

ASS. REC. BY:

REF:

U07/ 22000520/Kg

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 _____ City Ave

of _____

Insured: _____

Policy No. _____

Claims No. L11D61732201

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

2pm

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: 883k

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 07 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLA 6961P Yr Regn: 03, 16

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

Truck / Trailer or

Make: Mr SLA 180 c.c 1595

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

Sp. Reading: 103057 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WDD1179422N 280189

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: _____

R: 225/40R18

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 17/12/21 D.O.I. 14/1/2022

Survey held at _____

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

The vehicle found damaged at the roof

The UIC / Chassis frame / Body Structure affected due to collision.

top, bonnet & body panel work at the time of inspection. The cause of damage due to fallen concrete cement.

Date / Time	Action / Instruction
/	
2/3	1/1 Imp @ 5400
1/3	@ 6757.20, re-estimate on 1-Bil. Car from 17/12/21. (Red to 5466.40, 45%) No lump sum.

Date/Time, File Pass to? : Prell. Report

11/22/6 : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 7

Resurvey No. of Trip: 3

Survey Fee:	
Transportation:	
S + RS. SI	3
Fuel	
Others	
TOTAL	

- Add Fee:
- : Site Insp (\$)
 - : Interview (\$)
 - : Tech Invs (\$)
 - : Weekend (\$)

Report Format: TP
Lump Sum / I.B.I: (\$ 6757.20)



CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643
TEL: 6453 1235, 6452 0850 FAX: 6453 7944
24hrs Towing Services Tel 9823 9898
Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Estimate : QUOT202112-000854(00)

Chong Wee Chung

Date : 23/12/2021

Vehicle No. : SLA6961P

Make/Model : MERCEDES CLA180

Mileage (km) : 0

Chassis No. : WDD1179422N280189

Accident Date : 17/12/2021 00:00:00

Claim No. :

Reference : JO202112-1138

Policy No. : 5116172327-01

Contact : 94888411

Not Authorized
Meaning After Rain
7 days
86757.20

S/No	Particular	Quantity	Unit Price	Amount S\$
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LIST ITEMS :

1	Front wiper arm	2.0	160.00	320.00	X
2	Front wiper blade	2.0	65.00	130.00	LT
3	Front wiper arm LH cover	2.0	15.00	30.00	LT
4	Front windscreen glass	1.0	925.00	925.00	Z
5	Roof moulding	2.0	385.00	770.00	L
6	Front RH Door Glass	1.0	220.00	220.00	X
7	Front RH door chrome moulding	1.0	195.00	195.00	X
8	Front LH door glass	1.0	220.00	220.00	X
9	Front LH door chrome moulding	1.0	195.00	195.00	L
10	Rear LH door glass	1.0	285.00	285.00	X
11	Rear LH door chrome moulding	1.0	195.00	195.00	X
12	Rear LH outer glass	1.0	245.00	245.00	X
13	Rear windscreen glass	1.0	850.00	850.00	X
14	Star logo - trunk	1.0	58.00	58.00	L
15	Emblem - CLA180	1.0	116.00	116.00	L
16	Outer pillar moulding LH	1.0	525.00	525.00	X
17	Outer pillar moulding RH	1.0	525.00	525.00	L
18	Bonnet	1.0	1,800.00	1,800.00	L

List Total :

10% Discount S\$

7,604.00

760.40

6,843.60

SPECIAL NET :

1	Front windscreen glass sealant	1.0	60.00	60.00	X
2	Roof sticker	1.0	600.00	600.00	X
3	Rear spoiler sticker	1.0	300.00	300.00	X
4	Rear LH quater glass sealant	1.0	60.00	60.00	X
5	Rear windscreen glass sealant	1.0	60.00	60.00	X
6	Tinting film	1.0	800.00	800.00	X

SPECIAL NET Total S\$:

1,880.00

LABOUR :

* To remove and refit front windscreen glass	1.0	150.00	150.00	X
* To remove and refit rear windscreen glass	1.0	150.00	150.00	X
- To remove and refit roof lining to carry out repair on roof panel	1.0	220.00	220.00	X
- To remove and refit door glass x3 and pillar moulding	1.0	300.00	300.00	X

CONTINUE NEXT PAGE

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:



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Mileage (km) : 0

Contact : 94888411

Fax No. :

Chassis No. : WDD1179422N280189

Accident Date : 17/12/2021 00:00:00

Claim No. :

Reference : JO202112-1138

Policy No. : 5116172327-01

S/No	Particular	Quantity	Unit Price	Amount S\$
-	To remove and refit rear LH quarter glass	1.0	80.00	80.00
-	To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts	1.0	600.00	600.00
-	Spray painting on affected & replace parts	1.0	2,000.00	2,000.00
				<u>3,500.00</u>

λ
500
1700

E. & O.E.

Total S\$: 12,223.60

GST 7% S\$: 855.65

Amount Due S\$: 13,079.25


for CITY AUTO PTE LTD

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	18/12/2021 14:16 (SGT)
Date of Accident	17/12/2021 18:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	158, KALLANG WAY PERFORMENCE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA6961P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHONG WEE CHUNG
NRIC No	SXXXX172Z
Email Address	EADEN.CHONG@GMAIL.COM
Mobile Phone No	(Phone) +65-94888411
Alternative Phone No	+65-94888411

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Cla180
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
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5116172327-01
Cover Note Number	-

DRIVER

Name of Driver	CHONG WEE CHUNG
NRIC No	SXXXX172Z

Date Of Birth	19/04/1979
Occupation	Outdoor
Date Of Driving Pass	15/10/2001
Driving experience	20 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94888411
Alt. Phone Number	+65-94888411
Email Address	EADEN.CHONG@GMAIL.COM
Address	BLK52, STRATHMORE AVE, #38-237
Address complement	-
Postcode	141052
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 by fallen tree / Other objects
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
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?	Yes
Police Station Name	Mountbatten Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18003449999
Alt. Police Station Phone No	(Fax) +65-64474185
Police Station Address	Blk 60 Dakota Crescent #01-213/ 215 Singapore 390060
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ATTACH 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

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.



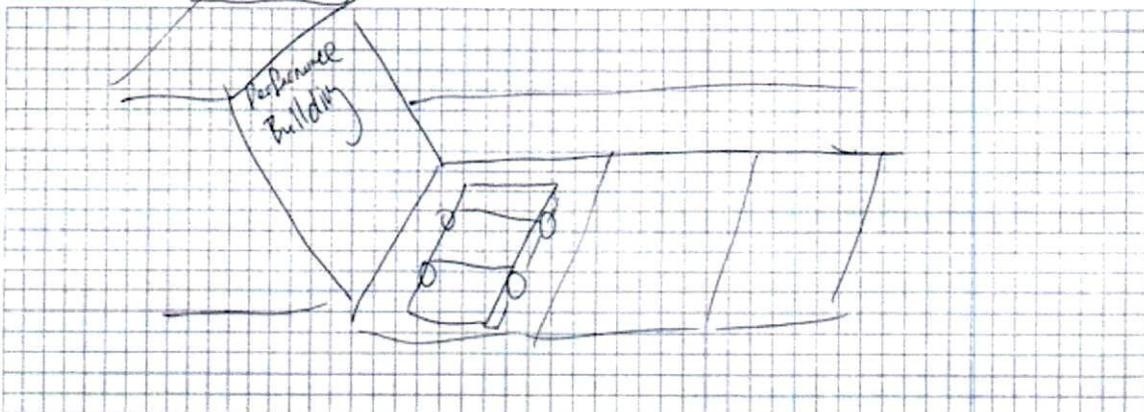
CITY AUTO PTE LTD
 Blk 8 Sin Ming Road
 #01-58/60/62 Sin Ming Ind Est
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 (Claims Section)

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan





**SINGAPORE
POLICE FORCE**



G/20211217/2113

1 of 2

POLICE REPORT (NP299)

Report No. G/20211217/2113

Police Station Of Origin
Mountbatten NPP
60 Dakota Crescent #01-213 SINGAPORE
390060
Tel No: 1800-3449999

Date/Time Report Made 17/12/2021 20:33	Vide Report No.	Station Diary No. 24
Name Of Informant CHONG WEE CHUNG	Address APT BLK 52 STRATHMORE AVENUE #36-237 SINGAPORE 141052	
ID Type / ID No. NRIC NO / S7912172Z	Contact No. Home/Office	Mobile 94888411
Nationality SINGAPORE CITIZEN	Email Address caden.chong@gmail.com	
Occupation PROPERTY AGENT	Sex Male	Age 42
Institution/School Name	Date of Birth 19/04/1979	Race Chinese
Date/Time Of Incident 17/12/2021 17:45 - 17/12/2021 18:00	Location Of Incident 158 KALLANG WAY PERFORMANCE BUILDING SINGAPORE 349245 Building carpark Lot	

Brief details.

On 17/12/2021 at about 1745hrs, I had parked my vehicle, a silver colour Mercedes Benz bearing registration plate number SLA6961P at a parking lot located at 158 Kallang Way Performance building. Everything was normal.

On the same date at about 1805hrs, I returned to my vehicle and discovered that there is pieces of

Signature Of Officer Recording The Report: G / Sgt 3 TAN CHUAN SIN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 17/12/2021 20:33
Officer In-Charge Of Case: G / Bedok Police Division Investigation Branch Insp (2) KHALIF ADAM MALIK TIMBOEL MANIK Authentication Stamp  SIGNATURE	Classification Of Case: 62447200



**SINGAPORE
POLICE FORCE**



G/20211217/2113

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211217/2113

concrete debris found around my vehicle and on the roof of my vehicle. I then realized that there was a portion of the building surface structure that had collapsed. I assumed that it was due to the downpour earlier which had weakened the structure. A security guard was there and informed me that the building management staff had already left. He took some photographs of the damage caused by the fallen structure and gave me the contact details of the management (Name: Alexis, Tel:68442876). No one was injured. I am lodging this report for my own records and I will make a claim with the building management as the fallen pieces of debris had damaged the exterior of my vehicle.

Signature Of Officer Recording The Report: G / Sgt 3 TAN CHUAN SIN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 17/12/2021 20:33
Officer In-Charge Of Case: G / Bedok Police Division Investigation Branch SINGAPORE POLICE FORCE Insp (2) KHALIF ADAM MALIK TIMBOEL MANIK	Classification Of Case:
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