ASS. REC. BY: Kenneth | REF: AGL/22001261/K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Thian Hty Huay

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 05 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMH 2446T Yr Regn: 01, 19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Hyundai Avante c.c 1591

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

Sp.Reading 62958 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHD841CMKU866826

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 195/65R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Kumho

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm
D.O.A.	6/2/22	D.O.I.	10/2/2022 ✓

Survey held at _____

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

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

Date / Time	Action / Instruction
/	

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Report Format :

Lump Sum / I.B.I: ($ _____)

Survey Fee:	
Transportation:	$ + RS. SI
Parking	
Others	
TOTAL	

Repair Estimate

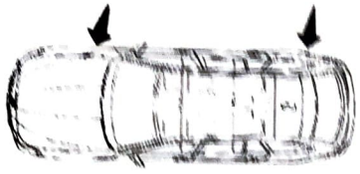
Thiam Heng Huat Pte Ltd

176 Sin Ming Drive #05-14 Sin Ming Autocare Singapore 575721
Mobile: 82636295 Email: thiamhenghuat@gmail.com

Make/Model: HYUNDAI AVANTE
Engine/Chassis No.: KMHD841CMKU846826
Date of accident:
Damaged area: O/S

Not Authorised
1/Rep &
Repaint After Repair
5days

Date: 09/02/2022
Claim Type: TP
VRN: SMH2444T



List items

S/N	Parts description		QTY	UNIT PRICE	AMOUNT
1	Front door o/s	R/	1	$ 925.00	$ 925.00
2	Front door upper hinge o/s	R	1	$ 62.00	$ 62.00
3	Front door lower hinge o/s	R	1	$ 62.00	$ 62.00
4	Front door weatherstrip o/s	Rpr	1	$ 185.00	$ 185.00
5	Front door inner lock o/s	R	1	$ 346.00	$ 346.00
6	Front door inner trim board o/s	Rpr	1	$ 572.00	$ 572.00
7	Front door window channel o/s	Rpr	1	$ 104.00	$ 104.00
8	Front door window channel moulding o/s	Rpr	1	$ 65.00	$ 65.00
9	Front door checker o/s	Rpr	1	$ 59.00	$ 59.00
10	Front fender o/s	R/	1	$ 702.00	$ 702.00
11	Front fender cowling o/s	Rpr	1	$ 185.00	$ 185.00
12	Front fender signal lamp o/s	Rpr	1	$ 176.00	$ 176.00
13	Rear bumper	Rpr	1	$ 676.00	$ 676.00
14	Rear bumper retainer	Rpr	2	$ 85.00	$ 170.00
15	Front lower arm o/s	Rpr	1	$ 421.00	$ 421.00
16	Front shock absorber o/s	Rpr	1	$ 355.00	$ 355.00
17	Front shock absorber top mount o/s	Rpr	1	$ 53.00	$ 53.00
18	Front wheel knuckle o/s	Rpr	1	$ 365.00	$ 365.00
19	Front wheel hub o/s	Rpr	1	$ 266.00	$ 266.00
20	Front stabilizer end link o/s	Rpr	1	$ 115.00	$ 115.00
21	Wing mirror assy o/s	Rpr	1	$ 413.00	$ 413.00
22	Rear fender o/s	R/	1	$ 857.00	$ 857.00
23	Rear fender cowling o/s	Rpr	1	$ 185.00	$ 185.00
				Subtotal	**$ 7,319.00**
				List discount	**20.00%**
				Total	**$ 5,855.20**

Special nett items

No.	Parts description		QTY	UNIT PRICE	AMOUNT
1	Front door inner trim board clips o/s	N	8	$ 5.50	$ 44.00
2	Front alloy wheel o/s P1.	R/	1	$ 550.00	$ 550.00
3	Front tyre o/s	Rpr	1	$ 280.00	$ 280.00

Repair Estimate

4	Front fender cowling clips o/s	8	$ 5.50	$ 44.00	X
5	Rear bumper clips	10	$ 5.50	$ 55.00	X
6	Sundries	1	$ 50.00	$ 50.00	X
			Total	**$ 1,023.00**	

Labour

No.	Description	Work unit	Amount	
1	To dismantle / renew the accident damaged portion. To panel beat, reshape, straighten, orientate and align repair / replacement parts.	7	$ 1,400.00	600
2	To disconnect o/s front door wire harness and electrical component to facilitate repairs, reconnect and check functions of power window.	0.25	$ 50.00	20
3	To rust proof all affected portions after repair.	0.5	$ 100.00	60
4	To remove and refit o/s front tyre & rim for replacement. To perform tyre balancing.	0.25	$ 50.00	20
5	To remove and refit o/s front undercarriage for replacement of parts.	1	$ 200.00	X
6	To conduct computerized 4 wheel alignment.	0.5	$ 100.00	60
7	Supply spray paint material and necessary items to respray affected area / panel.	8	$ 1,600.00	900
		Total labour	**$ 3,500.00**	

Estimate Grand Total	**$ 10,378.20**

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:

SA1822270004 / AH LIM MOTOR COMPANY (BRANCH)
ENTRY DATE & TIME: 07/02/2022 15:20 (SGT)
SUBMITTED BY: GERALD CHEW
VERSION: 1 (07/02/2022 15:20 (SGT))

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 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	07/02/2022 15:20 (SGT)
Date of Accident	06/02/2022 22:54 (SGT)
Exact Location of Accident	250C Compassvale St, Singapore 543250
Additional Location Information	BLK 250C COMPASSVALE STREET
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH2444T

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA WEI HIAN
NRIC No	SXXXX983F
Email Address	ALFCWEIX@YAHOO.COM
Mobile Phone No	(Phone) +65-98595365
Alternative Phone No	(Home) +65-98595365

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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	Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10674753R00
Cover Note Number	17/01/2022 TO 16/01/2023

DRIVER

Name of Driver	CHUA WEI HIAN
NRIC No	SXXXX983F

Budget Direct
Vehicle SMH 2444T
07/02/2022

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

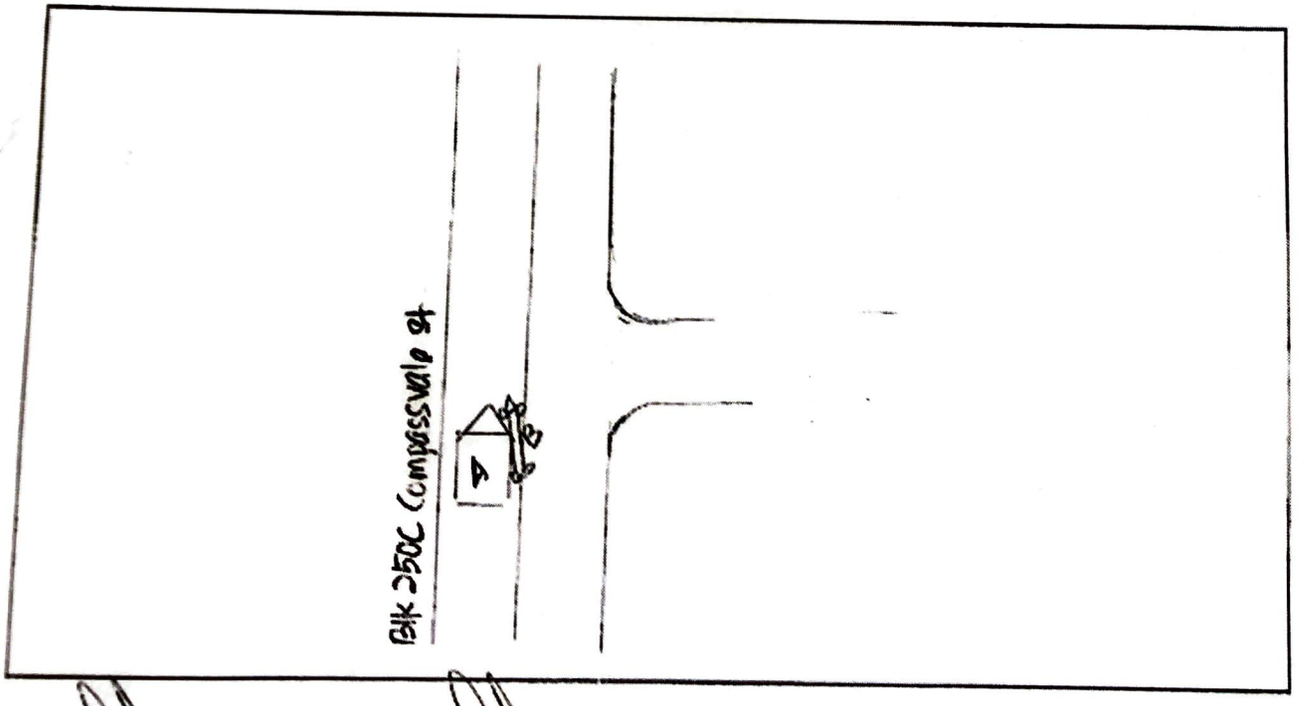
(v) complying with applicable law in administering, processing, handing and/or dealing with my claims,

(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.

Sketch Plan



Policyholder's Signature / Date & Time

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

AH LIM MOTOR CO
PAYA LEBAR

Witnessed by Reporting Centre

07/02/2022