

ASS. REC. BY:

Steve

REF:

CS/FCI22001550/Eqf3

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No. D22000466MFCV

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:

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

Veh No:

SLR96066

Yr Regn:

31/8/17

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

Truck / Trailer or

Make:

Toyota Estima

c.c

2367

Colour

Grey

A/C: Insured / Std / NI / NA

Sp. Reading

74831

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

ACR507137995

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

215/50R18

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

15/1/17

D.O.A.

11/3/17

Survey held at

Shu fatt

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

Rear RH

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

Date / Time

Action / Instruction

MV-108K

Steve finalised LS \$3150, 4 days (Red \$3856.33, 55%)

Date/Time, File Pass to?



: Prel. Report



: Final Report

1) 29/03 Typist

Date/Time, File Return to?

2)

Report Format:

TP

Lump Sum / L.S. (\$

3150

Days Of Repair:

4

Resurvey No. of Trip:

1

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

\$ + RS. SI

Photos

Others

TOTAL



樹發汽車修理廠 SHU FATT AUTO WORKS

9-11

BLOCK 1009 BUKIT MERAH LANE 3 #01-90 SINGAPORE 159723 TEL: 6273 0119 FAX: 6270 7065
Email: shufatt@pacific.net.sg
Co. Reg. No. 09062400M GST Reg. No. 09-062400-M

Our Ref: WSK/jw/SF-quo
18th February 2022
MS First Captial- TP

SLR 9606 G TOYOTA ESTIMA

| | | S\$ | |
|-------------|--|----------|------|
| Spare Parts | 1 Rear boot. / DP | 1853.60 | |
| | 1 Rear boot logo. / MC | 72.20 | |
| | 1 Rear boot 'Estima' emblem. / MC | 75.70 | |
| | 1 Rt rear boot inner stopper. X | 29.80 | |
| | 1 Rear windscreen moulding. / MC | 110.60 | |
| | 1 Rt rear boot reflector. / DR | 784.90 | |
| | 1 Rt rear tail light. / DR | 667.00 | |
| | 1 Rear bumper. X R | 622.10 | |
| | 1 Set rear bumper clips. X | 66.00 | |
| | 2 Rear bumper side retainers. @\$67.70 X | 135.40 | |
| | 2 Rear bumper sensors. @\$310.90 X | 621.80 | |
| | 1 Rear windscreen inner seal. / MC | 70 42.00 | Snet |
| | 1 Rear windscreen sealant. / MC | 40 55.00 | Snet |
| | | 5136.10 | |
| Less 25% | | 1259.77 | |
| | | 3876.33 | |
| Labour | To knock, straighten rear support panel, rear inner panel, rear lower panel, rear side panel, rt rear fender, rt rear fender inner panel, rt rear floor board, renew rear boot, rear reflector, rear lights, rear bumper and assembly. | 1200.00 | 500 |
| | To respray damaged parts. | 1200.00 | 600 |
| | To remove, replace rear windscreen. | 180.00 | 120 |
| | To remove rear garnishes, carpets, upholstery, rear seats, side covers to facilitate repairs and assembly. | 280.00 | 50 |
| | To remove, replace, transfer rear boot inner lock, outer lock, inner motors, rubbers, mouldings and assembly. | 150.00 | 50 |
| | To reseal joints, reinsulate, anti rust panels and assembly. | 120.00 | 30 |
| | | 7006.33 | |

Bridgestone 225/50R18
ACR50- 7137995

Steve (LKK)

1/3/22, 10.00am

83228813

stencil@lkkauto.com

mm PL

L/S

17 AL sy

4 dys

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:

SS1X222G0001 / Shu Fatt Auto Works
ENTRY DATE & TIME: 16/02/2022 12:06 (SGT)
SUBMITTED BY: Julia Wong
VERSION: 1 (16/02/2022 12:06 (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 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 | 16/02/2022 12:06 (SGT) |
| Date of Accident | 15/02/2022 08:45 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | HOLLAND VILLAGE MRT CAR PARK |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLR9606G

INSURED/POLICYHOLDER

| | |
|--------------------------|----------------------|
| Is company? | No |
| Name Of Registered Owner | ERNEST TEO QUEE LIM |
| NRIC No | SXXXX805Z |
| Email Address | TEO.ERN@GMAIL.COM |
| Mobile Phone No | (Phone) +65-91525439 |
| Alternative Phone No | +65-91525439 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Toyota |
| Model | Estima |
| 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 | 2362 |

INSURANCE COMPANY

| | |
|---------------------------|--------------------------------------|
| Name of Insurance Company | MSIG Insurance (Singapore) Pte. Ltd. |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | A300466251QMX |
| Cover Note Number | - |

DRIVER

| | |
|----------------|------------------------|
| Name of Driver | KRISTIN ZHANG WAN JUEN |
| NRIC No | SXXXX339H |

Date Of Birth 21/12/1980
 Occupation Indoor
 Date Of Driving Pass 04/05/1999
 Driving experience 22 YEARS AND 9 MONTHS
 Gender Female
 Mobile Number (Phone) +65-91525439
 Alt. Phone Number
 Email Address WANJUN.ZHANG@GMAIL.COM
 Address 122 ENG NEO AVENUE
 Address complement
 Postcode 289574
 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

Name
 Cont
 Add
 Ad
 P

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface
 Hit and run / Vandalism / Damaged whilst parked
 Clear
 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) 2
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

PASSENGER 1

Name
 Gender MS TEO
 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

PLEASE REFER TO ACCIDENT REPORT.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YN3263T
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category Commercial vehicle

Accident report SS1X222G0001

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)

MUHAMMAD MUHAIMIN BIN SAMURI
(Phone) +65-96332634

-
-
-
-
-
-
-
-

IMPORTANT NOTICE

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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 wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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")

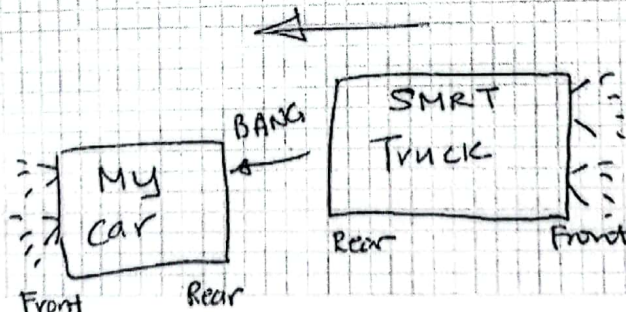
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

Policyholder's Signature / Date &
Time 16/2/2022
Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date
& Time 16/2/2022.

Witnessed by Reporting Centre
Personnel



DESCRIPTIVE CIRCUMSTANCES OF THE ACCIDENT

15
16 FEB 2022, TUESDAY
8:45 AM

was at Holland Village MRT car park waiting for car park lot. My car was stationary with hazard lights on.

SMRT truck began reversing towards my car. I tried to alert him by beeping but he continued reversing towards my car till it hit the back of my car.

SMRT driver details
MUHAMMAD MUHAMMIN BIN SAMURI
LICENSE PLATE - YN 3263 T
MOBILE - +65 9633 2634

Declaration

We declare the foregoing particulars are true in every respect



Policyholder's Signature / Date & Time
16/2/2022



Driver's Signature (if driver is not the policyholder) / Date & Time
16/2/2022..



Witnessed by Reporting Centre Personnel