

(08/11/13) wef

ASS. REC. BY: Pam

REF:

CS/ASM 22000162/R1qy3

1972

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SLN 5055Tat Workshop m/s EM SOLUTIONof 160,810 m/s DR #03-18/19

Insured:

ASM

Policy No.

Claims No. S2M03PYT

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

Bal. or Market Value:

61K

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.:

Yes or No

Lum Sum:

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

REPAIR LIMIT - 20K

08/03/22@10.17am revised to Derick Ong via Smart Claims.

Rasul finalised LS \$2550, 4 days. (Red \$4891.50, 66%)

Veh No:

SLN 5055T

Yr Regn:

2017 / MAYType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

CHEVROLET ORLANDO 1.4AT c.c 1362

Colour

Grey

A/C: Insured / Std / NI / NA

Sp. Reading

064403

T/Radio: Insured / Std / NI / NA

Eng/No:

KL1YA7589HK610757

C/No:

Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/60R16

R:

21

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

31/12/22

D.O.I.

18/01/22

Survey held at

EM SOLUTIONDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop orN/S REAR

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

Date/Time, File Pass to?

☐

: Prell. Report

1) 08/03 Typist

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

4

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

); S + RS SI☐

: Interview (\$

); Photos

☐

: Tech. Invs (\$

); Others

☐

: Weekend (\$

);

Report Format : SMART CLAIMS - TP

Lump Sum 4.8K (\$ 2550)

E M SOLUTION PTE LTD

160 Sin Ming Drive #03-18/19, Sin Ming Autocity

Singapore 575722

Tel: 64560226 Fax: 64584500

GST Reg. No: 201016308K

ESTIMATE

Date : 14th January 2022

Mr **Lim Wei Qiang**
Blk 739 Jurong West St 73, #06-58
Singapore 640739

Veh No : **SLN 5055T**
Make/Model : **Chev Orlando**
Chassis No : KL1YA7589HK610757
Date of Acc : 31.12.2021
TP Veh No : SHB 6388L

S/No	Qty	Description	Unit Price	Amount
Materials				
1	1 pc	Rear Door LH <i>st</i>	\$	2,200.00
2	1 pc	Rear Door Inner Trim Board LH <i>X</i>	\$	580.00
3	1 pc	Rear Door Weatherstrip LH <i>an</i>	\$	65.00
4	1 pc	Rear Fender LH <i>repair</i>	\$	880.00
5	1 pc	Rear Wheel Arch Garnish LH <i>scu</i>	\$	180.00
6	1 pc	Side Skirt LH <i>X</i>	\$	480.00
7	1 pc	Rear Fender Liner LH <i>X</i>	\$	150.00
				\$ 4,535.00
Less 10%				\$ 453.50
				\$ 4,081.50
Special Nett				
8	1 set	Wheel Arch Garnish Clips <i>re</i>	\$	45.00 <i>30</i>
9	1 set	Fender Liner Clips <i>X</i>	\$	45.00
10	1 pc	Quarter Glass Sealant <i>X</i>	\$	40.00
11	1 pc	Rear Sport Rim <i>repair</i>	\$	450.00
Parts Total :				\$ 4,661.50
Labour				
1		To remove & rearrange electrical wirings, check lightings	\$	80.00 <i>40</i>
2		To remove, transfer rear door components.	\$	100.00 <i>60</i>
3		To remove & instal fender quarter glass	\$	100.00 <i>X</i>
4		To remove, instal cushion seat, trim garnishes to facilitate repairs	\$	200.00 <i>60</i>
5		To remove, repair & replace damaged bodyparts and where consistent to the accident.	\$	1,200.00 <i>500</i>
6		Putty and respray painting on affected portions.	\$	1,000.00 <i>600</i>
7		Rust proofing on affected portions.	\$	100.00 <i>40</i>
Labour Total :				\$ 2,780.00
Total Parts & Labour :				\$ 7,441.50

for E M Solution Pte Ltd

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:

Rasul
Up 500000 68
4 days
L/S
18/01/22 P1150
Reg after repair

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 16:21 (SGT)
Date of Accident	31/12/2021 13:35 (SGT)
Exact Location of Accident	Sims Ave, Singapore
Additional Location Information	SIMS AVENUE / PAYA LEBAR LINK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN5055T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM WEI QIANG
NRIC No	SXXXX197I
Email Address	hondasang1988@gmail.com
Mobile Phone No	(Phone) +65-98268336
Alternative Phone No	+65-98268336

VEHICLE PARTICULARS

Manufacturer	Chevrolet
Model	Orlando
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	1400

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5125015960
Cover Note Number	-

DRIVER

Name of Driver	LIM WEI QIANG
NRIC No	SXXXX197I

Date Of Birth	04/09/1988
Occupation	Outdoor
Date Of Driving Pass	10/09/2008
Driving experience	12 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98268336
Alt. Phone Number	+65-98268336
Email Address	hondasang1988@gmail.com
Address	BLK 739 JURONG WEST STREET
Address complement	#06-58
Postcode	640739
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	Collision - Major/Minor Rd
Weather Conditions	Raining
Road Surface	Wet

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)	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?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB6388L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category

Name of Driver

IC No

Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

Taxi

ONG CHEE WEI

S7537657Z

-
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-
-
-

Policy
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Date/T

2)

Rep

Describe Circumstances of the Accident

I was driving along Sims Ave passing the junction of Paya Lebar Link when I felt an impact on the left of my car.
 Realised that Veb (B) had exited from Paya Lebar Link without checking & collided onto my passing vehicle.
 We stopped our vehicles along the roadside & exchange particular.
 No one was injured then.

Declaration

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



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

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 willful 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.

6. 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.

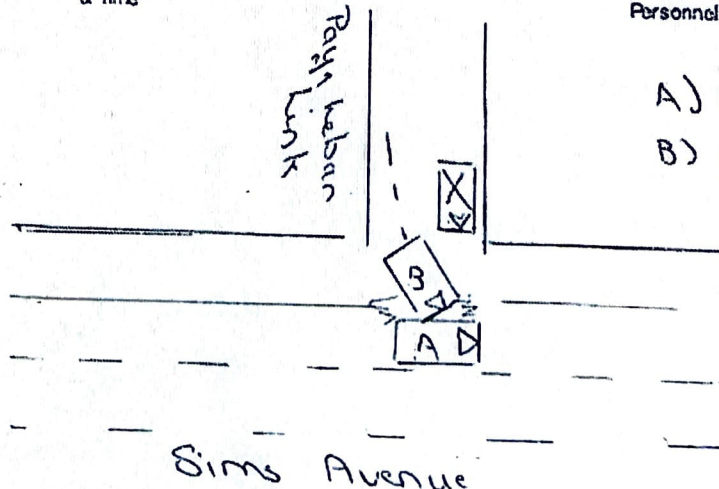
Policyholder's Signature / Date & Time

Sketch Plan

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



Witnessed by Reporting Centre Personnel



A) SLN 5055 T
B) SHB 6388 L

quire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

197I

Vehicle Details

Vehicle No.:

SLN5055T

Vehicle to be Exported:

Yes

Intended Deregistration Date:

31 Jan 2022

Vehicle Make:

CHEVROLET

Vehicle Model:

ORLANDO 1.4AT TURBO

Primary Colour:

Silver

Manufacturing Year:

2017

Engine No.:

B14NET163150013

Chassis No.:

KL1YA7589HK610757

Maximum Power Output:

103.0 kW (138 bhp)

Open Market Value:

\$15,882.00

Original Registration Date:

05 May 2017

First Registration Date:

05 May 2017

Transfer Count:

1

Actual ARF Paid:

\$15,882.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

04 May 2027

PARF Rebate Amount:

\$11,911.00

Intended COE Rebate Details

COE Expiry Date:

04 May 2027

COE Category:

B - Car above 1600cc or 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$54,406.00

COE Rebate Amount:

\$28,621.00

Total Rebate Amount:

\$40,532.00

The information contained herein is correct as at 03 Jan 2022

OK

Chevrolet Orlando 1.4A Turbo LS

Overview

Financial

Accessories

Similar

Research

Photos

Map

CREATIVE AUTO LEASING

BUY & SELL USED CARS

Price **\$61,888**

Depreciation ⓘ **\$10,140 /yr**
[View models with similar depre.](#)

Reg Date **17-May-2017**
(5yrs 3mths 28days COE left)

Mileage **69,000 km (14.8k /yr)**

Manufactured ⓘ **2017**

Road Tax ⓘ **\$604 /yr**

Transmission **Auto**

Dereg Value ⓘ **\$40,801 as of today (change)**

OMV ⓘ **\$15,780**

COE ⓘ **\$54,616**

ARF ⓘ **\$15,780**

Engine Cap **1,362 cc**

Power **103.0 kW (138 bhp)**

Curb Weight ⓘ **1,650 kg**

No. of Owners ⓘ **1**