ASS. REC. BY: Kenneth

REF: GA1/ 220018131KV

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP AWS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition) 1pm

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: 04 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: SMU 2099A Yr Regn: 11, 16

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

Make: Honda Vezel c.c 1498

Colour m Blue A/C: Insured / Std / NI / NA

Sp.Reading 96271 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: RU1 · 1206660

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inoper / Jammed / Leaked / Burnt or _____

Brake: Inoper / Jammed / Leaked / Burnt or _____

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

Tyre Size: F: 215/60R16

R: _____

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

Front		Rear	
R/Bal.	9 mm	R/Bal.	9 mm
L/Bal.	9 mm	L/Bal.	9 mm
D.O.A.	21/2/22	D.O.I.	1/3/2022

Survey held at _____

Des. 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
/	

Date/Time, File Pass to?

1) _____

☐ : Prell. Report

☐ : Final Report

Date/Time, File Return to?

2) _____

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 _____

AH LIM MOTOR COMPANY

176 Sin Ming Drive #05-12 Sin Ming Autocare Singapore 575721
TEL: 6456 3637 FAX: 6456 3686 Email: admin@almsm.com.sg
GST:M9-0009639-E RCB NO:06470300B

SURVEYOR COPY

M/S : ANG AI CHAN
275 TOH GUAN ROAD
#05-147
SINGAPORE (600275)

Estimate No: MCS1900586
Date: 22 Feb 2022
Policy No: P10658583R00
Veh Reg No: SMU2099M
Make/Model: HONDA VEZEL

ATTN:
Your Ref No: SMU2099M
Claim Type: Third Party
Accident Date: 21/02/2022
TP Veh Reg No: GBL5005S

Not Authorised
L/Sup 8
Remove After Paint
4days

Estimate Repair Cost to Vehicle No :SMU2099M

	Description	Quantity	List Price S$		Amount S$
	SPARE PARTS				
1	TAILGATE	1 PC	997.30	✓	
2	TAILGATE CENTRE GARNISH	1 PC	220.70	?	
3	VEZEL BADGE	1 PC	43.00	✓	
4	TAILGATE RUBBER SEAL	1 PC	96.80	?	
5	TAILGATE INNER LOCK	1 PC	98.50	?	
6	TAIL END PANEL	1 PC	411.80	✗	
7	TAIL END PANEL INNER TRIM BOARD	1 PC	92.30	?	
8	TAILGATE LAMP LH/RH	2 PC	838.20	?	
9	REAR BUMPER	1 PC	553.10	✓	
10	REAR BUMPER CLIPS	10 PC	38.00	✓	
11	REAR WINDSCREEN MOULDING 1 SET	1 PC	118.30	✓	
12	REAR NUMPER PLATE LAMP LH/RH	2 PC	77.00	✗	
			3,585.00		
		Less 20%	717.00		2,868.00
	Special Nett				
13	NO PLATE	1 PC	35.00	✗	
14	WINDSCREEN SEALANT	2 PC	30.00	✓	
15	REVERSE SENSOR 1 SET	1 PC	220.00	✗	
			285.00		285.00
	LABOUR				
16	TO CHECK WIRING AND REINSTALL REVERSE SENSOR	1 PC	20.00	✓	
17	TO DISMANTLE AND INSTALL REAR WINDSCREEN	1 PC	120.00	✓	
18	TO DISMANTLE AND REPLACE TAILGATE, TRANSFER TAILGATE INNER PARTS, WIRING AND TRIM BOARD	1 PC	80.00	60/	
19	TO DISMANTLE AND INSTALL REAR CUSHION SEAT, SEATBELT AND INNER BOX	1 PC	60.00	?	
20	TO DISMANTLE AND REPLACE DAMAGE PARTS, TO CUT, KNOCK AND WELD TAIL END PANEL, KNOCK AND REPAIR REAR AFFECTED AREA AND REFIT LISTED PARTS BACK SAME	1 PC	850.00	400/	
21	TO SPRAY TAILGATE, REAR BUMPER SIDE PAD RH, REAR BUMPER SIDE PAD LH, TAIL END PANEL, TAILGATE CENTRE GARNISH AND APPLY SEALANT	1 PC	850.00	420/	
			1,980.00		1,980.00

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:

AH LIM MOTOR COMPANY
(SIN MING BRANCH)
176, Sin Ming Drive, #05-12
Sin Ming Autocare, Singapore 575721
Tel: 6456 3637 Fax: 6456 3686

ACCC
10 Ang Mo
#03-11 AM
Tel: 6481 9

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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	21/02/2022 19:09 (SGT)
Date of Accident	21/02/2022 12:47 (SGT)
Exact Location of Accident	Thomson Rd, Singapore
Additional Location Information	THOMSON ROAD TRAFFIC LIGHT BEFORE TURNING INTO BALESTIER ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMU2099M

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ANG AI CHAN
NRIC No	SXXXX931F
Email Address	FEVIENANG@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-94557814
Alternative Phone No	(Home) +65-94557814

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1496

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10658583R00
Cover Note Number	22/11/2021 to 21/11/2022

DRIVER

Name of Driver	ANG AI CHAN

SKETCH PLAN

Budget Direct
Vehicle smu 2099 m
21/02/2022

SKETCH PLAN

IMPORTANT NOTICE

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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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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

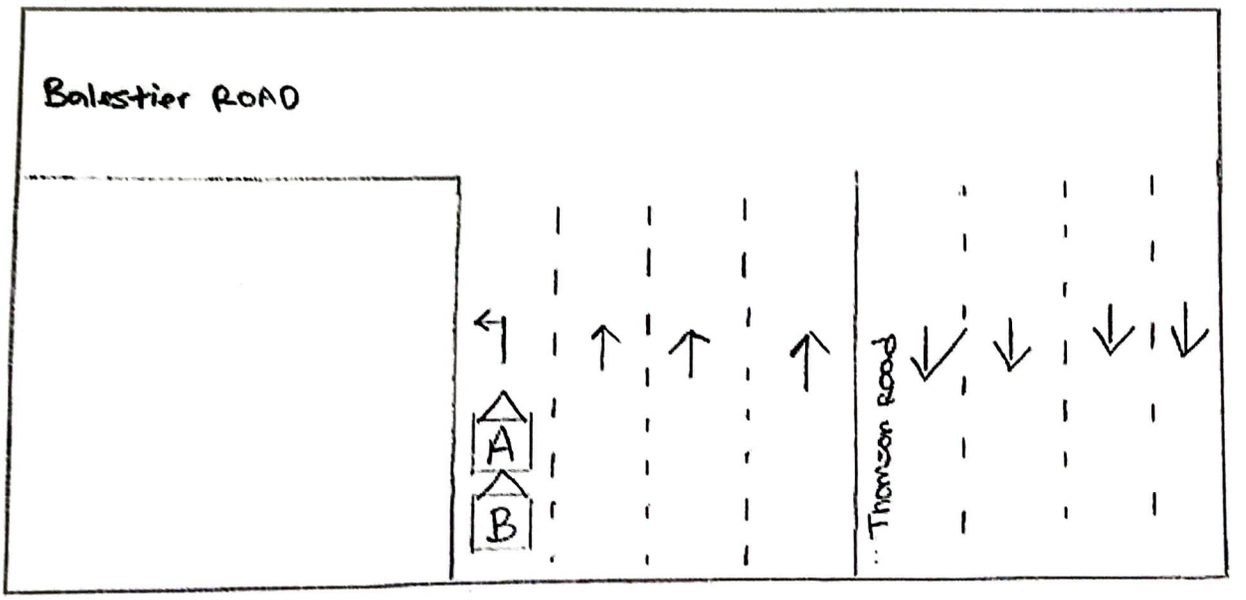
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(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.

Sketch Plan



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

21/02/2022