

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

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:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

Yr Regn:

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

Truck / Trailer or

Make:

c.c

Colour

A/C:

Insured / Std / NI / NA

Sp. Reading

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

D.O.I.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

Preli. Report

1) 20/12/21

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 6

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

) S + RS, SI

☐

Interview (\$

) Photos

☐

Tech. Invs (\$

) Others

☐

Weekend (\$

)

Report Format:

TP

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

5000

TOTAL

20/12/21 RM Tailgate n/c with \$19000
 1/5 \$5000 confirmed with AH/ony (Red \$33998.75, 872.7)

GBB3787J Toyota Dyna

No	Qty	Parts Description	Estimated Parts Price
1	1	Rear left taillamp <i>320 285.10</i>	\$ 662.00 ✓
2	1	Rear right taillamp <i>11</i>	\$ 662.00 X
3	1	Rear left taillamp bracket <i>Bent 145.20</i>	\$ 180.00 ✓
4	1	Rear right taillamp bracket <i>11</i>	\$ 180.00 X
5	1	Rear spare tyre bracket carrier <i>Daye 365.10</i>	\$ 380.00 ✓
6	1	Rear spare tyre lock holder <i>11</i>	\$ 283.00 X
7	1	Rear no plate lamp <i>11</i>	\$ 120.00 X
8	1	Rear no plate support bracket <i>Bent</i>	\$ 120.00 ✓
9	1	Rear exhaust pipe assy <i>11</i>	\$ 1,650.00 X
			\$ 4,237.00
less 25%			\$ 1,059.25
			\$ 3,177.75

Special Nett Items

1	1	Rear left cabin door assy <i>B. d. 3.00</i>	\$ 3,050.00 <i>1600</i>
2	1	Rear right cabin door assy <i>R</i>	\$ 3,050.00 X
3	2	Rear left cabin door hinges <i>11</i>	\$ 350.00 X
4	2	Rear right cabin door hinges <i>11</i>	\$ 350.00 X
5	1	Rear left cabin door lock with rod handle <i>Bent</i>	\$ 550.00 <i>300</i>
6	1	Rear right cabin door lock with rod handle <i>11</i>	\$ 550.00 X
7	5	Rear left cabin door lock rod hinges <i>R</i>	\$ 400.00 X
8	5	Rear right cabin door lock rod hinges <i>11</i>	\$ 400.00 X
9	1	Rear left cabin door lock hook <i>11</i>	\$ 115.00 X
10	1	Rear right cabin door lock hook <i>11</i>	\$ 115.00 X
11	1	Rear left cabin door bracket <i>11</i>	\$ 98.00 X
12	1	Rear right cabin door bracket <i>11</i>	\$ 98.00 X
13	1	Rear left cabin door rubber stopper <i>NF</i>	\$ 50.00 X
14	1	Rear right cabin door rubber stopper <i>NF</i>	\$ 50.00 X
15	1	Rear left cabin door '70km/h' sticker <i>11</i>	\$ 50.00 <i>10</i>
16	1	Rear right cabin door '8 pax' sticker <i>11</i>	\$ 50.00 <i>10</i>
17	2	Rear right cabin door 'Vicom Tested' sticker <i>11</i>	\$ 80.00 X
18	1	Rear no plate <i>Bent</i>	\$ 100.00 <i>14</i>
19	1	Rear no plate holder <i>NS</i>	\$ 100.00 X
20	1 set	Rear reverse sensor <i>2yed</i>	\$ 350.00 <i>200</i>
21	1	Rear lower cabin outer panel frame assy <i>Bent</i>	\$ 1,800.00 <i>800</i>
22	1	Rear left cabin outer panel aluminium frame assy <i>20/200</i>	\$ 1,500.00 <i>800</i>
23	1	Rear right cabin outer panel aluminium frame assy <i>11</i>	\$ 1,500.00 X
24	1	Rear cabin aluminium inner platform <i>11</i>	\$ 2,800.00 X
25	1	Rear lower step panel <i>Bent</i>	\$ 780.00 <i>250</i>
26	2	Rear spare tyre <i>11</i>	\$ 1,000.00 X
27	1	Towing hook <i>11</i>	\$ 165.00 X
28	1	Rear left lower chassis frame <i>R</i>	\$ 4,850.00 X
29	1	Rear right lower chassis frame <i>R</i>	\$ 4,850.00 X
			\$ 29,201.00

Total parts

\$ 32,378.75

6 days

Not Allowed
Date
1/5 \$5000
10/12/21

Take the 11/11/21

GBB3787J Toyota Dyna

No	Description	Labour Charges
1	Labour for panel beating, cut, weld, straighten rear affected area and replace rear damaged parts.	\$ 2,500.00 880
2	To putty and spray painting rear portion.	\$ 2,500.00 700
3	To check rear lighting and wiring.	\$ 50.00 20
4	To remove and install rear exhaust pipe assy.	\$ 120.00 X
5	To apply anti rust proofing to rear affected area.	\$ 140.00 X
6	To remove and install rear reverse sensor.	\$ 80.00 50
7	To remove and repair rear cabin assy to facilitate the repair.	\$ 850.00 X
8	To remove and install rear cabin door lock mechanism.	\$ 180.00 X
9	Towing service.	\$ 200.00 X
Total labour :		\$ 6,620.00

Total parts : \$ 32,378.75

Total labour : \$ 6,620.00

Total repair cost : \$ 38,998.75

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:

P-915-4
252

P. 686-43

S.N-3984

J-1650

632045
202
5050



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	01/12/2021 15:27 (SGT)
Date of Accident	30/11/2021 14:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Slip Road Braddell Road to Thomson Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB3787J
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	BSI ENGINEERING
Company Reg No	53394318C
Email Address	BSIENGINEERING328@GMAIL.COM
Mobile Phone No	(Phone) +65-84800077
Alternative Phone No	+65-84800077

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1740

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5120435677
Cover Note Number	-

DRIVER

Name of Driver	TANG WAH JIT
NRIC No	S1443563H



Date Of Birth	25/02/1960
Occupation	Outdoor
Date Of Driving Pass	01/02/1979
Driving experience	42 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84800077
Alt. Phone Number	-
Email Address	BSIENGINEERING328@GMAIL.COM
Address	BLK 488A #12-168 TAMPINES AVE 9
Address complement	-
Postcode	520488
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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

REFER TO SKETCH PLAN

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

Vehicle Registration Number	SHC4557Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	TAN LYE HUAT
NRIC No	S1450986J
Contact Number	(Phone) +65-81574231
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	TANG WAH JIT
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBB3787J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

INCOME MOTOR SERVICE CENTRE

Report No: MI

D.O.A. 17/11/2021

Time 02:00 hrs

Report Date & Start Time: 10/12/2021 14:57

Vehicle No: CBG6062N Reporting Type

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 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.
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7. By the lodgment 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 (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/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 insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders

S&R SVC EXPRESS

Reg No: S3207663W

354 Hougang Avenue 7 #03-703 Singapore 520354

Email: Express@s-r-svc.com

01/12/21 14:57

Policyholder's Signature / Date & Time

01/12/21 14:57

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

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

