

ASS. REC. BY:

REF:

H4V

Kenneth

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.

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 Report:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

Res.: Yes or No

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

Yr Regn:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / (PR) SUMI /

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Rear

R/Bal.

L/Bal.

D.O.I.

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

18/3

All parts have to order from overseas about 4-8 weeks.

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS. \$

Fees

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Date: 18.03.2022

Vehicle No: ~~SNC9432X~~

Model: MERCEDES BENZ AMG GT C ROADSTER

Chassis: WMX1904802A013563

Reg. Year: 2017

Third Party Insurer: HL ASSURANCE

Third Party Veh No: SLE5309J

Date of Accident: 16.03.2022

Estimator: Victor

Surveyor: Kenneth

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	REAR KNUCKLE RH	1		<i>B</i> \$2,138.00
2	REAR WHEEL BEARING RH	1		<i>m</i> \$562.50
3	MOUNTING CONSOLE RH	1		<i>B</i> \$405.00
4	REAR UPPER ARM RH	1		\$1,080.00
5	REAR LOWER ARM RH	1		<i>B</i> \$1,935.00
6	REAR CONTROL TRAIL ARM RH	1		<i>B</i> \$482.00
7	REAR STEERING GEAR RH	1		\$8,325.00
8	MOUNTING RH	1		<i>CM</i> \$675.00
9	REAR DRIVE SHAFT RH	1		\$4,050.00
10	REAR ABSORBER RH	1		\$5,412.00
11	REAR SPORT RIM RH	1		<i>m</i> \$4,162.00
12	REAR BUMPER	1		REPAIR
SUB TOTAL				\$29,226.50
LESS 20%				-\$5,845.30
PARTS TOTAL				\$23,381.20

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	FRONT FENDER INNER SHIELD CLIPS RH	1		<i>nn</i> \$40.00
2	FRONT DOOR INNER TRIM BOARD CLIPS RH	1		<i>nn</i> \$50.00
3	REAR DOOR INNER TRIM BOARD CLIPS RH	1		<i>nn</i> \$50.00
4	REAR WINDSCREEN SEALANT	1		<i>nn</i> \$80.00
5	REAR BUMPER CLIPS	1		<i>nn</i> \$50.00
6	REAR FENDER INNER SHIELD CLIPS RH	1		<i>nn</i> \$40.00
S/N TOTAL				\$310.00

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST ACCIDENT AREA.

nn \$400.00

LABOUR CHARGES TO SUPPLY PAINT & FURNISHING MATERIALS AT

\$400.00 *2801*

LABOUR CHARGES TO REMOVE & REPLACE REAR UNDERCARRIAGE

\$450.00 *2501*

Head office

6 Kung Chong Road Singapore 159143

Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

Branch

9A Serangoon North Ave 5 Singapore 554500

Tel: (+65) 6484 9919 | Fax: (+65) 6481 1993

Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047

Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011



Date: 18.03.2022
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Chassis: WMX1904802A013563
Reg.Year: 2017

Third Party Insurer: HL ASSURANCE
Third Party Veh No: SLE5309J
Date of Accident: 16.03.2022
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Surveyor: Kenneth

TO WHEEL ALIGNMENT & BALANCING.

\$120.00 *801*

TO TUFF KOTE & UNDERSEAL MATERIALS.

~ ~ \$150.00 *X*

TO CHECK WIRING & ELECTRICAL SYSTEM & ETC.

~ ~ \$200.00 *X*

LABOUR TOTAL \$1,720.00

TOTAL \$25,411.20

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:

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 16/03/2022 17:14 (SGT)
Date of Accident 16/03/2022 13:00 (SGT)
Exact Location of Accident 11 Leedon Heights, Singapore 267955
Additional Location Information BASEMENT CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLL20L
INSURED/POLICYHOLDER
Is company? No
Name Of Registered Owner TOH WEE KEONG
NRIC No SXXXX522Z
Email Address TREVOR@AGSHIPPING.SG
Mobile Phone No (Phone) +65-96662766
Alternative Phone No +65-96662766

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Amg
Variant AMG GT C ROADSTER SMT
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 3982

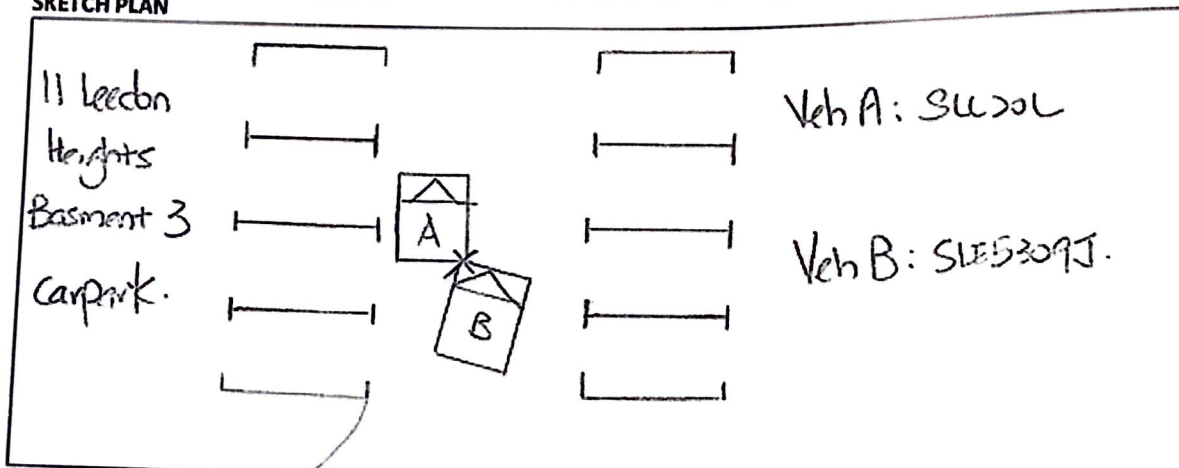
INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPPHQ21-008806
Cover Note Number 29/11/2021 - 28/11/2022

DRIVER

Name of Driver TOH WEE KEONG
NRIC No SXXXX522Z

Date of accident: 16-03-2022 Time: 1300 Location: 11 Leedon Height B3 Carpark.
 My Vehicle A: SLE530L Vehicle B: SLE5309J Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/3/2022 @ 1300hrs, I was stationary @ 11 Leedon Heights basement 3 carpark. Suddenly I felt an impact from the rear. I alighted & realised that Veh B: SLE5309J front left portion has collided into my Veh A: SLE530L rear right portion. The driver apologise & mentioned that she turn behind to look after kids thus did not noticed my vehicle. She gave me her identification card which I took a photo of it. & her contact number. However I did not managed to save her number.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop: Optima Werkz Pte Ltd

Email address: Joseph@ow.sg

& myself:

Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 16/3/22 1640hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre/Personnel's Signature

Name:

NRIC/FIN:

COMPLETED 16 MAR 2022

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	522Z
Vehicle Details	
Vehicle No.:	SLL20L
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Mar 2022
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	AMG GT C ROADSTER SMT
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	17898060013638
Chassis No.:	WMX1904802A013563
Maximum Power Output:	410.0 kW (549 bhp)
Open Market Value:	\$124,156.00
Original Registration Date:	28 Apr 2017
First Registration Date:	16 May 2019
Transfer Count:	1
Actual ARF Paid:	\$195,481.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Apr 2027
PARF Rebate Amount:	\$146,610.00
Intended COE Rebate Details	
COE Expiry Date:	15 May 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$33,989.00
COE Rebate Amount:	\$24,335.00
Total Rebate Amount:	\$170,945.00

The information contained herein is correct as at 17 Mar 2022

OK