora mile i il. i	TD.		
Email Address	201829289E			

CINDY_WIN@GMAIL.COM Mobile Phone No Alternative Phone No (Phone) +65-96604433

+65-96604433

VEHICLE PARTICULARS

Manufacturer Model	Honda Vezel
Variant	HONDA / VEZEL HYBRID 1.5RS AUTO
accident	

Private use Are you claiming under your own insurance policy for repair to

your vehicle? No - Claiming third party Vehicle Category Private hire

Auto 1496

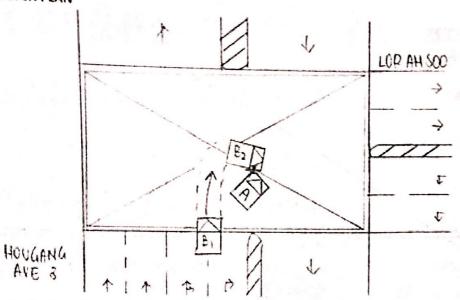
INSURANCE COMPANY

Name of Insurance Company Type of Coverage	NTUC Income Insurance Co-operative Ltd
Fleet Policy	Comprehensive No
Policy Number	5109916971-02
Cours Note Number	The state of the s

DRIVER

YEO YEOW CHIN, EUGENE(YANG YAOQIN, EUGENE) Name of Driver S8422011F

Page 1 of 14



T-JUNCTION OF HOUGANG AVER & LOD AN SOO (A) SMN 3005P (B) SHB 5675P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ESCRIBE CIRCUMSTANCES OF THE						
On 30/10/2021@1	7:40 HR	٦, ٦	was	driving	along	Hougans
Are 3 Turning or						
SHIBS6959 come +	irony lane	2 to	make	an V-	-Turn	and cut
into my lane. 71	is cans	d Veh	ich B	SHBSE	75P fo	ent clight
portion to collide	onto th	u front	lett	Portion	of m	X
Vehicle A: SMN 300	isp and	coused	dam	age. Wr	alighted	and
exchanged Particular	٠ لـ					
	-					
				Esta de la companya del companya de la companya del companya de la		1
17 claim & opfima werks	Pte Utd.		All hands of the	and the second		5
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The same of	200			N .
				The second	200	1 1 1 1 1 1 V
	To Pales	* * * * * * * * * * * * * * * * * * * *			A DESCRIPTION OF THE PERSON OF	
(x)	garage.	E CONTRACTOR			April 1	
	Area .				1200	
					111-	

DECLARATION

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

Policyholdera sigosture 7

03/4/2011

Oriver's Signature (If driver is not the policyholder) Date & Time:

13/11/2011

X

the stiller.

Reporting Centre Personnel's Signature Name: NRIC/FIN No.: