

ASS. REC. BY:

REF:

C72/ 22000115/Kqy3

C

Kenneth

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:

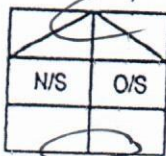
Excess:

(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:

06

days

Res.: Yes or No

Lum Sum:

1. B1

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SFN086B

Yr Regn:

12, 17

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

Truck / Trailer or

Make:

Hyundai

Elantra

1591

Colour

M. Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

140327

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KMHP841CMJU 593443

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195/65 R15

R:

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

TOYO / YOKO or

Front

R/Bal.

8

mm

Rear

R/Bal.

8

mm

L/Bal.

8

mm

L/Bal.

8

mm

D.O.A.

3/1/12

D.O.I.

12/1/2022

Survey held at

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

8/131

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

Date / Time

Action / Instruction

1 wksp said maybe 1. B1 as unable to locate 2nd parts yet.

19/1 @ 4697.72 Cash 20/1/22 Cred \$13753.88, 76%

22/1/22 @ 11.04a revised to Jacqueline Tan via Messenger.

Date/Time, File Pass to?



: Prell. Report

1) 22/1/22



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

6

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

S + RS SI

Fees

Others

TOTAL

Add Fee:



: Site Insp (\$



: Interview (\$



Tech Invs (\$



Weekend (\$

Report Format:

MTR-TP

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

4697.72

ACCORD AUTO SERVICES PTE LTD

10 Ang Mo Kio Industrial Park 2A

#03-11 AMK Autopoint Singapore 568047

Tel: 6481 9518 / 6481 9517 Fax: 6481 9516 email: claims@mycarworkshop.com.sg

ESTIMATE

MS China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road #15-00

Springleaf Tower

Singapore 079909

Date : 13/10/2021

Vehicle No : SFN686B

Veh Make/Model Hyundai Elantra

YOM : 2017

Chassis No : KMHD841CMJU593443

Date of Accident 03.01.2022

Not Authorised
Recovery After Repair
@ 4697.72 6 days

No	Qty	Description	Amount \$
		Cost Price Items:-	
1	1	Front Headlamp LH	\$ <i>PL</i> 1,198.00
2	1	Front Headlamp RH	\$ <i>SL</i> 1,198.00
3	2	Front Headlamp Lower Bracket	\$ <i>n</i> 48.00
4	1	Front Bumper	\$ <i>Re/CM</i> 474.40
5	1	Front Bumper Sponge	\$ <i>CM</i> 90.00
6	1	Front Bumper Rubber *Top	\$ <i>PL</i> 150.00
7	1	Front Grille Base	\$ <i>CM</i> 320.00
8	1	Front Grille Emblem	\$ <i>n</i> 100.00
9	10	Front Grille Chrome Moulding	\$ <i>PL</i> 250.00
10	1	Front Number Plate Garnish	\$ <i>CM</i> 27.00
11	1	Front Bumper Lower	\$ <i>PL</i> 55.00
12	1	Towing Cover	\$ <i>SL</i> 16.00
13	2	LH & RH Foglamp	\$ <i>PL</i> 530.20
14	2	Front Foglamp Garnish	\$ <i>SL</i> 230.80
15	1	Front LH Fender	\$ <i>n</i> 1,227.00
16	1	Front RH Fender	\$ <i>n</i> 1,227.00
17	1	Bonnet	\$ <i>n</i> 1,910.30
18	2	Bonnet Hinge	\$ <i>n</i> 129.60
19	1	Front Support Panel	\$ <i>SL</i> 949.30
20	1	Front Support Panel Top Garnish	\$ <i>PL</i> 74.10
21	1	Reinforcement Bar	\$ <i>n</i> 695.50
22	2	Radiator Air Duct LH & RH	\$ <i>SL</i> 77.40
23	1	Rear Boot	\$ <i>PL</i> 1,782.00
24	2	Rear Boot Hinge	\$ <i>n</i> 144.00
25	1	Rear Boot Logo	\$ <i>n</i> 32.00
26	1	Rear Boot Logo "Elantra"	\$ <i>n</i> 48.80
27	1	Rear Boot Logo "S"	\$ <i>n</i> 50.00
28	1	Rear Boot Open Handle Open Switch	\$ <i>SL</i> 150.00
29	1	Rear Boot Licence Plate Light	\$ <i>SL</i> 30.00
30	2	Rear Boot Lamp LH & RH	\$ <i>SL</i> 569.80
31			
Total - List Item			\$ 13,784.20
List 20%			\$ 2,756.84
Total			\$ 11,027.36

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ESTIMATE

MS China Taiping Insurance (Singapore) Pte Ltd

3 Anson Road #15-00

Springleaf Tower

Singapore 079909

Date : 13/10/2021

Vehicle No : SFN686B

Veh Make/Model Hyundai Elantra

YOM : 2017

Chassis No : KMHD841CMJU593443

Date of Accident 03.01.2022

No	Qty	Description	Amount \$
22	1	Rear Boot Lock	\$ 116.20
23	1	Rear Boot Rubber	\$ 92.50
24	2	Rear Lamp LH & RH	\$ 725.20
25	1	Rear Bumper	\$ 459.40
26	2	Rear Bumper Side Retainer *Short	\$ 88.60
27	1	Rear Bumper Lower	\$ 250.10
28	2	Rear Bumper Reflector LH & RH	\$ 81.60
29	1	Rear End Panel	\$ 454.60
30	1	Rear End Panel Top Garnish	\$ 59.80
31	1	Rear Reinforcement	\$ 294.80
32	1	Rear Floor Panel	\$ 120.00
33			
34			
35			
36			
37			
Total - List Item			\$ 2,742.80
List 20%			\$ 548.56
Total			\$ 2,194.24

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Vehicle No : SFN686B

Veh Make/Model Hyundai Elantra

YOM : 2017

Chassis No : KMHD841CMJU593443

Date of Accident 03.01.2022

No	Qty	Description	Amount \$
		Special Nett Items:-	
1	2	Front & Rear Number Plate with Holder	\$ 150.00 100.00
2	2 Set	Front & Rear Bumper Clips	\$ 90.00
3	Set	Support Panel Top Cover Clips	\$ 50.00
4	2 Set	Front & Rear Fender Shield Clips	\$ 140.00
5	Set	Reverse Sensor	\$ 350.00
Total - SN Item			\$ 730.00
		Labour Charges:-	
1		Spray painting on all affected area (Front & Rear)	\$ 1,800.00
2		Labour remove/refit accident damages parts to straighten up, jack out, cut/weld and realign accident affected areas.	\$ 1,600.00
3		To check wiring system & light.	\$ 100.00
4		To remove/replace/refit aircon condensor, radiator necessary piping, Hose, Top Up Aircon Gas, Coolant & Etc)	\$ 200.00
5		To remove/replace/refit support panel	\$ 280.00
6		To remove/refit/replace reverse sensor	\$ 180.00
7		To remove/refit rear boot compartment, mechanism to new boot	\$ 180.00
8		Anti Rush Treatment	\$ 160.00
Total - L/C			\$ 4,500.00

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:

Sub-Total \$ 18,451.60

7% GST \$ 1,291.61

Total \$ 19,743.21

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 03/01/2022 17:41 (SGT)
Date of Accident 03/01/2022 13:00 (SGT)
Exact Location of Accident 590 Upper Thomson Rd, Singapore 574419
Additional Location Information Along Upper Thomson Road toward Yio Chu Kang Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFN686B

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Lee Kian Aik
NRIC No SXXXX085A
Email Address simon.colliers@gmail.com
Mobile Phone No (Phone) +65-90123978
Alternative Phone No (Home) +65-64581849

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Elantra
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 1600

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D21MTPV01016686
Cover Note Number -

DRIVER

Name of Driver Lee Wilson
NRIC No SXXXX485Z

Date Of Birth	07/06/1996
Occupation	Indoor
Date Of Driving Pass	22/06/2015
Driving experience	6 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97575317
Alt. Phone Number	-
Email Address	leewilsonlw@icloud.com
Address	31 Transit Road #02-26
Address complement	-
Postcode	778893
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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)	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

While i was driving along Upper Thomson Road, I saw the front car vehicle brake and i stopped the car with ample distance to the front car. I felt a bang from the rear, Veh B collided with my vehicle. The impact was so hung that it caused a dash forward and hit onto veh D.

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	GBJ5882L
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	-
Contact Number	-
Address	-

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

PASSENGER 1

Name	-
Gender	-

DETAILS OF OTHER VEHICLE PROPERTY 2

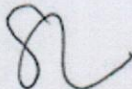
Vehicle Registration Number	SML1858T
Vehicle Manufacturer	Honda
Vehicle Model	Odyssey
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 3

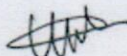
Vehicle Registration Number	SLB9144G
Vehicle Manufacturer	Peugeot
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLANIMPORTANT 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 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

03 JAN 2022

