

ASS. REC. BY: 7 am

REF:

CS/INL22002480/Rmy³

938A

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SMW 80952at Workshop m/s CONVERGENCE AUTOMOTIVE
of 39, WOODBURY CLOSE #01-24 @ MEDAInsured: INC

Policy No. _____

Claims No. MT/1165080-002

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: 57K

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMW 80952 Yr Regn: 2016 JUNType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: VolksWagen Golf 1.4 TSI AT c.c 1395Colour: BLUE

A/C: Insured / Std / NI / NA

Sp. Reading: 95045

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WVW222AY2GW155087Gen. 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: 225/45R18R: 225/45R18BS / 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. 11/03/22D.O.I. 11/03/22Survey held at CONVERGENCE AUTOMOTIVE

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

O/S REAR

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

Date / Time Action / Instruction

REPAIR LIMIT - 29K

Rasul finalised LS \$2400, 4 days. (Red \$8584.76, 78%)

Date/Time, File Pass to?

☐

: Preli. Report

1) 14/04 Typist

☐

: Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 4Resurvey No. of Trip: 2Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. \$ _____

Photos _____

Others _____

TOTAL

Rep. Format: TPLump Sum / Net. P: 2400

CONVERGENCE AUTOMOTIVE

39 Woodlands Close, Mega @ Woodlands

#01-24 Singapore 737856

Tel: (65) 6993 2080 / (65) 9888 8119

✉ operations@convergenceauto.com.sg

**CONVERGENCE
AUTOMOTIVE****ESTIMATE**

DATE:

15-Mar-22

DOA:

11-Mar-22

VEHICLE NO:

SMW 8095 Z

MAKE & MODEL:

VOLKSWAGEN GOLF

Rasul
Hp 90010068
4 days
43
17/03/22 P1545
Resus after repair

DESCRIPTION	QUANTITY	AMOUNT	TOTAL
LIST ITEMS			
Tailgate ✕	1	\$2,088.90	\$2,088.90
Tailgate Logo ✕	1	\$80.00	\$80.00
Tailgate Weatherstrip ✕	1	\$225.00	\$225.00
Tailgate Inner Lock ✕	1	\$192.00	\$192.00
Tailgate Windscreen Moulding ✕	1	\$188.00	\$188.00
Rear Bumper ✓	1	\$1,436.90	\$1,436.90
Rear Bumper Side Retainer ✕	2	\$120.60	\$241.20
Rear Bumper Centre Retainer ✕	1	\$164.30	\$164.30
Rear Bumper Reflector (RH) ✓	1	\$98.00	\$98.00
Rear Number Plate Lamp ✕	1	\$133.00	\$133.00
Rear End Panel ✕	1	\$811.00	\$811.00
Rear End Panel Top Garnish ✕	1	\$225.50	\$225.50
Taillamp (RH) ✕	1	\$756.00	\$756.00
Rear Diffuser ✕	1	\$825.00	\$825.00
Rear Fender (RH) repair	1	\$656.00	\$656.00
		Total	\$8,120.80
		Less 5%	\$406.04
			\$7,714.76

SPECIAL NETT ITEMS

Sundries ✕	1	\$60.00	\$60.00 ✕
Rear Bumper Clips ✓	1	\$100.00	\$100.00 30
Rear End Panel Top Garnish Clips ✕	1	\$50.00	\$50.00 ✕
Rear End Panel Sealant ✕	1	\$80.00	\$80.00 ✕
Rear Fender Inner Shield Clips ✕	1	\$50.00	\$50.00 ✕
Reverse Sensor ?	1	\$150.00	\$150.00 ?
			\$490.00
	Parts Total		\$8,204.76

LABOUR CHARGES

Remove & Refit Reverse Sensor & Test	\$100.00 60
Remove & Refit Tailgate Windscreen ✕	\$180.00 ✕
Remove & Refit Tailgate Component ✕	\$100.00 ✕
Check wiring system after disconnect and connect ✕	\$100.00 ✕
To apply undercoating & rust roofing ✕	\$100.00 ✕ ✕
Panel Beating	\$1,200.00 400
Spray Painting	\$1,000.00 400
	\$2,780.00
Labour Total	\$2,780.00

Total Parts and Labour Cost of Repair

\$10,984.76

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:

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 15/03/2022 13:34 (SGT)
Date of Accident 11/03/2022 18:24 (SGT)
Exact Location of Accident Near Ang Mo Kio Ave 1, Singapore
Additional Location Information ANG MO KIO AVE 1
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW8095Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner AFIEQ ALAUDDIEN BIN HASAN ABDULLAH
NRIC No SXXXX935A
Email Address CHAVEZ_AFIEQ@HOTMAIL.COM
Mobile Phone No (Phone) +65-91068024
Alternative Phone No (Home) +65-91068024

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model Golf
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 1395

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MT/00989650
Cover Note Number -

DRIVER

Name of Driver AFIEQ ALAUDDIEN BIN HASAN ABDULLAH
NRIC No SXXXX935A

Date Of Birth
 Occupation
 Date Of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

13/10/1986
 Indoor
 03/08/2009
 12 YEARS AND 7 MONTHS
 Male
 (Phone) +65-91068024
 (Home) +65-91068024
 CHAVEZ_AFIEQ@HOTMAIL.COM
 41 YISHUN STREET 51 #01-41

767995

Yes

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
 Weather Conditions
 Road Surface

Collision - Head to Rear
 DRIZZLING
 Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
 Number of vehicles involved in the accident
 Was anybody injured in the Accident?
 Was any injured conveyed to hospital by ambulance?
 Was any other vehicle or property damaged?
 Number of Passengers (Including Driver)
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
 2
 No
 -
 Yes
 2
 No

PASSENGER 1

Name
 Gender

TONG XIN YIN CHERYL
 Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?
 Was notice of intended Prosecution given?
 If yes, against whom?

No
 No
 -

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?
 Was there any video captured by Car Camera?
 Was there any audio recorded?

Yes
 No
 No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
 Vehicle Manufacturer
 Vehicle Model
 Vehicle Variant
 Vehicle Colour
 Vehicle Category

FBE4189M
 -
 -
 -
 -
 Motorcycle

REC

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)		-

on.

SKETCH PLAN

IMPORTANT NOTICE

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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/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


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

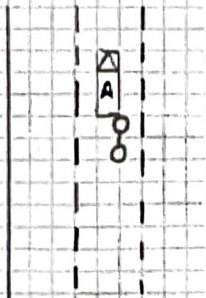

Witnessed by Reporting Centre Personnel

Sketch Plan

DATE MO K.O AVE 1

A-SMN 8095Z

B-FBE 4189M





Describe Circumstances of the Accident


On the stated time and date, I was driving my vehicle A bearing
SMV 8095Z on Jing mo kio Ave 1. As the vehicle in front of
me slowed down, I followed by slowing down my vehicle. Suddenly,
I felt an impact from my front rear, I got off my vehicle and
realized that motorcycle bearing FBE 4189M had collided on to
my vehicle.

Declaration

We declare the foregoing particulars are true in every respect.


15/3/2022
Policyholder's Signature / Date &
Time


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


Witnessed by Reporting Centre
Personnel

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 935A

Vehicle Details

Vehicle No.: SMW8095Z
Vehicle to be Exported: Yes
Intended Deregistration Date: 15 Mar 2022
Vehicle Make: VOLKSWAGEN
Vehicle Model: GOLF 1.4 TSI AT 5G13HZ
Primary Colour: Blue
Manufacturing Year: 2015
Engine No.: CZC504307
Chassis No.: WVVZZZAUZGW155087
Maximum Power Output: 92.0 kW (123 bhp)
Open Market Value: \$20,436.00
Original Registration Date: 23 Jun 2016
First Registration Date: 23 Jun 2016
Transfer Count: 1
Actual ARF Paid: \$10,611.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 22 Jun 2026
PARF Rebate Amount: \$7,427.00

Intended COE Rebate Details

COE Expiry Date: 22 Jun 2026
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$47,889.00
COE Rebate Amount: \$20,445.00
Total Rebate Amount: \$27,872.00

The information contained herein is correct as at 15 Mar 2022

OK

Volkswagen Golf 1.4A TSI

Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)**Price****\$60,999****Depreciation** ⓘ

\$12,350 /yr

[View models with similar depre](#)**Reg Date**

20-Sep-2016

(4yrs 6mths 1day COE left)

Mileage

90,454 km (16.5k /yr)

Manufactured ⓘ

2015

Road Tax ⓘ

\$624 /yr

Transmission

Auto

Dereg Value ⓘ

\$30,626 as of today (change)

OMV ⓘ

\$20,407

COE ⓘ

\$51,506

ARF ⓘ

\$10,570

Engine Cap

1,395 cc

Power

92.0 kW (123 bhp)

Curb Weight ⓘ

1,249 kg

No. of Owners ⓘ

3

Type of Vehicle

Hatchback