

ASS. REC. BY:

REF:

MSG/ 210127061K vf3

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

OD/TP/WS/TP RES/OD RES/EVA/INV/MY

To Inspect Vehicle No:

at Workshop m/s

of

Insured: FBL 1819L

Policy No. MSD/VMS/21-426736-CA

Claims No. MSC/V/21-000522

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: \$88K

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

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

Lum Sum: 1-B-1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SMQ 7558T Yr Regn: 11, 19

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

Truck / Trailer or

Make:

Toy Piente Wagon

Colour

h.p. white A/C Insured / Std / NI / NA

Sp. Reading

31941 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

NHP170 7172757

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F: TOYO 185/60R15  
R: B.SBS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front

R/Bal.

8 mm

L/Bal.

8 mm

D.O.A.

10/12/21

Rear

R/Bal.

5 mm

L/Bal.

5 mm

D.O.I.

21/1/2022

Survey held at

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

Rear N/S

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

Date / Time

Action / Instruction

17/5/22 Est not ready

17/5/22 Informed June \$2961.07 (red 200, 6%)

Date/Time, File Pass to?

☐

: Prell. Report

☐

: Final Report

1)

Date/Time, File Return to?

Days Of Repair: 4

Resurvey No. of Trlp: 1

Survey Fee:

Transportation:

S + RS \$

F.P.A.S

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format: Merimen

Lump Sum / I.B.I: (\$2961.07)

# Cheng Hoe Motor Pte Ltd

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761  
 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg  
 GST:201001158E RCB NO:201001158E

*Not Not heated  
 Penney B4pam 4day*

M/S : NTUC INCOME INSURANCE CO-OPERATIVE LTD  
 73 BRAS BASAH ROAD  
 #05-01 NTUC TRADE UNION HOUSE  
 SINGAPORE 189556  
 TEL: 67886616 FAX: 67883777  
 ATTN: Motor Claim Department

Estimate No: ES2290073/AMK  
 Date: 20 Jan 2022  
 Policy No: GA588510  
 Veh Reg No: SMQ7558T  
 Make/Model: TOYOTA SIENTA 1.5X  
 AUTO  
 Chassis No: NHP1707172757  
 Engine No: 1NZR783014  
 Reg. Date: 29/11/2019

WS Ref: TP/MSIG/AMK  
 Claim Type: Third Party  
 Accident Date: 10/12/2021  
 TP Veh Reg No: FBL1819L

## Estimate Repair Cost to Vehicle No :SMQ7558T

| Description                                                                                                              | U/Price              | Quantity | List Price        | Amount     |
|--------------------------------------------------------------------------------------------------------------------------|----------------------|----------|-------------------|------------|
|                                                                                                                          |                      |          | <u>SS</u>         | <u>SS</u>  |
| <b>List Price</b>                                                                                                        |                      |          |                   |            |
| 1 REAR BUMPER                                                                                                            | <i>Br/Red</i> 309.10 | 1 PC     | 309.10            | <i>✓</i>   |
| 2 REAR BUMPER TOP PROTECTOR                                                                                              | <i>Red</i> 189.50    | 1 PC     | 189.50            | <i>✓</i>   |
| 3 REAR BUMPER TRIANGLE GARNISH                                                                                           | <i>Red</i> 45.20     | 1 PC     | 45.20             | <i>✓</i>   |
| 4 REAR BUMPER LH SIDE PAD                                                                                                | <i>Red</i> 129.10    | 1 PC     | 129.10            | <i>✓</i>   |
| 5 REAR BUMPER CLIP                                                                                                       | <i>Red</i> 3.50      | 6 PC     | 21.00             | <i>✓</i>   |
| 6 REAR TAILGATE                                                                                                          | <i>Red</i> 1,110.90  | 1 PC     | 1,110.90          | <i>✓</i>   |
| 7 TAILGATE LOGO                                                                                                          | <i>Red</i> 67.50     | 1 PC     | 67.50             | <i>✓</i>   |
| 8 TAILGATE EMBLEM 'HYBRID'                                                                                               | <i>Red</i> 56.00     | 1 PC     | 56.00             | <i>✓</i>   |
| 9 TAILGATE WINDSCREEN GLASS MOULDING                                                                                     | <i>Red</i> 99.80     | 1 PC     | 99.80             | <i>✓</i>   |
|                                                                                                                          |                      |          | 2,028.10          |            |
|                                                                                                                          |                      | Less 25% | 507.03            | 1,521.08   |
| <b>Special Net</b>                                                                                                       |                      |          |                   |            |
| 10 REVERSE SENSOR                                                                                                        | 200                  | 1 SET    | <i>Red</i> 200.00 | <i>✓</i>   |
| 11 REAR WINDSCREEN GLASS SEALANT                                                                                         | 40                   | 1 PC     | <i>Red</i> 40.00  | <i>✓</i>   |
|                                                                                                                          |                      |          | 240.00            | 240.00     |
| <b>Labour</b>                                                                                                            |                      |          |                   |            |
| 12 REMOVE AND REFIX REAR WINDSCREEN GLASS                                                                                | 120                  | 1 LA     | 120.00            | <i>✓</i>   |
| 13 REMOVE & REFIX REAR BUMPER & ATTACHMENTS, TAILGATE & ATTACHMENTS; KNOCKING & REPAIR REAR END PANEL & REALIGN THE SAME | 500                  | 1 LA     | 500.00            | <i>400</i> |
| 14 PUTTY & RESPRAY REAR BUMPER, TAILGATE, REAR END PANEL & ALL AFFECTED AREAS                                            | 700                  | 1 LA     | 700.00            | <i>600</i> |
| 15 REMOVE & REFIX REVERSE CAMERA, RESET & REALIGN THE SAME                                                               | 50                   | 1 LA     | 50.00             | <i>✓</i>   |
| 16 RUSTPROOFING                                                                                                          | 30                   | 1 LA     | 30.00             | <i>✓</i>   |
|                                                                                                                          |                      |          | 1,400.00          | 1,400.00   |

### 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 ..... 13/12/2021 15:32 (SGT)  
Date of Accident ..... 10/12/2021 19:20 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... AYE  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMQ7558T

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... MAXANNE ONG MEI XIAN  
NRIC No ..... SXXXX193C  
Email Address ..... MAXANNEONG.MX@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-90079237  
Alternative Phone No ..... +65-90079237

#### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... SIENTA HYBRID 1.5X CVT  
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 ..... 1496

#### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... GA588510  
Cover Note Number ..... 29/11/2021 - 28/11/2022

#### DRIVER

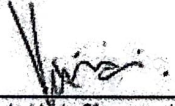
Name of Driver ..... MAXANNE ONG MEI XIAN  
NRIC No ..... SXXXX193C

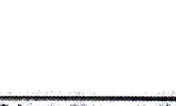


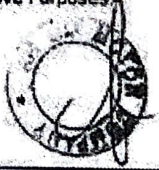
# **SKETCH PLAN**

## **IMPORTANT NOTICE**

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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 (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.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

## **Sketch Plan**

