

ASS. REC. BY: JSK

REF:

CS/CT122001012/Rqy3

686w

- ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SKV 35564at Workshop m/s SC AUTOof SI, SENGUO RDInsured: CTI

Policy No. _____

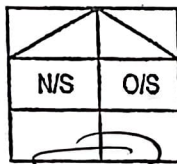
Claims No. SNM22D200684/C02

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: 63k

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 1 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKV 35564 Yr Regn: 2015 / SEPType: M.Cat. / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: VOLKSWAGEN TIGUAN 2.0 c.c. 1768Colour RED A/C: Insured / Std / NI / NASp. Reading 177073 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WVH2225N ZFW 102877Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orMod: NII / S/Rim / STD A/Rim orTyre Size: F: 235 / 50 R18R: 11BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 25/01/22D.O.I. 22/03/22Survey held at SC AUTODes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

REPAIR UNIT - 14K

31/03/22 @ 10.52am revised to Tan Kah Leong via Merimen.

31/03/22 Rasul finalised final fig \$533, 1 day. (Red \$2332, 81%)

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 1

1) 01/04 Typist

☐ : Final ReportResurvey No. of Trip: 1

Date/Time, File Return to?

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

Report Format: MER-TPAdd Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$Lump Sum / L.S. (\$ 533)



SC AUTO INDUSTRIES (S) PTE LTD

51 Senoko Road, Singapore 758133

T 65 6758 2222 F 65 6257 6931

E sales@scauto.com.sg

scauto.com.sg

Co. Reg. No. 199800107D

M/S CHUAN LIM CONSTRUCTION PTE LTD
20 SENOKO DR
SINGAPORE 758207
Insured CHUAN LIM CONSTRUCTION PTE LTD
Policy GA581143/1

ESTIMATE Bill

GST Reg. No: 19-9800107D
Date: 25/1/2022
Our Case Ref. SC22/01/010/4CL-TP
Accident Date 25/1/2022

Damaged Vehicle No: SKV3556Y

S/no	Description	QTY	Price	Disc	Amount
<u>Replaced Parts</u>					
1	REAR BUMPER X	1 PC	\$960.00	-	\$960.00
2	REAR BUMPER SPOILER cut ✓	1 PC	\$270.00	-	\$270.00
3	REVERSE SENSOR ?	1 PC	\$225.00	-	\$225.00
4	TOWING COVER X	1 PC	\$50.00	-	\$50.00
<u>Labour Charges</u>					
1	LABOUR FOR REAR PORTION	1	\$1,280.00	-	250 \$1,280.00
2	LABOUR FOR WIRING	1	\$80.00	-	40 \$80.00
2					
<div><div><div><div><p>LKK Auto Consultants hence notify the Repairer of the following:</p><ul style="list-style-type: none">• 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<p>Acknowledged by Repairer Signature: Date:</p></div></div></div><div><p>Ram Hp 90010568 1 day 22/03/22 @ 1025 P/P Resy after repair</p></div></div>					
Sub Total					\$ 2,865.00

Authorised Signature

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	25/01/2022 14:59 (SGT)
Date of Accident	25/01/2022 12:09 (SGT)
Exact Location of Accident	Yishun Avenue, Singapore
Additional Location Information	ALONG YISHUN AVENUE 5
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKV3556Y

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CHUAN LIM CONSTRUCTION PTE LTD
Company Reg No	1XXXXX684W
Email Address	chongleng.yee@chuanlim.com
Mobile Phone No	(Phone) +65-65710615
Alternative Phone No	(Office) +65-65710615

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Tiguan
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1968

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	GA581143/1
Cover Note Number	-

DRIVER

Name of Driver	CHIN CHUN FEI
NRIC No	SXXXX404J

Date Of Birth 19/11/1979
 Occupation Indoor
 Date Of Driving Pass 10/11/2006
 Driving experience 15 YEARS AND 2 MONTHS
 Gender Male
 Mobile Number (Phone) +65-90177797
 Alt. Phone Number -
 Email Address chongleng.yee@chuanlim.com
 Address BLK 408A FERNVALE ROAD #17-32
 Address complement -
 Postcode -
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Employee
 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 - Head to Rear
 Weather Conditions Clear
 Road Surface Dry

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? Yes
 Was any injured conveyed to hospital by ambulance? No
 Was any other vehicle or property damaged? Yes
 Number of Passengers (Including Driver) 3
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

PASSENGER 1

Name MUNEESWARAR S/O MUNIANDY @ AMIR
 Gender Male

PASSENGER 2

Name KHAW AI GEOK
 Gender Female

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

REFER SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? No
 Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKV5279J
 Vehicle Manufacturer -

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Goods vehicle
Passport No/FIN	GNANAPANDITHAN KANNAN
Contact Number	GXXXX247R
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUNEESWARAR S/O MUNIANDY @ AMIR
Gender	Male
Phone No	(Phone) +65-92724235
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKV3556Y
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	KHAW AI GEOK
Gender	Female
Phone No	(Phone) +65-91155398
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKV3556Y
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No


Describe Circumstances of the Accident

I was in my vehicle A (SKV3556Y) travelling along
 Yishun Ave 5. Traffic light ahead was red, my vehicle A
 was stop stationary while waiting for the traffic light.
 When suddenly I felt an impact from the rear.
 vehicle B (SKV5279J) had colided onto the rear portion
 of my vehicle A.


Declaration

We declare the foregoing particulars are true in every respect.

 Policyholder's Signature / Date &
 Time

 25/1

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



 Witnessed by Reporting Centre
 Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	684W
Vehicle No.:	SKV3556Y
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Mar 2022
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	TIGUAN 2.0 TDI BMT AT 5N223R
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	CFFN22033
Chassis No.:	WVGZZZ5NZFW102877
Maximum Power Output:	103.0 kW (138 bhp)
Open Market Value:	\$34,534.00
Original Registration Date:	14 Sep 2015
First Registration Date:	14 Sep 2015
Transfer Count:	0
Actual ARF Paid:	\$40,348.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Sep 2025
PARF Rebate Amount:	\$26,226.00
COE Expiry Date:	13 Sep 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$65,501.00
COE Rebate Amount:	\$22,756.00
Total Rebate Amount:	\$48,982.00

The information contained herein is correct as at 23 Mar 2022

OK