

ASS. REC. BY:

REF:

MSG/21012145/K+

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD/TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_ EM

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

Bal. or Market Value: £15K

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. 07/23 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SLX 2534U Yr Regn: 07 CF

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

Truck / Trailer or

Make: Honda Civic c.c. 1595

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 21573P T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JHMFD 462085 201937

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / Strlm / STD A/Rlm or

Tyre Size: F: 205/55R16

R: \_\_\_\_\_

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

TOYO / YOKO or

Nexen

Front

R/Bal. 8 mm

Rear

R/Bal. 8 mm

L/Bal. 8 mm

L/Bal. 8 mm

D.O.A. 27/11/21

D.O.I. 1/12/2021

Survey held at \_\_\_\_\_

Des. of Damages: Fnt / Rear / OIS / NIS / UIC / Rooftop or

OIS R

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Confirmed \$2450.00 – 4 working days.  
red: 2032.28;45%

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee:

Transportation:

) \$ + RS. \$

) Fines

) Others

TOTAL

Report Format :

Lump Sum / I.B.I. (\$) \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)

# E M SOLUTION PTE LTD

160 Sin Ming Drive #03-18/19, Sin Ming Autocity

Singapore 575722

Tel: 64560226 Fax: 64584500

GST Reg. No: 201016308K

## ESTIMATE

Date : 30th Nov 2021

Mr Ho Jee Shiun  
21 Lor 3 Toa Payoh, #08-05  
Singapore 319581

Veh No : SLX 2534U  
Make/Model : Honda Civic  
Chassis No : JHMF46208S201937  
Date of Acc : 27.11.21  
TP Veh No : SLS 1585E

S/No	Qty	Description	Unit Price	Amount
<b><u>Materials</u></b>				
1	1 pc	Headlamp RH		\$ 1,036.20
2	1 pc	Headlamp Bracket RH		\$ 48.50
3	1 pc	Frt Fender RH		\$ 631.50
4	1 pc	Frt Fender Liner RH		\$ 112.20
5	1 pc	Frt Bumper		\$ 841.80
6	2 pcs	Frt Bumper Side Retainer L/R	\$ 43.20	\$ 86.40
7	1 pc	Frt Bumper Fog Lamp RH		\$ 275.30
8	1 pc	Fog Lamp Garnish RH		\$ 78.40
9	1 pc	Frt Grille		\$ 226.20
10	1 pc	Frt Grille Chrome Moulding		\$ 196.20
11	1 pc	Frt Grille Honda Logo		\$ 43.80
12	1 pc	Frt Panel Top Garnish		\$ 95.10
				\$ 3,671.60
				Less 20%
				\$ 734.32
				\$ 2,937.28
<b><u>Special Nett</u></b>				
1	1 set	Frt Bumper Clips		\$ 45.00
2	1 set	Frt Grille Clips		\$ 35.00
3	1 set	Top Garnish Clips		\$ 30.00
4	1 set	Frt Fender Liner Clips		\$ 35.00
Parts Total :				\$ 3,082.28
<b><u>Labour</u></b>				
1	To remove & rearrange electrical wirings, check lightings			\$ 100.00
2	To remove, repair & replace damaged bodyparts and where consistent to the accident.			\$ 500.00
3	Putty and respray painting on affected portions.			\$ 600.00
4	To remove & renew reverse sensor			\$ 100.00
5	Rust proofing on affected portions.			\$ 100.00
Labour Total :				\$ 1,400.00
				\$ 4,482.28

LKK Auto Consultants hence notify  
the Repairer of the following:

- To respray the

for E M Solution Pte Ltd

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	29/11/2021 08:13 (SGT)
Date of Accident	27/11/2021 07:00 (SGT)
Exact Location of Accident	21 Lor 3 Toa Payoh, Singapore 319581
Additional Location Information	TREVISTA CONDAB1 CAR PARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX2534U
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HO JEE SHIUN
NRIC No	S8879028F
Email Address	shiun88@hotmail.com
Mobile Phone No	(Phone) +65-82689439
Alternative Phone No	+65-82689439

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Civic
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	Aviva Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	10967951
Cover Note Number	-


#### DRIVER

Name of Driver	HO JEE SHIUN
NRIC No	S8879028F


# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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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 (if insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/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 making 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' law yers/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 yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 27/11/21

Policyholder's Signature / Date & Time

 27/11/21

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

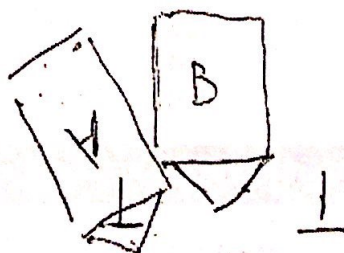


Witnessed by Reporting Centre Personnel

## Sketch Plan

A : SL51585E

B : SLX7534U



Trevista Condo  
B1 car park