Kenneth CS/III21013129/Kvf3 **ASSIGNMENT**

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Can Del

of _____

Insured: _____

Policy No. D20MFL0000326-01

Claims No. _____

Sum Insured: _____ Excess: 750

(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: $182K

IDAC Accident Rport: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLZ 6698T Yr Regn: 06, 21

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (A) : Wagon

Make: Toy Vellfire c.c 2493

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

Sp.Reading 24162 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: AGH30 0361728

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : NIl / S/Rlm / STD A/Rlm or _____

Tyre Size: F: _____

R: 235/50R18

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO YOKO or _____

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm
D.O.A.	11/12/21	D.O.I.	27/12/2021

Survey held at ✓

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

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

Date / Time	Action / Instruction
11/1/22	Kenneth confirmed $12,250.30 (red 5505.25,31%)

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) 13/1/22-typist

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee: _____

Transportation: _____ $ - RS. _____ SI

Parking _____

Others _____

TOTAL _____

Report Format : Merimen

~~Lump Sum~~ / I.B.I: ($ 12,250.30)

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 27 Dec 2021)
Parts:	M1-MPV	TOYOTA VELLFIRE 2.5 Z G-EDITION CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	**ComfortDelGro Engineering Pte Ltd/SLZ6698T/27/12/2021 11:40**	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Estimates on Parts

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*BONNET	25.00	0.00	*864.00 FL
2	1		*BONNET LOCK	25.00	0.00	*139.00 FL
3	1		*BONNET HINGE RH	25.00	0.00	*65.00 FL
4	1		*BONNET HINGE LH	25.00	0.00	*65.00 FL
5	1		*HEADLAMP RH	25.00	0.00	*9,727.00 FL
6	1		*HEADLAMP LOWER BRACKET RH	25.00	0.00	*378.00 FL
7	1		*FRONT BUMPER	25.00	0.00	*2,332.00 FL
8	1		*FRONT BUMPER SIDE RETAINER RH	25.00	0.00	*105.00 FL
9	1		*FRONT BUMPER SIDE GARNISH	25.00	0.00	*1,281.00 FL
10	1		*FRONT BUMPER CHROME TOP	25.00	0.00	*282.00 FL
11	1		*FRONT BUMPER SIDE GARNISH CHROME	25.00	0.00	*160.00 FL
12	1		*FRONT BUMPER SENSOR	25.00	0.00	*420.00 FL
13	1		*FRONT RH FENDER	25.00	0.00	*1,373.00 FL
14	1		*FRONT GRILLE WITH CHROME	25.00	0.00	*2,609.00 FL

F=Franchise part. L=ListItemDisc.

Sub Total (S$)	**19,800.00**
- List Item Discount on L Items (S$)	4,950.00
Total Parts (S$)	**14,850.00**

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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:

timates on Miscellaneous Items

	Qty	Particulars	Amount
Miscellaneous Items			
1	1	OD/TP Case (Insurer)	11.00
		Sub Total (S$)	**11.00**

Estimates on Labour

No	Particulars	Lab.Type	Amount
Labour Items			
1	TO KNOCK ,STRAIGHTEN AND RENEW ACCIDENT AREAS SUCH AS BONNET,FRT BUMPER,RH FRT FENDER,FRT SUPPORT PANEL ,RH HEADLAMP AND ETC.	New	960.00
2	TO PUTTY,RESPRAY ACCIDENT AREAS SUCH AS BONNET FRT BUMPER FRT EH FENDER,FRT SUPPORT PANEL AND ETC	New	1,000.00
3	TO CHECK LIGHTING AND WIRING	New	50.00
		Gross Labour Cost (S$)	**2,010.00**

ComfortDelGro Engineering Pte Ltd/SLZ6698T/27/12/2021 11:40. Not valid without Reference section.
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< END OF ESTIMATES >

Repairer Estimates

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)
205 Braddell Road
Singapore 579701
Tel: 63838115 Fax: 62815767/65462533 Email: choojy@cdge.com.sg

INSURER: **India International Insurance Pte Ltd (HQ)**

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	
Policy No:	D20MFL0000326-01	Date of Loss:	11/12/2021
Vehicle Reg. No.:	**SLZ6698T**	Driveable?	
Driver Age/Info:		Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	COMFORTDELGRO RENT-A-CAR PTE LTD		

Make/Model:	TOYOTA VELLFIRE, 2.5 Z G-EDITION CVT (A)	Vehicle Reg. Date:	28/06/2021
Vehicle Colour:	BLACK		
Engine No:	2AR2596406	Chassis No:	AGH300361728
Odometer:	0 KM		
Paint Type:			
List Item Discount:	25.00 %		
Total Loss?	**NO**		
Est. Duration of Repair (day)	~~5~~ 4 days		

Not Authorised
Refinish B4 paint

Present Location: COMFORTDELGRO ENGINEERING PTE LTD (BRADDELL)

COST OF CLAIMS	Amount
Parts	14,850.00
Miscellaneous Items	11.00
Labour	2,010.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S$)	**16,871.00**
+ GST 7.00% (S$)	1,180.97
Nett Amount (S$)	**18,051.97**

This claim is handled by: PATRICK TIA JEE KIANG

*Generated using **Merimen e-Claims Internet Estimation & Adjusting System***

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 witholding 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 18:36 (SGT)
Date of Accident	11/12/2021 18:20 (SGT)
Exact Location of Accident	10 Bayfront Ave, Singapore 018956
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ6698T

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORTDELGRO RENT-A-CAR PTE LTD
Company Reg No	1XXXXX775H
Email Address	dannyng@cdgrentacar.com.sg
Mobile Phone No	(Phone) +65-98165642
Alternative Phone No	(Office) +65-68820888

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vellfire
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	Auto
CC	2493

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	D20MFL0000326_01
Cover Note Number	-

DRIVER

Name of Driver	FANG TAI WAH DALE
NRIC No	SXXXX632F

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 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 13/12/2021 1330

Dahnial

Witnessed by Reporting Centre Personnel

Sketch Plan