

ASS. REC. BY:

Steve

REF:

CS/CT12/013082/43

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. SNM21D207452/C02

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
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 3 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SJ81825L Yr Regn: 31/7/09

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

Truck / Trailer or

Make: Honda CIVIC c.c. 1799

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

Sp. Reading: 144800 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: SHMED16309S201933

Gen. Cond: Good / ☒ Fair / ☐ Poor / ☐ BurntSteering: In order / ☒ Jammed / ☐ Leaked / ☐ Burnt orBrake: In order / ☒ Jammed / ☐ Leaked / ☐ Burnt orModl: NII / ☒ S/Rim / ☐ STD A/Rim or

Tyre Size: F: 205/55R16

R: 11

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. 16/12/21 D.O.I. 12/1/21

Survey held at Sng Ah Tee 12/01/2022

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

Rear LH

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

Date / Time Action / Instruction

MV-19K

11/03/22@11.44am revised to Jenny Lew via Merimen.

We will be advising our Principal a cost of repair of \$1150 (L/S before GST) - with 3 days of repair, subject to their approval (Red \$535.76, 32%)

Date/Time, File Pass to?

☐ : Prel. Report

1) 20/04 Typist

☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format: MER-TP

Lump Sum H.D. (\$ 1150)

Days Of Repair: 3

Resurvey No. of Trip: 1

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

Survey Fee:

Transportation:

S + RS \$ _____

Photos

Others

TOTAL

SNGAHTEE

MOTOR & PANEL SERVICE

孙亚弟汽车烧焊私人有限公司
SNG AH TEE MOTOR & PANEL SERVICE PTE LTD
BLK 3 PIONEER ROAD NORTH #01-18 SINGAPORE 628457
TEL: 62686183 (4 lines) FAX: 62681429 | www.sngahtee.com
sngahtee@singnet.com | UEN / GST REG. NO.: 200810440N

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 ANSON ROAD #16-00

SPRINGLEAF TOWER SINGAPORE 079909

MOTOR CLAIMS DEPT

ATTENTION:

CONTACT: 62222366

FAX NO: 62221033

EST/QUOTE NO. SQ007097

DATE: 11/01/2022
ACCIDENT DATE: 16/12/2021
VEHICLE NO: SJS1825L
CHASSIS/ENG.NO: JHMFD16309S201933
VEHICLE MODEL: HONDA CIVIC
CLAIM NO: SNM21D207452/C02
POLICY NO:
REMARK: 1825CHINA TP AGST
XD7622D

S/N.	QTY	UNIT	DESCRIPTION	PRICE	DISC %	DISC/MARKUP	TOTAL AMT
** LIST PRICE **							
1	1	PC	REAR BUMPER / BR	638.00	20	510.40	510.40
2	1	PC	REAR BUMPER RETAINER LH / BR	20.90	20	16.72	16.72
3	1	PC	REAR BUMPER UPP SODE BRACKET LH X	17.00	NN	13.60	13.60
4	10	PC	REAR BUMPER CLIPS / NPL	3.70	20	2.96	29.60
5	1	PC	REAR TAILLAMP LH / CRA	294.30	20	235.44	235.44
SUB-TOTAL:							805.76

** WORK LABOUR **

TO KNOCK RR FENDER LH, WELD, REMOVE & FIX ON ABOVE PARTS

TO PUTTY & SPRAY PAINTING ON AFFECTED AREAS

TO CHECK WIRING

400.00 200 400.00
400 450.00 200 450.00
30.00 30.00
SUB-TOTAL 880.00

Steve (LKK)
12/1/22, 12.00pm

W/L
L/S
by AL sy
3 by

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

PAGE: 1 of 1

SAM

SUB-TOTAL: S\$ 1,685.76
ADD 7% GST. S\$ 118.00
GRAND TOTAL: S\$ 1,803.76

ON BEHALF OF SNG AH TEE PANEL & SERVICE PTE LTD

E & O E

Acknowledged by Repairer

Signature:

Date:

Disclaimer clause:

The above estimate/quotation is meant for solely the intended party stated above and in any event, we are not liable to any other parties arising from the circumstances of this or any action taken in reliance on such estimates or quotations.
Quotation is only valid for 14 days.

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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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	20/12/2021 17:24 (SGT)
Date of Accident	16/12/2021 09:30 (SGT)
Exact Location of Accident	9 Wan Lee Rd, Singapore 627941
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS1825L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN SOON HUAT
NRIC No	SXXXX062A
Email Address	SOONHUAT83@HOTMAIL.COM
Mobile Phone No	(Phone) +65-96125158
Alternative Phone No	+65-96125158

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	1799

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D21MTPV01005425
Cover Note Number	-

DRIVER

Name of Driver	TAN SOON HUAT
NRIC No	SXXXX062A

Of Birth	26/11/1983
Occupation	Outdoor
Date Of Driving Pass	13/07/2021
Driving experience	5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96125158
Alt. Phone Number	+65-96125158
Email Address	SOONHUAT83@HOTMAIL.COM
Address	210 BOON LAY PLACE #07-119
Address complement	-
Postcode	640210
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
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?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD7622D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NEO WENG HENG
Passport No/FIN	FXXXX755R
Contact Number	(Phone) +65-98963778
Address	-

ess complement -
Stcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN


IMPORTANT NOTICE

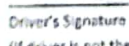
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.
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 lodging 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.

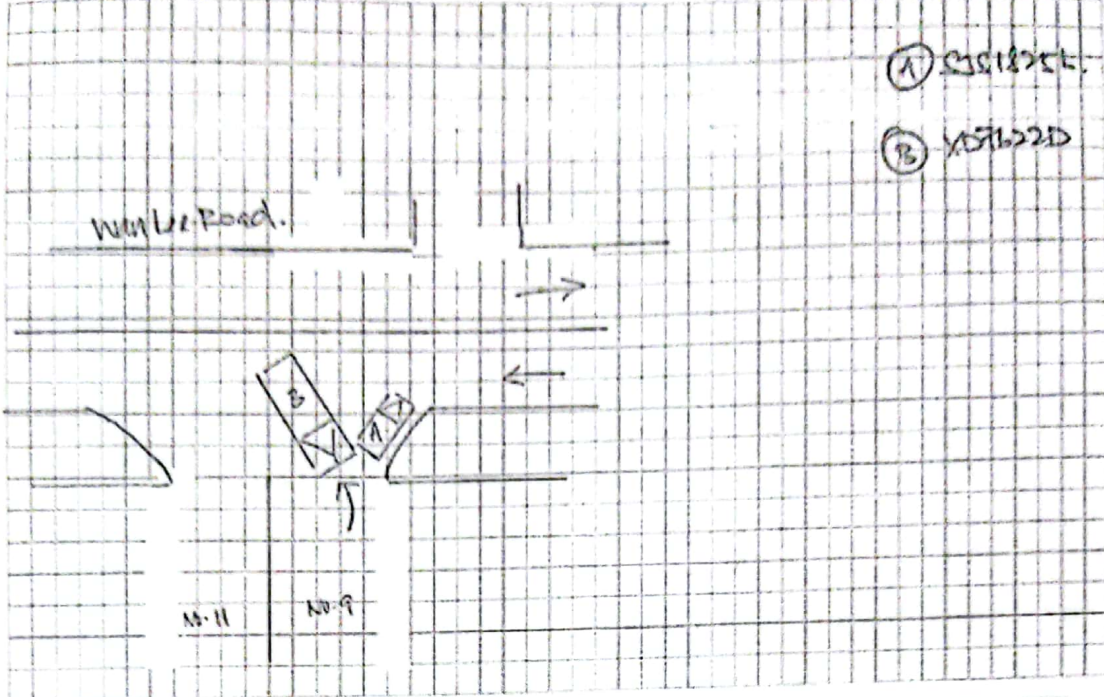
I AM AWARE THAT MY INSURER MAY HAVE A **24 DAYS TIMEFRAME** FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.


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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/01/2021 @ around 0930hrs, I parked my car at N-9 Wan Lee Road. Then I was inform that my car was hit by Vehicle B. I found that Vehicle B had collided onto my rear left portion.

DECLARATION

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

[Signature]
Policyholder's Signature
Date & Time:

[Signature]
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

<input type="checkbox"/> Claim own policy
<input checked="" type="checkbox"/> Claim third party
<input type="checkbox"/> Claim OD / TP at other workshop
<input type="checkbox"/> For record purpose
Policy No. <u>SS1F21CK005425</u>
Insurer <u>Compo.</u> Veh. No. <u>SS1F21CK</u>

CLAIMANT'S SIGNATURE: *[Signature]*

Vehicle PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

062A

Vehicle Details

Vehicle No.:

SJ51825L

Vehicle to be Exported:

No

Intended Deregistration Date:

21 Dec 2021

Vehicle Make:

HONDA

Vehicle Model:

HONDA CIVIC 1.8L 5AT

Primary Colour:

Black

Manufacturing Year:

2008

Engine No.:

R18A14011322

Chassis No.:

JHMF016309S201933

Maximum Power Output:

103.0 kW (138 bhp)

Open Market Value:

\$28,716.00

Original Registration Date:

31 Jul 2009

First Registration Date:

31 Jul 2009

Transfer Count:

1

Actual ARF Paid:

\$28,716.00

Intended PARF Rebate Details

PARF Eligibility:

Forfeited

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

30 Jul 2024

COE Category:

B - Car (1601cc & above)

COE Period(Years):

5

PQP Paid:

\$21,443.00

COE Rebate Amount:

\$11,182.00

Total Rebate Amount:

\$11,182.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 21 Dec 2021

OK