Lump Sum / I B 1. /C

ASS	<u>IGNMENT</u>
From: Date: Estimated Cost:	Veh No: SJH 697 Yr Regn: 2020 / Aug Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: \$5H 6992	Make: MERCENES BENZ GLA (80 URBAN. E c.c 1595
at Workshop m/s Amonotive REPAIR LTR	Colour WHITE A/C: Insured / Std / NI / NA
of 48, TOH GUAN ROCOST #02-146	Sp.Reading 19936 T/Radio: Insured / Std / NI / NA
Insured: FC(Eng/No:
Policy No.	C/No: WOC15694223659991.
Claims No.	Gen. Cond: Good / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder/ Jammed / Leaked / Burnt or
(Client's Record)	Brake: Morder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / STRim / STD A/Rim or
	Tyre Size: F: 238/50R18
(Policy Condition)	R: 1-
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO OF CONTINGAR
Bal, or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. C mm L/Bal. C mm
Day Vee or No.	D.O.A. 27/12/21 D.O.I. 29/12/21
C.VI. Von on No.	Survey held at
Lum Sum: % 3 Val.: Yes or No	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS	6.50
Vehicle: IN / OU Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The city characteristics is a second control of the city can be a
REPAIR LIMIT - 79K	
, 1001	
· · · · · · · · · · · · · · · · · · ·	
Date/Time, File Pass to? : PreII. Report	Days Of Repair:
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add F	ee:: Site Insp (\$s+Rs,si
	: Interview (\$) Photos
Report Format:	: Tech. Invs (\$), Others

ARC

Automotive Repair Centre Pte Ltd

CO. Reg. No. : 201312913C GST Reg. No. : 201312913C **Estimate**

38 Woodlands Industrial Park E1

#05-18, Singapore 757700

TO

Tel: 64688834 Fax: 64622278

Motor Claim Department

Singapore 068877

E-mail: info@automotiverepaircentre.com.sg

First Capital Insurance Limited

36 Robinson Road #16-01 City House

Tel: 6507 3848, Fax: 65073849

ESTIMATE NO.: EST2112-326-TG

DATE: 27-Dec-2021

POLICY NO.: Auto & Gen P10613013R00

VEHICLE REG. NO.: SJH699Z

VEHICLE MAKE: MERCEDES / GLA180 URBAN

FOR SURVEYOR

POR SURVETOR

ESTIMATE REPAIR COST

NO. DESCRIPTION QUANTITY		UNIT COST		TOTAL COST			
	SPARE PARTS	1 1					and the second
1	Side Mirror RH Cover (100) M(\$/	1	\$	240.00	\$		240.00
2	Side Mirror RH Base (80)	1	\$	88.00	\$		88.00
3	Side Mirror RH Assy (10) M (5)	1	\$	520.00	\$		520.00
4	Side Mirror RH Mirror (40) MU/	1	\$	168.00	\$		168.00
The same			Tota	l Spare Parts	\$	- 1	,016.00
1 1	SPECIAL NETT			Av. Av.		1	
, (i		1					
V.		1	Tota	l Special Nett	\$		
	LABOUR	t de la	12.	114 4 1		1111	
5	Repair, Refit, Remove and Replace Affected Accident Parts	1	\$	500.00	\$	100	500.0
6	Repair Front Bonnet	1	\$	250.00	\$	X	250.0
7	Spray painting (Side Mirror & Front Bonnet)	1	\$	400.00	\$	300	400.0
8	Diagnose and Rectify Side Mirror Fault Codes	1	\$	250.00	\$	lov	250.0
9	Check and rectify wiring, incl. adjust focus area of headlamp	1	\$	35.00	\$	WAR PE	35.0
	a proposed by KonCura	- W			1	7	

Estimate prepared by: KenGuan

The above is an estimate based on our inspection and does not cover any additional parts or labour which may be required after work has been started. Occasionally, worn or damaged parts are discovered which may not be evident on the first inspection. Because of this, the above price are not guaranteed. Quotation on parts

ı	\$	35.00	\$	35.00
	Total L	abour.	\$	1,435.00
Amount Before Excess		\$	2,451.00	
	Add G	ST @ 7%	13	171.57
Total Amount Payable			\$	2,622.57

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

- Please report <u>correctly</u> 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 27/12/2021 15:32 (SGT) Date of Accident 27/12/2021 08:45 (SGT) Exact Location of Accident Near 366 Tampines Street 34, Block 366, Singapore 520366 Additional Location Information TPE EXIT TO LOYANG AVE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJH699Z

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ONG HAN CHEONG NRIC No SXXXX889C Email Address KARENGOH68@HOTMAIL.COM Mobile Phone No (Phone) +65-91189189 Alternative Phone No (Home) +65-91189189

VEHICLE PARTICULARS

Mercedes Model Gla180 Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto 1595

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Type of Coverage Comprehensive Fleet Policy No Policy Number P10613013R00 Cover Note Number

DRIVER

Name of Driver **GOH HWEE CHIEW** NRIC No SXXXX168F

Goods vehicle

us / Van / Lorry / Taxi / Prim. ..

Vehicle Colour

Vehicle Category

Nature Of

40.C

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-
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G E:

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SKETCH PLAN

IMPORTANT NOTICE

- 1. Rease report correctly the details of the accident to speed up the claims process
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any watul misrapresentation 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
- 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
- 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 ms 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' law yers/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
- (i) investigating the accident and/or my claims;
- (ii) 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
- (v) complying with applicable low 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' law yers/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 law yers/law firms), which may be sted outside of Singapore, for one or more of the above Purposes.

Driver's Signature of driver & Time 27/12/2021 Policyholder's Signature / Date & driver is not the policyholder) / Date Sketch Plan

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are the foregoing particulars ar	e true in every respect.	
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	11/2:	THE
ler's Signature / Date & D	tver's Signature (If driver is not the policyhold	der) / Date Witnessed by Reporting Control
	Time 27/12/224 2:5	Personnel Personnel
	Fee all	
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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	889C
Vehicle No.:	SJM699Z
Vehicle to be Exported:	
Intended Deregistration Date:	30 Dec 2021
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	GLA180 URBAN EDITION AUTO
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	27091031910850
Chassis No.:	WDC 1569422J659991
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$24,848.00
Original Registration Date:	21 Aug 2020
First Registration Date:	. 21Aug 2020
Transfer Count:	0
Actual ARF Paid:	\$26,788.00
Intended PARF Rehate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Aug 2030
PARF Rebate Amount:	\$20,091.00
Intended COE Rehate Details	
COE Expiry Date:	20 Aug 2030
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$35,710.00
COE Rebate Amount:	\$30,852.00
Total Rebate Amount:	\$50,943.00

The information contained herein is correct as at 30 Dec 2021

Mercedes-Benz GLA-Class GLA180 Urban Edition

Overview Fi	nancial Accessories S	imilar Research	Photos Map
Price	\$130,800		
Depreciation ()	\$13,560 /yr View models with similar depre	Reg Date	21-Aug-2020 (8yrs 7mths 21days COE left)
Mileage	15,000 km (11k /yr)	. Manufactured ①	2019
Road Tax	\$740 /yr	Transmission	Auto
Dereg Value ()	\$51,273 as of today (change)	OMV (2)	\$25,148
COE	\$35,710	ARF.	\$27,208
Engine Cap	1,595 cc	Power III	90.0 kW (120 bhp)
Curb Weight	1,435 kg	No. of Owners	
Type of Vehicle	SUV		