

Kenneth

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s AA Lim
 of _____
 Insured: _____
 Policy No. _____
 Claims No. CMTD2103622
 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: \$ 64k
 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. / 24 HRS
11/27
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SJD 5877P Yr Regn: 03, 08
 Type: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Traller or _____
 Make: Subaru Impreza ^(M) WREX 2457 C.C.
 Colour: M.P. White A/C: Insured / Std / NI / NA
 Sp. Reading: 375619 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JFIGHEK038G010337
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inopdr / Jammed / Leaked / Burnt or
 Brake: Inopdr / Jammed / Leaked / Burnt or
 Modl: NI / SRIm / STD A/Rim or
 Tyre Size: F: 255/35R18
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front: _____ Rear: _____
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. 4 mm L/Bal. 4 mm
 D.O.A. 6/12/21 D.O.I. 9/12/2021
 Survey held at _____
 Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
10/12/21 @ 2.52pm	Modified air motor, turbo power switch, air-filter, sea selector revised to Agnes Chan by email.
22/12/21 @ 1.51pm	Agnes Chan informed that the owner will repair his vehicle himself.
22/12/21	Submit Preli. report.

Date/Time, File Pass to? Preli. Report
 1) 22/12 Typist Final Report

Days Of Repair: 4

Resurvey No. of Trip: _____

Date/Time, File Return to?
 2) _____

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

Survey Fee:	_____
Transportation:	_____
S - RS - SI	_____
Fuel	_____
Others	_____
TOTAL	_____

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

AH LIM MOTOR COMPANY

No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047
 TEL: 6483 1244 (4 lines) FAX: 6483 6170 Email: ahlimmc@singnet.com.sg
 GST:M9-0009639-E RCB NO:06470300B

SURVEYOR COPY

M/S : SOMPO INSURANCE SINGAPORE PTE LTD
 50 RAFFLES PLACE
 #03-03 SINGAPORE LAND TOWER
 SINGAPORE 048623

Estimate No: MC1902336
 Date: 08 Dec 2021
 Policy No: D21MTPV01011458
 Veh Reg No: SJD5877P
 Make/Model: SUBARU IMPREZA 5D
 2.5 WRX-S AWD 5MT

TEL: 64616555
 ATTN: Motor Claim Department

Not Authorized
L/Rup &
Recovery After Paint
4 days

Your Ref No: -
 Claim Type: Own Damage
 Accident Date: 06/12/2021

Estimate Repair Cost to Vehicle No : SJD5877P

Description	U/Price	Quantity	Cost	Amount
			<u>S\$</u>	<u>S\$</u>
SPARE PARTS				
1 FRONT BONNET		1 PC	380.00	—
2 FRONT BONNET RUBBER FRONT CENTER		1 PC	25.00	X
3 FRONT BONNET RUBBER CENTRE INNER		1 PC	15.00	X
4 FRONT BONNET STOPPER LH & RH		2 PC	6.00	X
5 FRONT BONNET HINGE LH & RH		2 PC	50.00	X
6 HEADLAMP LH & RH WITH LOWER BEAM	<i>olshu</i>	2 PC	2,400.00	—
7 RADIATOR GRILLE		1 PC	230.00	—
8 RADIATOR GRILLE EMBLEM		1 PC	45.00	—
9 RADIATOR GRILLE CLIPS		4 PC	6.00	—
10 FRONT BUMPER		1 PC	250.00	—
11 FRONT BUMPER TOW COVER		1 PC	10.00	—
12 FRONT BUMPER LOWER GRILLE		1 PC	40.00	X
13 FRONT BUMPER SIDE RETAINER RH		1 PC	10.00	—
14 FRONT BUMPER SIDE RETAINER LH -CHECK PRICE		1 PC	0.0000	X
15 FRONT BUMPER CLIPS		11 PC	16.50	—
16 FRONT BUMPER LOWER BRACKET -CHECK PRICE		1 PC	0.0000	?
17 FRONT BUMPER SPONGE	<i>nsp</i>	1 PC	65.00	X
18 FRONT BUMPER REINFORCEMENT		1 PC	140.00	X
19 FRONT BUMPER UNDERCOVER -CHECK PRICE		1 PC	0.0000	?
20 FRONT FENDER LH & RH		2 PC	260.00	X
21 FRONT FENDER COWLING LH & RH		2 PC	160.00	X
22 FRONT FENDER COWLING CLIPS		20 PC	400.00	X
23 FOG LAMP WITH BRACKET LH & RH	<i>olsmi</i>	2 PC	260.00	X
24 WASHER TANK		1 PC	60.00	X
25 RADIATOR SUPPORT PANEL ASSEMBLY		1 PC	250.00	X
26 RADIATOR SUPPORT PANEL LOWER FRAME		1 PC	65.00	X
			5,143.50	
	Add 10%		514.35	5,657.85
Special Nett				
27 COOLANT		1 PC	30.00	X
28 NUMBER PLATE		1 PC	35.00	—
29 FRONT BUMPER SPOILER -CHECK PRICE		1 PC	0.0000	X

65.00

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 50 RAFFLES PLACE
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 TEL: 64616555
 ATTN: Motor Claim Department

Estimate No: MC1902336
 Date: 08 Dec 2021
 Policy No: D21MTPV01011458
 Veh Reg No: SJD5877P
 Make/Model: SUBARU IMPREZA 5D
 2.5 WRX-S AWD 5MT

Your Ref No: -
 Claim Type: Own Damage
 Accident Date: 06/12/2021

Estimate Repair Cost to Vehicle No : SJD5877P

Description	U/Price	Quantity	Cost		Amount	
			S\$		S\$	
30 TO DISCONNECT AND CHECK ELECTRICAL WIRING, WIRE SOCKETS AND ETC. TO REMOVE AND REINSTALL DAMAGED ELECTRICAL UNITS, TEST AND RECTIFY FOR PROPER FUNCTIONING.		1 PC	40.00		200	
31 TO REMOVE AND REPLACE A/C CONDENSER AND PIPES, RADIATOR AND HOSES, VACUUM A/C SYSTEM AS WELL AS REFILL A/C GAS.		1 PC	100.00		x	
32 TO DISMANTLE ALL DAMAGED PARTS. TO CUT & WELD RADIATOR SUPPORT PANEL. TO KNOCK & REPAIR FRONT WHEELHOUSE PANEL LH & RH, INNER PANELS AND AFFECTED AREAS. TO REFIT LISTED PARTS BACK SAME.		1 PC	800.00		5000	
33 TO SPRAY BONNET, FRONT BUMPER, FRONT FENDER LH & RH, FRONT WHEELHOUSE PANEL LH & RH		1 PC	800.00		6000	
					1,740.00	

Repair Amount S\$ 7,462.85

Add GST @ 7% 522.40

Total Amount payable S\$ 7,985.25

TOTAL: SINGAPORE DOLLAR SEVEN THOUSAND NINE HUNDRED EIGHTY FIVE AND CENTS TWENTY FIVE ONLY

Please arrange this vehicle to be surveyed soonest possible.

Thank You

For AH LIM MOTOR COMPANY



AUTHORISED SIGNATURE

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:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 654G

Vehicle Details

Vehicle No.: SJD5877P
Vehicle to be Exported: Yes
Intended Deregistration Date: 07 Dec 2021
Vehicle Make: SUBARU
Vehicle Model: IMPREZA 5D 2.5 WRX-S AWD 5MT
Primary Colour: White
Manufacturing Year: 2007
Engine No.: EJ25D299343
Chassis No.: JF1GHEKD38G010337
Maximum Power Output: 169.0 kW (226 bhp)
Open Market Value: \$22,805.00
Original Registration Date: 27 Mar 2008
First Registration Date: 27 Mar 2008
Transfer Count: 4
Actual ARF Paid: \$24,294.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Nov 2027
COE Category: E - Open Category
COE Period(Years): 10
PQP Paid: \$50,168.00
COE Rebate Amount: \$30,003.00
Total Rebate Amount: \$30,003.00

The information contained herein is correct as at 07 Dec 2021

OK

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 07/12/2021 16:17 (SGT)
Date of Accident 06/12/2021 17:04 (SGT)
Exact Location of Accident Singapore
Additional Location Information 11 YISHUN INDUSTRIAL ST. 1
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJD5877P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JUSTIN TEO WEI JIE
NRIC No SXXXX654G
Email Address JUSTIN.PRITCHARD.KONK@GMAIL.COM
Mobile Phone No (Phone) +65-93669914
Alternative Phone No +65-93669914

VEHICLE PARTICULARS

Manufacturer Subaru
Model IMPREZA 5D 2.5 WRX-S AWD 5MT
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? Yes
Vehicle Category Private car
Transmission Manual
CC 2457

INSURANCE COMPANY

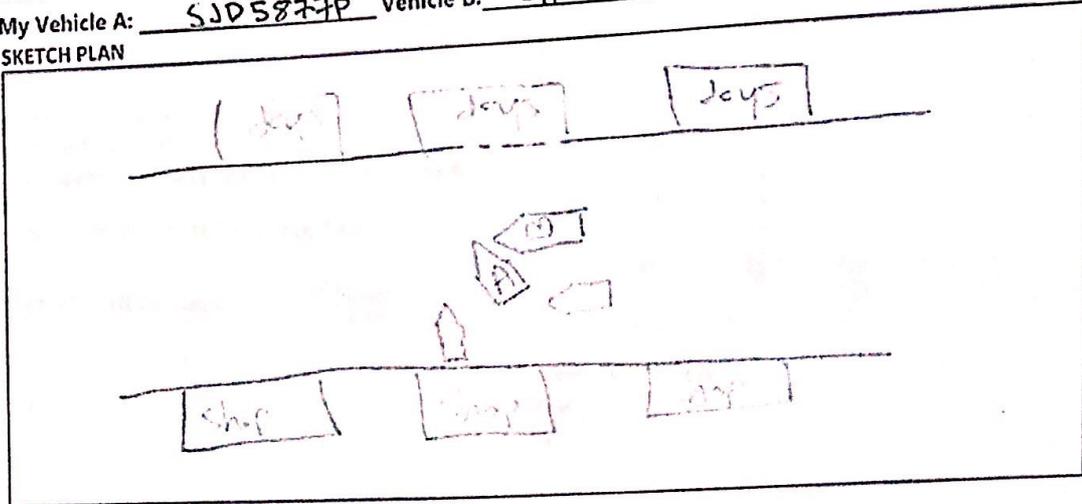
Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D21MTPV01011458
Cover Note Number 12/08/2021 - 11/08/2022

DRIVER

Name of Driver JUSTIN TEO WEI JIE
NRIC No SXXXX654G

SKETCH PLAN

Date of accident: 06/12/21 Time: 1704 Location: 11 Vishnu Industrial St 1
 My Vehicle A: SJD5877P Vehicle B: GBE 4531H Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car was parked vertically outside the shop (42 motors), I was given the all clear sign by the owner of 42 motors that I could move out. Prior to moving off, I perform my due diligence of checking my blind spot for any incoming vehicles. I saw no car approaching and there was a white Honda Civic (SGY 6236H) on my right blocking my view. As a result, I made careful small movements rather than dashing out of my parking lot. The next moment I saw a lorry (GBE 4531 H) approaching at very high speed, way above the speed limit of 15 km/h of the compound. I performed emergency brake, however, as the lorry was travelling too fast he could not brake in time, thus, colliding into my vehicle.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :
 Email address :
 & myself :
 Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

[Signature]

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.:

ALL INFORMATION CONTAINED