

ASS. REC. BY: TaufikREF: CS/CT122001273/Tvg3**ASSIGNMENT**

Front _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SNC 9364JPolicy No. DMHCSNW00014322100Claims No. SNM22D200799/C02/LEWLC

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: \$78K

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Ronald

Vehicle: IN / OUT

Veh No: SM E3700M Yr Regn: 2018 SepType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mazda 6 C.C. 1998Colour: Maroon A/C: Insured / Std / NI / NASp. Reading: 21828 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: SM 69L1072K 0303996Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 225/55R17R: 7

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 4/2/2022 D.O.I. 16/2/22Survey held at Darussalam UthiDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop oro/s Frt

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

Date / Time Action / Instruction

30/3/22 Taufikh confirmed final fig \$7765.50 (red 6256.30, 44%)

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 31/3/22-typist

Rep. Format: Merimen

Lump Sum / L.B. / F \$7765.50

Days Of Repair: 6Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL



TRANS EUROKARS PTE LTD
27A TANJONG PENJURU, SINGAPORE 609042
ESTIMATE COST OF REPAIRS



CHINA TAIPING INSURANCE P/L 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909 ATTN. : MOTOR CLAIMS FAX :		NAME : ADDRESS : TEL :		WIP : 17750 EXCESS : DATE: 10-Feb-22			
VEH NO : SME3700M		DATE IN :		CONTACT PERSON : RONALD			
CHASSIS NO : JM6GL1072K0303996		MILEAGE :		TYPE OF CLAIM : THIRD PARTY CLAIM			
MODEL : MAZDA 6		DATE REG.: 27-Sep-18		POLICY NO. :			
NATURE OF WORKS							
Parts Description							
NO	DESCRIPTION	QTY	1st	Supp	PARTS NO	REVISED	PRICES
1	FRONT FENDER LH	1			MGHP9-52-211A	bt ✓	\$ 383.70
2	STAY FENDER LH	1			MGHP9-52-240D	ne ✓	\$ 48.30
3	MUD GUARD LH FRT	1			MGRF2-56-140	X	\$ 114.30
4	FASTENER	10			MB45A-56-146A	X	\$ 30.00
5	DOOR FRONT LH	1			MGHY0-59-02XJ	bt ✓	\$ 975.20
6	STRIPE NO.3(L), BODY SIDE GL <i>sticker</i>	1			MGR6-50-8W3A00	ne ✓	\$ 12.90
7	STRIPE NO.1(L), BODY SIDE GL	1			MGR6-50-8W1A00	ne ✓	\$ 11.00
8	UPPER HINGE LH FRONT DOOR	1			MKD53-59-210A	?	\$ 44.10
9	LOWER HINGE LH FRONT DOOR	1			MD461-58-210B	?	\$ 41.70
10	WEATHERSTRIP LH FRT DOOR	1			MGBFN-59-760	??	\$ 90.70
11	FASTENER(L)	10			MTK48-59-762	ne ✓	\$ 92.00
12	PAD COVER FRONT DOOR	1			MGHP9-58-972	X	\$ 5.20
13	GROMMET,SCREW	12			MGJ6A-58-975	ne ✓	\$ 36.00
14	GROMMET,SCREW	1			M9991-00-503	ne ✓	\$ 3.80
15	FASTENER	5			MGJ6A-68-AB1	ne ✓	\$ 36.00
16	GARNISH LH FRONT DOOR	1			MGBFT-50-M20	ne ✓	\$ 99.10
17	CLIP,GARNISH	3			MKD53-50-M38	ne ✓	\$ 36.90
18	GARNISH(L),SAIL-OUT GJ/GL	1			MGJR9-69-16YB	ne ✓	\$ 96.60
19	CLIP,GARNISH	3			MGHP9-50-M38	ne ✓	\$ 33.00
20	MOULD OUTER FRONT DOOR LH	1			MGHP9-50-650F	X	\$ 96.00
21	STONE GUARD LH	1			MGHK1-50-490	ne ✓	\$ 198.00
22	CLIP	13			MBP4L-51-SJ3	ne ✓	\$ 130.00
23	CLIP	2			MG18K-51-SJ3	ne ✓	\$ 13.00
24	HARNESS,FRONT DOOR LH	1			MGBKT-67-200	X	\$ 250.70
25	INSULATOR FENDER FRT LH	1			MGHP9-56-396A	X	\$ 81.30
26	PLATE SEAL FENDER FRT LH	1			MGHP9-56-J13	?	\$ 55.20
27	WHEEL,DISC 17"X7	1			M9965-16-7570	? <i>not</i>	\$ 1,196.80
28	FRONT ABSROBER LH	1			MGBJD-34-900A	X	\$ 392.40
29	BEARING TOP FRT ABSORBER	1			MB45A-34-38XA	X	\$ 55.80
30	RUBBER MOUNTING TOP FRT ABSORBER	1			MKD35-34-380C	X	\$ 96.50
31	FRONT LOWER ARM LH	1			MG46C-34-350J	X	\$ 503.90
32	KNUCKLE LH FRT	1			MGBFN-33-031	X	\$ 420.00
33	HUB WHEEL BEARING FRT LH	1			MKD35-33-04XF	X	\$ 566.70
34	NUT	1			MD651-33-042A	X	\$ 15.00
35	0	0			0		\$ -

					TOTAL PARTS		\$ 6,261.80
					TOTAL PARTS COST		\$ 6,261.80
SUPPLEMENTARY							
NO	DESCRIPTION	QTY	1st	Supp	PARTS NO	REVISED	PRICES
1							
					TOTAL PARTS		\$ -
					TOTAL PARTS COST		\$ -
Labour Description							
						REVISED	PRICES
1	TO REPLACE FRONT FENDER LH, FRONT DOOR LH. TO REPAIR ROCKER PANEL LH AND ALL AREAS AFFECTED BY THE ACCIDENTS.					1980	\$ 2,640.00

660/day

2		TO RESPRAY FRONT FENDER LH , FRONT DOOR LH , ROCKER PANEL LH AND ALL AREAS AFFECTED BY THE ACCIDENTS.	630/paint	2520	\$ 2,520.00
3	MZ-BR-DOORME	TO TRANSFER THE DOOR MECHANISM.		180	\$ 660.00
4	MZ-BR-AXNSUP	TO REPLACE AXLE AND SUSPENSION MECHANISM.		X	\$ 660.00
5	MZ-BR-WHEALI	TO CHECK STEERING GEOMETRY & CONDUCT FULL WHEEL ALIGNMENT.	✓	NETT	\$ 560.00
6	MZ-BR-WHEBAL	TO MOUNT SPORT RIM AND CONDUCT WHEEL BALANCING.	?	NETT	\$ 120.00
7	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.		120	\$ 250.00
8	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.		180	\$ 300.00
9	MZ-BR-SUNDRI	SUNDRIES.		20	\$ 50.00

REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A **QUOTATION FEE OF \$400** WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.

TOTAL LABOUR	\$ -	\$ 7,760.00
TOTAL PARTS	\$ -	\$ 6,261.80
TOTAL	\$ -	\$ 14,021.80
LESS EXCESS	\$ -	\$ -
TOTAL AFTER EXCESS	\$ -	\$ 14,021.80
GST 7%	\$ -	\$ 981.53
GRAND TOTAL	\$ -	\$ 15,003.33

SUPPLEMENTARY LABOUR DESCRIPTION

			REVISED	PRICES
1		#N/A		

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TOTAL LABOUR	\$ -	\$ -
TOTAL PARTS	\$ -	\$ -
TOTAL	\$ -	\$ -
LESS EXCESS	\$ -	\$ -
TOTAL AFTER EXCESS	\$ -	\$ -
GST 7%	\$ -	\$ -
GRAND TOTAL	\$ -	\$ -

Tanphu 97495749 / 62563561
 WP 16/2/22 @ 11am
 6 days
 Resurvey before paint
 tanphu@lkhauto.com

TRANS EUROKARS PTE LTD

Authorised Signature

KK 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:

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	04/02/2022 17:11 (SGT)
Date of Accident	04/02/2022 15:24 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	NORHTWOOD CONDO
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME3700M
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Mr Leong Choon Luen
NRIC No	SXXXX336Z
Email Address	CHOONLUEN@GMAIL.COM
Mobile Phone No	(Phone) +65-96930831
Alternative Phone No	+65-96930831

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	6
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	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

DRIVER

Name of Driver	SOH KIM KEE
NRIC No	SXXXX303B

Date Of Birth	14/05/1956
Occupation	Indoor
Date Of Driving Pass	21/04/2012
Driving experience	9 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-92317948
Alt. Phone Number	-
Email Address	SOHKIM@GMAIL.COM
Address	No. 60 Jalan Mata Ayer
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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?	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

PLEASE SEE ATTACHED

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	SNC9364J
Vehicle Manufacturer	-
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)

-
-
China Taiping Insurance (Singapore) Pte. Ltd.
-
-
-

SKETCH PLAN

Describe Circumstances of the Accident

[illegible]

Declaration

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 Personnel	Reporting Centre
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SKETCH PLAN

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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.
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 be 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 insurers who have insured vehicle(s) involved in this accident (all insurers) 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 be 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

Sketch Plan